BeeZee Bodies Embedded Ethnography Evaluation Project

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Glossary

- ABCD – Asset-Based Community Development
- BZB – BeeZee Bodies
- CRIPACC - Centre for Research in Public Health and Community Care
- CYPF – Children, young people, and families
- EDI – equality, diversity, and inclusion
- KPIs - Key performance indicators
- NCMP - National Child Measurement Programme
- NIHR ARC EoE - National Institute of Health and Care Research Applied Research Collaboration East of England
- OHID – Office for Health Improvement and Disparities
- SOG – BZB strategic oversight group
- UH – University of Hertfordshire

Executive Summary

The [Centre for Research in Public Health and Community Care, University of Hertfordshire](UH) were commissioned by [BeeZee Bodies](BZB) to bring academic insights and support BZB's development of future services. This work aimed to explore:

- How can BZB best engage diverse communities?
- How can evidence and insights be considered from a range of professional perspectives and utilised to shape and influence service development?
- If and how can BZB co-produce their services?

The project used an 'embedded ethnography' approach, a qualitative methodology which enables collaboration and interaction between researchers and those responsible for planning and delivering services, as a way of developing more effective service delivery. This involved four main elements: participation in strategic oversight group (SOG) meetings, qualitative research training for BZB staff, observation of BZB meetings, and primary data collection (focus groups and interviews).

Findings: Service delivery

Users of BZB services (both adults and children and families) reported a positive overall experience and positive change – e.g., changes to portion sizes and shopping and cooking behaviours. BZB demonstrated adaptability in ensuring the delivery of the commissioned services. But delivering newly commissioned services, in Local Authorities with no existing provision or presence and in a limited amount of time, created challenges for community engagement. BZB's ongoing adaptation of session content and materials needs to be balanced with the development of a longer-term, insights-led strategy, in order to develop service models in ways which are inclusive of diverse people and communities. Service users suggested a need for more individualised interaction with BZB staff, and more opportunities to put into practice the ideas learned in BZB sessions, particularly for children and young people. Additionally, service planning and delivery needs to consider the wider context of poverty, inequality, and the cost-of-living crisis. Further consideration is also needed of referral processes in relation to people's expectations and perceptions of weight management services. Overall, the presence of BZB in new areas provided opportunities for continued service development and engagement with people and communities.

Evidence and Insights

Dedicated BZB engagement and insights officers, recruited from local communities, have been carrying out engagement and insights work which informs and is informed by service delivery. Data collected included monitoring data required by commissioners and focus groups and interviews with service users and community members facilitated by BZB staff. BZB collected a large amount of data related to health and weight management, mainly in relation to ethnic and cultural diversity, behavioural and neurodiversity, and poverty and inequality. Challenges to engaging people in this work included building trust, particularly in areas where BZB were previously unknown, and short-term funding creating uncertainty around longer-term benefits for individuals and communities of engaging with BZB staff. In the immediate term changes that can be made to services to make them directly and immediately more appropriate for current service users, and longer-term learning for strategy and service development, includes the need for further in-depth community engagement and insights work. But there were challenges around the time and resources needed to collect and analyse data, and to implement learning in the context of contracts with specific key performance indicators.

Working with people and communities

BZB formed the Strategic Oversight Group (SOG) with the aim of bringing together people with a range of expertise (including research, community-led approaches, ethical marketing, and equality, diversity, and inclusion) to explore how they could develop their approach to working with people and communities. The engagement and insight work that BZB have undertaken has demonstrated the importance and value of increasing engagement and involvement of service users and local communities regarding future service development, and work so far has shown that time is needed to build relationships and trust. The current commissioning and procurement landscape, in which the funding granted for BZB to deliver services is on a short-term basis, is a challenge to the time required to meaningfully work towards co-production (an approach in which practitioners and the public/communities/service users work together in equal partnership, sharing power and responsibility from the start to the end of a project, including planning, delivery, and evaluation). The sharing of power and responsibility that co-production involves includes the need to take risks and concede power. BZB have achieved a more nuanced understanding of the challenges of co-production, and what co-production might look like for them as an organisation.

Discussion

BZB have made great progress in establishing internal processes to enable successful engagement with diverse communities to occur and have achieved a better understanding of the training and skills their staff require to undertake this work. The insights gathered by BZB have potential value for the development of adaptable and diversifiable services, but to enable their effective utilisation, priority needs to be placed on service development, which has been hard to achieve in the context of short-term contracts. Internally, BZB need to prioritise continual development of internal processes that allow for both short-term service development and longer-term service development strategy. This needs to be considered in relation to development of BZB's approach to working with people and communities, and how to be able to move from 'working towards' co-production to services developed and delivered 'with' and 'by' people and communities.

Recommendations

- Active recruitment of staff from local communities to establish and develop relationships and trust, and further evaluation of how this makes a difference.
- A review of training and support for staff engaged in insights data collection.
- Additional training for service delivery staff, particularly on safeguarding and EDI.
- Look for ways to involve service users and communities creatively and inclusively in service design and delivery, in ways that work for them.
- Development of a flexible approach to working with people and communities, taking into account interest and availability.
- Development of a framework for implementation of insights in service development.
- Consideration of the wider context of poverty, inequality, and the cost-of-living crisis in service planning and delivery.
- Consideration of the use of incentives for people involved in future insights data collection, and payment for those involved in co-production.
- Ensure collection of insights data considers capacity to process, analyse, and utilise effectively the data collected.
- Time is needed to meaningfully engage with local people and communities. This should be considered and reflected in policy decisions.
- Further research is needed on how commissioning practice can facilitate or create barriers to co-produced services.

1. Introduction

1.1.   Background: BeeZee Bodies

1.1.1 BeeZee Bodies services

[BeeZee Bodies](#) (BZB) provide weight management and prevention services in several parts of England for adults and children, young people and families, with a focus on innovative and empowering approaches to serving the local communities and families with whom they work. In 2021 BZB were commissioned to expand their services in a range of new areas (both new types of service and new areas where those services are delivered). This was funded by the Office of Health Improvement and Disparities (OHID) (previously Public Health England), through a programme of grants for adult and child and family weight management services ([Department of Health and Social Care & Public Health England, 2021](#); [Office for Health Improvement and Disparities, 2021](#)). The aims of the programmes were to develop and expand place-based, whole-systems approaches to tackling obesity and promoting healthier weight, and reduce the prevalence of obesity and persistent health inequalities. BZB were commissioned to deliver new behaviour change support services for adults and children, young people, and families in areas with high deprivation and high numbers of households from ethnically diverse backgrounds in four London boroughs (Brent, Hounslow, Enfield & Waltham Forest), Bristol City Council, and Birmingham City Council (see Appendix B). These areas shared characteristics of high obesity rates, high deprivation, poor engagement across communities, and limited or no existing provision of Tier 2 weight management services. In Birmingham, BZB were also commissioned to deliver services for adults with disabilities (see Appendix B), however this work was not the focus of this research. In some locations, BZB were working with OHID to test aspects of the National Child Measurement Programme (NCMP). The NCMP measures the height and weight of children in Reception classes (aged 4 to 5) and year 6 (aged 10 to 11), to assess overweight and obesity levels in children in primary school. OHID were redeveloping a 'talking to your child about weight' leaflet and had designed the project around using letters that families receive from the NCMP to recruit to the services commissioned through this grant-funded process.

For BZB, the commissioned contracts meant developing completely new services and deploying them in new locations. As an addition, BZB also evolved their current services based on the scaling up of virtual interventions, which were originally developed in response to COVID 19. This expansion meant having to develop empirically validated behaviour change approaches and implement new community engagement and development strategies.

1.1.2 The BeeZee Bodies approach

Citizens' poor health affects the quality and duration of their lives. Lifestyle diseases like obesity are key contributors to this reality. Socially and economically disadvantaged communities are often underserved and have the worst health outcomes (Bradley et al. 2016; Braveman, 2006). The current health system is unsustainable and expensive because it reacts to the effects, rather than preventing the underlying causes, of ill health. BZB aim to change the current landscape and narrative of the healthcare system, addressing problems by working with partners across the system, and delivering their behaviour change programmes at scale. Their approach to health and social care is based on working with local communities and giving them the platforms needed for their voices to be heard (Klee et al., 2014).

BZB is committed to tackling obesity differently, by addressing the complexity of real lives and creating enjoyable services underpinned by behavioural science and lived experience. At the heart of the BZB approach is their commitment to support local communities through services and initiatives that represent a translation of different behavioural science approaches and stances 'into the real world'. Their working model is embedded in different models of behaviour change and validated theories of understanding human nature; heuristically, psychologically, and sociologically. Their approach adopts a biopsychosocial stance, through focusing on understanding behaviour change and health through biological, psychological, and sociological lenses (Engel, 1980).

BZB services can be accessed through different means at different intensities to meet people 'where they are'. This includes working with local communities to shape meaningful content and services to suit them. It also means designing support interventions tailored to the individuals and communities with the highest level of need and risk; these include people with physical and learning disabilities. The BZB model is informed by various theories and models for health and wellbeing including Determinants of Health, Social Cognitive Theory, Social Identity Theory, and Bourdieu's Cultural Capital and Habitus, amongst others. (Bandura, 1992; Bourdieu, 1986; Dahlgreen & Whitehead, 2021; Michie et al, 2011; Michie et al., 2014; Tajfel & Turner, 1979).

1.2 This report

This report begins by outlining the University of Hertfordshire (UH) project's research aims and methodology, then goes on to summarise the findings in relation to the three main aims: service delivery; evidence and insights; and working with people and communities.

We then conclude with a discussion of the implications of the findings and recommendations for policy, practice, and further research.

2. This project

BZB are a health and care member organisation of the NIHR East of England Applied Research Collaboration (NIHR ARC EoE). The [Centre for Research in Public Health and Community Care, University of Hertfordshire (](#)UH) were commissioned by BZB to bring academic insights and expertise which would support the future development of BZB services.

The aims of this work were to explore:

1. How can BZB best engage diverse communities?

2. How can evidence and insights be considered from a range of professional perspectives and utilised to shape and influence service development?

3. If and how can BZB co-produce their services?

2.1 Methodology

Ethnography aims to understand the culture of a particular pre-existing group from the perspective of the group members, lending insights into behaviours, values, and emotions (Krane & Baird, 2005), and is a process of knowing and becoming through immersed observation (Atkinson, 2012). Embedded ethnography specifically is an approach which enables collaboration and interaction between researchers and those responsible for planning and delivering services, as a way of developing more effective service delivery ([Ward, 2021](#)). Below is a summary of the project methodology, with further detail provided in Appendix A.

This 'embedded ethnography' approach involved four main elements:

a) Participation in Strategic Oversight Group (SOG) meetings (November 2021 – July 2022)

Providing strategic advice and support for BZB's work on co-production and insights data collection, mainly through the UH team becoming participants of the SOG and with a minimum of two of the UH team members attending BZB SOG meetings, which took place weekly between November 2021 and July 2022.

b) Qualitative research training for BZB staff (February – June 2022)

Facilitating online training to support and enable BZB engagement and insights officers to undertake qualitative data collection and analysis, in order for BZB to collect quality insight at scale.

c) Observation of BZB meetings (February – June 2022)

Working with the BZB central team to identify key internal and external meetings which a member of the research team attended as a participant observer – a technique in which the researcher studies a group or culture by sharing in its activities (see Appendix A for further detail). This involved participating in the meetings, taking notes, and writing up post-meeting reflections (fieldnotes) in relation to the aims of the project. Over the course of the project, and in addition to SOG meetings, we attended 38 BZB meetings including internal insights planning meetings, central team update meetings, regional team meetings, staff training sessions and follow-up workshops.

d) Primary data collection (June – July 2022)

Semi-structured focus groups and interviews were undertaken with BZB staff (central team and frontline staff, n=33), BZB service users (adults, parents and carers, children and young people, n=23), BZB commissioners from local authorities (n=4), and other organisations working with BZB

(n=4). These focus groups and interviews focused on the research aims outlined in the introduction of this report. Focus groups with service users also explored their experiences of using BZB services, and if and how they think service users and communities might be able to co-produce services in the future. Primary data collection received ethics approval from the UH Health, Science, Engineering and Technology Ethics Committee (ethics protocol number: HSK/SF/UH/04976).

2.2 Data analysis

Qualitative data from all the elements above included transcripts of focus groups and interviews, observation notes from BZB meetings, and fieldnotes from SOG meetings, qualitative research training, and meetings between UH team members and BZB. The data were analysed using a reflexive thematic analysis approach to develop, analyse, and interpret themes and patterns of meaning in relation to the research questions (Braun and Clarke, 2021). NVivo qualitative analysis software was used to systematically code and develop themes, which were then refined and redefined during the analysis process. Further detail is provided in Appendix A.

This report and the associated summaries will be shared with members of the SOG, research participants and other BZB staff, service users, commissioners, and other external partners. The UH team will also develop several academic papers drawing on this research, in consultation with the BZB central team.

3. Findings: Service delivery

3.1 Summary

In this chapter we summarise the findings of the project in relation to service delivery in the services commissioned in 2021 (see 1.1.1 BeeZee Bodies services). The chapter starts with a summary of key points before presenting more detailed findings in relation to the expectations and reality of service delivery.

> **Key points:**
>
> - Users of BZB services (both adult and children/family) reported a positive overall experience and positive change as a result of their participation – e.g., changes to portion sizes and shopping and cooking behaviours.
>
> - BZB demonstrated adaptability in ensuring the delivery of the commissioned services. But delivering newly commissioned services, in Local Authorities with no existing provision or presence, in a limited amount of time, created some challenges for community engagement.
>
> - Service delivery needs to consider culture, locality and the wider context of poverty, inequality, and the cost-of-living crisis.
>
> - Service users suggested a need for more individualised interaction with BZB staff, and more opportunities to put into practice the ideas learned in BZB sessions.
>
> - Ongoing adaptation of session content and materials needs to be balanced with the development of a longer-term, insights-led planning strategy, in order to develop service models in ways which are inclusive of diverse people and communities.
>
> - Further consideration of current referral processes is needed in relation to people's expectations and perceptions of weight management services.
>
> - The presence of BZB in new areas provides opportunities for continued service development and engagement with local people and communities.

3.2 Expectations

The expansion of BZB services to new areas in 2021 (see 1.1.1 BeeZee Bodies services) required the recruitment of large numbers of new staff to manage and deliver these services, with the BZB workforce expanding from 32 to over 100 over a 6-month period.

Newly recruited staff, service users, and commissioners of new services described the opportunities this provided, as well as some uncertainties about what to expect of new services, and of BZB. For some BZB staff members this provided an opportunity to move away from other established weight management services and models, towards an approach that focuses less on restriction and more on healthy, sustainable lifestyle changes. For example, one BZB service delivery team member expressed initial caution around the notion of a child weight management service, but a more positive impression once they had learned more about their ethos and approach:

> *'I think my initial impression…wasn't actually the most positive… because I didn't know myself what the company really did… I've always had this really negative impression of child weight management…[but] I found the whole mental health aspect was also considered throughout the programme as well.'* – BZB service delivery team member.

Other recently recruited staff members discussed the rarity of advertised nutritionist roles (as opposed to dietitian roles, or nutritionist roles that are based in industry working for food and drink producing companies), and their enthusiasm for a role which provided the opportunity to support and engage with people and communities:

> *'We are qualified nutritionists, and we studied for three years at uni to work in that role and help families. And I'm sure so many people out there need our support and help. Sometimes you don't want to refer to a dietitian because you're not ill, and you know you're well, and you just need that guidance and support that we're here to provide people with, yet we don't find these roles. So when I did find the role from BeeZee Bodies, I was really happy.'* – BZB service delivery team member.

Commissioner expectations of BZB and the new services varied, with some having an existing understanding and knowledge of BZB, their ethos and approach, and vision of a longer-term solution to weight management; whilst others described an 'unknown', having not worked with them before.

3.3 Reality

3.3.1 Experience of BZB services

Users of both BZB adult (online) and children and family (in-person) services described an overall positive experience of using the service. Adult service users valued the diet and lifestyle advice, non-judgemental approach of BZB staff, and a feeling of togetherness with other service users. For parents/carers using the children and family services, some noted that they had made positive changes to the way that they eat as a family, whilst others reported that their children had learned a lot from the process. Children and young people said that they enjoyed their BZB sessions, particularly the physical activity element (see a summary of session content and format in Appendix B), and learning '*about healthy food*'. Some described being surprised that it was not as '*boring*' as they had expected. Additionally, users of both adult and children and family services expressed satisfaction and benefit from the interactive elements of the service and stated a preference for more of this. For those using adult services, suggestions included adding an in-person element, and more individual contact with

BZB staff. For those using children and family services, suggestions included more opportunities for children and young people to practice the theory they had learned – for example, more interactive or 'homework' type tasks for them to do between sessions. The central team noted that this is a standard part of the BZB approach, but perhaps more work is needed to ensure that this is embedded in practice across services, and to review whether what is being delivered meets service user needs.

The issue of how some children and parents/carers feel about being referred to weight management services came up in some BZB services, where staff were responsible for making follow-up phone calls to parents/carers whose children have been sent a letter from the NCMP. Staff described conversations with parents/carers during follow-up calls, describing some as being grateful and enthusiastic about potential help, but others as feeling upset and/or defensive about what this meant for their child, but also what the implications were regarding their parenting. This was echoed by some parents/carers:

> *'For my daughter [when she was referred]… she was like, "oh, I'm fat, that's why I have to go to this thing" so she wasn't very happy. So it's hard getting her to come [to BZB] every week, but she enjoys it and she sort of takes [learning from the sessions] onboard every week… I think she needs more of an incentive to come here, because it's hard to get her to come here sometimes. She's like "I don't want to go… Why do I have to go? Why have the school sent me? Why is it me? Is it because I'm fat?"' – BZB CYPF service user (parent/carer).*

In this case, the parent/carer describes the enjoyment their child experiences from the sessions, but also the negative perception and expectations of their child about being referred to a weight management service, what that means for them and why they have to be there. Careful consideration is needed of referral processes in relation to the ways in which weight management services are perceived and engaged with, and how negative perceptions can be addressed. But BZB central team staff pointed out that service users who may have felt this way at the beginning often then reported enjoying the service once they started attending (see Findings: Evidence and Insights, Chapter 4). So further consideration is needed of how people's expectations and perceptions of weight management services, and behaviour, change because of personal experience.

3.3.2 Establishing new services

The recruitment of a large number of new staff in a short amount of time, and in new areas for BZB, required considerable time and resource from the central team. This occurred at a time, during and after COVID-19 lockdowns, where an increased demand for nutritionists, dietitians, and managers was created by the sudden increase in funding to the weight management sector (BZB, 2022). Staff recruitment challenges also included the time-limited nature of many advertised roles due to fixed-term funding, and the time needed to recruit via a standard 3-month recruitment cycle and then train and upskill new staff for service delivery (BZB, 2022).

Additionally, in areas where BZB were working for the first time, many of the communities where they had been commissioned to deliver services were unfamiliar with the organisation. Building a presence within, and relationship with, local communities takes time (Tembo et al., 2021). One SOG member commented during the weekly meetings that in her community, it can take a decade or more to build the kind of trust with a community to really work alongside them. For the child and family services, the enrolment of people and families onto the services being delivered required a sizeable amount of time and resource of BZB frontline staff in some locations to develop effective recruitment and referral routes through local schools, GPs, and community organisations. In

addition, in locations where BZB were involved with the OHID development of the NCMP process (see 1.1.1 BeeZee Bodies services), there were time challenges with the reworking and sending out of letters, and distribution of the 'talking to your children about weight' leaflet, contributing to delays in the start time of some services. Throughout the contracts, BZB frontline delivery teams described time and capacity issues regarding the main focus of their role: service delivery, whilst also working to engage service users and local communities. They reported some difficulties in retaining engagement in online adult services from the point of sign-up to the service to the delivery of the first sessions, and low attendance/dropping out before programme completion. One reason for this suggested by members of BZB central team was digital fatigue following COVID-19. For example:

> *'There's been fatigue with digital interventions…in particular for families… they've done the whole home-schooling thing and they're working from home on their laptops all day. And then in the evening they don't really want to come on to webinars.'* – BZB central team member.

This view was also echoed by another member of the BZB central team, who said *'I think people just can't be bothered with online stuff anymore, and it's also really easy to pull out of with no consequence'*, in comparison with more successful retention within in-person services. Users of online services described challenges with internet connection or other technical difficulties. Additionally, some provided additional feedback for BZB regarding the accessibility of online content:

> *'I'm dyslexic, so…it was really like overload for me… I think it was just so much information, and you've got the chat box, and then you've got the polls and you've got the PowerPoint. And it was just like, well, this is too much for my brain to take, and it was all just jumping… I enjoyed the sessions… but… there was just too much.'* – BZB adult service user.

3.3.3 Diversity and inclusion

The expansion of BZB services in 2021 involved establishing and delivering new services in areas with high deprivation and high numbers of households from ethnically diverse backgrounds. This required adaptation and diversification of BZB service content and resources in order to address the needs of diverse populations and communities:

> *'I just think sometimes what we say [in BZB materials] can come across a bit tone deaf…to different communities. Examples that come to mind are the snack suggestions and the lunchbox suggestions we have. The lunchbox just says tuna and sweetcorn sandwich, a yoghurt and some fruit, and our families are bringing in leftover daal, for example. It's very out of touch with what our families are experiencing'* – BZB service delivery team member.

BZB took an adaptable approach throughout the delivery of their services, seeking the views of service users and staff to adapt existing BZB materials to be more culturally appropriate. BZB also made changes to the services and their content during their delivery to make them more inclusive of and appropriate for the people using them. Examples of these adaptations were the diversification of existing resources (e.g. changes to food suggestions and examples), the sourcing of new resources, and making adjustments for service users for whom English was not their first language. In addition to adaptations related to cultural inclusion, the expectations of BZB central team that services and resources would need to be adapted to be more accessible to disabled people were confirmed by the experiences of BZB delivery staff:

'I know [colleague] has been doing a lot of work on developing resources for kids with autism… So we're giving out all these resources and we're talking about all of these things thinking that everyone can understand. But having a chat with the mum and just seeing that, okay, we definitely need to simplify this a lot more, make it a lot more visual, and just have a lot more pictures on there and even thinking about the language that we're using… but that's something that definitely is needed, and I think would definitely benefit the users, as well as us delivering our session.' – BZB service delivery team member.

The changes made to BZB programmes during their delivery have required services, and staff, to be highly adaptable, seeking and listening to feedback from service users to inform future service delivery, but also taking immediate action to ensure those service users were experiencing a service that was more accessible, appropriate, and beneficial for them as individuals. Staff discussed balancing this need for immediate action with the longer-term planning and strategy, to develop inclusive and adaptable service models and content for people and communities served by existing and potential future services, while remaining cognisant of a wider context of poverty and health inequalities:

'…because we're working with families from lower income backgrounds, sometimes some of our sessions are slightly insensitive: portion week comes to mind. There's a substantial amount of food waste that comes, because we've been told to use real food for the kids to weigh out, but then all of that food goes in the bin afterwards, and we've had a lot of parents' feedback to us that that's quite insensitive when they're struggling to feed their family in the first place.' – BZB service delivery team member.

Other participants also described the need for consideration of delivering a weight management service in a wider context of poverty, inequality, and the cost-of-living crisis, for example the difficulty in developing a service that meets the specific needs of a community '*when people are handing back potatoes, because they can't afford to cook them, to the food banks*' (BZB engagement team staff). Further discussion of the development of BZB services in relation to this point is discussed in Chapter 6.

3.3.4 Opportunities and future development

The expansion of BZB services in 2021 provided opportunities for further development of delivery approaches and materials, as content was adapted to meet the needs of both those using the services and local communities. See more detailed discussion on service development in Chapter 4, section 4.4).

Through the delivery of services in new areas, BZB have begun the process of becoming a known and trusted presence in local areas and communities. BZB have engaged with communities through events such as school visits and coffee mornings, outreach to GP surgeries and health centres, and attendance at local events. However, delivery staff described a tension between capacity for engagement with people and communities and the need to prioritise service delivery, with all the ongoing changes and adaptations that this entailed. BZB engagement teams described the process of becoming embedded in a community as requiring the building of relationships and trust, key mechanisms in community development approaches which take time (Rycroft-Malone et al., 2016; Tembo et al., 2021). Staff described opportunities to build on these foundations, become more embedded in the community, and work with local people and communities to provide services that meet their specific needs (see further discussion of this in Chapter 3).

Regarding the training and support of BZB service delivery staff, the experience of delivering these services and associated learning has highlighted the importance of and opportunities for future staff training, including topics such as safeguarding, and equality, diversity and inclusion (EDI), particularly in relation to the cultural diversity and neurodiversity of service users. Recommendations for staff training are given in Chapter 7.

4. Findings: Evidence and Insights

4.1 Summary

This chapter summarises the findings in relation to evidence and insights. Dedicated BZB engagement teams, actively recruited from local communities (four Engagement Officers and two Behavioural Insights Officers), conducted focus groups and interviews with local people and communities, focused on perceptions of health, attitudes to food and experiences of weight management, to engage people and communities in the areas in which BZB services were to be delivered. These focus groups and interviews were transcribed and collaboratively analysed between members of the central team and the engagement teams. In reference to this work, people often talked about 'data' and 'insights' interchangeably, and the boundaries between them in our data are blurred. But in the chapter which follows, 'data' is used to refer to information collected by the BZB engagement teams, and 'insights' to learning from analysis of that data.

Key points:

- Dedicated BZB engagement and insights officers, actively recruited from local communities, have been carrying out engagement and insights work which informs and is informed by service delivery.

- Data collected included monitoring data required by commissioners, and online focus groups and interviews with service users and community members in adult services facilitated by BZB engagement and insights officers.

- BZB have collected a large amount of data related to health and weight management, mainly in three key areas: ethnic and cultural diversity, behavioural and neurodiversity, and poverty and inequality.

- Challenges to engaging people in this work included a lack of trust, particularly in areas where BZB were previously unknown, and short-term funding creating uncertainty around longer-term benefits for individuals and communities.

- Short-term learning from this work is focused on quick changes that can be made to services to make them directly and immediately more appropriate for current service users; the longer-term learning for strategy and future service development includes further in-depth community engagement and insights work.

- There were also challenges around the time and resources needed to collect and analyse data, and to implement learning in the context of time-limited, delivery-focused contracts with specific key performance indicators.

4.2 Insights through service delivery

As discussed in Chapter 1, BZB gathered insights in the form of service user feedback which related to key areas such as: ethnic and cultural diversity, behavioural diversity and neurodiversity, and poverty and inequality. Some of these insights were collected on an ongoing basis, through service user feedback, and changes were made to the services as required and appropriate. Consideration of how BZB can further develop their organisational processes so that this feedback is formally gathered and recorded, is discussed in 4.4 Service development. In section 4.3, we discuss the engagement and insights processes used by the BZB central team, working with the dedicated engagement and insights teams recruited in the locations where they were commissioned to do this work.

4.3 Engagement and insights work

As part of some of the contracts commissioned in 2021, BZB recruited four dedicated Engagement Officers and two Behavioural Insights Officers to engage people and communities in the areas in which those services were to be delivered, alongside service delivery. The engagement and insights officers were actively recruited from local communities to facilitate successful engagement with those communities and local people. Engagement and insights officers reported that BZB were able to achieve trust and engagement with local people and communities, using their established understandings of and relationships with them. However, a consideration identified by members of BZB central team in this work was the need for these engagement and insights officers to also have the skills necessary to undertake qualitative data collection, and the importance (and sometimes challenge) of finding a balance between these two critical attributes. Three online training sessions on qualitative data collection and analysis were delivered to BZB engagement and insights officers by the UH project lead. Wider support for this work was provided by members of BZB central team, including debriefing and the development of internal organisational processes for the management and storage of data. BZB are exploring the potential for future recorded online training sessions and materials to support staff in building qualitative research skills and expertise. The engagement and insights officers then invited local people to take part in interviews and focus groups.

The learning of the BZB central team around this was strengthened by the work of an EDI specialist who they brought in as a strategic advisor (further detail in Chapter 5, section 5.2.1) and member of the SOG. The strategic advisor supported the central team to adapt their approach with staff on occasions where there were additional language barriers or where further support with qualitative data collection and analysis was needed. Through this adaptable approach, and through the work of the BZB engagement and insights officers, BZB were able to collect a large amount of data on what health means to different people and communities to inform the development of future services.

4.3.1 Building trust

BZB engagement and insights officers reported that BZB were able to achieve trust and engagement with local people and communities. However, gaining trust is not always straightforward (Harrison et al., 2019), and BZB also reported challenges, for example when asking people to complete consent forms and give personal information prior to participation in the focus groups and interviews undertaken by staff for the BZB insights work:

> '…some people, even they don't trust this process. They're thinking that you need to use them for something, but they don't know what… The awareness of people is less in this deprived area… they worry when you ask them to give your date of birth, or…sign here.'
> – BZB engagement officer.

Despite engagement and insights officers being local people with a pre-existing relationship with their areas and communities, participants in this research referred to perceptions of services and organisations being 'parachuted' in and out of local areas as contributing to a lack of trust. For example, one commissioner described people and communities as having been '*burnt before*'. Engagement and insights officers also reported being asked by people what the benefit of taking part in a focus group or interview would be for themselves or their community, and the difficulty of answering questions whilst funding for the continuation of BZB's work in the area was uncertain:

> *'It's very dangerous, because maybe people in the future, if you try to help them through another project, maybe they're not going to trust you again… You have been delivering this service and when you tell them they're (the service) going to stop… I'm not saying they are going to break the trust, but it's going to affect it.'* – BZB engagement officer

Trust was also important within the organisation, and BZB central team members discussed the importance of staff in services trusting their intentions and processes. For example, on occasions engagement officers did not record sections of interviews with service users or local people which they deemed too personal. BZB central team staff ascribed this to a lack of trust in them to handle sensitive and confidential data responsibly.

Trust also related to the relationship between the organisation and commissioners, particularly in relation to the uncertainty generated by the widescale, unexpected withdrawal of government funding for weight management services that occurred in April 2022. Short-term funding cycles, and the need for longer-term investment, were highlighted as essential for successful engagement of people and communities, in order to provide more certainty and specificity around what their engagement will lead to and how it may benefit them. BZB central team members said that commissioners and OHID staff had also recognised that the funding on offer did not match the government's own recommendations about long-term investment and prevention of obesity but reflected a strategy that all recognise as being sub-optimal – short term funding and focus on short term weight loss.

BZB's insights data collection generated large quantities of data, analysis of which required considerable time and expertise from both central team and service staff, who worked together in a collaborative analysis process led by members of the central team. This approach is integral in work such as this to ensure that understandings and interpretations of those doing the engagement work, who are closer to the people and communities it concerns, are not lost in the process. Uncertainty over contract duration and ongoing funding also impacted on staff capacity for data collection and analysis, along with commissioners' reporting requirements and deadlines. Opportunities for flexible commissioning in relation to community engagement are discussed in Chapter 5.

In addition to the insights and learning generated by this work, it has also helped build connections and relationships with the local people and communities:

> *'I think that invitation [to a community event] came off the back of building a relationship. Like you'd been speaking to him [community leader] over a number of weeks, and then we had the focus group interview, and then after that he invited us. So I think there's something around building that trust and that rapport, and that confidence within the community so that they are more motivated to engage. Because I think there is a lot out there that people can engage with, but it's how much credibility do they give it, and how much understanding do they have of it, and how comfortable do they feel in those spaces and environments?'* – BZB engagement team staff.

With the building of these connections and relationships with communities, and the insights that BZB have gathered, there is a potential opportunity to demonstrate to communities that BZB are listening, and responding, to their needs regarding weight management support and services (we explore in Chapter 5 how this can move towards co-production). However, considerable time and resources are required for meaningful service development to occur that effectively utilises these insights and explores the potential for further collaboration with communities. The BZB central team said that their approach to dealing with this issue was to be open and transparent with people about the limitations of funding and contracts and explore ways for people and communities to contribute to future funding bids.

4.4 Service development

4.4.1 Short-term service development

Our findings on BZB service development have two key elements. Firstly, short-term, quick changes which can be made to services to enable them to be flexible and responsive to the needs of current and future service users. These have been enacted throughout BZB's current contracts by frontline regional delivery teams, as discussed further in Chapter 1, demonstrating strong adaptability of the service, the organisation, and its people. However, developing organisational processes that facilitate these changes can be difficult in the context of short-term, fast-paced contracts, where Key Performance Indicators (KPIs) and outcome measures are imposed or requested by the funder at the outset. Working towards co-production involves flexibility and responsiveness in KPIs, impact and outcomes as well as in models of service delivery. BZB staff also reported the necessity to ensure that records are kept of changes made, and that adapted, or newly developed resources are stored and saved for future use and made available across all contracts:

> *'Although we can make changes, I think the rate in which we need to make new changes can sometimes be difficult, because we can't always get it approved in time [by BZB central team]… We want to make those changes for the next week, but we have to keep thinking about how we can implement those changes, but also make sure that everyone's aware that those changes are being made.'* – BZB delivery team member.

This BZB delivery team member noted the process of approval for changes to the service currently needed from BZB central team. The organisational processes behind making changes to services were also discussed by members of the central team, who described the need for, and ongoing work towards, developing processes that will ensure the organisation is able to maintain quality of service and brand identity and consistency, within a service model that is adaptable to the needs of different people and communities as required. BZB central team discussed how they are working with their frontline service delivery teams to gather thoughts and ideas of how to develop their internal processes for gathering feedback from service users that are accessible and appropriate, as well as processes for implementing changes that meet the needs of the central team, delivery teams, commissioner requirements, and ultimately, service users. A key consideration identified by members of the central team was the need to find a balance between being flexible and adapting for individuals, whilst also maintaining core content and values and not making changes to suit one person if they were also to have a negative impact for most service users. Therefore, it was suggested by the central team that further engagement with service users and the wider communities in which the services are delivered would be important in determining the need for substantial, organisation-wide changes to be made.

4.4.2 Long-term service development strategy

The second component is the longer-term strategy of service development. This strategy is informed partly by the experiences of and feedback from service users, but also by the in-depth community engagement and insights work described in section 4.3. As discussed, this work across key regional contracts over the last year has yielded data and insights that have great potential to inform service development in a meaningful and impactful way, and provide BZB with the ability to evaluate changes made to programmes. BZB engagement and insights officers reported the importance of building relationships with and engaging local people and communities in the collection of data and gathering of insights. To develop a service development strategy that utilises these insights, members of BZB central team identified further engagement and involvement of those communities as needed, for example re-engaging with people and communities to explore how they would like to see these insights implemented in BZB services. However, the withdrawal of government funding, and general uncertainty and instability caused by short-term funding cycles, pose a significant challenge to engaging in that work:

> *'It just feels like the public health landscape means that you can't ever truly invest in quality and innovation, and taking time to nurture, to think and reflect. It's always, where's the next money coming in from? Once the money goes out, it's what can we squeeze out to develop something? And there's always the next rotation, next rotation, next rotation, and all…'* – BZB central team member.

The 'next rotation' here refers to the delivery of the next rotation of the BZB service (i.e., the next round of service delivery with a new group of service users). In referring to this, the quotation above highlights the challenge of balancing longer-term, strategic service development with the needs of commissioners and other reporting requirements, as well as short-term funding making it difficult to consolidate and utilise the insights and learning before the contract ends and another delivery-focused contract begins. However, local authority commissioners in this research reported a willingness and interest in working towards more flexible commissioning processes, for example including more process-driven and negotiable KPIs, that meet their need to show return for their investment, whilst also supporting co-produced, community-led, and collaborative approaches.

One key consideration for BZB service development is how to best utilise the insights and learnings they have gathered regarding culture to ensure their services are inclusive of and meet the needs of diverse communities. As discussed in Chapter 1, and in section 4.3 of this chapter, BZB have gathered insights that highlight the importance of developing service content and resources that are appropriate to a diverse range of cultures, as well as developing a longer-term service model that has the capacity to be adaptable to new locations, communities, and thus cultures, as required (Marshall et al., 2022; Pallan et al., 2019). We found that there is a substantial opportunity to do this, but further consideration is needed regarding how best to do this in a meaningful way. For example, in relation to the logistics of developing a service that meets the needs of many different groups and cultures:

> *'I personally am not sure how you implement the cultural aspects of it [weight management]. I think it is important to bring them [insights relating to cultural diversity] in and incorporate it, I think through representation of the people who are leading the groups, and also the groups themselves. But whether you need to have different groups for separate demographics, I'm not sure about, and I don't know that yet.'*
> – BZB CYPF delivery team staff member.

Similarly, in relation to the internal organisational processes that need to occur to develop a service that meets the needs of many localised different groups, communities, and cultures:

> *'How strict do you be with what a programme is and how flexible that programme should be? Or do you have a BeeZee families programme that has to be the same across every area? Or then do you adapt those? It's a real challenge, really… When and how you action things based on what information is the big challenge. And also, I think for BZB especially, because we do have quite a lot of services, it's what service do you prioritise?'* – BZB central team member.

The question of whether an inclusive service would consist of different services for different groups, or integrated services, is one of many questions that BZB have considered regarding how best to effectively utilise the learning they have gained. Participants discussed how the next step in relation to this aspect of service development (funding continuation permitting) will be to re-engage with people and communities and ask them what a BZB service would look like which utilised learning on culture, diversity, and other key areas of insight.

5. Findings: Working with people and communities

5.1 Summary

In this chapter we review the findings in relation to BZB's approach to working with people and communities. We begin by giving an overview of the SOG, including who BZB brought together and why, what the SOG did, and the experience of it. We outline BZB's incorporation of different approaches, including Asset Based Community Development (ABCD), which can be described as an approach that demonstrates that local assets and individual strengths are key to sustainable community development, as well as 'ethical marketing' – marketing practice that takes a morally and socially responsible, and culturally sensitive, approach (Murphy et al., 2005), and EDI . We then outline and discuss BZB's exploration of and 'journey' with co-production, including discussion of its reality and feasibility with reference to a shared definition.

Key points:

- BZB formed the SOG with the aim of bringing together different people, approaches, and perspectives to explore how BZB can develop their approach to working with people and communities.

- The SOG provided a valuable space for the bringing together of approaches and perspectives to help BZB to re-think and re-shape the way their work was approached through a continuous process of questioning, challenging, and re-shaping.

- As a result of the SOG process and discussions, BZB's initial aim of co-producing services evolved into 'working towards' co-production, recognising the pragmatic realities and challenges there were in achieving co-production.

- Recommendations were given by SOG members for the further development of the group, including and related to group membership and group purpose.

- The engagement and insight work that BZB have undertaken has demonstrated the importance and value of increasing engagement and involvement of service users and local communities regarding future service development. Work so far has shown that time is needed to build relationships and trust.

- The current commissioning and procurement landscape, in which the funding granted for BZB to deliver services is on a short-term basis, is a challenge to the time required to meaningfully engage in co-production.

- The sharing of power and responsibility by BZB that co-production requires was hard to envisage as achievable for many, with external partners suggesting the need for BZB to take risks and concede power to be able to move beyond intention and move closer to achieving co-production.

5.2 Engaging with people and communities

Across the contracts in which they were commissioned to deliver in 2021, BZB have placed focus on engagement with people and communities to enable them to develop their services as appropriate to the new areas they are operating in, and the people and communities of those areas.

5.2.1 The Strategic Oversight Group (SOG)

As part of this focus, BZB formed the SOG with the aim of bringing together different people, approaches, and perspectives to explore how BZB can engage with people and communities, and if and how they can work towards co-production. Active SOG members included the BZB central team, UH research team, Nurture Development (ABCD), Franses (ethical marketing), and an EDI specialist. BZB also worked with other strategic advisors including specialists in service design and data analytics and optimisation. BZB welcomed, and selected members of the SOG based on their difference in outlook and experience, acknowledging the tensions that may exist between the approaches and perspectives brought together, which they viewed as '*productive tension*, *which all members were committed to working in partnership to resolve'*. They encouraged discussion and exploration of these tensions, as well as synchronicities, to consider how BZB might adopt these approaches in their engagement with people and communities. Here we detail the role of each of BZB's external partners in this work:

Asset Based Community Development (ABCD)

BZB commissioned an external organisation (Nurture Development) to provide ABCD training to all their new staff to contribute to the development of BZB's relationship with local people and communities. This training was delivered to service managers, service delivery teams (nutritionists, dietitians, and wellbeing coordinators), service support teams and engagement and insights teams. The training course consisted of four 3-hour modules, delivered by the Managing Director of Nurture Development. ABCD aims to challenge the traditional deficit-based approach that tries to solve urban and rural community development problems by focusing on the needs and deficiencies of individuals or neighbourhoods. Instead, ABCD demonstrates that local assets and individual strengths are key to ensure sustainable community development, and that people have a life of their own choosing. BZB staff who attended this training reported shifts in their thinking and approach to their work and working practices, particularly in relation to how they engaged with people and communities. For example, members of BZB staff reported that they were consciously aware of attempting to integrate some of the principles of ABCD into their work and practice. For example, the ABCD focus on 'what's strong?' as opposed to 'what's wrong?' resonated with staff members as something that they could take into how they approach service delivery and work with service users. Additionally, the notion of asking powerful questions, that reflect committed listening and understanding the other person's perspective, was viewed by staff as a useful tool to encourage people to open up about the issues or challenges they were facing. For the engagement teams in areas where the engagement and insights work programmes were occurring, there were distinct opportunities to develop this work further, working more closely with the external organisation on a one-to-one or 'by area' basis to instil the central tenets of ABCD into their work and practice.

Ethical marketing

BZB also commissioned an ethical marketing and PR agency – Franses - to explore engagement with people and communities from a marketing perspective, providing background information as to the way that influencers and influencing works, and how this might look, or be relevant for, BZB. Ethical marketing is described as marketing practice that takes a morally and socially responsible, and culturally sensitive, approach (Murphy et al., 2005). BZB's principle for including Franses was based on Sutherland's (2019) work, which asserted the potential to generate new ideas in different ways

and from different sources. It was the view of BZB that often public health can be very purist about from where ideas should be generated. They thought that hearing their different approaches and sharing the challenges of community engagement and enrolment to weight management services could carry potential to bring some of the successful aspects of marketing to BZB and how they engage with local people and communities. This work explored and developed a set of criteria for who would be an influencer that might be relevant and appropriate to the work of BZB. It also explored and developed ideas for community activations or projects that could map onto initiatives or events already happening in local communities. These ideas have included a pop-up restaurant, with local chef-led sessions bringing people together around the food they love, a community mural exploring what being healthy or healthy living means to people and communities in the area, and a community garden, bringing people together in green space, being active, and planting fruit and vegetables. The principle behind each of these ideas is that they could be set up and ran in local areas with local people and communities and could then be replicated across different geographical locations. BZB noted that these ideas are potential workstreams for them to explore and develop in the future.

Equality, Diversity & Inclusion (EDI)

BZB also commissioned an EDI specialist as a strategic advisor to support their thinking around the importance of diversity and inclusion, and how to engage specific groups from ethnic minority backgrounds and people with disabilities in their work and services. BZB central team members explained bringing in an external EDI specialist to challenge them and hold them to account regarding EDI, to ensure that they do not approach this on a tokenistic level, and that EDI remained a priority when they were under competing pressures. This work involved challenging BZB's thinking around their understanding of and approach to EDI, the different inequalities that might impact a particular group, and how they might consider these inequalities and their implications for how they might need to do things differently in relation to their work and services. This work has occurred at a strategic oversight group (SOG) level, where the EDI specialist was an active voice in speaking to EDI, but also in local settings with local engagement teams, where they engaged with BZB team members to support BZB with how they reframe or engage with people within a particular community. BZB central team members' description of how the work of the EDI specialist strengthened their learning was previously noted in Chapter 4, where they supported them to adapt their approach with local engagement officers on occasions where there were additional language barriers or when further assistance with qualitative interpretation of data was needed, for example. Additional reflections from the central team around this point, following input from the EDI specialist, noted that the BZB internal processes for this work were developed centrally, without much input from the engagement teams, and identified the need for future processes to be developed more closely in collaboration with the local engagement teams, and in consideration of their skills and experiences.

The UH research team

As discussed in Chapters 1 and 2 of this report, the Centre for Research in Public Health and Community Care, University of Hertfordshire (CRIPACC, UH) were commissioned by BZB to bring academic insights and expertise which would support the future development and potential co-production of BZB services. All members of the UH team were active members of the SOG, providing strategic advice and support as needed. Professor Wills is the Director of CRIPACC and the NIHR ARC EoE. She is a Professor of Food and Public Health, with particular expertise in the social and socio-economic determinants of obesity, food practices, and malnutrition, and how inequalities are produced and experienced by different population groups. Professor Almack leads the CRIPACC Communities, Young People and Family Lives research programme. Dr Mathie is a Reader in Health and Social Care with expertise in co-production and involving those with lived experience and

members of the public in health and social care research. She is also co-lead of the NIHR ARC EoE Inclusive Involvement in Research for Practice-led Health and Social Care theme. Dr Brady, the principal investigator in this project, has expertise in qualitative and participatory methods, and research with children and families. Dr Newman, lead researcher on the project, is a qualitative researcher with experience of using ethnographic methods in sport, exercise, and health research.

The SOG experience

Collectively, the external partners listed in this section came together with members of the BZB central team as the SOG, meeting weekly across the course of the 2021-22 commissioned BZB contracts, with one extended meeting each month for more in-depth discussion. The structure of SOG meetings varied depending on the focus, but largely either involved BZB presenting on the work they had been doing or one of the external partners presenting an update on the work they had been doing with BZB. These presentations would then be followed by feedback from, and discussion amongst, the wider group, focused around BZB's engagement with people and communities. The BZB central team described wanting external partners in the SOG to hold them to account in their exploration of how they could engage with diverse people and communities, and expressed that they had found usefulness in that, for example:

> *'I feel like it's been useful to have input from [members of the SOG], all those people who hold us to account, where we might just use those words for what we think we mean. But actually being able to – held to account, to be like, well actually, are you co-producing there? Are you getting insight? Are you doing that in a way that's meaningful? Or are you putting your own agenda, or own lens onto that thing?'* – BZB central team member.

In relation to the experience of the SOG and whether it achieved what BZB had intended, many members of the group expressed enthusiasm and positivity around the bringing together of perspectives that the SOG enabled. They noted the strength of diverse experiences, diverse thinking, and diverse perspectives and how this had helped BZB to re-think and re-shape the way their work was approached through a continuous process of questioning, challenging, and re-shaping. BZB central team members reflected that the SOG had been a place where productive challenges and tensions could and did occur, as was their aim, but felt that there was potential for more. A challenge identified by BZB was in being able to bring things back to the group and use the group to its full potential whilst also trying to keep up with the fast-paced nature of the contracts being delivered. They reflected that they felt they had gained value from the group, but also that there was the potential to gain even more value through the learnings of this experience. Suggestions and recommendations from members of the group for further development of the SOG included ensuring there was clear membership and terms of reference of the group from the outset, providing opportunities for more in-depth work, and further consideration of whether the purpose of the group is tangible (e.g., to achieve measurable outcomes) and/or a space for more fluid and strategic work.

Further reflection of the SOG from its members raised points regarding its membership (who was in the SOG and more notably, who wasn't). One point raised here was that the SOG, which was focused on the engagement of local people and communities, including discussions of co-production and equal partnership, did not include any members of the public. Members of the SOG proposed that members of the public could have been involved, for example through the involvement of local groups, as part of the SOG or of a similar advisory group. Another pertinent and related point raised was a lack of diversity within the SOG group. Some members of the SOG group suggested that future opportunities should be sought to include and involve members of the public in advisory groups such

as this, and more broadly to work with communities in the development, delivery, and evaluation of services in the future.

5.2.2 Working towards co-production

Co-production is a contested term that means different things to different people and is used variably across disciplinary contexts (Masterson et al., 2022; Smith, Williams, Bone & the Moving Social Work Co-production Collective, 2022). Because of this, researchers exploring co-production have previously suggested that it is often futile to search for, or attempt to produce, a clear-cut, definitive, and unanimously agreed definition of 'true co-production' (Bovaird & Loeffler, 2013), suggesting instead a need to explore and appreciate differences in definition and context. Projects may be more productive if each team of collaborators 'discuss and accept one clearly set out definition, chosen from a range of current definitions of co-production, then explore different ways of realising co-production according to that definition and throw light on the actual and potential results' (Smith et al. 2022, p.4).

As part of their focus on engaging people and communities, BZB aimed to explore the idea of co-producing services, and one of the roles of the UH research team was to provide strategic advice on this (see methodology Chapter 2). A key element of the resulting discussions with BZB and SOG members was whether and when involvement of members of the public and communities was required for co-production. In December 2021, acknowledging the need for a shared understanding of co-production, the SOG agreed a definition of co-production, drawing on definitions from the [Social Care Institute for Excellence](#) and the [UCL Co-Production Collective](#):

An approach in which practitioners and the public/communities/service users work together in equal partnership, sharing power and responsibility from the start to the end of a project, including planning, delivery, and evaluation.

As a result of these discussions, BZB's initial aim of co-producing services evolved into 'working towards' co-production:

> *"Technically, what we are doing is **working towards co-production**. We are looking to speak to people in and outside our services a lot more and in different ways to find out how we can improve, and what else they need to reach their lifestyle and health outcomes…it also means staying in touch with them and feeding back what we have heard, what we intend to do, and the results of those things. This serves as 'an ongoing conversation' with real people, allowing them to actively be involved in decision making"* (BZB, 2022, our emphasis).

The exploration of the reality and feasibility of working towards co-production for BZB in this project was undertaken with reference to the definition above, with clear stating of the agreed and chosen definition allowing any 'co-production' to be evaluated against this conceptualisation (Smith et al. 2022). Perceptions of what co-production is and what it could look like for BZB, service users, communities, and external partners, are also explored with reference to the agreed definition.

Co-production in practice (reality and feasibility)

The BZB journey of working towards co-production thus far has identified opportunities, as well as challenges, regarding the reality and feasibility of co-producing future BZB services. The engagement and insight work (more detail in Chapter 4) that BZB have undertaken across the last year has demonstrated the importance and value of increasing engagement and involvement of service users and local communities regarding future service development. The additional learning that BZB have gained through this work will be helpful both for future service development and to inform the development of services in collaboration with people and communities.

However, as described previously in Chapter 4, this engagement with local people and communities to date has demonstrated the need for time (Rycroft-Malone et al., 2016). Time for BZB to build relationships and crucially, time for them to build trust with those people and communities. The findings of this research have shown that time is integral to moving from engagement with local communities, to the co-production of services with them. A fundamental challenge in working towards co-production identified by this research is the current commissioning and procurement landscape, in particular the challenge of working towards co-production whilst fulfilling the requirements of short-term contracts:

> *'Everything is so reactive and short term that it's impossible to ever be truly co-productive, because the funding will run out, or we've got a report to write, so… We can't then keep that momentum and keep engaging communities… I think time and money is just the big thing, but I think that's always going to be the way.'* – BZB central team member.

Similar bureaucratic and systemic challenges to co-production are also found in research (Williams et al., 2020). One element of this repeatedly evident during this research was the ongoing tension between the need to focus on meeting service delivery and outcome-focused objectives and key performance indicators (KPIs), and the willingness and desire to undertake the work required to continue engaging with communities and working towards co-production. Short-term funding cycles, and the insecurity of funding, limit capacity for continued building and maintenance of relationships with local people and communities. Through BZB's engagement and insights work, and service delivery, the foundations of these connections and relationships have been built. However, the insecurity of funding and associated inability to demonstrate to people the longevity and potential benefit of their involvement for themselves and their communities, induces the risks of relationship breakdown and lack of trust:

> *'I don't know what's next... So if anyone asks me, okay, I've done the interview [as part of engagement data collection], what is going to be done next? … I think like 18 or 20 people, they ask the same things because they've done a lot of surveys before, and nothing is done.'* – BZB engagement officer.

Short-term contracts have led to poor previous experiences of local communities as external organisations have been present for a short amount of time or have been 'parachuted in' and back out when their funding has ended or been withdrawn (also discussed in Chapter 4). An opportunity to build trust is important to the engagement of local people and communities in working towards co-production, hence BZB's exploration of the ABCD approach and the embedding of services within communities. BZB central team staff also linked being able to answer the question of 'what's next?' with expectation management, and a need for realism in what and when something can be actioned. For example, when further thought and discussion with community members is needed to deepen understanding, checking fidelity with other community members and ensure that the proposed changes to services are possible and feasible.

Co-production, as discussed above, is generally understood to require the involvement of members of the public (non-professionals) and communities. But, as well as needing the trust of local people and communities, this is based on an assumption that those people and communities are willing and interested in co-producing services. The time and capacity of service users and communities available to engage in this process must be considered – *'It just depends on time… because with the kids we can't do anything'* (parent/carer). In this case, the service user expressed willingness to work with BZB to inform future service development, but also challenges regarding their time and

availability. Regarding interest and willingness of people and communities to be involved, BZB central team discussed the use of incentives during insights data collection but decided against doing this. However, this is now being given further consideration following feedback from staff in BZB services. This highlights the importance of reciprocity and being able to demonstrate benefit for the community of being involved, as well as linking to wider values around payment for public contributors involved in co-production (see Co-Production Collective Payment Policy & NIHR payment guidance for researchers and professionals).

This project found that, given the time and parameters in which to do so, there is an opportunity to continue to build relationships and trust with local people and communities, and hence continue to work more closely with the community, and so progress towards co-production. Commissioning processes appear to be the most significant external challenge to this, but could also potentially facilitate co-production, or at least continued and ongoing engagement with and involvement of people and communities:

> 'Rather than put a whole load of outcomes that we're expecting, we've just put them as more process kind of outputs… So the KPIs, if you could call them KPIs, are around how much they've [service users, members of the public have] engaged [with the service]… rather than are people engaging in healthier lifestyles?… Are they a healthy weight? Have they attended the 12-week course? And just the traditional stuff that would be measured on a weight management programme … If you've got a flexible procurement service… You don't have to have such rigid KPIs, and you can write it into the contract.' – BZB commissioner.

A shift from rigid, outcome-based KPIs to more flexible, process-based objectives has the potential to alleviate the need to continually prioritise enrolment numbers, and instead focus on greater engagement with communities and developing services with people and communities. BZB staff discussed how they have been able, in some circumstances, to establish open and honest dialogue with commissioners around the achievement (or not) of certain KPIs and the reasons why. This dialogue and associated trust enabled BZB and commissioners to agree which KPIs still needed to be met, and which could be accepted as not being met in order to focus on areas of work which had emerged as being important to the people and communities with whom they were engaging.

Members of BZB central team and BZB commissioners also expressed interest in a longer-term vision, in which the community would be given more ownership, in relation to co-production and/or the ABCD approach. This would involve BZB being commissioned to help the community to deliver and embed services, rather than delivering the services directly themselves, assuming, as discussed above, the willingness, interest and capacity of people and communities to be involved. There are also considerations about what the sharing of power might look like for BZB. In discussions about definitions of co-production (see above) the sharing of power was the most common point of contention regarding the perceived feasibility of achieving the co-production of services. Many participants expressed doubts that this was achievable, and how power imbalances between service provider and service user might be overcome:

> 'if we're the ones to maybe initiate these projects in co-production, is that power and responsibility really shared?… Because some community groups will [say]… 'we'll work with you', but at the end of the day, it's BeeZee Bodies that want something back from them. So that responsibility is not the same, because we have more of a vested interest than they do, and I think that's quite tricky'. – BZB service delivery staff.

There was suggestion by an external partner that true co-production in BZB would be about '*moving beyond intention*' and '*conceding power*'. Regarding how co-production can be commissioned, they said:

> *'I think setting out your [service delivery] model from the outset still gives you some scope and power, because… that's what you're negotiating on, as opposed to you get the money and then negotiate [with people and communities] around trying to bring it back around [to what matters to them]. So that might be part of the step, but there's a big risk attached to that, isn't there? What's your risk appetite?'*
> – BZB external partner.

The above quotation highlights the need for co-production to involve people and communities in key decisions from the outset. A member of BZB central team discussing power and power imbalance suggested that these transitions need to occur over time, in order to reduce the risks of '*handing over responsibility to communities for weight management totally in one go*'. However, risks for both the organisation and communities need to be balanced with opportunities and identification of training and support needed by all involved. The member of BZB central team suggested that one solution would be the commissioning of experienced weight management organisations, such as BZB, with a view to transitioning power over time. But the planning of future co-production and/or ABCD approaches also needs to consider the views and experiences of people and communities. For example, if the community want to commission external support, they could decide this collectively and invite it in, rather than have it commissioned on their behalf.

Discussions of the feasibility of the co-production of services, and how BZB can meaningfully work towards it, therefore raised a number of significant external and internal factors for consideration for BZB in working towards the co-production of services, but also an opportunity to continue to move closer towards it if changes that could help to facilitate it are made.

6. Discussion

The aims of this project were to explore how BZB can best engage diverse communities, how evidence and insights can shape and influence service development, and if and how BZB can work towards the co-production of services. In this chapter we discuss the findings summarised in Chapters 3 to 5 in relation to these aims.

Key points:

- BZB have made great progress in establishing internal processes to enable successful engagement with diverse communities to occur and have achieved a better understanding of what training and skills their staff require to undertake this work.

- There is clear potential value from the insights gathered by BZB to inform the development of adaptable and diversifiable services. To enable their effective utilisation, priority needs to be placed on service development, which has been hard to achieve in the context of short-term contracts.

- Internally, BZB need to prioritise continual development of internal processes that allow for both short-term service development and longer-term service development strategy.

- BZB staff were open to exploring co-production values and as time progressed began to reflect on the reality and difficulties of achieving co-production.

- To enable BZB to continue working towards co-production, or working with communities more broadly, the priority must be allowing time and resources to embed themselves within, and engage with, local people and communities.

- BZB have achieved a more nuanced understanding of the challenges of co-production, and what co-production is and might look like for them as an organisation. They are now in a better position to reflect on these challenges in relation to development of their approach to working with local people and communities.

- To further develop this approach, BZB would need to consider further opportunities for community involvement in the designing and development of services in the future.

6.1 Engaging diverse communities

BZB have made great progress in establishing internal organisational processes, and staff training and support, to enable successful engagement with diverse communities. Through the process of the engagement and insights work that BZB have conducted across their 2021 commissioned contracts (as discussed in Chapter 4), BZB developed internal processes to support this work, including how information is collected, consent and how information and data is organised and stored internally. The qualitative training sessions, and associated support, provided for engagement staff enabled BZB to achieve a better understanding of what training and skills staff require to undertake this engagement work and achieve successful outreach with communities.

To continue to work towards the engagement of diverse communities requires sufficient time and resources, as well as continued work exploration of co-production and community-led approaches. The challenges to time and capacity that the BZB delivery team staff identified illustrate the need for further resource or dedicated staffing roles to enable successful outreach with communities in the context of service delivery. Time is also needed to take the opportunity to continue to build relationships, and trust with local people and communities. Without these connections, relationships, and trust, the engagement of diverse communities is difficult, or impossible. The resource development that has already occurred will be beneficial for future service development and delivery and has created a bank of materials which can support the development of inclusive services and be adapted to meet the needs of diverse communities. It cannot be assumed that the knowledge gleaned through BZB's work so far can be used with other communities, as the nature of engaging diverse communities means that learnings do not always map onto different communities. However, the adaptability of BZB and its services demonstrated during this time illustrates their potential to continue to develop their services using a model that prioritises being adaptable to the needs of varying populations and communities as it is commissioned to serve.

6.2 Evidence and insights

The insights gathered by BZB have the potential to support the development of adaptable services which can be adapted to be inclusive of, and appropriate for, diverse people and communities. However, to enable their effective utilisation, priority needs to be placed on service development, and this has proven hard to achieve in the context of delivery-focused, short-term contracts. External factors, particularly commissioning processes, need to adapt to accommodate community engagement and co-production in service development, as well as allowing time for this to occur.

Internally, BZB need to develop internal processes which allow for both short-term service development (as discussed in Chapter 4, section 4.4.1), and longer-term strategic service development (section 4.4.2). Additional consideration could be given to how service users could be involved in the interpretation of data, how they could ensure in the future that those people and communities who engaged with the work feel that their perspectives have been heard and/or used, and how these insights are communicated back to the communities that they have engaged (Mathie et al., 2018). If this communication could be expanded or improved upon, consideration could also be given to how much and the range of data that was collected, whether it was feasible to utilise all this data, or whether further thought is needed as to where efforts could be differently split or concentrated in future work.

6.3 Working with communities

Regarding the question of, if and, how BZB can co-produce services, the research findings have shown there to be several key considerations for BZB. BZB staff were open to exploring co-production values and as time progressed began to reflect on the reality and difficulties of achieving

co-production (Williams et al, 2020), with their approach evolving to one of 'working towards' it. It is widely recognised that the term 'co-production' is a 'buzzword' which can be overused and over-promised (Beresford et al., 2021), and BZB have over time reflected on how and when they use this word in relation to their approach to working with communities.

The current commissioning landscape, with short-term funding cycles, uncertainty of funding, and often outcome based KPIs (e.g., number of people attending BZB services), presents a challenge to BZB working towards co-production. It is important that agreed objectives are more process than outcome-based and allow scope for flex and change as BZB continue their work engaging and involving directly with people and communities. These approaches do not directly change the issue of short-term funding cycles and insecurity of funding, which were less discussed by commissioners in this research, but are a much wider and substantial challenge across public health that also require change to be conducive of co-production. However, they do increase flexibility, and thus are more conducive to working towards co-production, or public involvement and engagement more generally, than rigid KPIs that once agreed, cannot be changed or negotiated throughout the contract.

To continue working towards co-production and develop services that better suit the specific needs of people and communities, BZB will require time and resources to engage with, and embed themselves within, those communities. BZB also need to work towards greater collaboration with members of the public from the start of this process, for example through discussion of the KPIs with families to establish what a good outcome of the service would be for them. Constraints in the commissioning process make it difficult to undertake meaningful co-production (Hart, 2022), and so future research exploring this commissioning process and how this can be developed in the future in relation to co-production could be highly beneficial for both commissioners and service providers who are looking to work with communities in this way.

A larger question to arise out of this work and consideration of the BZB journey towards co-production thus far, is what BZB's role could or would be in a co-produced service, or in a wider shift towards community-led public health systems and support. The longer-term vision described in the findings of Chapter 5 frames this as BZB supporting communities to deliver services, rather than delivering the services themselves. A notion raised throughout the research was that in achieving that longer-term vision, BZB could be aiming towards '*doing themselves out of business*.' This also potentially goes beyond just one organisation and its service users, people, or communities. The co-production of services is likely to require joined-up action between councils, healthcare organisations, and other relevant stakeholders, in order to place more power in the hands of people and communities (Mathie & Cunningham, 2003) and prevent individual organisations from 're-inventing the wheel' and overburdening people and communities as a result. BZB have themselves expressed the view that they are willing to transition to a model where they share power by offering services only if invited by communities, and to innovate and adapt to the needs and requirements of the market. However, this could still be viewed as providing services 'to' rather than upholding coproduction values of working 'with' and together, with acknowledgement that sharing power 'with' communities is different to co-producing from the start. Also, recognising that the ABCD approach, which BZB are also exploring, aims to go beyond coproduction and aims to support the development of services 'by' communities, drawing on community assets (Russell, 2021). As discussed in Chapter 5, BZB note that this transition or sharing of power (Hickey et al., 2018) needs to be a slow and gradual process and, in order to have such a role, their presence in an area or community needs to be established over a much longer period of time, which circles back to the need for longer-term, more stable funding.

6.4 Equality, diversity, and inclusion

An important consideration throughout this research has been how BZB can best deliver meaningful and relevant services to diverse communities. This links to the wider context of socioeconomic deprivation and poverty, inequalities, and how weight management services more broadly fit within this context and the current economic crisis. Valuable insights have been gathered from the work BZB have done on the commissioned 2021 contracts, such as developing services that are inclusive of diverse ethnic and cultural communities (see Chapter 3, section 3.3.3). These insights have demonstrated the importance of an insight-led approach, with involvement of members of public and communities in future service development as well as being aware of wider social and socioeconomic contexts. In relation to this, and in consideration of wider determinants of health and a whole systems approach to obesity (Bagnall et al., 2019; Garside et al., 2010; Public Health England, 2019), there is also the contemplation of where weight management sits within this, and how weight as a determinant of health is positioned in relation to others such as levels of physical activity, mental health, social support, and cost of living. BZB are currently positioned as a weight management service, but these findings suggest a need to consider how this fits within a context of poverty and inequality, as well as an increasing focus on wider determinants of health and a whole systems approach to public health. Consideration also needs to be given to how wider systems and structures, including commissioning processes, can embed whole systems approaches and wider determinants of health and inequality and how the public and communities can be involved. Careful consideration is also needed in relation to the ways in which weight management services are perceived and engaged with, and how negative perceptions can be addressed.

Conclusions

The aims of this project were to explore how BZB can best engage diverse communities, how evidence and insights can shape and influence service development, and if and how BZB can co-produce their services. Across the course of the 2021/22 commissioned contracts, and through their involvement in this project, BZB have developed new understandings of the challenges and opportunities in developing their approach to working with people and communities. Through the process discussed in this report BZB recognised that co-production was, in practice, not a straightforward process or easy to define, and instead began to frame it as something to 'work towards' through an iterative and reflective process. Through this process they have achieved a more nuanced understanding of co-production, what co-production in practice might look like for them as an organisation, and the barriers and facilitators to this. They are therefore in a better position to reflect on what is needed for them to continue to develop their approach to working with people and communities in the future. Gathering insights from service users and working with communities and being open to and exploring co-production has also facilitated this learning process. The next step is to explore community involvement in the designing and development of future BZB services, allowing time to work with communities (and make use of 'insights' gathered) before shaping services together. Relating to the use of evidence and insights, whilst the collection of large amounts of data is useful, it is important to ensure that it is underpinned by effective training and support, as well as taking into account central team and service staff capacity and available resources.

7. Recommendations

Active recruitment of staff from local communities

In engaging diverse communities, actively recruiting staff from local communities appeared to be beneficial in establishing and developing relationships and trust. Engaging with existing local groups and services was also considered to be important when starting services in new areas, valued by local people, and demonstrating that their experience is valued. Further evaluation and insights data collection could explore further how these factors inform service development and delivery.

A review of training for engagement and insights officers

Recruiting staff from communities requires consideration of support and training needed to gain necessary skills and expertise, for example qualitative research skills for BZB engagement and insights officers. This review could also include consideration of the online options currently being explored by BZB, and other more informal training practices.

Additional training for service delivery staff

Service delivery staff would benefit from further training opportunities, in particular on the topics of safeguarding and EDI, particularly in relation to cultural diversity and neurodiversity.

Interactive service delivery

Service users of all ages would benefit from further opportunities for individual interaction with service delivery staff, and children and young people service users would benefit from further opportunities for interactive tasks that encourage them to put into practice the theory they have learned.

Clear establishment of the role of the insights and behavioural science team

Clear establishment of the role of the insights and behavioural science team could provide a framework for implementation of insights and learning gained in relation to service development and associated processes.

Consider the wider context of health inequalities

Service planning and delivery needs to consider the wider context of poverty, inequality, and the cost-of-living crisis.

Involving members of the public in designing services and advisory groups like the SOG

Future advisory groups, such as the SOG, should involve members of the public, and opportunities should be sought to creatively and inclusively involve service users and communities in the development, design, delivery, and evaluation of services in the future. This requires early pre-planning to ensure that members of the public are involved from the start, and prior to the point where services are commissioned.

Develop flexible approach to working with communities

BZB should look to develop flexible plans for future co-production and/or ABCD in collaboration with people and communities, taking into account their interest and availability. Commissioners should also consider how commissioning processes facilitate or create barriers to coproduction, particularly

in relation to the need for flexibility, emergent working, and outcomes which may change or emerge through the coproduction process.

Incentives and payment practice

BZB need to consider if and how they use incentives for community members and service users involved in future insights work, and payment for co-production, in line with good practice guidance (e.g. Co-production Collective, Social Care Institute for Excellence, NIHR).

Consideration of capacity in the collection of insights data

BZB should give consideration to their capacity (e.g. resources and skills) in decisions to collect, process and analyse insights data, ensuring that they are collecting a volume of data that they have the capacity to process, analyse and utilise effectively.

Time

Time is needed to establish, build, and maintain relationships, connections, and trust, and consequently, to meaningfully engage with local people and communities and work towards the co-production of services. Thus, the importance of time (before starting to deliver services) in the potential success of work such as this should be considered and reflected in policy decisions.

Commissioning of co-produced services

The commissioning of services and the implications for co-production, or working towards co-production, has been well highlighted in this research. Further research exploring the commissioning of co-produced services would be beneficial for future practice developments.

8. Appendices

Appendix A - Methodology

Initially, we were going to conduct a traditional process evaluation, but realising the complexity and flexible nature of the BZB service, and evolving discussions of the SOG identifying that 'working towards' co-production may be more achievable for BZB than 'doing' it at this stage, our approach evolved to one of an 'embedded ethnography' evaluation. This approach was deemed important to map the drivers of decision making in BZB's process of 'working towards' co-production and ensure they were driven by the needs of the people and communities BZB were delivering services for.

Ethnography aims to understand the culture of a particular pre-existing group from the perspective of the group members, lending insights into behaviours, values, and emotions (Krane & Baird, 2005), and is a process of knowing and becoming through immersed observation (Atkinson, 2012). Embedded ethnography specifically is an approach which enables which enables collaboration and interaction between researchers and those responsible for planning and delivering services, as a way of developing more effective service delivery (Ward, 2021). Lewis and Russell (2011) proposed an 'embedded' approach to ethnographic practice as a 'situationally appropriate way of 'doing ethnography' that is founded on the principles and practice of immersion fieldwork while being responsive to working with reflexive collaborators' (p.400). They suggested two key elements to this approach, the first being that the research is conducted as 'some kind of team member' with a co-presence of independence and familiarity, and the second being that the embeddedness of the researcher/s enables them to respond to collaborators and the ethnography's needs whilst also allowing them to withdraw, reflect and work from a critical distance (Lewis & Russell, 2011).

This 'embedded ethnography' approach involved four main elements, which are described below. We did use focus groups and interviews, as in a traditional process evaluation, but we wanted to see what was happening, as well as hear what people said about it, and thus took an embedded ethnographic approach that enabled us to be immersed in the culture using the additional three elements described here.

a) Participation in Strategic Oversight Group (SOG) meetings (November 2021 – July 2022)

Providing strategic advice and support for BZB's work towards co-production and insights data collection, mainly through membership of the BZB Strategic Oversight Group (SOG). The UH research team (Professor Wills, Professor Almack, Dr Mathie, Dr Brady, and Dr Newman) were invited to be a part of the SOG alongside members of BZB central team and other external partners, including representatives from FRANSES (ethical marketing agency) and Nurture Development (ABCD consultancy), and an EDI specialist appointed as a strategic advisor. Further detail of the work of these external partners with BZB is provided in Chapter 5). SOG meetings occurred online weekly from November 2021 to July 2022, including one longer meeting per month. Two or more members of the UH research team attended each week.

b) Qualitative research training for BeeZee Bodies staff (February – June 2022)

Dr Brady, the project lead, delivered three qualitative research training sessions to BZB engagement and insights officers to support and enable their qualitative data collection and analysis (details of this work in Chapter 4). The first of these training sessions provided an introduction to conducting qualitative data collection, the second introduced qualitative data analysis, and the third provided

an opportunity to reflect on BZB engagement officers' experiences of the process of doing this work, what they had learned, and any challenges they faced.

c) **Observation of BeeZee Bodies meetings** (February – June 2022)

Working with the BZB central team to identify key internal and external meetings which Dr Newman attended as a participant observer. This involved participating in the meetings, taking notes, and writing up post-meeting reflections (fieldnotes) in relation to the aims of the project, and so taking the role of 'some kind of team member', as (Lewis & Russell, 2011) proposed as a key element of embedded ethnography.

Over the course of the project, we attended 38 meetings (in addition to the SOG meetings), including internal insights planning meetings, central team update meetings, regional team meetings, staff training sessions and follow-up workshops. Observation forms the basis, or backbone, of ethnographic research (Ely et al., 1991). Ethnographers can be considered to have a dual role, as a participant in the culture, but at the same time as an ethnographic observer (Atkinson, 2012). O'Reilly (2012) posited that it is impossible for any observation in ethnography to be 'entirely non-participatory', but on the other hand 'neither can a complete participant be considered an ethnographer' (p. 110). (Seim, 2021) suggested that the terms participant observation and observant participation can be used to distinguish the extent to which a researcher is positioned as a participant or observer. In this research, the UH research team member attending the meetings aimed to fulfil dual roles of ethnographic observer and participant in the culture, enabling the co-presence of independence and familiarity that is deemed integral to the embedded ethnography approach (Lewis & Russell, 2011).

d) **Primary data collection** (June – July 2022)

Semi-structured focus groups and interviews were undertaken by Dr Newman, with support from Dr Brady, with BZB staff (central team and frontline staff, n=33), BZB service users (adults, parents and carers, children, and young people, n=23), BZB commissioners (n=4), and other organisations working with BZB (n=4).

Data collection with BZB staff consisted of five online individual interviews with members of BZB central team, four online focus groups with BZB frontline delivery staff (n=20) working on children and family weight management contracts (CFWM) across three locations, and three online focus groups/joint interviews with members of BZB engagement teams (n=8) working across two locations, primarily focusing on adult weight management (AWM). Data collection with BZB service users consisted of two online focus groups with adult service users (n=7), two in-person focus groups with parents/carers using CFWM services (n=7), and two in-person focus groups with children and young people service users (n=9). Individual interviews were conducted online with four BZB commissioners, and two individual interviews and one joint interview were conducted online with other organisations and external partners working with BZB.

These focus groups and interviews focused on the research aims outlined in the introduction of this report, and thus covered three main areas: expectations vs. reality of service delivery, evidence and impact, and working towards co-production. The questions asked within each of these three sections were adapted as relevant for BZB central team, BZB delivery and engagement staff, BZB service users, commissioners, and other external partners. Examples of some of the questions asked are included here:

- **Expectations vs. reality of service delivery** – e.g., what were your initial thoughts and expectations about BZB and their services? What has been your experience of BZB services/working with BZB/delivering BZB services/commissioning BZB services?

- **Evidence and impact** – e.g., what did you/do you want to get from using this BZB service? What have you learned from the people/families you have been working with? What insights are you collecting from BZB service users? In relation to these insights/learnings, how would you like to see BZB services develop in the future?

- **Working towards co-production** – e.g., what is your understanding of co-production? How realistic or feasible does that sound for BZB? What would a co-produced BZB service look like to you? What challenges might there be?

Primary data collection received ethical approval from the UH Health, Science, Engineering & Technology Ethics Committee with Delegated Authority. The UH protocol number is HSK/SF/UH/04976.

Data analysis

Qualitative data from all the elements above included transcripts of focus groups and interviews, observation notes from BZB meetings, and fieldnotes from SOG meetings, qualitative research training, and meetings between UH and BZB.

The data was analysed using a reflexive thematic analysis approach to develop, analyse, and interpret themes and patterns of meaning in relation to the research questions (Braun & Clarke, 2021). There are different forms of thematic analysis, which vary in the following ways: the role coding plays within the analytic process, how themes are conceptualised (as a pattern of shared meaning unified by a central idea, or a 'topic summary'), the extent to which researcher subjectivity is recognised and valued or managed as a risk, and the process for analysis, such as whether themes are analytic 'inputs' or 'outputs' (Braun & Clarke, 2021). Reflexive thematic analysis is an approach which views the researcher as a resource to be utilised and as both active and positioned, with coding being an organic and evolving process of noticing potentially relevant meaning in the dataset, and themes conceptualised as patterned meaning across the dataset, united by a shared idea or concept and actively generated by the researcher (Braun & Clarke, 2021).

NVivo qualitative analysis software was used to systematically code and develop themes, which were then refined and redefined during the analysis process. The data coding, initial theme generation, and theme development and review phases of the analysis process (Braun & Clarke, 2021) were conducted by two members of the UH research team. These themes were then presented to the SOG, including the wider research team, for input and feedback, before being refined and redefined.

Appendix B – Summary of BZB services

Summary of areas and services BZB delivered services from the OHID funding, commissioned in 2021:

	BeeZee Families (F2F)	BeeZee Live	BeeZee Lite	BeeZee Academy	Adult disabilities	NCMP	Co-production/ insights reports
BIRMINGHAM CITY COUNCIL *CFWM and disabilities*	✓	✓	✓	✓	*Physical Impairment* *Learning Disability* *Visual impairment*	✓	✓
X4 LONDON BOROUGHS Waltham Forest, Enfield, Hounslow, Brent *CFWM*	✓	✓	✓	✓		✓	✓
BRENT *AWM*		✓	✓				✓
BRISTOL CITY COUNCIL *AWM*		✓	✓				✓

Summary of session content and format:

All BZB programmes and sessions are underpinned by behavioural science and empirically validated theories (some of those were shared in Chapter 1, Introduction) and are designed around specific topics that work around everyday life. This includes elements of nutritional information and behaviour change applied to everyday examples and the experiences of the families in our programmes. In addition, our face-to-face programmes also include a physical activity element. This has the primary aim of tying up the informational aspect with a more practical element to motivate people to be active and try different activities in a safe and encouraging environment.

Links for more information about the services:

<u>AWM services</u>

- BeeZee Live Adults: https://beezeebodies.com/programs/beezee-live/

- BeeZee Lite Adults: https://beezeebodies.com/programs/beezee-lite-for-adults/

- Disabilities (Birmingham)

  - https://beezeebodies.com/programs/visual-impairments/

  - https://beezeebodies.com/programs/physical-impairments/

  - https://beezeebodies.com/programs/learning-disabilities/

<u>CFWM services</u>

- BeeZee Families: https://beezeebodies.com/for-families/

- BeeZee Live Families: https://beezeebodies.com/programs/families-live/

- BeeZee Lite Families: https://beezeebodies.com/programs/beezee-lite-families/

- BeeZee Academy Families: https://beezeebodies.com/programs/families-academy/

<u>Co-production/insights work:</u>

- https://beezeebodies.com/programs/beezee-bodies-black-british/

- https://beezeebodies.com/programs/beezee-bodies-south-asian/

Abbreviations

AWM, Adult Weight Management; CFWM, Child & Family Weight Management; F2F, face-to-face; NCMP, National Child Measurement Programme

Appendix C – References

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