



GOVCOMMS PODCAST

EP#139 CLARITY OVER
CLEVERNESS

- WITH BEN ROBERTS

TRANSCRIPT

TRANSCRIPT

Introduction:

Welcome to the GovComms Podcast, bringing you the latest insights and innovations from experts and thought leaders around the globe in government communication.

Tiffany Petre:

We brought people together from different perspectives, and we purposely brought people into the conversation early on that weren't obesity experts, but haven't been fighting the fight for 30 years. Some of them have. But they were experts in social change. They were experts in communication, system change and things like that. We also learned from other areas like tobacco control, gun control, alcohol. What did they do in terms of social movement to get more action and change?

Introduction:

Now, here is your host, David Pembroke.

David Pembroke:

Hello everyone, and welcome back to the Collective Engagement for Social Purpose podcast series, which is a collaboration between GovComms and the University of Adelaide's Dr. Taylor Willmott and Professor Jodie Conduit. Now, what this is all about, this podcast series, is really following the Australian Research Council-funded Collective Engagement for Social Purpose project, which both Dr. Willmott and Professor Conduit are running there at the University of Adelaide. Now, if you haven't as yet had the opportunity to listen to episodes one and two, I would encourage you to go back and have a listen to those before we jump into this particular episode because that will help to set the context. But in summary, what we've discussed really so far is what makes a purpose shared and how do you go about creating shared purpose? We've spoken about what good looks like in terms of shared purposes, including some of the benefits that can be realised from having that shared purpose.

In today's episode, we're joined by a very special guest, Tiffany Petre. Now, Tiffany is the director of the Obesity Collective, which is a national platform for committed individuals and organisations from across the community who are taking on the obesity challenge together, but they're taking it on from a whole-of-society and systems perspective. Now, Tiffany has worked in a range of positions over the years, both as a consultant at PricewaterhouseCoopers, both in Australia and in Switzerland, and she's also worked in public, private, and with NGO clients with a particular focus on obesity, chronic diseases, cancer, and ageing. She has both a bachelor's degree in nutritional science and also an MBA. Now, Tiffany knows firsthand what it takes to build a collective from the ground up. And as I say, we're delighted to have her here to tell us all about the Obesity Collective, challenges, opportunities, trials, tribulations. I'm sure she can tell us a lot of great stories about tackling this wicked complex problem.

Tiffany and Taylor, thank you so much for joining us once again on the Collective Engagement for Social Purpose podcast series. Thanks very much.

Tiffany Petre:

Thanks for having me, David.

Dr. Taylor Willmott:

Likewise.

David Pembroke:

Listen, Tiffany, we might start with you as we sort of reach to understand about the Obesity Collective, but perhaps to rewind the tape a little bit and tell us a little bit about you and how is it that you found your way into this sort of really important area of public health?

Tiffany Petre:

Sure. Before I got started on this, I had no idea what collective impact was and why it was so important, so I've kind of fallen into this role, but I'll give you a bit of background on me. I've always been fascinated with how food affects the body and our physiology, and so I changed my degree in college to nutritional sciences. I was going to be a dietician. I tried research, I tried all kinds of different areas and lots of false starts career-wise.

But after I did an MBA and landed in consulting, which looked at kind of systems-level challenges and lots of collaboration, I found a place where that was really interesting. I got to work with lots of different complex challenges and amazing people, and that was my space. I worked in consulting for eight years in total, four years in Switzerland, four years here, where I was in the PwC health economics and policy team. I loved the client work, I loved my team. People were really passionate about trying to get the best out of the health system for the community.

Obesity Australia, the charity, was one of my clients. And we did an economic report on the personal and economic cost of obesity. We kind of posed the naive question of these are huge costs to society, the health system, the individual productivity, and why aren't we really doing more about it? And we held some round-table events. It really reignited for me something that I had learned in my undergraduate studies and brought that back to the front of something that was really interesting for me. But it was something that was really affecting lots of people's health and wellbeing, but we didn't really have a great strategic approach to that nationally or even in the states and territories at the time.

So, we held a bunch of round-table events and asked a range of stakeholders, government, lived experience, business, other NGO allies, and again, this was all just bringing people together and having ideas opposed to any structured organisation at the time and asked, "Why aren't we doing more about something that is so important for Australians' quality of life and health and wellbeing?" We got loads of answers as to why this is too difficult and maybe we should focus on diabetes prevention and obesity is just misunderstood. But we realised that there were a lot of really passionate people in this space. There wasn't a united voice, and that was part of the challenge. And there were kind of three areas that we identified in bringing lots of stakeholders together and having a conversation openly, kind of brainstorming.

One is the narrative around obesity. It's really misunderstood. People don't understand the science. They don't understand the many environmental drivers. We've basically set people up to fail in the environments that we've created and then blamed them for it. They don't understand the many biological drivers. For example, many healthcare professionals or the everyday person in Australia wouldn't know that when you lose a lot of weight, your hunger hormones increase and your metabolism decreases, and that fights people's ability to maintain weight loss or lose weight. That's just one example of the biology that influences our weight. There's hundreds of things that influence our weight, including sleep, and they're finding that environmental plastics may affect it. So, it's been really simplified down to eat less, walk more, it's just a personal choice, which has been harmful, scientifically unfair, and actually perpetuates obesity because that stigma then drives further unhealthy behaviours.

We realised that the way we talk about obesity, the culture that we have around this topic is a barrier to change and it's harmful and it drives ineffective action. The complexity of obesity being a systems challenge means there's no silver bullets, no one organisation or even sector can take this on alone. Even if the government did everything we asked it to do, we'd still need to have community engagement and understanding and action.

And then the final thing is people get really hung up on one, two small things like sugar tax and bariatric surgery, when those are important things to consider, but they're only pieces of a much larger puzzle, much more complex.

Long story short, David, we had conversations about all those things. We came to the idea that, okay, to actually take on these really complex barriers that are keeping us from having tangible, valuable action, we need to work together. We need to work across silos in the community. We need to have a shared vision and sing from the same song sheet. And as we were developing that over co-design over a few years, I thought that that was an amazing opportunity to learn more and advance my career in a different way.

David Pembroke:

Listen, I'm really interested to come back to just exactly how you worked through bringing this coalition and collective together. But if I might ask you, Dr. Willmott, in terms of that setup as a sort of common challenge of bringing diverse groups together, understanding points of view, people working in silos, the narrative not being shared, in your research around collective impact and the collective engagement for social purpose, is what Tiffany's just described fairly typical across the board?

Dr. Taylor Willmott:

Yeah, absolutely. The complexity of some of the issues that are being faced, particularly in public health, are characteristic of problems that do not have one solution, no silver bullet, like Tiffany mentioned, and it has a lot of disparate agendas. Everyone has their only invested interest in the problem, and that just makes solving a problem so much more difficult. I think if we look outside of the social, public health, environmental change space, problems can be solved much easier. They're more linear. But if we're looking in those complex spaces that Tiffany has so much experience within, you just can't approach them with the same traditional problem-solving techniques. And we've seen that time and time again through the interviews as part of this project and understanding how you can bring diverse groups of people together to focus on a shared purpose and a common vision. So, really keen to hear a little bit more about Tiffany's story today, and particularly how they've navigated that complexity as well.

David Pembroke:

Tiffany, that's a great sort of launching-off point of you did talk about the round tables, the commitment to co-design, I'm sure putting the patients at the centre of everything so that everyone's got that alignment. But perhaps take us through that process. Was it difficult in the beginning to bring people together because with complex social problems comes passion and people believe they have the answer and they know and they've dedicated their lives to it, so often with passion comes inertia and it's hard to bring people along on the journey. So, just how difficult was it for you to build that alignment around that purpose?

Tiffany Petre:

Yeah, thanks, David. It was not straightforward. Definitely. And people are very passionate or you also get the kind of negative perspective of, "We've tried everything and nothing works." So, there are a few things that we did along the way, just kind of intuitively.

Again, I only really learned about collective impact structure and theory after we started to set one up, which was great. We kind of were mostly on the right track, but there were a few things that we did. We brought people together from different perspectives and we purposely brought people into the conversation early on that weren't obesity experts but haven't been fighting the fight for 30 years. Some of them have. But they were experts in social change. They were experts in communication, systems change and things like that. We also learned from other areas like tobacco control, gun control, alcohol. What do they do in terms of social movement to get more action and change?

We recognised the hard work that's been done. I think because everyone has a little bit their space and when we're talking about the entire system basically of the health sector and our built environments, there's a lot of key players in that space and Australia actually really punches above its weight in terms of global experts in these areas. And we really need to respect and acknowledge all of the work that has been done and how this feeds into it and how it's not trying to recreate the wheel, but how it is different. How us all coming together is different and it's not cannibalising the work or taking away from what people are doing. It's about bringing it together, and excuse the consulting word, but having a bit of synergy around it.

I think it's good to recognise that there will always be hotspots where you'll never have full agreement. And it's good to be open and honest about those upfront and also identify the hotspots where you'll always have agreement. For example, people in the collective are always passionate about changing the narrative, reducing stigma, including lived experience, raising awareness of the science and the many drivers of obesity, collaboratively working together, getting tangible action. These are things that everyone can back and be behind and I can represent.

And so when I'm talking about the collective, I also really want to recognise there's been leaders that have contributed hundreds of hours of pro bono support, the kind of leaders that you would pay lots of money to have them in the room. So when I'm talking here today, I'm representing a much broader group of really amazing, passionate people that think this is important and contribute their time pro bono. Over the last four or five years, it'd be hundreds and hundreds of hours to do that. So, you really have to find something, in order to get that kind of contribution from game-changing people, you need to have a vision that is shared that people can get behind.

I think one of the things we did as well early on is we brought ex-politicians in the room and said, "Why haven't you done more about obesity in the past?" And they said, "That's because you didn't have a united voice. You came to us with different stories and different things, and it wasn't politically safe to take action because if we did one action over here, we'd be attacked by the other side. And it wasn't a consistent narrative about what the challenges and what needs to be done." So, we were able to articulate clearly the impact of not working together. Of not working together meant it was too hard and tangible action wasn't going to happen. To be honest with you, it's still difficult. People are still in the silos, but over years, the trust that's been built across the different leaders and key players and the successes that we've had up until now really helps us to work across those silos.

David Pembroke:

Just in terms of getting people to surrender tightly-held views or at least loosen their grip on their tightly-held views and opinions. How did you go about that?

Tiffany Petre:

That wasn't an overnight thing, David, and it's still something that we're actively, much less than early days, because we've created a culture of sorts of the way that we discuss ideas, the way we deal with some of those concepts that we know we'll never agree on, we just park them or we try to deal with them in a special way. We handle them carefully, but we early on put together a set of principles that we thought would be valuable in bringing groups together to align across this topic.

Those principles, I still use to this day. Part of those principles is that for the better of the overarching narrative, you also have to consider your own interests and be reasonable about that. In some cases, leave them at the door. The principles, they might sound quite motherhood statement-like, they might sound yeah, yeah, tick-a-box values, but actually they've been very important for the work that we do because you have to sign up for the principles to become a leader and a member of the collective. When things don't go tight, we can point back to the principles and say, "Well, this is how we agreed to work together."

David Pembroke:

And so then in terms of other governance that you've had to put in place around the collective, in addition to the principles, what are some of the other governance mechanisms that you've put in place which has helped to encourage people to work together to create this collective impact?

Tiffany Petre:

Yeah. Our collective governance has evolved over time, and I think we can say everything about the collective has evolved every year based on what we've learned and what the opportunity is and who's involved. So, it's never a static thing, I just want to emphasise that. We're always open to going, "Oh, this is how we should pivot," or, "This is how we should reframe what we're about," or, "This is the way that we should engage." Each year, we're looking at that in a critical way, and bringing new people to the table to help us think about how we can get more impact. We have very limited funding, and as I said, 95% of what we do is all pro bono work, so how can we get the most value for that?

Right now, we have evolved into, so the charity entity is Obesity Australia, and that has a very impressive board and always has. So, the charity manages the overarching, "Are we doing the things we say we're meant to be doing? Are we doing everything legally? Spending the funding the way we say we're going to do?" These kinds of things.

And then I have a group of advisors that we meet on a monthly basis, and this is a really broad group of about 50 people, and it's on our website. We've revamped our website and they're very inspirational community leaders, and you can read more about each of them, but they come together on a monthly basis where we enact the strategy or we talk about current opportunities and challenges and what we need to do for the next month. And then probably about once every year or every 18 months, we bring the whole group together and allies to do a strategy refresh or what needs to happen in the next 18 months. So, that's how it works.

David Pembroke:

Right. In terms then of getting the message out to attract these high-quality people, to encourage them to invest their knowledge and their time and their skills, how have you gone about raising awareness about the Obesity Collective?

Tiffany Petre:

It's been really organic, David, and for the most part, it's been word-of-mouth early days. We did stumble into a couple challenges in that we just had an idea, we were working with it, and this is all very... Just give you an idea, this was a startup idea four years ago and now we're the peak body. So, there's been a huge evolution in that time. But in the first year, it was just the people that were involved in the co-design who were really passionate about it, linking us to different people who would also be passionate about it and would be in line with what we're trying to achieve. That was early days.

Now, the tricky bit about that is that you later come across somebody that should have probably been involved but wasn't because we've grown organically, and you have to deal with a little bit of people being annoyed by that, but when you say, "Sorry, this is how it's evolved, and isn't it great that we believe the same things?" Then they kind of jump on board normally. But there were a few instances of people being annoyed that they hadn't been part of the development. In theory, they should have. We just didn't know about them.

After that stage, it's been a mix of, again, further word-of-mouth and tapping people on the shoulder that we know. And then also, we now have a lot more social media, we have a lot more media presence, and amazing people coming out of the woodwork, if you will, coming forward and saying, "I'm really passionate about this. This is my experience. How can I be involved?" I get emails like that on a weekly basis. So, if there are people out there that are sitting in the middle of a complex challenge, there are really amazing people in Australia

that want to make a difference. They want to volunteer their time, they want to be part of a social movement for positive change. And the tricky bit is finding out how you can make best use of that positive energy and goodwill.

David Pembroke:

But is it almost as simple as also asking if people would like to be involved? Because often, there's that propensity to presume, "Oh, they're so busy, they wouldn't have the time, and so I'm not even going to bother to ask." So, it sounds like you've got yourself to the position where, "Oh, well, I don't want to die wondering. So, I'll ask the question."

Tiffany Petre:

Oh, I definitely have never held back in asking the question. I've probably been a bit cheeky, David, to be honest, and I've been told no many times. But there's actually really incredible people that go, "You know what? This makes sense to me and I've been working in this space," or, "I've been linked to this space in a long time and this is something I'm passionate about." So, as I said, people that normally would have very little time and are very important and very busy, they still contribute. I think this is an important point. They find value in joining a team like this and hearing other people's perspectives, hearing what's going on in different parts of the system, being connected to people that they normally wouldn't be, but are also equally inspiring. That's a value for them.

David Pembroke:

Yeah, indeed, indeed. I want to come back to Dr. Willmott in a moment to give us her reflections on some of the things that you've just said. But before we get to that, you've mentioned a number of times there around the narrative and getting the story straight and having people aligned around the story, and I'm sure the language and the words that you use to describe the different concepts and priorities and other things. Can you take us through that narrative development and what that process has looked like and how easy or difficult was it to find a story that resonates with the right people?

Tiffany Petre:

Oh, that was messy, David, and still is evolving again. It started with talking about the challenges and identifying what the various narratives were out there and how harmful they were and what people were hearing in different parts of the system and really not oversimplifying what was going on. What's interesting is stigma for one person might mean something very different for someone else. So, keeping it very open to what different groups and perspectives think about this. Again, talking about what the aligned areas are. What's high impact? High impact is changing the way that we think and speak about obesity. That includes everything from healthy eating campaigns, websites, clinical support tools, research proposals. We see some research proposals where we're just totally shocked about how the challenge is framed, and that's because people just don't know yet. So, we are working in a huge amount of different ways and different levers in the system. So, that consistently, the narrative around obesity is the complexity, the science, that the stigma is harmful and that actually we need collective action there.

There's also this challenge that people working in this space would say, "Oh, I'm going to do this one little education project and I'm going to solve obesity," which is not helpful. It gets them funding, but it really, it's the oversimplification which drives stigma and also frustration across players. That's just because they want to get their project in the media or they want to get funding when long term, that's really not helpful for the movement.

So, consistently talking about those core components of the complexity of obesity is valuable and sets us up to have better conversations about the action that needs to happen. For example, David, we did a system activity

mapping and there are over 200-something diet websites in Australia and we had medical students volunteering for us, and they are very well-informed and educated. They found it confusing. Could you imagine the everyday Australian trying to navigate all of that because it's all too complex, obesity. So, the solution up until now has been, let's create a diet website, which is not valuable and almost confusing to people. A few very good diet websites are valuable, but not 250.

David Pembroke:

Yeah. Well. And how do you solve that problem though? Because as you say, many well-intentioned people who may not be part of the collective, may not be joined up, wanting to do the right things, being able to, as you say, successfully achieve a grant somewhere and off they go. How do you minimise that sort of tangential activity that is well-intentioned but not particularly effective?

Tiffany Petre:

Yeah, look, we are a small charity, so the idea that we can control everything in the system is not reasonable. And the way that we are trying to enact change is through educating those that are funding research, those that are creating strategies around research, those that are putting in grants for research. Again, we don't want to attack or really necessarily blame people because some of these concepts are quite new in theory for people. Some of the science we've only learned about in the last five, 10 years. So, we're constantly presenting and educating in the media and engaging with... We have hundreds of organisations that we engage with as well. None of this is going to change overnight, but we're chipping away on lots of different fronts.

David Pembroke:

Dr. Willmott, listening to Tiffany there and to tell her story and to describe the journey of the Obesity Collective, what's your reflections on what you've heard as it sits inside the project that you're working on, which is really research and understanding this notion of collective engagement for social purpose?

Dr. Taylor Willmott:

Yeah, just listening, I think it's reinforcing the lessons that we have learned so far throughout the project, which is the importance of having that united voice and developing a shared vision that everyone has skin in the game and interest in giving their time, because as Tiffany said, that you do get value personally but also collectively for the greater good as well.

I think a really interesting point that is perhaps unique to the case of the Obesity Collective is how they have managed to bring people with differences in opinions in terms of how best to approach a problem or how best to invest resources into solving a problem, bring them in a room together and come up with a shared vision and have a set of principles to guide that approach.

The other interesting observation is around the need, not only for political support, but for public support. I think from the research we've done so far, they can both be enablers and detractors to developing a coalition or a collective or group of people working on a social purpose. And for me, that synergy, I guess, between what's happening in the macro space as well as what's happening culturally in terms of community and the public's opinions on issues such as obesity is really critical. If you look at, as Tiffany mentioned, tobacco control, over time, that happened over time, a long period of time, and I think the same is going to happen if not longer for obesity. So, unpacking that, how do we attribute to that cultural change over time and get that public support on top of aligning with the political agenda at the time and being able to identify opportunities to propel social movements forward like the Obesity Collective?

I could go on for a while, David, but I'll stop myself there and hand it back over to you and Tiffany.

David Pembroke:

Okay. Listen, Tiffany, just then, before we look into the future and about where that progress is going to come from over the next five to 10 years, what are perhaps the top three things that you've learnt so far in the establishment and operation of the Obesity Collective?

Tiffany Petre:

Okay. I think one is I think I've learned a lot how much engagement, general open conversation, having space for co-design and brainstorming and working together across silos, how much time and energy that takes, but how critical that is. Without that, it's just a bunch of meetings. To get people to volunteer their time outside their "silos" where they're paid and incentivized, you do need to make sure that you hear them and that they're included and they can see how they're included. And so I've really learned that trust in the core team as well as the trust in each other is absolutely critical.

The energy, that's the second point, I'd say. We have limited resources and as you could probably understand, I have about 500,000 things I could or should be doing. There's always something to do. But taking time to understand people, their perspectives, how they're inspired, how they work, we come together is inspiring and creates energy and passion. Investing in that in a way that makes sense for your movement, I think keeps people engaged and interested and creating the energy, you need to have energy and you need to have culture and trust. And again, those might sound very motherhood statement-y, but I think if I didn't have those, people wouldn't give me the time of day or give each other the time of day. So, investing in the understanding, respecting and connecting with each other is absolutely critical from my perspective.

And having moments across the year. You can't do this all the time, but having moments across the year where you mobilise and you galvanise and you can see action together and you can communicate impact together, whether that be a new report in media and social media. We have World Obesity Day events every year where we have rapid talks. We bring together 17, 18 experts across different areas of country and different perspectives that get five minutes and hundreds of people join that. That reminds everyone what we're about and how we can work together and what a shared voice looks like. So, having throughout the year, these points where you plan for mobilisation and engagement really keeps the energy up.

And then the third point, I'd say, is how valuable it is to include those that are affected. I prefer not to use the word patients, because that's making an assumption, but those that are affected by overweight, obesity, and that could also be someone in your family. But I think, and I've done it, experts do it, they make assumptions about what's right or they make assumptions about what's going on. When we come to realise the reality for different people or include them in the conversation, it's a much more rich, much more tangible conversation and it leads to action that is person-centred and empowered. I think unfortunately, there's some narratives and people that might mean really well in trying to get action, but they treat people with obesity as something over here that needs to be fixed as opposed to including them in the conversation and what needs to change and how that needs to change. Let's be honest, this affects most of the population. So, it's silly not to think that way.

David Pembroke:

Well, they're three very powerful lessons, and clearly you're making very good progress around setting up the foundation for further progress. So, where to from here? How do you get better? How do you improve? How do you make more impact? And how do you make more collective impact in the next, say, five to 10 years? What are some of the key things that are going to have to happen for you to make progress?

Tiffany Petre:

I wish I could snap my finger and the system would be changed, but we know that's not going to happen. Again, we have to be open to continuing to evolve because there's no black-and-white answer around this. And I've really learned about systems change as well as you can have an intention, but you can't have a clear

100 percent plan. And that's how system change works. You can't say for sure I'm going to do this and then the system's going to change. You have to iterate and evolve and learn as you go and continue to involve people that maybe know more about you in a different space.

But if I could have a vision, or we, I'm representing the we, could have a vision for Australia in five to 10 years, it would be a place where people aren't judged for their weight. And that's because people have a better understanding of the science and the many complex drivers of obesity. Honestly, people think I'm crazy when I say stuff like that. But the example that I use that seems to work sometimes is look how far we've come with mental health. Yes, we have a long way to go, but in the last five, 10 years, we've stopped telling people to, "Just cheer up and you'll be fine," to loads of research, employment support, special days, community networks and government initiatives. So, there's loads of stuff happening across the system. So, it's a really great example of how we can shift the system by raising awareness about what's really going on and how it's affecting people's health and wellbeing and how judging and other-ing people is actually more harmful in the long run.

I want that change for obesity and I want the health system to be educated, resourced, funded, to be able to support people that want to manage their health, that's related to weight in a way that's not judgemental and that's just not the case right now. That will require a whole change in the health system. This health system support of social care as well may include really complex things like social determinants, equity, trauma we know has an impact. So, it's much more nuanced than just telling people to eat less and walk more. Our built environments and food environments are designed for health and wellbeing and not just for profit.

And then the final one would be, as a result of all of that, obesity is having much less of an impact on Australians' health and wellbeing and quality of life.

David Pembroke:

Well, that's clear, absolutely clear about the change that you want to see, but change is difficult for people and you've seen changed. How do you make people comfortable with change? How do you get people comfortable with this notion of iteration, evolving, learning, adapting, comfortable with ambiguity, comfortable with a lack of certainty? How are you going to achieve that?

Tiffany Petre:

That's a good question that I maybe would have never directly thought about in that way. I think we do it indirectly by making them uncomfortable with the status quo and how the status quo feeds into harm for people. I think based on my experience, people enjoy that dynamic a bit of, yes, they're a little bit uncomfortable, but it's exciting to work in a different way. It's exciting to collaborate across rigid structures and reporting lines, and they're doing it because they want to. So, I haven't really had to sell it to many people when they get the feeling of the collaboration, when they get involved, and those that don't get it, I guess, there's not much I can do about that.

David Pembroke:

No, indeed. Well, listen, congratulations on the wonderful success that you are having and have had so far with the work that you've done there at the Obesity Collective and best of luck into the future. I think that in terms of clarity, you are clear about exactly what it is you are going to do and how you are going to achieve it, how you're going to achieve that collective impact. Congratulations on your successes so far and all the best into the future.

Tiffany Petre:

Thank you, David. Thanks for having me.

David Pembroke:

And Dr. Willmott, thanks to you also for coming on. Plenty of food for thought there as you go through the Research Council-funded work that you're doing there.

Dr. Taylor Willmott:

Yeah, absolutely. I've wrote down notes and my takeaways around the experience of creating a collective that's focused on such a wicked problem like obesity, and the keywords that I walk away with are around shared vision, the importance of diversity and inclusion, the importance of relationships and investing time in those relationships to strengthen social movements. And then lastly, agility and that ability to be able to adapt to what's happening within a system.

David Pembroke:

Yeah, fascinating stuff. Best of luck with the ongoing research and we look forward to further conversations with important social entrepreneurs like Tiffany Petre there today, telling us all about the work at the Obesity Collective. A few more episodes coming as we continue to follow Dr. Taylor Willmott and Professor Jodie Conduit as they work through their research programme around collective engagement for social purpose. Very grateful for our guest today for coming on. We'll be back in a few weeks' time, but for the moment, it's bye for now.

Outro:

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