

commonhealth

Qualitative Impact Brief

1. Executive Summary

i *This report outlines the key impacts of the CommonHealth Project, a major five-year programme of research (2014-2019) undertaken in Scotland by Glasgow Caledonian University.*

An overview is presented of the impacts that were generated from the project, according to experts from across different areas of social enterprise and public health in Scotland. Six qualitative semi-structured interviews were conducted to provide depth and context to the quantitative impacts already documented from the project. Findings of impact from the interviews include increasing awareness and cooperation within the social enterprise and public health sphere, enhancing cross-policy awareness, increased networking, and a legacy of materials that are continuing to be used as a source of reference and evidence.

2. Introduction

i *The CommonHealth project was one of the world's largest ever pieces of research carried out with and for social enterprises. In January 2014, funding from the Medical Research Council (MRC) and the Economic & Social Research Council was granted to develop methods for evidencing social enterprise as a public health intervention.*

The project consisted of eight distinct pieces of research, each focussing on different aspects of the social enterprise sector, as well as a project focussed on bringing the research findings and learnings together for further dissemination. The research team built in impact considerations from the very beginning of the project. Indeed, a significant portion of the research was concerned with the organisation and delivery of Knowledge Exchange Forums (KEFs) over the course of the entire project. The KEFs provided space for dissemination of results, networking, but importantly it also supported the interaction between academics, social enterprises, and policy makers.

This report highlights the key impacts of CommonHealth over the duration of the project (2014-2019). First, as a reference point, we explore the state of the social enterprise landscape prior to CommonHealth. We then explore areas of impact including policy, lobbying, networking, grant proposals, and delivery change before looking to the future and understanding the legacy of CommonHealth.

3. Methodology

- i** • *Six qualitative semi-structured interviews from leaders within Scottish social enterprise, policy makers, public health professionals, and from those working in social enterprises themselves.*
- *Participants were sampled to represent a cross section of areas the research focusses on.*
- *Each participant was interviewed online using video calling software.*
- *Subsequent transcripts were coded thematically for areas of research impact. Areas of commonality and difference emerged which highlighted key areas of impact for the project across different sectors.*

4. Findings

- i** • *Contributed towards the development of evidence for the social enterprise sector*
- *Helped to outline for the public health sector the potential positive health effects of social enterprise.*
- *Enhanced cross-policy awareness*
- *Provided networking opportunities and momentum building*
- *Provides a source of reference material and evidentiary support for ongoing social enterprise and public health concerns*

Social enterprise and public health landscape

The CommonHealth project was devised during a time when social enterprises were just becoming aware of their own contributions not only to their stated social aims, but also to their contribution to public health through social issues which were not necessarily within their stated aims. For example, a social enterprise stating that they provide opportunities for employment to those facing disadvantage in the labour market, because of their activities they are also contributing to the betterment of local health and wellbeing as a result of increased employment. There was a lack, however, of being able to evidence that this was the case. As stated by the now Director of Social Enterprise Network Scotland (formerly Chief Executive of Social Firms Scotland):

...[the] social enterprise community ... for a number of years [had] been grappling with a narrative based on anecdotal evidence that our sector was making a valuable contribution to health and well-being outcomes - no matter the legal form or primary

mission of the enterprise. In essence, social enterprise was under researched and we didn't have a robust evidence base of the real impact of social enterprise activity and its cumulative impact as a force for good ... we needed a better evidence base, which the CommonHealth a programme gave us ... we needed more tools in the box."

(Former Chief Executive, Social Firms Scotland)

From the public health perspective, there was an increasing awareness that tackling some of Scotland's 'wicked' public health problems required a shift thinking. While interventions such as banning smoking in public places and introducing a price per unit of alcohol are part of that approach, there was also an understanding that treating some of these issues at their roots was necessary. The roots of some of these issues stem back to communities, and the health and wellbeing of individuals within those communities. The Chief Social Policy Adviser for the Scottish Government observed that:

"there seems to be an emerging consensus in Scotland that features [of a new wave in public health] would include a focus on community action, the creation of a culture of health, and action on the fundamental determinants of health inequalities ... the CommonHealth programme has stepped into that ... gap and helped us to understand that social enterprise could be a major player in the [new] wave of public health. **(Chief Social Policy Advisor, Scottish Government)**

Enhancing cross policy awareness

The CommonHealth project sought to evidence the connection between social enterprise and public health, then communicate the findings to those implementing policy at the highest level of Government. The former Social Enterprise Policy Manager at the Scottish Government (now Senior Policy Officer in the Regional Economic Development Division) explained how the research had impacted upon her thinking during the development of the 10-year social enterprise strategy in Scotland:

"It's definitely helped me overcome the typical kind of siloed mentality as a civil servant because on the face of it, economy and health, look like they're quite far apart but actually they're completely interwoven - I think that changes how you do policy full stop ... The research definitely fed into the strategy and how we developed the strategy and the need to support research in social enterprise." **(Former Social Enterprise Policy Manager, Scottish Government)**

Not only did the research impact upon her thinking during the period of the project, but this change in mindset has had a lasting effect on the way she works currently:

“One of the things it's helped me with is in my current post - working on community wealth building - we've developed pretty good links with colleagues in public health because we're seeing economic development as a public health intervention and understanding and pursuing the links there.” **(Former Social Enterprise Policy Manager, Scottish Government)**

In the field of public health, there were similar impacts from the project in being able to provide evidence for those contributing to policy changes at a local and national level, as the Acting Associate Director of the Glasgow Centre for Population Health explains, drawing on a local example:

“I think that having the back-up of CommonHealth is really useful for giving people confidence in that there can be a different economic model, because I think the council was initially quite conservative in terms of what the economic growth is looking like...” **(Acting Associate Director at Glasgow Centre for Population Health)**

At the national level, the CommonHealth project provided evidence for the effects that social enterprises could have on health and wellbeing, which could then be fed into the consideration of a wider economic and strategic approach for the country.

“None of us (I assume) imagines that evidence alone will drive decisions, but we need much more evidence of the contributions that particular approaches make to a range of outcomes. Again, CommonHealth has helped us greatly here.” **(Chief Social Policy Advisor, Scottish Government)**

Recognition of the evidence at a local and national level was achieved through the rigour of the research, the scale of the project, and the uniqueness of the topic. These points were reflected upon by the Deputy Director of Equalities, Human Rights, and the Third Sector at the Scottish Government as well as by the Director of Social Enterprise Network Scotland:

“For me, the big contribution that it made to my thinking was, I think just bringing home the scale and importance of that kind of work ... As far as our both our strategic approach, and then our future working. [CommonHealth] seemed to me to appear to be of a scale that was different from anything else that was happening in Scotland.” **(Former Deputy Director - Equalities and Third Sector Division)**

“This programme has been policy informing, and policy influencing ... nobody else was doing anything in relation to community based social enterprise” **(Former Chief Executive, Social Firms Scotland)**

Furthermore, strengthening the links between academia, the Third Sector, and the Government was welcomed by the Scottish Government, and was encouraged at policy advisory meetings through the medium of the CommonHealth Briefing Papers series:

“the Government were very keen that the sector had stronger links with the academic world ... So it is bringing evidence from there back to support my message and through every time there was a new, different [briefing] paper, I would copy the link [to the online briefing papers into my policy advisory submissions]” **(Former Chief Executive, Social Firms Scotland)**

Networking

The dissemination and communication of findings was implemented through the briefing papers series, but also through a series of KEFs which promoted the interaction of policy advisors, social enterprises, public health professionals, and academics. The KEFs provided opportunities for networking throughout the period of the project, but also helped the research team to analyse their findings on an ongoing basis as they would present project updates at each KEF to those with expertise in a variety of areas. These forums were an innovative means of bringing the social enterprise sector in Scotland together, and were received well by social enterprise policy advisors and public health professionals alike.

“[the KEFs were] really practical workshops which were really good opportunities ... for networking, but also for understanding actual social enterprises in-depth and what they did and what the impacts of that were. I think one of the things that the CommonHealth project did was it exposed me to a range of different social enterprises in-depth but also it really kind of helped to see the in-direct impacts” **(Former Social Enterprise Policy Manager, Scottish Government)**

On benefits of knowledge exchange forums - "being aware of the evidence, seeing what's coming through, seeing that critical mass of interest developing, seeing other people there that are interested, meeting new people, so the whole networking thing is important but it's important to know who your allies are in terms of who else supports these types of approaches, and I think it's important to have that visual, you can see a

room full of people committed to...it creates a sense of movement I think, in terms of social movement." **(Acting Associate Director at Glasgow Centre for Population Health)**

CommonHealth legacy

The CommonHealth project has already impacted upon several different areas, as evidenced above. Yet, for a project of this scale, it is important to explore the potential for a legacy of impact enduring beyond the length of the project. While it is clear that CommonHealth is able to impact upon the stated aims of the project:

"The evidence from CommonHealth will help us to build a more robust business case for new social models of health where we will hopefully start to see a real shift towards prevention to deal with enduring health inequalities." **(Former Chief Executive, Social Firms Scotland)**

"For me, the CommonHealth research is definitely something that I would go back to now in the context of what I'm doing at the moment" **(Former Social Enterprise Policy Manager, Scottish Government)**

It is also important to consider how the findings from CommonHealth can be repackaged to help address some of the issues regarding communities, public health, and wellbeing because of the COVID-19 pandemic. With a diverse coalition of civil society organisations calling on the Scottish Government to take the opportunity provided by the crises to 'build back better', there is an opportunity for the evidence from CommonHealth to be included in this approach. There are already programmes being pursued by the Government such as community wealth building and seeking opportunities for ecological sustainability because of the pandemic and resulting economic crisis. Where the CommonHealth findings can be of use is in presenting how social enterprises can fit into the puzzle of re-building an economy with an increased focus on wellbeing, localism, sustainability, and equality at its core. These sentiments were echoed by leaders across social enterprise, public health, and policy.

"CommonHealth is contributing to the Commonwealth, if you like, and to the common understanding of by doing things differently, I just think it's a perfect time ... COVID has meant that ... maybe it's time for being proactive with some of the public policy people, both in local and national government" **(Former Deputy Director - Equalities and Third Sector Division)**

On community responses to the COVID-19 pandemic - "It's like CommonHealth in practice. Localism in action, [the pandemic and 'building back better'] really is almost like shining a light on what CommonHealth was trying to do. And for me, that means it's really aligned. We've been trying now to articulate back to the government, very often, not just the challenges of the pandemic, in relation to communities and the third sector inherent in those communities. But also to make sure that the legacy of the good stuff that's happened in relation to the agility of the sector to help in any way they can to pivot and business in a completely different direction." (Former Chief Executive, Social Firms Scotland)

5. Conclusion

With social enterprises being deprived of the evidence they needed to be able to substantiate their claims of impact and drive funding applications, and with the country facing multiple health challenges, the CommonHealth project has provided a timely and vital resource. Through the development of evidence across different areas of Scotland, the project has provided rigorous evidence for use by social enterprises, third sector organisations, public health bodies, and the Scottish Government alike.

Making the case for social enterprise as a health and wellbeing intervention has enhanced cross-policy awareness which has made its way into policy action on the ground through aspects such as community wealth building in North Ayrshire. Furthermore, the networking and knowledge exchange opportunities have helped to drive a movement in Scotland towards understanding the value of social enterprises and their role as a public health intervention.