Executive Summary:

Securing Lives & Shaping Futures:
A Qualitative Investigation of a Partnership Approach to Lifelong Learning.

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This study used qualitative methods in order to evaluate the perceptions and experiences of people engaged in various ‘lifelong learning’ projects in a town in North-East England. These projects were accommodated within a variety of community settings and an established partnership (operating within a Local Strategic Partnership framework) acted as an ‘umbrella’ organisation.

Typical partner organisations included (a) those providing educational programmes / specific skills training; (b) those providing ongoing support and remedial interventions in the health field (including mental health); (c) locality-based neighbourhood projects; and (d) organisations providing a hybrid of these interventions.

Previous evaluation of these community learning groups (by means of an audit) had pointed towards successful interventions in terms of:

- Enabling individuals and groups to gain the confidence, knowledge and skills to change their own situation (and that of their immediate families);
- Contributing to change in neighbourhoods, local communities and other ‘communities of interest’ (e.g. carers groups, women’s learning and support groups, families of those involved in substance misuse); and,
- Enabling individuals and groups to relate better to, interact more effectively with and influence ‘authorities’ and those exercising ‘power’ in their communities (in order to achieve outcomes relevant to them, their families and communities).

These reported gains are, to an extent, reflective of reported successes elsewhere in the lifelong learning arena. It is therefore unsurprising that successive governments have tended to view these types of learning organisations as a panacea for a wide range of social ills (Carmel & Harlock, 2008).

In contrast to the more usual ‘audit’ approach to evaluation, this study sought to investigate the human processes that underpinned the potential benefits of participating in lifelong learning groups.

The aims of this work were to explore individual and group accounts of the effectiveness (or otherwise) of this established partnership approach to lifelong learning, by specifically:

- Exploring how learners engaged in the projects supported by the partnership;
- Investigating people’s accounts of what they gained from participating;
- Exploring how these benefits might extend to participant’s families, friendship circles and communities;
- Investigating the extent to which group participation could be said to have given people specific benefits such as in terms of health and well-being, skills and employability, etc.; and,
- Identifying how group participation might prevent various ‘ills’ such as ill health, loneliness, low self-esteem, etc.

Existing research findings in this field have tended to accentuate several debates, namely about what exactly is gained by participation in lifelong learning initiatives, and whether or not these gains could be described in terms of ‘social capital’. Underlying these debates are wider theoretical issues such as [a] the nature of lifelong learning, and [b] the nature of social capital. Furthermore, and of direct relevance to our study was the question of whether or not increasing ‘social capital’ can result in direct benefits to people’s health.

This study was not an attempt to ‘settle’ these matters, and was, rather, an attempt to illuminate them with reference to some of the more important human processes at work when people participate in lifelong learning groups.
This research project collected qualitative accounts of people’s experiences of participating in lifelong learning groups by using [a] Focus Groups [FG’s], and [b] ‘narrative’ interviews.

Focus groups have been variously described as: Organised discussions (Kitzinger 1994); collective activities (Powell et al. 1996) and even social events (Goss & Leinbach, 1996). The primary reason for using a focus group approach in this instance was as an attempt to capture collective thoughts, feelings, and experiences in relation to lifelong learning group membership. Following initial ‘trust building’ meetings with potential participants, a series of six focus group interviews were conducted, and a number of open questions explored themes of referral, group activities, individual gains, new skills, new friendships and networks and hopes and visions for the future. In reality, the FG interviews often departed from this anticipated trajectory.

Thematic analysis of Focus Group data was carried out along the lines identified by Dick (2005). Open coding allowed for the identification of participants points of view, experiences and any other issues that they wished to raise. Further data coding generated a more involved theoretical understanding of participants’ meanings and experiences. The main findings to emerge from focus groups were that:

- The lifelong learning group tended to engage with ‘complex learners’. By ‘complex’, we mean to imply that learning was made more difficult by the existence of concurrent health issues or caring responsibilities, or by virtue of having ‘faulty’ prior learning experiences;
- Pathways to engagement in group learning were similarly complex and varied, and spanned a range of possibilities from self-referral to formal referral by statutory health and social care providers;
- Almost all of those interviewed identified that they’d experienced ‘personal growth’ as a consequence of group participation. Typically people reported gaining confidence, self-esteem, and acquiring a positive sense of self-identity – often related to a sense of ‘belonging’ and/or role validity;
- Social relations within the lifelong learning groups were typified by acceptance, mutual respect and support. Some respondents appeared to draw comfort by comparison with the situation of fellow group members, expressed neatly by the sentiment that ‘there’s always someone worse off than oneself’;
- Group membership tended to act as a ‘surrogate’ for important aspects of learners’ social relations: In some instances, this meant that the group compensated for absent or unsatisfactory family relations. In other instances, group membership appeared to compensate for aspects of social or work life;
- Almost all respondents identified that attendance at the various lifelong learning groups afforded them a sense of ‘sanctuary’ from unfavourable or demanding life circumstances. Whilst the research could say little in terms of demonstrating causal inferences, the researchers were left with a strong sense that this feature of group life played a particularly important role in supporting group members’ mental health needs;
- There was considerable evidence of ‘social capital’ gains as a consequence of group participation. Notwithstanding debates about the exact nature of social capital, group participants reported specific gains in terms of friendship (sometimes across social and generational boundaries) and the acquisition of practical help – sometimes in the face of extreme social need;
- Many respondents reported acquiring new skills including practical life skills and skills for employment;
Some lifelong learning group participants suggested that others in their immediate families had gained as a consequence of their (learners) participation;

Respondents often drew comparisons between participation in the lifelong learning groups and prior learning experiences in more formal learning environments. In general, the lifelong learning groups were valued in terms of their ‘informal, yet formal’ qualities;

Some participation in the lifelong learning groups required partaking in voluntary work: in such circumstances, some participants reported that they experienced antagonism from paid workers in the same environment. Other reported disadvantages of participation in the lifelong learning groups included suspicion of others in the community (e.g. that participants were somehow making money or otherwise benefitting), costs to family life, and direct economic costs.

During the process of the each focus group, we identified individuals who could potentially contribute narrative interviews. The style of narrative analysis used in the study was mostly concerned with the role that stories play – especially in supporting each respondent’s concept of self identity. A total of four individual biographical narrative interviews were conducted. Many of the above themes pervaded the narrative interviews, and in general the life stories related by the participants could be characterised as ‘narratives of success’ emphasising positive identities, health improvement, well-being, and in some cases educational success.

**KEY MESSAGES**

One of the most important aspects of the lifelong learning groups concerned their **accessibility, with referral being accomplished by a range of formal and informal pathways**. A further significant point in this respect was that groups were **inclusive, taking learners who faced a variety of challenging life circumstances**. Learners often began their journey at a very ‘low ebb’. Often learners were not ready to begin formal learning, yet they typically persevered with the group activities (and were included nonetheless). **We coined the term ‘pre-pre-engagement’ in order to describe these early encounters.** In spite of these tentative beginnings, learners very frequently went on to gain a range of tangible benefits from group participation.

We were left with a sense that these learning groups formed part of an ‘ecology’ of services available in the Chester-le-Street area, and furthermore, that **learners did not see these as totally separate from more formal types of provision**.

The common denominator in respect of many of the gains reported by respondents was that they were **mutual i.e. based upon a beneficial exchange between people**. This feature was important for nearly all learners, and typically people told us that they gained a great deal from ‘being needed’ by others and being able to assume a caring role in relation to fellow learners. Some learners had extended this **caring role beyond the boundaries of the group by making significant contributions to the wider community**.

In some instances, **learners’ families gained direct benefits from the newly acquired confidence and skill of their family members**. The skills and confidence acquired as part of participation, we sensed in many cases, provided a **platform for further learning achievements**, and many of the learners interviewed had already progressed ambitions in this respect.

Fullick (2009) asserted low levels of education can transmit damage from generation to generation. And there was (at least for some participants) the possibility that **newly acquired skills and confidence could break this cycle**. There was also evidence in the data of learners generally being made **more resilient and tolerant individuals as consequence of their participation** in the learning groups.
As identified above, the learners who took part in this study often faced a variety of very challenging life circumstances: frequently, people in the learning groups had endured mental and occasionally physical health difficulties. Although this study was exploratory nature, and we cannot call upon the burden of statistical proof that can be derived from some large scale studies, we would suggest that the benefits outlined above had the therapeutic potential to improve people’s mental and physical health.

Many ‘case studies’ within the data provided testimony of direct health benefits. This was particularly so in relation to peoples mental health and this is unsurprising to the extent that learning groups all bore the hallmarks of therapeutic social relations as outlined by Rogers (1967).

Whilst this study did not consider any economic indices, on the basis of what people told us, it could be conjectured that if these learning groups did not exist then other public bodies might be expected to pick up a considerable cost in terms of health care provision. There is clear evidence in this data that this scenario might especially be the case in relation to increased demand on mental health services.

Field (2009) argued that governments typically emphasise the economic benefits of learning, and view success in terms of skills, competences and employability. We would suggest that success is measured in relation to these indices is perhaps misplaced. The benefits for individuals, families and communities identified here are not perhaps easily couched in the language of measurable ‘outcomes’. However their health gains outlined remain nonetheless real, tangible, and often life changing.

As Fullick (2009) identified, successive governments have attempted to harness the potential of learning groups such as those who took part in the study (and the current government is no exception in this respect). However, the track record demonstrates that part of the attraction lies in the promise of delivering services ‘on the cheap’. As one significant local stakeholder told us: ‘the evidence base has demonstrated this over a number of years and yet there has been little shift in policy terms to enable lifelong learning to fulfil its full potential with a sustainable funding programme’. (Wright, 2010).

During the course of this research it became abundantly obvious that securing funding was a more or less constant preoccupation with the people managing the projects. Whilst the case for a more formal funding arrangement would seem obvious on the basis of the above testimonies, we believe that a slight caveat needs to be stated in respect of any future funding arrangement.

A growing literature has identified how community and voluntary sector organisations can become ‘stressed’ as a consequence of formal (state) funding arrangements (see e.g. Lewis 2005; Newman 2007; Carmel and Harlock, 2008).

We suggested earlier that at least some of the effectiveness of the learning groups studied arose from the fact that they successfully occupied a kind of space between informal and formal learning provision. As Aitken & Bode (2009) put it attempting to ‘managerialise’ community and voluntary organisations risks converting them into a form of poor man’s statutory provision, denuded of their social and moral purposes. We would therefore tentatively suggest that the way forward would appear to be by means of state funding which allowed these invaluable groups full autonomy in order to avoid the attendant dangers of state bureaucratisation. Of course this would entail a leap of faith in allowing these groups to operate outside of the nexus of state accountability whilst at the same time being allowed to dispose of state money wisely and to the benefit of their learners.
REFERENCES


Kitzinger J. (1994) ‘The methodology of focus groups: the importance of interaction between research participants’, Sociology of Health, 16 (1): 103-21.


Wright, Tim (2010), Personal Communication.
Chester-le-Street Campaign for Learning

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NHS

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WEA

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