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This is a summary of the evidence on neighbourhood-based Asset Based Community Development (ABCD). It includes information from scientific journals and evaluation reports.

The evidence review was done for Leeds City Council as part of Leeds Beckett University's evaluation of the ABCD programme in the city.

What is ABCD?

The review found that ABCD is a way of community building that recognises strengths in communities, uses these, strengthens connections between people and builds collective action to improve community life¹. Key principles² are:

- Working with people, where community members have an active role
- Helping individuals and communities find and focus on their **strengths** and supporting them to make long-term improvements in their lives
- Supporting people to make changes for the better by building on skills (resilience, knowledge and self-esteem) and developing supportive networks and friendships
- Shifting control of actions from the state to individuals and communities.

ABCD is the opposite of a 'deficit' way of working that focuses on needs and problems and doesn't seek to understand all the positive factors in communities that can support people to live meaningful, independent lives.

How was the review done?

Researchers looked for studies that:

- Focused on neighbourhood-based ABCD
- Took place in Western countries (UK, USA, Canada, Australia etc.) and were written in English
- Had a way of measuring any changes that came about from ABCD
- Were either academic studies published in scientific journals or reports from ABCD projects
- Were published between 2015 and 2019 (a previous review covered publications from before 2015).

We found 22 publications that fitted the above criteria.

Thirteen evaluated an ABCD programme; 11 in the UK ,1 in New Zealand and 1 in Australia

Twenty were qualitative studies (descriptive research using words or pictures) and two were quantitative (research using information about quantities, and therefore numbers). Four publications were reviews of asset-based approaches.



The case for and against ABCD

It is thought ABCD can improve health by strengthening networks and by communities having more control of the factors influencing their health. It is known that the quality of community life and social factors promote better health and wellbeing - one study found people who took part in community groups or organisations had a better health-related quality of life³.

A number of authors criticise the lack of good quality ABCD evaluations saying that more evidence is needed to support practice and learn about changes that come from the approach. Other issues highlighted in the review are that ABCD doesn't deal with the reasons for communities becoming deprived and it could be used to reduce services.

Running an ABCD project

Because every community is different, ABCD looks different in different places – there is no one way of doing it. It is a gradual process that takes a long time. Common aspects include: talking to community members, strengthening social connections, building trusted relationships, connecting with political powers and finding collective goals.

Asset mapping is an important part of ABCD. This process identifies the assets in the community (see below) and can result in a map or directory. Different ways of involving community members and presenting the information are reported. Asset mapping studies say that it needs to be an on-going process, involve the community and have an agreed purpose (how it is going to be used). It takes time and commitment to do it well.

What are assets?

Assets are the strengths or positives in a community or organisation. They can be physical (e.g. buildings) or not (e.g. friendship groups). Recent reviews put assets into three types:

- Individual level those relating to a person e.g. resilience, motivation, commitment
- Community level assets that improve community life e.g. a park, a business, community spirit
- Organisation level e.g. housing, democracy, employment

Community engagement and involvement

There is some evidence⁴⁵ that actively involving people from groups suffering disadvantage in the planning and design of the intervention is important. Seeking to understand their culture and priorities is also critical. UK research on Community Builder roles and Connectors/volunteers is available. Evidence usually comes from professionals, rather than the communities themselves.

What helps and what hinders?

The values of an organisation can encourage asset-based working or limit it. The review found that changing the way professionals think is important – a change from focusing on risk, rules and systems towards trusting communities more and letting them make their own decisions. Professionals need to share power with communities so they can take control. It helps when organisations commit to investing a lot of time and making sure projects are 'local'.

Evaluation

One reason for thoroughly evaluating the Leeds programme (see separate summary document) is that there is a lack of existing evidence on neighbourhood-based ABCD. This is partly because it is difficult to measure and understand the change that comes from community-based action. Evaluations are often too short-term. Plus, in ABCD there is an overlap between process (what is done) and outcomes (changes that occur).

Some studies give examples of practical ways to evaluate ABCD by working with people in the community e.g. Community Based Participatory Research or Action Research plus working with community members to agree relevant 'indicators' of success. Some more recent projects use quantitative measures, for example, participant surveys or analysing health and social data by area.

ABCD evaluations include:

- Ageing Well Torbay https://ageingwelltorbay.com/legacy/
- Communities in Charge of Alcohol http://hub.salford.ac.uk/communities-in-charge-of-alcohol/
- Animating Assets https://www.gcph.co.uk/resilience_and_empowerment/asset_based_approaches/animating_assets Plus the Senior Safe & Social Programme in Essex and Come Eat Together in North East England. See the full report for a complete list.



What can ABCD achieve?

Evidence of changes that have arisen from a neighbourhood-based ABCD project are reported in the review.

Changes for individuals. There is evidence that being part of ABCD leads to people having more confidence and self-esteem and improved social connections (attending more activities). It also helps people feel less isolated and have more understanding for others.

Changes for communities. ABCD leads to people talking more to their neighbours and friendships forming between different groups of people. Social networks become stronger and are less likely to leave people out. Feeling part of the community, increased pride in their area and feeling more hopeful were outcomes seen in communities who are often excluded in society. Connections were formed by working together for positive change.

Changes in community involvement. There is some evidence of communities coming together to change things, increasing the amount of local activities and doing more volunteering. Increased empathy and taking part in community life can lead to people becoming more able and more active as citizens – trying to change things for the better. There is currently a lack of evidence about communities speaking up for themselves and having more influence in their area.

Changes in organisations. There is little evidence of change in organisations though some have stronger partnership working because of ABCD and a better understanding of the communities they work with and the need to involve them.

For more information contact:

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References to full reports and summaries:

- Full Evaluation Report http://eprints.leedsbeckett.ac.uk/id/eprint/7640/
- Full Evidence Report http://eprints.leedsbeckett.ac.uk/id/eprint/7641/
- Evaluation Summary http://eprints.leedsbeckett.ac.uk/id/eprint/7763/
- Evidence Summary http://eprints.leedsbeckett.ac.uk/id/eprint/7764/
- Covid-19 Response Summary http://eprints.leedsbeckett.ac.uk/id/eprint/7765/
- SROI Summary http://eprints.leedsbeckett.ac.uk/id/eprint/7766/

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