Mindsets

Anglophone Master Training of Trainers and Coaches
September 2017 | Dar es Salaam

Henry Mosely, Moderator
Learning Objectives

By the end of this session, the participants will be able to:

1. Describe the different definitions of mindsets
2. Explain how mindsets influence the choices we make and the actions we take
3. Describe the mindsets and limitations of top down leadership
4. Analyze the constraints top down leaders may face when not taking into account the mindsets of individuals or organizations
5. Describe the learning process approach to leadership for social change
6. Develop a learning organization with diverse stakeholders to solve a reproductive health problem, describe the values that must be cultivated and the mindsets that must be challenged to be successful in reaching its goals
Mindsets by Other Names

- Mental Models
- Perceptions
- World View
- Assumptions
- Paradigm
- Conceptual Framework
- Beliefs
- Prejudice

*How we think* determines what we see and how we act. It’s not “Seeing is believing”, but “Believing is seeing”!
Leadership Requires Learning

- Leadership involves a *continual* commitment to personal growth through:
  
  - Clarifying what is most important - defining your purpose and values
  
  - Learning what is true - seeing reality objectively
Do we actually see reality or just our mindsets?

“‘Mental models’ (mindsets) are deeply ingrained assumptions, generalizations, or even pictures or images that influence how we understand the world and how we take action.”

Mindsets

1. Mindsets are the lenses through which we observe reality.

   Our perception of reality is totally dependent upon the amount of distortion in these lenses. But do we accept that we all have these lenses?
Question – What do you “see” when you look at an urban squatter settlement?

Are your lenses those of a -
- Physician?
- Entrepreneur?
- Social worker?
- Urban planner?
- Politician?
- Revolutionary?
Mindsets

2. Mindsets are the structures that we impose on reality.

We produce in our minds concepts of reality (paradigms), and these predetermine what we will actually be able to see when we observe reality.
Question – How many have ever seen the sun rise in the morning and set in the evening?
Question – Does the sun actually “rise” in the east and “set” in the west?

• What is the physical reality of the universe?
• Have people ever had conflicts because of questioning whether the earth was the center of the universe?
• Does our mindset have any effect on the physical reality of the universe?
The Power of Mindsets

1. In human relations and social institutions, our mindsets are our reality
A Cultural Mindset

“Women are intrinsically inferior to men.”

What are the “right” and “wrong” choices and actions that are predetermined in societies that accept this as a reality?
The Power of Mindsets

2. Misconceptions about reality are self-fulfilling prophecies
Paralyzing Mindsets

In a Health Center -

- Physician – I have no equipment and supplies so there is nothing I can do to take care of the people.
- Nurse – My salary is so low that I should not be expected to be at work on time every day.
- Midwife – I am all alone so there is no way that I can provide all the maternity care that I am expected to do.
Paralyzing Mindsets

In a Ministry of Health –

Our budget is so low that it is hopeless to expect that we can have any real impact on the health of the country

The only way we can improve the health of our nation is to train more doctors and nurses and build more hospitals
Paralyzing Mindsets

In the Donor Community -

The government does not have the capability of designing and implementing its own health programs without outside technical experts.

It is impossible to expect any improvement in the quality of care in the hospitals and clinics without providing more money.
The Power of Mindsets

3. Mindsets provide the basis for the choices we make and the actions we take
Mindsets in Policy - What is the conclusion of the donors?

What health interventions might follow from this conclusion?
Mindsets in Policy – What is an alternative conclusion?

Malnutrition “falls” independent of “rises” in income among the lowest income countries.

What alternative health interventions might follow from this conclusion?

Malnutrition falls as average income rises

Under-five malnutrition rate, most recent year, and GNI per capita, 2000

Source: UNICEF and World Bank staff estimates.
Clarifying Mindsets

- Mindsets must be constantly tested against reality

- Clarifying mindsets requires both deep reflection and constant inquiry

- Working together with a team of diverse stakeholders holding different mindsets is one way of testing the validity of one’s own mindsets
Top Down Leadership Mindsets and Limitations

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By the end of this session the participants will be able to:

1. Describe an example of a top down or “blue print” development project
2. Explain some of mindsets that sustain the design and implementation of top down projects
3. Give some of the major reasons why top down projects often fail to be sustainable
Top Down Leadership
The “Blueprint” Strategy

“Leaders” with priorities and funding direct organizations to design an implementation plan (blueprint).
Top Down Leadership
The “Blueprint” Strategy

Managers/providers deliver services/commodities to clients to improve health outcomes,
Top Down Leadership
The “Blueprint” Strategy

Researchers/evaluators gather and analyze data and provide it to planners and funders.
Mindsets Sustaining the Blueprint Strategy

- Highly placed professionals have sufficient knowledge to prescribe interventions that will work in any social context
- Knowledge from “evidence-based” intervention research done in specific contexts have universal applicability
- Time-limited, pre-designed, inflexible projects are the best means of introducing innovative health interventions in any setting
Mindsets Sustaining the Blueprint Strategy (Continued)

- The institutions, personnel and services of National Ministries of Health constitute the “reproductive health system” of a country
- Short-term material investments and focused technical assistance will produce sustainable improvements in a country’s health
- Using outside “experts” to gather, analyze, interpret and publish data is an effective means of gaining an understanding of the realities in the field
The “Blueprint” Strategy
A Fundamental Flaw

- Interest groups
- Policymakers, planners
- Managers, providers
- Communities, households
- Research, pilot projects
- Evaluations
- Project Blueprints

Disconnects learning from action
MIS

Learning

Action

Reproductive health
Social Consequences of Top Down Projects

- Top down project implementation is contingent on external forces - financial and managerial
- No engagement of the clients, local organizations or front line workers at the operational level in the design or management of the implementation strategy
- No (or limited) learning and capacity building by the front-line workers
- Therefore, no personal commitment or fundamental changes in behaviors and practices by any at the operational level
- So no, or limited, sustainability after projects are complete
Learning Organizations
The key to challenging mindsets

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By the end of this presentation, the participants will be able to:

1. Identify the essential features of team learning that can challenge and expand mindsets
2. Contrast the learning organization strategy with a top-down leadership strategy
3. Demonstrate how the mindset of the family planning system can determine priorities and the choices of actions
4. Describe the essential elements of a learning organization
What is a Learning Organization?

Fundamentally, these are TEAMS -
where people can continually expand their capacity to create the results they truly desire
where new and expansive patterns of thinking are nurtured
where collective aspiration is set free, and
where people are continually learning how to learn together

Source: Senge, p. 5

Fundamentally, minds are opened, mindsets are challenged and knowledge grows.
REVIEW - Top Down Leadership

Interest groups

Policymakers, planners

Managers, providers

MIS Evaluations

Research, pilot projects

Communities, households

Disconnects learning from action

Reproductive health

Learning

Action
Leadership the New Way - “Learning Organization” Strategy

The same stakeholders are involved, but they are linked together, continuously learning and taking action.

The interest groups are supporting the system, but not driving it.

Adapted from Korten, 1980
Learning Organization Strategy

There are 3 areas where learning and action are continually taking place by the key stakeholders. The goal of learning teams is to achieve a better “fit” in each area.

1. Needs
2. Outputs
3. Demand

Adapted from Korten, 1980
How do mindsets affect a team’s choices of priorities for action and implementation strategies?

Does the team –

1. Have a clear vision of the future they want to create?

2. Apply the skills of systems thinking to revise their understanding of the family planning system?

3. Search for the key constraint?

4. Redesign the system and reallocate resources before adding more resources?
Where is the weakest link?
Why are we interested in the weakest link?
Another Example - Pipe of different diameters

What is the capacity of the pipe?

- Five inches
- Three inches
- Four inches
- Two inches
- Six inches
Another Example - Pipe of different diameters

The capacity is two inches – this is the KEY CONSTRAINT

If the Key Constraint is not corrected, the capacity of the pipe cannot be increased
Pipe example and the health system

If implementation failing –
• What happens to the output of the system?
• Would investing in policy help?
• How does this effect the *efficiency* of the system measured as output/input?
The Three Constraints Model of a Family Planning System

Demand → Access → Services → Satisfied users (VISION)

Note: This model parallels the “Three Delays” model for maternity care.
Example - Constraints in Achieving Satisfied Users

If key constraint is demand, would investing more in services help?
Where should the priority for action be?
Example of Strategic Choices and Consequences

Let the numbers represent the inputs and outputs of the family planning system.
What is the total input of the system?
What is the output of the system?
Efficiency = output/input = ?
Example of Strategic Choices and Consequences

Let the numbers represent the inputs and outputs of the family planning system. What is the total input of the system? - 60
What is the output of the system? - 10
Efficiency = output/input = ? – 1/6
Example of Strategic Choices and Consequences

Let us DOUBLE the investment in the FP system.
What is the total input of the system?
What is the output of the system?
Does the efficiency change?
Example of Strategic Choices and Consequences

Let us REDESIGN the system and REALLOCATE resources.
What is the total input of the system?
What is the output of the system?
What happens to efficiency of the system?
What does it cost us????
Don’t forget a critical feature of the family planning system

Demand → Access → Services → Satisfied users

Feedback from satisfied (dissatisfied) users

Why is this important?
What does this say about stakeholders on the team?
What are the Core Capabilities of Learning Teams?

There are five vital “disciplines” that together build organizations that can truly learn to reach their visions and goals –

1. Shared Vision
2. Mental Models (Mindsets)
3. Systems Thinking
4. Team Learning
5. Personal Mastery

Reference: Senge
Shared Vision

The practice of shared vision involves the skills of unearthing shared “pictures of the future” that foster genuine commitment and enrollment rather than compliance.

With a shared vision, people excel and learn, not because they have to, but because they want to.
Mental Models (Mindsets)

Mental models (mindsets) are deeply ingrained assumptions, generalizations or even pictures of images that influence how we understand the world and how we take action.

We need to turn inward, critically look at our own internal pictures of the world, bring them to the surface and open them to rigorous scrutiny by others.
Systems Thinking

Systems thinking is ... a body of knowledge and tools that has been developed ... to make full patterns clearer and help us see how to change them effectively.

The essence of systems is connections and feedback.

Management failures to recognize how people and processes are connected in organizations, and how feedback can disrupt plans and directives reflects a lack of systems thinking.
Team Learning

The discipline of team learning starts with “dialogue,” the capacity of members of a team to suspend assumptions and enter into genuine “thinking together”

Team learning is vital because teams, not individuals are the fundamental learning unit in modern organizations.
Personal Mastery

The discipline of personal mastery starts with clarifying the things that really matter to us and living our lives in service of our highest aspirations.

Question: “What are you living for? What are you willing to die for?”
Each Core Learning Capability Is Integral to a Sustaining a Learning Organization

CORE LEARNING CAPABILITIES
FOR TEAMS

FOSTERING ASPIRATION
• Personal Mastery
• Shared Vision

REFLECTIVE CONVERSATION
• Mental Models (Mindsets)
• Dialogue (Team Learning)

UNDERSTANDING COMPLEXITY
• Systems Thinking
The Leader is a Catalyst for Change

Learning Organizations are the Instruments of Change