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Innovillage tools for sustainable change

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Foreword

This report presents an open, national innovation environment called Innovillage in the welfare and health field in Finland. It discusses the innovation model and the co-development tools of Innovillage and their workability. The tools for co-development consist of both web-based tools and also face-to-face tools, where actors meet in person. The report has been written especially for those who are developing and building open innovation environments, platforms and tools in other countries. The report gives ideas, examples and models to develop innovation practice and culture also in other sectors than welfare and health.

Abstract

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This report presents an open, national innovation environment, called Innovillage, developed in the welfare and health field in Finland. The report starts with a short development history of Innovillage and then presents and discusses the innovation model of Innovillage. The co-development tools of Innovillage are then presented and their workability discussed. Finally, the further development of Innovillage and matters related to the scaling of its innovation culture are considered.

Innovillage began in 2007 at a time when similar observations were being made by different stakeholders in the social and health field in Finland. The ageing population, the threatened availability of skilful professionals, and a recession within the public sector are challenging the existing modes of service production. New models and solutions are needed to meet these challenges. The Ministry of Social Affairs and Health and the other authorities in the field have funded numerous development projects over the recent decades, but the models and solutions developed have only seen limited scaling-up within the sector, with very little development activities working across the sectors. Separate development projects have developed similar solutions over and over, without knowing of each other. New tools and practices are needed for co-development and for boundary-crossing that would strengthen the scaling-up and implementation of new models and solutions. Earlier the key organizations in the field, such as the National Research and Development Centre for Health and Welfare, the Association of Finnish Local and Regional Authorities, and different third-sector organizations, each developed their own databases for 'good practices'. They were typically 'passive' systems, where the developers described the models and/or the local practices developed in their projects. A unified and more interactive platform enabling and supporting real time co-development processes was recognised as necessary in the sector.

According to the Innovillage innovation model, innovation activity is an open, transparent, and collaborative activity that adopts and adapts models already developed by someone else or develops totally new solutions and models. The innovation model consists of three iterative and mutually constitutive sections: Stimulate, Incubate, and Enact. Each section should be worked on to achieve successful solutions and sustainable change in a local site. The sections are not phases that should be worked through in a linear order; they rather include different development tasks that are performed simultaneously and interactively; a change in one thing may generate change in another thing. In addition, the innovation model includes an activity for generalising from a local solution to arrive at a general enactment model that can be applied in any other innovation activity.

The tools for co-development within Innovillage consist of both web-based tools and face-to-face tools, where actors meet in person. The tools are as follows: Networks Tool for the different networks to collaborate; a Project Database to design and report on development projects; a Development Environment to carry out development activities; Innworkshops to co-develop face-to-face; Events, to offer a meeting point for the developers (peers), a place where ideas, practices and models can be discussed, marketed and scaled-up; and finally the Innotutor training for developers to practice the innovation culture and learn how to use the Innovillage tools.

One of the key tasks of Innovillage in the near future is to scale-up the Innovillage-like development culture to other sectors. Different sectors typically develop their solutions and models in silos, though often a good solution would entail co-development and collaboration between different actors and practitioners across sectors and organizations.

Keywords: Innovillage, co-development, open innovation, innovation model

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The short history of Innovillage

The founding of the national open innovation environment – Innovillage – took place in 2007, when it was found that similar observations were being made by different stakeholders in the welfare and health sector in Finland. Important observations were being made from at least three perspectives.

First, from the perspective of service production, challenges were anticipated with an ageing population, with shortages of skilful professionals, and with a public-sector recession. New models and solutions were needed to meet these challenges.

Second, from the perspective of innovation processes, the Ministry of Social Affairs and Health and the other authorities in the field had funded numerous development projects over the course of decades, but the models and solutions developed had only limited scaling-up within the sector, not to mention across sectors. In addition, separate development projects used to develop similar solutions over and over, without knowing of each other. The focus in innovation processes had been mainly in the design of new solutions and models. New tools and practices were needed for co-development and boundary-crossing which would strengthen scaling-up and the implementation and rooting of models and solutions.

Third, from the perspective of sharing the outcomes of innovation activities, different organizations in the field, such as the National Research and Development Centre for Health and Welfare, the Association of Finnish Local and Regional Authorities, and different third-sector organizations had developed their own databases for ‘good practices’. They were typically ‘passive’ systems where the developers described the models and/or the local practices developed in their projects. Having several different databases was a step forward in terms of sharing the outcomes of innovation activities, but on the other hand it was a situation where the developers had to choose where best to record the outcomes of their project, while for other developers seeking models and solutions, it made it difficult to know where to find them. A unified and more interactive platform that would enable and support real time co-development processes was needed in the sector.

Partly as a consequence of these observations, the Ministry of Social Affairs and Health prepared a service innovation program to promote the innovation activities in the social and health sector. This was followed by almost two years of planning for the Innovillage project. The planning was led by the Ministry, with the other authors being the National Research and Development Centre for Health and Welfare (nowadays part of the newly established National Institute for Health and Welfare), the Association of Finnish Local and Regional Authorities, and the Finnish Federation for Social Welfare and Health and the Finnish Centre for Health Promotion (nowadays merged into the Finnish Society for Social and Health). A four-year project was planned that would develop a national, open innovation environment for the welfare and health sector to promote and support innovation activities and the crossing of boundaries between the public sector, the third sector, and the private sector. The goal was an open innovation environment that would enable and enhance the involvement of all the relevant actors – such as citizens/clients, practitioners, management, and policy community – in innovation activities.

The building of Innovillage started in the autumn of 2009. The project was funded by the Ministry of Social Affairs and Health, the Finnish Funding Agency for Technology and Innovation, and by Finland’s Slot Machine Association. The near five-year process for setting up Innovillage was organized through several work packages, with actors from each of the founding organizations involved in each package. A private company, Ambientia Oy, carried out the technical development of the web service. The collaborative work was carried out in workshops and in an open web-based work space, *innowiki*. The future clients and users of Innovillage, such as practitioners and developers in the field, were also involved in the development processes as much as possible. The building process was a difficult endeavour, requiring continuous and intensive negotiations between the three quite different organisations on how to meet their needs and interests, but which did succeed in producing the most forward-looking national innovation environment in the world. And since the beginning of 2014, Innovillage has been an integral part of the basic activity of the founder organizations.

This report presents and discusses the innovation model and the innovation tools of Innovillage, as well as considering their workability. The tools for co-development consist of both web-based and face-to-face tools. The focus of this report is mainly on the welfare and health sector, but the tools are also applicable and have been used already in other sectors.

Practice-based innovation model

Innovillage's practice-based innovation model underwent a progressive development between 2009 and 2013, integrating the concepts and tools of science and technology studies, innovation studies, evaluation research, and research on collaborative learning. Science and technology studies provided a perspective for conceptualising and describing practices as socio-material systems constituted by humans, artefacts and interactions. Innovation studies contributed perspectives for conceptualising the innovation processes as non-linear and systemic, where different actors and stakeholders become involved in the process and where they mobilise different resources (methods, knowledge, money, etc.), and at the same time co-mould the progress of the process and the solution under development. Evaluation research was incorporated to clarify the specific and general requirements for evaluating the enactment of new practices at a site and the change they generate. Research on collaborative learning brings about additional conceptualisations of innovation processes as knowledge-creating and knowledge-utilising processes, where different kinds of expertise collaborate around a shared object of activity. (See Koivisto & Pohjola 2011; Pohjola & Koivisto 2013.) In the following we define the key concepts and principles of the innovation model and present its three iterative sections: Enact, Incubate, and Stimulate.

Focus on practices

Our daily life consists of different practices, routines and habits that we live through while not paying much attention to them. In the morning, we repeat certain routines; we wash and get dressed, make coffee, read the newspaper and drive or travel to the workplace in much the same way. When arriving at work, we perform various daily work practices, like checking email first thing, or having regular meetings. Typically, it is only at times when the established practices and routines no longer work that we become aware of them and try to find other or new solutions that could work and solve the problems we have encountered (Miettinen et al. 2012, 351).

In an ordinary way, practices can be defined as stable ways of doing things in the same way. They are usually developed for some purpose, i.e., to achieve certain goals. In the course of our daily activities, we enact and re-enact the practices to achieve goals. The existence and continuity of a practice is dependent on the fact that we are acting in the same way in the same kind of situation. However, not every action or activity is a practice. They are characterised particularly by stability, mutuality and repeatability, though practices also change or cease to exist for different reasons. There is always the possibility that activities are performed differently than usually. When people change the ways they act in order to achieve a certain goal, a previous practice may cease to "exist".

When studying services within the welfare and health sector, we can see that welfare and health services, and the ways they are organized, produced and managed, are all practices that are performed daily in the same way. In general terms, an appointment with a general practitioner follows the same structure and phases from patient to patient. The practice of a social worker consists of particular repeated tasks she conducts during meeting with her clients. A nurse working in home health care records information concerning the patient during every home visit in much the same way. In these services, the different practices are linked to each other and serve to structure the whole of the services. In many cases, some practices can be prerequisites for others and usually they are in some way dependent on each other.

It can be said that services and organizations are constituted by practices, and implementation of new ways of providing services is a process of constructing new practices. There is no social structures or organization that would exist independent of practices; the practices and activities rather constitute the structures and organizations as continuous effects. They are constantly made and re-made. By taking practices as the unit of analysis, the focus falls on the continuous activities that constitute services, structures and organizations.

Practices as socio-material systems

In social theory a shift towards a practice-based approach has taken place during the last two decades (Schatzki 2002; Nicolini, Gherardi & Yanow 2003). Practice has become the unit of analysis of human and social action. However, the approaches to studying practice do not form a solid methodological or theoretical foundation for practice research. Rather than being a unified movement, the approaches form an overlapping and partially contradictory collection of theoretical interests with various methodological backgrounds (see Law & Mol 2005; Pickering 1995; Hakkarainen 2009; Hakkarainen et al. 2009; van Egmond & Bal 2011; Marres 2012; Miettinen et al. 2009).

Science and technology studies – especially the relational ontology emphasized by actor-network theory – have focused on the socio-materiality of practices (Latour 2005; Callon 1991; 2002; Law 2004). According to relational ontology, human activity and practices are not studied through dualisms, such as practice versus organization, but as socio-material assemblages and systems that are constituted by humans, technical artefacts, money, architecture, values, goals, norms, etc. (the list of the constitutive elements is open and infinite).

A practice is typically developed for some purpose, e.g. to support older people with coping alone at home. In addition, other goals for a practice are defined in the different sites where it is enacted, e.g. to save on the costs of hospitalisation when older people are able to cope with living at home for longer. These goals guide and shape the way a practice is developed and assembled and the way it is enacted and maintained. A practice is constituted by human actors (such as clients, social workers, practitioners, managers), by activities and interactions, and by resources (such as tools, principles, technical artefacts, laws, money), which the human actors mobilise and enact in their purposeful activities

The socio-materiality of practices can be illustrated with an example of a doctor's appointment in a health centre. First, the practice is constituted by human actors, such as a general practitioner, a receptionist, a nurse, and a patient. Every actor has his/her own tasks in the practice. A patient books an appointment with the doctor in the internet or by calling the appointment number. The receptionist maintains the booking system and handles the registration of the patients. The patients are required to arrive at the appointment at a fixed time. In the appointment, the general practitioner conducts the diagnosis by interviewing the patient. In doing the diagnosis, the general practitioner can mobilise certain tools and directs the patient to take laboratory tests, which are conducted by the nurses. Second, as we have noticed, the practice is constituted by different artefacts that people mobilise in their activities, such as the telephone, information system, physical architecture and tools. Third, the practice is constituted by the manifold tasks and interactions of the humans that are mediated by the artefacts. The attributes of the different elements are constituted in the interactions; they are not given in the nature of things. A citizen becomes a patient when s/he enters into an interaction with health care personnel. A technical artefact becomes an instrument when a human mobilises and enacts it in his/her activity. The practice is the totality of the repeated actions and activity of different human actors and the instruments and tools they mobilise in their action.

Relationality of practices

Practices are something that are repeated in the same way again and again in a site, and the locality of practices means that they are always in some sense relational to the site where they are enacted. The example of a doctor's appointment discussed above should also be understood as relational to the site where it is enacted. Although a specific practice of a doctor's appointment might have strong similarity to appointments in different health centres, it is always relational to the site. The physical architecture partly constitutes the way it is structured. Further, issues such as available personnel, tools and instruments as well as the demographic of patients constitute the activities conducted in the practice. Therefore it is argued that a practice cannot be transferred to another site as a simple technical artefact; it is always tailored in different sites on the basis of various scripts, such as texts, flow charts, and peer experiences, which define the human actors of the practice, their roles and tasks, the resources to be mobilised, etc. (see Akrich 1992). The idea in adopting and adapting a practice is to build a strong, durable and workable socio-material system of action.

This does not mean that each practice is a totally unique and individual practice. Rather, the same solution can be translated into practice in different sites and the solution typically achieves different variants and modifications, depending on the local conditions, for example, goals, resources, knowledge, abilities, client groups, and the other practices that are preconditions for the new practice. The more complex the adopted solution is, the more probable it is that the practice will have differences and variations in different sites. In simple terms, this is what it means that the practices are relational.

When translating the same idea or model into practice in different sites, for example, a preventative model of youth's excessive alcohol use, the goal is usually to translate the core idea into every school: the same basic activities, information packages, process phases, etc. Regardless of the core idea, the practices in the different schools will have their own characteristics. This happens because the schools, their resources, their other practices, and the people are different. A Canadian study (Edmondson et al. 2001) analysed the dispensary outpatient clinics in large university hospitals, where the same method of thoracoscopic cardiac surgery was adopted. In principle the measures and tools of the method were the same regardless of the site. However, the study observed that the practices, the enactments of the method, varied between the hospitals. Nearly half of the clinics experienced notable difficulties in implementing the method. A key difference between the successful and unsuccessful clinics was in relation to how the practice was successful in linking to other practices of the clinic and how the resources and measures needed were succeeded in mobilising and enacting.

The relationality of practices has certain implications for how we understand or should understand the workability of practices. In the policies governing best practices, the aim is typically to find and implement universally effective and best practices. According to the relational approach, on the other hand, a practice does not have such inner attributes as goodness, effectiveness, or workability. Rather, these attributes are relational. This means that a practice can be effective or good only when embedded and implemented in a wider system where the goals to be achieved by the practice are defined. Instead of searching for the ultimate best practices, we need to investigate the applicability and workability of a practice in relation to the site. We have to investigate what kind of human actors, activities and interactions as well as resources have to be mobilised and enacted so that the goals defined can be achieved. The goals can be, for example, the health of a patient, the work welfare of practitioners, or the economy of an organization. Only in relation to these goals and the site can a practice be effective or good.

Pickering (1995, 21ff.) has argued that a central and workable way of communicating and distributing cultural practices is through models and exemplars. This is one of the key suppositions of the Innovillage innovation model. The solutions produced in the co-creation processes can be generalised into enactment models that contains the core idea and elements of the practice without any local information. This kind of model can then be adopted and adapted by other developers who produce new applications and exemplars of the model.

Innovations as successful practices

Innovation has become the organizing concept that drives the research, development and policy agendas. Policies are elaborated on idealism that innovations reform the whole public sector and are the key factor in resolving the economic crisis of the EU. However, the fuzzy discussion about innovations has vitiated the whole concept of innovation. People typically identify innovations with ideas or inventions. Nearly every research and development project seems to be innovative and to produce innovations. Innovations are talked about as if they were objects that could be transferred from site to site as such. Once an innovation has been made, it can be implemented everywhere.

In innovation discourse there seems also to be almost as many classifications of innovations as there are definers of them. Radical innovations have entered the policies as an opposition to incremental innovations. However, the demands for radical innovation are rather driven by ideological than practical reasons. In the scientific literature on innovations, radical innovations are usually those such as the development of printing technology, while in many cases the optimistic expectations of innovation policies are merely improbable or impossible. We argue that the different classifications of innovations are not that important when thinking about real-life innovation processes. The classifications can even be harmful when

emphasising them too much, especially when they become a part of policies that aim to produce certain kinds of innovations, such as radical innovations instead of incremental ones.

The practice-based approach of Innovillage gives us the basis for defining what innovation is and how innovation should be understood. In this framework innovation is defined as a new idea, invention or model that is successfully translated into practice and it solves or meets the problems or challenges it was developed for. This means that an idea, a model or an invention is not an innovation as such. To be counted as an innovation, it has to be translated successfully into practice, it has to have something new compared to the earlier practice, and it has to meet or solve the challenges or problems it was developed for. (See also Pedersen & Johansen 2012; Mulgan et al. 2007; Caulier-Grice 2012.)

We argue that it is much more important to study the socio-material constituents of a solution/practice under development than to focus on the types of innovation. When designing a local solution, it is vital to notice every element that has to be mobilised to translate it into practice, to enact it. And when implementing a similar kind of solution in different sites, these kinds of elements can be partly different in different environments. Being an innovation does not depend on whether it can be counted as an incremental or a radical innovation. What counts is that the ideas, innovations and models are successfully implemented in the way that they meet or solve the challenges or problems they were developed for.

From the point of view of development and innovation processes, our definition of innovation highlights that the innovativeness and the process do not cease when an idea, a model or an invention has been developed. At least as significant as the idea or model developed is to create the conditions for translating it into practice. Then the socio-materiality of the practice is designed. All the elements to enact the practice have to be taken into account; to mobilise and enact human actors, tasks and interactions, resources, rules and principles, laws and statutes (see also Akrich et al. 2002a; 2002b).

Involvement and co-development

Innovillage's innovation model emphasizes that the key actors and stakeholders with respect to the solution under development should participate in the innovation process, and if possible, from the very beginning of the process. They should participate in ensuring that the development and evaluation of a solution is based on the needs and views of the relevant actors. Because a local practice is constituted and enacted by various actors, the representatives of these actor groups should also be co-designing and co-developing it.

This partially practical perspective to innovations proposes a shift also in the theoretical understanding of innovation processes. Instead of distinguishing the creation and implementation of practices as two separate processes, this framework emphasizes the early involvement of various actors in the co-creation processes. The relevant actors are then simultaneously creating and enacting the practice. This means that the end-users and creators are partly the same actors. The involvement of various actors already in the early phases of the creation of a new practice is therefore vital.

Emphasis on the early involvement of the relevant actors extends the traditional idea of how new innovations become implemented and become existent. Until recently, innovation studies and design theories (especially in technological discourse) have investigated the role of users in the innovation processes as an individual area of study. Users have been those who either accept or reject the new practices or technologies, or they are merely utilised in the design and development as a source of information in terms of client satisfaction questionnaires or user testing. It has been proposed that design should rather be understood as practical activity and reasoning where both users (clients, practitioners, managers) and developers participate in the process (Pohjola 2009, 120ff; Lychnell 2011).

This idea of involving the relevant actors in the innovation processes comes with practical implications. It is a well-known fact that in addition to an innovation process generating a result (such as an actual practice in social care), a novel practice can generate various and probably uncontrollable effects related to different sites, of which some may be unwanted or even harmful (see Goldkuhl 2005). By including relevant actors, the possible effects, even unwanted, become more controllable during the different phases of the innovation process. Innovation should be seen as a process of making a hypothesis or a theory of some means to achieve a certain goal (how the home care for older people could be organized effectively, cost-efficiently and still take into account the individual needs of the people in home care) (Pohjola 2009,

128-134). By having multiple perspectives on the creation of the hypothesis, the reasoning over the means to achieve the goal becomes more efficient and controllable.

This kind of involvement and co-production of the shared objects of development should then be seen as something more than just a participation of different people and stakeholders. It is not just interaction and dialogue between different participants. Rather, it should be a stronger commitment and co-working on a shared object of activity. Therefore the development and co-creation process of a practice can be understood as a collaborative learning process. In (triological) collaborative learning (Paavola & Hakkarainen 2009; Pohjola et al. 2011), the process has a shared object of activity and shared goals and aims to which the members of the collaborative are committed. Ideally in such processes, inter-professional co-creation emerges and the expertise of various actors contributes to the development of the shared object.

Development principles

Innovillage has defined some development principles which if adhered to should ensure that innovation activity produces successful solutions, sustainable change and scaling-up of the models developed. The principles are as follows:

- **Co-develop:** Mobilise and involve the relevant actor groups in the innovation activity from the very beginning, such as clients, practitioners, management, and decision-makers. Everyone can participate in imagining, planning, designing, evaluating, etc. Thus, the essential aspects and voices of different actors with respect to the object of development will be taken into account.
- **Negotiate the needs:** Innovation activity should produce solutions that answer the needs of different actor groups. There may be manifold needs in relation to the challenge under consideration, for example, those of the clients, practitioners, organizations and the policy community. The needs can be contradictory, and they have to be negotiated and reconciled. The needs are translated into development goals that define the shared object of development. The needs and goals of development can change several times during the innovation process.
- **Utilise models:** Adopt and adapt models that someone else has already developed. Only if you do not find any interesting or promising model that matches the needs of your innovation activity, start to develop a new one. Mostly innovation activity takes for granted something already developed and then it is a question of adapting it to the site where it will be enacted. In the web-based development environment of Innovillage (see below) you can find models that may match with the needs of your innovation activity. Search for other sources, too.
- **Share knowledge:** In Innovillage, knowledge concerning the development and evaluation of practices and solutions is openly shared. Anyone is allowed to utilise available knowledge concerning the innovation processes, their outcomes (local solutions and models) and the evaluation of the outcomes.
- **Market the models:** The models do not diffuse by themselves to new sites. They have to be marketed by enrolling, recruiting and convincing actors to adopt them. To ensure the scaling-up of your model, it is good to start the marketing in the early phase of the innovation process.

Three iterative sections

According to the Innovillage innovation model, innovation activity is an open, transparent, and collaborative activity that adopts and adapts models already developed by someone else or that develops totally new solutions and models. The Innovillage innovation model has been developed primarily for the innovation activities of the welfare and health sector, but it can be applied in other sectors and fields and likewise with any type of development object. The model consists of three iterative and mutually constitutive sections: Stimulate, Incubate and Enact (Figure 1) (see also the Innovation Unit's *Disciplined innovation model*; <http://www.innovationunit.org/>). These sections should be performed to achieve successful solutions and sustainable change in a local site, but not strictly in the order they are presented in the model. The sections are not phases that should be performed in a linear order, they rather include different development tasks that are performed simultaneously and interactively; a change in one element

may generate change in another element. The co-development and co-creation focuses continuously on the shared object of development, that is, on the solution under development. In addition, the innovation model includes a task to generalise a local solution into a general enactment model that can be utilised by any other innovation activity.

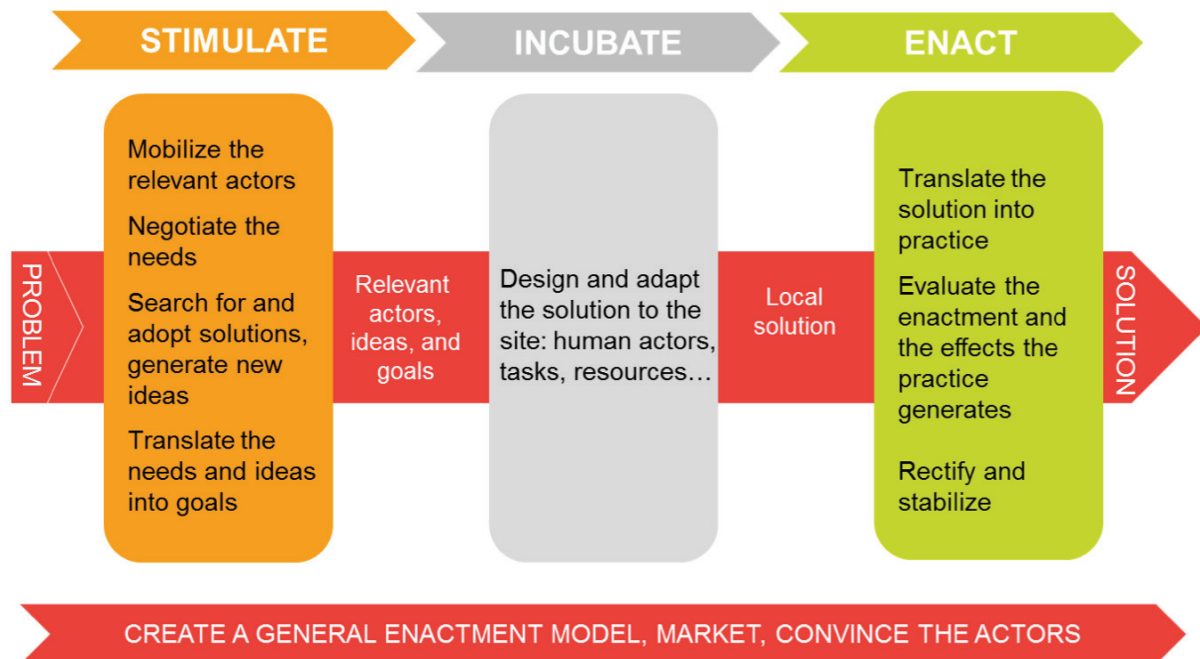


Figure 1. Practice-based innovation model

Stimulate

Innovation activity is always performed to solve or meet some kind of problem(s) or challenge(s). A key task in the beginning of the activity is to identify the different stakeholders and actors who are somehow relevant in relation to the challenge or problem, that is, they may have some ‘unsure’ needs or interests concerning the problem or challenge. When identifying the stakeholders, it is useful to start recruiting and enrolling them at the same time into the development community by involving them in the activity.

It is useful when thinking about involvement and engagement to consider four aspects: the client/citizen aspect, the practitioner aspect, the organizational aspect, and the policy community aspect. The clients/citizens are the ones who “use” the services or products. The practitioners are the ones (doctors, social workers...) who are practicing the service. The organizational actors are, for example, the managers of the organization(s) (private or public) that is providing the service. The policy community aspect refers for example to the governance of municipalities and districts. These different actor groups may ‘have’ some interest or need in relation to the challenge that is under focus. These actor groups are partly the representatives of the actors who will be the actors of the socio-material practice under development.

In innovation activity it is above all a question of negotiating and reconciling the needs of the different stakeholders and actors. This means that the actors involved start to brainstorm and design a shared solution that meets the different needs, but the needs are also moulded and remoulded in this kind of process. The needs should be seen as continuous effects generated and regenerated in the interactions, rather than something that the actors a priori have. Further, it is always reasonable first to check whether somebody else has already developed a solution or a model that meets the challenge and needs of the development community. If there is no suitable solution available, a totally new solution has to be developed. The needs of the different stakeholders are collaboratively translated into development goals. They define what kind

of solution should be the outcome of the innovation process. In this process the problem or challenge that was the starting-point of the activity may be remoulded.

The key tasks in this section are as follows:

- Mobilise and involve the relevant actors in the innovation activity
- Negotiate the needs
- Search for models and solutions already developed and/or start to brainstorm totally new solutions
- Translate the needs and ideas into development goals that define the shared object of development

Incubate

When starting to carry out the more systematic innovation activity the development community should, at the least, have a shared object of development that is being designed as a solution into a site. Only when the community has a shared object of development is it possible to co-design the socio-material constituents of the solution in a way that it will work in the site while meeting the challenges or problems it is developed for. In designing the socio-material constituents, a matrix for designing the socio-materiality of a practice is useful (Table 1). In the matrix, it is possible to co-design the socio-materiality of a solution in a site, i.e., the local elements of the solution including actors, tasks and resources. The matrix consists of the four aspects presented above and of six topics. The topics are human actors, tasks and division of work, knowledge, skills and tools, rules and principles, laws and statutes, and expenses. The design works as a script of the local solution; it defines the socio-material elements of the solution. On the basis of the script, the solution can be translated into a local practice.

The key tasks are as follows:

- Make sure that the development community has a shared object of development
- Design the solution to fit with the site by utilising the matrix for designing the socio-materiality of a practice

Table 1. A matrix for designing the socio-materiality of a practice

	Client aspect	Practitioner aspect	Organizational aspect	Policy community aspect
Human actors				
Tasks and division of work				
Knowledge, skills and tools				
Rules and principles				
Laws and statutes				
Expenses				

Enact

When enacting and testing an idea or a more designed solution in a site, the script is translated into practice. Then the expected and unexpected change the practice generates is evaluated. By evaluating the change it is possible to answer whether the practice meets the challenges or problems it was developed for. The evaluation also includes the evaluation of the enactment of the solution. The whole evaluation can be performed in the before, during and after –design. In this design, the matter to be evaluated is followed and

evaluated before the enactment of the practice, during the enactment and after the enactment. Through this design, it is possible to locate the change generated (before – after) and the constituents that generated the change (during). On the basis of the evaluation, improvements can be made to the solution and decisions concerning its stabilisation.

The key tasks are as follows:

- Plan the testing
- Prepare the evaluation design
- Perform the evaluation

Plan the testing

There is no general rule for when it is useful to start testing the solution under development. Evaluation and improvements to the solution are done interactively so that testing is started in an early phase and improvements are made on the basis of it. The solution being tested can be at an early stage of development, but it can also be a more developed invention or model. A kind of basic precondition for testing is that the basic logic or idea of the solution under development has been outlined. This kind of logic by which some goals or change is attempted works as a script and theory of change by which the solution is translated into practice and tested. Testing is a trial of the theory, the results of which can be used to improve the solution. It is useful to be suitably accurate in writing, drawing, describing etc. the solution being developed and later to translate and elaborate it into a general enactment model, by means of which the solution can be communicated to other developers. For the testing it is vital to prepare a plan for mobilising the resources that will be needed (human actors, tools, money, schedule).

Prepare the evaluation design

The evaluation design is a key part of the plan for testing. It consists of at least the following elements: goals for change, evaluation questions and criteria, and methods and schedules for the data collection/evaluation, and analysis of the material collected.

The goals for change define the changes being attempted through the solution that is being enacted. The needs for change are articulated already at the beginning of the process, but they may be re-articulated during the development process. The goals may define changes within the different aspects mentioned above: e.g. in clients' everyday practices, in the work satisfaction or culture of practitioners, in the processes of an organization, in the economy of a municipality. Further, the enactment and stabilisation of a solution is in itself a manifold socio-material change process that is the goal of the development process.

When the goals for change have been defined, it is time to decide which goal achievements will be evaluated. Often it is not possible to evaluate the achievement of every goal. The evaluation has to be restricted to one or a few goals and aspects. In addition, the evaluation includes the enactment of the practice within a chosen aspect.

The evaluation questions that look at the achievement of change can be defined on the basis of the stated goals for change. Evaluation questions concerning unexpected changes are defined as well. Further, to evaluate the enactment of the solution, evaluation questions can be formulated from the script that described how the enactment should proceed. The evaluation questions together help to define evaluation themes, criteria and/or indicators. The actors for whom the changes are somehow relevant should participate in the definition activity.

It is useful to think about the methods of evaluation and data collection from the viewpoint of what kind of knowledge is needed and how the different methods match with the practice that is to be evaluated.

A key task when planning the evaluation and its content is to identify all the relevant stakeholders and actors who should participate in the evaluation and whose voices should be heard. On this basis, a plan can be made concerning the methods and their application. Several different methods that enable the voices of different actors to be heard can be applied: interview, observation, survey, dialogical and participatory group methods, etc. The questions, themes and discussions are formulated so that they match with the evaluation questions. The task of data collection is to produce understanding and knowledge of the matters that are evaluated, such as changes in the health and welfare of clients. However, it is important to notice that totally neutral and external data collection is never possible. Data collection also creates and produces

realities. Interview themes can guide interviews towards specific directions, while survey questions can restrict possible answers, and people may answer questions to which they previously had no answer or no opinion on, etc.

Perform the evaluation

An evaluation of a practice is performed within the before–during–after evaluation design. At its best the evaluation is performed in the contexts of different aspects (client, practitioner, organizational, policy community), systematically and in real time. However, this is not always possible or necessary. Sometimes it is enough to collect information after the enactment of the practice and only within one aspect. It is useful to perform the evaluation as part of the enactment of the practice – not as a separate process. The aspects of evaluation and the needs for assembling knowledge depend a lot on what kind of practice you are evaluating and on what kinds of resources (people, time, money) you have to perform the evaluation.

Evaluation before the enactment: The evaluation task before the enactment of a practice is to evaluate the element(s) in the site where a specific change is attempted to achieve. For example, we can evaluate how well older people cope alone at home in their everyday activities, the workload of the home helpers in the municipality and whether the amount of workers is sufficient, and the annual costs of the beds for older people in the municipality and whether the costs should be reduced.

Evaluation during the enactment: The evaluation task during the enactment is to follow and evaluate the enactment of the practice and changes in the element(s) being evaluated. This is performed in the context of the chosen evaluation aspect. The practices that are evaluated can be very different by nature: a short intervention with a client, a long collaboration between the client and the practitioners, a practice to organize and produce services, etc. It is not always possible or necessary to evaluate the enactment and the changes during the enactment, for example when the target of evaluation is a simple or short-term intervention. On the other hand, when evaluating lengthy collaboration, such as the one with a patient and a health care professional in the treatment of chronic diseases, it is necessary to follow and evaluate the enactment and the changes generated during it regularly. The evaluation of the enactment of a practice is done by comparing the enactment to the solution designed earlier (the script).

Evaluation after the enactment: The task after the enactment is to ensure that the elements under evaluation are considered within an appropriate time span. By comparing this evaluation to the evaluations performed before and during the enactment, it is possible to study the changes that have occurred during the process.

On the basis of the entire study material of the evaluation, conclusions can be drawn concerning how the changes achieved were generated: to what extent has the practice under evaluation generated the changes and what other practices or factors were involved in their generation. In addition, an evaluation is made concerning the success of the enactment of the practice. On the basis of the evaluations the improvements needed are made in the practice and the final decision concerning the stabilisation of the practice is made.

Enactment models

The design arrived at through using the matrix for designing the socio-materiality of a practice works as a resource when the general enactment model of the solution is created. The generalised model is not a description or a model of the local solution developed; it rather defines the core socio-material elements of the solution that should be enacted in every site where the solution is adopted and adapted. It works as a script and a theory of change that is tested when adopting the solution in new sites. This kind of general model can be created during the development process and it is typically elaborated after testing the solution in different sites. The general models work as conceptual artefacts through which the practice developed can be communicated, explicated and marketed.

Tools for co-development

One of the key tasks of Innovillage is to enhance and enable the co-development of shared objects. This is to support innovation activity in which the key actor groups in relation to the challenge and object of development are mobilised and involved from the very beginning. These actors are for example clients, practitioners, management, and decision-makers. This is also to support innovation activity that links and opens up networks for actors across the organizations, fields and sectors. To promote this Innovillage has been developing learning networks, which, on the other hand, have also been involved in developing Innovillage (see Englund & Koivisto 2014).

There have been nine learning networks within Innovillage during its development. They are each unique and have very different goals. The general aim of the networks is to bring together people and organizations who work within similar subject areas and to help them share information and knowledge. The networks promote co-development, collaborative learning and scaling up of models and practices. Among the central activities of the networks are the so-called Innetworkshops (see below), which are workshops carried out according to the innovation model and development principles of Innovillage and where the shared problems, challenges and objects of development are co-worked. The networks also arrange learning forums, which consist of both lectures and Innetworkshops. A key task of the networks is to promote the use of the Innovillage tools for co-development. The members of the learning networks consist above all of the professionals and practitioners of the social and health field who are somehow involved in development and innovation activities in their organizations, but also of the management of the organizations, and occasionally of the clients of the field. However, the networks are open to any kind of actor groups within the field.

The learning networks have each 1–3 co-ordinators, who so far have been people/researchers/experts who work for the National Institute for Health and Welfare. The number of members in the networks varies a lot. The nine networks are:

- Promoting health and welfare and reducing inequalities
- Care for older people
- Children, youth, and families
- Addiction and mental health
- Mediation in criminal and civil cases
- Social inclusion and inclusive employment policies
- Disability issues
- The use of communication and social media in spreading innovations
- Network dialogical practices

After the opening of the virtual Networks tool (see below) for any kind of network in the web-service of Innovillage in September 2013, the amount and variety of networks that operate within Innovillage and use the co-development tools of Innovillage has grown rapidly. This means above all that the different networks of the welfare and health field, many of which already have a long history, have joined Innovillage, but it means also establishment of new networks.

Web-based and face-to-face tools for co-development

Innovillage tools for co-development consist of both web-based and face-to-face tools. The web service of Innovillage consists of three virtual tools: the Networks Tool, the Project Database, and the Development Environment. Moreover, in the web-service there is a calendar for communicating events and a discussion forum with different themes. Social media is in active use, too. The face-to-face practices of Innovillage consist of three activities: Innetworkshops, Events and Innotutor Training.

Any kind of innovation and development activity can make use of the tools of Innovillage. The tools are utilised on the basis of the needs of the activity. Some use only one tool and others every tool. The tools are aids that support the development work performed by human actors.



Figure 2. Innovillage tools for co-development

Networks tool



The Networks Tool is a workspace for any kind of network. A network can plan and develop its activities, inform about upcoming events, and work and share documents by means of the network tool. The workspace can serve as a home page for a network.

All the materials of the networks are open to anyone who accesses the tool and is looking at the contents of the networks. However, a network has the possibility to restrict access to the materials so that only the members of the network can see them.

The Networks Tool was made available in September 2013. At the time of writing this report, the tool had been open for three months and there were not that many experiences of working with it yet. However, the number of networks using the tool was growing fast. The majority of the first adopters were networks that already had a history, but some new ones were also established. Now the networks of the welfare and health field have a common platform on which to work, and in the longer run we will evaluate the extent to which the different networks have utilised the tool and its functionalities. There are numerous active networks in the field about which there is little knowledge, since they have their own home pages that may only occasionally be stumbled upon. The Networks Tool allows for a more efficient means to discover and engage with those networks.

Project database



The Project Database is a register-type service in which a development project can enter its basic information, contents and outcomes (e.g. contact information, goals, plans for carrying out the project, and the outcomes and reports of the project). All the materials of the projects are open to those who access the service. Its task is on the one hand to be a tool for planning, managing and reporting the development

project and on the other hand to operate as a tool for finding partners, for example, by searching for developers who develop similar types of solutions as you are planning to do. The database works also as a home page for a project.

The database was opened in January of 2012. Formerly there was no national project database in the field, and the numerous projects had their own home pages as part of the web-services of their organisations. They were difficult to find, and the outcomes of the projects were reported mainly in reports. All this meant that similar types of projects were developing the same types of models and solutions around Finland, without knowing of each other. Moreover, in the worst case, when a project had finished, its materials and outcomes might have disappeared altogether.

In the end of 2013 there were about 500 development projects recorded in the database, with the majority being ongoing. However, this was still a small percentage of the numerous projects in the field, though the database is growing all the time. The projects of the key development programs in the welfare and health field, such as the projects of the broad national KASTE development program, funded by the Ministry of Social Affairs and Health (€17 million annually), are obliged by the Ministry to utilise the database.

Development environment



The Development Environment is a platform where practices are collaboratively developed and generalised into enactment models and where information about existing practices and models can be searched for. It has been created primarily for the needs of practice development in the welfare and health sector, but it can also be used in other sectors and hopefully across sectors. All the information entered into and published in the environment is openly available for everyone. The development environment consists of two tools: the Virtual Workspace for the development of practices, as well as the tool for creating an Enactment Model out of a practice.

In the Virtual Workspace the local practices are collaboratively developed, designed and evaluated. In the workspace the developers are able to invite the relevant actors with respect to the practice under development to participate in the virtual development. The workspace can be utilised for creating totally new local practices and for creating a new local practice out of an already existing enactment model in the environment. It offers the developers also a possibility to discuss and to consult with each other online.

The Virtual Workspace consists of a section that includes the basic information concerning the practice under development and of three other sections that match with the three sections of the innovation model of Innovillage: (1) basic information, (2) needs and goals, (3) a matrix for designing the socio-materiality of a practice; and (4) the enactment and evaluation of a practice. The section on basic information outlines briefly the practice that is under development in a site and contains e.g. the contact information of the developers. The second section is the place for negotiating and recording the development needs. These needs are translated into development goals. The third section of the workspace consists of the matrix for designing the socio-materiality of the practice. In the fourth section, the realisation and evaluation of the enactment is recorded. The evaluation uses a before–during–after design.

In the other part of the Development Environment, the local practices developed in the Virtual Workspace can be generalised into enactment models. An enactment model is a general model that contains the core idea and elements of a practice without any local information. The enactment models in the development environment work as models for communicating the core idea of a practice, while each enactment of a model described in the Virtual Workspace serves as exemplars of the ways the model has been enacted (Figure 2).

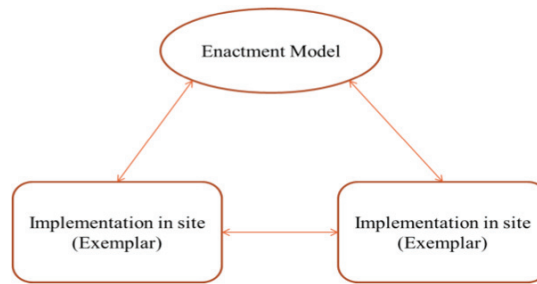


Figure 2. The conceptual structure of the development environment

The Development Environment was opened in November 2012. In December 2013 it contained about 900 practices and enactment models from varying subjects and themes for development, such as social and health services, service systems, service structures and production, management, training and education, and decision-making.

The developers who have been working in the environment have found the Virtual Workspace easy to use and understandable. Feedback suggests that signing into the service, recording their own information and publishing it has been straightforward and clear, as have the possibilities to study the materials and contents of other developers. Developers have experienced the environment as a clever way to perform and record their own work in real time and to share experiences and expertise among other developers and professionals. It has become evident that it is necessary to have one or two persons responsible for recording and updating the information of a development process into the Virtual Workspace. This is a simple way to guarantee that the job gets done, and ensures every Workspace consists of relevant and current information. It is also important that all the actors involved in a development process allot sufficient time for the co-development process, for example for different kinds of meetings, brainstorming, and commenting on the work of others in the Virtual Workspace.

Some developers have found it somehow embarrassing to record and publish unfinished and therefore incomplete text. They seem to think that all the information that is recorded and shown to others should be completed and qualified. It has been necessary to reassure them that incompleteness is a natural part of a development process, and by publishing also draft texts/outlines of their local solutions, other developers can study how the development process is evolving. To learn to work in the environment takes time and is facilitated by an open development culture in the organizations.

The matrix for designing the socio-materiality of a practice has been experienced without exception as a useful tool to think about the local practice and its constitutive elements. Especially the idea of clients as active actors of practices has opened the eyes of several developers. Citizens and clients are no longer seen as passive users of services, but rather as active actors who have their own vital tasks in the practices.

The least used part in the Virtual Workspace is the enactment and evaluation of practices. The developers are apt to think that someone from outside the development process should come to perform the evaluation. The idea of involving the relevant actors and voices in the evaluation is still unfamiliar for some. Also the idea of evaluating the enactment of practices in real time is new to many developers.

The developers are very cautious about utilising models that someone else has developed. To utilise the work of others in this way has not been ordinary practice in the development activities in Finland. On the other hand, developers often think that they have to show those that fund their development activity that they have developed a new model, and so they develop everything from the beginning themselves.

From the point of view of co-development across projects and organizations the environment has obviously generated new collaboration and decreased development work where separate projects are developing similar solutions and models without knowing of each other. However, the web-based environment is only one of the tools of Innovillage and because of this, it is difficult to evaluate its constitutive role in relation to this.

Innoworkshops



Innoworkshops are workshops where the relevant actors with respect to the shared object of development perform the different development tasks defined in the innovation model of Innovillage, for example negotiate the needs, co-design and co-evaluate. In Innoworkshops the actors of a development community or of several communities collaborate on a shared object of development. These kinds of wider workshops for participating actors from across the organizations and fields are organized especially by the learning networks (see above).

The collaboration in the Innoworkshops is based on three principles. Within these principles different development methods can be utilised, and the structure and theme of a workshop is always tailored to the needs of the participants. The Innoworkshop principles are as follows:

- **Involvement of the relevant actors:** In an Innoworkshop the relevant actor-groups in relation to the object of development should be involved, such as clients/citizens, practitioners, organizational actors and decision-makers. They should participate in ensuring that the development and evaluation of a solution is based on the needs and views of the relevant actors. Since a local solution/practice that is being developed is constituted and enacted by various actors, the representatives of these actor groups should also be co-designing and co-developing it.
- **Collaboration on a shared object of development:** Collaboration on a shared object of development is something more than the participation of different actors and stakeholders and their interaction and dialogue. It is a stronger commitment and co-working on a shared object of activity. In this way, inter-professional co-development emerges and the expertise of various actors contributes to the development of the shared object.
- **Equality of viewpoints:** In the collaboration taking place in an Innoworkshop, the voices, viewpoints and needs of the different participants should be equally listened to and negotiated. The views of the different participants together create a manifold and deeper understanding of the object of development. The collaboration aims at sharing knowledge and skills among the participants through a mutual dialogue and interaction.

During the development of Innovillage over a hundred Innoworkshops were organized by the staff at Innovillage, the learning networks and Innotutors participating in the Innotutor training (see below). However, there is no information concerning the extent that local developers in the field have carried out Innoworkshops in their organizations and development communities. The participants in the workshops of the learning networks have been above all with professionals, practitioners and different kinds of project developers. Managers, decision-makers and citizens/clients have been a minority in the workshops. Even if plenty of workshops have been actively organized, they have not focused diversely on the different development tasks of the innovation model of Innovillage. Rather, they have focused mainly on two tasks: brainstorming and designing new solutions and modelling the solutions already developed. The developers have not yet fully realized the different possibilities of Innoworkshops to perform an evaluation.

Events



Innovillage arranges one annual event of its own called Innomarket. In addition to this, it organizes all sorts of activities, such as seminars, Innoworkshops, and exhibitions in the other regular events of the welfare and health field in Finland. The main goal has been to offer a meeting point for the developers (peers), a space where the ideas, practices and models can be discussed, marketed and scaled-up.

Events have given Innovillage a way to deliver its message across the field and meet potential and actual users of the tools of Innovillage. One of the main agendas has been to concretise the idea of Innovillage; that is, to lay out models and practices for the use of public service providers and developers, non-governmental organizations and decision-makers. Furthermore, the aim has been to capture and strengthen the power that lies in existing and emerging networks. These include the learning networks and the Innotutor network (see below), which are co-ordinated by the National Institute for Health and Welfare. These networks carry the message of Innovillage as they expand and blossom. There have been good reasons to use ‘village-like’ associations when designing the exhibition stands, such as a birch-like brochure holder, an old-fashioned washing machine, as well as a real clothes line where the model and practice sheets have been hung on the line. In short, the aim has been to create a pleasant meeting point for people, like one of those old-time milk collection platforms in Finland, where news and rumours used to be exchanged. All this has been done to enhance openness and the spirit of curiosity, which are essential when using Innovillage. In addition to the exhibition stand as a meeting point at events, Innovillage has been able to include various Innoworkshops, speeches and lectures into actual seminar programmes.

Before the web service of Innovillage was up and running, people were asked to give us clues about ‘good models and practices’ they knew to exist. The clues were written down at the stand and hung visibly from the clothes line. After the events, all the cases were tracked down, and Innovillage published a blog series about them. In total, over 70 models and practices were presented on the blog during 2011–2012. During the spring 2013, Innovillage published an open call for non-profit organisations willing to present their service innovations at the 8th Global Conference on Health Promotion (8GCHP). The conference took place in Helsinki from 10 to 14 June 2013. It was co-organized by the World Health Organization (WHO) and the Ministry of Social Affairs and Health of Finland (MSAH). NGOs translated their information into enactment models which were then presented in a digital gallery. Furthermore, the stand was staffed by NGO workers. According to the feedback, NGOs found it enlightening to collaborate in this way. This is, once again, one means to spread knowledge, models and practices across organisations. Moreover, this challenged the tradition of NGOs each having separate stands. Briefly, we managed to strengthen the common voice by bringing all contents under Innovillage.

Innovillage’s own annual event, Innomarket, has played a key role in providing an opportunity to try out crowdsourcing methods. The networks growing around Innovillage have been a spur to try out other new-media innovations. Innomarket is a free-of-charge one-day seminar open to all health and welfare professionals, experts, managers, and decision-makers in municipalities, non-profit organisations and the private sector.

Crowdsourcing methods were tried in 2012 for the first time. In May 2012, Innovillage initiated a search for ideas and dreams, as well as actual session ideas, to be implemented at Innomarket in November. We received 6 applications, in which real session ideas were to be presented. Two sessions were chosen for the final implementation. In total, about a fifth of the seminar programme was produced using session ideas gathered through crowdsourcing methods. We, the workers at Innovillage, decided to take part in the

planning sessions, a decision which in hindsight was unwise. We were regarded as people in charge, which impeded free discussion, the exchange of ideas and a division of responsibilities. It also required quite a lot of work to process the provided session ideas further, as no particular details on implementation were required in the application form.

The search was repeated in March–April 2013, though this time we were only looking for actual session ideas. We received 15 applications altogether, of which nine were chosen for implementation. In order to apply, one had to be able to write a short description of the session and also to give some details on the possible practical arrangements. Only traveling expenses and lunches were covered for people who carried out the sessions in the premises. This time we did not take part in the planning sessions unless we were invited to them. Instead, we gave comments and ideas by phone or email. In 2013, half of the seminar programme consisted of session material prepared in this way. In order to gather further ideas for the event, we created an open Google Drive document that anyone could edit. We also offered a free networking area for people at the venue.

The experiences in crowdsourcing have been encouraging. The aim has been to get to a situation where we can genuinely share the responsibility for creating Innomarket. We feel that we have taken a step closer to that goal.

Innotutor training



Innovillage and Verutum Oy (a private company) organize tutor training for people who are included in development projects and activities in the welfare and health field. The training leads to a diploma in product development. The training was started in 2011 and five student groups, nearly 100 students, had graduated by the beginning of 2013.

The training focuses on open co-development in the public sector and non-governmental organizations. There is no tuition fee and the education lasts for about 18 months. The students are responsible for an individual development project during the training.

The tutor training is apprenticeship-type training for acquiring a specialist vocational qualification in product development, as well as the skills necessary to serve as an Innotutor. It provides the basics in project development, project management and project control, as well as the skills needed to make use of the Innovillage innovation model and tools. The goals of the training are to train students in co-development, to promote the networking of actors, and to promote a new kind of development culture. The training supports collaborative learning, while the development methods practiced in the training are new kinds of co-development methods, such as service design methods. The ethos in the training has been to practice the new tools and methods as soon as possible and to learn together.

The tutor training was co-evaluated in 2012–2013 (Heikkinen & Koivisto 2013). The aim of the evaluation was to produce multi-voiced evaluation data to help in the further development of the training. The evaluation focused on the enactment of the training and on the achievement of the goals set out for the training, i.e. in what sense are the participants able to take on the training content and to apply in their development work the skills they have acquired during the training.

The structure of the training was considered to be good and the participants managed to combine the training with full-time work. The teachers were considered to be inspiring, and the participants liked the interactive way of learning. Some parts of the training seemed unclear to the trainees. The web-based tools of Innovillage were under construction during the training of the first five groups, and the trainees did not get a perfectly clear idea of how to use them. The role of the Innotutor was also felt to be a bit unclear to some of the trainees. Most of the trainees that were interviewed had had some experience of using user-

oriented methods before the training. They thought that the training had strengthened the idea that this is a fruitful way of working.

Innovillage and Verutum Oy have been developing the tutor training further based on the results of the evaluation. Information concerning the training has been made clearer, the examination has been set up so that it can be performed in a smoother way, and the different parts of the training have been set up to be more coherent with each other. Following the evaluation and further development of the training, two new student groups started their studies in the autumn of 2013.

Further steps for Innovillage

Innovillage has during its short history generated a multitude of co-development activities in the welfare and health field in Finland. Innovillage is a start for a new kind of development culture in the field aimed at enabling and enhancing co-development with the aid of several web-based and face-to-face tools. The launching of Innovillage has generated huge enthusiasm among developers in the field.

The innovation model of Innovillage and its three iterative sections seem to give a workable framework for everyday innovation practices. However, it should not be understood too strictly in the sense that every development task of the model should be performed in every development process. And there are also other development tasks in the innovation activity that are not included in the model. Moreover, the model should certainly not be understood as linear, which has sometimes been the case. Developers can easily fall into the pattern of following the model task by task, which is not the idea. As with any model, the innovation model is translated into practice and tailored by taking into account the local development needs and conditions.

Developers have encountered the basic ideas of the innovation model – such as socio-materiality, relationality, generativity, enactment, and generalised model – in very different ways. On the one hand, there are developers who have strongly adopted the traditional conception of science and development as a linear, rational and objective endeavour and who argue for the strict evidence-based practice movement that bases its studies on randomized controlled trials and who perhaps do not appreciate the role or value of such a co-created and innovative development culture. On the other hand, there are developers who seem to think very much in the same way as the innovation model of Innovillage.

The utilisation of Innovillage in development activities during its first years can be characterized as a period of transition in the development culture. Developers have started to operate through the web-service of Innovillage, though in much the same way as they did earlier without a web-based environment. There are steps to take so that the development activities would encompass and apply the sections and tasks as defined in the innovation model. The mobilisation and involvement of the key actors in the development activity seems to be a difficult task, which the developers have been conscious of for a long time, but where progress has been achieved only gradually. There is no lack of participatory methods, but to translate them into practice is more difficult. Another insurmountable task is the evaluation of solutions and practices on a site. There are a plethora of evaluation methods that have been developed nowadays to involve the different actors of development in the evaluation. A number of developers still think that someone, an evaluator outside the development community, should perform the evaluation or that there is a kind of order of evaluation methods, and the best method is naturally a randomized controlled trial. On the other hand, the projects often end before the evaluation of the developed practice has been performed.

One key obstacle for the involvement and co-development practices is the organizing of the development activities into projects, which are usually far away from everyday practices. This kind of development activity is shaped especially by the funding system for innovation activity in Finland. In these kinds of projects, it is usually difficult to involve the clients/citizens and the other relevant actors. Then the project developers typically develop the practices among themselves and the solutions and practices are developed as a ready-made package, and because of that they are difficult to translate into practice, meaning they are unlikely to work very well. Further, evaluation is often restricted to the voices of a few clients that are gathered, for example, by surveys and only during the testing period. According to the Innovillage model, the development activities should rather be built into everyday practices. Then the development is continuous and the practices and solutions are always developed, tailored and evaluated alongside the actual clients and other actors.

Innovillage is also open to other sectors, such as education, culture, and leisure time, but thus far the other sectors have made use of Innovillage resources only occasionally. One of the key tasks of Innovillage in the near future is to broaden the use of the Innovillage-like development culture to reach other sectors. As it is, different sectors develop their solutions and models too much in silos, though often the common

element in a good solution at a particular site is the co-development and collaboration between different actors and practitioners across sectors and organizations.

Innovillage also began as a separate project within a specific field, though it has, at least to some extent, succeeded in involving some of the different actor groups from the founder organizations and beyond in the development activities. Now Innovillage has started a phase where the project organization is no longer the sole function of the founder organizations. There is a lot of work to scale-up the Innovillage development culture and to further develop its tools and practices step by step.

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