

A co-designed proposal commissioned for:

NIHR | Health Determinants
Research Collaboration
Tower Hamlets



Harnessing Collective Power:

A Cross-sector System for Peer and Community Research in Tower Hamlets



March 2025

Full Report

Harnessing Collective Power: A Cross-sector System for Peer and Community Research in Tower Hamlets

Facilitation Team:

Xia Lin, Bethan Mobey, Megan Clinch, Sara Papparini

Peer and Community Research Team:

Amani Rahman, Lily Islam, Loubna Bijdiguen, Phil Samba,
Shazna Begum, Shazna Hussain, Tanjida Rahman, Yesmin
Begum

A co-designed proposal commissioned for:



About the HDRC

In 2022, Tower Hamlets Council and its core partners received five years of funding from the National Institute for Health and Care Research (NIHR) to establish the Tower Hamlets Health Determinants Research Collaboration (HDRC). The goal of the HDRC is to make Tower Hamlets a borough that can enable high-quality, collaborative, applied, impactful, and co-produced research on the factors driving health inequalities. To achieve this, the Tower Hamlets HDRC is committed to strengthening and developing community research, ensuring that health determinants research is co-produced with residents and local communities.

About the Project Team

Our project team consists of eight peer and community (P&C) researchers, two community-based researchers, and two university-based researchers, all of whom have experience conducting research on the wider determinants of health.

The P&C researchers in this project are Amani Rahman, Lily Islam, Loubna Bijdiguen, Phil Samba, Shazna Begum, Shazna Hussain, Tanjida Rahman and Yesmin Begum. Prior to this project, they have participated in a variety of P&C research activities, including:

- Patient and Public Involvement activities for academic and health service projects;
- Participatory action research projects at Toynbee Hall;
- Peer research projects at Bromley by Bow Centre;
- Food Lives Matter Community Research with Women's Environmental Network and University of Sussex;
- Partnership for Black People's Health at Queen Mary University of London;
- Community Insights Programme at Tower Hamlets Council.

This project is led by Xia Lin and Bethan Mobey, with support from Megan Clinch and Sara Paparini.

- Dr Xia Lin is a consultant in co-production, research, and evaluation, and was formerly the Head of Policy, Research, and Community at Toynbee Hall. Xia has led over 25 participatory action research projects focused on issues such as health, poverty, and adult education. Recently, she developed and delivered P&C research learning workshops for government officers from 15 organisations at local, regional, and national levels.
- Bethan Mobey specialises in participatory approaches to research, policy and service development. In recent years, Bethan has managed a variety of participatory action research projects along with Xia Lin. She is currently managing a borough-wide programme at Women's Environmental Network

focused on developing a fairer food system with 25 partners and a group of residents and community representatives creating community research.

- Dr Megan Clinch is a Reader in Anthropology of Public Health at Queen Mary University of London (QMUL). She studies and conducts participatory health and planetary health research. With Sara Papparini she has developed and delivered a P&C research training course and an evaluation course for small community organisations. She also leads on public involvement in research at the Wolfson Institute of Population Health, QMUL.
- Dr Sara Papparini is a Senior Lecturer in Public Health and Equity at Wolfson Institute of Population Health at QMUL and the social science lead for the SHARE collaborative. Sara is an anthropologist working at the intersection of public health, anti-racist and participatory health research to achieve health equity. She has also worked in the NHS carrying out social research on HIV in East London hospitals and in the HIV voluntary sector.

Acknowledgement

We would like to express our profound thanks to all those who contributed to this project. Our deepest gratitude goes to the peer and community researchers, community organisations, council representatives, NHS representatives, and academic researchers who generously shared their time, insights, and expertise throughout this project.

Thank you to everyone involved for playing a vital role in our collective effort towards enhancing peer and community research and driving positive social change in Tower Hamlets.

Contact

For more information about the project, please contact:

- Xia Lin: Xia.Lin.Khan@outlook.com
- Bethan Mobey: Bethan.Mobey@gmail.com

Contents

Executive Summary	4
Background	9
Objectives	14
Methods	14
1. Literature Review	15
2. P&C Research Team Recruitment.....	15
3. Co-designing the Survey	15
4. Survey Data Collection	16
5. Survey Analysis.....	17
6. Co-producing the Recommendations	17
7. Report Writing and Dissemination.....	17
Findings and Recommendations	19
1. Project Co-design: Rose, Bud, Thorn of P&C Research	19
2. Survey Findings: Current Activities of P&C Research	23
3. Co-production Workshops: Recommendations for a P&C Research System.....	29
Conclusion.....	37
References	40
Appendices.....	43
Appendix 1: Examples of P&C Research Activities in Tower Hamlets.....	43
Appendix 2: Roses, Buds, Thorns of P&C Research - Key Themes	49
Appendix 3: Co-designed Survey	51
Appendix 4: Co-production Workshop Guide	58

Executive Summary

This report presents findings from scoping research that aimed to understand current peer and community (P&C) research activities in Tower Hamlets and co-produce recommendations to support a more sustainable and impactful P&C research system in the future.

Commissioned by Tower Hamlets Council's Public Health Division for the Tower Hamlets Health Determinants Research Collaboration (HDRC), the goal of this work is to strengthen the delivery and use of P&C research in local policy making. The HDRC provides an opportunity to build knowledge and prompt culture change across the Council to meet this aim. Given this, the findings and recommendations from this work will support the work of Council Officers, Elected Members, community organisations, academic researchers, and other statutory service providers, who seek to amplify resident voice and meet resident needs in their research, policy and service delivery work. Most importantly, we hope the findings and recommendations will support residents participate in health determinants research and policy making in a meaningful and equitable manner.

Led by a team of 12 P&C researchers and research practitioners, this project engaged council teams, NHS organisations, community organisations, academic researchers, and additional P&C researcher stakeholders. It took a collaborative approach and included a co-designed survey (completed by over 70 participants), and two cross-sector stakeholder workshops. Over 50 participants attended the workshops, in which they discussed the survey results and used them to inform the co-production of recommendations aimed at establishing a P&C research system.

Headline Findings

The survey and workshop discussions identified many challenges and successes regarding current P&C research practice in Tower Hamlets.

1. Lack of Cross-Sector Collaboration

There appears to be no prior comprehensive review of P&C research across local authority, health service, academic, and community settings in Tower Hamlets. Collaboration is limited regarding the funding and commissioning of P&C research, the dissemination and use of P&C research generated evidence, and support and training for P&C researchers. However, with at least 25 organisations involved in commissioning, supporting, and conducting P&C research, the borough demonstrates huge potential for more coordinated efforts.

2. Current P&C Research Process and Methodology

One in three organisations that took part in the survey noted that P&C researchers are not involved at all stages of the research and policymaking process. Traditional research methods (e.g. surveys, interviews, focus groups) dominate (81%-92%),

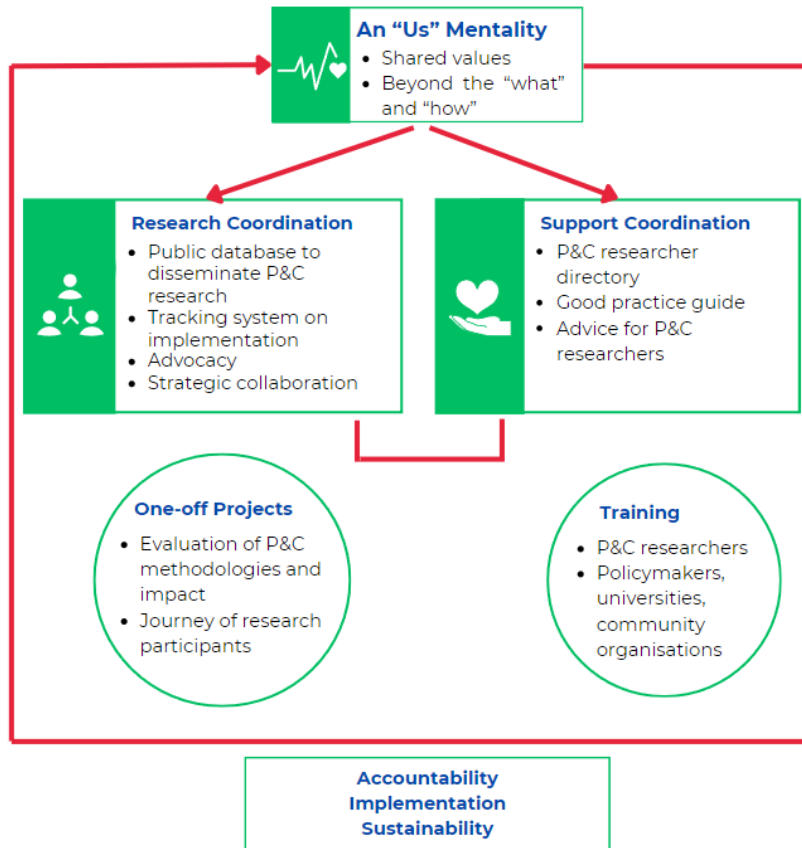
especially in public and academic sectors. Projects led by the voluntary and community sector (VCS) utilise more creative, decolonial and action-orientated approaches. This highlights an opportunity for public and academic sectors to learn from each other, explore non-traditional methods, and strengthen co-production efforts.

3. Compensation and Support

More than half of the P&C researchers surveyed receive compensation through incentives, but 32% of them indicated a preference for contracted work opportunities. The diverse training needs of P&C researchers, policymakers, academic researchers, and community organisations who wish to commission, support and conduct P&C research are not currently met. This highlights the need for better training and support systems around P&C research for *all* stakeholders.

Co-produced Recommendations to support a P&C Research System in Tower Hamlets

Through the co-production workshops, participants developed a set of recommendations in response to the survey findings. These recommendations fall into two categories: the first focuses on the values and culture that should underpin the P&C research system, while the second offers practical guidance on commissioning, supporting, and delivering P&C research. These categories aim to ensure accountability, effective implementation, and the sustainability of the Tower Hamlets P&C research system.



1. Values and Culture

An “Us” Mentality: P&C research and practice should be underpinned by a collaborative mindset to ensure it is equitable and built on values agreed and shared by all stakeholders. Traditional approaches to knowledge creation should be challenged to raise awareness and address the power dynamics and different levels of privilege associated with certain groups, research methods and approaches to policy making. We recommend that the HDRC fund a cultural development programme to establish these values and embed them in P&C research practice.

2. Practical Recommendations

Currently, the potential of P&C research is not realised due to the fragmentation of P&C training and support, short term funding for projects and a piecemeal approach to disseminating findings and achieving policy change. We recommend that the HDRC fund and/or promote two coordinating activities. First, the coordination of funding and dissemination of P&C research and second, the coordination of support for P&C research and researchers. When making decisions about who undertakes these coordination tasks it is important to remember the importance of power sharing and the excellent skills and expertise already present within the VCS.

Coordination of the funding and dissemination of P&C research: This activity would support all stakeholders to collaborate on things such as: identifying research topics, commissioning research/applying for research funding, and disseminating research to inform and transform local policy. This approach will enhance the efficiency, accountability, impact, and sustainability of P&C research.

We recommend that the HDRC:

- Advocate for collaborative fundraising with other organisations, piloting participatory commissioning, pooling funding based on themes, and improving transparency about who receives funding for P&C research and for what purposes within the council.
- Fund the access to/development of a database to make all existing and future P&C research publicly available.
- Advocate for mandatory reviews of pre-existing academic and P&C research. This will ensure that new research projects are built on established evidence and network of researchers from all sectors who have expertise in similar topics.
- Advocate for all P&C research providers to include a thorough explanation of methodologies in project reports and dissemination activities.
- Secure resources and funding to evaluate P&C research methodologies and understand the experience and impacts P&C research has on P&C researchers, and how its benefits can be sustained in the long term.

- Secure resources and funding to conduct P&C research on resident experience of research, focusing on identifying areas for improvement, such as the dissemination of findings and using P&C research to inform policy change.
- Fund a website or public tracking system to communicate the implementation and impact of P&C research within the council.

Coordination of P&C research training and support: Ensure that P&C researchers and research-active organisations receive adequate support, including timely and flexible payment methods, specialist advice on how payments impact welfare benefits, and opportunities for personal and career development. Coordinate training for P&C researchers, policymakers, universities, and community organisations, using training as a driver to address power dynamics and decolonise research and policy making.

We recommend that the HDRC:

- Fund a P&C researcher directory to ensure long term opportunities for P&C researchers.
- Advocate for improved payment policies and practices, with accessible and specialist advice for P&C researchers on the impact of research involvement payments on welfare benefits. As part of this effort, develop a good practice guide for P&C research that includes: 1) an account of the value and impact of P&C research and the unique skills of P&C researchers; 2) guidelines on payment including a directory of available welfare benefits advice.
- Urge the HDRC's funder, the NIHR, to lobby for clearer guidance from the Department for Work and Pensions (DWP) regarding benefit claimants who receive payments as P&C researchers.
- Coordinate training for P&C researchers, policymakers, academics and community organisations. Training for policymakers, academics and community organisations should focus on ethical and meaningful engagement with residents and the value of P&C research for local policy. Training for P&C researchers should include accredited training and mentorship delivered by a group of research-active local stakeholders.

The findings and recommendations in this report reflect the collective effort to create a stronger and more inclusive system for P&C research in Tower Hamlets. The goal of this collective effort is to achieve health equity across the borough by ensuring a rich, diverse and resident centred evidence base to guide local policymaking. By adopting an "us" mentality we can harness our collective power and expertise to transform how research informs policy, ensuring that community voices are at the heart of decision-making.

Background

What is peer and community research?

Peer and community (P&C) research is a key part of health and health inequalities research. P&C researchers are individuals with personal experience of a specific issue (such as a health condition), a geographical area, or a group identity (1-3). They actively participate in conducting research on these topics. The term “P&C researcher” is used to show that their role is different from a “researcher” (e.g. university-based or community-based researchers), highlighting their unique knowledge and skills without suggesting that one role is more important than the other.

P&C research helps support democratic involvement in health, social care and other public systems by generating knowledge and evidence from the ground up to inform policy. This approach aims to tackle inequalities directly and explicitly. Unlike most academic and service-based researchers, P&C researchers bring unique expertise, experience, and connections, allowing them to co-produce research with communities that are often the focus of, but not fully engaged in, research efforts (4-10). By involving communities in developing research and solutions, P&C research can lead to equitable solutions that are more likely to succeed (11).

How is peer and community research supported and organised?

This project builds on the ongoing development of P&C research within public sector organisations, universities, and community groups in Tower Hamlets (see Appendix 1 for examples). Prior to the pandemic, Tower Hamlets Council piloted the Community Insights Programme (CIP) (22), which included a network and repository for community insights. The programme created a centralised space to find information about research projects and opportunities. Progress on the repository has been limited due to user interface challenges, insufficient funding, and the diversity of forms that community insights data comes in. The CIP was suspended in 2019. Tower Hamlets Council’s Poverty Review (23) also collaborated closely with P&C researchers from a community organisation to conduct co-produced research. Additionally, three local universities have undertaken training and research activities related to P&C research, while several community organisations have conducted P&C research projects at the local, regional, and national levels (see examples 25 and 26). Despite these activities, there appears to be no comprehensive understanding of P&C research in Tower Hamlets.

In the UK and beyond, efforts are made to support P&C research and co-production at local, regional, and national levels. The Greater London Authority (GLA), for example, has been working to integrate community insights into policymaking, aiming to move beyond traditional text and data formats. The GLA is currently developing a peer research toolkit and plans to launch a community insights hub, along with a guidance for policymakers, later this year. Several P&C research and

co-production networks exist, such as the [London Peer Research Network](#) led by Partnership for Young London, the [Peer Research Network](#) at the Young Foundation, and the [Co-production Collective](#) at the University College London. They are often hosted by organisations that encourage networking, information sharing, and offer training and events while also serving as P&C research providers.

Internationally, organisations have been established to support P&C research. In Canada, for instance, [Community Based Research Canada](#) (CBRCanada) was founded as a non-profit organisation comprising over 60 universities, colleges, community organisations, and other institutions advancing a community-based research approach. While individuals can join, the number of P&C researchers involved is unclear. CBRCanada offers a repository of resources, research projects, and publications on community and peer research, as well as a directory of involved organisations. It operates on membership fees, and is governed by a Board of Directors consisting of researchers and non-profit leaders from across Canada. A Secretariat oversees day-to-day operations.

What are the challenges of delivering peer and community research?

Evidence from across the UK highlights several challenges to the effectiveness and impact of P&C research (12-19). For example, a review of peer research in the youth sector in London found a lack of capacity to deliver effective, appropriate, and accredited training for P&C researchers (20). The knowledge gaps and challenges in implementation mean that collaboration between P&C researchers and organisations, even with good intentions, can sometimes lead to P&C researchers feeling disempowered and their participation remaining only at a surface level throughout the research process (19).

Our literature review indicates a need to review P&C research activities in Tower Hamlets and to develop a sustainable system for P&C research. Without such a system, the full potential of health and health inequalities research in Tower Hamlets - particularly the development of local solutions to address inequalities - cannot be fully realised.

How has the project come about?

In 2022, Tower Hamlets Council and its core partners received five years of funding from the National Institute for Health and Care Research (NIHR) to establish the Tower Hamlets Health Determinants Research Collaboration (HDRC). The goal of the HDRC is to make Tower Hamlets a borough that can enable high-quality, collaborative, applied, impactful, and co-produced research on the factors driving health inequalities. To achieve this, the Tower Hamlets HDRC is committed to strengthening and developing community research, ensuring that health determinants research is co-produced with residents and local communities. Establishing a co-produced P&C research system with relevant stakeholders - including P&C researchers based in Tower Hamlets, research-active VCS organisations, academic researchers, and local authority officers - will support the

HDRC in enabling residents to conduct research that informs local policy and brings about positive change for the community.

Project approach and structure

To understand the current state of P&C research in Tower Hamlets and how it might be better supported in the future, the project is structured around the typical journey of a P&C research project (see Figure 1). This journey is based on the experiences of the project team and other projects stakeholders including research-active VCS organisations, council officers and academics. By developing an account of the challenges and possibilities at each stage of the journey it becomes possible to suggest actions and activities for how it might be improved.

Journey of a P&C Research Project

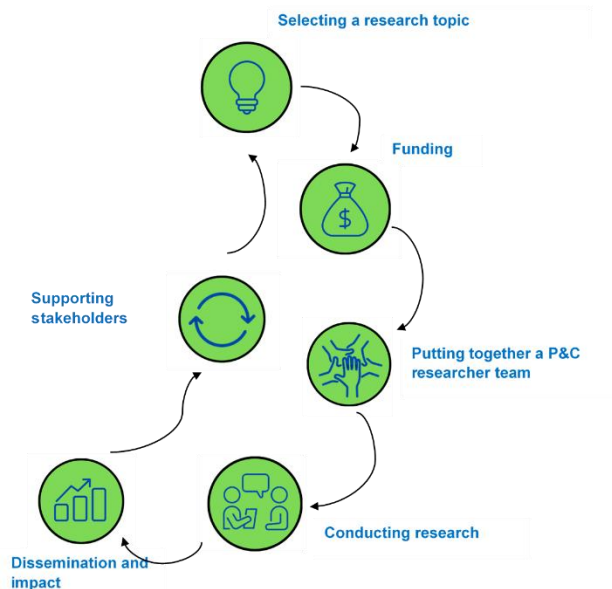


Figure 1: Journey of a P&C Research Project

1. Selecting a Research Topic

A P&C research project often begins with the identification of a specific topic that needs investigation. This can be initiated by communities, commissioners/funders, or research-active organisations/individuals (e.g. community organisations, universities, independent consultants).

2. Funding

P&C research in Tower Hamlets can be independently funded through a grant, internally funded by an organisation, or a P&C research team can be commissioned by an organisation to undertake a research project on their behalf. Examples of these different approaches are described below:

- Independently funded: A research organisation secures funding for P&C research it wishes to undertake and then uses the research findings to develop recommendations for policymakers they wish to influence. For example, the [Blueprint Architects group](#) is funded by the National Lottery, with the goal of influencing the council’s decision-making on food and climate issues.
- Internally funded: A council department might coordinate a team of community researchers, with internal funding set aside for this team. Government organisations like the [London Borough of Camden](#) and the Greater London Authority’s [Peer Outreach team](#) facilitate P&C research in-house. The Community Insights Programme in Tower Hamlets was an in-house

programme funded by the Tower Hamlets Council who delivered projects on a range of topics to support the development and delivery of council services and initiatives.

- Commissioned: The Council or NHS commissions a research provider to conduct P&C research that feeds into a specific strategy or policy. An example is Toynbee Hall being commissioned by the Council to carry out community research for the [Tower Hamlets Poverty Review](#).

Some funders in London have implemented participatory commissioning in their grant-giving processes, involving residents from the outset. Examples include [Shift Design](#) for Trust for London, [Black Food Fund](#), and Thrive LDN's [Right to Thrive Fund](#).

3. Putting Together a P&C Research Team

When funding is secured, organisations typically begin recruiting P&C researchers, although the ideal scenario would be to involve them at the point of deciding a topic.

4. Conducting Research

While many organisations aim to co-design research methods with P&C researchers, this process is often constrained by funders requiring methods to be outlined before the P&C research team has been established. Once methods are finalised, the P&C researchers will deliver projects in collaboration with research practitioners (e.g. community-based researchers or university-based researchers).

5. Dissemination and Impact

As a minimum, organisations usually share research findings through reports and/or presentations. If research is created or commissioned for the council's decision-making, the council will attempt to learn from it and use it to inform their decisions to some extent. However, the process for this is currently unclear. Sometimes, organisations and/or P&C researchers are involved in implementing the findings. At other times, research providers use their research to create change through campaigning or by putting pressure on the council to make their recommendations a reality.

6. Supporting Stakeholders

Most organisations are focused on supporting stakeholders and improving their practice and approach to P&C research, such as offering training and enhancing payment procedures. We are not aware of any existing P&C research training specifically targeted at organisations in Tower Hamlets. However, the Greater London Authority recently supported Xia Lin (project lead in this study) in delivering P&C research learning workshops for policymakers from 15 local, regional, and national organisations.

Currently, training for P&C researchers is primarily delivered by P&C research providers and universities. For example, Megan Clinch and Sara Papparini (project leads in this study) designed and delivered a 5 day course to 10 P&C researchers

who work with different organisations in east London on various health and health determinants projects. Toynbee Hall and The Centre for Creative Collaboration at QMUL, are currently delivering [a project](#) that works with young P&C researchers to ensure they are meaningfully included in academic research.

Objectives

The aim of this project is to understand current P&C research activities in Tower Hamlets and co-produce a set of recommendations for a borough-wide system to support and sustain P&C research over the long term. To achieve this, the following research objectives were met:

- From the perspective of P&C researchers and other stakeholders (e.g. Council Officers, elected representatives, community organisations, academic researchers and other health and social care professionals) understand:
 - a. How P&C research is currently organised and delivered;
 - b. Current challenges to its long-term sustainability and impact
- With all stakeholders, co-produce recommendations to support more impactful and sustainable P&C research in the future.

Methods

This research took a Participatory Action Research (PAR) approach, actively engaging a team of current peer and community (P&C) researchers from Tower Hamlets. PAR integrates research, education, and action with a goal of driving social change (21, 24). Our project facilitation team worked in collaboration with the P&C researchers to meet the project aims.

The P&C research team comprises of eight P&C researchers who have worked with at least 15 organisations in Tower Hamlets and beyond on various projects. The P&C research team includes:

- Seven women and one man;
- An even spread of ages between 18 and 54 years old;
- A majority from a Bangladeshi background with smaller representation of African, mixed/multiple ethnic background;
- People with lived experience of being from the LGBTQIA community;
- People with lived experience of being disabled.

Unlike other P&C research projects, which often involve recruiting individuals less familiar with the approach, our project required P&C researchers with diverse and extensive P&C research experience. The team's deep understanding of working with multiple organisations provided valuable insights into P&C research activities and system. Their familiarity with the approach and prior experience also enabled the project to be completed successfully within a short timeline (four months), with necessary adjustments made to induction, project design, analysis, and training/support.

The project facilitation team of four research practitioners (two community-based researchers and two university-based researchers) brings together extensive

experience, having delivered over 25 P&C research projects and two P&C research training programmes. Each team member has lived and/or worked in Tower Hamlets for over a decade, which has helped us to secure the support of numerous P&C researchers and representatives from various organisations. Our collective knowledge and experience in P&C research have been beneficial in the rapid and effective development of this four-month project.

The project was delivered from May to August 2024. This timeframe was set to align with timelines for the development of the Tower Hamlets HDRC, particularly their aspiration to bring together and enhance P&C research capacity through their programme of work.

The project was iterative and action-focused, with all project recommendations developed directly in collaboration with participants and summarised by the facilitation team. Below is an account to the methods used to generate and analyse data and co-produce recommendations with the P&C research team and other project stakeholders.

1. Literature Review

A literature review was conducted on current P&C research activities across Tower Hamlets and London to understand who is conducting P&C research and how. The review also sought to understand the dynamics between research providers, P&C researchers, and policymakers (see Appendix 1 for examples). A brief review of P&C research systems in the UK and beyond was also included (see Background section above). The results of this review were used to inform the design of the survey and orientate the discussion at the co-production workshops by providing examples to inspire recommendations.

2. P&C Research Team Recruitment

Recruitment materials were sent out to a broad range of networks, with targeted correspondence sent to organisations working with P&C researchers. The facilitation team also sent invitations directly to P&C researchers they had worked with previously. The recruitment form was live for less than three weeks and received 25 submissions. A group of 8 P&C researchers were selected on the basis of the diversity of their P&C research experiences and demographics. Maximum effort was made to ensure the diversity of the P&C research team. For example, a young P&C researcher was sought out when it became clear that no one between the ages of 18-25 had responded to the call for participants. Applicants who were not selected to become members of the project team were invited to take part in the co-production workshops.

3. Co-designing the Survey

Two half-day workshops were conducted to co-design the survey, which aimed to better understand P&C activities in Tower Hamlets. These discussions also began to

identify components and functions of a future P&C research system in the borough based on the experiences and aspirations of the workshop participants.

The process began with a workshop with the P&C research team, followed by a second workshop with 14 organisational representatives from the VCS, universities, the NHS, and the Council. In both workshops, a "rose, bud, thorn" activity was used to explore the strengths, potential, and weaknesses of P&C research in Tower Hamlets, which will be presented in the findings section (see Appendix 2 for notes and themes). This activity was followed by a discussion to develop the survey questions. The P&C research team was involved in identifying and shaping these questions, which were then commented on by the group of wider stakeholders to make sure that their knowledge and experiences were also accounted for.

After these workshops the facilitation team further refined the questions and produced a final survey (see Appendix 3) that was organised into the following sections:

1. Information of role and involvement in P&C research;
2. Methodologies currently used in P&C research;
3. Strengths and weaknesses of involvement in P&C research;
4. Potential areas for improvement of P&C research.

To keep the survey manageable demographic questions were excluded. The project team then piloted the survey before the data collection phase.



Figure 2: Rose, Bud, Thorne of P&C Research in Tower Hamlets

4. Survey Data Collection

The survey was promoted through various networks, including the HDRC, Tower Hamlets Council for Voluntary Services (THCVS), and existing contacts of the facilitation and P&C research teams. Over a period of around three weeks 72 valid responses were gathered, with more than one-third (35%) coming from P&C researchers. The respondents included a fairly balanced mix of representatives from VCS (24%), universities (17%), and the public sector (19%), along with a small number of funders and independent consultants (5%). It was challenging to include certain communities through the online survey, such as P&C researchers who are digitally excluded. To mitigate this, we offered to accept group responses if community organisations could conduct the survey (or part of it) with P&C

researchers. The relatively small sample size limited our ability to analyse specific sectors, making any sector-specific findings indicative rather than definitive.

5. Survey Analysis

The facilitation team conducted descriptive and correlation analyses on the survey data to identify key trends and differences in perspectives among various stakeholders. Free text responses in the survey were synthesised into key themes. Following this, a half-day workshop was held with the P&C research team to further examine the survey results together and pinpoint issues, concerns and proposed solutions that could be used to inform the co-design of P&C research system in workshops with a broader group of stakeholders. In the analysis workshop the project teams developed the idea of structuring the analysis of the survey data and co-design activities in terms of the journey of a P&C research project. This narrative enables all stakeholders to understand how and when different stakeholders (residents, P&C researchers, VCS organisations, Council Officers, Elected Members, academics) are involved the process of developing, delivering and implementing the results of P&C research, including areas of difficulty and success.

6. Co-producing the Recommendations

Two half-day co-production workshops were held with all stakeholders to make recommendations to support the design of a P&C research system (see workshop guide in Appendix 4). The sessions, presented in more detail in the findings section, began with an overview of the P&C research journey and a summary of the survey findings to ensure that the recommendations were rooted in the data and shared understanding of P&C research. Insights from the literature review were also introduced to inspire discussion and provide examples of P&C research coordination and practice across the United Kingdom. Over 50 people attended the workshops, including approximately 20 P&C researchers, 15 council/NHS representatives, 6 university researchers, and 12 VCS representatives. The P&C research team supported the presentation of findings and shared their experiences to illustrate challenges and opportunities.

Following the workshops, the facilitation team conducted a mix of deductive and inductive framework analysis of the workshop data, organising the recommendations according to the stages of the P&C research journey. Where further details were needed to describe the framework, additional interpretation and examples were added inductively during the analysis, helping to inform specific areas of the co-produced recommendations. All workshop facilitators reviewed the data analysis to ensure that the recommendations in this report reflect the discussions.

7. Report Writing and Dissemination

The facilitation team have taken the lead in writing this report, which has been reviewed by three P&C researchers on the team. In the future the team will work with the Council and HDRC to share findings and recommendations with relevant stakeholders. Presentations to the HDRC Collaborative Research Board and Tower

Hamlets Community Engagement Strategy Delivery Group have already occurred. This report will also be distributed to all participants who contributed to the survey and workshops.

In the following section results from each of the research activities will be presented, including a description of how they build on and inform each other. In the conclusion section, the final recommendations that were co-produced in the multi-stakeholder workshops will be summarised and categorised within each of the HDRC workstreams.



Figure 3: Workshop Pictures

Findings and Recommendations

This section presents the findings and recommendations based on our step-by-step approach to developing insights and co-producing solutions. We begin by sharing insights from the initial workshops with the P&C research team and organisational representatives, which informed the design of the survey. After this the survey results are shared followed by the discussions and recommendations generated by the multi-stakeholder co-production workshops.

1. Project Co-design: Rose, Bud, Thorn of P&C Research

Our data gathering began with two workshops, one with P&C researchers, a second with organisational representatives. The aim of the workshops was to co-design the project focus and survey, informed by the successes, difficulties and future opportunities of P&C research in Tower Hamlets. In the workshops, participants identified the "roses" (successes), "buds" (future opportunities), and "thorns" (difficulties) of P&C research.

I. Roses

As illustrated by the quotes below, participants highlighted the active presence of P&C research in Tower Hamlets, with a strong desire across sectors to collaborate in using this approach to develop place-based solutions for tackling inequities:

"So many different projects in Tower Hamlets using a peer and community research approach." (P&C researcher)

"Several very skilled and well-respected VCS community research organisations." (council officer)

"The desire to collaborate and create place-based / specific responses." (university researcher)

The power of P&C researchers in amplifying voices, developing innovative methodologies, and creating effective solutions was seen as empowering for residents and organisations, as illustrated in the quotes below:

"Unearthing things/voices not usually heard." (P&C researcher)

"Valuing the skills of the community and being cognisant of power dynamics." (university researcher)

"Picking best methods for communities." (P&C researcher)

"Innovative and creative methodologies for understanding the views of local residents." (university researcher)

“Empowering for lay people to know what they think matters.” (P&C researcher)

Relevant research, topic, and questions answered rather than dwelling on things that do not matter to people.” (P&C researcher)

Participants were driven to support and conduct P&C research due to its potential to generate and influence local policy:

“Gives opportunities to influence.” (P&C researcher)

“Seeing change happen is empowering.” (P&C researcher)

Participants also reflected on how the delivery and use of P&C research can build trust between residents and other stakeholders including the Council.

II. Buds

Opportunities were identified around improving the sustainability of P&C research. These opportunities included moving away from short-term project-based work, avoiding duplication of projects on the same topic and increasing the impact of P&C research, as the following quotes suggest:

“We need to build a sustainable, long term model.” (P&C researcher)

“Communities can conduct continuous research (rather than one off project), anyone from communities can take part.” (P&C researcher)

“Developing a co-ordinated approach to sharing ongoing project work to prevent duplication and share best practices.” (community organisation representative)

Rebalancing power dynamics and breaking down stigmas and assumptions between stakeholders emerged as an outcome of P&C research and central to its sustainable development.

“Chance to shift power relationships.” (community organisation representative)

“Breaking down stigmas/assumption between professionals and communities. This means professionals’ assumptions about minoritised communities and communities’ assumptions about professionals.” (P&C researcher)

“Possibility to work with communities to really understand stigma and barriers.” (P&C researcher)

“There’s finally a widespread acknowledgment of structural racism and how it affects people of colour.” (P&C researcher)

Participants highlighted the need for stronger cross-sector collaboration, with hopes that HDRC could play a significant role in strengthening these efforts:

“The HDRC!! We didn't have it before as an explicit effort to build infrastructure and collaboration.” (university researcher)

“Making connections through the HDRC work to support other research collaborations in the long term.” (university researcher)

“So many projects could be shared better and be collaborative.” (P&C researcher)

“Building relationships is necessary.” (P&C researcher)

III. Thorns

Participants noted several practical challenges, including the risk of repetition in P&C research projects, the perception that the evidence generated by P&C research is not valued by some stakeholders, short-term funding, difficulty reaching certain communities to be included in research, P&C research being misrepresented after completion by policymakers, a lack of transparency and accountability in implementing recommendations, and insufficient support for P&C researchers and research projects.

“Research projects are not informed by existing research insights and data.” (P&C researcher)

“Community research is not valued, recognised (P&C researcher, workshop) Short termism limits impact.” (P&C researcher)

“People get activated and excited and then the money runs out.” (P&C researcher)

“It can be challenging to reach certain communities. Housebound, digitally excluded people for example.” (P&C researcher)

“Research being misrepresented once it is done, endangering communities.” (P&C researcher)

“Accountability is a key factor. Sometimes dissemination is too limited, missing people out, biasing reports to make it look more impact was achieved than in reality. We are accountable to the public.” (P&C researcher)

“Lack of transparency: organisations and co-researchers all need to know what is happening, including dissemination.” (P&C researcher)

“Policymaker buy in drops off at the implementation stage. A waste of time and money.” (P&C researcher)

“Trust breaks down if no change taken.” (P&C researcher)

“Clear payment policy is needed.” (P&C researcher)

“Lack of clarity around DWP guidance on peer research and benefits.” (community organisation representative)

“Effective training does not exist: training needs to be inclusive; examples of effective training could be stakeholders sharing different expertise and insights, and training logistics on a research project.” (P&C researcher)

In addition to these challenges, a lack of trust and togetherness was highlighted due to issues such as perceived discrimination against P&C researchers, insufficient resources for meaningful community engagement and involvement in research, and the extraction of P&C research from the people and groups who produced it.

“Not sharing the same ideas of what we are trying to do.” (council officer)

“Lack of trust between communities and institutions from previous experiences and current challenges.” (university researcher)

“Residents not feeling welcome into research and local authority spaces.” (university researcher)

“Discrimination by researchers and council officers when framing research themes, interpreting data and sharing results.” (university researcher)

“Providing sufficient resources and time to meaningfully engage and sustain relations with communities.” (community organisation representative)

“Risk of tokenism and extraction.” (university researcher)

2. Survey Findings: Current Activities of P&C Research

The survey was co-designed following discussions of the "rose, bud, thorn" framework and was completed by over 70 local stakeholders. The findings suggest that peer and community (P&C) research is relatively active in Tower Hamlets, with at least 25 organisations - including public sector bodies, VCS organisations, universities, and independent consultants - facilitating, commissioning, or supporting it. This demonstrates strong potential for further development, where the collective impact of efforts can exceed the sum of individual parts. In this sub-section, we will review current P&C research activities by following the typical journey of a P&C research project. This will be followed by an exploration of the gaps that have been identified through the review.

I. Selecting a Research Topic

In Tower Hamlets, according to the survey, organisations have conducted research on various subjects, with the most focus on health and healthcare (37%). In contrast, social care (11%) and environmental issues (11%) have received the least attention.

Most survey respondents indicated that research topics explored by future HDRC research should be decided collaboratively by community organisations, residents, the Council, and universities, with residents and community organisations being approached first.

Approximately one-third (33%) of organisational representatives from the VCS, universities, the NHS, and the Council believe that there is a risk of repetition among P&C research projects, while over one in ten (12%) note that projects often overlook existing research insights and data. This suggests that resources are wasted because P&C research findings are not synthesised across projects or built on by newer projects.

II. Funding for Research

Funding remains a significant challenge for P&C research. Alongside the difficulty of implementing research recommendations through policy and system changes, funding was highlighted as one of the top challenges by survey participants (see Figure 4).

Top challenges	%
Implementing recommendations that arise from P&C research through policy and system change	27%
Fragmented organisation and short term funding of P&C research means that its potential to help tackle health inequalities and address determinants of health is limited	25%
Limited funding	16%
Payment and employment issues for P&C researchers	11%
Other	11%
Deciding on the issues that P&C research should address	9%
Skills and time required to conduct and facilitate P&C research	9%

Identifying the right community organisations/ P&C researchers to design and deliver different kinds of research projects	9%
Prejudice and discrimination towards P&C researchers by professional researchers and/or policymakers	5%
Not sure	5%
Limited project timelines	0%

Figure 4: Challenges of P&C Research

Fragmented organisation and short-term funding were cited by one in four survey respondents (25%) as limiting the impact of P&C research. Limited funding was noted by nearly one in five participants (16%). This challenge on funding was particularly noted by public sector and university representatives. Community organisations also emphasised the need for better funding arrangements to ensure the quality of P&C research.

III. Putting Together a P&C Research Team

In Tower Hamlets, organisations taking part in the survey worked with between 0 to 50 P&C researchers over the past year, with an average of eight P&C researchers per organisation. P&C researchers bring valuable experience, skills, and networks, which greatly enhance the research process.

One in three organisational representatives from the VCS, universities, the NHS, and the Council noted that P&C researchers are not involved in all stages of the research and policymaking process. This raises the question of whether P&C researchers are involved only to access communities and collect data from them. Another question, inspired by a P&C researcher, concerns the role of P&C researchers: are they there to represent their own views, or are they expected not only to share their own perspectives but also to research the views and experiences of their communities? How is this ambivalent role reflected in the design, facilitation, and interpretation of the research? A detailed review of P&C researchers' roles and participation is beyond the scope of this project, but such a review could enhance understanding of P&C research among all stakeholders, potentially improve its credibility, and showcase its methodologies and impact.

IV. Conducting Research

In Tower Hamlets, our survey suggests that a wide variety of research methods have been employed, ranging from traditional approaches like surveys, interviews, and focus groups to non-traditional, creative methods such as videos, drawings, gardening, and community dinners. There has also been an active effort to implement findings as part of the research, including community organising, campaigning, and policymaking.

Traditional qualitative and quantitative research methods are most used, particularly by universities (Figure 5). 92% of universities utilise these traditional methods, along with 85% of public sector representatives and 81% of community organisations. Among all stakeholders, public sector representatives use creative, non-traditional

methods the least (15% of public sector representatives), while community organisations are more likely to use them (44% of community organisations).

Stakeholder	Traditional research methods	Non-traditional research methods	Implementation of findings
Community organisation	81%	44%	75%
University researcher	92%	25%	8%
Public sector representative	85%	15%	46%

Figure 5: Research Methods

The dominance of traditional research methods and the limited familiarity with creative approaches among policymakers prompts a consideration of several key questions when commissioning, supporting, and conducting P&C research:

- *What do different people understand to be the standards of good quality in peer and community research? How can we build a shared understanding of good quality? How can we enable good quality?*
- *What do we consider as ‘good’ evidence? Are community insights and P&C research evidence valued in the same way that academic evidence is? How might we expand our understandings of credible evidence?*

The survey findings identified a need to re-evaluate P&C research methodologies. As one survey participant summarised in a free text comment:

“Part of the process of having community research accepted by policymakers is to also create the environment where this research is accepted as equally rigorous as traditional methods.” (community organisation representative)

V. Dissemination and Impact

Three in four (75%) community organisations in our survey reported they include efforts to implement findings through community organising, campaigning, or policymaking. In contrast, with a greater focus on contributing to academic knowledge, university research rarely have the time and resources to actively drive change (8%), instead primarily relying on disseminating findings through academic outputs as the standard approach to influence policymakers and encourage policy implementation.

Respondents highlighted impact and benefits of P&C research (see Figure 6). P&C researchers identified the improvement of understanding, trust, and collaboration between communities and all other stakeholders as the most significant benefit. Public sector representatives placed equal value on these aspects and on enhancing the understanding of local community needs. Community organisations and

universities prioritised the development of effective solutions and addressing inequalities.

Benefits of P&C research	% of survey respondents
Understanding, trust and collaboration between communities and organisations (e.g. public sector organisations, universities, community organisations)	18%
Developing effective solutions to address health determinants and inequalities that will result in sustainable change	18%
Better understanding the needs of local communities	17%
Including diverse and seldom heard communities in health determinants and health inequalities research	10%
Supporting communities to develop the skills and confidence to generate evidence that will address the inequalities they experience	10%
Addressing knowledge gaps and providing insights about local health determinants and inequalities	7%
More credible evidence for local policymakers who want to address local health inequalities	7%
Other	7%
Not sure	6%

Figure 6: Benefits of P&C Research

Implementing research recommendations through policy and system change was identified as a top challenge of P&C research by 27% of survey participants (Figure 4), particularly among community organisations and P&C researchers. Organisation representatives noted several barriers to implementation, including a lack of support from policymakers (17%), insufficient funding to implement recommendations (17%), and policymakers' lack of understanding and appreciation for evidence generated from P&C research (15%). Community organisation survey respondents consider all these factors equally important, while public sector and university representatives see lack of funding as the biggest barrier.

VI. Supporting Stakeholders

In Tower Hamlets, training priorities and needs regarding P&C research vary widely across organisational stakeholders. In the survey, several P&C researchers (32%) and public sector representatives (57%) believe that community organisations, the Council/NHS and universities should receive training and support on how to work with residents in an ethical manner. Some university researchers (58%) identified a need for training on how to reach out and build trust with residents as research collaborators, while some community organisations (44%) expressed a need for training on recognising and shifting power dynamics between residents, community organisations, academics and council representatives. All stakeholders also pointed to the importance of a better understanding of the value and benefits of P&C research.

Compared to training for organisations, the views on training priorities for P&C researchers are more consistent across all stakeholders in our survey. The priorities include training to build skills (62%), paid work experience (49%), and accredited training courses (49%).

At present, more than half (58%) of P&C researchers receive incentives as payment (bank transfer/cash/voucher) (see Figure 7). Ideally, 52% of researchers would prefer to continue receiving payments this way, likely due to the complexities of welfare benefit policies. However, 32% of survey participants indicated a preference for contracted opportunities in an ideal scenario (including full-time, part-time, and zero-hours contracts), suggesting a demand for employment options. It is also worth noting that nearly one in ten (7%) P&C researchers have not received any payment, and only 4% prefer no payment in an ideal world. No P&C researcher who participated in the survey has been on a full-time contract, but 8% would prefer it. Additionally, nearly 7% are paid by invoice, which none of the respondents prefer, and over 4% receive only training and in-kind offers, which is also not preferred.

Payments for P&C researchers	Current	Ideal world	Increase in an ideal world
Incentives paid by voucher	33%	28%	-5%
Incentives paid by bank transfer/cash	25%	24%	-1%
Permanent contract (part time)	11%	4%	-7%
Fixed term contract (part time)	7%	12%	5%
I have not received any payments or incentives	7%	4%	-3%
Invoice	7%	0%	-7%
Zero hours contract	4%	8%	4%
Training and other in-kind offers	4%	0%	-4%
Other	2%	12%	10%
Permanent contract (full time)	0%	8%	8%
Fixed term contract (full time)	0%	0%	0%

Figure 7: Payments for P&C Researchers

VII. The Need for Better Coordination

A reflection from the survey findings is that experiences and perspectives on P&C research vary significantly both across and within sectors. For survey questions related to views on P&C research in Tower Hamlets (e.g. its benefits, challenges, and who should coordinate P&C research in the borough), the highest proportion of respondents selecting any one option was only 29%, indicating a lack of consensus. This highlights the importance of ensuring that any further development of a P&C research system is inclusively co-designed.

Despite these differences, there was strong consensus in the survey (100% of participants) on the need to coordinate P&C research in Tower Hamlets and establish a shared system across the borough. Survey participants (25%) also emphasised the benefit of maintaining long-term relationships among stakeholders to ensure research quality. This priority was consistently shared across all

stakeholder groups, further underscoring the critical role of coordination in the P&C research system.

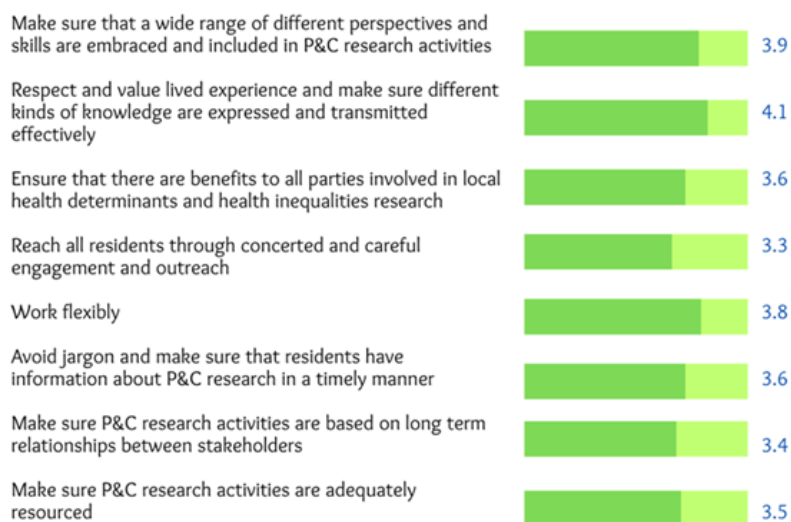
Opinions on who should lead the coordination of P&C research across the borough were diverse, with options including a group of organisations (29%), THCVS (22%), and the Council (12%). The small sample size (65 respondents on this question) means a sector-based analysis is not possible, but the idea of a group of organisations working together was the most popular, especially among P&C researchers (35%). This preference may stem from the perceived independence such a body could offer.

A coordinating group could take various forms, such as a funded collaborative partnership or a Community Interest Company (CIC). Regardless, such a group would have to ensure active involvement from P&C researchers and all relevant organisations. This is illustrated by a free text comment made by a VCS stakeholder in the survey:

“Various partners [should collectively lead the coordination body], just avoid supporting one or two gatekeepers please, it’s harmful.” (community organisation representative)

The HDRC uses the ActEarly co-production principles (27) to guide their engagement with residents. In the survey, we asked participants to what extent they agreed that these principles are applied when conducting P&C research in Tower Hamlets. Responses were scored from 1 to 5, with 1 indicating 'strongly disagree' and 5 indicating 'strongly agree'. The average score across all principles was above average (3.6 out of 5, see Figure 8 for individual scores), again highlighting both the strengths and opportunities for improvement in the collaborative approach to P&C research in Tower Hamlets.

HDRC co-production principles (scored 1-5)



3. Co-production Workshops: Recommendations for a P&C Research System

Building on the survey findings, over 50 workshop participants developed a set of recommendations to establish a more sustainable and impactful P&C research system in Tower Hamlets. These co-produced recommendations are divided into two categories: practical guidance for improving the delivery of P&C research, and guidance on the values and culture that should underpin the P&C research system.

Initial suggestions about how the recommendations might be implemented have been made. However, we acknowledge that further discussion between all stakeholders needs to occur to identify who is best placed to deliver on certain recommendations.

The HDRC leadership team includes representation from the Council, VCS, universities and Tower Hamlets residents. It also has the power to convene other stakeholders who deliver and support P&C research, such as national research funders and the NHS. Given this, in addition to implementing some of the recommendations through their research infrastructure, the HDRC can also advocate for change across the wider system.

I. Practical Recommendations across the P&C Journey

Selecting a Research Topic: All stakeholders at the co-production workshops discussed the issue of repetition of P&C research projects in Tower Hamlets, a concern that was also highlighted by the survey. They suggested that contributing factors may include short timelines that make reviews of previous research difficult, the pressure on research providers to "chase after funding", and the limited visibility and availability of P&C research project reports and dissemination materials through research databases.

To enhance the visibility and accessibility of pre-existing P&C research, the following recommendations have been developed by workshop participants:

HDRC to advocate and enable access to a public database of P&C research. The database should be accessible to all research providers for input and updates and not owned by any single organisation. The database should draw on the learning from the Community Insights Programme (22) and be managed by professionals with the expertise to handle diverse forms of community insights data. It must also be financially sustainable.

To deliver this recommendation the project team suggest the following options:

- **Use an existing regional or national platform**, such as the [Community Insights Hub](#) hosted by the Greater London Authority, or the [UK Data](#)

[Service](#) which is the largest digital repository for quantitative and qualitative research in the UK. These platforms allow data to be searched by borough, making it a cost-effective and sustainable option. It also enables Tower Hamlets data to contribute to national research and policymaking. Support and training on how to use and update the database should be provided for research from all sectors, funders, and commissioners.

- **Develop a new repository** as part of the upcoming HDRC Research Collaboration Hub website or a new platform co-hosted by local universities. This repository should allow for more creative presentations of research insights, beyond just text and numbers. It should also be easily accessible and navigable by all stakeholders.

HDRC to advocate for mandatory literature reviews to be conducted before projects are commissioned or project applications are submitted to funding schemes. These reviews could be enabled by the access to/development of the public database described above. This process would mean that research is not repeated and the insights from P&C research is used to inform the development of new projects delivered by different stakeholders. This process would also provide opportunities for networking between organisations and individuals who have a track record of producing research on certain topics and/or using certain methods in their research.

Funding for P&C Research: Participants highlighted that the competitive nature of securing funding for P&C research acts as a barrier to collaboration. Participants also noted that most P&C research is project-based, with research providers and stakeholders often withdrawing once the project ends. This approach leaves little time or space for reflection, learning, and improvement. As a result, the knowledge, skills, and connections developed during projects are not sustained, and the potential for achieving long-term change is diminished.

Workshop participants proposed several recommendations to improve the funding landscape and make P&C research more sustainable:

HDRC to advocate collaborative working as a condition for all commissioning and funding activities. To reduce unnecessary competition and strengthen capacity building, the Council should update its processes for commissioning P&C research to encourage collaboration among organisations. For example, it could support collaborative bids by groups of organisations for commissioned contracts, using group interviews as part of the application process. The HDRC should actively invite partnership working with other organisations through the funding bids it supports. Workshop participants recommended seeking sufficiently large funding opportunities that encourage partnerships among all stakeholders, again this is something the HDRC can facilitate.

HDRC to advocate for the pooling of funding to make research more ambitious and impactful. Pooling expertise and teams would create larger and more ambitious projects and enhance impact. It also opens the possibility of conducting long-term programmes of research rather than one-off projects, thereby improving the sustainability of the research efforts.

HDRC to advocate greater transparency regarding the funding received and awarded for P&C research by the Council and NHS. Participants called for more openness about who receives funding for P&C research and for what purposes. Participants suggested that such practices already occur within the VCS and they could be used to inform the co-production of processes for the transparent allocation of P&C commissioning and funding.

HDRC to advocate participatory commissioning. Participatory commissioning would involve all stakeholders from the start led by the sentiment that “we are all commissioners” (community organisation representative). Learning from other organisations, such as Trust for London (see Background section), could support a pilot of participatory commissioning, ensuring broader involvement in decision-making from residents, P&C researchers and the VCS. It would also support the call for transparency outlined in the above recommendation.

Putting Together a P&C Research Team: The need for better understanding and involvement of residents in P&C research projects was highlighted in the survey. To address this, workshop participants provided the following recommendations:

HDRC to secure resources and funding to evaluate the value and impact of P&C research methodologies. This evaluation project should aim to assess the quality and value of P&C research methodologies applied in Tower Hamlets and the impact of involving P&C researchers at all stages of the research process. We recommend that all stakeholders, including P&C researchers, be involved in defining the standards for good quality P&C research and co-developing the evaluation project.

HDRC to secure resources and funding to conduct P&C research on resident experience of research. Stakeholders found it valuable to review what we termed ‘the journey’ of P&C researchers in this project, which was revised and discussed in all the workshops. They recommended a similar analysis to be carried out for research participants (e.g. residents). This project should identify areas for improvement in the research process to encourage more residents to participate in P&C research, ensuring their involvement is both meaningful and valued. Examples can include developing a better understanding of how findings and research impacts are communicated to residents at the end of projects and the impact of good dissemination practices on the trust residents have in P&C research, and the willingness to be involved in future P&C research projects.

Conducting Research: There was a consensus in the workshops that the value of P&C research needs to be re-evaluated, clarified and updated. This may be due to inadequate communication about methodologies in the dissemination and reporting materials of research providers, and the perceived weakness of P&C research evidence by academic researchers and policymakers, who tend to value more traditional academic research underpinned by traditional research methods. The earlier recommendation to evaluate P&C research methodologies could address this issue. Good practice regarding the better understanding and use of P&C research by policymakers is already undertaken by other statutory bodies, including the Greater London Authority (GLA). Tower Hamlets could adopt learning from this and instigate a programme of educating policymakers and academic researchers about the nature and value of P&C research (to be discussed later).

The HDRC should advocate for P&C research providers to communicate their methodologies clearly in dissemination and reporting materials. To improve the understanding and credibility of P&C research, it is recommended that research providers communicate their methodologies more fully, transparently and reflexively in each project. This practice will help stakeholders appreciate the rigor of the non-traditional methods (e.g. creative methods) used in P&C research, fostering greater acceptance and integration of these methods in policymaking and practice.

Dissemination and Impact: Workshop participants highlighted the positive outcomes that P&C research can bring to the individuals who are involved in its delivery (e.g. P&C researchers and residents). However, it appears that the impact and value of P&C research for policymaking is unclear. Participants recommended improving transparency and accountability in the implementation of research findings.

HDRC to implement a system to track and communicate the use, implementation, and impact of P&C research. Workshop participants recommended that implementation of findings should be regularly publicised and accessible to all stakeholders, including residents, through various channels such as WhatsApp. The project team suggests that this could be facilitated through the upcoming Research Collaboration Hub, which aims to showcase how research has been applied to key decisions. The existing Tower Hamlets Council WhatsApp "Tower Hamlets Channel" could be utilised for broader public communication, with a dedicated channel established specifically for P&C research. Exploring other possibilities of updating existing channels of communication should also be explored.

Supporting Stakeholders: Stakeholders emphasised the importance of providing long-term support to P&C researchers and community organisations to ensure the sustainability of P&C research. Currently, the training and assistance for P&C researchers and other stakeholders lacks adequate coordination.

Participants stressed that P&C training should move away from traditional formats. Instead, it should encourage reflection and critical engagement with concepts such as knowledge production, the nature of research, and the power dynamics inherent in P&C research and collaborations within institutional settings.

In addition to training, discussions in the workshop focused on the financial impact of payments to P&C researchers, particularly for those on low incomes. Stakeholders felt that large institutions have yet to fully recognise the significance of this issue and develop measure to mitigate it.

Workshop participants noted that organisations pay researchers according to their internal policies and may offer guidance on how these payments could affect researchers' social security benefits or refer them to advice centres. However, the process of paying P&C researchers is a challenge for many organisations facilitating P&C research. Stakeholders acknowledged that large bureaucratic organisations, such as universities and councils, may struggle to change their policies. For instance, a representative from London Metropolitan University pointed out that, while "Met temps" was created with good intentions to streamline contracting of P&C researchers, it has seen limited use due to the requirement for a portion of grant funding to sustain the service.

Council representatives in the workshops could not identify any specific policy on paying P&C researchers, although this is something that the HDRC is currently working on. The National Institute for Health and Care Research (NIHR) provides [useful guidance](#) in this area, but some stakeholders were not aware of this. Beyond reviewing how the national and organisational policies affect individuals on welfare benefits, there is a need to raise awareness of policies and guidance that do exist. Together, stakeholders developed the following recommendations in response to these issues.

HDRC to coordinate training for P&C researchers, policymakers and other stakeholders. Training for policymakers, academic researchers and VCS organisations should focus on ethical and meaningful engagement with residents and the value of P&C research. The project team recommend that this training should involve P&C researchers as trainers and consider the power dynamics involved in research conducted in partnership between stakeholders (P&C researchers, the VCS, universities, the Council and NHS).

Training for P&C researchers should be accredited but also include mentorship. It should provide key transferable research skills and personal development for P&C researchers. Workshop participants suggested that P&C research providers should collaborate in creating this training, ensuring it is recognised across organisations. A standard grading system could be introduced to reflect the experience level of P&C researchers. To develop this

local accredited training, the project team recommend that the HDRC leverage the expertise of universities, who have experience of offering accredited training, and community organisations that have already been involved in developing accredited P&C research training (see examples [1](#) and [2](#)).

HDRC to fund a P&C researcher directory to ensure long term opportunities for P&C researchers. A directory of P&C researchers, listing their skills, lived experiences, and specialisations, should be created. This would provide a process for P&C researchers access opportunities and develop their research practice. Workshop participants recommended that a coordination body (see further recommendations below) should take the lead in developing and sustaining this directory, including recruiting new individuals through the accredited training programs (see above). Nineteen P&C researchers who took part in this project have expressed interest in joining such a directory.

HDRC to advocate improvements in payment policies and practices. Community organisations, universities, and public sector bodies could benefit from enhanced support to ensure payments to P&C researchers are timely, flexible, and sufficient. During the workshops, several P&C researchers expressed a preference for tiered payment rates based on experience, rather than a flat rate.

While an overarching coordination body was recommended to provide broad support for P&C researchers (to be discussed later), the specific discussion on payment policies generated less consensus. Some workshop participants suggested that a community interest company, community organisation, or university could manage payments for P&C researchers and potentially participants. However, concerns were raised about the potential for added bureaucracy and uncertainty about which organisation could reliably and quickly handle payments.

Alternatively, offering training or guidance on good payment practices to organisations could be beneficial. Clear communication would help set expectations around payments, and the proposed coordination body should advise organisations on establishing these expectations. Additionally, system challenges, such as delays in payment processing by larger organisations, should be addressed.

HDRC to advocate and coordinate advice for P&C researchers on the impact of research payments on welfare benefits. Stakeholders favoured a single point of contact for P&C researchers to receive advice on how different types of income from P&C research could impact social security and tax. The advisor(s) could also support P&C researchers to communicate NIHR guidelines around research participation to their work coaches at Jobcentres. The project team recommend that the HDRC consider establishing a

partnership with the Tower Hamlets Community Advice Network to provide this support and incorporate it into the next contract procurement for the Network.

HDRC to coordinate the creation of a good practice guide for P&C research. The good practice guide should include: 1) an account of the value and impact of P&C research and the unique skills of P&C researchers; 2) guidelines on payment including a directory of available welfare benefits advice. This pack could also support P&C researchers to communicate to employers the skills and experience developed through P&C research and a paragraph that they could use to share their specific skills and experiences.

HDRC to advocate for improved DWP guidance and practices regarding benefit claimants receiving payments as P&C researchers. Workshop participants strongly recommended that the HDRC should urge the NIHR to lobby for clearer guidance from the Department for Work and Pensions (DWP) concerning benefit claimants who receive payments as P&C researchers. This includes providing more transparent guidelines for both P&C researchers and Jobcentres, as well as training for Jobcentre staff to ensure they understand and apply these rules to better support benefit claimants.

II. Values and Culture: An “Us” Mentality

During our workshops, stakeholders expressed a strong desire to cultivate an "us" mentality between all stakeholders involved in P&C research. The emphasis was on working together rather than being constrained by hierarchical roles and methods of research. An "us" mentality must be reflective, open to challenging power dynamics, privilege, research norms and values and the colonisation of knowledge-making. It embodies shared values, shared power and shared responsibilities.

An "us" mentality can guide how we act on the practical recommendations from this report to enhance the journey of P&C research, from updating our approach to funding and commissioning, re-evaluating the value placed on P&C research data, and coordinating collective efforts to support P&C researchers. This “us” mentality aligns with the co-production values that already underpin the HDRC.

Guided by an "us" mentality, overarching recommendations were developed to foster mutual understanding among stakeholders and to establish a coordination body for P&C research. This body would support the implementation of the recommendations made above and contribute to the development of a more sustainable and impactful P&C research system.

HDRC to fund a cultural development programme to develop shared values across stakeholders, challenge power dynamics, privilege and norms, and encourage collaboration with these updated values. Workshop participants

repeatedly noted the need to challenge power dynamics. They recommended that encouraging collaboration as individuals, rather than being constrained by hierarchical roles, should be a core value embedded in HDRC's work across all sectors. The project team recommend that resources should be allocated to support sustainable development in this area, potentially beginning with activities that encourage a shift in mindset. This initiative could be led by the proposed coordination body (see below), supported by external facilitators, or integrated as a core function of the HDRC.

HDRC to fund a coordination body for research coordination and support coordination. A gap identified in the current P&C research landscape is dedicated coordination body to enhance collaboration among stakeholders. All survey and workshop participants recognised the potential benefits of better-coordinated P&C research in Tower Hamlets, with consistent support across organisations and P&C researchers.

This coordination body could be an enduring legacy of the HDRC. With the HDRC's support, it could develop effective strategies and operational models, aiming for financial sustainability. The ongoing support and development of these bodies will help sustain the P&C research system in the borough.

The key coordination activities of this body should be:

- **Research coordination:** Facilitating collaboration on commissioning, funding, conducting, and implementing P&C research. This includes coordinating efforts among organisations and communities to align research priorities, avoid duplication, and undertake larger, more impactful projects.
- **Support coordination:** Ensuring timely, flexible, and sufficient payments to P&C researchers, coordinating advice on the impact of payments on welfare benefits, and maintaining a comprehensive, growing directory accessible to all stakeholders. Additionally, this function would coordinate training for P&C researchers, policymakers, universities, and community organisations.

The project team recommend that the HDRC could fund one coordination body serving both functions. It is worth noting that these two functions should not merely act as networks; their role goes beyond information sharing. They should focus on how processes work across organisations and sectors, aiming to assess and transform power dynamics and support all stakeholders in achieving shared goals.

It is crucial that the leadership of the coordination body include multiple partners from each sector. The support coordination function should have strong leadership and decision-making input from P&C researchers, with support from the Council, universities, and community organisations. Workshop participants suggested identifying organisations that already play a brokering role, which could support the success of this coordination function.

All organisations involved in the coordination body should be transparent about their agendas and pressures, share research and engage in dialogue about these issues. Stakeholders recommended that funding from all Council teams should support these coordination bodies. This would make sure P&C research informed all aspects of local policymaking.

Workshop participants identified three potential **options** for managing the group of organisations who would constitute the coordination body:

- **Rotate chairing and hosting:** A chair would be selected from stakeholder representatives and rotated at an agreed interval. This chair could be either a community member or an organisational representative and would also be responsible for managing the delivery and financial resources of the coordination body. This approach could help ensure the sharing of power among stakeholders. However, participants noted potential practical challenges with rotating the chair, such as logistical difficulties in community members hosting the coordination body with the necessary resources.
- **An independent chair with their own staff:** An independent chair, not affiliated with any stakeholder organisation, could be employed by the coordination body. This chair would have their own staff to manage the day-to-day operations. Participants recommended this option to balance power and resources between communities and organisations, as community members often have less time and fewer resources, while organisations typically have more advantages. An independent chair and staff team could alleviate the administrative and organisational burden, allowing community members to participate equally. The City and Hackney Safeguarding Adults Board was cited as a good example¹.
- **Community researcher-led group:** In this option, community researchers would lead the group, supported by other stakeholders (including community organisations, public sector bodies, and academics). This could help ensure the independence of the coordination body.

The project team acknowledges the uncertainty around whether the HDRC have the resources to fund this coordination body. The coordination functions and recommendations outlined in this report can either be implemented by the proposed coordination body or through existing teams within the HDRC or the Council, as appropriate. When deciding who should take on these tasks, it is important to consider the goal of power sharing and to recognise the valuable skills and expertise already present within the voluntary and community sector.

Conclusion

A collective effort from all stakeholders, including more than 70 survey participants, over 50 workshop participants, eight P&C researchers, and four research

practitioners, has identified the potential for a more impactful and sustainable cross-sector system for P&C research.

Based on the HDRC business plan, we have attempted to summarise and categorise these co-produced recommendations within each of the HDRC workstreams, acknowledging that some recommendations may span multiple areas:

<p>Workstream 1: Research Collaborative</p> <ul style="list-style-type: none"> • Advocate collaborative working as a condition for all commissioning and funding activities. • Advocate for the pooling of funding to make research more ambitious and impactful. • Fund and/or promote the coordination of the commissioning and delivery of research and the coordination of support for research. These two coordination tasks could be undertaken by a single coordination body consisting of representation from all stakeholders.
<p>Workstream 2: Infrastructure and Systems</p> <ul style="list-style-type: none"> • Secure resources and funding to evaluate P&C research methodologies and understand the experience and impacts P&C research has on P&C researchers, and how its benefits can be sustained in the long term. • Secure resources and funding to conduct P&C research on resident experience of research, focusing on identifying areas for improvement, such as the dissemination of findings and using P&C research to inform policy change.
<p>Workstream 3: Culture and Practice</p> <ul style="list-style-type: none"> • Fund a cultural development programme to establish shared values across stakeholders, challenge power dynamics, privilege, and norms, and promote collaboration in P&C research grounded in these updated values. • Advocate greater transparency regarding the funding received and awarded for P&C research by the Council and NHS. • Advocate for the use of participatory commissioning for P&C research within the Council. • Advocate for mandatory reviews of pre-existing academic and P&C research. This will ensure that new research projects are built on established evidence and network of researchers from all sectors who have expertise in similar topics. • Advocate for all P&C research providers to include a thorough explanation of methodologies in project reports and dissemination activities.
<p>Workstream 4: Capacity Building</p> <ul style="list-style-type: none"> • Fund a P&C researcher directory to ensure long term opportunities for P&C researchers. • Advocate for improved payment policies and practices, with accessible and specialist advice for P&C researchers on the impact of research involvement payments on welfare benefits. As part of this effort, develop a good practice guide for P&C research that includes: 1) an account of the value and impact

of P&C research and the unique skills of P&C researchers; 2) guidelines on payment including a directory of available welfare benefits advice.

- Urge the HDRC's funder, the NIHR, to lobby for clearer guidance from the Department for Work and Pensions (DWP) regarding benefit claimants who receive payments as P&C researchers.
- Coordinate training for P&C researchers, policymakers, academics and community organisations. Training for policymakers, academics and community organisations should focus on ethical and meaningful engagement with residents and the value of P&C research for local policy. Training for P&C researchers should include accredited training and mentorship delivered by a group of research-active local stakeholders.

Workstream 5: Dissemination and Influence

- Fund the access to/development of a database to make all existing and future P&C research publicly available.
- Fund a website or public tracking system to communicate the implementation and impact of P&C research within the Council.

The goal of our collective effort is to achieve health equity across the borough by ensuring a rich, diverse and resident centred evidence base to guide local policymaking. By adopting an "us" mentality we can harness our collective power and expertise to transform how research informs policy, ensuring that community voices are at the heart of decision-making.

References

1. Goulden H, Morrison E. An equitable future for research and innovation: Building sustained community involvement in knowledge production. The Young Foundation; 2022 Jul.
2. Health Watch. Working with community researchers to achieve change for people | Healthwatch Network. 2022 [cited 2024 Apr 1]. Available from: <https://network.healthwatch.co.uk/guidance/2022-09-05/working-community-researchers-to-achieve-change-people>
3. UKRI. How the public is improving research and its impact in society [Internet]. 2023 [cited 2024 Apr 1]. Available from: <https://www.ukri.org/blog/how-the-public-is-improving-research-and-its-impact-in-society/>
4. Boechler L, Renwick S, Alabi A, de la Torre H, Kumar S, Singh H, et al. Beyond the role of participant: a firsthand account of the experiences of a patient-oriented research team. *Research Involvement and Engagement*. 2021 Nov 7;7(1):79.
5. Beresford P. User involvement, research and health inequalities: developing new directions. *Health Soc Care Community*. 2007 Jul;15(4):306–12.
6. Wallerstein N, Duran B. Community-Based Participatory Research Contributions to Intervention Research: The Intersection of Science and Practice to Improve Health Equity. *Am J Public Health*. 2010 Apr;100(S1):S40–6.
7. Wallerstein NB, Yen IH, Syme SL. Integration of social epidemiology and community-engaged interventions to improve health equity. *Am J Public Health*. 2011 May;101(5):822–30.
8. Southby K, Coan S, Rushworth S, South J, Bagnall AM, Lam T, et al. The contribution of peer research in evaluating complex public health interventions: examples from two UK community empowerment projects. *BMC Public Health*. 2022 Nov 24;22(1):2164.
9. Woodall J, Cross R, Kinsella K, Bunyan AM. Using peer research processes to understand strategies to support those with severe, multiple and complex health needs. *Health Education Journal*. 2019 Mar 1;78(2):176–88.
10. Buffel T. Older Coresearchers Exploring Age-Friendly Communities: An “Insider” Perspective on the Benefits and Challenges of Peer-Research. *The Gerontologist*. 2019 May 17;59(3):538–48.
11. Johnson V. Moving beyond voice in children and young people’s participation. *Action Research*. 2017 Mar 1;15(1):104–24.

12. Walker M, Boni A, Martinez-Vargas C, Cin M. An Epistemological Break: Redefining Participatory Research in Capabilitarian Scholarship. *Journal of Human Development and Capabilities*. 2022 Jan 2;23(1):1–7.
13. Martinez-Vargas C, Walker M, Melis Cin F, Boni A. A Capabilitarian Participatory Paradigm: Methods, Methodologies and Cosmological Issues and Possibilities. *Journal of Human Development and Capabilities*. 2022 Jan 2;23(1):8–29.
14. MacKinnon KR, Guta A, Voronka J, Pilling M, Williams CC, Strike C, et al. The Political Economy of Peer Research: Mapping the Possibilities and Precarities of Paying People for Lived Experience. *The British Journal of Social Work*. 2021 Apr 1;51(3):888–906.
15. Heney V, Poleykett B. The impossibility of engaged research: Complicity and accountability between researchers, ‘publics’ and institutions. *Sociology of Health & Illness*. 2022;44(S1):179–94.
16. Guta A, Flicker S, Roche B. Governing through community allegiance: a qualitative examination of peer research in community-based participatory research. *Critical Public Health*. 2013 Dec 1;23(4):432–51.
17. Polanyi MC. Opportunities and Pitfalls of Community-Based Research: A Case Study. *Michigan Journal of Community Service Learning* [Internet]. 2003 Summer;9(3). Available from: <http://hdl.handle.net/2027/spo.3239521.0009.302>
18. Kelly B, Friel S, McShane T, Pinkerton J, Gilligan E. “I haven’t read it, I’ve lived it!” The benefits and challenges of peer research with young people leaving care. *Qualitative Social Work*. 2020 Jan 1;19(1):108–24.
19. Ross LE, Pilling M, Voronka J, Pitt KA, McLean E, King C, et al. ‘I will play this tokenistic game, I just want something useful for my community’: experiences of and resistance to harms of peer research. *Critical Public Health*. 2023 Oct 20;1–12.
20. Walsham M. Involving Young Londoners: A review of participatory approaches in the youth sector [Internet]. Trust for London; 2021 Jun. Available from: <https://trustforlondon.org.uk/research/involving-young-londoners/>
21. Kindon S, Pain R and Kesby M (2007) Participatory action research approaches and methods: connecting people, participation and place. Routledge.
22. London Borough of Tower Hamlets (2019). Community Insights Programme Evaluation. Evaluation report.
23. London Borough of Tower Hamlets (2021). Poverty review. Available from: https://www.towerhamlets.gov.uk/lgnl/community_and_living/Poverty-Review.aspx

24. Pain R, Whitman G and Milledge D (2019) Participatory Action Research Toolkit: An Introduction to Using PAR as an Approach to Learning, Research and Action. Practice Guide. Durham University. Available from: <https://www.youngfoundation.org/institute-for-community-studies/repository/participatory-action-research-toolkit-an-introduction-to-using-par-as-an-approach-to-learning-research-and-action/#LT-19-06-Participatory-Action-Research-Toolkit.pdf>
25. Yang C and Dibb Z (2020) Peer research in the UK. Insitute for Community Studies, the Young Foundation. Available from: <https://youngfoundation.b-cdn.net/wp-content/uploads/2020/10/TheYoungFoundation-PeerResearchInTheUK-final-singles.pdf?x48225>
26. Lin X, Mobey B, Mullen P et al. (2021) Rent-Move-Repeat: Participatory Action Research Approach. Toynbee Hall. Available from: <https://www.toynbeehall.org.uk/wp-content/uploads/2022/05/Rent-Move-Repeat-Participatory-Action-Research-Approach-FINAL.pdf>
27. Islam S, Albert A, Haklay M and McEachan R (2022) ActEarly co-production strategy. Available from: <https://actearly.org.uk/actearly-co-production-strategy/>

Appendices

Appendix 1: Examples of P&C Research Activities in Tower Hamlets

Community institution-led examples																
Project name	Lead institution	Partner institutions	Topic focus	Demographic focus	Sample reach	Area focus	Length	Community	Peer	P A R	Researcher status	Payment	Training	Researcher support	End at dissemination	Sustained influencing
<u>We Support Together</u>	<u>Bromley by Bow</u>	<u>Centre for Mental Health Research at City, University of London</u>	Mental health support	South Asian	8 interviewees	East London	1 year	✓	x	x	Permanent staff members?	Salaried	✓	✓	✓	x
<u>Blueprint Architects</u>	<u>Platform London</u>	<u>Women's Environmental Network</u>	Food system	Crosscutting, focus on underrepresented residents	30 researchergenerating insights based on own experience	LBTH	5 years	✓	x	✓	Residents/activists/professionals	Invoice	x	✓	x	Blueprint architects planning to become self-sustaining after project wrap-up, influencing is in the form of campaigning

<u>Food Lives Tower Hamlets</u>	<u>Wen</u>	<u>Uni of Sussex as part of FoodSEquals nationwide programme (Uni of Reading)</u>	Food system	Cross cutting within St George's estate	Unknown	St George's Estate, LBTH	5 years	x	✓	x	Residents	Salaried	✓	✓	✓	Findings feed into policy development of nationwide programme working with DEFRA
<u>Emotional Support for Young People</u>	<u>Toynbee Hall</u>	<u>Thrive LDN</u>	Mental health, poverty	Young people	80 focus group, 1000 survey	LBTH	1.5 years	x	✓	✓	Residents	Ad hoc payments/vouchers	✓	✓	x	For the "action" stage of the project, researchers will co-produce and influence policy and practice in LBTH. Limited influencing after funding cycle ends.
Research institution-led examples																
Project name	Lead institution	Partner institutions	Topic focus	Demographic focus	Sample reach	Area focus	Length	Community	Peer	P A R	Researcher status	Payment	Training	Researcher support	Influencing focus	
<u>Understanding the experiences and perspectives</u>	<u>Impact on Urban</u>	<u>The Social Innovation Partnership</u>	Pandemic impact	Disproportionately	40 interviews	Lambeth and Southwark	4 months	✓	x	x	?	?	?	TSIP	TSIP supported community researchers to set up <u>Centric</u> , a research Hub developed, owned,	

<u>of people more likely to be negatively impacted by COVID-19</u>	<u>Health</u>	<u>(TSIP)</u>		impacted residents		rk										and operated by the communities of Lambeth and Southwark. Impact on Urban Health aims to use the findings of this research to shape and influence which initiatives they will fund to support the public during this time.
<u>Partnership For Black People's Health</u>	Wolfson Institute of Population Health, QMUL	Barts Health NHS Trust, University of Nottingham, the Women's Inclusive Team etc.	Medicine and public health	Black African and Black Caribbean communities	N/A (it's an engagement programme rather than research)	London and Nottingham	18 months	✓			Community experts	Incentives and Salaried	x	✓		Addressing systemic racism/issues that contribute to health inequalities in Black communities.
<u>Inclusive Growth Framework Fundamentals</u>	<u>ICRD</u> Uni of Wolverhampton	BVSC Research, CTPSR at Coventry University	Inclusive economic growth	Cross cutting	Unknown, 40 researchers involved	West Midlands	various	x	✓	x	Residents	<u>Previously youchers</u>	Uni of W	Uni of Wolverhampton		The Inclusive Growth Framework is embedded across West Midlands Combined Authority. It was approved by the WMCA Board in September 2018 and forms the basis of West Midlands Outcomes Framework.

Peer/community research adjacent examples

Project name	Lead institution	Partner institutions	Topic focus	Demographic focus	Comments
<u>Advocating for Culturally Competent Services</u>	<u>Coffee Afrik</u>	<u>ELFT</u>	Mental health services	POC, with focus on SEND/LGBTQI	This work seems significant but links to ELFT website aren't functioning so hard to get detail on model.
<u>East London Pandemic Priority Setting Partnership (PSP) for Ethnic Minority Communities</u>	<u>James Lind Alliance</u>	<u>The National Institute for Health and Care Research</u>	Unequal impact of pandemic	Communities disproportionately affected by the pandemic	This is a really specific and participatory form of research, but not conducted by community or peer researchers

Local/Regional Governance examples

Project name	Lead institution	Partner institutions	Topic focus	Demographic focus	Sample reach	Length	In house or commissioned?	How many researchers?	Community	Peer	PAR	Who coordinates researchers	Payment	Training	Who provides researcher support	Impact focus
<u>Peer Outreach Workers</u>	GLA	Various including Thrive LDN	Currently improving educational achievements and opportunities,	15 -25 yr old Londoners	Varies	Periodic or one-off projects	In house	30	x	✓	✓	GLA,	Sessional worker basis, LLW	In house, specialists brought in according to project	GLA's POW support team	Piloting new approaches; working with existing organisations to improve their engagement with young people; evaluating programmes or services.
<u>Community Insights Network</u>	LBTH		Cross cutting	Cross cutting	Varies	Unknown	In house	6	✓	x	x	Public Health	Zero hour contracts	Public Health	Public Health	<u>Tower Hamlets Partnership plan</u> and variety of other projects

<u>Citizen Scientists-in-Residence programme</u>	Camden council	Institute for Global Prosperity, UCL	Cross cutting	Cross cutting	Varies	Unknown, probably align with council research cycles	Fully integrated into Council's engagement and policy teams.	7	x	✓	?	Council	Salaries?	<u>UCL Citizen Science Academy</u>	?	The results will be used to inform the council's investment plans for the community through their new Community Wealth Fund, and the work of the Council's Tenant Engagement Programme.
<u>Community researchers</u>	Camden council		Cross cutting	Project specific	Varies	periodic	In house, available to hire	20	✓	x	x	Council	Sessional?			Various research focuses
<u>Hackney Health and Wellbeing Strategy 2022-26</u>	Hackney Council	Volunteer Centre Hackney (VCH)	Health	Cross cutting	333 surveys	Unknown	unknown	30	✓	x	x		Volunteers	VCH	VCH	Council team used findings to create strategy

Appendix 2: Roses, Buds, Thorns of P&C Research - Key Themes

	Rose What is strong, beautiful, blooming	Buds What is exciting, has potential, could be grown	Thorns What is difficult, a challenge	Sector
Overall environment	Variety of projects	-Need for sustainable, long term model Opportunity for: - collaboration/relationship building -power sharing public/academics -breaking down stigmas/assumptions between public and institutions	Community research is not valued	P&C researcher
	Well skilled/respected orgs in the borough	HDRC	Not sharing the same ideas of what we are trying to do	Council
	Desire to create place-based specific response	HDRC, as an explicit effort to build infrastructure and collaborate	Lack of trust between communities and institutions	University
	People of Tower Hamlets			VCS
P&C research teams	-Valuing of lived experience -Empowerment and participation	Paying residents to improve participation	-Reaching certain communities -Lack of clarity on how payments affect benefits	P&C researcher
	Valuing the time and input of local people			Council
	Valuing skills of local people		Payment, employment and accreditation issues	University
			Confusion re DWP guidance on peer research and benefits	VCS
Conducting Research	-Research topics that matter to people -Giving voice to people and hearing what is usually unheard -Flexible methods - P&C researcher skill development	Wider participation through different/inclusive engagement methods	Difficulty reaching certain communities (for example, housebound, digitally excluded)	P&C researcher
	Innovative and creative methodologies	-Bringing research orgs together to get more residents involved -Increasing capacity in the community to input into evidence and be listened to -Interpretation support & indigenous ways of knowing link to research methods	-Not enough time to deliver projects that build trust and accountable relationships between different groups -Lack of a shared model that is 'live' and adaptable -Risk of tokenism and extraction.	University
		-Developing post-research opportunities for peer researchers -Prevent duplication and share best practices.	Providing sufficient resources and time to meaningfully engage and sustain relations with communities	VCS
Dissemination and Impact	-Local people influencing change - When research leads to impact -Trust development -Tackles inequality through mixed participation	-Opportunity to come together to share data -Alternative solutions, designed by communities -Possibility to tackle stigma -Acknowledgment of structural racism and how it affects people of colour	-Not enough findings for specific communities -Discrimination and misinterpretation of communities by professional researchers, dismissal of participants' viewpoints	P&C researcher

		-Improved transparency and accountability	-Research being misrepresented once it is done, endangering communities -Currently no transparency or accountability with what happens to research once finished	
	-Findings are impactful and relevant to local communities -Challenging/surprising findings	-Training council officers and researchers to appreciate/understand community research. -The opportunity to make systemic change - not doing things TO people but working and developing WITH people	Discrimination by researchers and council officers when framing research themes, interpreting data and sharing results	Univer sity
	More powerful and insightful research	Developing a co-ordinated approach to sharing ongoing project work to prevent duplication and share best practices.		VCS
Improve ment		-Defeat short term funding cycles -Consistent resourcing and payment could include more people	-Short term funding cycles -Research is not fed back to communities and built on -Need for transparency and better communication between all parties -Need for more effective training	P&C resear cher
			- Incorporating new infrastructure into training for staff	Counc il
		-Access to opportunities to learn more about the local organisations and their needs -Whole system approach to health inequalities	-No methods to bring together different ways of knowing and evidence together -Stakeholder fatigue if nothing changes -Not enough time is planned or built in for dissemination -Community research not always valued in academia -Residents not feeling welcome into research and local authority spaces	Univer sity
		-Collaboration with other organisations using community research approaches -Chance to shift power relationships - Willingness amongst academia, council and VCS to work together and learn and listen to each other	Need to prevent duplication of projects	VCS

Appendix 3: Co-designed Survey

Peer and community research in Tower Hamlets

You are invited to take part in this survey as you are involved in peer and community research (P&C research) in Tower Hamlets in some way. For example, you are a peer or community researcher (P&C researcher) who has conducted research in the borough or a member of an organisation such as the NHS or local authority who has commissioned P&C research to use in local service delivery and policymaking.

This survey will take approximately 10 minutes to complete. A number of P&C researchers and organisations have been involved in co-designing the survey. The aim is to understand current P&C research activity across Tower Hamlets. We will use the findings of the survey to co-produce a model for P&C research to support the work of the Tower Hamlets Health Determinants Research Collaboration (HDRC). The HDRC is a collaboration between Tower Hamlets Council, local universities and community organisations. It aims to involve residents in research that will address local determinants of health (e.g. work, housing and food) and inequalities in the borough. More info on the HDRC can be found here: https://www.towerhamlets.gov.uk/ignl/community_and_living/Health-Determinants-Research-Collaboration.aspx.

Please select the answers that apply to you. There are no right or wrong answers. Data collected from this survey will be stored by the P&C Model Project delivery team and accessible only to the delivery team and advisors, not Tower Hamlets Council or other parties. When sharing the research findings all data will be anonymised, meaning it will not be possible for people to identify the responses you gave when completing the survey. Your information will be used solely for the purpose of this project. We will process your data in line with our privacy policy: https://drxialin-my.sharepoint.com/:b:/g/personal/xia_lin_drxialin_onmicrosoft_com/ERN-6sUdB7llsugWo_9Wza8BNoJivZO2GnaLyJE4lmg4hg?e=S3fXjq

As a thank you for your participation in the survey you will be invited to take part in a prize draw. If you do this you could win £50 of shopping voucher. At the end of the survey you will also be invited to be included in a directory of P&C research in Tower Hamlets and to sign up for a co-production workshop to review findings and further develop the P&C research model for the HDRC.

Thank you in advance for your support,

P&C Model Project delivery team: Dr Xia Lin and Bethan Mobey

Project members: P&C researchers

Project advisors: Dr Megan Clinch and Dr Sara Papparini

Section 1

Current Peer and Community (P&C) research activities

1.How are you currently involved in P&C research in Tower Hamlets?

Required to answer. Single choice.

- I haven't been involved in commissioning, delivering or supporting P&C research in Tower Hamlets
- As a peer and community researcher (P&C researcher)
- As a grassroots organisation
- As a medium/large community organisation
- As a company/consultant/freelancer
- As a public sector organisation
- As a university researcher
- As a funder

2.Which organisations in Tower Hamlets have you worked with on P&C research? Required to answer. Multiple choice.

Select all that apply.

- Barts Health NHS Trust
- Bromley By Bow Centre
- Coffee Afrik
- East London NHS Foundation Trust
- GP Care Group
- Healthwatch Tower Hamlets
- London Borough of Tower Hamlets
- London Metropolitan University
- Magic Me
- National Institute for Health and Social Care Research (NIHR)
- NHS North East London
- Platform London
- Positive East
- Praxis
- Queen Mary University of London
- REAL
- Social Action for Health
- St. Margaret's House
- The Young Foundation
- Switchback
- Tower Hamlets CVS
- Toynbee Hall
- University of East London
- Women's Environmental Network
- Women's Inclusive Team

3.How have you been paid for your contribution? Required to answer. Multiple choice.

Select all that apply.

- I have not received any payments or incentives
- Permanent contract (full time)
- Permanent contract (part time)
- Fixed term contract (full time)
- Fixed term contract (part time)
- Zero hours contract
- Invoice
- Incentives paid by bank transfer/cash
- Incentives paid by voucher
- Training and other in-kind offers

4. In an ideal world, how would you like to be paid? Required to answer. Single choice.

- I do not want to receive any payments or incentives
- Permanent contract (full time)
- Permanent contract (part time)
- Fixed term contract (full time)
- Fixed term contract (part time)
- Zero hours contract
- Invoice
- Incentives paid by bank transfer/cash
- Incentives paid by voucher
- Training and other in-kind offers

5. How often do you work with P&C researchers? Required to answer. Single choice.

- Rarely
- Sometimes
- All the time

6. Over the last year, approximately how many P&C researchers in Tower Hamlets have you worked with? Required to answer. Single line text.

The value must be a number

7. What have your P&C research projects in Tower Hamlets focused on? Required to answer. Multiple choice.

Select all that apply.

- Health and healthcare
- Social care
- Social issues, e.g. housing, employment
- Economic issues, e.g. income, food
- Environmental issues, e.g. climate change, access to green space

8. What approaches have been used in the P&C research projects you have been involved in? Required to answer. Multiple choice.

Select all that apply.

- Number-related methods, e.g. survey
- Narrative-related methods, e.g. interview, focus group
- Art-related methods, e.g. video, drawing
- Activity-related methods, e.g. gardening, community dinner
- Community organising
- Campaigning
- Informing policymaking

9. Based on your experiences and observations, to what extent do you agree with the statements below: Required to answer. Likert.

	Strongly agree	Agree	Neutral	Disagree	Strongly disagree
P&C researchers are involved in all stages of research projects (e.g. deciding research question, research design, delivery and dissemination).					

P&C research projects are repetitive					
P&C research projects are informed by existing research insights and data					

10. Why do you think recommendations from P&C research projects are not always implemented? Required to answer. Multiple choice.

Please select at most 3 options.

- N/A**, the findings of P&C research are always implemented
- Limited power of policymakers** to make change
- Lack of support from policymakers** to implement change
- Reliance on personal relationships** rather than transparent processes to get research into policy
- The **types of evidence** generated by P&C research projects are not understood and valued highly by policymakers
- Quality of research** not being good
- P&C research do not provide the **insights needed** for policymaking
- P&C research findings **contradict other form of research evidence** (e.g. academic research)
- Recommendations generated by P&C research are **not feasible**
- Recommendations generated by P&C research do not align with/ contradict the **agendas of policymakers and elected representatives**
- Recommendations generated by P&C research cannot be easily integrated into **pre-existing policies organisational plans**
- Recommendations generated by P&C research are **not provided in time** to inform local policy
- Lack of funding** to implement the recommendations generated by P&C research
- Lack of time** to implement the recommendations generated by P&C research
- Policymakers **favouring traditional forms of knowledge**
- Not sure

11. What is the top benefit of using a P&C research approach to understand and address local health determinants (e.g. work, housing and food) and inequalities? Required to answer. Single choice.

Please choose one.

- Understanding, trust and collaboration between **communities and organisations** (e.g. public sector organisations, universities, community organisations)
- Including **diverse and seldom heard communities** in health determinants and health inequalities research
- Better understanding **the needs of local communities**
- Addressing knowledge gaps** and providing insights about local health determinants and inequalities
- More credible evidence** for local policymakers who want to address local health inequalities
- Developing **effective solutions** to address health determinants and inequalities that will result in **sustainable change**
- Better use of the resources** available to address determinants and inequalities locally
- Supporting **communities to develop the skills and confidence** to generate evidence that will address the inequalities they experience
- Not sure

12. What is the top challenge of using P&C research to understand and address local health determinants and inequalities? Required to answer. Single choice.

Please choose one.

- o **Deciding on the issues** that P&C research should address
- o Skills and time required to **conduct and facilitate** P&C research
- o **Implementing recommendations** that arise from P&C research through policy and system change
- o **Identifying the right community organisations/ P&C researchers** to design and deliver different kinds of research projects
- o **Prejudice and discrimination** towards P&C researchers by professional researchers and/or policymakers
- o **Payment and employment** issues for P&C researchers
- o Limited **funding**
- o Limited project **timelines**
- o **Fragmented organisation** and **short term funding** of P&C research means that its potential to help tackle health inequalities and address determinants of health is limited
- o Not sure

13.To what extent do current P&C research activities in Tower Hamlets fulfil the goals below? Likert.

	Ver y muc h	Some what	Neu tral	Not so muc h	N ot at all
Share power amongst all partners					
Make sure that a wide range of different perspectives and skills are embraced and included in P&C research activities					
Respect and value lived experience and make sure different kinds of knowledge are expressed and transmitted effectively					
Ensure that there are benefits to all parties involved in local health determinants and health inequalities research					
Reach all residents through concerted and careful engagement and outreach					
Work flexibly					
Avoid jargon and make sure that residents have information about P&C research in a timely manner					
Make sure P&C research activities are based on long term relationships between stakeholders (e.g. P&C researchers, community organisations, the Local Authority)					
Make sure P&C research activities are adequately resourced					

Section 2

How to make it easier to conduct and use P&C research in Tower Hamlets

14. Who should decide what research topics are explored through the Tower Hamlets HDRC? Required to answer. Multiple choice.

Select all that apply

- The council
- Universities
- Community organisations
- Residents
- All of the above

15. At a borough level, what could help ensure the quality of peer and community research is high across organisations? Multiple choice.

Please select at most 3 options.

- A borough-wide set of **quality standards** for P&C research
- A body to provide **quality assurance for and coordination of P&C research**
- A way to maintain **long term relationships** between residents, community organisations, the local authority and academic researchers
- Shared learning and networking** amongst organisations and P&C researchers
- Coordinated training** for organisations and individuals who wish to conduct and use P&C research
- Supervision or training of organisations on **racism and discrimination** in P&C research
- A better approach to **paying, advising and supporting P&C researchers to participate**
- More **thoughtful commissioning** to enable more feasible, better funded and co-produced P&C research
- Not sure

16. What training and development opportunities could be helpful for P&C researchers? Required to answer. Multiple choice.

Please select at most 3 options.

- None
- More P&C research opportunities for people to **learn “on the job”**
- An **accredited training course** on how to conduct research and make change happen
- Training on how to **work** in an inclusive, collaborative and fair way **with Tower Hamlets residents**
- Training for P&C researchers that helps them to **build skills, confidence and navigate the needs and agendas of different organisations** (e.g. Universities, communities organisations, the Local Authority)
- Paid work experience** on P&C research and other projects so they can build confidence and skills
- Support to find **employment opportunities** related to skills acquired as P&C researcher
- Not sure

17. What training and development opportunities could be helpful for organisations (e.g. community organisations, policymakers, universities) who wish to support and deliver P&C research? Required to answer. Multiple choice.

Please select at most 3 options.

- None
- A better understanding the **value and benefits of P&C research**

- o How to **reach out and build trust** with the residents they would like to collaborate with on P&C research
- o How to **work with residents** in an ethical way
- o How to recognise and shift the **power dynamics** between themselves and residents
- o How to **facilitate, support and champion** P&C research
- o How to effectively **commission** P&C research
- o How make sure that P&C research is not negatively affected by **limited timelines and budgets**
- o How to **set expectations about the impact** of P&C research with residents
- o A better understanding of **Tower Hamlets residents** and the **P&C research** being conducted in the Borough
- o Not sure

18.What would be the benefits of coordinating P&C research in Tower Hamlets? Required to answer. Multiple choice.

Please select at most 3 options.

- o No benefits
- o Developing support and infrastructure for **paying P&C researchers**
- o Coordination of **training and learning** for organisations and P&C researchers
- o Knowing where to go to **commission** P&C research
- o Understanding the **research priorities** of the borough and how to get involved in research opportunities to explore them
- o Better coordination and use of **research funding**
- o **Avoiding duplication** of projects
- o Ability to do **bigger and more impactful projects**
- o Ensuring **good quality research** in the borough
- o **Evaluating the impact** of P&C research
- o **Better understanding and collaboration** amongst organisations and communities
- o Relationships can be built for the **long term**
- o Not sure

19.Who would be best at coordinating peer and community research for the Tower Hamlets Health Determinants Research Collaboration (HDRC)?Required to answer. Single choice.

Please pick one.

- o The Council
- o A health sector organisation
- o A university
- o Tower Hamlets CVS
- o A grassroots organisation
- o A medium or large community organisation
- o An independent body e.g. a community interest company
- o Not sure

Section 3

Thank you

20.You are invited to enter a prize draw. Would you like to take part?Required to answer. Single choice.

Prize draw winners will each receive a £50 voucher.

- o Yes
- o No

21.Your contact details for the prize drawRequired to answer. Single line text.

Enter your answer

Appendix 4: Co-production Workshop Guide

1) Collaboration: funding and implementation, how to avoid duplication and create larger/more impactful projects

- What could be a fair and effective commissioning process?
- How do we ensure sufficient funding to implement recommendations?
- How do we improve policymakers' understanding of the value of evidence collected from P&C research?
- How do we avoid duplication and develop larger and more impactful projects?

2) Supporting P&C researchers: payment, training and development

- How do we coordinate payment, training and development?
- What can be improved to support career progression?

3) Sustainability: financial sustainability of the coordination body and P&C research beyond projects

- How can we work together to make sure funding for the coordination body is long term and financially sustainable?
- How can we ensure we conduct continuous research rather than one-off projects?
- Should the council have its in-house peer/community research team?
- Who coordinates: coordination for each area + member selection + how to balance power dynamics

For all groups

- Should the same or different body to coordinate collaboration, supporting P&C researchers, and sustainability?
- How should members be selected to ensure all stakeholders' involvement?
- How to ensure power is equally distributed?

ⁱ City and Hackney Safeguarding Adults Board (CHSAB):

The CHSAB is a multi-agency partnership with a statutory role under the Care Act 2014. Its primary objective is to ensure effective local safeguarding arrangements are in place across City and Hackney. The board is led by an Independent Chair and involves residents in various capacities. While it includes representatives from local authorities, the CHSAB operates as a distinct entity with its own governance structure and strategic priorities. Partner agencies collectively fund the board, and their attendance, financial contributions, successes, and challenges are closely monitored.