



# Strategy in higher education: Reshaping perspectives

Marian Mahat

# Overview

RATIONALE

CONTEXT

CONCEPTUAL FRAMEWORK

RESEARCH METHODS

FINDINGS

DISCUSSION

IMPLICATIONS

# RATIONALE

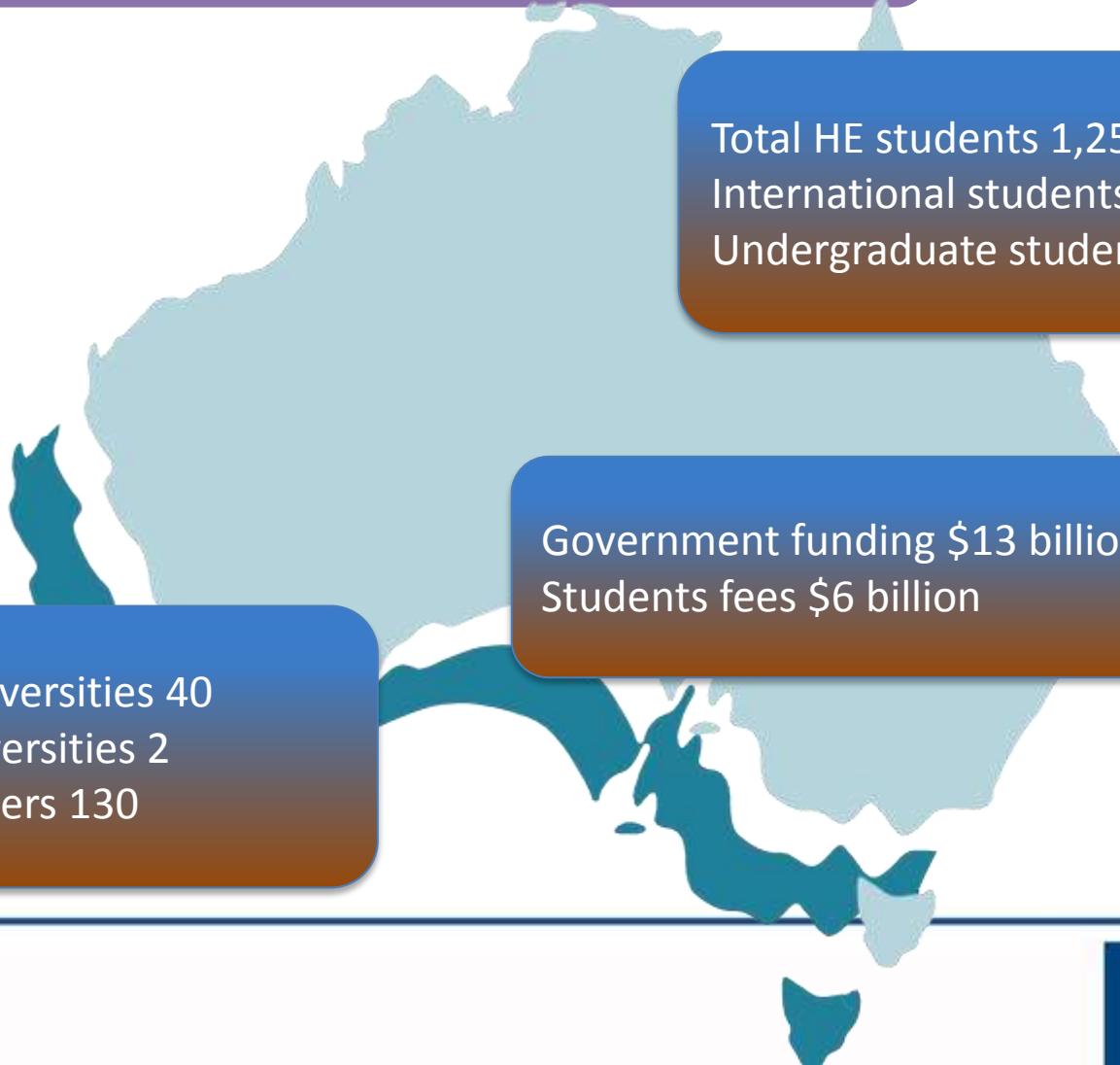
- Strategy does not apply to a substantially public and more institutionalised sector such as higher education (Amaral, Jones, & Karseth, 2002; Gumpert, 2001).
- Strategy is not achievable in complex, loosely coupled organisations such as universities (Leslie, 1996; Musselin, 2007).
- Strategy is not achievable in organisations functioning in regulated contexts given the extent of regulatory control of competitive dimensions (Mahon & Murray, 1980, 1981; Smith & Grimm, 1987).
- Key issues shaping higher education drive institutions towards new forms of management forcing them to make strategic choices in order to make use of their resources effectively and efficiently (Ernst & Young, 2012; Mahat & Coates, 2014; Parker, 2012).

# RATIONALE

In what ways are medical schools distinctive from each other?

How does performance affect strategic positioning in medical schools?

# CONTEXT



Total HE students 1,257,722  
International students 325,961  
Undergraduate students 836,350

Government funding \$13 billion  
Students fees \$6 billion

Australian universities 40  
Overseas universities 2  
Private providers 130

# CONTEXT

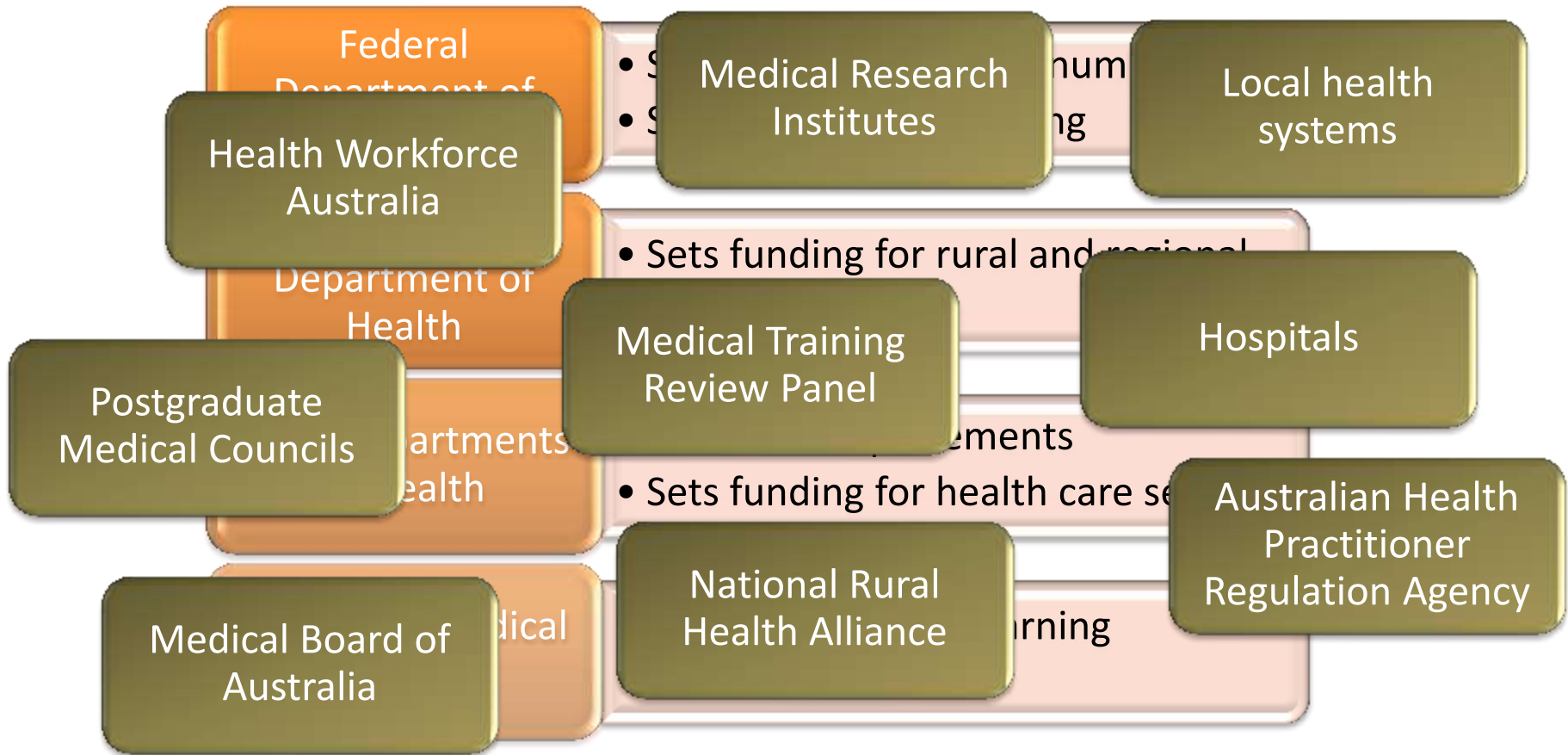
Medical students 16,837  
Domestic students 14,384  
International students 2,453

Governance and internal structures differ between medical schools.

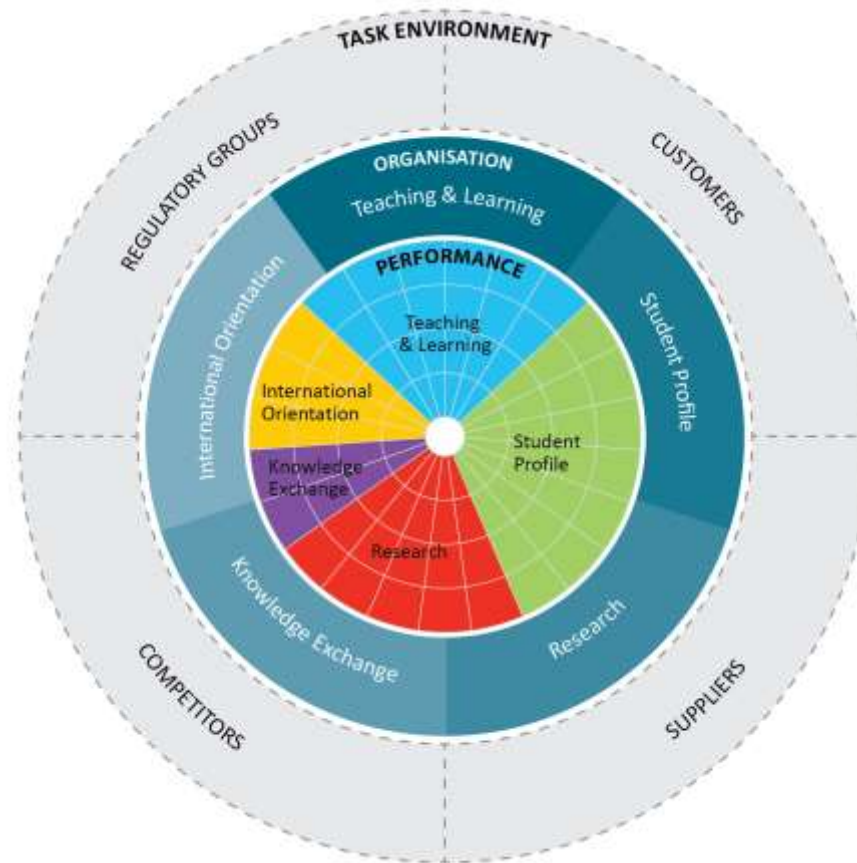
Some medical schools combine a number of different foci including dentistry within the medical school framework.

18 medical schools located in 40 universities

# CONTEXT



# CONCEPTUAL FRAMEWORK





# CONCEPTUAL FRAMEWORK



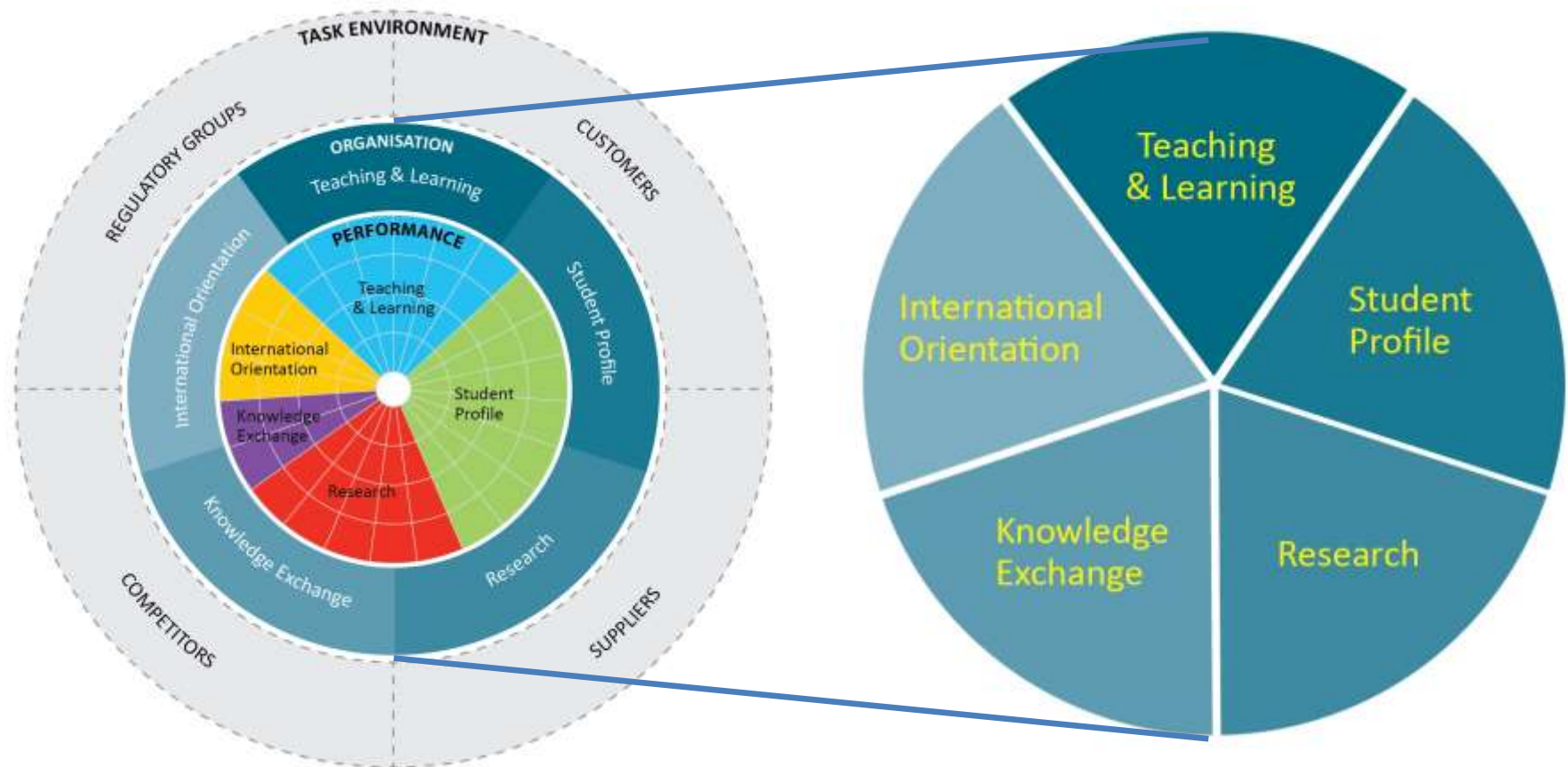
Strategic positioning in higher education is the process through which higher education institutions locate themselves in specific niches within the higher education system (Fumasoli & Lepori, 2011).

(see examples of Coates et al., 2013; Fumasoli & Huisman, 2013; Kim & Mauborgne, 2005; Lukas et al., 2001; Mahat et al., 2014; Mahon & Murray, 1981; Morphew & Hartley, 2006; Popielarz & Neal, 2007; Purcell et al., 2011; Tan & Litschert, 1994; van Vught & Huisman, 2013; van Vught et al., 2010)

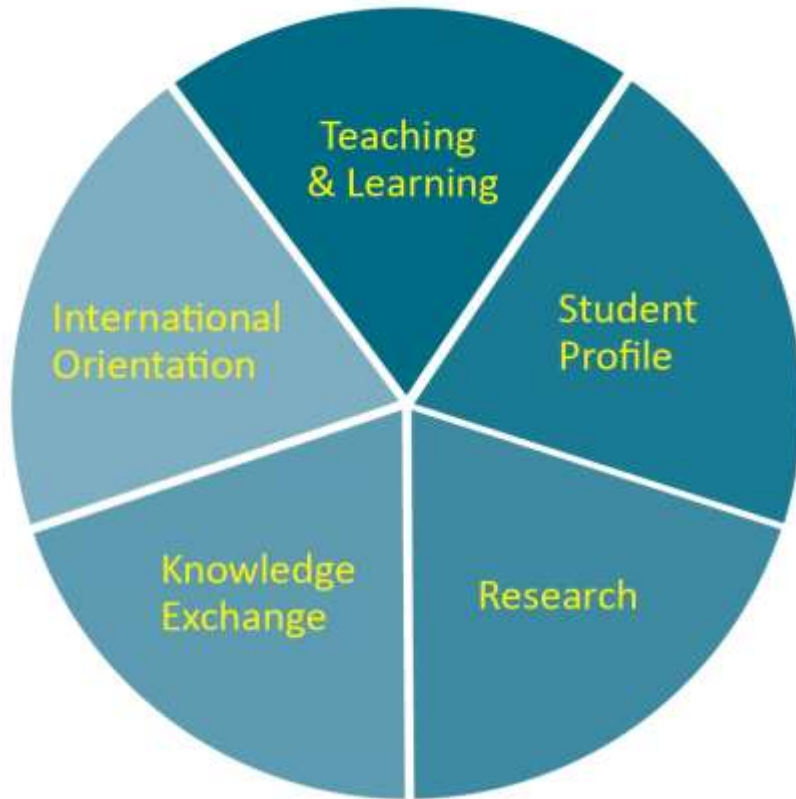
# CONCEPTUAL FRAMEWORK

Medical school rankings	Teaching and Learning	Research	Knowledge exchange	International Orientation	Student profile
Academic ranking of World Universities – Clinical Medicine and Pharmacy		√			
Find the best - medical school	√				√
QS World University Rankings by Subject – Medicine and Life Sciences	√	√			
The Guardian League Table for Medicine	√				
THE World University Ranking by Subject – Clinical pre-clinical & health, Life sciences & Physical Sciences	√	√	√	√	
U-Multirank Field based – Medicine	√	√	√	√	√
US News & World Report – Best medical school	√				√

# CONCEPTUAL FRAMEWORK

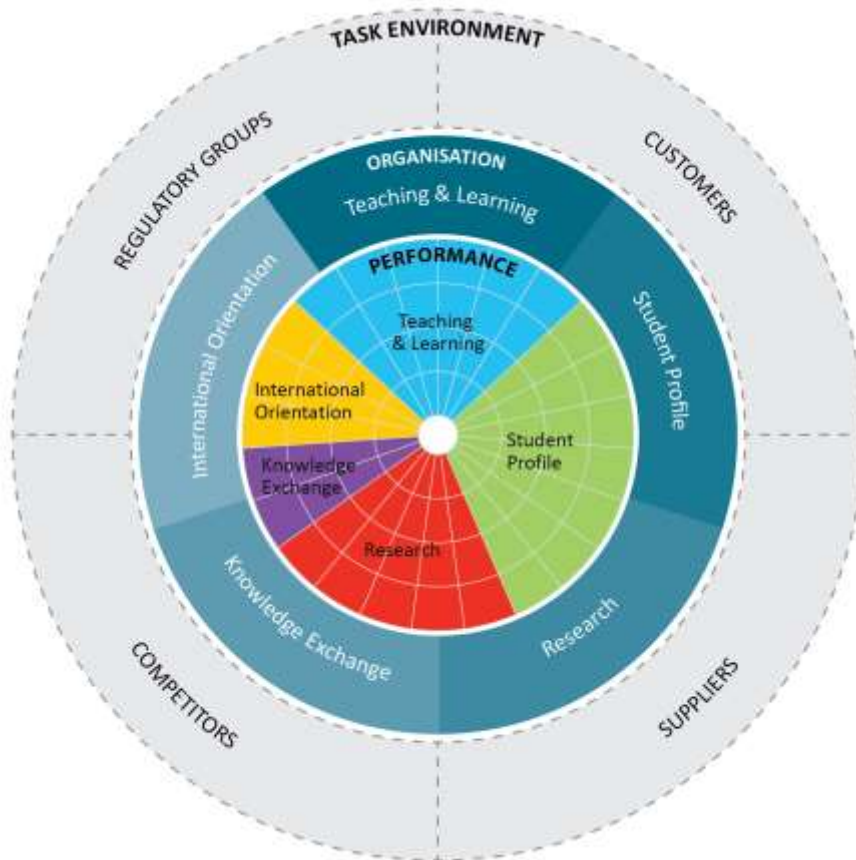


# CONCEPTUAL FRAMEWORK



- Five dimensions of activities
- Adopt strategies which emphasised some dimensions at the expense of others in order to avoid becoming 'stuck in the middle' (Mahon & Murray, 1981)
- Locate themselves in new and emerging distinctive market spaces or “blue ocean” (Kim & Mauborgne, 2005)
- Locate themselves in niches through focusing on such attributes such as commitment to diversity (Morphew & Hartley, 2006)

# CONCEPTUAL FRAMEWORK



Visual representation of performance is important for supporting strategic decision making at all stages of the strategy process (Eden & Ackerman, 1998; Foil & Huff, 1992; Lohse, Biolsi, Walker, & Rueter, 1994; Morgan, 1993; Tan & Platts, 2003; Tufte, 1990).

Visualisation techniques have many cognitive and operational techniques, e.g. focuses attention, provides overview of complex data etc. (Tan & Platts, 2004).

A number of techniques used to visualise performance in a strategy process, e.g. performance profiling, strategy charting, performance ranking, benchmarking (Tan & Platts, 2004; van Vught & Huisman, 2013).





## Authors

---

Hamish Coates

Daniel Edwards

Leo Goedegebuure

Marian Thakur

Eva van der Brugge

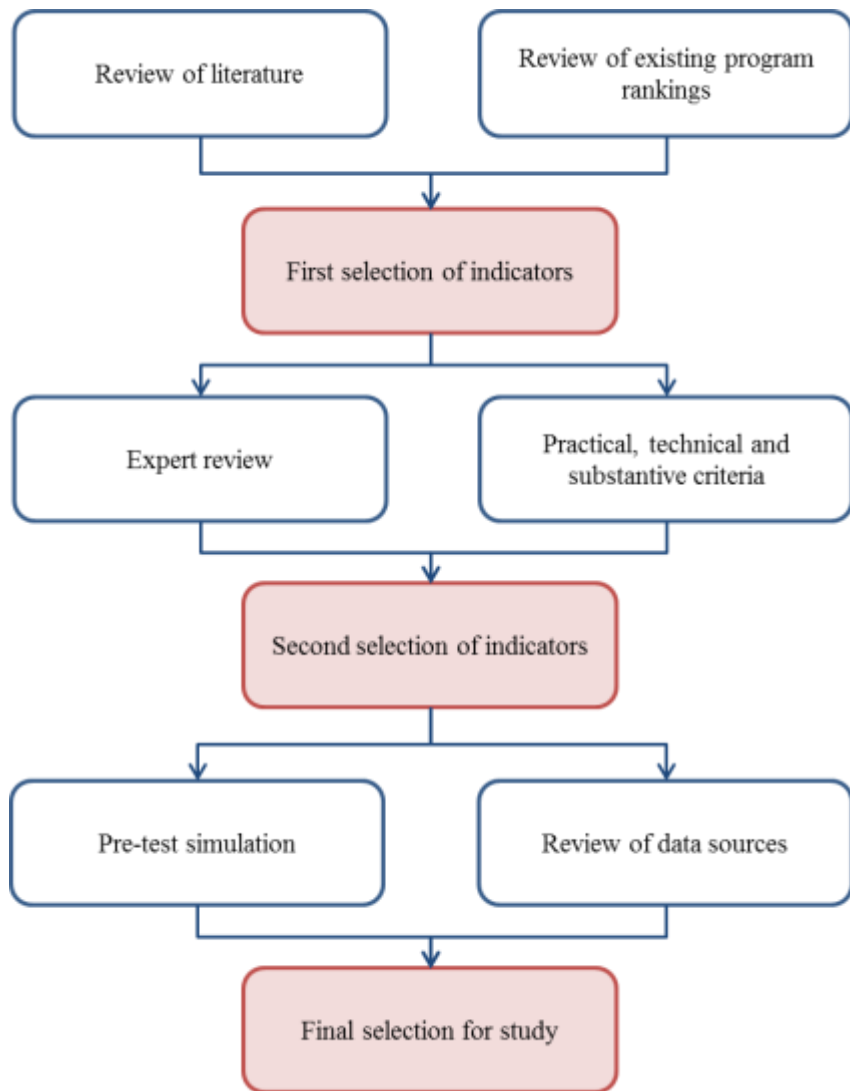
Frans van Vught

# *Profiling diversity of Australian universities*

## Executive summary

---

There is a good deal of consensus that institutional diversity in higher education is a good thing. Simply put, systems with more diverse institutions perform better than systems with less diverse institutions. Yet the overall diversity of Australia's higher education system remains unclear. Significant questions and opportunities remain



Through a rigorous process of validation, a number of indicators were removed, adapted or included to suit the medical school context.

A final set of 23 indicators of performance were selected based on criteria of practical consideration, technical consideration and substantive consideration.

The evaluation of each indicator was both theory- and data-driven.

# RESEARCH METHODS

- **Qualitative method**
  - 6 case study medical schools
  - Semi-structured interviews
  - 21 academic and professional staff
  - Thematic analysis of interview data



# RESEARCH METHODS

M1  
Under 10 yrs  
Small

M2  
Under 10 yrs  
Small

M3  
Above 50 yrs  
Large

M4  
10 - 50 yrs  
Medium

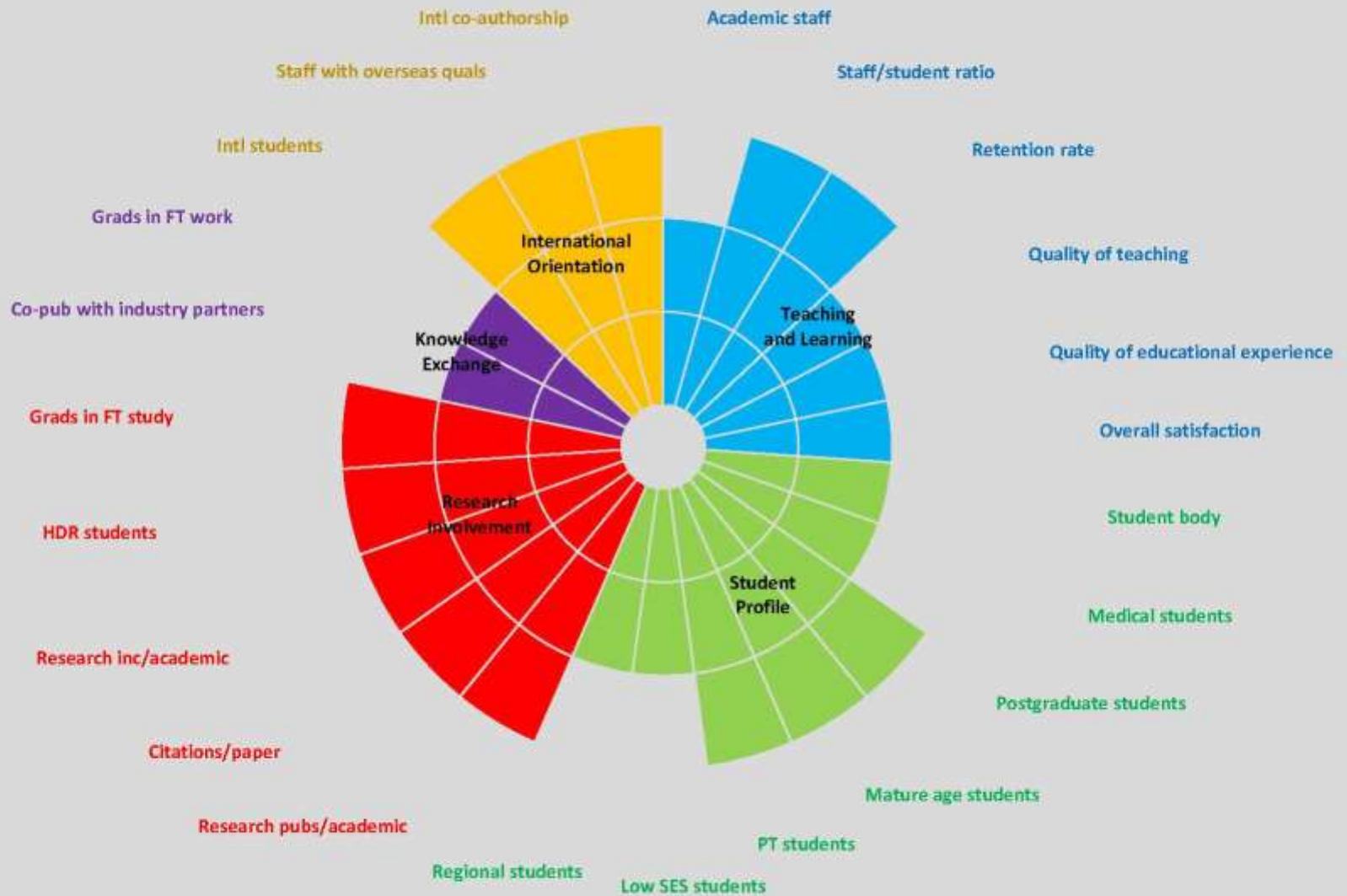
M5  
Above 50 yrs  
Large

M6  
10 - 50 yrs  
Medium

# RESEARCH METHODS

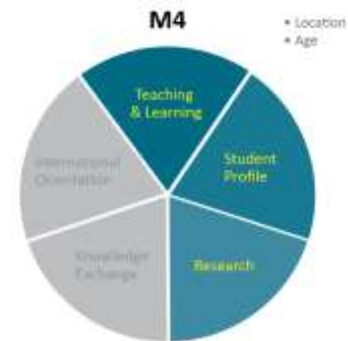
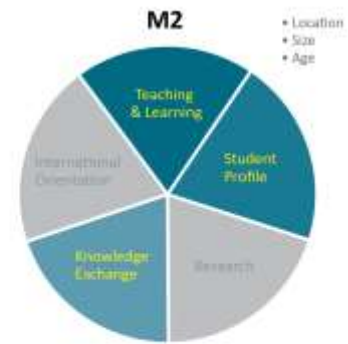
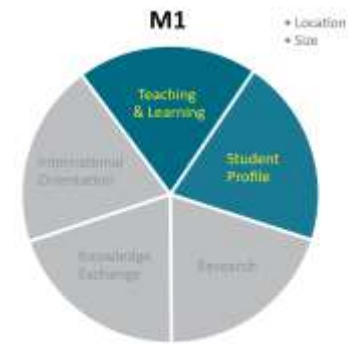
- **Quantitative method**
  - Analysis of performance of all 18 medical schools
  - Each medical school benchmarked against all others and placed in first, second, third or fourth quartile for each indicator, depending on performance
  - The output was compiled graphically into a profile for each medical school

# Median Medical School



# Strategic positioning

- Australian medical school system is bipolar in nature: research and teaching and learning
- Medical schools emphasise some dimensions at the expense of others
- Some medical schools attempt to position themselves in 'blue ocean' (Kim & Mauborgne, 2005)
- A number of features, location, age and size, are seen as distinctive.



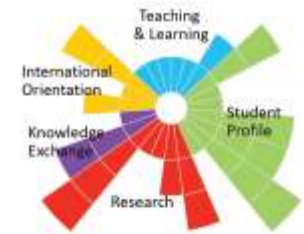
# Performance

- As a visual tool, it lets medical schools analyse strengths and weaknesses; direct discussions and more focussed planning; focus resources and investments; outline priorities...etc.
- A poor performance on one measure or activity may lead to strategic decisions aimed at effecting improvements, if it was considered to be of strategic importance to that medical school.
- The key to executing strategy is to have staff in the medical school understand it; and that a visual mapping tool could be used effectively in the strategy formulation process.

Medical School – M1



Medical School – M2



Medical School – M3



Medical School – M4



Medical School – M5



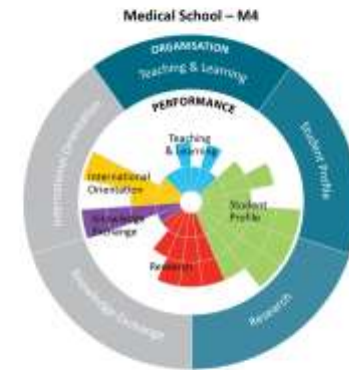
Medical School – M6





# Medical schools in context

- Performance of medical schools is quite aligned and consistent to the strategic positions of medical schools.
- **Medical school M1:** Its performance in teaching and learning and student profile seems to be quite consistent to the position it has defined for itself.
- **Medical school M3:** Its performance across all five dimensions seem to correspond to its strategic position within the system.
- **Medical school M6:** Participants perceived its position to be focused in teaching and learning; research and knowledge exchange, however their performance in these dimensions did not seem to measure up.



# ENVIRONMENT



Strategic positioning is possible in a highly regulated institutionalised setting

# IMPLICATIONS FOR PRACTICE

## Strategic leadership and management

- Emergence of professional middle management
- Expansion and diversification of roles

## Mission diversity

- Differentiated goal-oriented funding framework
- Align with broad social, economic and health development objectives



# IMPLICATIONS FOR THEORY

## Power approach

- Bases of power in organisations

## Strategy, structure and performance

- Structural configurations of medical schools

**Mahat, M. & Coates, H. (2015)  
Strategic Planning and Institutional  
Research: The case of Australia**

**Institutional Research and  
Planning in Higher Education**

*Global Contexts and Themes*

Edited by  
Karen L. Webber and Angel J. Calderon



**Marian Mahat**  
**Marian.Mahat@unimelb.edu.au**



[melbourne-cshe.unimelb.edu.au](http://melbourne-cshe.unimelb.edu.au)

© Melbourne Centre for the Study of Higher Education, The University of Melbourne  
2015