

EVALUATION OF MEDIUM TERM OUTCOMES OF WHO PROLEAD PROGRAM



- Preliminary overview of results

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Dr Sally Fawkes, Senior Lecturer
Dr Vivian Lin, Professor of Public Health
Dr Susan Chong, Research Assistant
School of Public Health and Human Biosciences, La Trobe University
Melbourne, Australia

Health promotion capacity challenge

Hawe, King, Noort et al 1999

‘...the development of sustainable **skills**, organisational **structures**, **resources** and **commitment** to health improvement in health and other sectors, to prolong and multiply health gains many times over’

Capacity Requirements

- Workforce
- Organisations
- Mandates
- Sustainable financing

Leaders who promote health ***(106 fellows, 27 countries)***

A critical mass of leaders in health promotion, applying their knowledge and skills, focusing on their local conditions, developing projects attuned to local needs but with an understanding of global driving forces, and having the skills with which to implement these projects

Prolead in a capsule

- “Teams of leaders who promote health”
- Learning by doing
- Mentoring
- Project to apply skills and knowledge

Prolead in a capsule

- Quality improvement tools
- Problem solving
- Health promotion foundation as the reference point for learning
- Using regional networks and institutional links to support capacity-building

Training strategy

- Face to face training in 3 modules over a 9 month period
- Team-based projects addressing infrastructure, financing, governance issues
- Mentoring during the course
- Reporting on projects
- Building a regional support network

History of Prolead

- Meeting on capacity building for health promotion (2002)
- Study group on health promotion infrastructure and financing (2003)
- Prolead pilot (2004) – Shanghai (China); Fiji, Malaysia, Mongolia, Philippines, Tonga

Prolead as a movement of health promotion leaders

2003 Prolead 1 (WPRO)	2005 Prolead 2 (Global)	2007-08 Proleadplus	2010-11 Prolead B (Basic)	2011-12 GCC Prolead
China (Shanghai)	India	Brunei Darussalam	Cambodia	Abu Dhabi
Fiji	Japan	Cambodia	Indonesia	Kuwait
Malaysia	Korea	Cook Islands	Lao PDR	Oman
Mongolia	Lebanon	Fiji	Philippines	Qatar
Philippines	Oman	Kiribati	Samoa	UAE
Tonga	Viet Nam (Hue City)	Lao PDR	Vietnam	
	2006-07 Prolead (EMRO)	Papua New Guinea	2010-2011 Prolead A (Advanced)	2012-2013 Prolead E (HPF establishment)
	Bahrain	Samoa	Malaysia	Laos PDR
	Oman	Solomon Islands	Mongolia	Samoa
	Qatar	Tonga	Tonga	Solomon Islands
	Saudi Arabia	Vanuatu		Philippines
	Tunisia	Viet Nam		Vanuatu
	Yemen			Viet Nam

History and thematic areas

- Prolead 1 (2004) – health promotion infrastructure and financing
- Prolead 2 (2005)– governance for health
- Prolead EMRO (2006-2007) – health promotion infrastructure and financing
- ProleadPlus (2007-2008) - national health promotion capacity development
- Prolead B (*Basic*) (2010-2011) - FCTC/tobacco taxation and health promotion financing
- Prolead A (*Advanced*) (2010-2011)– governance for health promotion foundations/boards
- **Prolead E (*Establishment of HPF*) (2012-2013)– establishment of health promotion foundations based on national tobacco control laws**

Prolead 1 (2004-2005)





Prolead EMRO (2006-2007)



Prolead EMRO (2006-2007)



Proleadplus (2007-2009)



Prolead A and B (2010-2011)



Prolead Advanced (2010-2011)



Prolead Advanced (2010-2011)

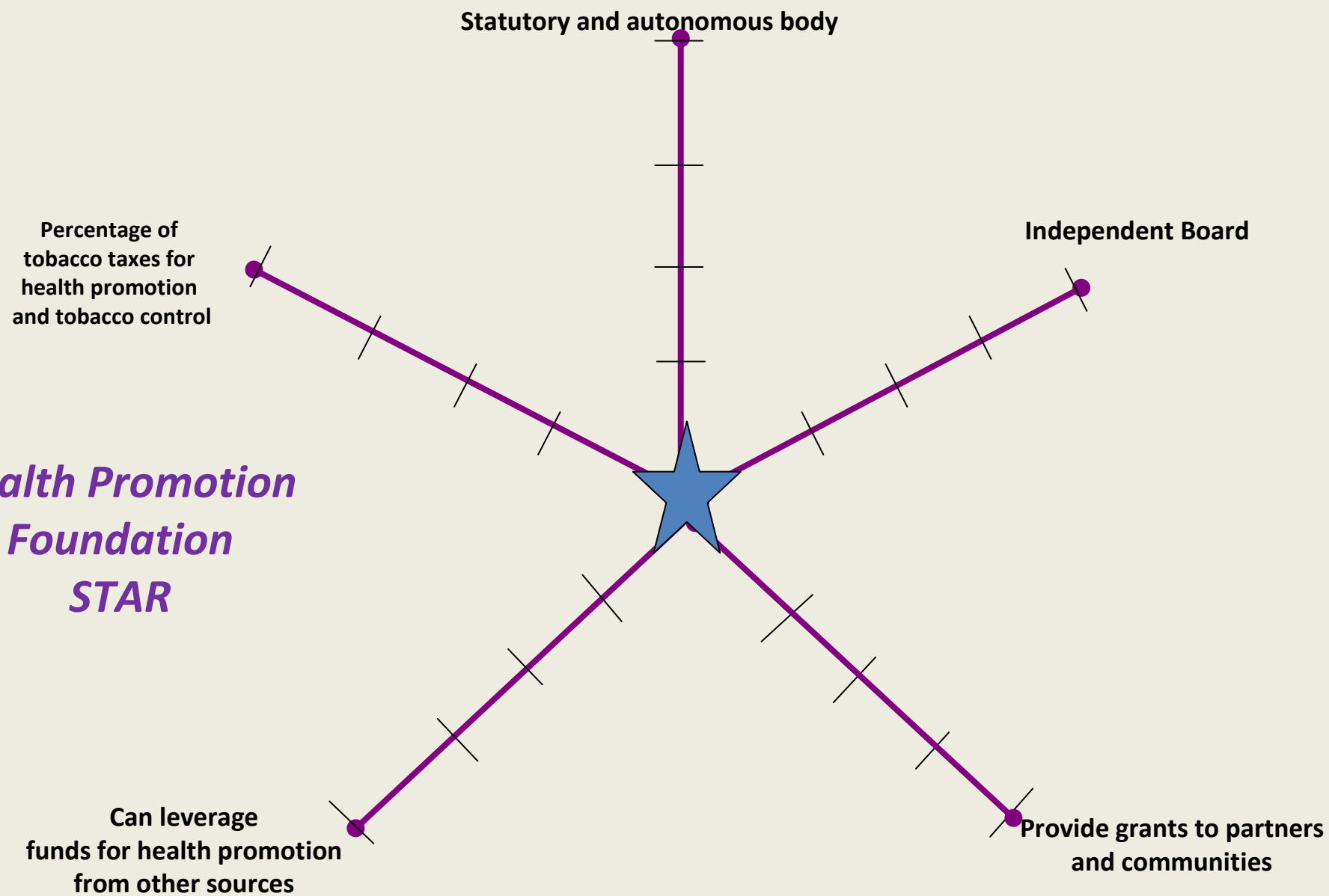


Prolead Advanced (2010-2011)

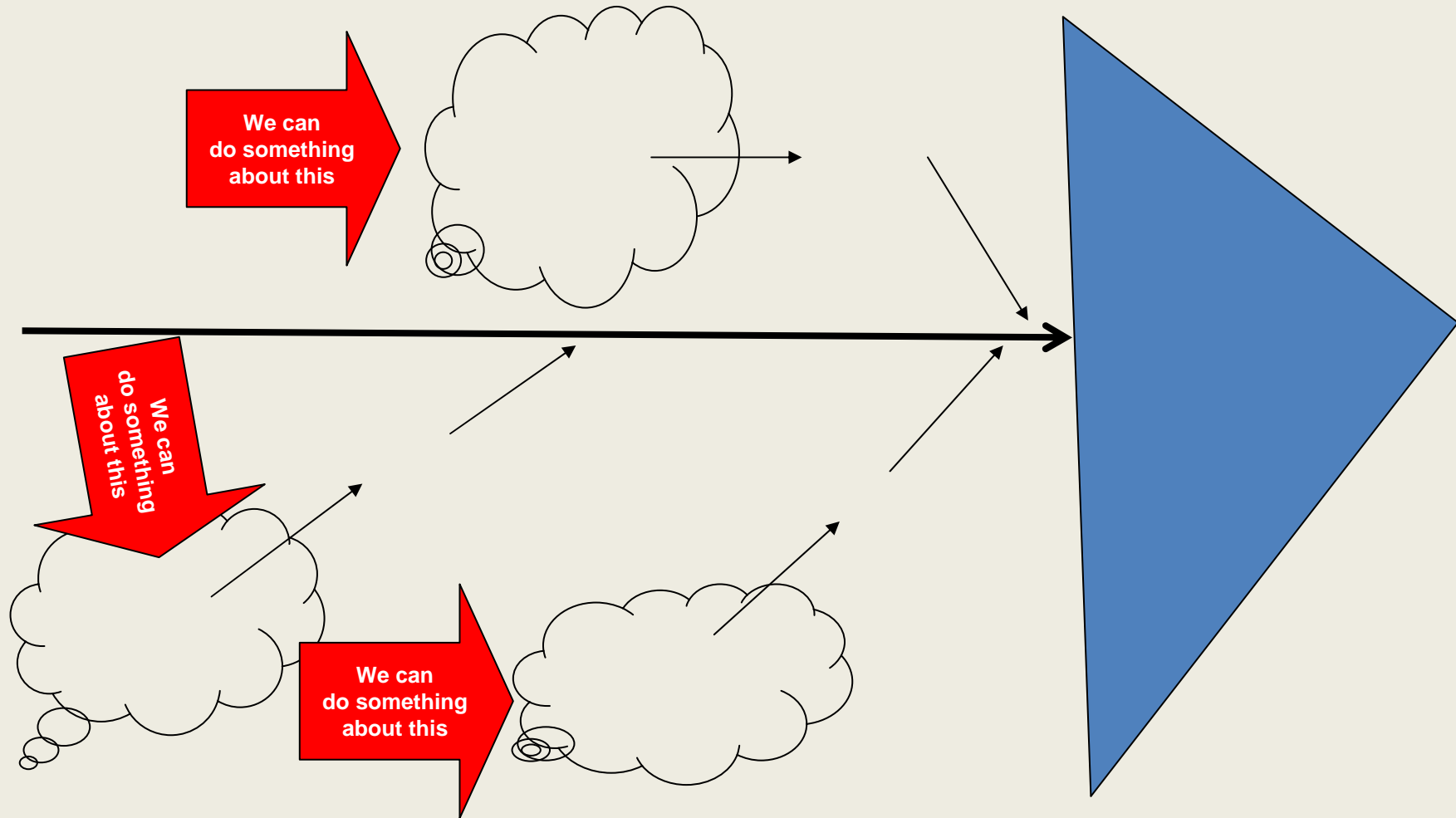


Prolead quality improvement tools

***Health Promotion
Foundation
STAR***



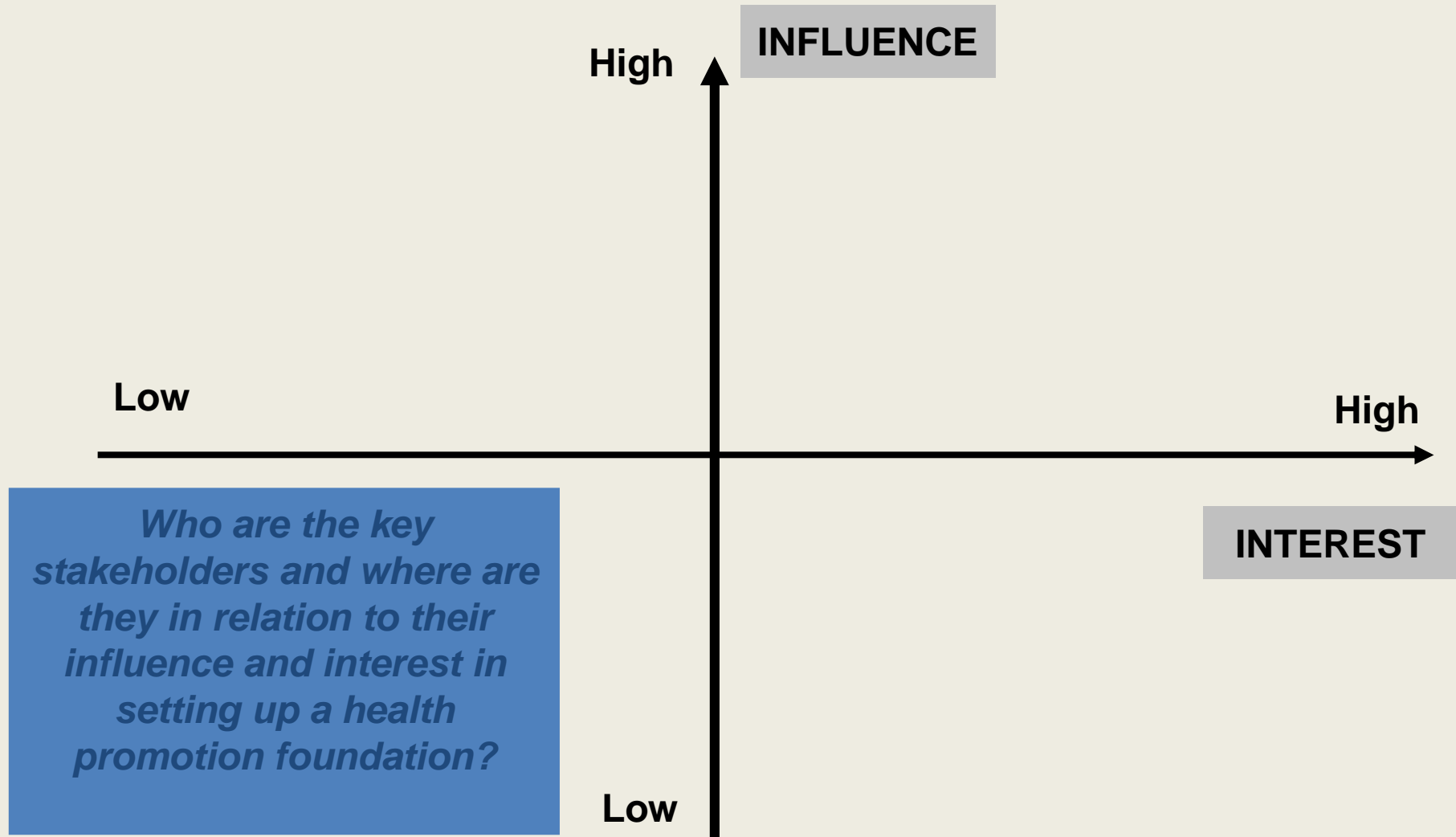
Fishbone Analysis



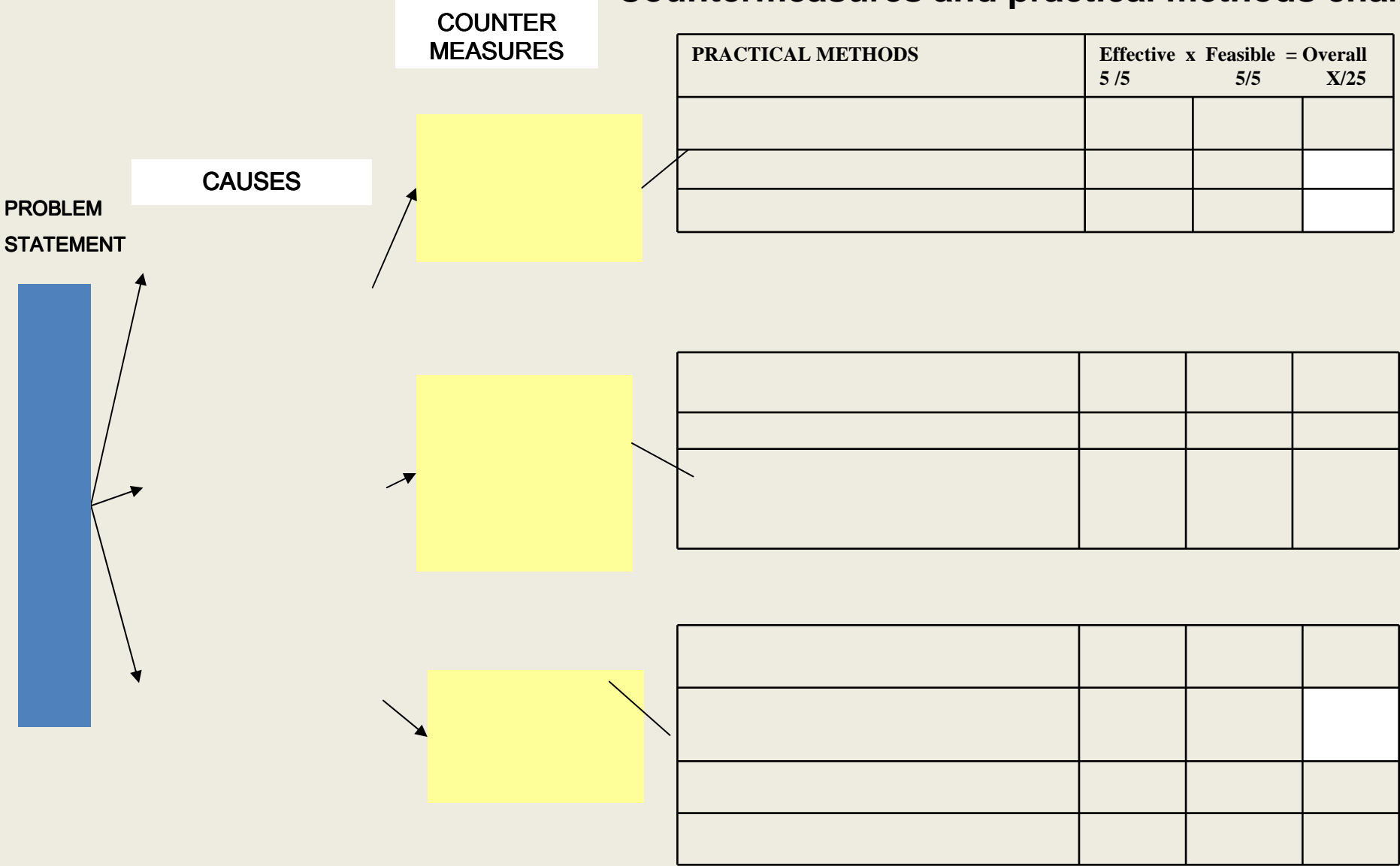
Multi-voting

ISSUE	ROUND 1 VOTING	ROUND 2 VOTING	ROUND 3 VOTING	FINAL SELECTION
[List possible topics for strengthening HPF performance]	Tick preferred options	Tick half of Round 1 options	Tick half of Round 2 options	Tick half of Round 3 options
A	✓	✓	✓	
B				
C	✓	✓		
D				
E	✓			
F	✓	✓	✓	✓
G	✓			
H	✓			

Influence and interest grid



Countermeasures and practical methods chart



Effectiveness – the practical method will result in significant change

Feasibility – resources (material, human and time) are available and accessible for taking the action needed

Prolead network of partners

- Alliance for Healthy Cities
- De La Salle Graduate School of Business
- Health Promotion Switzerland
- International Network of Health Promotion Foundations
- Korean Health Promotion Foundation
- La Trobe University
- Mongolia Health Promotion Foundation
- MySihat
- Pacific Open Learning Network
- Singapore Health Promotion Board
- Southeast Asian Ministers of Education Organization, Regional Tropical Medicine and Public Health Network
- Tonga Health
- Thai Health Promotion Foundation
- Victoria Health Promotion Foundation
- United Nations Environment Programme Environmentally Sound Technologies Information System
- University of the Philippines, Open University
- WHO Centre for Health Development, Kobe Japan
- WHO Regional Office in the Eastern Mediterranean

Prolead outcomes in Western Pacific Region

- Health promotion foundations established
 - Mongolia
 - Malaysia
 - Tonga
- Health promotion foundation or funds incorporated in tobacco control laws
 - Laos PDR
 - Samoa
 - Solomon Islands
 - Vanuatu
 - Vietnam
- Increased financing in Philippines, Brunei, Fiji

Current Evaluation Project

- Focus - Medium-term (developmental) outcomes ie outcomes that have arisen over time since Fellows/ country teams participated in Prolead
- 5 programs (2004 to 2008): Prolead I (pilot), Prolead II, Prolead (Gulf States), Prolead Plus, Advanced Prolead
- Aims -
 1. Advance knowledge about impacts (individual, networks/partnerships, policy/system levels)
 2. How to evaluate medium-term outcomes of a leadership development program

Methodology - overview

- Evaluation Results Map developed
 - based on US EvaluLEAD framework for evaluating leadership development programs (Grove, Kibel, Hass, 2005)
 - used to guide formulation of 37 survey questions
- Fellows emailed invitation letter, information sheet and link to online consent form/ survey
- Data collected via online survey using Survey Monkey; data cleaned
- Open questions analysed for themes

PROLEAD EVALUATION RESULTS MAP

Time

Evidence base	Short-term Outcomes		
	INDIVIDUAL Direct results (I ₁)	NETWORKS and PARTNERS Direct results (N ₁)	PUBLIC POLICY + HEALTH SYSTEMS Direct results (P ₁)
Facts			
Opinions			
	Medium-term Outcomes		
	INDIVIDUAL Developmental changes (I ₂)	NETWORKS and PARTNERS Developmental changes (N ₂)	PUBLIC POLICY AND HEALTH SYSTEMS Developmental changes (P ₂)
Markers	2011-12 study: Data collected via online survey – 37 questions to identify markers of change and indicate stories of change		
Stories			
	Longer-term Outcomes		
	INDIVIDUAL Transformative changes (I ₃)	NETWORKS and PARTNERS Transformative changes (N ₃)	PUBLIC POLICY AND HEALTH SYSTEMS Transformative changes (P ₃)
Indicators			
Reflection			

Adapted from Grove, Kibel, Hass, 2005

Methodology – Survey Topics

Questions covered following topics:

- **Information about fellow**
- **Prolead's influence on fellow**
- **Country team projects**
- **Preparation of, and support for, fellows and country teams by Prolead partners**

Findings from evaluation

- Individuals
 - Broaden understanding of health promotion
 - Develop skills for analysis and advocacy
 - Appreciate/ develop skills in team/coalition work
- Networks and partners
 - Broadened links within Ministry of Health
 - Extended links across government and with community organisations
 - Sense of being a global movement
- Policy and systems
 - Change is possible

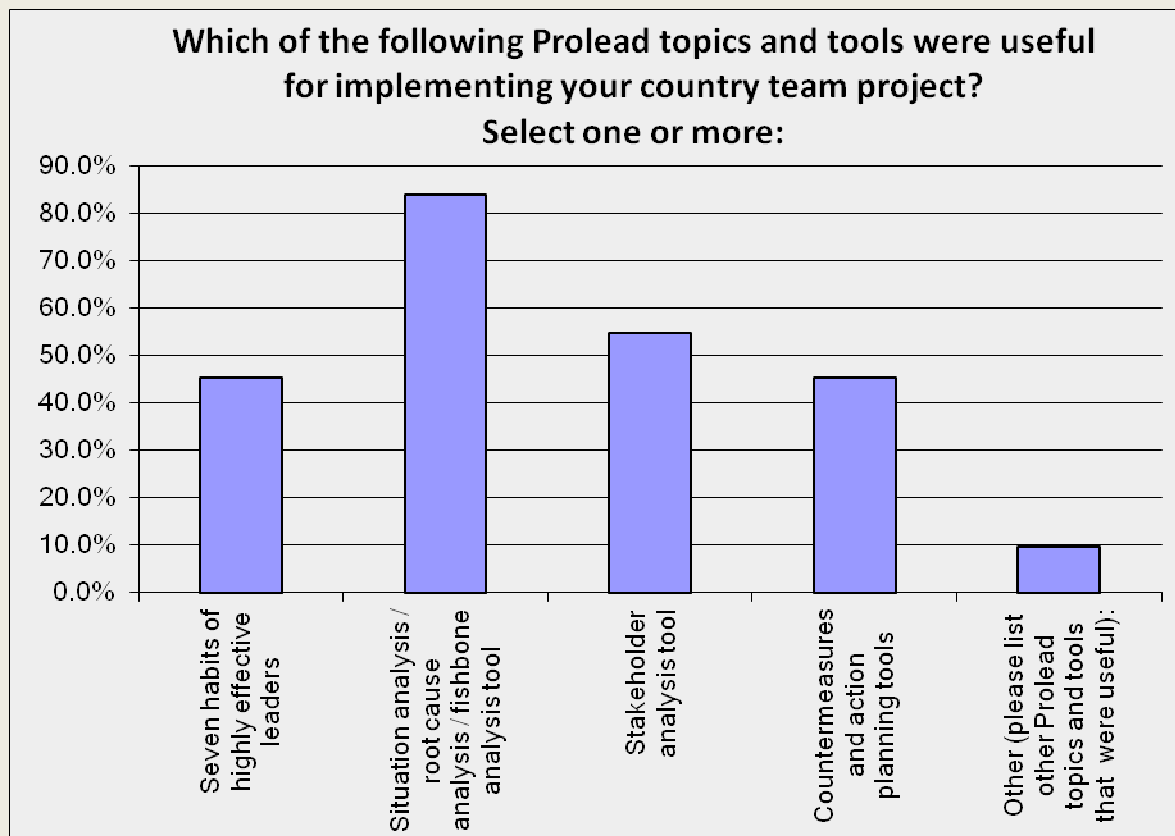
Findings

Experiences and impacts
of Prolead on
participants

Changes At Individual And Network/Partnerships Levels Since Participating In Prolead

- 94.3% stated “my understanding of health promotion has changed”
- 94.3% stated “my understanding of my role in health promotion has changed”
- 85.7% stated “I approach my work and work environment differently”
- 71.4% stated “the networks and partnerships I use in my work have changed”

Usefulness of Prolead topics and tools



Seven habits of highly effective leaders - 45.2%

Situation analysis / root cause analysis / fishbone analysis tool - 83.9%

Stakeholder analysis tool - 54.8%

Countermeasures and action planning tools - 45.2%

Other (please list other Prolead topics and tools that were useful): 9.7%

Comments:

- Tool were simple to follow and helped us easily understand the complex issues.
- ‘7 Habits’: helped us to change our perceptions, try to think positively and make improvements.
- ‘Situation analysis tool’: allowed us to see clearly where the problem lies and what factors determine it; helped us to visualize our challenges and come up with some clear ideas for how we could overcome them. “At the beginning my, colleagues were looking at the diseases and not at the root causes by doing situation analysis. Then they realize the problem is with the structure and system.”
- Planning tools: for developing the plan (objectives, indicators, inputs, process, output, outcome and impacts)

Value Of Team Projects

- 87.1% reported outcome of country team project as expected

Key factors affecting project outcomes:

- 67.7% reported 'feasibility of project design'
- 48.4% reported 'importance of the project'
- 67.7% reported facing difficulties and challenges in implementing the project

Q 25

Mentoring of country teams

Did your country team have a mentor/ mentoring organization?

Yes	51.6%	16
No	32.3%	10
Don't know	16.1%	5
<i>answered question</i>		31
<i>skipped question</i>		13

Specific comments:

- ThaiHealth: our benchmark and they really did help us much.
- VicHealth: excellent mentoring all the way
- Swiss Health Promotion: very good choice because the consultant participated in advocating to other Ministries and showed experiences of Switzerland. This helped other ministries understand that this is not just MOH responsibility.
- La Trobe: provided a strong support and practical mentoring to obtain funding and develop specific plans to persuade key persons.
- WHO and SPC: more like mentoring organizations to our program which are both very active and supportive in time of wanting

General comments:

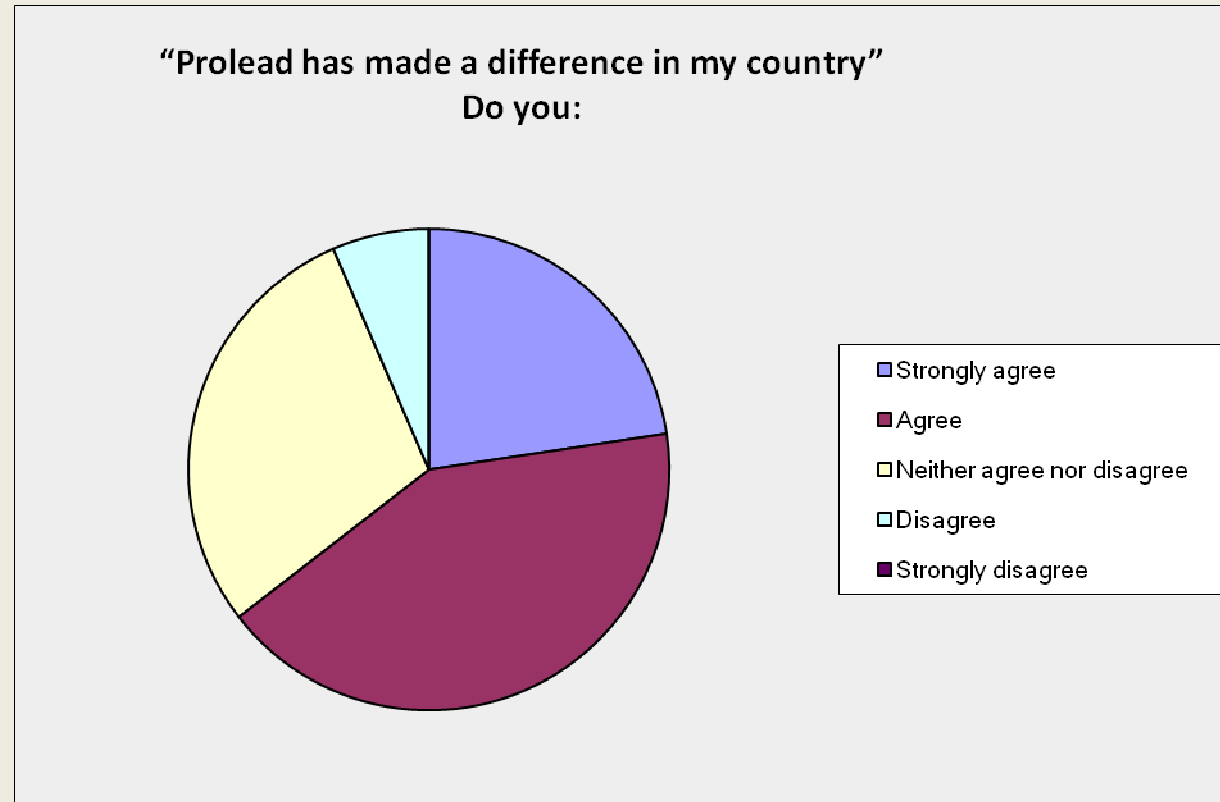
- Support from [coordinating organization] was crucial to help us progressing
- We identified our own mentors. We received mentoring support in country, via email and telephone conversation
- Very supportive in guiding the team and providing information related to the project
- With the expertise in HP, the mentor provided suggestions and support which were very useful to develop our project and the project has been very successful
- It was excellent.. it's just that our team did not maximize the gain that could be achieved from our mentor/s
- Mentor able to travel to home country to facilitate and assist in the project.
- Provided us with a report about current HP situation and how we can improve it

Findings

Impacts of Prolead on
Countries

Q 33

Impact of Prolead on country



Strongly agree - 22.6%

Agree - 41.9%

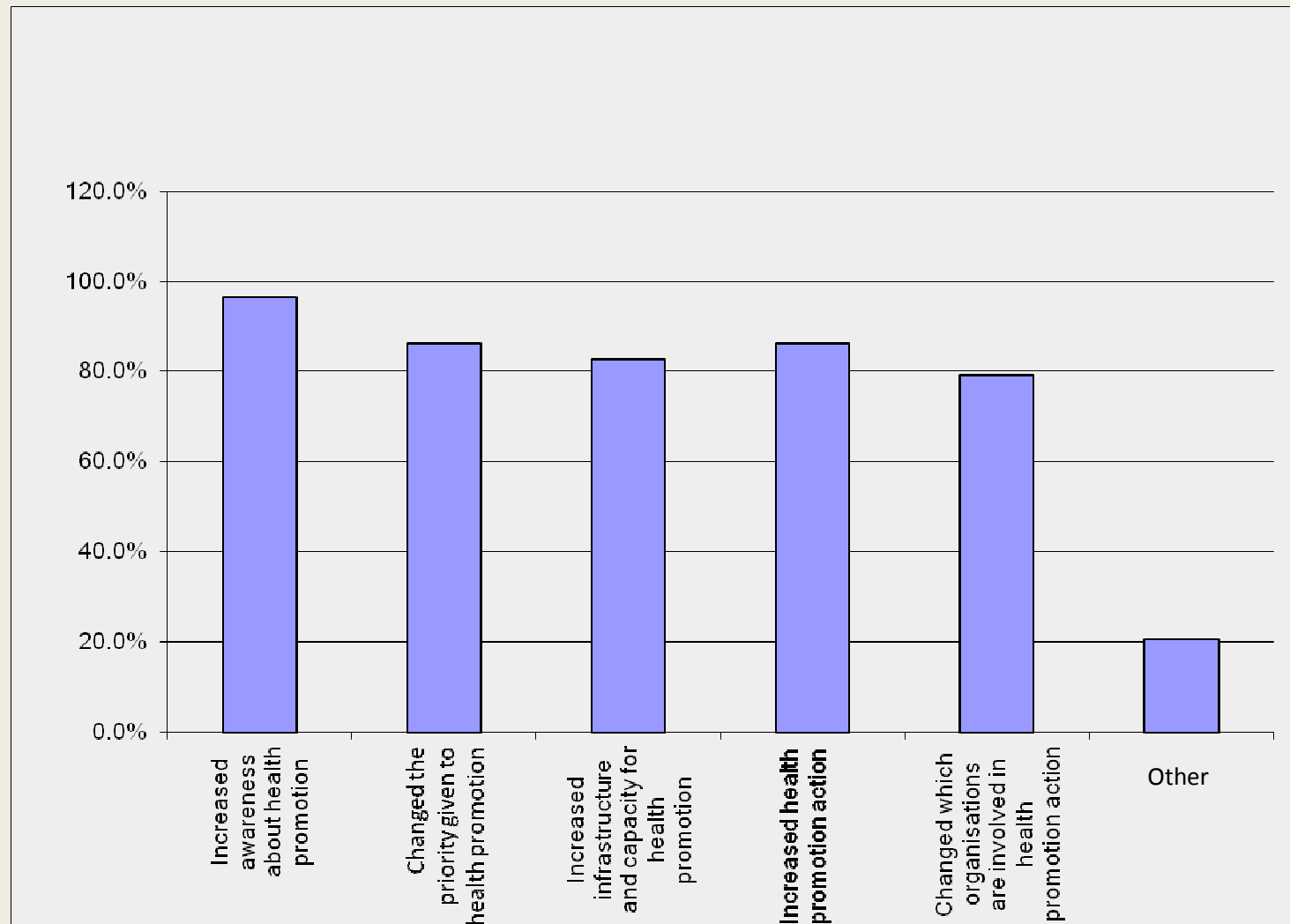
Neither agree nor disagree - 29.0%

Disagree 6.5%

Strongly disagree 0.0%

Q 33

Impact of Prolead on country



Q 35 Why Prolead may not have made a difference in your country, or as much of a difference in your country as you expected

Program factors

- **Duration –**
- **Follow up –**

Project concept/ design

- **Ambitious**
- **Prolead may not able to solve our financial sustainability**

Project implementation factors in country

- **Timing –**
- **Capacity –**
- **Inaction after Prolead**
- **Political will**

Challenges and issues

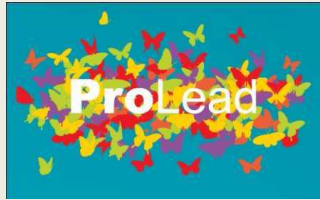
- Team composition
- Team stability
- Project workload
- Navigating the context
- Timely and appropriate mentoring
- Getting to 'tipping point'

Summary

- Prolead generally met or exceeded expectations – for some, expectations different to actual program (eg action-oriented not didactic learning); 64.5% reported that Prolead made a difference to their country
- **Individual level** – developed new personal, leadership, technical, managerial skills; gained knowledge in HP, other areas
- **Networks and Partnerships level** – some Fellows formed new networks/partners and expanded existing ones
- **Public Policy and Health Systems level** – some new financing mechanisms and HP infrastructure (within govt/ between govt and other parties) developed
- Relational elements (teams, individual/ team or project mentoring, meetings) critical to build HP understanding and know-how, repertoire of problem solving tools and networks/partnerships enabling action

Issues to consider

- Follow up – technical expertise, collegial support (for what purposes?)
- Resources for continuing/ new work
- National HP capacity
- Changing contexts – political, economic, social
- Unexplored, undocumented lessons



Opportunities for INHPF

- I. Jointly develop information and other resources about Health Promotion Foundations with foundations for advocates, emerging foundations/ boards
- II. Facilitate sharing of expertise and experiences
- III. Enable networking
- IV. Fund and provide technical support/guidance and mentoring
- V. Undertake advocacy – with/ on behalf of countries/ country teams