Erasmus University Rotterdam
José Nederhand*, William Voorberg, Victor Bekkers & Lars Tummers
* Corresponding author (Nederhand@fsw.eur.nl)
Department of Public Administration
P.O. Box 1738
NL 3000 DR Rotterdam

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Social innovation is an inspiring concept. Recently, it has been embraced as a new reform strategy for the public sector, in order to face social challenges and budget austerity (Voorberg et al. 2014). Social innovation can be defined as: ‘’...the creation of long-lasting outcomes that aim to address societal needs by fundamentally changing the relationships, positions and rules between the involved stakeholders, through an open process of participation, exchange and collaboration with relevant stakeholders, including end-users; thereby crossing boundaries and jurisdictions.’’ (Bason 2010; Hartley 2005; Chesbrough 2003; Osborne & Brown 2011; Sørensen & Torfing 2011)

Perceived new elements are introduced into a public service – in the form of new knowledge and/or new management or process skills - which represent a discontinuity with the past. This process can contribute to improving the quality of public services as well as to enhancing the problem-solving capacity of governments to deal with societal challenges (Damanpur & Schneider 2009; Walker et al. 2011).

The discontinuous character of innovations offers a challenge to policymakers and service managers (Osborne & Brown 2011). By its nature, innovation carries significant risks – such as the failure of the innovation, its non-adoption by the producers or users of a good or service, or its inability to be sustainable in the long term (Brown & Osborne 2012).

The goal of the game is to experience how processes of social innovation might work out and the challenges/difficulties various stakeholders experience when they embark on the social innovation journey.

**Specific goals of the game**

- Getting a sense of how the interplay between self-organizing communities of citizens and governments shapes the emergence of new public services, in particular welfare services (Boivard 2007; Needham 2008; Nederhand et al. 2014; Ostrom 1990)
- Experience a process of collaborative problem-solving in which different actors are involved with different interests, resources and risk governance approaches (Ansell & Gash 2008; Provan & Kenis 2008; Brown & Osborne 2013)
- Indicating the drivers and barriers of co-creation and self-organisation within innovation processes (De Vries et al. 2014; Voorberg et al. 2014)
- Gain insight into the complex nature of the implementation, adoption and diffusion of public sector (governance) innovations (Bazurli et al. 2014; Downe et al. 2004; Korteland & Bekkers 2008)
Playing the game

The Social Innovation Game consists of a simulation with 11 players and a backward mapping exercise that is mainly focused on the adoption and diffusion of an innovation. The simulation, including preparation and reflection, takes about one hour and a half. The backward mapping exercise will take about 30–45 minutes. Both components could also be played independently. More practical information about the course of the game can be found within the different parts of the game itself. Further, themes that have emerged from relevant studies on social innovation are included in the reflection and teaching notes of the game. These themes can be used to guide the reflection process. The set-up of the reflection process allows for some flexibility: some themes/dilemmas can be picked out in line with the specific learning goal of the players.

The game is developed in English based on the UK context. The applicability of the game is of course not limited to the UK context alone as many countries face problems with their welfare states that call for collaborative problem solving. We highly encourage people to play the game in other countries too by slightly adapting the case description and the roles to the (government) context of that particular country. In the Appendix we have made a start by creating a translation table¹.

Target group

This game is suitable for all parties who are interested in getting a better understanding of the complex nature of public sector innovation and collaborative public management. This game is particularly interesting for policy officials, politicians and public professionals who are dealing with innovation processes, along with innovation researchers.

¹ Names of persons, organisations and places that are used in this game are all fictional.
The local government of New Rosetown, like all local authorities in the UK, covers care costs for people needing social care services. New Rosetown’s Elderly Care Centre with Nursing (NRCC) is the only privately-owned elderly care house with nursing that is located in the small town and houses 45 elderly people. Its inhabitants and their families are very happy with the quality of the care provided. In addition, a lot of social activities are organised, such as bingo evenings, computer courses and festivities during the weekends. The staff is competent and cheerful.

Recently, however, things have changed due to the introduction of new governmental regulations and the announced budget shrinks. These regulations are introduced to keep the welfare state affordable. Consequently, elderly people are bound to live independently for a longer time. For the NRCC this means that they are forced to close down at the end of the year due to an insufficient occupancy rate as many elderly people are not eligible for professional care anymore.

The announcement of the closing down of the care house has led to many rumours in the local community. On the evening news, the inhabitants of New Rosetown have also heard alarming voices that home care organisations face budget cuts up to 40%. This news makes them wonder whether home care organisations can still provide high-quality personal care and attention for their elderly relatives under these new circumstances.

Under the slogan: ‘‘We will not let our elderly people be the victim of weak governmental policies’’ a group of very motivated inhabitants of New Rosetown took the initiative to work out a plan to start up a community enterprise. The goal of the enterprise is to aid the elderly people of New Rosetown in living independently. In order to do that, they aim to partly take over the care that home care organisations are currently providing (such as housekeeping, personal care, applying prosthetics, administering medications, supporting meal preparation and bedding). Additionally, they wish to deliver these services more humanely by spending more time with the elderly than the regular home care professional. The social component of care and companionship is highly valued by the enterprise. The initiators ask the local authority to award them with a contract, with the corresponding financial compensation, to provide home care services, just like regular private home care organisations. The main difference with the private companies is that the services of the community enterprise will be conducted mainly by unpaid local volunteers. This means that the vast majority of the financial compensation will be used for the purchase of care equipment and to finance elementary care courses.
At the same time there is a strong lobby from health care professionals who are now working at the NRCC and home care organisations in New Rosetown. They argue that the local government should invest their limited welfare budget entirely in enhancing the contract price they offer for the now existing home care organisations in New Rosetown, since they fear that if the citizens take over home care facilities, they will lose their jobs: ‘‘Why pay unprofessional citizens to deliver elderly care while we, the specialists, with years of experience, will be left unemployed at home due to excessive budget cuts?’’

Next month, the local authority of New Rosetown formally has to make a decision about the allocation of the welfare budget. In anticipation, inspired by the idea of social innovation, the councillor responsible for the welfare portfolio (Alex White) has organised a meeting in which relevant stakeholders can exchange ideas, gain insight into each other’s positions, (ideally) form collaborative alliances and come up with a decision.
<table>
<thead>
<tr>
<th>Role Description</th>
<th>Person</th>
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<tbody>
<tr>
<td>Observer of the discussion process</td>
<td>Pete May</td>
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<tr>
<td>Chairman of the meeting (external mediator)</td>
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<tr>
<td>Manager of the meeting</td>
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<tr>
<td>Observer of the discussion process</td>
<td>Theresa Fallon</td>
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<tr>
<td>Observer of the discussion process</td>
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<tr>
<td>Councilor responsible for welfare</td>
<td>Alex White</td>
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<tr>
<td>Managing director of the New Rosetown Elderly Care Centre with nursing</td>
<td>Isabella Morgan</td>
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<tr>
<td>Representative of Care professionals working in home care in New Rosetown</td>
<td>James Baker</td>
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<tr>
<td>Resident who is one of the initiators of the community enterprise</td>
<td>Stuart Johnson</td>
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<tr>
<td>Elderly woman living in New Rosetown</td>
<td>Annabel Hill</td>
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<tr>
<td>Civil servant working in the financial department of New Rosetown</td>
<td>Jeanine Clover</td>
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<tr>
<td>Inhabitant of New Rosetown and council member</td>
<td>Melissa Simons</td>
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<tr>
<td>Civil servant manager working in the welfare department of New Rosetown</td>
<td>Teddy Greening</td>
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<tr>
<td>Civil servant working in the financial department</td>
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You are Annabel Hill. You have reached the age of 83 and you have been a widow since 2007. For years you have lived in your one-family house with a garden in New Rosetown. Your children, of whom you are very proud, are both happily married and often call you with stories about their children (your grandchildren). When they were in their twenties they chose to leave New Rosetown for the big city to find a job. Because both children have demanding full-time jobs and are very busy with raising their kids, they only come over on weekends.

You still sleep upstairs and until recently you always enjoyed good health. However, for the last few months your health has been deteriorating. Walking is becoming increasingly difficult and last week you fell a couple of times. Fortunately you only had a few bruises. More problematically however, you are exhibiting the first signs of dementia and you are becoming a bit forgetful.

Because of your age you find it difficult to maintain social contacts so your social world is getting smaller and smaller. The few friends that you have live 20 minutes’ walk away. You are on friendly terms with your neighbours and they help you out sometimes, but you don’t want to ask too much because your neighbours are very busy and you do not want to be a burden.

A couple of months ago you were placed on the waiting list for the elderly care centre. Your current home is too big to maintain and you are worried about your declining health. You would also like to have more contacts with other elderly people. Now that the centre is closed down you are not eligible for a residency in the NRCC. As home care facilities are also cut back, you are deeply worried about what your future will look like. That is why you chose to participate in this meeting.

What you really value is good quality care, but whether that is provided by a group of citizens or by professionals does not matter to you.
You are Isabella Morgan, 44 years old, and you have worked for more than 20 years as a health care professional for the New Rosetown Elderly Care Centre with nursing (NRCC). You are very dedicated in offering the best care possible with the limited resources the care centre is getting from the local authority. In the time you have worked for the organisation, you were promoted several times and now you act as managing director. As a managing director it was your responsibility to communicate the bankruptcy of the organisation to the professionals, the staff and elderly people who live in the NRCC.

The idea that inhabitants of New Rosetown with no knowledge of professional care will be taking over the care that the NRCC is now providing, while trained professionals who are currently working at the NRCC will be left unemployed, is ridiculous in your opinion. Good quality care can and should not be provided by citizens with no formal care degree. Moreover, citizens are unreliable partners. When they feel like it, they can just stop volunteering at all times. What we need is reliability in care provision, and only professional organisations can guarantee that.

Your strategy at this meeting is to convince the other parties that what elderly people really need is the care of professionals because you fear that you, yourself and all other professionals will otherwise become unemployed. Your professionals possess the required skills and competences. Also they are annually retrained to keep up with the newest health developments and innovations in their specific field of expertise: elderly people.

Deep in your heart you still hope that the NRCC can be financially saved by the local or national government, but you realize that this option is very unlikely. Nevertheless, you can always try. The second best solution for yourself and your personnel would be that the local authority invests in the home care organisations of New Rosetown. You hope that because of the increasing workload of the home care organisations they will be in need of well-trained professionals, so that the majority of your staff will find jobs there.
You are James Baker, a 30 year old health professional who is working in home care in New Rosetown. You recently graduated from college where you completed your studies in nursing. You, as the breadwinner of your family, are very motivated to build up a career in New Rosetown. You and your wife are expecting a baby.

Unfortunately your position is at stake due to budget cuts. According to the principle: ‘last in, first out’, you would be one of the first persons to be declared redundant when your organisation receives less contract money from the local authority. You think that all those cuts are based on a big fallacy. The workload does not decrease. In fact, there are more elderly people than ever.

You share the conviction with Isabella Morgan that it is ridiculous that inhabitants of New Rosetown with no knowledge of professional care will be taking over elderly care, while trained professionals of the NRCC and home care in New Rosetown are left unemployed. Good quality care can and should not be provided by untrained citizens. Taking care of elderly people requires very specialized knowledge of dementia and Alzheimer for example.

You wonder why the citizen group wants to start up their own community enterprise while they could also sign up as volunteers at home care organisations instead. They are more than welcome there! If the money from the local authority is invested in the community enterprise, it will come at the expense of home care organisations and the NRCC in New Rosetown.

Your main concern is to continue working as a paid professional. If that is possible within a new context where volunteers are providing an important part of the service, then it’s okay with you, but you have reasonable doubt about whether that’s going to be possible.
You are Stuart Johnson, a 64 year old retired civil servant and a man with a mission. Your whole life you have tried to live according to what J.F. Kennedy once said: “One person can make a difference, and everyone should try.”

This is exactly what you are doing right now: together with the other initiators you want to offer an alternative to the government-based care system which is often susceptible to budget cuts. As the result of current austerity policies, the welfare state is being stripped down and elderly people are becoming the victims. The closing down of elderly care centre NRCC and the cuts on the home care sector are yet more examples that underlines your opinion.

Together with a group of 4 other initiators, you have decided to commit yourself to helping this weak group. You do not want to become part of the problem - the big sluggish home care organisations in New Rosetown that have little time and attention for their clients - but part of the solution: an alternative! You and the other initiators want to maintain control and stay independent from the current home care organisations. Besides that, the home care organisations have no financial resources to educate their volunteers. When local governments do give more money to those organisations, you know for sure that the money will be mainly used to budget out existing financial shortages.

You want to start a small and healthy community enterprise which focusses on a specific target group: elderly people. All elderly people are welcome: the ones who are eligible to receive care and will thus be financially compensated for by the government, but also the ones who are not financially compensated for. Your business model allows for this flexibility because you do not have to pay expensive labour costs due to the use of volunteers.

What you hope is that the local government will not act in a predictable way and only grant contracts to the current care providers, but will actively consider the option of financing the community enterprise, because with the financial compensation you can do so much more than when the money is given to the current home care organisations. We can do it cheaper and better! It is therefore a win-win situation for the local authority and the elderly people in New Rosetown.

Fortunately you personally know the councillor, who secretly told you he is in favour of granting the community enterprise a contract. What could be difficult, however, is the attitude of the home care organisations, the civil servants and the GPs with whom you have to cooperate. They could really thwart the community enterprise, which is also dependent upon the goodwill of the other organisations. For instance, you are not very enthusiastic about ideas of introducing bureaucratic regulations and monitoring procedures as you want to keep your organisation as flexible as possible with a minimum of overhead costs.
You are Alex White, the 41 year old councillor who is responsible for welfare in New Rosetown. You are happily married to your wife Catherine and enjoy spending time with your three young children and cat.

The provision of good quality welfare arrangements is one of your many responsibilities. The system is outdated and needs to be updated in order to be sustainable. The children of today also need to have the guarantee that when they grow old they can enjoy good quality welfare. You regret the closing down of the NRCC, but looking at the current political whim in national politics, you think it is best to strategically adapt the welfare provisions in your district. A lot of political pressure is exercised to turn to the civil society for answers to contemporary challenges.

You are in favour of the idea of the community enterprise for three reasons. First, it is the cheapest/most efficient solution with the best value for money. The enterprise works with volunteers. Second, you think that they will provide good quality care, thus more patient satisfaction. They are a local party, which is only focused on elderly people. Their local knowledge and familiarity with the New Rosetown elderly may be an advantage. Third, working with an innovative community enterprise would mean a lot of positive attention and status for the local authority of New Rosetown. The community enterprise in your district could become a robust best-practice example. You are convinced that this is the only way the level of care can be high within the current funding system. It fits perfectly with the Big Society idea: citizen participation is very important!

Last week, when you spoke to Stuart Johnson (one of the initiators of the community enterprise) you shared your secret wish with him that if it was up to you, you would support the citizen initiative. Without taking some risks, innovations can never occur. That is something that you learned from your work in the private sector. That is the reason you established this collaborative process that can enable negotiation to take place with a broad range of stakeholders, to reach a shared understanding of acceptable levels of risk. It should be an open negotiation process that is not limited to politics alone as the societal actors are the main carriers of the risks.

You just started working in the public sector (two years ago) and you have already gained a lot of respect. As a new player in the field of welfare, you do not personally know all the welfare actors involved, unlike your civil servants. This facilitates your personal decision to shake up existing power relations to facilitate innovation.

Imagine the local authority of New Rosetown as a frontrunner in democratizing public welfare services…
You are Teddy Green, a local government manager of 46 who works in the welfare department. Your position enables you to link the citizens in New Rosetown to the right back office. It is your job to help citizens by smoothing the contacts with the system world of the local government.

As manager of the frontline workers, you have a lot of knowledge of what is going on within the local community. Generally speaking, most citizens are enthusiastic about the plan of the group of initiators who want to set up a community enterprise that offers more personalized care. You think that the close-knit local community of New Rosetown is well able to set up such a community enterprise. People care for each other and the idea that many citizens want to become actively engaged in local welfare provision delights you. Citizen participation is an important goal of the municipality and of the national government. A better, location-based service will be provided. That is why you will offer your help to Stuart Johnson in this meeting, as you know the councillor (Alex White) who is also in favour of the idea. As a real people’s manager, you are hoping to create an atmosphere of openness that contributes to the creation of mutual bonds between opposing parties and group harmony. The group is all in this together, so you hope a satisfying solution will be reached.

Nonetheless, you have to move strategically in this meeting as you know some people are against the idea of supporting the community enterprise. Yesterday, when you walked past the coffee machine in the cafeteria, you accidentally over-heard a group of civil servants talking about the idea. They were, to say the least, not very positive. This could be difficult. They could really thwart the community enterprise by slowing down the process, which is dependent on the goodwill of other administrative departments too.
You are Jeanine Clover, a civil servant who works at the financial department. You are 57 years old and very experienced in your job. You have a large social and professional network in the local government of New Rosetown. It is your job to guard the financial position of the local government of New Rosetown.

Of course you have heard of the plan to establish the community enterprise. Citizens can be very unpredictable and demanding. They are fixated on satisfying their own interest and only do what is right for them at that particular moment. It is the local government who they expect to turn up when they need money. It is not smart to do business with a few individuals who act on personal whims.

The organisation is facing a lot of budget cuts lately, so it is not the time to take big financial risks. You would rather do business with professional private parties. Why would you risk the reputation and legitimacy of the whole local government of New Rosetown? Besides this, it is also very irresponsible to experiment with people’s health and well-being. You would rather not give the control away in order to keep things manageable.

Imagine, if you only think about what the local media might say if you give away scarce tax money to some citizen group that has no experience with management at all, and it all turns out to be a big mistake…

If the meeting develops in the wrong way, in favour of the community enterprise, you will attempt to strengthen your position by introducing at least some administrative checks that the citizens will have to comply with in order to create accountability. The risks will be much smaller as the supervisory framework is well taken care of. It is necessary to develop procedures to monitor and assess the output and outcomes of the community enterprise by using performance and benchmark systems.
You are Melissa Simons, a 39 years old inhabitant and city council member for the New Rosetown Labour Party. You grew up in New Rosetown. One of your hobbies is walking around in parks in the area of the NRCC. It really is bizarre that this essential building block of the community is closing down.

As one of the representatives of the people of New Rosetown you wanted to join this meeting. You have been active in politics for almost 20 years now. Recently, the idea grew on you that the role of the city council is not that important any more. Councillors and civil servants communicate more with individual citizens than with elected city council members. Likewise, citizens seem to prefer to act on their own rather than contact a city council member. What is the role of the council when citizens are directly participating and negotiating with councillors and civil servants? The benefits and consequences of identified risks should be negotiated politically! This is something that is worrying you. Furthermore, values such as equality of all persons could be at risk when the government just listens to the citizens with the most social/political capital that best fit their discourse. You fear that disadvantaged elderly people (the sick and/or grumpy ones) will not profit from the services of the community enterprise as you cannot force volunteers to take care of difficult elderly people.

This is the main reason you agree with the health care professionals. Allowing care to be run by citizens will lead to complicated questions regarding accountability, quality of the care provided and possible unequal access to the services of the community enterprise.
You are Theresa Fallon, a neutral observer of the discussion process. You write down general points that you notice in the interplay between stakeholders. Pay particular attention to identifying drivers and barriers to the innovation process.
You are Vince Smith, a neutral observer of the discussion process. You write down general points that you notice in the interplay between stakeholders. Pay particular attention to identifying drivers and barriers to the innovation process.
You are Pete May, a neutral chairman of the discussion process. It is your job to avoid having the game result in a dead-lock and to keep the momentum going. In order to keep the process going and to introduce some dynamics, you have two options. First, you can hand-out one of the three interventions to all participants (see below)\(^2\). Make sure the participants have enough time to envisage what the intervention means for their position and strategy. Second, when there is a deadlock in the process, introduce a 5-minute break for informal consultations between the participants. Indicate that the participants have to stay within the room because outside the journalists are already waiting. For a more detailed teaching guideline about the process, read the practical (teaching) guidelines carefully.

\(^2\) Make sure you have enough prints to hand out each of the possible interventions to the participants.
Practical (teaching) guidelines for the game

The game will be led by Pete May, the neutral chairman of the process. Pete May should report in advance that the social innovation game is planned and if possible hand out the case description and roles at minimum one day before the game will be played. The game does not require any preparation and prior knowledge is not required, but sufficient time for reflection upon the roles is advised.

1. Let the participants read the case study.
2. Ask for uncertainties/questions stemming from the case description. Keep it short to keep the momentum
3. Hand out the different roles
   - Check in advance if participants have certain preferences to make sure participants fulfil roles that they can identify with. Give the participants time to envisage what attitude they will adopt. Let them also think about the attitude of the followers they represent in the meeting. The participants are allowed to write things down and so are the appointed observers of the process. Hand out the nameplates.
   - The chairman should use this time to carefully read the three intervention options outlined on the following pages.
4. Start the game as chairman
   - Introduce yourself as independent mediator
   - Begin the meeting with the following motivational speech that emphasize the shared interest of the process in reaching consensus about the welfare budget: “Today is not a usual day. Today is the day that we, as a group of people from New Rosetown with a shared interest in elderly care, will reach an agreement. Finding a solution is very important for you, and for me. At the end of the meeting I will have to defend what we have decided to the journalists who already stand outside this door, waiting for a reaction. We have 35 minutes only. This means that there is significant time pressure. But in 35 minutes, anything is possible: that’s something we should not lose sight of.”
   - Set out the following rules:
     - One person at the time is allowed to speak
     - If a person speaks for too long, the chair will cut them off
     - There is no right or wrong
   - Start the introduction round in which each actor has 30 seconds to introduce him- or herself and then give the first word to Alex White (the alderman who initiated the meeting)
5. End the game
6. Start the reflection round (how did it go?)
7. Ask the observers to share their thoughts – how do they explain the outcomes of the game?
8. Connect the experiences with the reflection part of the game
9. End the game with a last question round
**Intervention A – ‘Extra Money for Experimentation’**

The Ministry of the Interior has announced that the minister is willing to facilitate experiments with different forms of citizen home care. In facilitating these experiments, they are supported by the large private company ISQ-TEC. In line with the social strategy of ISQ-TEC the CEO chose to sponsor innovative social enterprises with financial resources. The condition of the money is that the company wants to have a significant say in the development of the enterprise. One of the conditions ISQ-TEC set is that the local government should interfere as little as possible with regulations and bureaucratic monitoring procedures because that will hamper the development of the enterprise according to them.

Due to the intense lobbying efforts of Alex White, the local government of New Rosetown is selected as a possible partner of the Ministry with the citizen initiative of Stuart Johnson as its main case. This means that the citizen initiative will receive a substantial amount of money from the central government and ISQ-TEC. Within a month, 100,000 euros will be made available to the initiators of the community enterprise in order to facilitate experimentation with home care provided by citizens.
Due to major national criticism of the welfare cuts of the UK government, the Cabinet was forced to resign. Meanwhile, due to new elections, the new Cabinet is formed by the ‘left-wing party’ - the big winner of the elections. This, of course, will have major implications for the current national welfare policies. Indeed, their party manifesto states that welfare issues will be addressed radically differently: more money will be allocated towards institutionalized governmental care.
Intervention C ‘Certification mark for home care organisations’

Last year, a research report about the use of coercion in elderly home care was published. The media covered it extensively:

‘‘Where tying down, locking up in bed with side rails, forced washing and nursing are disappearing in nursing homes, these practices are still common practice in the home situation of elderly people.’’

‘‘In 75% of all cases, family members take the initiative to impose restrictions on the freedom of the elderly. But home care professionals also impose those sort of measures. There appears to be a direct link between the load of the caregiver and the amount of coercion used. At each step of additional load on a scale of one to nine, the risk of coercion rises by 13%.’’

The conclusions are interesting due to the accelerated deployment of policies that cogently stimulate elderly to live longer at home. In reaction to public uproar, the Ministry of Public Health introduced a new and improved (stricter) certification mark for home care organisations in order to ensure professional care standards.
Backward mapping

This part of the game is concerned with issues of diffusion and adoption of an innovation. In order to understand how public sector innovations are up-scaled and adopted, a backward mapping exercise is used. Backward mapping (BM) starts with a specification of an endpoint and then works backwards to determine what must be done to achieve this particular result. The aim of this backward-mapping exercise is thus to reflect upon how this situation could have emerged.

Form groups of three and brainstorm about how the processes of diffusion and adoption have taken place within the UK. Prepare to present your findings in the general discussion. Pay particular attention to the questions:

- What were important events explaining the popularity of the initiative?
- What were important influential factors in causing the diffusion of the initiative?
- What kind of allies or coalitions were needed to cause the diffusion?
- Which values prevail over others in these processes?
- Imagine you are a public official who dislikes such initiatives, what can you do to prevent this scenario to happen?
In this section, several themes that are relevant to processes of social innovation are discussed. These themes have emerged from relevant studies and can be used to guide the reflection process. First, we will discuss various value conflicts and fields of tension. Second, we will outline some guidelines to reflect upon the different interventions. Third, the rounds model is introduced as an analytical tool for reflection upon the course of the process.

**Value conflicts and tension fields**

Strategic decision-making has to do with making choices. The conflicts and tension fields the participants experience in the game cannot easily be resolved by making use of logic and persuasion on rational grounds. This is because most of them are value conflicts that often have a normative, rather than a rational orientation (Stone 2002).

Examples of value conflicts and tension fields that were present in the game are described below.

The first value that is at stake in this game is equal access to health care for all patients. In the game, Melissa was especially concerned with this value. Equal access to health care for all persons could be at risk if the government listens to the citizens with the most social/political capital who best fit their own discourse. Stuart, a citizen with a lot of social and political capital, in his part sees himself as defender of the weak and poor elderly people. However, it could be that disadvantaged elderly people (the sick and/or grumpy ones) will not profit from the services of the community enterprise as volunteers cannot be forced to voluntarily take care of the difficult elderly. Therefore the argument goes that professional governmental organisations should safeguard the value of inclusiveness and equality of care receivers.

Second, reliability of the public service is something about which many participants worried in the game. Are citizens capable of providing reliable, high-quality care? Elderly care is something that governments should arrange because it is deemed to be very important by citizens. The question is now whether a professional organisation is necessary to guarantee the continuation of the public service or whether governments could also ‘do business’ with more unreliable (?) citizen groups.

A third value that is at stake is accountability. The role of Jeanine is especially very focused upon this value. The argument she uses is that risks are much smaller when supervisory frameworks are well taken care of. Administrative checks could be introduced that the citizens have to comply with in order to create accountability. Hence, monitoring procedures, performance and benchmark systems should be introduced. The introduction of fiche 3 about the use of coercion in elderly home care could back up the call for accountability and regulations in order to safeguard the well-being of elderly people. At the same time, the introduction of these kinds of control checks could come at the expense of flexibility for the citizens groups who are involved.
Close governmental control of citizen initiatives could push citizen groups away from informal, participative and/or democratic types of decision-making towards more bureaucratic forms of organisation. They may be forced to scale up, which will drive the citizens further away from their original constituency.

Quality of care is a fourth value that is at stake and that is in conflict with the value of efficiency. According to various participants, quality of care is violated as a result of budget cuts to home care organisations. The professionals have less time for social companionship as they work according to a tight and efficient schedule.

Furthermore, a tension field between innovation and tradition is present. Personal solidarity and loyalty of civil servants to care professionals who they have known for a long time could make the choice to allocate resources towards the new player in the field difficult when it happens at the expense of the budget for home care organisations. On the other hand, a lot of status and recognition can be earned if the local government takes the risk to cooperate with a new third sector partner and this cooperation form works out well.

A sixth value that is present in the case is that of democracy. The question at hand is when a solution can be deemed as democratic and legitimate. Is it legitimate when governmental organisations directly cooperate with individual citizens and thereby bypass the representative citizen council? Or when, governmental parties directly negotiate with societal parties instead of discussing the issue in the town council?

Another tension field occurs if we take the various risk governance approaches into consideration. By its nature, innovation carries significant risk – such as the failure of the innovation, its non-adoption by the producers or users of a good or service, or its inability to be sustainable in the long term. There are three sorts of risks (Brown & Osborne 2013): (1) a consequential risk, which can occur when one deviates from established methods or experiments with new ways of doing things. Such activities can present a risk to people’s health and well-being. It is a direct risk to individual service users. (2) Organisational risk: reputation, legitimacy and possible sustainability of a public service organisation and its staff. Many areas of public services have become highly regulated and driven by audits, performance management and targets that militate against both taking risks and promoting innovation. (3) Behavioural risk: risk to the stakeholders surrounding a service and/or the wider community. When actors apply different risk approaches, tensions could arise.
**Possible questions for reflection:**

- Which tension fields can be distinguished?
- What kind of resources did you/the other participants have to overcome these tensions?
- Which risks can be identified? How did you cope with these risks?
- When you look at these three risk governance approaches described by Brown & Osborne (2013), which one did you feel most familiar with?
  - The risk minimization approach: risk is considered as a negative condition to be avoided. It is a closed systems approach. It assumes that risk is something internal to an organisation and that it can be managed through internal processes. It is an expert process.
  - The risk analysis approach: acknowledges risk and seeks to manage its consequences. Opens up the process to a potential negotiation of the benefits and consequences of identified risks. It is a political process.
  - The risk negotiation approach: enables a plurality of voices to engage in debates about the governance of risk. Inclusive process to all stakeholders. Interactive process.

**Reflection upon the interventions**

It is interesting to reflect upon what the three interventions meant for power relations between the participants. The first fiche strengthens the position of Stuart Johnson as the community enterprise is made less dependent on the local welfare budget of the local government. The intervention also weakens the position of the local government and in particular that of Jeanine Clover. This fiche could create discussion about whether it is desirable for a private company, who backs the Ministry of the Interior with financial resources, to have substantial influence in public regulations.

The second fiche strengthens the position of Isabella Morgan of the publicly funded elderly care centre NRCC and the position of James Baker of the home care sector. They will become less dependent on the support of the community enterprise for the provision of good quality care.

The third fiche could affect the legitimacy of participants who work in home care and the participants in favour of the community enterprise. This is because coercion is often exercised in home environments and not in the more regulated professional environments of nursing homes and elderly care centres. This could strengthen the positions of the participants in favour of maintaining the NRCC and the position of Jeanine Clover, who plead for more regulation and checks. However, the introduction of a certification mark does strengthen the position of the home care organisations who obtains this mark. The question at hand is whether citizens groups could also ensure the professional care standards of the mark.

**Possible question for reflection:**

- How did the intervention(s) affect relations between the participants?
**Decision making: a model of multiple rounds**

Decision making about a specific issue, like the one at hand, takes place in several policy arenas within which actors with different interests and resources interact with one another in order to push their issue, problem or solution forward. These actors are more or less dependent on each other due to the policy challenges at hand. All these actors develop strategies in order to influence the way in which a specific policy issue is defined, as well as the actions and measures that have to be taken in order to deal with this issue. The game is an example of one such policy arena.

Decision-making within policy arenas also takes place in various stages or rounds. Decision-making can be considered to be a battle consisting of several sequential rounds. Teisman (2000) claims that policies do not stem from an intended course of action formulated by one actor, but result from a series of strategic interactions among several policy actors, each with their own understanding of the nature of the problem, the feasibility of particular solutions, normative preferences and their own resources or capabilities that may be employed to affect the outcome. The outcomes of the different rounds together determine the outcome of the policy battle. Decision-making rounds can be demarcated by determining the most crucial decisions of decision making in retrospect. This particularly concerns the choice of decisions that in a later period of decision-making serve as an important point of reference for the behaviour of the actors that are present at the time.

**Possible questions for reflection:**

- Which rounds could be identified and who were the winners of that particular round and because of what?
- Which drivers were visible in the process that speeded up the decision-making process?
- Which barriers were visible in the process that slowed down the decision-making process?
- When no final decision is taken, reflect upon what was needed in order to reach a decision.

*Note: what is a solution for one could be a problem for another. Actors involved in decision-making often do not agree on the classification of a certain stage in the process.*
Reflection guidelines for backward mapping

Part B of the game concerned the identification of factors that influence the diffusion and adoption of an innovation. This phase often encompasses a process of re-invention, re-innovation and experimentation. Diffusion of an innovation can be defined as “a process in which an innovation is communicated through certain channels over time among the members of a social system.” (Rogers 2003) Adoption can be defined as “the [voluntary and/or coercive] process through which [an organisation] passes from first knowledge of an innovation, to forming an attitude towards the innovation, to a decision to adopt or reject, to implementation of the new idea, and to confirmation of this decision.” (Rogers 2003)

Adoption and diffusion

Different patterns of meaning play an important role in making an innovation attractive or not - for example, economic fitness (efficiency) and social fitness (legitimacy, symbolism and fashion). Innovations should not only provide for mere efficiency solutions but appropriate ones for which (external) public and political support exists (March & Olsen 1989). In the process of adoption of an innovation, three sorts of meaning can be distinguished.

- Functional meaning (logic of consequence): the importance of the (perceived) characteristics of an innovation in terms of presenting an attractive discontinuity with past experiences.

  Characteristics (Korteland & Bekkers 2008):
  
  - (1) perceived as better – social prestige or economic for example.
  - (2) innovation perceived as being consistent with existing values and norms, past experiences, needs of potential adopters.
  - (3) complexity – the degree to which an innovation is perceived as difficult to understand and use.
  - (4) triability – the degree to which an innovation may be experimented with.
  - (5) observability – degree to which the results of an innovation are visible to others.
  - (6) reinvention – the degree to which an innovation can be modified by a user in the process of adoption and implementation.

  The adoption could be hindered when the innovation is in competition with other innovations that are comparable.

- Political meaning (logic of appropriateness): political opportunity structure. In this case the involvement of citizens in service delivery is politically valued in national politics. By adopting this politically valued way of working, local governments could show that they are able and willing to meet political and public concerns regarding this issue.

- Institutional meaning (isomorphism): forces one unit in a population to resemble other units that face the same set of environmental conditions, such as legitimacy or fashion. It leads to homogeneity.
  
  - Coercive isomorphism: formal power (like legislation), informal power (like peer group pressure)
  - Mimetic isomorphism: models another organisation due to insecurity – at least action is taken
  - Normative isomorphism: professional standards about what is desirable.
When it comes to diffusion, the nature of the innovation and the characteristics of the (potential) adopter are important. The following factors are examples of influences on the adaption and diffusion process:

- **Innovation characteristics** (ease in use of innovation, relative advantage, compatibility)
- **Environmental level** (environmental pressures e.g. media, public or politics), participation in networks, compatible organisations who adopt the same innovation, regulatory aspects)
- **Organisational level** (compatibility of public organisations with citizen participation: presence or absence of inviting organisational structures and procedures within the public organisation, slack resources [e.g. information, time, finances, technology, human resources], leadership styles, open attitude of public officials and politicians towards citizen participation, presence or absence of a risk-averse administrative culture (degree of risk aversion) and the degree to which policy entrepreneurs or boundary spanners, who have significant social ties, are willing to back the innovation. Barriers to upscaling usually emerge from the organisation itself (organisational inertia, resistance of concerned actors, scarce awareness of benefits).
- **Network characteristics** can also explain the spread of an innovation, such as the degree to which organisations are linked by high quality interpersonal networks, presence of mutual trust and a high degree of inter-organisational competition which will hinder exchange of knowledge and experience.

**Exchange of innovation information**

Diffusion policies that have been pursued to promote an innovation and characteristics of potential adopters are also important. When it comes to the diffusion policy, Downe et al (2004) states that the transfer of knowledge and the creation of innovation depend on the capacity and expertise of both the recipient organisation and the originating organisation. The degree to which the inventor, adopters and/or intermediary organisations are willing (attitude) and able (resources) to share their knowledge and experience about the innovation. Is there a diffusion- and or codification strategy in which dissemination activities are formulated? Brochures, protocols, project plans available, offering potential adopters the possibility to exchange information and experience with adopters at conferences/site visits, ambassadors/policy entrepreneurs. The diffusion and adoption of an innovation is influenced by the attention of the media to an innovation. It can make the innovation widely known and thereby stimulate the diffusion (Kingdon 1995; Newmark 2002; Rogers 2003).

Diffusion strategies that are only focused on the exchange of information regarding the advantages (brochures, websites etc.) will not be so successful. That is an idea-push model of innovation (Bazurli et al, 2014). Diffusion strategies based on the willingness to share and codify gained knowledge and experiences – that create a situation in which possible adopters can explore the different meanings of an innovation and can learn from each other’s experiences and uncertainties may be more successful.

**Conclusion**

_Taken all together, what do you define as successful social innovation? For instance, is it necessary for all parties to agree for the innovation process to succeed? Is success substance-orientated or process-orientated?_
Literature

Table A: translation table

<table>
<thead>
<tr>
<th>United States</th>
<th>France</th>
<th>Germany</th>
<th>Spain</th>
<th>Slovakia</th>
<th>The Netherlands</th>
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<tbody>
<tr>
<td><strong>Town</strong></td>
<td>New Rosetown</td>
<td>Rosallon</td>
<td>Rosenburg</td>
<td>Roses</td>
<td>Ružberok</td>
</tr>
<tr>
<td><strong>Roles and names</strong></td>
<td><strong>Elderly woman living in New Rosetown: Annabel Hill</strong></td>
<td><strong>Elderly woman living in Rosallon: Sarah Bonnet</strong></td>
<td><strong>Elderly woman living in Rosenburg: Anja Müller</strong></td>
<td><strong>Elderly woman living in Roses: Maria Alcala</strong></td>
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<tr>
<td><strong>Managing director of the New Rosetown Nursing Home: Isabella Morgan</strong></td>
<td><strong>Managing director of the Rosallon maison de retraite: Jade Mercier</strong></td>
<td><strong>Managing director of the Rosenburg Altenheim: Lina Schmidt</strong></td>
<td><strong>Managing director of the Roses asilo de ancianos: Lucia Aday</strong></td>
<td><strong>Managing director of the Ružberok Nursing Home: Lucia Molnár</strong></td>
<td><strong>Managing director of the Rosenburg Nursing Home: Isabella Jacobs</strong></td>
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<tr>
<td><strong>Representative of Care professionals working in the home care in New Rosetown: Jamer Baker</strong></td>
<td><strong>Representative of Care professionals working in the home care in Rosenburg: Mathis Bernard</strong></td>
<td><strong>Representative of Care professionals working in the home care in Roselles: Lukas Schneider</strong></td>
<td><strong>Representative of Care professionals working in the home care in Roses: Alejandro Barrio</strong></td>
<td><strong>Representative of Care professionals working in the home care in Ružberok: Martin Szabó</strong></td>
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<tr>
<td><strong>Resident who is one of the initiators of the community enterprise: Stuart Johnson</strong></td>
<td><strong>Resident who is one of the initiators of the community enterprise: Louis Martin</strong></td>
<td><strong>Resident who is one of the initiators of the community enterprise: Noah Fischer</strong></td>
<td><strong>Resident who is one of the initiators of the community enterprise: Daniel Fuertes</strong></td>
<td><strong>Resident who is one of the initiators of the community enterprise: Peter Baláz</strong></td>
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<td><strong>Mayor of New Rosetown: Alex White</strong></td>
<td><strong>Mayor of Rosallon: Raphael Duboi</strong></td>
<td><strong>Mayor of Rosenburg: Niklas Weber</strong></td>
<td><strong>Councillor responsible for welfare: David Gallego</strong></td>
<td><strong>Mayor of Ružberok: Matej Nagy</strong></td>
<td><strong>Alderman responsible for welfare: Alex de Bruijn</strong></td>
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<td><strong>Civil servant manager working in the welfare department: Teddy Greening</strong></td>
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<td><strong>Civil servant working in the financial department: Jeanine Clover</strong></td>
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<td><strong>Civil servant working in the financial department: Jeanine Schouten</strong></td>
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<td><strong>Inhabitant of New Rosetown and council member: Melissa Simons</strong></td>
<td><strong>Inhabitant of Rosallon and council member: Camille Blanc</strong></td>
<td><strong>Inhabitant of Rosenburg and council member: Stefanie Hoffmann</strong></td>
<td><strong>Inhabitant of Roses and member of the Plenary: Cristina Velo</strong></td>
<td><strong>Inhabitant of Ružberok and council member: Lenka Varga</strong></td>
<td><strong>Inhabitant of Ružberok and council member: Melissa Prins</strong></td>
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<td><strong>Chairman: Pete May</strong></td>
<td><strong>Chairman: Gabriel Moreau</strong></td>
<td><strong>Chairman: Javier Zayas</strong></td>
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