







# Developing Resilient Communities: Approaches and Evidence Graphic Summary Report 2018

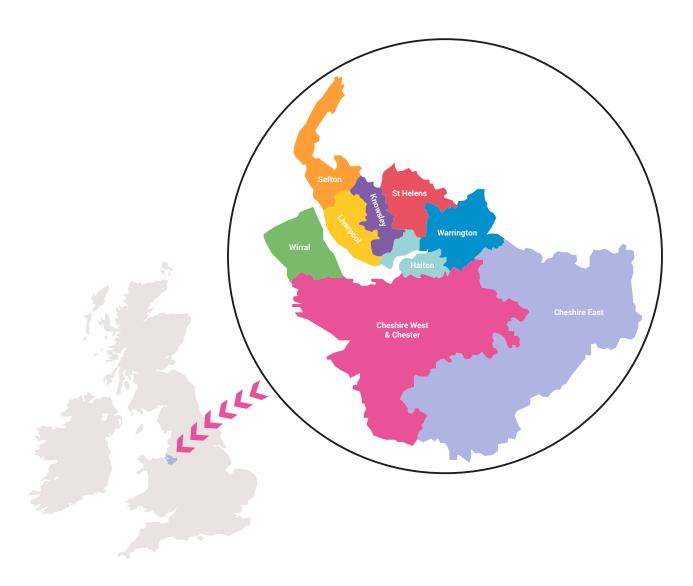
Janet Ubido, Cath Lewis and Hannah Timpson

PHI, Faculty of Education, Health and Community, Liverpool John Moores University, 3rd Floor, Exchange Station, Tithebarn Street, Liverpool, L2 2QP 0151 231 4224 | J.Ubido@ljmu.ac.uk | www.ljmu.ac.uk/phi | ISBN: 978-1-912210-53-4 (web)

# **Community resilience**

'the capacity of communities to respond positively to crises... to adapt to pressures and transform'

Reducing inequalities and poverty will strengthen the ability of communities to demonstrate resilience.



The Public Health Institute at Liverpool John Moores University was commissioned by Champs to identify and describe different models or approaches to developing resilient communities and to assess their effectiveness.

# **Approaches to building community** resilience identified in this report:

Promoting social networks

Enhancing environmental assets <<<

Promoting a healthy economy

Supporting community engagement

Measuring community resilience

Developing workforce skills

# **Promoting social networks**

#### Identifying key individuals

Community connectors, health champions, local area coordinators and community navigators can all help to build resilience in their communities through strengthening social networks.













#### Social prescribing

Shared reading, books on prescription, physical activity for wellbeing, art classes and many other social activities can be prescribed by primary health care services to provide psychosocial and practical support within the community<sup>2</sup>.

# Volunteering & innovative community schemes

Volunteering is beneficial for health and wellbeing and can reduce social isolation, exclusion and loneliness<sup>3</sup>. Befriending mentoring and peer support schemes focusing on connecting people with activities and support can allow them to grow networks that can support them now and in the future<sup>4</sup>, for example the 'Men in Sheds' scheme, community gardening and GP coffee mornings.











# Using digital media









Digital media can be used to support social participation and keep people in touch with friends and family. Internet support groups can offer peer support, for example the Mind Waves website, which enables the creation and sharing of stories around mental health, focussing on positive mental health.

There are schemes to ensure groups such as those on low incomes or the elderly are not excluded from digital access, for example the 'iTea and chat' groups for the over 50s and digital health champion schemes, both in Cheshire East.

# Promoting community governance and levels of control

Empowering communities in planning and decision making processes can increase resilience<sup>6,7</sup>, especially if this involves activities at the higher end of the five steps on the arc of citizen engagement: inform, consult, involve, collaborate and empower.



# Empower

To place final decision-making in the hands of people who have the knowledge, support, skills and resources to define their own outcomes and take on greater responsibility

#### Collaborate

To partner with the public in each aspect of the decision including the development of alternatives and the identification of the preferred solution

#### Involve

To work directly with the public throughout the process to ensure that public concerns and aspirations are consistently understood and considered

#### Consult

To obtain public feedback on analysis, alternatives and/or decisions

#### Inform

To provide the public with balanced and objective information to assist them in understanding the problems, alternatives, opportunities and/or solutions.

## Five steps on an arc of citizen engagement

From Place Based Health Commission Report<sup>8</sup>

Cheshire East is one of the pilot areas for the 'Delivering differently in Neighbourhoods' government programme<sup>9</sup>, which includes assessing how communities can become more engaged in service delivery and policy, and how this can influence priority and budget setting<sup>10</sup>.

# **Enhancing environmental assets**

Social cohesion and health and wellbeing can be enhanced through environmental factors such as green space, affordable good quality housing, tackling air pollution, improving shared spaces and promoting active travel, especially in areas of deprivation<sup>11</sup>.

Innovative approaches include the development of healthy new towns (including Halton Lea in Runcorn)<sup>12</sup>; community land trusts<sup>13</sup>; the '100 Resilient Cities' programme<sup>14</sup>; and dementia friendly communities<sup>15,16</sup>.



# **Economic approaches**

A thriving local economy, providing good local jobs for local people and local supply chains, is an important feature of community resilience<sup>13</sup>. Actions to promote resilience include:

- schemes to revitalise high street shopping areas;
- support for small businesses in poorer areas;
- purchasing policies that create local jobs;
- the provision of education, training and job opportunities for young people; and
- the promotion of responsible employment practices, enhancing health at work

13,17,18

When measuring economic prosperity, it is important to move beyond traditional approaches, to include a consideration of social factors such as equity and connectedness<sup>1</sup>, which can play an important part in the success of an economy.





# Measuring community resilience



Local authorities can work with other public services in their local area to develop an asset-based community development approach. This would involve mapping assets, to complement needs based assessments such as JSNAs (joint strategic needs assessment)<sup>3,19</sup>. Accurately identifying the assets and also vulnerabilities such as social isolation, helps estimate the capacity of a community to withstand shock and pinpoint where support should be targeted<sup>15</sup>. Communities should be involved in identifying appropriate outcomes and defining success<sup>20</sup>.

Various indicator sets and frameworks are of relevance to measuring community resilience. The WARM (Wellbeing and Resilience Measurement) tool has recently been developed and used by local authorities in benchmarking and to inform service configuration and investment in community capacity<sup>15,21</sup>.

WARM: Stages in Wellbeing and Resilience Measurement (Reproduced from Young Foundation<sup>21</sup>).

<b>&gt;&gt;&gt;</b>	2 Identify: Assets and vulnerabilities	
1 Measure: Current state in local area	Assets	Vulnerabilities
<ul><li>Buoyant local economy</li><li>Low crime</li><li>Effective public services</li></ul>	Enabling infrastructure	Impaired infrastructure and environment
<ul><li>Strong and stable families</li><li>Networks of friends</li><li>One to one services</li></ul>	Social capital	Dysfunctional networks and isolation
<ul><li>Income/wealth</li><li>Health</li><li>Education</li><li>Life satisfaction</li></ul>	Self-efficacy, resilience, self-regulation	Reduced or limited comparable areas
5 Act: Commission and reshape local delivery to reinforce assets, tackle vulnerabilities	4 Plan: Set targets and prioritise resources	3 Benchmark: Against compara- ble areas

# **Developing workforce skills**

There is a need for workforces in the public and voluntary sectors to acquire the skills relevant to promoting community resilience<sup>22</sup>. This would involve providing training in community centred health approaches<sup>23</sup>.

#### **Resources**







'Top tips for getting started in asset based working'<sup>24</sup>

This document can be used by organisations to inform their workforce on approaches to measuring community assets.



The Social Care Institute for Excellence (SCIE) and local voluntary service co-ordinating organisations

These organisations can play an important part in helping to develop the skills needed for community resilience approaches. For example, Liverpool CVS (LCVS) run training courses in 'recruiting volunteers'<sup>25</sup>.

### **Outcomes**

The wider impacts of approaches to building community resilience are difficult to measure and evidence is limited. However, the available evidence is broadly supportive of the potential of such approaches to achieve wider outcomes such as those identified in the diagram below:



# Recommendations

#### Making community development approaches mainstream

- 1. Support community development, asset-based approaches to become more mainstream and embedded in new settings, while ensuring they remain community-based and community-led
- Make use of existing local partnership arrangements, established social networks and local business consortiums to deliver interventions
- 3. Use flexible definitions of neighbourhoods or areas to suit the approach being used
- 4. All approaches should be underpinned by involving communities in planning and decision making processes

#### Supporting the voluntary sector

5. Support, protect and strengthen the voluntary sector, including the Councils for Voluntary Service, which have a vital role to play in developing community resilience

#### **Promoting social prescribing**

- Carry out a mapping exercise in each local authority area to identify existing social prescribing schemes, including models used and commissioning arrangements
- Develop a coordinated, joint integrated approach to the commissioning and evaluation of social prescribing, ensuring joint ownership / involvement from the NHS, council and voluntary sector
- 8. Ensure the voluntary sector is ready for the increase in referrals that is likely from the promotion of social prescribing schemes
- 9. Develop service level agreements between primary care and third sector organisations for social prescribing schemes addressing issues such as consultation times and audited outcome measures
- 10. Raise awareness amongst GPs and other health professionals of social prescribing schemes
- 11. Consider encouraging other professionals such as pharmacists, nurses and social workers to become involved in referring to schemes, not just GPs

#### **Developing environmental and economic approaches**

- 12. Promote greater coordination among local authorities and partnerships with public and private stakeholders to develop resilience strategies
- 13. Develop frameworks to inform thinking on how economies and environments can promote resilience, for example by measuring existing barriers to employment
- 14. Use these frameworks to ensure that opportunities for building community resilience through economic and environmental approaches are being maximised.
- 15. Specific action around the economy and environment is wide-ranging, but would include:
  - **a.** Developing partnership working between local businesses and other organisations, to encourage local supply chains and local jobs
  - b. Using proactive policies to ensure inclusive growth
  - c. Supporting employability schemes

# **Recommendations** (continued)

- d. Ensuring employers and other agencies work together to provide good quality job opportunities and meaningful career development prospects
- e. Improving landscaping, street lighting and local parks and playgrounds
- f. Providing good quality affordable housing, with consideration of innovative approaches
- 16. Further investigate the evidence for environmental and economic approaches to developing community resilience

#### Asset mapping and resilience measurement in local areas

- 17. Carry out asset mapping in each local authority as standard practice, for example to complement needs based assessments such as JSNAs (joint strategic needs assessment)
- 18. Involve communities in identifying appropriate outcomes and defining success

#### **Developing workforce skills**

- 19. Ensure that the workforce in the public and voluntary sectors acquire skills relevant to developing community resilience approaches
- 20. Take steps to ensure that the workforce reflects the diversity of the population it serves

#### **Measuring effectiveness**

21. Evaluation of resilience building approaches should be carried out over as long a term as possible, using appropriate, participative methods and considering wider outcomes

## **Case studies**

#### **Men in Sheds**

An innovative scheme for older people, including those at risk of social isolation or early stage dementia

Men in Sheds was started by Age UK Cheshire 2008. Since then it has expanded greatly, with around 1,000 Sheds now open across the UK. In Cheshire, there are four enormous Sheds, equivalent to industrial units, where older isolated men meet to undertake activities such as woodworking and metalwork.



#### **Dementia Friendly Communities**

Dementia friendly communities work to help overcome difficulties in using technology, getting appropriate service in shops, banks and post offices and in using transport, going on holiday and mantaining social contact and hobbies and ensure safe, accessible physical environments<sup>15,16,26</sup>

Dementia friendly transport in Halton. In February 2017, Halton Dementia Action Alliance (DAA) became a member of the Cheshire and Merseyside DAA Transport group, working with stakeholders to improve dementia awareness within the transport sector and improve experiences for people living with dementia and their carers.



#### **Best Start in Life - Child Friendly Environments**

Neighbourhood Action in Crewe. Regular neighbourhood meetings are held in some of the most deprived neighbourhoods, where local residents deliver community-led action plans. There is wide engagement, with regular Ward Walks in these neighbourhoods, where Residents, Officers, Partners and Members walk the area to look at issues and talk to other residents to find out their issues and encourage them to get involved

For example, "the Big Co-op Clean is a chance for members, customers and the community as a whole to come together to improve the local environment for the benefit of everyone – the activity has transformed the local play area"<sup>27</sup>



# **Impact Evaluation**

#### **Feedback**

Please can you spend 5 minutes completing this very brief survey (below) about the usefulness of the report.



# **CLICK HERE**



# References

- 1 GCPH (2014) Resilience for public health: supporting transformation in people and communities: Glasgow Centre for Population Health
- 2 Champs (2014) Social Prescribing Model for Cheshire and Merseyside: Cheshire and Merseyside Public Health Collaborative
- 3 King's Fund (2013) Strong communities, wellbeing and resilience. In 'Improving the public's health: A resource for local authorities'
- 4 SCIE (online) Befriending mentoring and peer support. Social Care Institute for Excellence website, accessed 5/6/18
- 5 Mind Waves (online) Positive news about mental wellbeing. Mind Waves website, last accessed 5/6/18
- 6 MHF (2016) Mental health and prevention: taking local action for better mental health. Policy report 2016: Mental Health Foundation
- 7 Wallerstein, N. (2006) What is the evidence on effectiveness of empowerment to improve health? Copenhagen: WHO Regional Office for Europe (Health Evidence Network report)
- 8 NLGN (2016) Get well soon. Re-imagining place-based health. The Place-Based Health Commission Report. London: New Local Government Network
- 9 DCLG (2014) Delivering Differently in Neighbourhoods. London: Department for Communities and Local Government
- 10 Cheshire East Council (2017) Connecting Communities Connected to Services Initial Outcomes of Delivering Differently in Macclesfield.

  (Note there was an error in the cabinet paper which was headed 2016 instead of 2017)
- 11 SDU (2014) Healthy, sustainable and resilient communities. NHS Sustainable Development Unit
- 12 NHS England (online) Healthy New Towns
- 13 Wilding, N. (2011) Exploring community resilience: Carnegie UK Trust and Fiery Spirits Community of Practice
- 14 Lipper, B. (2016) How to Develop a Resilience Strategy, 100 Resilient Cities. Rockefeller Foundation
- 15 Foot, J. (2012) What makes us healthy? An asset approach in practice: evidence, action, evaluation
- 16 Miller, C. and Wilton, C. (2014) Developing the power of strong, inclusiove communities: Think Local Act Personal
- 17 CLAHRC (2016) Supporting resilience in disadvantaged neighbourhoods: CLAHRC NWC Collaboration for Leadership in Applied Health Research and Care North West Coast. Lancaster University. NIHR National Institute for Health Research
- 18 PHE (2014) Local action on health inequalities: Reducing the number of young people not in employment, education or training (NEET): Public Health England
- 19 SCIE (2017) Asset-based places: A model for development. Future of Care Number 4: Social Care Institute for Excellence
- 20 South, J. and Phillips, G. (2014) Evaluating community engagement as part of the public health system. J Epidemiol Community Health, 68(7), pp. 692-696
- 21 Young Foundation (2010) Taking the temperature of local communities: The Wellbeing and Resilience Measure (WARM)
- 22 PHE (2016) Fit for the Future Public Health People: A review of the public health workforce. Public Health England
- 23 GCPH (2014) Concepts Series 12 Resilience for public health: Glasgow Centre for Population Health
- 24 Champs (2012) Top tips for getting started in asset based working: Cheshire and Merseyside Public Health Collaborative
- 25 LCVS (online) Training, Liverpool Charities and Voluntary Services
- 26 DAA (online) Working to become dementia friendly, Dementia Action Alliance
- 27 Cheshire East Council (2016) Community JSNA Technology Consultation Phase 2: from personal correspondence with Louise Daniels, CVS Cheshire East, 18/4/17

# **Further information**

#### Compiled by:

Janet Ubido and Cath Lewis, Champs Researchers, Public Health Institute, Liverpool John Moores University (LJMU) Hannah Timpson, Head of Research Engagement and Impact, Public Health Institute, LJMU

Contact email: j.ubido@ljmu.ac.uk

#### **About the Champs Intelligence & Evidence Service**

This work was conducted under the remit of the Champs Intelligence & Evidence Service. Commissioned by the Cheshire and Merseyside Directors of Public Health, the service aims to provide high quality research in response to collaborative priorities across the nine local authority public health teams in Cheshire and Merseyside.

Matthew Ashton, Joint Director of Public Health, Sefton, leads the Public Health Intelligence Network with support from Sharon McAteer (Halton) and the wider network. Their role in the Intelligence & Evidence Service involves setting the work programme, providing strategic direction and facilitating collaborative links between the Champs Public Health Collaborative, the Public Health Institute, LJMU and the wider public health community. They also contribute to editing and final approval of reports.

#### **Acknowledgements**

We would like to thank everyone who provided comments on various drafts of the report, especially Paula Atherton, Liverpool CVS and all those who contributed information for the case studies.

In addition, we would like to thank the following people at the Public Health Institute, Liverpool John Moores University: Lisa Jones for editing the summary; Karina Kinsella, Rebecca Harrison and Selina Wallis for proof reading this report; and Laura Heeks for the design.

**Full report** 

**Click here** 

**Summary report** 

**Click here** 

# LJMU reports commissioned by Champs

Evaluation of the Youth Connect 5 Programme across Cheshire and Merseyside - June 2018

Evaluation of the Youth Connect 5 Programme across Cheshire and Merseyside. Executive Summary - June 2018

'What is evidence based health and wellbeing?' Workshop report - N/A

Developing Resilient Communities: Identification of Approaches and Evidence for their Effectiveness. Summary report - February 2018

Developing Resilient Communities: Identification of Approaches and Evidence for their Effectiveness. Full report - February 2018

Case for Change: Self-harm in Children and Young People – January 2018

Cheshire and Merseyside Intelligence and Evidence Service: A Review of Impact 2015/16 - N/A

Worklessness in Cheshire and Warrington - June 2017

Worklessness in the Liverpool City Region - June 2017

The Case for Change: Evidence based interventions for public health and the health and social care system across Cheshire and Warrington - June 2017

Children and Young People Health and Wellbeing Profile: Liverpool City Region - April 2017

Children and Young People Health and Wellbeing Profile: Cheshire and Warrington - April 2017

The Case for Change: Evidence based interventions for public health and the health and social care system across Liverpool City Region – June 2016

Maternity Health Needs Assessment for Cheshire, Merseyside and West Lancashire - January 2016

Children and Young People's Mental Health and Wellbeing: Interim Report - December 2015

To access these reports please click here

