Aligning Policy With Social Action In Health And Social Care In England, UK - Does The Theory Of Change Work?

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Against a backdrop of austerity, volunteering has been framed by the UK government as a solution to improved, more locally attuned health services, as well as a means to address public health outcomes vision (Department of Health 2011). Despite the value accorded to volunteering, traditionally social action by citizens has been regarded as peripheral rather than core to health policy and little attention has been directed to questions of managing and supporting social action that occurs beyond the boundaries of statutory provision. The changing UK policy landscape in health and social care, including the move of public health to local authorities, has opened up new opportunities for local action to become aligned with statutory provision. In 2009, the Department of Health established a national grant programme – the Health and Social Care Volunteering Fund – with the explicit purpose of strengthening volunteering at a local level in order to meet strategic policy priorities. Policy, which indicates strategic intent, order and authority (Colebatch 2002), is here being juxtaposed with volunteering, which is defined by Wilson (2000) as a cluster of helping behaviours occurring within civic society. This leads to three questions (1) Has the government through this fund been able to stimulate volunteering as a policy solution? (2) Is there a role for the government regarding independent social action? (3) What are the social justice implications when volunteering occurs in response to situations where health and social needs not being met by state provision?

This paper will present findings from the national evaluation of the Health and Social Care Volunteering Fund to consider these questions. Our evaluation focused on the 94 local and 13 national projects from the 2010/2011 funding rounds. A Theory of Change approach (Connell and Kubisch 1988) was applied to test the links between policy objectives and the role of fund as a capacity building mechanism at individual, organisational and community levels. A mixed method design involved a desk based review of project reports, three workshops with project staff and volunteers, eight in-depth qualitative case studies of projects and interviews with stakeholders working at a national level. Qualitative case reports were prepared and cross case analysis was undertaken.

The results reveal the assumptions underpinning the grant programme and how national priorities linked to local action. The success of the grant model suggested that it was possible for national government to stimulate independent social action in communities through funding volunteer support within voluntary and community sector organisations. Nonetheless the case studies showed that the nature of volunteering was often fluid and contextual, with volunteers taking on a mix of informal and formal health roles both within a project and outside in their social networks. The perceived value of voluntary projects was the ability of
volunteers to reach communities not in touch with statutory services and offer peer support. Yet the evaluation also found projects were struggling to obtain continued funding from local public sector agencies. This suggests a paradox within the theory of change where volunteers’ independence makes volunteer services more effective in terms of meeting health policy priorities, but less suitable for incorporation into statutory services. The paper will therefore discuss whether and how state support can be given to local action which may need to remain ‘beyond the boundaries’ of statutory control (Milligan and Fyfe 2005). The social justice implications of this are profound where volunteering is encouraged in the least advantaged communities with the highest health needs, as was the case in some of the projects. The paper will conclude that the contribution of local action needs to be placed within a broader framework of public service reform with more discussion of the responsibilities of various policy actors, both local and national.