Finding a True Fit: Complex Governance and health systems (and what it can mean for an Adapted Health Systems Governance Practice)

March 19, Hotel Novotel, Rue de Zürich, Geneva

Organized by the Health Systems Governance Collaborative and the Alliance for Health Policy and Systems Research

Unpacking complexity in governance: a push from the field

Introduction

This one day brainstorm takes place at the interface of research and policy practice. It aims at gathering a number of governance and complexity practitioners and researchers, to unpack the ideas on complexity and governance in health systems work. We wish to help foster health system reforms and support practices of governance that are better aligned with field realities. We will explore how we may better fulfill the promise of “joint sense-making” between practitioners and researchers.

Practitioners continuously deal with governance complexities. If you listen closely to district managers, health providers and local decision-makers, you will hear that they cope, manage and deal with complexity every day: they negotiate, facilitate and broker solutions with a myriad of actors, in an open environment, informed in their practices by the evolution in health systems and other spheres. They try to deal with uncertainty and the dynamics created by emergence, path-dependency and co-evolution. It is to this every-day governance that we want to turn our attention: the real life practices and experiences that actors in helath systems are developing to deal with complexity.

Social sciences have tried to come to terms with ‘complexity’ too. In the latter half of the 1990s, ‘complexity thinking’ found its way into these sciences. Since then, it is making inroads in public administration, providing a fresh look to tried and tested public policy-making theories and giving rise to new tools for decision-making in uncertainty (e.g. scanning, scenario-building, forecasting). Applied sciences such as environmental sciences and urban studies have embraced and integrated complex adaptive governance, including the role of power dynamics and interests, in their exploration of seemingly intractable problems, such as public accountability in urban slums or local climate change adaptation in highly dynamic settings.

In both health policy and systems practice and in research, approaches which build upon the key notions of complexity are growing slowly. There have been a number of seminal meetings and publications exploring the application of complexity of health systems. These include special editions to journals, the complexity sessions at the Health Systems Global Symposia and the Belgian Because Health Forum 2013 (Healthy Answers to Complexity- Are we Moving Beyond the Control Panel?). During the last decade, a number of publications provided accounts and frameworks to deal better with the realities of engaging with complex issues in health.
Yet, complexity has not been fully embraced: neither by researchers nor by practitioners. One explanation is the difficulty of having to come to grips with the multiple views and meanings of complex governance and the consequences for policymaking. There are multiple problems in framing policy formulation and implementation from a complex system lens: top-down policy making practices that impregnate hierarchic and highly centralized bureaucracies, lack of soft skills in engaging multiple stakeholders in policy formulation and implementation arrangements, short-term framing of output and outcomes measures either to meet national political agendas or donor agendas. Also: lack of a democratic space to debate policy content or implementation challenges.

Researchers too encounter specific challenges, not least those of demonstrating attribution in research and evaluation of complex issues. Moreover, in the research arena, there may be a culture and discourse which inhibits researchers from acting on the experience and intuitions of front line managers and providers.

All in all, opportunities to fully engage with the implications of actual practices of complex governance in health may frequently be missed. Too often, what we are currently left with is a framework or a visual. Research practice keeps lumbering on in its well-trodden (and sometimes reductionist) tracks, while policy practitioners muddle through.

**Objective: towards a true ‘HSG’ fit**

The general objective of this meeting is thus to develop a joint understanding of the potential of unpacking complexity for improved health system governance by bringing together systems dynamics and HSPR researchers and practitioners. In a one day workshop, we aim to stimulate cross-fertilisation.

More specifically, the objective is to start the discussion on how arrangements for actionable governance could be informed by complexity thinking. The workshop is envisaged to produce inputs for the Health Systems Governance Collaborative conference, organized at the Rockefeller Bellagio Center from March 26-30, 2018 on Actionable Governance: the Missing Links. This conference will be accompanied by a lead-up trajectory, in part hosted on the Health Systems Governance Collaborative knowledge sharing platform.

The expected outputs of the current meeting include informing the way forward on (1) what actionable HS complex governance looks like and how it can be applied in order to have a more “true fit” thinking on HSG; (2) how to create favourable conditions in the field of HPSR (and beyond) to enable this push.

**Rationale**

*Connecting the principles of complex governance to actual practice narratives*

The workshop will attempt to connect the principles of complexity to the understanding of everyday governance practices at the thick of health service delivery, policy and management.


**Broadening our frames**
Health practitioners, like anyone deeply involved in a highly specialized field, often get caught up in professional lingo and assumptions, frameworks and models. Initially helpful, these models and frameworks may start to have a life of their own.

**Process – towards a true fit**
Inspired by breakthroughs and applications from other fields, the question of what actionable complex governance might look like and what the entry points in the HSPR environment may be will be examined, at every level, in practice and research, and in each phase of policy making.

**Outcomes**
Answers to three questions are expected:

1) How do complex systems dynamics impinge on governance in health systems?
2) How can complexity thinking be applied in order to have a more “true fit” thinking on health systems governance?
3) How can favourable conditions be created in the fields of both research and practice to do justice to health systems complexity and enable the shift to complexity thinking?

**Day Overview**

**Evening before: arrival in hotel**

8h30-9h00: Coffee and Registration

9h00-9h30: Setting the scene

• The converyor does the opening and discusses the objectives and programme
• Introduction of the participants
• Zooming in on complexity and health systems work
• Setting the scene: Health Systems Governance Collaborative from Tokyo to Bellagio

9h30 -10h30 Eye-openers from the field

• Unpacking complexity in governance – what does it mean for health practice?

10h30-10h45: Coffee break

10h45-11h45: Complexity and governance in other sectors

• The application of complexity and governance in other sectors (environment/urbanization)

11h45-13h00 Group brainstorm on complexity and HSG

• Mental mapping exercise

13h00-14h00 Lunch break

14h-15h30 Frames, indicators and dynamics? An Exploration
• Are these helpful towards actionable governance, how and in which context?
• What is their meaning according to a complexity perspective?

16h00-17h00: Complexity: the death of skills, the death of expertise

• Exploration of new ways into knowledge, a radical rethink of “skills-sets” and capabilities

17h30: Way forward and Closing

18h00: Reception