Public Health Leadership Theory In Immunization Campaigns: a look at the Transactional and Transformational Leadership Styles

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Abstract
The need for public health practitioners to acquire the attributes and the necessary skills that makes up an effective leader should not be over emphasized especially now that the challenges in the public health sector is more than ever before with emerging and re-emerging diseases. We all know that public health leadership aims to protect health of the public, promote good health at a population level, prevent diseases, and to reduce health inequity and inequality.

There is no doubt that public health leaders require certain traits and skills to enable them build infrastructure that would prevent diseases, serve people irrespective of their backgrounds, ensure population based approach on public health issues, create strategies aimed at preventing diseases, promoting good health, adhere to timeliness and completeness of data collection, and have community-wide health strategies. The role of transactional and transformational leadership styles in immunization campaigns aims to give the desired leadership for policy makers to understand problems associated with immunization campaigns, so that the end result would be to create awareness on the importance of immunization among parents and other stakeholders, to enlighten the public on benefits associated with eligible children getting vaccinated with the vaccines. It is expected that once the right leadership is at the helm of affairs, social change would be promoted within communities to improve on the country’s the health indicators.

Keywords: Public Health, Leadership Theory, Immunization Campaigns, Transactional Leadership and Transformational Leadership, Vaccine Preventable Diseases

Introduction
In this 21st century it is evident that the global public health leadership is facing increasing challenges on issues such as emerging and re-emerging diseases, widening gap between the rich and the poor, increasing health inequity and inequality, lack of focused political leadership on issues of public health importance, bioterrorism, and antibiotic resistance among others.¹

In modern public health leadership circle, there is no doubt that vaccination campaigns require an effective leader who has the required leadership trait, skills, emotional intelligence and who is familiar with cultural norms of the people.¹²³⁴ Several literature have discussed on the need for public health practitioners to acquaint themselves with the attributes that makes up an effective leader and on the need to acquire the necessary skills accordingly. We all know that public health leadership aims to protect health of the public, promote population health, prevent diseases, and to reduce health inequity and inequality among the populace.¹⁵⁶

In most developing countries, the major challenges that immunization programmes on VPDs encounter include lack of increase commitment from government at all levels, lack of good programme management especially at the local government level, sub-optimal immunization coverage during campaign, ineffective disease surveillance system and lack of interest of the community to immunization.⁷⁸. In a bulletin of the World Health Organization on eradicating Polio in the African region, the major obstacles to the immunization program include lack of translation of high-level support into local action, insecurity, public resistance, lack of collaboration across borders and lack of use of new technologies⁹.¹⁰

In some studies, it was observed that there is need to have effective leadership that supports conceptual skills with regards to decision making, opening channels of communication and outlining goals that creates honesty and trust between health care workers and the populace.¹¹

Although the leadership of the immunization programs are considered to be having the required leadership skills on technical aspect, and interpersonal relationships, what could be lacking for the program to achieve its goal is the conceptual skills, effective communication skills with the locals as most parents have knowledge gap on the need for their eligible children to get vaccinated with the required vaccines.¹²³⁴. Often,
there is little information with regards to measurements of the effectiveness of the leadership of the campaign, level of their engagement at ensuring that implementers at the grass roots are applying the right interpersonal communication skills and cultural sensitivity.

Personal Public Health Leadership Theory
It is crucial for the global public health leadership to have a common voice through focused, purposeful and effective leadership; this would ensure that the politicians live up to what is expected of them and that good public health policies are conceived for the good of the entire public irrespective of gender, race or financial status of the communities.1,12

As we are aware, there are various theories in use that involves traits, situational interaction, function, behavior, power, vision and values, charisma, and intelligence among others3,4. Some theorists are of the idea that leadership is based on individual attributes referred to as the "trait theory of leadership"; this view of leadership trait theory was explored at length in a number of works such as the writings of Thomas Carlyle and Francis Galton, whose works have elicited research3,4. Carlyle identified the talents, skills, and physical characteristics of men who rose to power. Galton concluded that leadership was inherited arguing that leaders were born and not developed. Both of these notable works lent great initial support for the notion that leadership is rooted in characteristics of the leader. McCall and Lombardo identified four primary traits by which leaders could succeed or derail: emotional stability and composure (calm, confident and predictable, particularly when under stress), admitting error, good interpersonal skills, and intellectual breadth. In general, these theories have been criticized because it is rather impossible to possess all these traits1,2,3,4.

Although leaders and managers use system approach when addressing public health issues, it is important to note that what differentiates between these two groups is the way system approach is applied in solving public health issues. It is this type of approach that empowers public health leaders (and managers) with the required leadership resources that assists them on solving public health issues1.

Visual Representation of Public Health Leadership Theory
The visual representation of the public health leadership theory here would use the leadership components of leadership theories and systems thinking. Importantly, leadership is regarded as the process of social influence in which one person can enlist the aid and support of others to be able to accomplish a common task13. It was observed that leadership is all about creating a way for people to contribute towards making something extraordinary to happen1,14. When this is applied to the public health sector, a public health leader could be viewed as having the skills of managing and leading public health organizations in a focused, purposeful and effective way in accordance with the mission and vision of public health systems so as to bring social change to the community1,14.

It is vital to understand that public health theory works in agreement with systems thinking, hence the need to consider the two when discussing effective leadership within the public health circle. Systems thinking could be considered as a special language, and as a perspective such as events, patterns, system, or as a set of tools. A system could be considered as a "group of interacting, interrelated, and interdependent components that forms a complex and unified whole."15 A system could be living (human system and the environment) or non-living (human made systems) hence the need to understand the various components that made up systems and the way they relate so as to understand their operational mechanism15.

I have presented in Figure 1 a visual representation that aims to show the requirements of a public health leader in an immunization program, and on how to link up with other key players to ensure that vaccination campaigns becomes a success. Thus, it is expected that once the public health leader is able to put the outlined leadership skills into use, there would be palpable results in the area of VPDs and bring the required social change to the communities.
Thus having an effective leader at the top with all the attributes as shown in the figure, the leadership theory that could best fit in would be transformational (TFL) and transactional (TCL) leaderships. In an attempt to clearly relate transformational (TFL) and transactional (TCL) leaderships with the trait theory, skills approach and behavioral perspectives, there is need to understand the theoretical concepts. Although the concept of the trait theory is based on inherent attributes present in a leader; the skills approach in leadership has to do with the capabilities of a leader to adequately meet up with the challenges in the environment that he operates. Additionally, behavioral perspectives in leadership emanated from philosophy, personality and experience of leaders are considered as one of the ways leaders behave while discharging their responsibilities.

The term ‘transaction’ could be considered as exchanges between leaders and their followers laying emphasis on rewards for desired behavior; the term ‘transformation’ simply refers to the ability of a leader to inspire, motivate and empower his followers so as to achieve outlined goals.

Transactional and Transformational leaderships analyzes relationships between a group and its leadership in terms of transactional analysis. The TCL treats relationships with followers in terms of an
exchange, giving followers what they want in return for what the leaders desires, following prescribed tasks to pursue established goals. It gives opportunity to the manager to lead the group and the group agrees to follow his lead to accomplish a predetermined goal in exchange for something else. The leader has the power to evaluate, correct and train subordinates when productivity is not up to the desired level and also reward effectiveness when the expected outcome is achieved1,2.

The TFL motivates his team to be effective and efficient and this is done through effective communication, which forms the basis for goal achievement focusing on the group for its final desired outcome or goal attainment1,2. The TFL is highly visible and uses chain of commands to get the job accomplished. This leader focuses on the big picture and needs to be surrounded by people who take care of the details. The TFL often look for ideas that move the organization to reach the company's vision1,2.

In TFL, there are important components that goes with it (eg charisma, intellectual stimulation, and individual consideration) to help the leader persuade his followers on the need for change, support and motivate them on innovative thinking1. As followers look up to their leaders for guidance, the charisma enables TFL to use Situational Approach and take lead during crisis situations1. It has been shown that TFLs develop certain traits early in life (charisma and talent to inspire people), which could explain the connection between TFL and emotional intelligence (EI)1,7. However, applying regression and correlation analysis to this concept showed EI and TFL to be correlated; arguably this relationship is not significant especially when the common variance involved is considered.

Furthermore, it has been shown that style of leadership depends on the followership, and that TCL which outlines roles and rules is the ideal model when followers are prevention-focused. On the other hand, TFL, which provides followers with necessary support and long-term vision to try new things, is ideal when the followers are promotion-based18.

Empirical Evaluation Plan for a Public Health Leadership Theory
In several scholarly writings, it has been shown that public health improvements require partnership and sustained actions of coalitions 1–4 hence the need to have an effective leadership at the top with clear vision and requisite skills19,20. The immunization campaigns in most developing countries are short of the required public health leadership; this could explain some of the reasons why often countries encounter difficulties in elimination or eradicating the VPDs.

It has been shown in several literature, that training of collaborative leaders who participate in partnerships21 greatly help in strengthening networks of leaders by creating trust among themselves, allow information and knowledge sharing to enable them work together towards improving public health indicators in their respective communities that would help them achieve objectives of health campaigns22. This could be done using learning methods over a given period of time so as to teach participants various leadership styles, coach them using assigned readings, group discussions, interactive lectures, conference calls, case studies, and team project, and then get their personal feedbacks on the training at the end. Evaluation could be in the form of questions on knowledge gained during the training, what effects the training would have on their leadership styles, what is their understanding, perspectives, and practices, as well as impact the team project had on them23.

Conclusion
Although adequate funding is key to addressing the issues of VPDs across the globe, there is need to have an effective public health leader at the helm of affairs to ensure the judicious use of the scarce resources. This would ensure that activities are planned and implemented with achievable results through expanding networks, capacity building of personnel, improved disease surveillance and the strengthening of routine immunization. The effective leader would bring together all partner organizations to work toward a common goal to bridge any existing gaps between the parents and program implementers. It is clear that public health leaders require certain traits and skills to enable them build infrastructure that would prevent diseases, serve people irrespective of their backgrounds, ensure population based approach on public health issues, create strategies aimed at preventing diseases, promoting good health, adhere to timeliness and completeness of data collection, and have community-wide health strategies. There may be need to apply transactional and transformational leadership styles that would ensure that policy makers understands the barriers to accepting vaccines, to increase awareness on how to prevent VPDs among parents and other stakeholders, and to enlighten the public on benefits of the immunizations. This would help improve the practice of husbands allowing their wives to take all eligible children to vaccination centres, to remind political leaders on the need to show commitment on the health of the nation, to improve on public relations between the community and policy makers as well as immunization program managers, and to influence and promote social change among communities.

References
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