BAVO











Report of the Most Significant Change inquiry into the Bridgend Community Navigator Service

“We need fun and enjoyment in our lives as well. We don’t just want to exist.”

Russell Todd **Dave Horton**

GROW SOCIAL CAPITAL

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Cwm Taf Morgannwg Partneriaeth Rhanbarthol | Regional Partnership

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1. Foreword

A message from our CEO:
Heidi Bennett, MBA, Chartered MCIPD



This report gives us a powerful opportunity to reflect on what the Community Navigator service means in practice, not simply in terms of activity or outputs, but in terms of the difference it makes to people's lives. The 'Most Significant Change' process has shown that the greatest value of the service lies in relationships: Navigators build trust, understand the whole person and connect people to the right combination of community, voluntary and / or statutory support. The stories demonstrate how this relational approach can help people move from isolation and hopelessness towards confidence, purpose, belonging and renewed connection. They also show that the Navigator role is much more than signposting; it is about walking alongside people, sometimes for longer than anticipated, and helping them take steps towards greater independence.

For me, the most significant change highlighted by this research is the recognition that effective prevention depends on the strength of the community around people. Navigators can only do their best work when there are trusted relationships, resilient community organisations and accessible spaces and activities to which people can be connected. The report therefore challenges us to think beyond individual services and organisational boundaries, and to consider how we sustain and replenish the community infrastructure on which social prescribing depends. It also asks us to listen differently: to value people's lived experience and stories alongside quantitative measures, and to close the loop between evidence, commissioning and service improvement.

BAVO, will use these findings not only to celebrate what is working, but to strengthen the partnerships, community capacity and ways of working that will make this impact sustainable.

Forward from the Regional Partnership Board Chair:
Cllr Jane Gebbie, Deputy Leader of Bridgend County Borough Council and Chair of the Cwm Taf Morgannwg Regional Partnership Board.



"I think it's really important that we have those with lived experience and those working in the field to give us the best opportunities to examine and scrutinise the decisions that we are making for Bridgend.

I am an advocate for community services being available where you live, and I am really interested to understand the lived experience of those accessing any of those services.

But what I am really interested to know is what barriers did they face? What worked really well for them? And what is it that we could do better?

Is it the places that we use for delivery? Are these where you live? Is it the service provision that you want but which you are not able to use? Or is it that the communications about these services are not readily accessible?

I really appreciate all those who were willing to be panel members and I'm looking forward to reviewing the MSC panel discussion so we can evaluate all the work that we're doing and make sure it is the best provision for you all. "

2. Acknowledgements

The authors would like to thank:

For her advice and practical help, Gail Devine.

For giving of their time and enthusiasm, the Community Navigators team at BAVO.

For providing the foreword to this report and being such a keen advocate for Most Significant Change, Cllr Jane Gebbie.

All who gave of their time to attend the panel.

3. Who are Grow Social Capital?

> "The individual is helpless socially if left to himself"
>
> — Lyda Hanifan, 1916

Established in 2020, Grow Social Capital is a Community Interest Company that works to raise understanding of the importance of Social Capital in:

- Public policy
- Bringing about positive social and economic change
- Creating more resilient, capable and confident communities, organisations and workplaces
- Tackling the growth of 'UnSocial Capital': the changing levels of Social Capital that are leading to growing distrust, division and tribalism in society.

For all its horrors and the existential anxiety it imposed, the COVID-19 pandemic did at least remind many of us of the importance of neighbourliness, our local *milltir sgwâr*, reciprocity, and slowing down. A silver lining to a dark cloud.

We do this by bringing together our directors' expertise in community development, participation, and transformative communications, who all share a passion for social capital theory. Examples of our work can be found in Appendix 1.

For this work, Dave Horton joined the team on an associate basis. Grow Social Capital acknowledges the influence that Dave has had through his work with Action in Caerau and Ely (ACE) in bringing MSC to our attention.

4. Summary of main findings

> "No-one educates anyone else nor do we educate ourselves. We educate one another in communion in the context of living in this world"
>
> — Paulo Freire

This MSC inquiry has identified these main findings, some of which raise some forward-facing questions of the Navigator team, BAVO and its partners.

- Navigators and brokers, grounded in trusting relationships, form a 'glue' between services, individuals, community groups, and communities.

- Holistic, flexible, relational support – including fun and joy – enable people to move from isolation, trauma and hopelessness towards a renewed sense of identity, purpose and connection.

- As well as having a demonstrable impact on health outcomes, Navigators can help people re-discover meaning, purpose and joy in their lives.

- Many of the stories of change demonstrate a significant 'ripple effect' through the lives and networks of the individuals supported by Navigators.

- Navigators are constantly scanning to remain alert to social prescription opportunities and act as 'living directories' through whom information is disseminated and can be relied upon to reach - with a high degree of accuracy - those people who can benefit the most from it.

- Community-led spaces are crucial but fragile. Sustaining them is both a moral and financial imperative.

- Community capacity is finite. There is real risk that statutory services draw on community capacity without helping replenish it.

- Navigators remain cognisant of, and sympathetic to, the complexities of people's lives and circumstances, in contrast to services that can sometimes confine themselves to disciplinary or organisational boundaries rather than be holistic.

- There is seldom a discrete start and finish to working with an individual; 'scaffolding' is not erected at the start and then dismantled at some notional end. Navigators are constantly reconfiguring the scaffolding around an individual as the relationship evolves and develops.

- A Navigator is constantly varying the extent to which they are directive and non-directive with an individual. This is informed largely by their own judgement and experience, the relationship with said individual, and the wider team's culture of support.
- Navigators are a key element in reducing fragmentation and its associated costs through 'untangling' knotty issues people face and spotting the risk of falling through 'cracks' in the system.
- There remains a pressing need to 'close the loop' between the Navigators and commissioners around the effectiveness of the service. There is also an opportunity here for this to be co-productively informed by the material experiences of the individuals who access the service.
- There is a consensus that Most Significant Change is a useful qualitative methodology for measuring impact and should be incorporated into evaluation and quality improvement frameworks.

4.1. Summary of forward-facing questions

- Recognizing that prevention starts in the community, how might funding be moved from traditional top-down services to community spaces?
- Can we be confident that our social prescribing processes replenish community provision and do not exhaust it?
- How is trust maintained over time? What risks might we face that trust is eroded?
- How do we recognise who holds those trusting relationships within communities and organisations?
- How might we better join up different offers and services, moving beyond organisational boundaries to create a wider community network that complements each other?
- How can the team maintain its brokerage role effectively?
- Are the Navigators playing to their diverse strengths and interests to the fullest extent?
- How can the team continue to effectively 'scan' for new opportunities?

5. Background

> "You're never going to kill storytelling, because it's built into the human plan. We come with it"
>
> — Margaret Atwood

In recent years, BAVO has collected almost thirty stories of change from people whom the Navigators have supported. Though several had been adapted into case studies and provide a rich and nuanced insight into the work of the Navigators and their impact, the stories had never been taken to an MSC panel for further exploration.

As well as a good understanding of how to approach the story collection process - including using a dedicated *pro forma* for Navigators to use - there is a strong understanding within the Navigator team of the ethical dimension to MSC.

Navigators have tended to craft their MSC stories from notes they take when interviewing their clients rather than record and transcribe them. There has also not been a consistent approach to editing stories.

5.1. Community Navigators

At its core, Community Navigators help people stay independent, connected, and living in their own communities. They support individuals across Bridgend county borough - as well as their families and carers - to access local services, information, and activities.

By linking people with the right support early on, Navigators aim to prevent issues from escalating and reduce the need for more intensive support from health or social care.

The service is funded by the Welsh Government's Health and Social Care Regional Integration Fund and delivered in partnership with Cwm Taf Morgannwg Regional Partnership and Bridgend County Borough Council's Resilient Connected Communities Programme. Navigators also support What Matters social care conversations.

Within the Navigator team is a dedicated Brokerage Officer whose role it is to work closely with colleagues in the Early Intervention and Prevention Hub (the 'front door' of social care) to support and broker information to individuals and their families that helps them identify and access the most appropriate community-based support. A key outcome for the role is to reduce social isolation and support individuals to live independently for as long as possible.

5.2. Training Navigators in MSC

In addition to this inquiry, Navigators have been trained in MSC covering:

- Origin and principles of MSC
- What MSC *is* and *isn't* good for
- Ethics and consent of storytelling
- How to collect stories of change
- Preparing and holding an MSC panel

Together with the Navigators, the authors compiled a shortlist of the stories of change that had been collected and these were taken to a 'demonstration' panel comprising the Navigators to help them gain insight into the format and dynamics of a panel.

Navigators also mapped the monitoring and evaluation methods they either use or have used on a matrix, on the basis of whether they are more qualitative or quantitative in focus, and provide a breadth versus depth of analysis (*below*).



It is agreed that missing from Navigators' evaluation 'toolbox' is a qualitative method that provides analytical depth. MSC could be the method that plugs this gap.

6. What is Most Significant Change?

> "I do not want the peace which passeth understanding. I want the understanding which bringeth peace"
>
> — Helen Keller

Most Significant Change (MSC) is a qualitative method based on storytelling. It was devised by Rick Davies in the early 2000s to meet some of the challenges he encountered in monitoring and evaluating a complex participatory rural development programme in rural Bangladesh.

Davies dismissed the idea of getting everyone to agree on a set of indicators as there was too much diversity and many conflicting views. Instead, he devised an evaluation method based on people, first, retelling the stories of significant change they had witnessed as a result of the project; and second, explaining why they thought their story was significant, recognising that people learn best when they talk and think collectively through democratic dialogue. MSC provides some information about impact, including unintended impact, because it is primarily about clarifying the values held by different stakeholders.

Stories of Change are taken to a Panel which ideally comprises people from different organisations, with different roles and different perspectives on the subject matter at hand. They do not all need to be 'experts', but they should, in the main, have an understanding of and insights on that which a project/programme is addressing.

MSC does not generate any numerical or quantitative data. The stories themselves are extremely difficult to quantify. Because only a small number of stories are ever taken to panel one should be cautious about using them as *proof* of something definitive. This is where other methods can sometimes be necessary.

MSC is excellent though in identifying where change has happened and revealing an area that perhaps requires further attention or research. It is a very person-centered method. It privileges the perspective of a service user and allows for a deep exploration of their views, opinions and experiences. Often, those telling their stories have experience of not being heard or being ignored.

Grow Social Capital has used MSC in many evaluations of projects and programmes. In his capacity as a former director of Action in Caerau and Ely (ACE), Dave Horton was one of Wales's earliest adopters of MSC using it to not only evaluate ACE's work but to anchor its

annual impact reporting.

7. The inquiry

> "Vulnerability is the birthplace of innovation, creativity and change"
>
> — Brené Brown

For a formal MSC panel, Navigators chose six of the stories that had been previously collected and supplemented them with new stories collected by Navigators during May. In order to provide this process with greater focus the Navigators were invited to consider the parameters and domains that they wanted the remainder of the MSC inquiry to have (usually these are set at the outset of an inquiry). The chosen parameters are:

- Including older stories where there is a continuation of involvement
- New stories from individuals who have continued on a journey and are still engaged

Navigators were also invited to consider whether there were any under-represented groups within the cohort of storytellers whose stories they already had; and/or whether they wanted to target any specific groups for the new stories. Priority groups identified were:

- People with mental health challenges
- Carers
- LGBTQ+ people
- People with a disability
- Younger people
- Older isolated people
- Older men

7.1. The MSC Panel

The panel was held at West Ward Community Centre in Bridgend on Thursday 18 June 2026. Unfortunately Cllr. Jane Gebbie, Deputy Leader of Bridgend CBC and Chair of the Regional Partnership, was unable to attend the panel. Instead, the authors held an online mini panel with Jane a couple of weeks later.

Names have been redacted to preserve anonymity but we include the organisation and/or role in whose capacity they attended the panel.

#	Role / Organisation	#	Role / Organisation
1	General Practitioner	7	Transformation, Regional Partnership, CTMUHB
2	Local leisure provider	8	Regional Partnership, CTMUHB
3	Local Community Coordinator, BCBC	9	CEO of local arts charity
4	Early Help, BCBC	10, 11	Navigator, BAVO x 2
5	Mental Health Matters	12, 13	Member of Squirrel's Nest x 2
6	Strategic and Operational Planning, Cwm Taf Morgannwg University Health Board		

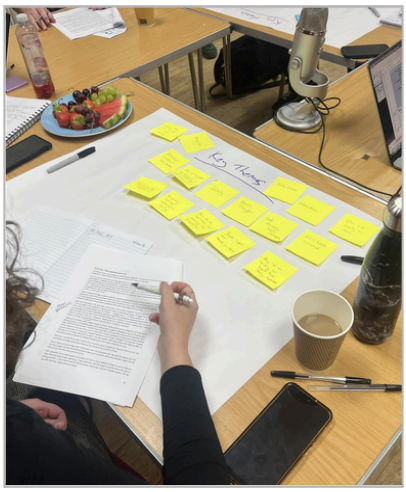
Attendees were split into two groups who each ran a panel facilitated by the authors. After listening to each story, the following open questions kickstarted conversations which were able to freely meander thereafter:



- What have you learned from the story?
- How did it make you feel?
- What insights have you gained?

At the end of the discussions, each panel prioritised the key themes that had emerged.





Both groups reconvened for a shared review and reflections exercise. All discussionswere recorded to aid transcription and a thematic analysis (see section 8).

7.2. Prioritisation exercise

In the final exercise, the themes that emerged from the panel discussions were distributed on the floor (*see below*) and panellists were invited to stand next to the one that they felt was the *key* theme to have emerged for them.

Where people clustered around a particular theme, they were invited to discuss their reasons for standing where they were. They were then asked to stand next to a secondary key theme and to repeat the exercise with the others who clustered with them.

The principal themes to emerge are:

1. **Sustaining community-led activities and infrastructure**
2. **The central role of trust and trusted relationships in the Navigator service**
3. **People need more than one thing: holistic, multi-faceted support**
4. **The role of brokerage and acting as a 'living directory'**

These key, and several secondary, themes are explored further in the next section.







8. Thematic Analysis

> "We need to stop pulling people out of the river. We need to go upstream and find out why they're falling in"
>
> — Archbishop Desmond Tutu

This section summarises the thematic analysis of the the four main methods:

- The stories of change taken to panel
- MSC Panel discussions
- 'Demonstration' panel held as part of the initial training
- The mini panel that was held with Cllr. Jane Gebbie

There are **ten** themes to emerge, four of which are elevated to ***key themes*** based on a level of priority ascribed by panellists (8.1-8.4 below). To help the Navigators team and partners to further explore these key themes we list the forward-facing questions that have emerged from the inquiry.

The secondary themes follow from 8.5. A number of quotes from panellists and stories of change are included to illustrate the themes and to give a flavour of the discussions.

We have permission from all the storytellers except one to share their stories and so where quotes are taken from these the storyteller's name is cited, e.g., Josh, Nicola. The one storyteller who chose to remain anonymous is referred to as 'Anon'.

8.1. Sustaining community-led activities and infrastructure: 're-weaving' social fabric and the importance of social infrastructure

Isolation, often long-term and severe, was a starting point in many discussions. Time and again, panels recognised the health risk posed by isolation. This is borne out in recent research published by Public Health Wales (PHW) in which loneliness and social isolation are estimated to increase the risk of all-cause mortality by 14% (loneliness) and 32% (social isolation)[1]; and a decline in physical, mental and cognitive health conditions including cardiovascular disease, type 2 diabetes, depression, anxiety and dementia[2].

> "Isolation reduces life expectancy. [Her] sense of purpose now has brought her out of her shell. You get public health benefits for getting these people from isolation out into the community. This sort of service does [that] in spades."

[1] Ward, S., Dale, C., Hughes, K. (2026) *Loneliness, social isolation and social connection in Wales: A public health perspective*, Public Health Wales: Cardiff.

[2] ibid.

In this respect, Navigators' reliance on community groups and the activities they host in community venues - what Ray Oldenburg calls "third places"[3] - can be seen as 'prevention infrastructure.'

> "We talk about preventing things from happening [but] prevention starts in the community. This is where the first line of prevention starts."

However, there was a shared concern about the fragility of third spaces and opportunities for people to freely associate in them through the risk of closure, centralisation in town centre locations, or privatisation (e.g., member-only, fees levied for access, or sold-off). Indeed, it was noted that the venue in which the panel was taking place, West Ward Community Centre, had been rescued from closure by a new board.

> "Years and years ago, you'd have had the socialization, all the clubs…we've lost all that social [infra]structure, and this is one way of trying to bring that back in."

> "We've got the Navigators but without this [community provision], the Navigator can't fully function properly. This is kind of the bedrock…the foundation for everything else that happens."

There is a strong call to invest - via grants, full cost recovery for hire and use, in kind support - in the community organisations and third places that are underpinning social prescription activities. Otherwise, there is the risk that the statutory sector extracts resource and capacity from communities. In the field of community social work the Community-Enhanced Social Prescribing model is worth exploring as a way of minimising this[4] [5].

> "That's the irony of the Welsh Government's social prescribing policy…there's no funding to sustain the things in communities that actually [receive the referrals]."

> "All our community organisations are really very good at hosting statutory functions [yet] I'm still to see where they're paying them for the use of this. It costs them money. If we want them to input into the regional partnership…we need to support their strategic functioning because otherwise they cannot do that."

---

[3] Oldenburg, R. (1989) *The Great Good Place: Cafés, coffee shops, bookstores, bars, hair salons, and other hangouts at the heart of a community*. Marlowe & Company: New York.

For Oldenburg, first places are the home, and second places are places of work and employment. With the rise of remote and home working, in particular since the COVID-19 pandemic, the lines between first and second places have blurred and increased isolation (see Williams, M. (2023) Beyond home and work: the value of third places, Modus, RICS).

[4] Morris, D., Thomas, P., Ridley, J., Webber, M. (2020) Community-Enhanced Social Prescribing: Integrating Community in Policy and Practice, *International Journal of Community Well-Being*, 5:179-195.

[5] One of the authors of the above paper, Martin Webber, discusses Community-Enhanced Social Prescribing on episode 32 of The Community Development Podcast.

> "Our community spaces and places and activities have been utterly diminished, and it's affected our most disadvantaged communities the worst."

On the continuity of community offers being crucial:

> "It kind of comes through…that people are able to access things…where they're continuous and that community is where their resources are…otherwise it gives them a false thing…they've built here but then it's going to close."

> "There is an expectation that the CVCs all just give up their time for all this strategic visioning. We need to be paying them for that time, otherwise they cannot do that."

Squirrels' Nest cropped up several times in discussions as an important example of a space where people could drop in as often as they liked with little expectation on them to take a lead or to conform to certain behaviours; people could be themselves. In large part this is because its founders have been through similar situations and experiences in their own lives.

> "We've found that when people come to Squirrels Nest, they sort of go through the same emotions as everybody else has been. Maybe not of the same order [but] you can read which part of the emotion they're going through."

> "We've been through it before, we've got the idea. We can tell the moment someone comes in here."

These organisations provide ongoing, non-time-limited support and they offer routine, structure and a sense of "family." Lastly, the most obvious impact of 're-weaving' relationships was within individuals' immediate families and personal networks. This was noted as a ripple effect, something that another panellist remarked that her organisation had measured via ripple effect mapping[6]. Such ripples were observed in Mo and Keyleigh's stories:

> "[Mo had] gone from someone who'd [needed] support to actually providing support to others…that's been the main reason why we chose this one…fundamental changes in their confidence, identity, hope, and the connections with others."

Kayleigh openly admitted in her story that her father's situation was affecting her life:

> "My father lives alone and is a stubborn man. I'm very supportive but I work long hours in a hospital and have other commitments. I was working 12-hour shifts in

[6] Ripple Effect Mapping (REM) is a participatory qualitative method that captures the wider (intended and unintended) impacts of a project or programme by inviting people who have been involved in/affected by a project or programme to visually map what they have done and the impacts to date. See National Institute for Health and Care Research (2022).

hospital. In addition, I was studying for a University degree and living with my mother who is not very well. I was desperate for some further support."

On the "knock-on effect" appearing across stories:

> "That's the knock-on effect, it's that added value over and above the expected…The secondary value is huge."

Forward-facing questions

Recognizing that prevention starts in the community, how might funding be moved from traditional top-down services to community spaces?

Can we be confident that our social prescribing processes replenish community provision and do not exhaust it?

8.2. The central role of trust and trusted relationships

Across the evidence, trust was repeatedly identified as the foundation. Navigators are trusted *people* rather than seen as a trusted *service*.

It is this trust that makes it possible for individuals to disclose deeply personal issues (e.g., eating disorders, long-term trauma) and to step outside their comfort zone and try new things. Trust is needed before anything else can work:

> "We all had a general consensus: without trust you don't really go very far with anybody; without it, we don't really get to any of the other places. So that's kind of fundamental."

> "I've learned that Georgina made a quite profound, strong relationship because eating disorders are very secretive; [they] very rarely come out until it's quite late. That's a massive achievement and testament to the relationship that she has with Georgina."

Trust extends beyond the Navigator and into the community settings where groups operate. Service users are trusting of a great many of these groups in part because the navigators have developed relationships with groups over time (there is more on this brokerage role in 8.4).

"It's about not just trust with perhaps the navigator, but where they go, how they develop that. So it's not just building trust with the individual…it's building trust with all the other organisations that are in the community, so you know where you're going is the right place for that person."

"It's having [the individual's] ability to trust that person [Navigator] to take their life with them."

An example of the trust that exists is in Nicola's story where, after a break in engagement with the Navigators, they were 'front of mind' when she felt she was returning to a crisis point:

"I like that [Nicola] knew when things were getting bad before and she's 'Right, Georgina!' She knew that she could find Georgina…She thought 'Georgina helped before. It's got bad again, she can help me again.'"

"Even though you didn't have to signpost her anywhere, what you've already done is signpost her back to you if it does change. She's in a holding pattern at the minute. If it doesn't work, she can come back to you and you can explore it again."

Forward-facing questions

How is trust maintained over time? What risks might we face that trust is eroded?

How do we recognise who holds those trusting relationships within communities and organisations?

8.3. People need more than one thing: holistic, multi-faceted support

A recurring theme in both panels was that people rarely have a **single, discrete need**. Instead:

- Needs are multi-layered and co-occurring (e.g., grief, isolation, addiction, physical health, housing, benefits, neurodiversity, identity, etc.)
- Effective support requires **holistic approaches**, addressing both mental and physical health, and social needs
- Change often arises from a combination of interventions and opportunities (counselling + arts + peer groups + practical support), not a single intervention

- Successful support requires attention to a person's whole life – including family, identity, interests, trauma, practical issues.

Multiple "touch points" are required between Navigators and an individual because of the rich complexity of people's lives. As Antonia Darder states, we don't live single issue lives but if people are treated as doing so, we risk promoting a corrosive 'politics of disconnection'[7]. Indeed, this is not just about the individuals who access the service; the Navigators all have different interests and backgrounds and bring nuance and diversity to their roles:

> "We may not be living where we grew up. We've got different interests. There can be a number of touch points with individuals because of that complexity."

> "I allocated [Josh] to myself because of our joint passion for the outdoors. That's what I do when I allocate to different navigators: we navigate to our strengths."

There was a recognition that mental and physical health are linked but there is still a tendency for support to be fragmented, staying true to sectoral or organisational boundaries and disciplines. Several stories demonstrated how this can lead to a nexus of services gathering around an individual.

> "You can't isolate mental health from physical health. Trauma has meant that it's probably re-initiated an eating disorder…we will treat those things as something completely separate…the crisis would probably not have been the mental health crisis. Probably would have been the physical crisis…collapse, malnutrition."

> "There's the community mental health team, Headway, Gail, BAVO, the Alpacas, Bryngarw [Country Park]…it's the combination of all of that that's got him to the end where we're all like 'yeah, go on Josh!'. If he'd just done the Alpacas would we be feeling all of that? I don't think we would."

> "You can't always treat just one thing, everything has to be treated together, and it's relational in how we do that."

> "She's having the medication and she's having the sort of community support…it's being treated in multiple ways, which is good for long-term outcomes."

One panellist had a vivid metaphor for the need to blend approaches for the benefit of an individual:

> "We need to be a soup and not a fruit salad. This shows that at the end of the day everybody goes in as their own little individual [organisation] but a person is holistic

[7] Darder, A. (2026) *Community Development in the Midst of Global Crisis: Challenges and Transformations,* keynote lecture, World Community Development Conference, Glasgow, 30 June.

and we need to *blend* that so we don't need to be all different individual people in that bowl."

Forward-facing questions

How might we better join up different offers and services, moving beyond organisational boundaries to create a wider community network that complements each other?

8.4. The role of brokerage: Navigators as 'living directories'

Panelists highlighted a distinct but related function: **brokerage**. Brokers (e.g. Tom) and Navigators hold up-to-date, 'live' knowledge of what is available. They act as 'living directories' for individuals, continuously scanning not only what is available but also the 'horizon' for what is potentially available in the near future.

> "We call ourselves living directories now…Tom's very good at finding new stuff."

> "It highlights the importance of knowledge of local services…because you look in directories and online, a lot of it's out of date…being up to date with current circumstances."

Moreover, the Navigators role serves as a hub around the individual with spokes that reach out to community organisations and activities. As they scan what is out there and network across and between sectors and organisations, they act as effective conduits through whom information about community activities reaches people who, by virtue of their circumstances (social isolation, mental health, substance abuse, trauma), may not otherwise receive it and be in a position to act on it (helping people "see the wood for the trees"). It is relational and, as has been pointed out, is based on trust.

> "What has been prioritised here is the role of brokerage…almost being like a bit of a hub with lots of these spokes going out from around that relationship upon which there is a lot of trust based."

> "We've commented on how many times they've supported someone and act as a kind of bridge to community services, but this [story] is also that bridge to statutory services. So it's not just one way; it's whatever support is required."

Forward-facing questions

How can the team maintain its brokerage role effectively?

Are the Navigators playing to their diverse strengths and interests to the fullest extent?

How can the team continue to effectively 'scan' for new opportunities?

8.5. The Navigator role: more than signposting

Panellists consistently challenged the idea of navigators as simple 'signposters'. The stories showed navigators to be:

- Investing in long-term, relational work
- Providing practical help (e.g., forms, benefits, transport, council tax, etc.)
- Acting as advocates and brokers into statutory and community services
- Being persistent and flexible in time and approach
- Patient
- Required to exercise their judgement about when to step in or step back. In community work practice this is described as being directive and non-directive[8]. They are not binary opposites. Rather the actions that Navigators decide upon lie on a spectrum of *directiveness*.

The panels repeatedly described this as a multi-dimensional, relational role, not an administrative function. The Navigator's work often prevents escalation to acute or crisis services, though this prevention is hard to measure.

> "I think sometimes people think of navigators as being kind of signposters [but] I think it's a lot more than that…it's the investment in a relationship with somebody."

> "When she's talking about him going in the car with her, that's not something you would necessarily think that someone would support you to do…[it's] more like added value; they're giving beyond what your expectations are."

[8] Twelvetrees, A., Todd, R. (2024) *Community Development, Social Action and Social Planning: A Practical Guide*, (sixth edition). Policy Press: Bristol.

> "Advocacy. I think that's really important…I think in all of these stories [there's a theme of advocacy]. Helping the people to be able to take control of their life and just to look on it as a holistic thing."

Because of the need for discretion and to maintain an individual's dignity, Navigators work with quiet diligence in between sectors and organisations; their role is not 'showy'. There was concern that this lack of visibility to the Navigator role might undermine appreciation of it:

> "This is far more than signposting…from a visibility point of view to wider services. It is really how do you visibly portray your role and the impact and the meaning of your role?"

An underlying principle to this entire inquiry was the feeling that the data and monitoring supplied by Navigators to commissioners misses or obfuscates some of the more impactful aspects of their role. Navigators occasionally send case studies to accompany their quantitative reports but one of the panellists admitted that they do not ascribe the same importance to these as the reports (this is explored more in 8.10):

> "They provide the data to us and we look at the numbers…but it's how we can get better at understanding and evidencing the bigger impact; the changes that [Navigators] have helped happen."

8.6. Self-discovery, identity, purpose, and belonging

Several stories (notably Mo, Josh, Kate) show people finding:

- A renewed sense of self ("Who's me?" asks Mo)
- Purpose – often in caring for others, volunteering, or creative practice
- A sense of belonging in community spaces (Squirrels' Nest, ARC art groups, at Parc Bryngarw)
- New language – "hope", "peace", "joy" – that had not been part of their experience (in the case of some storytellers, for a long time)

This 'identity rebuild' was seen as central to sustainable change. Mo's story talks about self-discovery and belonging; while Josh also expresses a desire to find himself a new purpose as part of his recovery.

> "How to learn to be Muriel. I haven't got to be a mum, a grandmother, an ex-wife. All of a sudden it's 'Who's me?' I'm on a learning process which I've never been allowed before."
>
> Mo's story

> "I just fit. I never ever thought I would fit anywhere in my life, but I fit here."

Mo's story "[Josh] almost reflects and goes, 'Mine's not so bad', and I think that's amazing... 'I want to get back on the farm, I want to get back working.'...'I recognise I've got limitations, but it's possible.'"

On Mo's journey from victimhood to carer one panellist remarked:

"All she's been through. She didn't even know who she was in her 50s, and to turn that around and turn [her] into a carer I think is amazing. She's gone full circle."

"Rather than being a victim…she's talking about there's other people worse off. Now that's powerful…that mindset change is huge…It can perhaps prevent them going back into alcoholism."

Remarking on one of the community activities that one storyteller had accessed, enjoyed and was now independently making their own way to each week, one panellist recognised the sense of belonging it brings:

"It is like another family, isn't it?"

On Kate's shift from isolation to confidence:

"The first half of the story was very much 'I'm very depressed,' but by the end of the story it was going over and over again about how confident she was feeling. It became a lot more based on those positives."

"It sounds like [Kate]'s been on a self-discovery journey; understanding her own ADHD then probably has put a lot into perspective."

8.7. Striking a balance between being directive and non-directive: the need for flexibility

Although each individual's story is unique to them, collectively the MSC stories provide an insight into the general sequence of a Navigator engaging a new person accessing their service. Four main elements emerge:

- Starting where the person is, e.g., a home visit. Described as meeting people "on their own turf"
- Accompanying people to first sessions ("hand-holding"), including travelling with them to an activity
- Stepping back gradually to build independence and confidence
- Keeping in touch with people even when the Navigator has stepped back and is providing, if any, limited support

It is reasonable to assume that for many people their home is a safe space where they feel comfortable, feelings that are key in them speaking frankly and honestly and being able to disclose to Navigators the intimate elements of their situation.

> "From this story [Anon], it highlights the importance of home visiting [which] gave the client the opportunity to open up. Being on their own turf…that's huge."

However, Mo's story refers to domestic abuse and for individuals experiencing this, public and/or community spaces can be incredibly useful as the location for early contacts. A small, but critical aspect of the Navigators' constant scanning for community activities is knowledge of such spaces for people for whom the home is *not* a safe space.

Navigators often accompany people on their first visit(s) to a group or activity. This 'hand-holding' is regarded highly by many people accessing the Navigator service and panellists noted its recurrence:

> "In all three of those stories, there is that hand-holding that is happening for a short period or a longer period, but it's echoed through each story, isn't it?"

> "Sometimes when you want to build resilience in someone, you have to hold their hand… She said she wouldn't have gone to these things if Georgina hadn't gone with her the first few times."

> "[Gail] picked me up to start off and then on the bus. We went on the bus together, to know the way to get down there. Fair play, Gail messaged me on the phone to remember what bus to catch. So now I look on my phone every time for the message so I remember. It's there on my phone to remind me where I'm going first."
>
> Josh's story

> "After I met Julia, she took me along to a social group in Bridgend. And it was strange in the beginning, you know, with everybody looking at you but it was so nice having Julia with me, especially the first time, very much so."
>
> May's story

An underlying principle of the Navigator role is to not create dependence. A balance must be struck between doing things *with* people rather than *for* them. The balance to strike is different from case to case, depending on people's circumstances, and informed by the challenges they face. Panellists recognised the delicateness of finding such a balance and that it takes time to discover.

> "There's this thing of being proactive on behalf and with someone. [Of] having the knack of taking them with you, but encouraging them to act for themselves. That's a difficult balance to strike."

> And you can see the steps and the story as to how BAVO has supported him in building that…They've set up a strategy almost for him to be able to be independent within that space. And then so much more comes out of that."

Panellists advised caution in equating longer contact with a service user with dependency. Furthermore, stepping away from an individual so that they begin to stand once more on their own feet can be a slow process. Neither is it necessarily linear. It can be stop-start whereby a Navigator begins the process of stepping back but external factors or set-backs in an individual's life require the Navigator to resume being more directive. Flexibility is key. In the Anonymous story panellists noted:

> "At the start [they were] originally having counselling and then the funding stopped. I just think that's such a shame [but] that's how we design our services, isn't it? Time limited."

> "I think your point about rigid treatment or rigid working times is good. You need flexibility. Some people will get wrapped up in a couple of weeks, but others won't."

> "That approach of a short-term intervention is justified by this idea that anything more and you're making people dependent. We need to say that's not what we're talking about. [Amy's story] is a really good example of an approach that doesn't make someone dependent. It gives them the time to become *in*dependent."

> "Even though you didn't have to signpost her anywhere, all you've already done is signpost her back to you if it does change. She's in a holding pattern at the minute. If it doesn't work, she can come back to you and you can explore it again."

The authors would caution here against the impression of binary, opposite states of either dependence or independence. There is evidence in the community sector in Wales that resilience, i.e., the individual and collective ability to return to a previous state of wellbeing after a shock, is underpinned by *inter*-dependence[9] [10].

8.8. Cost of fragmentation

Several stories were evidence of where people have either fallen through 'cracks in the system' or been shunted between services. Nicola's story in particular infuriated panellists because her eye condition is easily treated but without treatment a host of issues had

[9] Davies, A., Grey, C., Homolova, L. Bellis, M (2019) *Resilience – Understanding the Interdependence Between Individuals and Communities*. Public Health Wales: Cardiff.

[10] Grow Social Capital (2021) *Voluntary Sector Perspectives on Resilience in Wales*. Wales Council for Voluntary Action: Cardiff.

mounted up, including suicidal feelings. The Navigator helped 'untangle' these and reveal the root cause but their input should not have been required.

> "You see this happening all the time with the ping-pong ball…they get knocked around. Three or four months down the line [Amy] might have been lost to follow-up."

> "So many services are so one-dimensional. What Rob's brought is multi-dimensional help: you just go in there and you are doing multiple things, all important, in one visit rather than getting three or four services involved. That's an effective use of resource."

> "She's a bit of a number on that list. If she took her life while on that list, who's accountable? The health board arguably."

If the cost of fragmented services is difficult to measure then similarly, so is evidencing the savings from effective prevention (i.e. taking account of interventions that *were not* ultimately needed), both of individuals engaging with the Navigators and community activities.

> "It's preventing that kind of escalation. One of the frustrations [is] there's probably no way of calculating what that saves…we're very much about preventative approaches, but you can't kind of measure what hasn't happened."

8.9. Fun and joy as serious outcomes

Panels recognised that fun, humour and joy – words all too often missing from professional discourse – are central to wellbeing. Community groups tend to have their own vernacular that involves 'banter' and joking. Two panellists spoke self-deprecatingly about how they "complain about everyone" while attending their community group, but also talked candidly about recognising, thanks to their own experiences of bereavement and poor mental health, subtle cues made by new members:

> "When a new person comes here we don't ask what's wrong. Absolutely not. We don't know the story, do we? But it doesn't matter, does it?"

> "One of the things that comes out quite a lot in the stories is the role of banter. And also the role of that kind of humour in dealing with some really quite dark things sometimes."

On the language of joy and hope:

> "I'm so full of joy at the moment because I've got somewhere to go." (Mo's story)

> "The smile on her face when you see her now is phenomenal."

“We need fun and enjoyment in our lives as well. We don't want to just exist.”

“I think it feels quite hopeful as well, actually. Moving forward, you know, [Josh has] got the start of his journey of healing and there's so much more potential with all of that healing as well, isn't there?”

“One of the things that interests me is in a sort of professional space, we don't use words like ‘joy’ and ‘hope’ and ‘love’. But they're the things that people use to capture…when life's meaningful.”

“The best thing that ever happens in our place [Squirrel’s Nest] is someone coming in [feeling] not that good in the morning, and going out all smiles”

“People have fun though, don't they? It was described as an adult youth club by someone the other month, which I thought was quite nice.”

8.10. Recognition and ‘closing the loop’

Frustration was expressed at how Navigators’ reports to commissioners are often not responded to. Firstly, this misses a crucial opportunity for completing the evaluation feedback loop between the commissioner and the commissioned. Secondly, it excludes service users from that critical latter stage of co-production: the ‘folding’ of learning gleaned through evaluation back into service improvement, knowledge exchange, and for influencing policy.

“There's a role there for us as commissioners to be better at understanding the story behind the data.”

“We have these case studies in but we just put them on a shelf. Those are the things I spent hours sending to you. It's very frustrating, isn't it?”

“Close the loop, support them appropriately… support the navigators appropriately. Yeah, and trust their judgment. That's what they're there for.”

9. Scope for MSC to inform future work

During the panel discussions, reference was frequently made to MSC as a method. These references and the insights they raise have been collated in this section along with feedback from a survey of panellists' experience of the panel process.

This is intended to help inform BAVO and partners about future use of MSC. The survey questions were:

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1. The panel provided me with a greater insight into the breadth of support Navigators provide.
2. I understood beforehand what was expected of my participation in the MSC panel.
3. I had an opportunity to express my views during the MSC panel.
4. An MSC story is an effective way of identifying positive change.
5. I think Most Significant Change is a method that BAVO should adopt more within its evaluation work.
6. Is there anything else you would like to tell us?

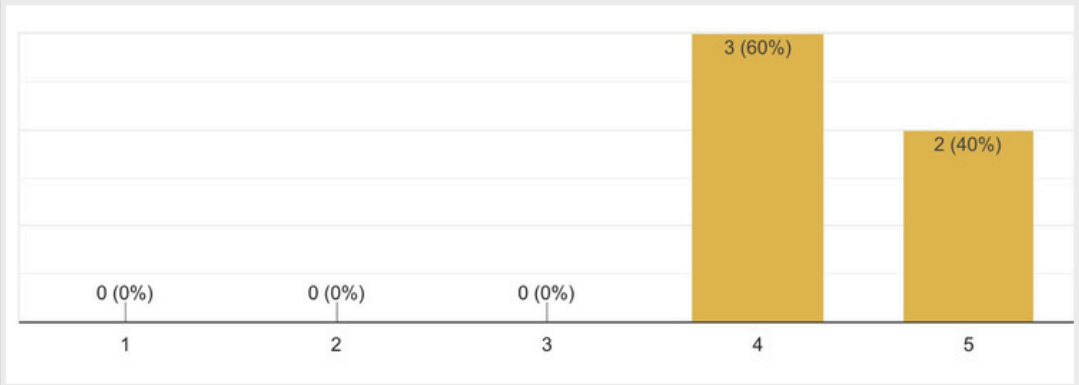
Questions 1 to 5 were answered on a graded scale where:

1 = strongly disagree, 5 = strongly agree

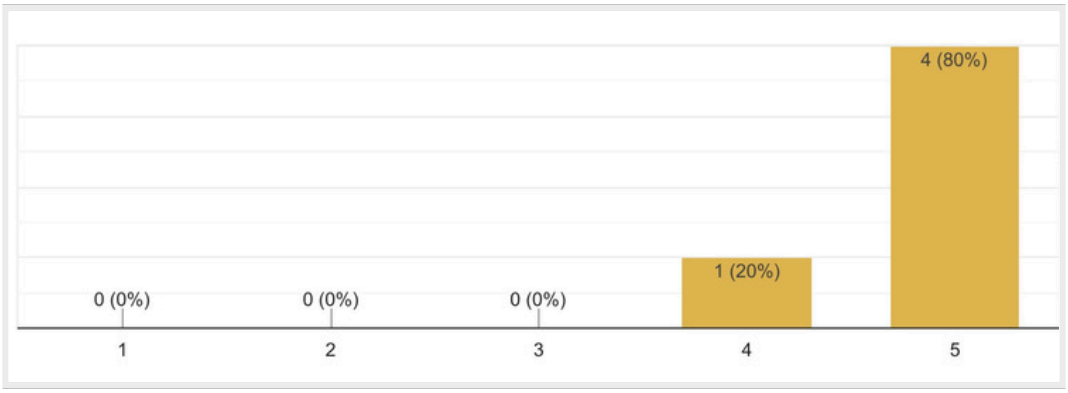
Question 6 was open-ended.

Of the 13 panellists, only five completed the survey, an insufficient sample to draw any significant conclusions. Nevertheless there appears to be consensus that BAVO should incorporate MSC in its impact measuring work.

The panel provided me with a greater insight into the breadth of support Navigators provide.



I think Most Significant Change is a method that BAVO should adopt more within its evaluation work.



"Fantastic opportunity to be in the room with stakeholders I may not have met before. It was a shame we didn't have enough time to discuss every story and rank them a little more, but totally understand why that couldn't happen."

"Overall a great afternoon, showing the important impact of the work but also how MSC can really get to the heart of the impact."

"I really enjoyed the process and the power of the stories."

One respondent suggested that feeding MSC stories back to GPs might help raise the profile of the Navigators:

"Maybe feeding these stories back to GPs would enhance use of the BAVO service?"
Finally, one panellist told us that since this inquiry they had held their own MSC inquiry and found it a positive and constructive experience.

Appendix 1 - Examples of Grow Social Capital's work

Perspectives on voluntary sector resilience (2021) for WCVA

Creu Cyffro evaluation with Straeon Research for Wellbeing Merthyr (2023)

Modern Cockney Festival

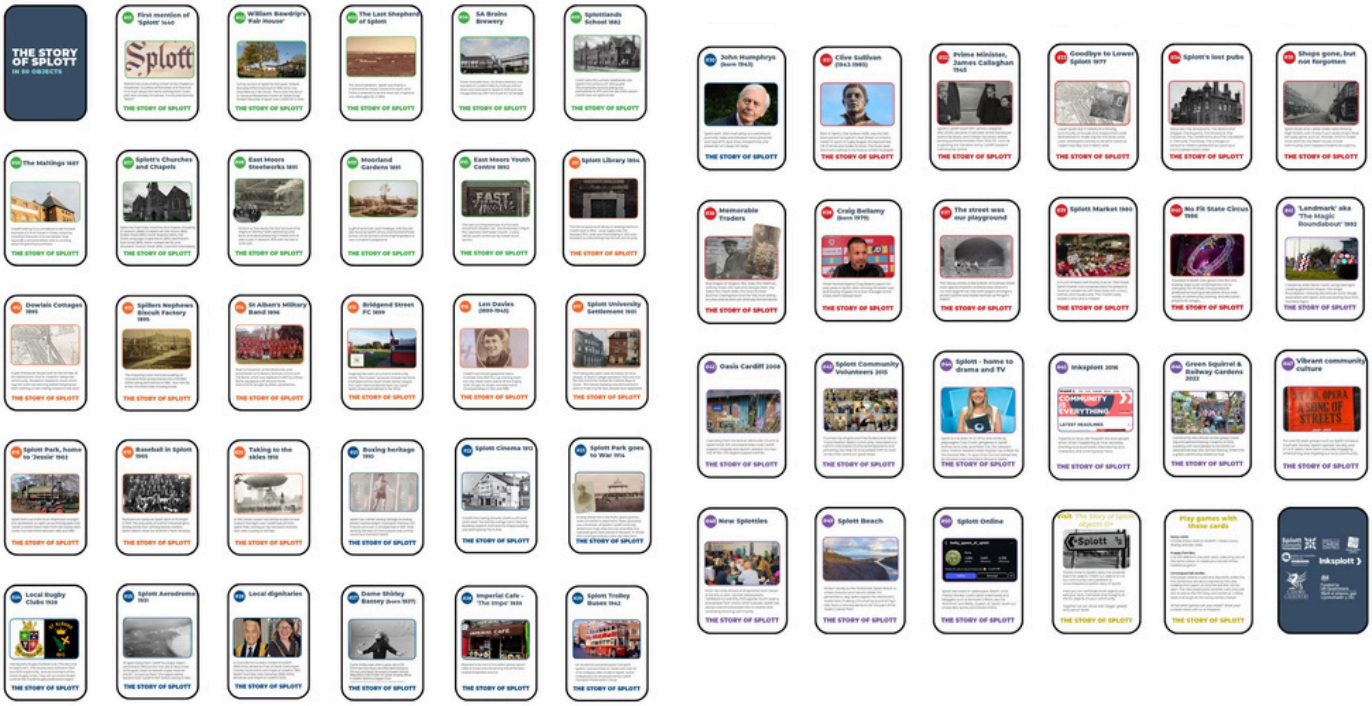
A Very English Chat

Child Poverty and Cost of Living Confident Scheme evaluation for Monmouthshire County Council and Monmouthshire Housing Association

Evaluation of BeCommunity for Monmouthshire County Council

MSC evaluation of partnership working between Cwm Taf UHB and a 'blueprint' veterans hub

The Story of Splott in50 Objects (*below*)



Appendix 2 -The Most Significant Change stories

Part of the MSC process is the identification of the MSC story that has resonated the most with the panel. Sometimes one story is a clear 'winner'. Other times a panel can be split between two or more stories.

'Most resonant' can mean different things to different people. Some might be moved more by the emotional impact of a story; whereas others may connect more with a story that communicates clear, objective impact. Either is fine and picking a story/-ies does not imply that it/they are better than the others.

In this instance there were **two** stories that resonated most:

- *Finding the Fire for a New Life* - Josh's story
- *Don't suffer in silence* - Mo's story

Finding the Fire for a New Life - Josh's story

I have a brain injury from a traumatic incident last year. I was in hospital for six months. Before I met Gail, I was sat in the house, afraid to go out. I was depressed and I couldn't do anything. I didn't have the fire in me to go out. It's good for me. It has helped me, going out with different people and trying to get back into the community.

Lots of good things have happened since I met Gail. Nothing bad at all.

I love going fishing now, with Reel Minds. Helps me get out and I enjoy it. It's good, talking to people. Talking to people and going back out to the community so I'm not stuck in the house. It makes my life happier and I'm excited to go fishing. I book that myself with the Reel Minds app. Gail showed me how to book on the app and I can sort it out now on the phone.

I go to volunteer at Bryngarw Park every Tuesday and Gail put me in touch with a lovely lady, Nikki at Alpaca Dreams. I'll be going down there next Saturday. Last time I went I helped guests walk the Alpacas, walking at the back, making sure nothing's going behind them to scare the alpacas. I chatted to the guests, which helps me too.

Gail has made a big change to me since I met her. She put me on different ways of helping. I like helping people out. I used to work on a farm, so I told Gail I like working outside and that is what she showed me.

The only thing is, I can't do too much. I forget. I'm starting to get back to mixing with people again. Trying to get back, feel safer again…..we go into those places to make you feel safe. I do trust them. Gail took me and so I trust them and feel safe. I definitely wouldn't have

Wanted to go if I weren't going with her. To be honest, it all worked out for me…… feeling safe to go back out now.

I get excited when I know there is something coming up. Yeah, it's like knowing what's coming up and what I like doing. I need to know what I'm doing and have things to look forward to. But if I can't remember, my mother always reminds me. And it's nice to be outside for a couple of hours. Not stuck in, so a bit of a break from my mother and for her too, give her a bit of peace. It has helped me big time. To get back into doing something, so I know people.

She picked me up to start off and then on the bus. We went on the bus together, to know the way to get down there. Fair play, Gail messaged me on the phone to remember what bus to catch. So now I look on my phone every time for the message so I remember. It's there on my phone to remind me where I'm going first. I still haven't got my bus pass, it's still being sorted out, but I will save money when I have it.

I can't cope with too much, with lots of things to think about. I know I can't remember it. When I'm fishing or at Bryngarw Park, just thinking about that thing I'm doing, I don't have to think about anything else. The brain group (Headway) was good. Saw that we're all different, aren't we? I felt sorry for some people, like with Parkinson's. Made me see I can work towards targets, I have got big targets too. I'm trying to remember better. I want to go back to work on a farm. I know it would be more hands-on, but work is more things to think about and I know I can't do it at the moment.

The hospital said I had to stop drinking or I wouldn't get better, and I haven't had a drink. It's something a little sad to say, but it's a good thing to come out of the accident. It's changed who I was, but in a way I'm glad I've changed.

I would tell anyone that Gail does very, very well. My mother has told everybody about BAVO and they should get help from them. The Community Mental Health Team introduced Gail to me, best thing they did. I recommend them to everybody, and especially my mother does!
I would like to call my story: Finding the Fire for a New Life.

Don’t suffer in silence - Mo’s story

Life has been painful. I’ve been thrown into a world where I don't fit. I've been very mentally, physically, badly bruised and battered all my life. From the age of 5, I can tell you lots of incidents. I've had help because I've been under a psychiatrist for years and years. I didn’t feel able to go out and feel safe. A lot of my troubles happen in the night, so I don't sleep, and then I'm scared to come out because I have nightmares constantly. I can't plan because every day I get up, whatever hits me on the chin that day, that’s the only thing I can cope with for now. I've always been alcoholic all my life. I've been dry for, I'd say, a good while now. So I've got an issue fighting against myself all the time. And then every time I've come out somewhere different, whoever with, it's always been a negative memory. I haven't got positive memories. But now I’ve got a positive memory…

I'm in this society now - Squirrel's Nest. And they keep saying ‘You've just got to turn up, just keep coming back’. And I did, and I wouldn't look back again. And if anyone says ‘Where have you got your help from?’ The first thing I'd say, ‘BAVO’!

I just can't explain how much it means to me. In 2023 I met Russel (Community Navigator, BAVO) in Ark. Squirrel’s Nest is the first place Russel brought me. The good thing is that I can come somewhere safe. That thing of safety is really, really important. And how to learn to be Muriel. I've actually tried to find me. Because I haven't got to be a mum, I haven't got to be a grandmother, I haven't got to be an ex-wife. I haven't got to be my mother's carer or my father's carer. And all of a sudden it's ‘Who's me?’

So I'm on a learning process, which I've never been allowed (before). I actually came to the open day with my family. That was an outing where I'm being a mum and being a grandmother and showing them where I come, because it's exciting when you start telling people you’re going to something positive. It's a memory.

I've actually got my feet on the ground for a Wednesday and a Friday at the moment coming in [here]. I was saying to Gail, I'm only out of my house for 6 hours, 2 hours here on a Wednesday, 2 hours on a Friday, and I'll give myself 2 hours to go shopping. Otherwise, I stay in the house. Here, I feel safe.

If I come in on a Wednesday, what happens is that I've spoiled them all and I do burger quarter-pounders and hot dogs and onions. So I feed all the men. I can't cook for myself at home, I can't cook for one. I'm used to cooking (for) a family of 10, you know. To feed these guys on a Wednesday. They ‘yak yak yak’ and you give them all food and they go quiet, deadly quiet. I've done my food hygiene and my first aid course since I've been here because I’ve got nothing else to give. I feel like I can smile coming out now. I do have that pressure in my head (still), but this is a release for it. I just fit. I never ever thought I would fit anywhere in life. But I fit here. And I do get that kick every time a Wednesday comes or Friday comes.

[Mo describes another member of Squirrel's Nest who is disabled].

So every time I leave here, I give him a ring and I say, 'Are you home?' 'Yes, I'm home'. I said, 'Well, sit by your door, I'm coming over with some food'. And he waits by the door for me to get over. Oh, my heart goes out to (him). That's when I know I'm a lucky person and I can help. And (I've) gone to someone else's home. That's unheard of.

Getting out of the house has been the biggest change for me. There was nothing out there years ago. It's only now everything's come to light. I'm in the land of living, not in all the bad memories and deaths and where I've come from. I'm ready to take the next steps. This is my sanity. I can't explain from the heart of my belly, I'm so full of joy at the moment cos I got somewhere to go. And if I can help anyone by going through…There's always someone worse off. I just want to guide people that it's not that bad when you get out there.

BAVO and Squirrel's Nest have made a safe space that I can come to. It's also the first time I've ever been on a day out with a group of people. We go to Weston-super-Mare once a year with Squirrels Nest. I've done it twice now. But I take exactly what I need in my rucksack in case I have panic attacks. I mean, I got to be prepared for the worst. But I get a positive out [of it] at the end.

Russel's role [someone to encourage and guide] is important. A guide into the community. He used to pick me up in the car, drive me here, stay with me until I actually felt secure, and then he used to encourage me to get back in my car and drive. Well, I can drive now, only from A to B, but that's fine. I couldn't do that before I met Russ. The first time we got to the roundabout and had to turn around. But we kept trying and we got there in the end.

If you ever hear of BAVO, follow through because they've stuck by me all the way through. You haven't been put in somewhere and forgotten. If it wasn't for BAVO, I wouldn't be here. I never knew what hope was until now, but I'm learning this different vocabulary than being an alcoholic and down the wrong aisle. [Words like] 'Peace'.

I'd like to call my story 'Don't suffer in silence'.