

Associate Membership Survey 2020 Results Report February 2020



Received 42 responses

37 named individuals and 5 anonymous



In December 2019 VHS sent out a membership survey to its 145 associate members who are individuals.

We received 42 completed surveys, over a 17% increase from the previous associate membership survey undertaken in 2016. 37 associate members provided their details whilst 5 provided responses anonymously providing a response rate of around 29%.

The purpose of the survey was to help build a profile of our associate members, their areas of work, interests and how they would like to engage with VHS.

Please note that the comments of respondents have not been altered for content, but spelling errors and typos have been corrected where possible.

Summary

The results of the survey showed that our associate members are an untapped resource that provide us with an opportunity to engage with a wider network of organisations and sectors. We have learned that our associate members are actively engaged through attendance at our events which also signifies their importance as a small source of income for us. The survey highlighted that they would like more opportunities to work with us by contributing their expertise though writing blogs, speaking at our events and also supporting our policy work. It is also apparent that associate member's use our resources to keep abreast about what is happening in the voluntary health sector.



Survey Analysis

Question 1: What is the main sector you work, volunteer or are active/interested in?



The majority of associate members who responded come from the third sector at 62% followed by 22% coming from the NHS, 8% from local authorities and 5% from universities or colleges and 3% from Scottish Government. None of the respondents came from the private sector or independent sectors or from fire or police services. This is a similar breakdown trend to that seen in the 2016 associate member survey.

Question 2: What is your main role?

We asked our associate members to tell us what they consider their main role to be. The majority of respondents were either chairs or other trustees followed by senior managers or directors as well as volunteers or patient or service user representatives. Some people were health specialists and frontline staff as well as consultants, students and researchers.

Of those associate members who were managers or directors two were from organisations that are full members of VHS, these include Paths for All and RNIB Scotland. The other managers or directors represented organisations such as Overtoun House Centre, Social Work Scotland, Grampian Hospital Arts Trust, ACOSVO and Eczema Outreach Support.

Question 3: What are your main areas of health interest or activity?

Mental health was one of the most cited areas of health interest or activity either on its own or alongside other conditions or demographics for example, "*mental health and cancer*" or "*mental health and suicide prevention*". The second highest areas of interest or activity were around supporting certain conditions or demographics, for example, "*older people, homelessness, sight loss*". Inequalities were cited more widely and there were a lot of comments citing children's issues and the health of children and young people. There was also a lot of activity around individual and community wellbeing, for example, "*loneliness and social isolation and improving wellbeing, gardening for wellbeing and arts for wellbeing*".





Question 4: What kind of work or volunteering do you carry out?

Most of the respondents are involved in direct service delivery, peer support or service planning whereas only a few cited research and campaigning. It should be noted that it wasn't always clear if respondents answered in relation to their individual roles or that of their organisations.

Question 5: Why are you members of VHS?

We asked associate members why they are members of VHS and the most popular reason was for news about the voluntary health sector with 33 people choosing it followed by 31 people wanting to support the voluntary health sector. 21 people were members of VHS for news about health and to engage with us.

Joanna Higgs from SPIRIT Advocacy explained that she was a member in order "to support understanding so as to enable service user involvement". Zoe MacGregor from East Kilbride Volunteering Collaborative explained that she was a member so that she could "learn about the area of work".

Question 6: How would you like to be involved with the work of VHS?

The majority of people chose wanting to be involved with VHS through attending or supporting our events with 33 people choosing this option. Seven people wanted to get involved in VHS policy work including:

Margaret Anderson - NHS Ayrshire and Arran board – committee work

Alison Bavidge - Social Work Scotland - Justice and Health and Social Care Integration Allan Tubb - ? – equality and diversity through inclusion of disabled people in Highland, participative and representative decision making

Gill Faichney - Dundee Volunteer and Voluntary Action - older people

Una MacFayden - Children's Health Scotland – infants, children and adolescent health



Christine Carlin – Consultant (formerly Salvesen Mindroom Centre) – inequalities and loneliness and social isolation

Zoe Gruber - University/College - health humanities and the impact of arts on health

One person want to write a guest blog: Gill Faichney - Dundee Volunteer and Voluntary Action - older people

Three people want to speak at an event: Rosemary Cameron – RNIB Scotland - sight loss Jenny Simpson – Trellis – gardening for wellbeing Margaret Graham McDonald – Health Improvement Scotland [she is a public partner volunteer] – Mental health and cancer innovation in health and wellbeing

Five people want to write a guest blog and speak at an event: Jo Haddrick – Edinburgh Napier University - ? Jo Hastie – Grampian Hospital Arts Trust – impact of arts on health Alison Bavidge - Social Work Scotland - Justice and Health and Social Care Integration Zoe Gruber – University/College – health humanities and the impact of arts on health Christine Carlin – Consultant (formerly Salvesen Mindroom Centre) – inequalities and loneliness and social isolation

Appendix 1: Third Sector organisations associate members work or volunteer for

East Kilbride Volunteering Collaborative **Overtoun House Centre RNIB Scotland – Full members** Eczema Outreach Support Multiple Sclerosis Therapy Centre - Full members ACOSVO Children's Health Scotland - Full members Support in Mind Scotland – Full members **St Andrews Hospice Trellis Scotland** Grampian Hospital Art Trust Social Work Scotland Paths for All – Full members Dundee Volunteer and Voluntary Action - Full members SPIRIT Advocacy **Guide Dogs**



Appendix 2: List of main areas of health interest or activity

- Sight loss and mobility
- Health & Social Carer
- People in the justice system
- mental health
- Supported accommodation for women
- Mental health
- inequalities loneliness and isolation
- older people
- Mental health and life recovery personal experience
- The promotion of equality and diversity by the inclusion of disabled people in Highland in participative and representative decision making opportunities that affect their daily lives.
- Primary and Secondary health and social care in Forth Valley Care for the Elderly Dementia Bereavement
- Newborn babies, adolescent complex needs transition and communication
- Mental health & cancer I am a EUPATI Fellow so I have a big interest in R&D in medicines and innovations in health and wellbeing in general
- Homelessness and disadvantage
- Putting public interest into decisions made on healthcare
- health humanities the impact that art can have on health
- Justice, adults integrated health and social care and social work
- clinical governance, finance IJB's third sector involvement
- Community / Community wellbeing / Isolation and Loneliness
- Mental Health and substance misuse
- client advocacy support to health appointments easy read documents for patients
- Art and wellbeing, words for wellbeing, social prescribing
- Gardening for wellbeing.
- Palliative care and life limiting conditions
- Mental Health
- Infants children and adolescent health
- Supporting group facilitators One-to-one support
- Mental health Suicide prevention Cancer support Diabetes support Dementia care
- active leadership (and members in the health sector CEO's)
- Child health, community development, development of a multidisciplinary public health workforce
- gender based violence care experienced young people
- mental health and wellbeing suicide prevention alcohol brief interventions
- All areas of health & care, but particularly interested in inequalities
- Supported self-management



- Eczema Allergy
- Physical Activity
- Supporting patients with Sight loss
- Community readjustment
- I work for a Collaborative of Health Organisations so joined as I was new to the health sector at the time.
- Committee work
- trauma, child neglect, & youth mental health
- wellbeing interest care sector Mental health work health Child support Community people social

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