A community-based health intervention in disadvantaged neighborhoods in Aalborg

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INTRODUCTION:

People living in disadvantaged neighborhoods have higher rates of mortality and morbidity than more prosperous groups in society. Further, they participate less in health-related activities and services. Community-based health interventions can potentially reduce the social inequality in health, though effects vary and are highly context-dependent. Why, when and to whom these interventions works is a black box requiring further investigation. In selected disadvantaged neighborhoods of Aalborg, a community-based intervention is embedded and this is being evaluated.

DESIGN AND METHODS

The realistic evaluation model constitute the overall design. This model address: What – in the intervention – works, for whom, under what circumstances and why?

As illustrated in the realistic evaluation circle, program theories explicating the assumptions about how the intervention works, guides the empirical investigation. Direct observation and qualitative interviews are used for collecting data in the two studies.

RESEARCH/PRACTICE COLLABORATION

WITH THE INTERVENTION’S TEAM AND LEADER:

Workshops and meetings with the intervention team and team leader focusing on developing the program theories.

Visiting each neighbourhood gaining insights into the local contextual factors.

Planning and qualifying the data collection phase in each neighbourhood.

Workshops planned concerning the prospects of the evaluation knowledge generated.

WITH THE REFERENCE GROUP:

This consists of supervisors from Aalborg University and representatives from the municipality. Ongoing dialogs on project focus, relevance and dissemination.

STUDY 1:

A proactive recruitment strategy, where health-professionals physically embedded locally are ringing doorbells in disadvantaged neighborhoods informing about and inviting to the intervention’s activities is investigated in order to identify the active mechanisms.

STUDY 2:

Community engagement processes and their impact for residents are investigated. Also, the social activities in the intervention are studied in order to understand what they provide residents and when and for whom they work.

IMPLICATIONS

FOR POLICY MAKERS:

Local knowledge and insights relevant for decision-making regarding future development and refinement of similar interventions.

FOR PRACTITIONERS:

In-depth local knowledge of the intervention processes creating a foundation for a more research-based intervention practice.

FOR RESEARCHERS:

Refining the existing and contributing with new research-based knowledge on context-mechanisms-outcomes configurations in community-based interventions.