Getting to Maybe: Nurses as Social Innovators

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What is Social Innovation?

- A social innovation is an idea that works for the public good.
- A true social innovation is systems-changing.

Source – Centre for Social Innovation

- And they inevitably deal with complexity

Healthcare needs Social Innovation…

- Why look to nurses?
  - size and scope of profession
  - Stable and high demand for services
  - Unparalleled trust
  - Centre of interdisciplinary teams
- We need nurses to be leaders in social innovation!

Leadership Defined

Leadership is the capacity to influence others to work together to achieve a constructive purpose.

Source – LEADS Framework, CHLNet

IBM and McKinsey reports

- The problem:

  Today's complex environment is placing extraordinary stress on leaders.

  Many leaders lack skills to deal with complexity which leads to underperformance and dissatisfaction.

Agenda

- Centred Leadership
- Differentiating simple, complicated and complex
- Role of Inquiry in complex/wicked issues
- Brazil's approach to HIV/AIDS

Centred Leadership

- The problem:
  - Today's complex environment is placing extraordinary stress on leaders.
  - Many leaders lack skills to deal with complexity which leads to underperformance and dissatisfaction.
- What to do about it:
  - Cultivate key capabilities

"How Centered Leaders Achieve Extraordinary Results", Barsh et al , McKinsey Quarterly, Oct 2010

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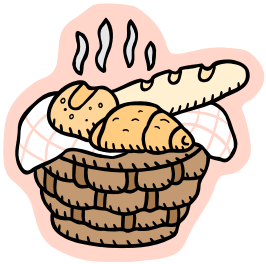
Simple

Baking a cake *A Rocket to the Moon* *Raising a Child*

- The recipe is essential
- Recipes are tested to assure replicability of later efforts
- No particular expertise; knowing how to cook increases success
- Recipe notes the quantity and nature of "parts" needed
- Recipes produce standard products
- KNOWN



Complicated

Following a Recipe *A Rocket to the Moon* *Raising a Child*

- Formulae are critical and necessary
- Sending one rocket increases assurance that next will be ok
- High level of expertise in many specialized fields + coordination
- Separate into parts and then coordinate
- Rockets similar in critical ways
- KNOWABLE

Complex

Following a Recipe *A Rocket to the Moon* *Raising a Child*

Parents have to act in contexts where they are not in control

- Formulae have only a limited application
- Raising one child gives no assurance of success with the next
- Expertise can help but is not sufficient; *relationships are key*
- Can't separate parts from the whole
- Every child is unique
- UNKNOWABLE

When In The Zone Of...

Simple/Complicated

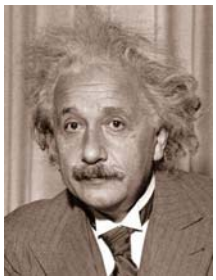
- Plan then act
- Aim for *consistency*
- Limit type of action (best practice)
- "Blueprints"
- Project Management
- Inquiry – problem solving, convergent, data

Complexity

- "Act-learn" at the same time (tight feedback loops)
- Aim for "*coherence*"
- Multiple actions
- Min specs/simple rules
- Generative thinking AND Generative relationships
- Inquiry – appreciative inquiry, divergent, "wicked"

Albert Einstein said…

"If I had an hour to solve a problem and my life depended on the solution, I would spend the first 55 minutes determining the proper question to ask."



Complex or wicked issues require more time in the inquiry phase AND we need to be more aware of our inquiry style

The role of "inquiry" in leadership

"… Human systems grow toward what they persistently ask questions about"

(Cooperrider and Whitney 1999, 10).

Categories of questions

- Convergent vs. Divergent questions
- Problem solving (find the gaps) vs. appreciative inquiry (what works and why?)
- Data questions vs. Wicked questions (difference questions to reveal paradoxes)

Wicked questions -examples

- How can we dramatically improve quality while drastically reducing costs?
- How could accountability imperatives increase our capacity to innovate?
- What is good about not changing?
- or What do we want to hold on to as we change?
- How do we work together when we all have different agendas?

The Brazil Complex Problem

- How do you respond to an AIDS epidemic in a developing country?
- No money for expensive drugs
  - problems of affordability of drugs
- A very iffy health care system
  - problems of treatment
- High levels of illiteracy
  - problems of compliance even if there were drugs
- High levels of poverty and hunger
  - problems of nutritional needs for drugs
- And… it is a sexually transmitted disease

Questions Posed by World Bank

- "What will drug costs be for the infected population?"
- "What resources are needed to manage drug therapies for illiterate patients?"
- "What resources are needed to assure compliance with drug associated nutrition in this population?"
- "What are the resources needed for an effective prevention program?"

World Bank Responds to AIDS as Complicated

- Meaningful solutions require sophisticated, integrated national health care systems
- We cannot provide treatment to all when the drug costs are so high
- We cannot afford resources to manage treatment compliance
- With our limited resources, we should focus more on prevention than treatment
- It will therefore take a long time for the problem to work itself through

Brazil Implicitly Recognized the Complexity

- Began to address the AIDS issue head-on in 1994
- Were unwilling to accept the answers of the World Bank
- Hence – had to change the questions…
  - *Changing the questions changes the focus, changes what is "analyzed", changes what is seen as possible/impossible*

The Brazil Questions Assume Complexity

World Bank Questions	Brazil Questions
"What will drug costs be for our infected population?"	**"How can we reduce costs so that we can provide treatment to all who need it?"**
"What resources are needed to manage drug therapies for illiterate patients?"	**"What methods of communication will work to convey the drug therapy routine to a patient – even a homeless, illiterate patient?"**

The Brazil Questions

World Bank Questions	Brazil Questions
"What resources are needed to assure compliance with drug associated nutrition in this population?"	**"If food is an issue, how can we ensure greater compliance by linking up with charities/food banks/ churches etc.?"**
"What are the resources needed for an effective prevention program?"	**"How can we achieve our prevention goals while treating all of those currently infected?"**

The Brazil Conclusions

World Bank Conclusions	Brazil Conclusions
Meaningful solutions require sophisticated, integrated national health care systems	Find ways to use the resources we have to respond to the problem
We cannot provide treatment to all when the drug costs are so high	Provide drugs to all by finding ways to reduce drug costs
We cannot afford resources to manage treatment compliance	Use our informal system to train people to care for themselves
With limited resources, focus more on prevention than treatment	Prevention will be part of the treatment
It will therefore take a long time for the problem to work itself through	Seek short and long term results

The Brazil Responses

- A stable container: Brazil built on existing infrastructure (natural network of relationships)
  - A somewhat shaky health system of hospitals and clinics
  - Added to by 600 NGOs, churches (hubs)
- Free drugs to all AIDS patients: faced down drug companies in pursuit of national interest

Complicated Questions

- Data – facts
- Best practice
- Problem solving – what isn't working and how to fix it
- Questions that let us plan first and act later

Brazil's Questions

- Assumed *Abundance (and Complexity)*
- *Divergent* (versus Convergent) questions
- Implicitly used *Appreciative Inquiry* – looking at **patterns** that already work and getting leverage from that
- Focused on *relationships* – key "unit" of analysis
  - And they created *generative relationships*
- Used, rather than avoided, *paradox (wicked questions)*
- *"Min specs" or simple rules created coherence but not consistency*

How to be a leader when you are not in control??

- Discern the level of predictability or control and choose an approach that fits context
- When facing wicked or complex issues:
  - Inquiry (including appreciative, wicked, divergent)
  - Centred leadership (find your strengths & purpose and work with others)
  - Sense of Humour ("managing energy")

Sources

- The most recent version of the Brazil AIDS story is in "Getting to Maybe: How the World is Changed," by Westley, Zimmerman and Patton, Random House, 2006