



EUROCITIES Social Innovation Lab

26-27 March 2019, Glasgow

Co-learning workshop 1 - Tuesday, 26 March 10.00 - 12.30

Venue: Grand Central Hotel, 99 Gordon Street, Glasgow



Workshop 1: Tackling urban poverty and new forms of inequality in cities

Case study: **Unlocking Social and Economic Innovation Together in Birmingham**

The co-learning workshops at the Social Innovation Lab in Glasgow will offer participants an opportunity to learn from and capitalise on the lessons learned from recent pilots of innovative approaches to social challenges in cities. Each workshop will examine in depth one case study of urban social innovation. Following the presentation of the case study, participants will discuss the lessons learned and how to apply them to other urban contexts.

Workshop 1 will discuss Birmingham's urban innovative action to address urban poverty and inequality by unlocking social and economic innovation in deprived areas.

Objectives

- Learn from the experience and lessons from Birmingham's urban innovative action
- Identify success factors that can help the transferability, scalability or replication of the innovative approach to other urban contexts
- Discuss challenges and obstacles in the implementation process and how to overcome them

Format

The format will be interactive with a strong focus on collaborative learning. The workshop will examine in depth one case study of urban social innovation. Following the presentation of the case study, participants will discuss the lessons learned and how to apply them to other urban contexts, such as in their own cities.

Structure of the workshop

10.00 - 10.20	Welcome and introduction to the workshop
10.20 - 10.50	Presentation of Birmingham's case study of urban social innovation
10.50 - 11.00	Individual reflection
11.00 - 11.15	World café round 1 - participants split into 3 groups to discuss 3 questions.
11.15 - 11.30	World café round 2 - participants swap table to discuss other question
11.30 - 11.45	World café round 3 - participants swap table to discuss other question
11.45 - 12.00	Sharing lessons learned in workshop plenary
12.00 - 12.25	Actions to transfer - individual reflection and plenary discussion
12.25 - 12.30	Next steps and closing of the workshop

Expected outcomes

- One **case study** of an urban social innovation to tackle poverty and inequalities
- Mapping of **factors** that cities could use to transfer and adapt the innovation to their city
- A list of **possible actions** that some cities could take to transfer and adapt the innovation

Questions for reflection

1. What can you learn from this case study of urban social innovation? What is the added value of this innovative approach?
2. What worked well and why? (identifying success factors)
3. What didn't work so well and why? (challenges/obstacles met in the process)
4. Which elements can be transferred to your city? (transferability factors)
5. Would you consider transferring (parts of) this innovative approach to your city?

CASE STUDY

City: Birmingham

Title of the city initiative: Unlocking Social and Economic Innovation Together (USE-IT)!

Topic: Rising inequalities and urban poverty

Short description: USE-IT is a system change initiative that looks at the impact that large assets, their commissioning, employment strategies and interactions with local residents have on the area they are based in.

Year of implementation: 2016

Current situation: Extending / upscaling pilot

Link to webpage: <https://www.uia-initiative.eu/en/uia-cities/birmingham>

The challenge

The battle against poverty is particularly relevant in the light of the recent UN report on unprecedented levels of poverty in the UK.

Birmingham is one of the cities hit by changes to the UK benefits system through an early roll out of Universal Credit - new benefit system that has directly contributed to the increased number of homeless people in the city and unprecedented number of Food Bank users in near proximity of the wealthy city centre.

The costs of austerity fall disproportionately on the poor, women, ethnic minorities, children, single parents, asylum seekers and people with disabilities. Although USE-IT is not targeting children specifically, child poverty is an important measure of deprivation. 53.06% children live in poverty in the city centre, and child poverty is the highest in large cities, particularly in London, Birmingham and Manchester.

When working in the areas hit by poverty, matching people with jobs seems impossible. The project needs to start from building capacity of these people to start believing they stand a chance to enter the labour market. Rebuilding trust in the communities is key.

Previous experiences

The current levels of poverty haven't been witnessed in the UK for decades. It is hard to compare the current needs with interventions from the past. Many successful regeneration schemes have been implemented in the past but what we deal with currently requires radical system changes. We have taken the following learning from the past: top-down regeneration (trickle down) doesn't work and bottom-up is short lived if it's not funded.

The solution

USE-IT project meets the top-down (investing in infrastructure) and bottom-up (investing in communities) approaches to regeneration and focuses on building bridges between large assets (anchor institutions) and communities. The project is trying to change the system so that the system leaves less people behind.

After two years of delivering the USE-IT project it can be said that the success of this intervention stems from the way the project is approaching anchor institutions. The process of 'unlocking assets' to change how they interact with their adjacent communities is crucial to understanding inequalities and what can be done to change the situation.

Expected impact

USE-IT is a system change initiative that looks at the impact that large assets, their commissioning, employment strategies and interactions with local residents have on the area they are based in. We have analysed the impact West Birmingham and Sandwell NHS trusts have on the nearby community by altering their behaviour - encouraging them to employ local migrants with relevant medical qualifications, engage in partnerships with local third sector (NGO) organisations and social enterprises as well as encouraging them to analyse what impact their spending has on the immediate proximity of the hospital. So far, the most impressive results have been noticed in the area of employment.

We are focusing our final project year on working with large assets/anchor institutions to allow space for social enterprises in the supply chains.

At the same time, a lot of work has been put in building capacity on the communities to be the partner for discussion with large organisations (assets). We see a lot of positive activities take place in communities but very few are done to improve connection with their local assets and open opportunities for the communities, i.e. new contracts, employment opportunities, new ways of utilising public space or that can be adopted by communities.

Key actors involved

USE-IT was co-created by a partnership of organisations. The idea was born out of successful earlier collaborations and policy work at the EU level (EU Poverty Platform). The project is an example of truly collaborative bid writing where every partner created their contribution: two local authorities (Birmingham and Sandwell), academia (University of Birmingham and Birmingham City University), social enterprise sector (Initiative for Social Entrepreneurs) and the private sector (KPMG).

We have 15 local partners involved in the project implementation: two local authorities, NHS, two universities, third sector organisations and social enterprises. Birmingham is the lead partner.

Key activities

The project has four delivery strands:

1. **Community research** - individuals from the most vulnerable communities are recruited and trained to become community ambassadors. After receiving formal accreditation, they can start conducting their own research on a subject linked to their community and their area. They are paid for their research and a part of the project's effort goes into setting up a legal entity (Social Lab) that would allow them to generate income after the project funding expires. Recruitment of community researches has been promoted through all possible channels like social media, leaflets, events and word of mouth.
2. **Matching job skills with demand** - in short, our results here are great. We are exceeding expectations already in terms of numbers of individuals supported i.e. we have engaged with over 200 professionals with overseas medical qualifications (22 of them already found employment within the NHS and more within the care sector) but what is more interesting is how the NHS changed their approach in the last two years as a result of working on the project. The success of this project is not that we've found the 200 people with relevant qualification, it is in unblocking some of the barriers within the NHS that were stopping them from accessing the jobs they were qualified for in the first place.
3. **Social enterprise and social production** - the success of this work strand is not that we are creating a large number of new social enterprises, but it is in making the enterprises self-sustained (breaking from funding dependency), working on their business plans, helping them to form consortia that subsequently can lead to greater chances in accessing larger contracts. Therefore, the system change here is crucial in that we are strengthening the capacity of the whole sector and raising awareness of social enterprises by establishing Birmingham as Social Enterprise City.
4. **Understanding and strengthening community assets and finance** - this strand of work still evolves as is our understanding of community assets and finance. Three geographically (self)selected communities are working on their Community Economic Development Plans (CED). The CED process is designed to lead to greater capacity on the community's side to access and utilise their local assets. This strand involves community researchers and support from social enterprise organisations to strengthen communities. The outcome isn't pre-defined. Each community will produce a CED plan but the plans will vary depending on the local assets and aspirations. Early expectations include establishing cooperatives, setting up a community hub and establishing better relationship with local businesses and services.

Implementation process

It is extremely challenging to manage a partnership of this size made of organisations that would have never worked together if there was no funding. At the same time, one of the biggest successes of this partnership is in the way we learned to work together.

As success factors we see the determination and drive of each individual partner and ultimately co-ownership of the project's aims and objectives. This is not a project forced upon partners - it has been co-designed and is developed in true partnership.

Results and impact

The last two years of delivering USE-IT have resulted in some incredibly powerful stories. It is not a project designed to support a large number of people but those supported confirm that their lives have changed.

USE-IT is breaking with funding dependency by creating systems that don't leave behind people in the most vulnerable communities. It is about testing how inclusive growth can be unlocked in cities that are growth driven, like Birmingham.

We have exceeded all our targets:

- 60 community researchers were trained. Their involvement in the project resulted in income streams.
- Almost 200 individuals with overseas medical qualifications have been engaged - against our target of 60.
- All 200 individuals are on the pathway to employment within the NHS. 22 have already been employed.
- 120 social enterprises have been supported.
- 3 large communities have been mobilised to create their own Community Economic Development Plans (bottom up).

Our main anchor institution, West Birmingham and Sandwell NHS Trust, admits that before we started the project they have not had any working relationships with organisations in the communities. Now, after two years, they work with 30 local organisations. It is estimated that there are measurable savings to the NHS generated as a result of USE-IT! interventions - the project is saving NHS considerable money they would otherwise need to spend on agency workers or other more costly solutions.

The project has gained a lot of positive attention within the city and the local authority as well as the West Midlands Combined Authority. Discussions about replicability are on-going.

Testimonials

Please, watch the film: <https://www.youtube.com/watch?v=oChOuHxzjZ0&t=3s>

Financing

The project is funded through Urban Innovative Actions under the Poverty theme, which puts us at the forefront of the battle against poverty.

The major cost of the initiative is time resources. Most of the activities include training. We do unlock spaces that may be needed by the community, but this isn't budgeted in the project. We don't use volunteers time and always when possible pay for people's time, i.e. community researchers time is paid for. It is crucial because we deal with in-work poverty a lot and people who are at work (often juggling two or three jobs, zero hours contracts, etc.).

Follow-up

We have already started working on the transfer. The work with hospital has already been replicated by Black Country NHS Trusts (adjacent area) in the form of the HOP programme.

We are looking to replicate the whole USE-IT model into the east of Birmingham (discussions on-going). We are also involved in an URBACT Transfer Network REMIX where elements of

the USE-IT model have been used in the description of the best practice - allowing for other cities to learn from it and replicate.

We have a draft mid-term evaluation report from the project - its final version should be ready by the end of March/early April.

Contact details

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Additional information

Statement on Visit to the United Kingdom, by Professor Philip Alston, United Nations Special Rapporteur on extreme poverty and human rights

https://www.ohchr.org/Documents/Issues/Poverty/EOM_GB_16Nov2018.pdf

Article in the Guardian: 'Key points from UN envoy's report on poverty in Britain'

<https://www.theguardian.com/society/2018/nov/16/key-points-un-envoy-philip-alston-report-poverty-britain-uk>

Statistics on child poverty

<http://www.endchildpoverty.org.uk/poverty-in-your-area-2018/>

Community Economic Development Plans

<https://www.uk.coop/developing-co-ops/community-economic-development>

Testimonials on the four programmes integrating USE-IT!

https://www.youtube.com/watch?v=oChOuHxzjZ0&list=PL_nMkJDG_sDkqsSiQaQ6Tn515LNfNoomy&index=5

USE-IT! Gets national attention

<https://www.uia-initiative.eu/en/news-events/useit-gets-national-attention>

Article in the Guardian: 'How retraining refugees could help tackle NHS staffing crisis'

<https://www.theguardian.com/society/2019/feb/13/refugee-scheme-nhs-staffing-crisis-work-placements>

Raffaella Goodby - NHS Skills Matching with USE-IT!

https://www.youtube.com/watch?v=xKf29F7_YEs&list=PL_nMkJDG_sDkqsSiQaQ6Tn515LNfNoomy&index=2



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<http://ec.europa.eu/social/easi>