



Applying Situational Analysis to examine the impact of VOICES on people experiencing multiple disadvantage

Journal:	<i>Housing, Care and Support</i>
Manuscript ID	HCS-02-2022-0006.R1
Manuscript Type:	Research Paper
Keywords:	multiple disadvantage, Situational Analysis, fair access, Housing First, systems thinking, failure demand

Introduction

Multiple disadvantage

Multiple disadvantage has been defined as ‘experience of two or more of homelessness, offending, substance misuse and mental ill health’ (Lamb *et al.*, 2019, p5). Similar to terms such as ‘severe and multiple disadvantage’ (Bramley *et al.*, 2015) or ‘multiple and complex needs’ (Harland *et al.*, 2022), multiple disadvantage is used to describe a population at the extreme margins of social disadvantage (Bramley *et al.*, 2015, p11). Under these circumstances, people tend to have much worse health and quality of life compared with other low income and vulnerable people, and can place disproportionate demands on certain public services (e.g., emergency health care, criminal justice system), with considerable societal costs.

A key focus of the national Fulfilling Lives programme was on changing systems that can enable sustainable improvements in the lives of people experiencing multiple disadvantage. These ‘systems’ can be considered a complex non-centrally controlled system of interdependent, autonomous parts that are expected to (but often do not) function as a coherent whole (Rutter *et al.*, 2017). Through taking a systems focus, Fulfilling Lives recognised that multiple disadvantage is less a product an individual’s beliefs and attitudes, and more a function of the system that should support them, i.e., behaviour of institutions, policy decisions, public attitudes and cultural norms perpetuate social problems that keep people in a state of dire need (Abercrombie *et al.*, 2015).

Systems change has been described as the ‘*intentional process designed to alter the status quo by shifting and realigning the form and function of a targeted system*’ (Foster-Fishman *et al.*, 2007, p. 197). Social systems are often complex and comprise many components of different types (e.g., people, services, policies, practices). Therefore, to effect lasting change requires altering underlying structures and mechanisms that make the system operate in a certain way (e.g., policies, practices, relationships, resources, power structures, values) (Abercrombie *et al.*, 2015). This demands action and support from different sectors and organisations within the local support system (Nichols & Doberstein, 2016), ultimately, to improve the circumstances and lives of those with multiple disadvantage (Flower *et al.*, 2019).

Setting

This paper presents a Situational Analysis undertaken as part of a summative evaluation of Voices of Independence Change and Empowerment in Stoke-on-Trent (VOICES), an eight-year local implementation of Fulfilling Lives (2014-2022). VOICES targeted systems change efforts in three priority areas:

- *Ensuring fair access to services* – in addition to casework and service coordination to facilitate access to services for VOICES customers, a range of VOICES activities within this workstream aimed to address systemic barriers to customers receiving the support they needed. They included the Multi-agency Resolution Group (MaRG), embedding specialist welfare advisors in frontline services to help customers to access benefits to which they were entitled, and conducting research

1
2
3 to better understand common barriers such as difficulty registering with a GP as well as poor
4 outcomes following prison release or hospital discharge.

- 5
6 - *Housing First* – following the trial of a housing-led intervention 2014 -2018 (similar to Housing
7 First,), VOICES worked to embed a Housing First programme, which adhered to the programme
8 principles (Homeless Link, 2016), through a pilot implementation (2018-2022). VOICES supported
9 through various roles: Service Coordinator, Landlord Liaison Officer, and Tenancy Sustainment
10 Officer, in addition to funding a 12-month extension (2021-2022) and an independent programme
11 evaluation (Author name removed for anonymous review. 2021).
12
13 - *Making services users leaders in service design and commissioning* – VOICES worked with and
14 supported Expert Citizens, putting coproduction with lived experience at the heart of its activities,
15 and helping with Expert Citizens’ development to become an independent Community Interest
16 Company (CIC).
17
18
19
20
21

22 Situational Analysis

23
24 Advanced methodologies are required to study this type of complex systems change, where traditional
25 approaches grounded in linear models of cause and effect are inappropriate (Martin *et al.*, 2016;
26 Rutter *et al.*, 2017). We needed a methodology that embraced fragmentation, instability, diversity,
27 context, and positionalities, such as Situational Analysis (Clarke *et al.*, 2018), which is designed to
28 unpick knowledge from complex inquiries (Wulff, 2008).
29
30

31
32 Situational Analysis was well-suited to exploring how and to what extent VOICES had impacted the
33 ‘situation’ of the wider system of support for people experiencing multiple disadvantage in Soke-on-
34 Trent, for several reasons. First, it is an iterative and data driven methodology. This was appropriate
35 as we did not have a predefined hypotheses and were guided by the data to understand the
36 complexity of the situation (Clarke *et al.*, 2018; Meadows, 2008). *As detailed subsequently, discourses
37 and issues identified, were further explored through revisiting materials, or seeking confirmation or
38 clarification through alternative sources, thus allowing key discourses to develop.* Second, Situational
39 Analysis is a flexible methodology that can accommodate a range of secondary and primary data
40 sources, such as reports, interviews, field notes and minutes, giving equal credence to written and
41 verbal evidence (Clarke *et al.*, 2018). This enabled use of the wealth of existing evaluations, reports
42 and other existing data accumulated throughout VOICES, with follow-up workshops to verify
43 emergent themes. Third, Situational Analysis is one of the few methodologies that puts context
44 (‘situation’) at the heart of the investigation (Clarke, 2005). *Here, the situation was the wider system
45 of services and support for people experiencing multiple disadvantage in the city, which is distinct
46 from other settings and population types, and needed to be fully understood.*
47
48
49
50
51
52

53
54 Some researchers have suggested that these key properties align Situational Analysis with complexity
55 inquiry and systems thinking (Martin *et al.*, 2016). The present study takes this alignment a step
56 further, using Situational Analysis as an evaluation tool to *identify systemic barriers that prevent
57 people with multiple disadvantage from accessing supportive services and how VOICES worked to
58 address them.*
59
60

Method

Design

A case study design was used, which defined the boundaries of the situation of inquiry: the wider system of support for people in Stoke-on-Trent who experience multiple disadvantage. The three-stage process of Situational Analysis' conceptual mapping was applied, as outlined below. This aimed to provide a detailed picture of both the non-linear interlinkage and complexity of the local support system structures, as well as the processes that shaped the experiences of those who act within the situation (Martin *et al.*, 2016).

Data

Data sources were primarily existing materials, including completed and on-going VOICES reports and projects, and associated evidence (including interviews and case studies), field notes, and minutes of meetings (Supplementary file 1), with additional contextual information from stakeholder workshops to explore specific discourses.

Three stages of Situational Analysis

The first stage involved the collation and detailed review of all materials, to develop situational maps that identified all important human and nonhuman elements of the situation (e.g., key individuals, technologies), including key discourses or issues. In the second stage, social worlds/arenas maps were developed to locate and analyse the collective action of organisations in their 'social worlds' and their role with respect to the key discourses in the situation (arena). In the third stage, positional maps unpacked all positions that emerged from data relating to key discourses or issues that were relevant to each of VOICES' three priority areas. Positional maps were in the form of Cartesian maps, one for each major discourse/issue, where axes present the issues of concern or controversy (Clarke, 2005).

As Situational Analysis dictates nothing was taken for granted, especially on issues that seem "normal" within the situation and, therefore, have become invisible. Minor discourses or issues were given equal consideration to more prominent issues because relative prominence can be indicative of power imbalances. Deviations from the norm were not treated as exceptions but as boundaries of the situation. Finally, a thorough investigation was used to identify all relevant actors/actants, including those usually hidden, silenced, or only tangentially present, as they can help to improve our understanding of the situation (Clarke, 2005).

Findings

This section presents the findings from each stage of Situational Analysis. Positional maps from stage 3 represent the main discourses and issues in relation to each VOICES priority area for systems change.

1
2
3 Outcomes from stages 1 and 2 are presented to show the process, which is reported in more detail
4 elsewhere (Author name removed for anonymous review, 2022).
5
6
7

8 **Stage 1: Situational maps**

9
10 Processes set out by Clarke *et al.* (2018) were followed. After thoroughly reading and memoing all
11 written materials, 'messy' maps were produced, followed by a series of ordered maps, which set out
12 all human and non-human elements of the situation. We also began to identify major issues and
13 discourses such as the "stigma and marginalization" and "equity issues in healthcare provision", which
14 later on, were used to focus the Situational Analysis. The final outcome of this stage of analysis was
15 the creation of three situational relational maps, one for each of the three VOICES' priorities, to
16 illustrate relationships between the elements of interest and other elements in the situation, in a
17 systematic and coherent way.
18
19

20 **Stage 2: Social worlds/arenas maps**

21
22 The relational maps generated questions that were further explored through three workshops (one
23 for each priority area) that eventually led to the next phase of Situational Analysis and the creation of
24 the social worlds/arenas map (Figure 1). This map represents the key social active players (social
25 worlds), and the field (arena) in which they interact. As Clarke *et al.* (2018, p.150) stressed, it maps
26 the "*relational ecological form of organizational analysis dealing with how meaning making, and*
27 *commitments are organized and reorganized again and again over time*".
28
29

30
31 Five different social worlds comprised the VOICES partnership: third sector housing associations that
32 support housing needs; voluntary sector champions who support those who require and use health
33 care services; local public sector agencies, mostly local authority (e.g., Housing, MaRG) and the NHS;
34 legal advisers' social world, which was dominated by the third sector welfare advisers; Expert Citizens,
35 who acted as ambassadors of local people with lived experience of multiple needs and disadvantage.
36
37

38
39 The remaining social worlds aligned closely with VOICES objectives (while not being part of the VOICES
40 partnership) such as legislation, criminal justice system, healthcare sector and academia. This visual
41 representation of the VOICES partnership shows the complexity of the situation, but also illustrates
42 how VOICES provided the common ground for many organisations to tackle multiple disadvantage.
43 This helped to overcome competitive attitudes and practices from partnerships of voluntary and
44 public sectors.
45
46

47 Although the main findings are presented in positional maps (stage 3), some aspects that emerged
48 from the social world/arenas map are worth noting here. Following the "like with like" approach
49 (Clarke *et al.*, 2018), agreeable relationships between organisations are represented by putting them
50 besides one another, while conflicting organisations are opposing. Figure 1 depicts the power-seeking
51 relationship of Expert Citizen's CIC, a pinnacle achievement of VOICES legacy, relative to the other
52 VOICES partnership organisations. By positioning Expert Citizens opposing other partnership
53 organisations, indicates their move to independence in future decision-making processes regarding
54 the local multiple disadvantage population.
55
56

57 More subtly, though important, is the role of academia. As a wider workforce that supported VOICES
58 efforts, academia was placed as an adjunct of the partnership's organisation. Specifically, through its
59 consultancy and evaluator role, academia supported rigorous independent research and outcomes to
60

1
2
3 guide practice and policy (e.g., evidence of primary care gatekeeping; evidence of ineffective hospital
4 discharge processes for people experiencing homelessness).
5

6 Finally, several human elements had an indirect role in the situation (referred to as implicated actors'),
7 but critically did not appear to have done so before VOICES. For example, General Practitioners were
8 relevant through their legal obligation, but apparent resistance to support people experiencing
9 homelessness, and the implications for crisis healthcare services. Private landlords and letting agents
10 were implicated actors through filling the gap in housing provision in Housing First, in some cases,
11 creating issues in accommodation quality and maintenance.
12
13

14
15
16 *Figure 1. Social worlds / arenas map*
17
18
19

20 **Stage 3: Positional maps**

21
22 Drawing on the wealth of material considered, the final stage of analysis elucidated the various
23 positions taken with respect to the emerging discourses/issues for the three priorities under
24 investigation. Under each of these priority areas, the discourses reflect key systemic issues and/or
25 how VOICES was trying to affect systems change.
26
27
28

29 **Fair access to local support services of people with multiple needs and disadvantage**

30
31 Three positional maps are presented to highlight the major discourses/issues that created barriers to
32 fair access and how VOICES' work attempted to address them [other maps illustrating less prominent
33 discourse can be found elsewhere (Author name removed for anonymous review, 2022)].
34
35
36

37 **Stigma and marginalisation**

38
39 Stigma and marginalisation among some personnel in public sector support services emerged as a
40 fundamental barrier to people with multiple disadvantage accessing services (Figure 2). Described by
41 one stakeholder, as "the elephant in the room" (Author name removed for anonymous review, 2019),
42 when discussing hospital discharge processes for people experiencing homelessness, it was
43 recognised that stigma can vary with the needs/situation of the individual (e.g., substance misuse vs.
44 homeless vs. offending history). This created problems for those seeking care or support, as well as
45 staff who lack the knowledge and experience to deal effectively with potentially challenging behaviour
46 or situations.
47
48
49

50 Position C in Figure 2 illustrates VOICES' work to address this. This produced legally informed materials
51 and recommendations to raise awareness of the topic and roles/responsibilities (e.g., to avoid
52 gatekeeping in primary care; co-producing products, often with people with lived experience, that
53 challenge stigma and marginalisation, such as VOICES and Expert Citizen's methodologies (e.g.,
54 INSIGHT) and tool kits (e.g., Care Act tool kit) to empower frontline staff to understand people
55 experiencing multiple disadvantage, and empowered them to challenge unjust decisions/processes;
56 the Learning Programme trained public sector professionals to acknowledge the importance of lived
57 experience as basic component of their own professional development.
58
59
60

1
2
3
4
5 *Figure 2. Positional map for stigma and marginalisation as a barrier to accessing services*
6
7

8
9 **Responsibility and accountability gaps**

10
11 Gaps in responsibility and accountability can result from fragmented systems and silo working (Author
12 name removed for anonymous review, 2022). As Figure 3, illustrates, for people with multiple
13 disadvantage, this was evident in the context of people exiting crisis services (e.g., Accident and
14 Emergency to local authority), situations that demand clear understanding of the legal responsibilities
15 of each organisations (and associated staff) to ensure effective transitions between settings and
16 continuity of care or support.
17
18

19
20
21 *Figure 3. Positional map for responsibility and accountability gaps as a barrier to accessing services*
22
23

24
25 VOICES have shown the large gaps in provision, particularly between health and other services. Figure
26 3 illustrates some conflicting positions on this issue, that: those leaving health care are the
27 responsibility of social care (Position A); that the third sector work beyond their remit to cover this
28 gap, which can mask the shortcomings of the system (Position C). However, sustainable solutions were
29 less clear, aside from the addressing the misunderstanding among difference settings and sectors
30 regarding the meaning of “multiple needs” which could avoid misperceptions that individual’s needs
31 did not fall within their remit (e.g., that homelessness was a health issue, not only a housing issue;
32 Position B).
33
34

35
36
37 **Legal literacy**

38
39 Data indicated that lack of legal literacy was a common failure of the system, which was largely
40 unchallenged before VOICES. As represented in Figure 4, lack of knowledge of some important
41 legislation (e.g., *Homelessness Reduction Act 2017*; *Care Act 2014*) in the public sector, creates serious
42 barriers for people with multiple disadvantage in accessing the services they need and to which they
43 are entitled. We observed the position that managers and frontline staff working with insufficient
44 knowledge or misunderstandings around policies, pass on ‘myths’ and misunderstandings to
45 colleagues, which, in turn, become enacted as policy (Position A). This is a ‘negative feedback loop’, in
46 which organisations lack the incentive to address the problem as doing so could mean having to deal
47 with more situations, and potentially complex cases.
48
49

50
51 VOICES helped to address this problem through developing toolkits (e.g., Care Act toolkit) and models
52 (e.g., WBLL) and the Learning Programme to facilitate development of related knowledge and skill in
53 frontline staff (Position B).
54
55

56
57 *Figure 4. Positional map for legal literacy as a barrier to accessing services*
58
59
60

Housing First

Availability of suitable housing

The major issue with Housing First in Stoke-on-Trent was the limited availability of suitable housing. As shown in Figure 5, there were several related positions in the data, two of which appeared to reflect an issue that pre-dated the introduction of Housing First (Positions A and B) and jeopardised its principles and effectiveness: housing demand exceeding supply, leading to delays in Housing First customers securing tenancies (Position B); inconsistent supply of social and council properties (Position A). This resulted in a reliance on private landlords and letting agents, which had created some issues around accommodation quality and maintenance (Position C).

Finally, some stakeholders suggested that unrealistic customer expectations could be barriers to Housing First, citing examples of customers refusing accommodation offers (Position D). This neither violates Housing First principles nor suggests a mainstream behaviour of Housing First customers. The solution does not necessarily lie in addressing those customer expectations. Rather, this position points to a need to address stakeholder perceptions of the Housing First model. Again, it relates to a limited supply of appropriate properties (primarily single occupancy) that leads to compromise (whereby customers have to choose between accommodation that is unsuitable (based on quality or location) or wait (perhaps in hostel or on the street).

Figure 5. Positional map for availability of suitable housing as a barrier to Housing First

Sustainability of Housing First in Stoke-on-Trent

Figure 6 illustrates positions regarding the future of Housing First as a sustainable local strategy to tackle chronic homelessness. Their argument presented Housing First as a costly intervention with a relatively small number of beneficiaries, advocating for a less intense, housing-led intervention, which deviates from Housing First principles (e.g., finite support, tenancy conditional on engagement with support services; Position A). Opposing this was the perceived need to maintain Housing First as the key local strategy, which was apparently endorsed through local approval to extend the programme for 12 months using VOICES funding (Position B). Here, the cost of Housing First was recognised but with a counter argument that numerous other support services that are even more expensive, and with a related argument (Position C) inaction costs more than doing something, especially as effective intervention has wider benefits through avoiding the costs of dealing with the consequences of inaction [e.g., incarceration, emergency hospital care, 24/7 social care services (Author name removed for anonymous review, 2021)].

Figure 6. Positional map for programme sustainability as a barrier to Housing First

Making service users leaders in service design and commissioning

The third VOICES priority area concerned the greater role for people with lived experience, who, through VOICES, had become established within the political agenda and can be considered a key requirement for a systems change approach. Two positional maps are presented to illustrate key discourses/issues for this theme.

Development of Expert Citizens CIC

Development of Expert Citizens CIC was recognised as a cornerstone achievement of VOICES (Position A), the pinnacle of co-production between VOICES partnership and local people with lived experience (Figure 7). Despite this co-production and substantial contribution Expert Citizens, there was a suggestion that not all their ideas/suggestions had been taken into serious consideration or actioned by VOICES (Position B).

Figure 7. Positional map for the development of Expert Citizens CIC

Peer mentoring

Peer Mentors were individuals with lived experience of multiple needs and disadvantage, who had joined Expert Citizens, received training and were willing to be exemplars to support current customers. They were used primarily for Housing First. There was a position that peer mentoring was beneficial for Housing First customers, helping to build informal relationships with customers and support with activities of daily life, while acknowledging the complexities and that such support is not a requirement of Housing First principles (Position A). There was concurrent concern regarding the potential negative impact on peer mentors (Position B); e.g., peer mentors feeling obliged to act beyond the remit of their role, or feeling overburdened, with risks to peer mentors' mental health and recovery processes (theirs and the customers'). Caution and regular monitoring were proposed as one feasible solution.

Figure 8. Positional map for use of Peer Mentoring

Discussion

We report evidence from Situational Analysis of the VOICES partnership programme's impact on the wider system of support for people in Stoke-on-Trent who experience multiple disadvantage, acknowledging the postmodern conceptual alignment of Situational Analysis methodology to systems thinking approaches (Martin *et al.*, 2016)

Through the conceptual cartographic mapping process for each of the three priority areas in which VOICES aimed to affect systems change, Situational Analysis made two important contributions. First, Situational Analysis maps, as other system thinking approaches (Egan *et al.*, 2019), suggested a new type of language that shifts narration from its reliance on the linear and logic formation of words (Meadows, 2008) toward the display of the diverse positionalities of the phenomena under investigation (Mathar, 2008). Secondly, they provoke a system thinking explanation, **which is necessary for complexity inquiry (Martin *et al.*, 2016) and** permit researchers to embrace the

1
2
3 heterogeneity of the situation, which is usually hidden by positivist methodologies of cause-and-effect
4 (Williams *et al.*, 2018) or even excluded by “what works” interventions (Abercrombie *et al.*, 2015).

6 Thus, despite being a ‘thick analysis’ methodology, Situational Analysis, also embraces abduction
7 thinking (Clarke *et al.*, 2018) that permits the identification of a higher and abstract level of
8 explanation (though grounded in the data) of the non-linear relationships of the situation of interest
9 (Chapman, 2004).

12 This section provides exactly that, a reflection on the learning from the above findings, expanding on
13 evidence of VOICES’ efforts to address the local system’s failure demand [*“demand caused by a failure*
14 *to do something or do something right for the customer”* (Seddon, 2003, p.26)] in supporting those
15 with multiple disadvantage and needs.

18 VOICES made considerable efforts to support local people with multiple disadvantage and make
19 positive changes to a system that often shifts blame to the individual for non-engagement/non-
20 compliance with typical processes. Through studying the work of VOICES within the ‘situation’ of the
21 support systems for this group, it was possible to identify several differential positions between the
22 partnership and the public sector. These underpinned many of the observed findings and can be
23 explained in the context of their different targets relating equality or equity, and their role in system’s
24 failure demand. Equality approaches fairness as the provision of the same treatment/support
25 opportunities to all (Takeuchi *et al.*, 2018), whereas equity acknowledges the potentially different
26 needs and abilities to access services provided. Thus, treatment/support are allocated proportionally
27 (Duclos, 2006). This conceptual difference can have substantial implications for the support that the
28 people with multiple needs and disadvantage receive (Chang, 2002). Moreover, this provides an
29 appropriate basis to consider differences in this system and resulting support before and during
30 VOICES (i.e., the difference VOICES made).

33 According to the evidence considered in Situational Analysis, support services more aligned with
34 equality were mostly those of the public sector. This is perhaps not surprising as the common delivery
35 focus is citywide and based on population needs, rather than being targeted or tailored to those with
36 the most extreme disadvantage and needs (Author name removed for anonymous review, 2019).
37 However, in this situation, it appears to have led to failure demand, exacerbating social and health
38 inequities between the local general population and those with multiple disadvantage (Wilson *et al.*,
39 2016). A series of examples from VOICES work show how people with multiple disadvantage and needs
40 have been excluded from services, despite being eligible and entitled to support. For example, the
41 observed lack of legal literacy and misinterpretation of the legislation’s inclination toward equity
42 affects many services, ultimately, excluding the VOICES customer group from social, health and
43 financial services. In turn, the lack of responsibility-taking in the public sector for those with multiple
44 needs and disadvantage, alongside reactive and untargeted nature of some provision (e.g., prison
45 release plans, hospital discharge), illustrated the causes of the revolving door issue, whereby those
46 with the greatest needs are continually in/out of the same local support services (often in crisis).
47 Finally, the perpetuation of the traditional treatment first or temporary hostel accommodation policy

1
2
3 is another indication of failure demand regarding how chronic homelessness has been addressed
4 locally.
5

6
7 Furthermore, the equality principle and policies favour those in better social, physical and mental
8 health, rather than people with multiple needs and disadvantage resulting in the 'competitive
9 exclusion principle'; a 'gravitational force' that keeps people with multiple needs and disadvantage in
10 the same vulnerable position (Chapman, 2004). Eventually, when the problematic situation becomes
11 unmanageable and overburdens the system (in what is called a 'feedback delay'), the need to turn to
12 more systems thinking solutions is acknowledged (Meadows, 2008). In this case, such solutions were
13 attempted through Fulfilling Lives and VOICES.
14
15

16
17 VOICES actions reflected a need to focus on equity as the main target for tackling the social gradient,
18 in line with what Marmot called proportionate universalism, whereby the intensity of the support was
19 proportionate to the extreme need of VOICES customers (Marmot, 2010). To this end, VOICES
20 addressed social or health inequality issues (e.g., appeals for benefit claims or gatekeeping from
21 primary care) identified in supportive services. Firstly, by intervening and initiating "vertical equity";
22 i.e., working specifically to accommodate or tailor the service to a VOICES customer's needs, and,
23 secondly by securing "horizontal equity", by tailoring the service to VOICES customer base (Duclos,
24 2006).
25
26
27

28
29 Specifically, to approach equity via systemic thinking, VOICES implemented a series of changes on the
30 situation under inquiry. Initially, the emergence of Expert Citizens as ambassadors for people with
31 multiple needs and disadvantage redirected the focus of the local support system. According to system
32 thinking, changing one element cannot drastically transform the whole system. However, it can cause
33 a redirection of priorities if the change is accompanied by analogous changes in nested systemic
34 relationships (Chapman, 2004). For example, this was achieved through supporting Expert Citizens not
35 only to become an independent CIC, but by acknowledging the need for skilful personnel who are
36 accredited and trained to participate equally as co-designers (i.e., Care Act toolkit), co-researchers (i.e.,
37 interviewing and collecting data at various VOICES reports) and co-evaluators (i.e., INSIGHT). This is
38 expected to provide long-lasting change that will continue to help transform the face of the local
39 support system.
40
41
42
43

44
45 In parallel, VOICES gradually turned in to a totally co-produced project, an innovative, diverse and
46 autonomous partnership, and took an "evolutionary learning" approach, which acknowledged the
47 complexity of the support system for people with multiple needs and disadvantage (i.e., the situation).
48 For example, the Learning Programme aimed to promote workforce development for more effective
49 working with this population; the Welfare Benefits Leading and Learning (WBLL) aimed to improve
50 legal literacy; research and evaluation were commissioned to inform practice. These measures also
51 aimed to overcome professionals' assumptions of who knows best, acknowledging the importance of
52 lived experience as basic component of their own learning process and being open to constructive
53 criticism as opportunities to learn and adapt.
54
55
56
57

58
59 Finally, VOICES aimed to effect changes in local support system for people with multiple needs and
60 disadvantage. This was attempted through the efforts to reinstate legislation's inclination toward

1
2
3 equity, either by raising awareness through legally informed documentation (i.e., Gatekeeping report;
4 Care Act toolkit) or by intervening in the internal structure of organisations via the model(s) of
5 specialist welfare Adviser and WBL model to the frontline teams or through the pilot Housing First
6 programme for immediate, permanent, and unconditional tenancies for customers, regardless of
7 compliance with services (Bretherton & Pleace, 2016).
8
9

10 11 12 13 **Conclusion**

14
15 This novel application of Situational Analysis highlighted a number of issues in the system of support
16 for people with multiple needs and disadvantage, and ways in which VOICES had impacted that
17 system. During the eight years of VOICES, there was evidence of progress against all three priority
18 areas for systems change, primarily tackling the social and health inequities. Where shortcomings or
19 failures to make lasting impact were observed, VOICES commitment to learning and evaluation has
20 allowed the new programs to support people with multiple disadvantage, particularly Changing
21 Futures (DLUHC and MHCLG, 2021), to include measures that can address the problems encountered.
22
23
24
25
26
27
28
29
30
31
32
33
34
35
36
37
38
39
40
41
42
43
44
45
46
47
48
49
50
51
52
53
54
55
56
57
58
59
60

References

Abercrombie, R., Harries E., and Wharton, R. (2015) *Systems Change: A guide to what it is and how to do it*. London: Lankelly Chase. Available at: <https://www.thinknpc.org/resource-hub/systems-change-a-guide-to-what-it-is-and-how-to-do-it/>

Bramley, G., Fitzpatrick, S., Edwards, J., Ford D, Johnsen S., Sosenko F., & Watkins, D. (2015) *Hard Edges, Mapping Severe and Multiple Disadvantage*. London: Lankelly Chase. Available at: <https://lankellychase.org.uk/wp-content/uploads/2015/07/Hard-Edges-Mapping-SMD-2015.pdf>.

Bretherton, J., and Pleave, N. (2016) *Housing First in England An Evaluation of Nine Services*. York: University of York Centre for Housing Policy.

Care Act 2014 (c.23). Available at: <https://www.gov.uk/government/publications/care-act-2014-part-1-factsheets/care-act-factsheets>

CFE Research, University of Sheffield, Network SCA (2020). VOICES' Care Act Toolkit: Improving access to mental health support for people experiencing multiple disadvantage. Sheffield: CFE Research.

Chang, W. C. (2002). The meaning and goals of equity in health. *Journal of Epidemiology and Community Health*, 56(7), 488–491.

Chapman, J. (2004) *System failure Why governments must learn to think differently learn to think differently*. 2nd Edition. London: Demos.

Clarke, A. Situational Analysis: (2005) *Grounded Theory After the Postmodern Turn*. Thousand Oaks: Sage.

Clarke, E., Friese, C., and Washburn, S. (2018) *Situational Analysis Grounded Theory After the Interpretive Turn*: Second Edition. Thousands Oaks: Sage

Department of Health (2012). *National Framework for NHS Continuing Healthcare and NHS-funded Nursing Care*. 2012(November), 140. Available at: https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/213137/National-Framework-for-NHS-CHC-NHS-FNC-Nov-2012.pdf

DLUHC and MHCLG (2021). *Changing Futures*. Available at: <https://www.gov.uk/government/collections/changing-futures>

Egan, M., McGill, E., Penney, T., Anderson de Cuevas, R., Er, V., Orton, L., White, M., Lock, K., Cummins, S., Savona, N., Whitehead, M., Popay, J., Smith, R., Meier, P., De Vocht, F., Marks, D., Andreeva, M., Rutter, H., Petticrew, M. (2019) *NIHR SPHR Guidance on Systems Approaches to Local Public Health Evaluation. Part 2: What to consider when planning a systems evaluation*. London: National Institute for Health Research School for Public Health Research.

Foster-Fishman, P. G., Nowell, B., Yang, H. (2007) Putting the system back into systems change: a framework for understanding and changing organizational and community systems. *American Journal of Community Psychology*, 39: 197–215.

Fowler, P. J., Hovmand, P.S., Marcal, K. E., Das, S. (2019) Solving Homelessness from a Complex Systems Perspective: Insights for Prevention Responses. *Annual Review of Public Health*. 40:465–86.

Author name removed for anonymous review (2021) *Hard Edges Stoke-on-Trent :Reducing the costs of multiple needs to people and services: Financial analysis of VOICES*. Available at: <https://www.chadresearch.co.uk/wp-content/uploads/2022/02/42703-VOICES-Hard-Edges-Stoke-on->

[Trent.pdf](#)

Author name removed for anonymous review (2021) *Investigation of Housing First in Stoke-on-Trent: Evaluation report*. <https://www.chadresearch.co.uk/wpcontent/uploads/2021/09/HF-report-FINAL.pdf>.

Author names removed for anonymous review (2022) *VOICES of Stoke-on-Trent: Legacy evaluation*. Available at: <https://www.chadresearch.co.uk/wp-content/uploads/2022/04/43302-VOICES-Legacy-Evaluation-Digital-Version.pdf>

Homeless Link (2016) *Housing First in England: The principles*. London: Homeless Link.

Jean-Yves Duclos (2006). Equity and Equality. *Health Care and Public Policy*. <https://doi.org/10.4337/9781847207135.00011>

Lamb, H., Moreton, R., Welford, D.J., Leonardi, S., O'Donnell, J., Howe, P. (2019) *What makes a difference. Evaluation of Fulfilling Lives: Supporting people with multiple needs*. London: The National Lottery.

Martin, W., Pauly, B., MacDonald, M. (2016) Situational Analysis for Complex Systems: Methodological Development in Public Health Research. *AIMS Public Health*. 3:94–109.

Martineau, S. J., Cornes, M., Manthorpe, J., Ornelas, B., & Fuller, J. (2019). *Safeguarding, homelessness and rough sleeping: An analysis of Safeguarding Adults Reviews*. London: NIHR Policy Research Unit in Health and Social Care Workforce, The Policy Institute, King's College London. Available at: <https://doi.org/10.18742/pub01-006>

Mathar, T. (2008) Making a Mess with Situational Analysis? Forum: *Qualitative Social Research*, Vol 9, Art.4

Author name removed for anonymous review (2019) *Hospital Discharge and Homelessness: Local stakeholder perspectives*. Stoke-on-Trent: Centre for Health and Development, Staffordshire University.

McIntyre, S., Hewett, N., Medcalf, P. (2015) *Inclusion Health Clinical Audit 2015-16*. London; <https://www.pathway.org.uk/wp-content/uploads/2015/12/ED-Audit-2015-patient-report.pdf>.

Meadows, D.A. (2008) *Thinking in Systems: A Primer*. London: Earthscan

Nichols, N., and Doberstein, C.. (2016) *Exploring effective systems responses to homelessness*. Toronto, Canada: Toronto Press; 2016.

Pollard, N., and Rice, B. (2020) *The VOICES Citywide Learning Programme: Shared learning opportunities to improve support for people experiencing multiple needs*. Stoke on Trent. https://issuu.com/voicesofstoke/docs/voices_learning_programme_evaluation_2020_final.

Rice, B. (2019) *The VOICES Model of using Personal Budgets in Service Coordination*. Stoke on Trent: VOICES.

Rutter, H., Savona, N., Glonti, K., Bibby, J., Cummins, S., Finegood, D.T. (2017) The need for a complex systems model of evidence for public health. *Lancet*. 390:2602–4.

Seddon, J. (2003) *Freedom from Command and Control*. New York: Vanguard Press.

Marmot, M. (2010). *Fair Society, Healthy Lives The Marmot Review*. Strategic Review of Health Inequalities in England.

Takeuchi, D. T., Dearing, T. C., Bartholomew, M. W., & McRoy, R. G. (2018). Equality and equity: Expanding opportunities to remedy disadvantage. *Generations*, 42(2), 13–19.

1
2
3 *Homelessness Reduction Act 2017*. London: HMSO; 2017.
4

5 Williams, P. E., Russell-Mayhew, S., Ireland A. (2018) Disclosing an Eating Disorder: A Situational
6 Analysis of Online Accounts. *The Qualitative Report*. Vol. 23, NO 4, Art. 9, pp. 914-931
7

8 Wilson, B., Astley, P., Cutts, J., Hine, R., McCall, K., Perry, S.. (2016) *Gatekeepers: Access to primary*
9 *care for those with multiple needs*. Stoke-on-Trent;
10

11 https://issuu.com/voicesofstoke/docs/gatekeepers_voices_and_hw_stoke_rep.

12 Wulff, D. P. (2008) Research/Therapy: A Review of Adele Clarke's Situational Analysis: Grounded
13 Theory after the Postmodern Turn. *The Qualitative Report*, 13(3), 31-34. Available at:

14 <http://nsuworks.nova.edu/tqr/vol13/iss3/16>
15
16
17
18
19
20
21
22
23
24
25
26
27
28
29
30
31
32
33
34
35
36
37
38
39
40
41
42
43
44
45
46
47
48
49
50
51
52
53
54
55
56
57
58
59
60

Supplementary file 1. Resources for Situational Analysis

Reports

- Lisa O'Connor (2019) *The Wayfarer and other journeys* <http://www.issuu.com/voicesofstoke>
- VOICES & Expert Citizens (2017) *Stoke-on Trent: Call for Evidence on Social Action* <http://www.issuu.com/voicesofstoke>
- VOICES (2020) *CASE STUDY#1: VOICES' Care Act Toolkit : Improving access to mental health support for people experiencing multiple disadvantage* <http://www.issuu.com/voicesofstoke>
- VOICES & Expert Citizens (2020) *Stoke-on-Trent Community of Practice Guide: How coffee, cake and conversation can promote preferred futures with positive practice.* <http://www.issuu.com/voicesofstoke>
- VOICES (2016) *Prison Release Support : Stoke-on-Trent Community of Practice @SotCoP* <http://www.issuu.com/voicesofstoke>
- Fulfilling Lives in Stoke-on-Trent: Project Plan 2014-2022
- Rice B. (2016) *Hard Edges Stoke-on-Trent :Reducing the costs of multiple needs to people and services: Financial analysis of VOICES* <http://www.issuu.com/voicesofstoke>
- Rice B, (2018) *Hard Edges Stoke-on-Trent :Reducing the costs of multiple needs to people and services: Financial analysis of VOICES* <http://www.issuu.com/voicesofstoke>
- **Author name removed for anonymous review** (2021) *Hard Edges Stoke-on-Trent :Reducing the costs of multiple needs to people and services: Financial analysis of VOICES* <http://www.issuu.com/voicesofstoke>
- **Author name removed for anonymous review** (2021) *Investigation of Housing First in Stoke-on-Trent* <http://www.issuu.com/voicesofstoke>
- Rice B. (2020) *The VOICES Citywide Learning Programme: Share learning opportunities to improve support for people experiencing multiple needs. Independent Evaluation Report* <http://www.issuu.com/voicesofstoke>
- Stoke-on-Trent Safe City partnership (2021) *Multi-agency Resolution Group Stoke-on-Trent: Working Together for Your Community*
- **Author name removed for anonymous review** (2021) *Multi-agency Resolution Group (MaRG): Evaluation report* <https://www.chadresearch.co.uk/wp-content/uploads/2022/01/MaRG-report-final-version.pdf>
- CFE Research, University of Sheffield, Systems Change Action Network (2020) *Improving access to mental health support for people experiencing multiple disadvantage Evaluation of Fulfilling Lives: Supporting people with multiple needs* <http://www.issuu.com/voicesofstoke>
- Rice B. (2019) *The VOICES Model of using Personal Budgets in Service Coordination* <http://www.issuu.com/voicesofstoke>
- Wilson B., Astley P. (2016) *Gatekeepers :Access to Primary Care for those with Multiple Needs* <http://www.issuu.com/voicesofstoke>
- **Author name removed for anonymous review** (2019) *Hospital Discharge and Homelessness: Local stakeholder perspectives* <http://www.issuu.com/voicesofstoke>
- Sharman Sharon (2020) *An Improbable Journey: Exploring a prison release plan - Case Study* <http://www.issuu.com/voicesofstoke>

- 1
- 2
- 3
- 4 • **Author name removed for anonymous review** (2016) *City Centre Rough Sleeping and Street*
- 5 *Activity: Project Report* <http://www.issuu.com/voicesofstoke>
- 6
- 7 • Ornelas, B., Bateman, F., Meakin, A., Cornes, M., Pritchard-Jones, L. (2020). *Multiple Exclusion*
- 8 *Homelessness: A safeguarding toolkit for practitioners. Stoke-on-Trent: VOICES*
- 9 <http://www.issuu.com/voicesofstoke>
- 10
- 11 • Rice, B. (2016) *VOICES – Voices of Independence Change and Empowerment in Stoke-on-Trent*
- 12 *Stakeholder survey report* <http://www.issuu.com/voicesofstoke>
- 13
- 14 • Rice, B. (2017) *VOICES – Voices of Independence Change and Empowerment in Stoke-on-Trent*
- 15 *Stakeholder survey report*
- 16
- 17 • Rice, B. (2018) *VOICES – Voices of Independence Change and Empowerment in Stoke-on-Trent*
- 18 *Stakeholder survey report (Draft)*
- 19
- 20 • Rice, B. (2019) *VOICES – Voices of Independence Change and Empowerment in Stoke-on-Trent*
- 21 *Stakeholder survey report*
- 22
- 23 • Rice, B. (2020) *VOICES – Voices of Independence Change and Empowerment in Stoke-on-Trent*
- 24 *Stakeholder survey report*
- 25
- 26 • Rice B (2017) *Independent evaluation of VOICES: systems change report*
- 27 <http://www.issuu.com/voicesofstoke>
- 28
- 29 • Meakin A. (2020) *VOICES: Legacy Projects: Initiation document and plan*
- 30
- 31 • **Author name removed for anonymous review** (2015) *Right Time Right Place: A Multiple Needs*
- 32 *Charter for Stoke-on-Trent 2016-2022*
- 33
- 34 • Fulfilling Lives (2019) *Changing systems for people facing multiple disadvantage*
- 35
- 36 • Rice B. (2018) *A Model of Specialist Welfare Advice and Advocacy at VOICES: How VOICES*
- 37 *and Citizens Advice Staffordshire North and Stoke-on-Trent have worked together to*
- 38 *provide welfare rights support to people with multiple needs*
- 39
- 40 • VOICES, Citizens Advice Staffordshire North & Stoke-on-Trent, *Brighter Futures, cdas*
- 41 *Stoke-on-Trent, CONCRETE (2020) Welfare Benefits Leading & Learning Engaging,*
- 42 *Learning and Making Progress Together: Year 1 Report 2019-2020*
- 43
- 44 • **Author name removed for anonymous review** (2021) *Welfare Benefits: Leading and Learning*
- 45 *(WBLL) model in Stoke-on-Trent Evaluation report: Embedding a specialist Citizens Advice*
- 46 *adviser in partner organisations, to work with staff and customers on benefits advice for*
- 47 *people with multiple needs*
- 48
- 49 • Mason, K., Cornes, M., Dobson, R., Meakin, a., Ornelas, B., and Whiteford M. (2017)
- 50 *Multiple Exclusion Homelessness and adult social care in England: Exploring the*
- 51 *challenges through a researcher-practitioner partnership. Research, Policy and Planning*
- 52 *33(1), 3-14*
- 53
- 54 • VOICES, Expert Citizens 92016) *The Care Act Multiple Needs Toolkit*
- 55
- 56 • Cornes, M., Ornelas, B., Bennett, B., Meakin, A., Mason, K., Fuller, J., Manthorpe, J. (2018)
- 57 *Increasing access to Care Act 2014 assessments and personal budgets among people with*
- 58 *experiences of homelessness and multiple exclusion: a theoretically informed case study",*
- 59 *Housing, Care and Support, Vol. 21 Issue: 1, pp.1-12, [https://doi.org/10.1108/HCS-09-](https://doi.org/10.1108/HCS-09-2017-0022)*
- 60 *[2017-0022](https://doi.org/10.1108/HCS-09-2017-0022)*

- 1
- 2
- 3 • Expert Citizens, Keele University (2018) *Access to Primary Care Services for Patients with*
- 4 *“No Fixed Abode”: A follow-up of The Gatekeeper’s Report*
- 5
- 6 • NHS Midlands & Lancashire (CSU) (2019) *Guidance for considering the needs of people*
- 7 *experiencing homelessness in commissioning health services*
- 8
- 9 • Expert Citizens (2019) *Portfolio of Positive Practice Supporting People Experiencing*
- 10 *Multiple Disadvantage A showcase of outstanding practice that provide insight to new*
- 11 *ways of working and ideas for systems change*
- 12
- 13 • Expert Citizens (2019) *GP Registration Evaluation Toolkit Accessing Primary Health Care*
- 14 *For People with “No Fixed Abode”*
- 15
- 16 • CFE Research, University of Sheffield, Systems Change Action network (2020) *Improving access to*
- 17 *mental health support for people experiencing multiple disadvantage Evaluation of Fulfilling Lives:*
- 18 *Supporting people with multiple needs*
- 19
- 20 • **Author name removed for anonymous review** (2020) *Insight through experience: How Expert*
- 21 *Citizens are celebrating the nicest people. People, Place and Policy 14/1 pp. 24-34*
- 22
- 23 • CFE Research (2020) *The role of lived experience in creating systems change Evaluation of*
- 24 *Fulfilling Lives: Supporting people with multiple needs*
- 25

26

27

28 **Websites**

- 29
- 30 • <https://www.voicesofstoke.org.uk/>
- 31
- 32 • <https://www.brighter-futures.org.uk/>
- 33
- 34 • [https://www.fulfillinglivesevaluation.org/about/the-partnerships/voices-stoke-on-](https://www.fulfillinglivesevaluation.org/about/the-partnerships/voices-stoke-on-trent/)
- 35 [trent/](https://www.fulfillinglivesevaluation.org/about/the-partnerships/voices-stoke-on-trent/)
- 36
- 37 • [https://www.citizensadvice.org.uk/benefits/sick-or-disabled-people-and-](https://www.citizensadvice.org.uk/benefits/sick-or-disabled-people-and-carers/pip/appeals/mandatory-reconsideration/)
- 38 [carers/pip/appeals/mandatory-reconsideration/](https://www.citizensadvice.org.uk/benefits/sick-or-disabled-people-and-carers/pip/appeals/mandatory-reconsideration/)
- 39
- 40 • <https://www.healthwatchstokeontrent.co.uk/about-us/>
- 41
- 42 • <https://www.keele.ac.uk/socialinclusion/ourpartnerships/>
- 43
- 44 • <https://www.expertcitizens.org.uk/>
- 45
- 46 • <https://www.chadresearch.co.uk/>
- 47

48 **Minutes and papers from meetings of**

- 49
- 50
- 51 • VOICES Legacy Steering Group
- 52
- 53 • Housing First Steering Group
- 54
- 55
- 56
- 57
- 58
- 59
- 60

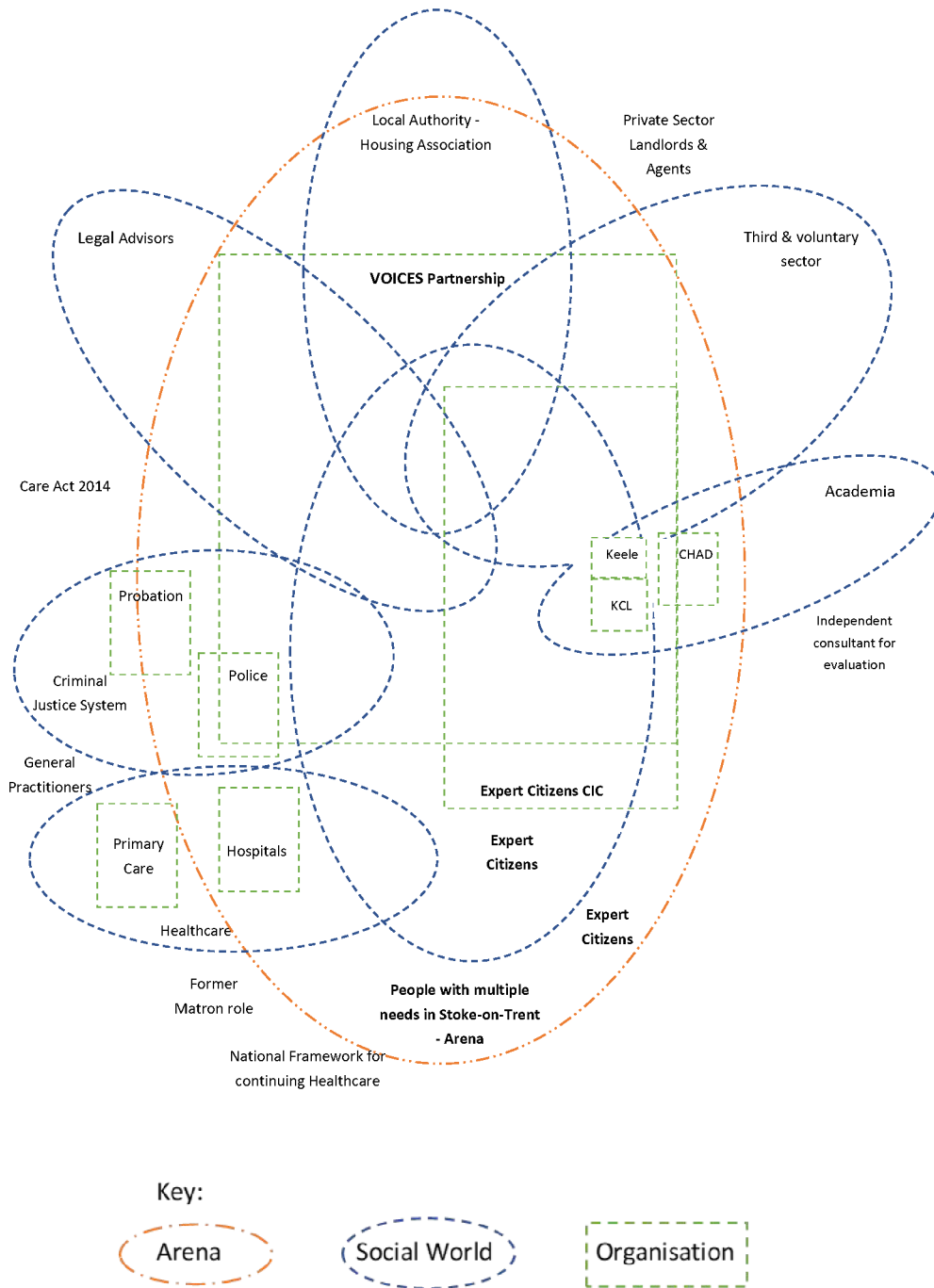


Figure 1. Social worlds / arenas map

1
2
3
4
5
6
7
8
9
10
11
12
13
14
15
16
17
18
19
20
21
22
23
24
25
26
27
28
29
30
31
32
33
34
35
36
37
38
39
40
41
42
43
44
45
46
47
48
49
50
51
52
53
54
55
56
57
58
59
60

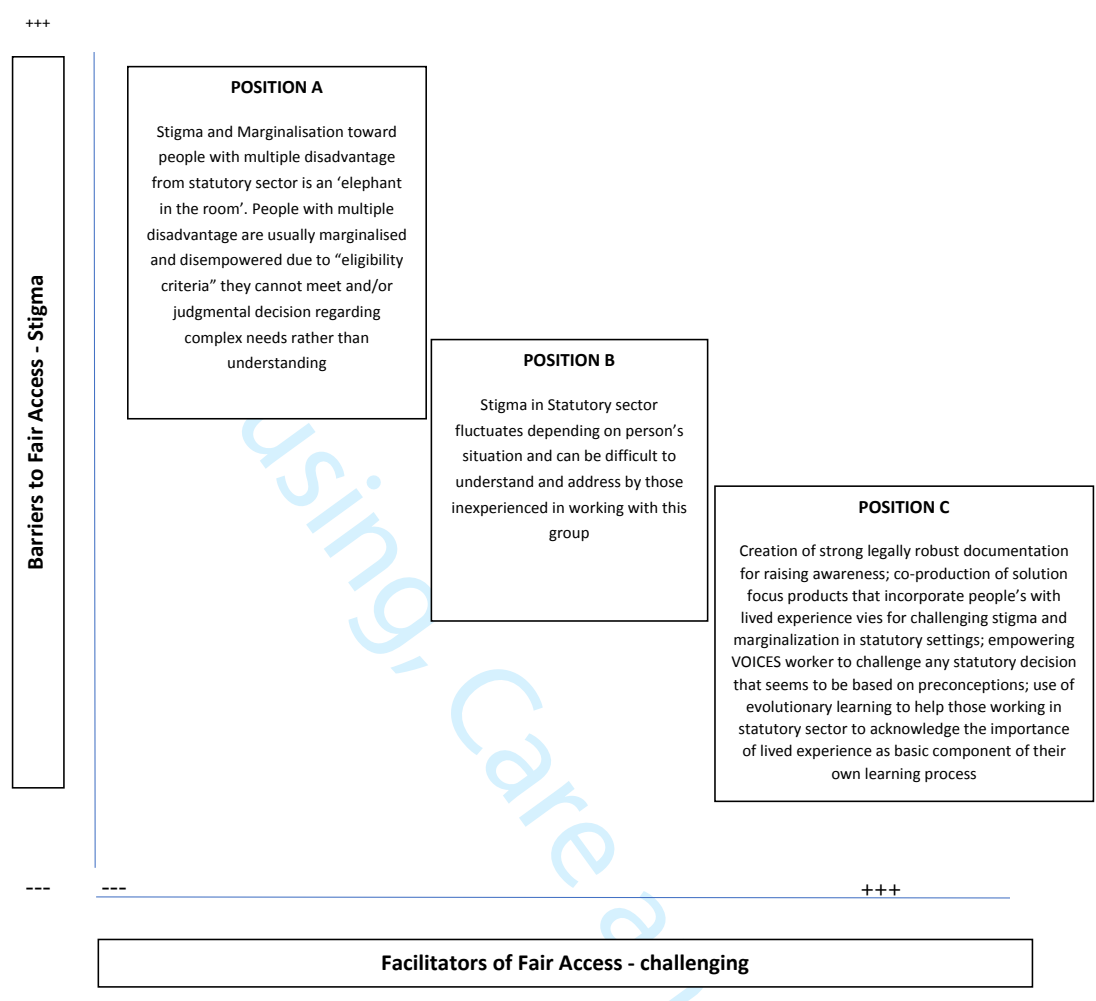


Figure 2. Positional map for stigma and marginalisation as a barrier to accessing services

1
2
3
4
5
6
7
8
9
10
11
12
13
14
15
16
17
18
19
20
21
22
23
24
25
26
27
28
29
30
31
32
33
34
35
36
37
38
39
40
41
42
43
44
45
46
47
48
49
50
51
52
53
54
55
56
57
58
59
60

Housing, Care and Support

1
2
3
4
5
6
7
8
9
10
11
12
13
14
15
16
17
18
19
20
21
22
23
24
25
26
27
28
29
30
31
32
33
34
35
36
37
38
39
40
41
42
43
44
45
46
47
48
49
50
51
52
53
54
55
56
57
58
59
60

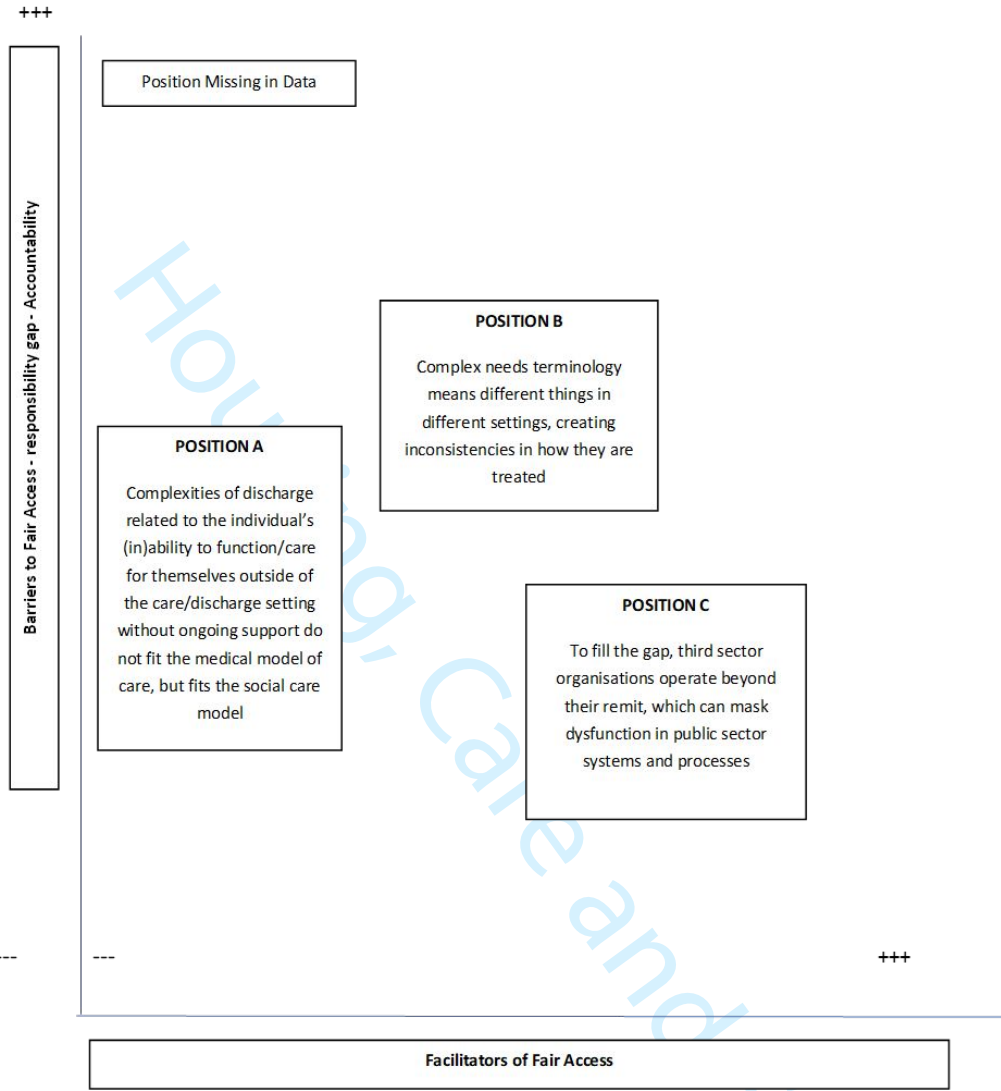


Figure 3. Positional map for responsibility and accountability gaps as a barrier to accessing services

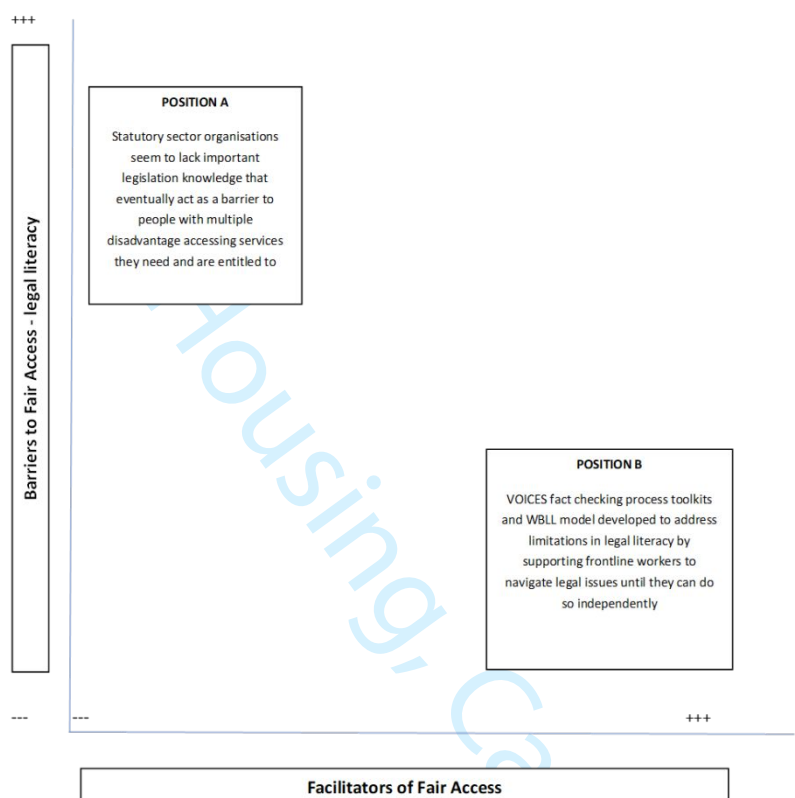


Figure 4. Positional map for legal literacy as a barrier to accessing services

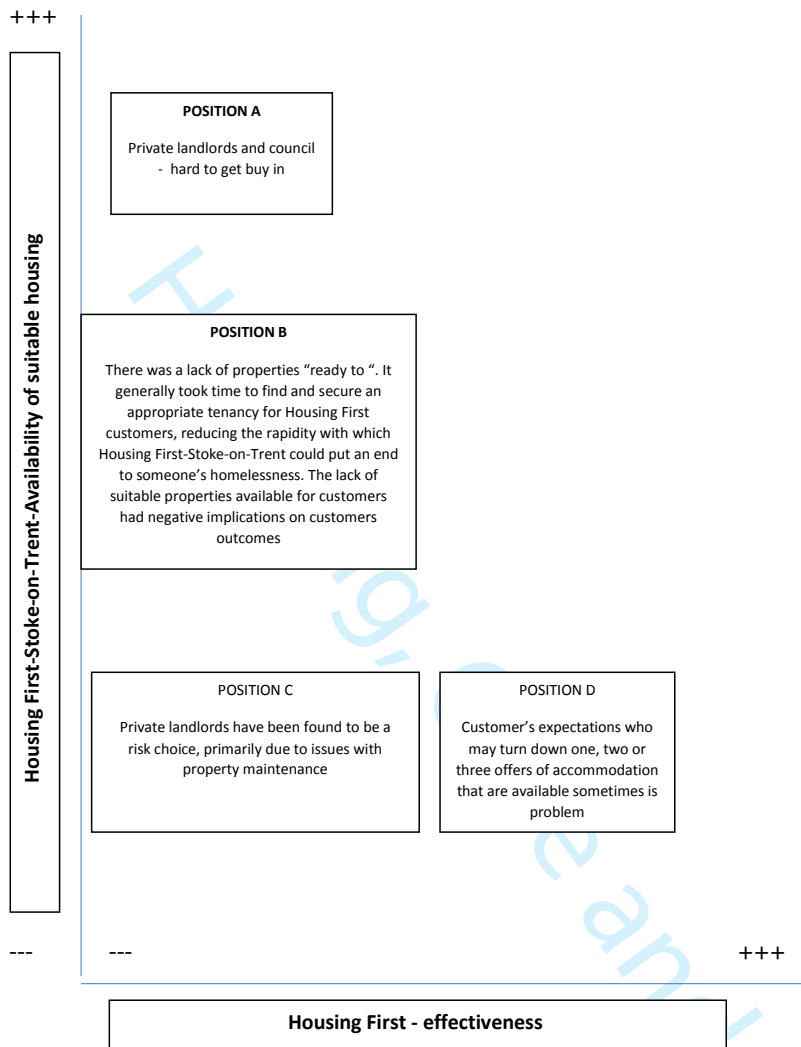


Figure 5. Positional map for availability of suitable housing as a barrier to Housing First

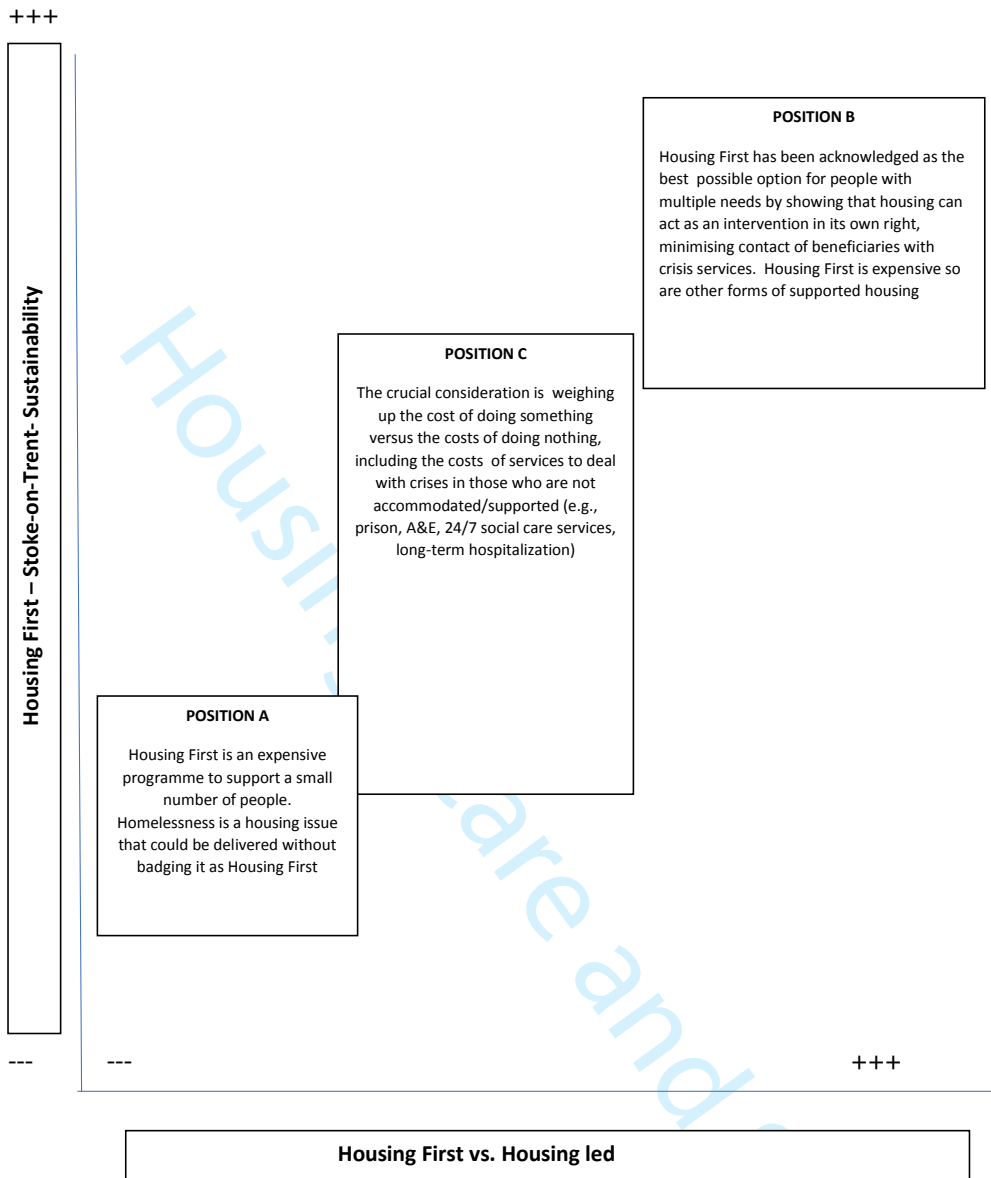


Figure 6. Positional map for programme sustainability as a barrier to Housing First

1
2
3
4
5
6
7
8
9
10
11
12
13
14
15
16
17
18
19
20
21
22
23
24
25
26
27
28
29
30
31
32
33
34
35
36
37
38
39
40
41
42
43
44
45
46
47
48
49
50
51
52
53
54
55
56
57
58
59
60

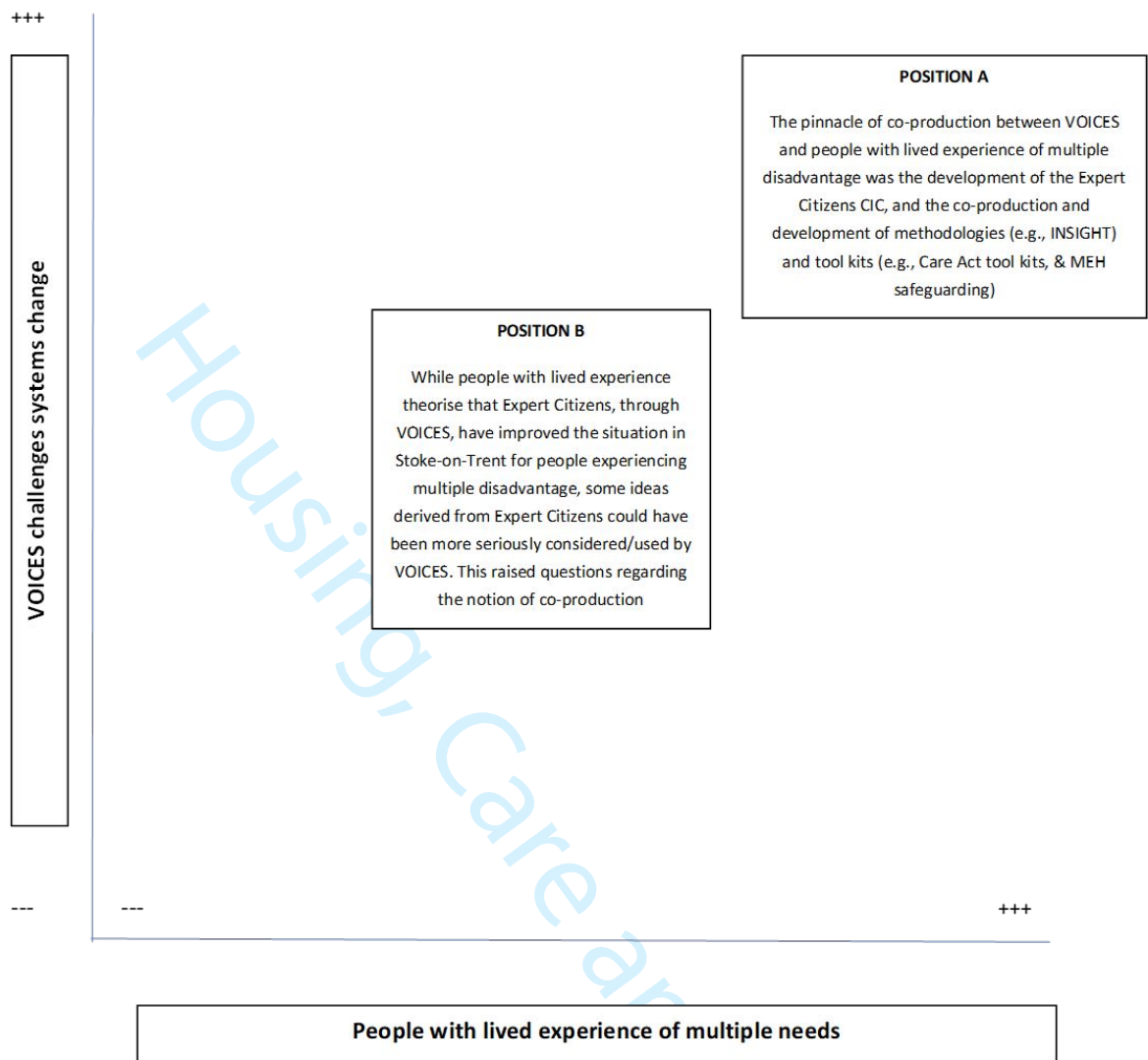


Figure 7. Positional map for the development of Expert Citizens CIC

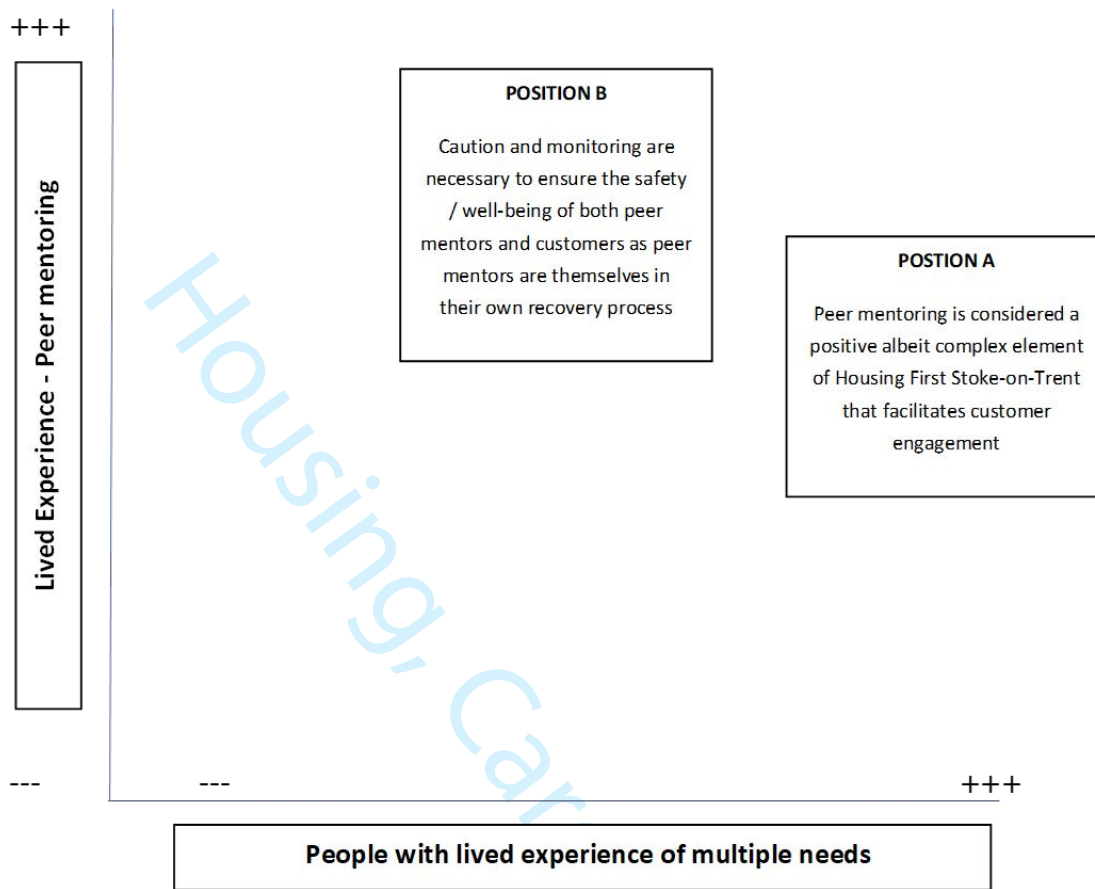


Figure 8. Positional map for use of Peer Mentoring

Article Title Page

Applying Situational Analysis to examine the impact of VOICES on people experiencing multiple disadvantage

Author Details:

[Konstantinos Spyropoulos¹ MSc]

[School of Health, Science and Wellbeing (CHAD), Staffordshire University, Stoke-on-Trent, ST4 2DF, UK +44(0)1782293402 konstantinos.spyropoulos@staffs.ac.uk]

[Christopher J. Gidlow¹ PhD]

[School of Health, Science and Wellbeing (CHAD) - Staffordshire University, Stoke-on-Trent, ST4 2DF, UK +44(0)1782 294330 c.gidlow@staffs.ac.uk]

[Fiona McCormack¹ MSc]

[School of Health, Science and Wellbeing (CHAD), Staffordshire University, Stoke-on-Trent, ST4 2DF, UK +44 (0)1785353416 fiona.mccormack@staffs.ac.uk]

[Andy Meakin² BA(Hons) MBA]

[Federation House Station Road Stoke-on-Trent ST4 2SA UK, 01782 450760 Andy.meakin@voicesofstoke.org.uk]

[Rachele Hine³]

[Expert Citizens CIC, The Dudson Centre, Hope St, Hanley, Stoke-on-Trent ST1 5DD, UK Tel: 01782 450760 insight@expertcitizens.org.uk]

[Sophia Fedorowicz¹ MSc]

[School of Health, Science and Wellbeing (CHAD), Staffordshire University, Stoke-on-Trent, ST4 2DF, UK ,+44(0)1782 294330 sophia.fedorowicz@student.staffs.ac.uk]

Corresponding author: [Konstantinos Spyropoulos]

[Corresponding Author's E-mail: konstantinos.spyropoulos@staffs.ac.uk]

NOTE: affiliations should appear as the following: Department (if applicable); Institution; City; State (US only); Country. No further information or detail should be included

Acknowledgments (if applicable):

We would like to thank all VOICES customers and stakeholders whose data have contributed to this work, as well as all attendees of the stakeholder and Expert Citizens workshops.

Funding: This research was funded by The National Lottery Community Fund through VOICES.

Structured Abstract:

Purpose. This paper reports the use of Situational Analysis as a systems methodology to evaluate the VOICES partnership project.

Approach. Using Situational Analysis and drawing on a range of secondary data sources, a three-stage conceptual mapping process provided a detailed picture of both the non-linear interlinkage and complexity of the local system that VOICES was working to influence, as well as the processes that shaped the experiences of those who act within the situation.



Type header information here

Findings. Data highlighted the systemic challenges facing VOICES customers (e.g., stigma and marginalisation, lack of legal literacy), progress made by VOICES in each of their priority areas, and an overarching theme of VOICES promoting equity (rather than equality) to address failure demand in the system of support for people with multiple needs and disadvantage.

Originality. We present the novel application of Situational Analysis to demonstrate a substantial impact of VOICES, while demonstrating the value of this methodology for complex system's thinking research and evaluation.

Keywords:

multiple disadvantage, Situational Analysis, fair access, Housing First, systems thinking, failure demand

Type footer information here