



North and West Belfast Health Action Zone
Follow Up Case Study (2006)

Summary

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CONTEXT

The Follow Up Case Study report and summary have been written to assist HAZ Council in its deliberations about the future. Partners will hopefully use the findings to assist them in drawing their own conclusions about the progress of HAZ, its distinctive attributes and how it may continue to contribute to enhancing the quality of life and life chances of those in greatest need.

A full copy of the report North and West Belfast Health Action Zone – Follow Up Case Study (2006) by Leslie Boydell, Associate Director, Institute of Public Health in Ireland, is available to download at www.haz-nwbelfast.org.uk

NORTH AND WEST BELFAST HEALTH ACTION ZONE

The North and West Belfast Health Action Zone (HAZ) is an established partnership involving statutory, community, voluntary and private sector organisations working to address inequalities in health and wellbeing in North and West Belfast. HAZ was set up in 1999 shortly after the Secretary of State for Health for England announced the policy initiative in 1998 which led to the establishment of 26 Health Action Zones across England. Four Health Action Zones were set up in NI between 1999 and 2001 each tackling the broad agenda of health inequality.

Between March 2003 and February 2006, the Institute of Public Health carried out research into the benefits of partnerships, as part of the New TSN research programme funded by the Research and Development Office of the DHSSPS (NI). The case study of North and West Belfast HAZ was carried out mainly during 2003 and a report was produced for the Council in 2004: The experience of North and West Belfast Health Action Zone (1999 to 2003).

By 2003 the English Health Action Zones had been either wound up or subsumed into Local Strategic Partnerships after only three to four years of their expected seven year lifespan (Barnes et al 2005).

In terms of the structure of public services, Northern Ireland has had relative stability for quite some time. However, that is about to change following the publication of the Review of Public Administration (RPA) in March 2005. Significant changes to health and social services and to education are to be completed by April 2008. This has major implications for HAZ.

THE 2006 CASE STUDY AND REVIEW

The proposal to carry out this follow up case study of HAZ was stimulated by the possibility of exploring the achievements of one Health Action Zone which has been running for eight years. The HAZ Council indicated that such a study would also be timely to assist them in their deliberations on the future of HAZ in the light of the imminent changes resulting from RPA.

The aim of the study is to assess the progress made by HAZ in achieving its initial goals and consider this in the light of lessons learnt from the English Health Action Zones.

The objectives are as follows:

- Follow up progress since earlier case study;
- Assess progress against objectives as well as other benefits achieved;
- Build on earlier case study and explore evaluation of issues that were considered pertinent at that time; and
- Continue the story of HAZ

METHODOLOGY

As this study was able to build on the earlier knowledge gained by the researcher, relatively few further interviews were deemed necessary. The approach consisted of the following:

- Two group inquiry sessions with the staff team to gain an understanding of activities, progress and achievements from the team's perspective;
- Interviews with four members of the HAZ Council and two members of the staff team, following up on issues and preoccupations that were highlighted during the previous research as well as their perceptions of progress made; and
- Document analysis of a wide range of reports, evaluations and HAZ Council papers produced between 2004 and 2006.

The combined data from these sources has been analysed using both the previous study and the evaluation of English Health Actions Zones to develop a frame of reference.

KEY THEMES OF THE REVIEW

Based on the findings of the previous research, the following themes were identified for exploration in this follow up case study:

- Emerging evidence of impact;
- How the last three years (2004 to 2006) differed from the early years of HAZ and the main achievements during this period;
- Developmental pathways and paradigm shifts;
- Nature of HAZ Council meetings;
- Sustained commitment of partners;
- Community engagement; and
- The evolution of the 'HAZ approach'.

FINDINGS

2006 compared with 2003

In response to questions about the difference between the first and second phases of HAZ, several interviewees commented that there has been a maturation of the partnership. It now has credibility with Government departments and other agencies based on the track record and on the trust that has been built up over that time. In addition, individual partners have further developed their credibility within the partnership.

Partners reported that they are beginning to reap the benefits of experience. While there is still lively debate, the nature of that debate has changed. Now, as one partner commented,

"it has become an entity with culture and values, which [says] the only way you're going to do this is through inter-sectoral, cross community, with community partners and tackling the fundamental elements that impact on disadvantage of one kind or another". The question now is not what HAZ should be doing but how to do it.

Having expressed concern three years ago about the turnover of membership and the difficulty of introducing new members to the thinking developed by HAZ, it's worth noting that of the 23 strong HAZ Council, 13 members are the same as in 2003 and ten are new. Some core members such as the Chair and Manager have been there since the beginning.

Interviewees also commented on the growing understanding within Government departments and particularly amongst senior civil servants that inter-sectoral working and community participation are critical to achieving change. However, while this is to be welcomed, there is little evidence of the appreciation of what is required to make it work or of the importance of process and its time-consuming nature.

Follow Up Case Study (2006) - Summary

One important aspect of HAZ which seems to have become stronger over the past three years is a highly reciprocal arrangement, where HAZ provide a forum for the local area partnerships to meet with the statutory agencies. The HAZ approach enhances their capacity to engage with local communities and taking a leadership role locally, in a way that helps the statutory partners involved in HAZ to meet their goals.

Relationships

As was the case three years ago, partners still value the relationships and connections made through HAZ. The relationships developed between members of the HAZ Council now go beyond the benefit of knowing each other. One interviewee described how he recently met with another partner to address a local and significant problem, “We know we have a common outlook because we know what we’ve shared through the Health Action Zone”.

Participation in HAZ has also provided added value in developing relationships beyond the HAZ agenda. One Area Partnership Board Chief Executive commented that he particularly valued the access provided through HAZ to senior officers within the statutory sector, which has enabled him to convene people if needed, to engage them in local issues.

Knowledge

HAZ continues to provide a valued source of learning and knowledge. Several partners, both previously and now, commented on the learning that they have gained from the independent consultant and the academic expertise, as well as other partners with different perspectives. Since all partners are involved in multiple networks and regularly come into contact with a wide range of people, it is likely that the knowledge and thinking developed within HAZ filters outwards in a complex web of connections that would be impossible to trace.

Actions and changes

Many things have occurred as result of HAZ which might be referred to as ‘spin offs’. They result from the relationships and networks developed, the learning that’s taken place, and changes in the way that people act as a result.

One such ‘spin off’ was the breaking down of professional and organisational barriers in the Communities in Schools initiative, where teachers have developed recognition that to achieve their literacy targets they need the help of speech and language therapists. Another example, which could be considered a change to mainstream thinking, is the acceptance of the West Belfast and Shankill Employability Task Forces that support for integrated services for children and young people is fundamental to achievement of their goals.

HAZ progress

Clear progress has been made with the HAZ developmental pathways. It is not possible to deal with these in detail in this summary however, those noted in the review included the pathways relating to:-

Travellers –with much being achieved through the Travellers’ Action Group, a sub-group of HAZ;

Communities in Schools – this concept is now partially encapsulated within the idea of extended schools which will be led by the Department of Education;

Shankill 21 – with HAZ making an important contribution leading to the setting up of the Northern Ireland Community Convention Company;

Suicide and Self-harm – the HAZ Prevention of Suicide and Self Harm Task Group informed and influenced the Regional Task Group and ultimately the “Protect Life” Strategy document; and

Integrated Services for Children and Young People – a substantial bid for funding from the IDF means that the work to support the development and education of children and young people to participate in the workforce will proceed.

WHAT IS DISTINCTIVE ABOUT HAZ?

Several distinct aspects of HAZ are clear from the observation and analysis of the data provided. These are elaborated upon below:

- The specific context of North and West Belfast and the very high level of need in this area. As well as experiencing high levels of deprivation North and West Belfast has been severely affected by conflict;
- The seniority of members on HAZ Council sustained over several years, some of whom have been there from the beginning;
- The relative structural stability of organisations and up until now, freedom from reform;
- The political vacuum and the lack of local governance which has perhaps allowed HAZ to develop a form of local governance not provided by other structures;
- The quality of debate, the depth of thinking, the calibre of contribution to the debate and the collective experience of HAZ Council members;
- The experience of the manager who has been in post from the beginning, something which is not the case with other Health Action Zones in Northern Ireland, coupled with the stability of the team and the retention of the skills they have developed; and
- The enabling role of HAZ, supporting upwards and downwards, connecting horizontally and vertically, translating policy to the local context and the local context to policy makers.

THE 'HAZ APPROACH' OR PHILOSOPHY

Among those interviewed extensive reference was made to the 'HAZ approach', which has been developed and refined over the eight year life of HAZ. The staff team acknowledge that there has been relatively little attempt

to articulate this outside the partnership and that much of it is tacit and cannot be readily communicated to others. They are now making attempts to remedy this.

Key elements of the approach seem to be:

- Working with local communities and eliciting their perception of need;
- Creating a unique forum of statutory and non-statutory agencies;
- Agreeing shared interests and goals;
- Establishing a 'transactional' environment;
- Working collaboratively and using existing resources to meet need; and
- On-going evaluation, reflection and learning

Important concepts underpinning this are the idea of the developmental pathway and communities on trajectories. A key element of the developmental pathway is, that whatever work HAZ undertakes, it is part of a coherent, overall strategy, to address an intractable problem at a key point in its development, to try to maximise impact.

One of the goals of HAZ is to influence mainstream service delivery. The traditional view of mainstreaming is to pilot innovative schemes in the form of a project, subject them to rigorous evaluation and demonstrate that they work. The alternative is to develop new thinking and to use this to influence policy so that existing services are delivered differently. This is a more gradual process which seems to be at the heart of the HAZ approach and there are several tentative examples of where HAZ thinking is believed to have influenced policy. These include

- The thinking contained within the bid for Integrated Services for Children and Young People, some of which is replicated within the announcement of the Children and Young People's Funding Package announced by the Minister for Northern Ireland, Peter Hain in March 2006;

Follow Up Case Study (2006) - Summary

- The Suicide Task Group for North and West Belfast preceded the setting up of the Regional Suicide Task Force. Three members of the Task Group sat on the Regional Task Force and it is highly likely that much of the thinking that had already taken place locally, and was contained in interim documents, was used to influence the regional policy; and
- The third example is the recent announcement by Minister of State, David Hanson, for Renewing Communities. Once again this package contains many ideas that have already been developed by HAZ.

In each case, members of HAZ, particularly the Chair, have gone to some effort to ensure that HAZ thinking has been communicated to senior Government officials so there is no doubt that they have been aware of the thinking developed by HAZ. Several interviewees emphasised that whether the influence of HAZ is acknowledged is only important to demonstrate that HAZ is creating added value.

HAZ language

The development of a common language is indicative of the culture that has developed within HAZ. Phrases such as “the HAZ approach” are frequently used. One interviewee commented on the use of language by HAZ,

“We don’t need to use the words so much. In the early stages you actually were trying to convey meaning. Now the meaning is understood. People have got the meaning now and they talk about the HAZ approach”.

Another term used by HAZ partners is reference to “bending the mainstream”. Several interviewees referred to the difficulty of influencing the mainstream. Bending the mainstream may not sound very transformational and yet because it has proved so difficult, any change to the mainstream might be regarded as a transformation.

Neutral space

HAZ has worked hard towards creating the space where discussion takes place allowing the development of a degree of mutual understanding. It is clear that partners, many of whom sit on a range of partnerships, appreciate the quality of the debate that takes place and regard it as exceptional.

Leadership

In the 2003 study the critical role played by the Chair and manager were recognised. This was highlighted again through this study. It is evident that the manager invests enormous energy in nurturing relationships, both within the partnership and with stakeholders. Through her leadership, the team has developed a culture that places very high value on establishing and sustaining good relationships and on honesty and openness. It is clear that team members work hard and are highly committed and energetic in pursuing the HAZ goals.

The team have benefited from the stability that has been provided by their employment through North and West Belfast Health and Social Services Trust and by strong support from the Trust Chief Executive who is also HAZ Chair. The manager has in depth experience of collaborative working and of community development and is widely respected and recognised for her work.

The role of the Chair has been crucial in driving the development of HAZ from the start. He has shown sustained commitment to the vision of HAZ throughout its life and brought enormous energy to it. He also has brought many years of experience of working in the area and been able to use his extensive networks of relationships for the benefit of HAZ. Although he is Chief Executive of the organisation with lead responsibility for HAZ, over the years he has established his independence as the Chair of HAZ.

The HAZ willingness to share, to take a lead when necessary but to allow others to lead, is key. At least on some issues and for some partners, there appears to be a willingness to give up ownership. For example, one partner commented,

“the debate about the Hain money , there was no debate about this is my bit and not yours, I’m not giving you . . . none of that at all . . . people weren’t worrying if the money went to education and then came back through an education route, to support schools was the big thing”.

This is just one example of what Crosby and Bryson identify as the eight leadership capabilities required to exercise ‘leadership for the common good’. In the discussion of leadership within HAZ, these are all evident, except perhaps political leadership, which is difficult in the political vacuum currently existing in Northern Ireland . There is obvious evidence of policy entrepreneurship in the current efforts by HAZ to consider how best to make progress through the impending changes resulting from RPA.

IS IT REPLICABLE?

A question explored with some partners is the issue of whether HAZ provides a model that could be replicated elsewhere. While the processes could be replicated and the concepts communicated, the contribution of individual partners, their experience and motivation may not be as easily reproduced. As already indicated, context is crucial and no doubt the extraordinary level of need witnessed in North and West Belfast is a very important motivating factor for people who are committed to equality and social justice.

Recent in-depth analysis by Mike Morrissey (2006), while cautioning against overemphasis on the geographical distribution of indicators of deprivation, confirms that North and West Belfast contains a high proportion of people most at risk. He is at pains to point out that the HAZ do not want to use these figures merely as a means to call for more resources. North and West Belfast has received substantial investment over the years with little demonstrable evidence that this has improved its profile. What HAZ wish to draw attention to is the need for alternative and innovative approaches to break entrenched patterns of deprivation.

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