


MAY 2012

PARTICIPATORY WORKSHOPS FINAL REPORT

# HEALTHY START: UNDERSTANDING THE USE OF VOUCHERS

Based on the findings from workshops held  
between November 2011 and April 2012

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# HEALTHY START: UNDERSTANDING THE USE OF VOUCHERS

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Participatory Workshops Final Report

Written by Food Matters, May 2012

*Based on the findings from workshops held in Leeds, North Lincolnshire, Calderdale,  
Peckham, Woolwich, Camden, York, Sheffield, Westminster, Tower Hamlets, Bradford  
between November 2011 and April 2012*

## Introduction

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This report details the methodology and findings from a series of 11 Participatory Workshops that took place between November 2011 and April 2012 as part of the wider Healthy Start: Understanding the use of vouchers – an 18 month long Evaluation Project being undertaken by York University with Department of Health funding. Food Matters was commissioned to design, organise and run the workshops with women and families eligible to receive Healthy Start vouchers.

The basic premise of the workshops was to gain understanding about the opinions and perspectives of those that use Healthy Start vouchers (the participants), and to use this information to help inform recommendations to improve the scheme – making it work better for those it's intended to support.

The 11 workshops were spread between Yorkshire and the Humber, and London in a variety of settings – from Children's Centres to community and housing association centres. The venues were chosen to ensure that the participants felt familiar with them and comfortable to be in them. It was crucial to the success of the workshops that the participants felt secure and supported enough to speak openly and freely about their situations and their experiences (both positive and negative) of Healthy Start. The workshops were designed to provide a relaxed and informal environment.

Food Matters is an independent organisation with expertise and experience of designing and delivering participatory workshops with 'hard to reach' communities. The workshops were led by Ben Messer – expert participatory facilitator and supported by Victoria Williams (Project Manager).

## Recruiting Participants

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In order to recruit the required number of participants (100) who fell within the project criteria<sup>i</sup> local health professionals and community workers and their organisations were approached to help facilitate the recruitment process. The logistics of organising venues, crèche facilities, refreshments, and recruiting participants was largely co-ordinated by those local organisations (usually an individual staff member) with guidance and support from both the University of York research team members and Food Matters staff. The participants were in the main women (men were not excluded from attending the workshops however the vast majority of recipients of Healthy Start vouchers are women).

Each participant was given £20 at the end of the workshop to compensate for their time and to acknowledge and thank them for their valued input to the process.

## Methodology

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In order to maximise inclusion and participation the workshop format utilised a combination of activities aimed at facilitating participation, the sharing of opinions and perspectives and engagement in addressing a sequence of questions. The activities are based on Participatory Appraisal tools and techniques which enable interaction, the sharing of knowledge and experience on an equal footing in an environment free from hierarchy and officialdom. The workshop format allowed everyone, regardless of language skills, background, literacy skills to contribute their perspective.

The activities included:

- Introductory focus charts
- Open comments - Hidden secrets walls
- Warm up and introduction
- Continuum
- Evaluation H
- Action steps
- Key statement verification Bubble Charts
- Dot voting prioritisation
- Informal facilitated group discussion
- Participatory evaluation

Although each workshop addressed the same themes and questions, different options were prepared and used. This allowed flexibility in the workshop programme responding to the specific dynamics of different groups of participants.

The activities were used to address five key questions representing the most important themes in the evaluation of the Healthy Start scheme. Each key question provided the starting point for each activity within which a sequence of additional prompt questions were asked addressing specific more detailed questions as identified by the Focus Group research findings<sup>ii</sup>.

At the close of each workshop an evaluation tool was used to assess how the participants found the workshop. The tool allows participants to comment freely without having to tick boxes or make judgements.

## What we learnt – the findings

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The eleven workshops have involved a mix of participants including; teenage mums, rural and urban situations, 'English as a second language' parents, and some dads. The vast majority of participants were either receiving Healthy Start vouchers or had recently stopped receiving due to their children reaching the cut off age. There was a small number (in one particular workshop) who were not receiving the vouchers due to eligibility but they had stories to tell of friends or relatives on the HS scheme.

The findings from each of the workshops have been written up in excel spreadsheets and word documents (see appendix ) which follow the order of the workshop and detail all the comments and discussion that took place during each session<sup>iii</sup>.

However for this report we have grouped the workshops' key findings to correspond with the themed headings in the project's draft findings report<sup>iv</sup>:

### Theme 1: Importance and influence of Healthy Start

- For some there was a lack of understanding that the scheme is supporting healthy food decisions and not just providing a small amount of financial help for those who need it most especially if formula feeding.
- The majority of participants reported that the scheme influenced their shopping and eating habits most notably the vouchers enabled them to experiment a bit and buy better quality and variety of vegetables and fruit.

- Some participants felt the HS scheme supported them to change their lifestyle rather than their diet because it frees up money to do other things.
- The scheme has a greater influence on diet and nutrition amongst mothers who choose to breast-feed their babies. The behaviour change that occurs amongst these women brings benefits to both the mother and her children as the scheme establishes habits that continue to be reinforced following weaning.
- Participants feel that the HS scheme is an important support to them to provide a healthier diet for them and their families.
- Many of the participants that had come to the UK as migrants demonstrated a great sense of gratitude for the scheme.
- Many participants said that they would buy similar amounts of milk and vegetables and fruit even if they didn't get the vouchers however the vouchers helped them manage better financially.
- For many parents the impact of the vouchers is significant and when a child is no longer eligible the absence is noticeable.
- The vouchers help to establish good habits and support parents to explore different and better ways of feeding their families. It provides an ongoing 'nudge'/ reminder for the need to eat a healthy diet.

## **Theme 2: Awareness of Healthy Start**

- Information about the scheme and eligibility is patchy across the agencies involved in delivery.
- Not all participants were informed about Healthy Start by their mid-wife or health visitor.
- The new version of the HS promotional leaflet has the eligibility criteria on page 3 where as previously it was on page 1 (where it was more likely to be read).

## **Theme 3: Identifying vulnerable women earlier and providing healthy-related information**

- There was no specific question relating to this theme asked in the workshops.

## **Theme 4: Eligibility**

- Eligibility is complex because it is linked to benefits provided during pregnancy and different benefits provided when you have had your child/ren
- The scheme lacks sensitivity to changing financial circumstances particularly for self-employed people
- Many participants feel the HS scheme fails children between the age of 4 & 5 particularly those that are early born in the academic year. It was widely felt that eligibility should be extended to 5 years old or the primary school term start date.
- There is some confusion about different eligibility criteria for teens before and after birth – for example, participants questioned why the benefit is means tested for under 18 year old mothers after the child is born?
- Eligibility is dependent on having a National Insurance (NI) number which is problematic for young mothers under 16 with no NI number.

## Theme 5: Applying for Healthy Start

- The problems that arise because the HS scheme has two different government departments controlling different elements of the scheme are significant e.g. Department for Work and Pensions (DWP) dealing with eligibility and authorisation and Department of Health (DH) as promoters of the scheme.
- The fact that eligibility for a health initiative is means tested through the benefit systems means its complexity causes logistical problems. This includes delays in receiving time-limited vouchers following a change in address.
- The most important route to the HS scheme is through mid-wives and health visitors. Participants feel ease of access to the scheme is generally good but varies according to the capacity and awareness of the health professionals involved.

## Theme 6: Using Healthy Start

- There's a wide disparity between how retailers deal with vouchers e.g. some retailers only let you use one voucher per transaction, others say only two at a time, some check every item, some are very casual about checking what people are buying with their vouchers, and unspent value on the voucher is lost.
- Vouchers can be used at self-service checkouts where scrutiny of purchases is much more relaxed (press the 'coupon' button and the assistant checks the date etc. but not what you've bought).
- The stigma participants feel when queuing to pay for HS shopping was not universal but was felt by many. Suggestions to overcome this included loading the value of vouchers onto a swipe card.
- It's not widely known or understood that participants can ask retailers to register to accept the vouchers, including markets, community based food projects, milk delivery vans etc
- The scheme is not promoted enough amongst independent / local shops consequently there are not enough retailers, especially in rural areas that accept the vouchers. This leads to mothers making expensive special trips to supermarkets.
- Some participants felt that vouchers should be useable for on-line shopping – particularly where they are used as part of a shop by other family members.
- It's difficult to get culturally acceptable fruit and vegetables if vouchers are not accepted at the local market.
- Generally there was a fairly clear understanding of what you can get with vouchers, although some confusion about frozen and canned vegetables and fruit.
- Lack of understanding about why composite foods are not available on the scheme.
- Vouchers tend to be shared amongst the family when one child becomes too old to be eligible. Although some women did compartmentalise their shopping using the vouchers to buy food for a specific child.
- It is fairly easy to exchange vouchers for other goods and cash. Shop keepers (mainly independent small shops) that exchange vouchers for cash or non voucher items 'charge' for that e.g. £2 cash given for one £3.10 voucher. Participants regarded this as an issue they were unhappy about and strongly criticised those that abused the scheme in this way.
- Some thought other basic food items should be included e.g. bread and meat, eggs, dry goods (rice, lentils, beans etc).
- Women find it problematic to always spend the full value of the vouchers in any one shopping trip.

## Theme 7: Vitamins

- Lack of awareness of the benefits of taking vitamins or giving them to children.
- Lack of awareness that vitamins are available particularly after pregnancy.
- Many participants did not realise that a voucher for vitamins was included with the food vouchers.
- Participants often don't know where to get vitamins – some assume you can take the vouchers to a pharmacy and use them to buy branded vitamins.
- Participants thought that vitamins should be more widely available including available at the shops where they use their vouchers.
- Uptake of vitamins is less likely to occur if mothers have to make a special trip to collect them.

## Theme 8: Healthy Start and infant feeding

- For mothers who choose to formula feed their babies behaviour change is not strongly established or reinforced as all the voucher value is used on buying formula milk and not on fruit and vegetables.
- Amongst these women the inclusion of formula milk in the scheme backs up a decision to not breast-feed their baby and 'takes the edge off' the financial implications.
- At present the scheme provides a nudge towards formula feeding babies although women mentioned other influences on their infant feeding decisions. Removal of formula milk from the scheme would provide a nudge towards breast-feeding.
- Some mothers said that they moved from breast-feeding to formula sooner than they would have done without HS support.
- Support with buying formula makes it easier for some young mothers to continue in education even if they know the benefits of breast-feeding.
- A small number of participants said that the vouchers were used to build up a reserve of formula whilst they were pregnant.
- Some participants indicated that the availability of formula through the HS scheme made the decision to formula feed appear more acceptable.

## Theme 9: Education and training of health and social care practitioners

- Participants felt that there was patchy promotion of the scheme by Health Professionals – there is no automatic inquiry about possible eligibility so some mothers slip through the net (particularly if there are language issues).
- Lack of coherent understanding by Health professionals about the eligibility criteria.

## Key quotes from participants

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### Logistics / mechanics of the HS scheme

Woolwich participant - *I'm six month pregnant and until today I didn't know I was able to get HS*

## Understanding the scheme

Woolwich participant - *Information is sporadic. Not all health professionals tell woman about the HS scheme*

## Influence of the scheme

York participants - (pregnant 18 year old) *'I used to live on junk food - now I'm eating healthy I get up feeling great - Friends say I look much better now - makes me feel so much better and healthier. Without vouchers I wouldn't buy fruit and veg'*

Camden participant - *It is more than just extra money for fruits and vegetables. I buy better quality fruits and vegetable, quality fruits and vegetable last longer*

Camden participant - *I am in the habit of shopping for fruits and vegetable so I think I'll carry on. Get your kids used to it and demand it of you. I'll share voucher between the kids despite one being on the vouchers and one not.*

Woolwich participant - *I have continued to buy vitamins even though I'm not getting vouchers anymore as he has reached four years old. I'm not sure I would be buying vitamins now if I hadn't been on the scheme in the first place.*

Woolwich participant - *It changes things, my son now likes fruits and vegetable. He sees eating fruits and veg as fun and healthy.*

Peckham participant - *Livelier and healthier kids - more energy - especially bananas*

Calderdale participant - *Any help is worth the hassle. Fruits are expensive so this would contribute to what I normally buy.*

## Healthy Start and infant feeding

Sheffield Midwife - *If mothers are on the fence regarding breast-feeding vs formula feeding of their babies the availability of vouchers for formula can push them towards formula. For this reason I don't mention that vouchers can be used for formula until a mother has already made the decision how to feed her baby.*

## Importance of the scheme

Calderdale participant - *Having vouchers for formula doesn't influence the decision to not breast feed but if it's not going well it means that having a way to help with the cost of formula takes away the worry about how to feed your baby.*

Peckham participant - *Trade off: Formula costs more now but allows me to go to school, get better qualifications and hopefully a better job in the future. Breast-feeding is cheaper and better but I can't continue school and so will get a less well-paid job in the future. It costs you more in the long run.*



## Conclusions

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It is not within the remit of this work to make any comment or recommendations from the findings from these workshops. The conclusions here are in relation to the workshop process and how effective it was in achieving its aims.

As stated at the beginning of this report *‘the basic premise of the workshops was to gain understanding about the opinions and perspectives of those that use Healthy Start vouchers’*. We wanted to ensure the process was rigorous and robust whilst also being engaging and fun enabling participants to feel that their opinions were valued and that they would leave the workshop not having felt ‘mined’ for sensitive information, rather having gained something – maybe found a wider network of mums and families, information or tips about healthy living, where to shop or perhaps how to access services they didn’t know about previously. Or found a new confidence to talk about issues that affect them and their families.

From the evaluation feedback it was clear that the majority of the workshop participants felt positive about the process, they genuinely felt valued and often surprised that their views were being sought. They showed appreciation for being included in the project, had enjoyed the sessions and the majority had learnt something new about the HS scheme, about their ‘neighbours’ and their neighbourhood. The overwhelming feedback was positive.

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<sup>i</sup> Pregnant women and women who have a child under four years old who are receiving Healthy Start vouchers, Pregnant women and women who have a child under four years old who are receiving benefits or tax credits but have not applied for Healthy Start vouchers, have been refused Healthy Start vouchers or have recently applied for Healthy Start vouchers, Pregnant women who are 16-18 years old, Women who have stopped receiving Healthy Start vouchers within the last year, Women whose family circumstances are such that they think they may be eligible for Healthy Start vouchers, but who are not sure (for example, not receiving benefits but on family income of around £17,000)

<sup>ii</sup> See appendix 1 for a full list of the questions

<sup>iii</sup> The spreadsheet template for the workshop findings was designed after the workshops began and therefore there are some gaps in some of the spreadsheets. This is because each workshop was adapted to suit the participants and so some of the questions may not have been asked or they may have been recorded in a different place.

<sup>iv</sup> Thematic synthesis of the draft findings of the evaluation in preparation for the cross-sectoral workshops, May 2012.