

# WAY TO HEALTH

a survey of what people do to get well or keep well in South Reading



Food4Families, August 2018





# The Way to Health

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Food4Families

Whitley GrowAllot

Southcote GrowAllot

Katesgrove GrowAllot

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Southcote Sure Start – parents and staff

Southcote Library – staff and library users

Southcote Community Centre staff and volunteers

Residents and volunteers in the Southcote Christian Action Shop

Whitley Community Development Association

Users and volunteers at the Whitley GrowAllot garden

Residents in Whitley and Southcote who responded to door knocking research

The Whitley Researchers

Dr Aileen Ho of the University of Reading

Dr Richard Nunes & Dr Senjuti Manna from Henley Business School, the University of Reading

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This report is a Whitley Researcher and University of Reading production including Aneta Banas, Naomi Lee, Sonia Duval, John Ord - Whitley Researchers and Sally Lloyd-Evans, and Lorna Zischka of the University of Reading.

August 2018

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## Executive Summary

The research was commissioned by Food4families and aimed to investigate how three of its community food growing sites contributed to getting or keeping well. A total of 50 individuals were interviewed in June and July this year. The views of site users and non-site users were recorded. The growing sites are located in Southcote, Whitley and Katesgrove. Additionally, the results of several focus groups and additional direct household interviews are featured in the recommendations. Appendix 2 contains the results of the household interviews.

The four activities that contributed most to wellness were healthy eating, exercise, getting out in nature and being part of a group. Average wellness for all persons interviewed was almost seven out of ten (ten being perfectly well).

Almost half of all those interviewed were currently or had been involved in Food4families sites. People who are or had been involved did not report significantly higher levels of health as those who were not part of the F4F programmes. However, this is not surprising since what is provided is for both the vulnerable and the more thriving sectors of the population.

The most frequently mentioned advantages of taking part in the F4F programme was the chance to meet up with other people, the opportunity to learn new things, getting a share of the produce and having family activities.

These findings form the core of the recommendations including the need to celebrate the growing season towards the end of the season with an event open to the wider community.



# Survey and analysis

**This survey was run in order to find out what people do to keep well or get well and also to discover what barriers they face to wellness.** The research set the context by which to evaluate the particular impact of Food4Families on wellness. Food4Families has several GrowAllot gardens in Reading – the focus for this survey was community gardens in Whitley, Southcote and Katesgrove.

People local to the area are invited to manage and cultivate these allotments together as a group on set days. The programme aims to encourage healthier eating and lifestyle habits, as well as to promote an understanding of the broader environment and sustainable food production. All food grown together is shared out amongst group members. Nature friendly techniques are taught and used and children are welcome to participate with their parents.

An additional piece of fieldwork engaged residents whose properties bounded the GrowAllot centres in Southcote and Whitley. The details of this door knocking initiative are presented in Appendix 2. The recommendations arising from this fieldwork are incorporated in this reports final Recommendations section.

**The questionnaires collected some basic information on age, gender, location, ethnicity, self-reported ‘wellness’ and access to a car. It then lists a range of activities that are seen to promote wellness.** These activities were partly drawn from focus group feedback (what people do to feel good). Having compiled a list of activities relevant to people in the three community gardens, including activities related to the work of Food4Families, respondents were asked whether or not they did these things, how important they rated each activity for their wellness, and detail about the things that helped or prevented them from getting involved. For those who had already had some experience of the Food4Families programme, extra details were asked about what got them involved and what their involvement meant to them. **In all a total of 50 people were interviewed during the months of late June and early July.**

Findings from the survey could help progress people’s efforts to gain or sustain wellness by making use of the Food4Families community garden centres.

## Description of persons interviewed

**Just over half of the 50 interviews were carried out in Whitley, and the other (just under) half in Southcote with a small number in Katesgrove.** These districts were very similar in terms of the self-reported ‘wellness’ of those interviewed – there was no statistically significant difference between the two. Special effort was taken to capture the responses of persons who had taken part in the Food4Families programme, such that 47% of all interviews were amongst people who were or had been part of this programme.

A couple of people under 20 were interviewed, and for every decade age bracket above that, there was a fair representation of persons interviewed up to and including the final age category which was ‘over 60.’ **The age group most well represented of all was people in their thirties.**

**Women were more heavily represented than men in these surveys** – two thirds of interviews were carried out with women, and likewise, women were more heavily represented than men as representatives of the Food4Families programme.

**People were asked to describe their own ethnicity.** 83% were white. Non-whites described themselves as Bengali, Black Caribbean, Indian, Somalian, South Sudan, Black and Malaysian. Whites described themselves mostly as ‘white British,’ just ‘white’ or ‘white other.’ There was a higher representation on non-whites amongst the Southcote interviewees compared to Whitley. Non-whites were weakly more likely to mention time and money barriers than whites, they were less likely to work or volunteer, and they were also less likely to take medicine. In other respects the demographic profile of whites and non-whites was similar.

## Factors contributing to wellness

**People were asked whether or not they took part in various activities that promote wellness, and also to give their own rating about how important this activity is to their wellness.** How important an activity is to wellness was rated on a scale of 1 (not at all important) to 5 (very important) implying that people rating things as 4 and 5 found the activity to be important and any *average* rating over 3 suggests a majority agreement that the activity is important to wellness. The summary statistics are shown in the table below, listed in order of importance to wellness.

<b>Activity</b>	<b>Mean average rating of how much this activity contributes to wellness (1-5)</b>	<b>% of persons interviewed who take part in this activity</b>	<b>How persons who take part in the activity say it contributes to wellness</b>	<b>How persons <i>not</i> taking part in the activity say it contributes to wellness</b>
Get involved in a community group/club/support group/religious group	4.40	88%	4.61	<b>3.00</b>
Eat healthy	4.34	86%	4.37	<b>4.17</b>
Give to/ do things for other people (and receive back)	4.32	86%	4.64	1.60
Work in paid job/volunteer	4.27	86%	4.57	2.43
Get out in nature in other ways	4.08	72%	4.47	<b>3.14</b>
Exercise	4.01	64%	4.45	<b>3.15</b>
Learn new things	4.00	84%	4.23	2.71
Share food or drink with family/friends	3.96	86%	4.29	2.00
Pray/meditate/think positive	3.92	75%	4.61	1.92
Time out alone/ rest	3.81	80%	4.08	2.56
Do gardening	3.73	57%	4.74	2.42
Do something creative	3.61	73%	4.26	1.67
Take medication	3.25	41%	4.60	2.13
Take part in cultural/heritage events or visit cultural/heritage sites	3.32	51%	4.38	2.28
Party/go for a night out	2.73	35%	3.85	2.07

'Shopping therapy' (buy stuff!)	2.58	36%	3.74	1.97
In addition to these activities, one person mentioned the importance of time to read or watch serials/films. They also considered this to be important to their wellbeing.				

The data provides us with insights into what sort of activities mean most to most people and which ones face high barriers to entry. **It can be seen that nearly every activity listed is, on average, generally agreed to be important to wellbeing with the exception of 'shopping therapy' and partying/going out for the night** (although even these activities were seen to be fairly important by the majority of people who did them).

**The higher rated activities also tended to be done by a higher percentage of the population interviewed (people do what they find to be important), with a few notable exceptions.** For example, getting out in nature or getting exercise are both very highly rated as contributing to wellness, and yet are less practiced than many other activities, suggesting certain barriers to entry. On the other hand, rest time alone has lower ratings in terms of contribution to wellness and yet most people do it (with the exception of some mothers in particular). This suggests much lower barriers to entry and there were even a few remarks about having too *much* alone time for some!

**It can be clearly seen that people tend to rate the activities which they actually *do* as more important to their wellness than the activities they do not do.** In other words, the average ratings given to an activity in terms of its impact on wellness are higher amongst people who do the activity and lower amongst the people who do not. It could be understood from this that people tend to do what helps them, and that one main reason for people *not* taking part in a particular activity is that they do not want to. It is not always because they cannot. This is the most likely interpretation, although it is also possible that people who do not take part in an activity do not fully understand the value of that activity to their wellness, or else they seek to justify their own behaviour/decisions after the event by rating activities they have not done as poor contributors to their wellness.

There were just four activities which were rated 3 and over by those who do *not* take part in them. The high ratings even among non-participants suggests that these are activities that are almost universally perceived to be good, but there must be significant barriers to entry because although most people rate them as important, not everyone does them. **These four activities are, in order of importance to non-participants, healthy eating, exercise, getting out in nature and being part of a group.**

**Healthy eating was perceived as one of the most important factors affecting wellness and indeed, there was a direct correlation between poor health and unhealthy eating.** Cost and convenience were important reasons why people did not eat more healthily. There is no evidence to suggest that people who attend the GrowAllot centres ate more healthily than anyone else.

**The sort of barriers directly mentioned by persons who would like to participate in these four activities but cannot include time constraints (to healthy eating, exercise and attending groups); health and mobility constraints (particularly related to exercise and getting out into nature); and cost (as a barrier to healthy eating and getting out into nature).** Motivating oneself to make the effort required was also mentioned as an issue when it came to healthy eating and exercise.

**Health issues, especially anxiety and depression related issues were the primary barrier to wellness.** Time constraints, and to a lesser extent money and transport difficulties also prevented people from

doing wellness related activities. However, people with all kinds of difficulties were represented in the GrowAllot centres, suggesting that it is an inclusive group with low barriers to participation. **People who were part of the GrowAllot centres (or indeed of any group) were more likely to mention being able to access help more generally as well – the group helps people to connect into supportive networks.**

Special mention may also be made of **activities which are rated highly** (4 or over on average) by people who do them, and negatively (2 or under on average) by people who do not. Whilst these activities are clearly important to those who do them, the negative ratings by people who do not **imply that people are not doing them because they do not want to rather than because of high barriers to entry.**

**The four highly rated activities are: Giving to others, thinking positive and/or prayer, sharing food or drink with others and doing something creative.** 86% of those interviewed said they gave/did things for other people, 75% said they tried to think positive or else (to a lesser extent) prayed, 86% shared food or drink with others (especially with family), and 73% said they did something creative. Barriers to these activities are low in that no one gave any reason why they cannot think positive or pray (except not being very good at it) and no one had a reason why they cannot give.

**Several other activities were also seen by most as important to wellness, and particularly by those who did them. These included paid work or volunteering, learning new things, and taking part in cultural/heritage events**

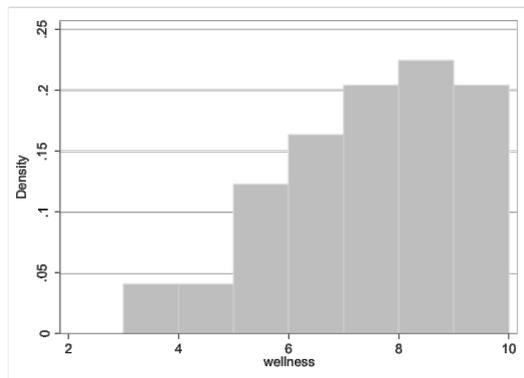
**Taking medication was extremely important to the wellness of those who depended on it,** although some expressed a strong aversion to having to take medicine at all, despite its importance. Having to take medicine is rather associated with unwellness than with wellness overall.

**Partying/taking a night out or shopping therapy/buying stuff** were the two activities least likely to be rated as important to wellness, and also the activities least likely to be indulged in.



## Overall wellness

How those interviewed rated their own wellness on a scale of 1-10 is shown in the following figure.



**It was found that very few out of the activities mentioned in the previous section were significantly correlated to the overall wellness of a person.** Healthy eating was associated with higher levels of wellness; eating with other people (indicative of supportive relationships) was also weakly correlated to wellness, and taking medication was associated with *lower* levels of wellness, but whether or not people did the other things had no statistically significant association with self-reported wellness.

More to the point with the other activities was whether or not people were getting to do the things that they personally felt to be important to them. People who felt a particular activity was important to their wellness and yet for some reason did not actually *do* that activity tended to express significantly lower levels of wellness than everyone else.

**Average wellness for all persons interviewed was almost seven out of ten, and for those who did the big four activities (healthy eating, exercise, getting out in nature and taking part in groups) average wellness was 7.3.** Persons who voluntarily expressed some sort of guilt or dissatisfaction with their own involvement in these four (for example, “I exercise but I *should do more*” “I *try* to eat healthy but I don’t always manage”) tended to report significantly lower levels of “wellness” compared to this average (their mean wellness was 6.0). Likewise, persons who think that the big four activities are important to wellness but do not or cannot do one of them at all also report themselves as significantly less well than all other persons (mean wellness 5.9).

**This shows that the main contribution to wellness comes about from helping people to do the things that they feel are important to them.** ‘Gardening’ for example is not for everyone, and where people have no interest, they are unlikely to benefit from the activity. **Where gardening meets a felt need however, wellness will be significantly enhanced by getting involved.**

**How an interviewee rated his or her locality in the context of art, culture and heritage had a significant association with wellbeing.** Either people were happier when they felt they were in a good locality or else, perhaps more likely, happy people felt more positive about their locality. People who took part in cultural events, who got out into nature and who ate with others (had positive reciprocal relationships) all reported more positively on their locality. People who had learnt new things however tended to report less favourably on their locality. Perhaps they were more aware of what they were missing!

## Food4Families and wellness

**This study was particularly interested in the impact of Food4Families and its community gardening programmes focusing on wellness. 47% of those interviewed in this survey were currently or had at some point been involved in this programme.** More women than men had been involved in the programme. Ethnic minorities were well represented. The programme rather served working age persons than those in retirement.

**To start with gardening in a more general sense: questions about gardening in the survey revealed that 57% of those interviewed took part in gardening in some form or another.** Gardening was not the activity most highly rated as contributing to wellness on average, and yet amongst those who did it, no other activity was rated more highly.

**43% of those surveyed did not garden however (including some of those who had formerly been part of the Food4Families programme).** In other words, on average, people who did not garden also did not rate gardening as important. This suggests fairly low barriers to entry when it comes to gardening – people don't do it because they don't want to rather than because they can't. Indeed, mentions of ill health, money barriers or transport problems had no statistically significant interaction with the likelihood of gardening. Mentions of time constraints were associated with being less likely to do gardening, but only amongst those who did not think that gardening was especially important to wellness. Those who think gardening is important to wellness tended to find the time for it!

**Having said that, 8% of all interviewees felt that gardening was important to wellness** (score 4 or 5 out of 5) and yet did not do it, suggesting they face other barriers. The kind of barriers mentioned by these persons included having no garden and health issues.

**Communal gardening, such as is practiced by the GrowAllot/Food4Families centres also address the issue of being part of a group (rated on average as the most important factor to wellbeing), and the factor of eating healthily (rated as the second most important factor to wellbeing).** It has to do with give and take, with doing some productive work, with getting in touch with nature, with exercise, with learning new things, and with sharing food or drink with family and friends. In other words, the eight top-rated activities in terms of their contribution to wellness are all touched upon within the Food4Families programme. 'Doing something creative' is also touched on, and several persons specifically mentioned expressing their creativity through gardening.

Having said all that, people who are or have been part of the Food4Families programme do not report significantly higher levels of wellness than people who are not part of the programme. This is not surprising in that the programme is intended to provide for both the vulnerable and the thriving sectors of the population.

## The benefits of engaging in the Food4Families programme

Those who were or had been part of the Food4Families programme were asked a direct question about how it had benefitted them:

- **The most frequently mentioned advantage was the chance to meet up with other people** (chance to talk, meet new people, eat together and take action together). Correlations also revealed that people who were or had been part of the Food4Families programme were more likely to be part of a community group than others.
- The second most appreciated aspect mentioned was **the opportunity to learn new things and make new experiences** – both adults and children could gain from this. And again, correlations in the data revealed a weak association between being part of the Food4Families programme and learning new things.
- The third most frequently mentioned advantage was **getting a share of the vegetables, fruit plants for free.** and
- This was followed by the **advantage of having a ‘family together’ activity.** Parents appreciated the fact that they and their children could both get involved.
- In addition to these advantages, one person added that their involvement had led to paid employment; another appreciated that the activity was good for the environment and connected you to nature; a third said that they were inspired to create their own garden; and one more said that they were inspired to grow herbs at their own kitchen window.

Although people who mentioned health barriers were just as likely to attend the programme as people who did not, there was a weak correlation between being part of the programme and not taking medication, which is a positive sign. However, Food4Families state that one important aim of the programme is to encourage healthy eating, but the data in this survey revealed no correlation between attending the programme and healthier eating.

**Most people had got involved with Food4Families through a personal recommendation.** Someone visiting the children’s centre or another community group, being sent by Reading refugee support group, a Beavers BBQ, a family or a friend recommendation. Just a few people came along because they saw the programme advertised.



# Recommendations

1. Each community garden should strongly focus on the **chance to meet other people** – to talk, to meet together, eat together and take action together. Association is powerful attractor and human need – particularly in the garden neighbourhoods where there are well registered high levels of loneliness and isolation.

Linked to this is a need to build a **connective network** – or exploit and use existing networks. A network of supporting charities and community groups and alliances with corporate partners could help provide much needed on-going or more sustainable aid. Public sector agencies could and should be engaged to support the community gardens e.g. links with the Reading Borough Council Allotment department staff might help to offer alternative allotment space to those on an extensive waiting list for plots. Social Services would also recognise the importance of community gardens as healthy recreational spaces.

2. Opportunities to **learn new things** and make new experiences should be a priority – both adults and children could gain from this – either together in cross-generational co-operation or in distinct groups e.g. children from a particular school group or class. The emphasis here should also reflect the different cultures and heritages that are clear features of each of the community gardens.

3. The produce from each community garden – the vegetables, fruit and plants and herbs – could be (in some cases already are) a **free gift** to the community. Here there could be links with local food banks and/or community centres prepared to set out food in stall style with access to classes offering cookery skills.

4. Family based programmes or activities – **‘family together’** – should be a main feature of a programme and best offered at times to maximise attendance and support. There is already wide awareness of open days, seasonal events (Easter Egg Hunts) fairs and demonstrations or shows – however, these may be infrequent or poorly advertised or lack volunteers/paid staff. Perhaps if these can be tackled such events with added attractions around music and games could open up awareness of the value of a thriving community garden.

5. **Publicity** – of all sorts including leaflets and social media – must be offered regularly. Many residents said that they knew nothing about what was on offer and some few said they thought the community gardens were private facilities. Overall, residents and local groups did not know what was going on in each of the centres and where there was interest it appeared that the gardens ‘belonged’ to others. The restricted hours also limited attendance – there was little sense of local ownership or management.

It should also be noted however, that the research indicated the importance of **personal recommendation** – there were several dimensions to this including recommendations from friends or family, referrals by children’s centre or community groups or community workers.

6. The **‘GrowAllot’ title** for what are in practical terms, community gardens may emphasise the spade and dig aspect of gardening – however, there were several references to broader activities or events that help stretch a more imaginative use of the garden space e.g. as a therapeutic facilities as healing centres for people with mental or physical difficulties or disabilities. Linked to this were suggestions for access to a space for meditation or reflection away from the hustle and bustle of family or work pressures – a safe and green space.

**Other suggestions** included community gardens as a place for wild life and this may be worth auditing for each centre and use of the gardens as outdoor classrooms. For the latter the gardens offer vast opportunities for learning linked to the school's own aims through the curriculum and helps deliver real learning outcomes.

7. It was clear that people wanted to get **advice and guidance** on gardening and growing matters but felt unable to approach the gardens to ask. Couldn't each garden be a training centre? Some wanted advice on their own gardens and others felt they did not have the resource or energy to 'tame' their own, often large, garden spaces – help here would be appreciated even if the community garden was able to marshal volunteers or bring in or recommend help from other sources. Additionally, some people suggested that the gardens offer a range of simple garden tools – shears, rakes etc – as a gardening tool library.

8. It appeared to many people that the force of 'community garden' was directed inwards and hardly outwards. In what sense was the community garden **greening the local neighbourhood**? One resident referred to the 'Incredible Edible Todmorden' campaign that almost in guerrilla style, targets community spaces as growing or planting grounds; in this way, building real awareness and confidence in local communities transforming local places and spaces.

**Who can community gardens work with?** A quick review of agencies across the garden centres suggests the following; local schools, nurseries, play schemes/toddler groups, library groups/coffee mornings, children's centres, youth groups, parent and baby groups, Social Services, sports clubs, community centres and associations, refugee support groups, voluntary action groups, uniformed groups such as scouts, churches and temples, childcare providers, university interns and so on.

These recommendations – subject to consideration and approval - will take time and resource to implement. The suggestion here is that each of the three community gardens convenes one open event or fair in September or October as an earnest of intent.

Subsequent to this a thorough action plan should be put together over the close season for active implementation in the new growing season next year.



# APPENDIX 1

## FOOD FOR HEALTH Individual schedule

Interview by.....Date.....FormNo.....Location.....
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This survey aims to find out how we keep well and what barriers we face in trying to keep well or get well. Food4Families are leading this research with the assistance of the Whitley Researchers and the University of Reading. Please note that your responses are entirely confidential and anonymous. You do not have to do this questionnaire and you can skip any question you do not want to answer. Would you be willing to respond to this survey? **Yes No**

<b>Age range:</b> 11 – 20, 21 – 30, 31 – 40, 41 – 50, 51 - 60, 61 +
<b>Gender:</b> Male Female Other..... <b>Do you have frequent access to a car?</b> Yes No
<b>Residence</b> (start of post code only) ..... <b>Ethnicity</b> (self-described) .....

**1. Do you do any of the following, and how important do you think each activity is for your wellness? (on a scale of 1-5 with 1=not at all important and 5=very important)**

	Yes	No/ rarely	Would like to but can't (please explain why not)	Importance to your wellness (scale of 1-5)
Eat healthy				
Exercise				
Take medication				
Share food or drink with family/friends				
Learn new things Examples?				
Work in paid job/volunteer				
Pray/meditate/think positive				
'Shopping therapy' (buy stuff!)				
Get involved in a community group/ club/ support group/ religious group Which?				
Give to/ do things for other people (and receive back)				
Do something creative What?...				
Do gardening				
Get out in nature in other ways Where?				
Take part cultural/heritage events or visit cultural/heritage sites				

Which?...				
Party/go for a night out				
Time out alone/ rest				
Other (what?)...				

**2. How would you rate your own 'wellness' on a scale of 1 to 10?**

<b>1 (very poor)</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>	<b>6</b>	<b>7</b>	<b>8</b>	<b>9</b>	<b>10 (perfectly well)</b>
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**3. Apart from barriers mentioned in Question 1, what else stops you from keeping well or getting well?**

**4. Can you access any services/activities/support to help in overcoming the barriers you face?**

- Yes. Examples?
- Don't know
- No. What do you think is missing/needed?

**5a. Have you or do you make use of Food4Families garden or GrowAllot centres** Yes No

If yes, can you tell us about how you and/or your friends or family have benefited from attending the centres

1.....2.....3.....

**5b. Can you tell us why you first got involved in the garden/GrowAllot centre**

**6a. What does art or culture or heritage mean to you (ring chosen terms)**

**6b. Is where you live advantaged or disadvantaged in these areas - how would you rate the place you live in on a scale of 1-10**

<b>1 (very poor)</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>	<b>6</b>	<b>7</b>	<b>8</b>	<b>9</b>	<b>10 (excellent)</b>
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<b>What goes well:</b>	<b>What could be better:</b>

## APPENDIX 2 Door knocking responses – Southcote and Whitley

### Southcote

This research was undertaken in early August and involved contacting residents directly in all properties backing on to or overlooking the Southcote GAL: Florian Gardens, Virginia Way, Bute and Gainsborough Rd.

In all 22 residents responded – 6 from the flats in Florian Gardens (Thamesmead and Thorneymead Houses). The residents split equally by gender – 11 male and 11 female. Most residents were in the 30s or 40s age band (4 under 30, 2 in 50s and 5 were 60+).

#### Awareness of the SGAL

- 21 residents were aware of the SGAL – 1 resident totally unaware (Bute Rd)
- 9 found out about SGAL simply from proximity – saw activity, comings and goings. Others found out via being informed when gardens opened (3) and 6 from interactions with garden e.g. receiving seeds, helping garden set up (giving tools) dealing with SGAL overgrowing trees. Receiving letters, neighbour informed, seeing signs/notice board were single contributions.

#### Use of SGAL (22 responses)

- 16 residents had never made use of SGAL
- 6 had in the past
- No residents were making current use of the SGAL

#### Why no use ever or in past only

Never used (21 responses)

- 7 residents were not interested in gardening or not a gardener and 4 residents were too busy (family, children)
- 4 residents claimed not to have had any help or encouragement to use SGAL (did not feel it was theirs) and 1 felt they had no right to use SGAL.

Used in past (6 responses – 12 explanations)

- Help with growing plants and encouraging children's interest in gardening (6)
- Advice on growing things and with own garden (4)
- Getting seeds and produce (2)

#### What should be offered to encourage resident involvement?

- Most residents wanted to see a wider range of fruit, vegetables (e.g. sweet potatoes), herbs that catered for their culture, their improved diet (e.g. vegetarian) available or grown for community consumption (15)
- 6 residents wanted a more 'community' facility – variously suggested as coffee mornings, sensory garden, place to relax – particularly for older/isolated people, small café, access to tools and advice on gardening.

- 12 suggestions were mixed including holding a Saturday market (2) opening more often (2), giving our more information about what's happening (3), and who to contact (1), having meals together and a lot more for younger children (2), better links with community.

## **Summary comment**

### **1. FIELDWORK**

This was a meaningful piece of field work in terms of resident engagement with a significant response from more vulnerable residents in Florian Gardens. In terms of gender the response was perfectly balanced and most residents were in the 30/40s age band

### **2. AWARENESS**

As might be expected almost all residents were aware of SGAL. Most had found out simply from proximity – their properties abutting SGAL. Some had interacted with SGAL people e.g. receiving seeds or dealing with overgrowing trees. A small group (of 3) found out when the garden was first opened (two of these complained that the original promise of resident involvement had never been kept)

### **3. USE**

No residents were making current use of SGAL and 16 had never got involved. In the main they were either non-gardeners or had time consuming family commitments but a significant smaller group felt that they were unnoticed or discounted by current SGAL users.

Past users cited mostly help and advice with seeds and plantings – particularly with their children.

### **4. ENCOURAGING**

Overwhelmingly, most residents wanted to see a wider range of fruit, vegetables and herbs – there was a clear wish for a more relevant produce – to meet cultural heritage, new dietary preferences e.g. vegetarian or simply healthy eating.

There was a strong demand for a more community oriented SGAL catering for local needy groups, tackling isolation, offering community meals and providing much more information about what was going on; overall, better links with the local community.

# Whitley

This research was undertaken in early August and involved contacting residents directly in all properties backing on to or overlooking the Whitley GAL: Meavy Gardens, Brixham Rd and Basingstoke Rd.

In all 14 residents responded – mostly Meavy Gardens and Brixham Rd. The residents split equally by gender – 7 male and 7 female. They were well spread across age bands – 4 up to 20, 5 in 30s and 40s and 5 in the 50s and 60+ age bands.

## Awareness of the WGAL

- 13 residents were aware of the SGAL – 1 resident totally unaware.
- 11 found out about WGAL simply from proximity – seeing people and activities. One was present at founding and 1 from a leaflet.

## Use of WGAL (14 responses)

- 12 residents had never made use of WGAL
- 2 had in the past
- No residents were making current use of the SGAL

## Why no use ever or in past only

Never used (12 reasons offered)

- Almost half residents (5) were too busy with children or other family commitments. 3 residents were busy with their own gardens and 2 were not interested in gardening. One was housebound and asked about disabled access and 1 did not know it was open to public

Used in past (2 responses)

- Help with growing plants and encouraging children's interest in gardening.

## What should be offered to encourage resident involvement?

There was a wide spread of responses (16):

- Hold harvest celebrations and share produce (3)
- Offer training, advice and support to local gardeners (3)
- Visits should be arranged – particularly with activities for children and families (3)
- More activities for the community – meditation or 'chill out' sessions, play activities and more events such as Easter Egg hunts. (4)
- There should be a lot more advertising and people should know it's their garden – maybe offer some space for family growing. (3)

## Summary comment

### 1. FIELDWORK

More contact could be made with local residents but the number contacted is sufficiently significant – Meavey Gardens and Brixham Rd could be a further target for local contacts  
In terms of gender the response was perfectly balanced and there was a good spread of responses by age.

## **2. AWARENESS**

As might be expected almost all residents were aware of WGAL. Most had found out simply from proximity – their properties abutting WGAL. Only 1 had found out via a leaflet and 1 present at founding.

## **3. USE**

None of the 14 residents contacted were making current use of WGAL and 12 had never got involved. Only 2 had in the past. 12 reasons were offered for non-involvement – 5 were busy with family/work commitments and 3 with their own gardens. 2 were not interested in gardening – one was housebound and one thought they were not allowed to use WGAL.

## **4. ENCOURAGING**

12 of the 14 residents made suggestions for encouraging local use – 18 suggestions were made across a range of options; mostly around celebrating and sharing harvest and getting into the community to help local gardeners. Better connections with the community might be fostered with arranged visits – to households and community groups and greater efforts made to publicise what WGAL is about and what is happening. More should be offered to local families and children and a greater range of activities and events offered.