

TOPIC OVERVIEW 3 | Governance research theme

Strong leadership and management competencies are key elements for building health systems that are responsive to population needs. In low and middle-income countries (LMIC), where health systems are often characterised by scarce resources and high burdens of disease, these skills are particularly needed. However, current approaches to leadership and management development do not equip emerging leaders with the competencies (knowledge, behaviour, skills, attitudes and values) required for effective leadership and management.

This brief provides an overview of the evidence on health systems leadership and management in LMIC. It describes who health leaders and managers (L&M) are, the scope of their work and the ideal competencies required for effective leadership and management. It then outlines approaches to developing leadership and management skills and the strengths and limitations of these approaches.

What is health leadership and management?

Leadership is a process of enabling others to work in a specific context; it involves creating a vision or strategic direction for an organisation, and inspiring, motivating and aligning actors and the organisation to achieve this vision. Management encompasses a set of task-orientated processes of planning, budgeting, organising, staffing, controlling and problem solving. Whilst the concepts of leadership and management are theoretically distinct, in practice they overlap.

Who are health leaders and managers?

The majority of health L&M in LMIC are trained health professionals including doctors, nurses or pharmacists, who are often promoted into a managerial position based on their experience or competence as a health professional. Many are expected to carry out their management tasks in addition to clinical duties.

What is their role?

At the national level, leadership and management typically include setting policy and overseeing strategic direction, managing resource allocation and monitoring policy targets and outcomes. At the operational level, hospital, district and primary health care facility managers are responsible for converting inputs such as finance, staff, supplies, equipment and infrastructure into effective services that produce health results and are responsive to population needs.



In many settings the decision space of managers in districts and primary care facilities is narrow – typically they are responsible for following administrative directives and standard operating procedures and for meeting targets that are issued from higher levels of the health system. Often managers do not set their budgets or service targets, and cannot hire their staff. Nonetheless, managers still have the space and responsibility to lead in the sense of motivating their staff and colleagues, or working constructively with external stakeholders.

Common management responsibilities


Manage services: Planning, supervision and monitoring volume, quality and coverage of health services.

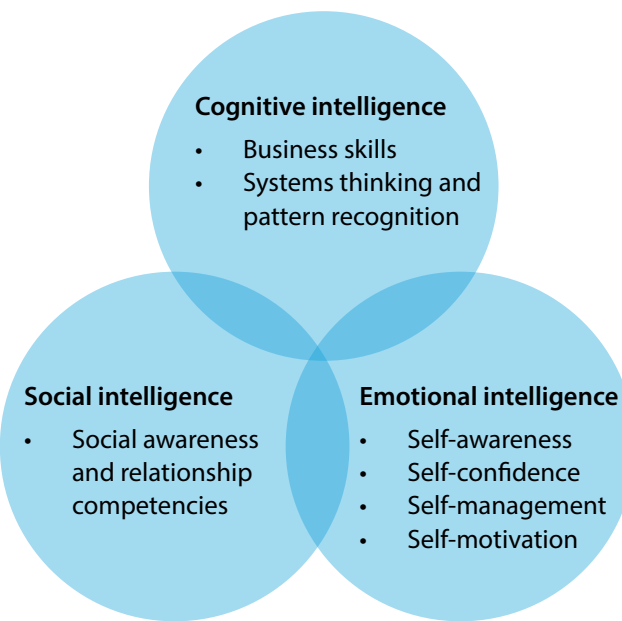
Manage resources: Manage staff, budgets, drugs, equipment, buildings and information.

Manage stakeholders: External relations, partners, community members, service users, intersectoral stakeholders.

What competencies do health managers and leaders need?

Competencies include the knowledge, behaviour, skills, attitudes and values that underlie leadership and management actions. One approach is to consider competencies in terms of three types of intelligence: cognitive, social and emotional intelligence (see figure one).

 **Figure 1: Types of intelligence required for effective leadership and management**



Approaches to developing leaders and managers in LMIC health systems

Formal training

Formal training, offered by academic institutions, is the most common approach used in LMIC contexts. It includes modules within Masters Programmes, diplomas, certificates and short courses. The curriculum tends to focus on developing 'cognitive intelligence' competencies such as programme management, financial management and information management.

On-the-job training

On-the-job approaches range from informal learning to more formal programmes of induction. Commonly used practices include 360-degree feedback, technical advisors, mentoring and learning networks both from within the organisation and externally.

Action learning

Action learning combines formal training with on-the-job mentoring and support, and uses assignments and reflection drawn from the work context as the learning vehicle. This

approach assumes that leadership and management development is best achieved when it is integrated into the work and activities being managed.

Strengths and limitations of current approaches

Many approaches to developing L&M focus on the technical and operational skills of planning and budgeting with limited attention paid to the emotional and social intelligence aspects, such as the ability to inspire and motivate others, to mentor, and to lead organisational change processes.

Developing the emotional and social intelligence required for effective leadership requires a level of self-awareness, motivation and identity as a leader that cannot be attained through educational processes. Rather, skills are first learned through problem-related experiences or observational learning in specific contexts, which are then organised into increasingly higher-level systems of awareness. Over time leadership skills and knowledge become inextricably integrated with the development of a person's self-concept as a leader.

Formal training programmes have failed to deliver the sorts of leadership competencies that are needed to transform health systems, and there is a growing recognition that key leadership competencies can be better gained within real life settings. It may therefore be worthwhile to experiment more with action learning approaches, and to insert the learnings into routine practices and processes of health managers.

Further reading

- The Health Manager's website, World Health Organization: www.who.int/management/en/
- World Health Organization. 2007. Towards better leadership and management in health: a report on an international consultation on strengthening health leadership and management in low-income countries. *Making Health Systems Work Series*.
- Gilson, L. 2007. What sort of stewardship and health system management is needed to tackle health inequity, and how can it be developed and sustained? *Health Systems Knowledge Network*.

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