

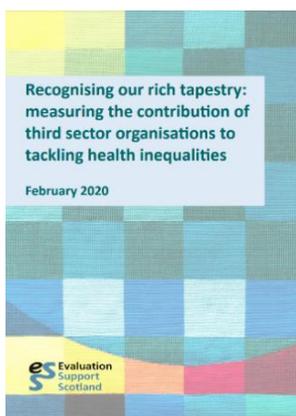
COPE Scotland case study

This is one of a series of case studies showing the kind of **evidence** organisations collect to **prove** their contribution to tackling health inequalities.

COPE Scotland have used "[Recognising our rich tapestry: measuring the contribution of third sector organisations to tackling health inequalities](#)" to **explain** and **prove** how their self-management support service contributes to tackling health inequalities.

Health inequalities are the unfair differences in people's health which lead to differences in life expectancy between the most and least disadvantaged people in Scotland.

Introduction



Evaluation Support Scotland (ESS) developed [Recognising our Rich Tapestry](#) in collaboration with third sector organisations, sector intermediaries and commissioners. This work was funded by

Public Health Scotland. The resource intends to help:

- third sector organisations explain to funders and partners how their work contributes to impacting on inequalities
- funders and commissioners better understand better the third sector's contribution to health inequalities

Section 1 of this case study includes a logic model **explaining** how COPE Scotland's work links to tackling health inequalities.

Section 2 sets out evidence to **prove** this.

About COPE Scotland

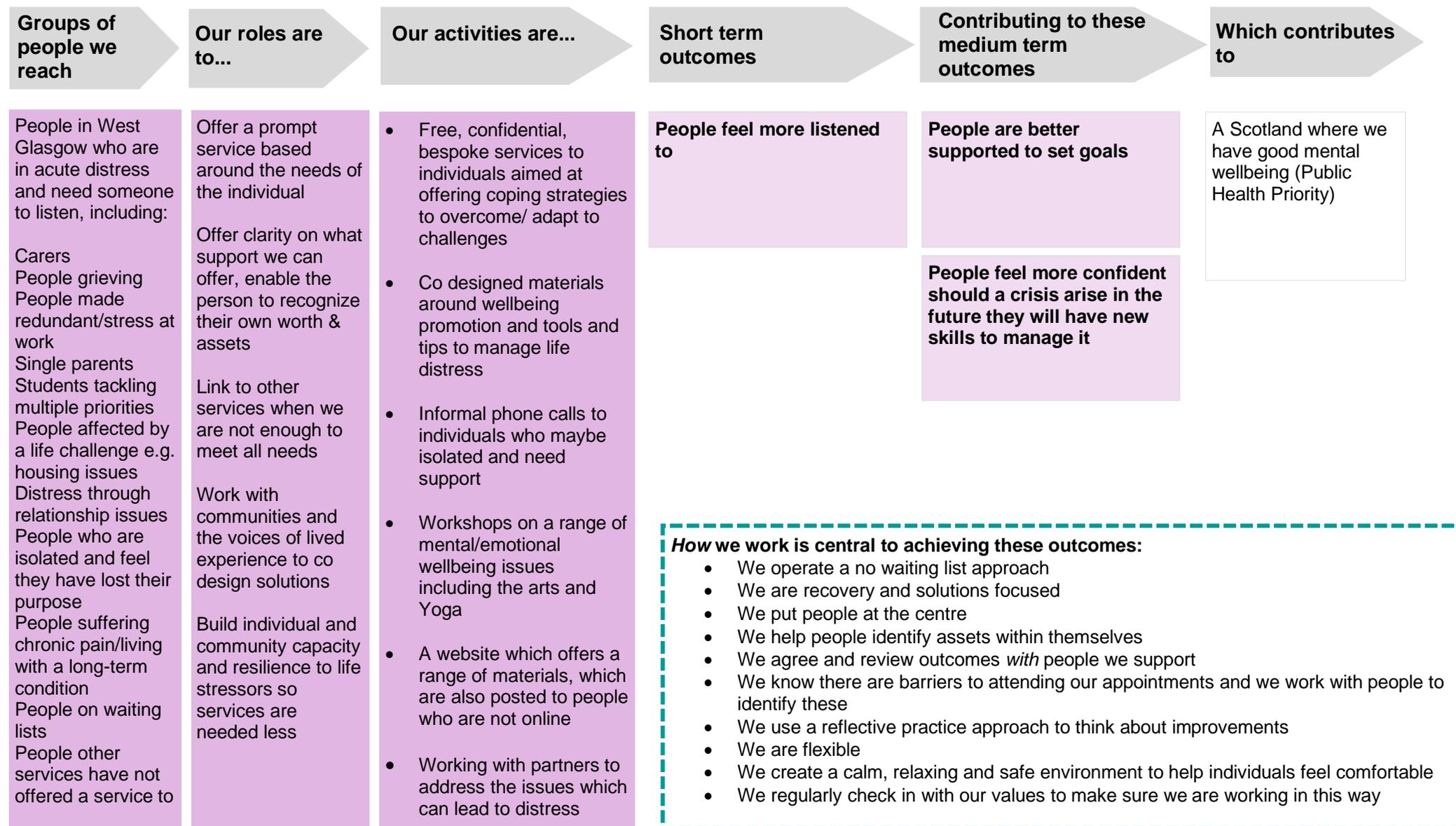
[COPE Scotland](#) offers direct one-to-one self-management support to adults living in West Glasgow experiencing mental and emotional distress. People can self-refer or be referred by another agency. COPE Scotland provides the following support:

- Phone and online support using a variety of tools to support people to manage their distress (adapted from face to face due to the COVID-19 crisis)
- Online learning opportunities provided on Zoom videoconferencing
- Hard copies of materials or workbooks mailed to those not online
- Website which people can access for information and wellbeing materials

On average, between 70 to 120 people a month seek one to one support from COPE Scotland.

SECTION 1 – Explaining the links to health inequalities

This **logic model** for COPE Scotland's self-management support service **explains** who COPE Scotland reaches, COPE's roles, activities, outcomes the service achieves in the short term and how these outcomes contribute to strategic priorities.



SECTION 2 – Proving the links to health inequalities

Who we try to reach

COPE Scotland aims to reach adults living in West Glasgow and experiencing mental and emotional distress. The service is designed to address issues that affect people in Drumchapel/Anniesland and Garscadden/Scotstounhill wards where levels of deprivation and child poverty are well documented.

How we know we reach them

To help connect them with their target group COPE Scotland gathers:

- Postcodes
- Age
- Whether person is working
- Experiences of any financial issues
- Access to services
- Disability

Some further information arises naturally in conversation as people feel more comfortable to share (for example, using a foodbank).

Outcome 1: People feel more listened to



We know we have achieved this outcome because we gather **verbal feedback** from people telling us they feel listened to:

Provided me with hope that someone will listen

I feel someone wants to help and knows how too



We observe and reflect on them opening up and sharing their problems with us.



We have achieved awards for the way we work, including:

- Shared community award on suicide prevention
- Finalist self-management champion of the year
- Finalist Evening Times Community Champions
- Individual recognition and awarded honorary fellow of QNIS

Outcome 2: People better are supported to set goals

The goals individuals set are personal and therefore varied. Sometimes the goals are about regaining a sense of purpose, improving self-care, coping with challenges building confidence to engage with life again and meet new people.



We know we have achieved this outcome because we collect **verbal feedback** such as:

Getting to talk out everything and getting a better look at my life for things to make me happy again

I feel that I understand how I have been letting negative thoughts poison my mind. I now can see a different path that I did not see before



We observe a change in the use of language which suggests the person is now using a kinder inner voice. One staff member noticed:

- Used lot of negative language in self-talk, reports huge shift since working on this, negative language reduced significantly



Written records of 121 meetings with individuals.

100% of people who engage with the service achieve at least one of their personal goals. We note this in client records. Here are some of our staff notes:

- things more positive within the family, having meals together, sharing stories of their day and creating regular family time
- pressures at work continue, however, using the tools given. Not as stressed by this and more able to cope as helped take a different outlook to life



Completed workbooks include individuals' feedback which they send back to us.

While not everyone uses a workbook, some people find it helpful. Here is an excerpt.



Wemwebs scale shows us, for example, people feeling able to address problems, feeling optimistic about future.

Before COVID-19 100% of people who engaged with the service on discharge had increased their score.

Since moving to phone support we have been exploring how we reintroduce this scale with individuals and at which point. We have included the WEMWBS in our latest workbook, but we have adapted the format, making the questions visual.



Outcome 3: People feel more confident should a crisis arise in the future



We know we have achieved this outcome because we are able to **successfully discharge** around 1000 people from our one-to-one self-management support service each year. This means that they have achieved some or all their goals and feel confident that they don't need ongoing one-to-one support to cope.



Verbal feedback tells us people feel more able to cope:

Coming to COPE I felt I could really open up and let go of my worries and address how to try coping techniques and try and believe more in myself, not to always be hard on myself. COPE has made a major difference to how I think now and I am now more positive about future

I approached my GP and local church for support, but the help they could give was too far off. They told me there would be a 12 week wait or at £40 fee for something immediate – I said I might not be here in 12 minutes. And then I phoned COPE and I saw someone straight away

I feel that I would have not got through the tough times I experienced without the support from Cope. The Charity has been a lifeline to myself at times of need when I had nobody else. Staff are non-judgemental and very empathetic towards issues and experiences I have discussed, at times have seen me as an emergency appointment and guided myself to attend my GP for additional support measures



Third party reporting on occasion:

Sometimes we receive feedback from a family member who might comment on the positive change they see in the person who used our service. However, we don't collect this regularly.

We may also receive praise from referring agencies in general terms about the value of the work we do. For example:

Just wanted to say a massive thank you to your team. I was doing some well-being check-up calls and all of our clients referred have spoken so positively about the support given from telephone advice, worksheets to videos. Absolutely incredible to hear. One gentleman said that he didn't want to get out of bed before and is now clearing out cupboards. Another lady said that isolation was killing her and now she sees hope. Thank you for your wonderful support. Keep up the phenomenal work (Referrer)

Strategic priority

Over time our work also clearly contributes to the Public Health Scotland priority:

- **A Scotland where we have good mental wellbeing**

If you want to explain and prove your contribution to tackling health inequalities please read "[Recognising our rich tapestry: measuring the contribution of third sector organisations to tackling health inequalities](#)" and follow the steps set out in the resource.

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You can download ESS resources free from our website.

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