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"My neighbours all look out for me as I try to do".

Important 'community assets' for health: findings from the Healthy Halifax Lifestyle Survey.

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Background

In 2008, the UK Department of Health funded a series of public health initiatives in nine 'Healthy Towns'. One Healthy Town - 'Healthy Halifax' – aimed to target their initiatives on facilitating healthier lifestyles in local populations living in four Calderdale wards with the poorest health outcomes.



Aim

As part of understanding 'what works' and how best to meet the health needs of the target population, a lifestyle survey was undertaken across the four wards. Findings related to the 'community asset' question will be presented here.

Method

In order to maximise response rates, an evidence-informed approach was used¹. The total target response rate was 1,000 (250 per ward), and following the first survey distribution, the total response rate was 61% (n=610).

Results

Of the 610 surveys returned, 31% of respondents completed the 'community asset' question (n=187). Initial findings show the following most frequently cited assets in relation to good health and wellbeing:

Places of Worship

"Going to the local mosque makes me feel happy about myself"
"If I didn't go to church I would be a lonely person"

Neighbours

"My neighbours all look out for me as I try to do"
"I have a good relationship with my neighbours – they are my guardian angels"

Green Space

"I am surrounded by lovely countryside"
"The park contributes to my general health"

Community activities/initiatives

"The neighbourhood gym has helped keep me fit & healthy"
"The local Sure Start centre has been there for me when needed"

Family & friends

"My mates give me advice on what is healthy"
"I am surrounded, within a mile or so, by close family and friends"

Local facilities

"I like having the GP surgery close by"
"There are good range of shops locally"

Conclusion

Preliminary results indicate that, along with the more traditional measures of health behaviour, certain 'community assets' are important indicators for health and wellbeing. Further work will examine responses based on gender, age, ethnicity and postcode in order that data may be used to facilitate more efficient targeting of public health improvement campaigns.

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Reference: McCluskey S & Topping AE. (2011). Increasing response rates to lifestyle surveys: a pragmatic evidence review. *Perspectives in Public Health*, 131, 89-94.