



May 2011

What is the impact of the CFHS small grants scheme?

Since 1997, CFHS has run an annual small grants scheme for community groups to develop food and health activities with low-income and vulnerable communities.

This factsheet provides a summary of evidence gathered by CFHS that demonstrates the reach and the impact of the scheme. It will be of interest to organisations interested in the impact of investing small amounts of funding into community-based or community-led initiatives.

In 2008, 2009 and 2010 CFHS carried out an Equality Impact Assessment (EQIA) of the small grants (both successful and unsuccessful) to determine the reach of the scheme. This explored both the geographical reach, and the reach within vulnerable communities in Scotland and has helped enable CFHS to plan targeted promotion of the small grant scheme. In addition, in 2010 CFHS commissioned external research to establish the longer term impact of the small grants scheme. To do this we explored the impact of a sample of small grant recipients from 2008.

The full report from this research can be found on the CFHS website.

The annual budget for the CFHS small grants scheme has increased each year: £100,000 (2008), £140,000 (2009), and £147,000 (2010).

Since 2008 the grant scheme has attracted 729 applications over the three year period, 173 of which were successful.

The intended outcomes of the small grants scheme are:

- **a.** Community and voluntary groups undertake work to address barriers to accessing healthy food in low-income communities across Scotland, through accessing small grants of 'seed' funding.
- **b**. Through evaluating activities funded by the CFHS small grants scheme, community and voluntary groups use their learning to develop future activities within low-income communities.
- **c**. Community and voluntary groups recognise the value of sustaining food and health activities within low-income communities and are stimulated to plan and carry out future food and health activities.



Who is the small grant scheme reaching?

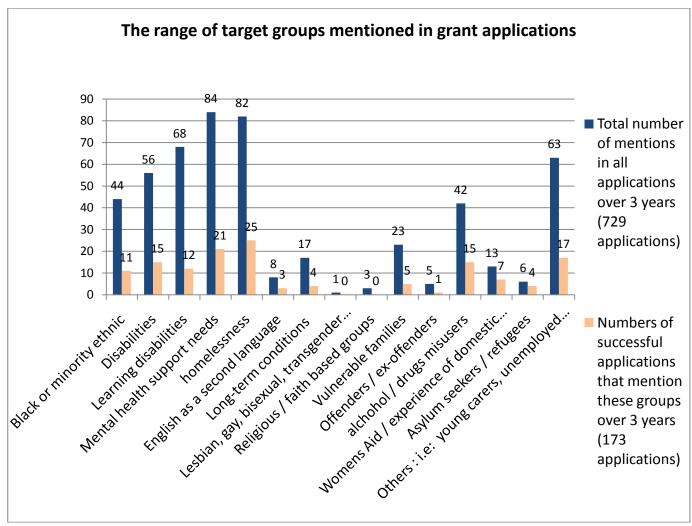
We analysed the range of groups that applied to our annual small grant scheme by undertaking EQIAs of the 2008, 2009 and 2010 small grant applications. The assessment demonstrated that the grant scheme successfully attracts applications from those working with early years, children and young people, and adults (both men and women). There were fewer applications from groups working with older people compared to the other age groups, although numbers of these increased after a targeted promotion in 2009.

The chart below shows the range of other types of groups mentioned in applications.

The small grants application form does not specifically ask applicants if they plan to

work with these groups, so this information is extracted from details of activities to be carried out. Thus, the chart below does not give a full picture of the range of groups that the small grant scheme is actually reaching. Over the three year period, the number of applications planning to work with the above groups was mainly consistent.

The small grant scheme always assesses the geographical spread of applications within Scotland. Applications came from within most of the NHS Board areas each year over the three year period, although in 2008 we received no applications from either Shetland or Orkney and in 2010 we received no applications from Shetland. We received more applications from urban areas compared to rural or remote areas each year, reflecting the density of population in more urban areas.





What food activities do groups want to do?

The analysis of all applications from 2008, 2009 and 2010 showed that cookery sessions were the most popular activity. Just under half (43%) of the applicants' planned activities involved cookery or food preparation skills sessions. Just under a fifth (17%) of the planned activities involved developing food growing schemes, often as part of a community garden or community allotment. 14% of activities included plans to provide healthy snacks or information on healthy eating. The remaining planned activities (about a quarter of all activities) involved developing initiatives such as lunch clubs for older people, social enterprises (such as buying equipment or arranging training for community shops or fruit and veg barras), peer-education training, improving snack bars in schools or youth clubs and community recipe books. Many applicants plan more than one type of food activity as part of a wider programme. Others also use food activities to meet other outcomes, such

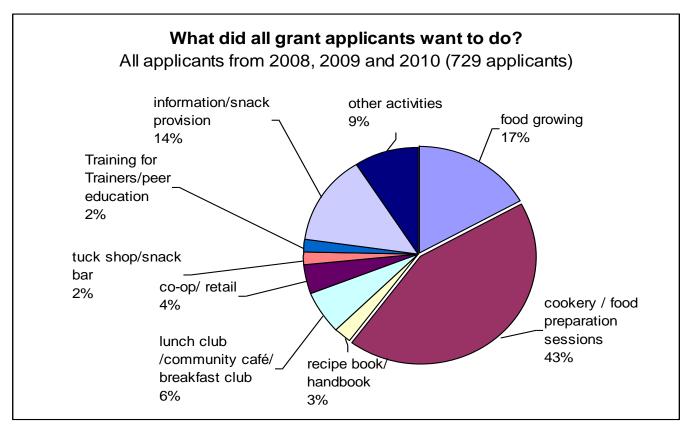
as building social or employability skills, increasing independent living skills or developing parenting skills. Many also use food and health activities as a tool to engage with 'hard to reach' individuals or to attract people to take part in community activities.

The chart below demonstrates the range of activities that community groups and agencies would like to do.

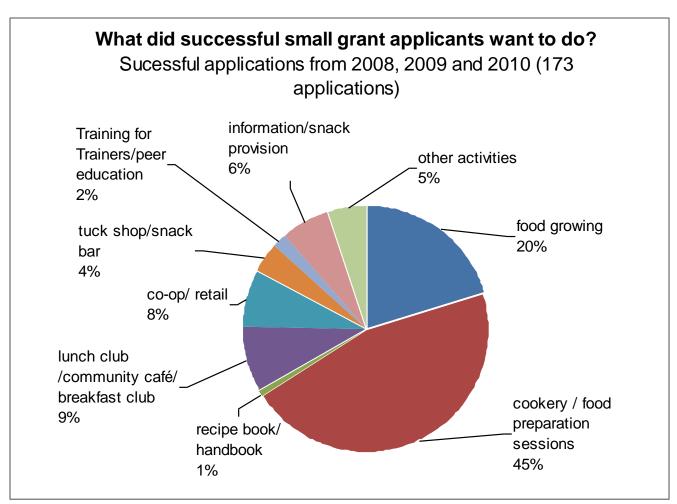
What applications were successful?

The chart on page 4 demonstrates the range of planned activities of successful applicants.

Overall, there was little difference between the planned activities of successful and unsuccessful applications. Applications were more likely to be prioritised if they could demonstrate ways in which food and health activities could become sustainable. Applicants planning activities that focus on providing free healthy food or information







were less likely to be successful compared to other applicants, as they may have greater difficulty demonstrating the longer-term sustainability or impact of these activities compared to skills development or social enterprise activities. Many successful applicants planned more than one type of activity, so some groups included provision of free healthy snacks and information within other activities.

What is the long term impact of the small grants?

In spring 2010 CFHS commissioned external research to explore the impact of small grants of 2008. In 2008, 58 out of 248 applications received grants between £150 and £3000. All application and evaluation

forms were analysed during the research. This was then followed up with 16 one-toone in-depth interviews with projects that had received a small grant in 2008, to determine the longer term impact of the grants.

In 2008, grants were awarded for:

- cookery classes, training or workshops (35)
- healthy eating sessions or programmes
 (7)
- growing food (7)
- developing or improving community café facilities (3)
- others (6)



Overall, grant recipients reported that:

- participants gained knowledge, skills or confidence in relation to food preparation or cooking (eg. trying new foods at home, including recipes learned on courses);
- participants made some changes towards a healthier lifestyle (eg. making home-made baby food or changing shopping habits);
- participants enjoyed a positive social experience (eg. a woman's refuge ran its own 'Come Dine with Me' evenings);
- participants were able to access other services to meet their needs (eg. literacy and numeracy training and walking groups);
- healthy and safe produce was taken home for families and available via community cafés, markets and gardens; and
- social cohesion was developed within communities.

"I didn't realise how much sugar is in drinks and sweets. I am going to cut back the amount of ginger and sweets I give to my child."

This in-depth research with 16 groups highlighted that in **all** cases activities **had continued** and some had expanded.

For organisations, the grant:

- enabled improvements in the quality of services (eg. by offering an enriched timetable of activities or providing activities that support workers could use to engage with people);
- increased awareness and use of services (eg. improving links with communities and piloting new training);
- enhanced capacity (eg. training and working with volunteers); and
- enhanced relationships with partners (eg. through partnership working groups and linking with health practitioners).

Five organisations stated that their food and health activities had become (or were becoming) self-sustaining and six had secured further (non-CFHS) funding.

The sustainability of activities was enhanced if grant funding was spent on:

- equipment that can be shared;
- training;
- assets that are permanent (eg. a kitchen or garden);
- seed funding for a café or garden or other activity that becomes selfsustaining through profits; or
- an activity that can become embedded in an organisation once it is established.

In relation to the sustainability of projects, time is an important factor. At the time of interviews in 2010, significantly more projects reported that their activities were sustainable than was noted within their evaluation forms in 2009.

Key learning was that grants led to enhanced relationships with partner bodies such as health services, local council services, other agencies and stakeholders. This maximised impact by ensuring consistent healthy messages and made best use of resources and skills available.

A copy of the final impact report – 'Report on research to establish the impact of the CFHS 2008 small grants scheme' is available from the publications section of the CFHS website.

"All meals we made were cheap and healthy, which has helped me stop eating takeaways