

Mental Models

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The Fifth Discipline

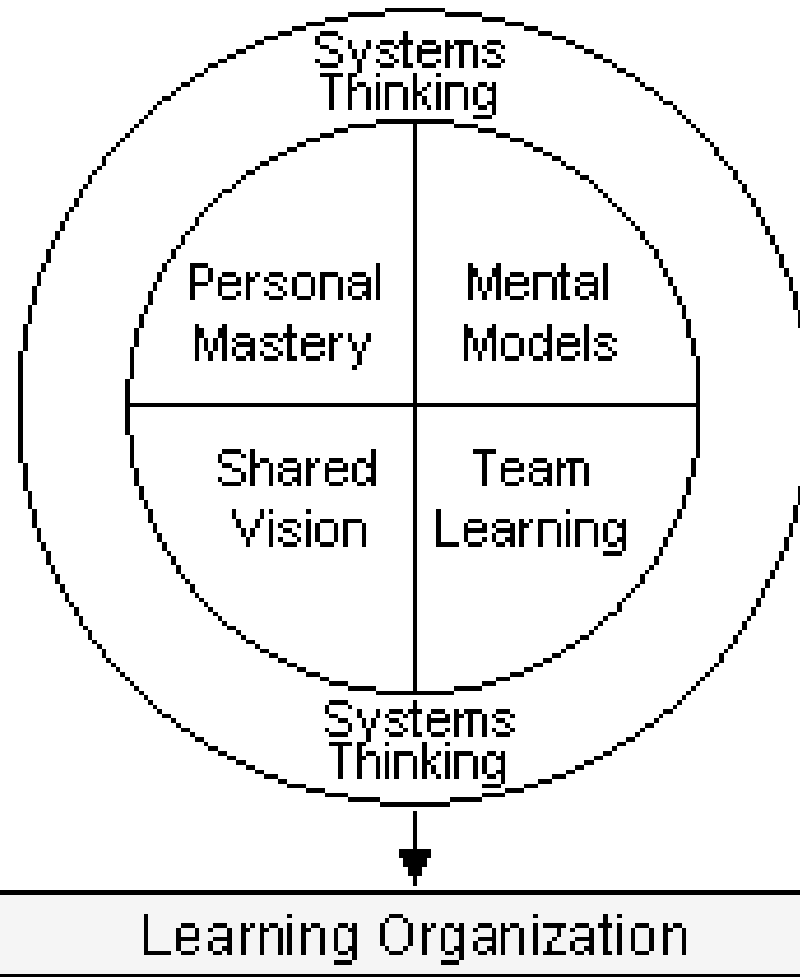
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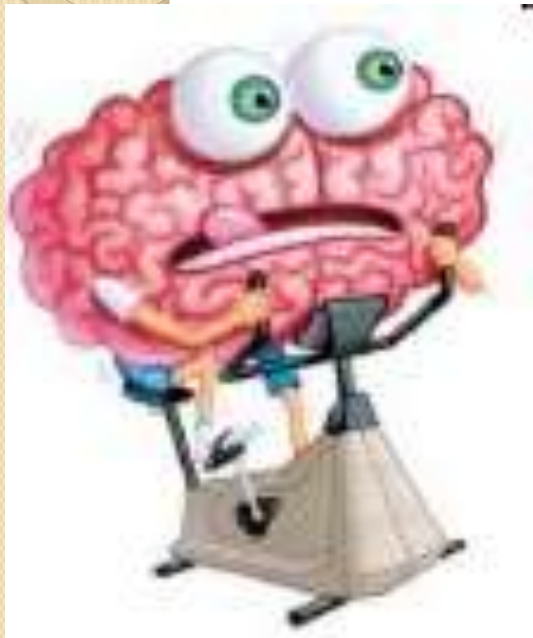
Mental Models

Mental models are deeply ingrained assumptions, generalizations, or even pictures or images that influence how we understand the world and how we take action. Very often, we are not consciously aware of our mental models or the effects they have on our behavior.

Fifth Discipline (Senge)



Mental Models



- deeply ingrained assumptions and generalizations
- honest and critical scrutiny of entrenched mental models
- transcend mental models in order for change to take place

The Core Disciplines : Mental Models

- Semi-permanent tacit "maps" of the world which people hold in their long-term memory, and the short-term perceptions which people build up as part of their everyday reasoning process
- Deeply ingrained assumptions, generalizations, or mental images that influence how we understand the world

The Core Disciplines

- When you apply for jobs, who are you competing against?
- When you are a Manager...
 - What tasks will you be doing?
 - What knowledge will you need?
 - What skills will you be using?
 - What is the standard of job performance your employer will expect of you?
 - What is the standard of job performance you will expect of yourself?

What's the Problem?

- Many of the best ideas never get put into practice
 - Why???
 - Because they conflict with deeply held internal images of how the world works
 - These images limit us to familiar ways of thinking and acting
- We keep making the same mistakes over and over again--we're not learning

Why are MMs so powerful in affecting what we do?

- They affect what we see
 - They become the cognitive lense through which we view the world
 - Two people with different MMs can see the same situation and describe it differently
 - Big three auto-makers believed Americans bought cars on the basis of styling
 - Today outdated MMs dominate the service industries, which still provide mediocre quality in the name of controlling costs

So the Problem arises when our mental model is wrong...RIGHT?

- *WRONG!!!*
- The problem with mental models is that they are tacit--below the level of awareness
- We don't realize that our behavior is being dictated by a certain mental model that we have bought into deeply

Overcoming the basic diseases of the hierarchy

- For hierarchical organizations the dogma is “manage, organize, control”
- For learning organizations, the dogma is vision, values, and MMs
- Healthy firms are ones that bring people together to develop the best possible MMs for facing any situation at hand

Left-Hand Column Analysis

- The left-hand column details what you were thinking
- The right-hand column details what was actually said
- Sample case: Jim is an R&D project manager. Jim assumes his supervisor Todd feels harshly about him. Jim just had a conversation with Todd. Jim writes out the conversation with Todd in the right-hand column and his thoughts at the time in the left.

- We're two months late and I don't think he knew. I was hoping we could catch up
- I need to make it clear that I'm willing to take responsibility for this, but I don't want to volunteer for more work
- He never offers this help in the planning stages, when I could really use it. It's too late now to bring that up.
- The changes he keeps making are the real reason we're late. He must have another one.
- It's a shame I can't tell him that he's the cause of the delays. If I can hold him off two more weeks, I think we'll be ready.
- TODD: Jim, I'd like to come down there next week. We're a few weeks behind, and I think we might all benefit from a meeting at your office.
- ME: I've been very concerned about these deadlines. As you know, we've had some tough luck here, and we're working around the clock. But of course, we'll squeeze in a meeting at your convenience.
- TODD: Well, it occurred to me that we could use better coordination. There are some ways I could help.
- ME: Well, I'm happy to talk through any changes you have in mind.
- TODD: I don't have anything specific in mind

Hanover's Credo

- The effectiveness of a leader is related to the continual improvement of the leader's mental models
- Don't impose a favored mental model on people
- Self-concluding decisions result in deeper convictions and more effective implementation
- Better mental models enable owners to adjust to change in environment or circumstance
- Internal board members rarely need to make direct decisions

Hanover's Credo, Continued


- Multiple mental models bring multiple perspectives
- Groups add dynamics and knowledge beyond what one person can do alone
- The goal is not congruency among the group
- When the process works it leads to congruency
- The leaders' worth is measured by their contribution to others' MMs

Reflection and Inquiry Skills: Managing Mental Models at Personal and Interpersonal Levels

- Reflection skills concern becoming more aware of how we form our mental models and the ways they influence our actions
- Inquiry skills concern how we operate in face-to-face interactions with others

Reflection Skills

- Recognize leaps of abstraction
- Miller's 7 plus/minus 2 rule
- Untested models of customer behavior are often leaps of abstraction
- To surface leaps of abstraction, ask “What do I believe about how the world works?”
- Then ask, “Is this generalization inaccurate or misleading?”

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- As a Human Resources Manager, what will you bring to the table?
 - How should the job performance of someone in this job be evaluated?
 - How much should this job pay?
 - Is this training program working?
 - Does this test discriminate?
 - Does this test predict job performance?

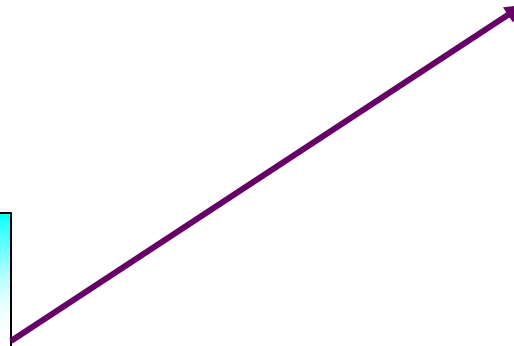
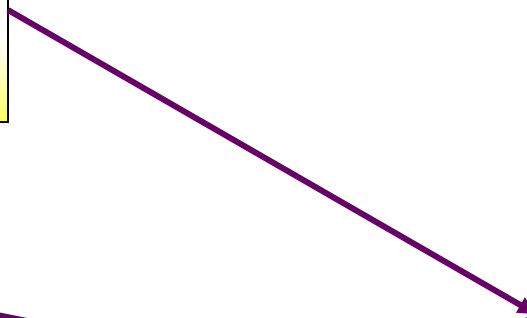
Leaps of Abstraction

Left-Hand Column

**Balancing Inquiry
and Advocacy**

**Espoused Theory
versus Theory-in-Use**

**Mental
Models**



Cornerstones of a Learning Organisation

Aspiration: Individual
& Collective

Personal Mastery

Shared Vision



Mental Models

Systems
Thinking

Team Learning

Understanding
Complexity & Change

Collaboration



What are self-limiting mental models?
How do they influence our thinking processes?

Self-limiting mental models are assumptions or beliefs that “define” what is “easy to do, “possible”, “realistic” or “achievable” and restrict what people aspire for.

How do we usually define “health problems”?

1. “Deviation from a norm” or “indicator chasing”
2. Existing “solutions” in tool box
 - Ideology
 - Training
3. Knee-jerk “lack of resources”

Deviation from the “norm”

1. Who determines the “norm”? MDG?
2. What if “norm” is the source of the problem?
3. Restoration of “norm” is system maintenance not improvement

Use existing solutions - When we have a hammer, everything looks like a nail!

1. Trainer - everything is a training problem.
2. Manager - everything is a management problem.
3. Community mobilizer - everything is a community mobilization problem.
4. Medical doctor - everything is a medical problem.

Lack of resources

1. Resources are universal constraints - when will we ever have enough?
2. Are we using existing resources effectively and efficiently?
3. How resourceful are we?

What is an alternative way to defining problems?

Define problems in terms of why there is a difference between what we want (shared vision) and what is happening (current situation) and how to bridge this difference.

Our choices in defining health problems

1. Deviation from a norm
2. Tools in our tool box
3. “Lack resources”
4. Ask why is there a difference between our shared vision and the current situation?
5. Other ways?



Approach requires two things

1. We need to know clearly what we want.
2. We need to know clearly what is happening now.

The “war” on HIV/AIDS

It took more than 20 years since HIV/AIDS appeared before Kofi Anan declared “war” on HIV/AIDSs in Abuja, Nigeria. He declared that the UN will raise \$10 billion a year and will mobilize all the resources of the UN system to fight HIV/AIDS.

How do health strategy concepts compare with military concepts?

Grand strategy



Strategic level



Operational level



Tactical level

Shared vision

Policy

Program strategy

Campaign strategy