

LEADERSHIP IN LOCAL HEALTH DEPARTMENTS: A MIXED-METHOD EXPLORATION

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Disclosure

- ◉ No relevant financial relationships or commercial interests

Objectives

- ◉ To examine local public health leadership through the lens of the full-range leadership model using a two-phase, mixed-method design.
- ◉ Specific aims:
 - Measure the extent of full-range leadership styles among local health department directors in selected local health departments.
 - Develop a richer understanding of the factors which facilitate the development and use of different leadership styles in local health departments.

Study Significance

- ◉ Expand theory and literature on models and practices of PH leadership
- ◉ Inform local, state, and national public health workforce and leadership development efforts
- ◉ Further establish leadership development as a PH priority

Leadership Needed Now

- Public health is experiencing several systemic issues which could redefine the practice and research of public health
 - Workforce turn-over through retirement or privatization
 - Funding deficits & program cuts
 - Emergent local, national, and global health issues
 - Push for government-run health care

Public Health Workforce

- Workforce, management, and leadership are central to the future of public health¹
- One of the 10 Essential Public Health Services²:
 - “Assure competent public and personal health care workforce.”
- Leadership competencies are part of MPH and DrPH competency models³

1. IOM (2002); 2. CDC (2008); 3. ASPH (2006, 2009)

Public Health Workforce

- Workforce training and development, including leadership, is vital to the future of public health, but funding for workforce development has been limited
- Clarifying public health leadership concepts and leadership development priorities are key to effective and cost-efficient programming

Leadership in Public Health

- Public health proponents and agencies have been calling for leadership training, development, and research
- Researchers in other disciplines have been developing and applying leadership theories for decades
 - What can we gain from translating their theories to our practice?

Full-Range Leadership Model

- ⦿ Enumerates transformational, transactional, and passive-avoidant leadership styles
- ⦿ Examines the direct and indirect influence(s) of certain leadership styles on interpersonal relationships and organizational performance

Methods

Design & Sample

- ⦿ Two phase, sequential mixed-method design:
 - Phase 1 = Quantitative Survey (survey methodology)
 - Phase 2 = Qualitative Interview & Focus Groups (case study methodology)
- ⦿ Sample of local health department directors (Phase 1 & 2) and staff (Phase 2)

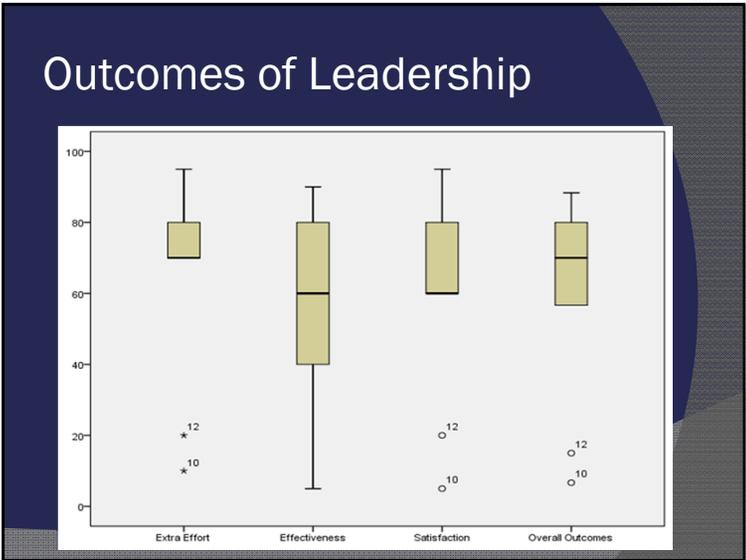
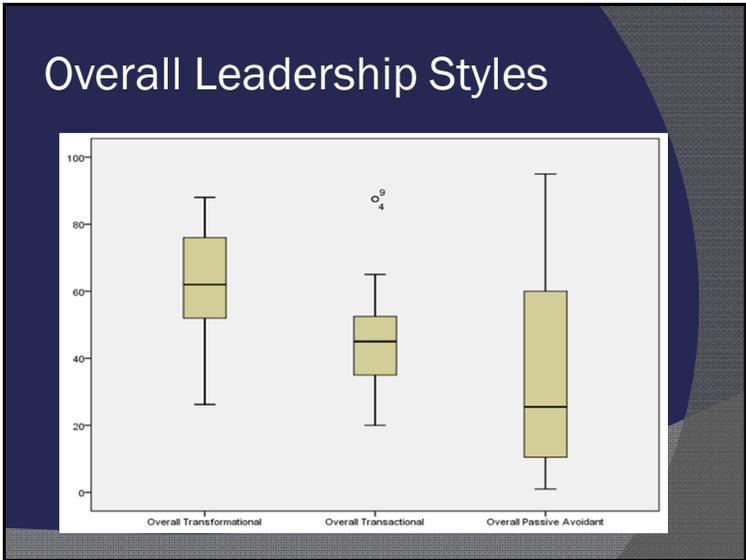
Measures

- ⦿ Full-Range Leadership: 45-item MLQ
 - Transformational Leadership
 - Transactional Leadership
 - Passive-Avoidant Leadership
- ⦿ County Health Rankings
- ⦿ Questions on experiences with and perspectives on public health leadership

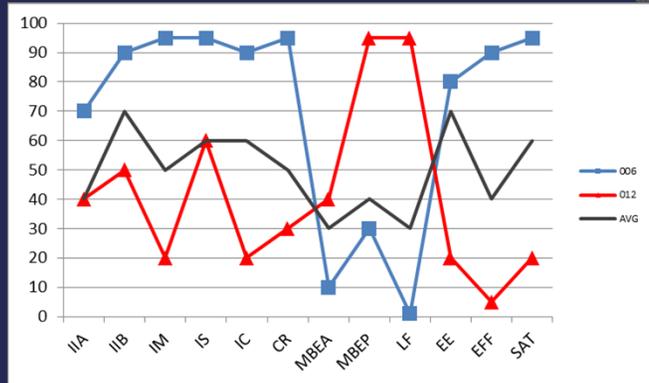
Quantitative Results

Participant Demographics

Demographics	Participants (n=13)
Gender	
Male	5 (38%)
Female	8 (62%)
Race	
White/Caucasian	12 (92%)
Black	1 (8%)
Other	0 (0%)
Age	
26-35	1 (8%)
36-45	2 (15%)
46-55	7 (54%)
55+	3 (23%)
Highest Education Completed	
High School/Associate's Degree	0 (0%)
Bachelor's Degree	2 (15%)
Master's Degree	10 (77%)
Doctoral Degree	1 (8%)
Type of Health Department	
Urban	0 (0%)
Suburban	2 (15%)
Rural	11 (85%)



Comparing Leadership Profiles



Leadership Styles & Outcomes

Pearson correlation coefficients for overall leadership styles and leadership outcomes (n=13).

	TTF	TTA	TPA	EE	EFF	SAT	LO
Ttl. Transform. (TTF)	--	-.010	-.328	.818**	.759**	.845***	.846***
Ttl. Transact. (TTA)		--	-.003	-.003	.101	.252	.123
Ttl. Pass.-Av. (TPA)			--	-.265	-.166	-.341	-.265
Extra Effort (EE)				--	.839***	.867***	.944***
Effectiveness (EFF)					--	.859***	.954***
Satisfaction (SAT)						--	.953***
L'ship Outcomes (LO)							--

* p<.05, ** p<.01, ***p<.001

Leadership & Community Health

Pearson correlation coefficients for leadership styles, county location, and county health rankings (n=45).

	TTF	TTA	TPA	BC	HO	HF
Ttl. Transformational (TTF)	--	-.099	-.608***	-.195	-.160	.150
Ttl. Transactional (TTA)		--	-.019	-.174	.112	-.022
Ttl. Passive-Avoidant (TPA)			--	.287	.220	-.086
County Loc./Beale Code (BC)				--	.401**	.313*
Health Outcomes (HO)					--	.683**
Health Factors (HF)						--

* p<.05, ** p<.01, ***p<.001

Qualitative Results

Participant Demographics

Background Information	Participants (n=37)
Gender	
Male	5 (13%)
Female	32 (87%)
Age	
18-25	0 (0%)
26-35	13 (35%)
36-45	8 (22%)
46-55	12 (32%)
55+	4 (11%)
Highest Education Completed	
High School/Associate's Degree	17 (46%)
Bachelor's Degree	11 (30%)
Master's Degree	9 (24%)
Doctoral Degree	0 (0%)
Years of Public Health Work Experience	
<1	0 (0%)
1-5	12 (32%)
6-10	8 (22%)
11-20	15 (41%)
20+	2 (5%)

Who are public health leaders?

- “Leadership doesn’t necessarily have to be in a supervisory role. Leadership to me can be within the ranks...Supervision is not necessarily leadership, leadership is not necessarily tied to titles.”

Ideal Qualities of PH Leaders

Leader Attributes	Frequency
Staff development focused, training	25
Individual consideration, relationship skills, people-oriented, supportive, encouragement, sensitivity	25
Delegation, empowerment, engagement, collaboration	22
Creative & innovative	20
Leading by example, modeling, mentoring	18
Practical management skills, competence, basics of public health, knowledgeable, credibility, work ethic	17

A Balanced Leadership Style

- Participants preferred transformational leadership, but recognized situational adaptations in leadership:
 - Major public health events
 - Individual staff needs
 - General activities of certain departments or programs

A Balanced Leadership Style

- “I think it has to be a combination of the best of both...There are going to be different issues that come up within the agency that’s going to require one type of leadership and then another issue may require more of the other kind.”

Daily Realities of PH Practice

- “The transformational sounds wonderful if you had the time to sit and conceptualize and plan and think all day long. But a lot of work of the day is actually the transactional work just because things have to get done.”

Leading by Example

- “You have to get out and work side by side with your people. You have to demonstrate to them that you’re willing to do everything that you’re asking them to do...I know that I set the tone through my words and actions.”

Individual Consideration

- “Everybody has different strengths. Some people are better at the personal things, you know, dealing with the patients, and some people are not. So you want to build on whatever their strengths are and the people that are good in certain areas, that’s what they enjoy doing, that’s what they are good at, then you want to maximize what their strengths are.”

Implications, Limitations, & Contributions

Implications for Practice

- Invest in workforce development
 - Leader self-awareness, including measurement and reporting tools
 - Focus on individual consideration, esp. engagement and collaboration
 - Interpersonal skills training
 - Training cross-training, and education
- Inform State Health Department and Local Board of Health Officials

Implications for Research

- Findings among a small sample suggest potential value in larger, national studies which incorporate 360-degree leader reviews
- Develop better measures of organization performance and return on investment for staff development activities
- Translational research linking cutting-edge leadership theories from business and/or education to public health practice

Limitations

- Self-report data
- Limited sample size in both phases of the study
- Quasi-randomized sampling procedure
- Participation in focus groups was voluntary but not universally available

Contributions

- First examination of full-range leadership model among local health departments
- Reinforces some aspects of transformational leadership while supporting a more blended approach to leadership
- Highlights importance of specific aspects of leadership, especially individual consideration

Thank you!

Selected References

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