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Mixed methods Participatory Action Research to inform service design based on the Capabilities Approach, in the North of England

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Abstract

Proponents of the Capabilities Approach advocate that young people should be able to live lives they have reason to value, supported by public services. Mixed-methods Participatory Action Research involving 47 young people aged 13–16, five practitioners, and one commissioner was carried out to develop a local Capabilities Framework. The framework had five themes: ‘people and relationships’, ‘places, spaces and time for me’, ‘learning and skills’, ‘freedoms, rights and responsibilities’ and ‘health and wellbeing’. Recommendations for service design include cross-sector working to support the promotion of social opportunities and services, and interventions focused on the strengths of each young person.

KEYWORDS

adolescence, early prevention, health & well-being, participation, policy and practice

BACKGROUND

Worldwide, young people's wellbeing is primarily defined by individual, social and environmental determinants (Coll-Seck et al., 2019). In the face of a growing existential threat from

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climate change, a global pandemic, terrorist threats and economic crises, young people, even in developed countries, are experiencing challenges to their wellbeing, outside of their control (Goldhagen et al., 2020). Inequalities related to deprivation, with a range of negative health, social and economic outcomes, are widening (Royal College of Paediatrics & Child Health, 2020). Yet, health services for young people are often based on a deficit model focused on fixing problems or preventing 'risky' behaviour (Bailey et al., 2015).

The public health team in one town in northern England identified the opportunity to develop services to better support young people to thrive. Research in the town had previously identified an alternative approach to young people's services rooted in the Capabilities Approach (Shearn et al., 2019). The public health team wanted to explore the possibility for service design based on this approach.

Amartya Sen (1985, 2009) suggests that human development should not be measured solely by gross domestic product. The Capabilities Approach proposes measurement according to what people are able to do and what kind of person they are able to be [capabilities]... to do what they value [functionings] (Robeyns, 2017, pp. 9). The detail of this approach is documented elsewhere (Hart & Brando, 2018; Robeyns, 2017); however, there are two aspects worth elaborating. First, Drèze and Sen (2002, pp. 6) argue that a 'good life' is partly a life of genuine choice and not one in which a person is compelled in a particular way—however rich it might be in other respects—it is the ability to control who you want to be and which communities you wish to be part of. They underscore the importance of social opportunities, recognising that the options a person has to live a 'good life' depend on what others do, including the state and other institutions. Second, despite tensions in concepts of children as vulnerable beings, one role of society may be to support young people to become competent and active agents in their lives whilst avoiding harm to others (Hart & Brando, 2018). This offers a different lens through which to consider young people's services: to contribute, enhance and promote their social opportunities and to maximise their freedoms to choose a life they value.

This has implications for service design. Commissioners (who in England decide which services are provided) and providers can consider offering services that support integrated, proactive promotion of wellbeing beyond health and education. Fundamental to this approach is listening to young people to understand what they value, and why, and to explore opportunities for public service support (Hart, 2014). Young people's voices should be heard so they can represent their own experiences, rather than adult imposed values (UNICEF report card13, 2016). This reflects English policy emphasising user involvement and engagement in the development, commissioning, and evaluation of public services (NHS England, 2017).

There is a moral and a methodological rationale for embedding the participation of service users in the design of public services. The moral rationale suggests that service users have a right to be fully involved in the design and delivery of public facilities which serve them (Wilson et al., 2015). Involvement in such processes may also extend the capabilities and opportunities of those who participate (e.g. Newby et al., 2017). The methodological rationale suggests that service users' participation in design will result in more effective solutions because they are based on the genuine needs of the population and more likely to reflect young people's culture (Wilson et al., 2015). Previous studies suggest that users generate original ideas, whilst professional stakeholders produce reliable ideas informed by experience in service delivery (e.g. Holliday et al., 2017). A balance of young people and health professionals involved in design processes may therefore be advantageous.

The local council commissioned a piece of research to inform service design. The primary aim of this study was to contribute to the design of 5–19 services in [town] to support young people to develop the freedom and capability to live lives they have reason to value.

Specific research questions, co-designed by participants, were as follows. What do young people in [town] have reason to value? What/who do young people in [town] consider supports them to become capable and responsible and provide them with opportunities? What assets, within young people's lives can be built upon and what further role can public services play in their development?

This paper presents the findings related to the research questions. We first present the methods and the underpinning approaches from which they were drawn. We then describe the overarching Capabilities Framework, suggested by the co-researchers, which outlines what they have reason to value. This is followed by detailed findings. We discuss these findings considering International literature and practical implications for service design in the town.

METHODS

Study design overview

The study design followed the principles of three complementary approaches, from which we drew specific data collection tools (Figure 1).

First, Participatory Action Research (PAR; Anyon et al., 2018) has three key principles: (1) is inquiry-based, (2) is participatory (that is, participants are integrated into all aspects of the research) and (3) is transformative, (that is, there is a real opportunity to change knowledge and practices). Second, Appreciative Inquiry (AI; Whitney & Cooperrider, 2011) is a strengths-based approach building on and/or inspired by what is currently 'working'. Third, User-Centred Co-Design (UCCD; Brown, 2009), is a collaborative, solution-focused approach to enable people to conceive new realities.

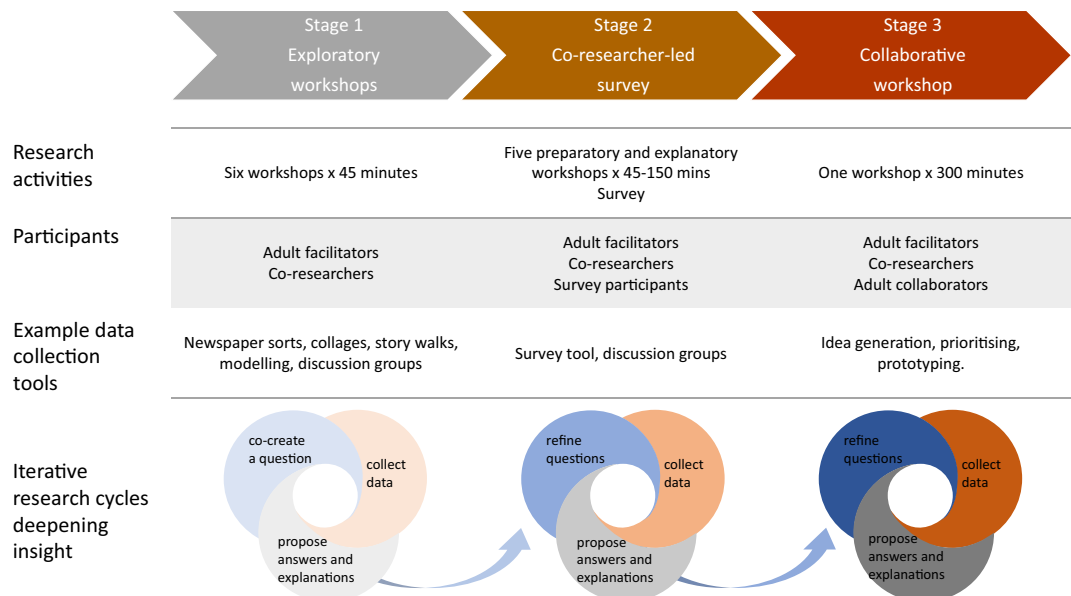


FIGURE 1 Overview of research activities

The study used a mixed-methods, multi-stage design (Creswell & Plano Clark, 2017) comprising three research stages. These stages, which are described at length below, incorporated exploratory facilitated qualitative workshops to inform a quantitative survey then a design phase with adult collaborators (see Figure 1. A summary of each workshop is also presented in Appendix A). The integration of methods was embedded at multiple points through data collection and analysis. All stages contributed data for all research questions.

Recruitment

The study involved multiple parties participating in an iterative, emergent series of research activities:

- *Co-researchers*, young people who took part in research design, data collection and analysis throughout the study.
- *Adult facilitators*, adult researchers, (and article authors), who organised the study and took part in the research design, data collection and analysis.
- *Survey participants*, young people who provided responses to a questionnaire, a distinct group from the co-researchers.
- *Collaborators*, professionals who commission or provide services for young people who took part in a design workshop.

Co-researchers were recruited from a single school. The study utilised a purposive approach to recruitment (Lavrakas, 2008). We designed selection criteria to represent a range of age groups, genders, ethnicities, academic ability, and proclivity to participate in civic and/or school activities. The sample reflected the sociodemographic characteristics of the town, because the school's intake was determined by lottery and drawn from across the town. The sample size was determined by practical ratios between the co-researchers and adult facilitators. Two teachers and a pastoral support worker acted as mediators to invite the co-researchers to participate.

Attendance at every workshop was not mandatory. Over the course of the study, two co-researchers dropped out, and one additional young person joined the group. Seventeen young people aged 13–16 participated as co-researchers in total. Attendance at the workshops ranged from 8–14 individuals at any time.

The adult facilitators were academic researchers, (KS and HH) and a public health registrar (AB). The adult collaborators included a commissioner, practitioners from school nursing (registered nurses who provide a link between school, home and the community) and practitioners from young people's lifestyle services (multi-disciplinary services offering health and wellbeing interventions including sexual health, drugs and alcohol services for children aged 11 and above). The commissioner was involved in initiating and funding the study. The practitioners were approached to participate through arrangements with their employers.

Prior to commencement we gained informed written consent for participation from the co-researchers' caregivers (and the collaborators) and informed written assent from the co-researchers. We reaffirmed consent at the start of each workshop using a handout where the co-researchers could indicate their willingness to participate, how they were feeling and any issues they were having in participating. The study received ethics approval from University Research Ethics Committee (Converis Number: ER11485696) and governance approval from HRA (IRAS Number 262562).

Stage one—exploratory workshops

The primary aim of this stage was to develop an initial Capabilities Framework—a set of capabilities that young people in this town had reason to value to support them to thrive—to be used and further developed in subsequent stages. The secondary aims of the stage were to build confidence (Kellett, 2011) and co-create the space for the study to develop and root the research in the lived experience of the co-researchers (Reason & Bradbury, 2001).

The stage comprised 6× in-person facilitated qualitative workshops with the co-researchers and adult facilitators. The workshops took place during regular school hours and lasted 45 min each. The precise structure and focus of each workshop were determined by the content and results of the previous one. This was managed through a written handout for co-researchers and weekly reflection sessions with the adult facilitators.

The workshops included exercises and discussions (see Figure 2). In each workshop, a range of stationery and modelling materials (pipe-cleaners, soft clay and construction bricks) were provided to support the co-researchers to express their ideas and encourage engagement. The co-researchers created avatars and critiqued newspaper headlines to explore identity, consider the different ways society may portray young people and explore issues outside their direct



FIGURE 2 Creative exercises to provide a range of ways to discuss and make sense of an abstract topic such as ‘thriving’. Clockwise from top left (a) worksheets, (b) free drawing, (c) storytelling walks (illustration Shutterstock), (d) modelling with paper (e) modelling with building blocks (f) prototyping

experience. They went on ‘story walks’, in groups of two or three and discussed times where things had gone well or less well. The co-researchers then worked together as a group to create a 3D model of an ideal environment for flourishing using the modelling tools. One workshop in this stage included a mini-design task, based on UCCD, including challenge identification, exploration, ideation and prototyping (Val et al., 2019), to develop skills important for later stages and begin to conceive new realities. During the final workshop in this stage, the adult facilitators gave a short presentation on the Capabilities Approach, and using ideas gathered throughout the stage, the co-researchers suggested and prioritised research questions and co-produced a local Capabilities Framework.

Stage two—co-researcher-led survey

The primary aim of this stage was for the co-researchers to lead their own inquiry, gather data in response to the research questions and further populate the Capabilities Framework. This stage comprised 5 workshops and a survey. All data collection took place during regular school hours and workshops lasted between 45 minutes and 2.5 hours, depending on the task.

The adult facilitators provided research skills and ethics training for the co-researchers (Kellett, 2011). The adult facilitators also provided question starters and worked with the co-researchers to build a set of questions. These were subsequently uploaded to a ‘Google Form’ and provided in hard copy. Co-researchers were given mini-researcher ‘toolkits’ comprising a small selection of the modelling materials used in stage 1 to assist their own data collection. The co-researchers invited peers to become survey participants ($N = 30$). Following data collection, the adult facilitators and co-researchers collated the data. The co-researchers then led a reflective sense-making workshop based on the data they had collected. This stage culminated in the co-researchers refining the themes and capabilities in the Capabilities Framework and making suggestions for design questions.

Stage three—user-centred co-design collaborative workshop

The primary aim of this stage was to ‘co-design services’ which are for 5–19 year-olds in the town. ‘Services’ were not defined at the start by the adults, in order not to limit the young people’s ideation to predefined sectors. The overarching design question related to the research questions: “based on what young people have reason to value, how might we support young people to become capable and responsible and provide them with opportunities?” For practical reasons of time, it was necessary to focus on themes, within this question, which the co-researchers had prioritised at the end of stage two. This stage took place in a single workshop over five hours of the school day. Participants were twelve co-researchers, adult facilitators, and six collaborators. The workshop comprised aspects of UCCD (Val et al., 2019), building on the findings from the previous two stages. This included:

- ‘*team creation*’ — introductions and warm-up questions.
- ‘*exploration of the issues from multiple perspectives*’ — using ‘thriving statements’ to consider who the ideas would be for, what the ‘desired future’ might look like and why?

- ‘*developing ideas*’ — using provocative questions such as ‘how might we...amplify the good/remove the bad/borrow from things where this already works?’ Participants came up with ideas which they shared with others to build on.
- ‘*prototyping ideas*’ — using modelling materials, pen and paper to consider how to richly describe the idea.
- ‘*communicating ideas*’ — a final general discussion on who should know about the ideas and how we could tell them about them.

Data analysis

Some data analysis was embedded (Creswell & Plano Clark, 2017) and participatory (Bozlak & Kelley, 2015) to facilitate the iterative development of the study and workshop content. The co-researchers captured key discussion points and generated other mixed media data (photos, diagrams, models, written summaries, mindmaps). Where models and artwork were produced the co-researchers were given opportunities to verbally interpret them and explanations were captured in field notes, or video recorded. Data were reviewed independently by each adult facilitator and key emergent findings were agreed upon in a reflection session. These were introduced at the start of each subsequent workshop and the co-researchers were encouraged to verify, reflect and build on their previous contributions. In stage two, the co-researchers reviewed the data from the survey participants. The design ideas from stage three are research outputs and presented in the findings.

Following stage three all the data from the study was integrated for comparison (Creswell & Plano Clark, 2017), to build ‘thick’ descriptions (Gale et al., 2013) and add rigour to the final outputs. This was undertaken by the first author due to the co-researchers being on summer holidays. An adapted Framework Approach (Ritchie & Spencer, 1994) was utilised. The Capabilities Framework co-produced between the co-researchers and adult facilitators in stage one was used as an analytic framework.

All data were transposed or converted to text. Written data were transposed directly from notes, flipcharts or handouts. Artefacts created by the co-researchers were ‘transformed’ (Creswell & Plano Clark, 2017), that is, converted to text through a description and linked to a digital photograph. An excel spreadsheet was used for charting the matrix. The columns were populated with categories representing the themes and subthemes from the Capabilities Framework. Each data collection tool (e.g. handout/survey/modelling exercise etc.) was treated as a separate case and assigned a row in the matrix. The data from each source were summarised by each category and inputted into the matrix. The data were assessed to refine the Capabilities Framework by adding detail to the subthemes.

Following the summer holidays, the combined findings were shared with four of the co-researchers who verified the key messages and developed a presentation that they gave at a national public health conference.

FINDINGS

About 47 young people (17 co-researchers and 30 survey participants), five practitioners and one commissioner took part in the study overall. The findings were collectively negotiated and whilst

individual points do not reflect every young person's lived experience, they reflect group consensus on what the young people in [town] valued.

Figure 3 illustrates the final co-produced Capabilities Framework which reflects the functions that would support young people to live lives they had reason to value (Figure 3).

This framework had five focus areas. The 'capabilities' were not natural for many of the co-researchers and they chose to talk about these concepts as ideas that were 'important to help them live their best lives'. The focus areas were 'people and relationships', 'places, spaces and time for me', 'learning and skills', 'freedom, rights and responsibilities' and 'health and well-being'. In the discussion, we compare these ideas to established capabilities lists found in the academic literature.

People and relationships

The co-researchers recognised that to 'live their best lives' they should be able to have trusted and positive relationships with family, friends, 'experts' and teachers. These relationships should show that they were cared about, taken seriously, listened to, and supported.

Many of the co-researchers and survey participants said that their parents and siblings were important to them being able to live well. For some, parents provided security, love, fun and opportunities and help. For others, an older sibling or a teacher provided this support. They suggested that the key to these relationships was the ability of the trusted adult to empathise with the young person.

They need to actually hear the young person...they can make it worse if they don't fully listen...you can feel judged.

The importance of this capability, *to be able to have trusted adult to young person relationships*, was made clearer to the group when it emerged, in the co-design phase and in discussion with the collaborators, that not everybody had an adult they could rely on, due to relationship breakdown or illness. For example, one of the co-researchers had caring responsibilities, which shifted the balance of the relationship between themselves and their parent.

The co-researchers highlighted that it was important *to be able to have positive relationships with friends*. They identified, through discussion and in the survey research that friends were a key source of support. Twenty-six out of thirty survey participants said that friends 'were really important to them,' gaining more mentions than anything else, including families (25 out of 30). This was explained by one,

Due to various issues, I have with my family, my friends are much more reliable for emotional support and just hanging out and having fun.

Many also recognised positive relationships that they developed with pets, which were highlighted as simple, pleasurable and reliable. For some co-researchers, these relationships were prized for offering unconditional love that they did not perceive elsewhere in their lives at the time.

The peer research highlighted that friendships are often nuanced. One survey participant described loyalty to a group of friends, who were perceived to be 'rough' by others, even though association with them had got him into some trouble. They reflected how important it was to

Idea	Themes – “to be able to...
People and relationships	<ul style="list-style-type: none"> • develop trusted adult to young person relationships. • develop peer relationships. • have someone listening, somewhere.
Places, spaces and time for me	<ul style="list-style-type: none"> • have our own private space for ‘me time’. • be fit and physically active. • visit places that are fun inspire us. • be able to pursue hobbies • help others through volunteering opportunities • get around easily and cheaply
Learning and skills	<ul style="list-style-type: none"> • develop social skills to negotiate with people online and in person • develop life skills (time management, confidence, access to advice and direction) • overcome challenges • have access to content to help understand our experiences (content availability and means to access via technology)
Freedoms rights and responsibilities	<ul style="list-style-type: none"> • speak up and be listened to • have our views taken seriously and treated in confidence • be accepted and loved for you are. • be ‘authentically yourself’ • be safe from harms (people, safe spaces)
Health and wellbeing	<ul style="list-style-type: none"> • be physically and mentally well • have access to information about how to stay well and where to get support.

FIGURE 3 Overview of the final Capabilities Framework co-designed by the young people

them to be part of this group and what they personally gained from it both in terms of friendship and security. This nuance demonstrated the fine lines young people tread between what they experience as friendship and what may encourage behaviours that are frowned upon by the rest of society.

A small number of those participating experienced issues with friends which they felt inhibited their ability to thrive. One example given described friends falling out and the individual being ‘caught in the middle.’ Another example illustrated a growing awareness that a group of friends they were with had a negative impact on them.

I am in a friendship group that I don’t want to be in. I feel I can’t get out of it...I am just going to wait for this school year to end and I can move on.

The co-researchers and collaborators in the co-design day concluded that services needed to provide flexible support so that young people feel that *‘someone is listening, somewhere.’* They wanted dedicated support for building skills to develop and maintain strong relationships. The co-researchers suggested that young people should co-design training for parents and teachers to develop a resource for adults to have the right knowledge and skills to support them.

Places, spaces and time for me

The second theme was broad. It reflected the need to engage in things they enjoyed. This was different for each person. This theme details the places and spaces, time, and opportunities that they felt promoted their social opportunities.

Places to support physical health

Sports and activities outside the house were highlighted as important. The co-researchers recognised the physical, mental and social benefits of participation. The activities that they participated in were wide and varied but almost all involved some degree of organisation and/or cost. The co-researchers explained that they were not routinely offered affordable opportunities; exceptions to this were wholly dependent on the goodwill and commitment of volunteers.

Our [basketball] coach put [sessions] on to give us girls something to do. We only pay £2.50 and don't have to pay anything else [for example, for the team hoodies].

Relying on volunteers meant some areas did not have sufficient opportunities.

The co-researchers and collaborators in the co-design day recognised the paucity of information about available activities (including those which are free or low cost) in their town and stressed the importance of a more obvious network of physical activities and sports.

Places for creativity and inspiration

The co-researchers highlighted the limited opportunity they had to attend gigs, concerts and creative spaces. One local venue was identified as a positive space because it was open, inclusive and frequently changed exhibitors. A couple of young people had used this space to '*hang out*' and felt welcome there. It was highlighted, however, that pursuing the arts was out of reach for many young people [in town] because of the perceived high cost of entry. For example, one young man wanted to study Music at A-Level but believed he needed a formal qualification of Grade 5 or above in an instrument. He considered weekly tutoring to be expensive along with an exam cost of £80. Such an investment was beyond his reach and that of his family. As with opportunities for physical activities, the co-researchers and collaborators in the co-design day considered the need to provide access to affordable opportunities to engage in the arts.

Safe spaces and time for me

When asked what helps them to thrive, many of the co-researchers said they needed to be able to access private space and have sufficient time to spend there, for '*me time*.' The co-researchers explained that this was important for relaxation '*to chill out and feel better*' and to be able to pursue hobbies that they enjoyed like playing or writing music, watching and critiquing films or playing computer games. The value of this capability was made clearer when confronted by the lack of it in one person who explained that she did not have her own space and was sharing a bedroom with her sister and baby niece. Although this had brought her closer to her sister, it had compromised her ability to sleep and use her room as she would like, which affected her wellbeing.

The young people were attached to technology and cited music players, phones, computer consoles and televisions as key tools to help them connect with others, have fun and switch off. This provides a '*virtual space*' that young people value. They had a conflicting relationship with social media, which could provide either solace or opportunities for bullying. Some were

concerned about what they perceived to be unreasonable pressure that images from social media place on young people to present a 'perfect' life.

These debates led the co-researchers and collaborators to recommend services that support a 'safe space'. A physical and virtual space, ideally with a youth-approved quality mark, where people can go when they do not feel safe. Ideally that space would be attractive and provide comforting and creative people/resources to meet individual needs. There should be no onus on the person accessing the space to divulge why they are there.

Time for me, through helping others

The co-researchers were not solely interested in what services and society could provide for them. Under the theme of 'time for me,' they also highlighted personal benefits gained from helping others. For example, through school and opportunities associated with the *Duke of Edinburgh* award scheme (a UK charity that helps young people to gain essential skills, experience, confidence and resilience to successfully navigate adult life (DofE, 2020)), some co-researchers were 'Dementia Friends' and spent time with older people. Some had raised money for charities:

It really affected me, so I decided to raise money for charity. I cut off my hair because I figured I've got lots of hair and it will grow back. I gave the hair to the Little Princess Foundation and the money raised to Age UK.

Volunteering was seen by the co-researchers as an opportunity to contribute to society, provide practical and social support to others. It gave them a sense of pride, satisfaction and belonging that they may otherwise not experience.

It sounds terrible, but you benefit from it too. It makes you think that you matter, that you're useful.

This led to recommendations by co-researchers and collaborators in the co-design day that all young people are able to volunteer and contribute to their communities.

Access to places and spaces

This theme hung not just on the availability, appropriateness, and affordability of opportunities, but on the ability to travel autonomously. The co-researchers repeatedly stressed that public transport in their town, in particular the bus service, was of a poor standard. It was considered expensive, often late and many had experienced hostility from bus drivers and fellow passengers. They attributed this to prejudice because of their age and the behaviour of some, but not all, young people using the service. The strength of this theme meant that one of the practitioners in the co-design day spent time with the young people considering what a young person friendly, reliable and affordable (ideally free) public transport service would look like, to encourage young people to move around the town more easily, without stigma or risk of abuse. Whilst the collaborators recognised that the public transport in the town was poor this was not an aspect of 'service design' that they had not fully considered before the workshop.

Learning and skills

When the co-researchers considered what they needed to *'live their best lives'* they reflected on both formal education and wider skills and capabilities. Some of the co-researchers expressed that they felt pressure and expectation to do well at school. They were uncertain about future job prospects and believed that the main thing they were in control of was the effort they put into exams. They also highlighted practical and softer skills like time management, teamwork, perseverance, facing your fears, developing friendships and confidence that impacted on their academic performance.

The co-researchers debated the role of teachers to support them in matters beyond their schoolwork. Many expressed that their education included aspects of health, wellbeing, identity, skills and opportunities which transcended the teaching of core subjects. The co-researchers specifically requested school time, at every age, focused on mental health and education on LGBTQ, homophobia and racism. They also suggested that regular lesson content/expectations are reviewed to ensure that school is not inadvertently compounding problems, for example, by adding unnecessary workload instead of ensuring work-life balance.

In stage three they reflected with collaborators on the need for wider and broader education. They were open to the idea that this might include some self-directed learning, for example, to be student-led during the protected time during the school day with access to learning resources. The co-researchers recognised this might enable them to undertake their own research on topics that interested and/or were pertinent to themselves at that time, as opposed to a school-imposed timetable for personal, social and health education.

Health and wellbeing

The co-researchers felt that thriving meant being as well as they could possibly be and having support to achieve wellbeing. This was a topic of keen importance to the practitioners who recognised that they currently only reached a very small proportion of the town's young people.

Support for mental health

Stimulated by the survey results, two of the co-researchers shared experiences of struggling with their mental health. One explained they had not found it easy to get help.

I had a doctor's referral to CAMHS [Child and Adolescent Mental Health Services] and basically there was a waiting list and then when I was seen because my anxiety was school related they said it wasn't bad enough and they wouldn't see me because I wasn't a priority.

The other expressed that support was only offered if you met a threshold of risk.

[Mental health support] is not at a low level. You have to get really bad before they help you and then it takes so much time to get sorted. I got help but that was because I wasn't eating, so I got to the front of the queue.

The co-researchers felt this compounded the problems because, in addition to not getting help, some young people's difficult experiences were not being validated.

Recommendations derived by participants in the co-design day reflected that the criteria for getting help could reflect someone's ability to cope rather than others' perceptions of severity.

Access to information

It was notable that in stage one the co-researchers found some concepts about health and wellbeing quite abstract. They were forthcoming about the need to keep healthy, for example, through eating well and keeping active but less clear about protective factors for mental and emotional wellbeing. The survey reinforced the view that many young people did not know what support was available for their health. Awareness of support for physical health (both to keep well and to get treatment for illnesses or injuries) was relatively high (22/30 knew where to turn), compared with just over a third who knew where to get help for mental, emotional or sexual health (12/12/11 out of 30, respectively).

Some co-researchers felt that asking for help with mental health was hard, for example, getting an initial referral or needing parental consent to access services. They suggested that parents did not always take their concerns seriously, being dismissive or taking the situation personally. Accordingly, the co-researchers felt that they needed the confidence to access support (including sexual health support) unaccompanied. They expressed a paradox, that when experiencing ill health, they were more likely to lack confidence. This was compounded by the fact that most only tried to access health and wellbeing information when in crisis.

On the co-design day the commissioner, practitioners and young people worked together to share ideas about how to support mental health. For example, young people explained to collaborators that people would not use the drop-in clinic in school or speak to them directly as it was too public, highlighting that accessing services carried a stigma. In turn, the collaborators were able to make the young people aware of options like e-clinics that could be used more discreetly and that meetings could be arranged in more neutral locations, such as a café. The co-researchers suggested that steps could be taken to familiarise all young people with statutory services at an earlier age, perhaps through organised or virtual trips. They suggested that these more structured interventions might provide accessible information and rehearse strategies for coping with health crises before there is a problem.

Furthermore, the co-researchers thought that peer support was potentially helpful and/or more relatable. For example, it would be useful to know how others have handled situations and use these stories to help them work their own way through, to give them ideas and to have someone to make sure they were ok. They thought that peers with experience of service could act as mentors, develop '*user videos*' or '*virtual walkthroughs*' on a social media platform, to help dispel myths and increase familiarity with services. Past and current users of services felt this would be a good idea so that they might take something positive from their experiences.

Freedoms, rights and responsibilities

The co-researchers stressed three aspects of freedom and participation that were important to help them thrive: to be able to be themselves and to be considered as individuals, to be able to be heard and have influence and to be able to be protected from harm.

To be ‘authentically themselves’

The co-researchers felt they had the right to live their lives in a way that was true to themselves. They recognised that they operated in a world where many people put up a *‘false image’* of who they are, making judgements about which parts of their identity to reveal. This was based on perceptions of social norms, to connect with peers or be part of a social circle. There was a feeling of inevitability about this; nevertheless, some young people were finding this *‘game’* stressful.

Some of the co-researchers discussed the issue of identifying as bisexual, gay or transgender and their associated fears. Identifying as LGBTQ was not regarded as a taboo subject for co-researchers and they expressed comfort and commitment with the responsibility to respect other people’s identities and cultures. They still had individual concerns about how peers and family might react to the news, how they might be received by the wider community and concerns about people taking advantage of them.

We just bottle it up...can’t really talk about it to friends because you don’t know what they will say. It that gets passed around or the ‘wrong’ kind of people find out.

In the co-design workshop, this was linked to the idea of physical *‘safe spaces’* such as cafes or venues being openly and obviously inclusive and welcoming. The co-researchers thought that these spaces might already exist [in town], but they did not know where they were. As a result, it was suggested that these were made more accessible and promoted to young people.

To speak up and be listened to

The co-researchers felt that they were often unfairly grouped together and labelled with certain character traits (noisy, disrespectful, violent, lazy) which were not universally accurate. Through the co-design workshop, the participants concurred that young people had a right to have their voices heard. This should be both collectively, in matters that concerned them all, such as climate change or more accessible travel, and individually, when they are interacting with services. It was important that the young people’s voices had an influence on decisions that were made about them. Such commitment may also result in greater job satisfaction for the practitioner. Collaborators taking part in the co-design workshop in this study remarked that, despite working with young people daily, they rarely have the opportunity for such meaningful conversations.

To be safe from harm

Some of the co-researchers highlighted that they did not go to some places [in town] because they thought that people might hurt them.

There were two shootings the other week and I am terrified to leave the house, even though it is probably safer than ever because there is a higher police presence.

Some of the young people had strategies for keeping safe. This has included being physically prepared - getting stronger or doing martial arts which had given them confidence and they considered made them less of a *‘target’*.

Although it was not a common topic of conversation some young people referenced drugs and alcohol, mostly experiences of being offered substances. They were keen to make their own choices and to be protected from people that meant them harm. This topic was discussed in the co-design workshop with reference to wider public services, beyond the practitioners and commissioner who attended, such as youth and police and justice services. This highlighted the need to work across sectors to secure young people's opportunities to *'live their best lives'*.

Summary of cross-cutting co-designed recommendations

The co-design workshop allowed the co-researchers and collaborators to develop recommendations, grouped on three levels:

1. Cross-sector working to invest in promotion of social opportunities. This may include formal or informal partnering of entities and organisations to ensure that young people can access physical activity, creative and volunteering opportunities to enrich their lives. This may also include the provision of information in accessible formats so that they are enabled to make informed decisions.
2. Commissioning services that focus on enabling factors. Services may be delivered in places that are welcoming for young people, and maybe situated in clinical, informal (for example cafes), virtual settings and/or integrated into other settings such as schools. Services should support the development of life skills to promote positive relationship building, time management, early support for emotional wellbeing, and creation of safe spaces.
3. Interventions, where needed, based around the specific strengths, and needs of each young person, with a particular focus on early support for mental health.

Implicit in each of these levels for policy-making and practice is the participation of young people in decision-making about things that affect them.

The primary purpose of this paper has been to report the findings of the PAR; however, in keeping with the approach, we briefly highlight that this work has led to changes in policy and practice in the town. For example, collaborators in the co-design day made instant changes to how they promoted an e-clinic and the commissioner has adapted one of the service specifications to incorporate the requirement for a *'safe space'*. The new service specification stipulates an ongoing requirement to include young people in decision-making about service design and evaluation. The young people also have had the opportunity to present their findings at a national conference.

DISCUSSION

The study has gained a deeper understanding of what young people [in town] have reason to value, what supports them to become capable and responsible and what assets might be built upon to provide them with opportunities. The study facilitated the co-production of a Capabilities Framework which outlines what the co-researchers and collaborators agreed were *'functionings'* that held local value; that was important for young people's wellbeing (Figure 3). The framework's five themes: *'people and relationships'*, *'places, spaces, and time for me'*, *'learning and skills'*, *'freedoms, rights and responsibilities'* and *'health and wellbeing'* resemble

other lists informed by participatory research with young people. For example, ‘people and relationships’, ‘places, spaces, and time for me’ and ‘learning and skills’ correspond with Kellock’s (2020), themes of ‘people - relationships with friends’, ‘Place and environment /being physically active / being creative’ and ‘learning’ which were derived from focus groups with primary school children in the UK.

There is conceptual overlap between these locally derived capabilities and those which have been generated through primary and secondary data analysis, for example in the list generated by Domínguez-Serrano & del Moral-Espín, (2018). There are similarities between ‘people and relationships’ and ‘affectivity, emotions, and love’ and between ‘learning and skills’ and ‘formal and informal education’. What is notable, however, is the difference in the language used by the young people to describe their valued capabilities set, and the lists derived from data analysis which arguably use more formal language. This study highlighted some difficulty with the language of ‘thriving’ ‘flourishing’ and ‘capabilities’; words that were not part of the young people’s normal vocabulary. Instead, they preferred to use the vernacular of what is needed to ‘live our best lives’. In addition to the importance of deriving local valued capabilities, it is arguably imperative that these are described in language which resonates with young people.

There has been some debate about the extent to which young people are able to express a multi-dimensional understanding of their wellbeing and whether the lists they produce are in fact determined by their parents and social context (Domínguez-Serrano et al., 2019). In this study, we have observed that the desirable capabilities were discerned through debate amongst the young people and underscored when members of the co-researcher group identified a ‘lack’ of such capability in their own, or a peers’ life. There was agreement in the group that, whilst each individual had different circumstances, hopes and ideas about what it meant to ‘live their best lives’, there were some basic freedoms that underpinned these opportunities. These were the focus of the set they developed. This is not, however, intended as a definitive set of capabilities to be applied for all purposes and all age groups in the town. In keeping with Robeyn’s (2017) reading of Sen’s work, these may be considered general dimensions, a basis from which more specific capabilities may be explored, according to the relevant policy under review.

This study captured local nuance in the interpretation of what the five themes meant. For example, in ‘people and relationships’, the young people recognised that parents or teachers might not fulfil the role of a trusted adult, but that it was important that they could find someone to trust and that they felt secure there was ‘*someone listening, somewhere*’. In ‘learning and skills’ and in ‘health and wellbeing,’ they acknowledged the need for reliable information they could access to allow them to self-manage, as much as they highlighted the role of others to provide support or education. In addition, the young people in this study emphasised the importance of being able to get around cheaply and easily.

Compared to fundamental capabilities lists compiled elsewhere (Biggeri et al., 2006; Domínguez-Serrano et al., 2019), the co-researchers’ framework did not place an emphasis on ‘life’ or a ‘normal-length lifetime’ in the study. It was, perhaps, implicit in their discussion of ‘living their best lives’. They did, however, stress the importance of early support for mental health and perceived this to limit freedom to achieve other valued capabilities, if not achieved. A subsection ‘voice matters’ from the *State of Child Health* report from the Royal College of Paediatrics and Child Health (2020), further reinforces these findings. It underscores the rising concern about young people’s mental health (88% of 1700 who took part in a survey said there is not enough support for their mental health), child poverty, and increasing rate of young carers. It is notable, however, that young people consulted in the process of compiling the *State of Child Health* report distinguish between ‘things we know from health professionals will keep us

healthy', like adequate sleep, exercise and a balanced diet, from things that help us to be happy as children and young people, like 'somewhere to go, things to do, being listened to and being connected'. The final report focusses on the sector response with priorities including to 'reduce child health inequalities', 'prioritise public health prevention and early intervention (to reduce obesity)' and 'to build and strengthen local cross-sector services'. These are laudable priorities, but they obscure the features of life that young people themselves say help them to thrive. This may reproduce a deficit model of public service which focuses on avoiding or treating ill health or social difficulties, as opposed to promoting social opportunities.

This study was commissioned by the local government to inform council policy. This underscores a normative belief in the town that the government can be an agent for change (Robeyns, 2017). The findings highlight the complexities that may be involved in realising these valued capabilities, beyond the direct control of the local government. There are implications for services across and between various elements of the statutory sector and in concert with the private and voluntary sectors. The findings have implications for professionals in health, education, transport, civic opportunities, arts and leisure. The young people themselves highlighted their own agency through self-management and active participation in volunteering, in achieving their desired capabilities. Where council intervention may be needed this would require greater attention to interconnectivity and promoting a wide range of opportunities for young people. This should be considered in the commissioning of new services.

Strengths of the approach

We undertook PAR to facilitate collaboration between individuals with diverse knowledge to understand what young people in [town] have reason to value, what supports them to be capable and to co-design recommendations for youth (aged 5–19) services. Across the three phases, three interlinked processes allowed us to meet our objectives: (1) *Investment in time*—the time spent with the young people introducing concepts and building capacity to participate supported their ability to participate as equals. (2) *Allowing for flexibility*—the co-researchers could participate in a variety of ways, the adult facilitators adjusted the agenda and range of techniques deployed throughout the study, according to feedback and their own reflections and (3) *Active partnership*—the co-researchers were engaged throughout the study and were able to make decisions about what to conduct the study about and how to undertake it. This multi-stage design produced rich data pertinent to the local area which is a fundamental principle of the Capabilities Approach.

Limitations to the approach

This approach has not provided generalisable knowledge, as this was not its aim. The participants involved in the study reflected the town's demographics but did not constitute a representative sample of all young people for whom services would be developed. We did not include younger 5–12 and older 18–19 age groups in the study. We suggest that the service ideas are developed further through continued participatory research with young people, including further work to translate the recommendations into service specifications. We experienced some delays in the study due to ethics and governance, school holidays and a tragic death in the school. Our consent/assent process had stipulated that the study would take place during school hours so that young people who were not usually motivated to participate and/or have the social and economic

capital to make additional journeys outside school hours had their voices heard. This meant that the second stage of analysis was not as participative as we would have liked. The young people were given the opportunity to continue to participate in dissemination activities in the Autumn term, when they returned to school. A full process evaluation is available (Brook et al., 2021).

CONCLUSIONS

The Capabilities Framework culminating from the research is in keeping with Sen's recommendation that what people have reason to value is locally informed. The focus on capabilities and functionings highlighted in this study illuminates what young people in this town perceive as important: people and relationships, places, spaces and time for themselves, learning and skills, health and wellbeing, freedom, rights and responsibilities. In the current context of the global Covid-19 pandemic, these have been highlighted as the very things many young people have missed out on (Lancet Child and Adolescent Health Editorial, 2020). The next step will now be in converting these ideas into new services and cross-sector working policies which challenge the cultural and structural norms at a time when there is increasing turbulence. The counter-argument would be to suggest that the time for radical change, informed by young people themselves, has come.

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CONFLICT OF INTEREST

The authors have no conflict of interest to declare.

AUTHOR CONTRIBUTIONS

We confirm that all authors have made substantial contributions to conception and design, or acquisition of data, or analysis and interpretation of data; been involved in drafting the manuscript or revising it critically for important intellectual content; given final approval of the version to be published with each author having participated sufficiently in the work to take public responsibility for appropriate portions of the content; and agree to be accountable for all aspects of the work in ensuring that questions related to the accuracy or integrity of any part of the work are appropriately investigated and resolved.

DATA AVAILABILITY STATEMENT

The data that support the findings of this study are available on request from the corresponding author. The data are not publicly available due to privacy or ethical restrictions.

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APPENDIX A.

Workshop original plan and final version for comparison (there were seven iterations)

Stage	Workshop	Original plan	Research topics after YP involvement in design
Stage one – exploratory workshops	1. Getting to know you	Ground rules, icebreaker, group discussion on research questions	Ground rules, create an avatar, group discussion on what supports people in [town] live best lives, research topics of interest
	2. Design skills basics	Mini-design task	Mini-design task – how ideally get to school
	3. Health and wellbeing	Society views of young people's health and wellbeing, group discussion, their definition	Society views of young people's health and wellbeing, group discussion, YP questions, YP stories, YP definition
	4. What does it mean to thrive?	Capabilities, modelling task, introduction to Capabilities Approach	Capabilities, modelling task, introduction to Capabilities Approach – What does it mean to you? How does this differ for different groups? What do not we know? - Optional task outside the workshop – take pictures/ write about things that help you 'live your best life'
	5. Assets	Name five things that help you to thrive, develop a persona of someone thriving	Storytelling, what helped you to 'live your best life'? What do not we know?
	6. What else?	What would it look like if things were going (even) better for you?	Visioning exercise. Research question generator
Stage two – co-researcher led survey	7. Research skills	Research question generator	Role play, co-creation research approach
	8. Research materials	Develop topic guide	Develop semi-structured survey tool using question builder sort cards
	9. Piloting	Research ethics, pilot one interview	Research ethics, testing tool - Optional task outside the workshop – ask peers, friends, siblings to complete the survey

Stage	Workshop	Original plan	Research topics after YP involvement in design
	10. Data gathering and analysis	Recruit up to 10 people to complete interviews, include mixed media to illustrate ideas if appropriate. Organise data	(Extended session) Complete further data gathering, transpose responses to the question framework on 'data wall', self-moderated peer discussion
	11. Data analysis	Generate themes	Create mindmaps to theme the results, generate ideas about implications of findings. Generate 'exciting statements' for the design phase
	12. Findings conclusions	Present the data, feedback themes	Present the data, feedback themes
Stage three – user-centred co-design collaborative workshop	13. Getting to know you	Group forming with staff, commissioner and young people	Single day, team creation, exploration of the issues from multiple perspectives, developing ideas, prototyping ideas, communicating ideas
	14. Discover	Acknowledge assets and achievements of young people, families, communities and services	
	15. Define	Focus on service area	
	16. Develop	Potential for services to support YP	
	17. Prototype	Solutions that work	
	18. Prepare exhibition	Feedback exhibition	National conference