

"Making it Happen" Programme Evaluation – Stage One

Development and early testing of the Making it Happen programme theories

Summary Report

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Additional input by the Making it Happen Team

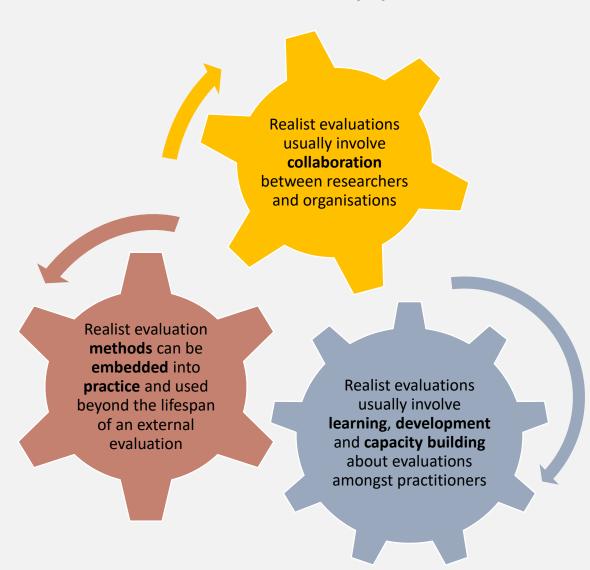
"Making it Happen" **Asset Based** Community Development as a foundation for positive health and wellbeing

- Making it Happen is funded by East Sussex County Council Public Health with aims to improve wellbeing and reduce health inequalities through Asset Based Community Development. The Programme partners, are voluntary sector organisations based in the county. They are Sussex Community Development Association (Lewes District), Action in Rural Sussex (Wealden District), Rother Voluntary Action (Rother District), Hastings Voluntary Action (Hastings Borough) and 3VA (Eastbourne Borough).
- Making it Happen is about discovering, celebrating and building on positive things in local neighbourhoods. Community Development Workers (CDWs) work with people to make the most of the opportunities that exist to create positive change. The approach is based on principles and values of Asset Based Community Development. The perspective of Making it Happen is that it is known that things like having a good social support network, being part of a group, or feeling connected with your neighbours can be positive for health and wellbeing.
- Making it Happen does not deliver activities or make changes for people. It is about working with people to create the changes they want to make for themselves and their neighbours. The aim is to improve the general health and wellbeing of people living in the neighbourhoods where Making it Happen is working. The Programme currently runs in 17 neighbourhoods located across the county. Neighbourhoods were selected based on a range of available data, including Indices of Multiple Deprivation, but also due to the presence of local assets and opportunities.

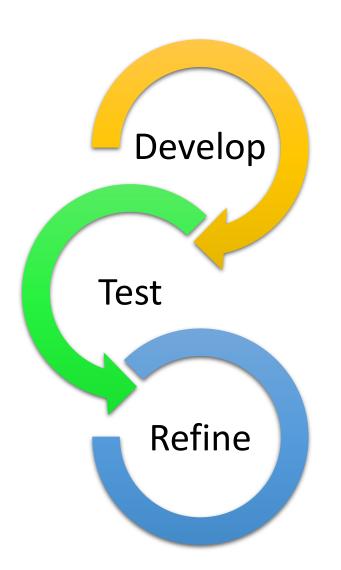


Evaluation of Making it Happen – Realist evaluation approach

- Realist evaluation is a well-established approach that involves working in collaboration with a range of people connected to the Programme in different ways (stakeholders). The approach explores if, how, and why Making it Happen works, and who it works for, within the areas it is being delivered. In this way, it can show how change happens.
- Information is collected through a variety of research methods to develop theories about why or how the Programme may work. Put simply, Programme theories are assumptions, beliefs and explanations that underpin our understanding of the Programme. Once the theories have been developed, they are tested and then refined. Research methods including surveys, case studies, interviews and focus groups are used to do this testing.
- A realist evaluation does not set out to prove an outcome. Instead, a realist evaluation helps organisations to understand how and why an outcome occurs within certain contexts, and as such, what it is about Making it Happen that contributed to causing that change.



Realist evaluation phases



Phase 1 - Develop: Data is gathered to explore the assumptions, explanations and beliefs that people have about how Making it Happen works, and how it contributes to change. These are formulated into a set of Programme theories.

Phase 2 - Test: Data collection methods are embedded into routine practice within communities to gather information to test whether the Programme theories hold true.

Phase 3 - Refine: The original theories are revisited to fine tune them based on what has been learned through testing. This learning is then used to inform and influence Making it Happen and deepen understanding about the programme.







Realist evaluation methods

In phase 1, a range of methods were adopted to support development of the Making it Happen Programme theories. Theory testing as part of phase 2 was bought forward to enable early learning to be brought into the stage one report. It is important to note that theory testing and refinement are processes that have started and have not yet reached their conclusion. In other words, the findings are tentative at this stage. The methods to develop the programme theories and to initiate this early testing are presented over the following three pages.

1a. Realist review of ABCD and literature relating to Making it Happen:

Evidence from existing research was reviewed to identify ABCD outcomes most relevant to MiH.

1b. Case studies produced by the MiH partners were also used to contribute to the review of literature relating to MiH.

2. Stakeholder mapping:

Key people connected with the Programme worked with the evaluators to identify and engage with others who may have an interest in the Programme over time. This mapping exercise involved: MIH partners, Commissioners and an Academic Advisory Group.

3. Interviews and focus

groups: Stakeholders identified through the mapping exercise were invited to engage in either an interview or a focus group. The aim was to glean information about the MIH Programme.

Realist evaluation methods continued

4. Developing the Programme theories:

Evidence gathered through the literature review, interviews, focus groups and from engagement with CDWs was pulled together to develop the initial Programme theories. MIH partners took part in a process to prioritise the theories. Eight were selected to focus on in the first instance.

5. Community Development Worker Evaluation Learning

Groups: Evaluation partners implemented these groups to exchange knowledge, to learn about practice and to build capacity of CDWs to engage with the evaluation. The groups were later amalgamated into existing Development Worker learning opportunities.

6. 'How and Why' conversations (interviews and focus groups):

Evaluation partners worked with CDWs to undertake these conversations with community representatives involved in programme. A focus group was held for strategic stakeholders. Evidence from these conversations contributed to Programme theory testing and refining.

Realist evaluation methods continued

7. Community data: Surveys have been produced to gather data from the community. A long version is for people who are involved with MIH, and a shorter version is for those who are less involved. Data from these surveys alongside realist case studies, contributed to theory testing and refinement.

8. Community **Development Learning & Development Feedback:** A short survey was also produced to capture feedback from the ABCD learning Programme which is being co-designed and codelivered by CDWs with the Trust for Developing Communities. This survey has been adapted for other learning opportunities being delivered through MIH.











Realist Evaluation phase findings: Phase 1 (develop) and early phase 2 (test)



In phase 1, the eight Making it Happen Programme theories were **developed**.



Phase 2 **testing** was brought forward to introduce community member surveys and to embed 'how and why' conversations into the CDW practice. This early testing focused on the first four Programme theories.



This has led to an initial set of refined theory findings to support inform learning about the Programme.



In the following section of the report, Programme theories are presented, and the perspectives of participants gathered through testing are summarised. Key findings are outlined alongside the recommendations for future evaluation needs.

Phase 1 evaluation findings: Development of eight programme theories

The data that was collected in phase 1 led to the development, prioritisation and selection of eight key Programme theories. The first four Programme theories draw on the principles and values of Asset Based Community Development and potential impact as follows:

1 Building foundations to achieve goals

 Making it Happen works to improve individual self-efficacy, wellbeing, and social capital within the neighbourhoods where Making it Happen is.

2 Making connections

• Making it Happen works to generate changes in the diversity and typology of people's social networks, connections within their community, and awareness of what else exists within their community.

3 Communities taking the lead

• Making it Happen builds capacity within communities to take forward community action which helps build community resilience, and neighbourhood-based systems for change.

4 Impacting on health and wellbeing

• Making it Happen works to develop solutions which go on to improve individual mental health and wellbeing of people within communities and create healthier places where they live.

Phase 1 evaluation findings: Eight Programme theories continued

The second set of Programme theories connect to the broader outcomes of ABCD and the role it can play in contributing to systems change:

5 Community participation in decision making

 Making it Happen works to generate receptivity amongst organisations to enhance community involvement in decisionmaking and action.

6 Embedding ABCD – increasing capacity, adopting the principles and in informing practice

• Making it Happen works to generate traction amongst key stakeholders to want to learn and know more about ABCD and how it can be integrated/adopted within their areas of work.

7 Collaboration beyond communities

• Making it Happen works to influence change across the wider system where there are mutual/reciprocal benefits to be had. A 'System' describes the environment, including the people who influence policies and make decisions on behalf of the community; as well as those who live, work, or study in the community, such as residents and leaders, managers, the workforce, and volunteers who are connected to organisations.

8 Communities being heard and making change

• Making it Happen works to help people and population groups have a voice, and create more accessible, and better coordinated, services for them in local places.

Phase 2 (test) evaluation findings: Perspectives of participants

In phase 2, the first four Programme theories were tested using a range of evaluation methods as previously described. Examples of the perspectives of evaluation participants relating to the first four Programme theories are summarised below. These provide an illustration of stakeholder views about how Making it Happen demonstrates or supports these theories.



1 Building foundations to achieve goals

"MiH has validated our style of working and has given us the hook to where we belong. We belong to the MiH community. It gives us confidence, it gives us evidence. I called funders to say you'll have to take a chance with us."

[Community member].



2 Making connections

"MiH generates connections within the community, leading to social networks, and awareness of what exists within the wider community. It was clear MiH were pivotal in raising awareness of what exists within the community, identifying opportunities and resources." [Strategic stakeholder].



3 Communities taking the lead

"The connections afforded support within communities in accessing untapped skills, resources, and talents within the local community, which increased resilience. Once forged, the connections were found to be associated with influencing community-based groups and activities." [Strategic stakeholder].



4 Impacting on health and wellbeing

"He found his own solution and our approach is for people to do this. We lay the ground in ABCD to connect, build relationships and be approachable in the future when people have needs...[if] someone truly understands asset-based then they place themselves in the community and they become potential as well. So, if someone in the community wants help and doesn't have a network of support, then they know where to go."
[Community organisation leader].

Programme theory 1: Building foundations to achieve goals

Key finding 1: Making it Happen contributed to Improving self-efficacy, wellbeing, and social capital within the community

CDWs were important to providing practical support (for instance, assisting with documentation) alongside their enthusiasm and support for the momentum of community-based groups to achieve their goals. Their support was especially important when challenges arose, and where motivation was low. Making it Happen was identified as a support for community members to act and do. This contributed to improving community-members self-efficacy and reinforced their confidence. In turn, this helps with creating and sustaining groups and activities within the community. This also supports the creation of social capital within communities, through the resource and network building that people engage with.

Key finding 2: Contributed to Empowering Communities Through Collective Efficacy. There were instances of the ways in which communities and community groups became empowered with the support of MiH to explore actions. This resulted in collective efficacy of community groups over activities. Throughout their involvement, community members have brought their own skills, ideas, and knowledge. These were found to be invaluable to furthering the sense of community amongst community-group members, which in turn served to empower and motivate community members through their sense of shared purpose. The findings suggest Making it Happen, through CDWs, was found to empower communities through the support and development of community-based groups. This in turn positively influenced community member self-efficacy owing to the group's shared sense of purpose. With the support of MiH, the shared experiences and skills of the community members led to the coproduction of community efficacy, with community-based groups coming together to accomplish a shared community-oriented goal.

Reflections for ongoing evaluation: Evaluations could seek to deepen understanding of how social capital is created within different community contexts. Future evaluation could also identify the factors that can inhibit positive community action and understanding of the how, what and where community action thrives.

Programme theory 2: Making connections

1. Enhanced awareness of what exists within the community The CDWs played an important role in raising awareness of groups, resources, and opportunities, and making connections between community members and groups. Community members said that this awareness may have otherwise remained unknown without the community development worker contributions. They were seen as an integral source of information to foster the start of community members being able to build social networks, especially within local community groups.

2. Generated change in the diversity and typology of people's social networks CDWs were found to support community members where possible to foster connections with the wider community. This occurred through forming new connections with diverse social networks. This led to the sharing of skills, knowledge, and resources within their community; and gained momentum leading to fostering friendships and bonds amongst community members. This meant that people felt more connected within their community. This led to instances where community members reported that they developed stronger, positive relationships within their community.

3. Enhancing connections within the community It was found that community members involved with, or supported by, CDWs were often afforded opportunities to be involved in discussions and activities related to developing resources within the wider community too. Being more involved led to them influencing and making decisions. This resulted in people feeling valued within the community. Their actions were also seen as having a beneficial impact. Enhanced connections between community- based groups was seen as important for wellbeing, and learning and skill development were mutual benefits as well.

Reflections for ongoing evaluation: Future evaluation could seek to deepen understanding of the potential value of more diverse social support networks. Specifically their role in contributing to individual positive outcomes for community members (learning, skill development, self-efficacy, resilience and wellbeing).

Programme theory 3: Communities taking the lead

1. Established relationships within the community to identify needs, and worked collaboratively to build capacity to meet those **needs** This key finding was based on how CDWs built a relationships with individuals and groups within the community. When this occurred they explored ideas, opportunities and practicalities for taking forward solutions to meet a previously unmet need within the community. Of particular importance is the ability of the Community Development Worker to work collaboratively and be able to support the validation of people's ideas. In some cases, they provided help for the community members to begin to access resources [grant funding, time, connections to wider networks] which were essential to meet the community needs. As a metaphor, the CDWs did not open doors for community members. What they did was facilitate a discussion where they could show community members which doors could be opened. From there, community members learned how to knock on future doors themselves.

2. Developed Community Resilience and Foundations for **Neighbourhood-led Change** Through community action the community members felt that they belonged to groups. They were aware of positive bonds, relationships and trusting connections being built. As they met challenges, they noted that community resilience was being developed, where they could bounce back more effectively to rise to meet new hurdles as they were encountered. CDWs were seen as being connected to these bonds, especially when group activities and events were being organised. This led to the formation of relationships and friendships between community members. Over time, community members noted that they felt less isolated, more confident and that further informal networks of support could be identified. As such, this finding showed that CDWs were a part of the processes that resulted in the creation of foundations for community resilience. This included the changes that community groups achieved, led by them in their neighbourhoods.

Reflections for ongoing evaluation: Evidence gathering to explore whether ideas that lead to action are sustained beyond the contribution of Making it Happen, including micro-enterprises, more diverse income streams and community skills and asset exchange.

Programme theory 4: Impacting on health and wellbeing

Key finding 1: Empowered Communities to Make a Change

CDWs supported a range of community members and groups which were then able to contribute towards maintaining or improving mental health and wellbeing, in turn making local communities a healthier place to live. For example, it was found that community members could identify issues and challenges within their community which people felt impacted on theirs and others mental health and wellbeing. CDWs were identified as a supporting factor, by highlighting resources that might be available to the community members and this influenced the group in their ability to develop solutions to community-based challenges. From here, community groups could build resilience and take community actions forward themselves. In doing so, community groups reported they were able to empower themselves in leading actions in the future.

Key finding 2: Strengthened Capacity and Capability in Creating Healthier Communities Community members provided a positive and enduring perspective that CDWs supported them to connect, interact and develop their own networks and connections beyond those they had an awareness and understanding of originally. In this sense, CDWs served as a catalyst from which community capacity and capability were developed and subsequently strengthened. The foundations which CDWs provided in the formation of networks, connections and skills to access resources were fundamental to community-based groups. This was particularly the case in supporting and improving community members' capability and capacity to improve mental health and wellbeing in the community by meeting group goals, feeling included and connected and by feeling good about themselves – the essence of mental wellbeing and a foundation for health.

Reflections for ongoing evaluation: Identification of the ripple-effects of the multiple efforts within community groups which improve health and wellbeing and which can be captured at community level. This might include community involvement in the design and delivery of activities and services which contribute to community health and place shaping; the formation of networks and how they develop within communities; and the resulting indirect influence and empowerment which inspires community led activity.

Phase 2 (early testing): Area case studies

Sussex
Community
Development
Association:
Lewes District

Peace Community Centre and Mosque: This group used food and a soup kitchen as a platform to build within their community strong connections with families, young people and older people. They engaged with diverse groups, successfully navigating the social, cultural and ethnicity diversity of the community members. Community use is significant.

Action in Rural Sussex:

Wealden District

Residents
Association: This group of community members had multiple sector connections and set up a car service and then a telephone service to reach out to people with transport and social isolation issues.

Rother Voluntary Action:

Rother District

Rye Community
Garden: By mobilising skills and talents as assets, a diverse group came together, connected with the school, local neighbourhood, food bank and people with an interest in the environment.

Hastings Voluntary Action:

> Hastings Borough

Hollington
Community Centre:
This community
reached out to
promote inclusion.
They made
connections across
sectors, addressed
social issues and built
relationships through
coffee mornings, arts
and crafts and
physical activities.

3VA:

Eastbourne Borough

Willingdon Trees Pop
Up Studio: This is a
resident led social and
peer network who
work together to
deliver creativity
sessions to promote
positive mental
health, wellbeing,
resilience and selfefficacy.



Wider reflections from the evaluation

The evaluation to date has led to the development and focus upon eight core Programme theories that help identify how and why Making it Happen works to achieve its outcomes. Early testing of the first four of these theories has begun.

The findings from the initial testing process gives confidence that Making it Happen is heading in the right direction towards its envisaged outcomes. Further testing and refinement of the first four Programme theories is needed, along with testing and refining of the last four Programme theories. Future evaluation could also identify the factors that can inhibit positive community action and understanding of the how, what and where community action thrives.

Learning from the evaluation will support Making it Happen to deepen their engagement of groups and individuals who are experiencing social inequalities and/or are less represented within the community.

Learning will support Making it Happen partners in conversations with relevant parts of the system to enhance the role of communities and community groups to have a voice and play a role in the creation of more accessible, and better coordinated, services.

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Next steps for the evaluation



To continue to test and refine Programme theories 1 to 4; and to begin to test and refine Programme theories 5 to 8.



To make best use of existing opportunities to gather data and embed new methods into practice as necessary.



To make best use of all the available material, such as through the grants programme and the learning programme to enhance the skills and capacity of community members and CDWs.









