

Improving health and well-being

Our social research contributes to improving the health and social well-being of the nation by informing the decision making of policy-makers, communities and individuals.

Understanding the issues

Lifestyle and behaviour, especially habitual behaviour, directly affect individuals' health for good or ill. The difference between positive and negative factors, from nutrition and exercise to substance abuse or homelessness has a dramatic effect on quality of life and life expectancy. Understanding the social and economic impacts is essential for building a healthier nation and creating desired outcomes.



How we can help

Through our robust social research and succinct presentations of meaningful conclusions, our practical recommendations will help you implement relevant solutions. Working within the opportunities and constraints in programme and policy environments, we deliver:

- qualitative and quantitative research with service providers, users, carers, stakeholders, businesses and the public;
- sensitive approaches to vulnerable social groups, such as lone parents, young people and children, adults with special needs and at-risk groups;
- high quality reports attuned to your needs.

Informing policy and monitoring progress

We reviewed evidence on volatile substance abuse (VSA) among young people in Scotland. The review informed policy and practice development, specifically how to prevent VSA through awareness campaigns and education.

With the University of Edinburgh we surveyed Scottish school children to assess the levels of passive smoking before and after the smoking ban in March 2006, including taking saliva swabs from the school children for technical analysis.

We undertook a national baseline study and follow-up survey of leisure industry businesses, which enabled the Government to monitor the impact of controls on smoking in public places.

Lifestyle and behaviour surveys

Through two studies of health behaviour in school-aged children, we increased understanding of adolescent health behaviours, health and lifestyles in their social context.

We managed the large national Scottish Schools Adolescent Lifestyle and Substance Use Surveys in 2002 and 2004, and provided information on children's behaviours and attitudes towards drugs and other health issues. We also undertook the West Midlands Lifestyle Survey. Information from both surveys helped inform the development of policy.

We surveyed users of sports, leisure and cultural facilities run by Glasgow City Council to track usage by different types of people so that the Council could develop targeted services.



Reviews of health related service provision

We consulted users, staff and other stakeholders about proposed changes to Trafford PCT's service provision. In Glasgow, we assessed the effectiveness of services indirectly related to suicidal behaviour and self-harm, including community education, social work, men's services, homeless services, addiction services, asylum-seeker groups, youth services, woman's groups and mental health services. We highlighted gaps as well as good practice and made recommendations for service developments.

We identified good practice and gaps in provision of community care and mental health services for people with sensory impairment.

Our national mapping exercise of early education and childcare provision in Scotland provided comprehensive details on services, including characteristics of children and the workforce employed in the sector. We also identified factors that inhibited the expansion of early education and childcare provision.

We identified the characteristics of existing breakfast services in school and community-based settings and mapped the numbers and location of service provision for children. The study informed the allocation of funding to provide children from disadvantaged backgrounds with a healthy breakfast.

Process and impact evaluations of health initiatives

We undertook a process and impact evaluation of The Place2Be in Edinburgh, to help them provide therapeutic and emotional support for children in primary schools.

Our four-year evaluation of the Drinkwise campaign involved thematic analysis of local projects that attempted to challenge views and raise awareness of alcohol related issues.

Single Shared Assessment (SSA) creates a single point of entry to community care services to achieve better use of resources and more effective outcomes for people in need. We evaluated the speed, comprehensiveness and effectiveness of the process in Fife, to determine whether the assessment tool is sufficiently comprehensive and to ascertain the views of staff and users on its impact.

