

# Active England Great Western Community Forest Report

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# 1. Introduction

This report provides information about the design and delivery of part of the Active England project 'Active Swindon' that took place at Great Western Community Forest (CF) as part of the funded Active England programme. The results of research conducted by Forest Research between 2005 and 2008 to monitor and evaluate the project are outlined. The Active England programme was established in 2003 with £94.8 million funding from the Big Lottery and Sport England (Sport England, 2009). The overall aim of the programme was to increase community participation in sport and physical activity in England. Five woodland projects were funded and Great Western CF was an important part of the Active Swindon project in Wiltshire. Active Swindon won a £500,000 award from the Active England Programme for the 3 year project. The other four woodland projects were at Bedgebury in Kent, Rosliston in the National Forest in Derbyshire, Haldon Forest Park in Devon and Greenwood Community Forest in Nottinghamshire. The Active England programme focused on key target groups that have been identified as under-represented in sport. These included women and girls, the disabled, Black and Minority Ethnic groups, those under 16 years of age and those aged 45 and over.

A range of methods were used to collect data as part of this research across the five woodland projects and these included:

- 1) On-site surveys to profile visitors and types of visits (550 questionnaires were completed at Great Western Community Forest).
- 2) Spatial analysis to produce a catchment profile of the surrounding population of each site/s (within an approximate 20 mile radius).
- 3) Qualitative research (with 28 people at Great Western Community Forest and 1 staff member) to explore the benefits and barriers to using woodlands and green spaces for physical activity (targeting both users of the projects and non- users). Interviews with project staff explored the challenges and successes of the projects.

This section provides the introduction and key findings of the research. Section 2 describes the overall Active Swindon project and the CF part of the project, Section 3 outlines the monitoring activities undertaken through on-site surveys at three green spaces in and around Swindon within the CF: Penhill Park/Sevenfields, Stratton Woods and Stanton Country Park. Individual data from the sites was provided by the site surveys in spring 2006, which included a visitor profile and visit profile. In Section 4 the report compares the visitor profile provided by the site surveys and the spatial analysis of socio-demographic variables of the catchment profile of communities surrounding the sites. Section 5 presents the qualitative research with project users (health walkers and Forest School participants) and non-users (mothers and children, and fathers group). These groups provide their perceptions of the project, their health and physical activity levels and identify barriers for non-users of engaging with the project. This is complemented by an account of feedback and self-evaluation provided by the CF staff

member involved in the project. The inclusion of non-users in the overall evaluation constitutes an important innovation of this research project.

This report can be read on its own or in conjunction with the other individual site reports<sup>1</sup>. The main overarching report 'Active England: the Woodland Projects' brings together the key findings across the five woodland projects and places the work in the context of current health concerns; it also outlines in more detail the methodology that was used across the five woodland projects.

## 1.1 Key Findings

### Impact on target groups: on site surveys and project monitoring

- Respondents at Penhill Park were significantly more likely to have a long term illness than visitors to Stanton Country Park and Stratton Woods.
- Penhill Park and Stratton Woods have a high percentage of people who visit the sites every day – 50% and 59% respectively.
- At Stanton and Stratton the majority of visitors were engaged in single activities (72% and 96% respectively), whilst at Penhill, 57% stated they were engaged in multiple activities.
- There were more people on low income of 20K or less visiting Penhill Park.
- 51% of visitors to the three sites were women.
- 3% of visitors to the sites were registered disabled and 5% stated they had a long term illness.
- There were small numbers of Black and Ethnic Minority groups visiting the sites (1% at Penhill Park, 1% Stratton Woods and 2% Stanton Country Park).
- Many of the visitors to all three sites visit alone rather than with family or friends.
- In August 2008, 28% of Swindon schools had a qualified or training Forest School leader (24 schools – 3 secondary and 21 primary).
- In 2007/8, 7,000 children benefited from Forest School.
- Six health walks are taking place in Swindon every week and 23 people have been trained as health walk leaders.

### Catchment profiling

- The spatial profiling of the catchment surrounding the sites within a 20 miles radius and the use of Census and Index of Multiple Deprivation data, allowed conclusions to be drawn about the level of representation of specific target groups at the sites compared with concentrations of those groups within the catchment.
- The profiling enabled the researchers to identify target groups that were not involved in the projects and to bring them to the site to explore barriers to access.

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<sup>1</sup> These can be found at: <http://www.forestresearch.gov.uk/activeengland>

- Comparing the catchment profile with the site surveys suggests that there is a slight under-representation of those on low incomes at Stratton Woods and Stanton Country Park, women were not under-represented at the sites, and BME groups were slightly under-represented.

### Qualitative research with target group users and non-users and site staff

- For the health walkers (user group) a key motivation to getting involved and staying involved was meeting people and extending social networks. People also talked about feeling more mobile from walking and being more active in everyday life. Having a set time and day for the walks and meeting friends acted as a motivation to continue participating.
- For the mothers and children, and fathers group (non-users) key barriers included concerns about safety amongst the women, both for themselves but most often concerning their children. They preferred spaces with good visibility and reasonable facilities for children such as play areas. For non-users in general transport and money were also key issues. Those without a car found it difficult to access green spaces.
- For the site representative trying to mainstream and get official recognition for Forest School nationally in Britain was seen as a way to improve its standing and wider recognition.

## 2. Active Swindon: design and implementation

### 2.1 Activities aimed at target groups

Active Swindon was a broad project that covered activities and events beyond that related to Great Western CF, it is not always possible to distinguish which elements of the project were specifically associated with the CF as many of the activities were partnership based. For the Active Swindon project a range of activities across the whole Swindon area were undertaken such as making the most of walking and cycling paths, creating a bus service for people to get to activity hubs. Also undertaken was running the Green Gym, outreach work at Whitworth Parks, inspirational events and woodlands for activity (Box 1). Great Western CF gained a development officer for family based learning who was employed through Swindon Primary Care Trust but based with the CF for two years from 2005/6. The project officer focused on walking, woodlands for activity, health walks, Forest School and family based learning. The key objective for the project officer was to build families confidence, skills, knowledge and understanding to enjoy and regularly use woods and open spaces for physical activity.

The project officer focused on three main interconnected areas of delivery in the woodlands for activity theme in Box 1 (Great Western Community Forest, 2007).

#### Under 16s and families

##### Forest School promotion

Visiting schools and talking to heads and teachers with an interest in outdoor learning was an important aspect of this promotion. Forest School is an inspirational process that offers children, young people and adults regular opportunities to achieve and develop confidence and self-esteem through hands on learning experiences in a woodland environment (O'Brien and Murray, 2007). The project officer raised awareness about Forest School and ran approximately six meetings a year for those (mainly teachers) with an interest in Forest School and outdoor learning. Forest School Leader courses were organised and subsidised by Active Swindon.

Forest Story Sack courses have also been run and used to promote use and enjoyment of woodlands by young people. Story Sacks are seen as a way of involving people in an indirect way with woods, they are primarily aimed at 'early years' groups and are suitable for adult and family literacy groups and those for whom English is not a first language. The Story Sacks are cloth bags containing a story book, a game, a tape of the story and props that illustrate the story. The CF developed a Forest Story Sack and a key



aspect of the approach is that parents and community members can join together to develop and make their own as well as buy them as a package.

### Family Forest Fun/learning days and staff training

The Active Swindon project has supported schools by providing Family Forest Fun Days in school grounds, holding a variety of activities for families with the aim of enabling them to enjoy and explore woodland environments. Activities included camouflage trails, animal hunts, bark and leaf rubbing, observation trails and den building.

Forest fun days were held in the Sure Start<sup>2</sup> grounds at Pinehurst and Penhill – four were held on 2007/8 with 84 people attending. A 'Tree-mendous' festival was organised by the Great Western CF project officer and held in 2007 as part of 'Get Active' week and included activities from kite flying, tai chi to cycling and using a climbing wall. Participants were able to gain an appreciation of the diverse activities that are feasible outdoors. Family learning workshops for Sure Start staff were run and focused on activities such as family games, fire making and barbeques and woodland story telling.

### Woodlands for Activity Network

This network meets once a term (6 times a year), and it is hosted by interested schools within Swindon. The network provides opportunities for the exchange of information and ideas to encourage young people to play and learn in a woodland setting. This helps to recruit new Forest School leaders and to continue to inspire trainee and trained practitioners.

### Low income and over 45s

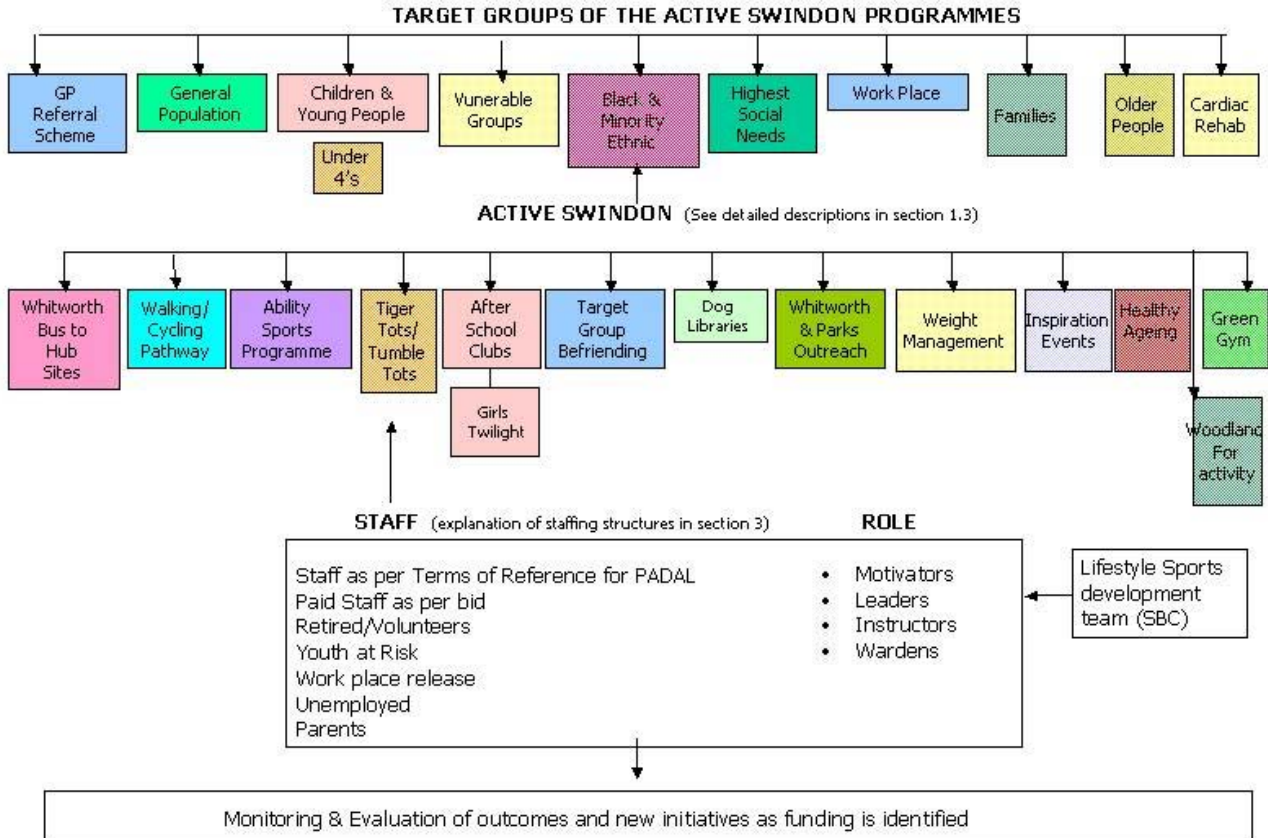
Since October 2007 six walk groups have been set up which meet for a health walk every week. Volunteer health walk leaders have been trained. Numbers joining the walks vary between the areas and week by week.

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<sup>2</sup> Sure Start is government programme to deliver the best start in life for children.

**Box 1: Target groups and activities identified for Active Swindon**

**1.2 RANGE OF SERVICES AND ACTIVITIES**





## 3. Results: on site surveys and project monitoring

### 3.1 Great Western Community Forest's visitor profile

#### Representation of target groups

Target groups for the Active Swindon project as a whole included:

- general population
- vulnerable groups
- black and minority ethnic groups
- older people
- those in the work place
- children and young people
- those referred by GP for physical activity
- families
- those in cardiac rehab
- those with highest social needs.

There was a very broad target of the general population as well as more specific groups such as those referred by a General Practitioner (GP) to undertake physical activity.

There is also much overlap with the overall Active England Programme target groups of:

- people on low incomes
- people with disabilities
- women and girls
- black and ethnic minorities (BME)
- 45+ years age group
- young people (under 16).

In consultation with the Great Western CF project officer three green space sites were chosen for site surveys to be undertaken. These included:

- 1) Penhill Park/Sevenfields – located in a deprived ward of Swindon and managed by the Local Authority.
- 2) Stratton Woods – a new woodland located on the northern edge of Swindon managed by the Woodland Trust.
- 3) Stanton Country Park – located on the northern edge of Swindon and managed by the Local Authority.

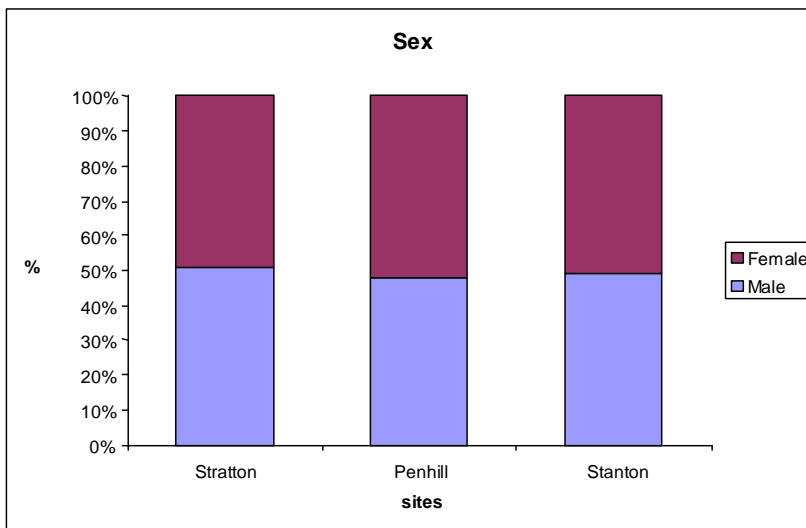
The sites were surveyed once in spring 2006. Further surveys were not undertaken (unlike the other Active England Woodland Projects) in 2007 as much of the activities of Great Western CF in relation to the Active Swindon Project were not necessarily located at these specific sites. However the surveys provide useful information for the CF, and for the Local Authority and Woodland Trust who manage the sites.

A total of 550 people were surveyed during 2006, 250 at Penhill Park/Sevenfields, 150 at Stratton Woods and 150 at Stanton Country Park. Only people of 16 years and over were interviewed for the on site surveys, however those under sixteen may be represented via a question about whether people visited with their family which would often included children.

### Women and girls

51% of visitors to the three sites were women and the rest were men, and this balance was evenly split across the sites (Figure 1).

**Figure 1: Number of male and female site users**



### 45+ yrs age group

54% of respondents to the three sites were aged 45 years plus while 46% were in the 16-44 year age group.

### People on low incomes

Figure 2 highlights that there were more people on low incomes of 20K or less visiting Penhill Park/Sevenfields, however surprisingly there were more people on higher incomes of over 50K visiting this site as well.

Figure 2: Income level of site users

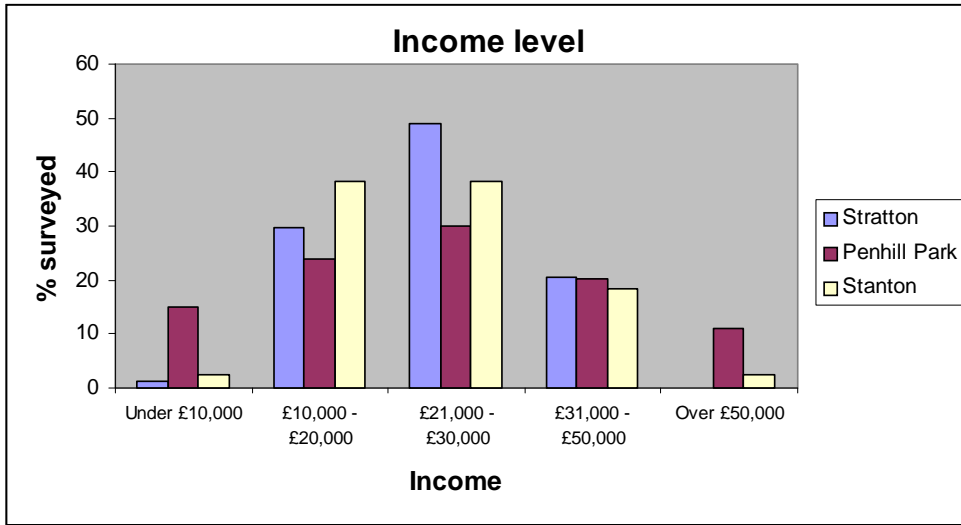
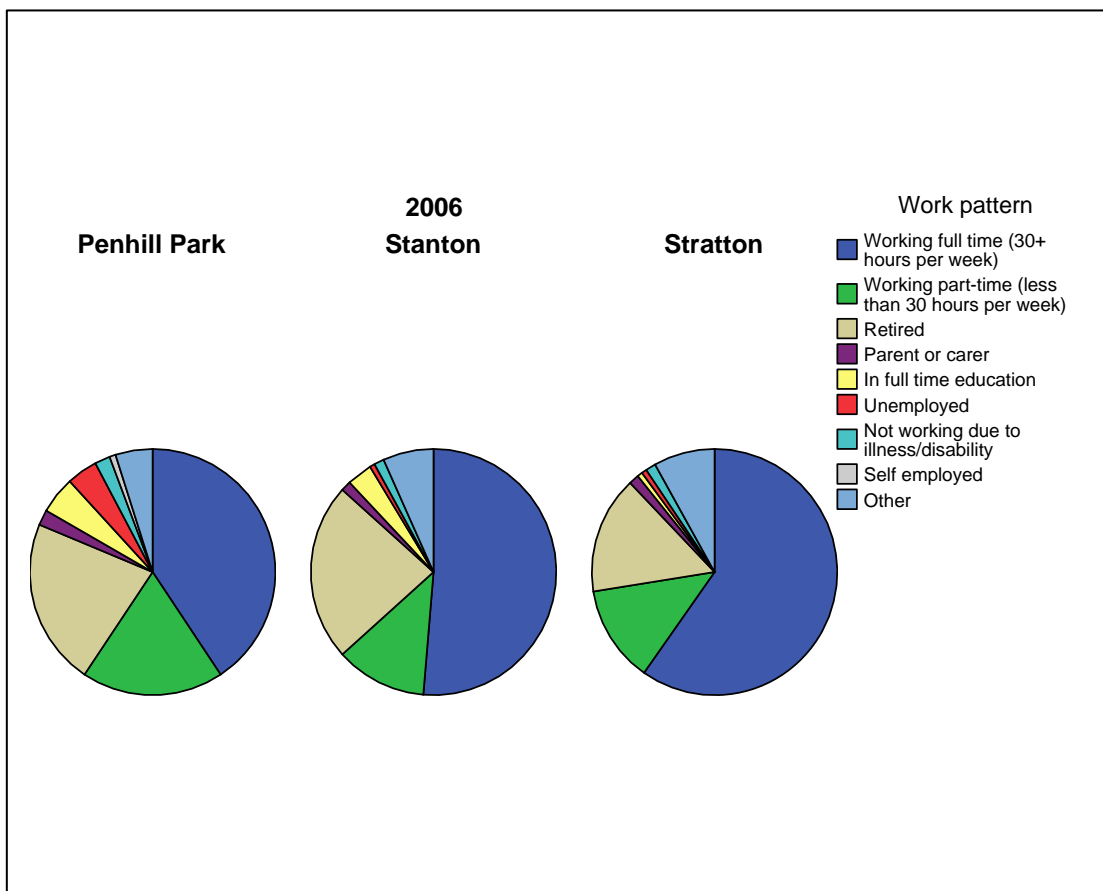


Figure 3 outlines the work pattern of respondents at each of the sites. There was a higher percentage of unemployed visiting Penhill Park, 4% compared to 1% at the other two sites ( $p < 0.05$ ). Fewer people at Penhill Park were working full time or part time. This is corroborated by the deprivation experienced in parts of the Penhill ward.

Figure 3: Work patterns at the three sties



### Black and ethnic minority groups

The majority of respondents at the three sites classed themselves as White British, 99% at Stratton Woods, 97% at Stanton Country Park and 98% at Penhill Park. There was a small number of Asian/Asian British, Black/Black British or people of mixed race origin, 1% at Penhill, 1% Stratton and 2% at Stanton.

### People with disabilities

3% of respondents to the three sites were Blue badge holders<sup>3</sup>, 3% were registered as disabled and 5% stated that they have a long term illness.

### Young people (under 16)

In the surveys respondents were asked if they had any children living in their household aged 16 years and under. At Penhill 38% of respondents had children under 16 living in their household, at Stanton this was 31% and at Stratton 28%. However, many of the respondent's at all three sites visit alone rather than with their families.

## Further information about visitors

### Exercise levels

Respondents were asked on how many days of the week they were undertaking at least 30 minutes of moderate intensity exercise. This was worked out as a mean for each site. There was a marked difference between Penhill and the other two sites ( $p < 0.001$ ). At Penhill respondents were carrying out a mean of at least 30 minutes of exercise on 4.5 days per week. While at Stanton this was 2.2 days and at Stratton it was a mean of 2.7 days a week which falls short of the activity level recommended by the Chief Medical Officer of 30 minutes of exercise on at least 5 days a week.

### Current fitness

Across the three sites the majority of respondents perceived themselves as either fit or very fit.

**Table 1: Respondents' current level of perceived fitness**

Level of fitness	%
Very unfit	0%
Unfit	8%
Neither fit nor unfit	33%
Fit	49%
Very fit	10%

<sup>3</sup> This is a scheme that provides a range of parking benefits for disabled people with severe walking difficulties who travel as either drivers or as passengers.

Long term illness

Respondents at Penhill were significantly more likely to have a long term illness (8% of respondents) than Stanton or Stratton where 3% of respondents at each site had a long term illness, ( $p < 0.05$ ). Penhill is a more deprived area than Stanton or Stratton.

Recommended exercise by doctor

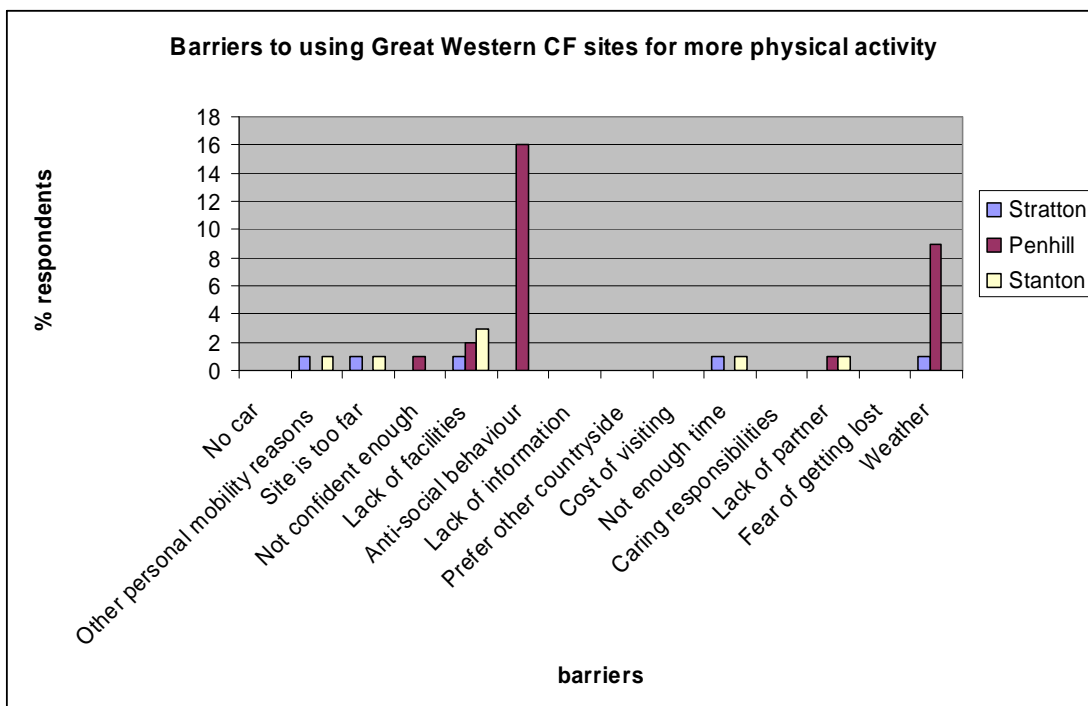
Respondents were asked whether their doctor had recommended that they increase their physical activity levels. Doctors can advise people to become more active or formally prescribe more activity through the GP (General Practitioner) referral scheme. At both Penhill and Stanton 6% of respondents fell into the category, that their doctor advised them to exercise more, while at Stratton this was 2%.

Barriers to visiting Great Western Community Forest

Although the respondents in the questionnaire were all at the green spaces when they were interviewed and therefore had overcome any barriers they may have had in getting to the sites, they were asked whether there were barriers to using the sites for more physical activity. These categories were pre-determined by the researchers based on previous studies outlining the potential range of barriers to accessing woodlands.

Great Western CF visitors described very few barriers to visiting the three sites. The exception was 16% who thought anti-social behaviour was a problem at Penhill and 9% at Penhill who suggested that weather was a barrier. As Figure 4 highlights there were seen to be very few barriers at Stratton and Stanton.

Figure 4: Barriers to using the site for more physical activity



### 3.2 Great Western Community Forest’s visit profile

#### Have you visited the sites before?

The vast majority of visitors to the three CF sites had visited them before. For Penhill 98% had visited, for Stanton this was 89% and for Stratton it was 96%. This highlights the sites importance for nearby or local residents.

#### How often do you visit the sites?

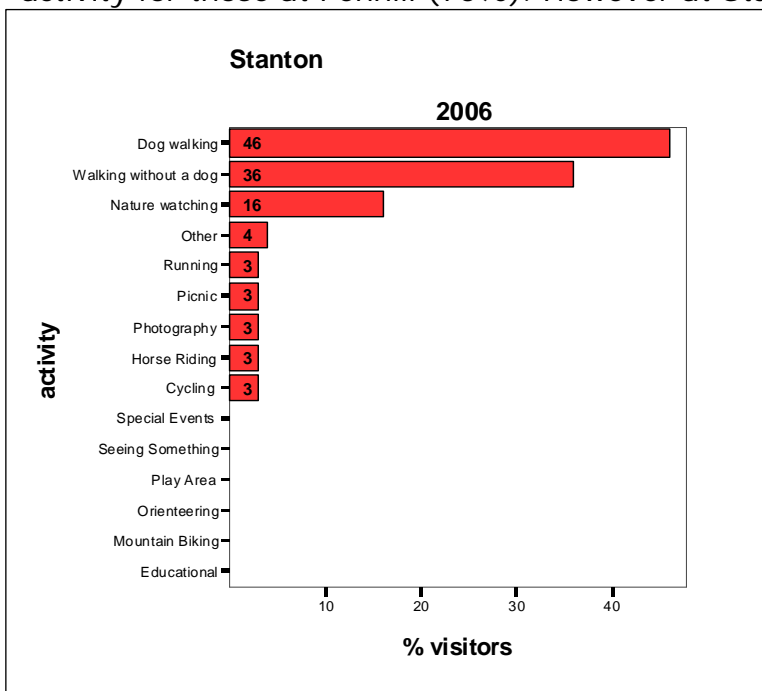
Table 2 shows that Penhill Park and Stratton both had a high percentage of visitors who used the sites every day (50% and 59% respectively); this is probably due to both sites having dog walking as a major activity of using the sites.

**Table 2: Frequency of visits to the three sites.**

% within Site								Total	
		Every day	4-6 times per week	1-3 times per week	1-3 times per month	4-6 times per year	1-3 times per year		Less often
Site	Penhill Park	50%	14%	20%	5%	7%	4%	1%	100%
	Stanton	32%	11%	34%	13%	5%	2%	5%	100%
	Stratton	59%	12%	23%	3%	1%	1%	1%	100%

#### What do you usually do at the sites?

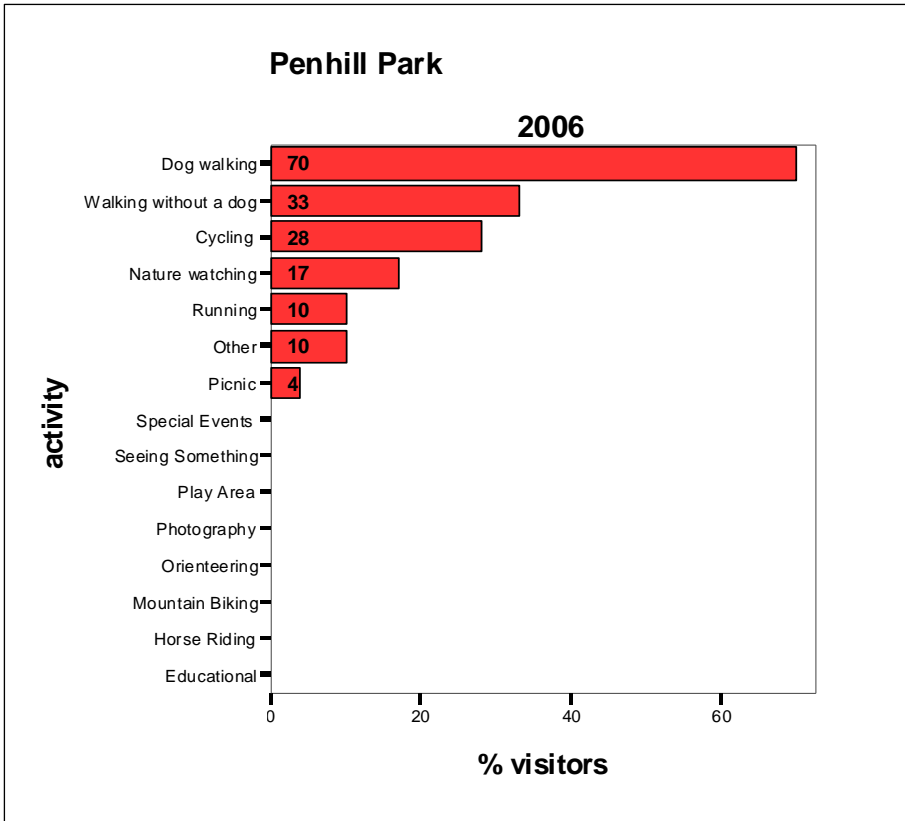
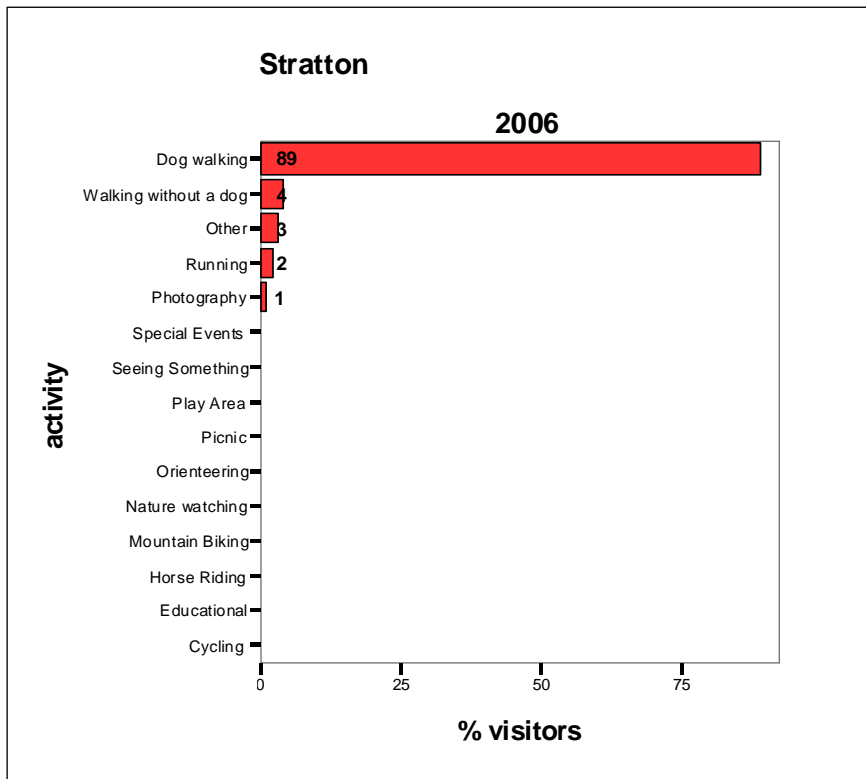
Dog walking was the main activity for 89% of visitors to Stratton; it was also a major activity for those at Penhill (70%). However at Stanton while dog walking was an



important activity for 46% of visitors, 36% also walked and 16% were nature watching (See Figures 5, 6 and 7). At Stanton and Stratton the majority of visitors were engaged in single activities (72% and 96% respectively), however at Penhill, 57% stated they were engaged in multiple activities.

**Figure 5: Site activities at Stanton Country Park**



**Figure 6: Site activities at Penhill Park/Sevenfields**

**Figure 7: Site activities at Stratton Woods.**


### How did you hear about the sites?

The main way in which people heard about Penhill was through discovering the site by themselves (Table 3). At the other two sites people found out about them either through a friend or relation or through discovering the sites by themselves. Other means of finding out about the sites was very limited; however a local guide book or map gained a response across all three sites.

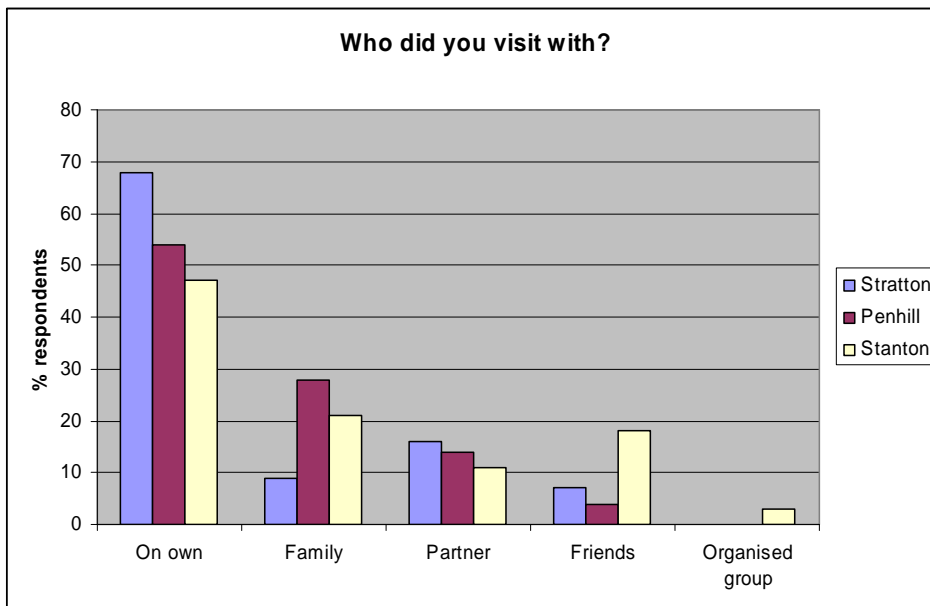
**Table 3: How visitors heard about the sites**

	Stratton	Penhill	Stanton
Discovered site on own	50%	78%	43%
Friend / relation	47%	19%	49%
Local guide book/map	1%	2%	1%
Tourist information centre	0%	0%	1%
Library	0%	0%	1%
Advert in press/on television	1%	0%	1%
Newspaper article	0%	0%	2%
Road signs	0%	0%	1%

### Who did you come to the sites with?

Figure 8 shows people mainly visited these sites on their own, often with their dog.

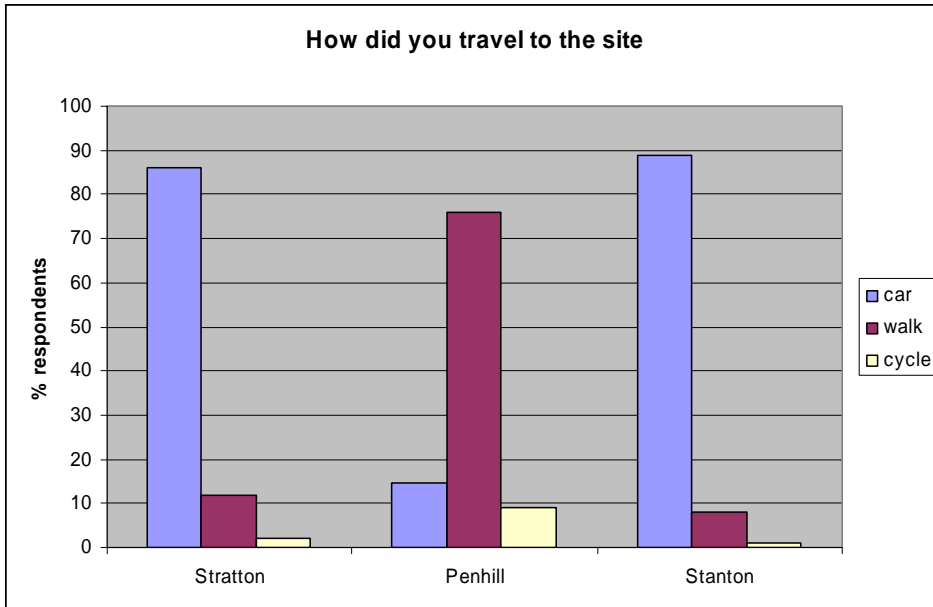
**Figure 8: Visits to the sites on own or with others**



### How did you get to the sites?

Using a car was the main way of visitors getting to Stratton and Stanton but at Penhill the majority of respondents walked to the site. This is probably due to Penhill's location in amongst a residential area in Swindon (Figure 9).

**Figure 9: Travel to the site**



### How long does your visit last, on average?

Respondents were asked how long on average their visits lasted and options ranged from 15 minutes to over 5 hours. The average length of visit to the sites was an hour at Stanton, just under an hour at Penhill and approximately forty minutes at Stratton.

### How far do you live from the sites?

Respondents were asked how far away they lived from the site from less than 1 mile to over 20 miles. The average travel distance to the sites was 1 mile for Penhill, 4.5 miles for Stanton and just over 2 miles for Stratton. This highlights the local usage of these sites particularly Penhill Park which most visitors walked to. Stanton is on the outskirts of Swindon which is why the average travel distance is greater to this particular site.

## 3.3 Target group behaviour at the sites

Due to the low numbers of diverse ethnic groups and disabled groups in the on site surveys, the Active England target groups discussed here include women, over 45s and those on low income. In this section we explore types of activities undertaken, self-reported fitness levels, exercise levels and barriers to accessing the woods for these target groups.

Although it is not possible to look at change over time as the surveys were only undertaken once, we can assess if the target groups are behaving differently from the rest of the "visitors" to the sites. For the three sites the following were identified from the data analysis.

## Women

Significantly more women were dog walking and nature watching but less were cycling (all  $p < 0.05$ ). The women showed similar levels of self reported fitness and exercise levels as the men and barriers to accessing the sites was similar to those identified by men.

## 45 years + age group

This group were significantly more likely to dog walk and nature watch (both  $p < 0.05$ ) but less likely to go running ( $p < 0.01$ ). They identify themselves as less fit than the under 45's ( $p < 0.05$ ) but interestingly take part in similar amounts of 30 minutes of exercise on 5 or more days of the week. This group describes similar barriers to accessing the sites as the other visitors.

## Low income

This group were significantly more likely to go walking than the financially better off, ( $p < 0.05$ ). All other behavioural patterns i.e. barriers; fitness and health were similar to the other visitors.

## 3.4 Data collected by project staff

Data for the Active Swindon Project as a whole, not just the CF component, has been collected through monitoring numbers of people at various events, or who got involved in a range of the activities, and through surveys undertaken in July 2007 and March 2008 of a sample of the project user population. Key Performance Indicators<sup>4</sup> were gathered such as how many people participated in the Active Swindon Project or how often they participated.

In terms of the overall monitoring of the Active Swindon project by March 2008, 7,268 participants had taken part in activities and programmes set up by or involving Active Swindon resulting in 13,483 visits. Of the registered participants with the project ( $n=1363$ ) 22% were new to sport and 25% lived in areas of deprivation (Barr, 2008a and b).

In a sample survey (111 responses) in June 2007 respondents answered questions as to how involvement in the Active Swindon project had helped them. 55% reported being more active, 43% reported improvement in their health, 59% reported being more motivated and 59% stated they had a better understanding of the benefits of physical activity to their health (Active Swindon Newsletter, 2008).

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<sup>4</sup> 17 Key Performance Indicators (KPIs) were developed for the Active England Programme which projects could choose from when collecting data (see Appendix 1 of the 'Active England: The Woodland Projects' report <http://www.forestresearch.gov.uk/activeengland>).

In terms of the Great Western CF project officer's work on Forest School, training was supported by Active Swindon and in August 2008 28% of all Swindon schools had qualified or training Forest School leaders (Pratt, 2008). This included 24 schools: 3 secondary and 21 primary. In 2007/8 over 7,000 children benefited from Forest School. There are 29 trained or training Forest School practitioners in schools in Swindon and 5 independent trained leaders who can support and run Forest School activities. Ten school staff were trained at Level 1<sup>5</sup> and have experience in supporting Forest School activities. The CF project officer before finishing her contract put forward a proposal for a new post of Forest School Development Officer situated within the CF. If the post is funded the employee would take on and develop the Forest School work within Swindon that has been successfully developed through the Active Swindon Project. Tree-mendous Tuesday in 2007 was a showcase event for the 'Get Active' week. The event was organised by the CF project officer and held on the Crofts Sports Centre field. It involved thirteen different activities including kite flying, tai chi, den building, skateboarding and a climbing wall. Over 400 people attended the day.

Since October 2007 health walks have been developed and six health walks are taking place in Swindon every week. Sixteen thousand pounds has been secured from Swindon Primary Care Trust to continue support for the health walks and 23 people have been trained as volunteer health walk leaders.

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<sup>5</sup> Forest School has different levels of training, starting with Level 1 which is available to people who want to work on existing school or nursery sites.

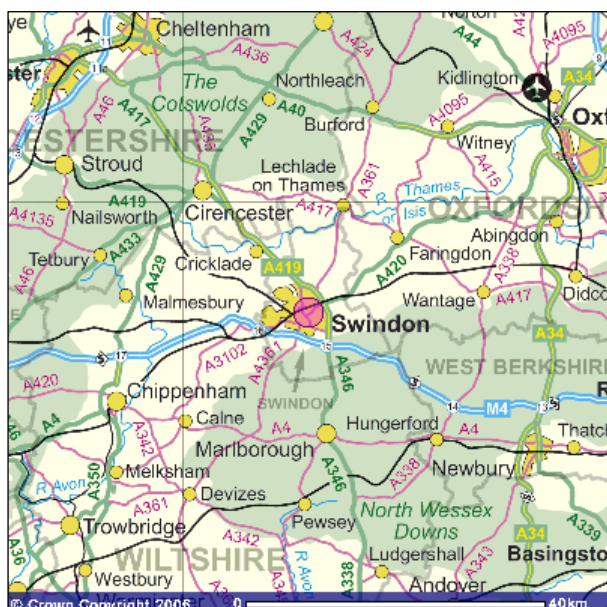
## 4. Results: catchment profiling

Forest Research's evaluation of the Great Western CF involved the spatial profiling of Great Western CF's catchment area. A 20 mile radius was identified around the centre of the area. The profiling work aimed to present basic socio-economic and demographic data from the 2001 Census relevant to the surrounding community and target groups. This was an important component of the overall evaluation because it enabled the researchers to link, in spatial terms, the project sites with people from the target groups who might visit them. As such catchment profiling played a key role in effective targeting of the research and was an integral component of the overall evaluation.

During the surveys undertaken at Great Western CF in spring 2006 respondents were asked for their postcodes and this enabled the researchers to map where people were coming from to visit the sites within the catchment.

### 4.1 Catchment area

Map 1 shows the Swindon area adjacent to the M4 motorway. Map 2 shows where the three sites surveys took place and shows approximately where visitors were coming from (the red dots relate to individual people's postcodes). Maps 2 and 3 reveal a significant clustering of visitors within the centre of the catchment; wards including Abbey Meads, Penhill, Blunsdon and Gorse Hill. There are very few visitors from peripheral regions of the catchment. The majority of visitors are from within the Swindon borough, highlighting the importance of local people's use of these sites.



#### Map 1: Swindon

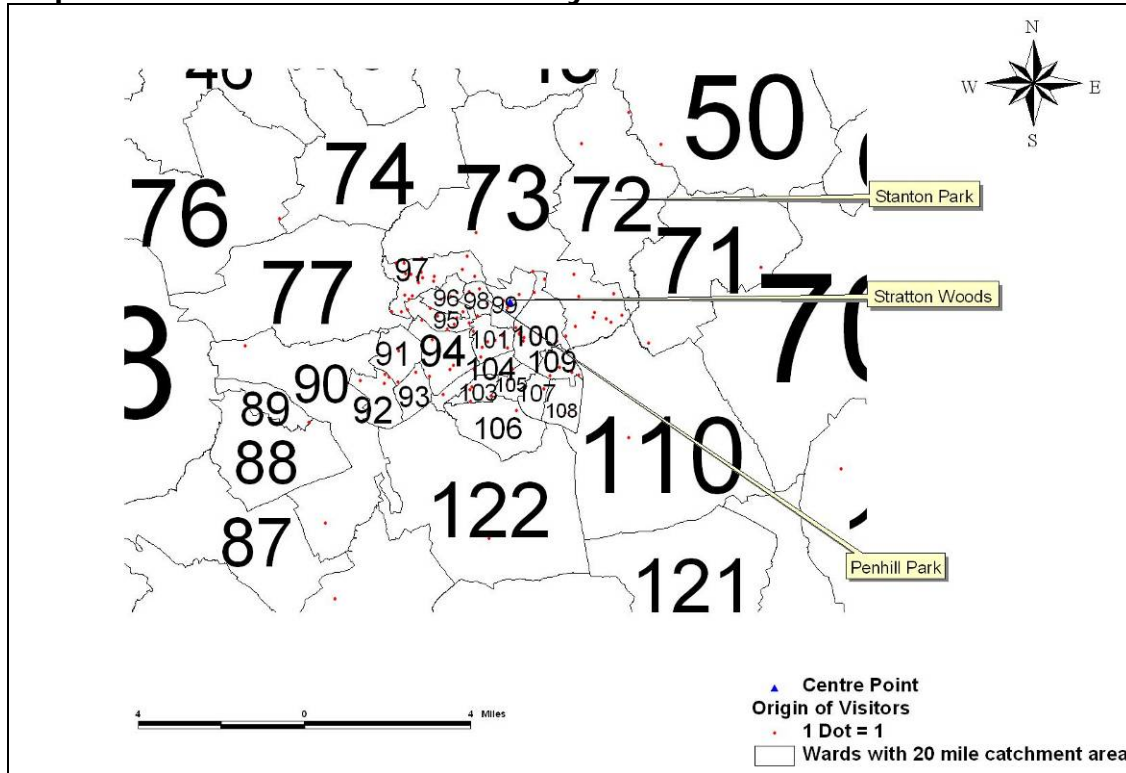
The maps follow the categorisation system adopted in the Census where the distribution of any given statistic is divided into quartiles. For example Map 4 reflects low income distribution where 25% of English wards contain between 1% and 11% of families on low income.

The following maps show all or part of the catchment area and the numbers represent wards within this. For example:

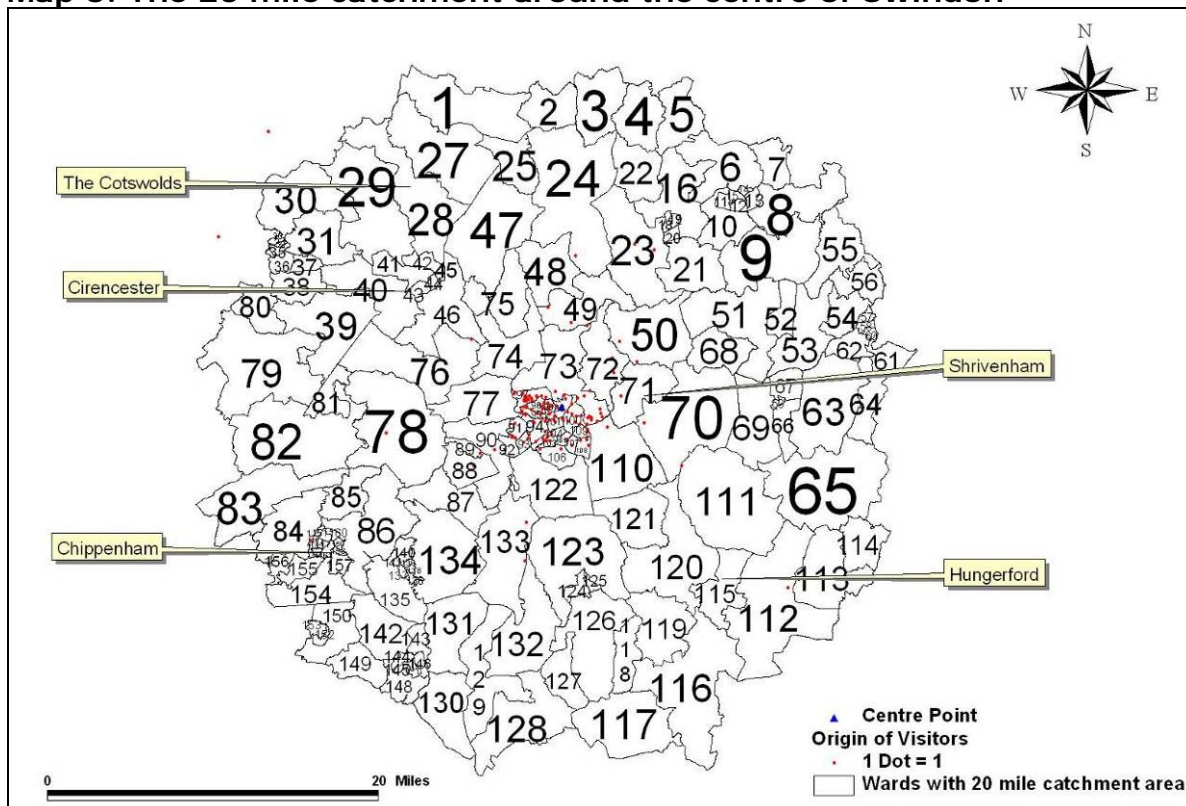
- 97 – Abbey Meads ward
- 98 – Penhill ward
- 99 – St Philip
- 100 – St Margaret ward
- 101 – Gorse Hill and Pinehurst ward.



Map 2: The three sites where surveys were undertaken



Map 3: The 20 mile catchment around the centre of Swindon



By showing the origin of the visitors surveyed in 2006, it is also possible to see whether visitors were coming from wards with a high representation of citizens falling within the Active England target groups.

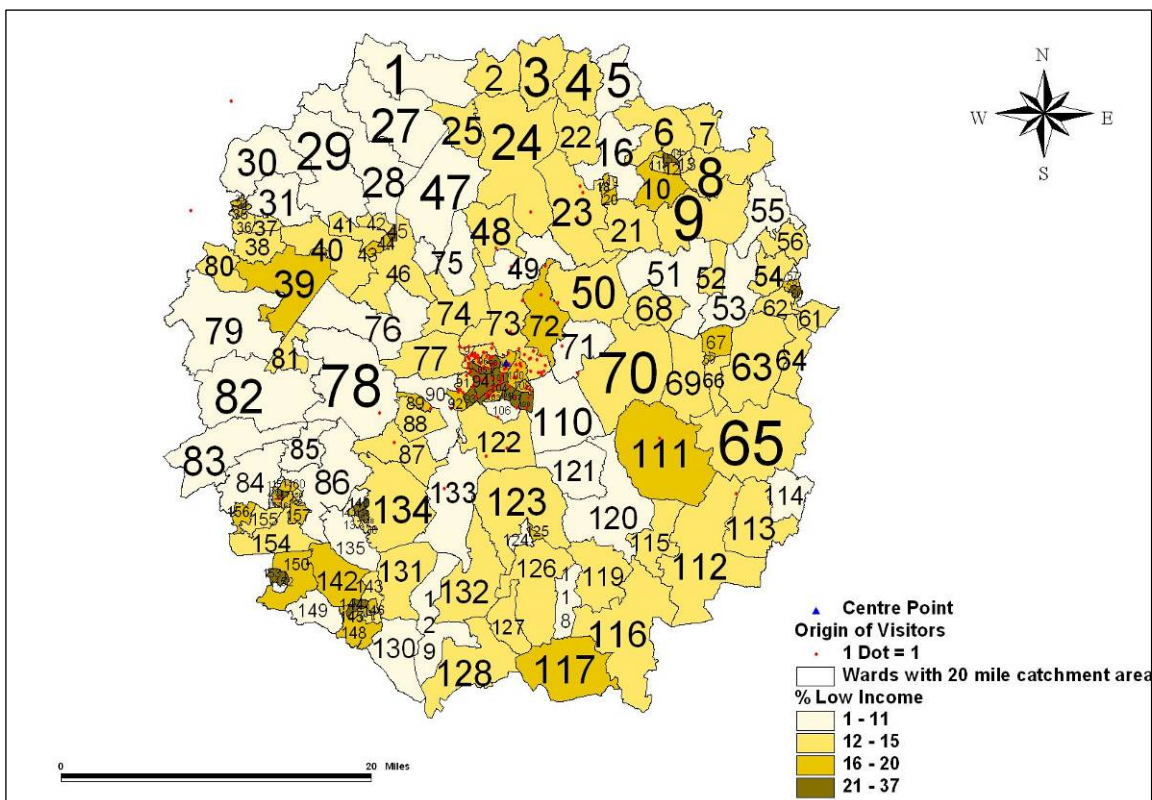
## 4.2 Target Groups

### Income and deprivation

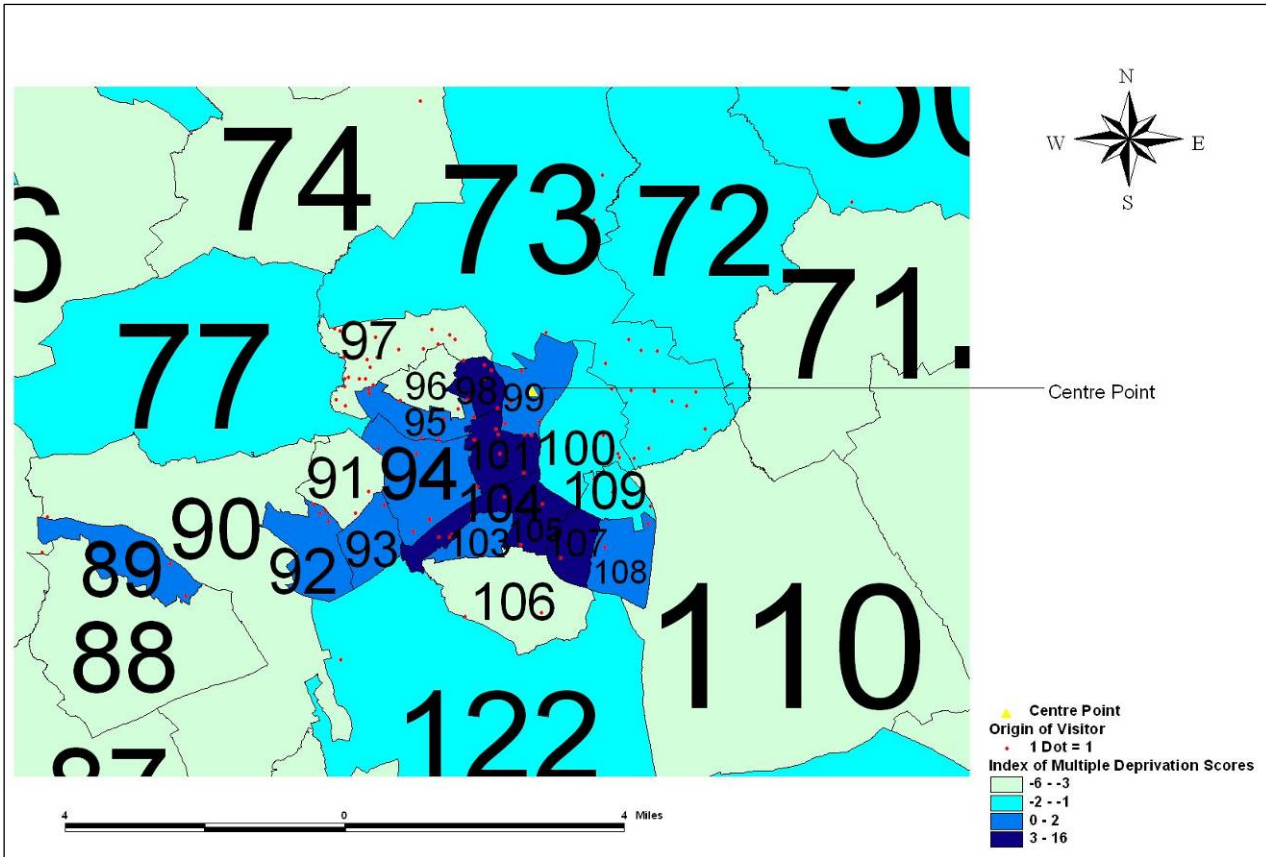
Most of the wards within the 20 mile catchment have either a 1–11%, or a 12-15% representation of people with low incomes. However the majority of visitors surveyed in 2006 came from areas where there is a relatively high concentration of families on low incomes (21 – 37%). Wards include Gorse Hill and Pinehurst, Penhill and Moredon.

Information has been taken from the ward level Indices of Deprivation 2001, constructed by the Index Team at Oxford University for the Department of Transport, Local Government and the Regions (now Dept for Communities and Local Government), and the Index of Multiple Deprivation 2001 ('IMD 2001'). The six Domain Indices are: income; employment; health deprivation and disability; education, skills and training; housing; and geographical access to services. The scores range from –6 to 16. Wards with a high IMD score (3-16) are amongst the most deprived, whereas wards with a low score (-6 - -3) are amongst the least deprived. There is a significant cluster of visitors who came from wards within the Swindon borough which have high IMD scores and low incomes; Penhill, Gorse Hill and Pinehurst, Central, Walcot and Parks (Map 4 and 5).

**Map 4: Low income**



Map 5: Index of multiple deprivation



The surveys show that people with low incomes in the Penhill area were visiting Penhill Park and are not under-represented at the site. There is however probably a slight under-representation of people on low incomes at Stratton and Stanton.

### Women and girls

There is little correlation between the origins of visitors interviewed during the 2006 surveys and gender distribution within the catchment. It should be noted that there is little variation between wards in terms of gender distribution - the ward with the highest concentration of females is Cirencester Park (55%) and the lowest is Brize Norton and Shilt (41%). The surveys show that slightly more women (51%) were visiting the sites than men and are therefore this group overall is not under-represented at the sites.

### Black and minority ethnic groups

Most of the wards within the catchment have either a 1%, or a 2-4% representation of Black and Ethnic Minority (BME) groups. There are a relatively high percentage of wards with 5+% of BME groups at the centre of the catchment. The wards with the highest representation of BME groups include Dorcan, Old Town and Lawn, Walcot, Eastcott, Central, Gorse Hill and Pinehurst, Central and Abbey Meads. It should be noted that visitors to the three sites did come from these areas; however they were primarily not



from BME groups. There were only a small number of BME groups visiting the sites - 1% at Penhill, 1% Stratton and 2% at Stanton, therefore BME groups are somewhat under-represented at the sites.

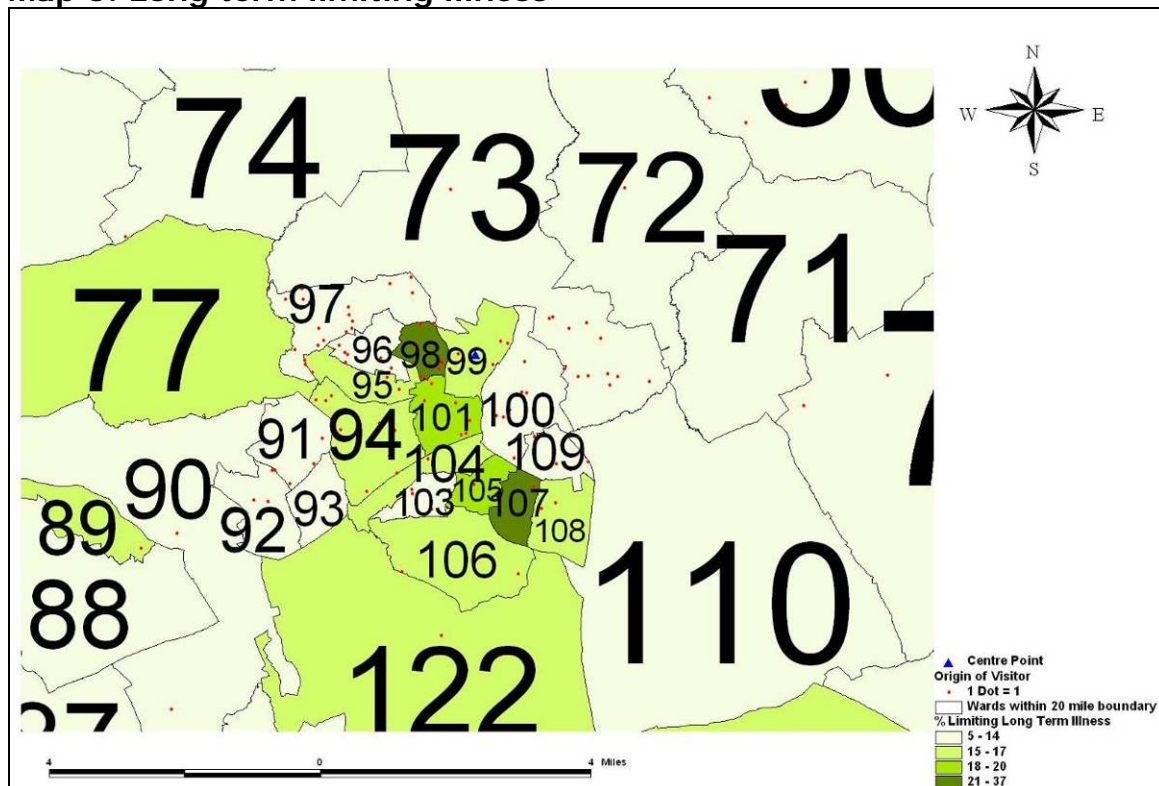
### 45+ years

There are a number of wards with a high concentration of elderly people. These wards are concentrated at the periphery of the catchment, outside of the Swindon borough. It should be noted that there is a relatively high percentage of the 45+ yrs age group within the more affluent areas. Wards with a high proportion of elderly citizens also have a relatively low proportion of BME groups and people with a limiting long-term illness. There are slightly more over 45s visiting the three sites (54%) than 16-44 year olds and therefore this group does not appear to be under-represented.

### Health

Most of the wards within the 20 mile catchment have a low representation of people with a limiting long-term illness. However many visitors who were interviewed in 2006 came from wards where a relatively high percentage of people suffer from a limiting long-term illness. Penhill, Parks and Gorse Hill have a particularly high occurrence of people with limiting long-term illness and a significant number of visitors came from these wards (Map 6). 8% of visitors to Penhill reported that they had a long term illness. However this was lower for Stanton and Stratton.

**Map 6: Long term limiting illness**



The surveys show that visitors to the three sites are coming from one core area - within an approximate 5-mile boundary from the centre of the Swindon borough. Visitors are not coming from peripheral regions of the 20-mile catchment area, highlighting the importance of these sites for local people's use.

### 4.3 Targeting qualitative research

The catchment profile and spatial analysis was developed to explore the types of communities that lived around the sites and to identify where visitors to the sites were coming from and whether they were coming from areas that had high levels of the Active England/Active Swindon target groups.

There was relatively low representation of young people under 16, BME groups and those on low incomes revealed by comparison between the catchment and visitor profiles from the site surveys. This information was used to inform the qualitative research phase that was used to provide explanations of low attendance levels and to explore factors that might be acting as barriers to people participating in the project. Few visitors were coming from wards within and outside of the centre of the catchment area where there were relatively high representations of unemployed. The health maps revealed that in areas such as Penhill many residents suffered from limiting long term illness.

The user and non-user groups targeted to participate in qualitative research were identified through this analysis and in discussion with the CF project officer about the activities that she was working on and who she was working with. Therefore it was decided to target unemployed non-users with poor health in a deprived area and a women and children's group. The users groups identified were health walkers and two people involved in Forest School.

## 5. Results: project evaluation with users and non-users

This section presents a summary of the qualitative research phase. Results from activities and focus groups with the selected target groups are presented focusing in particular on the outcomes and benefits derived by people involved in the Active Swindon project via Great Western CF (referred to as users) and on barriers to people who had not been involved (referred as non-users). In addition the results of an interview with the Great Western CF project staff member present insights into project delivery. This section therefore presents a summary evaluation of the project that is informed by and both complimented and build on the quantitative analysis in sections 3 and 4.

### 5.1 Summary of results from users

#### 5.1.1 Forest School participants

##### Introduction to the group

Two women were interviewed together at the Sure Start Centre in Pinehurst in Swindon. Both of the women had found out about the Active Swindon Project through the Great Western CF project officer. The women were both interested in Forest School. One woman had no car, four children and was in her twenties, she had got involved in Forest School by going to a story sack<sup>6</sup> course. The other woman has got involved as a direct result of the CF project officer.

##### Reasons for getting involved

One of the women got involved in Forest School because she wanted to try and take out local children and carry out some positive physical activities with them. There was funding available to undertake Level 1 Forest School<sup>7</sup> (FS) training and she decided to do this with another woman she knew. She enjoyed it and then found that there was other funding to do a Level 3 FS course. The other woman interviewed was hoping to do level 1 FS training in the near future. The woman who had undertaken the training stated that she would never have thought about doing something like this if she had not been approached and encouraged by the CF project officer.

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<sup>6</sup> Story sacks are large cloth bags containing a children's book and supporting material. They are intended to make shared reading an enjoyable experience. Story sack courses provide a demonstration of how they can be used with young children.

<sup>7</sup> Forest School training once passed allows the participant to run or help at Forest School activities depending on the level of training.



## Benefits of Forest School for children and the FS leader

The trained FS leader saw '*fantastic*' impacts on the children from FS in terms of enjoyment and improvement in self confidence. She described how they had to change a site to accommodate a small boy with cerebral palsy and this made her more aware of how she and others often took health for granted. She described the benefits of FS for those with ADHD (Attention deficit hyperactivity disorder) and emotional and behavioural difficulties.

*'To start with they were just running around, they weren't listening to you. They didn't want to know and you had to keep bringing them back to the seating area. By week six they were going off working well in a group and actually participating as any other student in the class would. You wouldn't believe the difference.'*

She also talked about the risk assessments that she had to do for FS, she felt that there was too much emphasis on risk '*I think to be honest we're all wrapped up in risk assessments, liability, health and safety. We can't wrap children up in cotton wool; they're not going to learn*'. She described working with local schools and was already taking a junior class to FS. She outlined how FS was part of being a child e.g. 'having fun and exploring'. She obviously enjoyed the work that she did with children through her FS activities.

## Attitudes to health and activity

The woman who had four children described herself as active as she walked the children to and from school - two and sometimes three times a day; it was twenty minutes one way. She was overweight but stated that she had lost weight recently from all the walking she had been doing. She was hoping to pass her driving test in the next few months and suggested ironically that this might mean that she would probably end up doing less exercise. The FS leader also described herself as active, as FS encouraged physical activity. The women described their preference for being outdoors and this was particularly important as they had children and getting them out and being active was important so that they would sleep more easily.

## Attitudes to woodlands and green space

These two women expressed some concern about the lack or sometimes the loss of green space in the vicinity primarily to housing development. One stated that some of the children in the area did not get the opportunity to get out into green spaces highlighting potential inequalities in access to green spaces for excluded or low income groups. The women talked about using nearby spaces with their own children such as Coate Water Park or Lydiard Country Park. The weather was not a big issue especially for the FS leader:

*'Not with my lot because I'm used to going out in winter now (due to FS). It doesn't bother me, I'd rather go out when it's colder than when it's hot I don't like the heat. And the kids all have their waterproofs now'.*

Both women talked about the importance of childhood use of green space.

*'C'<sup>8</sup> - It's fantastic I love it up there. It's forest, it just reminds me of my childhood because we spent a lot of time there with my dad'.*

*'H' concurred and said 'I like going outdoors but I suppose it brings back memories from years ago'.*

*'C' – and you want to give those memories to your kids as well'.*

## Barriers to participation

Concerns about safety both personal safety and the safety of their children was an issue raised by the women in association with green spaces. Transport was an issue for the woman without a car. For these two women barriers were not really preventing them from using green spaces and being active. The FS leader talked about the places she used when young and going off for the day with no one worrying about her. However she went on to talk about how her son of 10 was only allowed the same boundaries as his 5 year old sister in terms of where he was allowed to go. She said that her son was sensible and he had a mobile phone, however she worried about other people and stated that it was hard as a mother to let go and allow her children more independence.

## 5.1.2 Health walk group

### Introduction to the group

The Great Western project officer started up a series of health walks in September / October 2007. Since then 6 groups have been set up at different locations in Swindon and 11 volunteers trained as health walk leaders; with 6 or more about to be trained. One of the researchers attended a health walk in April 2008 that started from the Broadgreen community centre in Swindon. Thirteen walkers turned up even though the weather was cloudy and the walk started in light rain. From the beginning of the walk the group split into two with a fast group and a slow group; each had a walk leader with them. Two of the group were men and the rest were women, 5 of the group were Black or Black British. Table 4 highlights that the group were all over 55 years of age.

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<sup>8</sup> Initial of the first name of the interviewee.

**Table 4: Health walk group Swindon<sup>9</sup>**

Working		Age		Income		Exercise for 30 minutes per day per week		Green space use	
Retired	11	55-64	2	Under 10K	2	1 day a week	2	4-6 times a week	1
		65-74	6	10-20K	4	2 days per week	1	1-3 times week	4
		75+	1	21-30K	1	3 days per week	1	1-3 times month	2
						4 days per week	2	4-6 times year	2
						5 days per week	5	1-3 times year	2

The walk took place straight from the community centre and followed roads until a green link was reached alongside an allotment. The walk then came back onto a road before going off onto a small green space and finally back along the roadside to the community centre. The slower walkers took about fifty minutes to complete the route. The researcher stayed with the slower group of four women, one of whom walked with a stick. A focus group discussion was held in the community centre after the walk.

### Reasons people joined the health walks

Participants had been either coming on the health walk for a few months or had started in the past few weeks. One woman started to come along because she usually walked alone and wanted to walk with others. Another lady saw an advertisement in the paper she described herself as diabetic and said that she had been advised to exercise by her doctor. She came along to the group with her husband.

Two of the women were from warden accommodation in another part of Swindon, they did not enjoy the place where they lived because they felt there was no sense of community and the other residents they thought were not friendly, so the health walks were a chance to get out and meet others. Two other women had been advised by their doctor or nurse and for one woman this was to lose some weight. Another person had a bad back and this was the reason she joined the health walks. It was clear that participants tended to have a range of mild to severe ailments that could be aided by gentle to moderate exercise. The majority of participants had either seen an advertisement for the walks or had been told by a friend, highlighting that word of mouth can be a particularly important way of gaining new recruits.

<sup>9</sup> Not everyone filled in a form which is why the numbers do not add up to the thirteen people who attended.

## Benefits of the health walks

The key benefit identified was the social nature of the activity; the participants wanted to meet others and gained confidence from walking with others. The two women from the warden accommodation particularly enjoyed the company of the people they met on the walks.

*'It keeps you're spirits up because you're meeting people or you're getting out'*  
(Female).

*'It's great it really gets you out and about, gives you some exercise. I think I've lost a little bit of weight since I started'* (Female).

*'I learnt about the group from the lunch club, I enjoy it. I look forward to coming on a Tuesday. You make so many good friends and every week we have new faces. We have a laugh and a chat and a cup of tea at the end'* (Female).

One of the women said that she enjoyed the ethnic mix of the group and said it was important to meet people from different communities. A key aspect of the walks was knowing they were at a certain time and on a particular day and this helped people to participate even when they may have felt that it was difficult to motivate themselves or when the weather was not so good. The thought of meeting friends and new people was therefore a strong motivation for the participants.

A couple of participants stated that they had been to places they had not been to before even though they had lived in Swindon for decades. The walk leader tried to take the group on different walks when possible, the previous week the group had caught a bus to the Town Gardens in Swindon and the walkers had been most impressed. Another lady had lived in Swindon for thirty eight years and had been pleased with a trip the group had made to Coate Water Country Park. Someone else stated that these were the places you took your children to but when they had grown up and left you tended to forget about these places and did not visit them anymore.

## What keeps people participating?

For this group the key issue was the social aspect of the walks and the chance to get out with other people to places they had not necessarily been to before. The participants felt more comfortable and safer in a group and felt that it motivated them to continue participating.

## Attitudes to health and exercise

The group were interested in health issues as a number of them suffered from various complaints and problems primarily due to their increasing age. The majority of participants were over 65 years of age. Walking was an activity participants mentioned that kept them mobile.

*'When I had my knee replaced in 2005 he (the doctor) said its good for me to walk, I've lost a bit of weight since I've been walking. I used to be an occupational therapist; you find there are so many lonely people today they never go out. What they do is they sit and get leg ache and leg pain' (Female).*

*'I've noticed in the few weeks I've come here I've been walking better, I really am. If you're by yourself you probably go into town and you walk a bit, but this is better you're really walking' (Female).*

The woman above had seen a notice in the doctor's surgery for the health walks and she said it was easy for her to join. However, there was general agreement from the rest of the group that some may lack confidence to get involved. For those who drove, a few suggested that driving had the potential to make people lazy as it was easier to just get in the car rather than walk.

### Changes in other areas of life due to involvement in the project

One woman described how getting involved in the health walks had given her the confidence to carry out a sponsored walk in London across its ten bridges. She felt that participating in the health walks triggered her motivation to do this three hour sponsored walk. She had already decided to do another sponsored walk in late 2008. She went on to tell the group about a sponsored walk at Coate Water Country Park which takes place every September, she said everybody would be welcome and they could choose whether to do the 2 mile course or a longer route. One of the health walk volunteer leaders at the focus group also asked if anyone wanted to accompany her to Nightingale Woods on the edge of Swindon, she said she had three spaces in her car and she was happy to take people along. A few people expressed interest. This highlights how the health walks can lead on to people doing new activities or meeting up with others to do further activities.

### Attitudes to woodlands and green space

When asked about whether using green spaces had an impact on people there was a general agreement that this was the case. Someone described how it was nice at this time of year (spring) with things starting to blossom, another described the visual pleasure gained from green spaces. However one person said they would not be so keen walking through them on their own due to concerns about safety. The participants clearly enjoyed their trips out to Coate Water and the Town Gardens and talked about how lovely these places were to visit. All of the participants stated that they wished to carry on with the walks.

*'Up to now I've found them wonderful, especially cause I don't know this side (of Swindon) at all and finding Town Gardens and Coate Water. It's knowing how to get to these places. That one last week was just out of this world (Town Gardens). I told me daughter and she phoned the council (to thank them and say how much her mother enjoyed it). She's noticed the improvement in me; she said you're walking better. Think of what you'll be like after a year (Female).*

Most of the participants had heard about the Community Forest (not everyone) but they were not that sure about what it was or which areas were included within it. The CF project officer was able to provide them with information about it.

## Barriers to participation in the walks

The comments previously about confidence could potentially be a barrier to involvement, not hearing about the activities would also obviously have an impact. One woman said that she had seen a poster in the doctor's surgery but compared to the other posters which were bigger, she said it lost its impact. A couple of people also said that the walks were not advertised widely enough. The weather could potentially be a barrier if it was wet, one woman said that it was a health walk and she didn't think that getting wet and cold was good for her health – she was eighty five years old and was still an active gardener.

Transport was not too much of an issue for the group even though many did not have cars. The two women who came from warden accommodation talked about getting two buses to the community centre. That fact that this was free was very important to them.

*'We're very lucky we can get on a bus and show our pass and don't pay'* (Female).

The project officer when describing other green spaces people could go to gave the numbers of the buses that people could use to get to the sites and an idea of frequency if she knew it.

## Suggested improvements

When asked by the project officer of improvements that could be made the participants focused primarily on how the walks were advertised. They suggested using the local free newspaper<sup>10</sup>; they also suggested that making adverts or posters more visually appealing would be useful and making the text larger and the location of where to meet very obvious.

*'I don't think it's been advertised enough for us to see. Most of us get the free paper and I wish they would have half a page highlighting a walk in the Community Forest'* (Female).

Another person suggested that leaflets should be sent to every doctor's surgery, the project officer said this had happened as part of the project, however she had no say as to whether the leaflets or poster were displayed or where (how prominently) they were displayed in the surgery.

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<sup>10</sup> The project leader outlined that the local newspapers had been used for publicity for many Active Swindon activities.



## 5.2 Summary of results from non-users

### 5.2.1 Low income fathers group

#### Introduction to the group

The researchers were put in touch by the CF project officer with the Swindon Family Centre. After discussions a day out was arranged at Stanton Country Park with a Dads group from the centre that meets every week. Two project workers, one from the National Society for the Prevention of Cruelty to Children and one from Sure Start who worked with the Dads group attended the session as well as the project officer from Great Western CF. The activity took place in July 2007 and a mini bus was hired to take the seven Dads and their six children to the Country Park which is on the outskirts of Swindon. The family centre is located on the Penhill estate in Swindon a relatively deprived area with many families on low incomes and a high occurrence of those with a long term limiting illness.

The researchers talked to the men on the walk around the Country Park on an individual basis and then as a group over lunch. The weather was reasonably good and the children enjoyed themselves seeing the ducks, geese and horses that were passed on route.

#### Attitudes to health and exercise

Most of the men smoked heavily on the route. Many were suffering from health problems for example one man had severe asthma and had been to hospital on numerous occasions over the past two years. Another man had been picked up outside his house so that he would not have to walk to the family centre. One man walked with a stick and another had been in a car accident and had spent a number of months in hospital and was clearly still affected mentally by his experience. However when asked whether physical activity was important all the men said that it was and they mentioned health benefits quite quickly such as being fitter, mental well-being and keeping weight down. They suggested that the weather did not stop them from getting out, most of the men said they tried to do some activity and that might mean walking the children to school or to the shops. However, Table 5 shows that none of the men met the recommendation of exercising for 30 minutes on at least five days a week and one man described how some days he did not leave the house. Another older man had a disabled wife and child, he found that the Dads group gave him an important opportunity to get out of the house and have a break.

**Table 5: Dads group - Swindon**

Working		Age		Income		Exercise for 30 minutes per day per week		Green space use	
Full time	1	16-24	1	10 – 20K	6	0 days exercise	3	1-3 times month	1
Part time	2	25-34	3	21 – 30K	1	1 day a week	2	4-6 times per year	2
Retired	1	35-44	2			2 days	1	1-3 times a year	3
Unemployed	1	55-64	1			4 days	1	Less often	1
Long term illness	2								

### Attitudes to woodlands and green space

After a walk that lasted over an hour, a lunch time discussion session was initiated. This proved very difficult as the children took up the men’s attention and the men seemed to be reluctant to say much in front of each other. Most of the men did not work; some of their partners did, but not all of them. They were generally on low incomes of 20K or under and they visited green space rarely. They all stated that they preferred being outdoors to being indoors but their opportunities were limited because of health issues, child care and transport.

*‘I didn’t know this place existed, we really enjoyed ourselves today’.*

Some of the men used Penhill/Sevenfields, while others took their children to a local play area. One man described how his children preferred playing in woods as there was more for them to do such as tree climbing.

### Barriers to participation in the project

Only one man had been to Stanton Country Park before and some did not even know that it existed; even though it was within a ten minute drive from where they lived. This is linked to not knowing where to go or not trying or being able to find out about places to visit. Most of the men did not have access to a car, and there was a discussion about whether the site could be reached by bus; according to the Great Western project officer it could. However one man stated: *‘The trouble I have is the bus routes’.*

Embedded deprivation can restrict social and actual mobility and motivation to explore beyond the immediate environment. Funding can also be an issue i.e. the cost to get to a space, the costs while at a site in terms of food or treats for the children. Some of the men with health problems also faced restrictions in terms of their physical mobility. The CF project officer used the opportunity to publicise the project and highlight health walks taking place near to where the men lived and she emphasised how physical activity could help to improve or maintain health. It was clear that this group faced multiple

problems and talking about green space and using it regularly was not a priority for them.

### Changes due to involvement in the site visit

Since the visit one family had used Stratton woods and two had returned to Stanton Country Park, indicating enjoyment of the visit to the Country Park and awareness that it is there and what it is like. The Fathers Development Worker passed on the following comments from the men.

*'I think I will bring my older ones out here later'.*

*'I really enjoyed coming out it makes a nice change'.*

## 5.2.2 Women with children group

### Introduction to the women

One of the researchers and the CF project officer held discussions at the Sure Start Centre in Pinehurst Swindon with six women who were not involved in the Active Swindon Project. All of the women had children and one woman had five. The women all worked as child minders. Demographic data was not gathered for this group. The women ranged in age from 20s to 50s.

### Attitudes to health and exercise

The women did not say a lot about physical activity itself or its benefits apart from describing their enjoyment of certain activities. One woman did describe exercise as good for de-stressing and mentally relaxing. For another it was about meeting people and relaxing:

*'It is also nice for your health, because walking and exercise is good for you isn't it. It makes your body and mind relax. When I walk in the park I don't think about anything else. I think mentally you relax, you see what's going on around you'.*

One of the women jogged to keep fit; she had a small garden that was not really big enough for the children to do much in. Another woman had been very active going to keep fit classes five times a week; however she had had a health problem over a year ago and did not feel that she could do what she used to. The women, in general, did not class housework as physical activity because it was an embedded part of their everyday lives.

### Attitudes to woodlands and green space

One woman said that she had lived near a wood when she was young and had used it a lot and enjoyed the experience. All of the women said they had used green spaces when young. Another described having barbecues in the past and liked to go out with the family so that these occasions were social ones. However the women went on to say that

they would not let their children have the same freedom they had had to use these spaces. One woman in particular went out to a variety of places a few times a month. Most of the women felt that bad weather did not deter them particularly. One woman's mother lived near Portsmouth, near the beach, and she described going there as a family and cycling down to the beach. Another woman described walking round the lake of a nearby Country Park (Coate Water) and how it seemed difficult at first (it was approximately one and a quarter miles in length), however over time she described it becoming easier and she had started to go further with her family to get more of a physical challenge. Woodlands were described as particularly pleasant because of the opportunities for children to climb trees and build dens. However a combination of open space and trees was viewed as good because it allowed the women to see the children more easily; so they did not get lost amongst the trees. The women enjoyed being active in green space primarily to do things as a family and to socialise and get out into the fresh air. One woman described a den building activity she had been to with her children and how they had toasted marshmallows on a fire. Most of the women felt that socialising was an important aspect of being outdoors.

## Barriers to participation in the project

Transport was an issue for two women; one in particular had no car and stated:

*'if I have the money I will take them to a park or Coate Water, you can take the bus but I've got five kids so it would cost me about seven quid and then they want things like ice cream or whatever'.*

Safety was an issue that was raised by all the women, particularly if they were alone and also concerning their children. As one woman describes:

*'I wouldn't go on my own in woods even in the day time because you never know. Because if they attacked you and you're on your own, I'm not taking that chance'.*

One woman stated that *'you worry more about the girls because they seem easier to target'*. The women felt unable to do much about this feeling, they generally stated that their children were sensible but it was other people they were worried about and other children.

Untidy places that showed a lack of care of green spaces were off-putting for the women. One described seeing used needles in a green space, highlighting drug activity and this made her uneasy. Lack of facilities for the children such as good play spaces was also raised as many of the women had young children that wanted to use play areas. Work patterns and lack of time were also seen as potential problems, the women had a range of competing demands on their time.

## 5.3 Summary of site representative's view

The CF project officer was interviewed, she was employed to focus on family based learning by Swindon Primary Care Trust but was located with the CF. The key focus for this work was the use of woodlands for activity with an overall aim of increasing the number of people using local woodlands and associated open space for physical activity. Activities could take place anywhere however the project officer always made links to green spaces and woodlands. The CF had started to develop FS in 2004 and from the end of 2005 FS work was supported through the Active Swindon Project.

### Successes

At the beginning of the project 2 schools were involved in FS, however in 2008 24 schools were involved and many people have been trained to lead or support FS activities. FS leaders had been trained through courses supported by Active Swindon. 28% of schools in Swindon have a qualified or training FS leader and thousands of children have benefited from the focus of the project on FS.

The Tree-mendous festival in 2007 was a success and attracted over 400 people to the event.

The health walks set up in late 2007 have developed and volunteers have been trained as walk leaders. Six walks starting from different locations take place once a week and can make an important contribution to keeping people active on a regular basis. 23 people have been trained as volunteer health walk leaders. As well as providing an invaluable human resource for delivery of the health walks the volunteers themselves have benefited from their involvement. Many volunteers have developed in terms of their own abilities; they have gained their walk leader qualification and improvements in self-esteem.

### Challenges

A key challenge was trying to mainstream FS the project officer has found it difficult to get the local education department on board. Unfortunately FS is not recognised nationally in the way that Ecoschools or Healthy Schools<sup>11</sup> are. FS for those involved is often thought very highly of, as FS leaders see the positive impacts it can have on children. However without wider recognition it can be difficult to make others aware of what can be achieved through FS.

There has been a range of publicity concerning the Active Swindon project however there was a feeling that some of this has been limited or had not always included all the

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<sup>11</sup> Ecoschools is an international awards programme that guides schools in becoming more sustainable. Healthy Schools is a national programme to promote the link between good health, behaviour and achievement.

details people felt they needed to make a decision about whether to participate in a walk or event.

The health walks were originally set up in the school holidays and this was not an effective time to start. The project officer found that for the first few weeks no one turned up and there were concerns that it was not going to get off the ground. This was primarily considered an issue of timing as there are now 6 groups that meet every week.

### Future development

Although the post of the project officer came to an end in 2008 further funding was secured through forming a partnership between the Cycling Touring Club (CTC) and the CF. A Community Cycling Development Officer has been recruited to work with local communities in Swindon that are currently unlikely to cycle.

Funding has also been received for the development of a 'Woodland Games' Initiative in a partnership between Natural England and the CF. The focus will be on improving health and well-being through encouraging communities to develop their own ideas for different woodland activities. Ninety thousand pounds of funding has been received for this project.

The CF is currently assisting the Woodland Trust with the long term development of Stratton Woods. Increasing physical activity opportunities will be an important part of this work.

The Primary Care Trust's Active Swindon team amalgamated with Swindon Borough's Sports Development/Lifestyle team in 2008. Work will continue on the programmes established through the Active Swindon project (Barr, 2008a).

## 6. Discussion

The work undertaken by the Great Western CF project officer as part of the Active Swindon Project was successful in reaching some of the Active England target groups e.g. those over 45 years of age, those on low incomes, women and under 16s. People within these target groups were able to participate sometimes for the first time in particular physical activities such as health walks or Forest School. The research has highlighted the types of people visiting the three green spaces of Penhill Park, Stratton Woods and Stanton Country Park and the activities they are undertaking at these sites. The people classed as users of the project (health walkers and Forest School leaders) outlined the importance of encouragement to get involved and led activities that gave them the confidence to participate. The socialisation opportunities that arose through these activities were seen as critical in enabling people to get involved but importantly motivating them to continue their involvement. Events run throughout the project attracted a variety of people and could sometimes lead people to get involved in activities they have not done before. Led activities provide greater opportunities for embedding physical activity into people's everyday lives as they often take place on a regular basis providing support and encouragement to people to keep participating.

By employing the CF project officer through Swindon Primary Care Trust links could be maintained with the co-ordinator for the Active Swindon Project as a whole and with the health sector. Increasingly this sort of approach is being used in bringing together health and green space/environment professionals (O'Brien, 2005).

Through action research the non-users of the project were able to find out more about what Active Swindon was about and how they could participate if they wanted to and were able. However, some of the barriers faced by the Dads group in terms of health problems, restricted mobility and embedded deprivation made it difficult for them to get involved even if they were interested.

A critical lesson from this type of project is the need to recognise that undertaking outreach work and trying to attract under-represented groups takes time and attaching value to this type of work is important as the difficulties of engaging with these target groups is not always recognised.

Key recommendations and 'lessons learnt' are presented in the main evaluation report, drawing on research findings from across the five woodland projects.

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