

Evaluation of the Health Promotion Community Education Courses



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Executive Summary

The Health Promotion Department have been running Community Education courses for a number of years. The overall aim of these courses is to enable adults to gain confidence, knowledge and skills to take more control over their own health. The aim of the research was to determine the effectiveness of the courses in achieving their objectives. Three of the community education courses available in County Galway were evaluated in this report, The General Lifestyle course, the Communication/Assertiveness course and the Stress Management course.

Participants undertaking the courses in County Galway between September 2000 and March 2001 were sent a confidential questionnaire which aimed to ascertain any behaviour changes as a result of attending the course and assess knowledge levels and perceptions of the course content and its delivery. The questions for each course adopted a similar format, yet included questions specific to the content of each course.

The findings of the evaluation can be summarised as follows:

- Over 90% of participants on all three courses were female, over three quarters were married and over half had finished their education at secondary school level. Over three-quarters of course participants were over the age of 35.
- Over 70% of participants on all three courses were able to select a personal goal in relation to the course. Over two thirds stated that they had achieved their personal goal as a result of the course.
- Overall, the courses were rated very favourably with over 90% of participants rating the courses as good or excellent
- Over two thirds of participants on all courses felt that they were able to make changes to their behaviour as a result of the course.
- The majority of participants felt that they were more able to undertake the behaviours related to the course they attended.
- The courses were rated favourably on most delivery methods.
- Course tutors were rated favourably on all skills in the three courses evaluated with all skills rated as good or excellent
- The main ways people found out about the courses was through friends and voluntary organisations.
- Less than one third of course participants felt that the courses could be improved.

Whilst the evaluation did generally produce favourable results, a number of recommendations were made to enhance the future delivery of the courses:

1. Methods of disseminating information about the community education courses should be enhanced.
2. The need to target the community education courses at certain social groups should be investigated.
3. The behaviours targeted for change by the courses need to be examined to ensure that it is feasible for them to be addressed by the courses (e.g. addictive behaviours, setting worthwhile and achievable personal goals, setting realistic expectations of what is achievable).
4. A core set of topics for each community education course should be defined. This will help maintain quality standards and facilitate future evaluation.
5. The use of artwork and role play course delivery methods should be reviewed.

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1. Introduction

1.1 Background

The Health Promotion Department have been running Community Education courses for a number of years. The overall aim of these courses is to enable adults to gain confidence, knowledge and skills to take more control over their own health. Through the courses people are encouraged to explore ways they can achieve better physical, mental and emotional health. The courses are open to all adults and no qualifications are required to attend the courses, except a general interest in attending. Courses are run for existing community and voluntary groups and also for groups of individuals who apply independently to attend.

The community courses run by the Health Promotion Department include:

- General Lifestyle course
- Communication/ Assertiveness course
- Stress management
- Prevent Back Pain
- Group Development
- Group Skills Facilitators course

Three of the community education courses available in County Galway were evaluated in this report, The General Lifestyle course, the Communication/Assertiveness course and the Stress Management course.

1. General Lifestyle Course

The General Lifestyle course aims to promote good health and wellbeing. It focuses on areas such as healthy eating, exercise and stress.

2. Stress Management Course

The Stress management course aims to provide a better insight into stress. It focuses on what stress is, how it affects us and explores ways of coping with stress.

3. Communication/Assertiveness Course

The Communication/Assertiveness course aims to help participants to understand more about ways of communicating and to develop skills, which will enable them to communicate more effectively.

One of the most frequently mentioned characteristics of adult education is that it should be collaborative or participatory in nature (Brookfield, 1986). Collaborative learning occurs in an environment where both facilitators and learners are actively participating in the educational process (Imel, 1991). Research has shown that people learn more effectively by being actively involved in the learning rather than passively listening. All of the community courses run by the Health Promotion Department are

based on participants sharing knowledge, skills and experiences rather than being lecture based, thus facilitating an active and collaborative learning environment.

1.2 Aims and Objectives

The aim of the research was to determine the effectiveness of the community courses in enabling participants to gain the confidence, knowledge and skills to take more control over their own health.

More specifically the objectives of the research were to assess the impact of the courses in:

1. Attitudes and behaviours
2. Setting and achieving personal goals
3. Perceptions of key elements of the courses.
4. The demographic profile of participants attending the course.

2. Methodology

2.1 Introduction

The research methodology for the study comprised the following:

1. Survey of the Communication/ Assertiveness course participants.
2. Survey of the Stress Management course participants.
3. Survey of the General Lifestyle course participants.

Whilst each of the courses adopts a similar format, each time they are run the course content varies depending on which member of the Health Promotion team is delivering the course and the needs of the group attending the course. In terms of undertaking the evaluation this meant that only the components of each course that are always included could be assessed. A standardised framework was applied to each of the courses evaluated to allow comparisons between courses and facilitate evaluation of other community education courses in the future.

Participants undertaking the courses in County Galway between September 2000 and March 2001 were sent a confidential questionnaire (appendix 1-3) with a standardised letter approximately one month after completing the course that they attended. A reminder letter was also sent three weeks after the initial letter. The questions aimed to ascertain any behaviour changes as a result of attending the course and assess knowledge levels and perceptions of the course content and its delivery. The questions for each course adopted a similar format, yet included questions specific to the content of each course. The following sections provide an overview of the questions administered for each of the three courses.

2.2 Survey of the Communication/Assertiveness Course Participants

Aims of the Communication/Assertiveness questionnaire (see appendix 1):

1. Whether participants felt they could behave more assertively as a result of the course.
2. Personal goals achieved as a result of the course.
3. Changes in behaviour as a result of the course.
4. Knowledge of assertive and non- assertive behaviours.
5. Perceptions of the course content and its delivery.
6. The demographic profile of participants attending the course.
7. Suggestions for improvement to the course.

2.3 Survey of the Stress Management Course Participants

Aims of the Stress Management questionnaire (see appendix 2):

1. Whether participants felt they could deal with stress better as a result of the course.
2. Personal goals achieved as a result of the course.
3. Changes in behaviour as a result of the course.
4. Perceptions of the course content and its delivery.
5. The demographic profile of participants attending the course.
6. Suggestions for improvement to the course.

2.4 Survey of the General Lifestyle Course Participants

Aims of the General Lifestyle questionnaire (see appendix 3):

1. Personal goals achieved as a result of the course.
2. Changes in lifestyle behaviour as a result of the course.
3. Knowledge of various lifestyle behaviours.
4. Perceptions of the course content and its delivery.
5. The demographic profile of participants attending the course.
6. Suggestions for improvement to the course.

3. Survey of Communication/Assertiveness Course

3.1 Introduction

The Communication/Assertiveness course aims to help participants to understand more about ways of communicating and to develop skills, which will enable them to communicate more effectively. The course consists of two-hour sessions with eight sessions in total. A total of ten people who attended the communication/assertiveness course between September 2000 and March 2001 completed the questionnaire, giving a response rate of 71%. The questionnaire measured changes in attitudes and behaviour as a result of the training, perceptions of the course and an assessment of participant's skills and abilities following the course.

3.2 Demographic Profile

The majority (90%) of the course participants were female with 60% of participants between the age of 35 and 44. A total of 90% of the course participants were married and 10% were separated. Table 3.3 shows that the majority (70%) finished their education at secondary school level.

Table 3.1: Age and Gender of Those Attending the Course

Age	Male		Female		Total	
	No	%	No	%	No	%
35-44	0	0	6	67	6	60
45-54	1	100	3	33	4	40

Table 3.2: Marital Status of Those Attending the Course

	Male		Female		Total	
	No	%	No	%	No	%
Married	1	100	8	89	9	90
Separated	0	0	1	11	1	10

Table 3.3: Education Level of Those Attending the Course

	Male		Female		Total	
	No	%	No	%	No	%
Finished education at primary school level	0	0	1	11	1	10
Finished education at secondary school level	1	100	6	67	7	70
Finished education at third level	0	0	2	22	2	20

3.3 Ability to Behave Assertively

Participants were given a range of behaviours that are associated with assertiveness and asked if they were more or less able to undertake such behaviours as a result of taking part in the course. It can be seen that the majority of participants felt more able to undertake 10 of the 13 behaviours listed in table 3.4. The behaviours where there remains scope for improvement were awareness of body language, giving and taking criticism, knowing oneself and liking oneself.

Table 3.4: Ability to Behave Assertively as a Result of the Course

Skills	More able		The same		Less able	
	No	%	No	%	No	%
Dealing with anger	9	90	1	10	0	0
Giving and taking criticism	4	40	5	50	1	10
Giving and taking praise	7	70	3	30	0	0
The ability to ask for what you need or want	10	100	0	0	0	0
Expressing your feelings	7	70	3	30	0	0
Dealing with conflict	8	80	2	20	0	0
Knowing your rights and the rights of others	7	70	3	30	0	0
Awareness of body language	1	10	9	90	0	0
Knowing yourself	5	50	5	50	0	0
Liking yourself	3	30	7	70	0	0
Being aware of the difficulties other people have	9	90	1	10	0	0
Being able to say yes or no/ refuse	6	60	4	40	0	0
Standing up for yourself/ expressing opinions	7	70	3	30	0	0

3.4 Personal Goals

A total of 70% of participants stated that during the course they were able to select a personal goal in relation to changing their behaviour. Overall, 70% achieved their personal goal. Table 3.5 shows the personal goals listed by participants. A wide variety of goals were set with no common trends emerging (predominantly due to the small number of participants attending the course).

Table 3.5: Personal Goals

Personal Goal	No	%
To be able to say no	2	20
To be respectable in the knowledge that we all have different opinions and agendas	1	10
To be assertive/ stand up for myself	2	20
To be better able to deal with conflict in the home – with children and husband.	1	10
To deal with my inner anger. I am working on it. Hopefully to reach my soul one day	1	10
To relax, take your time in answering a question – count 1,2,3 then answer.	1	10
To be able to talk to a group of people	1	10

*Multiple response therefore percentages may not add up to 100%

3.5 Behaviour Change as a Result of the Course

Overall, 90% of participants felt that they had changed their behaviour as a result of the course. Table 3.6 shows the changes that participants made to their behaviour. A wide variety of behaviour changes were made with no common trends emerging (predominantly due to the small number of participants attending the course).

Table 3.6: Behaviour Change as a Result of the Course

Behaviour change	No	%
I think now as to the outcome of my decisions and I think more of myself.	1	10
Learned how to say no	2	20
I am more tolerant and a better listener. I am more introverted and now see the benefits in being an extravert. This is in reference to being talkative. I have often referred myself as being motor mouth.	1	10
That it is ok to have various feelings of anger, love. It is how you deal with them that matters.	1	10
I take time before reacting to a situation	1	10
When wanting to know something in class, I am starting to ask questions. I like to be stronger, when buying an item or to return it. I ask more questions. I feel good, in what I have achieved, still working on it. Thanks to the course	1	10
Better able to stand up for myself. Have become more assertive.	2	20

*Multiple response therefore percentages may not add up to 100%

3.6 Knowledge of Different Types of Behaviour

During the course participants were taught how behaviour can be classified into four key types (direct aggression, indirect aggression, passivity and assertiveness - Jones and Byrne, 1997). To assess whether this knowledge had been acquired, participants were given a list of five behaviours and asked to classify them in terms of their type. Responses were compared to how these behaviours were classified in The New Wellbeing Through Groupwork Manual (Jones and Byrne, 1997). The results are shown in table 3.7. Overall, 60% of participants answered all five questions correctly while 40% either answered all incorrectly or did not answer the questions.

Table 3.7: Knowledge of Different Types of Behaviour

Knowledge/Awareness	No	%
BOSSING PEOPLE ABOUT		
Direct aggression*	6	60
Indirect aggression	3	30
Passive	0	0
Assertive	0	0
GOING ALONG WITH OTHER PEOPLE'S IDEAS		
Direct aggression		
Indirect aggression	0	0
Passive*	1	10
Assertive	8	80
	0	0
GIVING HONEST RESPONSES		
Direct aggression	0	0
Indirect aggression	0	0
Passive	1	10
Assertive*	8	80
PROVIDING SARCASTIC RESPONSES		
Direct aggression	1	10
Indirect aggression*	7	70
Passive	0	0
Assertive	1	10
FORCEFULLY EXPRESSING OPINIONS		
Direct aggression*	7	70
Indirect aggression	2	20
Passive	0	0
Assertive	0	0

* Correct classification (Jones and Byrne, 1997)

3.7 Length of Course

On average participants attended six sessions. All felt that the course was long enough and 90% felt that the length of each session was just right while 10% felt that the session time was too short. All of the respondents attended the course during the evening. Only 29% stated that they were offered childcare facilities so that they could attend the course and only 14% used these facilities.

3.8 How Participants Found out About the Course

Table 3.8 shows how participants first found out about the communication/assertiveness course. The majority (60%) found out about the course through a friend. Only a small number of participants found out about the course from other sources.

Table 3.8: How Participants First Found Out About the Course

	No	%
Family	1	10
Friend	6	60
From another group who availed of the course	1	10
Media- TV, newspaper	1	10
Other	1	10

3.9 Rating of Course Delivery

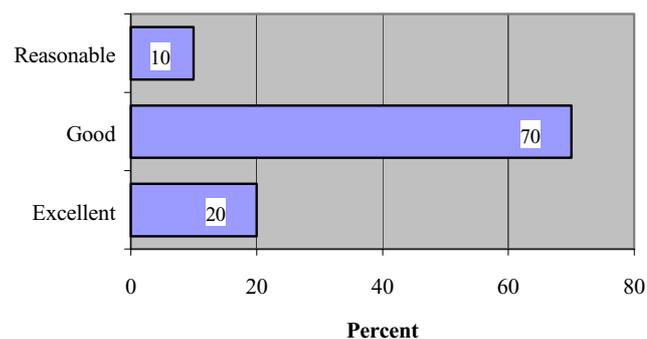
Overall the course was rated highly on most methods of delivery with 69% of the delivery methods scoring two or above on the five point scale. Warm up activities had the most favourable rating (mean = 1.2) with Artwork and case studies scoring the least favourable rating (mean = 2.2).

Table 3.9: Rating of the Course Delivery

	Good (score 1 or 2)		Neither (score 3)		Poor (score 4 or 5)		Mean Rating
	No	%	No	%	No	%	
Working in small groups	10	100	0	0	0	0	1.5
Working in pairs	7	78	0	0	2	22	2.1
Large group discussion	9	100	0	0	0	0	1.3
Individual feedback	10	100	0	0	0	0	1.5
Role play activities	8	80	0	0	2	20	2.1
Case studies	8	80	0	0	2	20	2.2
Brainstorming	10	100	0	0	0	0	1.5
Artwork	6	75	1	12.5	1	12.5	2.2
Warm up activities	9	100	0	0	0	0	1.2
Informal discussions	9	90	1	10	0	0	1.4
Use of questionnaires/ checklists	8	80	2	20	0	0	1.8
Handouts	9	90	0	0	1	10	1.8
Reading material	8	89	1	11	0	0	1.9

Figure 3.1 shows that 90% of participants rated their overall opinion of the course as excellent or good.

Figure 3.1: Overall rating of the course



3.10 Rating of Course Tutors

Table 3.10 shows that course tutors were rated very highly on all areas with each skill assessed scoring an average of 1.8 or above on the five-point scale. Encouraging participation of all group members showed the most favourable rating (mean = 1.2) while communication skills showed the least favourable rating (mean = 1.8).

Table 3.10: Rating of Course Tutors

	Very Good (score 1 or 2)		Neither (score 3)		Poor (Score 4 or 5)		Mean Rating
	No	%	No	%	No	%	
Communication skills	9	90	0	0	1	10	1.8
Ability to listen	10	100	0	0	0	0	1.3
Encouraging participation of all group members	10	100	0	0	0	0	1.2
Ability to make members feel at ease	9	90	0	0	1	10	1.7
Encouraging the development of trust and safety in the group	10	100	0	0	0	0	1.4

3.11 How the Course Could be Improved

In total, 30% of course participants felt that there were particular parts of the course that could be improved. Table 3.11 shows how course participants felt that the course could be improved. It can be seen that the main improvement listed was to allow more class interaction and input from participants.

Table 3.11: How the Course Could be Improved

	No	%
Sessions too long	1	10
More class interaction and input from participants as opposed to tutor	4	40
Act out a discussion	1	10

*Multiple response therefore percentages may not add up to 100%

3.12 Additional Comments

Participants were given the opportunity to give any further comments that they had regarding the course. Comments were received from 60% of the course participants. These comments are shown in table 3.12. All of the responses received were positive responses.

Table 3.12: Additional Comments

Comments	No	%
I think that WHB are great to run these courses as they enhance friendship amongst the participants.	1	10
Enjoyed the course very much	3	30
Very good tutor and very approachable and listened to all our problems	1	10
I would like to take another course just to see how well I have done.	1	10
You should promote such courses more.	1	10
When I get into a muddle or caught up in a discussion, I always think of the assertiveness course. More positive in myself	1	10

*Multiple response therefore percentages may not add up to 100%

4. Survey of Stress Management Course

4.1 Introduction

The stress management course aims to provide a better insight into stress, its effects on people and how to manage it. The course consists of 6-8 two-hour sessions. A total of 38 people who attended the stress management course between September 2000 and March 2001 completed the questionnaire, giving a response rate of 83%. The questionnaire measured changes in attitudes as a result of the training, opinions regarding the course and an assessment of participant's knowledge and skills following the course.

4.2 Demographic Profile

The majority (95%) of the course participants were female with 76% of participants over the age of 35. Most of the course participants (82%) were married and most participants (57%) finished their education at secondary school level with 9% still in education.

Table 4.1: Age and Gender of Those Attending the Stress Management Course

Age	Male		Female		Total	
	No	%	No	%	No	%
18-24	0	0	5	16	5	15
25-34	0	0	3	8	3	9
35-44	0	0	6	19	6	18
45-54	0	0	14	45	14	43
55-64	2	100	3	8	5	15

Table 4.2: Marital Status of Those Attending the Stress Management Course

	Male		Female		Total	
	No	%	No	%	No	%
Married	0	0	31	86	31	81
Single	2	100	4	11	6	16
Widow(er)	0	0	1	3	1	3

Table 4.3: Education Level Those Attending the Stress Management Course

	Male		Female		Total	
	No	%	No	%	No	%
Finished education at primary school level	2	100	5	15	7	20
Finished education at secondary school level	0	0	20	61	20	57
Finished education at third level	0	0	5	15	5	14
Still in education	0	0	3	9	3	7

4.3 Changes in Knowledge and Attitudes Towards Stress

Participants were given a range of behaviours that are associated with stress and asked if they were more or less able to undertake such behaviours as a result of taking part in the course. It can be seen that the majority of participants knew more about the various aspects of stress and how to recognise stress (table 4.4). The behaviours where there remains scope for improvement were mental and emotional effects of stress in which almost half of the course participants felt the same or less able than before the course.

Table 4.4: Changes in Knowledge and Attitudes Towards Stress

	More able		The same		Less able	
	No	%	No	%	No	%
Knowledge of what stress is	27	71	11	29	0	0
Physical effects of stress on myself	22	60	12	32	3	8
Mental effects of stress on myself	20	56	12	33	4	11
The causes of stress in my life	26	74	9	26	0	0
Emotional effects of stress on myself	20	54	15	41	2	5
Recognising stress in yourself	26	72	9	25	1	3
The connection between self-confidence and stress	26	68	11	29	1	3
The connection between a healthy lifestyle and managing stress	32	84	4	11	2	5
Methods of dealing with stress	28	76	6	16	3	8

4.4 Personal Goals

A total of 76% of participants stated that during the course they were able to select a personal goal in relation to managing stress. Overall 96% of these participants achieved their personal goal. Table 4.5 shows the personal goals listed by participants. Taking time out, being able to say 'No' and learning to deal with stress competently were the most common goals listed by participants.

Table 4.5: Personal Goals

Personal Goal	No	%
To be able to say no	5	13
To deal with stress in a more competently	4	11
To communicate in a joyful way with people at work and at home	1	3
To recognise my own "Self"	1	3
To find out more about stress	1	3
Take time out/ relax	6	16
To walk everyday	1	3

*Multiple response therefore percentages may not add up to 100%

4.5 Changes in Dealing with Stress as a Result of the Course

A total of 66% of participants felt that they had made changes in their life in terms of dealing with stress as a direct result of the course. Table 4.6 shows the changes that participants made to their behaviour.

Table 4.6: Changes in Dealing with Stress as a Result of the Course

Behaviour Change	No	%
I wait now before I give an answer and think about how the situation will effect me. I still feel like I did the right thing but it's a start	1	3
Planning time for myself	2	5
Relax	2	5
For everyone to take some responsibilities	1	3
Listening without interrupting. Try as far as possible to be positive as being negative is very destructive.	1	3
I achieved my goal	1	3
Say no more often and firmer but with a good kind attitude.	1	3
I walk every morning and most evenings.	1	3

*Multiple response therefore percentages may not add up to 100%

4.6 Length of Course

On average participants attended six sessions. Overall 68% of participants felt that the course was long enough while 26% felt that it was too short. In total 95% felt that the length of each session was just right while 5% felt that the session time was too long. Most of the respondents (76%) attended the course during the evening. Only 16% stated that they were offered childcare facilities so that they could attend the course and none of the participants availed of these facilities.

4.7 How Participants Found out About the Course

Table 4.7 shows how participants first found out about the stress management course. The majority found out about the course through a voluntary organisation (34%) or through a friend (23%).

Table 4.7: How Participants First Found out About the Course

	No	%
Family	2	6
Friend	8	23
From another group who availed of the course	1	3
Leaflet at the Health Board	5	14
Voluntary organisation	12	34
Other	7	20

4.8 Rating of Course Delivery

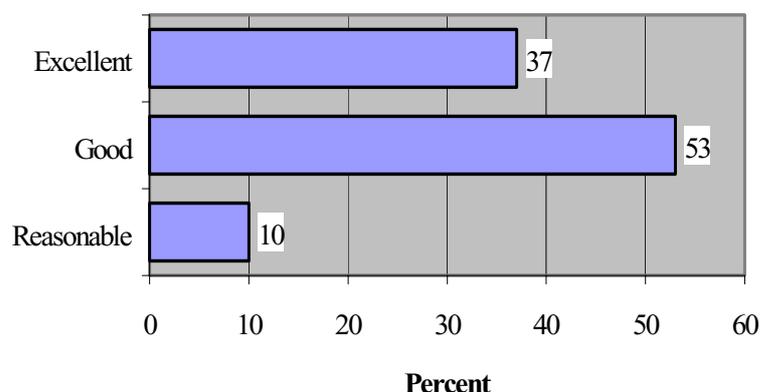
Overall the course was rated highly on most methods of delivery with 69% of the delivery methods scoring two or above on the five point scale. Working in small groups had the most favourable rating (mean = 1.5) with role-play scoring the least favourable rating (mean = 2.5).

Table 4.8: Rating of the Course Delivery

	Good (score 1 or 2)		Neither (score 3)		Poor (score 4 or 5)		Mean Rating
	No	%	No	%	%	No	
Working in small groups	25	100	0	0	0	0	1.5
Working in pairs	25	81	2	6	4	13	2.1
Large group discussion	28	88	2	6	2	6	2
Individual feedback	24	83	4	14	1	3	1.9
Role play activities	19	65	2	7	8	28	2.5
Case studies	27	96	1	4	0	0	1.8
Brainstorming	30	94	0	0	2	6	1.9
Artwork	18	75	0	0	6	25	2.2
Warm up activities	22	79	0	0	6	21	2.3
Informal discussions	28	88	2	6	2	6	1.7
Use of questionnaires/ checklists	23	86	2	7	2	7	1.8
Handouts	29	94	0	0	2	6	1.9
Reading material	25	93	0	0	2	7	1.8

Figure 4.1 shows that 89% of participants rated their overall opinion of the course as excellent or good.

Figure 4.1 Overall Rating of the Course



4.9 Rating of Course Tutors

Table 4.9 shows that course tutors were rated very highly on all areas with each skill assessed scoring an average of 1.6 or above on the five-point scale. Encouraging participation of all group members and the ability to listen showed the most favourable rating (mean = 1.4) while encouraging the development of trust and safety in the group showed the least favourable rating (mean = 1.6).

Table 4.9: Rating of Course Tutors

	Good (score 1 or 2)		Neither (score 3)		Poor (score 4 or 5)		Mean Rating
	No	%	No	%	No	%	
Communication skills	38	100	0	0	0	0	1.5
Ability to listen	34	97	0	0	1	3	1.4
Encouraging participation of all group members	35	100	0	0	0	0	1.4
Ability to make members feel at ease	33	90	2	5	2	5	1.5
Encouraging the development of trust and safety in the group	32	87	3	8	2	5	1.6

4.10 How the Course Could be Improved

Only 28% of course participants felt that there were particular parts of the course that could be improved. Table 4.10 shows how course participants felt that the course could be improved. The main suggestion for improvement was to use relaxation techniques. While 95% of participants had the opportunity to experience relaxation techniques, 11% felt that more relaxation training was needed

Table 4.10: How the Course Could be Improved

	No	%
At the end of each session not to ask if we have learned anything or not. Its impossible to know whether or not you have learned anything or not until you are in a situation where we can use or put into practice what has been taught	1	3
By bringing more relaxation therapy into the course	4	11

*Multiple response therefore percentages may not add up to 100%

4.11 Additional Comments

Participants were given the opportunity to give any further comments that they had regarding the course. Comments were received from 32% of the course participants. These comments are shown in table 4.11. Most of the responses received were positive responses. The majority of responses related to the course being worthwhile and beneficial.

Table 4.11: Additional Comments

Comment	No	%
I felt we could have fitted it all into 3-4 weeks rather than six	1	3
Enjoyed it.	3	8
Promote course to other groups	1	3
Excellent course/ beneficial	6	16
Need for information on how to access health services in dealing with stress	1	3
Our tutor was very good, easy to listen to and very understanding	3	8
I would love to do another course.	2	5
I found the course very relaxing	1	3

*Multiple response therefore percentages may not add up to 100%

5. Survey of the General Lifestyle Course

5.1 Introduction

The general lifestyle course aims to promote good health and wellbeing focusing on areas such as healthy eating, exercise and stress. The course consists of six to eight two-hour sessions. A total of 66 people who attended the general lifestyle course between September 2000 and March 2001 completed the questionnaire, giving a response rate of 54%. The questionnaire measured changes in attitudes and behaviours as a result of the training, opinions regarding the course and an assessment of participant's knowledge following the course.

5.2 Demographic Profile

The majority (95%) of the course participants were female with 81% of participants over the age of 45. A total of 75% of the course participants were married and 50% finished their education at secondary school level while 30% finished their education at third level.

Table 5.1: Age and Gender of Those Attending the Lifestyle Course

Age	Male		Female		Total	
	No	%	No	%	No	%
25-34	1	33.3	2	3	4	6
35-44	1	33.3	7	12	8	13
45-54	1	33.3	19	32	20	31
55-64	0	0	20	33	20	31
65+	0	0	12	20	12	19

Table 5.2: Marital Status of Those Attending the Lifestyle Course

	Male		Female		Total	
	No	%	No	%	No	%
Married	2	67	46	76	48	75
Single	1	33	4	7	6	9
Co-habiting	0	0	9	15	9	14
Widow(er)	0	0	1	2	1	2

Table 5.3: Education Level of Those Attending the Lifestyle Course

	Male		Female		Total	
	No	%	No	%	No	%
Finished education at primary school level	0	0	10	16	11	17
Finished education at secondary school level	0	0	32	52	32	50
Finished education at third level	1	50	18	30	19	30
Still in education	1	50	1	2	2	3

5.3 Knowledge of Lifestyle Behaviours

Participants were given a range of lifestyle issues and asked to identify change as a result of taking part in the course. It can be seen that the majority of participants were more informed for all of the five issues (table 5.4). The behaviours where there remains scope for improvement were diet and nutrition where over 40% felt that their knowledge was the same as before the course.

Table 5.4: Knowledge of Lifestyle Behaviours

	More able		The same		Less able	
	No	%	No	%	No	%
Issues affecting your health	37	67	18	33	0	0
Nutrition	31	60	21	40	0	0
Diet	31	57	23	43	0	0
Stress	41	70	18	30	0	0
Exercise	42	70	17	28	1	2

5.4 Personal Goals

Overall, 81% of participants stated that during the course they were able to select a personal goal in relation to changing their lifestyle. Table 5.5 shows the personal goals listed by participants. The most popular goals listed were to exercise more (26%) and to reduce stress/ relax more (20%).

Table 5.5: Personal Goals

Personal Goal	No	%
To have a healthier diet	5	8
To exercise more	17	26
To reduce stress/ relax	13	20
To be more assertive/ confident	7	11
To reduce alcohol intake	1	2
To improve health and lifestyle in general	3	5
To be able to communicate with people and contribute more in groups	1	2
To be able to cope with teenagers	1	2
To avail of information from lectures/ gain knowledge on health issues	2	3

*Multiple response therefore percentages may not add up to 100%

5.5 Lifestyle Changes

A total of 73% of course participants were able to make changes to their lifestyle as a result of the course. Table 5.6 shows the lifestyle changes made by participants. The main lifestyle changes made were taking more exercise (26%) and a healthier diet (17%).

Table 5.6: Lifestyle Changes as a Result of the Course

Lifestyle change	No	%
Try to be more assertive/ confident	4	6
Give praise for achievement.	1	2
Dealing with stress	3	5
Taking more exercise	17	26
A personal goal I would have identified would be to get something from a job for my own fulfilment and to get out of the house. Maybe a back to work course for a start	1	2
Healthier diet	11	17
Not to carry blame for things over which I have no control	1	2
It helped me to work things out that was going on in my own life. I am a bit stronger for that now. But the more courses like that I do the better person I become.	1	2
More determined to fulfil my goal	1	2
Able to deal with difficult situations much better.	1	2
Take more personal time/ time to relax.	6	9

* Multiple responses, therefore percentages may not add up to 100%

5.6 Length of the Course

On average participants attended six sessions. In total, 79% of participants felt that the course was long enough. Overall, 88% felt that the length of each session was just right, 5% felt it was too short while 7% felt that the session time was too long. A total of 35% attended the course during the day while 65% attended the course during the evening. Only 11% stated that they were offered childcare facilities so that they could attend the course and only 5% used these facilities.

5.7 How Participants Found out About the Course

Table 5.7 shows how participants first found out about the lifestyle course. The majority found out about the course either through a voluntary organisation (35%) or through a friend (22%).

Table 5.7: How Participants first Found out About the Course

	No	%
Family	1	2
Friend	14	22
From another group who availed of the course	7	11
Health Board Official	7	11
Leaflet at the Health Board	4	6
Voluntary Organisation	22	35
Other	7	11
Don't Know	1	2

5.8 Rating of Course Delivery

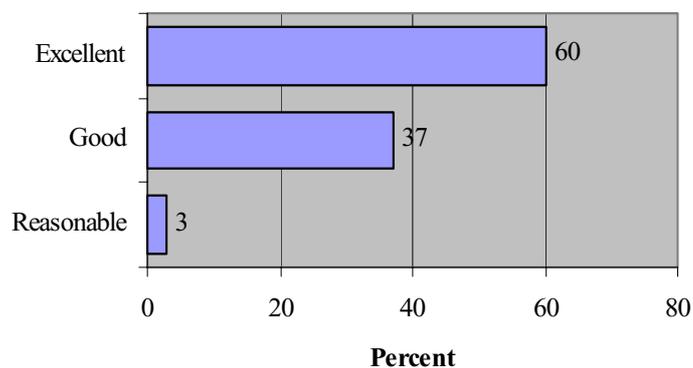
Overall the course was rated highly on most methods of delivery with 85% of the delivery methods scoring two or above on the five point scale. Relaxation activities had the most favourable rating (mean = 1.3) with artwork scoring the least favourable rating (mean = 2.5).

Table 5.8: Rating of the Course Delivery

	Good (score 1 or 2)		Neither (score 3)		Poor (score 4 or 5)		Mean Rating
	No	%	No	%	No	%	
Working in small groups	47	98	1	2	0	0	1.4
Working in pairs	16	89	2	11	0	0	2.1
Large group discussion	42	100	0	0	0	0	1.5
Individual feedback	39	93	1	2	2	5	1.6
Relaxation activities	50	98	1	2	0	0	1.3
Case studies	29	88	3	9	1	3	1.8
Brainstorming	24	86	3	11	1	3	1.7
Artwork	4	40	4	40	2	20	2.7
Warm up activities	25	84	1	3	4	13	1.9
Informal discussions	47	100	0	0	0	0	1.4
Use of questionnaires/ checklists	32	84	2	5	4	11	1.9
Handouts	42	90	1	2	4	8	1.6
Reading material	26	87	1	3	3	10	1.8

Figure 5.1 shows that overall, 97% of course participants rated the lifestyle course as excellent or good

Figure 5.1: Overall Rating of the Course



5.9 Rating of Course Tutors

Table 5.9 shows that course tutors were rated very highly on all areas with each skill assessed scoring an average of 1.2 or above on the five-point scale. Ability to listen and ability to make group members feel at ease were rated the most favourably (mean = 1.1) while all other skills scored an average of 1.2

Table 5.9: Rating of Course Tutors

	Good (score 1 or 2)		Neither (score 3)		Poor (score 4 or 5)		Mean Rating
	No	%	No	%	No	%	
Communication skills	63	100	0	0	0	0	1.2
Ability to listen	62	100	0	0	0	0	1.1
Encouraging participation of all group members	60	98	1	2	0	0	1.2
Ability to make members feel at ease	62	100	0	0	0	0	1.1
Encouraging the development of trust and safety in the group	61	100	0	0	0	0	1.2

5.10 How the Course Could be Improved

Only 17% of course participants felt that there were particular parts of the course that could be improved. Table 5.10 shows how course participants felt that the course could be improved. No particular patterns emerged possibly due to small numbers.

Table 5.10: How the Course Could be Improved

Comment	No	%
Depth of facilitators knowledge in certain areas e.g. diet, gender health issues	2	3
Longer course needed	2	3
More information and course materials	3	5
Sessions lasting 1 hr then break – easier to concentrate	1	2
More physical exercise and relaxation	1	2
More encouragement of class participation/ more interaction	2	3
Maybe more time could be devoted to each subject matter.	1	2

*Multiple response therefore percentages may not add up to 100%

5.11 Additional Comments

Participants were given the opportunity to give any further comments that they had regarding the course. Comments were received from 47% of the course participants. These comments are shown in table 5.11. Most of the responses received were positive responses. The majority of comments related to enjoyment of the course (21%) and the effectiveness of the tutor (18%).

Table 5.11: Additional Comments

Comment	No	%
Enjoyed the course/worthwhile and satisfactory	14	21
Incorporate more relaxation and exercises	3	5
Better mixture of working skills. In a workshop for the elderly, maybe have one elderly person present.	1	2
Found it very informative	4	6
I would like to have more courses to attend.	8	12
Very good tutor	12	18
I wish I had attended all sessions.	4	6
Sessions could be longer	1	2
Dropping out - was it due to time pressure, unsuitable times, unsuitable material or they feel uneasy with the membership of the groups? Women: men ratio = 3:1.	1	2
Definitely in this generation there is a huge level of low self-esteem among adults and children alike. A lot of people are working on that themselves but here is still more that are ignoring it. The short-term mentality among people today seems to be doing a lot of all round harm.	1	2

*Multiple response therefore percentages may not add up to 100%

6. Discussion

6.1 Introduction

The overall aim of the Community Education Courses is to enable people to gain in confidence, knowledge and skills to take more control over their own health. Through the courses people are encouraged to explore ways they can achieve better physical, mental and emotional health. The key issues arising from the evaluation will now be discussed.

6.2 Who Attends Courses?

The courses are open to all adults and are not targeted at any particular social group. Nevertheless, the study findings indicate that the courses are attended by more females, married people, older people, and those with a lower level of education (i.e. those of lower socio-economic groups). The courses aim to develop 'lifeskills' and it may not be that the groups who mainly attend the courses need to develop these skills any more than other social groups. Rather, it may be due to the current way information about the courses is disseminated. For example, in a recent survey of the Western Health Board population (Evans and Jones, 2001), a quarter of males (when informed about the courses) stated they would be interested in attending (compared to 10% male course participants in the current study). In addition, considerably more people from higher socio-economic groups were interested in attending whereas it appears that more people from lower socio-economic groups attended in the current study. This indicates that information about the courses may not be reaching certain social groups and as such there may be a need to enhance methods of information dissemination (see section 6.5). Finally, there is a need to establish whether different social groups (e.g. lower socio-economic groups) have a greater need for 'lifeskills' training. If this need is demonstrated, it will be important to implement a policy whereby those social groups are positively targeted for training.

6.3 Changes in Attitudes/ Behaviours

Overall, the majority of participants on all courses felt that they were able to make changes to their behaviour as a result of the course. Participants were also given a range of behaviours that related to the course and asked whether they felt more or less able to undertake these behaviours as a result of the course. On all three courses the majority of participants felt that they were more able to undertake the behaviours listed. However, there were a number of behaviours where a high proportion of participants felt that they were the same or less able than before the course to undertake these behaviours. The behaviours that participants felt they did not improve after participating in the courses were awareness of body language, giving and taking

criticism, knowing yourself, liking yourself, the mental and emotional effects of stress and diet and nutrition. The majority of these were behaviours related to the Communication/ Assertive course. This may be due to the small numbers attending the course. These behaviours need to be examined to establish if the courses can be improved in any way to facilitate behaviour change. If such behaviours cannot be changed through the courses then there may be a need to exclude them from future courses.

6.4 Achievement of Personal Goals through the Courses

Over 70% of participants on all three courses were able to select a personal goal in relation to the course. The survey identifies a wide range of personal goals set by participants. Over two thirds of participants on all courses stated that they had achieved their personal goal as a result of the course. This highlights that these courses are having a direct impact on people's lives and indicates that they are having a positive effect on the quality of life of those attending.

6.5 How Found out About the Course

The main ways people found out about the courses was through friends and voluntary organisations. Other information sources such as the media and Health Board leaflets were only the way a minority found out about the courses. The limited sources of information may indicate the need to enhance methods of disseminating information about the course. It may also help to explain why certain social groups attend the courses (see section 6.2). The need to improve information is also demonstrated by the fact that whilst 10% of the Western Health Board population have ever attended a Community Education course, when informed about the courses 35% stated they would be interested in attending such a course (Evans and Jones, 2001).

6.6 Structure of Courses

Although each of the courses adopt a similar format each time they are run, the course content does vary depending on which member of the health promotion team is delivering the course and the needs of the group attending. In terms of undertaking the evaluation, this meant that only the components of each course that are always included could be assessed. As such, certain elements of each course may have been excluded from the evaluation. Whilst there is merit in having courses that are flexible to adapt to the needs of those taking part, it is important that the core elements remain consistent each time the courses are run. At present, although there are some key elements, there does not appear to be a defined core set of topics for each course. This should be defined for future courses as it would help maintain quality standards and also facilitate future evaluation.

6.7 Overall Perceptions of the Courses

Overall, the courses were rated very favourably with over 90% of participants rating the courses as good or excellent. Most comments from the courses were positive with typical comments including:

"I am sorry I did not do such a course years ago"

"Very good, time well spent, worthwhile, satisfactory"

"A very good course. Our tutor was very good, easy to listen to and very understanding"

The courses were also rated highly on most delivery methods. Each of the courses were rated most favourably on different delivery methods with no distinct patterns emerging between the courses. On all courses artwork and working in pairs were not rated very favourably. Imel (1991) suggests that it is the responsibility of the instructor to design and structure activities so that maximum learning occurs. Course design should be examined with a view to improving delivery methods rated least favourably by participants and evaluating which delivery methods are most suited to the course content. Course tutors were also rated very highly on all skills in the three courses evaluated with all skills rated as good or excellent. Less than one third of course participants felt that the courses could be improved. There were many suggestions to improve the courses. The main suggestion for improvement to the Stress Management course was to introduce more relaxation therapy into the course. Participants on the Communication / Assertiveness Course suggested that there should be more group interaction and input from the group should be encouraged.

7. Conclusions and Recommendations

The overall aim of the Community Education Courses is to enable people to gain in confidence, knowledge and skills to take more control over their own health. The findings of the evaluation can be summarised as follows:

- Over 90% of participants on all three courses were female, over three quarters were married and over half had finished their education at secondary school level. Over three-quarters of course participants were over the age of 35.
- Over 70% of participants on all three courses were able to select a personal goal in relation to the course. Over two thirds of participants on all courses stated that they had achieved their personal goal as a result of the course.
- Overall, the courses were rated very favourably with over 90% of participants rating the courses as good or excellent.
- Overall, over two thirds of participants on all courses felt that they were able to make changes to their behaviour as a result of the course.
- On all three courses the majority of participants felt that they were more able to undertake the behaviours related to the course.
- The courses were also favourably on most delivery methods.
- Course tutors were rated favourably on all skills in the three courses evaluated with all skills rated as good or excellent.
- The main ways people found out about the courses was through friends and voluntary organisations.
- Less than one third of course participants felt that the courses could be improved with various suggestions for improvement.

Whilst the evaluation did generally produce favourable results, a number of recommendations were made to enhance the future delivery of the courses:

1. Methods of disseminating information about the community education courses should be enhanced.
2. The need to target the community education courses at certain social groups should be investigated.

3. The behaviours targeted for change by the courses need to be examined to ensure that it is feasible for them to be addressed by the courses (e.g. addictive behaviours, setting worthwhile and achievable personal goals, setting realistic expectations of what is achievable).
4. A core set of topics for each community education course should be defined. This will help maintain quality standards and facilitate future evaluation.
5. The use of artwork and role play course delivery methods should be reviewed.

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Appendix 1

COMMUNICATION/ASSERTIVENESS COURSE EVALUATION

DEPARTMENT OF PUBLIC HEALTH, WESTERN HEALTH BOARD

We would like to obtain your views about the communication/assertiveness course you recently attended. Completion of the questionnaire will only take a few minutes, and your responses will be treated anonymously and confidentially. Please complete the questionnaire by circling the number which corresponds to your answer (e.g. 2) and return using the **FREEPOST** envelope provided.

Q1 What is your age? _____ years

Q2 Are you:

Male	1
Female	2

Q3 Marital status

Married	1
Single	2
Co-habiting	3
Widow (er)	4
Separated	5
Divorced	6

Q4 Education Level

Finished education at primary school level	1
Finished education at secondary school level	2
Finished education at third level/college	3
Still in education	4

Q5 Since taking part in the course, do you feel you are more able than before, the same as before or less able than before in terms of the following?

CODE IN GRID (CIRCLE NUMBER)

	More Able	The Same	Less Able
Dealing with anger	1	2	3
Giving and taking criticism	1	2	3
Giving and taking praise	1	2	3
The ability to ask for what you need or want	1	2	3
Expressing your feelings	1	2	3
Dealing with conflict	1	2	3
Knowing your rights and the rights of others	1	2	3
Awareness of body language	1	2	3
Knowing yourself	1	2	3
Liking yourself	1	2	3
Being aware of the difficulties other people have	1	2	3
Being able to say yes or no/refuse	1	2	3
Standing up for yourself/expressing opinions	1	2	3

Q6 During the course were you able to select a personal goal in relation to changing your behaviour?

Yes	1	GO TO Q9
No	2	
Don't know	3	

Q7 What was your personal goal?

Q8 Did you achieve your personal goal?	Yes	1
	No	2
	Don't know	3

Q9 Have you changed your behaviour in any way as a direct result of the course?	Yes	1	GO TO Q11
	No	2	
	Don't know	3	

Q10 What changes to your behaviour did you make?

Q11 Please classify the following in terms of whether you believe they are direct, indirect, passive, or assertive ways of behaving::

CODE IN GRID (CIRCLE NUMBER) →

	Direct Aggression	Indirect Aggression	Passive	Assertive
Bossing people about	1	2	3	4
Going along with other peoples ideas	1	2	3	4
Giving honest responses	1	2	3	4
Providing sarcastic responses	1	2	3	4
Forcefully expressing opinions	1	2	3	4

Q12 Do you believe that the course was long enough?	Yes	1
	No	2
	Don't know	3

Q13 How many sessions did you attend? _____ sessions

Q14 The sessions lasted for 2 hours including a break. Do you feel that this was:	Too short	1
	Just right	2
	Too long	3
	Don't know	4

Q15 Did you attend the course during the day or during the evening?	During the day	1	CONTINUE
	During the evening	2	GO TO Q17

Q16 Were you offered child care facilities so that you could attend the course?

Yes (used facilities)	1
Yes (did not use facilities)	2
No	3
Don't know	4

Q17 How did you **first** find out about the assertiveness course?
(circle one number only)

Family	1
Friend	2
From another group who had availed of a course	3
Media e.g. TV, newspapers	4
Health Board Official	5
Leaflet at the Health Board)	6
Citizens Information Centre	7
Voluntary organisation	8
Other	9
Don't know	10

Q18 What is your overall opinion of the following ways in which the course was delivered?

CODE IN GRID (CIRCLE NUMBER) →

	Very Good	Good	Neither	Poor	Very Poor	Not Applicable
Working in small groups	1	2	3	4	5	9
Working in pairs	1	2	3	4	5	9
Large group discussion	1	2	3	4	5	9
Individual feedback	1	2	3	4	5	9
Role play activities	1	2	3	4	5	9
Case studies (working through examples)	1	2	3	4	5	9
Brainstorming- listing ideas on a chart	1	2	3	4	5	9
Artwork	1	2	3	4	5	9
Warm up activities- introductory/starting activities	1	2	3	4	5	9
Informal discussions	1	2	3	4	5	9
Use of questionnaires/checklists	1	2	3	4	5	9
Handouts	1	2	3	4	5	9
Reading material	1	2	3	4	5	9

Q19 Overall, how would you rate the course **tutors** in terms of the following:

CODE IN GRID (CIRCLE NUMBER) —————>	Very Good	Good	Neither	Poor	Very Poor	Don't know
Communication skills	1	2	3	4	5	9
Ability to listen	1	2	3	4	5	9
Encouraging participation of all group members	1	2	3	4	5	9
Ability to make members feel at ease	1	2	3	4	5	9
Encouraging the development of trust and safety in the group	1	2	3	4	5	9

Q20 What is your overall opinion of the assertiveness course?

Excellent	1
Good	2
Reasonable	3
Poor	4
Very poor	5

Q21 Are there any particular parts of the course that could be improved?

Yes	1	GO TO Q23
No	2	
Don't know	3	

Q22 Which parts of the course could be improved?

Q23 Any other comments?

THANK YOU FOR YOUR ASSISTANCE

Appendix 2

STRESS MANAGEMENT COURSE EVALUATION
DEPARTMENT OF PUBLIC HEALTH, WESTERN HEALTH BOARD

We would like to obtain your views about the stress management course you recently attended. Completion of the questionnaire will only take a few minutes, and your responses will be treated anonymously and confidentially. Please complete the questionnaire by circling the number which corresponds to your answer (e.g. 2) and return to the facilitator using the envelope provided.

Q1 What is your age? _____ years

Q2 Are you:

Male	1
Female	2

Q3 Marital status

Married	1
Single	2
Co-habiting	3
Widow (er)	3
Separated	4
Divorced	5

Q4 Education Level

Finished education at primary school level	1
Finished education at secondary school level	2
Finished education at third level/college	3
Still in education	4

Q5 Since taking part in the course, do you feel you are more able than before, the same as before or less able than before in terms of the following?

CODE IN GRID (CIRCLE NUMBER)

	More Able	The Same	Less Able
Knowledge of what stress is	1	2	3
Physical effects of stress on myself	1	2	3
Mental effects of stress on myself	1	2	3
The causes of stress in my life	1	2	3
Emotional effects of stress on myself	1	2	3
Recognising stress in yourself	1	2	3
The connection between self confidence and stress	1	2	3
The connection between a healthy lifestyle and managing stress	1	2	3
Methods of dealing with stress	1	2	3

Q6 During the course were you able to identify a personal goal in relation to managing stress?

Yes	1	GO TO Q9
No	2	
Don't know	3	

Q7 What was this goal?

Q8 Did you achieve your goal?

Yes	1
No	2

Q9 Have you made any changes in your life in terms of dealing with stress as a direct result of the course?

Yes	1	GO TO Q11
No	2	
Don't know	3	

Q10 What were these changes?

Q11 During the course did you get the opportunity to experience relaxation techniques?

Yes	1
No	2
Don't know	3

Q12 What is your overall opinion of the following ways in which the course was delivered?

CODE IN GRID (CIRCLE NUMBER) →

	Very Good	Good	Neither	Poor	Very Poor	Not Applicable
Working in small groups	1	2	3	4	5	9
Working in pairs	1	2	3	4	5	9
Large group discussion	1	2	3	4	5	9
Individual feedback	1	2	3	4	5	9
Role play activities	1	2	3	4	5	9
Case studies (working through examples)	1	2	3	4	5	9
Brainstorming- listing ideas on a chart	1	2	3	4	5	9
Artwork	1	2	3	4	5	9
Warm up activities- introductory/starting activities	1	2	3	4	5	9
Informal discussions	1	2	3	4	5	9
Use of questionnaires/checklists	1	2	3	4	5	9
Handouts	1	2	3	4	5	9
Reading material	1	2	3	4	5	9

Q13 Do you believe that the course was long enough?

Yes	1
No	2
Don't know	3

Q14 How many sessions did you attend? _____ sessions

Q15 The sessions lasted for 2 hours including a break. Do you feel that this was:

Too short	1
Just right	2
Too long	3
Don't know	4

Q16 Did you attend the course during the day or during the evening?

During the day	1	CONTINUE
During the evening	2	GO TO Q18

Q17 Were you offered child care facilities so that you could attend the course?

Yes (used facilities)	1
Yes (did not use facilities)	2
No	3
Don't know	4

Q18 How did you **first** find out about the stress management course?
(circle one number only)

Family	1
Friend	2
From another group who had availed of a course	3
Media e.g. TV, newspapers	4
Health Board Official	5
Leaflet at the Health Board)	6
Citizens Information Centre	7
Voluntary organisation	8
Other	9
Don't know	10

Q19 Overall, how would you rate the course **tutors** in terms of the following:

CODE IN GRID (CIRCLE NUMBER)



	Very Good	Good	Neither	Poor	Very poor	Don't know
Communication skills	1	2	3	4	5	9
Ability to listen	1	2	3	4	5	9
Encouraging participation of all group members	1	2	3	4	5	9
Ability to make members feel at ease	1	2	3	4	5	9
Encouraging the development of trust and safety in the group	1	2	3	4	5	9

Q20 What is your overall opinion of the stress management course?

Excellent	1
Good	2
Reasonable	3
Poor	4
Very poor	5

Q21 Are there any particular parts of the course that could be improved?

Yes	1	GO TO Q23
No	2	
Don't know	3	

Q22 Which parts of the course could be improved?

Q23 Any other comments?

THANK YOU FOR YOUR ASSISTANCE

Appendix 3

LIFESTYLE COURSE EVALUATION
DEPARTMENT OF PUBLIC HEALTH, WESTERN HEALTH BOARD

We would like to obtain your views about the lifestyle course you recently attended. Completion of the questionnaire will only take a few minutes, and your responses will be treated anonymously and confidentially. Please complete the questionnaire by circling the number which corresponds to your answer (e.g. 2) and return using the **FREEPOST** envelope provided.

Q1 What is your age? _____ years

Q2 Are you:

Male	1
Female	2

Q3 Marital status

Married	1
Single	2
Co-habiting	3
Widow (er)	3
Separated	4
Divorced	5

Q4 Education Level

Finished education at primary school level	1
Finished education at secondary school level	2
Finished education at third level/college	3
Still in education	4

Q5 Since taking part in the course, do you feel you are more able than before, the same as before or less able than before in terms of the following?

CODE IN GRID (CIRCLE NUMBER)

	More Able	The Same	Less Able
Issues affecting your health	1	2	3
Nutrition	1	2	3
Diet	1	2	3
Stress	1	2	3
Exercise	1	2	3

Q6 During the course were you able to identify a personal goal in relation to changing your lifestyle?

Yes	1	GO TO Q8
No	2	
Don't know	3	

Q7 What was your personal goal?

Q8 Were you able to make any changes to your lifestyle as a result of the course?

Yes	1	GO TO Q10
No	2	
Don't know	3	

Q9 What were these changes?

Q10 What is your overall opinion of the following ways in which the course was delivered?

CODE IN GRID (CIRCLE NUMBER) →

	Very Good	Good	Neither	Poor	Very Poor	Not Applicable
Working in small groups	1	2	3	4	5	9
Working in pairs	1	2	3	4	5	9
Large group discussion	1	2	3	4	5	9
Individual feedback	1	2	3	4	5	9
Case studies (working through examples)	1	2	3	4	5	9
Brainstorming- listing ideas on a chart	1	2	3	4	5	9
Artwork	1	2	3	4	5	9
Warm up activities- introductory/starting activities	1	2	3	4	5	9
Informal discussions	1	2	3	4	5	9
Use of questionnaires/checklists	1	2	3	4	5	9
Handouts	1	2	3	4	5	9
Reading material	1	2	3	4	5	9
Relaxation activities	1	2	3	4	5	9

Q11 Do you believe that the course was long enough?

Yes	1
No	2
Don't know	3

Q12 How many sessions did you attend? _____ sessions

Q13 The sessions lasted for 2 hours including a break. Do you feel that this was:

Too short	1
Just right	2
Too long	3
Don't know	4

Q14 Did you attend the course during the day or during the evening?

During the day	1	CONTINUE
During the evening	2	GO TO Q16

Q15 Were you offered child care facilities so that you could attend the course?

Yes (used facilities)	1
Yes (did not use facilities)	2
No	3
Don't know	4

Q16 How did you **first** find out about the lifestyle course?
(circle one number only)

Family	1
Friend	2
From another group who had availed of a course	3
Media e.g. TV, newspapers	4
Health Board Official	5
Leaflet at the Health Board)	6
Citizens Information Centre	7
Voluntary organisation	8
Other	9
Don't know	10

Q17 Overall, how would you rate the course **tutors** in terms of the following:

CODE IN GRID (CIRCLE NUMBER) —————>	Very Good	Good	Neither	Poor	Very poor	Don't know
Communication skills	1	2	3	4	5	9
Ability to listen	1	2	3	4	5	9
Encouraging participation of all group members	1	2	3	4	5	9
Ability to make members feel at ease	1	2	3	4	5	9
Encouraging the development of trust and safety in the group	1	2	3	4	5	9

Q18 What is your overall opinion of the lifestyle course?

Excellent	1
Good	2
Reasonable	3
Poor	4
Very poor	5

Q19 Are there any particular parts of the course that could be improved?

Yes	1	GO TO Q 21
No	2	
Don't know	3	

Q20 Which parts of the training could be improved?

Q21 Any other comments?

THANK YOU FOR YOUR ASSISTANCE