

I. Introduction

The Institute of Medicine report The Future of Public Health (1988) called for improved public health infrastructure, more effective leadership, and increased training for public health leaders. In response, schools of public health and other organizations launched a number of leadership and management development programs at national, regional and state levels.

In 1996, the School of Public Health at the University of North Carolina at Chapel Hill (UNC), in collaboration with leaders in Virginia and West Virginia, created a leadership development program for senior and mid-level public health administrators. Originally known as the Tri-State Public Health Leadership Institute, the program has since grown to include South Carolina, Tennessee and Arkansas, and has been renamed as the Southeast Public Health Leadership Institute (SEPHLI). The program is offered by the North Carolina Institute for Public Health (NCIPH), the service and outreach arm of the Gillings School of Global Public Health at UNC.

The program's goals are to enhance the leadership abilities of senior and mid-level professional managers in state and local public health agencies and partner organizations, and to develop a network of public health leaders in the Southeast region. Ultimately, it is hoped that better-prepared leaders and networks will be able to improve public health programs, organizations, systems, and policies in the region.

This evaluation was performed by evaluation staff members at the NCIPH at the request of the leaders of the SEPHLI program. It examines the influence of SEPHLI on its graduates and on public health by surveying participants from the program's first ten graduating classes, 1997-2007. The evaluation of the SEPHLI program falls into four domains:

- Domain 1: Effects of SEPHLI on Individual Leader Development and Leader Actions
- Domain 2: Effects of SEPHLI on Public Health Infrastructure Development
- Domain 3: Barriers to Leader Development and Scholar Recommendations and Comments on SEPHLI
- Domain 4: Key Informant Viewpoints and Recommendations for SEPHLI

The study concludes with ideas on the future of SEPHLI.

II. Description of the Current Program

This section describes the target audience, enrollees, and current program model. In addition, it describes how the program's emphases have evolved over the first ten years.

Target Audience and Enrollment

SEPHLI's target audience includes mid-level and upper-level administrators in public health organizations.

In the early years of the program, participants completed an application and were selected by SEPHLI staff. As the funding for SEPHLI transitioned to a cost-sharing model with states funding scholarships for attendees, the process evolved such that states recruit, select and recommend scholars to SEPHLI. Most scholars enter the program in that manner, but interested leaders are always welcome to apply individually if they have alternative tuition sources.

Table 1 presents demographic characteristics of SEPHLI graduates from the first ten years. The program has 362 graduates at the time of this report's publication, according to program records.

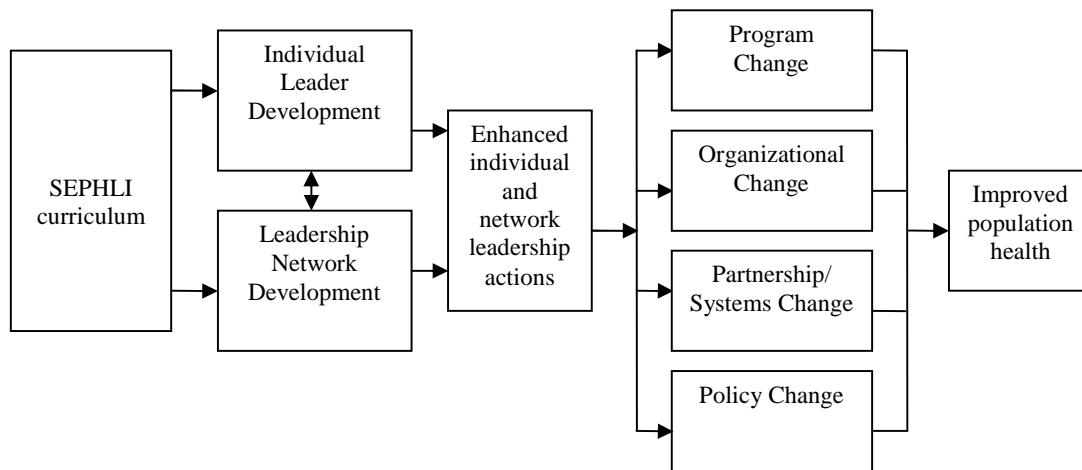
Table 1: Demographic Characteristics of SEPHLI Graduates

States Represented	N	% of Graduates (N = 362)
West Virginia	94	26
North Carolina	93	26
Tennessee	60	17
South Carolina	54	15
Virginia	52	14
Arkansas	9	2
Gender		
Female	217	60
Male	138	38
Not reported	7	2
Sector of Employment		
State Government- Public Health	174	48
City/county/district local government - Public Health	173	48
Federal Government- Public Health	0	0
University/ Academia	8	2
Private organizations	5	1
Other	2	1

Goals and Logic Model

The program's two primary goals are to develop the abilities of individual leaders and to build a professional network of leaders in the Southeast region. Ultimately, it is hoped that better-prepared leaders and networks will be able to improve public health programs, organizations, systems, and policies. Figure 1 presents a logic model for the program.

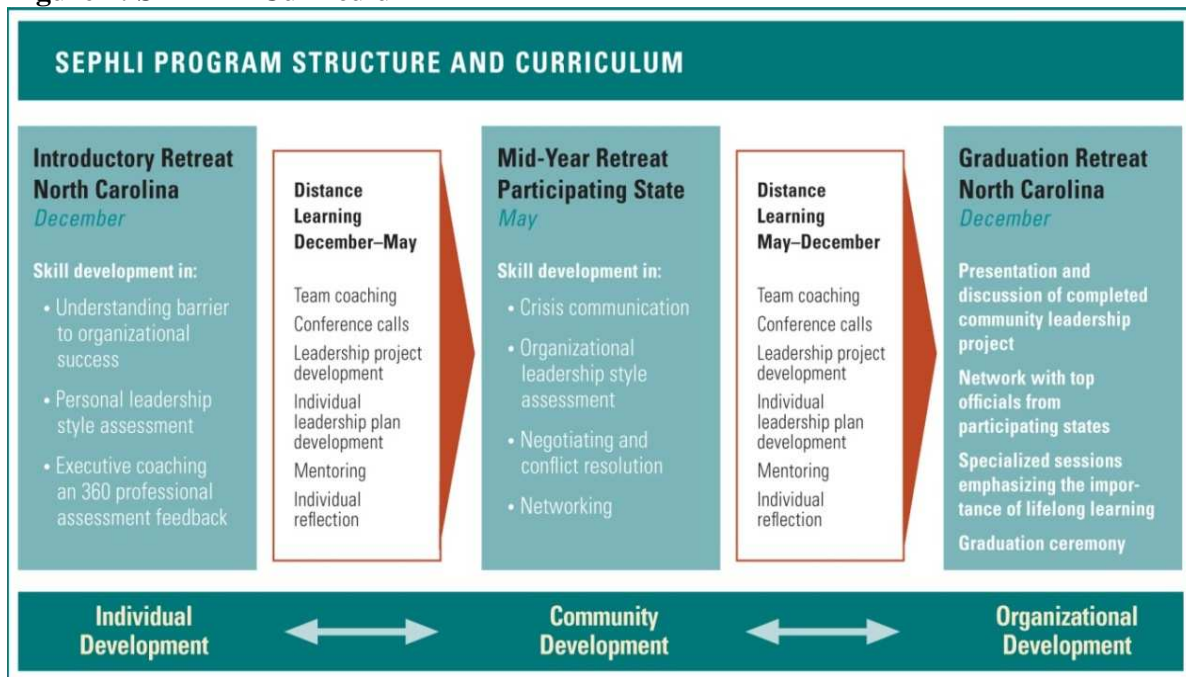
Figure 1: Logic Model for the Southeast Public Health Leadership Institute



Current Program Model

SEPHLI's program includes three on-site retreats along with intermittent distance learning and leadership project work (Figure 2). This section describes each of these components.

Figure 2: SEPHLI Curriculum



Program Phases

Pre-Program Activities

Before the on-site retreats, enrolled scholars complete and submit several assessment instruments including:

- Myers-Briggs Type Indicator (MBTI)
- Change Style Indicator (CSI)
- Fundamental Interpersonal Relations Orientation (FIRO-B)
- 360-Degree Feedback for Public Health Workers

These instruments increase scholars' awareness of how their leadership style and personality type influence their methods of leading, enable them to see alternative methods and styles that they can use as appropriate, and allow them to better understand others.

The MBTI is a widely used personality type assessment that can help scholars better understand their own and others' leadership strengths, preferences, and potential liabilities. The CSI helps

scholars understand their tendency to conserve the old or to innovate, and to see how to use these tendencies in working effectively with others with different styles. The FIRO-B helps scholars see how they compare to others in their preferences and styles in relating to others in the workplace, for example whether they prefer to be included in decision-making or prefer to delegate decisions to others.

The 360-degree feedback instrument is a multi-rater assessment of the scholar's leadership effectiveness, and is completed by the scholar, the scholar's supervisor, and several peers and direct reports.

Phase 1

Each year, the initial retreat is held in December is held in North Carolina, at the Paul J. Rizzo Conference Center in Chapel Hill. This initial meeting is held concurrently with the final session for the graduating class. This enables incoming scholars to meet and observe the project presentations of the graduating scholars. The remainder of the retreat focuses on personal leadership development and includes seminars and discussions on understanding barriers to organizational success, approaches to leadership, such as adaptation, flexibility, and interpersonal interaction, and mentoring. Based on the feedback and insight they receive from the assessment instruments, scholars write a personal development plan with goals and strategies for skill growth that they will work on throughout the year. Scholars also receive coaching on ways to strengthen their leadership.



The Paul J. Rizzo Conference Center in Chapel Hill, North Carolina, is the site of many SEPHLI retreats. The Center is affiliated with the Kenan-Flagler Business School, University of North Carolina at Chapel Hill.

Phase 2

Between retreats scholars (a) work on improving their skills by following their individual development plans, (b) participate in conference calls and online discussions with SEPHLI staff, and (c) begin work on an individual project to address a challenge and practice the new perspectives and skills they are gaining in the program.



Scholars discuss their projects at 2008 final poster session at the Rizzo Center.

Phase 3

A mid-year retreat is held in one of the partner states in May and includes sessions on crisis communications, organizational leadership, negotiation and conflict resolution, and professional networking. Scholars also discuss with one another their progress on their personal development plans.

Phase 4

Back home, scholars continue to work on their individual development plans and their leadership projects, and participate in additional teleconferences and computer discussion forums.

Phase 5

At the graduation retreat the following December, scholars present their completed leadership projects via a poster session, a requirement for graduation. This retreat also includes networking sessions with top officials from participating states, discussion of ways to continue learning, and a graduation ceremony.

Specific Aspects of the Curriculum and Learning Activities

SEPHLI initially focused mainly on individual development. Over time, the program has changed to balance individual development, preparedness, and broader public health issues including infrastructure development, and increased staff-scholar and scholar-scholar connections. Additional work on leadership assessment tools was added in 2004. The changes present challenges to using a single evaluation tool, but this study was designed to identify outcomes from throughout the program's history.

Competencies

Currently, the program focuses on improving the following leadership competencies:

- Developing personal awareness and awareness of others (personality, interpersonal, leadership, and change styles)
- Problem-solving
- Risk and crisis communication skill
- Effective team building
- Partnering and collaborating
- Building the public health infrastructure

These competencies were adopted from the US Department of Health and Human Services Office of Workforce Career Development's Leadership Competency Framework (<http://www.hhs.gov/asam/owcd/compmodel.html>), the National Leadership Network's Public Health Leadership Competency Framework (<http://www.heartlandcenters.slu.edu/nln/about/framework.pdf>), and from cross-cutting leadership competencies outlined through the Association of Schools of Public Health for those seeking Masters level training and education in public health. SEPHLI references these sources each year in handouts for scholars to use as they propose their individual development plans.

SEPHLI emphasizes active learning methods. Here, faculty member Keith Caver discusses concepts with participants in a seminar on "Visioning, Futuring, and Strategic Thinking" at a spring retreat.



Leadership Project

As noted, each scholar completes a leadership project in the workplace or community. This experience is designed to enhance learning and skill development and to contribute to a greater public health objective. Normally, this project includes teamwork with other leaders from their jurisdiction. Scholars write a final project report which describes what they did and achieved and how the experience built their skills and understanding. Examples can be seen at http://sephli.org/whatis/project_ex.htm.

Learning Teams

To facilitate team-building and network development, scholars work in teams of six members from varying disciplines, occupations, and states. Team members meet at the retreats and provide support, feedback, and ideas to one another on each others' project work, individual development plans, and team exercises. Each team also carries out peer coaching in regular team conference calls, meaning that they provide support and ideas to one another about how to provide leadership and improve their skills. The teams also complete four assignments together to further their learning, such as networking exercises or brief projects.

Coaches

There are four coaching components to SEPHLI. Scholars may request to work once with a personal coach to discuss the results of their 360 assessment or with a coach who is a specialist in a particular area during the face-to-face meetings. Follow up coaching is available upon request and approval of the program director. Peer-to-peer coaching occurs within the learning teams and remains as a resource once the program is complete. The program makes a list of possible coaches available upon request.

On-line Discussion Forums

Each year, SEPHLI conducts four to six topical on-line discussion forums. Questions are posted and scholars are asked to converse on the forum. SEPHLI staff moderate the forums and send emails to scholars to encourage participation.

Telephone Conferences

Each year, SEPHLI also conducts six to eight telephone conference calls to supplement the instruction; learners are expected to attend four of them. Previous topics include Dealing with Change (Leadership Competency Development), Model Health Department (Innovation in Public Health), Public Health Infrastructure, Pan Flu & Cross Border Preparedness, Community Partnering & Collaboration, Public Health Law, Public Health Ethics, Systems Thinking, and Public Health Accreditation. Staff poll scholars ahead of time and design the calls to meet their needs.

Continuing Education Units

Participants who successfully complete all of the activities are eligible to receive Continuing Education Units (CEU) through the office of Continuing Education at the UNC School of Public Health and the North Carolina Institute for Public Health.

SEPHLI Faculty and Staff

SEPHLI has a part-time director (20 hours/week), currently Lisa Macon-Harrison, M.P.H. The program also has a part-time program associate (20 hours/week), currently Erin Ridings. The program also supports an evaluator, Karl Umble, Ph.D., M.P.H., at about 10% of time annually, and for this evaluation, a graduate research assistant, Chloe Katz, M.P.H (c).

Marketing

Staff attend both national (National Association of County and City Health Officials) and regional (Association of State and Territorial Health Officials) conferences annually to promote the SEPHLI program. This year there was a poster presentation on SEPHLI at the North Carolina Public Health Association meeting. In addition, a representative of SEPHLI has been designated in each participating state. This public health official encourages staff to enroll and helps the state choose who will apply to SEPHLI each year.

Alumni Services

SEPHLI seeks to maintain relationships with its alumni. About once every other year, SEPHLI offers a conference call to alumni to renew relationships and discuss a topic of interest. A quarterly newsletter is distributed to alumni, providing leadership stories about both current and graduated scholars, learning opportunities, and other resources.

III. Evaluation Questions and Methods

This evaluation seeks to contribute knowledge about the effects of the SEPHLI curriculum on public health. It also seeks to report on the program's results to stakeholders, and to help improve the program. In a period when many leadership development programs are being created, it is essential to evaluate programs' long-term impacts on the graduates and subsequently on the field of public health.

This evaluation effort began by interviewing the program's funders, key state contacts, current and former SEPHLI staff, and NCIPH staff about what they most wanted to know from the evaluation. These stakeholders advised the evaluators to report on the characteristics of participants, specific abilities and networks enhanced by the program, related projects and accomplishments after graduation, and recommendations for improvement. Ultimately, the study hopes to illuminate whether the program is meeting its goals of developing leaders and networks and subsequently, making lasting contributions to public health infrastructure.

This evaluation attempts to identify the influence of SEPHLI as categorized into four domains:

Domain 1: Effects of SEPHLI on Individual Leader Development and Leader Actions

Domain 2: Effects of SEPHLI on Public Health Infrastructure Development

Domain 3: Barriers to Leader Development and Scholar Recommendations and
Comments on SEPHLI

Domain 4: Key Informant Viewpoints and Recommendations for SEPHLI

A combination of closed-ended questions (yielding quantitative data) and open-ended questions (to solicit stories of change) were used. The data from the closed-ended questions provided background information on the respondents as well as measurements of key constructs. The open-ended questions in the survey and interviews solicited detailed feedback on participant projects, recommendations, and individual development. The open-ended responses provide the meaning and context of the numbers, show unintended impacts, and illuminate outcomes that are difficult to quantify.

This study recognizes that SEPHLI is only one influence among many on participant actions and subsequent organizational and policy changes. To lend plausibility to claims that SEPHLI influenced graduates' activities and their results, we asked scholars questions about constructs that the program is specifically designed to influence, such as knowledge and practices in leadership. In addition, we asked scholars to describe SEPHLI's contributions to their personal development, looking for descriptions of personal change (movement from state of affairs A to state of affairs B), checking for temporal sequences (changes taking place during and after the program), and examining links to specific learning methods (such as projects and specific seminars). In the survey, we made a point of asking scholars to explain the results "in some detail" (to avoid bland and unverifiable generalities) and to "explain how SEPHLI contributed." In addition, confidence in causal claims about SEPHLI's personal and other results are strengthened because:

- This program has a rather intensive “dose” level and uses multiple learning methods, which are known to strengthen results from training and development programs.
- Many respondents agreed to provide their names in information was needed or to verify a result they claim.
- Many respondents described similar results.
- The results are consistent with those of previous evaluations of other similar programs.
- Many results that graduates claim that SEPHLI contributed to are often otherwise verifiable, such as the development of the certain programs.

With that introduction, the methods are described in greater detail below.

Methods

This study used two main methods: a web-based survey of all graduates and interviews of key stakeholders in participating states.

Web-based Survey Sample and Procedures

The sampling frame for the survey was the list of 362 graduates from years 1-10, 1997-2007. A listserv (database of email addresses) was created and each graduate was sent an email with a link to the survey, inviting them to participate.

After the first email to scholars, over one hundred of the email messages were returned indicating that the email addresses were no longer functional. To locate these individuals, their last known whereabouts was contacted and asked for updated contact information for the participant. If that query yielded no result, an on-line search engine (Google) was used to locate more recent information. If after several leads on Google yielded no updated contact information, the person was considered lost to follow-up.

From the sample of 362, three recipients indicated that they did not actually graduate from SEPHLI, and 63 were lost to follow-up. Seven graduates were reported by colleagues to be retired. Subtracting out these people, 289 graduates were located and available to receive the survey.

Incentives, such as SEPHLI tote bags, t-shirts, sweatshirts and portable electronic data storage devices were offered via periodic drawings to encourage participation. After emailing the graduates four times over a period of six weeks (one initial email and three reminder emails), 187 graduates responded to the survey, resulting in a 65% response rate (187/289).



SEPHLI's 10th class graduated in December, 2007, at the Rizzo Center in Chapel Hill.

Questions in the Web-based Survey

The instrument used recently to evaluate the National Public Health Leadership Institute (see <http://www.phli.org/evalreports/appendixa.pdf>) was substantially modified for this evaluation. A copy of the survey instrument is included as Appendix A.

- The survey did not include “demographic questions” other than the year the participant graduated from the program and the state in which they lived when they enrolled.
- Regarding “career patterns,” the survey asked scholars to report the kind of organization they worked in when they enrolled and currently, their former and current job titles, and whether SEPHLI had influenced any promotions or other changes in position and how.
- On individual-level development, the survey asked graduates to rate the influence SEPHLI had or continues to have on their leadership-related understanding, skills, interest-levels, confidence, sense of belonging to a network of leaders in public health, self-awareness, commitment to the field, and professional networks. Additionally, scholars were asked to gauge the overall influence that SEPHLI had on their leadership and to provide more detailed responses.
- Regarding individual practices, scholars were also asked to assess the frequency with which they use specific skills taught in SEPHLI.
- On specific results of SEPHLI and enhanced leadership skills, graduates were asked whether they had influenced programs, organizations, policies, and systems in ways that they believe could be traced to SEPHLI. If they answered yes, they were asked to pick one of the changes, provide a detailed description of the change that was made, explain how SEPHLI contributed to it, and why they view the change as important.
- One of the outcomes stakeholders were particularly interested in was whether scholars continue to work on their individual learning projects after graduating. Scholars were asked this question, and if they responded affirmatively, they were asked to explain what they had done, the project’s impact, and how what they learned in SEPHLI had contributed.

- To better understand how often graduates exchange ideas about how to deal with leadership situations, they were asked how frequently they seek or provide “wise counsel” to other graduates. This questions attempts to understand one outcome of network development: information sharing.
- To gauge scholars’ overall feelings about SEPHLI, they were asked if they had recommended the program to other public health professionals, and to provide any additional information they would like to include about the program or its benefits to public health.

Open-ended questions were kept to a minimum to reduce respondent burden, but for the few open-ended questions that were included, graduates were asked to provide “some detail.” This strategy drew detailed answers about personal “leader” development, leadership positions taken, and real-world “results” for policies, programs, organizations, and systems.

Before it was finalized, the survey was pre-tested with five graduates of the program, one former director, and the current director of the program. The survey was conducted using the proprietary on-line survey tool known as SurveyMonkey. Scholars were given the option of providing their name, so that they could be contacted for clarity on responses they had given. Approximately half of the respondents gave their name, but due to time limits, only three were contacted for clarifications.

Table 2 compares the demographic characteristics of survey respondents with all graduates. It shows that the response rates by state and sector of employment closely mirror the characteristics of SEPHLI graduates.

Table 2: Demographic Characteristics of Survey Respondents as Compared to All SEPHLI Graduates

States Represented	% of SEPHLI graduates (N = 362 graduates)	% of Survey Respondents (N = 187 respondents)
West Virginia	26	23
North Carolina	26	26
Tennessee	17	19
South Carolina	15	16
Virginia	14	14
Arkansas	2	2
Sector of Employment		
City/county/district local government- Public Health	48	41
State government- Public Health	48	56
Federal government- Public Health	0	0
University/ Academia	2	2
Private organizations	1	0
Other	1	1

Interview Sample and Procedures

One key informant from North Carolina, one from Virginia, and three from West Virginia were interviewed to find out more about the long-term, state-wide influence of SEPHLI. One of the interviewees was not a graduate, whereas the others were. The interviews were focused on their views about the wider influence of SEPHLI in their states, rather than on results for them personally, though that was also addressed.

The Interview Guide for this evaluation appears in Appendix B. Interviews were recorded and transcribed. Interviewees were informed that their responses would be confidential, unless the evaluators asked for and received written permission from them to quote them by name. Findings from these interviews are located in the Domain 4 findings section of this report.

Data Analysis

Survey Data Analyses

Quantitative data from the survey were analyzed using Excel (Microsoft). Qualitative data from the open-ended survey questions were analyzed using content analysis methods (Patton, 2002) and with the assistance of the qualitative analysis software package ATLAS-ti version 5.2 (Scientific Software Development, Berlin, Germany). After having read through the qualitative responses initially, the two evaluators working on this study developed codebooks (or lists of descriptive labels) with which to code (or descriptively label) each response to every open-ended question. The first several dozen responses to each question were coded as a joint effort between the two evaluators who developed consensus on the codebook and to how to code each response. After that, one evaluator finished coding all of the responses to that question. Then, the second evaluator reviewed each code and agreed with the vast majority. When there was a disagreement, the evaluators discussed the matter and reached consensus.

Interview Data Analysis

Each interview was transcribed by one of the evaluation staff members. That staff member then compiled the responses to each of the questions in the interview guide and wrote up a summary of what the respondents said.