Network organisation: the impact of dominant paradigms?

by
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Context

This report presents the influence of the challenges and paradigms structuring the two networks which aim to prevent language difficulties in children from vulnerable backgrounds. The two networks exist within the dynamics of the *Plan Régional de la Santé des Enfants et des Jeunes (PRSJ)* (Regional Health Plan for Children and Young People) in the Provence-Alpes-Cotes d'Azur (PACA) region in France. This assessment was sought in 2006 to define the conditions for making these networks permanent.

Method

The researchers carried out their analysis using semi-structured interviews with the key actors in these networks (n=32). The actors who were interviewed assume different roles within the networks: funders, coordinators, field workers and beneficiaries. Comparisons between the two networks focussed on several criteria: depiction of work in the network, geographical spread, synchronies, network objectives, structure, effects, the role of beneficiaries, long-term conditions and overlap with existing networks.

Results

Comparison between the two networks using these criteria highlighted a fundamental difference in the choices which took place prior to the network being established. The leadership of certain actors, sometimes initiating action, had an influence on the networks' rationale for action; one was established as a test network and the other as a support network. The challenges facing these actors influenced the work of the networks: detecting children, relations between institutions, organisation of care, professional training.

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Discussion

These challenges and reference paradigms are rarely addressed as objects of evaluation. While they touch upon the social context (risk of stigmatisation, restrictions on the offer of services, lack of centre of reference,...), by their very nature they reduce the occurrence of these phenomena.