

# **Social Life and People's Health Trust**

Assessing the impact of participation in People's Health Trust programmes Summary Report

Wave 2

**January 2023**



# About this summary report

This summary report provides an overview of the findings of the first two waves of research assessing the impact of participation in the People's Health Trust's Local Conversations and Active Communities programmes.

More about this research is on our website, [http://www.social-life.co/project/peoples\\_health\\_trust/](http://www.social-life.co/project/peoples_health_trust/)

The research was commissioned by People's Health Trust. The aim was to examine the ways in which community-led projects are building social connections and collective control to improve health and wellbeing. We would like to thank the project participants and practitioners who shared their knowledge, hopes and worries with us. We appreciate their expertise and the time they put into this work and hope the report will provide useful insight.

The report was written and published by Social Life (text by Dr Olimpia Mosteanu, Dr Izzy Gibbin and Lavanya Kumaran, with statistical modelling by Alix Naylor).

Social Life was created by the Young Foundation in 2012, to become a specialist centre of research and innovation about the social life of communities. All our work is about the relationship between people and the places they live and understanding how change, through regeneration, new development or small improvements to public spaces, affects the social fabric, opportunities and wellbeing of local areas. We work in the UK and internationally.

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People's Health Trust is a charity addressing health inequalities in England, Scotland and Wales. We work to ensure that where you live does not unfairly reduce the length of your life, or the quality of your health. Our work focuses on:

- Funding and support for communities
- Using our evidence and learning to influence change locally and nationally
- Working with our networks of funded partners to offer support, shape our programmes and policy, and ensure their voices are well represented with decision-makers.

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This summary report discusses the findings of the first two waves of research aimed at assessing the impact of participation in People's Health Trust's Local Conversations and Active Communities programmes.

**Local Conversations** is a funding programme that enables people to have voice, control and influence over the things that matter to them locally. Residents get together to identify and agree local priorities and then take action to help address them. Using investment from the Trust over a longer timeframe than many traditional grants, residents are supported by a local anchor organisation in their neighbourhood to realise their long-term vision for the area. The process of bringing about change is led by residents and involves deep and continuous engagement and conversations with different groups of people within the community, including residents who may not normally participate in local decision-making. Local Conversations works with relatively small neighbourhoods or communities of interest - typically around 4,000 to 10,000 people. The Trust typically provides around £300,000 funding to support each Local Conversation for an initial period of two years, with subsequent funding to neighbourhoods each year for up to nine years. The Trust currently funds 12 Local Conversations.

**Active Communities** has been running since 2013 and supports participants to develop project ideas relevant to their areas, to strengthen social connections and build greater collective control. By empowering participants to take the lead and by putting processes in place to address the issues that are important to them, the programme aims to support local communities and neighbourhoods. Projects support local neighbourhoods and communities to come together and take action on issues that are important to them. This could be anything from tackling social isolation through meeting regularly and engaging in arts, music, or simply chatting, to working together to enhance the area they live in. The Active Communities programme is an open small grants programme for projects lasting up to two years.

Building on **People's Health Trust's theory of change**, the goal of this research is to understand the ways in which community-led projects can improve health and wellbeing outcomes. The research contributes to a more detailed understanding of how health and wellbeing are grounded in place through the experiences of associated social determinants of health, while bringing attention to local barriers and opportunities.

The research uses a place-based approach to answer three interrelated research questions:

- (1) how do practitioners evaluate the progress of each programme in relation to key elements of the theory of change?
- (2) what is the effect of participation in the Trust's programmes on local people?
- (3) what is the role of local contexts in supporting or hampering positive outcomes for individuals and communities?

The second wave of research took place in March 2022, about six months after the first wave of the research. At the time, local groups across the UK were emerging from the last round of government COVID-19 restrictions. Complex challenges ranging from financial pressures, the loss of community and staff members, to the uncertainty about the long-term impact of pandemic were on people's minds. The research gave project participants the opportunity to take part in the survey, either by filling it out online or on paper.

### **Local Conversations**

- 271 online/paper questionnaires were completed by project participants (March 2022) From 11 Local Conversations projects.
- 8 online questionnaires were completed by practitioners (March 2022) From 8 projects.

### **Active Communities**

- 145 online/paper questionnaires were completed by project participants (March 2022) From 12 Active Communities projects.
- 146 online questionnaires were completed by practitioners (March 2022) From 146 projects.

This research draws upon studies previously commissioned by People's Health Trust and their theory of change and adds to the findings from the first wave of research carried out in April-July 2021. It makes use of comparisons with nationally available datasets (Community Life Survey, Understanding Society Survey, the National Survey for Wales, and the Scottish Household Survey) and across the Trust's programmes to further understand the impact of community-led projects.

To understand the impact of the two programmes, responses from surveyed participants were compared to aggregate data for people living in either 20% or 30% most deprived communities in the UK (surveys in different countries focus on different geographies). The report refers to these comparative geographies as areas characterised by similarly high levels of disadvantage. The survey has a common set of questions that allows the research team to run analyses across all the Trust's projects. The questionnaire also includes questions that are aligned with nation-specific surveys - Community Life Survey for England, the National Survey for Wales, and the Scottish Household Survey for Scotland. These help us acknowledge differences between the projects run by the Trust in England, Scotland, and Wales, and make use of relevant surveys in our comparative analyses.

Apart from one project that did not take part in the second wave due to staff shortages, the same Local Conversations participated in the research. Due to shorter timescales and the impact of the COVID-19 pandemic on staff and participants, three of the Active Communities projects took part in wave 1 but not in wave 2, and four projects participated in wave 2 but not in wave 1.

**11 Local Conversations (271 participants)** were involved in the second wave of the research. Across projects, 75% of the surveyed participants were female and 25% male. They were mostly White (93%), 5% were Asian, 1% Mixed, and 1% Black. There was a somewhat even split between the 30-44 age group (25%), the 45-64 age group (32%) and the over 65 age group (27%), with 7% of participants aged between 25 and 20, and 9% aged between 18 and 24.

**12 Active Communities projects (145 participants)** took part in the research. Across projects, 55% of the surveyed participants were female, 42% male, and 3% non-binary. 56% of the Active Communities participants were Asian, 36% were White, 2% Mixed, 6% Black, and 1% other ethnic group. In terms of their age distribution, 38% were in the 45-64 age group, 25% in the 30-44 age group, 23% in the over 65 age group, 8% of participants aged between 25 and 20, and 6% aged between 18 and 24.

The data gathered in **the first and second waves of research** gives us insight into how effective community-led projects are to affect short- and longer-term change in health equity against an uneven background shaped by demographic, economic and geographic factors. By repeating the research over a period of time, we are able to work with a larger dataset and increase the robustness of the overall analysis. The third wave of the research is scheduled for early 2023.

## Local Conversations included in Wave 2 (Participant survey)



## Active Communities projects included in Wave 2 (Participant survey)



## 1. What is the effect of participation in the Trust's programmes on local people?

### 1.1 Short-term changes (analysis based on combined dataset including Wave 1 and 2)

The projects funded through People's Health Trust projects had a positive impact on **participants' confidence** (in the second wave, over 73% of surveyed participants in each programme reported that the projects helped them to feel more confident). By supporting people to come together and join a range of activities, projects **impacted positively on participants' skills** (in the second wave, 87% of the surveyed participants involved in Active Communities projects and 73% of those involved in Local Conversations projects said they had learnt or developed new or existing skills through the project).

Participation in local projects had a **positive impact on participants' social networks**, supporting participants to expand their social links and ties. Surveyed participants from both programmes had **more positive perceptions of social connectedness** than people living in areas characterised by similarly high levels of disadvantage:

- 84% of those surveyed agreed that the **friendships and associations they had with other people in their neighbourhood meant a lot to them**, compared to 49% of the people living in areas with similarly high levels of disadvantage.
- 75% of those surveyed agreed that **they regularly stop and talk with people in their neighbourhood**, compared to 57% of the people living in areas with similarly high levels of disadvantage.
- 79% of those surveyed agreed that **their local area is a place where people from different backgrounds get on well together** compared to 70% of the people living in areas with similarly high levels of disadvantage.

Surveyed participants from both programmes had **more positive perceptions of belonging and trust but less positive perceptions of safety** than people living in areas characterised by similarly high levels of disadvantage:



- 77% of those surveyed agreed that **people in their neighbourhood can be trusted**, compared to 56% of the people living in areas with similarly high levels of disadvantage [benchmarked against England only].
- 76% of those surveyed agreed that they **feel they belong to their neighbourhood**, compared to 56% of the people living in areas with similarly high levels of disadvantage.
- 60% of those surveyed agreed that they **feel safe walking alone in their area after dark**, compared to 84% of the people living in areas with similarly high levels of disadvantage.

It is important to highlight that these findings about perceptions of safety after dark could be influenced by the survey demographics, especially the unequal numbers of male and female respondents in our samples. In the third wave of research, we will further explore whether perceptions of safety after dark are influenced by survey demographics such as gender or other factors, and the impact this might have on the wider analysis.

## 1.2 Achieving community power and its impact on longer-term changes (analysis based on combined dataset including Wave 1 and 2)

Projects funded through People's Health Trust had a **positive impact on collective action and community power**.

Increased participation in Local Conversations and Active Communities projects had a positive impact on participants' community power. For both Local Conversations and Active Communities projects, **stronger social networks, improved confidence and skills and more cohesive communities had a positive impact on participants' community power**.

**Improved experience of community power**, achieved through participation in projects, had a positive impact on the **wellbeing of project participants**. For Local Conversations, improved community power had a positive impact on participants' wellbeing. Improved community power had a positive impact on the wellbeing and self-reported health of participants in Active Communities projects.

Data across programmes and nations shows that surveyed participants **had more positive perceptions of community power** than people living in areas with similarly high levels of disadvantage:

- 81% of those surveyed agreed that **when people in their area get involved in their local community, they really can change the way that their area is run**, compared to 51% of the people living in areas with similarly high levels of disadvantage.
- 59% of those surveyed agreed that they **can influence decisions affecting their local area**, compared to 22% of the people living in areas with similarly high levels of disadvantage.
- 86% of those surveyed agreed that they **would be willing to work together with others on something to improve their neighbourhood**, compared to 59% of the people living in areas with similarly high levels of disadvantage.

The programmes are making a difference in people's lives, which supports the findings from the first wave of research.

Many surveyed participants who answered the question about whether the project is making a difference in their life (open-ended question), gave at least one reason for its impact but quite a few participants provided two or three reasons. In the second wave, Local Conversations participants mentioned that **projects impacted positively on a variety of aspects of their lives**, including their networks (46% of those who answered), collective action (23% of those who answered) and increased opportunities to take part in activities (23% of those who answered). We received 220 responses from 145 participants. Active Communities participants noted that projects made a positive impact on their social links and ties (52% of those who answered) and improved health and wellbeing (33% of those who answered). We received 170 responses from 120 participants.

## **2. What is the role of local contexts in supporting or hindering outcomes for individuals and communities? (findings from Wave 2, March 2022)**

Across the two programmes, **the local cost of living and job opportunities** were identified as key local issues by participants in the projects funded through People's Health Trust.

For participants in both programmes, **relationships with people in the local area and the accessibility of nature** (parks, gardens, green spaces) were seen as assets.

The majority of participants **surveyed became involved in the projects** funded through People's Health Trust because of a combination of individual and community-driven motivations.

For both Local Conversations and Active Communities practitioners, **the uncertainty about the pandemic and the increased hardship for residents due to the pandemic** were seen as

the most significant barriers to projects returning to normal operations as they were emerging from the last round of government restrictions. Other significant barriers highlighted by practitioners across the two programmes were **the difficulty carrying out outreach and engagement, and recent changes that took place in the community.**

**3. How do practitioners evaluate the progress of each programme in relation to key elements of the theory of change? (findings from the Wave 2)**

Eight practitioners from Local Conversations (of 11) and 146 from Active Communities projects took part in the online survey. The focus of this part of the research was to **gather insight into how practitioners evaluate project progress against key elements of the theory of change.**

Practitioners and participants largely agree on the **positive impacts the projects have on participants' health and wellbeing, developing skills and improving social connections.**

The survey also shows that practitioners believe projects **created opportunities for place-based collaborative work**, gradually contributing to the sustainability of project activities and local systems change. All Local Conversations practitioners who were surveyed and 30% of Active Communities practitioners reported that **the projects have increased influence over neighbourhood services.** 76% of the Local Conversations practitioners and 59% of Active Communities programme practitioners answered that **the projects have supported local services.** 76% of the surveyed Local Conversations practitioners and 63% of Active Communities programme practitioners said that **the projects have facilitated new partnerships between local projects or organisations with common goals or interest.** 88% of the surveyed Local Conversations practitioners and 50% of Active Communities programme practitioners noted that **the projects have increased access to assets (e.g. money, places to get together).**

When asked if they have learnt any **lessons over the last six months that could help other projects realise their goals**, about a third of the Active Communities practitioners mentioned **the importance of being flexible.** Many of these practitioners highlighted the disruptive effect that COVID-19 had on their projects. In response, they recommended an approach that is realistic with goal setting and accepts the limits of the team's capacity. They also recommended setting up contingency plans and trying out different ways of delivering activities and staying in contact with members (such as online formats).

Local Conversations practitioners mentioned that projects would benefit from having shared goals across participant groups and ‘celebrating small wins.’ They also highlighted that **giving autonomy to projects participants could help bring the best results.** Enabling the participants to make decisions and encouraging them to take on more responsibility were mentioned as key lessons moving forward.

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