The Communities in Control study is evaluating whether programmes like Big Local can help to reduce the inequalities in health that exist between different groups and areas in England.

This update looks at emerging findings from the second phase of the study. It covers the early health impacts for residents directly involved in Big Local and how activities to improve social relationships, environmental conditions and the reputation of Big Local areas could have longer term benefits for health whether or not ‘improving health’ is an aim.

Health inequalities are major differences in health experiences between social groups and geographical areas. These inequalities affect how long people live and how long someone can expect to live in good health.

In England, people in more affluent circumstances will live longer and benefit from better health for many more years than those who are less well off.

Inequalities in health are caused by avoidable social inequalities such as levels of poverty, access to things that are good for health (e.g. a safe job or being connected socially) or if people are exposed to health hazards (e.g. air pollution or poor housing). These inequalities also stem from the amount of control that people have over the decisions that affect their lives and what happens where they live.

There are ways that resident led programmes like Big Local could contribute to improved health and reduced inequalities for local communities.

How Big Local could influence health and reduce inequalities

- Empowering groups of residents to have more control collectively over the decisions affecting their local areas
- Mobilising residents’ knowledge to make a difference to the things that matter to local communities
- Building social relationships in places, creating shared identity and common purpose
- Improving economic opportunities and the surrounding environment of an area
- Challenging reputations that negatively portray areas and their residents

About the research

The Communities in Control study is funded independently of Local Trust and is undertaken by a collaboration of universities in England.

Big Local is a long term programme. So far, the research has taken place for just over three years (2014-2017) during the early years of the programme’s roll-out.

Research activities have included

- interviews with partnership members and other stakeholders in 15 Big Local areas
- surveys of partnership members
- reviewing Big Local plans
- observing Big Local meetings and events
- creating datasets for all 150 Big Local areas
Big local - How does involvement influence residents’ health?

Survey of partnership members
To learn about the health impacts for the residents actively involved in delivering Big Local, a survey was carried out in 15 Big Local areas taking part in the study. It asked about self-reported levels of control, health and wellbeing and perceptions of the local area. The survey took place at two time points to see if residents reported any improvements in the shorter term.

From the survey it was evident that:

- More people who completed the survey at both time-points reported that their sense of control, health and wellbeing stayed the same or had improved compared to people reporting these had got worse.
- In the short term, people were more likely to report changes to their wellbeing than reporting their general health had improved.
- Several factors appeared to shape whether people reported an improvement in wellbeing. This included improvements in levels of ‘community’ control, satisfaction with the area, and feeling you belong to the neighbourhood.

These findings are from a relatively small survey conducted in 15 Big Local areas. However, the findings do support the belief that approaches that empower communities to have greater control can have positive effects for those who participate.

Questions about health, wellbeing and control were also included in Local Trust’s 2016 survey of partnership members across 150 areas. These questions will be repeated in future surveys to identify changes over a longer time frame and across a larger number of Big Local areas.

Experiences of Big Local

During interviews, residents discussed how involvement benefited their own mental and, to some extent, physical, health. Some residents highlighted that involvement in Big Local, particularly social opportunities beyond core decision-making structures, had positively transformed their subjective wellbeing. Being in control mattered also where residents felt they had been powerless to change things in the past.

Positive influences on wellbeing:
- range of opportunities to participate and make connections
- by increasing people’s sense of identity and self-worth
- more personal power to manage own health/wellbeing

However, many residents, particularly those involved in decision making processes also talked about pressures arising from involvement. These experiences pointed to some of the broader challenges in the delivery of Big Local or projects, which could contribute to frustration and stress. In some situations, high levels of stress resulted in individuals leaving the local partnership. Roles with certain responsibilities, such as being a chair or partnership member could also cause extra pressures.

Negative influences on wellbeing:
- time and commitment of being involved
- responsibility to deliver outcomes for the local community
- conflict and tension between residents as well as with other organisations

Some residents spoke about the challenges of juggling volunteering alongside social obligations such as work and family commitments as well as in the context of managing their own health conditions.
Big local actions to improve social relationships and environmental conditions

It is too soon for the study to measure if improvements to health are happening more generally in Big Local areas. Many of the types of activities that are taking place in Big Local areas do have potential to improve health longer term for local populations.

Building social relationships

Improving social relationships between residents is a common aim of local plans. Within these plans there is a particularly common focus on improving social connections, reflecting the view amongst residents in a number of areas that a sense of community has been lost locally.

This aspiration is often expressed in plans as:

- developing a collective sense of identity
- creating a sense of belonging
- building community spirit and pride

Improving the physical environment

Recurring examples to improve the environment included actions to maintain or improve green space, provide new outdoor amenities (including sport and leisure facilities for young people), provide buildings for community use, environmental clean-ups, neighbourhood art projects and high street improvements (e.g. shop fronts, pavement landscaping).

Motivations for environmental improvements were often reported to extend beyond the immediate aspirations of physical improvements. For example,

- Partnership members reported that they often value visible and lasting physical changes, viewing such changes as a way that the Big Local can ‘make its mark’.
- Partnership members also frequently intended their early activities to be a ‘quick win’ that would raise the standing of Big Local with the community and other stakeholders (such as the council) to encourage further engagement and development of future projects.

While, like social relationships, improving health is not always the main goal of environmental changes, there are different ways that these actions could improve health whether or not this is a formal aim:

- Some forms of built environment modification (e.g. green space, community hubs, leisure/sport facilities) offer opportunities that may have direct impacts on physical activity and wellbeing.
- Some reduce environmental stressors by removing incivilities such as litter and dog excrement or improving aesthetics by reducing vandalism, through art projects.
- Taking control of unfunded community buildings and preventing them from falling into disrepair can prevent environmental stressors from occurring in the future.

Barriers to social participation were also identified. These ranged in scale and nature:

- practicalities to involvement (e.g. timing of meetings, transport issues)
- physical barriers in neighbourhoods (e.g. a road dividing a local area)
- finding ways of overcoming people’s lack of belief and trust that programmes like this could make a difference.

Often it was through the delivery or setting up of activities that social relationships were strengthened, for example:

- the creation of spaces in local areas providing opportunities for a wider range of social interactions to develop.
- working together to organise festivals residents created new social connections and brought in additional resources for the local area.
- cohesion between residents might also be strengthened by having a shared impetus for action (such as a shared threat to an existing amenity)
Negative area reputation and Big Local areas

During Phase 1 of the Communities in Control study, partnership members raised the issue of how the reputation of their area had a negative impact upon their local communities.

During Phase 2 of the study, the research focused on understanding how this issue was affecting local areas and how Big Local partnerships are taking action to address this. This included interviews with residents, reviewing Big Local plans and a review of newspaper coverage in two Big Local areas.

How reputation affects Big Local areas

Negative portrayals of areas were frequently linked to external perceptions held by people living and working outside the area. This included perceptions of residents living in other local neighbourhoods, estate agents, public sector officials and in the media.

Where a poor reputation was reported this was felt to have a number of negative impacts for the local community:

- stereotyping residents who live there
- people not visiting or wanting to move in
- diminishing local aspirations and pride
- difficulty in attracting investment locally

While most interviewed agreed that Big Local could improve an area’s reputation they also did not believe there were any quick fixes, with area reputation described as deep rooted and often difficult to shift.

How Big Local partnerships are challenging poor area reputation

Partnerships are taking a range of actions to improve or challenge their area’s reputation:

- ‘Direct’ actions include proactive publicity and communications to promote good news stories about the area in the press as well as the use of social media and Big Local newsletters or websites.
- Festivals and cultural/heritage activities to encourage participation and connect the community, in some cases, aimed to encourage visitors to the area and improve its image. Such activities also contributed to more positive press coverage.
- Improving streets/shopping areas were seen to increase the likelihood that ‘outsiders’ would see the area as attractive, safe or a desirable place to visit.
- The presence of Big Local itself and its emphasis on residents’ control offering status for a community and demonstrating that an area was ‘worth’ investing in.

Newspaper coverage and Big Local – case studies of two areas

To gain more detailed insights into issues of reputation, a review was carried out of local newspaper coverage of two Big Local areas over a five year period. Categorising coverage as negative, positive, mixed (positive and negative) or neutral, the review concluded that negative coverage affected the reputation of both these areas.

Overall, negative coverage accounted for just over a third and positive coverage with one fifth of reporting for both areas. Negative coverage overwhelmingly included references to perceptions of crime or anti-social behaviour. Positive stories were linked with actions taken by community groups/organisations (including Big Local), local fundraising and volunteering.

The review also compared coverage of Big Local in the local press over the 5 year period. Both areas received coverage of Big Local during the launch and in the early stages of getting Big Local going. In one of the areas, the partnership is taking a more proactive approach to publicity throughout Big Local. Here, Big Local has provided an impetus for stories over time. This coverage has helped to portray the area positively, focusing on the community’s vitality, cohesiveness and pride. This coverage would not have happened if Big Local had not taken place.
Next steps for the Communities in Control study

The Communities in Control study will continue into a third stage from 2018. With funding from the NIHR Public Health Research programme, the study will look at the longer-term impacts on the health of the residents who are most actively involved in delivering Big Local, on the local population of Big Local areas and the actions taking place in local areas that influence health.

Resources and learning for local action

The team are currently producing a series of research summaries and journal articles on the following topics.

- How involvement in programmes like Big Local can influence health
- How residents of Big Local areas are acting together to strengthen social relationships in their communities
- Why resident led action to improve the built environment is important for health
- How place based programmes can shape the media portrayals of local areas

The team are working with national organisations including Local Trust, public health practitioners and residents to produce web based resources/learning materials for practitioners and communities and to hold networking activities.

Find out more

If you are interested in finding out more, you can get in touch with the team via

Emma Halliday: e.halliday@lancaster.ac.uk

A new project website is under development and will be available in early 2018.

Who undertook the research?

The Communities in Control study (Phase 1 and 2) was undertaken by a team of local researchers based at research centres who were part of the NIHR School for Public Health Research (2013-17):

- Fuse; The Centre for Translational Research in Public Health, a collaboration between Durham, Newcastle, Northumbria, Sunderland and Teesside Universities;
- LiLaC collaboration between the Universities of Liverpool and Lancaster;
- The London School for Hygiene and Tropical Medicine
- The University of Exeter Medical School.
- The University of Sheffield

The study is coordinated by Professor Jennie Popay, Lancaster University (LiLaC).

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