Systems Changes A Call for Participation

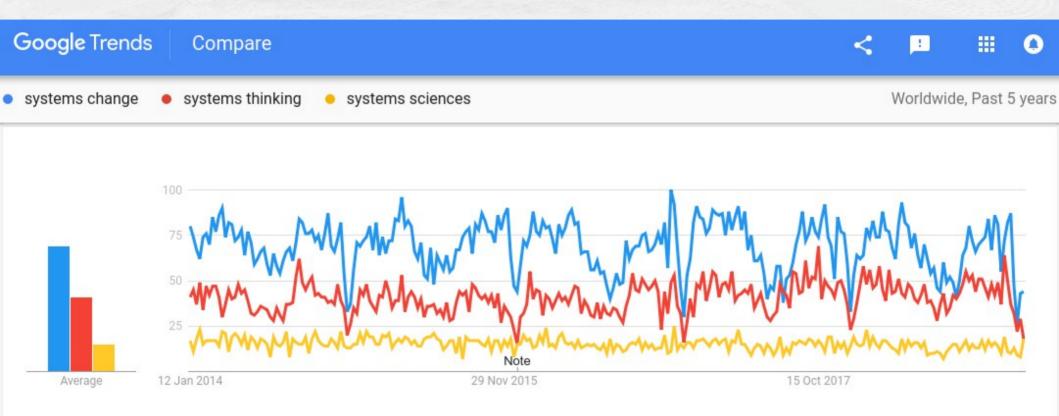
David Ing

http://coevolving.com

Systems Thinking Ontario Toronto, Ontario January 2019

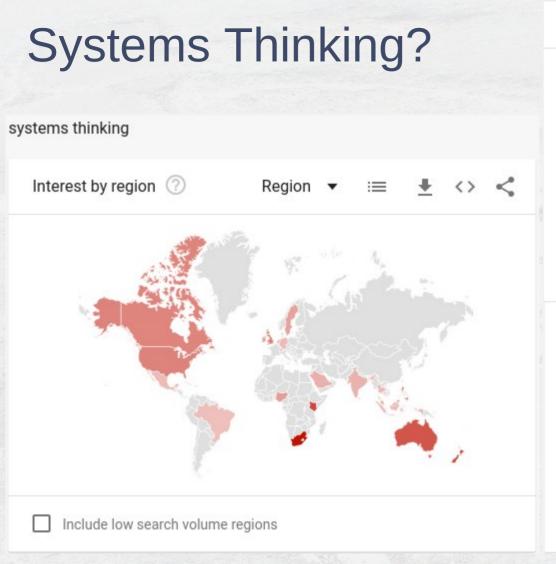


Systems Change > Systems Thinking > Systems Sciences



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Agenda

A. Charter (draft)

B. An Emerging Framework

C. First Steps





1. What?

- Reify methods + theories towards systems changes
 - Appreciating the world as more fluid than unchanging

2. Why?

3. Who?

4. When +where?

5. How?

- Evolve a deeper synthesis of methods, theory + philosophy
 - Deriving from 1970s-1980s
- Advances in 21st century
- Churchman systems approach
- Rittel wicked problems
- Alexander pattern language
- Trist-Pava action learning

- Holons and hierarchy theory
- **Resilience** science
- Ecological anthropology
- Open sourcing



1. What?

2. Why?

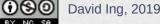
3. Who?

4. When +

5. How?

where?

- Extending wisdom from the systems movement
 - Acknowledge windows closing for intergenerational transfers
 - Regional (or local) cells (or hubs) for greater bandwidth
- Collaboration in a digital-first world
 - Most cited references today are from books of 1970s-1980s
 - Pre-Internet, pre-"world is flat", pre-remix thinking
 - Misinformation from unsourced materials
 - Does the World Wide Web miss Ted Nelson's vision?



1. What?

- Initiated from Toronto, federated to the world
 - Creative Commons CC-BY-SA
 - Systems Thinking Ontario
 - OCADU Strategic Innovation Lab (sLab)
 - Centre for Social Innovation, Climate Ventures
- Both scholarly and practical
 - Open access
 - Multiple perspectives, paradigm interplay
 - Observers, application experiences welcomed

3. Who?

2. Why?

4. When +where?

5. How?





1. What?

- Horizon to 2024 and 2029
 - Starting seriously in 2019, PloP-PURPLSOC-PUARL from 2014
 - Steady accumulation of artifacts
 - Ongoing periodic public status reports

3. Who?

2. Why?

4. When + where?

5. How?

- Milestones with regional and international events
 - 2019 May 22-25: CANSEE Waterloo, Ontario
 - 2019 June 28 July 2: ISSS Corvallis, Oregon
 - 2019 October: PURPSOC Krems, Austria
 - 2019 October 17-19: RSD Chicago, USA



1. What?

- Form initial core group from Systems Thinking Ontaro
- 2. Why? Meeting frequency TBD
 - Possibly alignment with OCADU SFI Major Research Projects?

3. Who?

Open online collaboration

4. When + where?

5. How?

- Federated Wiki? (Ward Cunningham)
- Grav CMS, Markdown, GitHub/GitLab? (Paul Hibbitts)
- PubPub? (MIT)



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Pattern Manual (1967): systems, subsystems, patterns

The environmental pattern language will contain hundreds of subsystems and tens of thousands of individual patterns.

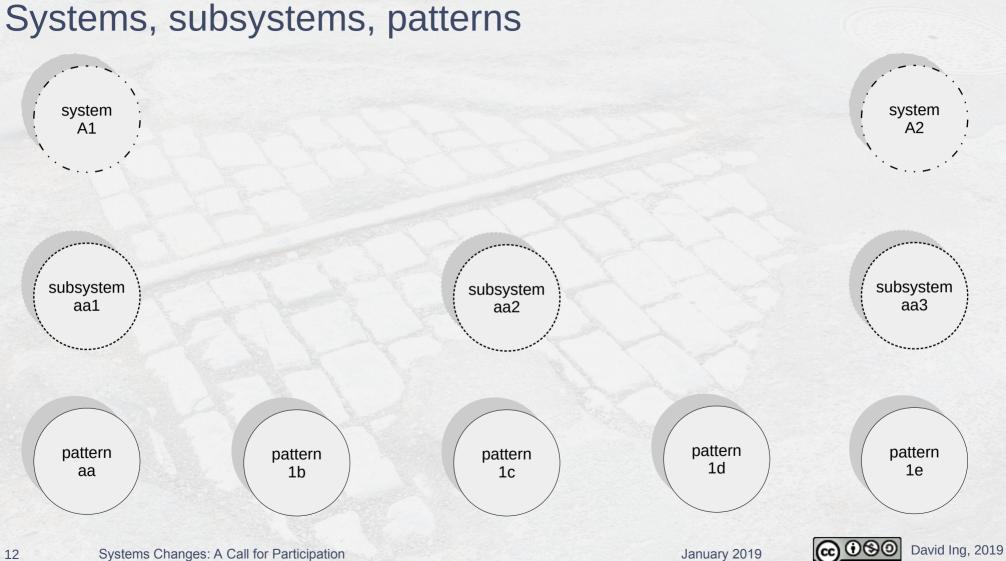
Every conceivable kind of building, every part of every kind of building, and every piece of the larger environment will be specified by one or more subsystems of the environmental pattern language.

In summary: An environmental pattern language is a coordinated body of design solutions capable of generating the complete **physical structure** of a city. The language is designed to grow and improve continuously as a result of criticism and feedback from the field.

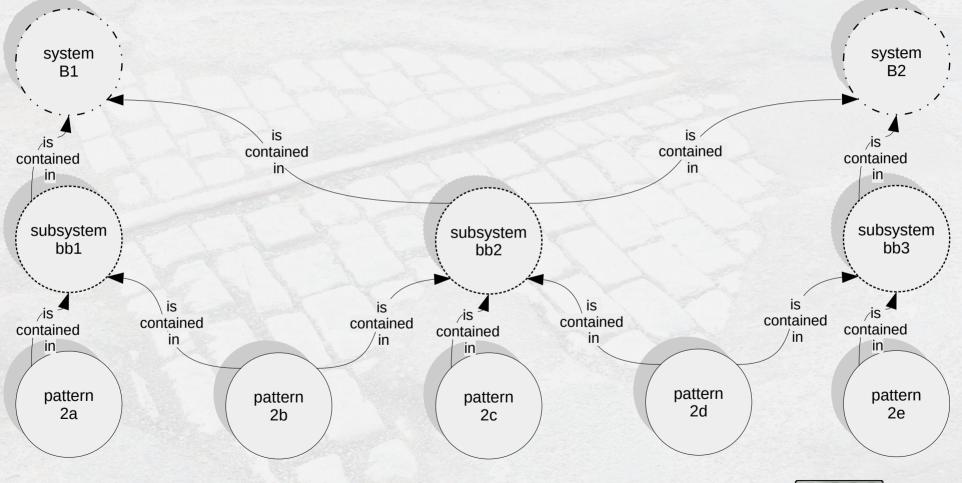
Alexander, Christopher, Sara Ishikawa, and Murray Silverstein. 1967. *Pattern Manual*. Berkeley, California: Center for Environmental Structure.





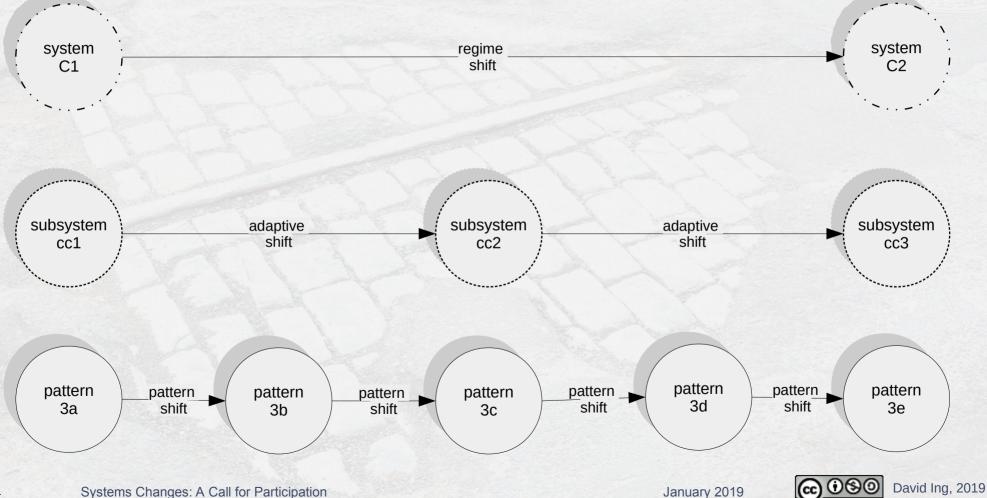


Scales: systems, subsystems, patterns





Sequences: systems, subsystems, patterns



Blood pressure of adults, 2012 to 2015 (Statistics Canada)

Chart 2

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Percentage of adults aged 20 to 79 with hypertension who are aware of their condition, whose hypertension is treated by medication, whose hypertension is controlled, or who are unaware of their condition, household population, Canada, 2012 to 2015

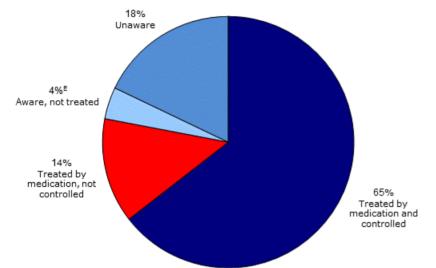
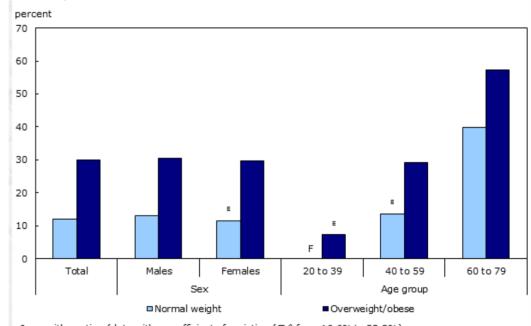


Chart 3

Distribution of adults aged 20 to 79 with hypertension, by sex, age group and body mass index (BMI), household population, Canada, 2012 to 2015



^E use with caution (data with a coefficient of variation (CV) from 16.6% to 33.3%) F too unreliable to be published (data with a coefficient of variation (CV) greater than 33.3%; suppressed due to extreme sampling variability)

Note: The body mass index (BMI) classification is based on the *Canadian Guidelines for Body Weight Classification in Adults* (Health Canada, 2003).

Source: Canadian Health Measures Survey, Cycle 3 (2012 and 2013) and Cycle 4 (2014 and 2015).

Statistics Canada, "Blood pressure of adults, 2012 to 2015", October 13, 2016, Health Fact Sheets, 82-625-X at https://www150.statcan.gc.ca/n1/pub/82-625-x/2016001/article/14657-eng.htm,



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■ use with caution (data with a coefficient of variation (CV) from 16.6% to 33.3%)

Note: "Controlled" refers to a measured resting blood pressure < 140/90 mmHg.

Source: Canadian Health Measures Survey, Cycle 3 (2012 and 2013) and Cycle 4 (2014 and 2015).

Hypertension Prevention and Treatment Guidelines



- I. Health Behaviour Management
- Guidelines
- A. Physical exercise
- B. Weight reduction
- C. Alcohol consumption
- D. Diet
- E. Sodium intake
- F. Calcium and magnesium intake
- G. Potassium intake
- H. Stress management

- III. Choice of therapy for adults with hypertension without compelling indications for specific agents
- A. Indications for drug therapy for adults with diastolic and/or systolic hypertension
- 1. Initial therapy should be with either monotherapy or a single pill combination (SPC).
- Recommended monotherapy choices are:
 - a. a thiazide/thiazide-like diuretic (Grade A), with longer-acting diuretics preferred (Grade B)
 - b. a β -blocker (in patients younger than 60 years; Grade B),
 - c. an angiotensin converting enzyme (ACE) inhibitor (in non-black patients; Grade B),
 - d. an angiotensin receptor blocker (ARB) (Grade B), or
 - e. a long-acting calcium channel blocker (CCB) (Grade B).
 - i. Recommended SPC choices are those in which an ACE inhibitor is combined with a CCB (Grade A), ARB with a CCB (Grade B), or ACE inhibitor or ARB with a diuretic (Grade B).
 - ii. Hypokalemia should be avoided in patients treated with thiazide/thiazide-like diuretic monotherapy (Grade C).

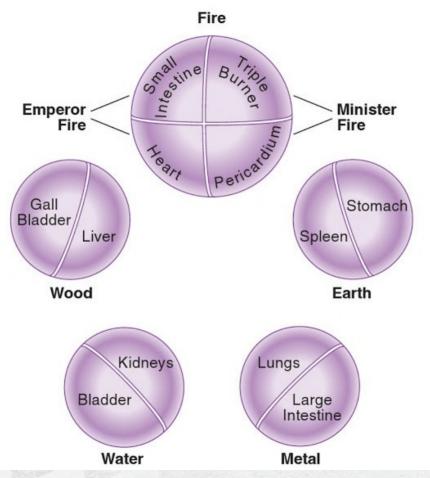


Recommended treatment program of hypertension by Chinese herbal formulas

Syndrome	Clinical signs	Treatment principles	Classical formula
Fire syndrome			
Liver fire syndrome	Vertigo, headache, facial flushing with perspiration, conjunctival congestion, bitter taste in the mouth, thirst, irritability and restlessness, wiry-rapid-powerful pulse or powerful cunkou pulse alone, or wiry and long pulse even well beyond the cunkou pulse	Calming liver and suppressing liver yang hyperactivity	Tianma Gouteng decoction, Zhengan Xifeng decoction, Jianlin decoction, and Longdan Xiegan decoction
Heart fire syndrome	Facial flushing with perspiration, bitter taste in the mouth, thirst, insomnia, red tip of the tongue, and rapid pulse	Clearing heart fire	Zhi-zi-chi decoction, Sanhuang Xiexin decoction, and Huanglian Jiedu decoction
Stomach fire syndrome and intestine fire syndrome	Dry mouth, thirst with desire for cold drinks, easy to starve, foul breath, abdominal distension and pain, smelly stool, constipation, red tongue, yellow dry fur, right guan pulse powerful alone, or strength and deep- hidden-powerful pulse	Clearing stomach-intestine fire, promoting digestion, relaxing bowels, and relieving constipation	Da Chai Hu decoction, Baohe pill, Baihu decoction, Houpu Dahuang decoction, Gegen Qinlian decoction, and Zeng Ye decoction
Phlegm-fluid retention syndrome			
Phlegm and dampness syndrome	Obesity, dizziness, sticky mouth, thirst without a desire to drink, chest distress, nausea, vomiting, anorexia, abdominal distension, loose stools, sleepiness, greasy tongue coating, and slippery pulse	Dispelling phlegm and eliminating dampness	Erchen decoction, Pingwei powde Wendan decoction, Banxia Baizh Tianma decoction, and Xiao Xianxiong decoction
Fluid retention syndrome	Dizziness aggravated by change in body position, thirst without a desire to drink or not being thirsty, chest distress, palpitation, gastric distension, abdominal distension, poor appetite, lumbar heaviness, weakness and heaviness in the lower extremities, edema, daytime sleepiness, abnormal leucorrhea, dysuria, greasy fur, swollen tongue, and deep pulse	Dissipating excessive fluid	Banxia baizhu tianma decoction, Wuling powder, Zhuling decoctior Zexie decoction, and Fuling Guizh Baizhu Gancao decoction
Deficiency syndrome			
Spleen deficiency syndrome	Fatigue, shortness of breath, stomach pain, poor appetite, abdominal distension, and loose stools	Reinforcing spleen	Fuling Guizhi Baizhu Gancao decoction, Si jun Zi decoction, and Liu Jun Zi decoction
Kidney deficiency syndrome	Tiredness in the loins and legs, tinnitus and dizziness, sexual dysfunction, dysuria, weakness and fatigue, and weak chi pulse	Reinforcing kidney	Liuwei Dihuang pill and Shenqi pil
/ang, Jie, and Xingjiang Xiong. 2013. "Evidence	e-Based Chinese Medicine for Hypertension." Evidence-Based Complem		
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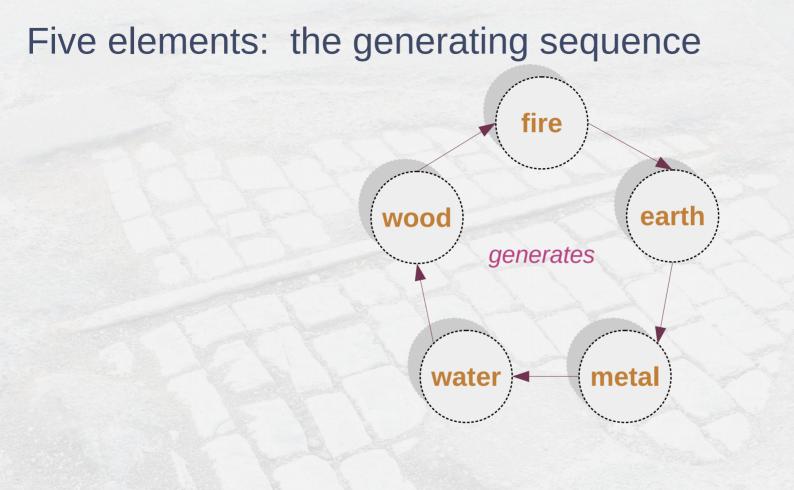
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Chinese medicine: the internal organs and five elements



Maciocia, Giovanni. 2015. The Foundations of Chinese Medicine: A Comprehensive Text. Elsevier Health Sciences.





Maciocia, Giovanni. 2015. The Foundations of Chinese Medicine: A Comprehensive Text. Elsevier Health Sciences.



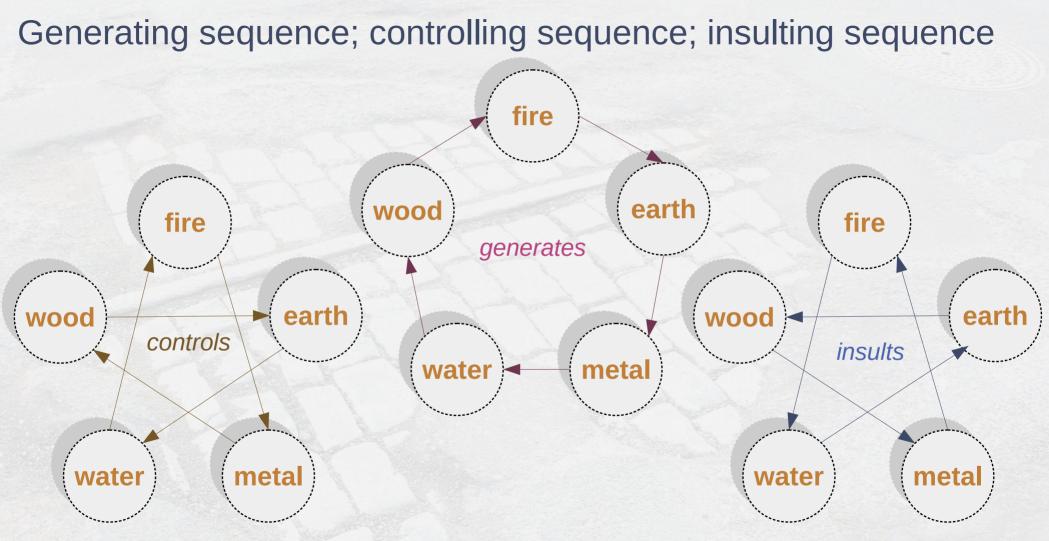
Five elements: controlling sequence; insulting sequence



Maciocia, Giovanni. 2015. The Foundations of Chinese Medicine: A Comprehensive Text. Elsevier Health Sciences.

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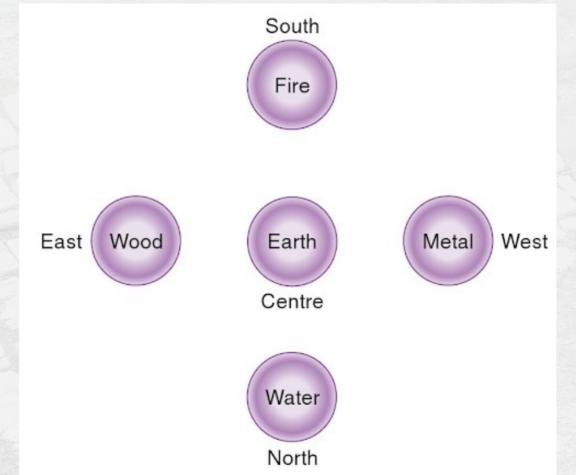




Maciocia, Giovanni. 2015. The Foundations of Chinese Medicine: A Comprehensive Text. Elsevier Health Sciences.



The five elements and cardinal directions



Maciocia, Giovanni. 2015. The Foundations of Chinese Medicine: A Comprehensive Text. Elsevier Health Sciences.



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THE PHILOSOPHICAL FOUNDATIONS OF CLASSICAL CHINESE MEDICINE

Philosophy, Methodology, Science

KEEKOK LEE



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Personal communications between David Ing and Harold Nelson (via LinkedIn Messaging, Dec. 30, 2018)



David Ing 1:08 PM

Maybe it's auspicious that you've pinged me today. I've been spending the past few weeks doing research on five elements theory, and the I Ching (which may be too mystical). Back when you were studying at Berkeley, did you encounter any serious research into this?



Harold Nelson 1:08 PM

Harold Nelson 1:10 PM

West, Russ and others like James Hillman all introduced me to the idea that the I Ching ought to be taken seriously at some level. I'll take your experience with West, Russ and James Hillman to continue this path. I'm behind on getting the pattern language community together with the systems sciences community in Corvallis for 2019.





Harold Nelson 2:09 PM

My introduction to the I Ching by West et al was primarily verbal so not sure how much you will find in writing. Lots of questions I wished I could have asked them when they were still around for a conversation.



David Ing 2:11 PM

Harold, thanks. West's interest is good encouragement for me to continue researching this.





