



## A Good Practice Guide to Health and Environment Projects

*“A community must be healthy to be sustainable”*



Llywodraeth Cynulliad Cymru  
Welsh Assembly Government



Prepared by Wales Environment Link Health and Environment Working Group  
Supported by Health Challenge Wales

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## Introduction

Poor health in Wales is seen as a major barrier to social and economic activity. A poor quality environment can have significant health impacts, whilst enjoyment of the natural environment can benefit well-being. The links between health and environment are increasingly apparent, and have risen up the political agenda as the health service increasingly looks to prevention of ill health, and promotion of general well-being.

The Welsh Assembly Government recognises the potential of the environment for recreation and health in its strategy for physical activity *Climbing Higher*. Regeneration programmes like Communities First and *Health Challenge Wales* show that improving people's well being has vital links with the environment. And in Wales this is a key element of the cross cutting agenda of sustainable development.

The health benefits of physical exercise are well documented. The health benefits of environmental activity are also well researched<sup>1</sup>. So combining health and environment projects must be a solid response to the challenge, particularly in Wales where the population has historically poor health and low levels of physical activity. The environmental voluntary sector has a key role to play in making this work at community level. It can do so through its environmental expertise, and through its links with diversity organisations representing sections of the population who may suffer disproportionately high levels of health problems, often linked to multiple deprivation.

Wales Environment Link (WEL) brings together national environmental organisations in Wales, many of whom have an interest in the links between health and the environment. Some organisations have projects in this field, others are looking at how they can broaden their work to encompass health and well-being. A working group was formed to develop the environmental voluntary sector's response to the issues and share ideas.

Members of the WEL Health & Environment Working Group have been working with partner organisations and The Welsh Assembly Government to find practical ways of improving health and well-being through environmental activity. From these discussions came the idea of a "Good Practice Guide" to examine projects and ideas already tested and provide a check-list for how to make a health and environment project sustainable at community level.

This Guide was largely created at a work-day in February 2005. With the support of Health Challenge Wales, members of diversity and environmental organisations discussed the issues, and set them out in a simple checklist format. In addition to the checklist the guide looks at the importance of project evaluation and offers information on how to use the process of self-evaluation. This section is based on a presentation made by Sarah Lloyd Jones of the People and Work Unit. The appendices present some real health and environment projects and share experience of what makes them successful, as well of some of the difficulties organisations encountered in running them.

We believe the result will help turn "joined up thinking" into "joined up action". We look forward to working in partnership on new and effective health and environment projects in the future.

<sup>1</sup> A useful summary of this research is included in the RSPB publication 'Natural Fit' <http://www.rspb.org.uk>

## **Characteristics of a Sound Health & Environment Project: A Checklist**

This checklist summarises what can contribute to a successful health and environment project. It is based on the experience and ideas of participants in the WEL Health and Environment work-day. The ideas listed present the consensus achieved during the day but are not necessarily definitive project criteria.

Participants were particularly concerned with how to increase participation in physical activity, especially amongst those who are at present less likely to be physically active or to enjoy the natural environment. Discussion also focused on the importance of securing long-term benefits and making projects sustainable.

The checklist breaks down a health and environment project into six core elements:

- Partnership Working
- Individual Benefits
- Community Benefits
- Project Activities
- Project Evaluation
- Funding Aims

The checklist offers guidelines for each core element.

## Partnership Working

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Projects are likely to be established by organisations working together, sometimes because funding requires it or because it is the only way to get all the necessary aspects in place and involve a wide range of people.

*For effective and successful co-operation...*

*...partnerships should be real*

- Effective partnerships work together for a reason, rather than just because they think it looks good or to raise the profile of the partner organisations.
- This means working towards shared and agreed objectives that partners are committed to.
- Partnerships require honesty between organisations and a willingness to share “credit” and “blame”.
- Roles within a partnership need to be flexible, recognising that:
  - some partner organisations are there to set the project up, some may come in later when appropriate,
  - not all organisations have a “social inclusion” agenda as a top priority; their role may be to focus on assisting others to deliver that,
  - a key strength of partnerships is the ability of each organisation to train the other in areas of expertise – that training role should be clear in the partnership.
- Partner organisations should take the opportunity to raise awareness amongst their own staff or challenge stereotypes, and consider how they can use projects like these to increase the diversity of their own workforces and volunteer profile.

*...partnerships should involve*

- At least one environmental organisation, and as many other organisations as necessary to deploy an effective range of expertise and resources.
- Organisations specifically experienced in the populations engaged as:
  - specialist knowledge is essential for some health conditions,
  - specialist knowledge is desirable for many other health conditions,
  - “diversity organisations” already have the necessary contacts. This increases sustainability, as diversity organisations will develop an environmental agenda, and diversity will become central to the environmental sector.
- “Landowners” and others who can provide access to suitable sites such as:
  - local Councils can be a key supporter offering country parks, urban parks, wider countryside and also grounds of community centres,
  - statutory agencies like CCW and Environmental Agency, who are also landowners and managers,

- environmental organisations like Wildlife Trusts and the National Trust,
  - voluntary organisations which often own or manage sites,
  - sympathetic private landowners.
- Health professionals, including:
    - those at ground level who know their clientele,
    - GPs who can be very helpful, but often have no time, so consider practice managers and nurses as a first approach,
    - Health Promotion staff who are usually very helpful,
    - Health Visitors, community and psychiatric nurses,
    - Cardiac rehabilitation teams who have a clear link to physical activity projects,
    - other useful specialists, e.g. Substance misuse workers.
- Physical activity specialists:
    - remembering that the wider the menu of physical activities considered, the more specialists necessary,
    - potentially from local Council leisure centres,
    - or from private sector providers, e.g. climbing centres, kayak schools,
    - but think wider than traditional “countryside” activity, e.g. a community focus like dance, yoga, martial arts may encourage diverse engagement.
- Community regeneration agencies, such as:
    - Communities First partnership boards which have health and the environment as two of their key themes,
    - Local Council regeneration officers who may share the vision as well.
    - It is important to ensure that projects complement community regeneration strategies, and do not “appear out of the blue”. There is more chance of partnership working where the project is a natural fit with existing long term plans.
- Community groups and other representative groups, recognising that:
    - community groups should be consulted whenever appropriate,
    - the capacity of groups can be a barrier; they have to prioritise what they can usefully engage with,
    - working with new groups, in new ways, has time and resource costs,
    - community leaders may change, so dependence on one individual or group may not work in practice,
    - trust needs to be built, so continuity of service is key – raising expectations then failing to deliver reinforces exclusion,
    - if community groups are not in place or not easily brought together, it may be more appropriate to consult/partner with other “representative” or umbrella organisations,
    - new community groups can and do emerge from the process; but working with a group to broaden their own agenda may work better to start with, and be more sustainable long term.

## Individual Benefits

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A health and environment project aims to benefit those people who participate, improving their health, or well-being and environment.

*A project should enable individuals to...*

- Easily understand the planned activities and the benefits available to them,
- Improve their health, wellbeing, fitness and environment.
- Adopt a sustainable lifestyle including healthy eating and active lifestyles.
- Become regularly physically active:
  - at a level that suits the individual,
  - through knowing the range of other physical activities available locally.
- Increase their self-confidence and skills by:
  - offering practical skills and social opportunities,
  - helping people feel welcomed and included,
  - making sessions fun so people enjoy them.
- Feel able to participate in other community activity, by:
  - linking to other community groups
  - introducing participants to other groups.
- Increase their knowledge of, and interest in, the environment by:
  - offering access to information that meets their needs,
  - showing simple ways of taking action “at home”.
- Move on to formal training, or employment, where appropriate.

*...and some participants could be enabled to:*

- Run the activity themselves.

## Community Benefits

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Potential benefits of a health and environment project should extend beyond the individuals who participate. Activities can be planned to maximise benefits for the wider community.

*A project should lead to...*

- Sustainable community health and environment improvements/benefits, including:
  - trained volunteer wardens responsible for a local area,
  - development of local ownership and knowledge,
  - functioning local support/community groups,
  - leaflets, interpretation materials,
  - continuing involvement of local schools/community groups.
- Networking of community groups through:
  - being part of a supported network of community environment groups,
  - reaching wider voluntary networks (Rotary, welfare hall, local business),
  - encouraging dissemination of good practice and giving support,
  - projects which sit within the local strategic policy framework.
- New, health and environment community groups, where appropriate to:
  - ensure that projects are sustained,
  - develop a social enterprise business (“not for profit”).
- Sustained environmental engagement from existing community groups with:
  - evidence of greater respect of environment, e.g. more recycling, less litter,
  - continuing physical activity individually or in groups,
  - increased skills and aspirations amongst the local community,
  - new ideas – new activities – new local projects being developed from the “bottom up”,
  - improved appropriate delivery/engagement with statutory providers.
- Inclusion of wider sections of the population through:
  - links to other groups, e.g. Round Table, welfare clubs/halls,
  - intervention support through inclusion training,
  - sustained, empowered participation of excluded groups in the decision making process,
  - developing a sense of ownership of the programme by the community and ensuring programmes respond to community priorities.
- Recommendations for further strategies based on effective measurement and self-measurement.

## Project Activities

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What the project actually does can vary incredibly (see project examples in the appendices). When devising the activities it helps to consider what the desired outcome will be as this will influence what activities the project centres on.

*Activities offered by a health and environment project should ...*

- Be inclusive, inviting and enjoyable.
- Meet the needs of the participants, both as individuals and as groups/clubs. This can be achieved by:
  - consulting participants to ascertain their needs rather than prescribing first.
  - identifying existing general research; then consulting with target groups to find out what activities they want to carry out, when and where they want to do it.
- Be flexible enough to make participation convenient, by:
  - reducing financial obstacles to participation, e.g. childcare costs, travel, subsistence,
  - reducing physical obstacles to participation, e.g. visual/audio impairment, mobility problems,
  - being accessible in terms of location, appropriate timing- (e.g. no late night activities for older people who often don't like going out after dark) - which must be generally suitable and appropriate for target group,
  - being sensitive to cultural differences, e.g. preference for single sex groups, timing of religious observance,
  - using different cultural knowledge positively, e.g. horticultural skills, recycling skills, different flora,
  - being aware of language requirements, e.g. delivery in Welsh, but also in minority community languages,
  - capacity building of "hard to reach" groups so they can really participate in consultations,
  - making consultation fun - be aware that the type of consultation exercise you use will give different results.
- Be planned as a long term rolling programme, in which:
  - people start on small bits, "achievable" chunks of activity focussed for specific "target groups",
  - the programme allows people to try different elements to decide what they like,
  - links are made to more intensive programmes, e.g. small walks lead to big walks, community gardening leads to having an allotment, trying walking leads to wanting further training,
  - physical activity is encouraged and leads to a continued active lifestyle,
  - activities are well signposted and provide good information, e.g. links to healthy eating,
  - social connections are made between participants,
  - there are links with an aftercare programme for those participants that move on beyond the project; keep in touch with people when they move on, make sure they're always welcome back.

- Have clear environmental benefits, which means:
  - activity organisers need to know how activities will be evaluated,
  - organisers explain the benefits so they can motivate and enthuse participants,
  - activities must limit damage to the environment
  - activities increase environmental awareness and understanding and the link to a “sustainable” personal lifestyle is reinforced,
  - benefits should be as long-term as is foreseeable at the time, this will come from a project developed by community involvement.
  
- Have clear health and well-being benefits, which means:
  - participants need to be clear on their expectations,
  - benefits may build over time,
  - a range of best practice resources are accessible, to enable a “project sensitive” assessment of well being i.e. exactly what are the target benefits?
  - involving health professionals at an early stage,
  - activity organisers need to know what the benefits will be, and explain monitoring to participants,
  - benefits must be clearly linked to evaluation,
  - the organiser needs to motivate and enthuse participants.
  
- Be capable of replication/repetition so projects can:
  - start again at the beginning of the process – creating a rolling programme for new participants,
  - be capable of continuing but flexible enough -within funding constraints- to adapt to new needs that may arise,
  - be replicated or repeated in other geographical areas and with other interest groups,
  - network with groups across wider geographical areas or different interest groups,
  - recognise that some very valid activities are so specific to certain areas and groups that they are not necessarily relevant in other areas.

## Project Evaluation

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Evaluation is an essential part of the process and usually needs to be designed into a project in the early stages not only to establish what the project has achieved, also to learn from the process. This is particularly important with health and environment projects where the nature of the activities means it is not always easy to quantify achievements.

*Evaluation of a health and environment project should...*

- Have clear goals, particularly in relation to the project's scale.
- Be clear from the outset on Outcomes, not just inputs/outputs by:
  - having a baseline for outcomes to be measured against,
  - recognising how the project is changing, and therefore that outcomes need to be reconsidered,
  - always discussing changes with partners/funders before implementation,
- Have the relevant evaluation techniques and events programmed in so they are:
  - built into day to day work, and backed up by consistent monitoring,
  - fit for purpose intended, i.e. evaluation processes should help the delivery of the programme, not become its main activity; keep it simple,
  - about quality rather than just figures/stats that do not actually show much – so it is not just a “ticking the box” exercise,
  - relevant to all partners not just one organisation,
  - use appropriately skilled staff and/or relevant training programmes,
  - ongoing, so evaluation is not merely at the mid-point and/or end point.
- Be costed into the budget, including:
  - internal evaluation costs,
  - external evaluation costs when appropriate.
- Contribute to professional health improvement evaluations by:
  - where appropriate, developing replicable “evaluative categorisations”.
- Be able to link with wider community regeneration evaluations by:
  - producing evaluation in an appropriate format for dissemination.

## Funding Aims

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There are some points to bear in mind when considering how to fund a health and environment project or approaching potential funders:

- The need to make the case continuously that health and environment work supports cross-cutting themes (e.g. well-being, sustainable development) and delivers cross-cutting targets; funders need to recognise and respond to delivery which supports a wider agenda.
- Recognising success may help secure continued or renewable funding instead of “flavour of the month” projects and initiatives.
- The need for ongoing evaluation and identification of new needs as:
  - even “core funded projects” should be seeking new sources of funding for new needs,
  - some groups do not need much to enable them to access health benefits: consider “low tech” approaches.
- The need to identify appropriate future or alternative sources of funding such as:
  - mainstream service funding, where appropriate,
  - independent, self-organised, self-financed activity where appropriate.

## The Need for Evaluation

Health and environment projects are funded mainly through public sources. There is an increasing focus on “value for money” not just in terms of immediate outputs, but long-term impact – the “outcomes”. So evaluation is now essential to any project, and is demanded by funders as diverse as Local Health Boards, NHS Trusts, Local Authorities, the Welsh Assembly Government, the Environment Agency, Forest Enterprise, the Countryside Council for Wales and the Big Lottery.

This is particularly important with health and environment projects. Environmental action has health benefits which are usually perceived as “health promotion/ill-health prevention” benefits or sometimes as part of rehabilitation. The effectiveness of this has not been as thoroughly tested as “clinical intervention”, e.g., prescription of drugs, surgery. So we need to test the health benefits thoroughly – there is no clear picture of the impacts so far in reference to preventative health measures

- Evaluation is both a development and a management tool.
- Why look at self evaluation?
  - If the evaluation is carried out solely for (or by) another body then benefits will be limited, i.e. it has to be your own.
  - There are difficulties in identifying and tracing outcomes in preventative work without thorough self evaluation.
  - There is a need to be receptive to unexpected impacts, it is a creative process.
  - It is not a neutral process: evaluation affects the project.
- Have you got the time to self evaluate?
  - Look at the questions you are asking yourself to see if they are fit and worthwhile.
  - Paper based evaluation can be tedious; look at other methods to find which works for you; e.g. anecdotal, ICT diaries which can be used to record and reflect, building up a picture without a long paper-trail.
- When undertaking self evaluation:
  - Make aims, objectives and purposes of the evaluation clear to everyone within your organisation. People will then prioritise within these towards the key aim.
  - Ensure the process is built into the structure and function of the institution.
  - Ensure everyone agrees with what is being done.
  - Look at the bigger picture as well as specifics.
  - Look at how you involve people – you need to build trust so people can honestly evaluate themselves and others.
  - Managers especially need to be open, and prepared to share with colleagues: everyone needs to be on the same wavelength and have the same understanding.

- Evaluation needs to make efficient use of time:
  - Planning – Application – Reviewing – Reflection
  - Reflection is a very important part of this process.
  - The methodology needs to be easy, economical and feasible.
- Seek advice:
  - Use a critical friend to see if your aims and objectives, are clear and relevant.
- What to do with data produced by self evaluation?
  - It needs to become a part of the evolution of the project, this means that it will be embedded within the project, and can be useful.
  - It needs to be clear so that it can be used to inform others about your projects (e.g. to external bodies).
  - Plan from the outset what information will be open to external bodies and what will be confidential to your organisation

Guidelines can be drawn from the work of the UK Evaluation Society:

[www.evaluation.org.uk](http://www.evaluation.org.uk)

## Appendix: Three Current Projects

*“More people, more active, more often.”*

The information on these projects is based on presentations made at the WEL Health and Environment Work Day in February 2005.

### Groundwork Wales ‘Walking the way to health’

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#### Background

- A pilot project in England was funded by the Countryside Agency, New Opportunities Fund and British Heart Foundation.
- The project aims to reduce health inequalities and increase access.
- It has now become a network of projects with support e.g. newsletter.

#### In Wales

- The Countryside Council for Wales funded a pilot project with money matched by volunteer time, and funding from NOF
- The Wrexham project aimed to:
  - develop a walks programme of varying lengths and frequency,
  - improve the footpath network,
  - recruit volunteers to lead walks and provide them with the support to do so,
  - promote health benefits to target groups.

#### Successes

- A steady increase in the number of walkers to 6500 participants per year.
- 5km of path improved.
- Establishment of new partnerships - particularly, working for the first time with health organisations, and GP referral.
- Achievement of Heart Quality Awards 1,2 &3.
- New ways of involving people, e.g. incentive schemes.
- It has led to other projects, e.g. Routes to Healthy Hearts, Healthy eating, Active Lifestyle, Pedal Power.

#### Evaluation

- An individual’s health is monitored through a baseline health survey and 6 month review.
- A commissioned study into impacts looked at why people stay involved, and the medical condition of participants.

### Difficulties

- It proved difficult to find money once initial pilot funds ran out.
- How to make projects sustainable: how to link to local health and well-being strategies.
- Pressure to make groups self-sustaining when it is not appropriate for them or they still need support (e.g. people with learning difficulties).
- Transferring lessons learnt from work with mainly older participants to other target groups.
- The need for more evaluation and proof of the benefits.
- Getting GPs to refer patients to the scheme.
- Physical activity doesn't feature highly in local health and well-being strategies.
- Presenting programmes with continuity and flexibility, e.g. Ramblers work with CCW on 'Stepping Stones' to take people to the next stage of walks (3-5 miles) as a link to existing Ramblers groups.

*Further information about this project is available from:*

[Executivedirector@groundworkwales.org.uk](mailto:Executivedirector@groundworkwales.org.uk)

## Sustrans 'Active Travel Programme'

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### Background

- Sustrans works to make walking and cycling routes safer, more accessible and attractive.
- They promote public transport, walking and cycling generally.
- They are creating a National Cycle Network.

The Active Travel Programme is based on the "Spectrum of Physical Activity": Occasional activities requiring organisation, e.g, sport ~ Regular activities requiring no organisation, e.g manual work ~ The middle of the spectrum = ACTIVE LIVING and ACTIVE RECREATION which is 30 minutes physical activity five times a week

Sustrans targets daily routine – the middle of the spectrum- through ACTIVE TRAVEL

### In Wales

The approach links to Welsh Assembly Government national strategies and agendas:

- Physical Activity Framework
- Climbing Higher
- Walking and Cycling Framework

### A new pilot project: Active Travel Caerphilly

- Based in the Rhymney Valley because the area has well below the national average level of physical activity.
- Linked to a Healthy Living Centre, Communities First Areas, local physical activity sub-groups.
- Linked to local health and well-being strategies and community strategies which identified the need to increase physical activity.
- Trains volunteers to take participants walking and cycling.
- Funding from Health Challenge Wales, Enfys and the local Health Alliance.

### Successes- Active Travel Cornwall's experience

- 470 people participating in volunteer guided cycle rides.
- A variety of participants representing a broad age range and good gender balance.
- 46% of those involved weren't previously doing enough activity to impact on their health.
- Participants were asked to identify their health needs, including mental health issues.

### Evaluation

The Cornwall pilot has been evaluated in detail, showing that:

- many participants remain active
- many participants reported improved health.

### Difficulties

- Involving disadvantaged communities or groups
- Getting beyond middle-aged, white male, individual cyclists.

*Further information about this project is available from: [dafyddt@sustrans.org.uk](mailto:dafyddt@sustrans.org.uk)*

### Background

- Green Gym -an innovative and unique programme to improve health through environmental action
- Offers locally-based, simple environmental activities suitable for almost everybody, learning skills they can use in everyday life

### In Wales

- Support from the Health Promotion Division of the Welsh Assembly Government enabled BTCV to develop Green Gyms across Wales
- The first Green Gym started in Cardiff in 2002 and is still running
- BTCV now has five Green Gym delivery centres, delivering projects directly, building partnerships for new Green Gyms, and supporting ones which will be run by partners

### Successes

- The programme began the process of transferring skills to the voluntary sector and other partners
- From Wrexham to Llanelli; from Pontypool to Penmaenmawr, the project is suitable for all areas of Wales
- Green Gym members can take accredited qualifications in conservation, in project organisation, and in First Aid at Work. For many, this is the first step to Lifelong Learning
- Green Gym participants come from all walks of life and all age ranges; it is successful in encouraging new sections of society into healthy environmental activity.
- Over 40 staff and volunteers in BTCV and partner organisations have now been trained to organise Green Gyms.
- We have been working more closely with organisations expert in the needs of diverse communities, from Wales Council for the Blind to MEWN Cymru.
- BTCV has increased links with other types of Health Promotion/physical activity.
- The Welsh Assembly Government has agreed to continued financial support to develop the network further over the next two years.

### Evaluation

- Oxford Brookes University co-ordinate a UK-wide research programme measuring the health improvements of participants – this deploys forms and methods already in use in the health service, e.g., SF12.
- Pilot studies show participants' mental and physical health improves; as many as 30% of participants were not previously engaged in voluntary community activity.
- Green Gym projects have techniques to measure impact on community regeneration, e.g. environmental improvements and community participation.

## Difficulties

- Funding remains a problem beyond the short-term, pilot stage
- In the long-term there is a need to become “mainstreamed” into NHS provision.
- There is some reluctance by participants to fill out forms essential to evaluation and grant monitoring – “..... oh! no! not another chuffing form to fill in.....”.
- The inclusive approach can make “mixed ability” sessions tricky – need to expand through more targeted sessions.
- Lots of different skills are needed to deliver the high standard set: environmental, leadership – this raises capacity issues in BTCV and partners.
- The joined-up approach to policy (community regeneration, health, environment, lifelong learning) is a great strength, but also causes problems with perception of the programme: no single agency/funder sees it as their special area.

*Further information about this project is available from: [c.macintosh@btcv.org.uk](mailto:c.macintosh@btcv.org.uk)*