



# Southwark Faith and Health Programme 2018/19

Taking a Challenge Approach to support Health through Faith Groups

#### Introduction

Faith groups form an important part of community life in Southwark. There are an estimated 300+ places of worship in the borough enabling faith groups to support people from all walks of life, cutting across all communities. For some vulnerable groups, in times of crisis, faith organisations are often a first port of call.

Through more collaborative working between statutory services, the faith sector and voluntary and community sector groups there is an opportunity to reach individuals from seldom heard communities, and support positive health behaviours in order to prevent crisis and improve the health and wellbeing of our local population.

This approach complements a number of existing strategies and strands of work in the borough including: the Health and Wellbeing strategy; Fairer Future promises; the upcoming faith strategy and work on prevention.

In March 2018 the Public Health team at Southwark Council commissioned Community Southwark to work with them to engage faith communities on how they can create stronger connections with health professionals to promote positive health messages. The aim of the work was to:

- Stimulate more conversations with faith groups on how we can work together to support healthier communities
- To award a number of small challenge grants to faith groups test approaches of working with health professionals to impact on health outcomes
- To create an online resource for faith leaders that would help them feel better equipped to promote positive health and wellbeing.

## **Outline of the process**

We designed a process that would enable us to hear from both health professionals and faith groups on what they think the pertinent issues are in their communities, and also begin to build relationships and develop ideas for projects that could take place. The key milestones were:

27 <sup>th</sup> March 2018	Health Professionals workshop This workshop brought together professionals from the Public Health Team, CCG, Guys and St Thomas Charity and other health based programmes to introduce the project, evidence base and identify good practice. Professor Jim McManus, Director of Public Health at Hertfordshire County Council presented on his past work with faith groups.
9 <sup>th</sup> May 2018	Exploration workshop with faith groups An afternoon was spent with faith group leaders exploring the role that faith groups play in supporting health and wellbeing in Southwark and identifying groups that might be interested to take things further. This was a precursor to developing a challenge approach inviting faith leaders to test approaches to supporting health and wellbeing with their congregations and communities.
May – June 2018	Designing and launching the Challenge We used the analysis from the exploration workshop to distil three overarching themes that were of relevance to the faith leaders. We designed an application form and spec and launched on 14 <sup>th</sup> June, with a small award of £500 for successful applicants to help get their idea off the ground.
5 <sup>th</sup> July 2018	Faith and Health Challenge workshop We held an event in July bringing together potential applicants with health professionals to discuss and develop ideas for projects.
25 <sup>th</sup> July 2018 - August 2018	Applications received The application deadline was the 25 <sup>th</sup> July and we received 11 applications
	in total. These were shortlisted to 9 to focus on the most relevant applications. A panel met on 8 <sup>th</sup> August 2018 to assess the applications and selected 5 applications to be funded. The panel considered: relevance, potential impact and desirability (i.e. does the community show a desire for the project?)
August – September 2018	applications. A panel met on 8 <sup>th</sup> August 2018 to assess the applications and selected 5 applications to be funded. The panel considered: relevance, potential impact and desirability (i.e. does the community show a desire for

### **Findings from Exploration event**

On the 9<sup>th</sup> May 2018 Community Southwark and Southwark Council held an event with faith leaders in the community to explore the role that faith groups play in supporting positive health and wellbeing in Southwark. This event was a precursor to developing a challenge grants programme for faith leaders to test approaches to supporting health and wellbeing in their congregations.

The purpose of the event was: to hear from faith leaders about their experience of supporting positive health in their communities: the issues they see, the challenges they face and what they think works and to find out what would make the Faith and health programme work for faith leaders

18 faith leaders attended the event and there was rich discussion around these topics.

#### **Pertinent points**

We asked each of the groups to feed back three key points from their discussion. This highlighted the areas that people felt were most important:

- A need to have a more cultural understanding of and approach to health advice where balance is acknowledged between spiritual, mental and physical care.
- Faith leaders needing to be in good health themselves to support their communities. What resources and support is there for faith leaders and how much do faith leaders look after their own health?
- Concerns about food poverty and a need to produce materials for professionals to understand cultural food better.
- Safeguarding is important, and it is important for groups to have some level of governance. How can they get support around this?
- Issues around trust: there were varied comments on this from recognising that young people don't trust their faith groups, to sharing that some people trust their pastors more than the NHS. Generational differences were highlighted.
- Importance of recognising the holistic nature of care, mind body and spirit, and also the environment we are in (e.g. ensuring that people feel safe and secure).
- A focus on 'gentrification' how it affects local congregations and disperses people.

It was acknowledged by all groups that there is great potential for joint work

#### What issues do faith leaders see in their communities?

The issues that were raised most frequently from attendees were: Diabetes; Hypertension; Mental Health; Nutrition and diet.

#### Physical health

- Diabetes (mentioned in all groups)
- Hypertension (mentioned in all groups)
- Aging mobility / dementia
- Fertility
- Lack of Exercise
- Childhood obesity

## Relationships with health professionals:

- Community not understood by 'white middle class health professionals'
- People being misunderstood by health professionals
- In some congregations, the pastors have more credibility than the NHS.

#### **Social factors**

- Diet Cultural (High sugar/carb palm oil etc) Nutrition / healthy eating
- Social Isolation
- Stress
- Tension in the environment (physical and mental) builds up from ages 12-13 – there is far for safety and parental stress.
- Food Poverty

#### **Mental health**

Depression

#### What are the challenges for faith groups in addressing health problems?

The primary challenge facing faith groups in tackling health issues in their congregation is around resources, primarily time and volunteer power, to be able to develop initiatives and make connections. Other challenges are outlined below:

#### Information and connections

- Lack of knowledge of health indicators
- In terms of bringing in professionals- how to approach / get links? E.g. midwives / AA

#### Communication

- How to make people understand health issues
- The question of how to make people understand the importance of the part they play in maintaining their health

#### Resources and structural issues

- Lack of time
- Lack of resources people power. Plethora of congregation needs, often with just one pastor
- The faith group has too many ongoing projects
- The reliance or lack of volunteers
- Work is often based on the good will of a few and reliant on volunteers
- How to strengthen the resilience of volunteers?
- Safeguarding and helping vulnerable how to address this?
- Understanding practicalities and reconciling with faith and worship striking the balance
- Lack of space, even when you want to do more
- Funding is it about getting more, or using current resources in a better way
- Some [grant] funders don't fund faith groups. The faith aspect makes them very weary.

#### Social and environmental circumstances

- Gentrification which can cause movement of congregation, and sometimes loss of valuable volunteers who can no longer justify the time travelled.
- Stigma
- Don't work together
- Reluctant to collaborate together
- Trust Who has it and how it differs across generations
- The stress of regeneration
- Universal credit
- Attempts to improve the environment have had a negative effect
- There has been a focus on place rather than people

#### **Health misconceptions**

- Cost of healthy Diet / It is expensive to eat healthily
- Portion control
- Cultural understanding of health may be ingrained without flexibility
- Denial

#### **Further findings:**

As well as the information above we explored what would help faith groups in making a contribution to addressing health problems. Key findings here were around support for faith leaders and better networking and sharing of good practice and learning. We also heard about positive health engagement that is taking place already through faith groups, explored ideas for projects to support positive health and discussed how we can best work together. You can find the remaining findings from this session in **Appendix 1.** 

### Focus of the challenge grants and evaluation process

Having reflected on all the input and experience shared with us we developed a useful framing of 3 key opportunity areas are for this work in general:

- 1. Activating local residents and communities on health
- 2. Making healthier choices easier and the default
- 3. Helping people to engage and seek help early from a range of service

We posed three questions for the challenge grants that further drew on some of the specific challenges our faith leaders were interested in addressing and asked applicants to focus on one area for their project :

## 1) How might we help people make healthy choices on portion size and preparation of the food they love?

Southwark has high levels of diabetes and hypertension, both conditions that can be managed through a healthy diet. Many popular foods can be made more healthy with simple adjustments to portion size and methods of preparation. At the same time there can be misconceptions amongst health professionals of what cultural food is and how it can fit with a healthy diet.

#### 2) How might we help people seek early help from relevant health services?

This question is aims to address two problems: one is how faith leaders can connect to health professionals and voluntary sector expertise to share with their communities; the other is how people with health conditions can be supported to feel confident to seek medical advice from the right people at the right time to deal with problems early.

## 3) How might we develop more discussion across the health sector and faith communities regarding health taboos.

Some communities experience poorer health outcomes because of greater stigma associated with sexual health, cancer screening, mental health, and addictions. How can faith groups help people feel more confident in talking about such issues?

#### Criteria:

To be eligible to apply for the fund the group had to: be a faith group based in Southwark; have a governing document; have an organisational bank account with three signatories; have accounts available from the last two years

#### **Evaluation Process.**

We asked group leaders to complete a preliminary evaluation form which asked questions about their confidence in engaging with congregation members on health issues and knowledge about different health structures in Southwark (See Appendix 1).

We developed a distinct participant evaluation form for each of the projects. We tried to keep the evaluation form as simple as possible as the projects were short, some of them only one day, and for some of the projects there were potential communication barriers such as English as a second language.

Finally, we asked the group leaders to complete another form at the end of their project which gathered their views on the experience of delivering the projects and being part of the programme.

#### **Case Studies**

### **Youth Rally Mission**

#### **Outline of project:**

Know your portions nutrition session
This workshop explored healthy eating for young people.

**Collaborators:** The workshop was a collaboration between Youth Rally Mission, Beneficial, Kingdom Church and House of Praise. Pastor Shola Oladipo from Food for Purpose supported the event by facilitating a workshop on Nutrition at the event.

Number of attendees: 14, 57% Southwark Based (8 out of 14)

This workshop explored healthy eating for young people. Youth Rally Mission collaborated with Food for Purpose to deliver a workshop which explored the nutritional value in African and Caribbean meals, the amount of calories burned during exercise and the use of apps such SugarSmart to track calorie intake.



Isaac Attram is a Pastor at Youth Rally Mission, TAPAC Youth. During his 11 years there, he has developed a passion for sport, young people and the healthy diets that are need for success. He believes 'the healthy eating message should therefore be given alongside messages around safety within schools'.

'I am a local pastor and I know that we have lost three people in 2 local churches recently to HBP... We have to do something.'

Some of the actions participants said they would now undertake as a result of the session include:

- o 'Eat healthy, exercise, eat well'
- o 'Change my way of eating, exercise more, eat less sugar'
- o 'Check on my eating habits, I will apply it in my daily eating habits, I will let others know what I learned.'
- 'Eat less sugar than ever before, eat a healthy breakfast, eat food as much as I can'

### **Muslim Association of Nigeria UK - MAN UK**

#### **Outline of project:**

Sunday Healthy breakfast sessions

MAN UK run Sunday prayer meetings. They will have three Sundays when they will ask people to come an hour early to have a healthy breakfast and talks from nutritionist about healthy eating.

**Collaborators:** Young Health professionals from the Muslim Community of the mosque. Advice from Pastor Shola Oladipo of Food for Purpose.

**Number of attendees:** 71 evaluation forms were completed, with 18 individuals completing more than one. So there are evaluation forms for 46 individuals in total.

11 out of the 46 Southwark residents (24%)

MAN UK run Sunday prayer meetings. They held workshops on three Sundays before prayer meetings to discuss healthy eating. Health professionals from the youth department delivered the workshops and were supported by Pastor Shola Oladipo of Food for Purpose.



MAN UK is home to many African Muslims. Some of them have fed back that they are concerned that younger generations are rejecting traditional West African diets due to a wide variety of dietary choices in the UK and concerns that traditional foods such as amala, jollof rice and moi moi are unhealthy. The theme of this workshop was chosen to combat myths about the nutritional value of West African food.

Some of the actions participants said they would now undertake as a result of the session included:

- 'Check the calories on food packaging, eat less sweets'
- 'Practice 'small portions', practice fruits before main meal, conscious awareness of choice of meal with consideration to its calories, promote exercise'
- 'Exercise daily walks and weekly swims, reduced portions, change my oil stop using vegetable oil.'
- 'Replace rice with substitutes with less calories, cook with olive oil, don't overdo it with fruit.'

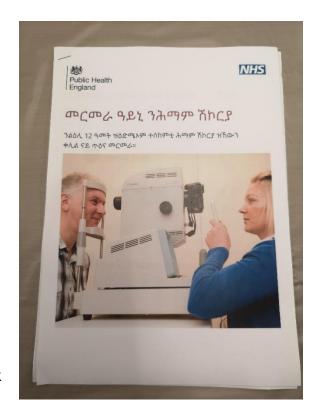
## St Michael's Eritrean Orthodox Church

#### **Outline of project:**

Diabetes Awareness St Michael's Eritrean Church Debre Sahl held a Saturday seminar on diabetes awareness and eye health.

Collaborators: A presentation was given by Rebecca Strutton from the Diabetic Eye Screening Programme at Guy's and St Thomas' Hospital. Tigranya translation support was provided by a church member who is a nurse at Guy's and St Thomas' hospital.

**Number of attendees:** Nine evaluation forms were completed. Four of the nine are Southwark residents (24%)



St Michael's Eritrean Church Debre Sahl held a Saturday seminar on diabetes awareness and eye health. A presentation was given by Rebecca Strutton from the Diabetic Eye Screening Programme at Guy's and St Thomas' Hospital. Tigranya translation support was provided by a church member who is a nurse at Guy's and St Thomas' hospital. The session was concluded by a health check which consisted of blood sugar and blood pressure testing, and a healthy vegetarian lunch.

#### Interesting point.

Father Yohannes Sibahtu has been a part of St Michael's Eritrean Church Debre Sahl for over 20 years. In this time, he has noticed an increase in diabetes rates in his congregation. He developed the session to educate members of the signs of diabetes, how it affects eye health and how to minimise further health issues arising from the disease.



Some of the actions participants said they would now undertake as a result of the session included:

- 'To undertake regular check-ups.'
- 'Avoid unhealthy food habits.'
- 'Attend similar workshops on health and related issues.'
- 'Take more care of my health and exercise.'

#### St Faith's Church Dulwich

#### **Outline of project:**

Mental wellbeing for Children and Parents

St Faiths have an after-school club for children with behavioural problems. They will be working with mental health professionals to deliver sessions for children and parents on positive mental health and wellbeing (ages 7 - 11).

**Collaborators:** A presentation was delivered by Bob Pritchard from Southwark Community Adolescent Mental Health Services (CAMHS). The session was also supported by Lindsay Gill, a reflexologist and holistic therapist who provided massages to the attendees.

**Number of attendees:** There were 20 attendees to the event. Seven evaluation forms were completed. Three of attendees who completed the evaluation confirmed that they are Southwark residents (24%).

A presentation was delivered by Bob Pritchard from Southwark Community Adolescent Mental Health Services (CAMHS). The session was also supported by Lindsay Gill, a reflexologist and holistic therapist who provided massages.



#### **Interesting Point**

St Faith's Church provides a range of services to support young people. Rev Susan Heights is very passionate about the needs of young people, and is always exploring methods of improving the present life and longer term outcome of vulnerable children with such proved, professional way.

'I believe that if we can help to give hope and improve their resilience and well-being as faith and community groups we have a duty to respond.'

Actions participants said they would undertake as a result of the session included:

- 'Make sure I listen to anyone that might be going through anything'
- 'I learnt to talk to people if I have a problem.'
- 'Helping my child to understand mental health.'

### **New Testament Assembly, Dulwich**

#### Outline of project: Men's Health Awareness Seminar

New Testament Assembly Dulwich are holding a one-day event focusing on men's health issues, particularly prostate cancer.

**Collaborators:** New Testament Assembly Dulwich has worked with Rev. Dr Julius, a medical doctor who serves as head of operations for Serve United, to develop the programme for the event.

**Number of attendees:** 25 people attended the event, and 15 evaluation forms were completed. 7 out of the 15 are Southwark residents (47%)

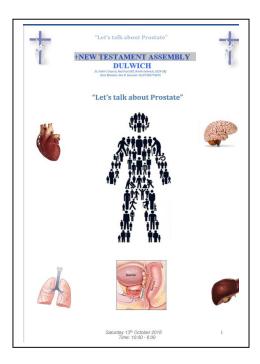
New Testament Assembly Dulwich collaborated with Rev. Dr Julius, a medical doctor who serves as head of operations for Serve United, to develop the programme for the event.

#### **Interesting Facts**

Betty Evans, a Vice Chair, identified that there was a need to raise awareness of prostate cancer and reduce some of the negative propaganda and taboos held within the ethnic and wider communities about it and the methods of intervention.

'We believe we have a duty of responsibility and care to identify and raise awareness on issues impacting in our everyday lives as a healthy church and community.'

Some of the actions participants said they would now undertake as a result of the session included:



- Change my eating habits
- Look for signs and have regular checks
- Make regular checks of my body
- Eating good food

### **Evaluation Summary**

#### **Proportion of participants from Southwark**

In total there were 104 participants that engaged across all the projects. The evaluation forms were a key tool in finding out whether those attending and taking part in the challenge events were Southwark residents, across the projects the percentage of Southwark residents participating ranged from 25% to 60%.

The faith groups that took part in the challenges had members and visitors from across London. Outside of the borough, attendees visited from neighbouring boroughs such as Lambeth and Lewisham, whilst some travelled from Outer London boroughs such as Barking & Dagenham, Bromley, Croydon and Haringey. Whilst this meant that Southwark residents didn't get most of the benefits from attending this event, this can demonstrate that faith groups provide support to the faith community on a much larger scale than just their local community.

At previous exploration events, the number of Southwark residents the projects would reach was raised as an issue. Some faith leaders felt that gentrification, high rents and house prices were factors in local residents leaving the borough, but that this wouldn't necessarily affect membership to that particular faith group.

#### Age

The topics and target audiences of the challenges dictated the age of the attendees to the event. For example, the Challenge event held by Youth Rally Mission had the higher number and proportion of individuals aged 0-15s in attendance, as it was aimed as young people's health. Additionally, the challenge event held at Dulwich New Testament Assembly had the highest proportion of attendance aged 50 and over as the topic of choice, prostate cancer is generally considered to be an older person's disease.

#### **Disability**

The majority of attendees to the events did not have a disability. St Michaels's Orthodox Eritrean Church and Dulwich Net Testament Assembly had the highest levels of attendees with disabilities. This may be explained by the higher numbers of older people attending their events.

#### **Ethnicity**

All of the attendees to the challenge events, that disclosed their identity, were from a BAME background. The majority of them identified as Black African or the specific tribe or ethnic group they belong to.

#### Attendee Feedback

#### **Youth Rally Mission**

The attendees' evaluation of the event was generally positive. The majority of the attendees felt:

- They had learned something new about healthy eating from the event.
- They knew how unhealthy foods they eat may affect their health.
- Positive about making changes to their diet, and
- They knew how to apply dietary changes to their diet learned in the to their daily life.

#### St Michaels Eritrean Orthodox Church

More than 75% of the attendees from St Michaels each felt:

- They knew more about health eating than they did before
- They now know how the healthy food they enjoy impacts their health
- feel positive about make healthy changes to their diet

All attendees felt that they knew how to apply what they had learned during the session into their daily eating habits

#### **MAN UK**

- More than 60% of the attendees felt they knew more about healthy eating after attending the challenge event
- 87% of the attendees left the session with a better understanding of how the unhealthy food they enjoy affects them
- 87% of the attendees felt positive about making healthy changes to their diet.
- More than 75% felt they knew how to apply what they had learned during the session to their daily lives.

#### Further feedback

'I have really enjoyed the workshop, the information given was useful.'

'An excellent awareness and information workshop.'

'It is a wakeup call for the community.'

'More knowledge than before'

'Better understanding [than before].'

#### St Faiths Church

All attendees felt that:

- They now knew how different things in my life can affect my mental wellbeing
- Positive about making changes so that I can better look after my mental wellbeing
- They knew how to apply what they had learned during the session to their daily lives

29% felt that they now knew more about mental wellbeing than they had before.

#### **Further Feedback**

'It was good /educational'

'Learnt about what to do'

#### **Dulwich New Testament Assembly**

In terms of learning gained from the event:

- 60% felt that they knew more about prostate cancer than they did before
- 93% felt positive about taking care of their health
- 80% felt that they were able to apply what they had learned to own health

A slight majority of attendees (53%) felt unsure or unable to identify the signs of prostate cancer.

## **Attendee Actions Post Challenge**

Attendees were given the opportunity to share any insights they had gain during the health challenge, as well as any behavioural change they were motivated to implement into their daily lives. Their feedback is outlined below:

#### **Youth Rally Mission**

- Use the SugarSmart app to scan when I go shopping
- Choose Carefully I eat
- Eat healthy, exercise, eat well
- Change my way of eating, exercise more, eat less sugar
- I will check on my eating habits, I will apply it in my daily eating habits, I will let others know what I learned.
- Eat less sugar than ever before, eat a healthy breakfast, eat food as much as I can
- Use my barcode, eat sensibly, good food choices

#### • Think positive

#### **Muslim Association of Nigeria**

- Check the calories on food packaging, eat less sweets
- Eat more vegetables, less treats
- I will be more conscious of my dietary system
- Be careful of what I eat, know the portion to take, do more exercise
- Practice 'small portions', practice fruits before main meal, conscious awareness of choice of meal with consideration to its calories, promote exercise
- Eat more healthily, do more exercise, be aware of portions
- Watch the portion of food I eat
- Eat less food, do lots of exercise, eat more fruit
- Know my portions, only eat what I need, control my habits
- Know my portions in everything I take
- Make some changes to my diet, control my eating pattern, do more exercise
- Eat more healthy food, do more exercise, control my eating habit
- Eating healthy diet, avoiding unhealthy food
- Be more selective in the choice of diet
- I will increase healthy food in my diet and do light exercise
- I will follow all I learned
- Improve on my daily food intake
- Know my eating portions, learn more about the nutrients in my food, seek out more knowledge from professionals
- Eat more fruit variety, be careful of how much I eat
- Learn more about healthy eating, reduce my portion of any meal
- To minimise my food, To stop eating chocolate, To have healthy food
- I will reduce my intake of sugar
- Try and eat healthy food, Eat less fat
- Continue to eat healthily
- I keep to the rules and feel well
- Eating the right amount of food, eat less red meat, eat less oil
- Exercise daily walks and weekly swims, reduced portions, change my oil stop using vegetable oil.
- Replace rice with substitutes with less calories, cook with olive oil, don't overdo it with fruit.
- To ensure I reduce on carbohydrate intake, to stick to portion type of feeding
- Eat healthily
- Watch my portions, learn about my local food, eat healthily
- Reduce all the unhealthy food I love, eat more fruits

#### St Michael's Eritrean Orthodox Church

- Reduce my portion size
- Exercise more
- Eat more fruit and vegetables
- Avoid processed foods

- Do more exercise
- Avoid sugar and salty foods
- Attend relevant seminars and workshops
- Eat more healthy food, avoid sugary foods
- Do regular walk and exercise
- Do healthy check-ups such as eye tests
- Do more exercise
- Eat more healthy food
- Cut sugar
- To undertake regular check-ups
- Avoid unhealthy food habits
- Attend similar workshops on health and related issues
- Take more care of my health and exercise
- Eat more healthy food
- Do some check-ups with my GP/Hospital
- Focus on my healthy food
- Get advice from GP and other workshops
- I will take all necessary steps to stay healthy
- More exercise
- Eat a healthier balanced diet
- Make a conscious effort to be aware of diabetes impact on my body

#### St Faiths Church

- Make sure I listen to anyone that might be going through anything, 'yes' you might miss a lot.
- Practicalise what I have learnt
- Listening more
- Never distract others
- Use sentence starters with kids
- Have more conversations with kids
- Listen to my kids
- Make more time to listen [to my kids].
- Listening Skills
- I learnt how to help people with small and big problems
- I learnt to talk to people if I have a problem
- Helping my child to understand mental health

#### **Dulwich New Testament Assembly**

- Change my eating habits
- Look for signs and have regular checks
- Make regular checks of my body
- Eating good food
- Eat more fruit and vegetables
- Drink more water

#### Faith Leader Debrief

#### **Faith Leader Feedback**

Following the conclusion of the events, the faith group leaders were invited to a final meeting to share their experiences of planning, hosting and evaluating the events.

#### **Understanding prior to the Challenge Events**

Faith leaders had completed evaluation forms to begin and commence the challenge events. The initial set of forms were designed to explore how confident the faith groups were about discussing their chosen topics for the event and the amount of support they may require to ensure a successful event.

Overall, most of the groups felt that they had a reasonable level of skill or good working knowledge of:

- Engaging with their congregations to support positive health and wellbeing;
- Speaking with their congregation about health issues;
- Knowing who to speak to if they have concerns about their own health or the health of their congregations.

All of the groups felt that they were either just aware or developing their skills with respect to the different health structures in Southwark that they would be able to connect with regarding their challenge topic.

Most of the groups chose a topic, where support was required in developing the skills needed to connect with appropriate organisations within the borough. One group chose a topic that they felt was very important to their local congregation, but felt they had little understanding of and were unsure about how to find the appropriate information and health professionals to support their project. Community Southwark provided further support regarding this.

At the end of the challenge events, all of the faith groups described having increased knowledge of the topic they had chosen.

#### What went well

#### **Dulwich New Testament Assembly**

- People felt more receptive to attending once Dr Julius was on board as there was someone they could relate to.
- The event uncovered a number of misconceptions.
- It enabled the men to have conversations and some sort of dialogue about a sensitive health matter. They could also talk to women about their problems.
- Faith leaders now feel more informed and better equipped to talk about prostate cancer and they would like to carry out health promotion work with other faith groups.

#### **MAN UK**

- The ability to get members to deliver the event and have a large number of our Muslim community consistently attend the events over the three weeks.
- Finding resources (such as HEAL-D) we could share with our community about appropriate portion sizes of African and Caribbean foods.

#### St Faiths

- Parent carers felt better equipped to listen to their children.
- The session had been very positive in affecting parent carers and children's wellbeing.

#### **TAPAC - Youth Rally Mission**

The feedback from both the adults and young people was very positive.

#### St Michael's Eritrean Orthodox Church

• The presentation and further information on how diabetes affects eye- health was apt and helpful.

#### What were the challenges?

#### **Dulwich New Testament Assembly**

- Getting men to attend and take part.
- The DRE Test (Digital Rectal Exam) for prostate cancer was felt to be taboo for some who felt that the act was related to sexual activity.
- More time would have been helpful in planning the event.
- Greater attendance from young people would have been preferred.

#### **TAPAC- Youth Rally Mission**

• The challenge event topic was different from what they would usually have delivered to the young people they work with.

Gang leaders were also said to be capitalising on food insecurity as a way to recruit young people. They see who cannot afford food at KFC and buy something for them, so they then owe the gang leader.

#### St Michael's Eritrean Orthodox Church

- The attendance numbers were disappointing.
- Some of the attendees were diabetic, and information about how to control eating habits

#### St Faiths

• The Challenge presentation required internet connection; none was available at the venue.

#### What improvements could have been made?

#### St Michael's Church

Getting better attendance and support from the local community.

#### **Dulwich New Testament Assembly**

- Promotion for the event was done quite broadly; we might need to be more specific and targeted, even using flyers.
- Chasing the deadlines around the grants put restrictions on who they were able to secure as a guest speaker for the event.
- The leaders of the church were unable to attend the event.

#### **TAPAC - Youth Rally Mission**

- Disappointed by attendance
- It is important that this dialogue goes on
- There could have been a longer promotional period
- One-off events need to be followed-up by further engagement with the attendees to ensure that events have a positive impact.
- The presence of a well-known or celebrity may have helped to attract more people to the event.

#### **MAN UK**

- They were able to get a lot of people on board, especially the youth
- Health professionals at the events would have been helpful, but we wouldn't have been able to pay them and value their time.

#### St Faiths

• 'If I arranged such an event again, I would use a different room which was not so noisy.'

## What was the impact on Faith Leaders and their congregations/local communities?

#### MAN UK

• It is challenging to break people's habits and pre-conceptions around diet

#### **Dulwich New Testament Assembly**

- Some attendees said that they will get prostate cancer tests as a result.
- One man gave a testimony that the event made him think differently about testing, and the importance of it.

#### **TAPAC – Youth Rally Mission**

• 'Before this, I thought that I was doing enough to keep myself fit'

#### St Michael's Eritrean Orthodox Church

 It was very educational for everyone who attended. Some of them had diabetes and it helped them understand how it can have an effect on their eye health.

#### St Faiths

- It is something we would consider again and know it is valuable for parents and children so they can learn how to help each other with their stresses and daily problems and build stronger more trusting relationships.
- Understanding how to communicate their feelings to one another is key to on-going support for children.

#### Advice for faith groups attempting similar faith and health projects

#### MAN UK

 Faith groups have to know what the community needs. If the events are framed around the community's point of view, they will engage and attend.

#### **Dulwich New Testament Assembly**

- An adequate lead up time should be given to promote the event
- These types of events should be aimed at young people, to help them live a longer life and prevent ill health.
- Intergenerational work around health has a place within faith communities; this information should be shared.

#### **TAPAC - Youth Rally Mission**

- This event gave me more ideas about the types of topics we can cover.
- 'Before this, I hadn't ventured into diet and exploring healthy eating in church.
   I knew Morleys and KFC wasn't good for young people. But now I really know how bad it is.'

#### St Faiths

 Be aware of the 'presentation, communication and preparation' need for the event to be successful

#### St Michael's Eritrean Orthodox Church

'I've seen a lot of diabetes in my community. I think you must pick a topic that is relevant to the community'

#### **Conclusions**

This project has provided a wide scope for exploring how faith and health intersect within the London Borough of Southwark. The Faith and Health challenges have been a useful tool in delivering messages on healthy lifestyles to seldom heard communities. Through this, they have demonstrated that faith groups may be an important and effective way of delivering health messages to seldom heard groups and the wider community within Southwark. Faith groups are important resources within the borough, and their trusted relationships with

seldom heard groups in the borough allow them to connect in a completely different way to the council and other public authority structures.

There is a plethora of faith groups in Southwark who are interested in social action, supporting the holistic needs of faith and the wider community in Southwark, and supporting the needs of seldom heard communities.<sup>1</sup> All the faith groups involved saw health communities and congregations as their responsibility and spiritual mandate.

The development of faith-based partnerships between faith groups and the wider community and voluntary sector and Public Health Team was integral to the success of all the challenges. All the groups had a willingness to work with outside groups but lacked a proficient understanding of health structures in the borough. All were supported to connect with a health body/organisation to provide information outside of the faith groups understanding; these relationships/dialogues need to be encouraged and maintained to allow for increased trust between groups and sharing of information that improves communities and further interventions in the future.

The religious spread of the events was either Christian or Muslim. It is important to recognise that faith groups within a particular religion may be heterogeneous in belief, and congregation make up. The faith leaders had a clear understanding of the health needs of their congregations, and all the initiatives were tailored to the needs of the congregations.

The challenges have acted as 'brief interventions' about healthy lifestyles. Whilst they may not be able to explore the long-term impact of the sessions, the immediate feedback has been very positive for all the challenges. Further interventions with faith groups over an extended period may be useful to gauge whether these faith and health challenges are an effective means of improving the health of faith communities and their local communities.

All the faith leaders gave feedback outlining how the challenge events helped enrich their own knowledge and experience around health. One leader felt that 'The great thing about the project is that it made us self -aware.'. Whilst helping them to support the health needs of their congregations, the interventions inspired behaviour change around the leaders; further engagement and support with faith leaders around healthy congregation and communities may help create a top-down filter effect in health of the faith group

All feedback regarding the challenge event content was positive; feedback suggests that attendees learned something new during the sessions. While faith groups were able to feedback on reported changes in knowledge, attitudes, intentions and to some degree short term behavioural change, they felt less equipped to measure any longer term impact, although there was interest in understanding the level of impact faith groups can have on their congregations and local community through a more sustained intervention.

Good practice has been developed by the faith groups. Dissemination of the knowledge gained should be shared by Southwark Council, Community Southwark, and between existing faith community networks. Adequate support should be given to existing networks and forums to facilitate this. Where these networks are unable to provide support, development support may be needed to. A Faith and Health Forum, whether physical or online, may be useful in supporting this.

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<sup>&</sup>lt;sup>1</sup> Community Southwark, (2017) Faith, Seldom Heard Communities and Social Action,

This project was funded and supported by the Place and Wellbeing Team at Southwark Council. All the faith leaders indicated that provided the sessions came at a significant cost; for some, the funding partially covered the full cost of the events. Providing support for health challenges, or other means of delivering these messages requires resources.

The intention now is that we celebrate the evolving network and partnership and support it to sustain with a programme of ongoing support linked to the Faith Strategy. We will take stock of the learning, and consider with partners what can be done to move things forward and build on the understanding and experience so far. A plan will be developed for 2019/20 to capitalise on the enthusiasm and opportunities emerging and to take the next step in the challenge!

## **Appendix 1: Findings from Exploration event continued.**

## Ideas for supporting positive health

Training and events	Put in place mentoring talks on lifestyle and nutrition. The people who will do the mentoring could come from faith group members who have received training from the council's public health arm and other health-related bodies.	Invite doctors and nurses to talk to congregation	Organise classes and do lots of activities not just focus on prayer.	Seminars with youth, men, women e.g Helping kids to manage their finances and money
Work with particular parts of the community	Use men's' groups of faith groups to promote important health and wellbeing messages	Work with homeless people from broken homes	Form groups – e.g. elderly / young men. Do outdoor activities and cooking competitions (they don't realise they are eating healthily!)	Teams go into the community to listen and build relationships
Nutrition and exercise	Food: Needs to be better understood Important to everyone	Encourage congregation to eat well and exercise	Track and field activities	Safe space
Spiritual support for holistic health	Transformation and Spiritual Revival Needs to be available for time/caring Need to care for all	Talking and activities	Spiritual support	Provide opportunities and support in times of need

## What would help faith groups to make a contribution to addressing health problems?

There was a wealth of ideas about the types of things faith groups could do to support their communities and develop work around promoting positive health. There are some useful indicators here of what would be beneficial for faith groups in terms of a health and faith resource.

#### Joint working

- Inter/ Intra faith sharing on health messages
- Shared learning within and between faith groups
- The ways that faith groups communicate between each other, and the word outside needs to be explored.
- Support mechanisms for Faith Leaders
- Signposting information on for example
   academic careers, for young people. We also need to look at weaving in
   health messages to children in faith groups. The younger you expose them to
   appropriate health message the greater chances of positively affecting their
   health and wellbeing lifestyle as they grow and mature into adults
- Draw on good practice from for e.g. Carers for Life training posters
- It would be good to have links to faith groups being involved in social action activities that have health-related benefits e.g. Christian Against Poverty (CAP) and a link to Southwark Faith Directory where we can easily contact other faith groups, to explore health and wellbeing project ideas
- Have an up-to-date list of public health service professionals, including a GP list, for faith group members to signpost their members or anyone else they come into contact with would be really useful.
- Open up health-related training, an important part of pastoral care, for such faith leaders to support people where appropriate. South London and Maudsley Hospital (SLAM) does this but we could do with getting more of this kind of information from other health-providers.

#### Language

- The need to speak in one language speaking in other languages may cause significant barriers to collaboration
- Culturally sensitive messaging
- Using everyday language is key: we need to get better at linking the language of faith and scientific health and wellbeing as being in line with and compatible with the holy scriptures of different faith groups'.

Messages need to be relevant to the needs of the congregation/community

information portal where faith groups can access health and wellbeing information."

'We need something like a link to a

one-stop, perhaps online

#### Tips / good practice

- The faith needs to welcoming to all.
- Developing sense of community with faith groups
- Attractive activities
- Being creative
- Setting a good example
- Model behaviour that we want others to show
- Care for mind body and soul
- · Create access to those in need
- Care and listen
- Provide a place to fit in.
- The projects that are suggested need to be given thought as to whether they are inwards or outwards thinking
- The congregation needs to feel as though they are a part of the programme



Participants spoke about a variety of work that was currently taking place in their congregations. It highlighted that there is already a base to build on in the borough and we are not starting from scratch.

- Peter Baffoe, South London Mission, Bermondsey

   stressful environments
  due to threat of youth violence and parental stress; social regeneration and
  gentrification; football; mentoring and young champions
- *Kazeem Fatai* Health is wealth; diabetes, speakers on health
- Tanisha Fraser talked about wholeness; YP with no male role models and broken families:
- Ann Luther, Peckham Park Baptist Church -sharing facilitates; signposting; home visits;
- Yasmin Wemah Young men's football; diet for elderly and YP (cooking skills); tree planting;
- Informal promotional of health using health professionals in the congregations.

### How can we work together?

We asked the group what would make these projects a success? We wanted to learn what types of principles there should be in us working together and how we can ensure that the right people are involved.

#### Who needs to be involved?

- People who look and sound like the community
- Use ambassadors
- Mentor young people to take future roles



 Professionals within faith groups: Caterers; Medical; Counsellors – education programme

#### **How is no-one excluded?**

- Encourage everyone
- Understand varied culture
- Diverse and Inclusive
- People are people
- Health doesn't discriminate
- Health before faith
- Mindset always excluded someone
- Sharing ideas / respect / sharing and airing (not just me!) / better communication and coordination, solutions focused.
- There is potential for joint work in that we share the same problems
- Focus on environment, community safety and regeneration and take a holistic look at mind, body and spirit

## Principles of working together:

Sharing ideas

Respect

Sharing and airing

Good communication and coordination

Solutions focused

## **Appendix 2: Preliminary Groups Evaluation**

## 2018 Faith and Health challenge grant Programme

Name of Organisation

Contact details for project lead

#### **Initial Evaluation**

UNDERSTANDING		New idea/not considered		Just aware of the issue		Developing my skills		Reasonable level of skills		Good working knowledge	
		2	3	4	5	6	7	8	9	10	
I know about different health structures in Southwark that I can connect people to											
I feel confident to engage with my congregation to support positive health and wellbeing											
I feel positive about speaking to people about health issues											
I know who to speak to if I have any concerns about health issues of my congregation											

Plan for developing the project.

## **Appendix 3: Evaluation for Nutrition based Projects**

## **Evaluation form: Youth Rally Mission, Nutrition** Workshop,

Saturday 6th October

Age:	Gender:	E	thnicity:			
Do you define	yourself as having a disa	bility?	Yes	N	No	
The information y	details so that we can use the info ou provide on this form will be use It of this training session. Your pers and evaluation information on our o	d by Commu	nity Southwark tion will not be	cand Southwa recognisable	ark Council to	to help rting. All
☐ I consent to workshop.	you using the information in	this form to	o monitor th	e effectiver	ness of th	is
	w strongly you agree or disingly disagree' and 5 is 'sti			ments belo	w on a s	cale of 1
		1 Strongly	2 Disagree	3 Not sure	4 Agree	5 Strongl
n't know any more a oefore	about healthy eating than I	-		_		Strongl
pefore	about healthy eating than I	Strongly		_		Strongl
pefore  ow how the unhealth health	, c	Strongly		_		5 Strongl agree
pefore  ow how the unhealth  nealth  l positive about ma	ny food I love impacts on	Strongly Disagree		_		Strong
ow how the unhealth health el positive about ma n't know how to app ng habits What actions y	ny food I love impacts on king healthy changes to my	Strongly Disagree	Disagree	_		Strong

Do you have any other thoughts on the workshop today? (Anything you thought was particularly helpful or anything you think could have been better)

## **Appendix 4: Final Groups evaluation**

## 2018 Faith and Health challenge grant programme Faith Group Evaluation

Name of Organisation

Contact details for project lead

Grant awarded and breakdown or spend								
Grant Awarded	Details of Expenditure							

Description of Activities / interventions delivered

How many people took part in your activity

Do you feel your group has made new connections through this programme? Yes / No If yes please detail:

Please Rate the following statements:

UNDERSTANDING		New idea/not considered		aware the ue	Developing my skills		Reasonable level of skills		Good working knowledge	
		2	3	4	5	6	7	8	9	10
I know about different health structures in Southwark that I can connect people to										
I feel confident to engage with my congregation to support positive health and wellbeing										
I feel positive about speaking to people about health issues										
I know who to speak to if I have any concerns about health issues of my congregation										

What did you find most useful about undertaking this project?

What did you find most challenging about undertaking this project?

Do you have any thoughts on the process of designing and administrating the grant fund that Community Southwark delivered?



