

GRASSROOTS TRIBALISM

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21

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Grassroots tribalism

The power of tribalism

Tribal allegiances run deep. Since prehistoric times tribes have bound people together, creating a sense of community and offering protection from external threats. Most modern societies may no longer be based on a tribal model, but tribes are alive and well in every walk of life, from the worlds of professional football to England's new integrated care systems (ICSs).

Understanding tribal kinship is an important part of leadership – particularly in an organisation as complex and diverse as an ICS. It's easy to see grassroots tribal groups as a threat when faced with the responsibility of building a new organisation. How can you be expected to build a unifying culture and align mindsets if your organisation is full of diverse grassroots groups and sub-groups, each with its own unique characteristics?

But it's time to flip the script on that view. Tribes don't have to mean division or factional dissent. They can foster a sense of community and provide support in times of change. Harnessed properly, tribalism can be a major asset to ICS leaders, helping them to build something that delivers on even the loftiest ideals of integrated care – and really does work for everyone.

European Super League – the rousing of the clubs

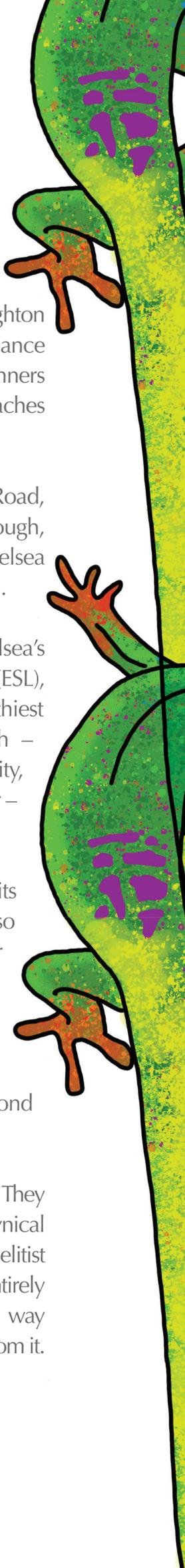
On 20 April 2021, the start of Chelsea Football Club's home match against Brighton & Hove Albion was delayed by a disturbance outside the ground, as 1,000 fans with banners and smoke bombs prevented the team coaches from entering the Stamford Bridge stadium.

In the unlikely setting of London's Fulham Road, at the heart of the country's wealthiest borough, the furious fans chanted 'we want our Chelsea back', blocking the entrance to the stadium.

The cause of the fans' outrage was Chelsea's involvement in the European Super League (ESL), a new competition between the 15 wealthiest clubs across the continent, six of which – Arsenal, Chelsea, Liverpool, Manchester City, Manchester United and Tottenham Hotspur – were from the UK.

Announcing the launch of the ESL, its chairman, Florentino Pérez, who is also President of Real Madrid, said, rather grandly: "We will help football at every level and take it to its rightful place in the world. Football is the only global sport in the world with more than four billion fans and our responsibility as big clubs is to respond to their desires."

But many of those fans begged to differ. They regarded the ESL as nothing more than a cynical attempt to make money. They felt it was elitist and exclusive and, in a sporting sense, entirely meaningless since clubs couldn't earn their way into the league, nor could they be demoted from it.





Their suspicions were fuelled by the wording of the ESL's launch announcement: "The formation of the Super League comes at a time when the global pandemic has accelerated the instability in the existing European football economic model." Here was an indication that the ESL was at least as much about the money as it was about the sport.

Chelsea fans weren't the only ones voicing their displeasure. A statement from the Tottenham Hotspur Supporters' Trust said: "The board of THFC betrayed the club, its history and the magic that makes this game so special when they put their name to a statement announcing the formation of a breakaway European Super League."

A statement from Spirit of Shankley, a Liverpool FC supporters' organisation, said: "Embarrassing. As fan representatives we are appalled and completely oppose this decision. FSG [Fenway Sports Group – the owners of Liverpool] have ignored fans in their relentless and greedy pursuit of money. Football is ours not theirs. Our football club is ours not theirs."

Manchester United Supporters' Trust said: "A 'super league' based on a closed shop of self-selected wealthy clubs goes against everything football and Manchester United should stand for. We urge everyone included in this proposal including Manchester United to immediately withdraw from this proposal."

And Arsenal Supporters' Trust said: "The AST deplores the announcement by Arsenal that they are breaking away to form a European Super League. This represents the death of everything that football should be about.

As fans we want to see Arsenal play in competitions based on sporting merit and competitive balance."

Back in Chelsea, former goalkeeper and club legend Petr Cech was sent to stand between the fans and the club executives inside the ground, begging the fans to 'give everybody time; let people sort this out'.

Shortly afterwards, the announcement was made that Chelsea was pulling out of the ESL. The club's decision had almost certainly been made before the demonstration but that didn't stop the fans celebrating wildly on the Fulham Road, chanting 'We've got our Chelsea back' and 'We've saved football!'

One Chelsea supporter of more than 50 years described the feeling as better than the club winning the Champions League in 2012.

Chelsea's announcement triggered the collapse of the project. Faced with unprecedented fan fury, all of the English clubs and three others hastily announced their intention to withdraw. The remaining members had little choice but to announce they would 'reconsider the most appropriate steps to reshape the project'. Three days later, the ESL announced that it was suspending its operations.

If you were going to bet on the winner of a dispute between a loose coalition of disorganised people with nothing in common except their allegiance to some of the world's biggest football clubs, and the billionaire owners of those clubs – who represent the spirit of capitalism in one of the purest and least fettered forms it has ever existed – could you put your hand on your heart and say you would have put your money on the fans?

Continue on page. 147

About the author

Martin Thomas

Copywriter, GGI

Martin joined GGI full-time as a copywriter in November 2020 after working with the team on a freelance basis for two years.

He brings more than 30 years' experience as a newspaper and magazine journalist, press officer, internal communications manager, and freelance business writer and editor.

He's worked for blue-chip multinationals, government departments, global banks, law firms and insurance companies, small agencies and one-man bands, writing and editing a wide range of material including thought leadership articles, news releases, case studies, white papers and reports.

Martin's role brings him into contact with most aspects of GGI's work, from writing and editing our weekly newsletter to working on bigger projects such as client reports or the annual Festival Review. He is also a member of GGI's National Commission team.

Away from the office, Martin enjoys cycling, photography and exploring the South Downs with his dog.

I would like to flip the script on the nature of public discourse. Instead of merely liking or disliking each other's views as noisily as we can, we should try to engage in more complex and nuanced conversations.





Tim Nathan
Gallery item 137 display size 60x40



Tim Nathan
Gallery item 104 display size 60x40



Of course, the ESL debacle prompted a great deal of media commentary. In its editorial on the subject, *The New Statesman* said: “What this tawdry episode reaffirmed was that English football clubs are more than businesses, franchises or brands, and the government is correct to explore ways to reform how they are owned and operated. Football was invented and codified in England and the clubs grew out of their local communities, and even today, when most of the owners, coaches and players are foreign, they serve as vessels of continuity across the generations.”

In other words, football clubs are tribal. They inspire loyalty at a level that even the fans themselves might not fully understand. The great Arsenal and Holland footballer Dennis Bergkamp said: “When you start supporting a football club you don’t support it because of the trophies or a player or history. You support it because you found yourself somewhere there, found a place where you belong.”

As the super-club owners discovered, we overlook the power of these fundamental connections at our peril. As we enter the world of integrated care in England, ICS leaders would do well to reflect on the story of the ESL and

ask themselves what lessons they can learn from it as they prepare to bring together numerous grassroots organisations and invite them to collaborate more closely than ever before, under the watchful eye of a distant organising body.

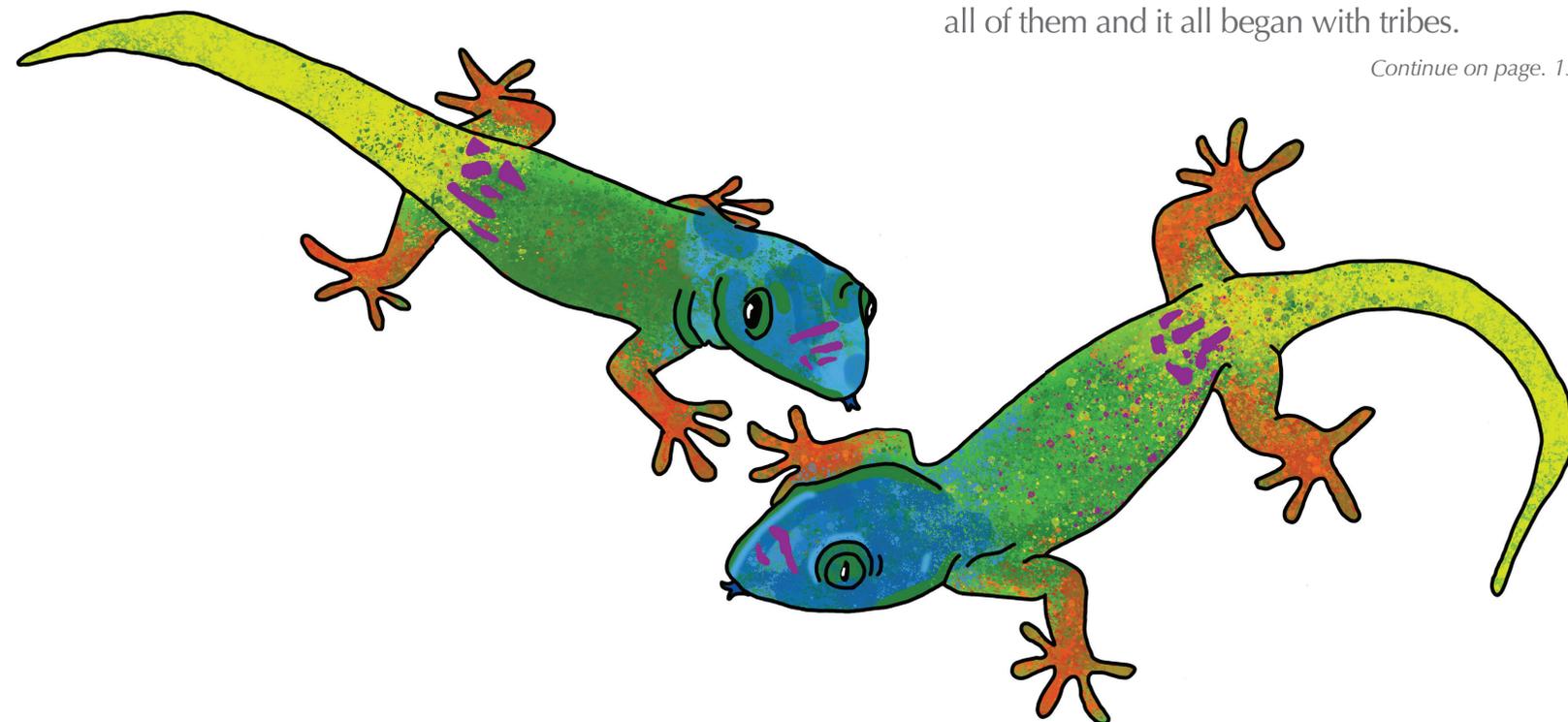
Tribes, Institutions, Markets, Networks

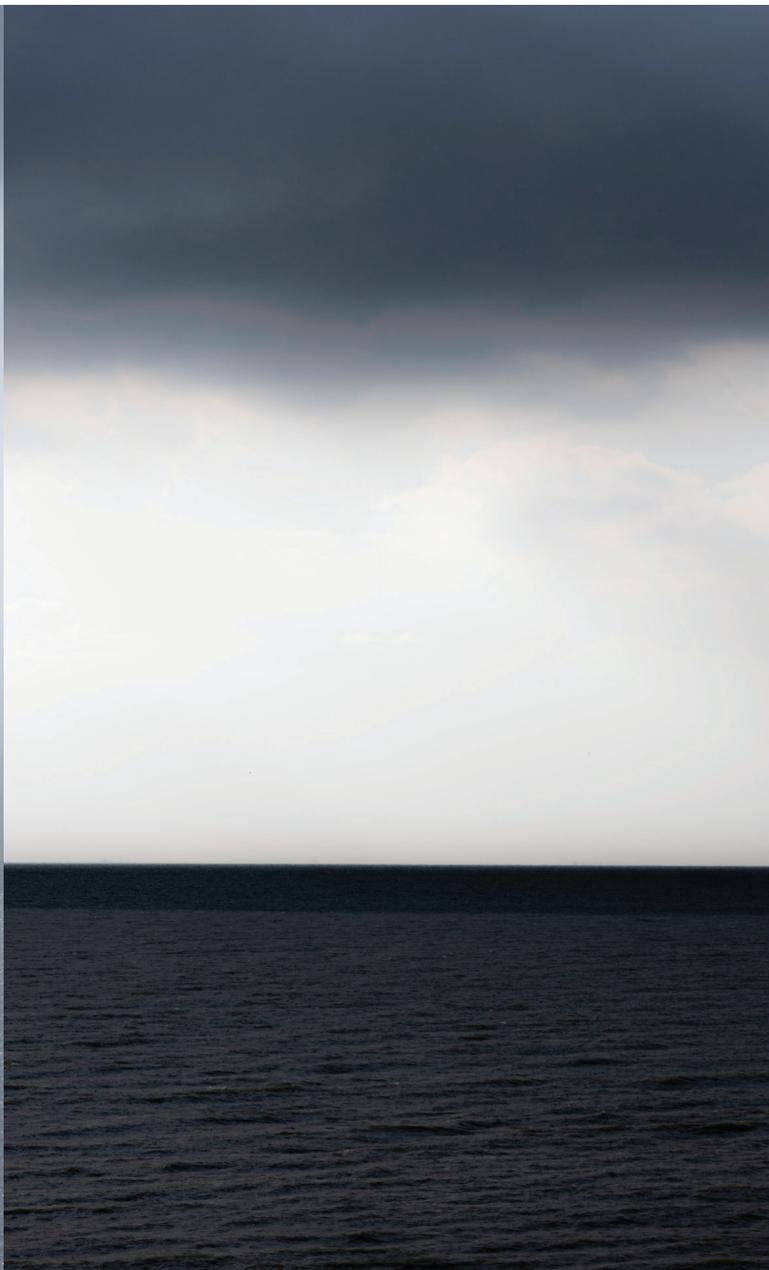
In his book *Tribes, Institutions, Markets, Networks: A framework about societal evolution*, RAND Corporation social scientist David Ronfeldt describes a model of social evolution that offers some useful context.

To understand societies, he says, you must study their evolution. Today, it’s all about multi-organisational networks, from activist collectives grouped around a shared passion for causes such as human rights or environmentalism, to multi-state political alliances – or indeed England’s nascent integrated care systems. These networks are held together by the extraordinary advances in information technology of recent years.

But these networks evolved from previous societal models. Each flows into – and exerts huge influence over – the next. To understand any individual model requires an awareness of all of them and it all began with tribes.

Continue on page. 150







Tribes and clans

Tribes were the first major form of organised society, emerging some 5,000 years ago in the Neolithic period. The key organising principle of the tribe is kinship, initially of blood but then of a looser brotherhood. Kinship creates a feeling of communal identity and belonging, which in turn strengthens people's ability to band together – and therefore to survive.

Early tribal models were egalitarian, says Ronfeldt, the concept of central leadership came later and marks the beginning of the transition from this earliest societal form to the next.

Because of this lack of central direction, early tribal groups were vulnerable to feuds with other tribes and to resource scarcities. Until hierarchies began to establish themselves, tribes struggled to deal with problems of rule or administration – for example ensuring harmony with a conquered tribe.

There are people all over the world who remain at this tribal stage of societal development and have not accepted any subsequent form of organisation. Ronfeldt points to societies that have lost their central institutions and reverted to 'ferocious neo-tribal behaviours', such as in the Balkans, or fought to retain their traditional systems and resisted the imposition of external political or economic forces, such as in Chechnya or Somalia.

He points to states such as Iraq, which still rely heavily on a sense of kinship with predominant clans, and to street gangs in the US and elsewhere, who put their gang allegiances above everything else – in many cases because they lack strong nuclear family ties.

Hierarchical institutions

Strong though these tribal bonds may be, no society can thrive purely on a tribal basis. Leadership, direction and coordination took societies to the next organisational form: hierarchical institutions.

From the Roman Empire to modern states and corporate organisations, hierarchies differ from



their tribal predecessors in having a central point from which decisions are made and control exerted. Hierarchical institutions are built around chains of command and bureaucracies, which become increasingly elaborate as organisations grow larger and more complex.

Until the seventeenth century, says Ronfeldt, the two foremost hierarchies of church and state vied for supremacy, often coming into conflict in their efforts to dominate the political, economic and social elements of society. But then “the state pushed the church aside and the nation state became the dominant actor in Europe.”

The shortcoming that eventually caused hierarchies to give way to competitive markets was their inability to process complex exchanges and information flows – for example in the area of international trade.

Competitive markets

Of course there have been markets since ancient times, but the concept of the market as a societal organisational form stems from the birth of capitalism and the writings of Adam Smith in the eighteenth century, in which he expressed the idea that a market economy will thrive as a self-regulating system if left alone by the state.

The market model revolves around the idea of open and fair competition. The ideal market system moves far from the centralised control of institutional hierarchies towards an atomised model based on competition.

The market does not attempt to replace institutional hierarchies, but it does stop them dominating the economic realm, and thus limits their sphere of influence. It's the successful combination of the

two models that marks the evolution of a society to the next level of development.

Ronfeldt writes of the way England and the United States in particular successfully combined elements of these tribal, institutional and market (T+I+M) models in the eighteenth and nineteenth centuries, managing to combine the three principles in a way that reinforced each one.

Collaborative networks

The most advanced democratic countries of the twenty-first century continue to operate some form of this T+I+M model but Ronfeldt says there is a new chapter in the story of societal evolution – and it's about the rise of collaborative networks.

At the heart of these networks is the heterarchy – a model in which, unlike a hierarchy, there is no top or bottom ranking for elements, but rather a complex set of balancing interrelationships. A Forbes article on the subject described it thus: “Think of the game Rock, Paper, Scissors. Paper covers rock; rock crushes scissors; scissors cut paper. Think also of the system of checks and balances in the U.S. Constitution. Different branches of government have supreme authority in some situations, but not in others. And no one is above the law. No kings or tyrants allowed.”

In a collaborative network, members may be dispersed across multiple organisations and locations. The thing that sets them apart from the many networks that have existed throughout history is the power of communication technology to connect small autonomous groups and empower them to “consult, coordinate and act jointly across greater distances and across more issue areas than ever before”, according to Ronfeldt.

Continue on page. 153



Tribalism persists

As we've seen, these societal models don't replace each other in a neat chronological flow. Instead, as each grows out of the previous model, certain elements survive and help to shape every subsequent model.

In other words, tribal affiliations continue to be important even as we embrace the sophistication of collaborative networks. As Ronfeldt says: "...tribelike patterns, which once dominated the organization of societies, remain an essential basis of identity and solidarity as societies become more complex and add state, market, and other structures. [...]"

"Moreover, the tribal form, even though it eventually loses its grip on the overall governance of a society, persists in affecting the later forms. This shows, for example, in the development of aristocratic lineages and dynasties, old-boy networks, and mafias that permeate the ruling institutions of some societies at different periods of history. It shows today in how the economic liberalization policies of some governments (e.g., Mexico, Syria) are rigged in part to benefit certain political or ethnic clans. The ethnic diasporas known as 'global tribes' are another modern manifestation of the persistence of this form."

The NHS mirrors society

What is striking when studying Ronfeldt's account of societal evolution is how closely it mirrors the evolution of the NHS. Its inception in 1948 involved bringing together disparate healthcare tribes

amid concerns among doctors in particular over the dangers of worsening livelihoods and a curtailment of their power and freedom. Over time, a hierarchical model emerged, which seemed well suited for the service, as a Healthcare Financial Management Association (HFMA) report highlights:

"The concept of hierarchy and bureaucracy fits well with a public sector such as the NHS because there is a requirement for uniformity, equity and accountability. It provides a mechanism for the public to assess value for money from the NHS. [...] A strong hierarchy is useful in periods of instability, gives direction if there are lots of new staff within an organisation and it gives a clear structure."

Reforms during the Blair and Brown governments of the late 1990s and throughout the 2000s placed a growing emphasis on targets and performance management – in other words, competition. With the Lansley Reforms of 2012, the NHS moved further towards a competitive market organisational model, with new clinical commissioning groups taking over budgets and commissioning local services based on competitive tendering.

And now, of course, the NHS is midway through its latest major transformation, embracing a more integrated system approach with local authorities and other partners across the public, private and third sectors to form collaborative



networks focused on health and social care at a local level.

Grassroots groups in integrated care

David Ronfeldt's work casts a revealing light on the challenges facing those responsible for the development of the new integrated care systems in England.

In the words of the NHS itself, "Integrated care is about giving people the support they need, joined up across local councils, the NHS, and other partners. It removes traditional divisions between hospitals and family doctors, between physical and mental health, and between NHS and council services. In the past, these divisions have meant that too many people experienced disjointed care."

But each of these divisions demarks long-established tribes or grassroots movements. Removing the divisions and building partnerships to address health and care needs across an area requires creating heterarchical collaborative networks that bring together groups that have never before been asked to work outside their silos, never mind their sectors.

And there are plenty of silos. Even among closely aligned professional disciplines within self-contained systems, tribalism is rife. The more complex the system, the more likely it is to be full of distinct tribes. The NHS is nothing if not complex.

Purely among doctors there is considerable tribalism. Junior doctors, consultants, specialists, surgeons, trust doctors, locums, general practitioners...all align themselves most closely with their professional peers and every one of the

resulting tribal groups comes with its own unique mindset. There are 23 medical Royal Colleges across the UK and Ireland, not to mention the General Medical Council and the British Medical Association, all of which contribute to further distinctions. Perhaps the most obvious – and long-running – tribal friction between doctors occurs at the interface between primary and secondary care, where the relationship between GPs and hospital specialists has been uncomfortable for many years, due to issues such as poor communication, differing priorities and unrealistic expectations.

Among nursing tribes too there are huge differences, as you might expect from a profession with a range of activities that spans midwifery, district nursing, mental health and critical care, among others. And this doesn't even begin to factor in the complexity introduced by the 14 allied health professions – ranging from radiographers and physiotherapists to art therapists and paramedics.

But so far we've barely scratched the surface of the challenge facing integrated care leaders. All of the long-established tribal tensions discussed so far exist within healthcare. ICSs require a much more diverse group to collaborate. Some will be clinicians, some politicians, some bureaucrats; some will work in the voluntary sector, some in the public sector, some in the private sector. Each group will have its own distinct culture, language, goals and ideals. Each will bring a different set of expectations into the ICS; each will prioritise different things.

Lessons from Scotland

England is not the first country to have brought together health and care at a place or system



level. In Scotland, health and care partnerships were established under the Public Bodies (Joint Working) Scotland Act in 2014.

If we have learned anything from the Scottish experience, it is that partnership working is not about structures but about the joint mindset and behaviours needed to make them work.

For a variety of historical reasons, progress on creating the 'jointness' in the joint boards has been hard work. The focus in all 31 joint arrangements based around local population groups, was for several years mostly on brokering a space and securing sufficient resources to make a meaningful contribution. This has been made more difficult as the two main power brokers, the health boards and the local authorities, supply the voting board members for each integrated joint board (IJB), initially leading to anything of real importance being referred back to each parent organisation and the complex politics between them. High-level agreements on improving care were there, but the leverage to do anything was not.

Even at the national level the historical differences and lack of trust between the elected and the appointed proved sufficiently problematic to

require a joint statement between the Scottish Government, the NHS and COSLA, the local authority representative body. This was eventually made in 2018, after four years of operation, and reinforced the point that integration was the only game in town and needed to be made to work. Problems with leveraging real change in social care was also highlighted in the more recent independent Feeley Report published in 2021. After seven years, true integration remains a battleground.

The IJBs have always struggled to explain their role to the public and to connect to them. This was one issue which GGI has been fortunate to work through with two of the largest IJBs: Aberdeen and Edinburgh. Identity, agency and confidence all needed to be tackled before any progress was likely to be made.

So, the key to unlocking the potential for the IJBs, where this has happened, has come through an investment of time and energy in the development of joint understanding and collective behaviour among the specific members of each IJB. Working through what each member wanted to achieve for local populations, using live issues and short timelines, has allowed discussion to move from the theoretical to the immediate and the practical; from 'someone ought to do something about that' to 'what are we going to do about it?'

Integration has boiled down to creating a shared risk appetite for change which places the board as active agents in moving health improvement forward themselves as individuals.

In the case of Edinburgh, the board was actively developed over two years as a new board, adopting a set of values of its own, not

Continue on page. 160



So what led Tim to produce this stunning series of seascape photographs, a creative process that represents a departure from his normal artistic concerns?

And why have they resonated so deeply with those who find themselves confronted by them now?

It would be easy to fall back onto a more formal Art Historical approach to investigate these questions.







an amalgamation of two other parent bodies. Its members were supported and equipped for the specific role of being an IJB member. This highlighted genuine differences of perspective and knowledge, not least around clinical governance and service provision.

A live governance handbook has helped overcome the consequences of churn in membership resulting from local elections and made governance an enabler of change. The members of the board have taken ownership of the board's culture and now induct new members into their unique culture with confidence.

Partners, including non-voting members, have also been important in keeping the board focused on what it alone can achieve and how it can operate differently in terms of pace and of risk. Scotland has always adopted a largely consensual approach to health and care and has at times operated slowly as a result.

There are signs, as the Feely Review turns into a new set of demands for local IJBs to make more rapid progress on issues highlighted by the pandemic, that earlier attention to the culture as much as the structures of integration may now pay off and provide the foundation for real integration in action.

Tribalism in practice – GGI's perspective

This focus on investing time and energy in promoting joint understanding across numerous tribal groups in complex organisations is at the core of GGI's approach to consultancy.

From investigations to governance reviews or

helping NHS boards to prepare for Care Quality Commission (CQC) inspections, we grasped long ago that there are no shortcuts to developing a proper understanding of an organisation and the way it operates. The only meaningful way to do this is to dive deep into the organisation and speak to as many of its constituent tribes and sub-groups as possible.

This process inevitably gives us a fuller picture of the complex web of inter-connected factors at play in any big organisation. But more than this, it presents us with an opportunity to help improve the organisation's understanding of itself. By engaging all stakeholders in discussions and, crucially, by encouraging all of them to listen to each other's perspectives, we develop a narrative that helps everyone involved to see issues in the round. We see ourselves as a catalyst in these discussions, brokering a fuller, more accurate view of issues.

This process helps the conversations we have with stakeholders grow into something more than merely learning opportunities – they begin to form part of the solution.

To illustrate the point, let's consider one of the most obvious tribal divisions in any NHS trust: that between managerial staff and doctors. During the course of our work we might bring together board members and senior clinicians, perhaps to improve their mutual understanding of risk management and the processes that support quality governance and assurance.

As a result of the conversation we broker, the doctors might emerge with a more nuanced contextual understanding of why, for example, they are asked to spend hours filling in Datix returns for a serious incident, or responding to a

patient complaint. Where previously they might never have received feedback after filling out such a report, our input might serve to remind them that the laborious technical process they are asked to go through actually makes a valuable contribution to the trust's ability to learn and improve – and that means patients are at lower risk. And of course, that will encourage them to engage as meaningfully as possible with the process.

These are not connections that the organisation couldn't make without GGI's input but, as anyone knows who has worked in a complex organisation, an external perspective can be useful in applying the systematic application of best practice.

This form of narrative building and lesson sharing must not be restricted to the upper levels of organisations. It lies at the heart of our engagement practice too. To return to the hypothetical trust being prepared for its CQC inspection, it's one thing to get the board ready for an inspection but that work will only really make a difference if it is taken deep into the heart of the organisation and instilled into the minds of everyone who works there. And that takes much more than just boardroom conversations.

To take just one example, when one of our clients asked for our help to prepare for a CQC inspection we produced a booklet that was distributed to everyone across the trust. Within it were key facts about the trust – who worked there, the numbers of patients treated, key processes, statistics and so on. There was also an individual CQC assessment section, inviting staff members to think about the kind of key information about the trust they should know, prepare themselves for the kind of questions

asked by the CQC and reflect on the things that made them proud of working at the trust and what quality improvements they had been involved with. This was reinforced by a series of face-to-face events involving around 20-30 staff at a time, during which people were encouraged to speak out about any blocks to progress they perceived and get to the heart of issues that were frustrating them.

Face-to-face engagement is so important in this kind of work. Although it is a distinct service line at GGI, it underscores everything we do as consultants. We can transform the mechanics of an organisation by advising how to improve meetings, board composition, objectives, strategy and any number of other variables. But without addressing the dynamics as well – without working to achieve buy-in throughout the organisation – this sort of work will never stick. People must understand why changes are made and feel they had a part to play in deciding what those changes should be or wholesale adoption for big changes will always be elusive.

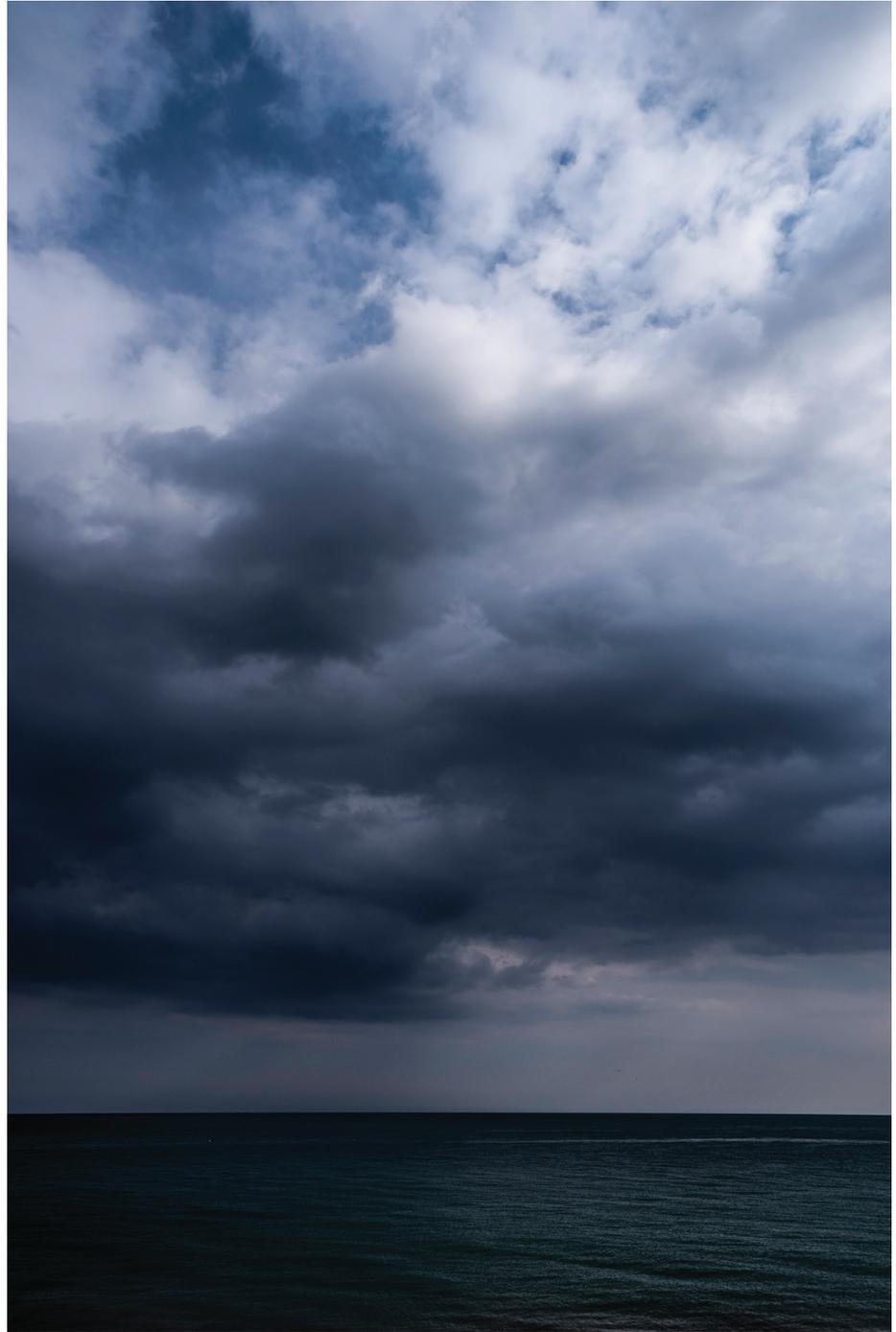
Flipping the script on tribalism

Looking through the lens of someone charged with building a successful ICS, it might be tempting to see tribalism as a bad thing. Creating a unified, positive mindset is hard enough without having to contend with the numerous deep-seated allegiances – and differences – that exist across the range of sectors and organisations making up an integrated care system.

But tribalism doesn't have to mean factionalism or conflict. It can be about reassurance; about fostering a sense of community and support.

In the King IV Report on Corporate Governance,

Continue on page. 163



Professor Judge Mervyn King, the former judge of the Supreme Court of South Africa, current chairman of the International Integrated Reporting Committee and long-time friend and mentor to GGI, lists a set of key principles designed to help organisations improve their governance.

All are geared towards promoting ethical and effective leadership in working towards four governance outcomes: ethical culture, good performance, effective control, and legitimacy.

One of these principles in particular – number 16 – speaks to the importance of establishing and maintaining a meaningful dialogue with all of the constituent parts of the organisation:

Principle 16

In the execution of its governance roles and responsibilities, the governing body should adopt a stakeholder-inclusive approach that balances the needs, interests and expectations of material stakeholders in the best interests of the organisation over time.

These are words that should resonate with the leaders of any big organisation – and especially with those working towards implementing integrated care systems.

Crucially, the road to success won't be found in discarding the cultures of numerous organisations and then building a brand new one. Nor is it about bending people's will to fit an existing culture. At best, that will lead to a dilution of your organisation's culture; at worst, it

could destroy it.

Far better to acknowledge and understand the distinct cultures of pre-existing groups, then work to align them. And that alignment will surely follow if groups are engaged with on their own terms, in a trusting and meaningful way.





I could make equivalences and comparisons with the romantic paintings of Caspar David Friedrich - indeed when I imagine Tim alone on the beach at daybreak underneath gigantic winter storm clouds, Friedrich's depictions of the lone figure set against the huge scale and power of nature do come to mind. It would be just as predictable to refer to the foreboding and brooding seascapes of Emil Nolde. Instead, I want to go beyond the obvious and focus on a more biographical angle that considers how these photographs bear testament to the photographer's struggle with mental health issues. More than that, I want to discuss how Tim led himself out of his mental health crisis by radically changing the narrative of his life.



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