Tackling health inequalities in The Hague: a process evaluation of a municipal programme to improve health in deprived neighbourhoods

Schmidt, M.

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Collaborative research through the eyes of researchers: lessons from the evaluation of a local public health programme

M. Schmidt
T. Plochg
O.A. Arah
N.S. Klazinga
K. Stronks

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Abstract

**Background:** In the past, many people have proposed collaborative approaches to public health research as a way of bridging the gap between scientific research and policy-making. Although current research in this area seems promising, concerns have been raised about the consequences for scientific rigour. In this paper we describe and reflect upon our experiences as researchers of collaborating with policy-makers in a local programme for tackling health inequalities.

**Methods:** The qualitative data collection included interviews, document analyses and observations.

**Results:** The challenges we encountered in meeting scientific standards are described in this paper and concern: (1) combining policy and scientific relevance in the research questions, (2) obtaining measurable objects, (3) evoking reactivity whilst at the same time trying to control for it, (4) warranting independency and (5) competing publication goals for reporting interim goals in short reports and writing in-depth articles for scientific journals. Our experiences have shown that it is possible to overcome these challenges when some generic efforts are made. Building a shared conceptual framework and adapting organisational arrangements represent some of the essential steps involved in this process.

**Conclusion:** This study demonstrates that providing these investments are made, the collaborative nature of this type of research should not be considered a threat to scientific rigour, but rather as a powerful tool for generating valid outcomes that can be generalised.
7.1 Introduction

In theory, evidence-based policy is considered the ultimate strategy for public health programmes. This kind of policy refers to scientists who produce evidence that is useful to policy-makers and to policy-makers who actually take up the most up-to-date evidence provided by researchers to use in their policies. (1;2) Although these procedures seem self-evident, practising evidence-based public health policy seems to be a difficult process. This has much to do with the so-called gap between scientists and policy-makers as well as the different rationalities of both worlds. (3-5) Roughly put, policy-makers want to ‘do’ something about a problem while scientists want to understand the problem. Moreover, researchers and policy-makers have different goals, different attitudes towards what constitutes evidence (6), and also have different work cycles. (7)

A popular recommendation for bridging the gap between researchers and policy-makers is to involve the policy-makers closely in the research process (8-11). This approach is known as ‘collaborative research’ which is defined as a specific set of interactions and processes designed to bring together those people who study societal problems and issues (researchers) with those who act on or are within the boundaries of those societal problems and issues (policy-makers) and practitioners and individuals) (12).

The assumption that collaboration between researchers and policy-makers leads to better public health policy is widely supported (5;13-18). Closer links between research and policy are warranted to stimulate better interpretations of research findings (19) and produce policy-relevant knowledge that can be put directly into practice, thus resulting in more evidence-informed policy-making (20). Furthermore, collaboration between researchers and policy-makers should lead to more ‘policy informed research’ in which the complex reality of the policy process is more realistically approached by researchers (5).

The gains achieved through collaborative research on the policy side seem promising and have been widely discussed (21;22). However, the consequences for the quality and relevance or appropriateness of evidence from a scientific perspective are less frequently discussed. For instance, is it possible, within the context of collaborative research to produce evidence that can be generalised to similar settings or which can support further policy-informed research in local and similar programme settings? Furthermore, concerns have been raised about the independence of the researcher (23) and loss of objectivity (24). Researchers could become too committed and uncritically take on the policy-makers’ perceptions due to their active involvement and frequent interactions with them.

Therefore, we should ask: are researchers able to turn these concerns aside? Is it possible for collaborative researchers to produce evidence which can be applied in practice while meeting the requirements of scientific rigour? These considerations demand a close examination of how collaborative research – with the scientist as outsider but in intensive interaction with the policy and practice processes – deals with the challenges in balancing and maximising both scientific rigour and policy-relevance.
The aim of this paper is to consider the challenges that we as researchers encountered when collaborating with policy-makers in order to evaluate a local programme on tackling health inequalities in the Dutch city of the Hague. Our main focus is on our roles in the partnership and in particular on safeguarding validity as a scientific standard. We discuss which challenges were met during the different phases of the evaluation research as well as which strategies were used to resolve them.

7.2 Methods

The local programme underlying the evaluation study
Between 2002 and 2006, the city of the Hague in the Netherlands implemented a programme for tackling health inequalities in six deprived neighbourhoods (150,000 residents). In line with many other comprehensive programmes such as: the Health Action Zones and the Healthy City Movement, this programme was based on three main principles, intersectoral action, professional integration and resident participation. The main goal of the programme was to improve the health in the deprived neighbourhoods. Further specification of the wider goals was supposed to occur during the programme’s implementation.

Proceeding from these principles, interventions, such as an exercise referral scheme, were initiated (25). Furthermore, mechanisms to stimulate resident participation and professional integration were developed, such as the micro grant financing scheme (26).

The principles and methodology of the evaluation study
Although a growing body of experimental studies has been evaluating this type of comprehensive programme, most of these studies have shown marginal effects (27). This has led many people to conclude that there is little knowledge on what actually works in neighbourhood-based programmes to reduce health inequalities (28). Generating such knowledge requires the formidable decoding of the “black box” of these complex programmes and studying the mechanisms through which these programmes influence population health. This requires the use of study designs other than RCT, including process evaluation based on observational data (29).

Against the background of this debate, we focussed the evaluation study on the processes within the program that led to activities aimed at improving the health status of the residents. The four year study was financed by external funding. The collaborative evaluation had two aims: (i) to gather information and generate findings that policy-makers could use to shape the intervention, (ii) to produce knowledge that would contribute to the current international debate on tackling health inequalities. The collaboration consisted of five researchers from an academic research institute and three policy-makers from the municipality.

Both quantitative and qualitative methods were employed. More specifically, we collected formal and informal programme documents, published work and non-public minutes of
meetings. In addition, we conducted many in-depth unstructured and structured interviews with stakeholders such as aldermen, policy-makers, and professionals from the field.

The findings from interim evaluations were discussed regularly with the policy-makers in order to support further development of the programme. The partnership infrastructure involved: (1) a two-hour group meeting four times a year, (2) monthly and interim ad hoc meetings and interviews between the primary researcher (hereafter, MS) and the programme manager (3) participation of MS in regular and ad-hoc meetings of the programme itself and (4) an office for MS at the municipality for two days a week, alongside her workplace at the academic centre.

**Drawing lessons from the researchers’ experiences with the evaluation study**

In order to reflect on the collaborative process, we studied the minutes of the partnership group meetings and MS’s notes. These sources were supplemented by interviews and meetings between MS and the programme manager in which the collaborative efforts were a theme. Following an open approach, we explored the dilemmas and tensions dealt with in this process. Consequently, MS wrote several documents on the dilemmas and tensions that had taken place. These reports were then discussed by the researchers. The dilemmas and tensions that emerged were integrated and organised into three successive phases in the evaluation study: (1) framing the problem, (2) data collection and analyses (3) reporting.

### 7.3 Results

A summary of the different challenges encountered in the various phases of the collaborative work and how they were coped with, is given in table 7.1.

**Phase 1: Framing the problem**

**Approach**

Our twofold objective, i.e. supporting policy-makers in the development of the local programme whilst at the same time generating scientific evidence, called for specific requirements regarding the research questions. Firstly, the research questions had to result in practical knowledge that could be applied to the local situation. Secondly, researchers were interested in the ‘working mechanisms’ of activities and how the programme would interact with the context? This information is needed for the potential transfer of research findings (30;31).

We aimed at formulating policy relevant questions that were also scientifically relevant, by co-constructing a conceptual framework. The aim of this framework was to obtain a shared conceptualisation of the assumptions, mechanisms, processes and activities behind the programme. This resembles the “theory of change” approach (32;33) in which the route of action is spelled out so that the evidence of change can be linked to the intervention being studied.
We succeeded in creating a shared conceptual framework (figure 7.1). On the right of the framework are the specifications showing that the programme works in three areas for the purpose of improving health: healthy lifestyle, healthy environment and improvement of primary health care. The following determinants of health are addressed: physical activity and healthy diet, pedagogical support, information on and access to health care and strengthening primary care. The left half of framework shows that the interventions are based on three principles: intersectoral collaboration, professional integration, and resident participation. These principles are, in turn, linked to three social systems that would be engaged by the programme the local authority, the local health system and the local residents.

![Conceptual framework](image)

**Figure 7.1: Conceptual framework for evaluating the neighbourhood-based Programme for tackling health inequalities in The Hague**

**Reflections**

Did our framework indeed allow us to formulate research questions that led to scientific knowledge? The answer to this question is mixed. In contrast to our first tendency to spell out the specific routes of action to improve health, the framework appeared to be quite global. The results in terms of health improvement were not specified for various reasons, including the prevailing habit in political arenas to formulate broad goals that allow reinterpretation over time. Likewise, the mechanisms through which the working principles should contribute to the interventions was not specified. Take, for instance, our experience with the concept of resident participation. For our research it was important to distil this concept as far as possible into measurable objects. However, in our experience, the policy-makers were not able to explain their ideas about neighbourhood participation and this remained far more conceptual than we would have liked.

Despite this, we were able to serve the goal of producing scientific evidence, in the context of an explorative study and to that end, the co-construction of the framework was helpful.
in more than one way. Firstly, we learned to speak the same language as the policy-makers. Secondly, we were able to conceptualise the approach of the policy-makers and to complement their strategies and ideas with concepts from the literature. Thirdly, the framework helped us to interpret the role of the working principles in the programme and in particular, their connections to other constructs in the corresponding social systems. Intersectoral collaboration, for example, gained far less attention than we had first expected. But through our focus on the local authority as a social system, we were able to identify another concept (considered as preceding intersectoral collaboration) that gained a whole lot of attention from the policy-maker – that of generating political priority.

**Phase 2: Data collection and analyses**

**Approach**

Two important threats to internal validity appeared as a result of our collaborative approach. In the supporting role, the researchers deliberately evoked reactivity in order to adjust the programme. Reactivity concerns the influence of the researcher on the study objects. In producing scientific knowledge, this influence of the researcher needs to be controlled in order to prevent researchers from being an unwanted cause of variability in the outcome variables.

One example that illustrates reactivity concerns our interference regarding neighbourhood health panels that were initiated through the programme. The meantime feedback of the programme’s results caused reactivity, i.e. the research influenced the course of the programme. This occurred after our periodic results were reported and discussed in the health panels, bringing changes to the health panels – in fact they were totally reorganised. To judge the internal validity it should be clear whether the results were due to the programme itself or whether they resulted from the interference of researchers.

The second threat to validity caused by active involvement is that of researcher bias. Research bias concerns researchers imposing their own preconceptions, theories and ideas (34). In collaborative research what could happen is that researchers become too committed, and uncritically take on the policy-makers’ perceptions due to their active involvement and frequent interactions with policy-makers.

As researchers we were well aware of the challenges regarding reactivity and independency issues and employed two main coping strategies. Firstly, MS was embedded in both the policy department of the municipality in the Hague, as well as the academic department. Secondly, a “reflection group” consisting of policy-makers and researchers was created. These organisational arrangements warranted the dialogue between policy-makers and researchers. In both periodical and ad hoc meetings, research findings and their impact on the progress of the programme were discussed. For example, when meantime reports showed that neighbourhood panels did not function on a specific item, a brainstorm session between policy-makers and researchers was organised in order to translate the findings into workable adjustments. This then clarified which adjustments had originated through the research.
Reflections

The organisational arrangements of two workplaces for MS as well as the creation of a reflection group, were primarily meant to create opportunities for mapping the possible interactions between the research and the policy process. More than anything else, MS's part-time desk at the municipality office provided access to documents, emails and meetings, and enabled her to approach many programme stakeholders. This meant that information could be checked and tested with various individuals and reactivity mapped, which benefitted the internal validity. Furthermore, through informal conversations that took place in the corridors we found out that some practitioners considered researchers to be “police officers” who were continuously checking their work. This threatened the validity of our data-collection process.

Table 7.1: Overview of dilemmas and strategies coped with in the collaboration between policy-makers and researchers in the Hague, the Netherlands

<table>
<thead>
<tr>
<th>Phase</th>
<th>Issue</th>
<th>Who initiated the solution</th>
<th>Type of resolution</th>
<th>Impact</th>
</tr>
</thead>
<tbody>
<tr>
<td>Formulating research questions</td>
<td>Combining policy and scientific relevance in the research questions</td>
<td>Researchers &amp; policymakers</td>
<td>Ongoing dialogue: - Building a conceptual framework</td>
<td>Policy and Science: - A common language - A common point of departure - A guide for the development of the research questions and developing the programme.</td>
</tr>
<tr>
<td>Formulating research questions</td>
<td>Obtaining measurable objects</td>
<td>Researchers and policymakers</td>
<td>Scientific Ongoing dialogue: - Intervening of the researchers (encourage to explicitly state the goals)</td>
<td>Science: Explorative questions - Insights in the struggle of a municipality with the concept of neighbourhood participation</td>
</tr>
<tr>
<td>Data collection and analyses</td>
<td>Evoking reactivity whilst trying to control for it</td>
<td>Researchers &amp; policymakers</td>
<td>Organisational: - Work desk at the municipality (mapping the reactivity)</td>
<td>Science: Warranting internal validity</td>
</tr>
<tr>
<td>Data Collection and analyses</td>
<td>Warranting independency</td>
<td>Researchers</td>
<td>Organisational: - Work desk at academic Center - Reflection group</td>
<td>Science: Warranting internal validity</td>
</tr>
<tr>
<td>Reporting</td>
<td>Competing publication goals of reporting interim goals in short reports and writing in-depth articles for scientific journals</td>
<td>Policy-makers and researchers</td>
<td>Co-authorship in journals close to the local authority - Reporting meantime findings as a priority</td>
<td>Policy: Maintaining a good image</td>
</tr>
</tbody>
</table>

Science: A delay of the scientific articles
because of information pre-selection and reticence. However, the same ‘corridor’ conversations provided opportunities through which the image of the researchers as police officers was negated. These encouraged participants to be more open to sharing their thoughts, which led to better data collection and validation. Additionally, MS’s part-time position at the research institute was experienced as valuable in this respect. We experienced this physical distance to the policy-makers as contributing to upholding our “foreignness” and to safeguarding our independence which was beneficial to internal validity.

Also, the reflection group appeared to be important. The ongoing reporting of research findings resulted in discussions that provided a focus on the match between the research subject and the programme element studied. We considered this vital to our aim of unravelling the black box of the programme, as the programme was adjusted along the way. Our aim was to create an open atmosphere. However, informal ‘corridor’ conversations indicated a dominance on the part of the researchers. This was confirmed by analyses of the minutes of this group’s meeting. As researchers we were searching for clarification and scientific justification of the route of action within the programme. In some meetings, the policy-makers were even more or less called to account for the strategies they had followed. The researchers placed the scientific rationale in the foreground while this might not have been constructive with regard to actually obtaining a grip on the policy process – as besides the scientific rationale there are also other rationales, including political ones that are relevant. In our evaluation we were able to register this via informal conversations and we steadily developed an understanding of the multiple rationales of such a programme (35).

**Phase 3: Reporting and disseminating the findings**

**Approach**

Our final challenge concerned the competing goals for reporting interim goals in short reports and in-depth articles for scientific journals. The collaborative agenda in this final stage is to translate the research findings into practical solutions and policy recommendations, as well as to effectively communicate these to targeted scientific audiences. It has been broadly recognised that the conflicting interests of policy-makers and researchers might then surface (36-38). In our case, the reporting of meantime findings was more urgent to the further development of the programme, which pushed aside the urgency of the scientific production that was subsequently delayed. A second tension in publishing was prompted by the difference in interests. It is a well known worry that policy-makers may be inclined to accelerate or delay publication or even rephrase conclusions for political and strategic purposes, undermining the integrity of the researchers (39). We hypothesised that the farther that scientific journals and magazines would be removed from the local policy-making arena, the less discussion there would be on publishing the findings.
Reflections

Our first research paper reporting the interim findings was rejected for publication in a local periodical on health policy because of the upcoming local elections. The editors, also key public health officers in the Hague, considered its content to be potentially harmful with regard to getting funding for the health policy sector, which was competing with other municipal sectors. A year later, together with the policy-makers, we published an article in that same periodical. Although this article demonstrated equally critical findings, it ended with two paragraphs of remarks from the policymakers on how they would adjust the programme. In other words, we left room for the policy-makers to profile themselves as a developmental programme.

Articles for scientific journals were written by the researchers. Before submitting these articles, the abstracts were discussed with the policy-makers. Until now, our approach has resulted in scientific articles (26;40) and has not led to any conflicts with the policymakers. In general, the policy-makers had only a few comments on early drafts. The publishing in scientific journal appeared to be more in the line of researchers than of policy-makers.

7.4 CONCLUSION

Our experience with the evaluation of a policy health programme to tackle health inequalities has highlighted several challenges that researchers face in their efforts to collaborate with policy-makers. The dilemmas that we experienced as most important have been described in this paper and concern: (1) combining policy and scientific relevance in the research questions, (2) obtaining measurable objects, (3) evoking reactivity while trying to control for it, (4) warranting independency and (5) competing publication goals for reporting interim goals in short reports and writing in-depth articles for scientific journals. However, our experiences indicate that it is possible to overcome these challenges with some generic efforts. Building a shared conceptual framework and adjusting organisational arrangements represent some essential steps in this process.

Our experience with regard to the global conceptual framework is supported by the challenges facing the theories of change approach. Defining interim activities and outcomes and their relationship to the longer-term outcomes generally seems to be the most difficult part (33). In our experience, a global framework can also be helpful in more ways, including obtaining a grip on the bigger picture. This is important when acknowledging the complexity of this kind of comprehensive programme.

We considered our ongoing dialogue to be essential. In our case this was warranted by an embedding of the researchers within the municipality which provides access to information and within the university to facilitate peer review and reflexivity. This enabled us to map the reactivity and recognise and explore how the researchers’ own actions and beliefs affected the situation and the interpretation of the findings. This fits very well into qualitative research, where the aim is not to eliminate this influence but to understand it and use it productively (34).
To actually fulfil the promises of the framework and the dialogue, both the researchers and the policy-makers had to go beyond their own routine. A well known characteristic of any successful partnership is trust (41). In each of the three stages of our research, there were opportunities that contributed to a trusting relationship. First, the motivation to collaborate was brought about by a shared vision concerning the core of the research. The shared motivation resulted in interdependence, which is a positive step in successful collaborations (42). Second, a project group was organised well in advance to understand other points of view. Third, discussing the findings with policy-makers prior to their publication helped to maintain a good relationship between the parties.

Given that collaborative-based research projects are both time and labour intensive (43;44), it does enrich exploratory research, as the research itself is grounded in reality (45) and enables researchers to have some grip on policy development in this field. The challenge for policy-makers is to combine the evidence generated by researchers with political priorities and practical actions (46). The challenge for scientists is to gain a greater understanding of these realities without losing sight of the complexity involved. In our experience it is possible to overcome the challenges faced by scientists when collaborating with policy-makers when some generic efforts are made. As such, the collaborative character of this type of research should not be considered a failure to good science, but rather as a prerequisite for outcomes that acknowledge the complexity of policy programmes.

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Competing interest

The authors declare that they have no competing interests.

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