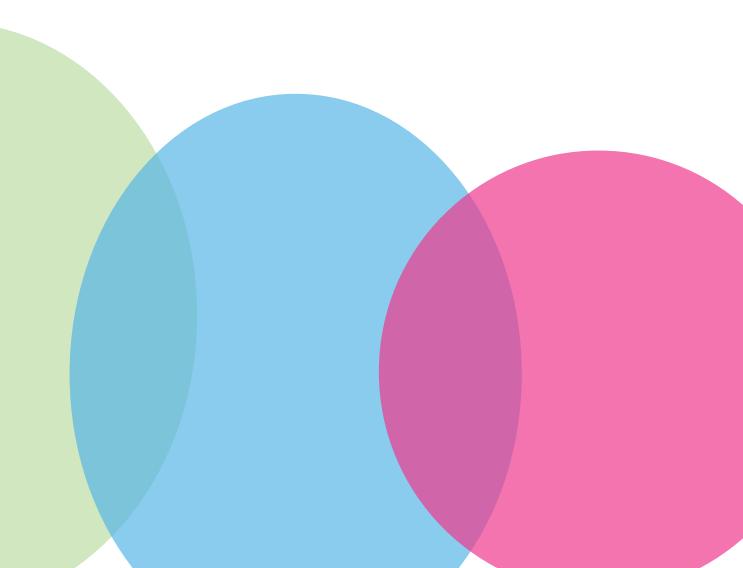


Children's Neighbourhoods Scotland Evaluation Strategy

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This report is published by Children's Neighbourhoods Scotland. Children's Neighbourhoods Scotland (CNS) is a distinctive approach to improving outcomes for all children and young people in neighbourhoods with high levels of poverty. The approach has the empowerment of children, young people and communities at its core. CNS is working to join up efforts and services within a locality to reduce poverty, increase participation and capacity within communities, and support improvements in the poor childhood outcomes associated with disadvantaged settings.

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Executive Summary

CNS Background

Children's Neighbourhoods Scotland (CNS) is a distinctive approach to improving outcomes for all children and young people in neighbourhoods with high levels of poverty. The approach is neighbourhood-based and has the empowerment of children, young people and communities at its core. CNS uses a collective impact approach and is focused on working with local people and organisations in the communities in which they live. CNS is working to support efforts and services within a number of localities across Scotland to reduce poverty, increase participation and capacity within communities, and support improvements in the poor childhood outcomes associated with disadvantaged settings. A distinctive feature of CNS is that research and evaluation is embedded within the programme. The research and evaluation team will draw insights from the CNS programme for policymakers and practitioners and contribute to the academic knowledge base in the fields of public administration, collaborative governance and capabilities.

Purpose and approach

The evaluation approach is both participatory and evaluative meaning that participants will be supported to develop their own research and to use evidence to support their activities. At the same our purpose is to evaluate how these activities work in practice and achieve outcomes. The aim of the evaluation is to assess whether – and how - CNS is making a difference. The evaluation will explore how and in what ways the Children's Neighbourhood model of working supports the ability for children and young people to be more influential in local policy decisions across six local sites and improves collaboration across local agencies including public services and the third sector.

The evaluation of CNS involves a programme logic and theory, anticipated pathways and outcomes, and applies a mixed method, realist-informed approach to capture important process learning and short- to medium-term evidence of impact on policy decisions and solutions at a number of system levels. This realist-informed approach enables a deeper understanding of how place based programmes and activities are designed and delivered in practice with a focus on the contexts and mechanisms that are key to achieving the intended outcomes. This approach should provide insights into the ways people actually think and act

and the types of knowledge, skills, and practices that are key to designing and delivering similar place-based approaches.

Research themes and concepts

The evaluation draws on the capabilities approach. The Capabilities Approach (CA) is concerned with the task of addressing poverty through the improvement of quality of life (Sen 2009). Capabilities are the freedoms and opportunities that a person actually has in practice to achieve their goals. CNS researchers will facilitate a process of dialogue and deliberation through which children and young people (C&YP) identify their aspirations and capabilities goals. This means that children, young people, and local stakeholders develop the goals of CNS at a local level. The approach will identify the support needed from local organisations and agencies, as well as barriers that are beyond the scope of the CNS. Working alongside CNS local coordinators and stakeholders, researchers will support the coordinators and programme team to develop projects and activities that have the potential to increase the agency and influence of C&YP and improve collaboration across local agencies and organisations. The Capabilities Approach will be used to examine the changes that occur as children and young people expand their agency and gain increased confidence to voice their opinions and influence decisions, and to make policy recommendations.

In addition, the evaluation will examine collaboration between local services, organisations and agencies. Despite a long history of local partnership working in Scotland, the results of formal partnership working have been at best mixed. CNS researchers will examine – the rationality of collaboration - when it makes sense to collaborate and how this works (or doesn't work) in practice. In particular, how do front-line service providers navigate through the complexity and messiness of neighbourhood problems? How do they develop a sense of interdependence and cooperation in pursuit of better outcomes for children and young-people?

This strategy covers the work of the research and evaluation team from September 2019 - March 2022 (within the timescales of the grant from the Scottish Government). The set-up of the six sites will be phased. There will be two further sites set up in 2019 and the final three in 2020.

The CNS evaluation activity is organised into four workstreams, each with a distinct set of research questions and methods.

1. Neighbourhood context

This workstream will seek to establish a baseline understanding of each neighbourhood context, by synthesising existing local and national evidence and drawing on the context knowledge and expertise of local stakeholders. As such this workstream will also contribute to establishing and developing relationships with key stakeholders in the local area. The following research questions (RQ) will be addressed:

RQ1.1: Which contextual dimensions and domains hinder or facilitate the implementation or subsequent impact of CNS?

- Which aspects of local context and opportunities offer the greatest potential for children and young people to participate and have their voices heard in local decision-making?
- Which aspects of context support or hinder collaborative working in support of children and young people?

RQ1.2: How do different sources of evidence and knowledge inform us about the context of CNS areas?

RQ1.3: In what ways can research and evidence be used to strengthen the agency and voice of children and young people?

This workstream will use a mixed qualitative and quantitative methods approach to gain insight into the 'different layers of social reality' in which CNS will be operating. The research methods that will be used to address these questions include desk-based research to synthesise existing evidence from available datasets, and qualitative work with stakeholders based on a sample of semi-structured interviews and workshops.

2. Capabilities approach

The Capabilities Approach will establish a framework of goals set by children and young people in each neighbourhood. This will form the basis of activities supported through the CNS programe team, as well as a means of evaluating progress. The key research questions are:

RQ2.1: What are the capabilities goals and functioning indicators of wellbeing for children and young people in CNS neighbourhoods?

RQ2.2: What are the key conversion factors and mechanisms which enable or prevent the capabilities goals of children and young people from being achieved?

RQ2.3: What are the key conversion factors and mechanisms which enable or prevent the voices of children and young people from being expressed, heard and acted on?

The capabilities framework will be developed through local workshops with schools and youth providers, and co-researcher questionnaires developed and conducted by children and young people themselves. Alongside the development of the framework, the capabilities approach will explore the processes of critical pedagogy associated with a community development approach to agency and empowerment.

3. Process evaluation

The process evaluation will assess delivery, progress of and reaction to the participatory and collaborative activities undertaken by CNS local coordinators. This workstream will address the following research questions:

RQ3.1: What activities were delivered to whom, in what contexts, and why?

RQ3.2: How was the CNS approach delivered? Who was reached?

RQ3.3: What types of activities, projects and strategies show promise for increasing children's agency and influence and collaboration in similar or different contexts and why?

Data gathering for the process evaluation will capture the programme as it is delivered in practice, with close reference to the theory of the change. Key to these processes is the role of local coordinators as facilitators, public engagers, deliberative practitioners, boundary spanners and knowledge brokers. Working with children, young people and local stakeholders, across the various activities, CNS researchers will seek to gain an in-depth understanding of the knowledge, skills and design-thinking behind activities that have the potential to achieve culture changes within local governance systems.

The CNS approach to evaluation is participatory and collaborative, therefore in addition to qualitative interviews, this workstream will employ a range of creative and participatory methods such as reflective journals, interactive workshops and workplace shadowing that can be designed to meet the needs of each CNS site.

4. Outcome evaluation

The outcome evaluation seeks to monitor and analyse the extent to which the CNS programme has made an impact in its sites in two strands, answering three research questions:

RQ4.1: What is the evidence of CNS strengthening the agency and voice of children and young people at multiple levels of influence?

RQ4.2: What evidence is there of CNS improving collaboration in support of children and young people at multiple levels of influence?

RQ4.3: What evidence is there of CNS contributing to targets in the Scottish Government's 'Every child, every chance: tackling child poverty delivery plan 2018-2022' and to national outcomes?

The first strand of work aims to assess and monitor the impact of CNS activities as they relate to the agency, voice, empowerment of children and young people and collaboration between local stakeholders in the third and statutory sector (RQs 4.1 and 4.2). This will be achieved using bespoke survey tools for the populations of interest: children and young people (RQ4.1) and third sector and public sector front line workers and managers (RQ4.2). This quantitative data will be supplemented by qualitative case study data. The second strand of work aims to monitor and assess change resulting from local collaborative projects and their relation to the targets of the *Every child, every chance: tackling child poverty delivery plan 2018-2022* (Scottish Government 2018) and to national outcomes. This will put into place systems to measure change in project outcomes of interest informed by the capabilities goals of local children and young people.

The types of individual and collective outcomes in power, inequality, community, well-being and health that CNS are interested in require long-term examination over years and arguably generations. Population level outcomes demand that a programme can reach a significant section of the local population and that the population and the intervention is clearly defined and specified. As a collaborative, participatory place-based programme CNS does not seek to provide hard measures of outcomes and impacts at the population level. The strength of the CNS approach is that it is embedded in the localised contexts and realities of neighbourhoods with high levels of child poverty. The situated nature of the programme provides an opportunity to gain important insights into the everyday challenges, complexites and messiness of place-based change. The approach, which entails co-production of projects, activities, local outcomes and monitoring will ensure that the project and activities that are

undertaken are adapted to meet the specific needs of each context. CNS researchers will examine what works, how it works, where and when and in doing so will draw on the contextual knowledge of children and young people, front-line pracitioners, families and local communities. Through examining the types of knowledge, skills and practices and the features of context that are important for achieving change, the CNS hopes to gain deeper insights and draw broad conclusions for policy and practice.

The strategy document covers an overview of the evaluation purpose, aims and approach to design, including a timeline with the four phases of research across the sites. It includes the policy and research context including place-based interventions and the capabilities approach to mitigating child poverty. The document introduces the research themes, analytical framework and concepts that will be used to understand and draw conclusions from the data gathered by the research and evaluation team. The evaluation methodology unpacks in more detail three levels of system change with the focus of the evaluation being on the programme level (local projects and activities) and the local systems level (multiagency partnerships, working groups, collaborations, both formal and informal). It presents a table summarizing the research questions and methods and describes in more detail the methodologies of each of the four evaluation workstreams. The document also covers issues of research management such as data management, ethics, the members of the research and evaluation team and communications.

This strategy is the outcome of an intensive planning process that has involved external facilitation of a theory of change, unpacking assumptions and risks within the approach, reviewing and identifying relevant theories and concepts, and prioritising the focus of the evaluation on areas that provide the greatest potential for new learning and insights. The theories, approaches and concepts that have informed the evaluation design are documented as appendices in the strategy document. Investment of effort in careful research planning and prioritization is expected to result in evaluation findings that are practical and applicable in both supporting the CNS programme and contributing to the wider knowledge base. This work will be relevant to pre-existing and developing communities of practice interested in participation, collaboration and place-based approaches at a local, national and global level.

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1. Evaluation Overview

Introduction

The purpose of this research and evaluation strategy is to describe and explain how the research and evaluation team at Children's Neighbourhoods Scotland (CNS) have interpreted the evaluation requirements of the CNS programme. In doing so, this strategy takes into account the context of child poverty in Scotland, national perspective, the history and background of place-based approaches and collective impact in the UK and the learning from our first Children's Neighbourhood. It explains our rationale for adopting the Capabilities Approach (CA) as the theory underpinning our understanding of multi-dimensional poverty and the agency and voice of children and young people and applies the concept of collaborative rationality to examine how local partnerships and networks can achieve collective impact. This strategy document includes research questions and a delivery plan across four workstreams that will be developed alongside the theory of change.

Childhood poverty is a 'wicked problem' (Rittel and Webber 1973). It is multifaceted and can only be addressed through complex, intersectional and multi-disciplinary solutions. The causative factors are contested, and multiple definitions of poverty abound, as too do the solutions. Developing a strategy to evaluate initiatives aiming to tackle child poverty will require multiple approaches.

CNS is currently undertaking a process of developing and specifying a Theory of Change for the full programme. This paper refers to the monitoring and evaluation strand of that work.

Our evaluation design is based on an innovative mixed methods study, drawing together quantitative and qualitative data, with an emphasis on place and underpinned by the capabilities approach. This stage of the evaluation will conclude in 2022. During that time, the research and evaluation team will provide regular progress reports to monitor progress and inform learning as the programme develops. The evaluation has been carefully designed in order to provide useful and practical insights into new forms of collaborative working to tackle child poverty and the agency of children and young people in transforming neighbourhoods. In order to assess the wider impacts and outcomes from CNS, longer-term timescales for evaluation will be required.

This document sets out our approach to evaluating CNS and our contribution to the research and evidence base. It is structured as follows:

Section 1 - Evaluation overview: the CNS programme, the evaluation purpose and aims, phases of the evaluation.

Section 2 - The policy and research context: the local and national research, practice and policy context; the conceptual underpinnings and perspectives that inform and guide our work.

Section 3 – Evaluation methodology: the research questions, methods and delivery framework - five workstreams, data management, governance, ethics and sharing learning.

Evaluation purpose and aims

Children's Neighbourhoods Scotland (CNS) is a distinctive approach to improving outcomes for children and young people in neighbourhoods with high levels of poverty. Our place-based approach has the empowerment of children, young people and communities at its core. The programme is positioned within the *Every child, every chance: tackling child poverty delivery plan 2018-2022* (Scottish Government 2018). CNS works to join up efforts and services within a locality to increase participation and collaboration to support improvements in the poor childhood outcomes associated with high poverty settings. The Christie Commission (2011) recognised that the spatial clustering of poor outcomes in Scotland along multiple dimensions requires a highly localised, place-based response. CNS adopts a flexible, tailored approach, which aims to be responsive to locally defined needs and priorities.

The main purpose of the CNS evaluation design is to assess whether CNS is positively influencing its intended outcomes. The headline population-level outcomes CNS aims to contribute to are: improvements to children and young people's health and wellbeing, educational outcomes, quality of place, and ultimately children's life chances, as well as neighbourhood-specific priorities. The evaluation will unpack these outcomes at different levels (e.g. individual, partnership, community) and examine the activities and mechanisms that are likely to achieve these outcomes.

The aims of the evaluation approach outlined in this strategy are to:

- assess and monitor experiences, impact and outcomes at multiple levels of the programme, tracked over time
- create a collaborative and participatory methodology, one that is developed with the children and young people
- provide an evidence-based and evidence-informed, outcomes focused approach to programme development
- ensure that results and learning can be tracked over time and measured
- achieve positive influence and impact within a range of Scotland's policy frameworks.

Evaluation design

The CNS evaluation will seek to establish the effects CNS activities are having on promoting collective impact and their role in expanding the agency and voice of children and young people within their localities. This requires the construction of a narrative that connects activity and impact and explains the contribution of CNS in a complex setting with awareness of the dynamic nature of the wider contexts in which it is operating. Mindful of these complexities, the evaluation design has been informed by similar initiatives such as in England: Children's Zones (Dyson and Kerr 2013); the Children's Communities Initiative (evaluated by the Centre for Regional Economic and Social Research); in Northern Ireland - Colin Early Intervention Community; Shankhill Children's and Young People Zone (evaluated by Queen's University Belfast); and in Wales, the Welsh Pioneer programme¹.

Evaluating area or place-based approaches such as CNS is difficult. The literature describes two types of area-based approaches; people-based activities and place-based approaches (Lawless et al 2010). In the former, the focus is on activities such as capacity building, community development, workability programmes and other initiatives. In the latter, impact is achieved through regeneration schemes, enterprise zones, infrastructure developments and other economic development strategies. CNS adopts a people-based approach within a defined geographical area, and this evaluation strategy has been developed to take account of this. For example, the expectation is that impact on children and young people's life chances will be more evident at an individual level, tracked over time². These outcomes are different

¹ See the report from Children's Neighbourhoods Scotland's UK Research Seminar, May 2019 https://childrensneighbourhoodsscotland.com/2019/05/23/improving-outcomes-for-children-and-young-people-using-research-and-evidence-to-make-change-happen/

² A key finding from the national evaluation of the New Deal Communities was the importance of collecting individual level data to measure and track impacts. However, this type of data collection can place additional demands on service providers and beneficiaries, which needs to be considered carefully at part of the data collection strategy (Lawless and Pearson 2012).

from those expected of a large infrastructure development or physical regeneration scheme. Given the participatory and collaborative nature of the work that CNS will be undertaking, the evaluation will also track local networks and wider community impacts.

This evaluation takes a Theory of Change approach, consisting of an overarching change model combined with particular anticipated mechanisms of change that will be examined indepth. See Appendix 1 for the CNS Theory of Change.

The CNS theory of change (ToC) will be used to optimise the design of the evaluation strategy. The ToC approach represents, in a simplified way, a hypothesis about how an intervention works. It provides a systematic approach to tracing the relationships between activity and outcome. Working with local stakeholders, a ToC is an effective means of exploring consistency of programme expectations and the reality of programme delivery as well as contextual barriers and enablers, rather than attempting to eliminate these by using control groups or similar methods (Connell and Kubisch 1998).

The ToC is a 'live' model that will be revised and populated as the programme develops. Further work will be undertaken to specify and define CNS activities; the adoption, fidelity and reach of the programme; and the mechanisms and outcomes that will provide the focus for the evaluation. An example of a neighbourhood change model is provided in Appendix 2.

In each CNS neighbourhood, the evaluation will include a context analysis combining baseline area profiles with the technical knowledge and practice wisdom of local service providers to ensure a focus on specific issues of need from the outset. In addition to monitoring impact and progress, the strategy will be underpinned by regular feedback loops to inform the design and implementation of the programme as it evolves. Given the aims of CNS, the evaluation approach will need to gather sufficiently detailed and nuanced evidence over time. Therefore, a multi-method approach will be applied. This will include a combining embedded, theory-led, process evaluation with survey-based outcome evaluation. This realist informed approach will use mixed qualitative and quantitative methods to research and analyse CNS as a complex systems intervention.

Our evaluation approach is adaptive and pragmatic, focussed on relationships between key actors (individuals, professionals, services and partnerships) and flexible enough to respond to the emerging needs of the programme while at the same time focussed on the activities, processes and mechanisms that are key to achieving outcomes.

Phases of research

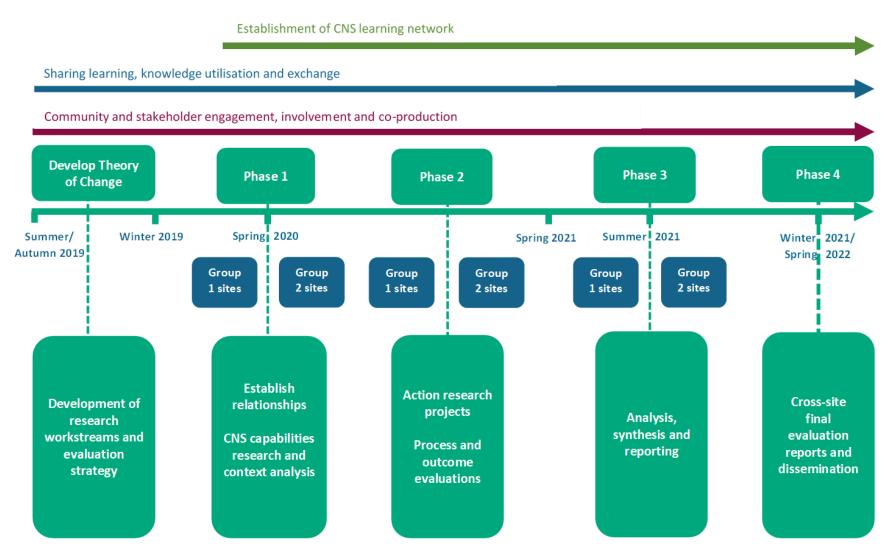
CNS will establish a total of six sites. At the time of writing the expectation is that in addition to the original site, two more will be added in 2019 and three in 2020.

The timeline for the evaluation is presented in Figure 1.

As indicated in the phasing below some evaluation strands will be undertaken concurrently, and the study is, by its nature, iterative in design. All timescales will be kept under review with appropriate milestones and a risk register.

Figure 1

Children's Neighbourhoods Scotland evaluation timeline



Group 1: pilot site and two further sites set up by end March 2020 Group 2: three additional sites set up by end May 2020

2. The Policy and Research Context

This section of the strategy outlines the background to the proposed methodology: the Scottish policy context; tackling child poverty; the capabilities approach; place-based approaches with children and young people; and the theories that inform the analytical framework.

Policy context – tackling child poverty in Scotland

The Child Poverty (Scotland) Act 2017 sets out ambitious targets for reducing child poverty in Scotland by 2030 across four types of poverty- relative poverty; absolute poverty; combined low income and material deprivation; and persistent poverty (Scottish Parliament 2017). It is estimated that almost one in four (24%) of Scotland's children are living in relative poverty³⁴. This is higher than in many other European countries. Figures reveal that poverty affects children in every part of Scotland, and that 27 out of the 32 local authorities in Scotland have council wards where over 20% of their children are living in poverty⁵. Causes of child poverty include low wages, under-employment, worklessness, and inadequate social security benefits⁶. The disadvantages of growing up in poverty accumulate across the life course leading to inequalities in health, cognitive development, psychosocial development and educational attainment (Treanor 2012). The impacts of poverty are not just important for children's future outcomes; poverty also has detrimental effects during childhood and as children grow up.

In Scotland educational and early years policy is driven by the *Children and Young Peoples* (*Scotland*) *Act 2014* (Scottish Parliament 2014). The Act establishes a new legal framework within which services are required to work together in support of children, young people and families. These developments are underpinned by the principles of social justice and equity to meet the needs of disadvantaged and vulnerable families and to build resilient connected communities. The current educational reform agenda (Scottish Government 2016; 2017) builds on the act to reinforce the nation's commitment to creating an equitable and excellent

³Latest child poverty estimates. Scottish Government, Child poverty targets update - March 2019, https://www2.gov.scot/Topics/Statistics/Browse/Social-Welfare/IncomePoverty/CPBillInfographic

⁴ Relative poverty measures poverty relative to the rest of society. It is the proportion of children living in is the proportion of children living in sthe proportion of children living in households with equivalised incomes below 60% of the median (middle) UK income in the current year.

⁵ Child poverty percentages in Scottish Local Authorities, CPAG. http://www.cpag.org.uk/content/percentage-children-living-poverty-scotland

⁶ See Scottish Government's Child poverty measurement framework - updated March 2019, https://www2.gov.scot/Topics/Statistics/Browse/Social-Welfare/IncomePoverty/ChildPovertyStrategy/targethist

education system where all can achieve their full potential irrespective of their circumstances.

The vision and ambitions of the Act and educational reform agenda are further supported by the *Child Poverty (Scotland) Act (2017)* and the *Every child, every chance: tackling child poverty delivery plan 2018-2022* (Scottish Government 2018). Ambitions to improve outcomes for children and young people in Scotland are underpinned by the commitment to reform public services; build on the assets and potential of individuals, families and communities; and strengthen their voices in decisions about public services (Scottish Government 2010; Christie 2011; Community Empowerment (Scotland) Act (Scottish Parliament 2015).

Table 1 lists the key policies, reports and legislation that inform the development of Children's Neighbourhoods Scotland.

Table 1 Policy Context for Children's Neighbourhoods Scotland

Every Child, Every Chance: Tackling Child Poverty Delivery Plan 2018-22

The Place Principle 2018

Scotland's Public Health Priorities 2018

The Child Poverty Scotland Act 2017

Scotland's Open Government Action Plan: 2018-2020

Delivery Plan for Scottish Education 2016

The Community Empowerment (Scotland) Act 2015

The Scottish Attainment Challenge 2015

The Children and Young People's Act 2014

Developing the Young Workforce 2014

The Public Bodies Joint Working Act 2014

Getting it Right for Every Child (GIRFEC) 2012

The Christie Commission 2011

The Scottish Education Curriculum – the Curriculum for Excellence (CfE) 2008

The UN Convention on the Rights of the Child (UNCRC) (1989)

The *National Performance Framework* (NPF) (Scottish Government 2018) guides policy and action through National Outcomes. CNS contributes to the following National Outcomes⁷:

⁷ https://nationalperformance.gov.scot/national-outcomes

- We live in communities that are inclusive, empowered, resilient and safe.
- We grow up loved, safe and respected so that we realise our full potential.
- We tackle poverty by sharing opportunities, wealth and power more equally.
- We are healthy and active.
- We are well educated, skilled and able to contribute to society.
- We respect, protect and fulfil human rights and live free from discrimination.
- We have a globally competitive, entrepreneurial, inclusive and sustainable economy.

Table 2 summarises the Every child, every chance: tackling child poverty delivery plan 2018-2022 targets, NPF outcomes and indicators to which CNS aims to contribute.

Table 2 Every child, every chance: tackling child poverty delivery plan, NPF and CNS

Tackling Child Poverty Delivery Plan 2018	National Performance Framework 2018	Indicators used to assess NPF outcomes
'While the Delivery Plan need[s] to focus on work and earnings, costs of living and social security, it shouldn't ignore other issues that could help families in poverty now' (p.73); issues and actions that	NPF Outcomes Relevant to the CNS programme include: We live in communities that are inclusive, empowered, resilient and safe.	Inclusive and empowered communities defined by measures on perceptions of local area, loneliness, local crime, places to interact and community social capital.
improve children and young people's quality of life.	We grow up loved, safe and respected so that we realise our full potential.	Children's 'full potential' defined by indicators measuring educational
Specifically: Ensuring that children's home and community environments are safe and	We tackle poverty by sharing opportunities, wealth and power more equally. We are healthy and active	attainment, positive relationships with peers and adults, skills development, participation and voice. ⁸
nurturing. Helping children to realise their full potential.	We are well educated, skilled and able to contribute to society. We respect, protect and fulfil human rights and live free	Poverty captured by relative poverty after housing costs, costs of living, housing quality and food insecurity.
	from discrimination. We have a globally competitive, entrepreneurial, inclusive and sustainable economy.	

⁸ For example the indicator 'percentage of young people who feel adults take their views into account in decisions that affect their lives': https://nationalperformance.gov.scot/measuring-progress/national-indicator-performance

The Capabilities Approach

The focus of CNS on building the agency and capability of children and young people aligns to the *National Performance Framework* and the *Every child, every chance: tackling child poverty delivery plan* (Scottish Government 2018). In particular, CNS will draw on the Capabilities Approach to contribute towards improving quality of life; working to ensure that home and community environments are safe and nurturing; and helping all children to fulfil their potential.

The Capabilities Approach (CA) is concerned with the task of addressing poverty through the improvement of quality of life. Capabilities are the freedoms and opportunities that a person actually has in practice to achieve their goals (Robeyns 2017). Working from a 'minimum core' set of goals or domains (see Table 3), the CA domains align to the long term NPF outcomes mentioned above and captures improvements in the two 'quality of life' areas in the *Every child, every chance: tackling child poverty delivery plan 2018-2022* (Scottish Government 2018). Further, the CA ensures that goals are relevant and meaningful through a process of dialogue. In the case of Children's Neighbourhoods Scotland, this means that children, young people, and local stakeholders develop the goals of CNS at a local level.

Table 3 Capabilities domains

	CAPABILITIES DOMAINS 'MINIMUM CORE' (Adapted by Burchardt and Vizard 2011)
1.	Life
2.	Health
3.	Physical security
4.	Identity, expression and self-respect
5.	Individual, family and social life
6.	Education and learning
7.	Standard of living
8.	Productive and valued activities
9.	Participation and voice
10.	Legal security

The CA is a useful approach for Children's Neighbourhoods because it builds a common framework of goals, foregrounds dialogue with children and young people, and can be used

to identify priorities for collective action at a local level. It allows measurement and assessment of progress across a range of social justice indicators that together define wellbeing – on both an individual and a collective level. CA recognises that children are competent social agents but that their capabilities are unique. Children's capabilities are linked to those of adults, change across age and life cycle, and are inter-related (e.g. education underpins the achievement of some other capabilities, such as Standard of Living, and is dependent on others, such as physical security, participation and voice). The CA framework recognises the need for a holistic approach to child wellbeing at a neighbourhood level, that draws together individual development, collective action and opportunities for influence and change.

CA identifies barriers and enablers to children and young people achieving their goals at micro, meso and macro levels (see Section 3, three levels of systems change), thereby allowing detailed evaluation of the contextual conditions for change at the three system levels in the CNS programme.

International indicators (measures) of capabilities have been developed by the UK Equality and Human Rights Commission's <u>Children's Measurement Framework</u> (CMF)⁹, which can be used as a guide for CNS when considering ways to measure change in children and young people's lives using a capabilities framework. These also align with the Scottish Government's *Every child, every chance: tackling child poverty delivery plan 2018-2022, the National Performance Framework* and Getting *it Right for Every Child*¹⁰.

Capabilities is a rapidly growing international field of academic research. Until recently, there have been challenges with operationalising capabilities as a basis for evaluating children's well-being; including the specification of procedures for choosing domains to focus on and how to build children's active participation into such procedures (Biggeri et al 2011). In recent years, significant progress has been made and the CNS evaluation team will draw on the most recent developments. The first CNS neighbourhood has also provided valuable insights into how capabilities can be operationalised in practice.

Place-based approaches with children and young people

Increasing evidence surrounding the causes and effects of child poverty and inequalities in attainment and other outcomes has driven a specific focus on children and young people in place-based approaches (Moore et al 2014). There is however little evidence to date of place-

⁹ The CMF is an extension of the Equality Measurement Framework developed by the Equality and Human Rights Commission to cover children and young people (Holder et al 2011).

¹⁰ The GIRFEC indicators (derived from The Children and Young People (Scotland) Act 2014), highlight wellbeing using the SHANARRI framework, and map closely to the 'minimum core' Capabilities goals adapted from Nussbaum.

based approaches improving outcomes for children and young people. In part, this is a methodological challenge. Most initiatives do not have long-term evaluation strategies, so it is difficult to evidence their effectiveness (McBride 2019).

The evidence that exists suggests that targeted area-based interventions can help to mitigate the effects of structural inequalities and improve outcomes for individuals and families living in particular areas. Dyson et al (2012) explain that in the most disadvantaged areas 'customised approaches may be necessary to tackle a complex web of issues – and draw on a network of resources – that are not configured in quite the same way anywhere else'. The rationale behind place-based approaches is the need to understand and focus on a community or 'system' as a whole – its material, physical assets, the social environment, and ensuring integrated services – as opposed to focusing on disadvantage only at the level of the individual or the family (Moore and Fry 2011).

Place-based approaches have been critiqued for having 'a disadvantage focussed rationale'-framing the individual as 'deficient' and neglecting other areas of life beyond education (Dyson and Kerr 2014). The Capabilities Approach, proposed as the theory underpinning this evaluation, responds to these shortcomings by applying a holistic approach — working across policy domains and service areas and a participatory approach — engaging local people in dialogue on their own values and goals.

Another criticism of place-based approaches is that they often seek to improve outcomes without understanding the complex nature of place-based disadvantage. Understanding the nature of the local contexts CNS will be operating in will be important in designing and evaluating the programme, for example, examining the nature and history of community activity and collaboration between services in the area (Burton et al 2006).

The evidence on place—based approaches highlights that alignment with national policies can support or undermine the potential to achieve local outcomes. CNS will need to engage with wider systems of decision-making and change beyond the neighbourhood (see McBride 2018 p. 6). Through developing the Theory of Change, CNS will map out the strategic decision-making systems and identify the most effective way to influence key systems and actors.

Analytical framework

Place-based approaches are epistemologically complex and methodologically diverse.

Therefore, the CNS evaluation can potentially draw on a wide range of theories and concepts

to frame analysis. A summary of the theories and definitions that have been considered in developing the analytical framework for the CNS evaluation is provided in Appendix 3.

The following crosscutting themes are proposed as underpinning both the evaluation and the delivery of the CNS programme at the different levels of system change. They have been articulated consistently through the development of the Theory of Change (see Appendix 1) and in CNS team discussions. The operationalisation and analysis of these themes draws on theories of capabilities, collective impact and collaborative rationality. Additional themes may emerge through work on the Theory of Change.

Theme 1: Agency, empowerment and voice

After careful consideration, the research and evaluation team decided to operationalise capabilities as an approach to analysing agency, empowerment, and voice. A key dimension of this approach is a participatory and collaborative methodology which will provide the opportunity to observe how children and young people articulate, discuss and share their aspirations for change and seek opportunities for sustained collective action and impact.

Applying the capabilities approach to the analysis of empowerment and agency, Ibrahim and Alkire (2007), define *empowerment as 'expansion of agency'*. Agency, according to Sen (2009), is 'the ability of children and young people to act on behalf of what they value and have reason to value'. Drydyk (2013) highlights that 'durable empowerment,' entails individuals and communities influencing the power of state authorities or external agencies.

The evaluation of how children and young people develop agency will adapt Ibrahim's (2017) three Cs model for grassroots-led development¹¹:

Critical awareness – how children and young people build critical awareness at an individual level
 Conciliation - how children and young people create a common vision
 Collaboration – how children and young people 'act' with agencies and institutions

Theme 2: Collective impact, collaboration and governance

John Kania and Mark Kramer in the Stanford Social Innovation Review first introduced the concept of 'collective impact' in 2011, where they described several examples of highly structured collaborative efforts that had achieved substantial impact on a large-scale social problem. The collective impact approach is premised on the belief that no single policy,

 $^{^{11}}$ The term used by Ibrahim for the first 'C' is conscientization. CNS will use the term 'critical awareness'

government department, organisation or programme can create the type of outcomes needed to generate real and lasting social change and tackle wider social and economic problems. Therefore, a coordinated, holistic and customised approach is needed to tackle a range of complex issues. Collective impact seeks change at the level of the community or 'system' rather than solely at the level of individuals and families engaged in the programme.

Collective impact requires a shared set of goals and shared understanding of how to achieve goals. Some programmes set up a 'backbone organisation', which coordinates the different agencies. Examples of such approaches include Children and Youth Area partnerships in Victoria, Australia (established in 2014); Children's zones and Children's Communities (Save the Children – Wallsend, Pembury, Smallhow-Hurst – 2016). The benefits of this approach are that it seeks to change the way services work together. Local organisations are required to work for the whole community, rather than working on an individual or competitive basis (Dyson et al 2012).

The literature also highlights a number of challenges with the collective impact approach (McBride 2019):

- Difficulties measuring effectiveness
- Complex causal pathways that are difficult or impossible to disentangle
- Sharp deviation from how organisations and funders operate
- Interagency working that can increase the workload of staff
- Reliance on clear governance and division of responsibilities
- Requires frontline professionals and leaders to drive the initiative
- The difficultly of aligning grassroots community organizing efforts (Christens and Inzeo 2015).

Building on years of experience as practitioners and researchers, Innes and Booher developed the concept 'collaborative rationality' (2003; 2010; 2016). This concept explicitly deals with the problem of unequal power in collaborative working. Drawing on Habermas's theory of communicative rationality, they explain why some collaborative processes are more productive than others.

The following characteristics are key conditions of collaborative rationality. When these three conditions align then collaborations have greater capacity for resilience, adaptation, shared purposes, innovative solutions, and collective action:

Diversity of interests, perspectives, experience and expertise

Interdependence between participants – the perception that "I cannot accomplish my goals without your collaboration"

Authentic dialogue + deliberation - reciprocity, relationships, learning, creativity

(Source Facilitative Leadership training; What Works Scotland http://whatworksscotland.ac.uk)

Collaborative rationality provides a useful lens for the CNS evaluation to examine in greater depth the mechanisms and processes of achieving collective impact. This approach focusses on the nature of the relationships between participants and the productive or unproductive nature of communication between participants. Collaborative rationality offers a practical and relational approach to the analysis of collective impact and this concept will structure the analysis of the second research theme: collective impact, collaboration and governance.

2. Evaluation methodology

This section of the paper operationalises the theory of change and the key concepts discussed in section 1 and section 2. It proposes a realist evaluation methodology, and describes research questions, methods of data collection and analysis.

Three levels of systems change

The current Theory of Change (Appendix 1) articulates the learning and outcomes that the CNS programme seeks to achieve across different phases and levels of systemic change. In addition, it articulates the mechanisms that are expected to achieve these anticipated changes. The cumulative learning within and across neighbourhoods and across system levels, will be key to understanding the design features of the CNS approach that might be transferable to other programmes and other contexts.

The ToC articulates systemic change at three levels:

- the programme delivery (or beneficiary) level engaging with children and young people, families, frontline workers (beneficiaries)
- the strategic area level public services, third sector organisation, private sector and other key organisations with the potential to improve outcomes for children and young people in high poverty areas (key organisations and local leaders, decision—makers)

• the national level – Scottish government, UK and international partners seeking to reduce child poverty and mitigate its negative effects.

The processes and outcomes examined in this evaluation are at the programme delivery and strategic area level. This is where the evaluation team has identified a significant gap in knowledge and where the CNS evaluation seeks to provide the greatest insights. CNS will monitor and impact at a national level through knowledge exchange activities. The CNS team will also seek to actively disseminate findings with the intention of contributing to national policy, national and international debate.

Realist-informed evaluation

Realist-informed evaluation focuses on understanding mechanisms and contexts including interpersonal relations, institutions, and social infrastructures that contribute to the outcomes achieved by a programme or approach. A realist approach to evaluation seeks illumination and insights into mechanisms and contexts rather than generalisable truths (Pawson et al 2005). This approach will help to identify aspects of the CNS approach that are generalisable or not, depending on context. It will inform the development and fine-tuning of the CNS approach for different neighbourhoods as the programme evolves. This evaluation will use mixed-qualitative and quantitative methods, combining an embedded, theory-led, process evaluation with an outcome evaluation.

The starting point for realist evaluation is to conceptualise CNS as a complex systems intervention. CNS has been described as an approach and a set of practices rather than a discrete intervention. CNS is not intervening in the sense of interfering; nevertheless, the programme seeks to change in some way the contexts in which it operates. From an evaluation point of view CNS can be understood as a complex intervention or approach. Complex interventions are commonly defined as 'interventions that comprise multiple interacting components. Additional dimensions of complexity include the difficulty of their implementation and the number of organisational levels they target' (Moore et al 2015). Table 4 below describes the key features of complex interventions and the implications for evaluation.

Table 4 Key features of a complex intervention (adapted from Pawson et al 2005 p.S1:220)

Key features of a complex intervention	Implications for realist evaluation	Application to CNS evaluation
1. They are based on theories and hypotheses that postulate: if we deliver a programme in this way or we manage services like so, then this will bring about some improved outcome.	It is important to be clear about the theory/ theories underpinning the intervention.	Theory of change
2. They are active - they achieve their effects via the active input of individuals.	Knowledge of the reasoning and personal choices of different actors and participants is key to understanding outcomes.	Process evaluation
3. Their theories have a long journey from policy architects to practitioners to the hearts and minds of the public.	Explore the integrity of the implementation chain. Which intermediate outputs and outcomes need to be in place? What are the flows, blockages and points of contention?	Theory of change / Outcome evaluation
4. They are non-linear and can go into reverse.	It is important to examine the relative influence of different parties and their ability to affect and direct implementation.	Process and outcome evaluation
5. They are fragile and are embedded in multiple social systems.	Recognise the different layers of social reality that make up and surround the programme.	Neighbourhood context analysis
6. The theory is distinct from the practice –the programme will speak to a general theory and abstract idea that in practice those delivering the programme will adapt.	The abstract programme theory is different from the programme that practitioners will implement in practice. It is the programme in practice that will be evaluated.	Process evaluation
7. They are open systems that feedback on themselves.	As the programme is implemented it will change the conditions in which it operates, and this may have unintended outcomes.	Theory of change

Research questions and methods

The main research questions for the evaluation of CNS, associated evaluation activities and timescales are summarised in Table 5 below. Although clear focus from the outset is vital, the evaluation approach will allow emerging questions to be addressed.

Table 5 Research questions and proposed activities for the evaluation of CNS

Evaluation questions	Methodology		
1. NEIGHBOURHOOD CONTEXT ANALYSIS			
 RQ1.1 Which contextual dimensions and domains hinder or facilitate the implementation or subsequent impact of CNS? Which aspects of local context and opportunities offer the greatest potential for children and young people to participate and have their voices heard in local decision-making? Which aspects of context support or hinder collaborative working in support of children and young people? 	 Quantitative evidence: routine/ existing data collected locally on indicators of change (Neighbourhood Profiles and CYP Profiles) Qualitative research with 5 -10 local stakeholders Documentary evidence: review of the grey literature on the area, reflective accounts, minutes of meetings, reports from events 		
RQ1.2 How do different sources of evidence and knowledge inform us about the context of CNS areas?	 Qualitative research with 5 -10 local stakeholders Workshop-based interactive 		
RQ1.3 In what ways can research and evidence be used to strengthen the agency and voice of children and young people?	 Workshop-based methods Capabilities research Process evaluation 		
2. CAPABILITIES APPROACH			
RQ2.1 What are the capabilities goals and functioning indicators of wellbeing for children and young people in CNS neighbourhoods?	 Participatory research with children and young people. Qualitative research utilizing workshops and observation methods; illustrative narratives of mechanisms and impact in line with indicators and the ToC 		
RQ2.2 What are the key conversion factors and mechanisms which enable or prevent the capabilities goals of children and young people from being achieved?	Comparative case studies will be conducted across sites on the features of empowering children and young people; information and evidence from CYP regarding changes		

RQ2.3 What are the key conversion factors and mechanisms which enable or prevent the voices of children and young people from being expressed, heard and acted on?	Comparative case studies will be conducted across sites on the features of empowering children and young people; information and evidence from CYP regarding changes
3. PROCESS EVALUATION	
RQ3.1 What activities were delivered to whom, in what contexts, and why?	 Qualitative research including interviews with local coordinators and key frontline workers, shadowing, walk-along interviews, participant observation, reflective diaries Documentary evidence: Logs, records of activity kept by organisations involved in the planning/delivery of services
RQ3.2 How was the CNS approach delivered? Who was reached?	 Qualitative research including interviews with local coordinators and key frontline workers, shadowing, walk-along interviews, participant observation, reflective diaries Documentary evidence: Logs, records of activity kept by organisations involved in the planning/delivery of services
RQ3.3 What types of activities, projects and strategies show promise for increasing children's agency and influence and collaboration in similar or different contexts and why?	Case studies: to explore changes/perceived changes; revisit case studies over duration of programme for longer term insights
4. OUTCOME EVALUATION	
RQ4.1 What is the evidence of CNS strengthening the agency and voice of children and young people at multiple levels of influence?	 Quantitative evidence from bespoke surveys conducted to assess impact of specific CNS activities etc. Case studies: individual and group case studies to explore changes/perceived changes; revisit case studies over duration of programme, longer term insights
RQ4.2 What evidence is there of CNS improving collaboration in support of children and young people at multiple levels of influence?	 Evidence from: Individual routine/ existing data collected locally on CNS indicators of change Bespoke surveys conducted to assess impact of specific CNS activities on service providers etc.

	Case studies: individual and group case studies to explore changes/perceived changes; revisit case studies over duration of programme, longer term insights
RQ4.3 What evidence is there of CNS contributing to targets in the Scottish Government's Every child, every chance: tackling child poverty delivery plan 2018-2022 and to national outcomes?	 Collaborative action research methods will be used to identify and analyse measures of change using: Individual routine/existing quantitative data collected locally on CNS indicators of change Case studies: individual and group case studies to explore changes/perceived changes; revisit case studies over duration of programme, longer term insights.

Research Workstreams

The four evaluation workstreams detailed in Table 5 are:

- 1. Neighbourhood context analysis
- 2. Establishing capabilities goals with children and young people (C&YP)
- 3. A process evaluation to assess how the programme works in practice
- 4. An outcome evaluation to establish and measure impact against shared goals

The section below describes in more detail the work that will be undertaken in each workstream.

1. Neighbourhood context analysis

The contexts in which CNS will be operating will condition the extent to which outcomes can be achieved. Understanding these multi-level contexts and systems is critical, both in designing the CNS approach and, for the research and evaluation team, in interpreting findings and understanding the applicability of these findings to other contexts.

The context analysis and needs assessment will be based on the complex interventions (CICI) framework which comprises the three dimensions of context, implementation and setting and seven analytical domains as illustrated in Figure 2 below.

Figure 2 CICI Framework (adapted from Pfadenhauer et al 2017).

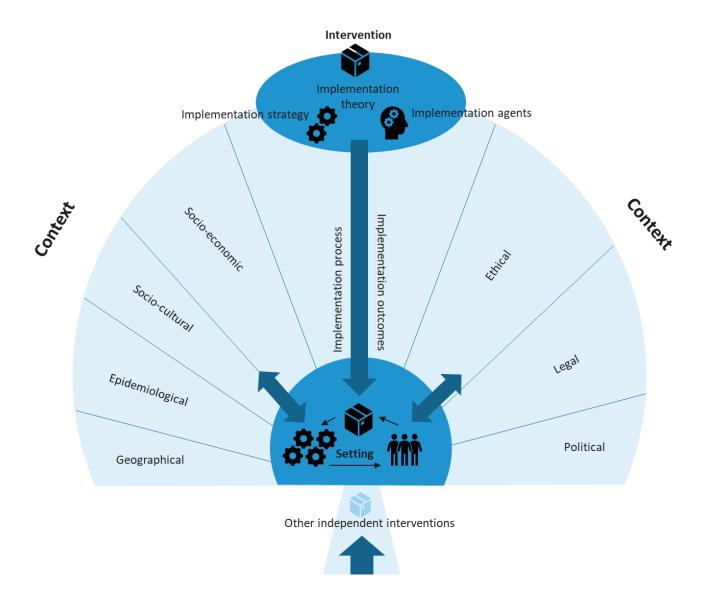


Table 6 below provides an example of contextual factors that have the potential to influence the processes and outcomes achieved by CNS at the three levels of systemic change.

Table 6 Contextual influences at three levels of systemic change

Programme level	Strategic area level	National Level
The stability and sustainability of community assets and local staff – buildings and people.	Local child poverty strategies and action plans ¹² . Interventions to increase employment opportunities and improve childcare for parents in low income areas.	Scottish Tackling Child Poverty Delivery Plan (see also the CNS Policy context). Projected increases in
Community health and well-being and	City Deals and other inclusive growth initiatives.	child poverty.
education profiles, numbers, concentration of children, levels and nature of poverty.	Public Health Strategies. Participatory budgeting (the commitment from all LAs to allocate 1% of mainstream/core budgets through a process of	Causes of child poverty, income from employment, cost of living and income from social security.
Assessment/mapping of needs and gaps in services for children and young people.	participatory budgeting). Scottish Pupil Equity Fund or Attainment Challenge funding.	Socio-economic impacts of political changes such as Brexit.

Data collection for the neighbourhood context analysis workstream will include:

- Quantitative evidence: routine administrative data
- Qualitative research with 5 -10 local stakeholders
- Documentary evidence: review of the grey literature on the area, reflective accounts, minutes of meetings, reports from events
- Administrative data.

This evaluation workstream will draw on two types of administrative data:

- individual level administrative data. e.g. school data (pupil attainment, attendance, eligibility for free school meals and gender, ethnicity etc.)
- area level administrative data socio-demographic information (from the Census), local deprivation (SIMD), health and well-being levels.

The Administrative Data Research Centre at the Urban Big Data Centre (UBDC) will support the CNS research and evaluation team with individual level administrative data. The team

 $^{^{12}}$ E.g. in Glasgow – Healthy Start £600 for new baby; low cost of council nursery provision; automation of school clothing grant; Glasgow children's holiday food programme; Universal Credit preparation and community budgeting focusses on reducing child poverty

will explore the potential for this data to be linked to individuals, so that we can track individual changes over time. The team will also seek support from the UBDC project Educational Disadvantage and Place (Kintrea 2018).

Neighbourhood context analysis will be repeated at regular intervals alongside the outcome in order to examine the link between contextual changes and changes to agency, voice, empowerment, local services and systems.

2. Establishing capabilities goals with children and young people

The Capabilities Approach is a multidimensional framework for identifying wellbeing goals and will be employed both as a tool for participation and to support the development of goals for CNS, followed by activities and projects developed by local coordinators.

Each neighbourhood will develop a capability framework devised by child and young people. This will form the basis for a series of innovative dialogue and deliberation sessions led by children and young people, with stakeholders invited to discuss how services can meet capabilities goals.

Each neighbourhood will have a small-trained cohort of co-researchers, who will be involved in carrying out small pieces of research.

Where possible the approach will include visual digital methods of data collection – using i-pads, smart phones, video cameras, Skype, facetime, video diaries and exploring online digital dialogue and participation tools (Hall, Pahl and Pool, 2015).

A comparative analysis will be conducted across sites on the features of empowering children and young people, organisations and staff, drawing on case studies and other relevant data and information.

Academic papers will be developed on empowerment, capabilities and innovative participatory research.

3. Process evaluation

Data gathering for the process evaluation will capture the programme as it is delivered in practice, with close reference to the theory of the change.

The process evaluation will examine:

- how the approach is delivered through local coordination work across neighbourhoods
- · the number of and diversity of participants
- the nature of relationships and networks across all sectors
- adaptations to make the approach fit different contexts and changes that undermine whether the approach was delivered as intended
- the quality of communication in participation/ collaboration activities, negotiating different institutional agendas, logics and frames, and collaborative learning processes.

Key to these processes is the role of CNS local coordinators as facilitators, public engagers, deliberative practitioners, boundary spanners and knowledge brokers. Working with children, young people and local stakeholders, across the various aspects of activity, CNS will seek to gain an in-depth understanding of the role of these of local coordinators and key partner as agents of culture change within local governance systems.

The CNS approach to evaluation is participatory and collaborative, therefore in addition to core methods (qualitative interviews), the evaluation approach will employ a range of creative and participatory methods such as reflective journals, interactive workshops and workplace shadowing that can be designed to meet the needs of each CNS site. The process evaluation will adopt a reflexive approach. The researcher for this workstream will keep a fieldwork journal that will be used to reflect on positionality and to examine assumptions and preconceptions that shape how the research is conducted and interpreted.

The methods selected for the process evaluation have been tested by the research and evaluation team working in other projects and draw on research on governance and social innovation in the field of interpretive and deliberative policy studies¹³.

See Appendix 4 for a model of a process evaluation highlighting mechanisms and contextual feedback loops.

¹³ For example http://www.smart-urban-intermediaries.com/publications/

4. Outcome evaluation

The outcome evaluation will evaluate the measurable impacts of the approach using indicators of change based on measures of impact from local activities. This will entail work in two strands:

- Evaluating the impact of CNS activity on the agency, voice and collaboration of key beneficiaries in the medium term using bespoke survey tools (RQ4.1 and 4.2)
- Collecting data on the impact of CNS activities that contribute to the targets in the Every child, every chance: tackling child poverty delivery plan 2018-2022 and national outcomes (RQ4.3).

The first strand aims to assess and monitor the impact of CNS activities as they relate to the two themes of the programme, agency, voice, empowerment of children and young people and collaboration/collaborative advantage of local stakeholders in the third and statutory sector (RQs 4.1 and 4.2).

The second strand of work aims to monitor and assess change resulting from local collaborative action research (CAR) projects and their relation to the aims of the *Every child, every chance: tackling child poverty delivery plan 2018-2022* and national outcomes. This will put into place systems to measure change in local CAR project outcomes of interest. These outcomes are informed by the capabilities framework decisions taken by local children and young people in the capabilities workstream (Workstream 2) and will detail how local activities framed through the capabilities framework contribute to the targets in Every child, every chance: tackling child poverty delivery plan 2018-2022. For example, if children identify mental health as a collective goal the CNS team will work with stakeholders to co-design, collect data and evaluate actions to address this goal. The outcomes can be based on the Children's Measurement Framework (CMF) (Holder et al 2011) or from measures identified and validated from other research. Evidence gathered in these projects will include both quantitative data and qualitative data and will be monitored by the CNS team; this project data will be analysed by the CNS in relation to its contribution to the larger goals of the programme.

Analytical choices will be informed by realist evaluation, which aims to determine, for multiple outcomes of interest, the Context-Mechanism-Outcome configuration that will result in the desired outcome. These considerations will be used in both strands of the outcome evaluation.

Assessing change in both of these strands of research will contribute to the overall design by providing both quantitative and qualitative evidence of impact from CNS activities on issues of theoretical importance for the CNS team (empowerment and collaboration) and on issues that relate more directly to targets within the *Every child, every chance: tackling child poverty delivery plan 2018-2022* (Scottish Government 2018).

Data gathering will include be poke survey tools designed by the research and evaluation team and case studies and qualitative methods to capture impact.

The research and evaluation team intends to develop a menu of outcome measures aligned with the capabilities domains that comprise both the CMF indicators and other concepts best assessed from qualitative case study data, which will be used to inform work in the CAR projects of RQ4.3 most directly. A mixed methods approach will provide a range of different sources of data on the perceptions of children and young people and will enable assessment of impact at key intervals as the programme develops.

Data sharing and capacity building

During the set-up of new CNS sites, the team will develop data sharing agreements with local partners as required. There are a range of options for how best to share data and support local data gathering and analysis. This could include capacity building in self-monitoring and evaluation, for example offering training in local area data analysis and interactive methods of sharing and communicating local data. These methods have been trialled through the What Works Scotland 'making data meaningful' project (see Bynner and Whyte 2016)

Research methods and data sources

Across the evaluation as a whole, a wide range of evidence and data sources, research approaches and methods will be drawn upon, including:

Quantitative evidence from:

- Bespoke surveys conducted to assess impact of specific local activities and programmes delivered or supported by CNS
- A set of neighbourhood data profiles, for both whole population and children and young people specifically, monitored during the course of the programme
- Routine administrative data collected locally on indicators of change, if useful and relevant for monitoring locally identified capabilities goals.

Qualitative evidence on the processes of participation and collaboration with local children, young people and families, local service providers and other stakeholders, through:

- Semi structured qualitative interviews, including walk-along interviews in the neighbourhood area
- Shadowing front-line workers and local coordinators
- Workshops to share evidence on participation and collaboration and troubleshoot ('collaboration clinics')
- Case studies or 'deep dives'
- Reflective accounts and worksheets.

Participatory and deliberative methods including:

- a range of participatory methods with children and young people including paired work, small group work and full group discussion, mixing ages and backgrounds
- dialogical methods including visualisations, self-portraits, icebreakers, poetry, flipchart scribing and presenting; mind mapping
- deliberative methods including capabilities domains and voting.

The process evaluation alongside participatory methods will help to provide a critical perspective on the use of participatory methods with children (see Waller and Bitou 2011).

Documentary evidence will include:

- Policy documents, publicly available sources and from stakeholders
- Event logs and evaluations
- Activity logs and reflective diaries by CNS Local Coordinators.

Analysing mixed methods data

A mixed methods approach requires careful consideration of how the different strands of data will be integrated. This evaluation will adopt an integrative mixed methods approach, which means that the qualitative and quantitative strands of data will be analysed independently followed by a stage where the data will be integrated and synthesized.

There is a range of different strategies for integrating data that the team will consider (Dixon-Woods et al 2005; Mackenzie and Blamey 2005). The research and evaluation team will select those methods that are most reliable in facilitating interpretation. Dyson and Kerr (2014) provide a useful example of integrating mixed methods in their evaluation of out of school time activities and extended services in England.

Data management

The data management plan will provide:

- a description of the data to be collected / created
- standards / methodologies for data collection and management
- ethics and Intellectual Property concerns or restrictions
- plans for data sharing and access
- a strategy for long-term preservation.

Under the GDPR, the research and evaluation team is also required to produce a Data Protection Impact Assessment.

Ethics

The research and evaluation team have been granted ethical approval for the work in the first Children's Neighbourhood site, which covers the participatory work and stakeholder interviews. The applications detail the research methods and address any concerns regarding research with vulnerable participants and the handling of sensitive data. The team have updated the ethics approval for new sites with the College of Social Sciences (University of Glasgow) Ethics Committee.

The research and evaluation team

Key to the success of the CNS evaluation will be the ability of the research and evaluation team to build trusting relationships with children and young people; their families; local partners and CNS local coordinators. This is crucial since it is their experiences and assumptions about how the world works and how change occurs in practice that will inform data collection and analysis. Members of the team have substantial experience as practitioners and researchers in participatory and collaborative projects in high poverty areas. They will contribute both academic expertise and practical experience to the evaluation of CNS.

Team members have been assigned to workstreams (see the <u>CNS website</u> for academic profiles and biographies). This clear delineation of roles and responsibilities will ensure that our approach provides a balance between supporting the development of the CNS programme while at the same time maintaining a critical distance as evaluators.

Communications and sharing learning

The research and evaluation team will share findings as the programme develops so that the evaluation work can help to inform the programme design and delivery. The team will contribute to a programme of learning events and will produce publications to contribute to the evidence base on place-based approaches and capabilities for children and young people.

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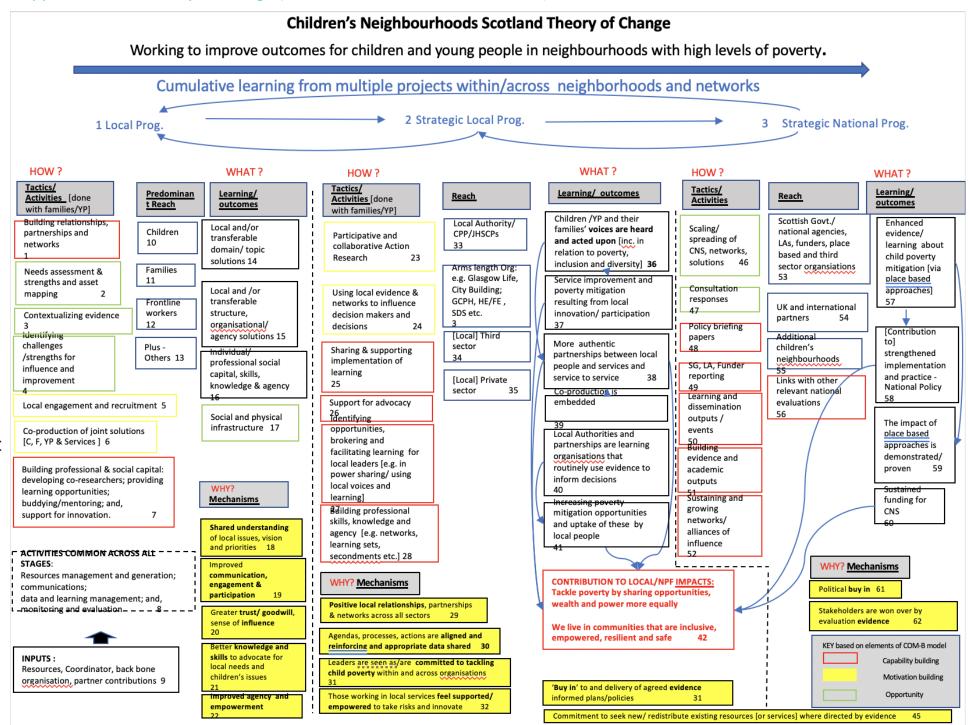
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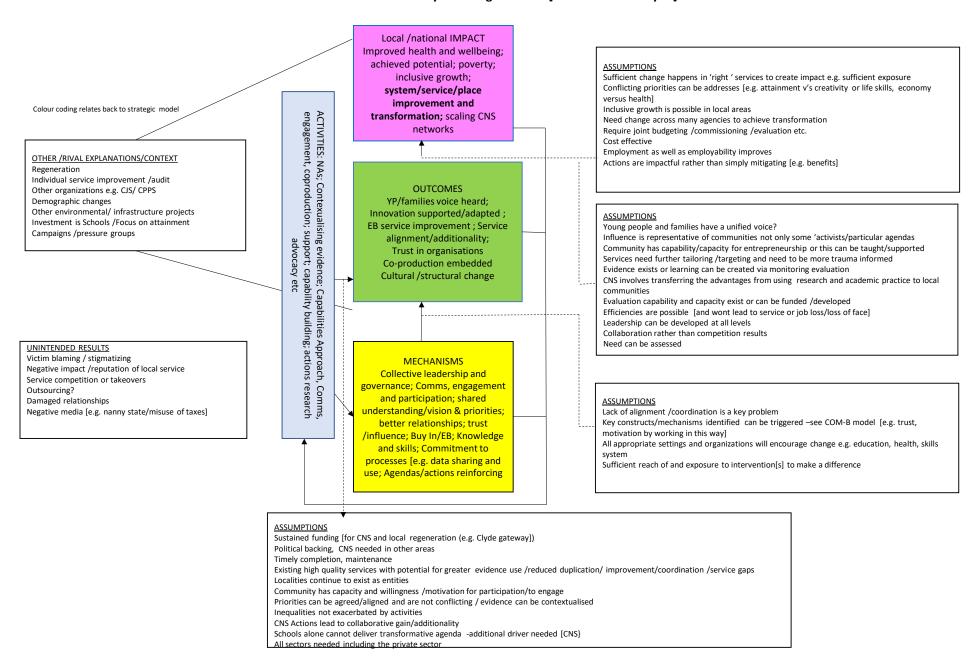
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DRAFT Theory of Change for CNS [contribution analysis]



Appendix 2 Example of a neighbourhood change model

Context analysis

•Long history of regeneration. High levels of derelict land associated with industrial past. Strong football culture and deep-rooted sectarianism. Ongoing housing and physical regeneration. Issues with access for CYP to local facilities and the social infrastructure – loss of community centres and meeting spaces. A quarter of households are overcrowded.. Levels of child poverty are much higher than the Glasgow average Diversifying population.

Inputs

- •Local Coordinator (new coordinator being recruited)
- Researchers (3 full time until December 2019)
- •CNS programme team and leadership team (principle investigator, co-investogators (x2), prorgamme director, research and evaluation team lead)
- •CNS admin and communications team
- Scottish Government funding
- •Local partner contributions (e.g. in-kind support of staff time from key local organisation)

Activities

- Participatory research activity -capabilities research; context analysis needs and assets assessments (creating new knowledge and opportunities)
- Engagement and coproduction processes with CYPs (motivation to change)
- •Support for strengthening collaborative work and improving implementation (capacity building)
- •Knowledge mobilisation and influencing strategies infographics, briefings, attendance at local meetings (motivation)
- Provision of learning/ training in advocacy, facilitation, public engagement and collaboration and evaluation (capacity building)

Processes

- Provision of high quality participation processes to develop the capabilities of CYPs
- •Improving trust, interdependence and quality of communication in collborations between local stakeholders
- •Improved collaboration between CYP and Glasgow University
- •The local workforce working with CYP and families are supported to innovate

•Inc

- Increase in agency
- •Increase in knowledge and skills
- •Increase in opportunities to exercise agency and achieve capabilities goals
- •Increase in feeling of influence
- •System wide change new embedded ways of working leading to place-based improvement and transformation

Appendix 3 Key academic theories and concepts

	Description	Definitions
Asset-based approaches	Asset-based approaches sit in contrast to existing 'deficit-based' approaches, which tend to focus on the problems and deficiencies of individuals and communities and, in so doing, lead to disempowerment and encourage dependency on needs-orientated services (GCPH, 2014). Asset-based approaches offer a set of concepts for identifying and enhancing the protective factors that help individuals and communities maintain and enhance their health even when faced with adverse life circumstances (Garven, McLean and Pattoni, 2016).	Assets based approach is about promoting and strengthening the factors that support good health and wellbeing, protecting against poor health and building and fostering communities and networks that sustain wellbeing (Hopkins and Rippon, 2017).
Capabilities	The Capabilities Approach (CA), conceived by Sen (2009) and Nussbaum (2011), is a framework of social justice. The capability approach entails a critique of other evaluative approaches, mainly of the welfarist approaches in welfare economics and on utilitarian and income-based or resources-based theories. The focus is on evaluating 'what is each person able to do and to be' (Nussbaum, 2011:18). The CA framework consists of a series of capability 'domains'. Achievement of potential entails identifying the domains that children and young people value, linking individual and collective goals to opportunities and agency.	
2 11	See CNS Lit Review – (Ward 2018). See also (Ibrahim & Alkire 2007; Robeyns, 2017).	
Collective impact	The collective impact approach is premised on the belief that no single policy, government department, organisation or programme can create the type of outcomes needed to generate real and lasting social change. The approach calls for a new way and model of working, where organisations working together can agree a set of measurable goals and coordinate their actions effectively to achieve these goals. The approach is distilled into five conditions: (1) a common agenda, (2) shared measurement, (3) mutually reinforcing activities, (4) continuous communication, and (5) backbone support.	Collective impact is defined by Kania and Kramer (2011) as "the commitment of a group of important actors from different sectors to a common agenda for solving a specific social problem" (p. 36).
Empowerment	Community empowerment is more than the involvement, participation or engagement of communities. It implies community ownership and action that explicitly aims at social (and political) change. Community empowerment is a process of re-negotiating power in order to gain more control. Power is a central concept in community empowerment and health promotion invariably operates within the arena of a power struggle. 'Empowerment' refers to the process by which people gain control over the factors and decisions that shape their lives. It is the process by which they develop and increase their assets and skills and build capacities to gain access, build partnerships, networks, and their voice, in order to gain control (Labonte and Laverack, 2008).	Applying the capabilities approach Ibrahim and Alkire (2007), define empowerment as "expansion of agency". Agency, according to Sen (2009) is the ability of children and young people to act on behalf of what they value and have reason to value. Drydyk (2013) highlights that 'durable empowerment,' entails the transfer of

	Personal empowerment and community empowerment has been shown to be associated with more positive mental health (Baba et al 2017).	power from state authority or external agency to individuals and communities.
Neighbourhood context effects	The goal of neighbourhood effects research is to identify which mechanisms are responsible for socio-spatial inequalities at the neighbourhood level, and to ascertain the relative importance of different conditions (see Kintrea et al 2011 ¹⁴ ; Galster 2019). Neighbourhoods mediate and are mediated by both macro structures (e.g. political, economic, legal) and micro processes (e.g. perception and choice). Sampson (2019 P.7) argues that without effective policy intervention, neighbourhoods will perpetuate structural inequality.	
Social capital	Pierre Bourdieu defined social capital as "the aggregate of the actual or potential resources which are linked to possession of a durable network of more or less institutionalized relationships of mutual acquaintance or recognition" (Bourdieu 1985, p. 248). Through social capital, actors can gain access to economic resources; they can increase their cultural capital through contacts with experts or individuals of high social status; or they can become affiliated to valued institutions (institutionalized cultural capital) (Portes 1998). Putnam (2000) argued that social capital included three dimensions: networks, norms and trust. Khodyakov (2007) criticises studies of social capital for treating trust as a variable rather than a dynamic process. In practice, trustworthiness is assessed by interactions that take place over time and is made with reference to the future. This framing of trust as a dynamic process brings greater attention to processes of trust building and to multiple influences on trust as a 'leap of faith' (Giddens 1991).	Social capital has a range of definitions and interpretations within the literature (see for example McLean et al 2002). Trust is a process of constant imaginative anticipation of the reliability of the other party's actions based on (1) the reputation of the partner and the actor, (2) the evaluation of current circumstances of action, (3) assumptions about the partner's actions, and (4) the belief in the honesty and morality of the other side. Khodyakov 2007: 126).

Process evaluation and relations (adapted from Moore et al 2015)

Contextual factors that influence how the approach works Contextual factors that affect (and may be affected by) implementation, mechanisms and outcomes Implementation What is delivered? – inputs, activities Mechanisms of impact **Description of CNS** and engagements Responses and reactions of How is delivery achieved? Proximity Outcomes approach and its participants to a specified model or approach and assumptions Behaviours and practices Knowledge and skills adaptations (fidelity), the amount of activity (dose), participation (reach)



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A children's neighbourhood is an initiative that brings together people, resources and organisations in a neighbourhood area, so that all of those things can work together towards better lives for the children living there.

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