



## What helps and hinders community-based projects to tackle obesity? Findings of SPOTLIGHT work-package 6.

Over half the European adult population is now overweight or obese<sup>1</sup>, with implications for the health of individuals and for the economies and health care systems in the Member States and across the region.

In the last 20 years there has been a great deal of research to identify the most effective way of tackling public health problems such as obesity. Initiatives which include activities to encourage and support change at all 'levels' (so-called 'multilevel' initiatives) are amongst the most successful. These 'levels' include: individuals, communities, local authorities, the health sector, along with national policy and economic levels.

In the EU funded Spotlight project we collected information on nearly 80 initiatives in the EU and explored their strengths and weaknesses<sup>2</sup>. In work-package 6 we built upon the existing evidence base, with the aim of looking in greater depth at what contributes to success in multilevel initiatives to tackle obesity. We did this by carrying out three case studies, one each in Denmark, the Netherlands, and the UK. These studies covered either a district within a city or a small town. The areas in which the case studies were conducted were poor areas, where more vulnerable people lived.

We talked at length with those who had been involved in developing and implementing the 'multilevel initiatives' in order to gain insights into which aspects of the work had been helpful and which had hindered. All of this was done under conditions of anonymity both for our interviewees and for the projects themselves. Our interviewees shared sometimes very frank views with us, and as a result of this generosity on the part of our interviewees we gained a wealth of information to analyse.

We used standard methods between the three countries to collect and analyse our data. However, among the challenges we faced - which ultimately became a strength of our study - were the differences between the three countries, which inevitably affected the nature of the case studies, the way that they were delivered, and the way they were reported. These differences included cultural and linguistic differences, which would affect the way the interviewees describe situations to us. For example both Danish and Dutch people tend to be more direct, whereas British people have a tendency to understatement. There are also differences in education; professional development; welfare systems; and political and economic systems.

Despite the diversity of the countries and the individual case studies, some factors emerged consistently as helping or hindering the success of the initiatives. The fact that they emerged through all of the diversity described above indicates that they are strong influences which can be used to strengthen the likely success of obesity prevention initiatives of the type we were looking at.

The table at the end of this summary shows the strength of factors influencing relative success of case studies shown using RE-AIM fields (Reach-Effectiveness-Adoption-Implementation-Sustainability).

Key factors included:-

**Time and money:** Money is clearly important, but even more important is that the funding should continue reliably throughout the project. For example, any threats to financial security, such as potential changes in government, can shake the confidence of other funding partners. Threats of this type will also delay the project, and this can have severe consequences for infrastructure work, such as putting in cycle paths.

---

<sup>1</sup> <http://www.euro.who.int/en/health-topics/noncommunicable-diseases/obesity/data-and-statistics>

<sup>2</sup> The results are available here: <http://www.worldobesity.org/what-we-do/policy-prevention/projects/spotlight/intervention-atlas/>



Even if there is enough money, and it is supplied reliably, complex initiatives of this type need to be long enough (interviewees suggested a minimum of 4 to 6 years) to become integrated into the community and infrastructures (for example health, housing associations, local government, social enterprises). This integration is vital for work to be sustained in the long term.

**Community involvement:** Previous research has shown over and over again the importance of the local community being an integral part of the work right from the start. All three case studies failed in this to some extent. What did become clear in our study, and was not apparent in previous research, were contributory reasons for this failure. Interviewees told us that they were aware that the projects were largely imposed in a ‘top down’ manner, but said that this was largely because of the nature and restrictions of the funding received, and particularly because of the tight timescales imposed on the projects.

For example, applications for funding may need to be prepared at short notice. This means there is very little time to involve the community, and also that the application often contains assumptions about appropriate activities. It can then be difficult to deviate from these activities once the project has been funded. One of the recommendations of the full report is therefore that funders should consider a two-step bid process, with an initial small amount of funding and adequate time to work with the community to develop the full proposal; and that there should be sufficient flexibility for reflection on the work as it happens, and if necessary modification of the initial proposals.

**Conflicting factors for success between different stages of the project:** This was another finding which has not shown up clearly in previous research. Our results indicated that in delivering complex community-based interventions of the type described here, there are very real tensions between ‘delivering’ and ‘maintaining’ a project. That is, there are conflicts between delivering a good quality and effective project in a short period of time on the one side, and success factors for truly engaging the community and its organisations and leaders on the other. Full community engagement includes slowly but surely developing an initiative which in time can become embedded and continue to contribute to the health of the community in the longer term

Our conclusion is that these factors differentiated consistently between success and failure across all three countries, despite the differences in the types of initiative and the countries in which they were set.

We recommend that these factors need are seriously considered at both national and EU levels, in order to implement successful public health interventions to prevent obesity.

[www.spotlight-project.eu](http://www.spotlight-project.eu)



The SPOTLIGHT project is part-funded by the European Community's Seventh Framework Programme. The European Commission is not responsible for the use that may be made of any material arising from this project.



## Factors influencing the relative success of the case studies by RE-AIM fields.

Note: Most of the factors can be either positive or negative. In this table they reflect the most frequent finding from the three case studies.

| KEY to table |                |
|--------------|----------------|
| <b>R</b>     | Reach          |
| <b>E</b>     | Effectiveness  |
| <b>A</b>     | Adoption       |
| <b>I</b>     | Implementation |
| <b>M</b>     | Maintenance    |

|                        |
|------------------------|
| Essential to success   |
| Important to success   |
| Contributor to success |
| Contributor to failure |
| Important to failure   |
| Critical to failure    |
| No direct data         |

|   | Factors  | R                    | E                      | A                      | I                      | M                      |
|---|--|----------------------|------------------------|------------------------|------------------------|------------------------|
| <b>Characteristics of the intervention actors</b> | Commitment, enthusiasm and good working relationships both within and between project staff and partners   | Essential to success | Important to success   | Important to success   | Important to success   |                        |
|   | Although building upon pre-existing relationships contributes to the factor above, it may mean that sectors which could have made a valuable contribution are left out.              |                      |                        | Contributor to failure |                        |                        |
|   | Commitment etc can become exhausted, and good relationships across sectors and organisations may mean the project does not become embedded in specific infrastructures               |                      |                        |                        |                        | Contributor to failure |
|   | Effective leadership   | Important to success | Contributor to success | Important to success   | Important to success   |                        |
|   | Depending too heavily upon one individual who is a charismatic and high energy can make the project vulnerable   |                      |                        | Contributor to failure |                        |                        |
|   | Senior management not being e.g. engaged and/or effective  |                      |                        |                        | Contributor to failure | Critical to failure    |
|   | Cynicism from local professionals etc because of previous problematic experiences or a perception that project is being dropped into an area, can have a negative effect on adoption |                      |                        | Contributor to failure |                        |                        |
|   | Volunteers not being nurtured and used in the project  |                      |                        | Contributor to failure |                        |                        |
|   | Learning opportunities provided for those working in and with the project  |                      |                        |                        | Contributor to success |                        |



|   | <b>Factors</b>  | <b>R</b> | <b>E</b> | <b>A</b> | <b>I</b> | <b>M</b> |
|---|---|----------|----------|----------|----------|----------|
| <b>Characteristics of the intervention</b>      | Flexibility and autonomy of the project, largely determined by funder   | Blue     | Blue     |          |          |          |
|   | Some projects may benefit from developing their own branding to help raise awareness and encourage target group awareness and participation   |          |          |          | Blue     |          |
|   | Flexibility has many good points, but if too many collaborations/activities are initiated as a result of this, the project may not have the resources to nurture these or interest may fade |          |          | Red      |          | Red      |
|   | Top down approach/mismatch of project activities and population needs - so local communities are not engaged and do not actively participate in development and delivery                    | Dark Red | Red      |          | Dark Red | Dark Red |
|   | Including an evaluation which helps the project team, for example in understanding what outcomes are being sought   |          | Blue     |          |          |          |
|   | The use of theoretical models to provide a framework for both developing and implementing the project   |          |          |          | Blue     |          |
| <b>Characteristics of the target population</b> | In Denmark and the Netherlands the target population consisted largely of groups who are traditionally 'hard to reach' in health interventions  | Red      |          |          |          |          |
| <b>Organisational characteristics</b>           | The influence of funders in: lack of flexibility, and giving mixed messages to the project  |          | Red      |          |          |          |
|   | Reliable and adequate resource provision by funders – especially a realistic timescale.   |          | Red      |          | Red      | Dark Red |
|   | Opportunities for the project to become integrated into existing infrastructures  |          |          |          |          | Red      |
|   | Support from local politicians  |          |          | Blue     |          | Blue     |
| <b>Contextual characteristics</b>               | National politics/economics can introduce uncertainty about funding; impose time delays; change levels of political support and institutional structures of project partners                |          | Red      |          | Red      |          |