Systems thinking in
partnership working for wellbeing and health
practice
in an English city:
absent competence or constrained capability?

The findings of research[1] carried out by:

Helen Wilding,
Wellbeing for Life Development Lead,
Newcastle upon Tyne, UK

Correspondence to:
Helen Wilding
helen.wilding@newcastle.gov.uk

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1   The research was carried out as part of the author's studies towards an MSc Systems Thinking in Practice with the Open University, UK.

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Helen Wilding, October 2012

Executive Summary

The World Health Organisation (WHO) has drawn attention to new understandings of wellbeing and health as the emergent property of a range of dynamic, interacting variables and highlighted the need for a 'new way' of working based on ideas from Systems (World Health Organisation, Regional Office for Europe 2011).

Currently, as a result of changes being introduced through the Health and Social Care Act 2012, all English Local Authorities, are establishing new Health and Wellbeing Boards and learning to work with new partners. This makes it a pivotal time to transform partnership working for wellbeing and health. How can this opportunity be used to bring about the 'new way' of working that the WHO recommends?

Although partnership working was introduced as a way of taking a systems approach, there is research evidence to suggest that systems thinking is not yet an integral part of partnership working for wellbeing and health practice.

The dominant way of viewing this situation in published research and practice is to regard systems thinking as an 'absent competence', particularly amongst leaders. This has led to leadership development programmes with 'systems thinking' as a key development area.

An alternative framing is to think of systems thinking as a natural capability of all those involved in partnership working for wellbeing and health. Rather than being 'absent', it is possible that these capabilities are constrained by the setting in which people work.

It is this alternative framing that fits with the informal observations that I made as I carried out my work, facilitating and coordinating partnership working for wellbeing and health in Newcastle-upon-Tyne, in conjunction with studying towards an MSc in Systems Thinking in Practice. The final project for the MSc was the opportunity to see if that framing could be supported by, and developed through, literature review and empirical evidence, using Systems to underpin both the content and the research praxis of the study.

Systems thinking is demonstrated through a person's talk or actions. This study concentrated on talk and actions reported within talk. The primary research entailed recording the talk of eleven senior people involved in leading partnership working for wellbeing and health. The samples of their talk were transcribed and analysed to reveal:
- the use (or otherwise) of systems thinking
- the appreciation (or otherwise) of practices that are consistent with those that enable, rather than constrain, systems thinking.

The analysis of the talk samples suggested that:
- natural systems thinking capabilities are evident
- one 'constraint' to utilising those capabilities is 'Systems Literacy' (knowledge of the concepts, language and tools of Systems)
- there is an appreciation of practices that enable systems thinking because they are almost synonymous with those advocated as 'good' for effective partnership working. These practices play out at personal; organisational; partnership; and national levels.

Drawing on these conclusions and learning from existing published research, proposals are made about the 'determinants of systems thinking in partnership working for wellbeing and health'. These are summarised in a conceptual model which is intended to be used to help understand the variables influencing systems thinking in partnership working for wellbeing and health by both researchers and by practitioners. However, it does not itself 'prescribe' actions to create change because local circumstances will shape both the desirability and feasibility of possible actions.

The model's value lies in supporting those wanting to enhance the use of systems thinking in partnership working for wellbeing and health to move beyond a singular focus on leadership development to also consider creating conducive settings through meetings styles or particular ways of planning. The right 'setting' increases the likelihood of people utilising their systems thinking capabilities, even without formal Systems education.

1. Introduction

Although systems thinking has been identified as important to work in wellbeing and health (Section 2), systems thinking is not currently an integral part of partnership working for wellbeing and health practice (Section 5).

The focus of this study arose from the desire to have a useful way of understanding – or framing – the current situation to help those seeking to improve it, whether as practitioners in Newcastle or elsewhere or as researchers (Figure 1).

Figure 1: The influences providing the rationale for this study

The predominant framing in literature and practice seems to be that of 'systems thinking as an absent competence'.   The focus is particularly on 'leaders' because they "influence people and events directly by what they say and what they do and indirectly by implementing or modifying relevant programmes, systems and structures" (Alban-Metcalfe & Alimo-Metcalfe 2010, p.4). As an example, Hunter (2009) outlines the importance of leaders in bringing about a paradigm change as well as making sure the change results in better health outcomes. Whilst there is an ongoing debate about the differences between leadership in a partnership setting as compared to a single organisation (Armistead et al. 2007), systems thinking is identified as a key dimension of the competences leaders need (e.g. Hunter 2009; Alban-Metcalfe & Alimo-Metcalfe 2010). This emphasis on a competence gap in leaders has led to one English region resourcing an evaluated programme of leadership development (Carr et al. 2009).

Whilst I agree with the importance of systems thinking amongst all involved, this framing, and the actions that it leads to, seemed to be an example of the 'trap of reductionism' (avoiding inevitable interconnectivity) (Reynolds & Holwell 2010a, p.6) and a manifestation of research's "romance with critique at the expense of appreciation" (Ludema et al. 2006, p.155).

My observations and experiences facilitating and coordinating partnership working for wellbeing and health led me to claim that research methodologies have not to date recognised the natural systems thinking capabilities of leaders and other participants in partnerships and the constraints imposed by the setting in which they work. These experiences led to an alternative framing of 'systems thinking as constrained capability' which is consistent with the explanation of Ison that many people do have some form of systemic awareness, even though they themselves may not recognise it as such (2010b, p.28); and his exploration of settings which constrain systems practice (2010b, chap.9).

The research sought to support (or refute) and develop the 'systems thinking as constrained capability' framing on the assumption that it held potential as a useful way of understanding, and opening up possibilities to develop, systems thinking in partnership working for wellbeing and health practice. To do so it drew from two sources of evidence:

- the 'talk' of eleven senior people involved in partnership working in Newcastle upon Tyne (see Appendix 1 for methodology).
- published literature in intellectual fields relevant to the domain of practice (Figure 2) as well as specific Systems literature
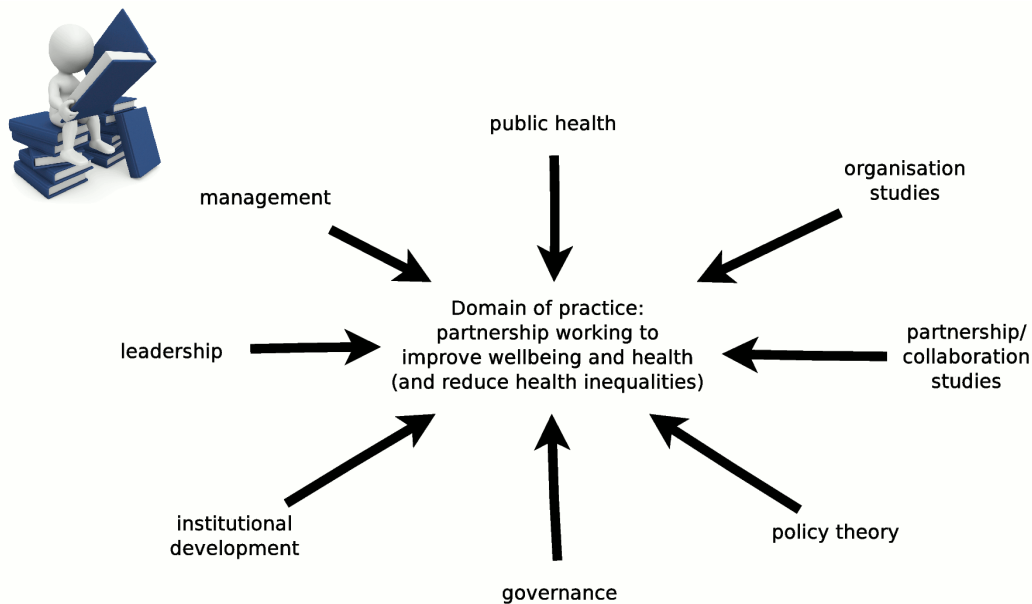
Figure 2: Intellectual fields relevant to partnership working to improve wellbeing and health

The findings are summarised in four sections:

- The 'case' for systems thinking to improve wellbeing and health (section 2)
- Natural systems thinking capabilities (section 3)
- Connecting to lineages and traditions of systems thinking (section 4)
- Partnerships as a setting which currently constrains rather than enables systems thinking capabilities (section 5)

And then in Section 6, I draw together these findings to present a conceptual model that can be used to support structured explorations of systems thinking in partnership working for wellbeing and health.

2. The 'case' for systems thinking to improve wellbeing and health

2.1 Published research

Contemporary public health research leads to an understanding of wellbeing and health as the emergent property of a dynamic interplay of a range of factors and not individual biology alone (World Health Organisation 2008). The factors, referred to as the 'social determinants of health', are shown in Figure 3.
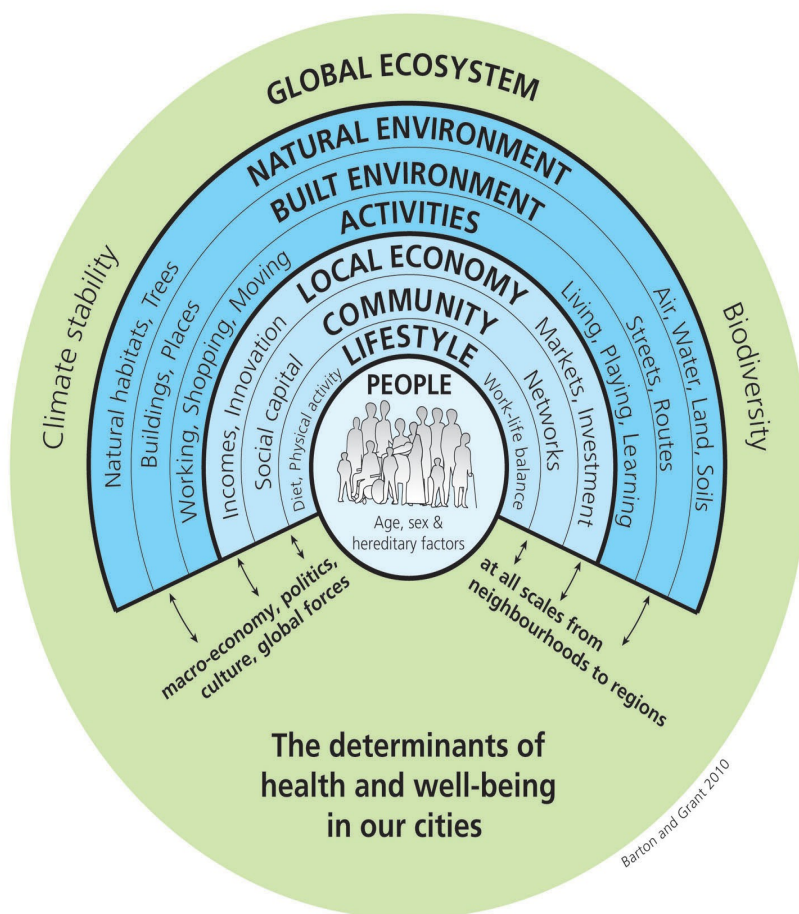
Figure 3: The determinants of health and wellbeing in our cities (Barton & Grant 2006).

Furthermore, in richer countries such as the UK, poorer population wellbeing and social inequalities in health are determined by the degree of income inequalities in the society (R. Wilkinson & Pickett 2010). In short, health inequalities are an unintended consequence of the way our society is structured. In this context, WHO emphasises the need for a shift of focus from individual service interventions to also embrace development and policy

interventions intended to improve the wellbeing and health of communities and whole populations (World Health Organisation, Regional Office for Europe 2011)

Hunter (2009) makes the case for framing health issues through the concept of a 'wicked issue' (Rittel & Webber 1973) which "are described as ill-defined, ambiguous and associated with strong moral, political and professional issues" (Ison 2010b, p.119). Rather than use a single term, I prefer to follow Ison (2010b, p.231) and frame wellbeing and health as a situation characterised by interdependencies, complexity, uncertainty, controversy and multiple stakeholders/perspectives.

This understanding of wellbeing and health poses a problem for those seeking to improve health – the complexity cannot be resolved through traditional cause-effect thinking and there are no straightforward solutions on offer (Exworthy & Hunter 2011).

However, it is these sorts of situation that systems thinking helps us to engage with, understand and seek to improve (Armson 2011) making systems thinking pivotal to improving wellbeing and health.

2.2 Contribution of this research

The published material that advocates for 'systems thinking' in the field of wellbeing and health does not draw attention to the need for different Systems ideas and methods depending on the problem-in-focus.

This research involved participants describing their best experience of partnership working. In doing so, they drew on problematic situations with different characteristics such as service system re-design; operational coordination; establishing new services; supporting community-led initiatives and, crisis management. They also referred to partnership working at different 'levels' - strategic to the front-line – and acknowledged different levels of 'tangibility' of what needs to be done – with social change at one extreme and more tactical problems at the other.

2.3 Conclusion drawn

Those involved with this domain of practice must engage with a range of problematic situations with a variety of characteristics. It is important that practitioners appropriately draw on a diverse range of Systems ideas and methods contextualised to the situation they are engaging with (Ison 2010b, p.166).

Two existing frameworks use the notion of a continuum between 'tame' and 'wicked' problems to highlight the need for a spectrum of partnership leadership styles (Alban-Metcalfe & Alimo-Metcalfe 2010) and a spectrum of ways of working in partnership (Gordon et al. 2010). This research adds a 'spectrum' of Systems ideas and methods to this mix.

This conclusion raises implications for the practice of 'training' people in systems thinking. Short courses advocating a single Systems approach could lead practitioners to engage with very different problems-in-focus with the only method they know.

> ...if your only tool is a hammer, everything looks like a nail...

3. Natural systems thinking capabilities

Ison (2010b, p.28) highlights that many people do have some form of systemic awareness, even though they themselves may not recognise it as such.

In order to identify if participants exhibited natural systems thinking capabilities[2], I drew on the explanation of Armson (2011, p.50) who characterises systems thinking as both:
- holistic (rather than reductionist); and
- appreciative of multiple partial perspectives (rather than emphasising a single perspective).

3.1 Holistic thinking

Holistic thinking is concerned with thinking about "wholes rather than just parts" (The Open University 2002, p.15).

An aspect of holistic thinking involves emphasising relationships and connectivity, rather than 'the parts'.

All of the participants referred to the importance of relationships between people. There were also references to the quality of those relationships, including terms like "trust" and "mutual respect"

> "it's about having a proper, what I would call professional, mutually supportive, and challenging relationships in a partnership"

Another aspect of holistic thinking is recognising that multiple, interacting variables contribute to an issue of concern - or as one participant said are:

> "quite complex, multi-factorial problems if that's not too jargonised way of describing it".

Six participants referred to the multiple, interacting factors that determine wellbeing and health, such as those shown in Figure 3.

> "So what is it, and its all about the determinants of ill-health that we are all very aware of. So you know, you could say, well if the if the NHS was really interested in reducing umm I don't know breathing problems, respiratory diseases, if you put money into housing, home improvements, now will they do that?"

Given that the recorded conversations involved participants identifying the forces and factors that contributed to their best experience of partnership working, all referred to a number of contributing factors, rather than a single 'cause'. This appreciation of multiple,

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2 Only one recorded conversation for each participant was used for this study. This means that the 'absence' of a particular aspect in the data can not be used as evidence of an 'absence' of ability/knowledge in the participant – just that it was not evident in the particular recorded conversation.

rather than single, factors contributing to organisational or partnership performance was also referred to specifically by eight participants.

> "until we have specific examples that clearly aren't being solved because of, I don't know, professional boundaries, organisational boundaries, lack of resources you know the list is long".

Five participants referred to the emergent properties of interacting variables.

> "so you need that recognition of everybody's contribution and that the sum of the parts is greater, it has got to be that collective"

> "I don't want to sort of say it was fate in a way but I do think there are occasions where a combination of a number of people being in the right place, at the right time, and they are kind of coming together and a synergy that, it's almost like everything happens and it, the obstacles that are there, are somehow now surmountable so you get a sense of, oh this is going to happen"

> "Oh yes, as I say, there was a kind of, the best way I can describe it, is a visual picture, there was an alignment of the planets, it was the, you know, it was everything coming at the right time"

Eight participants referred to the relevance of context on the performance or behaviour of individuals, organisations or partnerships. One participant specifically referred to the value of going up a level of abstraction to help re-frame a problem. This is a key aspect of systems thinking (The Open University 2002, p.54).

> "there's always, always a bigger picture. So always looking for what is the bigger frame of reference umm because the bigger frame of reference will often help you to see how you might solve things that appear to be intractable"

3.2 Multiple partial perspectives

Armson (2011, p.50) states "systems thinking attaches importance to other partial views and perspectives". Given that the conversation that generated the talk samples were about partnership working, it is not surprising that all participants referred to the importance of different 'inputs', either by individuals or by organisations. However, this difference was not always specifically expressed in terms of perspectives per se. Terms used were experience, skills, styles, roles, interests, knowledge, expertise, backgrounds, and, traditions and histories.

There were two specific references to the existence of multiple perspectives.

> "There's always, always another perspective"

> "we all come from a different perspective"

There was one, slightly indirect, acknowledgement of the 'partial' nature of a particular perspective.

"we are the organisation who is best placed to have an overview of what the
city looks like. Umm what the opportunities and challenges to the city are. All
other organisations only see a partial take on that. Now, our overview has
some weaknesses so for example we definitely have an overview which
includes a perception about health, what we probably don't bring is the more
detailed understanding of that and what some of the solutions might be"

3.3 Conclusion drawn

Participants demonstrated natural systems thinking capabilities.

This conclusion suggests support for a framing of 'systems thinking as constrained
capability'. To ensure natural systems thinking capabilities are drawn on, it is important to
pay attention to the setting in which people carry out their work.

4. Connecting to lineages and traditions of systems thinking

Ison (2010b, p.25) offers an alternative perspective on what it is to *be a systems thinker*.
To him it is not enough to simply use holistic thinking and appreciate multiple partial
perspectives, in that he emphasises the importance of connections to the lineages and
traditions of Systems.

4.1 The systemic/systematic duality

Checkland (1985) discusses two traditions of systems thinking – the hard or systematic
tradition and the soft or systemic tradition. These can be regarded as a 'duality' rather
than either/or. But Ison emphasises that "systemic thinking provides an expanded context
for systematic thinking and action" and that when approaching messy situations it is more
appropriate to "approach the task systemically" (2010b, p.193).

Nine participants used talk that was consistent with systematic thinking and action in that
it was oriented to goal seeking, problems, solutions, use of analysis or referred to a
system that could be 'engineered' or 'designed'.

Examples:
"The other asset and the strongest asset is knowing that you've got a problem
and finding a solution. So clearly defined problems, with very good indicators
of success"

"if we can have the shared analysis of what the problem might be, we can start
to try and find a way to tackle those things"

Five participants used talk consistent with systemic thinking and action in that it was more
oriented to learning or the human content of the situation.

Examples:
"And you know it is fascinating watching when they first come together, they

come from different intellectual disciplines as well as different ways of behaving"

"I don't have all the answers, I am open to learning, I'm receptive to new ideas and new ways of learning so I don't bring a closed mindset, you know, that's there is only one way to do it and its my way"

However, on a number of occasions the language of systematic and systemic were mixed together. Sometimes, the hesitations and style of the talk gave the impression that the participant was trying to convey ideas that they knew their language was not quite right for.

Examples:

"But it's the, it's the sort of shared understanding of what the challenge or the issue or the area that you are looking at is, you can call that a needs analysis, or whatever you want to call it, it doesn't really matter, but it's that shared understanding of what the issue is and where it has come from and all the rest of it. And then as a result of that shared understanding, um, you know, for me good partnership is about agreeing or establishing amongst yourselves, what therefore the key priorities are, what the key challenges are going to be"

"Umm ability to um take ur complex situations, complex data to whatever it is, synthesise it, simplify it and therefore make it easier to see where the solutions might lie. Um so when everybody else is kind of drowning in detail and complications and all the rest of it and chaos, um I think I have quite a strong skill of kind of seeing through that and saying 'well actually, the really important things here are..' um."

4.2 Uses of Systems concepts

Ison (2010b, p.21) provides a list of 23 generalised systems concepts that are likely to be experienced when encountering a systems practitioner along with an explanation of their meaning.

In total, there were 111 occurrences of the relevant words in the transcripts of the participants' talk. However, in the vast majority of occurrences the words were being used in a more everyday sense that the specific conceptual explanation provided by Ison (2010b, p.21) so these were discounted as 'false positives'.

The exceptions were:

uses of the concept 'perspective', such as:

"people will see a problem from their own perspective, in my school this, or in my organisation that, or in my service this is what it's, this is what it's like"

"I hope that's helpful I mean I think getting everybody's perspective inevitably is"

uses of the concept 'purpose', such as:

> "I hope that we don't get distracted urr from you know the core, what I would say is, the core purpose"

> "You know the sense of purpose there, the buy-in, to what we needed to achieve"

uses of the concept 'tradition', as follows[3]:

> "actually there was a different history, different tradition. They were leveraged in but actually there was no kind of caring or nurturing of, of kind of each other's history."

> "I think what I bring personally is that I, I, I, I do, I think I'm genuinely respective of umm other people's traditions and histories and recognise that you can't ignore that"

In addition, there were two specific references to the academic discipline of Systems sparked by the participants awareness of the subject of the research[3].

> "you know that kind of, if Helen's into systems theory, entropy, entropy set in very quickly."

> "again if Helen wants to look for systems theory stuff, she should look at the work of Gregory Bateson who was a canadian anthropologist in the 1950s, but but well I've found him very influential. I'm am interested in systems as well and Bateson talks about difference as one of the key drivers in the world and acknowledging and accepting difference"

4.3 Referring to Systems scholars

There was one mention of a **Systems scholar** (Bateson as cited above). The same participant referred to Wittgenstein whose work has been built on by Systems scholars[3] (Ison 2010b, pp.32, 103).

4.4 Referring to Systems approaches or tools

No participant referred to a **tool or technique associated with Systems**, such as diagramming or any of the systems approaches described in Reynolds and Holwell (2010b).

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3 It is noteworthy that the most prominent connections to the lineage of Systems were all made by a single participant who repeatedly mentioned the importance of understanding the history and traditions of different professions and how that affects language use. This resonates with Ison's (2010b) discussions of living in language and traditions of understanding.

4.5 Conclusion drawn

One potential constraint to use of natural systems thinking capabilities is low familiarity with the concepts, language and tools of Systems – or 'Systems literacy'. This is consistent with Ison's view that those who already think systemically can be helped to "develop a language, including conceptual and methodological insights, to better understand the nature of their systems thinking" (2010b, p.18).

This conclusion raises questions about ways to build 'Systems literacy' of large numbers of people involved in partnership working for wellbeing and health – whether that be through individuals attending formal training 'off-the-job' or through groups experiencing, and reflecting on the use of, Systems concepts, language and tools in the course of everyday work together.

5. Partnerships as a setting which currently constrains rather than enables systems thinking capabilities

Partnerships have been central to UK health policy since the 1990s (Perkins et al. 2010) and are set to continue in the form of statutory Health and Wellbeing Boards introduced in the Health and Social Care Act 2012. Taken at face value, they appear to be a manifestation of systems thinking in that the motivations behind them include efficient use of resources; the nature of fragmented organisational landscape; the nature of the issues being addressed; and opening up decision making to include citizen's voice (Lowndes & Skelcher 1998).

Williams and Sullivan (2011, p.14) state "At its core, collaboration in the public sector is very much about learning from and with partners, and of sharing and generating knowledge and insights to resolve interdependent societal problems". This orientation to learning is central to systemic thinking (Checkland 1985) and managing systemic change (The Open University 2010) and has led Systems scholars to draw from, and develop, social learning theory and practice (Blackmore 2010). Social learning can be associated with individuals learning through social interaction, or collective processes resulting in individual or collective learning (DeLaat & Simons 2002). It is therefore important that the partnership setting is one where social learning and systems thinking can mutually reinforce each other.

5.1 Perspectives from published research

Published research tends to focus on factors that may be limiting the effectiveness of partnerships or the work that they do, rather than constraints to systems thinking or social learning per se. However, some of the authors do relate their discussions to systems thinking or social learning or lead to conclusions that resonate with the writings of Ison (2010b; 2010a) about settings that constrain systems thinking or social learning.

Partnerships are traditionally conceptualised in accordance with the dominant view of how to get things done – the hierarchy (Fairtlough 2007). The units of structure in that hierarchy are committees, made up of people representing the interests of organisations

or stakeholder groups. They convene in regularly, scheduled meetings with an agenda and a series of reports and may have a role in monitoring performance of committees 'beneath them' in the hierarchy. In effect, partnership working has become reified into structures consistent with an ontology of being (a focus on static entities) (Chia 1995). This is reflected in the use of language in that we talk of 'a partnership' as if they exist in the real world and the use of organigrams as the primary way of representing 'the partnership'.

Published research suggests the need to re-conceptualise the way we do partnerships, to make the way of working more appropriate for working with uncertain, contested, complex situations, like wellbeing and health. Parker et al (2010) emphasise the need to shift away from the notion of partnerships as over-engineered structures to a more process view that enables relationship building and dialogue. Whilst, Hunter et al draw on the concept of 'complex adaptive system' to recommend "flexible, looser framework structures that can be adapted quickly in the light of review, learning and evaluation" (2010, p.12). These recommendations are more consistent with an ontology of becoming (a focus on flux and transformation) consistent with a wider shift in organisational studies (Chia 1995).

Ison identifies the need to foster dialogue to "provide an environment for learning, to think together" (2010a, p.81) rather than debate-based communication which is more conflictual. Kersten and Ison (1998) identified a range of factors that restrict dialogue including participants coming as representatives; participants defending or attacking statements made; and, people feeling they are 'being participated'. These factors are often evident in the way in which traditional partnership meetings are run with the result of restricting dialogue and reducing possibilities for social learning.

The pervasiveness of target setting is a key constraint to systems practice, because it "undermines our collective ability to engage with uncertainty" (Ison 2010b, p.218). The English performance regime under New Labour has been shown to have influenced not only the decisions and actions of those with a role in improving health inequalities but also the way in which they framed the issue in their discourse. There was a tendency for it to lead to a focus on early detection and secondary prevention focussed at individuals, rather than broader level policy changes where there is less certainty and predictability in terms of outcomes (Blackman et al. 2010; 2011).

National expectations can also influence practice in more subtle ways. Practitioners at a local level are often 'required' to establish and participate in partnerships that have been conceived at a national level. Being told what to do and how, can distract from those involved being motivated by their own purpose (Ison 2010b, p.157); from a "continually reflexive and self-examining approach" (Hunter et al. 2010, p.119); and, reduce possibilities for adaptive systems thinking (Blackman et al. 2010). To add to this concern, practitioners tend to glean 'evidence' from conferences and official guidance rather than look to published research (Blackman et al. 2011), even though advice on how to work in partnership is rarely based on any theory (Powell & Dowling 2006).

Partnerships have a role in policy making – a process that leads to actions understood (or declared) to be for 'public good'. Traditionally, policy has been conceived as a process of 'evidence based' instrumental rationality (Sanderson 2009) sometimes referred to as policy as prescription (MacKintosh 1992). However, a social process view sees it as emerging from the interactions of stakeholders as both the product of, and input to, social change

(MacKintosh 1992). This leads to calls to move to 'intelligent' policy making emphasising dialogue and learning (Sanderson 2009). This emphasis needs to run through the entire policy process, including the initial 'assessment' stage which needs to shift from a technical exercise done by experts to one of "dialogue, deliberation and discussion" building on ideas of social learning (Rydin et al. 2012, p.2080).

Table 1 summarises the variables outlined above and highlights those that are also associated with constraining or enabling systems thinking or social learning. It demonstrates a high degree of overlap between 'effective partnership working practices' and 'practices that enable systems thinking or social learning'.

Table 1: A summary of the variables that may be limiting current effectiveness in partnership working and accompanying suggestions for change

Limiting current effectiveness	Suggestions for change
- Over-engineered structural partnerships - managerial 'command and control'* - those at local level required to establish and participate in ways of working that conceived at a national level* - advice on how to work in partnership rarely based on any theory - practitioners glean evidence from conferences and official guidance rather than look to published research - national performance regime and target mentality affects framing of the issue* - policy making emphasising instrumental rationality*	- enable relationship building and dialogue* - flexible framework structures that can be adapted quickly in light of learning and review* - practitioners being motivated by their own purpose* - continually reflexive and self-examining approach* - policy making emphasising dialogue and learning*
* variable is also associated with those that constrain/enable systems thinking or social learning.	

5.2 Appreciation of practices by participants

The research sought to identify if participants appreciated practices that are consistent with those that enable rather than constrain systems thinking capabilities or social learning, as identified in Table 1 or in Ison (2010b, chap.9).

A number of different 'levels' of practice became apparent during analysis.

At a **personal level**, all participants referred to the importance of a disposition oriented to learning; relationship building; and/or motivation to engage.

Examples:

"I think there was, there was a willingness to work and there wasn't a sense of well this belongs to us, there wasn't a sense of I talk about negative ownership rather than positive ownership."

"relationship building, umm finding the people who are natural or potential allies umm recruiting them to the project, if you like, of partnership working umm and using that to create a centre of gravity which can be grown"

At an **organisational level**, four participants referred to the importance of an enabling organisational culture.

Examples:
"Umm I've, I've seen councils that are very top down in their operation, and governments of course they are top down and very centralised in their decision making. I've always believed that it works best if it's the other way round. That umm councils, councillors, politicians generally are facilitators"

"I think we have worked hard to build the relationships and other people have met us half way and we've sustained those relationships and we now are in a position where we have some trust and we have some safety and we can just um get on and identify what things we all need to do together and make some progress on them so, it's a good position to be in"

"being willing to I was going to say give up power, but not always be in the driving seat, not always being um the overpowering partner, dominant partner and I think I think the language is beginning to sort of change around that"

In addition, six participants included reference to the constraint caused by a 'controlling' management style.

Examples:
"the culture of our two respective organisations was not particularly conducive. Um they were both very controlling"

"But that clear sense of having a responsibility for community leadership. Umm the negative side of that is that it can translate into the council saying we are in charge. But at it's best, it is about we're the organisation more than anybody else in the city who has an interest in, and a responsibility to promote, collaborative working...to solve the problems that the city is facing."

However, one participant referred to the benefit of a controlling style when senior staff members advocate partnership working.

"Now the NHS being the kind of command and control organisation that it is or was certainly, still is to a large extent, umm it was that kind of world, where if [name] said you know this is how you are going to do things. It was you know yes sir, no sir, three bags full sir."

Projects and conventional project management tools create the conditions for an "over-reliance on systematic, rather than systemic thinking" (Ison 2010b, p.227). One participant

referred to use of projects but the nature of the reference was such that it was not possible to judge whether it was a positive or negative view of the traditional project management methodologies.

At a **partnership level**, ten participants included positive references to meetings, processes and working arrangements that promoted engagement, dialogue and shared understandings.

Examples:
> "Now I know that's a bit of a twee story, but it's a true story and it would never have happened if they actually hadn't been sharing the same office space"

> "I was aware at the meetings that there were quite a lot of people who never spoke. They were almost there to take notes and check up you know and feed back to other people and actually it doesn't work if that's how people, so that's why just getting everything out on the table, being very clear what you were about and what part everybody can play in it, is really important. And not letting people, use it as a bit of a easy ride, you know, to make that commitment, recognise where they come from and recognise that they've all got something to bring to the table ur even if that might not be cash"

> "it's about the people sitting down with each other, sharing the umm sharing the analysis of the problem, agreeing how they are going to work together umm rolling their sleeves up, getting on with stuff, trusting each other, challenging each other, supporting each other, umm and my hope is that we don't let our urr past, our prejudices, our all of the rest of it getting in the way of that"

Whilst nine participants included negative references to structural partnerships.

Examples:
> "I think we can get caught up in then over complicated governance structures where we have groups and boards, that I think then over complicate what we are actually there to do"

> "I've kind of got over my bit about, it's got to be a structural relationship umm it's, because it isn't, it's people who make partnerships not organisations."

National policy practices were seen as impacting on those at a local level. Performance regimes were mentioned by just three participants, in both negative and positive ways. However, a closer look indicated that views were positive where the performance regime was perceived as creating a driver or incentive to partnership working...

Example:
> "It undoubtedly helped that we had National Service Framework so there were some clear objectives laid out nationally that we had to meet, um, and which both of our organisations signed up to."

...and, negative when the performance regime was perceived as leading to working in silos

Example:

> "Although to some extent I think the landscape changed nationally as well so I think there was a subtle but quite discernible shift that went on over a number of years that when the NSF was first published umm quite strong focus on not just the kind of umm services for people with severe and enduring mental health problems but ur a whole system approach to mental health and how that should be fully joined up and increasingly over the years there was a push through the NHS that they interpreted as 'we need to focus more on core business, some of this stuff is not really our business' umm to do with target driven culture, all that kind of thing"

There was a single reference to the constraint caused by having to implement what has been conceived at a national level

> "I think the sad reflection I have of all these structures is that most of them are put in place because we've been asked to put them in place. So the creation of local strategic partnerships, the creation of the wellbeing and health partnership and then now more recently the Health and Wellbeing Board in preparation for the statutory introduction of health and wellbeing boards as part of the NHS reforms. Umm having said that, when instructed to do so we often get together and think of work as partnership, but in terms of ownership a better starting point would be to recognise and meet a need to establish partnerships to then allow ownership amongst the whole partnership of the agenda that they set themselves to do over the coming years. So I don't think that it is a negative but certainly being told that you ought to set something up umm might not be as good as if you thought that was the need in your locality in the first place".

5.3 Conclusion drawn

There was a strong sense that there is an appreciation of practices that enable systems thinking or social learning, but this is primarily due to a concern for effective partnership working, rather than 'in the name of' systems thinking or social learning.

It is notable that practices advocated as 'good' for effective partnership working for wellbeing and health are almost synonymous with those that enable systems thinking or social learning, and conversely those that are 'bad' for effective partnership working are almost synonymous with those that constrain systems thinking or social learning.

This conclusion suggests that achieving ways of working that enable 'effective' partnership working will also provide a context that is conducive to systems thinking or social learning and vice versa. In addition, the purposeful use of Systems ideas and methods can contribute to creating a setting more conducive to 'effective' partnership working.

6. Determinants of systems thinking in partnership working for wellbeing and health

The nature of the research design means that the specific findings cannot be generalised to other people, times or settings, however taken as a whole the study demonstrates that there is value in using a framing of 'systems thinking as constrained capability' as a way of understanding the current limited use of systems thinking in partnership working for wellbeing and health.

The research identified a number of variables that interact to determine the extent to which systems thinking is drawn on in partnership working for wellbeing and health. These include:

- the disposition, engagement and Systems literacy of individuals
- organisational practices – structures, leadership attitude, culture, ways of planning
- partnership practices – ways of planning, meeting style, accountability structures
- national policy practices – governance of partners, guidance and advice, frameworks, performance regimes
- intellectual fields – use of Systems in academic fields relevant to the domain of practice

These variables can be represented in a conceptual model (Figure 4 overleaf) which is informed by the manner in which Barton and Grant (2006) represent the social determinants of health (Figure 3).

The conceptual model is intended to be used as a tool in structured explorations of systems thinking in partnership working for wellbeing and health practice, either as a part of further research or in a practice setting. The model represents one possible way of framing the situation and can therefore conceal as well as reveal and further research is needed to test out its utility in practice situations and to refine its potential. However, in principle it is possible to take each 'layer' in turn to consider what currently works well and what could be improved and how variables in that 'layer' influence and are influenced by other variables. From a practitioner perspective, the actions taken as a result of such structured explorations will depend on what is systemically desirable and culturally feasible in the particular setting of its use.

The conceptual model's value lies in supporting those wanting to develop systems thinking in partnership working for wellbeing and health to embrace a wider range of possibilities than the existing leadership development focus. It draws attention to the fact that a conducive setting can increase the likelihood of people drawing on their systems thinking capabilities, even without formal Systems education. It also draws attention to the way in which structures and ways of working established nationally affect possibilities for local 'leaders'.

If those involved in partnership working for wellbeing and health are to be able to create the conditions for good health and positive wellbeing for all, then systems thinking needs to be integral to partnership practice – this cannot be done by leadership development programmes alone, it is vital to create the settings in which the natural capability people have can flourish.
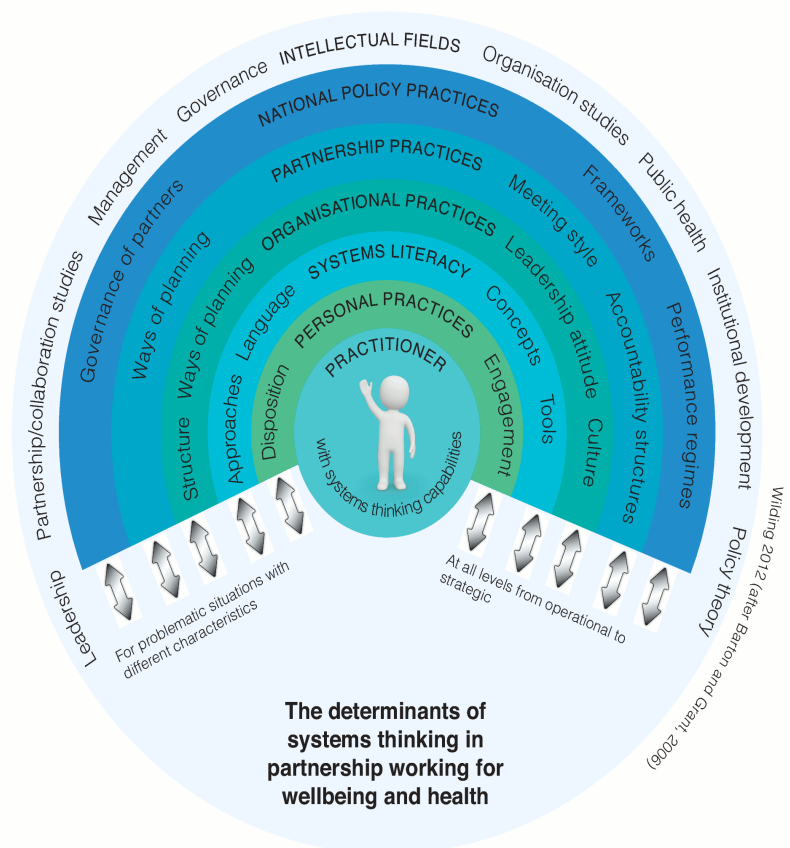
Figure 4: A conceptual model to use as a heuristic to help understand the variables influencing systems thinking in partnership working for wellbeing and health

Appendix One: Methodology of the primary research

Selection of participants
- The study took place in Newcastle upon Tyne, the primary investigator's place of work. Therefore, all the participants were known to the primary investigator.
- 'Leaders' were identified as those people participating in the shadow Health and Wellbeing Board, plus a number of other senior managers/officers whose positions made them influential to the development of partnership working for wellbeing and health in the city.
- From this field, actual participants were selected to ensure a mix of organisational backgrounds. A fully 'representative sample' was not possible due to availability during the study time-lines.
- A total of 11 individuals became participants in the study.

'Generation' of a talk sample
- The research took place as Newcastle initiated a longer-term piece of partnership development work using appreciative inquiry. The first phase of appreciative inquiry is 'Discovery' which helps participants appreciate the best of what is. This longer-term development work offered the opportunity to generate samples of participants' talk for use in this research.
- The participants took part in a 1:1 structured 'Discovery' conversation facilitated by one of eight people in the Wellbeing for Life team (one of whom is the primary investigator).
- The team members were all less senior than the participants which may have affected the nature of what was said and how.
- The conversation was recorded and later transcribed verbatim by the primary investigator.

Analysis of the talk
- Transcripts were uploaded into 'Dedoose', a secure online analysis tool designed to support qualitative analysis through highlighting excerpts of text and 'coding' them.
- The researcher used 'sensitising concepts' drawn from published literature to provide direction to look at the data; an approach described as quasi-deductive.
- The 'coding' structure used in 'Dedoose' was based on these 'sensitising concepts'.
- The 'sensitising concepts' also formed the structure for the presentation of the findings in this paper.

Key issues arising from the methodology that should be considered when reading the findings and conclusions drawn
- The participants are not 'representative' of all potential leaders in partnership working for wellbeing and health. Therefore, specific findings cannot be generalised to other people or settings.
- Only a single conversation involving each participant was analysed. The 'absence' of a feature in that conversation, cannot be taken as 'proof' of absence of ability/knowledge of the individual.
- In qualitative research, the researcher is the main 'instrument' of research. In this study, a single investigator analysed the transcripts. All claims made are based on the judgements of that individual – hence the inclusion of lots of examples to allow the reader the opportunity to agree or disagree with those judgements.

Helen Wilding, October 2012

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