

ACCM(UK)

Big Lottery Fund Project Name: Happy and Healthy Bedford Citizens

Evaluation Report for the period 1st October 2013 to 31st March 2015

[Includes areas of ACCM (UK) services that were expanded with support from additional funding by Lloyds Bank Foundation, Bedford Borough Council Bedfordshire and Luton Community Foundation, St Andrews Church Bedford]

1. Introduction

ACCM (UK) is a charity in Bedford the objects are *“the relief of poverty and sickness, the advancement of education, the preservation and protection of good health among minorities in England and Wales and other parts of the world”*.

According to their website one vision of ACCM (UK) *“is to enable minority and most disadvantaged communities in Bedford and surrounding areas are healthy and happy, that they are able to attain and enjoy the highest level of physical, mental and social well-being, irrespective of their age, background, origin, sexuality, culture, religion or socio-economic status.”*

With this in mind ACCM (UK) received funding from the Big Lottery to run their project named Happy and Healthy Bedford Citizens.

The purpose of this evaluation is therefore:

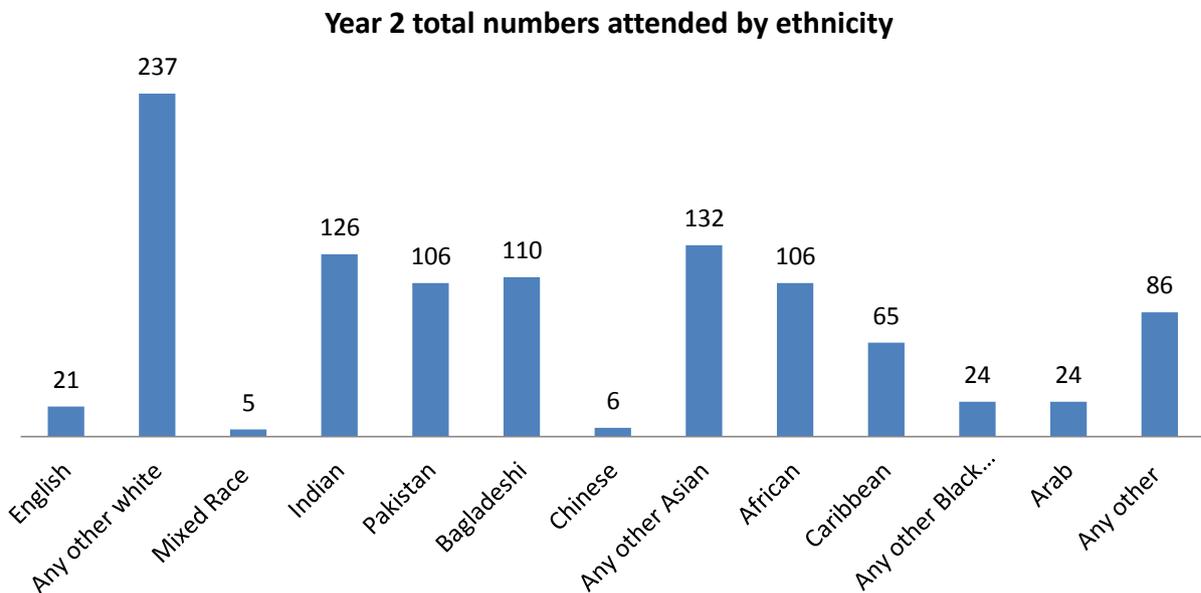
- To assess the degree to which project objectives were achieved.
- To examine the changes that resulted from doing the project.
- To provide input to guide decision making for future funding.
- To establish any lessons learned.
- To offer recommendations for project development and improvement.

An independent evaluation of year one, from October 2012 to September 2013, of the Big Lottery Fund project Happy and Healthy Bedford Citizens, conducted by Bedfordshire Rural Communities Charity (BRCC) concluded that good progress had been made addressing health inequalities in Bedford, nearly all planned project activities had been delivered and in some cases considerably exceeded. This evaluation report covers year 2 and the first six months of year 3 for the period from October 2013 to the end of March 2015.

Collection of data was compiled from a key stakeholder online survey conducted in year 3, March 2015, a health questionnaire of ACCM (UK) users completed during January and February 2015 of year 3, staff and volunteer activity logs and records of attendance, participant feedback recorded at time of activities, communication with management and staff, internet search and examination of the organisation’s records.

2. Findings

The total number of beneficiaries in year 2 for people who attended activities or used ACCM (UK) services was 1048 people, of which 35 were there in a professional capacity. Of these 78% (814) were women and 22% (234) men. A breakdown of the ethnicity of this number is summarised in the chart below.



Year 3 is currently running above targets, as the total numbers of attendees recorded at the time of this report showed over 1500 people had taken part in activities and events or used ACCM (UK) services. Therefore by the end of year 3 when final figures are available, project outcome numbers will have been exceeded. Numbers of attendees are highlighted at various activities further on in the report.

2.1. Progress measured against activities ACCM (UK) wanted to deliver in year 2 and year 3 of the project

Activity 1: Health and wellbeing activities

Year 2: Repeat running health and wellbeing activities - 3 walks for total of 40 women, run 2 healthy eating and nutrition to include Health and Safety, sessions - 25 women at each session. Run by volunteers and supported by staff

Year 3: Repeat running health and wellbeing activities - 3 walks for total of 40 women, run 2 healthy eating and nutrition to include Health and Safety, sessions - 25 women at each session. Run one session of health and wellbeing event for men.

ACCM (UK) exceeded their targets. Over 60 Health and Wellbeing activities occurred in year 2 and from the end of June 2014 up to 51 Health and Wellbeing sessions have been put on. In addition 12 Health and Fun sessions were held plus weekly coffee mornings. These sessions included different types of exercises e.g. yoga, tai-chi, aerobics, pilates, zumba, bums & tums and self-defence and kick boxing. Disease awareness, health talks and health checks covered amongst others diabetes, Alzheimer, dermatology, mental health, sexual health including HIV and AIDS, arthritis, breast cancer and the menopause. Learning sewing, knitting, and games presented the people of Bedford a variety of activities to try.

Health and wellbeing events for men included prostate cancer awareness, diabetes awareness and health checks.

Health and wellbeing sessions organised and run weekly for Italian Senior Citizens including healthy talks, nutrition, yoga and tai chi with on average 40 people attending every week.

Health and wellbeing activities organised and run weekly for senior citizens at the Conduit Day Centre including mind games, yoga, talks on health and wellbeing and nutrition. On average 10 people attended weekly.

Sessions have been held at ACCM (UK) as well as other locations in Bedford namely Caudwell Community Centre, Westbourne Community Centre, Conduit Day Centre, Peter Pan Nursery, Ramgharia Sikh Society, Gulshan-e-Baghdad Masjid and Srir Guru Ravidass Community Centre.

Activity 2: Run parenting sessions

Year 2: Repeat running parenting events - 4 this year for 100 parents being run by volunteers supported by staff

Year 3: Repeat running parenting events - 4 this year for 100 parents.

Sessions have been delivered that offer parents ESOL, keeping children safe, physical activity, safety at home and healthy eating. A Fire Safety at Home (for men mainly fathers) held at a local centre had 500 attendees.

Activity 3: Recruit volunteers

Year 2: Organise and run pilot for 10 migrant men. Male volunteer recruited

Year 3: Recruit 2 professionals to be trained as Professional trainers to provide support and information to colleagues. Develop professional information pack.

Year 3: Recruit 3 professionals and 5 volunteers and train them as in Year 2.

Of the six volunteers (two of whom were male) recruited in year 1, two remain as volunteers, one gained a paid job with ACCM (UK), one became a school assistant and one moved out of Bedford area. In year 2 and year 3 a further 5 more volunteers have been recruited and in year 3, ACCM (UK) has 8 volunteers, one of whom is male.

Eight religious leaders recruited work closely with ACCM (UK) and have been key to some of ACCM (UK) delivery of events as they have promoted events, recruited beneficiaries, then reported and fed back on areas of concern and interest.

Over 110 professionals have been trained or involved in workshops. Professionals use ACCM (UK) as a venue for delivering services and activities as beneficiaries find it more convenient, comfortable and easily accessible.

Activity 4: Events

*Year 3: Run event to bring parents and children together - 300 to attend
Hold grand final event to celebrate and evaluate end of project*

At the time of the report the grand final event was yet to take place.

Other activities undertaken included:

- One off events included FGM Conference held in December 2014 with 45 attendees.
- International Women's Day event with 40 participants in March 2015. This was a one day event to bring local ladies in Castle Ward who had never celebrated any event to get out and celebrate women's achievements, including sharing ideas and encouraging them to take up opportunities, including learning English.

2.2 Progress measured against project outcomes

The Happy and Healthy Bedford Citizens project had four expected outcomes that formed the basis against which the findings of this report were evaluated:

- Outcome 1: Over the life of the project, Bedford people will have experienced improved health and well being.
- Outcome 2: Children and young people (the whole family) will experience improved health (especially mental health and hidden domestic abuse) due to more relaxed and more reasoning parent, resulting in a healthy home environment leading to increase in academic achievement.
- Outcome 3: Beneficiaries will benefit from improved and user friendly services as professionals will be trained, informed and sensitised. Religious and community leaders will be more supportive.
- Outcome 4: Volunteers will have gained confidence and skills leading to professional volunteering or paid work opportunities.

A set of change indicators against which the project was to be measured for each year, was agreed with Big Lottery at the beginning of the project and is detailed in the table below. Indicators for the whole of the project have been included, as some of these indicators were recommended to be measured later than year 1 or had been partially covered in the BRCC March 2014 Evaluation Report.

Project outcome	Indicator	Level	Timescale
Outcome 1	Participating numbers. Feedback on changes made in food preparation, exercises, healthy, happy, and confident in making changes to family's way of living. More people requesting similar activities	50	By the end of year one. Repeat every year
	Feedback from participants showing men's change in attitudes on health and wellbeing, seeking help and advice earlier, attending health check clinics	10 - 15	By end of year two. Repeat every year
	Numbers being referred and supported from volunteers, counsellors, GPs, ACCM (UK)	75 in Year 1 100 Year 2 100 year 3	By the end of the project
Outcome 2	Improved confidence in parenting, supporting for children at school or seeking help whenever needed	50 parents 100 parents	By end of year one By end of Year 2
	Numbers of homes with healthy and safety equipment installed (smoke or fire alarms), or checked	40	By end of year 2, repeat each year
	Number of parents and children attending. Feedback from children saying there are improvements in their home freedom, safety and are happy	350	By the end of the project
Outcome 3	Increase in number of professionals saying they understand beneficiaries better	60	By end of year one
	Increasing number of religious and community leaders involved	8	By end of year three
	Beneficiaries say there is improved access to services that are more friendly and provision of interpreters and relevant information	250	By the end of the project
Outcome 4	5 unemployed volunteers recruited and trained by end of Year 1. 6 in Year 2 and 5 in following three. All first 5 trained volunteers will qualify at the end of Year 1	11 have applied by only 5 Volunteers have been recruited	By end of year 1 – certificates awarded
	From Year 2 volunteers competent, running activities, undertaking feedback and focus groups and writing reports	Anticipate to still have 3 qualified and 4 new recruits	By end of Year 2
	At least majority will have secured paid employment or still volunteering. They will recruit, support and train new volunteers from own communities to enable continuity of our work	4 volunteering for ACCM (UK), the others will have moved into paid employment or volunteering elsewhere	By the end of the project

Outcome 1: Over the life of the project, Bedford people will have experienced improved health and well being.

Indicator year 2 and 3: 50 Participating numbers. Feedback on changes made in food preparation, exercises, healthy, happy, and confident in making changes to family's way of living. More people requesting similar activities.

This indicator has been met. ACCM (UK) records showed attendance figures at these sessions exceeded target figures. Nine Health and Wellbeing sessions at just one location Westbourne, with an average number of attendees of 15, equated to 135 participants and therefore surpassed the indicator target. During health checks 30 women found out they had diabetes and have consequently received treatment, changed their life style and 2 lost weight.

Feedback at Health and Wellbeing sessions recorded in staff and volunteer logs included general comments from participants:

- They feel more relaxed after the laughter yoga, happier.
- They have improved their level of exercise, health awareness.
- Really like and enjoy doing exercises.
- They really enjoy sessions looking forward for more and expect them to continue.
- They do more exercise now.
- How to cook more healthy meals and avoid further health problems.
- They learned new things about food, how to mix them and right portions.
- Learned more about diabetes and they changed way they cook. Very happy with change.
- The elderly learned that yoga and mind games helped them relax and sleep well and the activities have led to meeting and making new friends reducing isolation and depression. They want more.

Further feedback provided by ACCM (UK) showed 20 older users had gained confidence in making further changes and taken up swimming. Individual personal story quotes support this:

"I attended coffee morning organised by ACCM (UK) they had health and wellbeing sessions running and I was asked to get involved by the project worker, in the laughter yoga session. I felt like my stress was completely gone. I felt so much better had so much energy. I am so glad we have ACCM (UK) to support us ladies in our wellbeing. These programmes should continue to be available to us".
Mrs K

"I was approached by the project worker at ACCM (UK) I was really impressed with their services, glad to know there was free exercise classes for women run by ACCM (UK). Since I have been attending the health and wellbeing session now I am feel more active and it has improved my diabetes. I am grateful to ACCM (UK) for running activities in the communities. This has improved a lot of ladies health". Mrs Nasreen .B

Indicator year 2 and 3: 10-15 Feedback from participants showing men's change in attitudes on health and wellbeing, seeking help and advice earlier, attending health check clinics

ACCM (UK) offered sessions to specifically target men which included diabetes awareness, prostate cancer awareness and health checks. Three sessions alone had 44 participants and feedback recorded showed some impact had been made on men's attitude to health and wellbeing for example a man who attended the prostate cancer awareness said "If I have the symptoms go to the doctor." Although 4 men were recorded as having strokes during the year two period, it was fewer than in year one, this could be evidence that people are seeking medical help sooner and been made aware of health risks so changed lifestyles. In feedback to ACCM (UK) men said they saw their doctor more and improved health awareness. The indicator was therefore met. Other feedback recorded under general comments was:

- I didn't know the diabetes effect.
- This will improve our health.
- It has enhance my awareness.
- I have talked to my wife and mother to change how they prepare our family meals.
- I have better understanding.
- I thought prostate was something that affects you in the head but was shocked to learn. where it was. I am more careful now and will be visiting my doctor soon.
- They were happy to know about their health and what precautions to take and how friendly everyone was.

Indicator year 2 and 3: 100 Numbers being referred and supported from volunteers, counsellors, GPs, ACCM (UK)

ACCM (UK) in partnership with Terrance Higgins Trust introduced sexually transmitted disease (STI) programmes, over 100 men and women were checked. This ACCM (UK) noted was a big surprise as the Asian and African communities are often reluctant to talk about sex however feedback showed:

- They were very receptive with all the information given about STI. Everyone had a test.
- 5 women referred their partners who turned out to be positive.
- They want more checks locally away from GPs surgery as they find them more private and GP will not talk to family or community.

Counselling and support services:

These were developed to help 6 Asian male victims of historical child sexual and domestic abuse. Feedback by the end of year two showed 5 of the men started to talk more openly about their abuse. This resulted in 1 man stopping drug taking, 2 men reducing alcohol and drug taking. Another started in a relationship, which he could not do before due to trauma and depression. One victim still finds it difficult to talk about it and recently had a stroke. ACCM (UK) is still trying to support him.

Other referral and support feedback included:

"I was thrown out from my house with my child I had to accommodate myself at the park with my child. I phoned a lady that knew Sarah she put me through to ACCM (UK). ACCM (UK) helped me as soon as I phoned them they got me a safe accommodation in a refugee for me and my son. They are also helping me with my indefinite stay to remain in the UK. ACCM (UK) staff has been very supportive I thank them for being there for women like myself". Ms B

"Through ACCM (UK) and their support I now have a home, access to benefits to support my son. I have also gained my Citizenship. If it was not for the support of ACCM (UK) I don't think I would be here. Thank you." Ms A

"When ACCM (UK) helped me with my three into a refugee to flee domestic abuse, they have continued to support me and my kids. We are now fighting for a divorce and ACCM (UK) has provided us with the best lawyer to ensure we are safe and happy. I would not have managed without ACCM (UK)s continual support as I am far away from my family and friends." Mrs F

The NHS Bedfordshire Clinical Commissioning Group in its Bedford Locality Development Plan 2013/14 under non-clinical engagement section stated it would *"continue to work with voluntary sector around health inequalities agenda in particular ACCM (UK) who have received central funding to address inequalities across Bedford Borough."*

The Bedfordshire Police and Crime Commissioner's online diary June 2014 recorded *"PCC is meeting with ACCM (UK) to discuss harmful crimes committed against women and girls including Female Genital Mutilation (FGM) and Forced Marriage."*

Outcome 2: Children and young people (the whole family) will experience improved health (especially mental health and hidden domestic abuse) due to more relaxed and more reasoning parent, resulting in a healthy home environment leading to increase in academic achievement.

Indicator Year 2: 100 Parents. Improved confidence in parenting, supporting for children at school or seeking help whenever needed

The BRCC March 2014 Evaluation Report highlighted the needs of those who do not speak English well; ACCM (UK) continued to address this issue with ESOL and computer sessions. Nine sessions put on between October and December 2014 had an average attendance of 16 per session. Parents told ACCM (UK) they felt able to support their children with research for homework. After graduating in ESOL, 5 parents had become school assistants.

Parenting sessions covered various topics such as healthy eating, nutrition, communication skills, positive parenting, physical activities, keeping children safe and safety at home. ACCM (UK) feedback says children and young people's home lives are better and happier, although 6 children said they miss fizzy drinks at home. Further feedback showed parenting skills and confidence had grown:

- Better knowledge to support their children and how to communicate with them.
- Enjoyed parenting sessions very much.
- Majority said they are now better listeners .
- Majority said they were more patient.
- They laugh more at home now and do more with their children than before.
- I learned about proteins, my son takes them after football training.
- We learned how to communicate with our children, though need more help.

One to one counselling to parents_during year two supported 24 women and 4 men with depression. Of these 8 said they talk to their children more and were less stressed or managing their depression better after yoga or relaxation sessions. ACCM (UK) records show support was given to 3 mothers, to move to refuges, away from domestic violence that enabled them to start happier lives. One 13 year old boy said:

- He had never slept all night before without having to hear the shouting and banging or his mother crying loudly. He says he is happy.

A client thought of the support given by ACCM (UK):

"I was feeling and depressed when I attended and event at ACCM (UK). I felt comfortable with staff and felt they could help me. I approached the Project Worker, who listened to my problems, arranged for me to see a Councillor. I continued to attend events organised by ACCM (UK) with counselling I built my confidence and got my life back. I have now set up a business because of this new life and confidence. Thanks to ACCM (UK)" Mrs Kulsma Begum

Another in a refuge thought:

"I am so happy my children are doing so well, happy even if they miss their old friends they have made new ones. I do feel lonely sometimes but I know Sarah and ACCM (UK) team are at the end of the phone. When my case goes through soon I will start a degree in teaching at College. Thank you so much for supporting me and my kids." Ms F

"Thank you Sarah, you came to my wife's rescue when she was so low, had hit the bottle and our relationship was on the rocks. She has joined the AA, is calmer and looking forward to get back into her career.." Mr M

Indicator Year 2 and 3: 40 Numbers of homes with healthy and safety equipment installed (smoke or fire alarms), or checked

ACCM (UK) organised a Fire Safety at Home (for men) session in December 2014 at a local mosque which recorded 500 attendees, their feedback was:

- Many people didn't have fire alarms fitted. The fire brigade will fit them.
- They learned how many amps they can plug in an extension.
- In case of fire they know what to do now.

In year three the Health & Wellbeing activities included a Fire Safety at Home and 3 Safety at Home sessions with a total of 36 attendees. Although final indicator numbers of actual houses checked are not yet known, more families gained knowledge of fire safety.

Indicator by Year 3: 350 Number of parents and children attending. Feedback from children saying there are improvements in their home freedom, safety and are happy.

African Caribbean Youth Group:

ACCM (UK) worked with young people to raise awareness of domestic abuse and other harmful practices, highlighted in government and media campaigns and found they were now more confident to ask questions or seek help. As the project developed users became familiar with the work of ACCM (UK). An African Caribbean youth group was set up in year three that meets weekly with on average 28 participants, this provided a neutral ground for some parents and young people to come together and have conversations they could not have at home.

‘We all like being here where we can talk about anything, someone is here to listen and give advice. At home our parents do not talk to us and we spend all our time in our rooms playing games, or surfing the net. We don’t have ‘real’ friends just fiction friends on line and no social life... In the Youth Group we are talking to each other and not looking at our mobiles. We are starting to learn to relax, build our confidence and ignore bullies on line as we now know we don’t have to read the information....’ Focus group feedback from Youth Group held at ACCM (UK) for 15 to 19 year olds.

And one 18 year old boy stated:

“I was drifting when I talked to ACCM (UK) Director when she found me sitting outside the door of her office building. I have now joined ACCM (UK)’s Friday Youth Group and have met others with similar issues. So happy Sarah talked me and I opened up to her.”

ACCM (UK) have realised that although at first this group just wanted a neutral place to ‘chill out’ they need further support with members saying:

- They want to be more active and require more help.
- They want to play table games e.g. table tennis, football and board games.
- Need help with homework for those struggling in school.
- Help with relationships especially building new 'real' friendships not having to rely on technology.
- Those over 16 are requesting support in getting into college or into apprenticeships, as they become aware that they will not get benefits if they drop out of school.

The Italian Senior Citizens Group:

The group continues to meet weekly, on average 40 people per week, with numbers growing as more senior citizens hear about the group. Yoga and dancing to Italian musical instruments are favourite activities although they also listen to health talks.

“Until I started taking yoga organised by ACCM (UK) I have not slept properly for three years since my husband passed away. I am happier, relaxed and sleep well. Thank you for the yoga. I Hope you don’t stop them.” Mrs Chirico

Working with the Italian Senior Citizens ACCM (UK) staff said they had identified new issues of concern which included:

- Domestic violence abuse from their children.
- Isolation and loneliness amongst the elderly.

However more positively ACCM (UK) activities have resulted in:

- Users’ love of yoga that they say has helped improve their sleep.
- Meeting weekly has enabled many to make friends.
- Requests for more external activities organised by ACCM (UK) including trips to interesting places such as museums and the beach.

The Ghanaian Family Group:

Continues to meet once a month with various topics and issues discussed. The group mainly meet to support each other, especially single men who work long hours in factories and have no friends. ACCM (UK) supports the group by offering a free venue, refreshments and arranges for professional support, including health checks for the group. Feedback from the group:

“..we have somewhere to go and meet, share information from home, support each other. When one of us passed away we were there to support his family. Thank you to ACCM (UK) for offering the venue and encouraging us to meet...”. Geoffrey the Group Lead

Since they started attending the monthly events held at ACCM (UK) users have established or found that they had problems such as:

- Working long hours and not visiting their GP.
- Living in isolation.
- Unaware of high prevalence of hypertension and diabetes problems amongst Africans.
- When checked for HIV 4 people were found to be positive and not aware of it.

ACCM (UK) found that the general feeling was that users acknowledge not doing enough before to improve their lives and would like to change this. They now want to increase the number of times they meet, want more health and wellbeing activities and information to help them change their life styles, improve their health and live longer.

Self-defence and new skills sessions:

18 Asian women did kick boxing sessions the feedback to ACCM (UK) showed they speak confidently of “no more abuse from mother-in-laws or partners.” The sewing sessions introduced new skills feedback included:

- They are really enjoying it as they know the basics now and they are learning how to make a dress

“I also wanted to sew clothes but didn’t have enough money to learn and to go on a course. I heard about ACCM (UK) they help people with a lot of things. I contacted them and they have organised sewing classes for women for Free. I am really happy with ACCM (UK) this will now help me to start a clothes business from home where I will start to make some income.” Miss F

Feedback from Children:

Feedback to ACCM (UK) from children was positive and home lives are better and happier. One 14 year old girl said her mother is now so strong she inspires her and that she is now doing karate at school. Parental feedback was also positive one said:

“Health and equalities project worker at ACCM (UK) has come in our life like a angel. She has supported and mentored our young 21 year old daughter. With ACCM (UK) Support our daughter has found a good job KEEP UP THE GOOD WORK!!! Mrs R

Other feedback recorded included from an 8 year old girl whose mother was in a refuge:

“I am doing karate and I am the best. I love reading and the best in English and reading at school. Before I used to pull my hair out and cry myself to sleep not any more. Please don’t take us back to my dad and his family they were bad people.”

And the 14 year old son of a woman in a refuge said:

“Since we left my father and his family three years ago, I have been so happy, I am at the top of my class in sciences, I do football and running as well. I am no longer hating it when girls look or smile at me as I hated it before because dad used to tell me girls and women were evil. The best thing is Mum is so happy even if she feel lonely sometimes as we are so far away from our friends.”

And feedback from the family as a whole reflected positivity:

“You have helped me and since met you I feel my children trust the Project Worker and staff at ACCM (UK) and they feel happy and trusting like ACCM (UK) will help and support them too. We need more of ACCM (UK) to reach to more people like us.” Mrs P. and son

“My mum used to be always stressed with issues it would always show on her face. Since ACCM (UK) Project Worker met mum, it’s like mum is a new person, suddenly getting better. Mum has improved since she started going to ACCM (UK) health and wellbeing sessions. I am pleased to say my mother is now smiling more often and is getting her confidence back”. Mrs. P’s Daughter

“My mum self-confidence has come back since she has started to attend the health and wellbeing sessions run by ACCM (UK). I feel as if my mum has come out of a cage!! Also my your dermatology drop in clinics have made my mum feel as if she can look beautiful again, so thank you for opening the doors for mum as she wants to go to more of them to keep her sanity”. Mrs Safina’s Daughter

When my daughter told me to go to ACCM (UK)’s at first I refused, then she said my neighbour was going so I went. I enjoyed the yoga it made me relax. I went to more activities and have made friends and talk to my neighbour more now. Thank you so much to my daughter for pushing me to go and ACCM (UK) for running activities’ and want to go to more of them in the future. Mrs Safina

Outcome 3: Beneficiaries will benefit from improved and user friendly services as professionals will be trained, informed and sensitised. Religious and community leaders will be more supportive.

Indicator Year 3: 8 Increasing number of religious and community leaders involved

From year two 8 religious or community leaders started to work closely with ACCM (UK). Two of these leaders were involved with ACCM (UK) organising events and activities especially for Asian men and allowed ACCM (UK) to use their halls. The leaders promoted the work of ACCM (UK) to their congregations. New volunteers recruited from the communities meant professionals could use trusted interpreters to help and support users.

Indicator end of project: 250 Beneficiaries say there is improved access to services that are more friendly and provision of interpreters and relevant information

This indicator is to be measured at the end of the project although ACCM (UK) confirmed their premises new location, with a meeting room, has led to an increase in user numbers for activities, information and signposting elsewhere. However the 250 beneficiaries’ number has been surpassed as by the end of year two attendance figures showed over 1000 beneficiaries had been supported or participated in the various events and activities.

Professionals used ACCM (UK)’s venue as it was more convenient and accessible to beneficiaries one of whom said:

“Whenever I have a problem I go to see the project worker at ACCM (UK) I feel so much better. Thank so much for all your kind support” Mrs A

Outcome 4: Volunteers will have gained confidence and skills leading to professional volunteering or paid work opportunities.

Indicator Year 2: From Year 2 volunteers competent, running activities, undertaking feedback and focus groups and writing reports

Volunteers were fully trained and running activities. Records kept and feedback was recorded at activities and events. This indicator was achieved.

Indicator by end of project: At least majority will have secured paid employment or still volunteering. They will recruit, support and train new volunteers from own communities to enable continuity of our work

After two and half years 6 have gained paid work, , one gained a paid job with ACCM (UK), one became a school assistant, one moved out of Bedford area and 8 people are still volunteering for ACCM (UK). From the community 8 religious leaders work very closely with ACCM (UK) at various levels including promoting activities, providing free venue and feedback from users.

Feedback from volunteers:

"I approached ACCM (UK) when I was low, a victim of domestic violence and self-harming. Talking to Sarah, she listen and told me you are not alone am here to help and support you, I will do everything in my power to help you. Sarah's words changed my life. At that moment I had seen a bright light at the end of a dark tunnel. Sarah arranged counselling for me and offered me a volunteering post. My life has now changed, full of confidence, now have a part time paid job with ACCM (UK) to help others like me." Mrs R.k

".. as a member of a Board at the Gudwara, I felt I was only supporting one community or group. Joining ACCM (UK) as a volunteer I am now supporting and working with all communities at all levels and on different issues. I am so grateful for this as I am life is now fulfilled." Mr P

ACCM (UK) secured further funding to recruit session workers and more volunteers from 'Awards for All' and Bedford & Luton Community Foundation. The extra funding enabled ACCM (UK) to run more activities and pay for professional support services for victims.

2.3 Progress measured against key stakeholder feedback surveys

Health Questionnaire

ACCM (UK) conducted a health questionnaire during January and February 2015 of year three looking at the health needs of minority and most disadvantaged communities in Bedford. It was completed by 47 users of activities and events provided by ACCM (UK). The findings are currently being processed but some responses to key questions and feedback are outlined.

Question: What do you think are the causes of ill health amongst minority and other disadvantaged communities such as migrant communities, elderly, unemployed or young people in Bedford?

Some of the answers were:

- Not enough support & education groups that deal with ethnic minority communities, spread awareness.
- Lot of myths about health.
- No education on these illnesses, smoking, drinking excessively.
- Isolation, not speak English to use services, poverty.
- Neglect pride, lack of knowledge as to where to seek help.
- Not knowing what is wrong.
- Lonely, being alone, diet.
- Depression, loneliness, diabetes, heart disease, blood pressure, health conditions not aware of how to manage.
- People lazy, don't trust system, problems at home.
- Do not visit doctor especially men, language problem, culture & religion, services not relevant, leisure centres far away & expensive.
- Men too busy no time for doctor.
- Working long hours African men, not visiting doctor.

It is clear from the feedback that the activities and events ACCM (UK) provided addressed specific needs raised by the community.

Of those who completed the questionnaire 30 had attended ACCM (UK) activities and events before and said how they had benefited them:

- I am a better mother, calm, listen more and talk a lot with my children.
- Fantastic improved level of knowledge and fitness.
- Better parenting skills, not to shout at kids, calm and talk. Cooking healthy food less salt, no sugar drinks for children anymore.
- Started walking everyday.
- Meeting new people, able to understand mental health issues and know it is ok to talk.
- I feel confident.
- Don't have sugar in tea, eat more fruit and veg, walk every day.

- Helping me move on from trauma, child sexual abuse without ACCM still be taking drugs and drinking.
- Yoga was fantastic relieved all my stress.
- Health checks saved my life as I was sent to doctor. Nearly had stroke but now better.

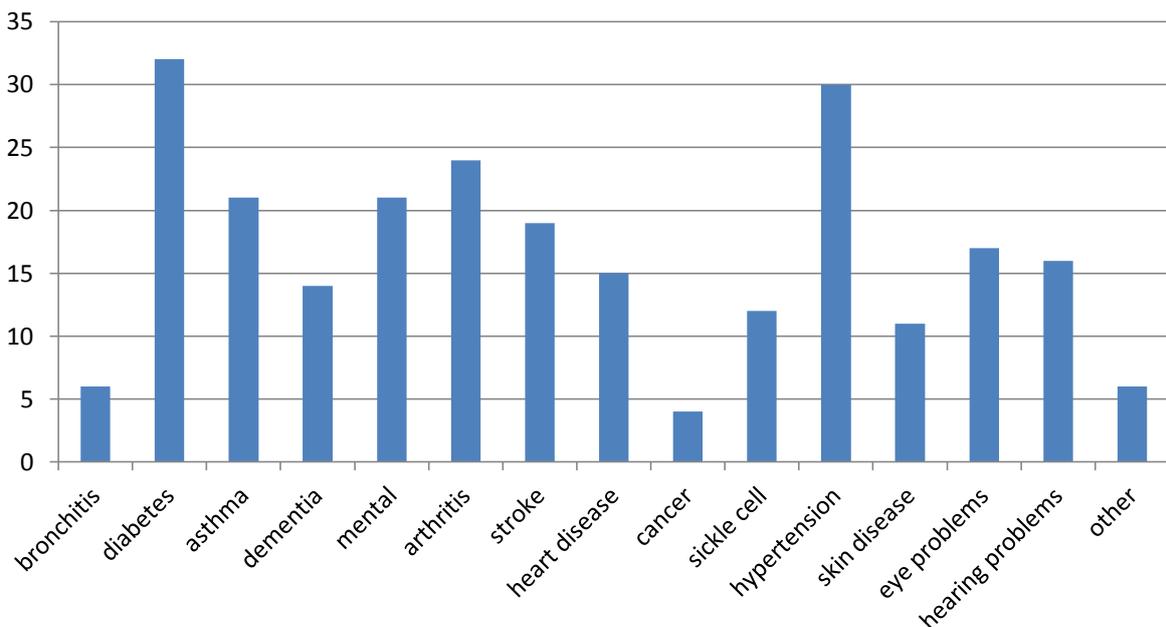
This feedback confirms Bedford people experienced improved health and well being.

Of the 17 remaining respondents who were new to ACCM (UK) (6 of whom were men) the main reasons for not attending were:

- Not aware but interested will attend in future.
- First time hearing about it.
- Busy working.
- I did not know about it.
- Hope to attend to see what's provided.

Question: Do you or anyone you know suffer from any of the following ailments?

Answers to this questioned as summarised in the graph below, showed prevalence of various diseases and a continued need for health support across a wide spectrum of ailments.



Question: Do you or anyone you know suffer from any chronic illness? (such as diabetes, heart, high blood pressure)

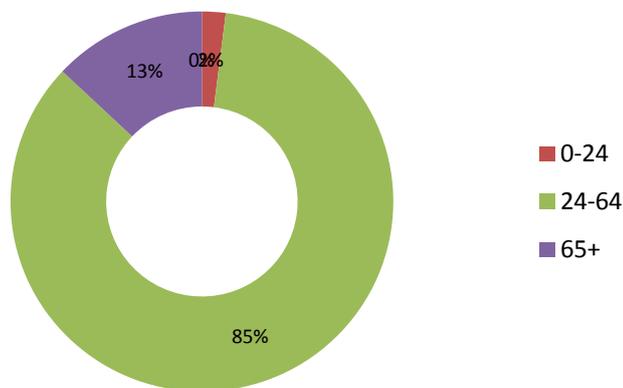
Here 29 respondents answered yes, that they themselves, parent, children or partner did suffer from chronic illness. The numbers of people that named specific chronic illness, some listing more than one were:

Diabetes 12	Hypertension 14
Asthma 3	Eczema 3
Arthritis 3	Dementia 2
Stroke 1	Mental illness 1
High cholesterol 1	Heart problems 4 (included 1 who had undergone bypass surgery and a husband and wife who had both had heart attacks)

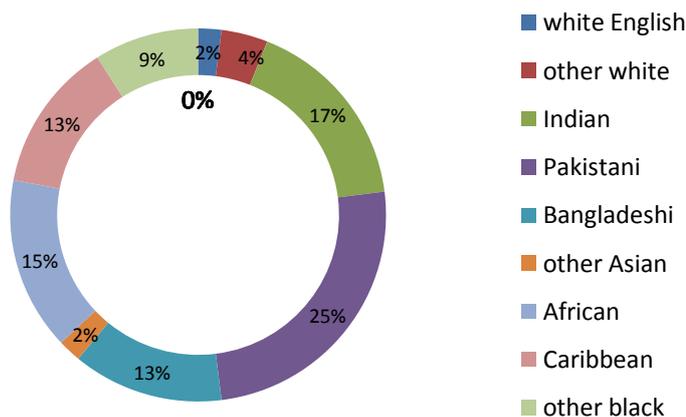
This evidence shows ACCM (UK) reached their targets users to enable improvements in access to services and lifestyles to take place.

The gender of respondents was 15 male and 32 female. The age range and ethnicity of respondents was as recorded in the charts below;

Age range of health questionnaire respondents



Ethnicity of health questionnaire respondents



ACCM (UK) management say that while ACCM (UK) has been working on reducing health inequalities in such areas as diabetes, hypertension, mental health, heart disease and recently skin disease, the user survey has identified new areas of concern. These include asthma, arthritis, eye problems, sickle cell and hearing problems and they also found the survey results showed that the organisations previous knowledge of the prevalence of diabetes and hypertension amongst their users was understated showing the need for further support.

2.4 Progress measured against online survey of stakeholders

The online survey was conducted in March 2015 and to assist comparison, contained the same questions as in the previous survey carried out in the BRCC March 2014 Evaluation Report. It was sent to 31 key stakeholders involved with ACCM (UK) in a variety of roles e.g. professional, tutors, peer or other services providers and organisations.

General findings from the replies received showed that as result of ACCM (UK)'s work, they understand much better (50%) and slightly better (12.5%), the needs and requirements of people from BME, migrant and/or other hard to reach communities.

Based on their own experience and/or that of their clients how valuable do they think ACCM (UK)'s work is addressing health equalities in parts of Bedford 50% answered very valuable 37.5% quite valuable and 12.5% didn't know.

Views added about ACCM (UK) and its work included:

- Good focus and contact with the local BME communities.
- I have been very impressed with the helpfulness and enthusiasm of the ACCM Team, they have made my outreach work much easier and effective.
- They are the best.
- The staff at ACCM(UK) are friendly and professional and obviously have a good relationship with their clients.
- ACCM (UK) provides a fantastic level of service and we are proud to work with them to achieve access to services for all. We thank them for their help & support over the past few months and pledge our dedication and support as they continue on their path for equality. Well done ACCM.
- With BRECC's closure in 2013, there became an extreme gap in providing services to migrants in Bedfordshire. ACCM (UK) fulfils an important role in bridging this gap especially for migrants from beyond Europe which they are highly specialised in dealing with.
- We would like to involve more of our clients in ACCM's valuable awareness raising events.

Overall a positive response from stakeholders was given helping ACCM (UK)'s reach outcomes and fulfil set indicators for the project, also 80% said they will be working with ACCM (UK) in the future and 20% would be available if needed.

3. Conclusion

In assessing the degree to which project objectives were achieved; the project as at the 31st March 2015 has met most of the indicators set and in many cases exceeded target numbers. The majority of planned project activities were successfully implemented. In fact their success led to the need to seek further funding, which made it possible for further unplanned services and support to be delivered.

In examining the changes that resulted from doing the project; feedback from participants, other service providers and the community, supported the work of ACCM (UK) and showed Bedford Citizens awareness and understanding of health and wellbeing matters increased. Feedback also reflected changed attitudes, increased confidence and happiness of individuals, families and professionals. As the project has a further six months to run target numbers are expected to be even higher so enabling outcomes to be achieved overall.

In establishing any lessons learned; one key element is the level of trust that has gradually built up within the community, that led to clients who were victims of abuse approaching ACCM (UK) for help, this in itself was an unexpected outcome.

The work of ACCM (UK) was also well recognised by other service providers and the charity was a nominee for the Emma Humphreys Memorial Prize 2014.

The reputation of ACCM (UK) and its ability to deliver services to the citizens of Bedford was echoed by the members of the local community on the Bedfordshire Community Awards website:

“Bedfordshire Community Awards was created in 2014 by June Kuria. Together with a few friends we saw many people in the community doing their job without a need to be thanked, these people go unnoticed because they do not want any fuss. The communities involved are, Community groups such as :Music 4 memory group, Queen's Park Community Orchard, friends for life, Biddenham hand bell ringers, Women's group (ACCM)UK ,Health organisations (GP surgeries, health fitness groups), Queen's park Women's group and many more should consider nominating someone who is doing a good deed “unsung heroes”.”

4. Recommendations

In the ²Profile For Bedford Locality 2013, recommendations were made to improve primary prevention of diseases especially diabetes, cardio-vascular, respiratory, cancer and obesity encouraging healthy lifestyles, healthy eating and weight loss, stopping smoking and reducing alcohol intake. ACCM (UK) having made valuable inroads into hard to reach communities and having founded good relationships with those people, should seek further funding to carry on their activities and services that have addressed the primary prevention recommendations.

The need to secure further funding is significant as feedback showed users and beneficiaries would like continuation of ACCM (UK) activities and services as they are more aware of the benefits and improvement in health. Changing health concerns plus new areas of health and wellbeing needs identified and as found in the beneficiaries health questionnaire confirm more work is necessary. Also unforeseen issues, such as the sexual abuse amongst Asian men, increasing numbers of men coming to ACCM (UK) for assistance and women seeking support from domestic abuse indicates problems that still need to be addressed further.

As people move in and out of communities some may not have heard or know about ACCM (UK) as was mentioned in some feedback in this report. This highlights that more resources and funding are needed for ACCM (UK) to continue to work and reach out to any newcomers to the Bedford area therefore recommend to increase promotion of the work of ACCM (UK), for example through social media, schools network and the general community or through more volunteers, to ensure the target population continues to be reached.

References:

¹ Bedfordshire Clinical Commissioning Group NHS. Bedford Locality Development Plan 2013/14.
file:///C:/Users/user/Downloads/1365167398_MLVK_bedford_local_delivery_plan_2013-14.pdf

²Anthony Scanlon, Edmund Tiddeman. Bedford Locality – Locality Profile 2013. May 2013.
[file:///C:/Users/user/Downloads/LOCALITY%20PROFILE%20BEDFORD%207.0%20final%20\(1\).pdf](file:///C:/Users/user/Downloads/LOCALITY%20PROFILE%20BEDFORD%207.0%20final%20(1).pdf)

Appendix: