|  |
| --- |
| AFYA BORA CONSORTIUM GLOBAL HEALTH LEADERSHIP FELLOWSHIP PROGRAM |

|  |
| --- |
|  |
| LEADERSHIP SKILLS MODULE: Fellows Guide |
|  |

|  |
| --- |
| Created by: Yohana Mashalla, John Cheryiot, and Neal Nathanson  |



AFYA BORA CONSORTIUM

LEADERSHIP MODULE



Afya Bora Fellows, January 2011 – Nairobi, Kenya

Contact Us:

|  |  |
| --- | --- |
| Yohana MashallaDean, Faculty of Health Sciences, University of Botswana | University of BotswanaFaculty of Health SciencesBlock 246, Private Bag 0022, Gaborone 267Botswana; +267 355 4557*yohana.mashalla@mopipi.ub.bw* |
| Neal NathansonAssociate Dean for Global Health, U Pennsylvania, School of Medicine | 1007 Blockley Hall, School of Medicine,U Pennsylvania, 423 Guardian Drive,Philadelphia, PA 19104-6021, USA;215 898 0848*nathansn@upenn.edu* |

TABLE OF CONTENTS

[**OVERVIEW: GOALS OF THE MODULE** 4](#_Toc359384218)

[**WEEKLY SCHEDULE: LEADERSHIP MODULE** 5](#_Toc359384219)

[**CASE STUDIES FOR PRESENTATION** 6](#_Toc359384220)

[**CASE STUDY 3: ENTREPRENEURSHIP** 15](#_Toc359384221)

[**CASE STUDY 4: PEOPLE SKILLS: CONSENSUS BUILDING** 16](#_Toc359384222)

[**CASE STUDY 6: MENTORING** 17](#_Toc359384223)

[**APPENDIX 1** 18](#_Toc359384224)

[**LEADERSHIP ATTRIBUTES AND COMPETENCIES** 18](#_Toc359384225)

[**APPENDIX 2** 23](#_Toc359384226)

[**LEADERSHIP SKILLS ASSESSMENT** 23](#_Toc359384227)

[**APPENDIX 3** 27](#_Toc359384228)

[**INSTRUCTORS, SPEAKERS, AND FELLOWS** 27](#_Toc359384229)

[**NAMES AND RELEVANT INFORMATION** 27](#_Toc359384230)

[**APPENDIX 4** 30](#_Toc359384231)

[**BIBLIOGRAPHY** 30](#_Toc359384232)

# **OVERVIEW: GOALS OF THE MODULE**

Leadership is a complex art, easier to recognize than define. It is not a body of knowledge and cannot be "taught" using conventional didactic approaches. We have designed the leadership module to identify the attributes that are important for effective leadership, and to convey the most important of these through several approaches: (i) problem-solving exercises (“case studies”) based on current health issues in sub-Saharan Africa that also illustrate various leadership attributes; (ii) the use of African instructors from different health disciplines who will also serve as role models; (iii) talks by African role models to discuss leadership attributes and challenges based on personal histories; (iv) discussions of the leadership attributes and leadership experiences, with an explanation of the goals of the module.

The goal is NOT to inculcate a body of factual information, but rather to empower trainees to exercise leadership, by conveying the less tangible attributes that together constitute effective leadership. We hope that this module will provide trainees with a heightened awareness of the skills that are needed for effective leadership, many of which will be further developed in other modules within our curriculum.

This module will involve substantial trainee participation, presentations of personal experiences, problem-based exercises for small trainee groups followed by presentations, critiques, and discussions led by trainees. Fellows will be given case studies and challenged to analyse them and come up with innovative solutions to controversial and important health issues in southern Africa. There will be limited conventional didactic lectures.

Leadership skills can be divided into a set of competencies that are shown in APPENDIX 1. Much of the time during this module is devoted to the Case Studies that illustrate this range of leadership skills.

To help each Fellow understand the goals of this module and get the most from it, we have devised a self-assessment questionnaire (APPENDIX 2) to be completed at 3 times: (1) at the beginning of the module; (2) at the end of the module; and (3) at the completion of the whole Fellowship. Please complete the questionnaire and submit it by the end of the first day of the Leadership module.

# **WEEKLY SCHEDULE: LEADERSHIP MODULE**

|  |  |
| --- | --- |
| Time | Days of the week |
| Day 1 | Day 2 | Day3 | Day 4 |
| 8.30-9.30 | Lecture:Orientationlearning objectives,leadership skillsSELF ASSESSMENT | Fellows present short bios  | Case 1: Leadership attributes | Case 4: Consensus building |
| 9.30-10.30 | Fellows present short bios | Preparation for presentations Questions and Answers with Instructors | Case 1: Leadership attributes | Case 4: Consensus building |
| 10.30-11.00 | TEA BREAK |
| 11.00-13.00 | Fellows present short bios | Preparation for presentations | Case 2: Strategic thinking | Case 6: Mentorship |
| 13.00-14.00 | LUNCH BREAK |
| 14.00-15.00 | Role model presentation | Preparation for presentations | Role model presentation | WRAP UPLessons learned |
| 15.00-16.30 | Fellows present short bios &Instructor summary | Video presentation: Invictus | Case 3: Entrepre-Neurship | WRAP UPLessons learned |
| 16.30-17.00 | TEA BREAK |

# **CASE STUDIES FOR PRESENTATION**

##

Organization of work

Each case study will be assigned to a small group (usually 4) of Fellows. Group assignments are shown in APPENDIX 3. To prepare their presentations, Fellows will have all day Thursday. Instructors will be available to consult and answer questions.

Each case is presented in several parts: background information; the problem, and questions to answer. The work product should be prepared as a power-point that will be presented by members of the trainee group to the whole group of trainees and instructors, for discussion and critique.

About 2 hours have been allotted for the presentation and discussion. The oral presentation will be of about 20 minutes, supported by a power-point set of slides. The audience may interrupt the presentation for questions and discussion. Toward the end of the discussion period, the instructors will comment on the presentation and will lead a discussion of lessons learned from the case study.

Leadership competencies and skills

Each of the Case Studies focuses on certain leadership skills, as shown in the table below. Toward the end of the discussion of each Case Study, Fellows and Instructors will discuss which skills have been illustrated by the study and what lessons have been learned.

LEADERSHIP COMPETENCIES AND SKILLS THAT ARE ILLUSTRATED IN EACH CASE STUDY

| COMPETENCYCATEGORY | SKILL OR CHARACTERISTIC | CASE STUDY | MODULE |
| --- | --- | --- | --- |
| STRATEGIC THINKING | Ability to think critically and to analyse a problem | Case 1: Leadership attributesCase 2: Strategic thinking | Leadership skills moduleImplementation science moduleMonitoring and evaluation module |
| Ability to develop a coherent plan for a project or programme |
| Ability to set priorities for programmatic goals |
| Ability to think boldly and come up with “out of the box” ideas |
| Willingness to take risks in order to be an “agent of change” |

|  |  |  |  |
| --- | --- | --- | --- |
| COMPETENCYCATEGORY | SKILL OR CHARACTERISTIC | CASE STUDY | MODULE |
| MANAGEMENT SKILLS | Ability to organize the logistics to implement a programme | Case 1: Leadership attributesCase 2: Strategic thinkingCase 3: EntrepreneurshipCase 4: Consensus building | Programme and project management moduleCommunications moduleImplementation science moduleMonitoring and evaluation module |
| Ability to develop a budget and defend it  |
| Ability to select effective employees and handle human resource issues |
| Concerns for your organization in contrast to your personal goals and needs |
| Ability to raise funds for your organization |

|  |  |  |  |
| --- | --- | --- | --- |
| COMPETENCYCATEGORY | SKILL OR CHARACTERISTIC | CASE STUDY | MODULE |
| COMMUNICATION SKILLS | Ability to write clearly and concisely | Case 1: Leadership attributesCase 3: Entrepreneurship | Communication skills moduleTechnology and informatics module |
| Ability to speak clearly and be easily heard |
| Ability to speak in a logical and persuasive manner |
| Ability to communicate with the media |

|  |  |  |  |
| --- | --- | --- | --- |
| COMPETENCYCATEGORY | SKILL OR CHARACTERISTIC | CASE STUDY | MODULE |
| PEOPLE SKILLS | Good listening | Case 4: Consensus buildingCase 6: Mentorship | Leadership skills moduleCommunication skills moduleProgramme management module |
| Being able to maintain confidentiality where appropriate |
| Establishing rapport with colleagues |
| Ability to develop a consensus among a group or team |
| Ability to mediate disagreements among staff or colleagues |
| Ability to mentor and coach others |

|  |  |  |  |
| --- | --- | --- | --- |
| COMPETENCYCATEGORY | SKILL OR CHARACTERISTIC | CASE STUDY | MODULE |
| PERSONALCHARACTERISTICS | Personal integrity | Case 1: Leadership attributes | Leadership skills moduleCommunication skills module |
| Reliability and on-time completion of tasks |
| Consistency |
| Transparency and openness |
| Being a “self-starter” who takes initiative |
| Being innovative  |
| Charisma |

CASE STUDY 1: LEADERSHIP ATTRIBUTES

In the recent years, many health professionals have been appointed to leadership positions and management of large scale health programmes in their countries. There is now a consensus that in many countries medical education training programmes are compact and do not impart to graduates sufficient knowledge and skills for the management of health care systems and programmatic services. With increasing demand for quality services, strategic planning and working in teams, there is a new vision for leadership. “*The new leadership will not be provided by a ’take charge elite’ but will emerge from the capacity that lies within each and every person. It will be leadership that does not presume to have all the answers, but one that seeks to empower others”, as stated by* Annabel Beerel, in "Leadership through Strategic Planning". Afya Bora Fellowship aims at training leaders in global health, therefore, it is important that the definition/meaning of leadership and leadership attributes are clearly understood.

Problem

You have recently been appointed Permanent Secretary to the Ministry of Health in your country after completion of a leadership training fellowship. An international organization has keen interest in your country and wants to operate a large scale health programme on Non-Communicable Diseases (NCD). However, the International Organization will not commit the funds to your ministry until it is assured that you have appointed a competent in-country Programme Manager who - in addition to being a holder of an advanced degree in a health profession - MUST have outstanding leadership attributes. You have at most two weeks to identify and appoint a person suitable for the post of Programme Manager who in your opinion has the required leadership attributes.

Challenge

* What do you understand by the term “leader”?
* What leadership values will you be are looking for?
* What do leaders do different from Managers?
* In your opinion, what influences leadership?
* What criteria will you use to determine the leadership potential of candidates for this new position of Programme Manager?
* How can you ensure continued building of leadership competencies in your Ministry?

#

CASE STUDY 2: STRATEGIC THINKING

Strategic thinking is an important attribute of successful leadership, and some would claim that it is the key to leadership. Strategic thinking involves collecting information about the problem, analysis of the issues, bold thinking that may challenge accepted views, and an ability to synthesize these elements into a practical proposal or solution.

Problem: Measuring the rate of mother-to-child transmission (MTCT) of HIV.

Country X in southern Africa has a population of about 10 million, and the prevalence of HIV/AIDS among persons aged 15-49 is guesstimated at about 25%. The party in power has recently changed, and there is a newly elected President and a newly appointed Minister of Health. The Minister of Health is a nurse with a professional background in nurse midwifery. The President campaigned on a platform that included a promise to try to deal with the HIV/AIDS epidemic, including a commitment to markedly reduce the number of children who acquired HIV through mother-to-child transmission (MTCT). Currently, there is a newly launched program of voluntary counselling of adults attending outpatient clinics with those tested positive being referred for evaluation and potential anti-retroviral treatment. However, there is no program directed to the prevention of mother-to-child transmission (MTCT).

As one of her first actions the Minister of Health decides to invite an external group of consultants to advise her about the issue of MTCT. You are a group of health professionals and you receive a request from the Ministry of Health to formulate a program to measure mother-to-child transmission (MTCT) of HIV, in preparation to instituting a new program for the prevention of MTCT.

Challenge

The Ministry of Health asks you to address the following questions:

* How should Country X determine the impact of their proposed program to control mother-to-child transmission?
* How can the Ministry "guesstimate" the current number of babies born each year who are infected with HIV, based on the following information?

 The annual birth rate is 2.3% (2.3 births per 100 population per year); the prevalence of HIV infection among pregnant women is estimated at 25% (range 10% to 35% in different antenatal clinics), and the rate of transmission of HIV from infected mothers to their babies (absent any intervention) is 30% (range 20% to 40% in different studies)

* How can they determine their current ability to identify pregnant women who are HIV positive?
* How can they measure the actual rate of HIV transmission per 100 pregnant women who are HIV positive?
* Why is it important to develop this background information as part of the new program to prevent MTCT?

Final question

* Based on this case study what can you suggest some general principles about the process of strategic thinking?
* How is strategic thinking different from strategic planning?
* What processes are involved in strategic planning?

# **CASE STUDY 3: ENTREPRENEURSHIP**

Leaders of the 21st Century increasingly need to explore alternative or additional funding sources for their programmes as well as learn how to use the resources in new ways. This change in perspective will not only increase programme efficiency but also programme effectiveness. Such skills are increasingly needed by leaders in the governmental public health sector because of dwindling resource allocation by the governments. Furthermore, nongovernment organizations (NGOs) are playing an increasingly important role in health care. Many NGOs have to raise funds from governments, large donors, or members of the public to support their activities. Thus, the successful health leader may have to possess entrepreneurial skills as part of her/his toolkit.

Problem

You are a private physician in country N, who specializes in diabetes and its complications. The local Diabetes Association asks you to become head of their organization in place of the present director who is retiring. You would take on a mandate to develop a prevention program particularly focused on obesity. Furthermore, the Minister of Health, who was a classmate of yours in medical school, encourages you to take on this opportunity. He recognizes that the nutritional transition is manifesting in Country N but recognizes that the Ministry of Health does not have the resources to launch a program directed at this problem. You are persuaded that a new program to deal with nutritional issues could have an important impact on health in your country, and are excited by the challenge of leading it. However, the current income of the local Diabetes Association is very limited and is based on public contributions; furthermore, these funds are already stretched to support several diabetes treatment programs for low income patients. Clearly, you must raise external funding in order to launch the new “healthy living” program.

Challenge

Devise a plan to raise funds to operate a new “healthy living” program. Include in your plan answers to several questions:

* How would you develop a program plan to “sell” to potential donors?
* What would be the salient features of the program that might attract donor support? What are the short and long term goals of your program? Can these be measured? What promises can you make to potential donors?
* Do you need “endorsement” from authorities or other sectors of your community?
* Should you align your new program with existing NGOs in your country?
* Where might you look for substantial donors? Private sector? International health organizations? National or international non-profit organizations? The public?
* What “pitch” would you make to each group?

Final question

Can you enumerate some of the leadership qualities or attributes that contribute to entrepreneurial success?

# **CASE STUDY 4: PEOPLE SKILLS: CONSENSUS BUILDING**

##

Leaders always work with a group that is critical to developing plans and implementing them, although members of the group may vary for each task in hand. To accomplish this, the leader has to get the group to develop a consensus about a plan and an implementation strategy. This is essential since effective implementation will depend on the contributions of each member of the task force. If individual members don’t believe in the plan and feel that they were not involved in the planning process, and have little “ownership” of the plan, implementation will be jeopardized. The ability to build a consensus in this case is therefore a key attribute of effective leaders.

Problem: The role of NGOs in southern Africa

Country Y in southern Africa has a population of 30 million and an average annual GDP (gross domestic product) per capita of $1,500. There is a national health service but much health care is provided by international NGOs (non-government organizations) which operate independently of the National Health Service. It is estimated that there are at least 1,000 such NGOs operating in Country Y and that their aggregate budgets are equal or greater than the budget of the National Health Service. However, there is no information about the impact of these NGOs on the overall health of the population.

The Minister of Health has received a mandate from the Parliament and President, to review the NGO situation, with full power to recommend major revisions in the status and role of NGOs in Country Y. In turn, the Minister of Health has convened your team as a group of advisors to provide an analysis of the health services provided by the NGOs and to recommend actions to organize and harmonize the NGO programs. In particular, one goal is to ensure that the NGO programs support the activities of the National Health Service and provide sustainable capacity building for the nation's health system.

#

Challenge

* Will it be important to develop a consensus among the NGOs to achieve the assigned task? Why?
* How would you develop a consensus among the NGOs? What role should representatives of the National Health Service play in developing your report? Representatives of selected NGOs? Do you need a neutral broker to develop a proposed plan?
* What information would you need to collect about the NGOs operating in Country Y?
* Should there be a national registry of all NGOs, both international and local? Should there be an application process required before an NGO is permitted to work in Country Y?
* How should the work of each NGO be harmonized with that of the National Health Service?
* How should NGOs be expected to build health worker capacity?

##

Final question

* What does this case study illustrate about consensus building?

# **CASE STUDY 5: MENTORING**

At the end of this fellowship, the graduates will either go to new positions as managers in their organizations or work in new organizations. A mentorship program helps to support this transition. Some organizations may have such a program in place and the fellows can use their knowledge to improve its effectiveness. In some cases, there may be none and the pioneer fellows may have to create one for those who will come after them.

Problem

You are the Director of the National Aids Control Program in your country. A new group of four managers that graduated from a fellowship training program is sent to you for deployment. They come from various professional backgrounds but went through a similar management training program. The Permanent Secretary in the Ministry of Health would like to track the progress of the fellows to see what difference the fellowship program can make. You decide to pair the new managers up with mentors to help them.

Challenge

* What do you understand by the term mentorship?
* What do you expect the mentorship program to achieve? Which activities would take place?
* Which characteristics will you look for in potential mentors?
* Should mentorship be mandatory or voluntary?
* Should the protégé (mentee) have input in selecting a mentor?
* How would you evaluate your new mentorship program?
* During your Fellowship, you will have a primary mentor and a mentoring committee that will advise you about your project at your Attachment Site. What are your expectations for you primary Mentor and for your mentoring committee?

# **APPENDIX 1**

## **LEADERSHIP ATTRIBUTES AND COMPETENCIES**

The following list of leadership competencies is based on many tracts that have been written on this subject, some of which are included in the reference list. The goal of this module is to help trainees identify each of these competencies, and to discuss them in the context of several case studies. In addition, each Fellow will do a self-assessment to identify which competencies she/he has already acquired and which ones she/he needs to develop or improve.

1. STRATEGIC THINKING AND PLANNING

One key element in effective leadership is the ability to apply strategic or critical thinking to a problem, a programme, or an organization. Some of the elements that are involved in critical thinking are described below.

Analysing a problem

Strategic thinking often begins with a critical analysis of a problem to be solved or project to be undertaken. Analysis will then prepare the way for project planning or problem solving.

Systems thinking and project planning

Successful leaders are systems thinkers who address the needs of complex environments. Acting as an agent of change for a programme or an organization requires systems thinking. Systems thinkers are aware that everything is connected to everything else. The obvious problems plaguing a programme or an organization may be symptoms rather than root causes. Systems thinkers should be able to develop a coherent plan for a project or programme that is consistent with the organizational environment and can be implemented. Fellows will be introduced to concepts of system thinking and it is anticipated that at the end of the Fellowship, they will be empowered to:

* Carry out analysis of the systems within which they work
* Apply systems thinking in implementing a programme
* Develop strategies for enhancing the efficiency and effectiveness of their programmes

Setting priorities

Leaders must set priorities and have to determine what issues will be addressed within the organization. Because of the current focus on team development and community coalition building, leaders often set priorities in concert with team or community partners. Both subjective and objective factors may influence the priority setting process. Decisions about priorities are often determined by economic and political issues as well as community concerns. At the end of the Fellowship, trainees will be empowered to:

* Critically identify issues that are a priority to be addressed within their work places
* Apply a process for priority setting

Bold thinking

Leadership involves decision making, and decision making involves risk taking. Public health leaders often confront disagreement or discontent with their decisions. Fellows need to be aware that leadership and risks go together, since risk taking is a pre-requisite for challenging the status quo and being innovative. Taking risks requires acceptance that mistakes may (will) be made. Therefore fellows will need to understand that as part of decision making they should evaluate the costs and benefits of their decisions, the expenditure necessary to carry out their decisions and the consequences, good and bad, for the functioning of their programmes. The Fellowship aims to empower trainees to:

* Build their personal capacity to take tough and bold decisions (risk taking)
* Gain skills to critically analyse the risks and benefits of their decision
1. STRATEGIC PLANNING

Is the process by which leaders of an organization determine what it intends to be in the future and how it will get there. To put it another way, they develop a vision for the organization's future and determine the necessary priorities, procedures, and operations (strategies) to achieve that vision. Included are measurable goals which are realistic and attainable, but also challenging; emphasis is on long-term goals and strategies, rather than short-term (such as annual) objectives. Before engaging in strategic planning the organization must consider the following:

* The timing: including how often, at what point in an organizational project cycle and how long should strategic planning process last?
* Who should be involved in a strategic planning process
* Who should facilitate the strategic planning process?

Steps involved in strategic planning

* Identifying core values
* Perform an environmental analysis (internal and external analysis)
* Identifying key issues
* Define or review the organization’s values, vision and mission
* Developing a shared institutional vision
* Identifying breakthrough objectives
* Key strategic
* Developing a plan
* Procedures for monitoring and evaluation
1. MANAGEMENT SKILLS

Management and leadership

In many resource-limited countries the distinction between a manager and a leader is not very clear. As a result an individual may be expected to carry out both management and leadership responsibilities. This may not be an easy task because members of the organization may be linear thinkers who are the dedicated to rules, regulations, and protocols, and resist change. Managers tend to fall in this category and can be contrasted from leaders who tend to less bound by rules, and allocate time to building relationships with external stakeholders.

Managers deal with the implementation of programmes and take responsibility for the day-to-day operation of a team or organization, small or large. They need to make plans, organize logistics, develop budgets, manage personnel, write reports, and all the other activities required to operate a programme or organization. Also, managers need to delegate as appropriate, and oversee and evaluate activities for which they are responsible.

At end of the Fellowship, trainees will:

* Understand the elements of effective management
* Reflect an understanding of the importance of being consistent and trustworthy
* Be able to deliver assignments in a timely fashion
* Learn the principles of goal-oriented and result-focused planning

A separate module is devoted to Program Management, where the components of effective management will be presented in some detail.

Entrepreneurial skills

Leaders of the 21st Century need to possess entrepreneurial skills. Traditional approaches to running organizations and programmes may not be sufficient. Leaders of today need to explore alternative or additional funding sources for their programmes as well as learn how to use their resources in new ways. Such skills are increasingly needed by leaders in the governmental public health sector because of dwindling resource allocation. At the end of the module fellows will be expected to be able to:

* Apply entrepreneurship to sustain their program
1. COMMUNICATION SKILLS

Leadership and communication

Communication skills are a critical attribute of effective leadership. They include the ability to write clearly and concisely; to speak clearly and make logical and convincing presentations; and to communicate both within an organization and externally to the media and other groups. A single exercise in this module introduces the area of communication skills. Since this is an important area, there is a separate module dedicated to communication skills. The leadership module will only define the importance of these skills, leaving skill building to the Communication module.

It is envisioned that at the end of their training, Fellows will be able to:

* Understand the range of communication skills needed for effective leadership
* Determine your personal communication skills and identify which ones you need to develop

1. PEOPLE SKILLS

Consensus building

Leadership requires consensus building, and effective leaders are good listeners, are respectful of other peoples’ opinions, and can negotiate disparate views for the common good. An effective leader helps colleagues and subordinate staff feel confident and empowered and gives them the sense that they are involved in development of an institution. Fellows will discuss the essentials of consensus building and it is anticipated that at the end of the Fellowship, they will:

* In their practices, allocate sufficient time to consensus building
* Become good listeners
* Acquire the ability to negotiate disparate views
* Acquire skills for instilling confidence to those they lead
* Be able to apply these principles in the environment in which they work

Team building

Leaders need to form coalitions and build teams. 21st century leaders are aware that their success depends on their being able to work with others. Because different people bring different expertise to the decision-making process, teams are created to solve challenges and make decisions. In view of public health’s strong community perspective, building coalitions to support the local public health agenda is critical. It is expected that at the end of their training fellows will:

* Develop enhanced capacity to lead teams
* Understand the requirements for monitoring and evaluating team performance

Mentoring and coaching

Mentoring and coaching are essential tools for leadership. Leadership development depends on experienced leaders who act as role models. Mentors and coaches need to understand leadership and promote the development of leadership skills by others. In general, mentoring is best done in a one–on–one apprenticeship relationship, which is different than traditional classroom teaching. In contrast, coaching is focused on how to do a specific job more efficiently and effectively, while mentoring is more about general issues such as career development and career choices. Therefore, mentoring and coaching are both essential in leadership development. The fellows will be empowered to develop mentorship skills including:

* Development of mentoring relationships
* Career guidance and advice about career goals

Mentoring will be a major focus in preparing Fellows for work at their Attachment Sites, and each Fellow will be supervised by a mentoring team. This will offer the opportunity to learn about mentoring from the viewpoints of both mentee and mentor.

1. PERSONAL CHARACTERISTICS

Role model

A leader is a person who inspires others and guides their undertakings. In other words, effective leaders are excellent role models for those who work with them or under their supervision. Effective role models demonstrate personal integrity, consistency and effectiveness, transparency and openness, the ability to take initiatives and be innovative. Leaders guide by inspiring others to share their vision, facilitate the way things get done, empower and enable others to behave in a positive way. They encourage and reward subordinates for their good works and inputs. Fellows will be reminded that self-esteem, efficiency, proper time management, technical expertise, self-awareness of strengths and limitations, are some of the essentials for effective leadership. It is expected that at the end of the Fellowship, trainees will:

* Self-assess personal strengths and limitations (personality profiles, learning styles etc.)
* Manage their time
* Conduct themselves in manner that inspires others
* Commit to develop their personal leadership talents and abilities

Charisma

Charisma is the ability to inspire others, particularly in a group setting. Charisma is a useful attribute that enhances leadership performance but many effective leaders do not have great charisma. Therefore, charisma will not be an important focus of the Leadership module.

# **APPENDIX 2**

## **LEADERSHIP SKILLS ASSESSMENT**

(this is an anonymous questionnaire; you will be instructed how to return this when complete)

How would you rate your personal leadership skills?

| COMPETENCYCATEGORY | SKILL OR CHARACTERISTIC | EXCELLENT | STRONG | MODERATE | WEAK |
| --- | --- | --- | --- | --- | --- |
| STRATEGIC THINKING | Ability to think critically and to analyse a problem |  |  |  |  |
|  | Ability to develop a coherent plan for a project or programme (Strategic planning) |  |  |  |  |
|  | Ability to set priorities for programmatic goals |  |  |  |  |
|  | Ability to think boldly and come up with “out of the box” ideas |  |  |  |  |
|  | Willingness to take risks in order to be an “agent of change” |  |  |  |  |
| MANAGEMENT SKILLS | Ability to organize the logistics to implement a programme |  |  |  |  |
|  | Ability to develop a budget and defend it  |  |  |  |  |
|  | Ability to select effective employees and handle human resource issues |  |  |  |  |
|  | Concerns for your organization in contrast to your personal goals and needs |  |  |  |  |
|  | Ability to raise funds for your organization |  |  |  |  |
| COMMUNICATION SKILLS | Ability to write clearly and concisely |  |  |  |  |
|  | Ability to speak clearly and be easily heard |  |  |  |  |
|  | Ability to define the audience and prepare presentation relevant to the audience |  |  |  |  |
|  | Ability to speak in a logical and persuasive manner |  |  |  |  |
|  | Ability to communicate with the media |  |  |  |  |
| PEOPLE SKILLS | Being a good listener |  |  |  |  |
|  | Being able to maintain confidentiality where appropriate |  |  |  |  |
|  | Establishing rapport with your colleagues |  |  |  |  |
|  | Ability to develop a consensus among a group or team |  |  |  |  |
|  | Ability to mediate disagreements among your staff or colleagues |  |  |  |  |
|  | Ability to mentor and coach others |  |  |  |  |
| PERSONALCHARACTERISTICS | Personal integrity |  |  |  |  |
|  | Reliability and on-time completion of tasks |  |  |  |  |
|  | Consistency |  |  |  |  |
|  | Transparency and openness |  |  |  |  |
|  | Being a “self-starter” who takes initiative |  |  |  |  |
|  | Being innovative  |  |  |  |  |
|  | Charisma |  |  |  |  |

The Afya Bora Fellowship is dedicated to helping trainees develop leadership skills to enable them to design, manage, and evaluate large health programmes. Which personal skills do you wish to focus on as one goal of the Fellowship? Please provide your confidential answer in the box below; take as much space as you need.

|  |
| --- |
|  |

Has the Leadership module helped to clarify and illustrate the skills needed for effective leadership? Has the module helped to focus or enhance your personal leadership skills? Please provide your confidential answer in the box below; take as much space as you need.

|  |
| --- |
|  |

Has the Fellowship helped to clarify and illustrate the skills needed for effective leadership? Has the Fellowship helped to focus or enhance your personal leadership skills? Please provide your confidential answer in the box below; take as much space as you need.

|  |
| --- |
|  |

# **APPENDIX 3**

## **INSTRUCTORS, SPEAKERS, AND FELLOWS**

## **NAMES AND RELEVANT INFORMATION**

|  |  |  |
| --- | --- | --- |
| NAME | BACKGROUND | CONTACT INFORMATION |
| Yohana Mashalla | Dean, Faculty of Health Sciences, University of Botswana | University of BotswanaFaculty of Health SciencesBlock 246, Private Bag 0022, Gaborone 267Botswana; +267 355 4557*yohana.mashalla@mopipi.ub.bw* |
| Neal Nathanson | Associate Dean for Global Health, U Pennsylvania, School of Medicine | B405 Richards Building, School of Medicine,U Pennsylvania, ,Philadelphia, PA 19104-6116, USA;215 898 0848*nathansn@upenn.edu* |
| John Cheruiyot | Consultant, Organizational Development, Kicher and Associates, Nairobi, Kenya | Unipen Flats Hurlingham Shopping Centre, 2nd Flr, 61379-00200 City Square, [Nairobi](http://www.businesslist.co.ke/location/nairobi)*+254 20 272 9720**kicher2002@yahoo.com* |
|  |  |  |
|  |  |  |

ROLE MODELS TO TALK TO LEADERSHIP TRAINEES

|  |  |  |
| --- | --- | --- |
| NAME | POSITION | CONTACT INFORMATION |
|  |  |  |
|  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Last name | First name | Country | Case Assignments |
| Akongo | Norah | Kenya | 1 |
| Garechaba | Gotsang | Botswana | 1 |
| Kaihura | Alphoncina | US | 1 |
| Katende | Godfrey | Uganda | 1 |
| Mgelea | Edward | Tanzania | 1 |
| Kibore | Minnie | Kenya | 2 |
| Kigozi  | Isaac | Uganda | 2 |
| Masupe | Tiny | Botswana | 2 |
| Mwakyusa | Nkundwe | Tanzania | 2 |
| Tenforde | Mark  | US | 2 |
| Lekorere | Merina | Kenya | 3 |
| Kuteesa | Monica | Uganda | 3 |
| Motswagole | Bakhola | Botswana | 3 |
| Rugemalila | Joan | Tanzania | 3 |
| Thomas | Joycelyn  | US | 3 |
| Liku | Nzisa | Kenya | 6 |
| Namasopo | Sophie | Uganda | 6 |
| Tallam | Edna | Kenya | 6 |
| Sariah | Adellah | Tanzania | 6 |
| Wango | Gift  | US | 6 |

# **APPENDIX 4**

## **BIBLIOGRAPHY**

BOOKS

This book is being provided in pdf format on a flashdrive so interested Fellows can download it onto their laptops.

* Management Sciences for Health. Managers who lead: a handbook for improving health services.

The following two books can be purchased from online booksellers.

* Foege WF, Daulaire N, Black RE, editors. Global health leadership and management. Jossey Bass, San Francisco, 2005. 241 pages, $16 used from Amazon.com.
* Rowitz L. Public health leadership. Jones and Bartlett, Sudbury, MA, 2009. 570 pages, $43 used from Amazon.com.

REPORTS

These articles are provided in pdf format on a flashdrive so interested Fellows can download them onto their laptops.

* Accordia Global Health Foundation. Building healthcare leadership in Africa, a call to action. Available at www.accordiafoundation.org, 2009, 52 pages.
* The Global Compact. Globally responsible leadership. 2009, 48 pages.

ARTICLES

These articles are provided in pdf format on a flashdrive so interested Fellows can download them onto their laptops.

* Women's Campaign International. Introduction to strategic planning. Powerpoint available at [www.womenscampaigninternational.org](http://www.womenscampaigninternational.org).
* Wallace L. Multicultural critical theory. A B-School? New York Times, January 10, 2010. Available via [www.nytimes.com](http://www.nytimes.com).
* Taylor TA. Corner office, Openers. New York Times, Sunday, December 27, 2009. Available via www.nytimes.com.

PROGRAMS

These programs can be accessed via the internet.

* Yale University. Global Health Leadership Institute, [www.yale.edu/ghli](http://www.yale.edu/ghli).
* CDC. Sustainable management development program. [www.cdc.goc/globalhealth/smdp](http://www.cdc.goc/globalhealth/smdp).
* LEAD International. [www.lead.org/about/](http://www.lead.org/about/)
* IntraHealth. [www.intrahealth.org/section/about-us](http://www.intrahealth.org/section/about-us).
* Kellogg Health Scholars. [www.kellogghealthscholars.org/about/program.cfm](http://www.kellogghealthscholars.org/about/program.cfm).
* Management Sciences for Health, leadership, management & sustainability. www.msh.org/projects/lms/About/index.cfm. On this website you can access "the eMANAGER, which is issued in parts that you may find helpful.
* National public health leadership institute. http://www.phli.org/about/index.htm.

NOTES

NOTES

NOTES