

Highlights from the Health Affinity Circle Survey December 2006

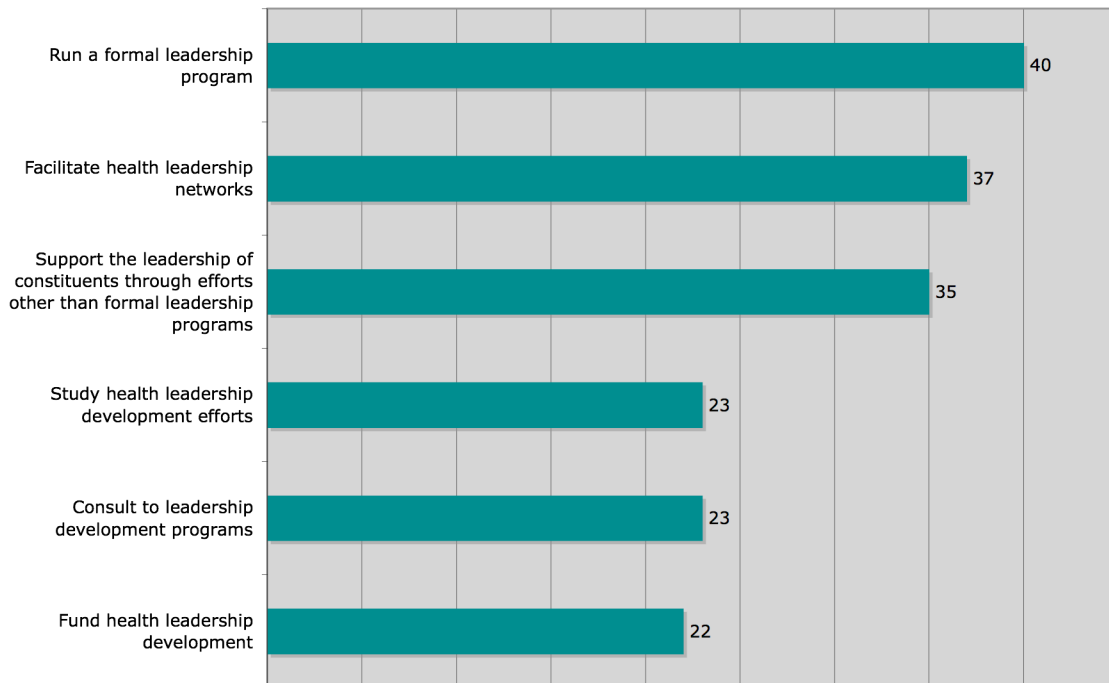
Introduction

As the Health Affinity Circle prepares to expand its work together, LLC designed a survey that we sent to 132 people who run, fund, evaluate, study, and consult to health leadership development programs and community organizing efforts. We used this opportunity to invite new people to join us who have not attended previous health affinity circle gatherings or other LLC convenings. 44% (58) responded to the survey. In addition, people generously gave us 35 additional names of people who they thought would be interested in participating.

Our hope is that the findings of the survey will begin to orient you to who is interested in the Circle, what programs they run, who they serve, what issues they address, what networks they are in, how they hope to benefit from the Circle, what they have to offer, what motivates them to participate, and what they think the most pressing health issues are. We believe sharing this information will create a stronger foundation for working together when we get together face-to-face in March.

What We Do

Number of Respondents Who Do Each Activity

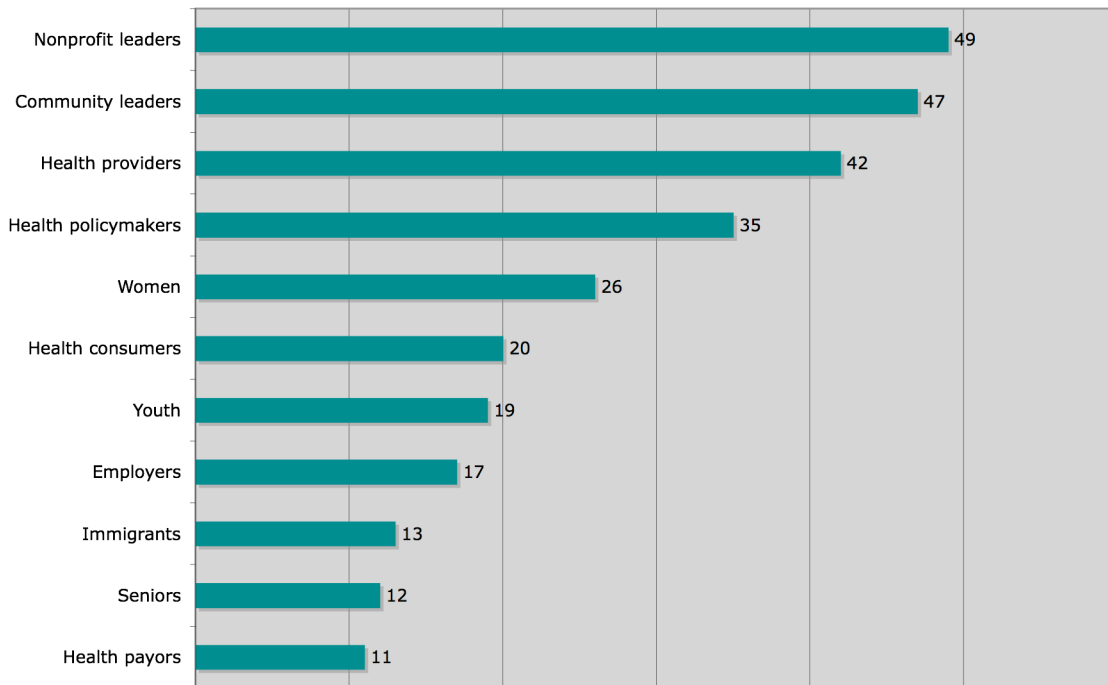


Leadership Programs We Run

- International Family Planning Leadership Program
- Leadership Development for Mobilizing Reproductive Health
- Visionary Leadership Program
- Population Leadership Program
- Leadership Development for Interethnic Relations in Health
- Kentucky Public Health Leadership Institute
- National Environmental Health Leadership Institute
- Connecticut Foundation Health Leadership Fellows Program
- MetroWest Health Leadership Program
- GoJoven Youth Leadership Development Fellowship
- European Youth Network on Sexual and Reproductive Rights (YouAct)
- Every Block a Village
- Kansas Health Foundation -- Community Leadership Initiative
- Sierra Health Foundation Leadership Program
- CORO Health Leadership Program
- RWJ Executive Nurse Fellows Program
- Developing Leadership in Reducing Substance Abuse
- RWJ Community Health Leadership Program
- RWJ Clinical Scholars
- RWJ Scholars in Health Policy Research Program
- Green Health Care Program
- Blue Shield of California's Clinic Leadership Institute
- Institute for Public Health and Faith Collaborations
- Maternal and Child Health Management Academy
- Maternal and Child Health Emerging Leaders Institute
- Mid-America Regional Public Health Leadership Institute
- International Center for Health Leadership Development
- Advanced Executive Public Health Leadership Institute
- Women's Health Leadership (WHL)
- Central Valley Health Policy Institute Leadership Program
- Healthy Native Communities Fellowship
- Leadership, Management, and Sustainability Program (USAID)
- Managing Ambulatory Health Care
- Collaborative Leadership
- Women's Leadership Circles
- Reclaiming Futures National Leadership Fellowship Program (RWJ)
- Join Together National Fellowship Program
- Massachusetts Regional Public Health Leadership Program
- Central Valley Partnership for Citizenship Immigrant Leaders Fellowship Program
- LeaderSpring Fellowship Program
- South LA Health Leadership Training Program
- Community Health Foundation of Western and Central New York Community Health Leadership Fellows Program
- Southeast Public Health Leadership Institute
- Kellogg Fellowship for Emerging Leaders in Public Health
- California Alliance for Retired Americans
- Public Health Education Leadership Institute

Who We Serve With Our Leadership Programs

Number of Programs that Serve Each Group



What Issues We Address in Our Programs

- Family Planning, Reproductive Health, HIV/AIDS
- Reducing/Eliminating Health Disparities
- Public Health
- Children's Health
- Elder Health
- Federal Health Policy
- Access to Health Care for the Uninsured, Poor and Underserved
- Food Security, Health Nutrition
- The adoption, implementation, dissemination and sustainability of evidence-based public health practices and innovations
- Diversity
- Millennium Development Goals
- Universal Health Care
- Women's Health
- Community Health
- Health, Environment, and Sustainability
- Substance Abuse
- Systems Based Changes to Create Coordinated Care
- Healthy Lifestyles

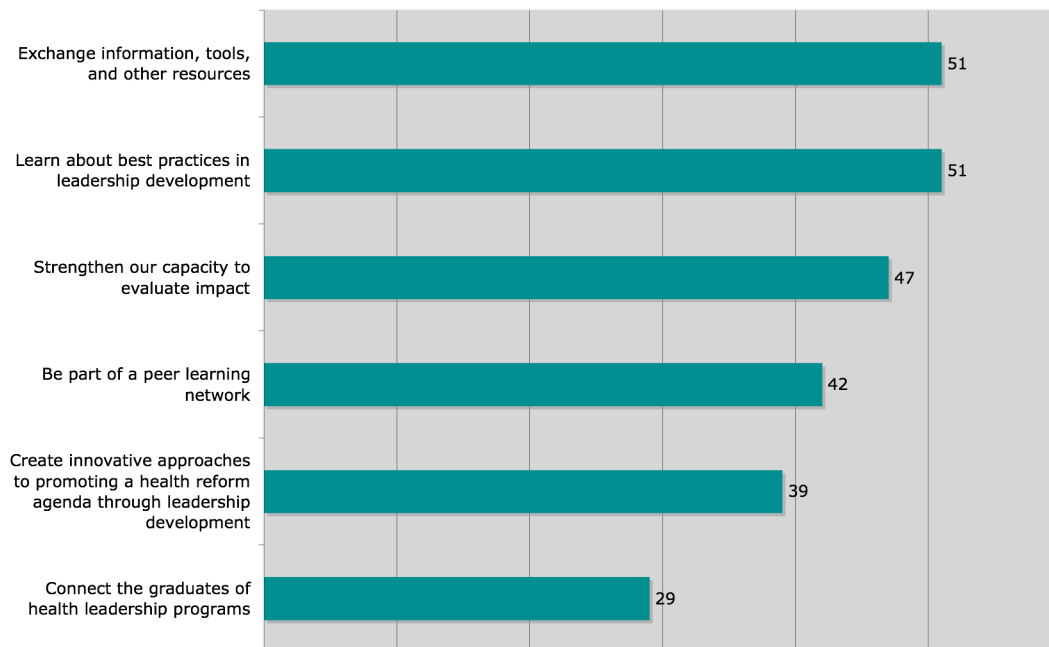
Networks We Participate In

- Community Health Councils
- Community Health Foundation of Western and Central New York Fellows Network

- Health on Wednesdays (Women in Washington DC in Health Care and Government Relations)
- Executive Women’s Network (Association Leaders in Health Care)
- Immigrant Leaders Fellowship Network
- Health Policy Leadership Program Alumni Network
- Public Health Leadership Society
- Association of Public Health
- Global Health Council
- California Health Funders Strategy Group
- Kellogg Leadership Fellowship Alliance
- Health Rights Organizing Project
- Central Valley Health Policy Institute
- National Association for Health and Fitness
- National Public Health Leadership Development Network
- Leadership Learning Community
- Health Solutions Alliance
- Population Fellowship Program Network
- International Reproductive Health and Family Planning Network (Packard funded grantees)
- Community Clinic Association of LA County
- Hospital Association of Southern California
- RWJ Community Fellows Network
- MetroWest Community Health Coalition
- New England Health Funders Program Directors Network
- One Care Now
- National Cooperative of Health Networks

How We Hope to Benefit From the Health Leadership Affinity Circle

How We Hope to Benefit From the Health Affinity Circle



What We Have to Contribute

Experience

- Years of working in and with low income and marginalized communities of color
- Experiences working with grassroots emerging immigrant leaders
- Working with underserved groups
- International health expertise
- Experience working with 160 physician leaders in doing on-going training and development
- Personal experience with mentoring/mentees
- 10 years experience running an advanced leadership program for nurses in senior executive roles
- 20 years of planning and evaluation work in public health, with an emphasis on participatory research with communities, including diverse communities and tribal communities
- Extensive work in Indian Country in NM and AZ. Community mobilization and empowerment. Working with diverse groups and teams on many different issues from primary care to school health to maternal child health to leadership.
- Expertise in working with low-income, multiracial, multiethnic youth and the conditions of these youth and their families
- Almost 30 years of working in health underserved areas on community-based services and alternatives
- Experience in the private sector (I believe strongly in looking beyond the natural boundaries that we create - that deriving stimulation and new thinking from other than the typical places is always good for innovation)
- Experience in training young economists, political scientists, and sociologists to become health policy researchers
- 7 years of experience of the PLP in working with and helping to strengthen leaders from 24 developing countries, including curriculum, evaluation, and ongoing collaborative work
- More than 15 years' experience in the non-profit community-based setting, now working in an institutional, medical center/university setting. Bring both those perspectives, with the addition of being from the South and having some perspective on the unique challenges we have here
- Cross cultural leadership development experience
- Girls leadership development experience
- Honesty about what is really happening and a vision to measure true outcomes not just demanded performance. The ability to see outside of business as usual or political correctness in order to truly discover what is happening and what can be done
- Experience in running training and development and organizational development programs in for-profit/large corporate environments as well as public arena
- Success working with community workers/activists to enhance their community organizing and leadership skills by deepening their analysis around race, class, gender, sexual identity, and other forms of oppression. We are hoping to support movement building and social justice work within the health arena

- Experience in healthcare networks and alliances and the leadership challenges they face

Knowledge

- A broad appreciation and understanding of what constitutes leadership and how to cultivate that in others
- Content knowledge in health IT and capital facility development areas
- A broad and deep understanding of some of the health and health care challenges we are facing (from grassroots community work to health care systems to federal level programs/policies) and a desire to think creatively about how health leadership development can play a role in tackling these programs and creating innovative solutions
- Share models of how religious leadership is active with the health sector in working to eliminate health disparities
- Knowledge of sustainability and methods for incorporating into health care and health leadership

Program design and curriculum

- How to create an integrated leadership fellows design for organizational leaders
- A particular approach to leadership development focusing more on intergroup/interracial relationships as a means to social change focused on better health
- Low cost approaches to leadership development
- Community power building outreach techniques -- one-on-ones, house parties etc.
- Use of worldview and history of social movements in trainings
- New critical thinking approaches to health leadership development
- Setting up and operating a university-based health leadership program, including activities for participants after they return home
- Ways we have successfully engaged multi-sector teams interested in impacting systems level change
- Elements of our leadership curriculum that contribute to individual and group transformation
- Grassroots leadership development methods
- How to create and deliver multiple collaborative community projects to actively engage participants in improving community health outcomes
- Building the social assets of community people for stabilizing and transforming neighborhoods
- Mentoring programs and coaching skills
- Effective facilitation of action learning
- Strategies for building cross-sector peer learning communities (including health care)

Leveraging leadership development

- Ways to connect Immigrant Leaders Fellowship Alumni to opportunities
- Collaborating on this idea of boundary-crossing leadership (breaking down the silos, etc.)
- Experience/skills to increase organizational capacity that enables individuals and work groups (teams) to transfer leadership constructs and behaviors to the challenges at hand
- Ability to tie leadership development to succession planning, performance improvement, and organizational development and change
- Helping organizations working in international settings to become exposed to, adapt and apply promising approaches to leadership development in their programs

- Real time application of leadership training with actual community based healthcare initiatives

Investing in leadership development

- Lessons learned about what helps or hinders practitioner and senior management engagement/investment in leadership development efforts
- Promoting leadership development among organizations and programs (these organizations frequently do not see the importance or want to invest in this area)

Evaluation and research

- Daring to Lead-type studies of CEOs and medical directors in community clinics
- Expertise in using a web-based follow through management system (for tracking and monitoring leadership development goals)
- Research and the development of a theoretical model of the causes of health inequities that forms the basis of our outcome evaluations. The same research guides our program and evaluation models.
- Statistics, psychometrics and evaluation
- Experience in evaluating the RWJ Pursuing Perfection Program (a national initiative to improve hospital quality and performance)
- Experience developing and monitoring international leadership development programs and networks focused on young people

<h2>What Would Most Motivate Us To Participate in the Circle</h2>
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Program Design and Support

- Insights into how to develop physician leaders as forces for change
- How to increase the number of diverse applicants/participants/grantees from under-represented groups
- Create the tools and training to support our healthcare leaders in this time of change...we have a lot of work to do.
- Develop more case studies and other exercises for my own program
- Learn more about practical, low-cost ways to promote leadership development at all levels as a regular part of training, human resource development and organizational development
- Learn other ways we can promote leadership and glean some ideas to strengthen our existing health leadership program

Evaluation

- How to evaluate leadership programs both retrospectively and prospectively
- Promising methods to evaluate leadership development work
- Best practices for leadership programs
- Understand what works and the impact leadership development has on health outcomes
- Learning more about best practices in leadership development approaches, training strategies and skill building exercises, tools etc. in specific leadership competency areas

Connections and Networks

- Connecting with others working with American Indian/Alaskan Native populations/communities.
- Potential to find more like-minded trainers and networks
- Expand my network of peers with interest in this area
- Connect with others investing in leadership development

- To learn from others about their approaches to leadership development and to gain more knowledge about how to foster leadership development for health care providers
- Sharing proven ideas and techniques and having the opportunity to personally re-charge
- Meet well qualified and experienced leadership trainers to engage in my projects
- Connection to funding sources and partner organizations interested in collaborative work
- Community and labor organizers and grassroots leaders and union members working together
- Strengthen my program's network to other leadership programs

Leveraged Impact

- The hope that by working together we could all learn from each other and improve our body of work, and help move the health agenda forward in our nation.
- The possibility of continuing to build upon the work of the Immigrant Leaders Fellowship Program through resources and capacity building; helping constituent communities and partner organizations to build grassroots leadership; and to integrate a legacy of new leadership and change for Central Valley communities.
- Connect leadership development as means to improve health outcomes
- Institutionalization/sustainable ways of integrating leadership development as part of organizational practices
- Take a look at the industry with fresh eyes and discover what new practices can be applied to make our health practices more effective
- The possibility of creating some innovative perspectives toward making workable changes to the U.S. health care system and addressing the inherent inequalities.
- The opportunity to synthesize principles of effective work and to make more visible the outstanding and insightful work of others.
- Affecting public policy in public health related issues

What We Think Are the Most Pressing Health Issues

Leadership priorities

- Investing in meaningful grassroots immigrant and migrant leadership development with resources and capacity building of collaboratives authentically grounded to constituent communities
- Professional development for front-line and mid-level staff
- Defining leadership differently
- Supporting new paradigms of leadership within health promoting communities and organizations
- Community empowerment and self-determination
- Regaining a sense of community and mutual responsibility for one another
- Sharing new ways of living and working that support whole health and healthy relationships
- Building/designing healthy communities
- Evidence based practice and outcome evaluations
- Succession planning
- Transitions in leadership within nonprofit community
- Bringing more people of color into the process
- Improving the leadership pipeline in most professions, especially nursing

- Developing leaders who can directly influence government policies regarding health care delivery systems
- Supporting leadership/management systems that support innovations and policy changes over long time periods
- Engaging our constituents in advocating for health promotion/disease prevention programs, funding, environments, etc.
- Ability to lead significant organizational change and paradigm shifts in large bureaucratic organizations (eg. government) in order to build capacity (in the community and community orgs as well) to reduce health disparities in the US

Leadership training approaches/skill development

- Organizing skills targeting marginalized communities most impacted by health disparities
- Ability to engage diverse communities in health issues
- Advocacy for culturally competent approaches to health
- Trainings that quickly produce shifts in people's thinking, so that many more people see: 1. HC is in crisis 2. Major changes are needed 3. Decision makers won't make major change on their own 4. We can do it -- and we must -- by uniting in organizations that press for real change
- Advocacy skill building among health and human service organizations
- Policy and advocacy training is essential for systems change
- Training and skill development for youth leaders around systems analysis, policy analysis, coordinated cross-sector strategy where youth leaders play a role
- New models for how to support unstructured, fluid, dynamic change activities and still see and measure outcomes
- How to support staying connected
- Determining the elements of a leadership program that TRULY make a difference in contributing to positive community change
- Understanding the role of faith in promoting social justice
- Helping nonprofit leaders think strategically
- Helping nonprofit leaders incorporate sustainability planning into their work so that they are more likely to launch and sustain new and innovative programs
- Cultural awareness and cultural competency
- Networking and collaborating skills

Systems approach/boundary-crossing

- The multiple sectors of healthcare aren't necessarily talking to one another and approaching healthcare holistically. We're much too reactive and not proactive enough.
- Need to improve meta-leadership across multiple boundaries to provide solutions to vexing public health challenges
- Systems thinking for clinicians
- Developing inter-disciplinary approaches and partnership to achieve changes in health status; getting people out of their professional silos
- Health leaders need to understand how civil society functions and how we can create sustainable change
- Organized multi-racial/cultural base of grassroots members and leaders articulating desired change and working together to make the change
- Increased collaboration amongst health organizations to address immediate and long-term needs (i.e. diminishing the walls that create "silos" in the healthcare industry)
- Bridging the gap between providers and health education and outreach efforts
- Reducing the silos within and among nonprofits that keep leaders from thinking outward

Organizational change

- Changing the culture of health care organizations to embrace quality improvement goals and to become learning organizations
- Incorporation of sustainable values from the top down in health care
- Frontline workforce interdisciplinary team work

Policy and political changes

- Changing public policy such that our healthcare system is designed to provide healthcare services (including prevention) to all
- Getting elected leaders to understand that the social determinants of health are the biggest determinants of health outcomes not health care and to put more emphasis on age 0-5 so that we have an even greater chance of improving health outcomes down the road
- Convincing policymakers to change their views of what is possible (and needed) to achieve meaningful health care reform
- Universal health care
- Green driven policies
- Funding

International health issues

- In global terms, the challenges are poverty, corruption, US aid policy, global trade policies, policies of bi- and multilateral donors
- Internationally -- AIDS, TB and malaria
- Human resources crisis in developing countries - "brain drain."
- Human rights violations
- Population issues
- Womens/girls education
- In the developing country setting: institutional and individual capacity development reaching some percentage of individuals at all levels in the system, from policy makers, through middle managers and service providers, through to community-leadership involvement and support, so that services can be expanded and quality human resource development, training and advocacy/action networks can be developed and sustained

Domestic health issues

- Health disparities
- Crisis in emergency medical care
- The uninsured
- Mental health
- The dismal state of the public health system in general
- Access to high quality accessible health care for all
- Racial justice/equity
- Youth
- Elders
- Patient/Family-centered care
- Chronic care
- Shaping the nature of public dialogue in the U.S. about universal right to health care
- Cultural competency