Success Factors of Social Innovations by a Community-Based Learning Course (CBLC)

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Abstract

This is the success story of a community-based learning course (CBLC) project addressing the concerns of the international community of students and staff of Wageningen University and Research Centre (WageningenUR). A joint effort of this community, WageningenUR and social entrepreneurs resulted in social innovations for this community: an informative website and film about the available healthcare, explaining cultural differences. The film had 1,671 views (at 28-02-2014) and became part of the introduction programme of WageningenUR.

At WageningenUR every year over 150 teams execute a 'real-life' project in the CBL course 'Academic Consultancy Training'. In this course advanced Master students execute assignments commissioned by external commissioners in multidisciplinary and multicultural teams. What can be learned from this particular case of CBLC that successfully resulted in social innovations?

The following factors contributed to the results of this CBLC project:

1) Collaboration and/or involvement of stakeholders in the different steps, before, during and after the CBLC project 2) Every step fitted within an interest or existing initiative of stakeholders involved 3) The CBLC team made the stories of international students about healthcare explicit 4) The stories reached the WageningenUR board 5) The CBLC team proposed constructive recommendations which supported follow-up action 6) The social action-oriented commissioner with network enabled follow-up action 7) The commissioner discussed sensitive issues.

Lessons learned for the selection and guidance of future CBLC projects:

1) This case confirms the importance of attention for stakeholder involvement in the projects; 2) Projects in which stories of a community are made explicit, can be powerful in raising concern for this community; 3) Importance of formulation of constructive action-oriented recommendations; 4) Probe potential commissioners about how they expect they will share and use the results within their network.

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1. Introduction

This is the success story of a community-based learning course (CBLC) project. Within Wageningen University and Research Centre (WageningenUR) every year more than 150 student teams participate in the CBLC called 'Academic Consultancy Training'. The particular CBLC project that is subject of this paper, addressed the concerns of the international community of students and staff of WageningenUR about healthcare available for them. A joint effort of the international community, WageningenUR and social entrepreneurs resulted in social innovations for this community: an informative website and film about the available healthcare explaining cultural differences and an online appointment system with the General Practitioner.

The research question for this paper is: What are success factors for social innovation within the organisational framework of the CBLC Academic Consultancy Training?

The paper is organized as follows. Section 2 provides a description of the way CBLC projects at WageningenUR are organized. Section 3 gives a theoretical background on Social Innovation and Innovation Processes. Section 4 describes the Methodology. Section 5 consists of a description of the Social Innovation Process including this particular CBLC project's process. Section 6 concludes with a description of success factors derived from the CBLC case description and discusses implications for CBLC projects aiming to support social innovation.

2. 'Academic Consultancy Training'; CBLC projects at WageningenUR

At WageningenUR, every year over 150 teams of six (plus or minus one) students execute a 'real-life' project in the CBLC 'Academic Consultancy Training'. In this course, advanced master students from a majority of masters programs of WageningenUR, execute assignments commissioned by external commissioners in multidisciplinary and multicultural teams (Scheepers et al. 2012). The course starts five times a year and lasts eight weeks. Commissioners provide a project description and pay the out-of-pocket costs, like travel expenses, print costs, etc. Students apply to a project by writing a formal application letter, subsequently indicating their first, second and third choice of project. In addition to that they will have to express their preference for one of the team roles: manager, secretary, controller or member.

All teams have their own work space within the university, and are assigned a process coach and a content coach. The process coach is a trained teacher who has 65 hours available for this task. Though students manage their own work, the coach can intervene if necessary. Also, he or she is coaching students' reflection process. The content coach, also called expert, is a university researcher guarding the academic quality of the work.

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This person has 10 hours in total, to help the students with literature suggestions, ideas for informants and information on applicable methods. When finished, the experts mark the final reports. If needed, students can consult teachers/researchers of the Research Methodology Group, to help them with methods of social research – research design, data collection, data analysis, both qualitative and quantitative.

Special workshops support the students' learning process. The proposal writing workshop prepares them for their project proposal, in which activities and budgets are defined, to be approved by their commissioner. Conducting a stakeholder analysis and designing a logical framework are part of this workshop. Workshops Communication and Personal Development address issues of team work, team roles, and reflection. In addition to that there is a short introduction for team managers.

The course presents complex problems, requiring both inter-disciplinary and intercultural collaboration and self-reflection to solve them. Self-reflection provides the opportunity to describe and explore both personal and team qualities. This approach relates to the design of the course, which connects competencies through scientific research, projects, and collaboration (Scheepers et al. 2012).

3. Social Innovation Processes

Social innovation is a key word in this paper. As to guide research Pol and Ville suggest that an innovation is termed a social innovation if the implied new idea has the potential to improve either the quality or the quantity of life (2009). The social innovations described in this paper aim to improve the quality and quantity of life of international students and staff of WageningenUR.

In thinking about innovation the linear model has been dominant from 1950-1980. The linear idea is that innovations are developed by scientists, disseminated through intermediaries and put into practice by users (Leeuwis and Aarts 2011). Later modes of thinking suggest that innovations are not one-dimensional and do not just consist of new technical devices, but also contain new social and organisational arrangements. These are integral parts of an innovation. This implies that there are often many stakeholders and networks involved in an innovation process (Leeuwis and Aarts 2011).

The thinking about planning of an innovation process has also changed over the past decades. There was a strong belief in the possibility of planning and predicting innovation. A current viewpoint is that change is often affected by complex interdependencies, unintended and unforeseen developments and interactions, coincidence and dynamics of conflicts (Leeuwis

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and Aarts 2011). The typology of planning approaches of Whittington (2001) reflects these different viewpoints on planning. Whittington (2001) observed four successful planning approaches in the corporate world: With a 1) Classical strategy, a goal is set for a precisely planned outcome, assuming a predictable environment. With an 2) Evolutionary strategy, a variety of initiatives are launched and the 'best fitting' survive. With a 3) Systemic strategy, the local social system determines the goals and means of the plan. This strategy therefore requires collaboration and participation. Within a 4) Processual strategy, planning is a step-wise process, guided by a 'strategic intent'.

These four different types of planning have also been observed in the practice of health promotion (Wink et al. 2007, Lezwijn et al. 2011). However, in health promotion, approaches other than the classical planning approach are often not made explicit (Lezwijn et al. 2011). This paper will make explicit how social innovations in this particular case have evolved.

4. Methods

A case description of the process, from community concerns about health services in Wageningen to social innovation in the form of a video, serves as a basis to answer the research question. The description is based on direct observations of Goris and Wink and supported with findings from literature and in process documentation like the programme and summary of the Global Café meeting. This particular case can be regarded as exemplary for social innovation through Community-based Learning. The advantage of a case study is that it yields rich information, showing all perspectives on that particular case. The obvious disadvantage is that generalisation is rather difficult, since only one case has been studied (Flick 2009).

As evidence for success we provide evaluation results of the film. Evaluation results were collected with a combination of methods: 1) Every year WageningenUR asks all international students to evaluate services of WageningenUR by an online questionnaire called the International Student Barometer™, a service of the International Graduate Insight Group (i-graduate. org). This barometer also included two questions about the film. 2) 16 international Master students were interviewed by one of the film producers (Wink, Van Tuyll and Goris) directly after they watched the film as part of the introduction day's programme of WageningenUR (14-02-2014). Interviews were semi-structured; guided by a list of 10 questions and recordings were transcribed.

5. The Social Innovation Process; a CBLC project case study

This process story describes the steps from community concern to the resulting social innovations. Steps are: 1) a Global Café meeting 2) a CBLC project 3) Sharing the Stories 4) the Social Innovations. Subsequently we zoom in on the film production

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and the film evaluation results. Table 1 gives an overview of the involvement of the multiple stakeholders in the different steps in the social innovation process.

Global Café

In 2011 OtherWise started monthly Global Café meetings for the international population of Wageningen, as to bring people together, exchange views and make Wageningen an even better place for everyone. OtherWise is a non-profit organization linked to WageningenUR facilitating Dialogue for Social Change (www.st-otherwise.org).

During the first Global Café meeting, OtherWise asked attendants to write their thoughts and wishes about living in Wageningen on cards and to put these in a 'Tree of Hope'. Members of the international community of Wageningen expressed their concern about healthcare in Wageningen. The participants mentioned that they were not familiar with, or even amazed about how healthcare is organised in Wageningen (OtherWise 2011a).

Therefore the second Global Café meeting (March 2011) addressed the topic of healthcare in Wageningen, 'Do they care about us?' The approximately 30 attendants were invited to share their experiences by means of a 'Cross the line' activity and to ask questions to practitioners in two 'Table rounds'

(OtherWise 2011b).

Process Steps/Activities \ Stakeholders	OtherWise (non-profit foundation supported by WageningenUR)	Margriet Goris, coordinator OtherWise +	filmmaker at Cocreation Productions	International community of students and staff of WageningenUR	WageningenUR Policy Officers Internationalization @Home	Student psychologist of Student Service Team of WageningenUR	General Practitioners - WageningenUR	Vaccination Centre	Gerda Wink Wink Works for Healthy Communities +	CBLC team coach - WageningenUR	CBLC project coordination WageningenUR - incl. Gerda Casimir	CBLC Proposal Writing teacher - WageningenUR	CBLC project expert - WageningenUR	CBLC project student team - WageningenUR	Executive Board WageningenUR	Resource WageningenUR newspaper	Student Council - WageningenUR	FAIRBeeldproducties (video producing social enterprise)	Municipal Health Service	Regional hospital
Global Café 1st meeting with 'Tree of Hope'	X	x		x																
Global Café 2nd meeting Healthcare in Wageningen	X	x		x	x	x	x	x												
Submitting case description for CBLC project	X	x								x										
CBLC project - proposal writing	x			x						x	X	X		x						
- research activities	x			x	x					x	x		x	x						
- presenting advise report	x	x		x						x	x			X						
Sharing and discussing results + recommendations	X	x		x		x		x					x	x	x	x	x			
Improving information on WUR healthcare website				x			x							x						
Improving appointment system of GP (online)							x													
Producing an informative film on healthcare - WUR		X	X	x	X	x	x	x	X					x				x	x	x
Sharing of film		x		x	X		X		x								x	x		
Evaluating film			x	x	X	x	x	x	X									x		x

Table 1 Overview of stakeholder involvement in the different activities in the innovation process. The main stakeholder enabling the activity is marked with X

During the 'Cross the line' activity a quiz master asked questions like: 'Did you know that women who are pregnant are supported by a mid-wife and not in first instance by a gynaecologist? If you knew, cross the line.' Subsequently attendants could cross a line drawn on the floor of the Global Café venue. This activity allowed participants to share their experiences without having to speak in front of an audience (OtherWise

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2011a). It also gave a rough impression of the knowledge or experiences of the attendants, for example: few international attendants turned out to be aware of the role of a mid-wife in the Dutch healthcare system (OtherWise 2011a).

During the 'Table rounds' participants asked questions and discussed with 1) a nurse from the Vaccination Centre 2) a WageningenUR related Student Psychologist 3) a WageningenUR related General Practitioner and 4) the Policy officer Internationalization@Home of WageningenUR (OtherWise 2011b).

Having heard the stories from the international community of Wageningen, OtherWise provided a project description to the CBLC coordination. WinkWorks provided scientific input to this project description. OtherWise requested a CBLC student team to further explore what their fellow international students identify as barriers to and opportunities for quality healthcare in Wageningen.

CBLC project

The CBLC course coordinator accepted the project, the project description was posted on the course website and students applied for the project. Out of the applicants, the course coordinator selected a team of seven Master students with seven nationalities and from three different Master programs. Starting in September 2011, this CBLC student team proposed

and executed a qualitative study in the form of semi-structured interviews with 15 international students of WageningenUR (Alijagic-Boers et al. 2011). The team was guided by a process coach (author of this paper) from WinkWorks. During the project the team had regular contact with their commissioner and also talked with the Policy officer Internationalization@Home of WageningenUR.

The team delivered a written report (Alijagic-Boers et al. 2011) with the qualitative narratives of the interviewees. International students identify three main barriers to quality healthcare in Wageningen: 1) inadequate healthcare insurance procedures; 2) inflexibility in making appointments and 3) insufficient information provision. Data suggested that effectiveness of healthcare is primarily hindered by cultural misconceptions. The student team suggested increasing transparency in health communication to students by creation of one website dealing with healthcare issues for students. The team formulated concrete recommendations on the topics this website may include (Alijagic-Boers et al. 2011).

The CBLC team finalized their project with an interactive presentation of their findings and recommendations. The audience consisted of the OtherWise coordinators and commissioner, international students, the Policy Officer Internationalization@Home of WageningenUR and the process coach.

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Sharing the Stories

As to ensure follow-up on the research findings, OtherWise shared the report with a request for follow-up to: 1) the Student council as they are responsible for yearly evaluation of healthcare for students, including job evaluation conversations with the WageningenUR attached General Practitioners 2) the Executive Board of WageningenUR and 3) Resource, the Wageningen University newspaper, which resulted in an article (Resource 2011). In this article the spokesman of the Executive Board of WageningenUR acknowledged that improving communication can be helpful in explaining cultural differences.

In the research period and directly after sharing the research findings the commissioner noticed the sensitivity of the issue. Some of the stakeholders felt offended and the commissioner had to take an active role in mediating and explaining the aim of the process; to improve the current situation and not to criticize any of the parties involved.

Social Innovations

The previously described steps resulted in three social innovations:

1) The Policy Officers Internationalization@Home of WageningenUR took up the recommendation of a comprehensive informative website (http://www.wageningenur.nl/en/International-students-and-staff/Healthcare-1.htm) which includes the topics recommended by the CBLC student team.

2) The WageningenUR attached General Practitioners made it possible to schedule appointments with them via an online system, which widened the opportunities for students beyond limited telephone contact hours (during classes).

3) A film for (newly arrived) international students and staff on healthcare in Wageningen (http://www.youtube.com/watch?v=jREOGISxabM) which is available on the informative website of WageningenUR as well as on the website of the General Practitioners attached to WageningenUR. The film is also part of the programme of the introduction days of WageningenUR. This programme is offered to all students who start their studies in Wageningen. The link to the film has been shared via Twitter (amongst others by the spokesman of the board of WageningenUR), LinkedIn and Facebook. The film has been shared by e-mail with all study advisors of WageningenUR, with WageningenUR related health professionals and with all international students and staff involved in the production process of the film. The next section gives more details on the steps in this film production process.

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Film production

Wink and Goris (authors and social entrepreneurs) suggested to the Policy Officers Internationalization@Home of WageningenUR the idea of making a film on healthcare for the international community in Wageningen. They were inspired by the film 'Small gestures, big effects' in which seven physically challenged students of the University of Groningen share their experiences. This film is still used by study advisors, eight years after production (Goris and Witteveen 2013).

By the end of 2012, Wink asked the former CBLC student team members for their thoughts about the idea of a film production about healthcare in Wageningen. Reactions were positive: 'I think students would like to hear stories from others who are in a situation somehow similar to themselves' and 'students can easily learn from others' stories'. Former student team members suggested the video should address cultural differences (Wink & Van Tuyll 2013). In May 2013 the Policy Officer Internationalization@Home of WageningenUR gave Wink from WinkWorks and Van Tuyll from FAIRBeeldproducties (filmmaking social enterprise) the assignment to produce a film about healthcare for international students and staff of WageningenUR.

The Policy Officers Internationalization@Home of WageningenUR, WinkWorks and Fairbeeldproducties jointly developed the film script, based on the CBLC report and interviews with practitioners like the Vaccination Centre and the General Practitioner related to WageningenUR. The Municipal Health Service (part of WinkWorks' network), the Regional Hospital and the former members of the CBLC team all provided feedback on the script. Goris (as OtherWise coordinator), a former CBLC team member and the Policy Officers all found international students and a staff member who were willing to tell their story in the film. The former CLBC students and other international students of WageningenUR provided feedback on a raw version of the film. This resulted in a film in which four students and a staff member of WageningenUR tell about their experiences with healthcare in Wageningen. It shows a visit to a General Practitioner, a Pharmacy and a Student Psychologist, who explain the way they work. In line with the recommendations of the CBLC report, the film addresses: the health assurance and billing system, emergency procedures and how and when to register at the General Practitioner.

The film producers deliberately choose to film 'real' stories, as authentic personages and realistic storylines are important aspects of an effective narrative (Goris and Witteveen 2013; Boeijinga et al. 2013). When spectators can identify with a person telling a story and doing something, the spectators feel they can do it too (called self-efficacy in the Social Cognitive Theory of Bandura, 1986). Therefore it is important to choose for personages with which the target audience can identify

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(Nagelhout et al. 2014).

Film Evaluation

As evidence for success of the film we provide observations about the reach of the film, results from the International Student Barometer™ and results from semi-structured interviews with international students after they watched the film.

Observations about reach: During the WageningenUR introduction days, this film is shown to newly arrived students (approximately 400 in August 2013 and 100 in February 2014, as observed by Wink and Goris). In addition, the film had 1,671 views on YouTube (on 28-02-2014).

International Student Barometer™ results: All international PhD, Master and Bachelor students of WageningenUR were asked to indicate whether they had seen the film and if so, whether they were satisfied with it. With a response rate of 13%, the survey results show that 85% of the students who saw the film were satisfied. When we split this percentage into European and Non-European respondents: 77% of the European respondents and 92% of the Non-European respondents were satisfied with the film (I-Graduate, pers. comm. by Policy Officer Internationalization@Home 28-02-2014).

Interview Results: The 16 respondents were all students (12

European and 4 Non-European) who had arrived two weeks or less before they saw the film. The respondents appreciated to be informed about the film shortly after arrival, as one respondent put it: 'My big question, number 1 is, when I get sick, what should I do'. Most respondents were able to mention things they learned from the film, like: 'the choice of a male or female doctor is a free choice' and 'the 112 number'.

As identification is important for an effective narrative, we asked the respondents whether they could relate to the students in the film. Some of the (European) respondents indicated that the Dutch healthcare system is very similar to the healthcare system in their own country. So they did not feel related to the experiences of the students in the film 'their questions were not my questions' (Belgian respondent). This probably explains the difference in satisfaction rate between European (77%) en Non-European respondents (92%), as found by the International Student Barometer™. Most students could explain in what way they felt related to the students in the film.

All 16 respondents would recommend to watch the film to other international students, particularly to 'students a longer way from home'. Or as a respondent from Zimbabwe put it: 'I strongly recommend it, if you come here this is the basic information you need to know.' The reach of the film plus the satisfaction rate of 85% and the findings from the interviews, provide support to describe the film as a successful social

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innovation.

6. Conclusions

What are success factors for social innovation within the organisational framework of the CBLC Academic Consultancy Training? We will answer this question by outlining success factors derived from the CBLC case description and discuss implications of these findings for future CBLC projects aiming to support social innovation. But first, we relate our findings to theory about innovation processes and planning strategies.

Leeuwis and Aarts (2011) suggest that innovations are not one-dimensional and do not just consist of new technical devices. New social and organisational arrangements are an integral parts of an innovation, which implies that there are often many stakeholders and networks involved in an innovation process.

The case study as described in this paper (including the table indicating the involvement of stakeholders in each step of the process) clearly illustrates this latter mode of thinking about innovation. Multiple stakeholders and networks were involved in the innovation process. The resulting 'technical devices' like the film and the website, would not have evolved nor have the quality it reached, without the involvement of these stakeholders and networks.

The processual, systemic and evolutionary planning approaches (Whittington 2001; Lezwijn et al. 2011) could be observed in the described social innovation process: The social innovations evolved in a stepwise process in collaboration with stakeholders; the next step was dependent on reactions after the previous steps (Processual, strategy 4). Goals, like the specific content of the website and the film, were defined during the process in close collaboration with the international community but predefined by professionals (Systemic, strategy 3). The Evolutionary (strategy 3) aspect of the planning process can be seen in the selection of the CBLC project. The CLBC coordinator accepted the project and students applied for it. Also not all scenes in the raw version of the film were acceptable to the international community.

The Classical (strategy 1) approach to planning (Whittington 2001, Lezwijn et al. 2011) with predefined health goals and processes, has less fit with the described social innovation process. The social innovations as described were not predefined at the start of the CBLC project. This is related to the degree of complexity and dynamics of the context, like the multitude of stakeholders involved. This applies in particular to the type of projects and processes WageningenUR is dealing with, addressing issues of sustainability, rural development, health and society and other (Casimir et al. 2008, Jacobs 2001).

Success Factors

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The following factors contributed to the innovations resulting from this CBLC project:

1) Collaboration and involvement of multiple stakeholders in the different steps, before, during and after the CBLC project 2) Every step fitted within an interest or existing initiative of one or more of the stakeholders involved 3) The CBLC team made the stories of international students about healthcare explicit 4) The stories reached the WageningenUR board 5) The CBLC team proposed constructive recommendations which support-ed follow-up action 6) The solution-oriented commissioner with network enabled follow-up action 7) The commissioner discussed sensitive issues.

These factors (especially 1, 2 and 6) are in line with findings of Millot & Buckley (2013) on organizing scenario workshops to develop partnerships between researchers and civil society or-ganisations. They state that the prerequisite for success is that commitment to the implementation of a solution is strong and shared by all and that each of these actors has practical means of intervention in their own domain. In line with factor 7, Millot & Buckley point out that in action plan phase mediation work is crucial.

Leeuwis (2013) points out that meaningful change is depen-dent on changes in discourses, representations and storylines that are mobilised by interacting social actors. This is in line

with factor 3 and 4. Narratives were also a major constituent of the film.

Leeuwis and Aarts (2011) argue that three processes deserve particular attention in order to support innovation. These are network building, supporting social learning and dealing with dynamics of power and conflict. The listed success factors are in line with communicative strategies that can enhance these basic three processes and strategies, as described by Leeuwis and Aarts (2011).

Relevance for CBLC aiming for Projects resulting in Social inno-vation

Lessons learned for the selection and guidance of future course projects:

1) This case confirms the importance of attention for stake-holder involvement in the CBLC projects. During the proposal writing workshop which is part of the CBLC at WageningenUR, the Proposal Writing teacher stresses the need to plan for regular contact moments with the commissioner, often the major stakeholder. The Proposal Writing teacher also asks the student teams a) to indicate which stakeholders play a role b) how they might benefit or be affected by the project and c) who has impact on the project (Hendriksen & Heijmans, 2007). We suggest the following additional question for discussion by

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the student teams: how will you involve your stakeholders in the project process?

2) Projects in which stories of a community are made explicit can be powerful in raising concern for this community. For this particular case they also proved useful as a basis for the film production.

3) In the case described, the CBLC team provided constructive recommendations. These recommendations legitimised and provided content for the film and the website. The constructive, action-oriented recommendations proved to be very supportive for the innovations that evolved.

4) Potential commissioners might be probed about their intention to use the CBLC results and their network to enable innovation. We suggest to the CBLC organisation to add a questions to the current CBLC project description form for submission of assignments (Stomph 2013). Questions could be: a) how do you plan to use the results of the project? b) with who do you expect to share the project results? Similar questions are already part of the research project application forms of OtherWise and the Wageningen University Science shop (Science Shop WageningenUR 2013, OtherWise 2013).

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