Theory of Change for Making Children's Rights Real in Scotland Evidence Paper no. 2 - Capacity

Rapid Review of the change process no. 2: "Making children's rights real by building cross-sector capacity and capability to integrate rights-based ways of working"

The Scottish Parliament **unanimously passed the UN Convention on the Rights of the Child (UNCRC) (Incorporation) (Scotland) Bill in a landmark vote in March 2021**. Many people and organisations in Scotland have since been considering how best to implement the Bill and ensure children's human rights are respected, protected and fulfilled.

While the 2021 Bill cannot receive Royal Assent in its current form (due to the October 2021 Supreme Court judgment), the Scottish Government remains committed to incorporating the UNCRC into Scots law to the maximum extent possible and as soon as practicable.

To support this transformative change, the Observatory of Children's Human Rights Scotland, Matter of Focus and Public Health Scotland were awarded a grant by the Scottish Government, to lead a **collaborative effort to develop a Theory of Change for the process of UNCRC implementation in Scotland**. The work took place between November 2021 and March 2022.

> **For further information on the project and to read through the Theory of Change for UNCRC implementation in Scotland, see the accessible summary, interactive report and full report.**

In February/March 2022, the Theory of Change project team – with the evidence strand led by Public Health Scotland – commissioned **rapid reviews on each of the four change processes making up the Theory of Change**. The reviews examined the evidence on what best effects change and how to apply this to the Scottish context through the Theory of Change.

In addition to informing the development of the Theory of Change, reviewers were tasked with writing **evidence papers providing summaries of the relevant evidence, to support policy-makers and practitioners in making evidence-based decisions towards their next steps** to further UNCRC implementation.

You can find the **four evidence papers** on the Observatory's website, including **Evidence Paper no. 1 on Policy**, **Evidence Paper no. 3 on Culture** and **Evidence Paper no. 4 on Empowerment**. While each of the four papers is themed around one of the change processes, the interconnectedness of the change processes means that the **papers are interrelated**, with the evidence sometimes crossing over.

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Theory of Change for Making Children's Rights Real in Scotland:

Rapid Review of the Change Process no. 2

Making children's rights real by building cross-sector capacity and capability to integrate rights-based ways of working

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The Colebrooke Centre for Evidence and Implementation

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Summary

Scope of the Review

This paper provides a high-level review of existing theory and evidence on how to build capacity and capability to embed a children's rights approach in Scotland. It synthesises reviews and individual studies from a wide range of fields, including complexity and systems-change, implementation and improvement science, community development, international development, global and public health, public policy and administration, social care and health care.

Working definitions for the Review

Capacity and capability-building

Capacity-building and capability-building are terms that can be used generically, to describe activities intended to strengthen and develop individual, organisational and system fitness for a range of purposes including better functioning and sustainability overall. In this review, they are used to describe activities intended to strengthen or promote a particular way of working, using a modified definition provided by the United Nations:[1]

Capacity-building is defined as the process of developing and strengthening the skills, instincts, abilities, processes and resources that individuals, organisations and communities in Scotland need to integrate rights-based ways of working. Capability-building is included in this definition, referring to the technical knowledge and know-how that individuals, organisations and communities in Scotland will need to do this work.

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[1] https://www.un.org/en/academic-impact/capacity-building#:~:text=Capacity%2Dbuilding%20is%20defined%20as,in%20a%20fast%2Dchanging%20world. Accessed March 4th 2022.

Above all, capacity-building is a *systems phenomenon*: '*The core idea underlying the concept of capacity is the ability of a system, large or small, to do something in a certain way, at a certain time and at a certain scale'*.[2]

Rights-based ways of working

At the time of writing this evidence review, the full legal framework for UNCRC incorporation into Scots law is not finally decided. It is envisaged a wide group of stakeholders – public authorities and private and voluntary sector bodies delivering "functions of a public nature", including functions carried out "under a contract or other arrangement with a public authority" – will be legally required to 'act compatibly' with the UNCRC requirements as laid out in the UNCRC Incorporation Bill.[3]

One of the key outcomes of UNCRC implementation is embedding a children's rights-based approach across all sectors and at all levels. Simply put, a children's rights-based approach means putting children's rights at the heart of everything. It is an approach grounded in the legal rights set out in the UNCRC, bringing together "*the general principles of the UNCRC and the wider international human rights framework to offer a practical tool for working with and for children and young people*".[4]

Work has already been undertaken in Scotland to develop the key tenets of a human rights-based approach. The Scottish Human Rights Commission has developed the PANEL principles, which break down what this will mean in practice. PANEL stands for[5]:

-   *Participation*: People should be involved in decisions that affect their rights.
-   *Accountability*: There should be monitoring of how people's rights are being affected, as well as remedies when things go wrong.
-   *Non-Discrimination and Equality*: All forms of discrimination must be prohibited, prevented and eliminated. People who face the biggest barriers to realising their rights should be prioritised.
-   *Empowerment*: Everyone should understand their rights and be fully supported to take part in developing policy and practices which affect their lives.
-   *Legality*: Approaches should be grounded in the legal rights that are set out in domestic and international laws.

Summary of key messages

The literature strongly endorses that the main lens for understanding how to build capacity and capability in this context should be complexity, systems-thinking and the study of systems change. These literatures tell us what to expect and what to avoid with respect to building capacity and implementing change and, to a lesser extent, what to do.

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[2] Baser H, Morgan P., Capacity, change and performance, Discussion Paper no 59B, European Centre for Development and Policy Management 2008 https://ecdpm.org/publications/capacity-change-performance-study-report/
[3] For further information, see the Theory of Change report: https://www.ed.ac.uk/education/rke/our-research/children-young-people/childhood-and-youth-studies-research-group/research/observatory-of-childrens-human-rights-scotland/observatory-outputs.
[4] Scottish Government (2021), *Children's Rights and the UNCRC in Scotland: An Introduction*, https://www.gov.scot/publications/implementing-united-nations-convention-rights-child-introductory-guidance/documents/
[5] Scottish Human Rights Commission, *A human rights based approach: an introduction*, https://www.scottishhumanrights.com/media/1409/shrc_hrba_leaflet.pdf

They tell us to expect non-linearity of the change process, processes of emergence, via co-evolution and self-organisation of elements within the overall system, and, in general, a substantial degree of messiness and unpredictability. They tell us we should avoid over-reliance on planning and logic-driven approaches and avoid trying to over-control the process with top-down, externally-directed management processes. Instead, we should heavily invest in co-production to facilitate shared and local ownership of goals and actions, we should provide resources, systemic and distributed leadership around values and culture, and we should engage in cross-systems brokering. We should attend to how best to facilitate and respond to positive and negative feedback loops that provide information back into the system. We should take account of whether the external and internal environments within which people work and live are in fact permissive (or inhibitory) of the change we want.

An implementation or improvement/quality science and practice lens is also required. These fields tell us more specifically what we can do to facilitate the success of change processes on the ground. Implementation evidence tells us that ongoing, responsive ('active') support for the process with cross-disciplinary expertise is helpful. This may take a variety of forms, including providing intermediaries often known as 'implementation support teams'. These teams can help delivery organisations to navigate through the twin and sometimes conflicting imperatives to adhere to a central core (maintaining 'fidelity' to a central goal) whilst accommodating the need for 'contextually sensitive adaptation'. They can help design ways to operationalise and formalise the feedback process via evaluation and frameworks for data-informed planning and action. They can be used to help stimulate and sustain cross-sectoral learning systems and communities. These literatures generally make most sense in the context of implementing defined interventions in specific settings and these will be highly salient once the work of implementing agency-specific responses begins. These fields are replete with frameworks of core components, drivers, technical approaches and tools for analysis and monitoring. They emphasise the importance of an intentional, planful, and analytic approach, and provide tools to help us do that in the field.

There is, of course some tension and a balance to be struck between the two lenses. An implementation science /quality improvement approach can help us to plan and be systematic in the implementation of specific activities, whereas a complexity lens helps us see the whole system around specific initiatives and warns us to stay alert to the need for flexibility and agility, and to moderate our expectations.

Key evidence relevant to the capacity and capability-building change process

Complexity and whole systems

A complexity lens

The fields of systems-thinking and systems change[6,7] which in turn are rooted in the study of complexity[8,9,10] are among the most significant literatures for this review. A system can be an actual real world entity – for example, the health, education, or social care 'system' – or it can be the wide collection of people, organisations, agencies, structures, laws and other social and political factors influential on (for example) a child in our society. Most people have a common-sense understanding of what we mean when we talk of a particular system, although perceptions of what (or who) is 'in' such a system vary according to many factors, so system boundaries are always subjective. Meadows defines a system as "*a set of things, people, cells, molecules or whatever – interconnected in such a way that they produce their own pattern of behaviour over time*"[11]. As she notes, the most important thing about this definition is that "*the system, to a large extent, causes its own behaviour!*". For this review it is probably most useful to think of systems, as is now generally agreed, not as 'things' or structures but as "*constructs used for engaging with and improving situations of real-world complexity.*"[12]

The overarching emphasis from a multi-disciplinary evidence base is that complexity and systems-thinking should underpin all planning and action in relation to effective capacity-building. The terminology of 'complexity' and 'systems' is now a widespread feature found throughout discussions of effective capacity-building; however, partly because the literature on these subjects is challenging and partly because it is not always well-framed for practical application, a tendency to over-simplify can sometimes obscure the real messages for policy and practice.

In fact, the literature on complexity does not so much tell us what we should do when implementing public policy as tell us what to expect and what to avoid. Key messages are that change in complex systems is assimilated first and foremost as a non-linear process that is hard to predict or control.[13,14] It is characterised by *emergence* (behaviours or other things that arise as a result of the interactions between parts of a complex system), *co-evolution* (parts of the system react and respond to one another's behaviour), and *self-organisation* (the tendency for systems to generate new structures

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[6] Reynolds M, Holwell S. (Eds), Systems Approaches to Managing Change: A Practical Guide, Springer 2010

[7] Meadows DH., Thinking in Systems: A Primer, Sustainability Institute/Chealsea Green 2008

[8] Boulton JG, Allen PM, Bowman C., Embracing Complexity: Strategic Perspectives for an Age of Turbulence, Oxford University Press 2015

[9] Baser H, Morgan P., Capacity, change and performance, Discussion Paper no 59B, European Centre for Development and Policy Management 2008 https://ecdpm.org/publications/capacity-change-performance-study-report/

[10] Stacey R, Griffin D (Eds), Complexity and the Experience of Managing in the Public Sector Organizations, Routledge 2006

[11] Meadows DH., Thinking in Systems: A Primer, Sustainability Institute/Chealsea Green 2008, page 2

[12] Reynolds M, Holwell S., Introducing systems approaches, Chapter 1 in Reynolds M, Holwell S. (Eds), Systems Approaches to Managing Change: A Practical Guide, Springer 2010, page 7

[13] Greenhalgh T, Robert G, Macfarlane F, Bate P, Kyriakidou, O., Diffusion of innovations in service organisations: systematic review and recommendations, The Milbank Quarterly 2004 82:4, pages 581-629 http://onlinelibrary.wiley.com/doi/10.1111/j.0887-378X.2004.00325.x/pdf

[14] Styhre A., Non-linear change in organizations: Organization change management informed by complexity theory, Leadership and Organization Development Journal 2002 26:3, pages 343-351 https://www.emerald.com/insight/content/doi/10.1108/01437730210441300/full/html

and patterns based on internal dynamics).[15,16] Change is unpredictable and opportunistic and capacity emerges and grows through an ongoing process of movement and re-arrangement of constituent parts of the system. Evidence reviews on the adoption of innovation tell us to expect, at the point of implementation in the field: '*an organic, often rather messy model mov(ing) back and forth between initiation, development, and implementation, variously punctuated by shocks, setbacks and surprises*'.[17]

Therefore, systems thinking '*places little faith in the effectiveness of controlled, planned, engineered attempts at capacity development… what matters more… is the way system behaviour is attracted to sources of energy: change must work with the natural dynamics and energy within the system… having a detailed capacity-development strategy or design may be counterproductive'.[18]* This means that when the goal is to change a complex system, public policy and practice managers should avoid highly specified, over-determined and over-monitored approaches that fight with the natural way that change processes work in complex systems. The implication is that effective strategies will work with and complement the existing system, even at the same time as they are attempting to disturb or perturb it to provoke change or improvement.[19]

> Policy implementation '*must be approached pragmatically as a self-organising system and …managers need to strategically engage with complexity in a manner that is consistent with such a pragmatic understanding*'.[20]

A whole-systems perspective

The cross-disciplinary literature on change, innovation and capacity-building strongly indicates we should v*isualise capacity-building as a 'whole-systems' effort and a 'systems phenomenon'.*[21] Successful initiatives are viewed, planned and implemented throughout in the context of, and in relationship to, a whole system.[22,23]

A whole-systems perspective means working simultaneously at multiple levels. Focusing on individual units of adoption (organisations, or on individual sectors, or on individual personnel) may lead to changes and improvement in parts of the system but leaves the most important engine of change – the interactions between constituent parts of the system – untouched. Parts of the system that have moved ahead will be blocked by those parts that are still unchanged. This is why the

[15] Baser H, Morgan P., Capacity, change and performance, Discussion Paper no 59B, European Centre for Development and Policy Management 2008 https://ecdpm.org/publications/capacity-change-performance-study-report/

[16] Castelnuovo W, Sorrentino M., Engaging with complexity in public programme implementation, Public Management Review 2018 20:7, pages 1013-1031 https://www.tandfonline.com/doi/abs/10.1080/14719037.2017.1364406

[17] Greenhalgh T, Robert G, Macfarlane F, Bate P, Kyriakidou, O., Diffusion of innovations in service organisations: systematic review and recommendations, The Milbank Quarterly 2004 82:4, pages 581-629 http://onlinelibrary.wiley.com/doi/10.1111/j.0887-378X.2004.00325.x/pdf

[18] Baser H, Morgan P., Capacity, change and performance, Discussion Paper no 59B, European Centre for Development and Policy Management 2008, page 18 https://ecdpm.org/publications/capacity-change-performance-study-report/

[19] Christensen, C, Grosman, JH, Hwang J., Innovator's prescription, New York, NY: McGraw-Hill, 2009

[20] Castelnuovo W, Sorrentino M., Engaging with complexity in public programme implementation, Public Management Review 2018 20:7, page 1031

[21] Potter C, Brough R., Systemic capacity building: a hierarchy of needs, Health Policy and Planning 2004 19:5, pages 336-345 https://academic.oup.com/heapol/article/19/5/336/713594

[22] Meyers DC, Durlak JA, Wandesman A., The Quality Implementation Framework: a synthesis of critical steps in the implementation process, American Journal of Community Psychology 2012 50, pages 462-480 https://pubmed.ncbi.nlm.nih.gov/22644083/

[23] Baser H, Morgan P., Capacity, change and performance, Discussion Paper no 59B, European Centre for Development and Policy Management 2008, page 23 https://ecdpm.org/publications/capacity-change-performance-study-report/

'boutique' model of funding pathfinding or exemplar projects rarely scales up well. We achieve pockets of excellence, but not whole system improvement.[24] The implication is that effective planning and action will never lose sight of the systems context and that all plans and actions will be considered as moving parts in a network of inter-related elements. Whole systems-thinking helps us to focus attention more clearly on causal pathways and on leverage points for change that may exist at different levels.[25,26]

Effective strategies for positive capacity-building

Strategies for cross-sectoral capacity-building and for implementing change and innovation can be thought of as existing at two levels. The first is a higher level that concerns building and strengthening the systems-level infrastructure in which capacity is built and sustained. The second is a level closer to operations on the ground that focuses on agencies, organisations, communities and individuals within the wider system, and addresses itself to effective delivery of improved ways of working. At the first, more overarching level, the change and collective impact literatures are most relevant for our purposes. At the second level, the implementation and improvement science and practice literatures are particularly helpful.

Building capacity at the systems level

Multi-level and multi-strategy working. A recent Oxfam research report synthesised the results of 18 case studies in scaling up, focusing on system-level strategies for capacity-building. It noted that in studies of successful efforts across multiple sectors and settings, the best tended to employ several strategies rather than putting all their eggs in one strategy basket. Planning mutually reinforcing actions across multiple sectors appears effective and there is no 'one right way' to do this: scaling vertically (led from the top), horizontally (replication across settings) and functionally (by scaling up individual organisational capacity) have all worked, indicating that there are multiple pathways to success.[27] This is of course just what we would expect in a complex self-organising system. Coffman's well-used multi-level framework, which states that effective systems initiatives should work at five interconnected levels (surrounding *context*, *components* of the system, *connections* across the system, *infrastructure* supports for the system, and finally *scale* and reach within the system) also supports this finding.[28]

Systems (or systemic) leadership. The strong emphasis on whole system-thinking for change and innovation has resulted in an increasing focus on promoting leadership across whole systems as a

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[24] Ghate D., From Programs to systems: deploying implementation science and practice for sustained real-world effectiveness in services for children and families, Journal of Clinical Child and Adolescent Psychology Volume 2015 45:6 http://www.tandfonline.com/doi/full/10.1080/15374416.2015.1077449

[25] Meadows DH., Thinking in Systems: A Primer, Sustainability Institute/Chealsea Green 2008

[26] Holmes BJ, Finegood DT, Riley BL, Best A., Systems thinking in dissemination and implementation research, Chapter 9 in Dissemination and Implementation research in Health, Brownson RC, Colditz GA & Proctor EK (Eds), Oxford University Press 2012

[27] Mayne R, Guijt I., Inspiring Radically Better Futures : Evidence and hope for impact at scale in a time of crisis, Oxfam Research Reports December 2020 https://oxfamilibrary.openrepository.com/bitstream/handle/10546/621075/rr-inspiring-radically-better-futures-101220-en.pdf;jsessionid=89EB4623F98743F8DC67BD6A213102FA?sequence=4

[28] Coffman J., A framework for evaluating systems initiatives, USA: Build Initiative 2007 http://buildinitiative.org/WhatsNew/ViewArticle/tabid/96/ArticleId/621/Framework-for-Evaluating-Systems-Initiatives.aspx

key feature of effective capacity-building and change programmes.[29] 'Systems leadership' is a term used to describe leadership that is thought to be more likely to enable change and support good outcomes in situations where problems are 'wicked' (that is, difficult or impossible to solve),[30] where complexity and volatility are the overriding features of context, and where no single sector or agency has sufficient authority, oversight or resources to provide adequate momentum. It is a value-led, collaborative and power-sharing form of collective leadership, characterised by strongly participatory and relational styles. Those with positional authority combine with others who can provide distributed leadership at multiple levels of the system (including at the front line) to identify shared goals and make sense of complex change for those who manage or deliver to the front line. It is consistent with our increasing appreciation of the power of collaboration over 'command and control' (or 'leading from the front') styles of change management. There is little evaluation evidence to prove that system leadership 'works' due to the diffuse and difficult-to-measure nature of the task, but there is very strong support in principle and through observation throughout the literatures of public administration and management, leadership and change and especially in health and social care leadership. Case studies[31,32] demonstrate how systems leadership can work in practice. Providing a narrative that makes sense of complexity, ambiguity and conflict is also a key element of effective systems leadership. Systems leaders positioned in different parts of the system can work together to provide interpretation and navigation aids to new policy and practice directions for the workforce and the communities they serve. They can help knit together strands of policy and action that might otherwise not seem to cohere, and work to smooth out points of conflict that might otherwise stop agencies and communities working together effectively towards a shared agenda.

Co-production and local ownership. There are numerous varieties of 'co' processes discussed in the literature on change, capacity-building and implementation, including co-production, co-creation, and co-design. They share a conception of common effort and ownership amongst stakeholders of all types in the process of making change happen.[33,34] Co-creation, for example, is defined as *"deeply involving stakeholders in identifying all dimensions of the problem and designing and implementing solutions"*.[35] When this kind of collaborative, power-sharing working is developed or nurtured as part of a change strategy, these processes, along with the term 'genuine partnership'[36] and 'participatory

[29] Ghate D, Lewis J, Welbourn D., Systems Leadership: exceptional leadership for exceptional times, Nottingham: The Virtual Staff College 2013
https://www.colebrookecentre.org.uk/_files/ugd/b9abff_6f288f4fc2534697a9571bd84ac43531.pdf
[30] Rittel HWJ, Webber MM., Dilemmas in a general theory of planning, Policy Sciences 1973 4:2, pages 155-169
https://www.sympoetic.net/Managing_Complexity/complexity_files/1973%20Rittel%20and%20Webber%20Wicked%20Problems.pdf

[31] Lewis J, Welbourn D, Ghate D., Systems Leadership: source paper 3 - Leadership Scenarios, London: Colebrooke Centre 2013 https://www.colebrookecentre.org.uk/_files/ugd/b9abff_f007a836bcff408ba15afc0417bd7435.pdf
[32] Bigland C, Evans D, Bolden R, Rae M., Systems leadership in practice: thematic insights from three public health cases, BMC Public Health 2020 20: 1735 https://bmcpublichealth.biomedcentral.com/track/pdf/10.1186/s12889-020-09641-1.pdf
[33] Ghate D., Can co-creation achieve better outcomes for people and communities?, Blog post for Integration and Implementation Insights 2016 https://i2insights.org/author-tag/deborah-ghate
[34] Sorensen E, Bryson J, Crosby B., How public leaders can promote public value through co-creation, Policy and Politics 2021 49:2, pages 267-286 https://www.ingentaconnect.com/content/tpp/pap/2021/00000049/00000002/art00006#
[35] Pfitzer M, Bocksette V, Stamp M., Innovating for shared value, Harvard Business Review September 2013
http://hbr.org/2013/09/innovating-for-shared-value/ar/pr
[36] Milen A., What do we know about capacity building? An overview of existing knowledge and good practice, Geneva: World Health Organisation 2001 https://apps.who.int/iris/handle/10665/67394

approaches',[37] recur repeatedly in a wide range of literatures as a key explanatory factor in whether capacity-building and scaling initiatives thrive or fail. This complements the points noted earlier about the significance, in complex change efforts, of recognising the emergent and self-organising nature of systems. Change may be given momentum by macro stakeholders (governments, departments of state) but actionable and sustainable change will depend on local responses and interpretations and, in effect, on people making the change personal to their own realities. A recent study of cases and stakeholders in four countries observes that "*capacity-building projects thrive when there are high levels of multi-stakeholder commitment, collaboration, alignment, and adaptation".*[38] This can only happen when levels of co-productive values and activities are high and people at all levels of the system have felt involved in defining the issue to be tackled and developing and implementing solutions to address it.

Going 'with the grain': building on what is there. Many writers on systems change note that effective systems change work often works 'with the grain' rather than against it. The existing system is unlikely to be defective in all respects and finding the places where people or agencies may be most receptive is a recommended strategy of several writers in this field. Gopal and Kania,[39] experts in collective impact work, offer five principles for those wishing to stimulate effective systems change, one of which is to develop 'sensing mechanisms' to identify and surface existing trends, and spot where energy and momentum already lie within the system. Without this, we may either fail to amplify pre-existing momentum, or we may inadvertently impede our own efforts by creating friction. Green describes how many successful development projects build on precedent: "*working with precedent rather than importing best practice from outside makes it more likely that whatever we do or suggest will be compatible with the local system"*.[40] Meadows[41] notes that when change is leveraged within a system's norms and regulations (the 'rules' – laws, regulations, policies etc.), change is more likely to happen because rules exert particularly strong influence on system behaviour. Of course, sometimes the precedent is the problem, but the principle of recognising existing strengths and playing to them is familiar in many fields of intervention as well as in the systems change arena. Unfortunately, authors also note that very few change programmes properly analyse what 'their system' looks like or how it works before starting a new project,[42] sometimes resulting in capacity-building or capability-building initiatives that overlook existing positive factors in the landscape and in the development of strategies that cannot easily and naturally be incorporated into the real settings and routines in which they must be embedded.

Coalescing around values rather than activities. Practically speaking, a wide range of sources imply or explicitly state that helping agencies and individuals within the system to coalesce around public values and public interest rather than around 'how to' prescriptions is more likely to result in

[37] Milat AJ, Bauman A, Redman S., Narrative review of models and success factors for scaling up public health interventions, Implementation Science 2015 10:113
https://implementationscience.biomedcentral.com/articles/10.1186/s13012-015-0301-6
[38] Ika L, Donnelly J., Under what circumstances does capacity-building work?, Chapter in: Capacity building in developing and emerging countries, Elie Chrysostome (Ed), London: Springer 2019, pages 43-90
[39] Gopal S, Kania J., Fostering Systems Change – five simple rules for Foundations seeking to create lasting social change, Stanford Social Innovation Review Nov 20th 2015 https://ssir.org/articles/entry/fostering_systems_change
[40] Green D., *How change happens*, Oxford University Press 2016, page 242
[41] Meadows DH., Leverage points – places to intervene in a system, The Sustainability Institute 1999
http://www.donellameadows.org/wp-content/userfiles/Leverage_Points.pdf
[42] Williams SJ, Best S., What does a systems approach to quality improvement look like in practice?, International J Environ Res and Public Health 2022 19:2 747 https://www.mdpi.com/1660-4601/19/2/747

change.[43] This process, as a feature of co-production and systems leadership, is seen as critical for helping disparate elements of a system to identify joint interests, find their own context-specific way to solutions, and can lead to the formulation of plans to collaborate in novel ways (e.g. separate agencies or departments deciding to pool budgets) in order to achieve a common goal or support a common value.

Building intentionality (not just 'capacity'). One substantial review of multiple international development case studies draws out the importance of building intentionality (i.e. intention to *take action* to change something). This sounds obvious but may sometimes be overlooked in a focus on 'building capacity', which can easily become too narrowly focused on aspects of capacity and capability that are the precursors to action (knowledge and attitudes, training, access to resources, confidence and so on). Strong intentionality at the micro level (individuals, teams), which the authors note interacts with macro-opportunities (e.g. changes in law, large-scale changes in allocation of resources) is found throughout the successful cases; the implication is that a strategy that focuses on developing and buttressing this might be important.[44] The systems leadership literature also emphasises the necessity of a 'relentless' focus on goals by leaders.

Agency, community and individual level strategies

Below the system level, strategies for implementing change on the ground should be chosen carefully and matched to system stakeholders in order to meet a hierarchy of capacity needs. These are described as falling into four broad tiers: structures, systems and roles; staff and facilities; skills; and tools.[45]

Effective implementation strategies at agency and individual level have become the focus of a large literature. A simple high-level list from one review classifies them as: (1) Training, Tools, Technical Assistance; (2) Assessment and Feedback; (3) Peer Networking/learning; and (4) Provision of Incentives.[46,47]

Many of the strategies reported in the implementation and improvement literature focus on strategies for organisations or individuals. These make sense in the context of implementing something that has an identifiable operational form such as an evidence-based intervention (for example, coaching for a specific approach or a clinical technique), but are not easily transposed onto a change initiative focused on capacity-building which has general rather than specific parameters. It is also important to note that the selection of strategies that are relevant will depend on where the starting point is for constituent parts of the system. If, for example, agencies are working in ways that are incompatible with the UNCRC, then the strategy for such an agency will start with analysis of the problem and careful planning for addressing it, probably starting with knowledge-building and

[43] Ghate D, Lewis J, Welbourn D., Systems Leadership: exceptional leadership for exceptional times, Nottingham: The Virtual Staff College 2013
https://www.colebrookecentre.org.uk/_files/ugd/b9abff_6f288f4fc2534697a9571bd84ac43531.pdf
[44] Mayne R, Guijt I., Inspiring Radically Better Futures: Evidence and hope for impact at scale in a time of crisis, Oxfam Research Reports December 2020 https://oxfamilibrary.openrepository.com/bitstream/handle/10546/621075/rr-inspiring-radically-better-futures-101220-en.pdf;jsessionid=89EB4623F98743F8DC67BD6A213102FA?sequence=4
[45] Potter C, Brough R., Systemic capacity building: a hierarchy of needs, Health Policy and Planning 2004 19:5, pages 336-345 https://academic.oup.com/heapol/article/19/5/336/713594
[46] Leeman J, Calancie l, Hartman MA, Escoffery CM, Herrman A K, Tague LE, Moore AA, Wilson KM, Schreiner M, Samuel-Hodge C., What strategies are used to build practitioners' capacity to implement community-based interventions and are they effective? A systematic review, Implementation Science 2015 10:80
https://implementationscience.biomedcentral.com/articles/10.1186/s13012-015-0272-7
[47] Wandersman A, Duffy J, Flaspohler P, Noonan R, Lubell K, Stillman L, et al., Bridging the gap between prevention research and practice: the interactive systems framework for dissemination and implementation, Am J Community Psychol. 2008 41:171–81. https://onlinelibrary.wiley.com/doi/abs/10.1007/s10464-008-9174-z

'mind-set' focused strategies. If on the other hand the starting point is relatively strong – agencies who already have a rights-based approach and see their role in the change programme as supporting others – then a different set of strategies will be implied. The points below should be read with this in mind.

Building and supporting individual practitioner capacity. Strategies focusing on individuals (e.g. skills development and training) instead of on organisational systems and processes are often the 'go-to' strategy for capacity-building programmes -- and sometimes, mistakenly, the only strategy, hence the (now ironic) term 'train and hope'. Training on its own does not change behaviour.[48] In relation to implementing specific evidence-based interventions, reviews find evidence that strategies at individual level to build knowledge, skills, self-efficacy and motivation, as well as promoting peer networking and providing incentives to engage, can all influence implementation positively.[49] Implementation science research has however firmly underlined that these kinds of strategies must be accompanied by opportunities to apply the new knowledge or ideas in the field, preferably supported by coaching and other in-situ supports. They must be generalised, in order to bring about actual practice or behaviour change on the ground.[50, 51, 52] However, it is also worth noting that these kinds of approaches are not strongly supported in the systems-focused capacity-building and change literature.[53] Often, the evidence is that systems, organisations and their processes, rather than individual deficits, are what impede positive change. The reviewers note that context ('setting-level capacity' – e.g. resources, time, leadership) also play a large role in determining the effects on adoption of change and its implementation.

Also relevant in relation to supporting individuals is a literature on the emotional aspects of change. It has been noted that change is hard, and personal, and that certain types of change processes have emotional costs for people at or near the front line.[54] They may feel exhausted simply by trying to fulfil the basic requirements of their work. They may already feel that they are doing things in an acceptable way. They may have 'change fatigue'. They may disagree with the basic thrust of the change. Feeling drawn into unwanted or unnecessary change processes, having to 'unlearn'[55,56]

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[48] Stokes and Baer (1977), quoted in Fixsen DL, Naoom SF, Blase KA, Friedman RM, Wallace F., *Implementation Research: A Synthesis of the Literature.* Tampa, FL: University of South Florida, Louis de la Parte Florida Mental Health Institute, The National Implementation Research Network (FMHI Publication #231) 2005.
https://www.researchgate.net/publication/283997783_Implementation_Research_A_Synthesis_of_the_Literature

[49] Leeman J, Calancie l, Hartman MA, Escoffery CM, Herrman A K, Tague LE, Moore AA, Wilson KM, Schreiner M, Samuel-Hodge C., What strategies are used to build practitioners' capacity to implement community-based interventions and are they effective? A systematic review, Implementation Science 2015 10:80
https://implementationscience.biomedcentral.com/articles/10.1186/s13012-015-0272-7

[50] Fixsen DL, Naoom SF, Blase KA, Friedman RM, Wallace F., *Implementation Research: A Synthesis of the Literature.* Tampa, FL: University of South Florida, Louis de la Parte Florida Mental Health Institute, The National Implementation Research Network (FMHI Publication #231) 2005.

[51] Jones RJ, Woods SA, Guillaume YRF., The effectiveness of workplace coaching: A meta-analysis of learning and performance outcomes from coaching, Journal of Occupational and Organisational Psychology 2016 89:2, pages 249-277
https://bpspsychub.onlinelibrary.wiley.com/doi/abs/10.1111/joop.12119

[52] Bozer G, Jones RJ., Understanding the factors that determine workplace coaching effectiveness: a systematic literature review, European Journal of Work and Organizational Psychology 2018 Volume 27:3, pages 342-361
https://www.tandfonline.com/doi/full/10.1080/1359432X.2018.1446946?scroll=top&needAccess=true

[53] Potter C, Brough R., Systemic capacity building: a hierarchy of needs, Health Policy and Planning 2004 19:5, pages 336-345 https://academic.oup.com/heapol/article/19/5/336/713594

[54] Gersick CJG., Revolutionary change theories: a multi-level exploration of the punctuated equilibrium paradigm, Academy of Management Review 1991 16:1, pages 10-36 https://journals.aom.org/doi/abs/10.5465/amr.1991.4278988

[55] Rushmer R, Davies H., Unlearning in Health Care, Quality and Safety in Health Care 2004 13 (Suppl II) :ii10–ii15.
https://qualitysafety.bmj.com/content/13/suppl_2/ii10.short

[56] Macdonald G., Transformative unlearning: safety, discernment and communities of learning, *Nursing Enquiry* 2002 9:3, pages 170-178

practices one has been using for years, or realising that 'practices as usual' fall short in some important way can be anxiety-provoking. It may sometimes lead to reluctance to change, which may be unwarranted or warranted.[57] Reluctance to change may also be underpinned by 'sunk costs' (prior investments of time and energy) and accumulated power in the status quo.[48,34] Simply recognising this is a first stage of supporting change. In addition, active implementation support – extended to include support around the human rather than just the technical side of implementing change – can also be useful here (see below).

Building agency capacity: developing champions. As an agency-level strategy, the concept of champions has gained broad acceptance in health care and many other fields. A champion is defined in an integrative review[58] as an implementation-related role occupied by people who: (1) are internal to an organization; (2) generally have an intrinsic interest and commitment to implementing a change; (3) work diligently and relentlessly to drive implementation forward, even if those efforts receive no formal recognition or compensation; (4) are enthusiastic, dynamic, energetic, personable, and persistent; and (5) have strength of conviction. It complements but does not replace the concept of system leadership (which instead operates across agencies and sectors). Studies, including a small number with random allocation, generally find that the influence of champions is positive, if also mixed. The review pronounces them a 'necessary but not sufficient' condition for effective implementation. It should be noted that relying on champions to do the 'heavy lifting' in a change initiative is a common flaw. Many individual studies show that no matter how committed, champions that are poorly supported and left to be the sole face of an initiative are not effective. Champions may also leave their roles midway, resulting in a loss of momentum and sometimes complete stalling of the projects for which they had become 'responsible'.

Building cross-agency capacity: finding systems entrepreneurs. Some collective impact initiatives also highlight the importance of a 'systems entrepreneur'[59] (also called 'boundary spanners' and 'change agents')[60,61] for a given change effort. A systems entrepreneur is not a leader or a champion and does not usually offer technical support but is a kind of broker or go-between (i.e., an individual charged with this role) who operates within networks and whose work is to facilitate cross-systems working, trouble shoot, identify opportunities and points of leverage and keep the work visible. The nature of the work makes this a hard role to evaluate formally for effectiveness, of course, and much depends on the personal and professional qualities of the person in the role. See Rogers (1995) for a further discussion.

Building intra- and inter-agency capacity: developing learning systems, learning communities and communities of practice. Learning systems,[62] learning communities and communities of practice are

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[57] Greenhalgh T, Stones R, Swinglehurst D., Choose and Book: a sociological analysis of 'resistance' to an expert system, Social Science and Medicine 2014 104, pages 210-214
http://www.sciencedirect.com/science/article/pii/S0277953613006904

[58] Meich EJ, Rattray NA, Flanagan ME, Damschroder L, Schmid AA, Damush TM., Inside help: an integrative review of champions in healthcare-related implementation, Sage Open Medicine 2018 6, pages 1-11
https://pubmed.ncbi.nlm.nih.gov/29796266/

[59] See Ghate D., How systems change can enable transformational and sustainable improvements in people's quality of life and wellbeing: An overview of key literature, London: The Colebrooke Centre for Evidence and Implementation 2018
https://www.colebrookecentre.org.uk/publications

[60] Greenhalgh T, Robert G, Macfarlane F, Bate P, Kyriakidou, O., Diffusion of innovations in service organisations: systematic review and recommendations, The Milbank Quarterly 2004 82:4, pages 581-629
http://onlinelibrary.wiley.com/doi/10.1111/j.0887-378X.2004.00325.x/pdf

[61] Rogers EM., *Diffusion of Innovations,* Fourth Edition New York: The Free Press 1995

[62] See Healthcare Improvement Scotland https://ihub.scot/improvement-programmes/quality-management-system-portfolio/learning-
systems/#:~:text=A%20learning%20system%20enables%20a,and%20outlines%20its%20core%20components.

all ways to bring together organisations and personnel to learn in collaborative ways. Research on communities of practice notes key features and processes that contribute to learning outcomes: they set out an initial but evolving purpose, encourage diverse leadership, and promote collective-identity development. A recent systematic review[63] of communities in practice (CoPs) in public health in the US, Canada, Australia and the UK noted that CoPs "*support the …. workforce to change their practice when they provide structured problem-solving, reflective practice and networking opportunities*", but could not draw any conclusions about the impact on wider public health outcomes.

There has been detailed research into professional learning communities (PLCs), especially in the education field, defined as '*a group of people sharing and critically interrogating their practice in an ongoing, reflective, collaborative, inclusive, learning-oriented, growth-promoting way (and) operating as a collective enterprise'*.[64] Several features of effective learning communities stand out: agreement on shared values and vision; the pursuit of reflective professional inquiry; the development of mutual trust, respect and support; inclusive membership extending to support staff; organisation-wide; and openness to new networks and partnerships beyond one's close professional community. To be effective in promoting high-quality learning, PLCs need to be led both from the top and in a distributed way (as in systems leadership), they need to connect to other professional development structures, and they need to find ways to promote opportunities to apply learning in practice and in context. Extended to cross-sectoral learning and other alliances, the literature finds these approaches promising, but affected by issues such as trust between participants, lack of understanding of other sectors' worlds, differentials (perceived and actual) of power and status, and of course time to participate.

Another variant of this same idea of accelerating learning and competence in action can be found in the quality improvement literature, where Quality Improvement Collaboratives (QICs), defined as "*an organised, multifaceted approach that include teams from multiple… sites coming together to learn, apply and share improvement methods ideas and data on service performance for a given … topic*",[65] have increasingly been established to buttress organisational and sector attempts to implement change and improvement, particularly in healthcare.[66] A down-side of QICs is that they are reported to be time-consuming and resource-intensive to sustain, especially if they engage in collaborative working and projects with deliverable elements.

Using data: engineering feedback loops. A key feature of how complex systems change and build capacity is by means of feedback into the system – both negative and positive – that either encourages and supports the direction of change or slows/halts it.[67, 68] In natural systems, this feedback may well be erratic or affected by delays, meaning that the system can be too slow (or indeed too fast) in responding to the feedback messages. Implementation planning and support

[63] Barbour L, Armstrong R, Condron P, Palermo C., Communities of practice to improve public health outcomes: a systematic review, *Journal of Knowledge Management*, 2018 22:2, pages 326-343 https://doi.org/10.1108/JKM-03-2017-0111

[64] Stoll L, Bolam R, Macmahon A, Wallace M, Thomas S., Professional Learning Communities, a review of the literature, J. Educational Change 2006 7, pages 221-258 https://link.springer.com/content/pdf/10.1007/s10833-006-0001-8.pdf

[65] Wells S, Tamir O, Gray J, Naidoo D, Bekhit M, Goldmann D., Are quality improvement collaboratives effective? A systematic review, BMJ Qual Saf 2018 27, pages 226-240 https://qualitysafety.bmj.com/content/27/3/226.abstract

[66] Zamboni K, Baker U, Tyagi M, Schellenberg J, Hill Z, Hanson C., How and under what circumstances do quality improvement collaboratives lead to better outcomes? A Systematic Review, Implementation Science 2020 15:27 https://link.springer.com/content/pdf/10.1186/s13012-020-0978-z.pdf

[67] Morecroft J., System Dynamics, Chapter 2 in Reynolds M, Holwell S. (Eds), 2010 pages 25-86

[68] Meadows DH., Leverage points – places to intervene in a system, The Sustainability Institute 1999 http://www.donellameadows.org/wp-content/userfiles/Leverage_Points.pdf

can, with intentionality, tailor and amplify feedback in human-engineered and social systems by building in strategies to collect, analyse and make available timely data on how things are going – or, better still, can encourage and support system stakeholders to do this for themselves. Data-driven decision-making (or 'decision-support data systems')[69] is a behaviour strongly encouraged across the effective implementation, improvement and quality science literatures and is embedded in approaches such as rapid cycle testing, and Plan-Do-Study-Act (PDSA) approaches.[70, 71]

Data need to be meaningful and useable by duty bearers if these people are expected to contribute willingly to their collection. For example data might relate to costs (money and time), or acquisition of skills, competencies and know-how related to capacity and capability to use a rights-based approach. They might relate to changes that support new ways of working such as shifts in how organisations work or are constituted, how staff are selected and trained, staff satisfaction and so on. Using data effectively to support capacity and capability-building is about visualising how data can be instrumental in supporting a change pathway during the process of implementation. The focus should be about helping stakeholders to self-manage a process that produces insights for their own benefit, not on mandating data collection or monitoring frameworks that can be seen as onerous and for the benefit of others.

Drivers – contextual and other features in effective implementation that accelerate and encourage, or inhibit and undermine, progress

The idea of 'drivers' of implementation is another useful construct found in the change literature, and especially in implementation science and practice writing. Here we consider drivers as factors in the wider context or environment that facilitate ('drive') successful capacity-building when they are present or optimally functional or, conversely, factors that inhibit progress when they are absent or function poorly. Fixsen and colleagues describe the complex of drivers in implementation as 'integrated and compensatory', meaning they work together and can balance one another's relative strength or weakness within a given implementation setting.[72]

Drivers are generally visualised at multiple levels of the ecology of a change process. In one tri-partite framework,[73] the drivers that are most closely relevant for our purposes are located at all three levels: organisational (which also extends outward to wider systems), competency (of people), and leadership. In another well-used synthetic framework, the Consolidated Framework for Research on Implementation (CFIR),[74] the most significant drivers for our purposes are mostly found

[69] Metz A, Halle T, Bartley L, Blasberg A., The key components of successful implementation, Chapter 2 in Applying implementation science in early childhood programs and systems, Metz A, Halle T and Martinez-Beck I. (Eds), Baltimore: Paul H Brookes Publishing Co 2013.

[70] Tout K, Metz. A and Bartley L., Considering state-wide professional development systems, Chapter 13 in Metz A, Halle T and Martinez-Beck I. (Eds) 2013

[71] Keith RE, Crosson JC, O'Malley AS, Cromp D, Fries Taylor E., Using the Consolidated Framework for Implementation Research (CFIR) to produce actionable findings: a rapid-cycle evaluation approach to improving implementation, Implementation Science 2017 12:15 https://implementationscience.biomedcentral.com/track/pdf/10.1186/s13012-017-0550-7.pdf

[72] Fixsen DL, Naoom SF, Blase KA, Friedman RM, Wallace F., *Implementation Research: A Synthesis of the Literature.* Tampa, FL: University of South Florida, Louis de la Parte Florida Mental Health Institute, The National Implementation Research Network (FMHI Publication #231) 2005. https://www.researchgate.net/publication/283997783_Implementation_Research_A_Synthesis_of_the_Literature

[73] See Fixsen D, Blase K, Naoom S and Duda M., Implementation Drivers – assessing best practices, NIRN 2016 https://www.researchgate.net/publication/307967873_Implementation_Drivers_Assessing_Best_Practices

[74] Damshroder L, Aron DC, Keith RE, Kirsch SR, Alexander JA, Lowery JC., Fostering implementation of health services research findings into practice: a consolidated framework for advancing implementation science, Implementation Science 2009 *4:50* https://implementationscience.biomedcentral.com/articles/10.1186/1748-5908-4-50

at three of their five levels – namely outer setting (external context), inner setting (e.g. agency, team) and implementation process. We have picked out below three key drivers that are most likely to be significant for building capacity to embed a rights-based way of working. One is related to the outer setting, and the others straddle the inner setting and the on-the-ground implementation process.

Outer setting

Supportive (or, facilitative, permitting, authorising) environment. In both implementation and 'public value' and change/innovation literatures, the critical importance of the environment around agencies and around individual stakeholders is emphasised, both for senior leaders and for front-line people. Systems change ultimately occurs when individuals make changes in the way they behave (for workers and managers in the system, how they do their job; for private individuals, their behaviours or the extent to which they feel able to take a stand on an issue). For that to happen, the conditions must be permissive or 'authorising'.[75] There are many dimensions of an authorising environment, and these will vary according to regulatory context, setting, agency, function and so on. Critically, culture must be enabling and encouraging, with reward and recognition structured in an appropriate way. To create authorising environments requires organisational and management cultures that celebrate success and rigorously avoid blame and finger-pointing,[76] pay close attention to potential conflicts and perverse incentives and develop facilitative management and administrative systems that align policies, procedures and structures so as to buttress the capacities that it wants to nurture.[77]

Inner setting

Readiness for change. The construct or state of readiness for change as used in the implementation science and other literatures overlaps to some extent with the idea of the authorising environment, being a term used to describe organisational readiness[78] as well as individual practitioner readiness.[79] There are both psychological and behavioural preparedness dimensions; both spirit and skills are required for readiness to change. Readiness to change has been described as encompassing both *willingness* to change (whereby there is consensus that a change is required, or at least is worth trying) and *ability* to change (whereby the requisite knowledge, supports, and resources are available) and as requiring four types of change beliefs to be present (*valence:* believing the change is personally worthwhile; [self]-*efficacy*: the extent to which people believe themselves capable of making the change; *discrepancy*: the sense that there is a problem or gap that needs addressing, and *principal support:* formal support by leaders).[80] There are numerous scales that have been developed to measure readiness to change at multiple levels,[81] and a general consensus in the

[75] Moore M., Recognising Public Value, Cambridge Mass: Harvard University Press 1995

[76] Williams SJ, Best S., What does a systems approach to quality improvement look like in practice?, International J Environ Res and Public Health 2022 19:2 747 https://www.mdpi.com/1660-4601/19/2/747

[77] See for example Paulsell D, Tout K, Maxwell K., Evaluating implementation of quality rating and improvement systems, Chapter 14 in Metz A, Halle T and Martinez-Beck I. (Eds) 2013

[78] Weiner BJ., A theory of organisational readiness for change, Chapter 8 in Handbook on Implementation Science Per Nielsen and Sarah Birken (Eds), Elgaronline Publishing 2020
https://www.elgaronline.com/view/edcoll/9781788975988/9781788975988.00015.xml

[79] Peterson SM., Readiness to change: Effective implementation processes for meeting people where they are, Chapter 2 in Metz A, Halle T and Martinez-Beck I. (Eds) 2013

[80] Aarons GA, Horowitz JD, Dluglosz LR, Erhart MG., The role of organizational processes in dissemination and implementation research, Chapter 7 in Brownson RC, Colditz GA, Proctor EK (Eds), Dissemination and implementation research in health, Oxford University Press 2012

[81] See for example Weiner BJ., A theory of organisational readiness for change, Chapter 8 in Handbook on Implementation Since Neilsen P, Birken S

literature than when readiness is low, change implementation will be harder. With commitment and effort however, a favourable climate for change and implementation can be nurtured and optimised.

Implementation support (other related terms: technical assistance, implementation teams, process intermediaries, systemic intermediaries, transition intermediaries). Implementation support teams, defined as "a group of stakeholders that oversees, attends to, and is accountable for facilitating key activities in the selection, implementation, and continuous improvement of an intervention"[82] are emphasised in the implementation and improvement literature, and also in the capacity-building and systems change literature as important drivers of change and – crucially – its sustainment.[83, 84, 85] In the implementation field, the idea of trained implementation support teams, who both understand the capacities to be built and who are fully familiar with the principles of effective implementation, has rapidly gained traction, with this function variously filled by external or independent intermediary teams as well as in-house teams. In the field of emerging technologies and sustainability transitions a 'dynamic ecology of differently positioned intermediaries'[67] is found providing a wide range of functions from technical support and technology transfer to creating and supporting learning communities. The empirical evidence for the effectiveness of implementation support teams in practice is still surprisingly thin (likely due to the difficulty of researching the counterfactual – what would have happened if the team were not there); nevertheless, evidence for their effectiveness does exist and, taken together, the literature suggests this is a feature that should be built into all serious public policy and practice change initiatives.

Concluding comments

Clearly there are a multiplicity of factors, at many different levels, that could affect the success of capacity-building and capability-building to embed a rights-based way of working in Scotland. Some of these can be anticipated in advance; others cannot and will emerge from the process. Capacity is a complex blend of motivation, skill, positive learning, organisational conditions and culture, and infrastructure of support.[86] This review has of necessity taken a high-level view of the evidence base, wide as it is. It cannot be said too strongly that the evidence-base firmly suggests that there is not 'one right way' to approach this work, and almost certainly not 'one right order' in which to do things. It is probably best to see any formal theory of change[87] at this point less as specifying a *sequence* of steps and more as identifying a *complex* of steps, which, according to complexity theory and systems-thinking, are likely to happen in a different way and in a different order depending in which parts of the system they are happening. Given our current understanding of how change

[82] Metz A, Bartley L., Implementation teams: a stakeholder view of leading and sustaining change, Chapter 8 in Implementation Science 3:0 Albers B, Shlonsky A, Mildon R. (Eds), Springer 2020 https://link.springer.com/book/10.1007/978-3-030-03874-8

[83] Fixsen DL, Naoom SF, Blase KA, Friedman RM, Wallace F., *Implementation Research: A Synthesis of the Literature.* Tampa, FL: University of South Florida, Louis de la Parte Florida Mental Health Institute, The National Implementation Research Network (FMHI Publication #231) 2005. https://www.researchgate.net/publication/283997783_Implementation_Research_A_Synthesis_of_the_Literature

[84] Greenhalgh T, Robert G, Macfarlane F, Bate P, Kyriakidou, O., Diffusion of innovations in service organisations: systematic review and recommendations, The Milbank Quarterly 2004 82:4, pages 581-629 http://onlinelibrary.wiley.com/doi/10.1111/j.0887-378X.2004.00325.x/pdf

[85] Kivimaa P, Boon W, Hyysalo S, Klerkx L., Towards a typology of intermediaries in sustainability transitions: a systematic review and a research agenda Research Policy 2019 48, pages 1066-1075 https://www.sciencedirect.com/science/article/pii/S0048733318302385

[86] Stoll L, Bolam R, Macmahon A, Wallace M, Thomas S., Professional Learning Communities, a review of the literature, J. Educational Change 2006 7, pages 221-258 https://link.springer.com/content/pdf/10.1007/s10833-006-0001-8.pdf

[87] Ghate D., Developing theories of change for social programmes: co-producing evidence-supported quality improvement, Palgrave Communications 2018 4:90 https://www.nature.com/articles/s41599-018-0139-z

happens in complex systems, a theory of change is probably best seen as a 'compass' for implementation rather than a route map.[88]

Nevertheless:

A new statutory duty to adopt new practices or change existing ones will create momentum and urgency in the system, and will provide a powerful *leverage point* (in Meadows' terminology; 'rules – incentives, punishments and constraints' comes about half-way down in her list of 'places to intervene most effectively in a system').[89] In order to capitalise on this leverage point and channel the momentum positively, prior capacity-building to create the appropriately authorising environment around stakeholders will be required – in other words, to encourage alignment around shared goals, encourage positive mind-sets,[90] ensure adequate knowledge and adequate resources, diagnose and remove blockages and provide inspiring and positive systems leadership. A helicopter view of the evidence on capacity-building (both for systems change in general and for on-the-ground implementation of specific approaches) strongly suggests that the process of winning hearts and minds -- whether we call this 'creating readiness for change', 'absorptive capacity',[91] 'co-creation of public value', 'coalescing around shared outcomes' or any of the multiplicity of terms used in the literature – is the primary place to start, and to stay, throughout the policy and practice implementation process. A sense of shared personal endeavour around something worthwhile ('taking to heart' as a philosopher would call it)[92] is likely to be a vital compensatory driver for all the other barriers and blockages in the system that inevitably will be encountered.

At a front-line level, the wider evidence suggests that stakeholders will need to find their own way to implementation (over-specifying will be counterproductive), in ways that are consistent with their own contexts and realities and that allow for a personal (and perhaps, not always easy) engagement with the complex debates around child rights in a globalised society. Co-creation of the theory of change with stakeholders and ongoing co-creative work to develop specific implementation plans and taking account of current strengths and relationships within the system should make that process easier. Finally, patience and time and a planful, data-driven leadership approach will be required, because none of the evidence suggests any of this can happen fast.

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[88] Haynes P., Managing Complexity in the Public Services 2nd Edition Abingdon: Routledge 2015

[89] Meadows DH., Leverage points – places to intervene in a system, The Sustainability Institute 1999
http://www.donellameadows.org/wp-content/userfiles/Leverage_Points.pdf

[90] 'Mindset' is virtually top of Meadow's list of effective places to intervene in a system for change.

[91] Aarons GA, Hurlburt M, Horwitz SM., Advancing a conceptual model of evidence-based practice implementation in public services, Administration and Policy in Mental Health 2011 38, pages 4-23
https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3025110/

[92] Church J., Taking to heart – what choice do we have?, The Monist 2002 85:3, pages 361–380
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