

WHAT PUBLIC HEALTH LEADERS  
AT CDC THINK ABOUT  
LEADERSHIP AND PRACTICE

**Louis Rowitz, PhD**

**Director of the Mid-America Regional  
Public Health Leadership Institute**

# Snapshot of Public Health



# William Watson on the American Health Care System

*Our system is so fragmented and decentralized. Public Health has to be a separate system. I shudder to think what the country would do without the CDC.*

# Richard Jackson on Health Information

*People get their health information  
for better or worse from Oprah and  
Time Magazine.*

# William Watson on Public Health

*Public health began to change  
in 1964 with the passage of  
Medicare and Medicaid.*

# Ed Baker on Leadership

*Leadership is doing the right thing. It is having the vision, ability, and willingness to mobilize people to accomplish the common vision of public health.*

# David Sencer on his legacy

*I want to be remembered as a  
bureaucrat*

# Jeffrey Harris on David Sencer

*Sencer says I was a bureaucrat in that I was working in a system and learning to move it forward. He said that being a bureaucrat was a compliment*

# Bill Foege on Politics

*All public health decisions now are political. You can separate the science of public health from politics, but not the practice.*

# Bob Howard on the role of public health agencies

*When the public health infrastructure is weakened, mortality and morbidity increases*

# David Sencer on the press

*We as health workers don't like to go to the press. Then we get angry when they come to us.*

# Bill Roper on the future of public health

*The challenge of official public health is to realize that the world is different. Their role of hands on service delivery of health care to the whole population never was the case. Surely, it will not be the case going forward. The important step of official public health folks is to reach out to managed care.*

# LEADERSHIP IS.....

- ❖ CREATIVITY IN ACTION
- ❖ ABILITY TO SEE THE PRESENT IN TERMS OF THE FUTURE
- ❖ VISION WITH COURAGE AND FORTITUDE TO PUT THE VISION INTO REALITY
- ❖ FLEXIBILITY WITH A COMMITMENT TO CHANGE THINGS FOR THE BETTER
- ❖ REQUIRES ABILITY TO WORK WITH OTHERS
- ❖ ABILITY TO BACK OFF WHEN SOMEONE ELSE IS THE BETTER LEAD
- ❖ TO LEAD IS ALSO THE WILLINGNESS TO FOLLOW
- ❖ ABILITY TO WORK WITHIN THE CONTEXT OF AN ORGANIZATION WITHOUT LETTING THE ORGANIZATION DEFEAT THE LEADER
- ❖ COMMITMENT TO THE COMMUNITY AND THE VALUES FOR WHICH IT STANDS
- ❖ LEADERS ARE EVERYWHERE IN PUBLIC HEALTH

# The Study

# Sample in 1996

- 100 American public health leaders from the Federal, state, and local levels
- 27 CDC Contemporary Leaders
- 3 Former CDC Directors
- 1 Former CDC Deputy Director

# CDC Sample in 2001

- 18 Still at CDC
- 9 Retired (3 at Carter Center )
- 1 deceased
- 3 other health sector positions

# Protocol

- One hour semi structured interview in the form of a leadership conversation
- Audio-taped
- Qualitative analysis-content analysis
- Conversation –informal talk between the leader and the interviewer

Public Health Is

# The Elements in a Definition of Public Health

- Prevention
- Build Infrastructure
- Serve all people
- Population based
- Disease Prevention/Health Promotion
- Health/Disease data collection
- Part of Spectrum of Healthcare
- Community-wide health strategies
- Excludes clinical medicine

# The Elements in a Definition of Public Health continued..

- Defined by the core functions
- Improvement in the quality of life
- Global
- Wellness
- Community Health in Contrast to Individual Health
- Community Action
- Surveillance

# Public Health Is

## **Dennis McDowell**

*Public Health is planet affairs stability. All the issues that destabilize the planet have population-based causes*

## **Bill Foege**

*There is no human endeavor that is outside the realm of public health*

Leadership Is

# The Elements in a Definition of Leadership

- Recognizing what the goals are
- Doing the right things right
- See the big picture
- Ability to effect change
- Innate in some
- Ability to work with others
- Make others like doing their job
- Advocacy

# The Elements in a Definition of Leadership continued..

- Visionary
- Keeping the Focus
- Quality that induces followers
- Taking Responsibility
- Agenda setting
- Communication
- Having the right values
- Recognizing Political Reality
- Strategic Thinking

# A Leadership Perspective

## **Kathy Cahill**

*Leadership is taking responsibility and taking action for what you or others believe are directions to go. Take with you the staff, environment, culture, organization to meet a mission, a goal or an objective*

## **Jim Hughes**

*You know it when you see it.*

# Delineation of Public Health Leadership and Skills

- Expression of vision and inspiring others to share it
- Work with People
- Public relations/communication skills
- Know your audience
- Ability to deal with threats
- Credibility
- Energy
- Discipline
- Power of Persuasion
- Navigator
- Delegation
- Strategic thinking
- Creativity
- Listening
- Lifelong Learning
- Understanding
- Flexibility
- Team, Coalition and Partnership Building

# Delineation of Public Health Leadership and Skills

- Trust
- Strong Science base
- Systems thinker
- Convener, influencer, and informer
- Environmental scanner
- Spirituality
- Sell the concept of shared values
- Policy maker

# Leadership Skills

## **William Watson**

*The most important leadership skill is a sense of humor.*

## **Bill Roper**

*Leaders need to plan on how to get from here to there.*

# Activities of Leadership

# Selected Activities of Public Health Leaders

- Environmental scanning
- Knowledge of community functions
- Health status measurement
- Political Activities
- Communication with different sectors
- Up to date science knowledge
- Staff motivation
- Vision retreats
- Public health assessment and surveillance
- Change agent
- Create opportunities for self-renewal
- Advocacy
- Focus on economics of public health
- Create a vision
- Conflict resolution
- Use data
- Collaboration

# Selected Activities of Public Health Leaders

- Promote prevention
- Building community constituencies
- Ability to listen
- Health education
- Cultural competency skills
- Policy Development
- Teamwork
- Strategic Planning
- Promote core functions
- Work with legislators
- Translate knowledge into practice

## **Martha Katz**

*Read the newspaper and listen to the news.*

## **Joyce Essien**

*Cultural competency skills need to create an interface between the organization and the community.*

# Business and Public Health

# Where is the difference between public health and business

- Bud Nicola, “The database in human health is different than business.”
- Alan Hinman, “We have a noble goal and the motivators are different from the business community.”
- Carlyn Collins, “ It is easier to be a leader in the private sector than the public sector.”
- Tom Balderson, “One of the biggest differences is the profit motive of business. In public health, the profit motive is better health.”
- Bill Roper, “Social justice is a political argument and not a leadership issue.”

# CDC

## **Bill Roper**

*Bureaucracy doesn't prevent leadership from occurring. Leaders persist over time.*

## **William Watson**

*The categorical divisions of CDC are constructive. No place in the world is so organized to address all the major health issues of the world.*

# The Effect of CDC on Leadership (Enhancements)

- Test ideas with other national leaders
- Collaboration
- Some CIOs promote cross-fertilization
- Problem solving environment
- EIS officers have freedom to act
- EIS is an integrated CDC voice
- Many leaders nurtured by agency
- More cross-cutting activity than realized
- Allows individuals to progress in the org.
- Speaks to the big issues
- Leadership is possible if individuals learn to make organization work
- Science-based
- Training opportunities

# The Effects of CDC on Leadership (Hindrances)

- Organization sometimes stifles creativity
- Article approval process complex
- Sheltered from Washington
- Hierarchical organization impacts communication
- Measuring tools get in the way of effectiveness
- Individual action encouraged rather than group action
- Risk-taking sometimes discouraged
- Hard to reach across CIOs

# The Effects of CDC on Leadership (Hindrances) continued..

- Duplication of effort
- External pressures on agency
- Changes in leadership have increased
- Epi oriented and not really practice-based
- Easier to work away from CDC
- No decision is ever final
- Scientists are not always good leaders
- Graying of leadership
- Too categorical
- Needs to promote career development

# Effects of Training

# Benefits of Leadership Development Programs

- Recharge Batteries
- Networking Opportunities
- Personal Psychological impact
- Helped in leadership reflection
- Expand horizons
- Increases energy
- Sharing of experience
- Helps leaders to decide to make a difference
- Education is always positive
- Learning Visioning
- Learn new skills

# Negatives of Training

- Platitudes and generalities
- Hard to put information into practice
- Leadership is innate
- Organizations resistance to change

# Leaders on Training

**Steve Thacker**

*Getting people together is good for learning*

**Mark Oberle**

*I was influenced by my fellow scholars who were approachable, younger than me, and smarter*

# Overall Vision for the Future

- Go with the public's needs
- Cutting edge of technology
- Public health is local
- Development of outcome indicators
- Take charge of a smaller more focused PH system
- No more direct services
- Fragmented and decentralized health system
- Strong public health information system
- Greater core functions focus
- Value for health promotions

# Leader's Vision

## **David Sencer**

*Unless public health does something, my vision is public health is going to go down the tubes.*

## **Lynda Doll**

*Public health will survive. We are beginning to see people as an integrated whole. Public health is moving into a direction of seeing populations in terms of their behavior and biological characteristics*

# System Issues for the Future

- Information Technology
- Health Communication
- Media Advocacy
- Reconfiguration of public health workforce
- Building the public health system
- Expansion of social science research
- Redefine public health in the wider context of human/social services
- Development of public health informatics
- Health service reform
- Include economics issues
- Make prevention a reality
- Learning communities based on data
- Increase community linkages
- Balance changes in managed care and public health agency practice

# System Issues for the Future

- Get to the table more
- More public-private partnerships
- Impact of genetics on public health
- Retrenchment
- Core functions driving the system
- Mastering diversity
- Changing laboratory issue
- Increase protection role
- Leadership development
- Agenda for health objectives
- Increase respectability

# Leaders View System Change

## **Carl Tyler**

*CDC and public health need to sit down and define the public health system and how the components interact.*

## **Charles Stokes**

*Public health has to leverage changes in managed care to assure that people get the services they need.*

## **Helene Gayle**

*Increase public health's and CDC's involvement with communities.*

# Potential Health Issues in the Future

- Emerging infectious diseases
- Injury and violence
- Environmental Health
- Infant mortality
- Population growth
- Antibiotic resistance
- Immune suppression
- Chronic disease and aging
- Behavioral health
- Diabetes
- Cardiovascular Disorders
- Emerging threats
- Deterioration of communities
- Genetics testing
- Tobacco

# Health Issues

## **Charles Stokes**

*It is important to implement the core functions to address whatever health problems come up.*

## **Richard Jackson**

*No specific health problem will drive the system. Most of the specific health problems are really trivial.*

# First Challenges of the 21<sup>st</sup> Century

# John Gardner on Self Renewal

*In a society capable of renewal [leaders] not only welcome the future and the changes it brings, but believe they can have a hand in shaping that future.*

# Ten Leadership Issues for the 21<sup>st</sup> Century

1. Strategies oriented toward growth rather than retrenchment.
2. Customer and community-focused activities
3. Technology and information advancements
4. More teams, coalitions, alliances, and partnerships
5. Shared service sector by public and private entities
6. Budgeting based on core functions and essential services
7. Empowerment of all parties
8. Changing values related to health
9. Promotion of best practices
10. Organizational reorganization (Toffler)

# New Agenda

- HEART ALERT NETWORKS
- PUBLIC HEALTH PREPAREDNESS CENTERS
- NATIONAL PUBLIC HEALTH PERFORMANCE STANDARDS
- PUBLIC HEALTH LEADERSHIP DEVELOPMENT
- PUBLIC HEALTH WORKFORCE DEVELOPMENT
- PUBLIC HEALTH INFRASTRUCTURE DEVELOPMENT
- PUBLIC HEALTH TRAINING CENTERS
- PUBLIC HEALTH PRACTICE RESEARCH
- CREDENTIALING
- MAPP (Mobilizing Action through Planning and Partnerships)
- PUBLIC HEALTH INFORMATICS

# William Foege

*People need to see themselves in the future. You have to have enough power to feel you can alter it.*