Connect:
A Year of Building Belonging in Barking and Dagenham

June 2025 Report

Connect

Barking & Dagenham · Care City · Community Resources · ageable · Dagenham Rhythms Community Choir · ELEVATE TOGETHER · HARMONY HOUSE DAGENHAM · HUMOUR RISK CiC · Independent Living Agency · Signal · SURESTEPS WELLBEING SERVICES
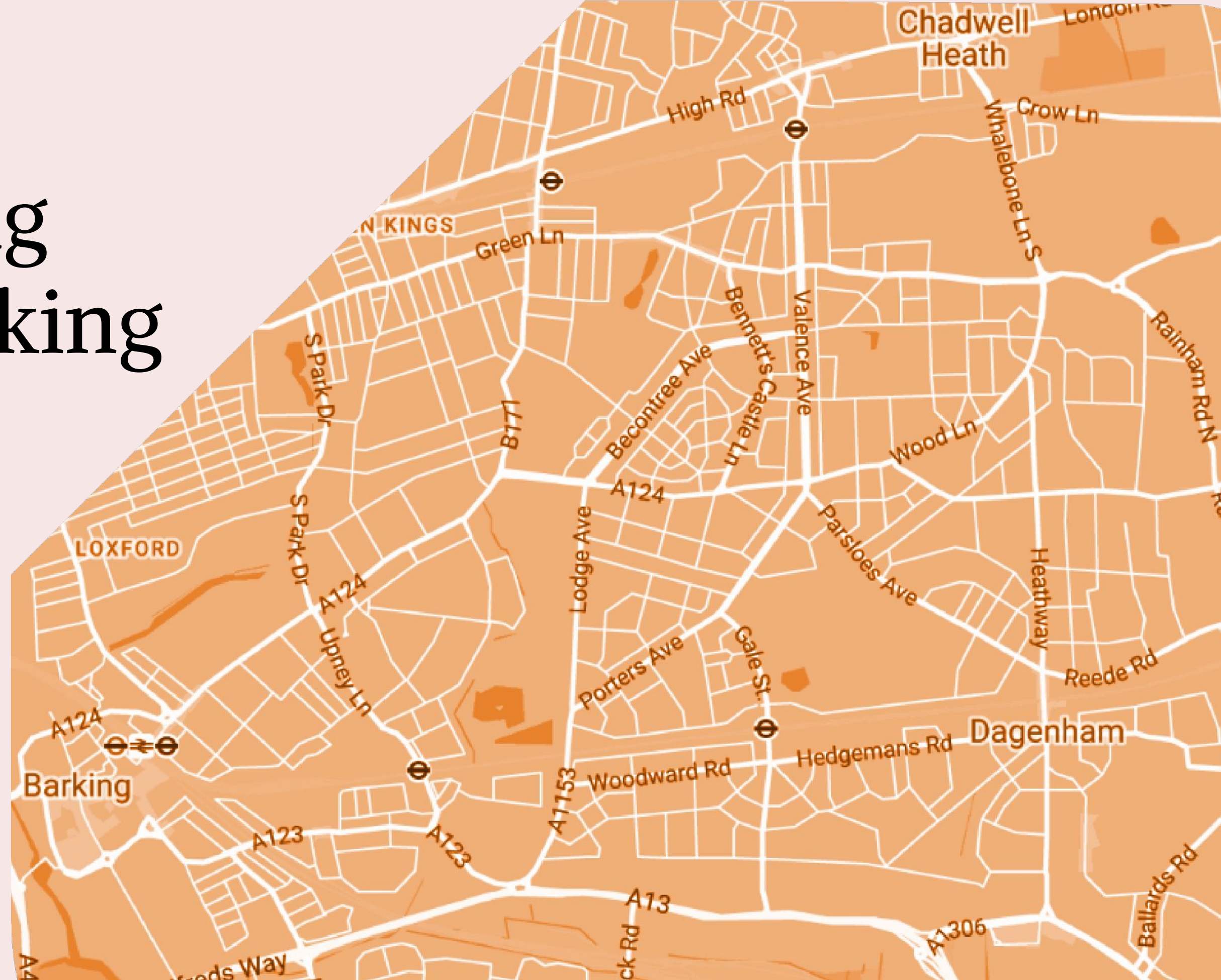
About this report

This document tells the story of the Connect programme. Conceived as a novel approach to addressing social isolation in Barking and Dagenham, Connect brings together a partnership of Voluntary, Community, Faith and Social Enterprise (VCFSE) organisations to help local residents find connection and belonging. This VCFSE partnership, comprising members of the BD Collective, has been working together for over a year now to support residents and explore the ingredients of a connection-friendly borough. This report tells the story of that journey, the impact we've made, and the learnings we've accumulated along the way.

We hope that sharing about the programme here can enrich ongoing explorations into effective ways to build sustainable connections and address complex place problems like social isolation. This report attempts to bring the details of this programme to life, by drawing out some of the nuts and bolts of the approach we've taken to working alongside people, and also sharing first-hand stories of the programme's, shaped by residents themselves.

Report Contents

Section 1: Background and Origins

Origins of the programme

Connect was commissioned by the London Borough of Barking and Dagenham to address one of the borough's biggest challenges: helping people who are isolated to connect into community and build sustainable relationships. At the time of the programme's conception, we knew that our borough had the [second highest rate](#) of chronic loneliness in London, with 11.2% of residents reporting that they felt lonely "often or always" compared to London and England averages of just over 7%. This amounts to some 24,517 residents who are more likely to get sick than the rest of the population, more likely to need support from services, and less likely to recover. Using funding from the Better Care Fund, Ageing Well Programme and CEV funding, Connect has sought to build on other work that the BD_Collective and Council have done in recent years to address and understand the causes of social isolation. The purpose of Connect is to actively partner with residents to reduce social isolation in the borough, while building and exchanging knowledge about the following:

- What causes social isolation?
- How can we work alongside people in ways that spark their energy to overcome barriers and develop agency?
- What works to help people connect into dependable networks of friendship?
- What's required from service integration to support those who are isolated?
- How does service use change when people become sustainably connected?
- How can we establish an environment of connection, trust and belonging across neighbourhoods?

A novel preventative approach, based on building a different kind of capacity

From its conception, Connect was designed to be a *preventative* approach - to **stop people from needing services** in the first place, or to **reduce the demand** for low-impact service interventions by focussing on connecting people together, rather than fixing them.

As well as the individual cost of isolation to our residents, we have public services in Barking and Dagenham which have been under significant fiscal strain for many years. When not addressed, chronic isolation contributes to this strain. A [2016 lottery-funded study](#) estimated that disconnected communities cost the UK economy £32bn per year - around 1% of GDP at the time. To put this in context, £32bn equates to 72% of the total Local Government Grant during the same year.

Employer costs associated with loneliness are [estimated by the UK Government](#) to be around £2.5bn, through increased turnover, absences and caring responsibilities, and lower productivity. The following two pages outline some broader costs associated with social isolation, that have motivated the project, linked to increased demand for both adults social care and health services.

Connect has sought to respond to these challenges, in a way that recognises the complexity of social isolation, and the need to draw on strengths across the community, rather than deploying a single provider approach such as befriending services, which research often shows to have [little or no effect](#) on health and wellbeing outcomes.

Isolation increases demand for Social Care

Loneliness is a strong predictor of entering care homes: The [English Longitudinal Study of Ageing](#) (ELSA) found that lonely individuals were about twice as likely to be admitted to a care home—even after accounting for age, health, and socioeconomic factors. Loneliness accounted for nearly 20% of admissions.

• **Reduced social contact increases dementia risk:** [UK Biobank data](#) show that socially isolated older adults had a 62% higher risk of developing dementia, independent of their genetic predisposition.

• **Physical health decline and isolation:** Isolated people have [elevated risks](#) of cardiovascular disease, strokes, heart attacks, and even fatalities - especially when living alone - likely due to both biological effects and lack of timely assistance.

• **Isolation predicts hospitalisations for infection:** Severe social isolation is associated with [more hospital admissions](#) for infections and respiratory conditions, again increasing reliance on health and care services.

• **A number of contributory factors lead to escalating care needs:**
   - No informal support – Without family, friends or community involvement, small health issues become crises.
   - Worsening mental and physical health – Isolation can drive depression, cognitive decline, frailty, and chronic illnesses.
   - Delayed detection & help – People living alone may miss early signs or lack help getting medical attention.

Isolation increases demand for health services

- **More Primary Care Visits:** A University of Sheffield meta-analysis found that lonely individuals make substantially [more GP visits](#), suggesting that even small reductions in loneliness across the population could ease NHS pressure. Meanwhile, specific programmes in Northern Ireland showed preventing loneliness saved NHS costs—each £1 spent on reducing isolation saved £2.38 in GP/A&E visits and £5.81 in pharmacy/home-visit costs .

- **Increased Emergency and Hospital Use:** [Studies report](#) lonely older adults are 1.6x more likely to visit A&E and 1.8x more likely to go to their GP, while 3.5x more likely to enter residential care. Social isolation, especially among older people, is also linked to higher rates of falls, infections, delayed hospital discharges, longer inpatient stays, and more frequent nursing-home placements. Delays in hospital discharge are more common for isolated older adults lacking informal support to return home, increasing pressure on health and care services alike.

- **Increased Need for Mental Health Community and Crisis Services:** Social isolation is [strongly linked](#) to worse mental health outcomes, including an increased risk of depression, anxiety and suicidal ideation.

The case for making B&D an easier place to connect.

148 studies examining mortality rates across all ages, genders and ethnicities show that having strong connections **increases the likelihood of surviving in any given year by more than 50%.**

- Julianne Holt-Lunstad et al (2010): 'Social relationships and mortality risk: a meta-analytical review', PLOS Medicine

A longitudinal study of 2,835 women with breast cancer found that those with good relationships were **four times more likely to survive than those without**

- Candyce Kroenke et al (2006): 'Social Networks, Social Support, and Survival after Breast Cancer Diagnosis.' Journal of Clinical Oncology
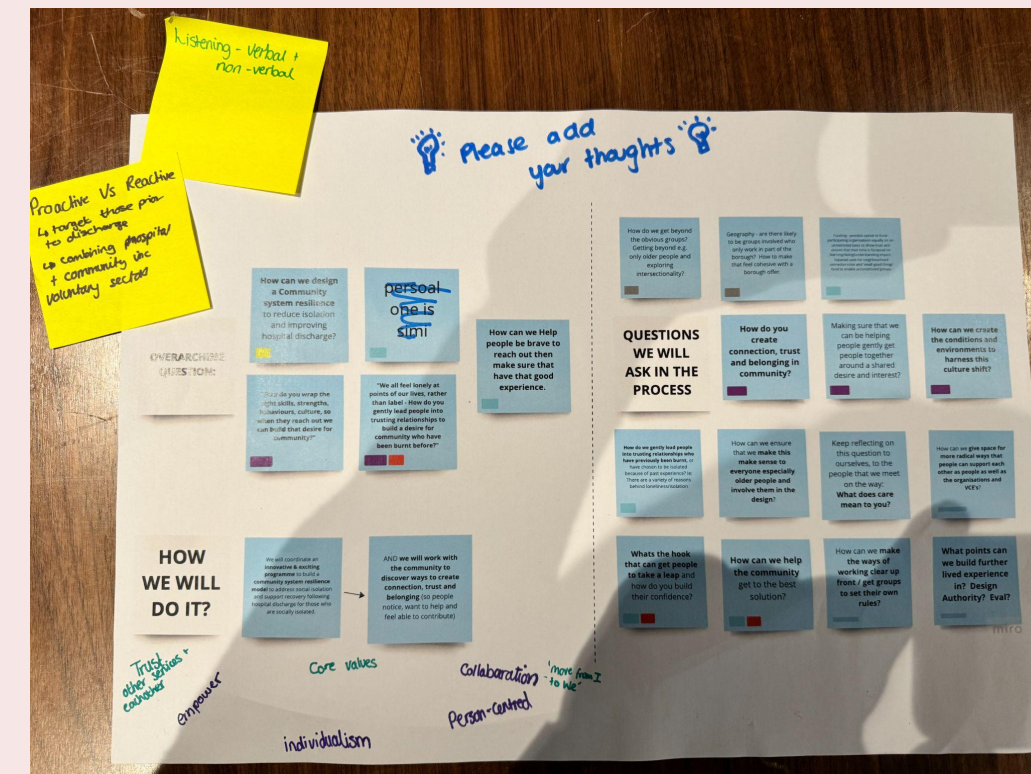
Phase 1: Co-designing Connect

Connect has so far been delivered in two parts. Between September 2023 and May 2024 the Connect approach was entirely co-created with the Barking and Dagenham Community, through a full design process.
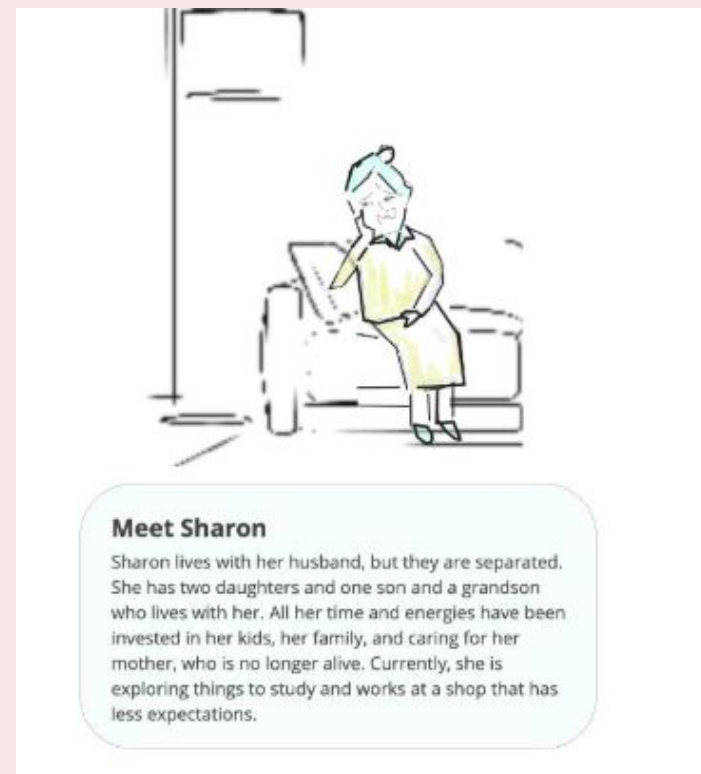
Ethnographic research with residents experiencing isolation
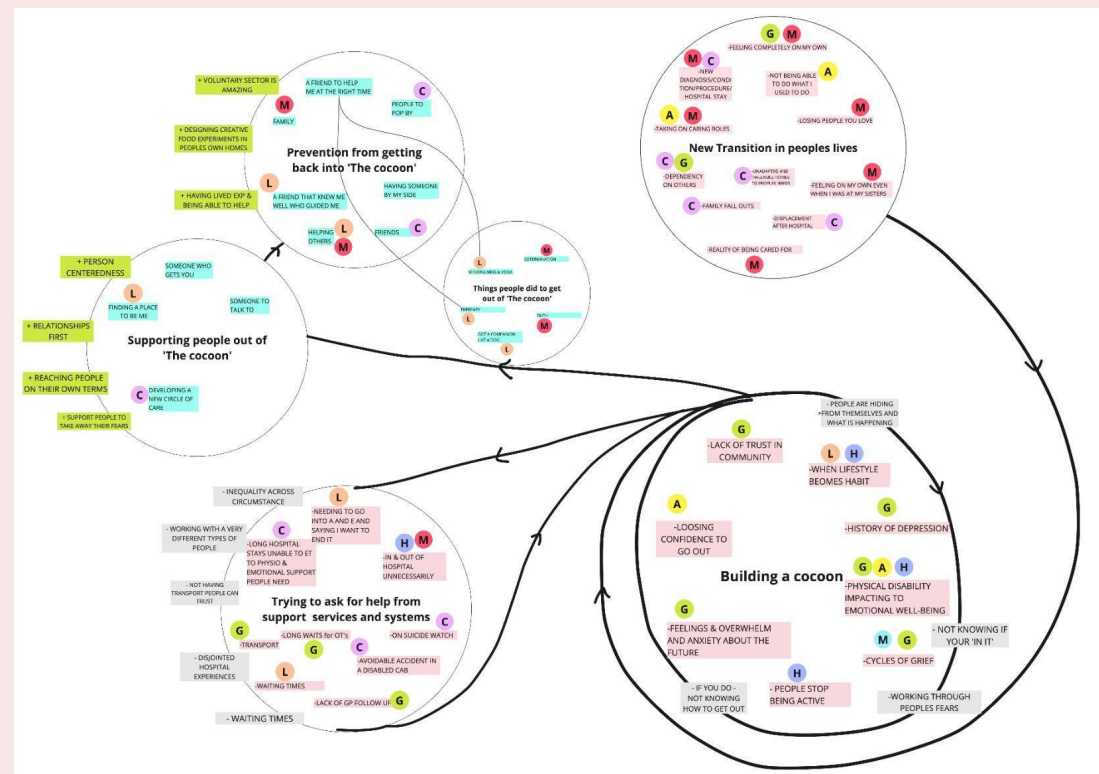
Analysis of local intelligence and and insights from other places

Co-created Design Principles

A series of six community workshops with residents experiencing isolation, the VCFSE sector and public sectors

The two pages that follow show examples of different stories shared with us by Barking and Dagenham residents, as part of our discovery work - these reveal some of the conditions causing or underpinning social isolation, and deeper understanding of which has inspired our approach.

A peak into William's life

"My father didn't really encourage me to have friends. I tended to have acquaintances rather than friends at school, where I was immature and had poor social skills. I tended to keep myself to myself. When I went to college, my roommate moved out after 6 weeks. I can't really remember the trigger for feelings of loneliness, but I realised how lonely I was when I was in the hospital in 2017 and during the COVID lockdown."

"I try and strike a balance between social and non-social activities, as I am trying to declutter my flat and write some books. I sometimes have several days without really talking with anyone and then may get tired by having several days of activity. I suffer from tiredness and try not to take on too many things."

Hello brother!
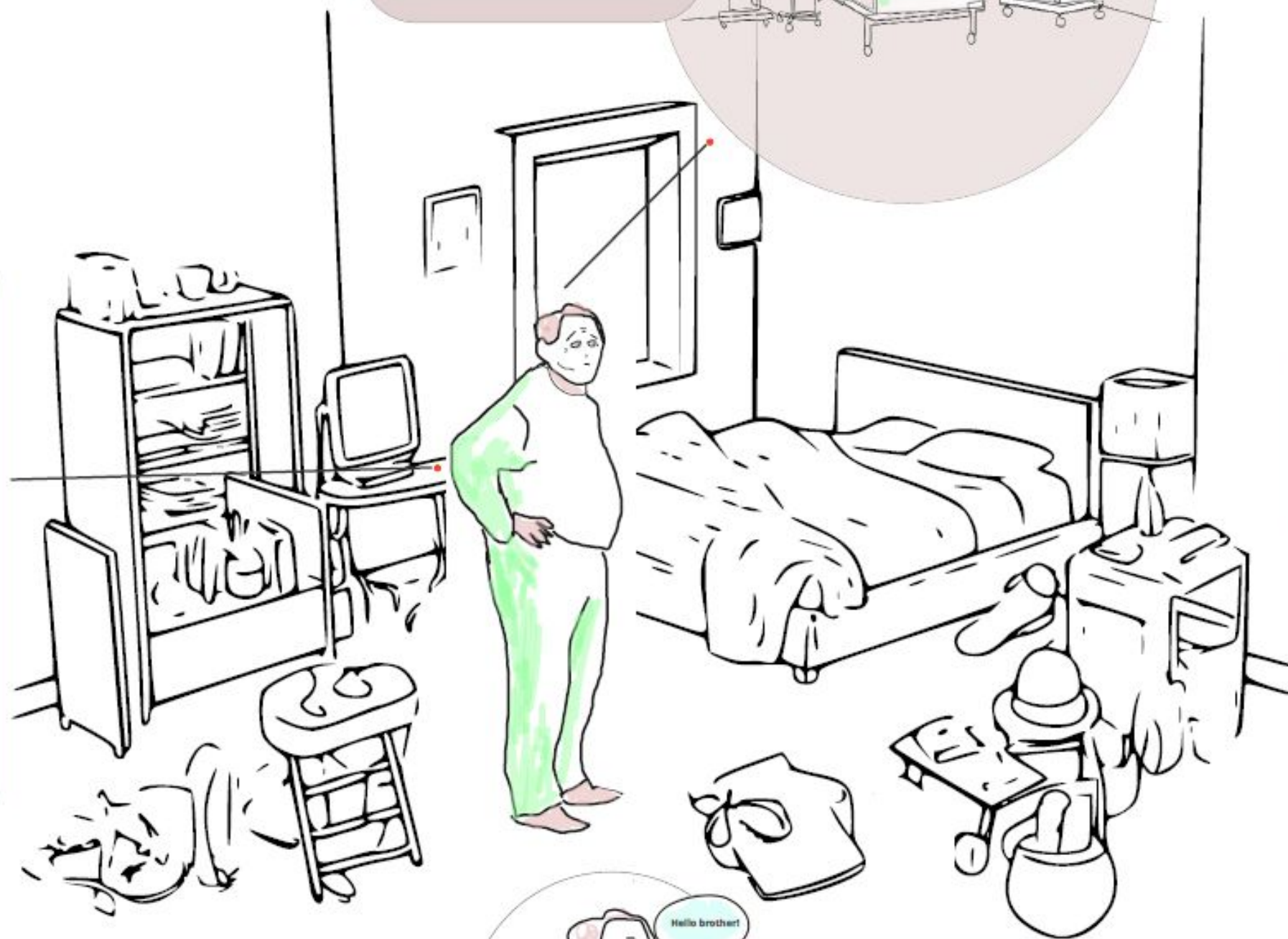
"I don't see members of my family often, but I get occasional phone calls from my brothers. I have a few friends I see occasionally, but I am embarrassed about my messy flat."

A peak into Grace's life

Meet Grace

Grace lives in Barking and Dagenham; she lives on her own now. Her husband passed away about 14 months ago. She has a wheelchair and lives with a condition called neuropathy, which affects her nervous system, as well as a dust allergy because she can't clean and doesn't know what is happening or available to her. She says, **"One minute you have pins and needles in your fingers and toes, and the next minute you can't walk and you need a wheelchair."** She has a ramp that she has just installed, and she needs it to get out of her house with her wheelchair, but she had to pay for both herself because it took too long to get an assessment to get it sorted.

"When I got sick, my husband looked after me and became my full-time carer. Then he developed low blood pressure and lung cancer, and the roles reversed, and I became his full-time caregiver." She says, **"The professionals who looked after my husband would come and then just disappear."**

"At the time, we were pretending that what was happening to us wasn't happening to us."

I have no-one, and I'm so scared because I'm all on my own every day now my husband has died.'

"A typical day is me waking up typically really early, as I don't sleep well. Sometimes I feel so rubbish that I stay in bed all day. On a really bad day, I hit a hammer hard on my table.".

"My sister doesn't live close," but she comes to see her once every 3 weeks in order to get some food in.
"Occasionally we'll go out somewhere together, like to the market, but she comes and is my support whenever I need her"

"My sister asked my neighbour to take out my bins weekly for me, but the neighbours never talk to me more than they have to. When I'm upset and in here, no one pops around and says, Are you okay? Once, I heard him shouting at her, and I called the police for her to make sure everything was okay. I always say, 'I have people that are next door to me, but none of them actually care like a neighbour should. They only care about themselves."

After undertaking an open process with the BD_Collective to find our first delivery partners and neighbourhood testing teams, Connect 'launched' at the beginning of July 2024.

What follows is the story of what we've learned in this first year, from the first 105 people we've worked alongside 1:1, and from the hundreds more residents who have embarked with us on creating friendlier neighbourhoods.

Section 2: Our approach

An emerging vision and model

Based on the initial co-design, Connect has developed a way of working alongside residents that is unified around a collective vision for the programme, which everyone working on the project is committed to exploring and bringing to life as part of their work. Our vision is of **an environment around people that helps connections to spark and flourish over time**.

The way we work in Connect is shaped by this "environmental" lens. The project co-design phase helped us to conceptualise **three different but overlapping environments** that exist around people who are socially isolated. And we see our roles on the project as that of exploring and shaping these three environments, such that each person is surrounded by a set of conditions that enable collections to flourish for them. These environments are the:

- **Personal**: The immediate circle of family, friends, and practical conditions that exists around a person
- **Societal**: The broader socially-focused organisations, activities, assets and opportunities that exist in a neighbourhood
- **Service**: The public services that are available to engage

Different partners on the project focus their efforts on different aspects of this overall environment, but all are also engaged in exploring how they overlap, and how different sectors can work together to provide what people need for connection. The following page shared a visual representation of this initial framework for thinking about Connect, and some of our early assumptions about the things we assumed would need to be present in these environment, which we would test, adapt and add to.

How does it work?

We've been exploring **what needs to be present** within people's environment for meaningful connection to spark and sustain
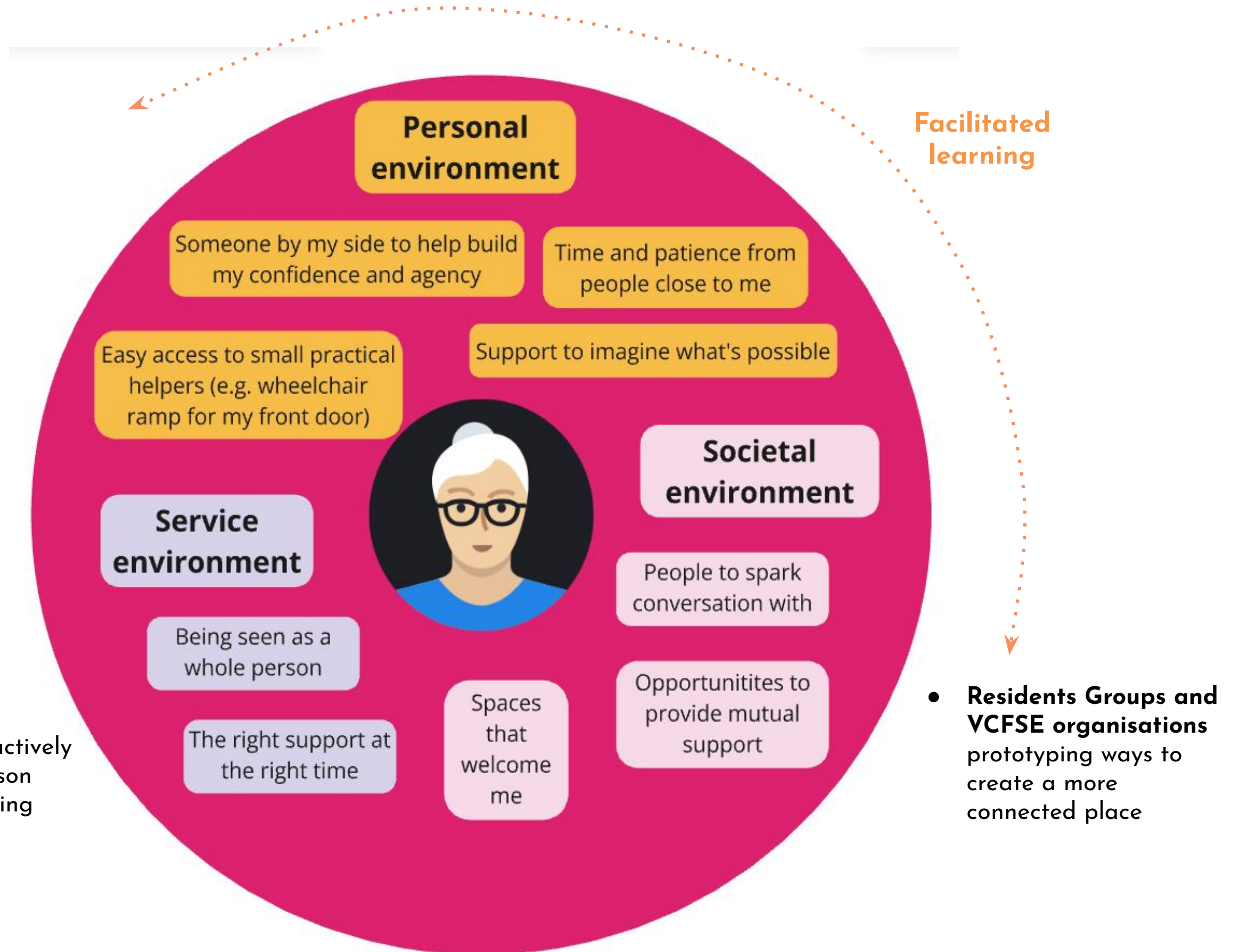
And **how we need to work together** to bring these things to life

- **Three VCFSE Delivery Partners** holding the relationships with resident referred in
- **Cross-organisational learning sessions** every week
- **Capturing lived experiences** as we go

Facilitated learning

- **Services coming together** to actively connect the dots' around a person and test different ways of working

- **Connection Catalysts working 1:1 alongside residents** to surface what matters to them, help them build confidence, co-create an approach to acting on their desires.

Facilitated learning

Personal environment

Someone by my side to help build my confidence and agency

Time and patience from people close to me

Easy access to small practical helpers (e.g. wheelchair ramp for my front door)

Support to imagine what's possible

Service environment

Societal environment

People to spark conversation with

Being seen as a whole person

The right support at the right time

Spaces that welcome me

Opportunitites to provide mutual support

- **Residents Groups and VCFSE organisations** prototyping ways to create a more connected place
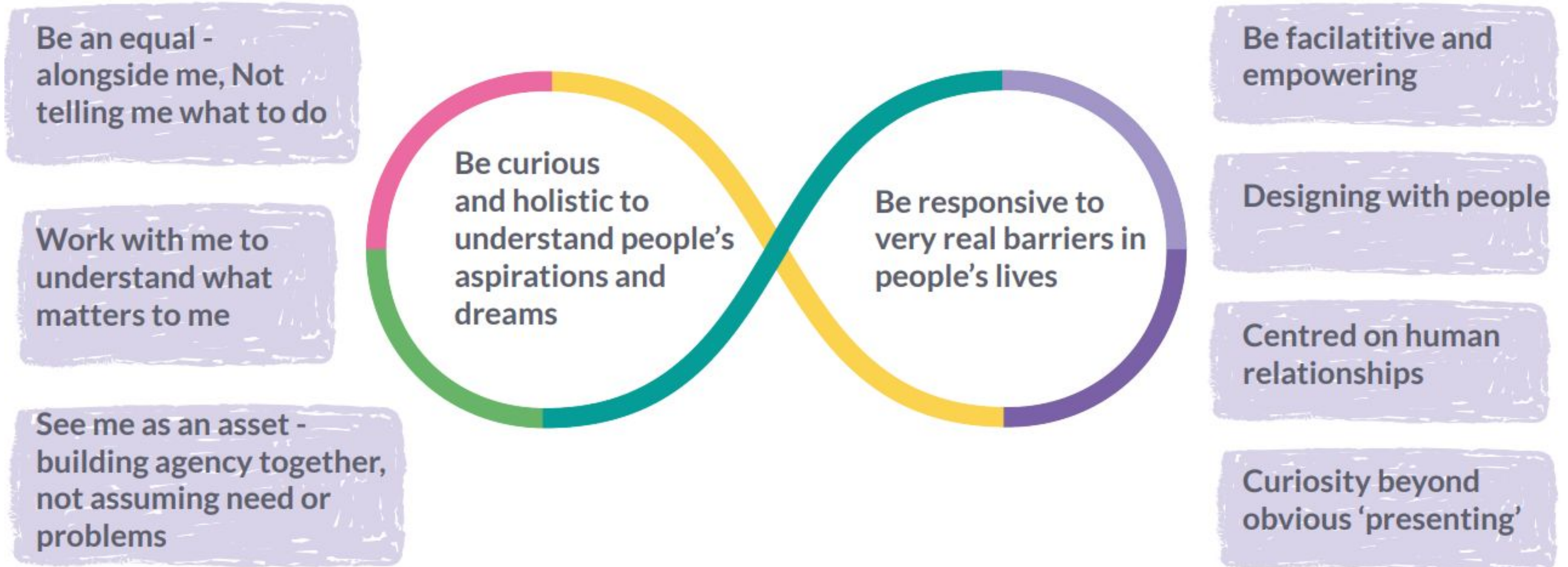
1:1 Support

If the programme is relevant, residents [referred into Connect](#) are matched up with a "**Connection Catalyst**", who is employed by one of the three VCFSE delivery partners working within the Connect partnership (Independent Living Agency, Harmony House, and Humourisk CIC). Connection Catalysts then work 1:1 alongside someone who is socially isolated to:

- Surface what matters to them
- Identify and overcome obstacles to connection
- Build a person's confidence by helping them refocus on their desires, strengths and skills
- Help them access opportunities and assets in the borough
- Support them to imagine and experiment with new ways of sharing their skills

Each resident might meet their Connection Catalysts weekly initially, before finding a suitable rhythm. Often this entails first meeting someone in their own house, before going out and doing more together in the community. An important part of our model is that these relationships are **open-ended -** it is up to the resident to ultimately determine the pace at which they try new things, experiment with new connections, and arrive at "dependable friendships" that mean they are ready to "graduate" the programme.

Our early framework for working alongside people 1:1

Be an equal - alongside me, Not telling me what to do

Work with me to understand what matters to me

See me as an asset - building agency together, not assuming need or problems

Be curious and holistic to understand people's aspirations and dreams

Be responsive to very real barriers in people's lives

Be facilatitive and empowering

Designing with people

Centred on human relationships

Curiosity beyond obvious 'presenting'

Further emerging principles for working together in partnership

Led by curiosity ("understand, not assess")

Surface what matters to people

Flexible to changing needs

Decisions made in the relationship

Complement what's happening elsewhere

Builds individual agency and community capacity

No time limits

Creative in scope

Connect together, rather than fix

Connect Neighbourhoods

In addition to working alongside people 1:1, as part of Connect's "Neighbourhoods" work, a wider range of local VCFSEs and resident groups have been exploring the ingredients of friendly communities - what needs to be present within that "social" environment around people? These organisations are exploring questions that have emerged from delivery partners working 1:1 with residents that touch upon those key conditions for a friendly and connected borough:

- **How do we create spaces where people leave feeling better than they arrived?**
- **How do we create activities with magnetic pull that keep people coming back?**
- **How do we create spaces that recognise and encourage people's desire to contribute?**

Each of the Neighbourhoods teams is also prototyping small new ideas, using a participatory grantmaking process, to help them explore these questions over time, and refine how they engage their communities. These organisations are:

- Elevate Together
- Community Resources
- Dagenham Rhythms Community Choir
- Shed Life
- Sure Steps Wellbeing
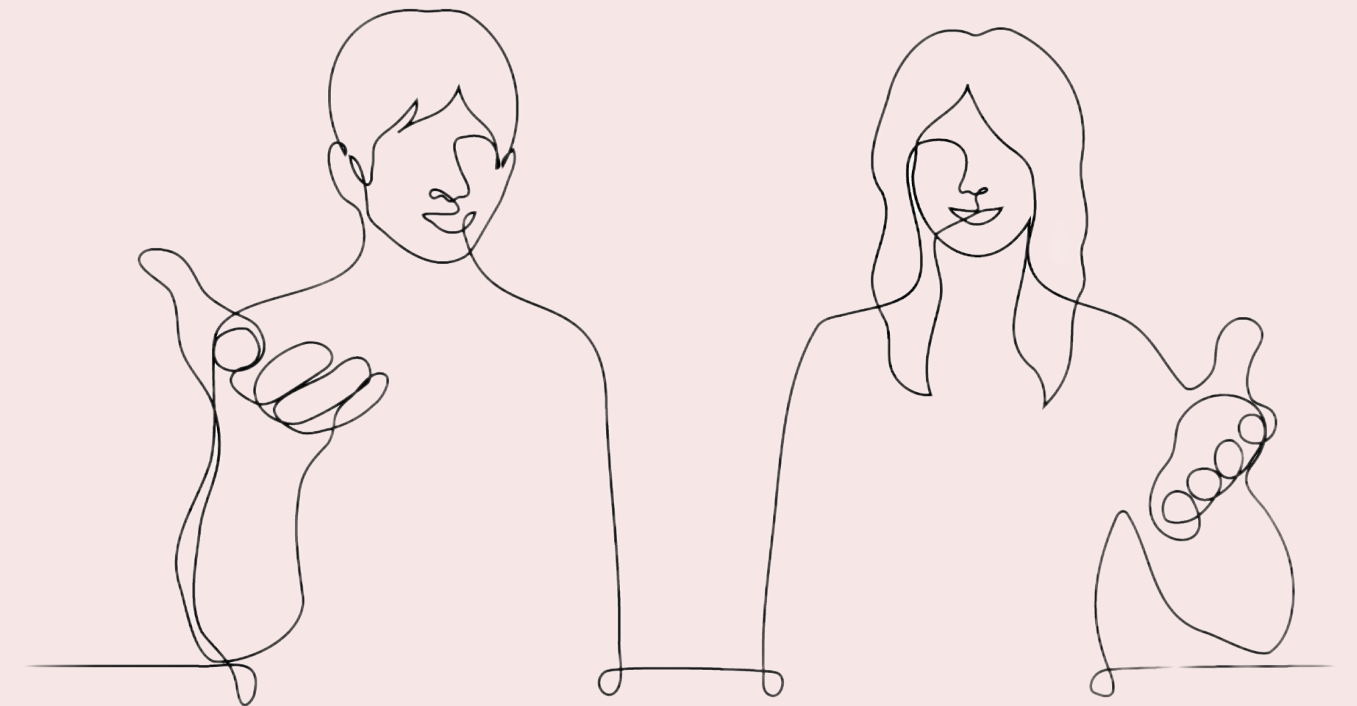
Service Engagement

In addition to Connect's 1:1 and Neighbourhoods focus, we have also been exploring what needs to be present in the service environment existing around resident in a series of "**Connecting the Dots**" sessions. These bring diverse local authority team members and VCSE organisations together to explore "behind the scenes" individual stories of people who've got lost in low-impact service responses, to explore and act on opportunities to:

- pull the right support around people at the right time
- collaborate across services through knowledge sharing or mutual action
- come together with VCSE sector around shared challenges that neither can solve alone
- provide smoother channels for residents who often feel stuck or overwhelmed within service interactions
- support residents and local social organisations to understand how they can navigate and work alongside services effectively, to enable system blockages to be worked through
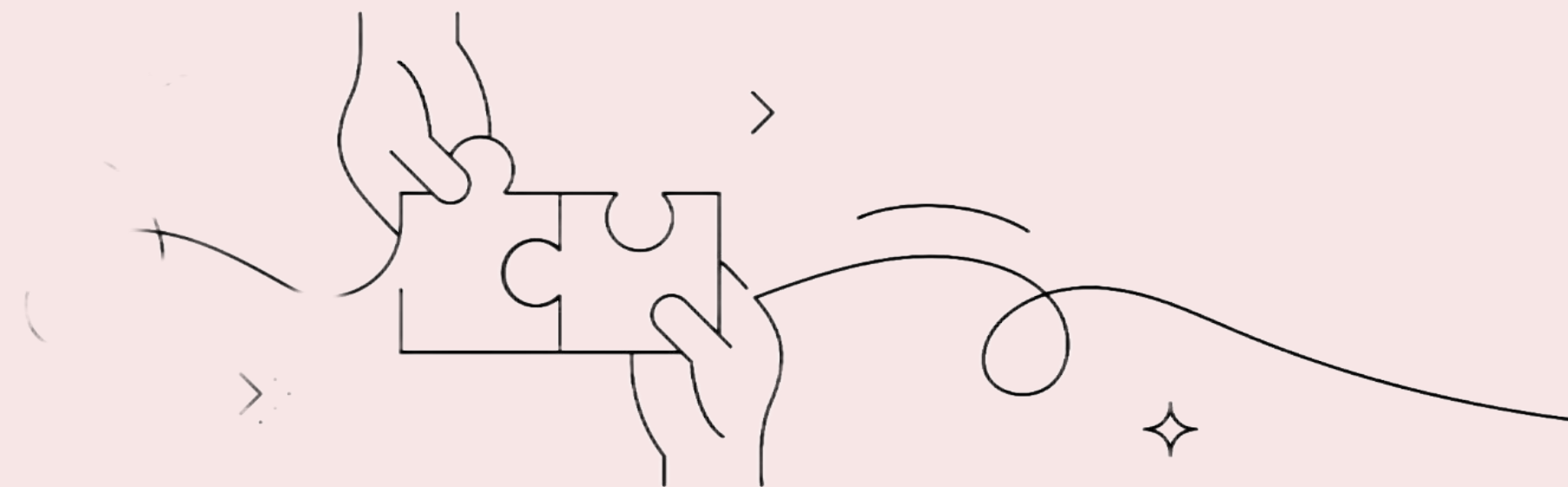
Learning as part of the work

A defining feature of Connect is that learning is not something that happens around the project, it's central to the way we operate. The programme has been inspired by the [Human Learning Systems](#) framework championed by Prof Toby Lowe, which proposes a new approach to public service that embraces human relationships and continuous learning. This approach is founded in an understanding that no single person, organisation or sector can understand everything that shapes our social health. From our housing situation, to our family history, to the safety of our streets, and the person who's just moved in next door, the list of factors that determine whether we end up socially isolated or lonely is enormous. What's more, the individual factors impacting the connectedness of each person can change rapidly form day to day.

As such, we've seen that the work we do and the support we're providing in Connect needs to be *iterative* - it needs to be constantly evolving based on changing circumstances and based on learning emerging beyond the horizon of any individual partner in the programme. What's more it needs to be *systemic* - it needs to recognise that an environment around people that can spark long-term friendships won't just be something that any one person can engineer into existence on their own. It also needs to be deeply *human -* relying on relational approaches that are able to surface the unique things that matter to people.

Practically, we've sought to support these through **three learning communities** that explore the respective environments existing around people. These communities meet at weekly, monthly or two-monthly rhythms to share experiences and adjust approaches based on what's emerging.

Within our core learning community, Connection Catalysts are exploring the qualities needed in a person "walking alongside" a resident to support them to build the confidence and agency to experiment with taking small steps into community? And we're exploring the broader range of practical but perhaps unique conditions residents need around them to feel secure enough to do this. However, we know that some of these ingredients for connection can't be worked through solely within these 1:1 partnerships.

For instance, we might be well placed to help residents get to know their neighbours, or to help them build confidence to get out on their own, on a mobility scooter. But what if they're a resident is so ashamed at the condition of their house that they don't want to invite anyone else in? What if they have agoraphobia and need specialist support, or are facing eviction from their home? In these cases, we need the ability to swiftly bring the broader community of support around a person - that is, to tap into things in the **societal** and **service** environments, which are being explored through Connect Neighbourhoods and the Connecting the Dots communities.

Because of this, we are also creating opportunities for different individuals, organisations and sectors in the borough to talk to, learn from and call upon one another, when they might be more used to operating apart. We are making sure our learning communities overlap, and share learning across divides, so we can explore not merely how we can bring the right support around people, but also **how we need to work (together)** in order to make this thing possible. On the following two pages, you can see some of the "principles for learning" we co-created at the start of the Connect programme to enable us to learn effectively in this way, and in alignment with our broader principles of the project.

Our principles for learning

Thinking in terms of "Place"

We're being led by residents' ambitions rather than what we have to offer as individual organisations, when working alongside people. This means we're trying to think in terms of "place" - being open to learn about other organisations, how they might meet people's ambitions better than our own can, and how we might complement what's already available to people.

Collaboration (not competition)

We've spoken as a team about the problems of the narrow competitive view that is often encouraged in the VCFSE sector by small pots of money that people feel they have to fight with one another over. Instead, we're interested in what can happen when we develop and build ideas together. This is something we're doing in our Neighbourhoods learning community, where we're using a participatory grantmaking process to shape and test small ideas for building friendlier spaces. Here, people are pitching to their peers, and getting peer support to clarify and refine those ideas. In this way, we've found that people start championing one another's ideas and think about ways they might deliver things together or link together in closer ways.

Active Learning

We're trying to learn by *doing things* - testing things in small, but safe, ways and seeing what happens. For instance, we didn't spend weeks up front planning a perfect system for dealing with incoming referrals to Connect, We took something minimal to start, and added to and refined that based on what we saw we needed.

Our principles for learning

Open ended

We recognise that what works for one resident, at one time, may be very different from what they needs a few weeks or months later, when something in their environment changes - like when a friend of theirs moves away, they face a new health challenge, or something changes in their neighbourhood. In this way, we recognise that the learning never ends and we try to avoid the pitfall of thinking we've found *the* solution for any individual or broader organisation or community.

Being **"human"**

We seek to be open to the creative and emotional dimensions that are integral to the idea of being "human". This can mean acknowledging our own challenges as people supporting others, giving ourselves permission to make mistakes, and the need for the right boundaries and supports. This has also means that we make space to benefit from our capacities for empathy - we want people to feel able to see and feel into the deep motivations of residents, and respond appropriately and flexibly based on organic conversations, rather than designing a rigid process everyone has to stick to. We've also sought to always empathise with those working alongside us - other organisations and services - seeing that everyone has their own goals and is trying their hardest.

Imagining beyond the norm

We're trying to think beyond our first responses and assumptions about what can help. To support these we've engaged in more contemplative activities inspired by the growing field of "[collective imagination practice](#)" to bring people's lives, their interconnections and possible futures for Barking and Dagenham to life.

# Tools and supports we are using to learn and experiment

As part of our learning process, we're using **SIGNAL**—a structured tool that helps people reflect on what matters most in their lives. Through a guided conversation and a visual Lifemap, residents explore core areas of wellbeing and begin to take practical steps toward greater connection, control, and confidence. This is helping us surface and learn about issues that may not come up naturally in conversation and really get under the surface of what matters most to people. A detailed example of SIGNAL's use and it's benefits for learning can be seen in this [case study](), with some of this also shared in the Learnings section of this report below.

We're also deepening our ability to experiment using the "**Small Good Things Fund**" - a small pot of money residents case use to access small, but in principle unpredictable, helpers - things that may help them meet unique challenges in their immediate conditions. For instance, the Fund could be used to help people purchase a new mobility aid, test out a new activity, or buy a suitable pair of glasses so they can see the people they're talking to. Conversations around the fund have helped us to learn together, as conversations around money often quickly surface the crux of matters. Decisions about the use of the Small Good Things Fund have been made in partnership between residents and their 1:1 Catalysts. More recently we've also developed this process, so 1:1 catalysts bring some proposals to the broader Connect team, to help crowdsource or refine ideas.

Section 3: Key Figures and Impact Summary

Resident Referral Sources (total: 105)

The below chart lays out the channels through which residents were referred into Connect for 1:1 support.
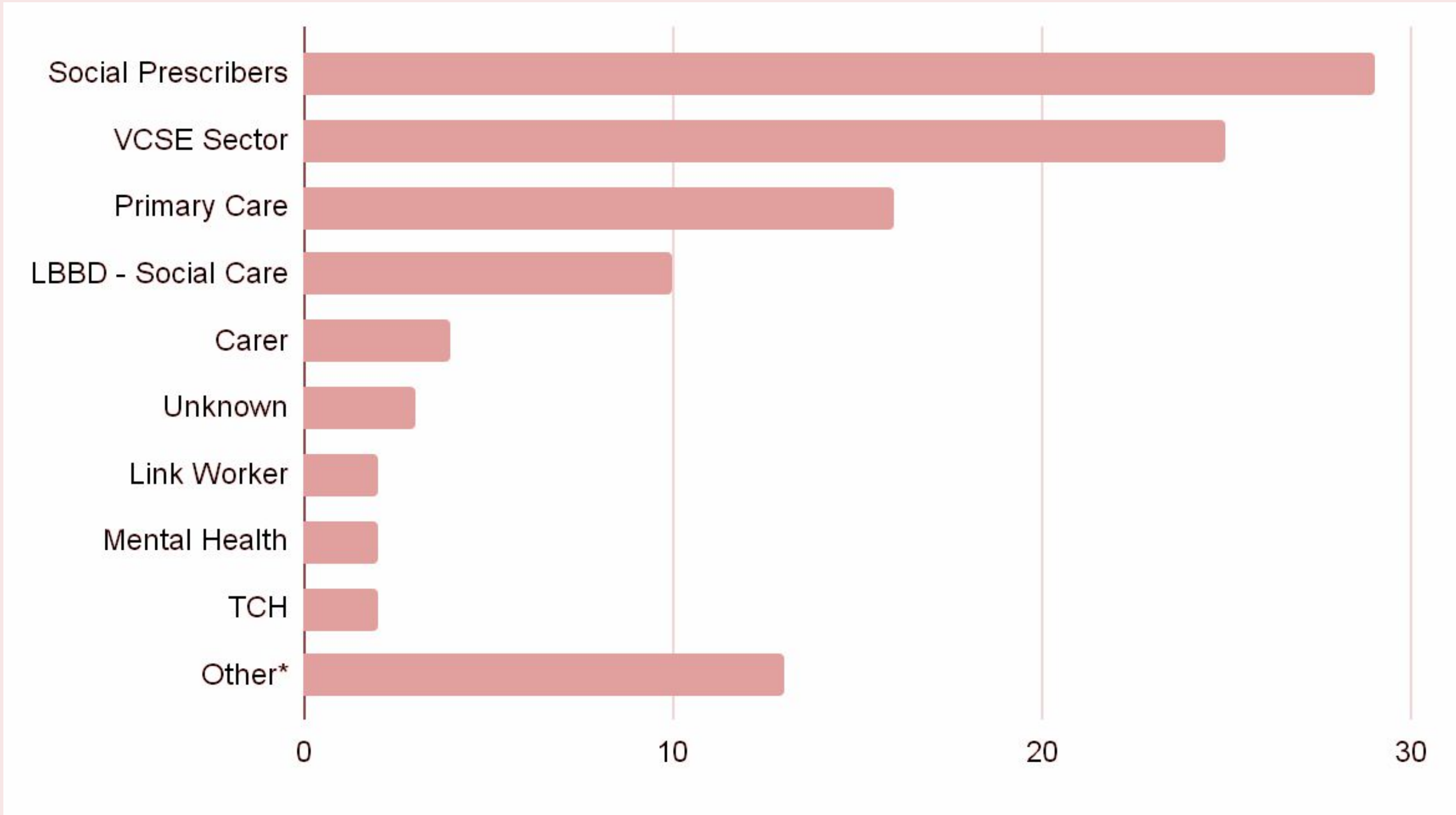
Other* sources with <2 referrals::

1 - Community Stroke Nurse Specialist

1 - Addiction Services

1 - BHRUT

1 - Community Matron

1 - Community Nurse

1 - Community Nurse (via social prescribers)

1 - Hospital Consultant

1 - LBBD (Not Social care)

1 - NELFT Community Services

1 - Occupational Therapy

1 - Physiotherapist

1 - Self referral

1 - Via GP pop up

Total economic impact (n = 9 residents)

Type of benefit	*Benefit*	Taxpayer savings	Individual savings	Individual life improvement	Total
Health (& emergency services) costs	Reduced need for ambulances	£26,622			
	Reduced GP appointments	£960			
	Reduced hospital outpatient requirements	£5,980			
	Reduced hospital overnight stays	£46,599			
	Reduced need for mental health support	£14,950			
	Reduced police call outs	£6,000			
	Reduced need for residential care	£2,132			
Personal costs	Night carer		£26,000		
	Taxi		£195		
Wellbeing	Loneliness reduced due to contact with worker			£34,086	
	Loneliness reduced due to new social connections			£51,129	
	Improved access to the world			£19,500	
	Improved living conditions			£48,750	
	Improved health due to consistent medication			£6,500	
	Taking part in creative and group activities			£6,500	
Grand Total		**£103,243**	**£26,195**	**£166,465**	**£295,503**

Spend to date
(Sept 2023 – June 2025)

Budget Line	Spend to Date	Notes
Design Phase Dedicated Support, including design support, due diligence and delivery partner documentation.	£36,468	Including Ageable CIC and David Ayre associate time
Delivery Partners	£150,000	ILA, Harmony House, Humourisk CIC (£50,000 per year, per partner)
Neighbourhood Investment	£32,490.30	Includes funding from other sources and participation funding. Invested through participatory grantmaking. Small amount of underspend carried forward to next phase.
Small Good Things Fund	£26,500	Includes 5% Open Collective Fee. £5,105.11 carried forward to next phase (further funding for SGTF not available).
Care City Project Delivery	£90,480	Includes mid-project evaluation, contract management and independent economic impact assessment, plus EB, MR support to all aspects of discovery, design, delivery, learning and stakeholder management.
Community Resources Project Delivery	£25,571	Includes SD, AM time supporting Connect the Dots and EP support to all aspects of discovery, design, delivery, learning and stakeholder management.
Use of Technology	£2,400	SIGNAL CIC life mapping (gapped during next phase).
Workshop Expenses	£5,409	For 6 x discovery and design workshops, participation recognition, contribution to one year celebration event.
Total:	£369,318.30	Overspend covered by Care City CIC.

Key outcomes evidenced through [mid-point evaluation] of Connect:

Value for Money

- Estimated **£3.25m of savings for the initial 105 people** worked with, based on the mid-point evaluation.
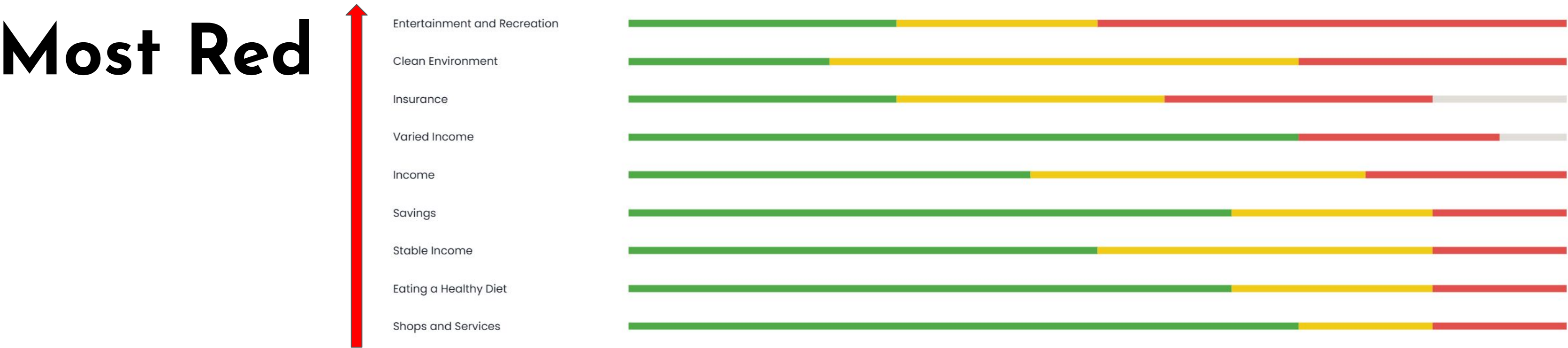- Around £9 saved for the Borough for each £1 invested in the original project.

Impact

- **Reduced isolation** and **greater confidence** connecting with others.
- **Consistent feedback of reduced demand** for primary care, ambulances, hospital (inpatient and outpatient), police, MP, council and mental health services.
- One case of an **eviction being avoided**.
- People **increasing their mobility** and confidence about movement and travel.
- **Improved wellbeing** and people building confidence to set and achieve aspirations (e.g. taking charge of big decisions, making future plans, playing a role in helping others).

Process

- Effective **cross-organisational working** between VCFSE partners.
- Evidence of innovation and learning between teams, and a growing maturity around constructive challenge.
- More **integrated working around people experiencing complexity** around the wider determinants of health, e.g. housing, community safety, and those who've been housebound.
- Significant **learning capture** about the causes of social isolation and what works to address it.
- **Increased knowledge** about creating a wider sense of community in the Borough (new, but will lead to additional impact).

The below chart, showing data from **residents of working age** engaging 1:1 with Connect, illustrates which areas of their lives were proportionally scored as most "red" in the SIGNAL life-mapping tool. Red is defined as 'I'm stuck and need help'.

Most Red

Entertainment and Recreation
Clean Environment
Insurance
Varied Income
Income
Savings
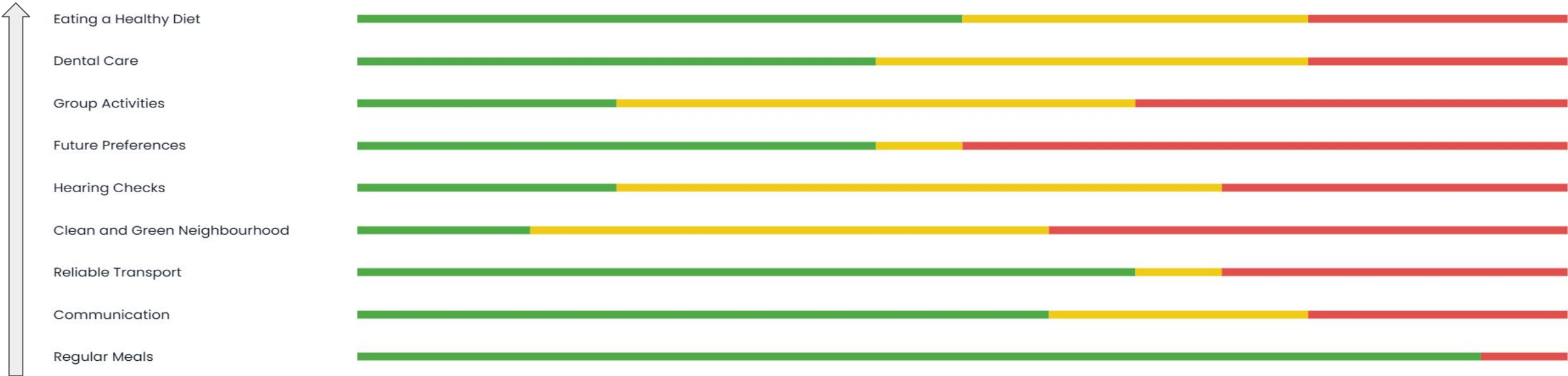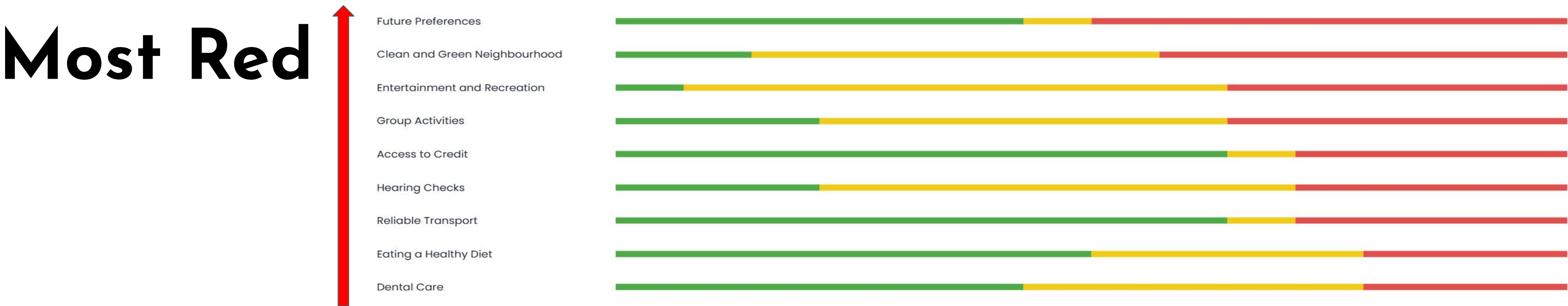Stable Income
Eating a Healthy Diet
Shops and Services

In contrast, the below chart shows those areas "most prioritised" by residents as things they presently wanted to focus on improving. Seeing how these two differ, we can better understand the barriers of greatest significance for residents locally, which they feel have the most potential to unlock greater connection for them, and where they feel most able to make a difference to their own lives.

Most Prioritised

Insurance
Dental Care
Reliable Transport
Entertainment and Recreation
Varied Income
Income
Eating a Healthy Diet
Eyesight

The below charts, in contrast, show "most red" and "most prioritised" SIGNAL life areas for **older residents** engaging Connect 1:1 (defined here as over 65). In this case we see some understandable differences in areas marked most red (e.g. future preferences coming out #1) and some overlap (e.g. with regard to clean environment scoring highly). Also, we see that the areas most prioritised also show differences ot the younger age group, with "eating a healthy diet" coming out top of the list as a priorities for older people and "group activities" entering the list with a high position.

Most Red

Future Preferences
Clean and Green Neighbourhood
Entertainment and Recreation
Group Activities
Access to Credit
Hearing Checks
Reliable Transport
Eating a Healthy Diet
Dental Care

Most Prioritised

Eating a Healthy Diet
Dental Care
Group Activities
Future Preferences
Hearing Checks
Clean and Green Neighbourhood
Reliable Transport
Communication
Regular Meals

Section 4: Project Learnings

About these learnings

To reflect the iterative nature of Connect, the learnings shared here are outlined in three sections tracking the development of the programme and how we've been thinking about what we're doing.

Early-project learnings shares the first tranche of learning emerging from early programme activity, three months into the project. By this point, the majority of learnings were emerging through conversations between Connection Catalysts, working 1:1 alongside residents, and we had just fishing standing up our "Neighbourhoods" and "Connecting the Dots" learning communities.

Mid-project evaluation outlines learning emerging 6-months into working alongside residents. It shares three "residents stories", from a total of nine captured at this time to help us evaluate the economic impacts of the project, and co-create effective next steps to support residents to build agency to move forwards.

Later-project learnings more fully incorporates the learning from our broader learning communities and touches more strongly on learnings around how we need to *work together* as residents, professionals, teams and organisations across the borough in order to shape environments that are conducive to connection.

Early-project learnings

Key Learning 1

"Treat people as an asset, and great things can happen"

On the left is a direct quote from our team learning sessions and points to the power unleashed once people can reconnect with and advocate for their own strengths and needs.

In our early conversations with residents, we were struck by how much each person had to offer. Some residents engaging Connect had spent their entire lives supporting people, while others were simply great company to be around. We feared these qualities being lost to the borough..

We also saw that residents were hungry to connect and help other people around them - no-one we encountered wanted to live a life on state benefits. Seeing how well people responded to **support that helped them believe in their strengths and advocate for themselves**, we doubled down on our aim to shape interactions around that ambition, and became more conscious of the potential pitfalls of sustained focus on people's limitations.

On the next slide are some team reflections on strategies for embodying this approach, which others might also use as inspiration moving forward.

What this looks like

- **Making time for people's stories:** By dedicating proper time with residents, we have found we've been better able to identify the things that matter to them which were not immediately apparent, and get a better joint sense of what people want to offer their community.

- **Exploring small opportunities for people to give back**: We've seen how opportunities for residents to volunteer time don't need to be big and official for people to value them. It doesn't take much for people to start feeling valuable and connected, it can be as simple as asking if they'd like to help set up a room for an event, or be there to talk to other residents joining a session.

- **Releasing the "service" and "expert" mindsets:** Given the felt importance of building residents' abilities to self-advocate, we reflected long and hard on how we could shake off the idea (for both ourselves and people we're working with) that Connect is a service there to do things for people or to offer expert advice. This has reinforced the importance of "being human" with people we're working with, and finding small gestures that communicate the difference in our approach.

"You don't know what knowledge and assets people have until you start listening to them"
Susie, 1:1 Connection Catalyst

"I popped my shoes off, got comfortable on the sofa, and then [the resident I'm paired with] suddenly clicked - that I'm not there just as a service to do things for her."
Abs, 1:1 Connection Catalyst

Key Learning 2

Authentic connections come from a sense of mutual humanity

We were keen to help people build their connections in ways that felt natural and could replicate how community forms organically. We had seen how meaningful connections didn't result from simply throwing people together into groups, but started to click when there was a sense of shared vulnerability and true listening between people.

We recognised how important it was to model this in 1:1 interactions with residents we were working alongside. This often meant being vulnerable enough ourselves to loosen professional foundries where appropriate - to shrink the sense of a big difference between those who need help and those who give help (an "us and them" mindset). It meant working to build a sense of common humanity between everyone who lives in the borough.

On the next slide are some further team reflections on strategies for bringing this learning to life.

What this looks like

- **Encouraging two-way support**: We've worked to create opportunities for residents to help each other out. We've noticed how, as professionals, it can help to play up our own need for assistance ("I'm rubbish at...") and encourage people to support us in return ("Could you help me with...?"), if and when they're ready.

- **"Filling our own cups"** - Those of us who are "professionals" working in the community-building space also need time to look after ourselves and acknowledge our limits and uncertainties - we realised that **we too need to trust ourselves** to be able to support people over the long-run, even if weren't 100% what that should look like now. Activities like mindfulness exercises in our meeting helped us to stay grounded in these things.

- **Make connection and creativity part of the outreach**: We have been constantly asking how we can better reach people who might benefit from Connect. Early in the project we spoke about how engagement that incorporated *doing things together in creative and more "human" ways* might draw in a wider range of people. This reflection helped inspire a later community-building prototype emerging from the Neighbourhoods learning community. Here, one resident engaging Connect 1:1 in the Thames View estate built on opportunities he'd found to invest in his passion for drawing and comics through Humourisk CIC's "Shed Life" community. With the support of the group, he helped set up a new initiative to publish and distribute a comic book based on his designs, which could help destigmatize loneliness and flip the conversation about it to instead explore people's hidden and underappreciated superpowers. The group asked for contributions from other local residents through street engagement activities, and collected residents' sketches of their superpowers,, which were incorporated these into the final comic. Extracts from this are shown on the following page.

Creative outreach to draw people into community
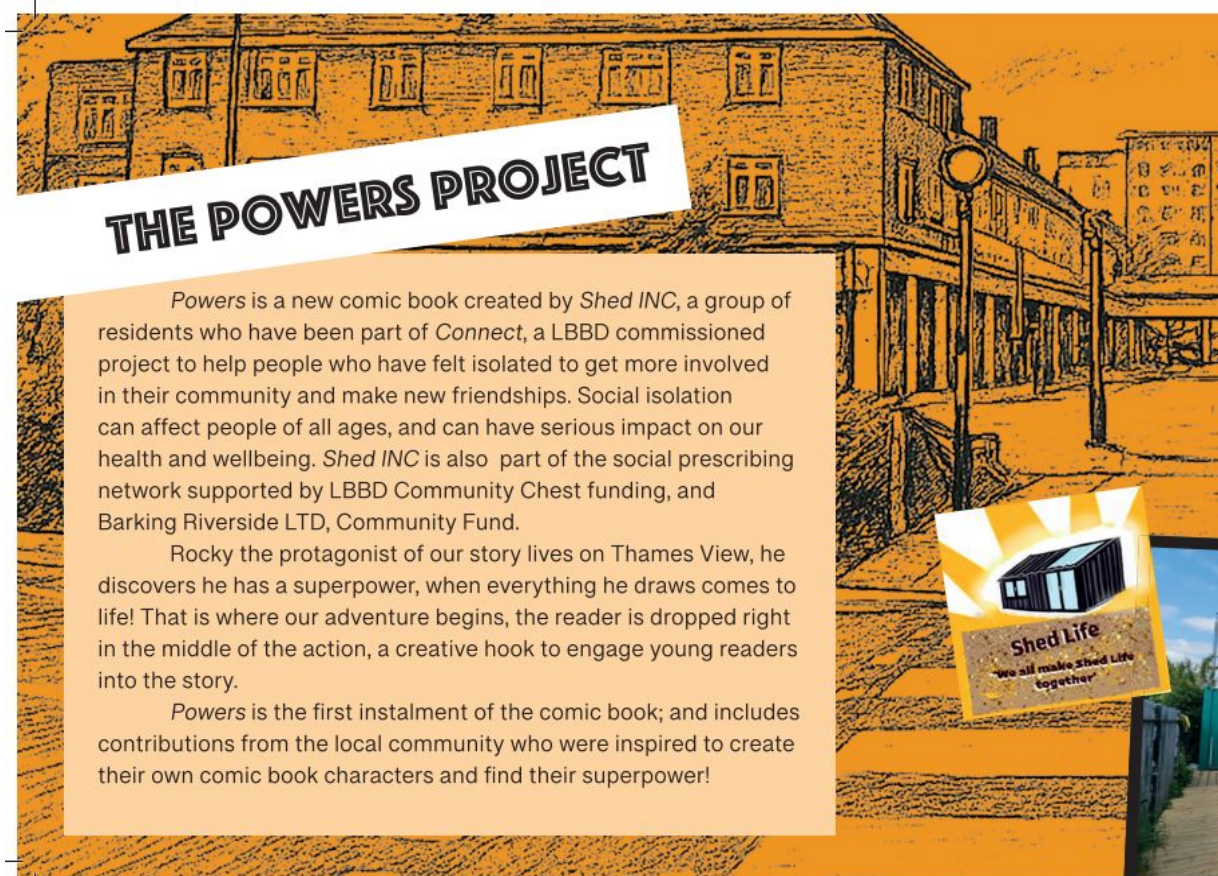
Extracts from the first publication from the "Powers Project", a creative prototype inspired by early learnings from Connect

Some of our questions at the end of this phase

Is it possible to shape welfare systems so that people don't have to play up their incapacity, or lose touch with their strengths, to receive benefits they're entitled to?
Based on growing conviction in the importance of strength-based approaches to working with residents, the Connect team we were keen to explore how this might be used to inform changes to the welfare system, and we took this into a series of national consultations around welfare reform in early 2025, which were organised by the [SIGNAL](#) team.

How might we make collect and make better use of data to understand and strengthen Connect's effectiveness, while being careful not to reinforce the "service" and "assessment" mindsets that residents are already fatigued by elsewhere?
We used this question to build momentum around our data collection through greater use of SIGNAL's life-mapping tool with residents. We anticipated that this would start to give us better quantitative data while also (thanks to it's design) bringing residents into the process of making sense of that data so we could better shape stories of the project's impact, together.

How might we spot the right opportunities to link residents into broader community?
Having just established our Neighbourhood learning community, we wanted to spend more time in the following months helping people working 1:1 and new community groups get to know one another's organisations, to think in terms of "place" and to explore *how we would know* that an opportunity to connect a resident into something else locally would be right for them.

Mid-project evaluation: Stories of Impact

Storytelling and understanding impact

Between December 2024 - Jan 2025, we ran a mid-project evaluation to help deepen our understanding of the impact the programme was making, learn how to strengthen that, and explore the economic dimension of what we were seeing on the ground. To achieve this, we conducted semi-structured interview with nine residents to shape stories about their experience, touching on:

- Resident's **background** and **barriers** they'd faced to staying connected
- **What they'd done** as part of the programme and how that's benefited them
- **Changes in their interactions with services** in the borough

For each story, we co-produced a set of "**Things we may work on together next**". This integrated residents own ambitions with the Connect team's own learnings into what might help that person find sustainable connection. based on their interview reflections. Alongside each story, we also pulled out **economic impacts** of the changes seen through Connect, and we produced a project-level analysis that calculated **potential cost savings** across the 100 residents we expect to engage with. Of these nine stories, two examples are shared in the pages below, followed by the projected whole project cost savings.

The stories themselves are a mixture of direct quotes and paraphrasing that retained the spirit of interview conversation.

Pat: About me

"I'm 85. I was born in this area and I've lived in this house over forty years. I love the house - my family have adapted it so it's easier for me to walk.

I worked for social services in the council for 44 years, looking after babies before they were adopted. I got to a hundred and stopped counting! I've got a plaque up at the doctor's down the road, opposite where I lived where I was young, thanking me and my late husband for working in the borough and looking after children.

I do a lot of jigsaws in the house to keep my mind occupied"

Barriers to Connection

"Almost all my friends have died - I lost eight in a year last year. I know a couple of people close by - one on the corner, one up the road - some people pop in and bring some biscuits, but I've found it quite lonely. **My husband died about a year ago** and about two weeks later I **had a stroke.** Now my brain doesn't always think right. I haven't got my balance. I could only move my eyes at first, so I've achieved a lot since. I'm not a miserable person, but the first christmas without my husband was big for me - I was in hospital in a room on my own. It was the first time I thought "I've had enough". But the thought of my girls brought me back again - my girls have been so good that I think "If I give up, I've wasted their time".

My daughters are wonderful but they live far away - in Brentwood and Islington - to come it takes them 1.5 to 2 hours, then they have the same journey back... They're good girls they look after me well. I've been to groups, for tea and biscuits. It's nice and people are friendly. At one though **I'm the only one who's had a stroke, so I struggle - they do it on a long table and you don't really get to talk to people easily**. They play a card game, and a quiz, but it's hard for me because I can't write because my hands wont let me. And a lot of the info about stroke support here is out of date."

My hopes for Connect

"Before meeting Abby [who I'm working alongside at Connect], I was housebound. But I've always been one to get out. Even when I lost all my mates, I still went to Romford, and to the bingo on my own. I can't do that now - I can't go anywhere - so **I wanted help getting out and about.** Eventually I'd like **to be able to get out on my own.**
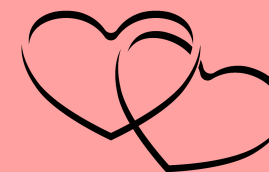
I also wanted to know more about what's happening locally and get myself there.

If anyone says we know somewhere, or let's do something, I'll do it."

**I discovered Connect through:** My GP

I'm working alongside: Abby

Some steps we've taken together

"**We've been going out a lot**. It's wonderful to have someone to help me get out. I got on the bus with Abby for the first time in years, otherwise I have to use taxis for everything. We went out to a shop together to pick out a walker - we went to try them all out. My kids wanted me to have a three wheeler, but apparently you need really good balance for that - so we found another one that suits me. We chat when we're out and about to people, but you don't meet many people around here - it's a bit quiet. Still, **this has given me a new life - I couldn't get out before.**

I've achieved a lot from when I first came out of hospital. I couldn't even be on my own then. I had to have a person in £100 a day just to have her sleep in the night, because I was too nervous, which linked back to when I was terrified as a child, when I was evacuated [in the war]. I slept with my mum until I got married, and then with my husband. I was afraid of the dark. I still sleep with all the lights on. Now I'm doing better, **Abby has helped me to get a better lock now for the door after** we got locked out together. This has helped me with sleeping on my own - **I feel safer - and it means if something happens to me, people can get in to help, when they couldn't before.**"
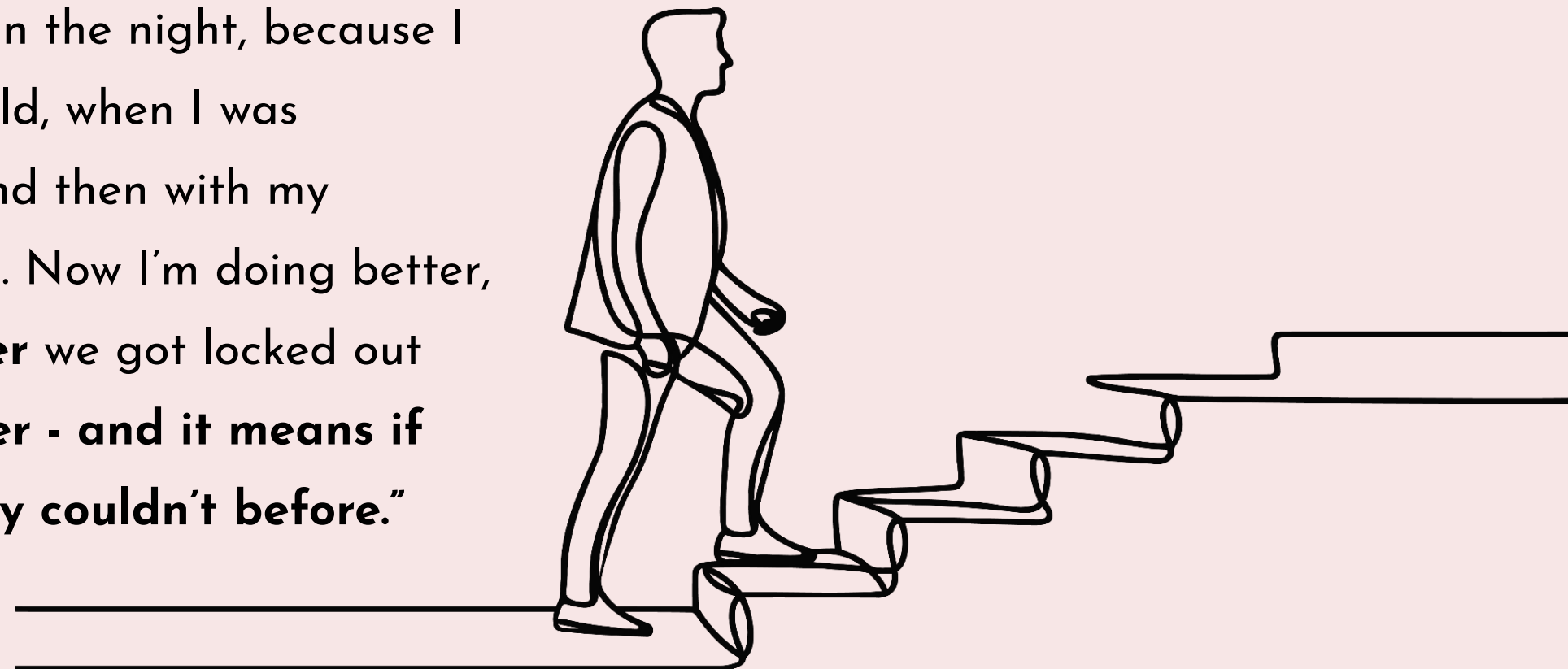
How I interact with services and support in the borough

Before Connect

"I've been in **hospital** a lot, in and out, in and out - about 10 days each time. After my stroke, I did 6-8 weeks in there. I loved the stroke unit - they was good company the six or seven of us in there. We used to talk and have a laugh. It was good and I learned a lot - it was them that got me this far."

"I had **carers** come in, for my husband, but I said I don't want carers and I stopped them as soon as the 6-weeks [reablement] finished - it's a lot of money. I thought that "we worked all our life for that, me and him". When you're like me, everything you do you have to pay for - I'm not on income support."

Since Connect

"They rung me the other day from the **hospital** and asked "How's your heart?" I said "it's okay", so **they said "okay we will [discharge you and] put you over to the doctor now", so I won't be needing to see them anymore"**

"I used to call the GP all the time, but I don't do that now - I realise it's a waste of time - they usually can't talk to you"

Things we might work on together next

Finding comfortable limits of mobility and independence

"I'm not sure how much I'll be able to get out on my own. I think I might have got as far as I can go, with regards walking, after the stroke - I think I've lost a lot of my confidence. It's wonderful to have someone to go out with - that's important. I have a lady who comes to the house to teach me yoga, and I know that the day after yoga, I feel good. It's helping me get more confident. She takes my stick away and says don't use it when she's here. I'm alright for the hour until the very last bit where its all legs out. I seem to go blank, I think that's my brain - it's had enough."

Doing what we can in an imperfect world

"I don't think I'll ever travel out here now as I don't think it's very safe around here - my neighbour parks his van on the drive, to help."

Exploring environmental adaptations

""My daughters wanted to get a slope, for the front steps. I wouldn't be able to get the walker out down the steps.
I've only been going out since I've had Abby and I really look forwards to it. Also I can't shower easily with the bath I have."

Finding lasting mobility support beyond Connect

"I ring up for a patient transport and tell them I need one for my hospital visits, for my bloods, because I'm on my own. They take me and bring me back, which is how's it's been since the stroke. It's alright but you wait so long - 2-3 hours for an ambulance, coming back. Sometimes, I refuse to go to hospital. Even when I had three falls in one day - people are in there up to ten hours laying in the corridor - I thought I'm not having that no more."

Finding the best ways to engage with primary care

"I've got a GP booked up for the end of this month, because you can't get hold of a GP. So, if anything went wrong, I've got an appointment, because I take a lot of drugs. To be honest I've been like that for years though"

ECONOMIC IMPACT ASSESSMENT

Type of benefit	Benefit	Taxpayer savings*	Individual savings	Individual life improvement	Total
Health costs	No longer regularly calling GP	£780			
	Less frequent trips to the hospital trips required	£9,660			
	Less frequent trips to the hospital reducing need for patient transport / ambulance	£1,836			
Personal costs	Less reliant on frequent taxis		£195		
	Reduced need for overnight care		£26,000		
Wellbeing	Improved access and interaction with outside world			£17,043	
Grand Total		**£12,276**	**£26,195**	**£17,043**	**£55,514**

Savings values are annual

Lucy: About me

"I'm like an onion with different layers.

I'm a mother of five, age 56, and originally from Nigeria. I've been living here in Thames View estate since 2003 - I'd never heard of it before. Even now when I say where I live to people, I just say "Barking Riverside".

Before then, I was living in the USA, in Maryland, and I moved here not long after the September 11th attacks - it was scary. We moved to another place in Barking, and lived in East Ham, before coming here..

A lot of my family have health conditions - my son has sickle cell anemia and my daughter is in a wheelchair. I also have complex health and wellbeing needs. I go to Barking hospital for my mental health and I've had lots of problems with my eyes. As you can see, I'm able, but I don't go out often - I don't like going out generally."

Barriers to Connection

"I have **mental health needs,** which means I'm going to the hospital a lot. I also have difficulties with **walking and my eyesight**".

"When we first came onto the estate, we found that some people are not very friendly. Even getting to the GP was awkward. Some of **the receptionists would tell me there was no capacity, but with very awkward behaviour, like "these people are coming to invade"**.

There are **health conditions in my family** too that makes things difficult. My daughter is disabled and has social anxiety."

Before meeting Susie, I was walking around with a stick and a wheelie suitcase, for support. **I didn't want to look like someone who needed help**. But my family found it embarrassing to be around me when I used the suitcase."
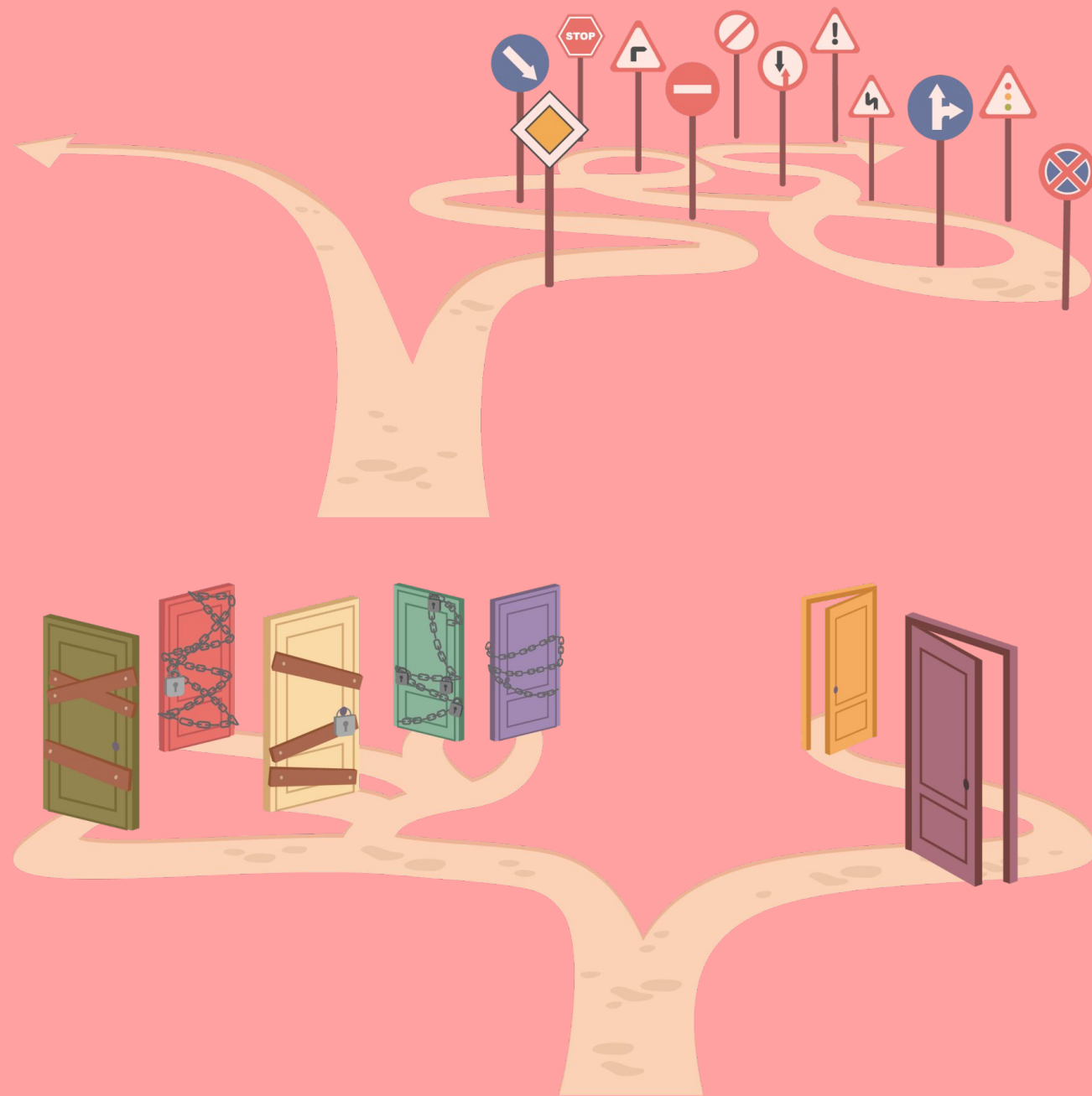
My hopes for Connect

"I joined other groups before finding Susie and Connect, but I didn't find they helped me. I was looking for something else.

I had therapy previously, but it gave me flashbacks and made me feel worse. During COVID, they put me on a group Zoom call with people who already knew the therapist, but I didn't. I was never pulled into the conversation and people would talk about what they wanted to do, and it only gave me more thoughts. One day I had to shout on the Zoom, I felt like I was becoming small and needed other people to share with. **I wanted to find more people to talk to, with more empathy, to get things out of my head."**

I discovered Connect through: Barking mental health hospital

I'm working alongside: Susie
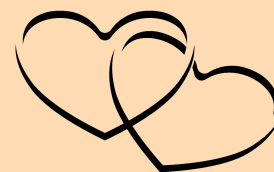
Some steps we've taken together

Since joining Connect, I have time to talk to Susie one to one about what's going on with me. **It's like the therapy I never had** - you can feel the empathy. Even just asking "how do you feel today?" It gives me headspace. It's like I've emptied things. My doctor is very happy because they can see when I talk about Susie and Shed Life I'm brighter. They said they can see that I'm alive and tell me "keep going there". Susie calls us through the week, which helps bring positive energy when I'm down. You feel that somebody really cares - they understand. **I see that me and my children are happier.**

I'm not being assessed at Shed Life. Everyone just goes and does whatever they want to do, but everyone feels included. **We do creative things together and they've helped me to feel more creative**. There are materials to use for sewing, colouring. I love it, and I've donated a sewing machine to help. It's like medication, and my outlook to living is more vibrant.

Susie helped me get a mobility aid through the Small Good Things Fund - one that looked nice.
Now, I'm able to go out with pride.

She also helped me get my glasses. I have a complicated eye condition. Because of my diabetes too it's an expensive prescription. I wasn't able to get this myself and the fund helped. This is enormous - even my children were talking about it it has made a serious, huge difference. I can't do things otherwise and I can't thank them enough - maybe I should go shout from the rooftops?
Without seeing, I can't do my sewing - **I'm more engaged now because I can see.**
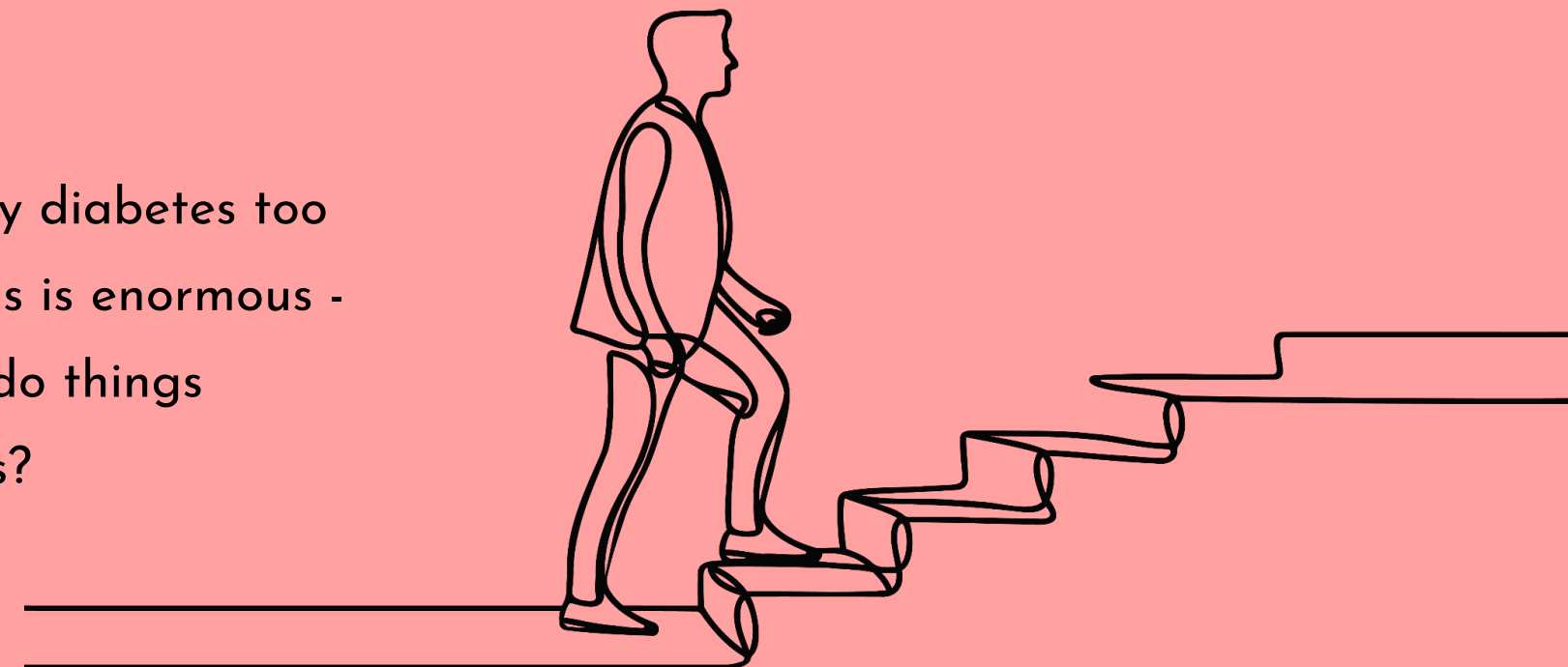
How I interact with services and support in the borough

Before Connect

Since Connect

"At the **hospital**, I had an appointment almost every week."

"Everyone in my family takes **medications** every day."

"**My doctor said** that it's good I'm going out of the house - I know that I have a responsibility to get myself to look forwards to going to things. I don't want to go to appointments usually, but I always want to go to Shed Life, which is progress. If it was on everyday, I'd come every day"."

"**I don't need the same level of mental health support now. There are less difficult thoughts because of the activities I go to.** Instead of going through the motions and flashbacks, there is something positive to look forwards to. Shed Life is like a light in the dark for me."

Things we might work on together next

Explore art therapy and other creative hobbies

"We're going to keep being creative, me and my son. I like to draw, but thanks to working with him, I don't draw stick men anymore! I am drawing to represent my feelings. It could be a tree to represent an emotion. Art therapy is what I want to do more of. I'm also looking forwards to writing a book. I have ideas. I started one called "Life is a Mirror" and I'll work on it at Shed Life. It will have affirmations about how you can channel your inner strengths. Because you fall that doesn't mean you can't get up again. It will be inspirational and motivational."

Get involved in more Shed Life opportunities

"I think 2025 will be a good year because I have more Shed Life and I think there will be more things to do"""

Bring family into support

"We've just brought my daughter, who is 28, into Shed Life, where she'd made a connection with Abby [another Connect one-to-one worker]. We know it will be good for her."

Continue to reduce support needs, by maintaining recovery

"When I go into hospital for appointments, I have ambulance transport to take me there and back as a day patient. I still have a support worker and support coordinator."

ECONOMIC IMPACT ASSESSMENT

Type of benefit	Benefit	Taxpayer savings*	Individual savings	Individual life improvement	Total
Health costs	Reduced mental health support required	£14,950			
	Reduced frequency of hospital visits	£5,980			
Wellbeing	Increased ability to access and navigate world through mobility aid and prescription glasses			£13,000	
Grand Total		**£20,930**		**£13,000**	**£33,930**

Savings values are annual

At this point, **projected whole project cost savings in the next 12 months** for the Connect programme (100 residents), based on the average savings across these nine resident stories was:

£3,287,811 (£9 saved for every £1 invested)

Later learnings

An emerging focus on "mattering"

From the start of 2025, a broader theme in our learning emerged, which we felt captured something integral to what we had been trying to support through the programme to date. This crystallised when were joined by [Rachael McGrath](#) from the London Interdisciplinary School.

Rachael has been exploring how the voluntary, community, faith and social enterprise (VCFSE) sector talks about loneliness - in particular how **the idea of "mattering" features** in that conversation. Rachael's study of this topic had explored loneliness in younger people - propelled by a [recent study](#) suggesting that forty-four percent (44%) of young adults in the US reported a sense of "not mattering to others" and proposes this may be a key driver behind the fact that 34% also reported feeling lonely. Rachael noted how feeling that "we matter" may be a greater challenge for younger people, who are still in the process of forging identities and understanding how they want to contribute to the world. Thanks to Rachael's help and prompting, as a team we had the chance to reflect on how essential the ingredient of mattering is to connection across the broad age range of people we are working alongside in Connect. Moreover, we had seen how it could be interestingly tied to people's ability to continue to grow and reforge those identities as they age - which is explored below.

In short, it struck us that this link between mattering and connection captures a lot about what we had been trying to support, across the Connect programme. **We were coming to see that long-term connections are closely linked to the ability of any person, group, or place to spark and sustain the sense that "we matter" in a number of different ways.** This section captures some of our later project reflections, clustered around this theme.

Two kinds of mattering

First, let's unpack two different kinds of mattering that have felt important in our discussions: (1) mattering to others and (2) mattering intrinsically. We have reflected on the importance of helping to support both and on how to approach this based on what we are learning about how these different senses of mattering interact and affect one another over time.

On the one hand, we can **matter to others**. We can feel that we, or the characteristics and skills we have, are valuable to the people around us. If we matter to others in this way, this is sometimes described as having "[social worth](#)". Feeling that we matter in this way is usually a big part of having a healthy sense of self-esteem.

On the other hand we can **matter intrinsically**. We can feel ourselves in some bigger sense to be worthy or valuable in ourselves. This means that we can matter in ways that are independent from our ability to do things for others or what people tell us about what we have to offer. This second kind of mattering doesn't need to mean mattering in any cosmic sense (though it can show up through religious beliefs of some residents). It generally means that we think our existence, experiences, feelings, and desires are important or valuable enough to stand up for, prioritise and invest in. In the Connect team, this has been expressed as "mattering to ourselves" and we have seen the barriers to connection that residents face when they lack a sense of mattering in this way.

Learning 1

We need to be intentional about welcoming people into new spaces and be watchful of getting lost in "delivering" activities.

When reflecting on the ingredients of connected neighbourhoods, we've spoken many times about the significance of what happens when someone takes a first step into a new group, activity or community. We've seen how the camaraderie and the energy that can exist between long term members of any group can result in new joiners feeling unintentionally excluded, or thinking:

"Do they really need or want me here?"
"Am I interfering with people's existing relationships?"
"Do I matter as much as others here matter to one another?"

Some Neighbourhoods organisations have, therefore, taken very deliberate steps to recognise the presence and value of new people, for the group. For instance, for Community Resources this has meant ensuring that a volunteer is always available to sit with new joiners and to spend time with them being curious about their life. This can convey that a new attendee has some (social) value to the group. It can also reinforce to people that this person matters intrinsically - they have as much right as anyone else to be there in the group and to be part of the conversation.

We've also seen how making an intentional effort to remember people's names, when they join events, can also help to reinforce the message.

This same idea is also reflected in broader conversations we have had around the importance of paying attention to the small, subtle dynamics of group interaction. We don't always need grand new initiatives to support connection - it may be most helpful to explore small practical changes in how we hold space for people, knowing that it's in these everyday interactions between people that the sense of mattering is given life.

Relatedly, we've reflected on how these small dynamics are shaped by the specific aims that are at the front of our minds, when we run community activities. For example, [Elevate Together](#) shared about a situation in which a person became ill during an event and the facilitator realised she was getting nervous about this getting in the way of the activity. She shared how it can be easy, in instances like this, to get lost in the goal of delivering an activity in a certain way, in a certain time, and unwittingly lose touch with the primary importance of the people there and what they need in that moment. This may mean needing to loosen our agendas and amend plans that we have put a lot of thinking into. With this example in mind, we have spoken about how "it's the people" that are the main priority. They matter more than our plans for the activities we are running. What's more, by becoming less attached to our own plans, and making room for the contributions of others, we find an added benefit in growing trust and belonging together.

"People matter more than schedules. We have to remind ourselves of this sometimes"
Nassaba Guibá, [Elevate Together](#) (Connect Neighbourhoods)
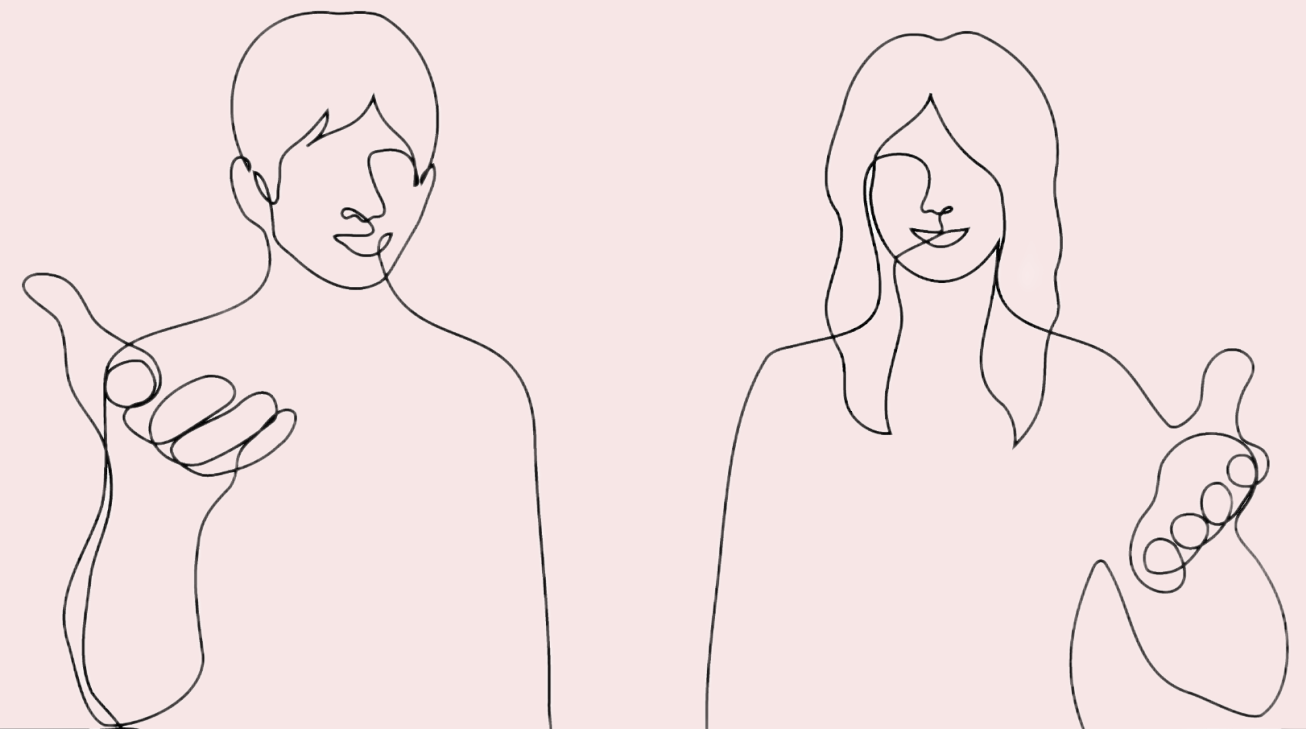
Learning 2

Creating opportunities to contribute helps people see themselves in a new light, but requires curiosity to get right.

We started Connect with a core belief that people feel more connected to a community if they are able to shape what it looks like. Through our work, we have seen how this can transform the way people see themselves, in a way that unlocks longer term connection.

For instance, above it has was noted how early insights from the project around the importance of [creative and human outreach](#) inspired later prototyping in 2025, in which one resident in the Thames View Estate was supported to invest in his passion for drawing and comics within [Humourisk CIC's](#) "Shed Life" community - the group supported him to take a lead role in an initiative to create and distribute a comic that could help others to connect with their community and take steps beyond isolation.

On a similar note, the Dagenham Rhythms Community Choir has been ensuring everyone is able to contribute to the group's playlist, helping people feel that things wouldn't be the same without them. We know that once people have seen that they *can* contribute in ways like this, it can strengthen the sense that their desires are as valid to act upon as everyone else's. By repeatedly building people's sense of social worth, we can also reinforce their sense that they matter intrinsically too.

As partner organisations working ever more closely together, we have got better at picking up on each other's needs and at linking residents with skills from one group into another, where those skills can help. This is what can make Connect truly sustainable - it's not about us as a team "fixing" people - it's about the way that creating a friendly environment unleashes the power for the community to nourish itself. This requires being genuinely interested and curious about residents and looking beyond our first impressions of them or the value they bring.

"The more time we spend in getting to know people, the easier it is to see what they're good at and spot the right opportunities for them to contribute" - Susie, 1:1 Connection Catalyst

"This is what makes people keep coming back - they're seen in a different light to what they've experienced before" - - Susie, 1:1 Connection Catalyst

Moreover, we've noticed that, where people's families don't recognise what a person has to offer, this can be a big contributor to their social isolation. Humourisk CIC have seen that it can be especially helpful when family members are around to witness people's new contributions within groups. This can help families see a person in a different way, and adapt their own interactions to better recognise their value.

This focus on supporting people to think reimagine themselves as people who have great things to offer is also central to our recent thinking about what it might mean to "graduate" from the Connect programme. We asked ourselves: how might we do this in ways that naturally loop people into supporting others?

Rather than thinking about the moment we finally "say goodbye", we've reflected on how we can instead think of their journey in Connect as that of moving gradually from someone receiving 1:1 support, into someone more freed up to provide care and friendship for others engaged in the programme too? "Gradualating" is the best term we have come up with to describe this difference, for now!

In a recent learning session, team members (pictured) chipped in with some gardening, at the spontaneous request of a local resident who'd discovered new opportunities to share his gardening skills with the Shed Life community.

"It's been nice seeing residents going to Heath Park Community Centre together - people I've worked with individually. Now they're there with one another, going to the yoga and afterwards they're going to the cafe for cakes together, and helping one another with lifts to the bus stop. We knew enough about what was going on locally to help people connect with things they might enjoy. Now, I hear them say "I don't need you next time - I'm going to be fine". It's so nice to see it's actually working."

- Lisa, 1:1 Connection Catalyst

Connect

Learning 3

Conversational tools can show that we value each person and help us put their ambitions in the lead

As a team, we've seen that the tools we lean on to have early conversations with residents can help them to feel there is something different about Connect. These can show that, unlike some other initiatives they may have engaged, each person matters to us.

For instance, Connect team members working 1:1 alongside residents are using SIGNAL - is a tool that takes people through a structured conversation around 40 aspects of their life and prompts open-ended reflection on how people feel they are doing in each area. Residents choose a red, amber or green indicator to reflect these feelings. They are then prompted to pick specific areas they wish to focus on, based on what matters most to them right now. People's priorities need not match up with "red" indicators and they might be very different from what other people in their lives are telling them to focus upon.

"It's not about ticking boxes, SIGNAL gave us the space for a real conversation. You could see something shift. Jeannette [a resident engaging with Connect] began thinking about what she wanted, not just what others expected."- Abs, 1:1 Connection Catalyst

We've noticed how using SIGNAL in a conversational, curious way helps us stand out from other initiatives residents may have interacted with. People have been surprised that we are truly interested in the details of their life, we are willing to have a long conversation about that, and that they are important enough for this to be worth spending time on.

What's more, tools like SIGNAL have helped us to collaboratively identify small steps, which residents can take to move themselves in the right direction and build confidence in what they have to offer others, through accumulating small successes. One resident, Delfa, recently shared that she has printed out her life map and put it on the fridge to provide some perspective. People can find it helpful to have a visual reminder of the areas that they are doing well in, like the green dots shown on Delfa's map. This can help them feel like they have a more secure platform to test out new things and focus on what they have to offer others, even though there are other areas in which they may be struggling. More details about the benefits of SIGNAL that we've seeing can be found [here](#).

"It gave me structure and made me feel more positive. It was also a great ice-breaker with Abs (my 1:1 Connection Catalyst). By talking things through, I could explore different aspects of my life and make decisions for myself." - Delfa, Barking & Dagenham (shown on the right)

Connect Neighbourhoods organisations are also testing how they can have conversations that clearly put people's priorities first. For instance, while exploring how to create safe spaces to connect for isolated young adults who have experienced trauma, [Sure Steps Wellbeing](#) are approaching this from a perspective of "discovering what matters most" to those young people. They are making an explicit effort to go out to where people are, focusing on young people's priorities rather than their own, and consciously trying to model an attitude of "unconditional self-acceptance".

It is this focus upon the individual priorities and the value of each person that makes the project stand out, as noted on the right by recent intern, Heather. This requires moving beyond a "one size fits all" approach and, especially, being led by curiosity, as a means to put aside judgement, and come around the same side of the table as another person.
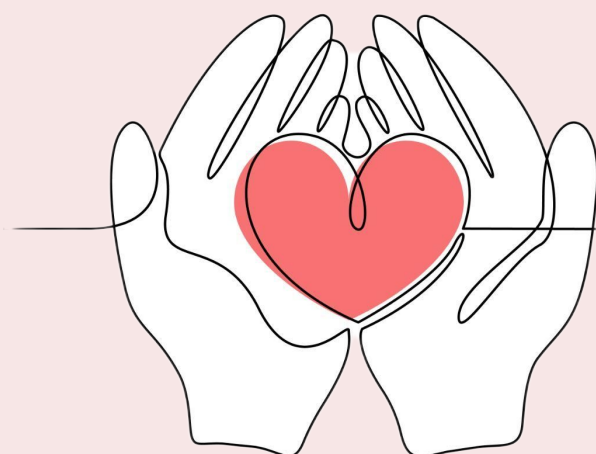
"I was drawn to Connect because it's all about person-centred care. You care about the actual people rather than just doing paperwork. Sometimes people just want to be listened to, and you get that. You care about working together as different organisations. Everyone is so genuine."

– Heather Howarth, Integrated Health and Social Care undergraduate, Manchester Metropolitan University

Learning 4

Fixed identities and behaviours can get in the way of connection, while a sense of security helps people to experiment

Some people we've working alongside have retired from successful, high-status professional lives. While this means that they may have a lot to offer others, we have also seen that it can narrow the connections they have. For instance, residents who see themselves through this professional lens may be attached to ways of interacting that are more intellectual or specialised, and they may discount opportunities to join more mixed spaces or more "amateur" activities.

On the one hand, this is totally justified. Supporting people to feel confident in expressing what they want and don't want is a big part of what we've been doing in Connect. And we often see benefit in encouraging people to think beyond what their family or friends want for them and into what they want for themselves.

However, when preferences deeply rooted in someone's professional identity meet with a situation that may now be very different, this can create barriers. We've noted how it can be helpful to gently encourage attention to broader skills people have, which may widen their sense of how they can enjoy interacting with others.

For other residents we are working alongside, they lack a strong sense of what they have to offer. If they have experienced lots of stigma or rejection because of specific health or life challenges, they don't necessarily have a firm sense of identity that clarifies what they like or what they have to share.

We've found it important, when working with these residents, to focus on building up their sense of intrinsic self-worth ("I matter as much as everyone else") and bringing community around a person to show them that they are worthy of support and attention. This might mean inviting people into more conversations, or providing opportunities to offer their views and skills. The more we're able to do this, the more flexible people can be with other aspects of their life too, where making some changes to very fixed behaviours can benefit their ability to connect with others.

For instance, we've seen one resident who has been attending Humourisk's Shedlife group for a long time has been able to grow his sense of personal safety and support to the extent that he is now more open to helpful changes in his housing situation and hygiene habits. In this case, the resident took the opportunity to wash for the first time in four years, and accepted his community's offer to come together and support him through a decluttering and renovation blitz, to prevent his eviction. We are seeing that this openness to big changes that disrupt rigid patterns of behaviour requires feeling secure in other parts of life.

Relatedly, building on broader learning from projects in the borough, we've seen how the deliberate use of fun and laughter can help people feel that spaces are safe, and create bonds between people

A recent Connect learning session in the Thames Community Hub

Learning 5

Being explicit about our values (i.e. each person matters) can bring others on the journey with us
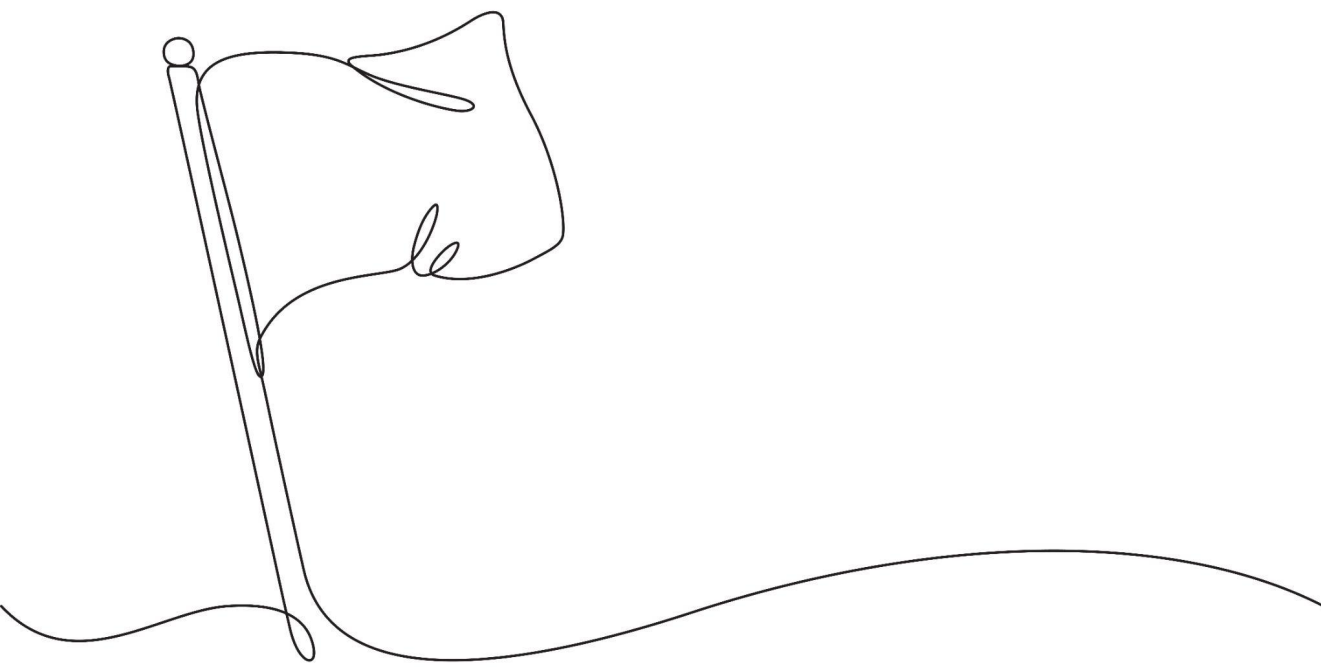
As organisations, we are sometimes welcoming new people into community spaces and groups who may be difficult for existing community members to accept, due to their cultural assumptions or religious beliefs. For instance, a member of [Community Resources](#) recounted how one of their group attendees had discounted a new person because they'd had surgery which significantly affected their speech following a cancer diagnosis. The group member attributed that to the person's own actions, believing it to be bad karma.

However, rather than judging the existing group member, the team noticed that they could positively impact this person's attitude by being explicit about the team's values-driven approach. By taking time to explain why they were welcoming the new attendee, they were able to gently shift the existing member's attitude. The team shared how they are driven to demonstrate love, practise commitment, bring hope and create peace, partly because they have experienced the benefit of those things themselves, and they want to show the same to others. And in sharing this, they noticed how the existing member's behaviour around the new joiner changed completely. In this way, we've seen that healthy challenge can happen in a straightforward conversation can leave a person still feeling accepted and loved rather than rejected and offended. Being explicit about values like this can catalyse the "ripple effect" that happens when we show kindness or support to others and see them pass along the same to others. [Elevate Together](#) have been testing new ways to strengthen this by putting increased focus on empowering their facilitators to be community leaders - people who embody and champion the principle that each person matters and spread that attitude around.

Team learning in Heath Park Community Centre

Learning 6

Gently encouraging attention away from needs and towards a richer life is helpful, possible (and can help people meet their needs too!)
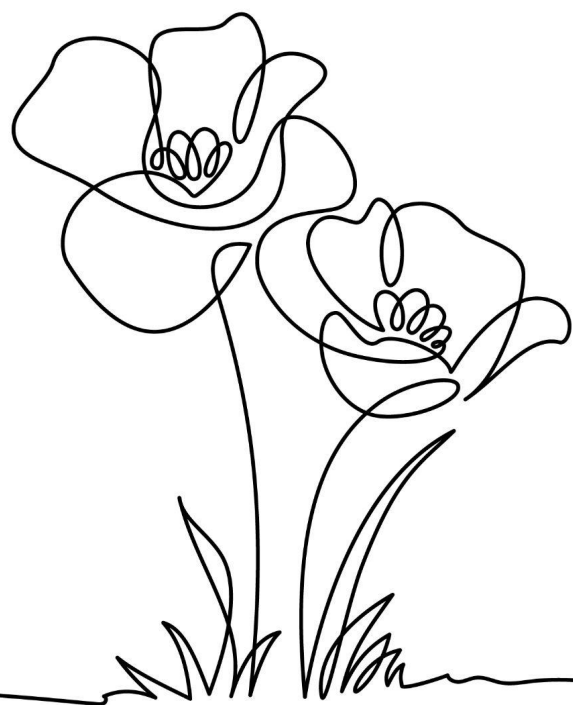
When working 1:1 with residents, we have seen that a lot of people are prevented from forming connections thanks to having a laser focus on specific personal needs. In particular, we have seen that people can be extremely focused on meeting their health needs (understandably!). However, this can be a problem when people think these needs must be met *before* they get around to more exciting and nourishing activities they really want to pursue - especially when health problems are often beyond our control, and can hang around for a long time - sometimes forever! Set against this, we know that a growing body of evidence points to the crucial role of social connections in supporting good health, with one paper suggesting that strong connections can increase the likelihood of surviving in any given year by a staggering 50%. As such, we've been conscious as a team of the importance of helping people focus away from their deficits (e.g. a deficit of good health) in a way that helps them focus on building the very things that may help them meet those needs.

On a similar note, we've been working alongside people who are hesitant to spend their own money to get to events, out of concern for not having enough to support themselves. Again, this is understandable, but it risks people being hyper focused on preventing bad things happening (e.g. running out of money), rather than on how they might enrich their lives. For some people, they really do need to focus on those more material and health challenges first. For others, we've seen value in creatively encouraging people's attention away from their felt needs, even amidst big challenges.

When we took this topic to the Connect Neighbourhoods teams, Community Resources shared about a woman who had come into their Castle Point centre with very complex needs. She was fighting for access to children, talking to the police due to harassment from an ex-partner, engaging with the community mental health team, and anxious about moving to Universal Credit. She turned up to get help with this feeling of being overwhelmed. While at Castle Point, this woman was invited to join other activities running on the day. And we heard how, at the end of the day, all she talked about was the people, conversations and activities she'd been involved with, rather than the overwhelming things that were happening to her. We saw that even when someone is overwhelmed and confused by what's happening to them, and doesn't initially appear to want to do anything else, we can help them think beyond their immediate circumstances. We can support an alternative perspective on life, purely by leaning into being intentional about welcoming someone into an enrichment-focused space.

Connection Catalysts working 1:1 alongside residents have shared how they look for small creative nudges to help people look beyond their challenges (e.g. making someone a birthday card that illustrates the meaning of their name) or use SIGNAL to help people gain some perspective on what they have to offer. This feels an important counterbalance to "solving problems" together.
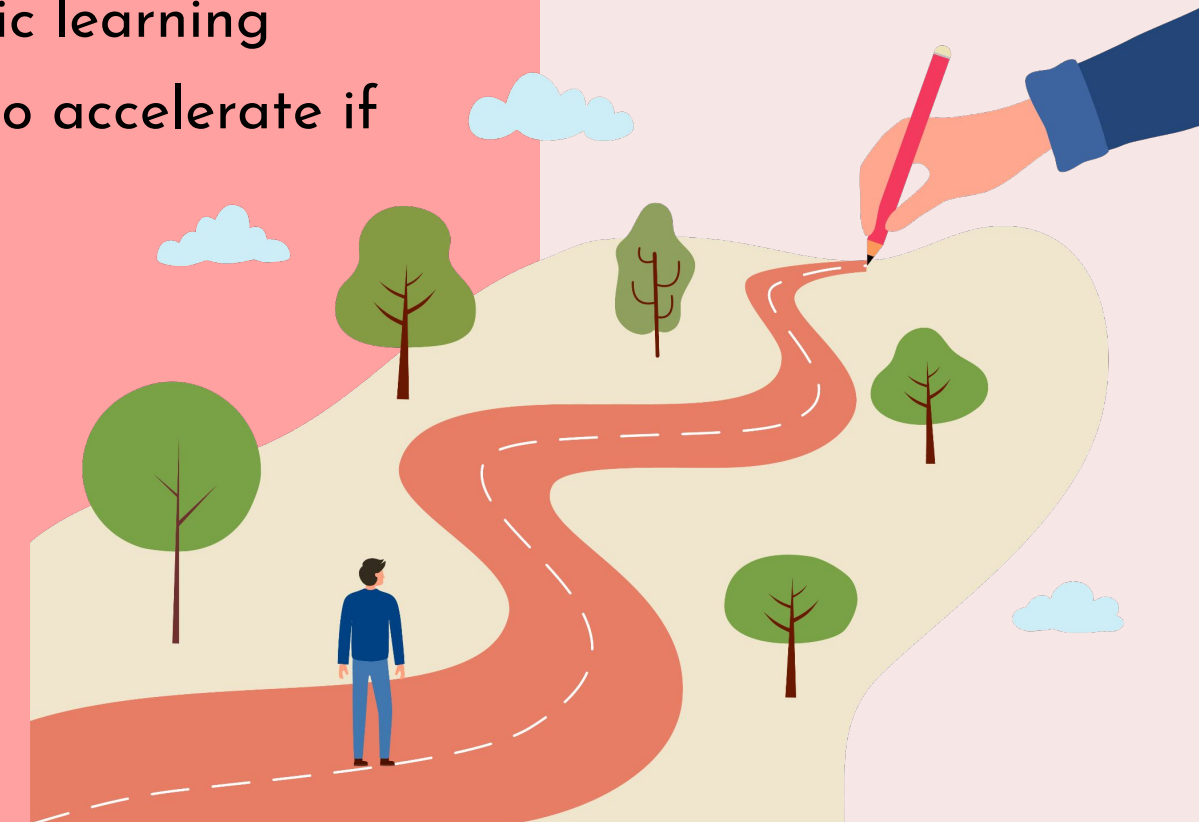
What's next

What's next for us at Connect?

Building out our ability to share learnings and collaborate with local services

Within Connect, we're walking alongside people who are feeling overwhelmed or stuck in their interactions with public sector services. We have sought to collaborate with individuals within the public sector in our "Connecting the Dots" sessions, which have brought together people from different local authority teams to learn from resident experiences. These sessions brought to life examples of people working with many services, for many years, with limited impact - they present an ideal window into the possibilities of public service reform. More broadly, we want to explore how we might provide smoother channels for residents, and identify effective ways for VCFSEs to work more closely alongside public services, in more cost-effective, community-powered solutions to today's social challenges. Although this specific learning community will pause in the next phase due to funding pressures, it is a priority area for us to accelerate if we secure Lottery funding.

What's next for us at Connect?

Learning about what connection means for people drawing on Adults' Social Care

During the next five months we will be partnering with Adults' Social Care in Barking and Dagenham to work with 20 residents who draw on care and support. This might be for a variety of reasons. For example, people who struggle to live at home by themselves, have a physical or learning disability, or experience mental illness. In this phase, a priority will be understanding whether connecting people drawing on social care into informal networks of support can improve their physical and mental wellbeing, and lessen their need for formal services.

Raising awareness of the role of mattering in social connectedness through events and storytelling

The Connect team, alongside local residents, presented on the programme and our learnings at [Stronger Things 2025](#). We also told the story of the programme in a community-designed event at [Harmony House](#) on June 20th. We aimed to use both these opportunities to provoke other local authorities and VCSEs to think about the significance of the sense of mattering in addressing loneliness, and the practical implications of that for our different sectors and organisations. We have also been asked to share learning about Connect at forums including the national 'Towards Relational Public Services' conference, with other places from across the country, with HM Government departments including the DHSC and the Cabinet Office, with the Independent Commission into Adult Social Care led by Baroness Casey, and at University College London.

What's next for us at Connect?

Exploring broader ways to support people who are housebound

We've noticed that we have often faced the biggest challenges in supporting people who are housebound, and we need to be creative in how we are able to bring community around these residents. We are interested to see the impact of the "[Powers](#)" project on this, but alongside this we are thinking about where we might use technologies to make a difference here (e.g. providing improved access to technology or setting up digital buddy systems) or draw upon the strengths and connections of other residents working alongside us in Connect, to reach people we haven't yet managed to. We have a special learning item lined up for this issue.

Sparking more conversations about a "connection-friendly" place for people with disabilities

In our Neighbourhoods learnings, we have been picking up repeatedly on the challenges faced in the borough by people with visual impairments and other disabilities, when navigating the built and social environment. We have seen that people with sight problems have difficulty finding suitable transport locally, navigating poorly maintained walkways, or accessing shops. So we see a pressing need to have more community conversations to generate ideas that we can test to make our place more conducive to connection for people with disabilities. This is something we hope to make progress on through the Neighbourhood Networks initiative about to launch locally.

If you have ideas, reflections or questions on what's here please send a message to michael.roberts@carecity.org.

We're discovering that working across place, viewing the B&D community as an equal partner, is resulting in growing trust and reduced demand on services