



# **“We need to talk about complexity”**

13-14 June 2017

Green Templeton College, University of Oxford

## **WORKSHOP PROGRAMME**



**GREEN TEMPLETON COLLEGE** | OXFORD



NUFFIELD DEPARTMENT OF  
**PRIMARY CARE**  
HEALTH SCIENCES

## **DAY 1: Tuesday 13<sup>th</sup> June**

13:00 Registration

13:30 Welcome, opening remarks and introductions

13:40 OPENING KEYNOTES

Learning from practice

*Penny Hawe, University of Sydney, Australia*

The costs and benefits of simplicity and complexity

*Mark Petticrew, London School of Hygiene and Tropical Medicine, UK*

### **SESSION 1: SYSTEMS APPROACHES TO PUBLIC HEALTH**

14:30 Complex systems and public health evidence

*Harry Rutter, London School of Hygiene and Tropical Medicine, UK*

14:45 Talk about complex! Why a seemingly simple population intervention requires a system level evaluation: the case of the UK Soft Drinks Industry Levy

*Martin White, University of Cambridge, UK*

15:00 Has systems thinking been useful in identifying effective solutions to the problem of obesity?

*Mike Rayner, University of Oxford, UK*

15:15 So what's missing in our approaches to complex public health challenges?

*Diane Finegood, Simon Fraser University, Canada*

15:30 Panel discussion with the audience, moderated by Trish Greenhalgh, University of Oxford, UK

15:50 Tea and coffee break

### **SESSION 2: IMPLEMENTING AND EVALUATING COMPLEX INTERVENTIONS – TIME TO REVISE LANGUAGE AND THEORY?**

16:20 From wicked problems in a tricky world to complexity as an interventional style of thought

*Simon Cohn, London School of Hygiene and Tropical Medicine, UK*

16:40 The complexity of evaluating complexity: Lessons from real-world evaluations of complex healthcare programmes

*Fay Sullivan, NatCen, UK*

17:00 Complexity science meets implementation science

*Jeffrey Braithwaite, Macquarie University, Australia*

17:20 Translational Mobilization Theory: A new practice-based theory for understanding the complexity of coordination and collaboration in healthcare

*Davina Allen, Cardiff University, UK*

17:40 Discussion moderated by Sara Shaw, University of Oxford, UK

18:00 Poster viewing and pre-dinner drinks (Common Room)

19:30 Dinner at Green Templeton College

## **DAY 2: Wednesday 14th June**

### **SESSION 3: SIMULATION, MODELLING AND DATA**

- 09:00 Embracing complexity in dementia care: the DementiaNet innovation and evaluation  
*Marjolein van der Marck, Radboud University, The Netherlands*
- 09:15 Economic modelling of type 2 diabetes prevention programmes: Methodological issues posed by analysing complex interventions in complex systems  
*Samantha Roberts, University of Oxford, UK*
- 09:30 Enhancing loco-regional adaptive governance for integrated chronic care through agent based modelling (ABM)  
*Jean Macq, Université Catholique de Louvain, Belgium*
- 09:45 Using flawed, uncertain, proximate and sparse (FUPS) data in child mental health: Why recognising complexity requires procedural simplicity and transparency  
*Miranda Wolpert, University College London and Anna Freud Centre, UK*
- 10:00 Discussion moderated by Keith Ruddle, University of Oxford, UK
- 10:20 Tea and coffee break

### **SESSION 4: RELATIONAL APPROACHES, COMMUNICATION AND USER-CENTRED DESIGN**

- 10:50 Researching complexity: complex methodologies for researching and intervening in complex systems  
*Katrina Wyatt, University of Exeter, UK*
- 11:10 Rare deeds: How the relationality of complex social systems is made manifest  
*Robin Durie, University of Exeter, UK*
- 11:30 Managing uncertainty in the design and implementation of complex health interventions: User-centered design versus experimental science  
*James Shaw, Women's College Hospital, Canada*
- 11:50 Complexities in health care: A social semiotic perspective on communication  
*Jeff Bezemer, University College London, UK*
- 12:10 Discussion moderated by David Humphreys, University of Oxford, UK

### **CLOSING**

- 12:30 Planning for special journal issue on complexity
- 12:50 Closing remarks

## Poster presentations

|                                |   |
|--------------------------------|---|
| Luke Allen                     | Using systems thinking to prevent obesity at the community level  |
| Peter Barbrook-Johnson         | Dealing with complexity when evaluating environmental policies  |
| Robert A J Borst               | The dynamics of healthcare innovation in context  |
| Anna Dowrick                   | Complex, simple, or multiple? A case study of the implementation of the Identification and Referral to Improve Safety (IRIS) primary care domestic violence training and support programme  |
| Karen Gray                     | How might an exploration of complexity help in the evaluation of arts-based activities for people with dementia?  |
| Gemma Hughes                   | Where is complexity? Thinking about the settings of healthcare interventions as 'spaces' and 'places'   |
| Sue Lukersmith                 | Negotiating theoretical and applied approaches to complexity in health systems  |
| Heather McMullen /Megan Clinch | Experimenting with 'moments of equivocation': Considerations for the pragmatic clinical trial   |
| Thomas Mills                   | Exploring the Economic Dimensions of Complexity: A Post positivist Evaluation of Diabetes Policy and Governance   |
| Lois Orton                     | What does a systems-led approach bring to the evaluation of initiatives that attempt to intervene in the social determinants of health? Evidence from a study of a major community empowerment initiative in England  |
| Karen Osborn                   | An Adaptive Model for Falls Prevention  |
| Jenna Panter                   | Synthesising evidence on causal pathways by which changes to the environment may act to promote physical activity   |
| Sophie Pask                    | What does complexity mean to patients and professionals?  |
| Tarra L Penney                 | Development of a complex theory for how local food availability interventions could improve diet and reduce obesity: a realist inspired approach  |
| Swapna Reddy                   | Breaking Through Silos: Leveraging Strengths of Academics, Policymakers and Communities to Reduce Health Inequities   |
| Natalie Savona                 | Complexity as a smokescreen – discursive justification for a lack of action   |
| Andrew Ware                    | Traditional Quality Improvement methods are not sufficient by themselves in an Open system such as primary care; a Complex Adaptive System (CAS) where practitioners could embrace Behavioural Economics to encourage emergent positive health via Sensemaking. |