Coordination practice
INTEGRATED YOUTH CARE

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Integrated Youth Care (IYC) is a cross-sectoral policy programme of the Flemish government in Belgium. It aims to achieve a coordinated approach to help troubled young people and their next of kin. The clients face multi-problem situations (e.g. bad family situation, skipping school, mental issues, etc.) that require a multi-faceted care strategy. The institutional make-up of the care (health, welfare, education) landscape in Flanders, Belgium, however, is relatively fragmented and characterised by strong (sub-) sectors. The governance of IYC is an interesting case to analyse because it entails a mixed horizontal and vertical coordination strategy to unite actors from multiple policy sectors – i.e. to achieve joined-up government within parts of government.

Preface

This coordination practice is a result of research within COCOPS Work Package 5: The Governance of Social Cohesion: Innovative Coordination Practices in Public Management.

The COCOPS project (Coordinating for Cohesion in the Public Sector of the Future) seeks to comparatively and quantitatively assess the impact of New Public Management style reforms in European countries, drawing on a team of European public administration scholars from 11 universities in 10 countries.

The specific objectives of Work Package 5 are:

- To search and identify emerging coordination practices and related steering instruments in public management in European public sectors.

- To compile a case study catalogue of such coordination practices with direct utility to public managers and the research community.

- To analyse the functioning of such coordination practices and to assess their value in countering public sector fragmentation and delivering public value.

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1. THE COORDINATION LANDSCAPE	
Main country characteristics: BELGIUM	
General political-administrative structure	Belgium is a parliamentary democracy and the electoral system is part of a proportional tradition. Proportional systems allocate seats more or less in line with the electoral result (in terms of votes). Coalition formation is a common practice in Belgian politics, at the federal as well as at the regional level.
	Belgium is a federal state with communities and regions, each of which can have their own parliament, government and administration. Flanders decided at an early stage to merge the Flemish Community and the Flemish Region into one Flemish Parliament, Flemish Government and Flemish administration. Flanders can be characterised as a consensual and pillarised society, and the politicisation of the administration is considerable.
	The reform agenda of "Better Administrative Policy" (BBB) hived off policy implementation to agencies of different types (e.g. semi-autonomous ones). BBB also redefined the role of central departments (such as the Departments of Finance or Administrative Affairs) and increased the managerial autonomy of the line departments. BBB restructured the Flemish government in 2006 into thirteen homogeneous policy domains. A policy domain is a collection of policy issues that were shaped into a coherent whole with an associated department and multiple agencies. In addition, there is no longer a hierarchical relationship between the department and the agencies – which is rather unique in Europe – implying that departments cannot steer or give any instruction to agencies.
	Ministers coordinate the department and agencies in vertical policy domains by using a policy strategy document based on the coalition agreement (6 years), and an annual policy letter. Objectives in these policy documents should be translated by these organisations into multi-annual performance contracts which are determined by the minister and his department and agencies, and into an annual business plan. Additionally, ministers should organise and chair a policy council which brings together all heads of departments (or Secretaries-general) and agencies' CEOs (or Administrator-General) in the involved policy domain. However, in several policy domains these policy councils do not function optimally, which is due to a lack of ministerial engagement. Moreover, in the management group, the secretary-general of the department and the agencies' CEOs discuss policy issues in preparation in the policy council and make more operational decisions about policy implementation and management issues.
	There are a limited number of horizontal coordination platforms. At the political level, the cabinet itself is a major horizontal-coordination platform

	between ministers. At the administrative level, the Board of Senior Officials (CAG) and the SG (Secretaries-General) forum are the main horizontal coordination arrangements. The CAG, which is comprised of one senior civil servant per policy domain, is a permanent forum aimed at political-administrative dialogue and coordination on major orientations with respect to the organisation-wide policies (focused on management issues). To prevent different discussions and overlap within forums, the CAG is at the top of its hierarchical relationships with different strategic discussion forums. There are also a number of informal consultative bodies for alignment and coordination across the policy domains, such as the SG forum.
	In the case of "vertical" policy issues, this "BBB structure" has created several coordination instruments and platforms; however, for some policy issues that cut across policy domains or that are government-wide, policy coherence requires extra efforts. Nonetheless, the coordination instruments created by BBB are predominantly vertically oriented.
Coordination discourse	The current debate in the Flemish community is on policy coherence and governance. The OECD writes: "the government difficulties with BBB are maybe less due to the BBB per se but maybe more to the mismatch between old governance procedures and habits and the new governance paradigm." The Economic and Social Council of Flanders (SERV) writes that one of the major challenges after BBB is to decrease compartmentalisation and achieve better policy coordination. Scholars indicate a lack of mutual trust between the political and administrative levels. Besides that, other challenges include insufficient support of ministers and cabinets for the functioning of new steering and monitoring instruments, a lack of the necessary collaborative culture between departments and autonomous agencies and no attention for the power allocation between the senior officials and the need for organisational culture changes. This critique was taken up by several high-level platforms and has made its way to the coalition negotiations in 2009. The Flemish coalition agreement of 2009-2014 pays considerable attention to issues such as counteracting compartmentalisation, working in an integrated fashion, developing a collaborative culture and achieving a cross-policy domain and multi-level collaboration.
Policy area	The coordination practice under review is a policy programme aimed at achieving "Integrated Youth Care", improving service delivery for young troubled persons and their next of kin. The two competent ministers in this case are the Flemish Minister for Welfare, Public Health and Family, and the Flemish Minister for Education, Youth, Equal Opportunities and Brussels Affairs. Coordination is strongly organised within the different (sub-) sectors, and the challenge of IYC is to break through these silos and coordinate their strategies and actions from a client perspective. The private sector is involved through various non- and social-profit organisations offering all kinds of care, often organised at different tiers

	and with powerful umbrella organisations, which are mostly financed and regulated by government, but have considerable autonomy.

2. COORDINATION PRACTICE: Integrated Youth Care	
2.1. **Substance**	
Country	Belgium, Flanders
Area	Health (Youth Care)
Main characteristics of the practice	The coordination practice we describe here was specifically designed to bring about more horizontal and vertical coordination between relevant actors to achieve integrated service delivery for young troubled persons.
	IYC is both a goal and a policy programme; a coordinated approach to help troubled young people facing multiple problems (e.g. health issues, bad family situation, dropping out of school, mental issues, etc.) that requires a multi-faceted care strategy. The institutional make-up of the health and care sector in Flanders is fragmented and involves six strong (sub-) sectors (see Table 1).
	Five sectors are part of one policy domain of the Flemish government (the "Ministry of Welfare, Health and Family"), but are organised at different levels (central, regional and local), operate very autonomously within separate administrative units, have different types of target groups (e.g. defined by age, type of problem, etc.), have staff from different backgrounds and have their own specific instruments and services.
	In the nineties, it became clear that many young people were not helped (enough) by these separate sectors (e.g. they were driven from pillar to post, or care was very ad-hoc without follow-up) – they required a more integrated approach due to the complexity of their problems (e.g. the client's trouble was not only a matter of school attendance, but also related to family situations, emotional stress, etc.). A new policy framework named "Decree [=Flemish law] Integrated Youth Care" was approved on 7 May 2004 in the Flemish parliament. The goal of IYC is to achieve a coordinated approach to help troubled young people and their next of kin.
	For this case in particular, there is a management committee, which joins the six public managers of the sectoral administrations involved. They are supported by a staff of policy experts and an advisory board consisting of aid providers from different sectors, and client representatives.

	At the level of the central administration	At the local level
(1) Children and family affairs	Child and Family Agency	Different organizations (e.g. Centres for Integrated Family Care; Trust Centres for Child Abuse)
(2) Disabled persons	Flemish Agency for the Disabled	Different organizations (e.g. Day Care Centres)
(3) General welfare work	Department of Welfare, Health and Family	Centres for General Well-being
(4) Mental health	Agency for Care and Health	Centres for Mental Care
(5) Youth care	Agency for Well-being of Young Persons	Different organizations (including closed centres for juvenal delinquents)
(6) Student counseling:	Ministry of Education	Centres for Student Counseling

Table 1: The six main sectors involved in Integrated Youth Care

Background and initiation of the practice	The coordination practice of IYC was initiated because the matter was salient: many actors reported gaps in the system, and a number of incidents were also reported in the press.

The Decree describes the goals, target group, central principles and policy lines, which are essential building blocks to achieve the overall coordination aim to provide IYC:

1) Modularise the "supply" of youth care: try to get a grip on the fragmented and wide range of care by defining it into more "standardised" packages that could then be linked to a more systematic proper referral between care organisations and the creation of care trajectories.

   In terms of coordination, this standardisation should create proper care chains, achieving co-ordination between aid actors at the operational, service-delivery level.

2) Distinguishing between those actors and services that are directly accessible (RTJ) to youngsters (e.g. a centre for mental health where they can go without referral) and those that require a referral (NRTJ) by another actor (e.g. certain reception or crisis centres to which young |

people can be referred by a centre for mental health). The latter is often more far-reaching and/or expensive (e.g. admission in an institution) and therefore a referral is required.

In terms of coordination, this policy line helps to separate different "types" of issues youngsters face, so that each "type" is channelled to the right service delivery chain, and ensuring that the most costly services (NRTJ) are only used if necessary.

3) Networks for Direct Accessible Youth Care (NRTJ) at the (sub-) regional level: most of the youth care in Flanders is directly accessible to young people. These networks join all providers in a certain region. The networks have goals that can only be achieved if the providers collaborate. Their main task is the organisation of a qualitative access to youth care, ensuring that a client, regardless of which door he knocks on, is directed to those modules most fitting his needs and questions. Other tasks include setting up a system of care coordination and creating awareness in organisations by distributing information on the access and possibilities of integrated youth care.

These are regional coordination platforms that enable the better cooperation of actors involved, resulting in better service delivery.

4) Networks for Emergency Care at the (sub-) regional level: Although there are long waiting lists for certain types of care (e.g. places in residential care), there are emergency or crisis situations in which an immediate response is required (e.g. attempted suicide or domestic violence). These networks try to optimise the access and operations of the Flemish emergency care. Regional crisis registration centres have procedures and up-to-date overviews of available (types of) places in institutions. They provide short-term relief.

As referred above, these are regional coordination platforms that enable the better cooperation of actors involved, resulting in better service delivery.

5) An inter-sectoral portal/gateway to indirectly accessible modules of youth care: this portal would allow the primary/directly accessible actors to refer youngsters, if necessary, to other actors, using modules to ensure a systematic referral basis.

In terms of coordination, the portal ensures that clients are treated equally, ensures that services delivered for a certain issue are comparable and understandable for all actors involved, and it functions as a neutral "dispatch" for clients.

6) Guidance in care trajectories: ensuring that youngsters are not only referred to the right actors, but also monitoring to what extent the problems are solved or not.

Coordination here concerns ensuring follow-up and evaluation of care

chains – quality control.

7) Clarifying the relationship with judicial youth care: judicial or legal youth care involves the federal level, featuring care strategies that are linked to legal proceedings and legal protection – this type of care does not require consent of youngsters, but is forced or mandatory.

In terms of coordination, while the Flemish government holds most relevant competences, the federal government also controls part of the aid spectrum. By clarifying the relationship between the two, overlap or blind spots in the aid of both actors should be abolished and efficiency gains can be reached.

8) A system for inter-sectoral data processing: to provide integrated care, the exchange of information between care organisations about the client is vital. Information on clients was not shared, and each actor and sector had their own data sources and information management systems. Communication between actors was difficult or absent for various reasons (e.g. privacy laws).

This system should provide the informational backbone for the coordination of IYC: it ensures informed interactions and allows for the evaluation of the coordination at the strategic and operational levels.

9) Structures to coordinate policy: to achieve this, a permanent coordination between policies and actions of the various sectors at different levels is required.

Coordination here concerns creating organisational structures and interfaces for coordinated action.

It is clear that these policy lines are of a very different nature and focus: they involve substantive issues (e.g. defining modules), process and structural issues (e.g. creating networks to deliver care), information issues (e.g. monitoring) and policy issues (e.g. coordinating between different policies). Some of these policy lines are developed in the Decree in more detail, while other elements had to be further defined and operationalised in implementing orders. After a number of years, new policy lines were added:

10) Societal necessity: this is a merger of elements from other policy lines, namely the relation with legal youth care, and is linked to emergency care. While emergency care is mostly dependent on the consent of the clients, there are also urgent situations in which clients (young people or their parents) do not ask for care themselves, but require immediate help, which, if necessary, is imposed by a juvenile court.

Coordination is here specifically focused on coordination action in crisis situations by linking relevant actors.

11) Regional projects: collaborative initiatives by care workers in regions through an ad-hoc project (e.g. making a certain joint care tool) may be

	subsidised by the Flemish government as part of IYC.
	Coordination in this case is seen in terms of providing an instrument to experiment with and test coordination initiatives.
	IYC wants to achieve these results by deploying a collaborative governance model and envisions a restructuring of the youth-care-service delivery in four subfields: directly-accessible youth care (RTJ), indirectly accessible youth care (NRTJ), emergency and crisis care, and legal youth care. Each would be accessible by their own access portals, where youngsters are screened (and dispatched) to direct them to optimal care. Three IYC-principles are: (1) a single proper entrance/reception for the young person and optimal reference to the most appropriate care providers, (2) optimal coordination between care providers, and (3) continuity in the care trajectory of the involved youngster following steps 1 and 2. In order to make this work, the organisation and structuring of the access portals is essential: the broad entry through RTJ, the societal necessity for legal youth care, the inter-sectoral portal for NRTJ and the registration centre for emergency youth care.
Time frame	The "Decree Integrated Youth Care" was voted on and approved on 7 May 2004 in the Flemish parliament. We will discuss the achieved results during the period 2004-2010 (which was when this study was carried out).
	Modularising the "supply" of youth care was prepared (e.g. writing up care supply in modules), a first tool was created (database and guide), but the desired effects were not yet achieved, the modules have not yet made the care supply more transparent, care organisations have not yet adapted or created new care programmes based on the latter, and it has not led to identifying and reduction of overlapping care.
	Distinguishing between direct accessible (RTJ) and indirectly accessible youth care (NRTJ) was almost completely implemented, but the end goal has not yet been achieved. The final decision for certain modules (e.g. to be RTJ or NRTJ) is part of the process to decide on the installation of the inter-sectoral portal.
	Creating networks for Direct Accessible Youth Care at the (sub-) regional level was done, but the extent to which they were active varies considerably across the different networks. In comparison to the networks for emergency care, the goals of these networks are multiple and rather vague. Both at the Flemish and local levels, a lot of effort was made to improve accessibility, coordination and continuity with varying effects.
	Creating networks for Emergency Care at the (sub-) regional level was done in all regions. The coordination of the emergency care seems to function well, and it is seen as one of the major achievements of IYC so far. The main reasons for this success, in our opinion, can be attributed to the high sense of urgency, little or no fear that collaboration would affect individual actors' interests, and the fact that "emergency care" as an issue allowed

for clear definitions, a clear division of tasks and the organisation of the chains in different steps.

Creating an inter-sectoral portal/gateway to indirectly accessible modules of youth care is described as key for IYC, but was not implemented despite the deadline of 1 January 2008 in the Decree. This issue was very salient and contested, because the inter-sectoral portal would affect the current state of affairs (i.e. division of tasks between the sectors). A participative decision-making process was organised, but stalled several times, due to disagreement with sectoral players. Additionally, frequent ministerial turnover and other factors resulted in the lack of political interference to speed up the process or to make the necessary harsh decisions. However, at the end of 2010 a political decision was taken to organise this Portal. The new deadline is 1 January 2014, and a "Portal Manager" has since been appointed to ensure progress.

Organising cross-sectoral guidance in care trajectories did not succeed. No system was set up due to the lack of enthusiasm of the sectoral actors, as well as to the difficulty of delineating this task and allocating it among the sectors.

Clarifying the relationship with judicial youth care was subsumed under the Societal Necessity.

Developing a system for inter-sectoral data processing failed, although some preparatory work was done. However, aligning the very different systems in the involved sectors proved very demanding, highly complex and highly salient. Such a system proves crucial to achieve coordination, because the lack of inter-sectoral data impeded the clear diagnosis of problematic inter-sectoral trajectories, the number of in- and outgoing youngsters in such trajectories and the effects of such care.

Setting up structures to tune or coordinate policy was done. All structures and bodies foreseen in the Decree and Implementing Orders were installed and are operational. All policy plans they had to make are present. However, the coordinating effects overall seem to be suboptimal (e.g. several decisions taken by the coordinating structures were subsequently not followed up by their members).

Developing Societal Necessity was not fully accomplished. A report was written, but progress on this issue is limited at the time of writing, and the interaction with legal youth care is complex (among other things because the federal level is an important player here, with its proper agenda and institutions).

Enabling Regional Projects was created as an instrument, providing regions with more autonomy to deal with certain goals in their regional plans. These projects are various and appreciated, but a major criticism is that the money is only available for a limited period of time, and successful projects come to a halt once funding stops.

	As most of the policy lines are strongly interlinked and the (non-) results achieved in one policy line affect the progress of other lines, coordination only improved to a certain extent, with emergency care networks as the "best" practice.

2.2. Structure and actors

Basic features	To achieve non-hierarchical inter-sectoral and multi-level collaboration, IYC policies and actions are developed through network arrangements at different levels. All these structures concern youth, but the focus varies depending on the type of issues they face and the consultation between care workers from organisations in the field, their management and policy actors at different levels.
	The most basic governance level is the daily interaction between individual care workers in the field and their clients; this level has no separate structure – it is on a case-per-case basis and ad-hoc. On a local scale, care organisations are clustered in networks, coordinated by network steering groups. These include separate steering groups for networks for indirectly accessible youth care (14 in total) and networks for emergency care (10 in total). These network steering groups are supported by Flemish civil servants who act as network managers.
	On a higher scale, there are regions with regional steering groups (there are six, matching the boundaries of the five Flemish provinces + Brussels). On the level of Flanders (i.e. the central level), the so-called management committee unites the top civil servants of the six sectoral administrations involved in IYC, supported by a policy support team (BOT). They interact with the political level (involving at least two ministers) and are advised by an advisory council on IYC, made up of various stakeholders (e.g. client representatives).
Main tools	Coordination was to be achieved by focusing on three levels: the level of the individual professional care provider (i.e. working with one client to improve his situation), such as social workers, psychologists, etc. The second level is the quality of care provided by care organisations, the main questions being how to improve care and achieve a higher level of quality. The third level is the strategy deployed by care organisations: to what extent are organisations involved in making collaboration part of their policy? The governance structures refer to these three levels. Hence, the governance structure is rather complex and multi-layered.
	Formally, the network managers are responsible for supporting the local network steering groups and regional steering groups; supporting deliberation in the steering groups both related to substantive and practical matters; synthesising information on progress of the network and providing feedback to network steering groups; communicating from other levels and structures to the network and vice versa; stimulating and

	facilitating the transition process in each stage; and monitoring agreements made in the network. They also liaise between the network and the government by monitoring policy evolutions in IYC, communicating them and linking them with regional dynamics, and safeguarding the goals, planning and rules of IYC.
	For the IYC, different resources were deployed. A special task force with a programme manager was created at the Flemish level. The Flemish administration also deployed regional teams to organise and monitor the policy lines concerned. In terms of financial resources, the picture is not very clear, but most resources involved manpower and time rather than direct financial support (some exceptions include limited budgets for regional projects).
Main actors	A range of departments and agencies within the Flemish government, political actors and various civil-society organisations are involved in Integrated Youth Care. In the policy sectors concerned (i.e. health, welfare, education), the social-profit/not-for-profit actors hold strong positions at various tiers through their umbrella organisations and connections to different political parties. Their strong position is institutionalised through various decrees and financial support through government subsidies. Overall, implementing IYC is considered a rather "technical" matter, with a lot of administrative effort put into it. However, because of the linkages between certain care and aid organisations and politicians, it has always been monitored by politics, including an ad-hoc committee in the Flemish parliament. The issue is politically salient, on the one hand because it involves youngsters with problems, touching upon the world of many families and citizens, but on the other hand because it concerns vested interests in the welfare, health and education sectors.

2.3.   Impacts and effects

	The IYC had positive effects in terms of the willingness and openness of partners to collaborate, to build reciprocal knowledge and trust, as well as to create clear network forums for exchange and consultation. However, besides specific advances and good functioning emergency-care networks, progress towards more integrated youth-care help has been less explicit in the daily care practice than initially hoped for.
	In terms of the governance model of the IYC initiative, four main problems can be observed: getting priorities right; getting the right governance mechanisms in place; the problem to translate inter-sectoral collaboration objectives into sectoral policies; and the absence of appropriate accountability mechanisms for network progress and results. These flaws were identified by an evaluation in 2010 and have been subsequently amended through changes to the relevant decree and other reforms.
	Regarding the problem of getting priorities right, the 11 policy lines are not

parallel and equal tracks – there are a number of sequential linkages among them. These policy lines can be organised into three "categories" that together should lead to a coordinated practice: hardware, software and working areas.

The modules and the distinction between direct and indirect accessible youth care for instance are the means (or preconditions) necessary to get other policy lines – in this case the inter-sectoral portal – organised. Developing modules should also help to bring about a common language to be used in the future development of IYC. The policy line on policy coordination, setting up networks for urgent help and directly accessible youth care, are preparatory steps to organise (activities of) the partners involved.

It is clear that in the past years, the Flemish government pursued the implementation of these preconditioned lines, but simultaneously focused on developing preparatory work on other policy lines. However, at several moments the implementation of the "hardware" or governance structures stalled, which caused the other policy lines to lose substance and be stalled.

By implementing some "hardware" blocks, governance structures were established, but no actual changes in the field of youth care were achieved. For the latter, other policy lines are crucial. The missing blocks are those that should affect the operations of different sectors: the inter-sectoral portal, the inter-sectoral data processing and the trajectory guidance. Implementation gaps are explained by political salience: all three measures impact directly the division of competencies between the sectoral partners and their way of working. The political decision to create the inter-sectoral portal by early 2014 created a new momentum and will most probably solve the current problem.

Regarding the choice of the right governance mechanisms and instruments for the right job, two main flaws relate to the mix of governance mechanisms and instruments in the governance model.

The first flaw was implementing the most far-reaching measures through a network mode. Although trying to achieve the voluntary implementation of certain policy measures through network-like negotiations is noble and, given their political salience, even welcome, this network-like approach is not right for deciding and implementing policy measures that aim for fundamental changes in task allocations between sectors and organisations.

The second flaw is that while the network approach was followed in order to implement the most drastic measures, a more hierarchical, top-down mode was chosen to deal with the support structures (namely the steering groups and networks at different levels). While these networks bring together (semi-) autonomous partners of the various sectors with the idea that they could develop IYC initiatives that fit the needs and concerns in

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each area in a bottom-up way, the Flemish government started to coordinate them more hierarchically, e.g. by defining in a top-down way the goals and activities that networks should and should not pursue.

The recent amendments to the decree of IYC now allows for a more balanced governance approach with the use of hierarchical governance for the "hard ware" components (e.g. the inter-sectoral portal), while applying network-type governance to the support structures. The latter allows more autonomy for steering groups and networks to define and pursue their own priorities. This should have a positive effect on the dynamics within the reform project and the engagement of the involved actors.

Regarding the problem of linking inter-sectoral collaboration with sectoral policies, while IYC is a policy aimed at creating linkages and coherence between six autonomous sectors, the IYC instruments were not linked to the governance mechanisms and instruments that were already used within these sectors by the government to steer care organisations, i.e. the sectoral governance models. As a result, the sectoral care organisations received separate and, at times conflicting, steering signals from the central level. On the one hand, they received horizontal coordination impulses of IYC (e.g. to draw up modules, to participate in networks, etc.). But on the other hand, the traditional vertical coordination instruments in their sector or silo did not focus on or refer to IYC objectives (and instead kept them focused on their services, target groups and sectoral defined result targets). There are now several measures taken to remediate this point.

Regarding assigning accountability for inter-organisational collaboration to actors at all levels, there was no clear allocation of accountabilities regarding the progress and success of the IYC reform and of the cross-sectoral collaboration. The top managers of the six involved administrations (department and agencies) were not held accountable by their minister or parliament for achieving the deadlines and objectives of IYC. Within the sectors no accountability instruments were devised to hold the care organisations accountable for the extent to which they invested in cross-sectoral collaboration. Moreover, there were no mechanisms to hold networks and steering groups as platforms for joint decision-making accountable. A lack of accountability also caused an attenuation of allocations of responsibilities, causing a situation of "organised irresponsibility". Recently there has been improvement in the way accountability for IYC is organised.

2.4.	**Lessons learned and policy recommendations**

There are several specific lessons to be drawn from this case, but we focus here on those issues that could be relevant for other similar cross-sectoral programmes in other jurisdictions and other countries.

	1) Select a governance model to stimulate cross-sectoral collaboration, balancing hierarchical and network coordination. The IYC case has shown that too much reliance on network coordination is not always sufficient to overcome policy silos and sectoral interests.
	2) Prioritise coordination efforts. Define priorities by making them explicit and anchoring them. The end goal of cross-sectoral collaboration and, more importantly, how sectors should adapt their practices to achieve the latter should be made explicit and should serve as a model for the involved partners.
	3) Create ownership with the involved organisations. Until recently IYC was insufficiently "owned" by the six sectors; many actors considered it a "new" seventh sector trying to compete with or even overrule their sector. Sectors have to be made responsible and held accountable for the implementation of cross-sectoral programmes in their sectors, creating an inter-sectoral practice embedded in the sectors themselves instead of a separate field.
	4) Align sectoral policies with cross-sectoral objectives and adjust sectoral governance instruments in order to stimulate cross-sectoral collaboration.

2.5. Further information

Data and references	This case draws on empirical evidence from the evaluation research commissioned by the Flemish government and carried out by Van Tomme et al. (2011), based on policy content and the achievement of outputs and outcomes. The study followed three stages. First, the policy department competent for implementing IYC provided us with data to reconstruct the policy theory and practice. This information was checked and supplemented in a second stage, by interviewing (individually and in groups) actors (14 persons) and organising focus groups (78 persons in 10 focus groups, being one focus group per sector, one with client representatives, one with other relevant sectors, one with the network managers and Flemish IYC policy team, and one focus group with the Flemish strategic advisory council). Finally, a symposium with stakeholders and policy makers was organised to debate our findings and to look for ways to improve the IYC policy. The symposium provided input for the Flemish administration to revise their policy. All info on Integrated Youth Care is available at www.jeugdhulp.be (in Dutch, last accessed 26 November 2012). References: Integrale Jeugdhulp. 2010. *Werkmap Integrale Jeugdhulp* (Manual for Integrated Youth Care). Brussel: Vlaamse Gemeenschap.

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