



# ***PROLEAD II:*** ***A HEALTH GOVERNANCE*** ***INITIATIVE***

***WHO Centre for Health Development and the  
WHO Western Pacific Regional Office***

***Module 1: 25 July – 3 August 2005 (Bangkok, Thailand)***

***Module 2: 5–9 December 2005 (Kobe, Japan)***

***Module 3: 20–22 April 2006 (Kobe, Japan)***

(as of 13 May 2005)

## Background

A complex and dynamic global environment requires that public health leadership that must achieve unprecedented levels of collaboration and coordination across programmes and between and among governments and other strategic partners.

Globally, modernization, urbanization, industrialization, environmental degradation, disaster migration, the globalization of markets and telecommunications, and a changing demographic profile have had a profound influence on the social, political and cultural milieu of the world and on health. Health promotion provides social technology to manage these complex social and political processes. Effective and evidence-based health promotion is critical to achieving better health outcomes, more responsive health care systems and greater participation of the community in governance. Capacity building for promoting health across sectors is necessary if people are to increase control over the determinants of health and improve their health status.

In a globalizing environment, new challenges for the promotion of health are becoming increasingly evident as the interaction between globalization and urbanization create new driving forces that impact on health through what is being referred to as “glocalization”<sup>1</sup>.

In response to these needs and challenges, the WHO Centre for Health Development (WHO Kobe Centre – WKC) and the WHO Western Pacific Regional Office (WPRO) have agreed to collaborate as proponents for a multi-regional capacity building initiative in support of the global expected results for health promotion<sup>2</sup>. The initiative seeks to:

- (1) Delineate priority health promotion leadership development needs and create opportunities for meeting them at the glocal interphase;
- (2) Strengthen the evidence base for effective health promotion and use it to inform health public policy development;
- (3) Provide a mechanism for promoting health across programmes, organizations and sectors with specific emphasis on bridging gaps between national and local health promotion policies, programmes and activities;
- (4) Connect people, problems and opportunities to develop consensus on the most important determinants of health;
- (5) Develop setting-specific approaches to address determinants of health, especially among poor, vulnerable and marginalized groups and communities;

---

<sup>1</sup> Glocalization is a term that was invented in order to emphasize that the globalization of a product is more likely to succeed when the product or service is adapted specifically to each locality or culture it is marketed in. The term combines the word globalization with [localization](#). (An earlier term for globalization in terms of product preparedness for international marketing is [internationalization](#).) The term first appeared in the late 1980s in articles by Japanese economists in the Harvard Business Review. According to the sociologist Roland Robertson, who is credited with popularizing the term, glocalization describes the tempering effects of local conditions on global pressures. At a 1997 conference on "Globalization and Indigenous Culture," Robertson said that glocalization "means the simultaneity --- the co-presence --- of both universalizing and particularizing tendencies."

Glocalization was also cited by the Ad Hoc Research Advisory Group of the WHO Centre for Health Development (WHO Kobe Centre) as a potential entry point for the work of the Centre specifically in relation to research on urbanization and health

<sup>2</sup> Global expected results for health promotion 2004-2005 include: 1) capability strengthened at national and regional levels for the planning and implementation of multisectoral health promotion policies and programmes across the life course and as populations age; 2) programmes implemented for capacity building for and financing of health promotion at local and community levels, workplace and other settings, with particular focus on improving the health of disadvantaged people; 3) evidence through global review of the effectiveness of health promotion collected and disseminated; and 4) advocacy and health communications strengthened at all levels in relation to health promotion and the major risk factors as defined in *The World Health Report 2002*.

- (6) Ensure sustainable financing and autonomous infrastructure for promoting health at local levels.

This document seeks to describe ***Prolead II: A Health Governance Initiative***, a capacity building programme for teams of leaders from developing countries who will be focused on specific action-research projects for sustainable infrastructure and financing for promoting health at the glocal interphase.

## **Introduction**

In support of four of the six global expected results for health promotion, the proponents will collaborate with countries of AFR, EMR and SEAR to embark on a capacity building programme for teams of leaders from developing countries who will address the following issues:

- Lack of understanding of health promotion;
- Weak governance for the promotion of health;
- Gaps and “tension” between national and local health promotion programmes, policies and actions;
- Isolation of health promotion from health sector reform and health systems development; and,
- The evolving role of local governments in the promotion of health.

***Prolead II: A Health Governance Initiative*** builds on a leadership development model that started in 2003 in the Western Pacific Region as a collaborative effort between the Southeast Asian Ministers of Education Organization Tropical Medicine Network (SEAMEO TROPED Network), the School of Public Health of La Trobe University, Australia and the Field Epidemiology Training Program Alumni Foundation Inc., with the support of the Japan Voluntary Fund.

A pilot of the programme has been completed with six countries in the Western Pacific.

Lessons from the pilot are now being applied to a team-based capacity building initiative that will be further enriched by materials from AMR and EUR and the work of the WHO Kobe Centre.

## **Course Description**

This is a modular nine-month course on applied team leadership and management designed for leaders who promote health. Participants will carry out projects using tools introduced

during the didactics portion of the course. This portion will be conducted in three separate modules to allow flexibility in training and work schedules.

The course seeks to build on the experiences of the different Regions of WHO, and will include discussions of case studies from the Global Programme on Health Promotion Effectiveness, the Healthy Cities movement and the Investment for Health Project of WHO EURO.

Opportunities will be created for fellows to interact with members of the International Network of Health Promotion Foundations, members of networks from the Healthy Cities movement and other partners who are engaged with health promotion at the glocal interphase.

Participants will also participate in a *Leaders Forum on Research for Capacity Building for Health Promotion* on 4–6 August 2005, and the 6<sup>th</sup> Global Conference on Health Promotion in Bangkok, Thailand on 7–11 August 2005.

### **Objective**

The course aims to enhance practical skills among teams across five categories (intra-personal qualities, interpersonal qualities, cognitive skills, communication skills and task-specific skills) that may be needed to improve governance for health promotion, with a sub-focus on new and autonomous structures and sustainable financing to address challenges brought about by globalization.

### **Guiding Principles**

- Emphasize applied skills, not just theoretical knowledge;
- Train in a highly interactive manner and draw out personal experience to reinforce team learning;
- Incorporate health promotion effectiveness studies and examples to illustrate use of leadership, management and health promotion tools [Case studies and examples will be selected on the basis of backgrounds, expressed needs and interests of the project teams];
- Encourage strategic thinking in health promotion;
- Emphasize governance principles in decision-making;
- Use applied field projects to 1) reinforce classroom learning, 2) multiply training benefits and 3) generate products that have a measurable impact on the strategic directions of the fellow's work;
- Provide opportunities for mentoring to support professional growth and development;
- Solicit feedback through a variety of means (e.g. questionnaires, focus groups, external evaluations) and continuously strive to improve the learning process.

## **Health Promotion Infrastructure and Financing Project**

One of the prerequisites of finishing the course is an applied project of the fellow's choice.

The project should:

- Contribute to knowledge on bridging gaps between local and national health promotion action;
- Address policies related to sustainability of health promotion at the glocal interphase;
- Result in improved governance and/or organizational practice;
- Demonstrate how individual and team leadership skills are applied to specific situations;
- Include 'leverage' of counterpart funding and cost-sharing at project inception.

### **Criteria for selection of fellows**

Fellows will be selected in teams of three. The first fellow must be a leader who is working at the local government/city/metropolitan level in a political decision-making capacity. The second fellow must be a leader working at the municipal level in a sector/area that directly impacts on determinants of health in the health sector. The third fellow should be from civil society/the non government sector and working in an area that directly impacts on determinants of health in the health sector.

Specifically, fellows must be individuals who are:

- Recognized as leaders who are dealing with health promotion issues that address gaps between national and local health promotion action;
- Known to have demonstrated potential for leadership in promoting health by navigating health promotion policy in a complex and rapidly-changing environment;
- Currently employed and engaged in a technical or professional area of work that addresses determinants of health directly or influences them indirectly (e.g. finance department, planning, etc.)
- Working at a level where policy and practice related to sustainable infrastructure and financing of health promotion at municipal levels can be influenced;
- Representative of the new generation of health promotion leaders and are therefore perceived as change agents or reformers of high integrity;
- Proficient in written and oral English;
- Multi-skilled and willing to do advocacy and social mobilization;
- Known to have basic computer presentation skills.

### **Mechanism for selection of fellows**

- WHO Kobe Centre will issue a call for nomination of fellows through the Regional Offices. Guidelines for application will be provided.
- Teams will be asked to submit a two-page project proposal on a project related to health promotion infrastructure and financing. WHO Kobe Centre will supply a prescribed format for the proposal. The format will include a section on “researchable areas” that team members wish to undertake in relation to the project. Researchable areas must be related to the glocalization phenomenon.
- Based on the submissions, the Regional Adviser for Health Promotion of the respective Regional Office will select the best team based on the profile of the candidates and their proposals. It is preferable that the individual attributes of team members are complementary. (For example, one could be a person with a strong health promotion background, the other a person who could create a supportive environment for health promotion.)
- Regional Advisers Health Promotion will then forward their choice to WHO Kobe Centre. The decision will be made by consensus, after which WHO Kobe Centre will announce the choice.
- The guidelines and call for proposals will be released in due course for dissemination by respective responsible officers at Regional Offices to prospective teams. Names of selected fellows/country teams should then be forwarded to WKC.

## Faculty

WHO Kobe Centre and WPRO will jointly organize a core faculty for the programme in collaboration with other stakeholders and partners. Faculty will be derived from stakeholders of Prolead I and WHO.

The indicative schedule of lectures and names of resource persons are provided in the Annex.

## Mentoring

The School of Public Health, La Trobe University, Australia will serve as the networking and mentoring agent for the project with the following terms of reference:

- Development and presentation of background document on *research implications for capacity building for health promotion at the glocal interphase*. This paper will be used as the discussion paper at the ‘Leaders Forum on Research for Capacity Building for Health Promotion’ to be held as part of Module 1, Prolead II in Bangkok, Thailand, 4–6 August 2005;
- Based on this background paper and the results of the discussions, the Centre will formulate an agenda for action-research in the area of health promotion at the glocal interphase;
- Management of a mentoring and networking component for teams with institutions, organizations, agencies that can enhance their work, through twinning projects;
- Evaluation of the twinning projects;

- Preparation of an end-of-project report.

### **Twinning projects**

Capacity building will be further enhanced through ‘twinning projects’ between the country teams and an existing entity (a health promotion foundation, a Healthy City or an equivalent institution) that will undertake highly focused and strategic interventions to advance health promotion infrastructure and financing through international exchange, technical advice and collaboration.

The mechanics for twinning projects will be introduced in Module 1 by the networking and mentoring agent, La Trobe University.

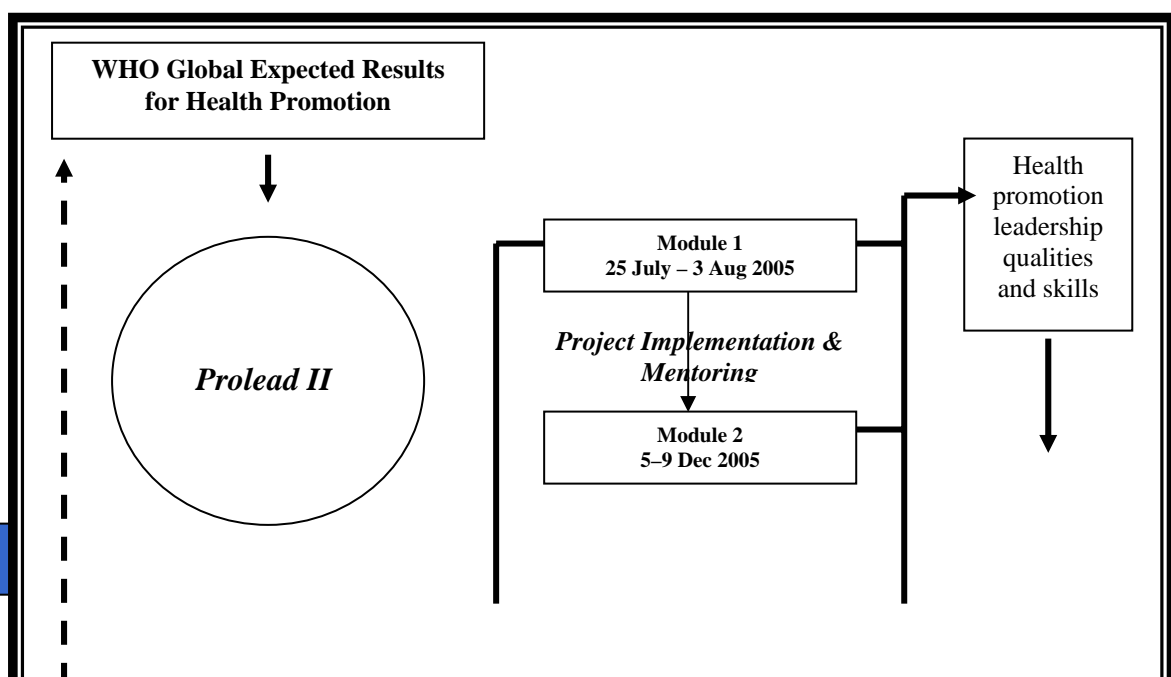
### **Evaluation**

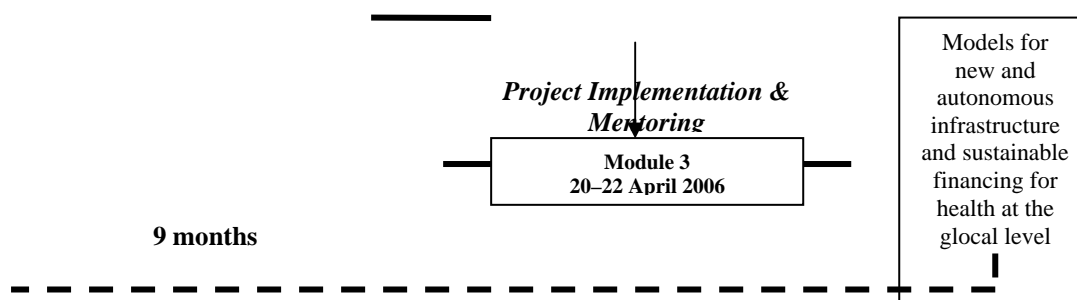
An evaluation design will be built into the programme and will be reviewed at the end of Module 3 in 2006. Regional Advisers for Health Promotion will also be asked to participate in the evaluation process and to assess the applicability of Prolead II to their Region.

### **Continuity and support for future action**

Fellows who finish the programme will be part of an alumni network that will continue to provide support to future activities under Prolead.

## **Course Design and Curriculum**





## Course Design

*Prolead II: A Health Governance Initiative* is an applied team-based capacity building course that is composed of a series of three modules with several months' interval for project implementation and supervision.

### Module 1

The first module covers a range of topics on leadership and management that will help the participants clarify and deepen personal vision and self-actualization; identify priorities and focus energies; recognize problems and assess situations objectively; and realize the effects and impact of working in groups as opposed to working individually.

International resource persons will conduct lectures.

Case study discussions will be conducted using examples from the Global Programme on Health Promotion Effectiveness and the work of health promotion foundations.

Participants will also be introduced to principles of multiple sourcing of funding for health promotion. Opportunities will be provided to explore a wide range of options for sustainable financing including dedicated tobacco and alcohol taxation, social health insurance, corporate sponsorships, community financing and more. Public-private partnerships for health and the role of the corporate as well as the non-profit private sector in health promotion will be explored.

A visit to ThaiHealth is included to gain insight into how new and autonomous infrastructure can be achieved.

### *Project Identification*

Participants will be asked to present project proposals on how to achieve new and autonomous health promotion infrastructure and sustainable financing in their locality by addressing specific gaps between national and local health promotion. Participants are expected to implement their projects using the Prolead tools for total quality management and governance. The projects should demonstrate application of leadership skills in communication, advocacy and social mobilization.



Project implementation will cover nine months. Faculty supervisors and mentors will be in constant communication and interaction with the fellows. A website facility will be available to support this. Participants are encouraged to assemble and work in teams for the duration of the course.

*Participation in the 6<sup>th</sup> Global Conference on Health Promotion*

As the first module will be held in Bangkok, participants will also have a chance to participate in the 6<sup>th</sup> Global Conference on Health Promotion and will be actively engaged in facilitating and sharing experiences on new and autonomous infrastructure and sustainable financing for the promotion of health.

**Module 2**

The second module will give the participants a chance to learn more about models that address glocal health promotion issues such as health promotion foundations, healthy cities and public-private partnerships. A special session will also be held on economic arguments for promoting health.

Flexibility is provided in Module 2 to include special topics that will help the fellows in their projects. This part of the course will include reporting/feedback by the participant on the status of the field projects. Assessment of the mentoring will take place.

**Module 3**

The third and final module will cover oral and poster presentation of the different projects, an evaluation of the course and finally, the “graduation” of the participants. Policy-makers and other health promotion advocates will be invited to the course completion ceremony.

**Curriculum**

<p><i>25 July – 3 August 2005</i> <i>Bangkok, Thailand</i></p> <p><b>Module 1</b></p> <ul style="list-style-type: none"> <li>• Health promotion leadership challenges and issues</li> <li>• Globalization and health</li> <li>• Nodal governance</li> <li>• Defining health promotion issues at the glocal interphase</li> <li>• Country team reports</li> <li>• Behavior style analysis</li> <li>• Effective leadership</li> <li>• Team building</li> <li>• Health sector reform and health promotion financing</li> </ul>	<p><i>5–9 December 2005</i> <i>Kobe, Japan</i></p> <p><b>Module 2</b></p> <ul style="list-style-type: none"> <li>• Case studies of health promotion foundations, Healthy Cities and public private partnerships for health</li> <li>• Economic arguments for promoting health</li> <li>• Special Topics</li> <li>• Project Updates</li> <li>• Assessment on mentoring</li> <li>• Discussion on twinning projects</li> </ul>
---	---

- Tobacco taxation and health promotion
- Public private partnerships for the promotion of health
- Social health insurance for health promotion
- Local government funding for health promotion
- Introduction to total quality management and governance
  - ✓ *Theme selection*
  - ✓ *Reasons to improve*
  - ✓ *Customer values assessment*
  - ✓ *Analysis*
  - ✓ *Countermeasure and practical methods*
  - ✓ *Results, standardization and future plans*
- Effective communication, social mobilization and advocacy
- Field visit to ThaiHealth
- Leaders Forum on capacity building for the promotion of health
- Presentation of project proposals

*20–22 April 2006*  
*Kobe, Japan*

**Module 3**

- Project presentations
- Course evaluation
- Course completion ceremony

**Prolead II**  
**A Capacity Building Programme for Leaders Who Promote Health**  
**Module 1: 25 July – 3 August 2005 (Bangkok)**  
**Module 2: 5–9 December 2005 (Kobe)**  
**Module 3: 20–22 April 2006 (Kobe)**

*Annex*

**WEEK 1**

<b>TIME</b>	<b>DAY 1 25 July</b>	<b>DAY 2 26 July</b>	<b>DAY 3 27 July</b>	<b>DAY 4 28 July</b>	<b>DAY 5 29 July</b>
08:00–09:00	Registration and course orientation	Defining health promotion issues at the glocal interphase (Susan Mercado)	Team building	Introduction to the Prolead management tools (Prolead faculty)	3. Customer values assessment (Prolead faculty)
09:00–10:00	Country reports		Health sector reform and health promotion (Alberto Romualdez Jr.)		
10:00–11:00	Country reports	Personality insights profiles (Prolead faculty)	Health promotion financing (D. Bayarsaikhan)	1. Theme selection (Prolead faculty)	4. Analysis (Prolead faculty)
11:00–12:00					
12:00–13:30	LUNCH	LUNCH	LUNCH	LUNCH	LUNCH
13:30–14:30	Globalization and health (Ilona Kickbusch)	Effective leadership (Prolead faculty)	Tobacco taxation and health promotion (Addy Carroll and Burke Fishburn)	2. Reasons to improve (Prolead faculty)	5. Countermeasures and practical methods (Prolead faculty)
14:30–15:30			Social health insurance and health promotion (Dalmer Hoskins)		
15:30–16:30	Nodal governance (Scott Burris)		Local government funding for health promotion (Yasuo Uchida)		6. Results, standardization and future plans (Prolead faculty)
16:30–17:30			Public-private partnerships for health promotion (Stephen Tamplin)		
		Reception			

**WEEK 2**

<b>TIME</b>	<b>DAY 6 30 July</b>	<b>DAY 7 31 July</b>	<b>DAY 8 1 August</b>	<b>DAY 9 2 August</b>	<b>DAY 10 3 August</b>
08:00–09:00	PROJECT PREPARATION		Field Visit ThaiHealth Office	Social mobilization (Addy Carroll)	Health promotion, NCD prevention at the glocal interphase (Gauden Galea)
09:00–10:00					
10:00–11:00					
11:00–12:00					
12:00–13:30	LUNCH	LUNCH	LUNCH	LUNCH	LUNCH
13:30–14:30	PROJECT PREPARATION		PROJECT PREPARATION	Advocacy (Ilona Kickbusch)	Orientation on twinning projects
14:30–15:30					
15:30–16:30					
16:30–17:30					

<b>TIME</b>	<b>DAY 11 4 August</b>	<b>DAY 12 5 August</b>	<b>DAY 13 6 August</b>	<b>DAY 14–18</b>
08:00–09:00	<b>Consultative Leaders Forum on Capacity Building for Health Promotion</b> Opening	Presentation of twinning projects of Prolead I	An evolving research agenda for capacity building for health promotion (Susan Mercado)	<b>7–11 August</b> Participation in the 6 <sup>th</sup> Global Conference on Health Promotion (6GCHP)  UN CONFERENCE CENTRE Bangkok Thailand  Final Instructions (SEAMEO TROPMED)
09:00–10:00				
10:00–11:00	Presentation of background paper on research implications of capacity building for health promotion (Vivan Lin)	Small group discussions		
11:00–12:00				
12:00–13:30	<b>LUNCH</b>	<b>LUNCH</b>	<b>LUNCH</b>	
13:30–14:30	Presentation of twinning projects of Prolead I	Presentation of project proposals of Prolead II	Plenary and synthesis (Stephen Tamplin)  Response of WKC Director	
14:30–15:30				
15:30–16:30				
16:30–17:30				
			Reception	

## Module 2 Schedule

<b>TIME</b>	<b>DAY 1 5 December</b>	<b>DAY 2 6 December</b>	<b>DAY 3 7 December</b>	<b>DAY 4 8 December</b>	<b>DAY 5 9 December</b>
08:00–09:00	Unfreezing	Case study: Health promotion infrastructure and financing in Healthy Cities: Seoul, Republic of Korea	Case Study: Public private partnerships and the Swiss Health Promotion Foundation (Bertino Somaini)	Presentation of projects	Management of change (Ferdinand Henson)
09:00–10:00					
10:00–11:00	Economic arguments for promoting health (S. Kwon)				
11:00–12:00					
12:00–13:30	LUNCH	LUNCH	LUNCH	LUNCH	LUNCH
13:30–14:30	Case studies from WHO EURO, Investment for Health projects (Erio Ziglio)	Case Study: Health promotion foundation at a state level: Victoria Health Promotion Foundation (Rob Moodie)	Case Study: National support for state funded health promotion: Sarawak Health Department, Malaysia (Andrew Kiyu)	Presentation of projects	Final instructions
14:30–15:30					
15:30–16:30					
16:30–17:30					
		Reception			

### Module 3 Schedule

<b>TIME</b>	<b>DAY 1 20 April</b>	<b>DAY 2 21 April</b>	<b>DAY 3 22 April</b>
08:00–09:00	UNFREEZING	PREPARATION OF FINAL REPORTS	PRESENTATION OF FINAL REPORTS  GRADUATION/CLOSING CEREMONY
09:00–10:00			
10:00–11:00	Workshop on sustaining the momentum for change (Prolead faculty)		
11:00–12:00			
12:00–13:30	LUNCH	LUNCH	LUNCH
13:30–14:30	PREPARATION OF FINAL REPORTS	COURSE EVALUATION	MEETING OF REGIONAL ADVISERS FOR HEALTH PROMOTION
14:30–15:30			
15:30–16:30			
16:30–17:30			
			Reception