

Key things we learnt during the Birmingham Changing Futures Together evaluation in 2021



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The logo for Birmingham Changing Futures Together, which includes a stylized footprint graphic in blue and green colors.

Remote delivery models enabled services to remain accessible during the pandemic. However, the research has continually showed the barriers of services relying on digital approaches when working with people with experience of multiple disadvantage.

“If you’re homeless for nine years, where are you going to find a mobile phone?! How are you going to learn how to use the internet? You need help with everything”

(Local resident)

Remote Delivery

The pandemic resulted in services having to quickly implement remote delivery models to support people in need. This included introducing online forums and providing one-to-one support by telephone and/or video call.

Research participants were grateful that support was able to continue in some form, as this was important for their wellbeing and reducing social isolation. Some also learnt new IT-related skills, for example sending emails and using Zoom software, and remote support options were beneficial for those who had previously experienced barriers to accessing services, such as travel and financial concerns.

However, across all our research projects digital barriers were highlighted. Participants explained that not having access to a phone or laptop/tablet/computer prevented individuals with experience of multiple disadvantage from finding out useful information about local activity and support options.

This proved particularly problematic when services were relying on telephone or online referrals and when organisations chose to primarily advertise opportunities on their website and social media: and raised concerns that this would further exclude those that were under-represented in existing provision. This also applied to the Covid-19 vaccine as not having digital access prevented people from finding out that they were eligible, and how to arrange an appointment.

Lastly, involving experts by experience in service design and delivery, through [Every Step of the Way](#) became more difficult when services moved to remote delivery models. This was because there were delays when organisations had to find secure ways to share information with experts and get experts access to technology to be able to continue partnership working.

Many factors influencing decisions about the Covid-19 vaccine amongst people with experience of multiple disadvantage living in Birmingham were similar to views and experiences amongst the general population.

“I don’t think it’s been tested for long enough. I mean, I’ve done some research again, on vaccines and then it seems to come out relatively quickly and I don’t trust it to be honest.”

(Research participant)

Vaccine Hesitancy

One strand of [research](#) sought to explore whether there was Covid-19 vaccine hesitancy amongst people with lived experience of multiple disadvantage, and if so, to understand how widespread this problem was, and the reasons behind it.

The research found that the perception that there was a unique issue around vaccine uptake amongst people with experience of multiple disadvantage was to an extent false. There were unique circumstances surrounding people with previous or current experience of multiple disadvantage, which impacted uptake, included -

- fear of needles linked to previous drug use
- having multiple needs that took priority over getting vaccinated
- struggling to remember to arrange and attend appointments

However, many factors influencing decisions about the vaccine were similar to those affecting the general population, as identified in our review of the literature, such as concerns about adverse side effects. Similarly, the information people with experience of multiple disadvantage wanted to know about the Covid-19 vaccine was fairly standard. For example, whether it would protect against new variants. This has highlighted the risk of ‘othering’ people with multiple disadvantage. As Johnson et al. (2004) explain, seeing people as ‘different to the mainstream’ can reinforce or produce hierarchies and discrimination.

Small community organisations have a key role to play in supporting people with experience of multiple disadvantage in Birmingham, they need appropriate support and resource to maximise their potential.

“I think with a smaller organisation there’s consistency, they know who’s going to be there...you know their story. Maybe not always but you know them. There’s that trust and that kind of relationship...”

(Staff member)

Under-represented Groups

Our [research](#) into who was under-represented on the BCFT programme, why, and how this can be addressed in future provision highlighted the importance of small community organisations in supporting those who may not engage with more mainstream provision.

Such organisations were accessible as they -

- were based within local communities (as opposed to the city centre)
- were considered to have less staff turnover than larger organisations (which helped with building positive relationships)
- were described as having staff that ‘go above and beyond’ to help

Furthermore, having staff and other clients who spoke multiple languages helped to engage people who did not have English as their first language, and when provision was more generic this removed fears around being judged if your neighbours saw you walking through the door of, for example, a mental health charity.

Carefully considered engagement strategies and continuous staff training is required for the range of diverse communities in Birmingham to feel able to engage in services targeted at people with experience of multiple disadvantage.

“You have to actively go out and promote that service and explain it to them. And even then, you might not get a chance for them to trust you, but at least you have taken the first positive step.”

(Staff member)

Outreach

The [research](#) into how future multiple disadvantage provision in Birmingham can ensure it engages under-represented groups also demonstrated the benefits of targeted outreach approaches and using a range of mediums to reach Birmingham’s diverse communities.

Outreach approaches were felt to help people know that there were services that proactively wanted to help them, which helped to build trust. It also meant that individuals could receive support and information in familiar locations.

Capacity Building

However, commissioning processes were considered to regularly favour large national charities at the expense of smaller community organisations, and such organisations often lacked the capacity to apply for funding and join relevant networks. Therefore, it will be important that existing capacity building initiatives led by Birmingham Voluntary Sector Council and West Midlands Combined Authority continue or are built on, so that those organisations with existing good relationships with under-represented groups can be involved in future multiple disadvantage programmes in Birmingham.

It was emphasised that organisations/programmes should have planned approaches to outreach, that builds on the expertise of local organisations and community leaders so that this is able to reach the intended target groups. Furthermore, linked to the digital barriers – conversations with local residents showed the benefits of organisations using different ways to raise awareness of their services.

Preferences ranged from leaflets, to conversations, to videos.

Staff Training

Other good practice highlighted was ongoing staff training so that staff interacting with people experiencing multiple disadvantage were aware of how different characteristics impact individual's experiences of services (such as ethnicity, sexuality, cultural history) and could support them appropriately.

Examples of training currently being delivered in Birmingham includes

- anti-racism
- disability awareness
- autism awareness
- working with trans people

There has also been partnership working with Women's Aid and Refugee and Migrant Centre to enable staff to support migrant and refugee women affected by domestic violence.

Lived experience involvement in service design and delivery and/or systems change continues to be important, for those with lived experience and the organisations that they work with.

“To have some people that can see somebody is getting a little bit anxious or got a few issues, and just to talk to them, you know like a buddy, like a lived experience kind of person, somebody that can recognise something...”

(Local resident)

Every Step of the Way

Our [report](#) on Every Step of the Way demonstrated the value of lived experience involvement for organisations and individuals themselves. This included that involvement opportunities enabled professional development, gave experts structure and routine and made them feel empowered and more confident.

Organisations who had worked with experts explained how such opportunities had improved organisational understanding of people experiencing multiple disadvantage and therefore making provision more suitable. There have also been examples of experts by experience progressing to other volunteer and paid work opportunities in the city and sharing their new skills and knowledge more widely.

The Value of Lived Experience

Additionally, in other research lived experience involvement was often suggested to overcome some of the barriers identified.

For example, in the vaccine uptake research someone who had a negative experience of their appointment suggested that further support available at vaccine centres for people with additional needs and/or people who were finding the experience stressful, including from people with lived experience of multiple disadvantage.

Similarly, in the under-represented groups [research](#) we recommended co-designing new programmes with people from the communities being targeted and the organisations that are currently working with them so that provision builds on existing good practice and meets the needs of the individuals it seeks to serve.

Where a programme is running multiple workstreams over many years it is important for these to be distinguishable, and for the added value to be frequently and clearly communicated amongst relevant stakeholders.

“Maybe even do half an hour briefing session or something like that reminding us what they’re here for and what they’re doing at the moment.”

(BCFT Core Group member)

Clear & distinguishable work streams

Birmingham Changing Futures Together has been running since 2014. During this time there has been lots of changes, including the introduction of new workstreams and staff turnover. Research in 2021 showed that there was some confusion amongst programme partners and wider stakeholders about the different programme workstreams involved and what made them unique.

This impacted engagement because organisations did not always understand how they could be involved or contribute to specific workstreams. Therefore, future programmes should ensure that there is a clear communications strategy which includes clear descriptions for different workstreams that are consistently used, alongside case studies which provide tangible examples and demonstrate added value that this work has.

Trust has been an underlying theme of the evaluation. It was key in decisions about the Covid-19 vaccines, decisions about whether to engage in services and views and experiences of services.

“When we see clients or any service they go to, the very first thing they say, “my friend said that’s what you did for him or her”. That is extremely, extremely common. So, they tend to follow each other footsteps quite a bit when it comes to friends and family.” (Staff member)

The Importance of Trust

Our [research](#) into Covid-19 vaccine uptake found that distrust played a key role in creating vaccine hesitancy, and people with experience of multiple disadvantage could clearly distinguish between sources of information about the vaccine that they trusted and those that they did not.

Views and experiences of services were also regularly shaped by relationships that respondents had with support staff. If they did not trust staff, they would be less likely to share their concerns and support needs and listen to suggestions about further support options that could be beneficial.

Similarly, word of mouth was key in people engaging with services, and many people we spoke to explained the importance of finding out about services from family members and/or friends whose opinions and advice they trusted.

BCFT and Revolving Doors would like to thank all those involved in the research during 2021. We hope the learning helps to progress the support of those facing multiple disadvantage.

If you'd like to know more about the BCFT programme, please visit our [website](#).

