



HEALTH SYSTEMS TRUST



FRONTLINE MANAGERS MATTER: WELLNESS FOR EFFECTIVE LEADERSHIP SAHR KWIK SKWIZ SERIES

This KWIK SKWIZ:



summarises Chapter 10 of the 2014/15 South African Health Review.

- Recognising the need to strengthen the South African health system, special emphasis has been placed on improving health management. Until recently, little attention has been given to leadership, despite it being a key thematic area in the Human Resources for Health Strategy for the Health Sector: 2012/13–2016/17.
- Discussions around the importance of leadership and management for effective transformation in the South African health sector have generated a call for people-centred, value-based leadership that engenders trust. Research has shown that “emotional intelligence ... and social intelligence ... are as important to leadership as cognitive intelligence” in complex contexts.
- The Wellness for Effective Leadership (WEL) Programme uses a people-centred, context-responsive approach to identify and respond to the leadership development needs of frontline managers. Needs assessments have provided evidence of common strengths and challenges, and of the organisational contexts and cultures within which frontline managers work. The WEL Programme promotes the ‘wellness’ of participants and cultivates their personal and interpersonal competencies towards developing leadership, strengthening health system performance, and delivering quality health services within new policy initiatives.
- The WEL Programme demonstrates the need for leadership development initiatives to have an intentional focus on dealing with buried personal trauma, ensuring adequate self-care, paying attention to work-life balance, strengthening effective stress management, enhancing the emotional carrying capacity of individuals and teams, and building resilience and emotional intelligence. Reports of WEL participants indicate that these changes can be implemented in a relatively short period, can begin to have effect outwards, and may well contribute to a bottom-up approach to changing overall organisational culture.
- More than 400 managers in the health sector, mostly working at facility, sub-district and district level, have completed a Wellness for Effective Leadership (WEL) Programme over the past six years.
- Fundamental to the WEL Programme approach is that each person matters, learns most from reflecting on their own experiences, and can build their emotional intelligence and agency. A standard WEL Programme comprises three two-day workshops, followed by a final one-day workshop. Six to eight weeks are allocated for reflection and

experimentation between each workshop. This amounts to a total of seven days' contact time over a five- to six-month period.

- The theory of change underpinning the WEL Programme is based on facilitating wellness, change and transformation from the intrapersonal level outwards. This theory posits that the individuals who run the services form the core of transformation of any service, and that the changes brought about through greater self-awareness and self-care, perceptions of well-being and reduced stress, lead to an increased ability to manage stressful situations and conflicts.
- Of concern is the unchanging narrative of frontline managers, documented over a 15-year period, which depicts the overall health system context as being characterised by outdated models of top-down, command-and-control, hierarchical leadership with strong deference to positional authority. The narratives and ProQOLTM scores generated at the beginning of WEL Programme have provided evidence of the damage caused to frontline health managers by such models of leadership, which are no longer effective and stifle adaptive innovation and learning, undermining the attainment of desired targets and outcomes. These managers are at high risk of burnout and secondary traumatic stress, which limit their capacity to deliver effectively on the health system's mandate and social compact. More enabling, relational forms of leadership are required to mediate the bureaucratic context.
- The personal testimonies of WEL participants underscore the importance of creating safe spaces, structures and processes for narratives of trauma to unfold and be brought to light. Facilitated storytelling in environments designed to be safe and mutually respectful helps to minimise the symptomatic 'othering' that justifies the ongoing perpetration of aggression and violence, the latter having been reported by participants as present in relationships between higher-level and frontline managers, and between health workers and patients. These techniques would thus contribute to building a humanising framework for health care.

- The positive shifts reported by participants as having been enabled by the WEL Programme span the personal and the interpersonal, and extend into leadership practice and service delivery. At the personal level, an emergent recognition of resilience and growth through adversity has underpinned cognitive transformation. This includes positive self-perceptions, a growing appreciation for the need for self-care, enhanced ability to manage stress, increasing self-confidence and assertiveness, and heightened energy and personal agency. The need for a shift in the overall health contexts and organisational cultures within which frontline managers operate can no longer be ignored.

SOURCE:

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