



An evaluation of the Sunderland Health Champions programme

Findings



QUALITY, RELEVANCE & SUSTAINABILITY
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Strategic Aim of Health Champions Programme

To improve the health of all disadvantaged communities in Sunderland by developing Health Champions:

To support local people in positively addressing the health determinants and accessing appropriate services

This is based on a social movement to achieve an “industrial scale” approach to addressing health inequalities and ultimately shifting culture.

Aims to do this by:

Utilising and expanding Health Champions; circles of influence (self, family and friends, clients and wider community) in relation to health improvement through increased knowledge around pertinent health issues and signposting to appropriate services for support

Aims of the Evaluation

The overarching aim is to determine how well the programme meets existing objectives and to quantify its impact upon teams, services, organisations and communities

Specific Aims

Measure the impact this course has had on participants, and communities in Sunderland with respect to the two core objectives of:

- § ***Raising health awareness and promoting lifestyle change amongst training participants***
- § ***Encouraging staff, volunteers and community organisations to identify and act upon opportunities to promote health with service users with whom they have routine contact***

Methods

Qualitative Methods

- 22 Semi - structured interviews with key stakeholders from key partner organisations in statutory/voluntary/community sectors
- 4 Focus groups for Champions in statutory sector and voluntary and community sectors

Quantitative Methods

- Small scale questionnaire based survey sent to 144 (out of 155) Champions who consented to take part in evaluation
- Monitoring data gathered through tPCT database
- Questionnaire completed online using SNAP 10 and within focus groups

| Participant groups | Number of participants/ respondents | Sector | Methods of data collection |
|---|-------------------------------------|--|---|
| Sunderland tPCT | 6 | Statutory | 5 Face to face interviews, 1 telephone |
| Area Committee Members/ Task and Finish Group | 4 | Statutory | 3 face to face interviews, 1 telephone |
| Training providers | 4 | Statutory | 3 face to face interviews, 1 telephone |
| Managers of Health Champions | 6 | 2 statutory, 4 voluntary and community | 6 face to face interviews |
| Wider stakeholders | 2 | Statutory | 2 face to face interviews |
| Health Champions | 16 | Statutory | 2 Focus Groups |
| Health Champions | 17 | Voluntary and Community | 2 Focus Groups |
| Health Champions | 52 online 6 paper | All | Survey |

Qualitative findings from Interviews and Focus groups

Summary of qualitative analysis



The programme had a positive impact on the health and well-being of training recipients

Champions reported increased awareness of the effects of own lifestyle choices and increased self confidence and self esteem

Champions worked effectively within their “circles of influence”

Could provide information on health issues and signpost people effectively

Champions recognized the boundaries of their role

Understood where their expertise ended and professional guidance was needed

The ‘added value’ of health champions working in the community was discussed

Listening, having empathy and being non-judgmental were mentioned as successful attributes

“I think for me it (the training) linked up a lot of worlds I previously found separate, so if somebody came to me for financial help, we also talked about maybe perhaps they wanted to stop smoking or drinking, which linked into them spending too much, so it was linking to a lot of worlds, which for me and perhaps they had seen as quite separate so they all came together” (Health Champion)

*“The lifestyle I had pre this course is gone, I’ve got a different lifestyle”
(Health Champion)*

“The resilience is something you use yourself, oh I use it myself to manage my life and all the things that are happening with family and work” (Health Champion)

“...we’re all doing our jobs and then now we’re also Health Champions. It doesn’t mean that we’re doing an extra job, it just means that we’ve got the knowledge and the skills to signpost people to services...I think that’s a real positive outcome of the Health Champions programme, is that now people have up-to-date information on key health issues” (Health Champion)

My sister’s stopping smoking on Wednesday. I’ve been doing my brief intervention and I didn’t have that before, you know....I think I already did it informally because I’m an ex smoker myself. But I was just over the moon when she texted me at the weekend and said ‘Well you’ll be pleased to know that you’ve worked’ and I went ‘what?’ and she said ‘I’m stopping smoking on Wednesday’” (Health champion)

Summary of qualitative analysis



The training was positively received and the majority had gained a great deal from the modules

The emotional Health and Resilience training and the Financial Capability training especially praised

Support mechanisms after the training had been completed were needed

Including opportunities for Health Champions to meet and share good practice

Potential for programme to be expanded across other parts of the city

Champions and most key stakeholders felt that a 'critical mass' of people had been trained – but as yet it was not a 'social movement'

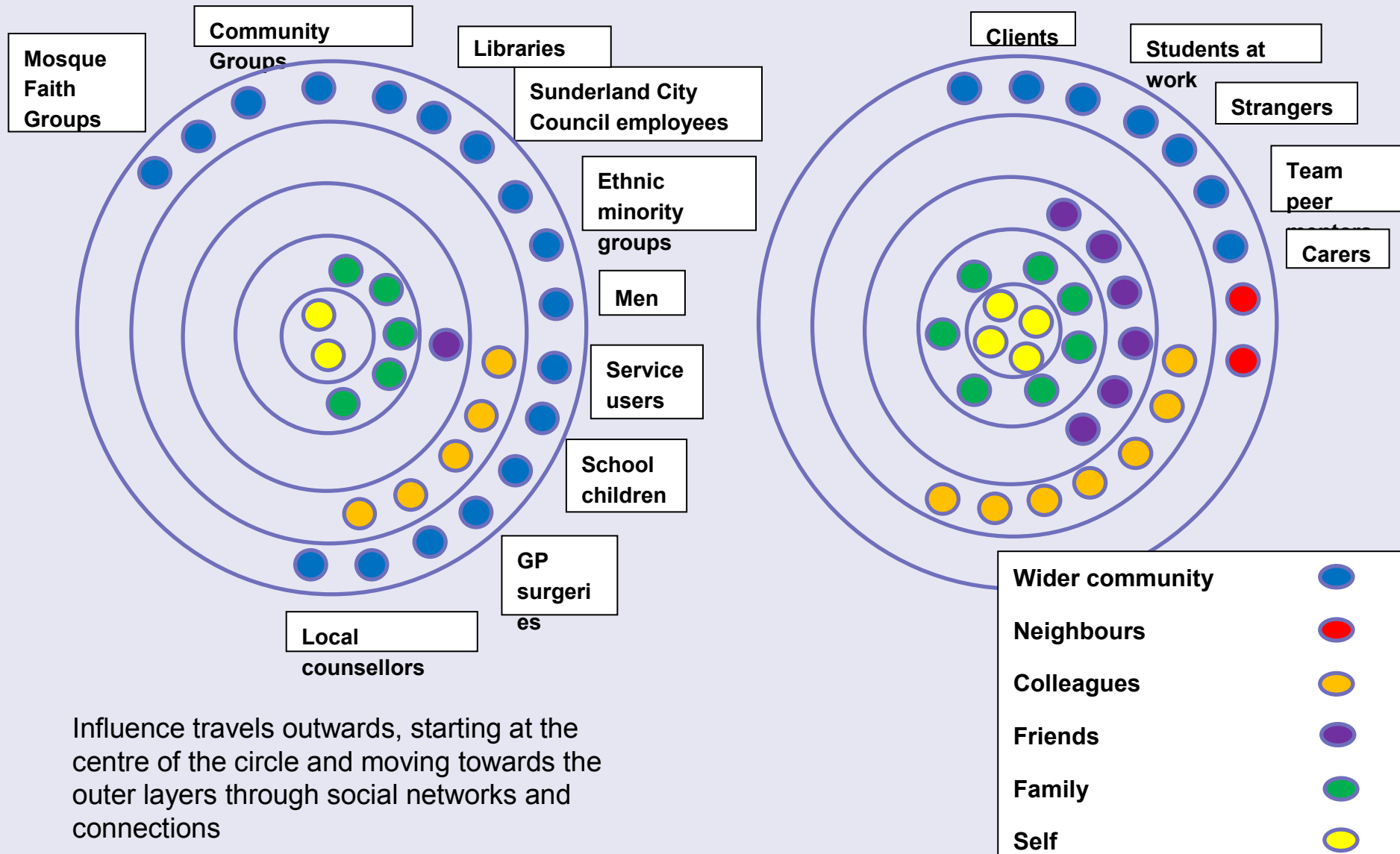
“Some of the best training I’ve ever had”
(Health Champion)

“I do think it does improve their confidence, yeah. Especially with the ones that work within health, like volunteers that work in health, it improves their confidence....I think in terms of the volunteers, I think they already have the skill. It was the knowledge that they needed and that’s what it’s (the training) has done”
(key stakeholder)

“It’s like the difference between, you know say you’re carrying your tool box round, instead of just having a screwdriver, you’ve got the spanner, you’ve got the drill, you’ve got the screws and you can pull them out as needed”
(Health Champion)

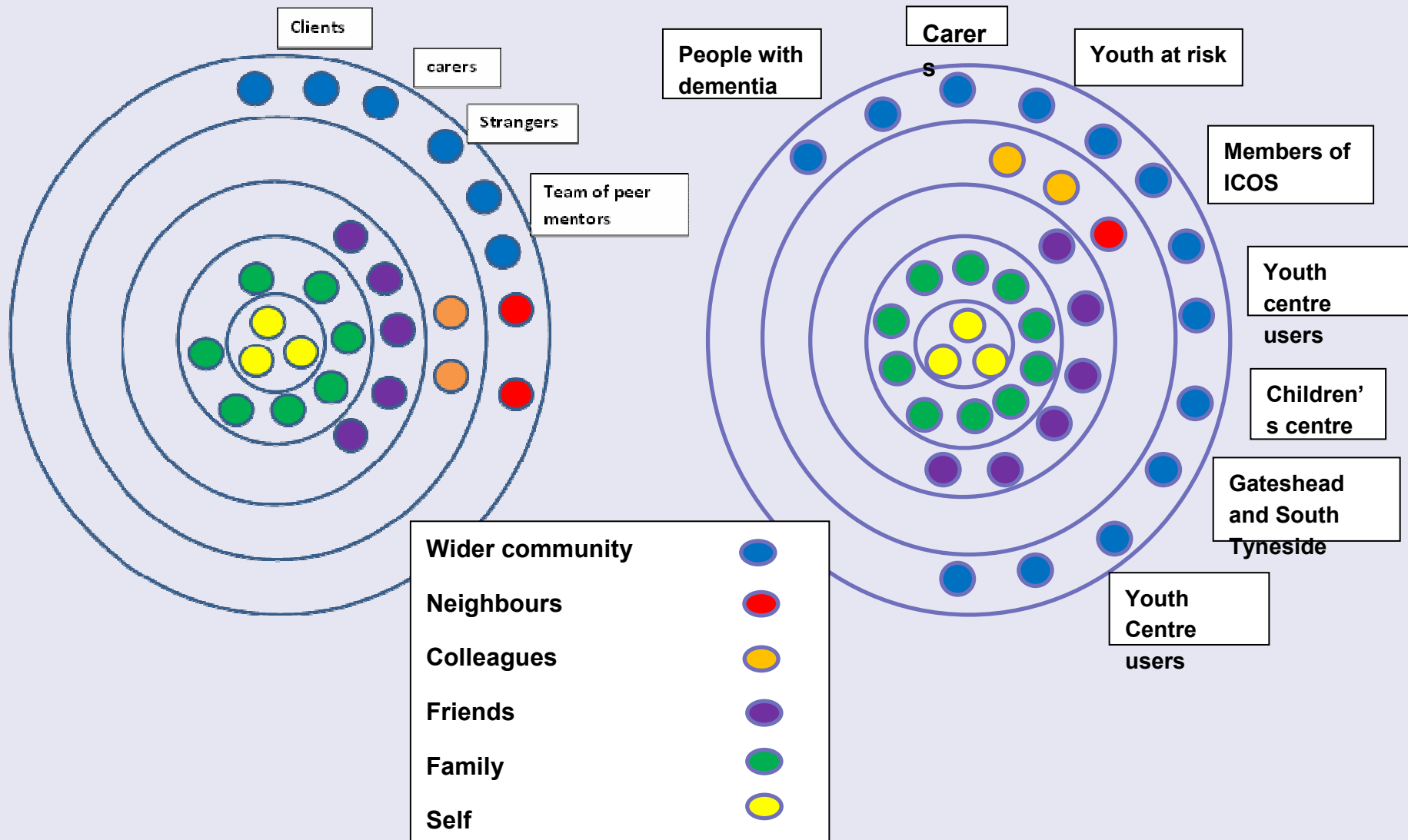
“It made us feel like we were part of this purpose, a new drive of healthy cities; it made us feel a big part of something”
(Health Champion - commenting on celebration event)

'Circles of influence' maps – Statutory Sector Champions



Influence travels outwards, starting at the centre of the circle and moving towards the outer layers through social networks and connections

'Circles of influence' maps- voluntary/community Champions



Quantitative Findings from Survey and Monitoring Data

Summary of quantitative analysis



Personal impact - Health awareness

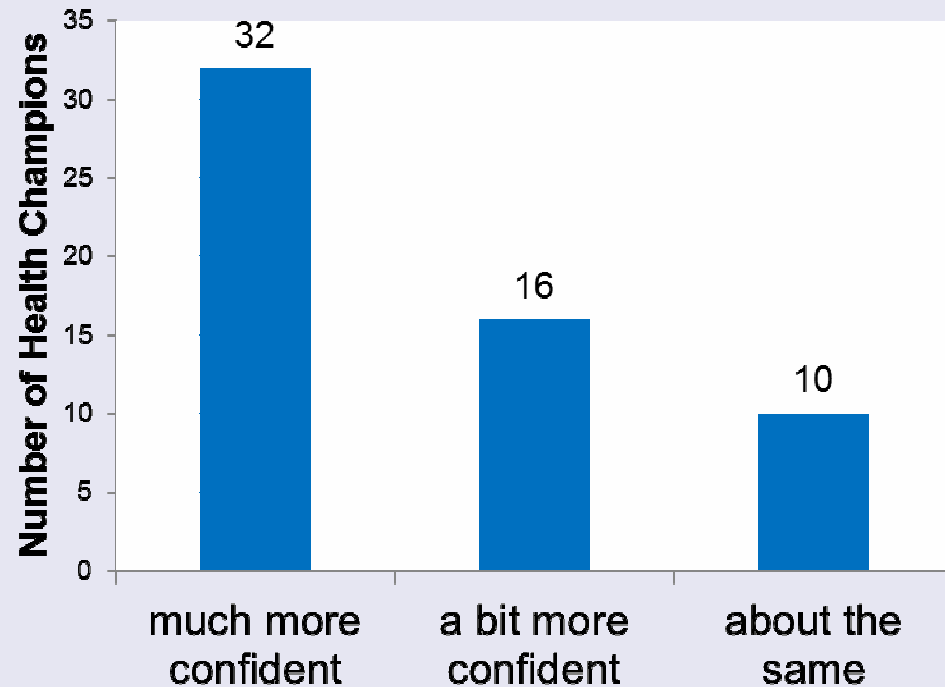
- Increased health awareness through participation on training courses

Health Champions were asked if they had used what they had learned in the training to try to improve their own health

- 48 (83%) replied “yes”
- 10 (17%) replied “no”

Champions were asked how confident they felt in making changes to improve their own health

- The majority of respondents reported they felt much more confident (32 or 55%)



Summary of quantitative analysis



Personal impact - Confidence

- § 83% of survey respondents felt more confident to make changes to improve their own health, 55% feeling much more confident

Champions were asked have they used what they learned in the training to try to improve the health of people seen routinely at work

The majority of respondents said that they had

- 40 (69%) replied 'Yes'
- 18 (31%) replied 'No'

Champions were asked how confident they feel in applying what you have learned to improve the health of people they have routine contact with at work/as a volunteer – colleagues/clients

The majority felt confident

- 22 (38%) felt 'confident' with colleagues
- 27 (47%) felt 'confident' with clients
- 20 (35%) felt 'very confident' with colleagues
- 20 (35%) felt 'very confident' with clients

Summary of quantitative analysis



Impact on others- applying what they learned

- Over two thirds had used the training to try to improve the health of people they saw at work, 82% felt 'confident' or 'very confident' to apply what they had learned to improve the health of clients
- 70% found it easy or very easy to create opportunities to do this

Signposting

- Respondents reported that they were actively signposting to other services, e.g. in the last two weeks, 47% signposted colleagues and 67% had signposted clients

Summary of quantitative analysis



Impact on others – friends/family and wider community

- The majority of respondents reported having used the training to improve the health of friends and family and in the wider community

Impact on others- raising health awareness

- 55% of respondents had raised health awareness with colleagues and 74% with clients

Impact on others – Brief Interventions

- Champions were using both the smoking and alcohol brief interventions.
- For example in the last 2 weeks, 49% of respondents had used the smoking brief intervention with friends, 23% had used it with family and 21% had used it in the wider community

Relevance of training

- Most respondents found the different modules of the training course very relevant to their work as Champions
- 86% finding the Emotional Health and Resilience very relevant, 62% for the Financial Capability course

Disadvantaged Groups

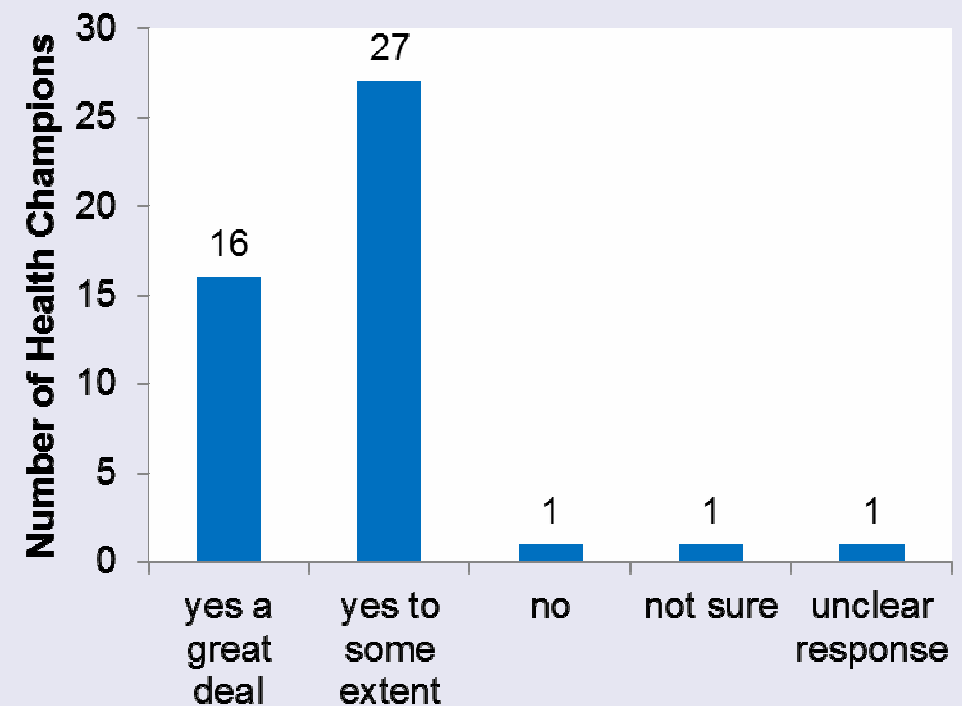
Health Champions were asked if they were in contact with people who are disadvantaged in health or social terms

The majority reported they had contact with disadvantaged individuals

- § 46 (79%) replied 'yes'
- § 6 (10.5%) replied 'no'
- § 6 people were not sure

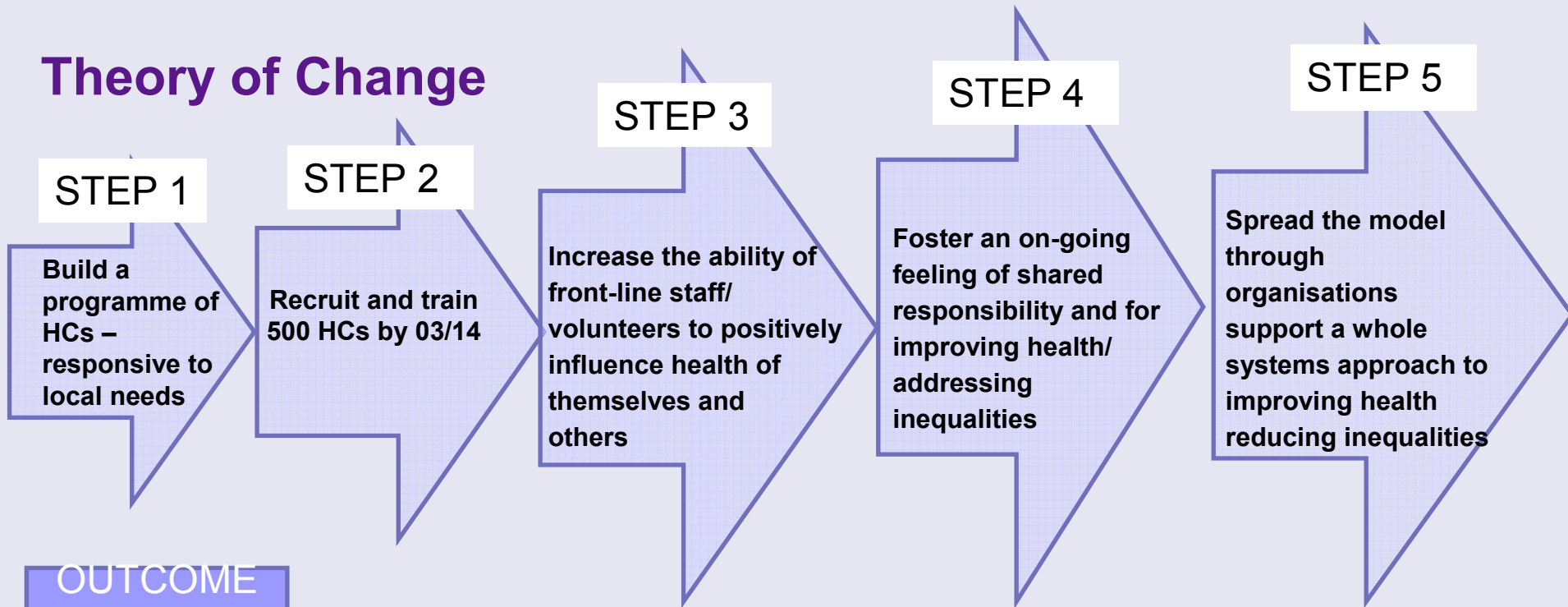
Of the 46 people who were in contact:

- § The majority 43 (93%) felt that the training made it easier to help them to improve their health
- § 16 (35%) said it helped a great deal



Training helped work with disadvantaged groups to improve their health

Theory of Change



OUTCOMES

Well prepared for role

Training positively received

To date - 603 taking part – Quarter attended all 5 modules

Wide range of organisations involved, including vol/com and disadvantaged groups

Good reach achieved in short time frame

Feel more confident in applying what they have learned

More aware of wider determinants of health and how issues are interconnected

Increased self-confidence

Motivated to make modifications to own lifestyle

Used learning to improve the health of their family/friends

Provided information and gave informal support
Signposted to services

Made a difference to wider community through contacts engaging with daily

“peer” educators - sharing experiences had increased success

Raising health awareness
Promoting lifestyle change

Believed the concept worked- committed to its continuation

Potential for it to be ‘scaled up’

Needs to reach into other communities and engage with more organisations

Conclusions and Issues for Consideration



Conclusions

Building capacity

- § There is good evidence that the programme is building individual and organisational capacity to address health issues within local communities and workplaces

Relevance of training

- § Health Champions see the training as relevant to their lives and are motivated to take health messages out to others

Impacts

- § Increased confidence and health awareness, in some cases leading to positive behaviour changes
- § Able to apply the training to their work and in their personal lives
- § They are utilising their learning to try to influence friends and family in informal ways and to signpost colleagues and clients to other services.



Conclusions

The programme has an ambitious aim of creating a social movement and expanding Champions 'circles of influence' – family and friends, clients, wider community - in relation to health improvement

Champions are found to be utilising the training to influence friends and family in informal ways and to signpost colleagues and clients to other services

It is recognised that building a social movement will take time and health impact will depend on:

- 1. Having a critical mass of Health Champions***
- 2. Having access to a range of appropriate services to support individuals and families***

Issues for consideration

The evaluation has highlighted some issues which can be considered in future planning:

Recruitment strategies

- § Needs to be a “trade off “between recruiting large numbers and focusing resources on developing those individuals who are interested in taking on the role
- § Gauge interest/ motivation for undertaking training
 - e.g. Option of offering a taster course before individuals committed to 5 modules

Understanding drop off

- § Why people DNA could help programme make decisions about recruitment and retention
 - monitoring whether people stay involved in the role after initial training is important

Issues for consideration

On-going Support

- Achieved through mutual support- cohorts of Champions work together in organisations
- Investment in a network of Champions – share learning and motivate, inspire and support each other

Evaluation

- Important that the medium and long term health outcomes are evaluated over time - monitoring systems to capture Health Champion activity e.g. signposting data

Wider infrastructure of support services

- Health Champions are in key position to provide community intelligence into the commissioning cycle – highlighting areas of need