



## ***'Animating Assets'***

### ***Learning Event***

Wednesday 19<sup>th</sup> March 2014, 10.00am – 1.00pm

The Lighthouse, Glasgow

## **Introduction and background**

**‘Animating Assets’** is an exciting new collaborative programme facilitated by the Scottish Community Development Centre (SCDC) and the Glasgow Centre for Population Health (GCPH). Until the end of June 2015, the team aims to support existing asset-based approaches to a range of health and social wellbeing issues in Scotland, through a process of co-creation, experimentation and evaluation. The ultimate aim of the research and learning programme is to produce new evidence of the impact made by asset-based interventions on health and wellbeing.

To engage with those taking part in the research and learning programme directly, and with those interested in asset-based or related work as a practitioner, manager or policymaker, the programme’s first learning event was held on the 19<sup>th</sup> of March at The Lighthouse in Glasgow. The event brought together 30 people interested in taking forward asset-based approaches in their local areas from a number of sectors to hear, share and discuss the background, context, learning and hopes for the research programme and how it can support work in relation to asset-based practice and action at local and national levels. Delegates came from the Scottish Government, NHS Boards, local government, Community Health Partnerships and community projects.

Fiona Garven, Director of the Scottish Community Development Centre, opened and chaired the event. Fiona welcomed delegates to the first learning event and spoke of doings things differently being at the heart of policy ambitions within the Scottish Government, accompanied by a growing interest in and development of asset-based approaches central to this national reform agenda.

Fiona considered the similarities between asset-based practice and community development and discussed the development of the Animating Assets research programme which draws on the strengths and interests of both SCDC and GCPH. Furthermore, the research builds on a firm policy background of community-led health and recent work with Directors of Public Health. It is recognised that there is a lack of evidence in relation to asset-based approaches and a need to consider how we create and support whole systems change if we are to improve the health of the population. Fiona also reflected on some initial learning from the research programme so far, discussed in more depth during the course of the event.

The learning event consisted of small group discussions and two short presentations focusing on the evidence for asset-based approaches so far and the action research process. The research team then shared learning from the research programme and process so far, next steps and how people can continue to get involved and stay linked into the programme as it moves forward.

The event programme is presented in Appendix 1 and the participant list in Appendix 2.

## **Group discussions**

Following the introduction to the morning and the background and context of Animating Assets, delegates were encouraged to discuss a small number of initial questions at their groups. These included their interest and knowledge of asset-based approaches, involvement with the research programme so far, questions they have which could feed into the research programme and what they would like to see the programme achieve.

The following is a synthesis of the main themes that emerged during the table discussions.

### ***What do you already know?***

Delegates felt that they already knew a lot about asset-based approaches and recognised these approaches as an ‘adaptive, emerging way of working’ which focuses on the skills, passion and knowledge of local people and the collective abilities of communities when they support each other and work together.

Participants agreed that there is a lot of community-based work happening but that is not necessarily always asset-based. It was felt the shift towards asset-based approaches and community-led health had ‘reinvigorated working with communities’. Clarity was sought over the differences and similarities between ‘community development’ and ‘community learning and development’ and there was agreement that there was a need for better articulation of what asset-based approaches look like in communities and within service settings. The research programme, in response to this point, was highlighted as an attempt to put theory into action.

The need to join-up with existing services and projects that are taking an asset-based approach, including ‘Inspiring Scotland’ and ‘Thriving Places’, was clear from discussions.

It also emerged strongly that if we are really ‘trying to do it differently’ then we must challenge existing cultures, structures and systems which impede progress and stifle innovation. There is a need to build trust, overcome divisive competition and take shared responsibility for community outcomes and decisions. It was proposed that public health may play a ‘brokering’ role between community members and professional staff.



**What are your questions?**

Participants were asked to share their ‘burning questions’ in relation to asset-based approaches in general, and questions that could be considered within the study.

Initial responses focused on the practicalities of working in an asset-based way:

- How do we really do things differently?
- Are asset-based approaches enough on their own?
- Do we need to also look towards using and incorporating other methods and approaches such as co-production for health and wellbeing outcomes and sustainable change?

Participants also asked about how staff can be supported to work differently, how to value the assets within organisations and what the implications of working differently might be. The need for transformation within existing structures was acknowledged alongside the need to consider how to ‘enable’ systems so that change can happen. Questions were also raised about how to engage with a whole system to influence systemic change.

Many of the questions referred to structural issues. Various structures may constrain opportunities to work differently and stifle innovation, particularly for frontline staff in statutory and voluntary organisations. Responses compared the effectiveness of the statutory and community/voluntary sectors in terms of responsiveness to new ideas, flexibility of systems, speed of progressing actions



and limitations due to bureaucracy. Issues of capacity were highlighted for all staff regardless of organisation, with event participants recognising the stretch on the capacity of small local organisations to be involved in another new initiative.

*“[The] statutory sector are generally slow and unresponsive because of bureaucracy. [The] community and voluntary sector[s] are faster and more flexible generally.”*

Participants highlighted the challenges of managing a process of change or a new way of working. Many organisations lack flexibility e.g. if funded to work in a particular geographic area taking on work in a ‘new patch’ is challenging. In such circumstances activity can be driven by resources rather than by the priorities or needs of the local community. It may also be easier for the ‘statutory sector to employ staff themselves instead of resourcing community organisations’ although this approach can result in a workforce with an inappropriate skill set for working at the community level.

## *Animating Assets – first learning event*

### ***Why do you want to be engaged? What do you want to get out of it?***

Participants reflected on why they are or would like to be engaged with the Animating Assets programme and what they hope the work will achieve.

Participants spoke of the need to generate evidence of what works, provide evidence that 'doing it differently can be better' and the importance of synthesising the learning from a number of local sites to identify common features, discontinuities and transferable learning which have national relevance.



Information, support and advice about appropriate measurement approaches to assess impact and effectiveness were given as significant reasons to connect with the research programme. It was also hoped that the programme would generate evidence to support the creation of a set of asset-based indicators of positive wellbeing in the short and longer term. The need to identify leadership to drive, develop and support continued growth of asset-based approaches was also highlighted as an important motive to get involved.



## **Presentation summaries**

Following the small group discussions and feedback, two presentations were given: one on the current evidence base for asset-based approaches; and the other on the action research process. Summaries of the presentations are presented below<sup>1</sup>.

### **Asset-based approaches – what the evidence says so far?**

***Jennifer McLean and Val McNeice, Glasgow Centre for Population Health***

In the first part of the presentation Jennifer highlighted that asset-based approaches are not new, but the language of ‘assets’ is now permeating much of the public health literature. There is increasing emphasis placed on prevention and the need to work differently to tackle persistent inequalities and new thinking emerging in response highlights the potential of asset-based approaches in improving health and in reducing health inequalities.

Jennifer then presented a brief overview of asset-based approaches before outlining the features of asset-based activities. She continued by considering the current and evolving evidence base for the approach. There is a need for the research base to continue to be strengthened in order to demonstrate the processes that underpin these approaches and the types and scale of effects that can be achieved.

Val then spoke about learning from GCPH research so far. Five themes have emerged from the research which are central to taking an asset-based approach. Val went on to consider some of the methods which can help to put asset-based approaches into action. Asset-based approaches are not a prescriptive set of operations that can be easily ‘scaled up’ but there are methods available to support the identification and mobilisation of assets that can be used with individuals, groups, organisations and whole communities which are participatory in nature.

The presentation also recognised current critiques of asset-based approaches. Working in an asset-based way should not mean neglecting structural determinants of health inequalities; asset-based working is not about saving money; and, asset-based approaches are difficult to measure by traditional means leading to limited ‘hard’ evidence of impact. Finally, Val highlighted a number of issues in relation to asset-based working that require further thinking, evidence and action.

#### **Asset-based activities**

- Community issues
- Meaningful engagement
- Identifying, building on and mobilising
- Local knowledge and experience
- Changing power relationships
- Facilitating, enabling and empowering
- Resources from outside the community

#### **Research themes**

1. Balancing
2. Connecting
3. Learning and earning
4. Empowering
5. Being human



<sup>1</sup> Copies of the presentations were sent to participants following the event.

**Action research – why are we using this process?**

***Cathy Sharp, Research for Real***

Cathy had asked participants to watch a short animation about action research in advance of the session. On the day, she posed the question '*What most interests or excites you about the idea of using action research to explore asset-based approaches?*' Participants were asked to pick a card with an image on it to stimulate their thinking and talk to two others in the room about their response.

Feedback included the importance of having conversations and building relationships which are meaningful to people within the research process, and giving them opportunities to agree a shared purpose and joint action in a 'journey of learning together'.

Action research was seen as an important way of undertaking research led by the priorities of local people and a way of 'holding to account' approaches to generating evidence of asset-based work at a local level. Action research was also thought to be an approach with energy which responds quickly to people. It was agreed that 'communities will be able to judge whether by utilising this approach and working in this way we are making a difference', but that it is also essential that staff can show evidence of the approach. The importance of stepping back from 'driving the outcomes' and the 'honesty of our agendas' when working with communities using this approach also emerged as crucial.



Cathy emphasised the importance of action research as a structured process of communication between multiple stakeholders, including communities and staff in organisations. It is about generating new knowledge by testing provisional understandings in action; being prepared to change these understandings and remain open to learning from experience through an open and inquiring approach.

Cathy also made a distinction between a problem solving or deficit model of research, with a more appreciative or assets oriented approach (Appendix 3).

**Animating Assets – what we have found so far? Where we are now?**

Four areas have signed up to the Animating Assets research and learning programme. These are detailed in the table below.

Research site	Focus	Next Steps	Current Partners
Milton (and Lambhill), North West Glasgow	Overall community health	First event bringing partners together: 2 <sup>nd</sup> May, with a larger meeting on 8 <sup>th</sup> May	<ul style="list-style-type: none"> <li>• North West Glasgow Community Health Partnership</li> <li>• Love Milton</li> <li>• North Glasgow Healthy Living Community</li> </ul>
Barmulloch and Balornock, North East Glasgow	Overall community health	First event bringing partners together: 6 <sup>th</sup> May	<ul style="list-style-type: none"> <li>• North East Glasgow Community Health Partnership</li> <li>• North Glasgow Healthy Living Community</li> <li>• Wallacewell Community Fellowship</li> </ul>
South Edinburgh	Young people and substance misuse	First event bringing partners together: 14 <sup>th</sup> May	<ul style="list-style-type: none"> <li>• City of Edinburgh Council</li> </ul>
South West Edinburgh	Young people and health (prevention)	First event bringing partners together: 15 <sup>th</sup> May	<ul style="list-style-type: none"> <li>• City of Edinburgh Council</li> </ul>

***What are we learning about recruiting sites?***

- It has been slow. Some of the initial interest in the research that we had generated was lost between the seminars held with Directors of Public Health (sponsored by ScotPHN) and the awarding of Scottish Government grant funding – people moved on, priorities changed and momentum was lost.
- Having to co-finance their involvement in the Animating Assets programme was an issue in some areas. Although local leaders were interested, research managers found it difficult to justify the cost when they had to make cuts in their budgets.
- We have had more interest in Animating Assets from sites which are just beginning to consider using asset-based approaches with a number of partners across a whole area to tackle a particular health issue.



***What issues does this present?***

One of the key motivators behind the programme is to gather evidence about the difference asset-based approaches make in practice to the health and wellbeing of local people and communities. We would like to build on and learn from existing practice and to add to and further strengthen the evidence base for asset-based approaches.

The sites which are interested, and also able to participate, are in the process of exploring asset-based approaches. The programme will support their development but we are concerned that it will be hard to generate evidence of effectiveness and impact in such a short timeframe.

***How are we addressing this?***

We will be offering an associate level of support to three further sites. We will select these areas on the basis that they are already using a cross-sector asset-based approach to addressing an issue of health inequality in a local context. We are currently working with and considering:

- Edinburgh Lochend Total Neighbourhood
- A site being proposed by NHS Lanarkshire
- Girvan in South Ayrshire (where there has already been considerable asset-based activity involving the local community, the CHP and the local authority as well as the voluntary sector).

Support will take the form of a series of review sessions with teams of practitioners from across sectors and community members. The aims of the review sessions will be firstly, to reflect on what they are learning about asset-based approaches, what they are, how they are different to traditional approaches and what impact they are making, and secondly to plan to extend the approach on the basis of their learning.

Associate areas will be supported through a development grant from the Glasgow Centre for Population Health.

## **Conclusions and next steps**

In the last session of the day the research team and delegates considered the next steps for Animating Assets.

### ***How do you want to be involved?***

To ensure the ongoing involvement, engagement and interest of a wide range of individuals and interested parties in Animating Assets, event participants were asked if and how they would like to continue to be involved as the programme moves forward.

Participants confirmed they wished to be kept up-to-date with progress and learning through a range of outputs and opportunities including written briefings, the provision of a 'space' to share insights, intelligence and issues, and the possible establishment of an on-going learning network. Flexibility of involvement with the programme was seen to be important.

It was recognised that interest in asset-based approaches is growing and asset-based practice already exists in many different contexts across Scotland. In order to learn from, link with and gain insights from this practice in a number of geographical areas of Scotland, the proposal to make these areas of work 'associate sites' was favourable to participants.

### ***Who else should be involved?***

In the final discussion, participants considered who else could or should be involved in the research programme. There was agreement that Animating Assets should also be made known to existing related work taking place at a local and national level to enable shared learning and further fertilisation of the approach.

Existing organisations, areas of work and projects which it would be helpful and beneficial for Animating Assets to link with include:

- What Works Scotland – ESRC and Scottish Government-funded centre aiming to deepen the impact of the emergent Scottish approaches to public service delivery and reform, by evaluating evidence in delivery of that approach.
- Skilled Workers, Skilled Citizens initiative, led by the Scottish Social Services Council.
- Locality approaches being taken forward by Community Planning Partnerships.
- Inspiring Scotland Link Up programme.
- Asset-based approaches community of practice – in development by the BIG Lottery, Inspiring Scotland and Nurture Development.
- Initiatives taking forward participatory budgeting (PB) in communities as examples of ways of mobilising community assets.

In closing the event, the research team thanked delegates for their views, insights and active participation in the morning's discussions, and also their support for the ongoing study. An invitation was extended to all to continue conversation over lunch.

## Appendix 1: Event programme



### Animating Assets

## Our First Learning Event: Wednesday 19 March 2014

The Lighthouse, 11 Mitchell Lane, Glasgow  
10am – 1pm

### Programme

- |       |  |
|-------|--|
| 9.30  | Tea and coffee   |
| 10:00 | Introduction and background  |
| 10:15 | <b>Small group discussions:</b> <ul style="list-style-type: none"><li>• what do you know?</li><li>• what have you heard?</li><li>• what are your questions?</li><li>• why do you want to be engaged?</li></ul> |
| 10:45 | <b>Asset-based approaches</b> – what the research says so far?   |
| 11:00 | <b>Action research</b> – why are we using this process?  |
| 11:30 | <b>Animating Assets</b> – what we have found so far? Where we are now?   |
| 11:45 | <b>The future</b> – so what, now what, how can you be involved?  |
| 12:30 | Close and lunch  |

## Appendix 2: Delegate list

<b>Wednesday 19th March 2014 - Venue: The Lighthouse</b>		
<b>First Name</b>	<b>Surname</b>	<b>Organisation</b>
Lorna	Ascroft	Scottish Government
Katharine	Aulton	University of Edinburgh Business School
Tricia	Boyle	Cameron Hospital, NHS Fife
Anne	Clarke	NHS Ayrshire & Arran
Arlene	Cooke	North Glasgow Healthy Living Community
Gabe	Docherty	NHS Lanarkshire
Eric	Duncan	NW Glasgow CHP
Fiona	Garven	Scottish Community Development Centre
Suzanne	Glennie	NW Glasgow CHP
Elspeth	Gracey	SCDC
Elena	Groll	Scottish Government
Jo	Kennedy	Animate/SCDC
Catherine	Mackereth	Dumfries and Galloway Health and Wellbeing
Dot	McLaughlin	The Improvement Service
Jennifer	McLean	Glasgow Centre for Population Health
Valerie	McNeice	Glasgow Centre for Population Health
John	Marshall	North East Glasgow City CHP
Charlotte	Mitchell	Glasgow Centre for Population Health
Lorraine	Percy	North Glasgow Healthy Living Community
Tony	Rednall	Scottish Government
Lesley	Reid	NHS Lothian
Michelle	Rogers	Edinburgh City Council
Cathy	Sharp	Research for Real/SCDC

### Appendix 3: Contrasting a deficit and assets model of research

<b>Problem solving/ deficit model</b>	<b>Action research/assets model</b>
"Felt Need" Identification of Problem	<b>Observe</b> <ul style="list-style-type: none"> <li>• Appreciating and valuing the best of "what is"</li> <li>• Start with opportunities, strengths and resources</li> <li>• Invest in people, communities and agencies as active participants and stakeholders</li> <li>• Explore experiences and value evidence of all kinds</li> </ul>
Analysis of Causes	<b>Reflect</b> <ul style="list-style-type: none"> <li>• Envisioning to generate visions of "what might be"</li> <li>• Uncommon dialogues: build connections between people and issues</li> <li>• Draw on and value diversity – not seeking consensus</li> </ul>
Analysis of Possible Solutions Creation of recommendations	<b>Plan</b> <ul style="list-style-type: none"> <li>• Co-creation of possible solutions through dialogue</li> <li>• Co-create 'success factors' – build in systematic inquiry to learn through experience</li> </ul>
Action Planning (Treatment)	<b>Act</b> <ul style="list-style-type: none"> <li>• Innovate through experimental action – testing out in practice to create "what will be"</li> <li>• Continue to generate good questions</li> </ul>

Adapted from Cooperrider and Srivastva "Appreciative inquiry into organizational life" in Research in Organizational Change and Development, Pasmore and Woodman (eds), JAI Press; and Wadsworth 1987, Y "Building in Research and Evaluation, Human Inquiry for Living Systems", Allen and Unwin 2011.