

global
tobacco control



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BLOOMBERG SCHOOL
of PUBLIC HEALTH

Institute for
Global Tobacco Control

PUSHING THE BOUNDARIES
**for Successful
Tobacco Control**

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Introduction, Objectives, and Approach

Introduction

Leadership is a pivotal but often intangible requirement for progress in tobacco control.

Sound science and technical precision are required to generate the growing evidence base for successfully countering the tobacco epidemic. However, ensuring that definitive action is taken against tobacco requires more than the scientific evidence. Indeed, often, what propels tobacco control action at the global, national, subnational and community levels, is political will engendered by proactive leadership. Translating the evidence for effective action against tobacco into actual implementation of proven interventions requires committed leadership.

The Institute for Global Tobacco Control (IGTC) Tobacco Control Leadership Program aims at building effective capacity for tobacco control leadership. As part of the Bloomberg Initiative to Reduce Tobacco Use, the program aspires to empower current and emerging leaders in low and middle-income countries experiencing the greatest burden of disease from tobacco use. The program is structured around the Articles and Guidelines of the WHO's international Framework Convention on Tobacco Control (FCTC) and delivered by faculty comprised of International experts in tobacco control leadership, policy, communications, research, advocacy and surveillance.

Objectives

The overall program objectives are to:

1. Enhance leadership capacity and systems thinking skills to affect policy development and implementation;
2. Delineate leadership principles and demonstrate their application to addressing country-specific tobacco control issues and challenges;
3. Strengthen strategic communication skills (audience segmentation and audience-centric messaging); and
4. Engage with and enhance collaboration among a wide range of other program participants in the tobacco control movement.

Structure and Approach

The exercises in this workbook have been selected from an array of activities that have been previously used in other tobacco control and public health training programs. Each activity begins with a brief background, explaining the rationale for the exercise. Learning objectives are listed in a separate section, followed by instructions and tools. At the end of each activity, guide questions to stimulate discussion are listed and space is provided for notes.

To assist participants, examples taken from actual group work from previous sets of participants are used as illustrative examples for each exercise. At the end of each exercise, there is a checklist to assess your work. The learning exercises in this workbook are intended to complement the program's plenary and working group sessions. Your Leadership Program facilitators will guide you through the various workbook activities and will assist you in relating the insights arising from the completion of these activities to the leadership principles and concepts covered in the program.

Session 1

Self introduction and insights on my personal journey in tobacco control

Background

Leadership begins with **self-insight**. Understanding where we are in our tobacco control journey is vital to developing a shared vision for tobacco control. Communicating our insights with others in the workshop helps to “break the ice” and begins the process of relationship-building among participants. Establishing our learning expectations from the workshop at the outset creates a baseline against which we can measure workshop success.

Objectives

- To get to know each other better;
- To establish workshop expectations; and,
- To reflect upon our personal journey in the prevention and control of tobacco use

Activity 1

What do I expect to learn in this workshop that will make me a better leader?

INSTRUCTIONS

List down 3 things that you expect to learn in this workshop that will enhance your leadership skills.
(We will review these at the end of the workshop.)

1.

2.

3.

Activity 2

Where am I on my tobacco prevention and control journey?

INSTRUCTIONS

The Leadership Program facilitator will assign you to groups. Go to your assigned group; look at all the photos that are displayed; and select the one that best captures where you are in your tobacco prevention and control journey. How does this reflect your expectations from this workshop?

Share your reflections with the group.

Key Questions

Individual sharing with the group (2-3 minutes each)

- Where am I in my tobacco control journey?
- What do I expect from the workshop?

Group discussion and reflection (10 minutes)

- Where are others in their tobacco control journey?
- Are there similarities in workshop expectations among participants?

Session 2

Developing a shared vision for tobacco control – Where do we want to go?

Background

Leadership begins with **a vision**. For effective tobacco control, we need leaders who can nurture a bold shared vision for successful tobacco control. To achieve the greatest change, the vision must go “beyond imagination!”

Effective tobacco control strategic planning should “begin with the end in mind” and let “ends drive means” so that the vision determines the selected strategies and interventions. Good leaders are also able to communicate their vision for tobacco control readily, in ways that engage others and expand the circle of stakeholders committed to realizing the shared vision.

Objectives

- To develop a clear, bold, shared vision of tobacco control for your country or community; and,
- To effectively communicate this vision to others, so that they are compelled to buy into the shared vision

Instructions

You will be assigned to a working group for the duration of the workshop. Get together with fellow participants in your working group, give your group a name, and select a recorder and group spokesperson.

- 1.** Brainstorm with your groupmates to develop a shared vision for tobacco control, using the following guide questions:
 - When someone comes to your country in the distant future, what do you want him/her to see in relation to tobacco control?
 - What is your vision of what you want to happen in tobacco control for the future?
 - Can this vision be understood and **shared by all stakeholders**?
- 2.** Describe your shared vision in a brief narrative or story (**vision statement**), about 1-2 paragraphs long; then,
- 3.** Draw a picture of your vision on the flip chart worksheet and determine how to effectively communicate your shared vision to other participants. Be creative. Remember, good leaders are effective communicators!

VISION Statement

Example

VISION Statement

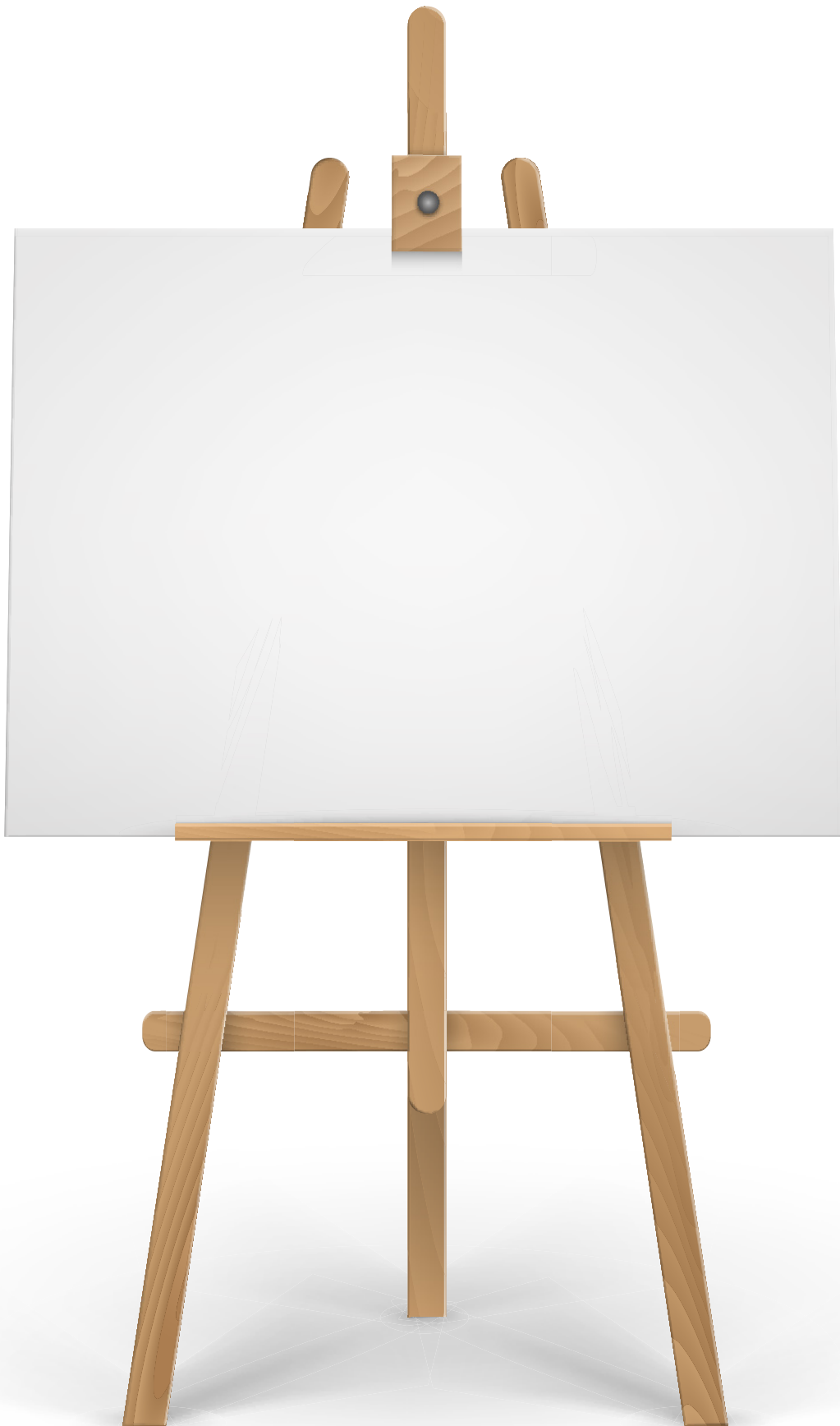
We dream of our country as the first tobacco-free nation in the world, where educational institutes, offices, public transport and all public places, restaurants and households are 100% free from all types of tobacco.

No-one smokes or chews tobacco. The demand for tobacco products is zero, and the supply of tobacco has likewise disappeared.

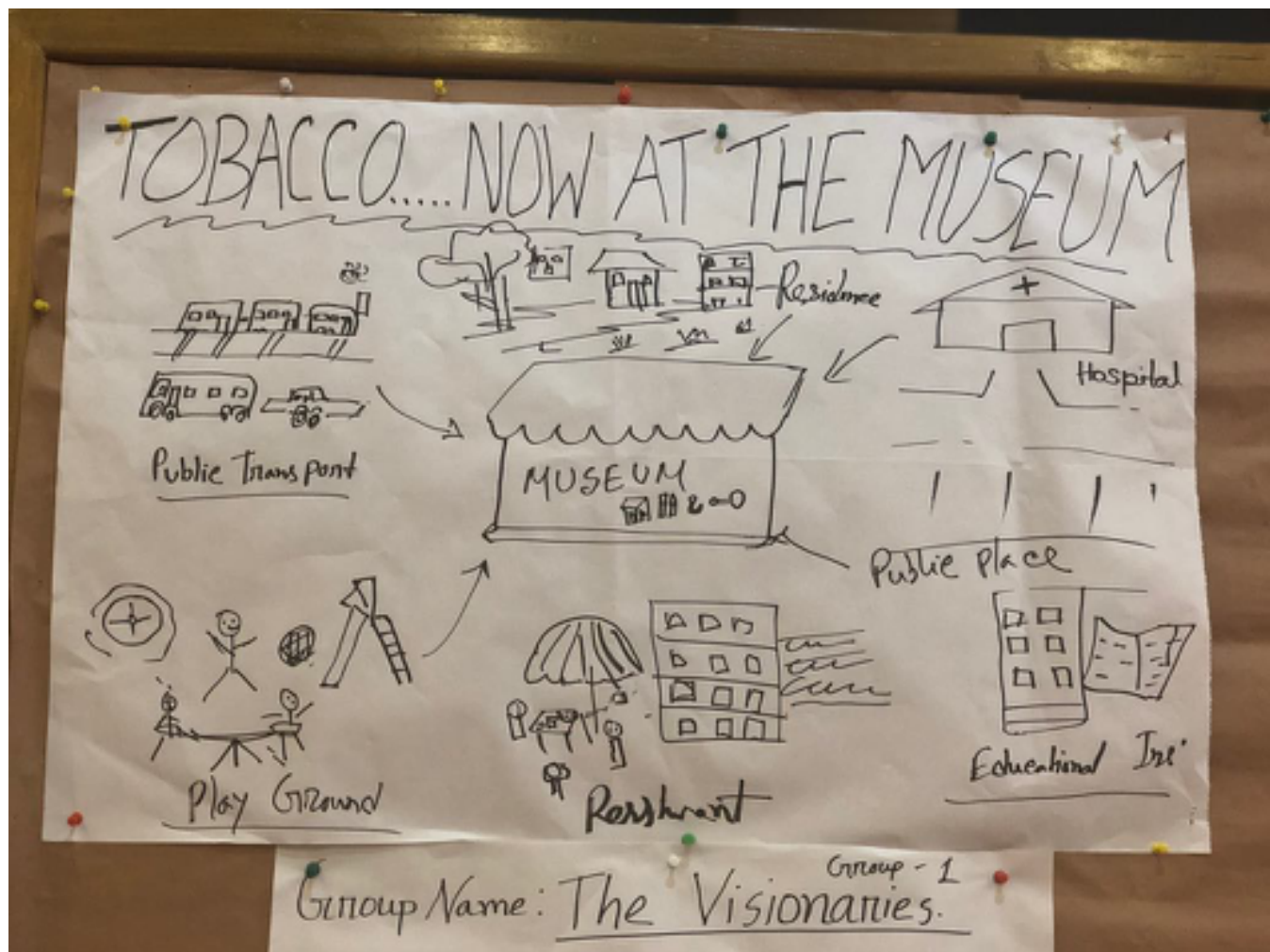
Tobacco use is no longer the “norm” and is considered socially unacceptable and unattractive.

The healthy citizens of our nation can only find tobacco in the museum.

How we will communicate our vision
(Draw your vision here)



An example of how to communicate a shared vision



PROGRESS CHECK: Are you on track?

Review your shared vision.

- Is it clear?
- Does it inspire?
- Is it bold? Does it go “beyond imagination”?
- Is the vision one that can be shared by multiple stakeholders?¹
- Have you communicated your vision effectively?

¹A **stakeholder** is anybody who can affect or is affected by an organization, strategy or project. They can be internal or external and they can be at senior or junior levels.
Source: <https://www.stakeholdermap.com/stakeholder-definition.html>

Session 3

Assessing the current situation –

Where are we at present in relation to tobacco control?

Background

Once we've established through our vision the direction that we want our country to go, then we proceed to **assess the current situation**. We start with the vision, to avoid the trap of limiting ourselves because the current situation is fraught with challenges.

Vision comes first. After exploring the possibilities, we turn back to reality and determine the existing state of tobacco control. Then, comparing the vision with the current situation enables us to see the contrast, and figure out why the difference exists.

Objective

- To analyze the current tobacco control situation in a country

Instructions

1. To understand the underlying reasons for the difference between the current situation and the vision for the selected priority policy area(s); and,
2. To identify the key constraint - the “weakest leg” - where action needs to happen first

Guide Questions

- What are the most commonly consumed tobacco products?
- Who smokes? Who uses smokeless tobacco? E-cigarettes? Other tobacco products?
- Who suffers the most? What is the burden of tobacco on health?
- What factors promote tobacco use in society?
- What tobacco control interventions are not yet in place in your country? Which ones are in place but poorly or incompletely enforced?
- What are the challenges and possible impacts of the tobacco industry on tobacco use and tobacco control?

What is my country's CURRENT SITUATION in relation to tobacco control?

Example

What is my country's CURRENT SITUATION in relation to tobacco control?

- Today, in my country, cigarettes are the most frequently consumed tobacco product. E-cigarette use is rising.
- Close to one-third of the adult population smokes tobacco, and one in five youth smokes. Women smoke much less than the men. E-cigarette use by youth is increasing.
- Cancer and heart disease are the top causes of death. Tobacco-related disease burden is greatest among the poor.
- Tobacco products remain cheap and smuggling across the borders occurs.
- Public places are smoke-free by law, but enforcement is inconsistent. Some public places, like restaurants and bars, are supposed to be smoke-free, but air monitoring studies show that as much as 70% still have evidence of secondhand smoke.
- Pictorial warnings cover 50% of the pack. Tobacco ads are banned but point of sale and internet advertising still occurs.
- Many health care workers still smoke. The tobacco industry exerts significant influence over several political leaders.

PROGRESS CHECK: Are you on track?

Review your current situation.

- Is the assessment accurate?
- Does it clearly lay out the gaps in tobacco control?
- Are you confident that the assessment will be shared by the key stakeholders?
- Will your description motivate people to change?

Session 4

Photovoice – Using images to catalyze change for tobacco control

Background

Photovoice is community-based participatory research method that empowers community members to use images in ways that can catalyze action for better health. Originally developed by Wang and Burris in 1994 for maternal and child health, it has grown in application to many diverse areas of public health, including tobacco control. With the widespread availability of smartphones capable of digital photography, Photovoice can be readily used with most audiences. As an advocacy tool, it captures audiences' attention and engages them at an emotional level, while catalyzing change within the photographers themselves.

Objective

- To analyze the current tobacco control situation in a country

Instructions

- 1.** DETERMINE: What is the state of tobacco control in (LOCATION OF WORKSHOP)?
 - a.** Assess the current situation with regards to tobacco control.
 - b.** If the leaders of (LOCATION OF WORKSHOP) came to our workshop, what would move them to act and strengthen tobacco control?
- 2.** Work in TEAMS.
- 3.** Bring your photos back. Discuss photos in your group and choose the 5 best photos for your presentation.
- 4.** Have a caption per photo.
- 5.** Your photos should move the audience to act.

Guidelines

- Ethical photography – get consent when taking photos of people with recognizable features. Or blur the features so that they are no longer recognizable
- Be safe. Do not endanger yourself while taking photos
- Have a caption per photo
- Be creative! Use your ideas to create a compelling and moving presentation
- Have fun, and learn a new skill

Session 5

Identifying the key constraints – Why is there a difference between our vision for tobacco control and the current situation?

Background

In determining our vision, we can choose the easy, the difficult, or the impossible, but the most effective leaders think “beyond imagination.” The WHO FCTC and MPOWER package of interventions² offer some of the most effective policy strategies that can propel our communities and countries closer to the vision of a healthy, tobacco-free world. Yet, in many countries and communities, despite implementation of the WHO FCTC and MPOWER, much progress is still needed to move the current situation closer to the vision. Understanding this difference helps leaders to strategically plan the strategic moves and action steps needed to close the gap.

Activity 1

The Spidergram

OBJECTIVES

- To understand the underlying reasons for the difference between the current situation and the vision for the selected priority policy area(s); and,
- To identify the key constraint - the “weakest leg” - where action needs to happen first.

INSTRUCTIONS

1. Review your shared vision and current situation. Select **one area** in tobacco control that you believe is a priority area requiring change, and write down the **specific problem** associated with this area. (NOTE: The various areas of tobacco control correspond with key tobacco control action areas in the WHO FCTC and MPOWER – for example, (1) tobacco taxation, (2) smoke-free laws, (3) tobacco advertising, promotions and sponsorships (TAPS) bans, (4) media campaigns and graphic tobacco health warnings and plain packaging, (5) tobacco use cessation support, etc.)
2. For any of these tobacco control action areas, some essential elements are needed to achieve progress in controlling the tobacco epidemic. These elements include:
 - Sound **policies**
 - Sufficient capacity for **enforcement**
 - **Partnerships**
 - Reliable **data**
 - **Communications** and **advocacy**
 - **Public support**
 - Capacity to battle the **tobacco industry**
 - **Other factors**, such as cultural practices and social norms. In your country, what possible other elements affecting tobacco control success exist?

² **MPOWER:** **M**onitor the epidemic to support policy development and implementation; **P**rotect people from secondhand smoke; **O**ffer help to people who use tobacco and want to quit; **W**arn people about the dangers of tobacco use; **E**nforce bans on tobacco advertising, promotion and sponsorship, and **R**aise taxes on tobacco products.

3. The elements can be visualized as eight legs of a spider web. Rate the state of each of these elements in relation to your specific problem, on a scale of 0 to 2, and plot the ratings on the spider web.
- 0 = Non-existent or weak
 - 1 = Partial
 - 2 = Strong
4. Connect the corresponding points across the spider web. Notice the shape of your spider web.

GUIDE QUESTIONS

- Where are the strengths?
- Where are the gaps and weaknesses?
- Which is the “weakest leg”? Which element(s) would you prioritize for immediate action to enhance your national capacity and readiness for tobacco control?
- What would you need to accomplish to improve the shape of your spider web and enhance its overall strength?

HELPFUL HINT

The “spider web” presents a quick visual overview of strengths and gaps for each action area in a country’s capacity to control the tobacco epidemic. Each action area in the FCTC and MPOWER will have its own unique spider web.

Ideally, the spider web should be stretched out completely and widely, because you need all elements operating at maximum capacity for effective tobacco control. In real life, the elements – the “legs” of the spider – are all interconnected. Improvements in one leg have an impact on the other elements. However, the strength of the entire web is determined by the “weakest leg”; if unchanged, the weakest leg will cause the web to collapse. Thus, the weakest leg represents the key constraint – where action must first be directed, to strengthen the entire web.

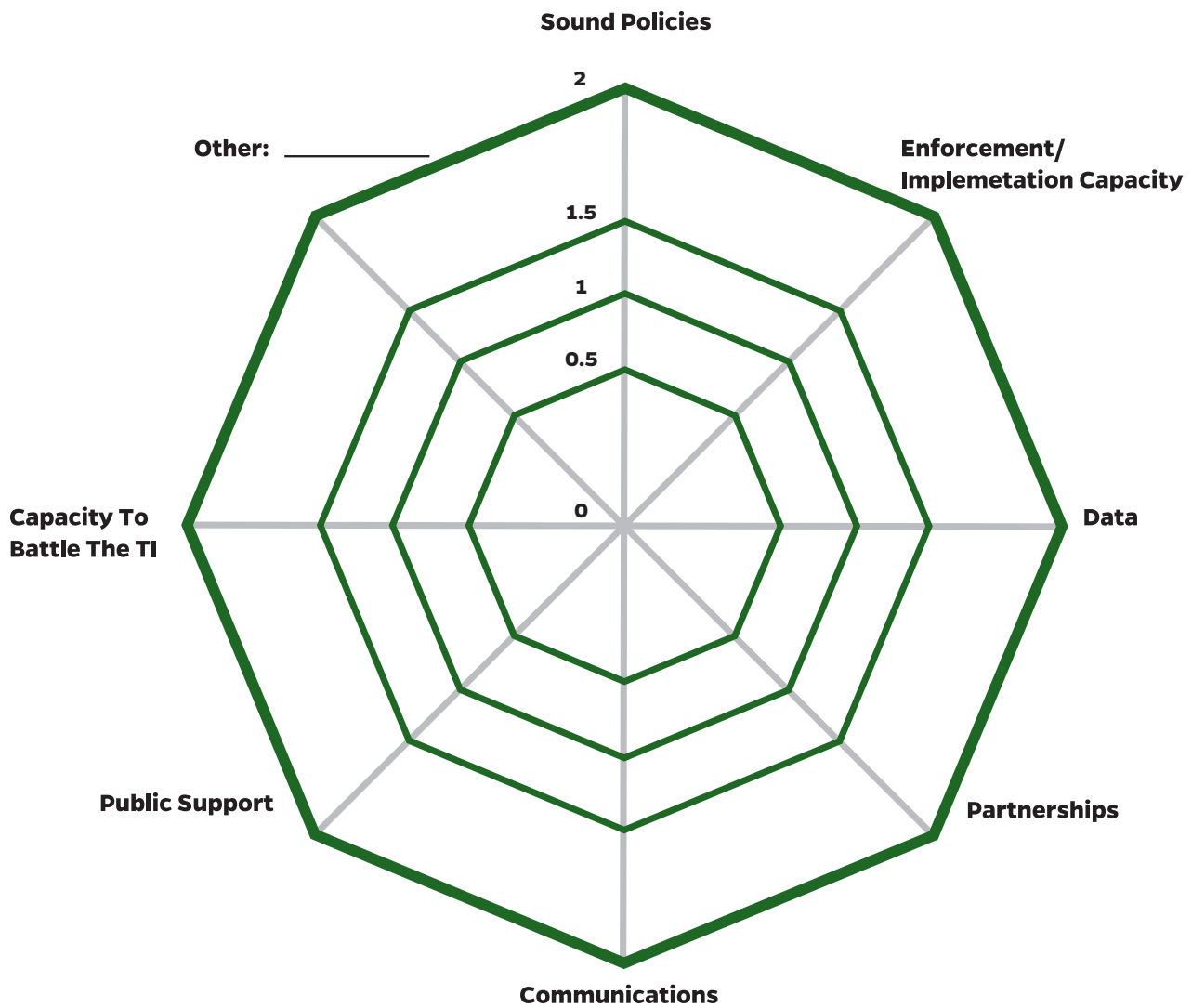
These tobacco control elements are fluid; as conditions evolve and as individuals and stakeholder groups change, the assessment scores will also likely change. Hence this type of assessment exercise needs to be performed regularly to stay current.

PROGRESS CHECK: Are you on track?

Review the spider web for your specific problem.

- Have you identified the weakest leg? This becomes your key constraint.
- Is the key constraint one that, if acted upon, can accelerate progress across the other elements and strengthen the spider web overall?

Specific problem statement

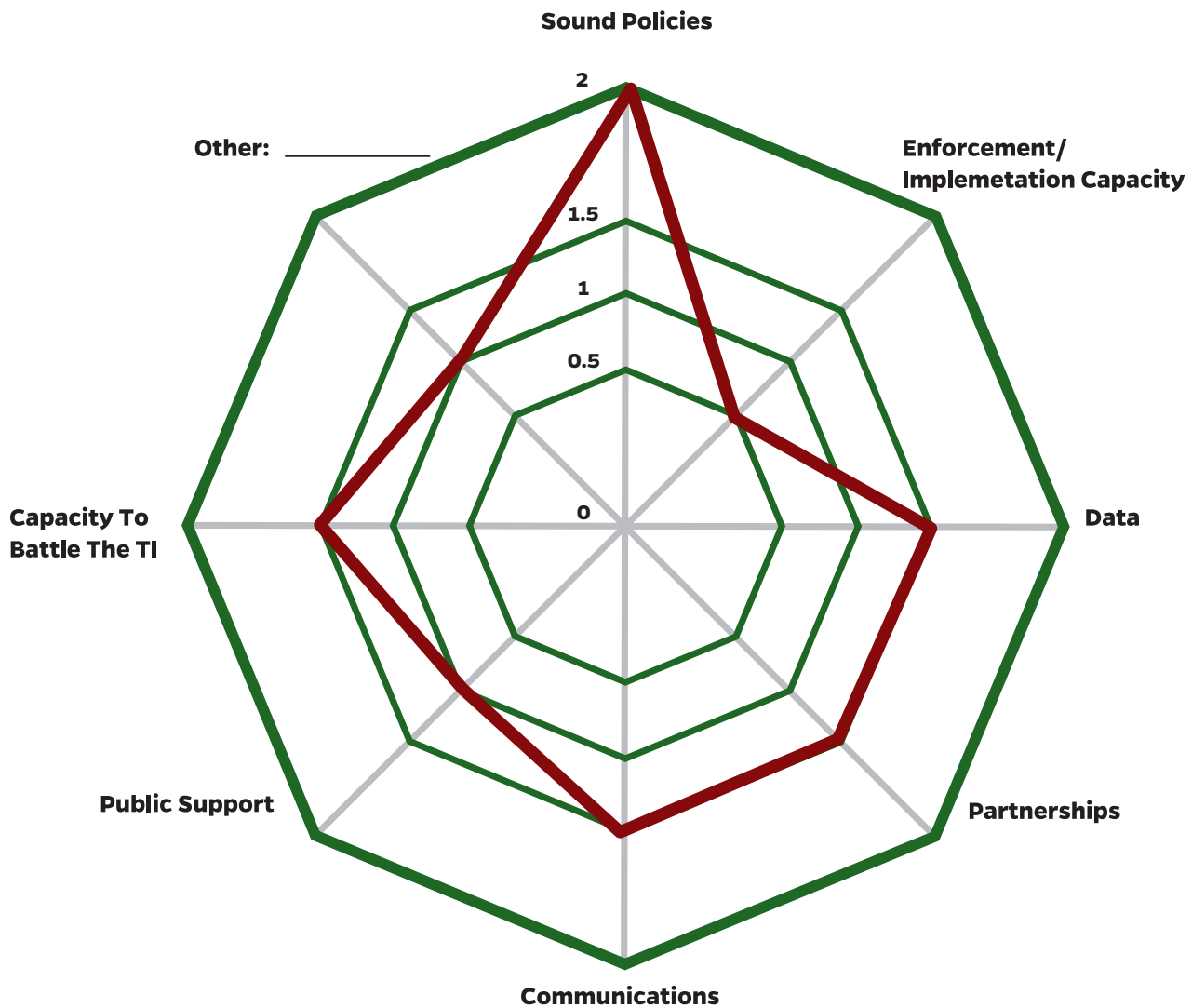


Priority (Key constraint/barrier) - the “weakest leg”

Example

Specific problem statement

Public places are smoke-free by law, but enforcement is inconsistent. Some public places, like restaurants and bars, are supposed to be smoke-free, but air monitoring studies show that as much as 70% still have evidence of secondhand smoke.



Priority (Key constraint/barrier) - the “weakest leg”

Enforcement/implementation capacity - smoke-free policies and laws exist but are not adequately implemented and enforced.

Activity 2

Ishikawa's Fishbone – Root Cause Analysis

OBJECTIVES

- To delineate the root causes for the key constraint or “weakest leg”; and,
- To start identifying actionable root causes and potential solutions to resolve these root causes.

INSTRUCTIONS

1. From the previous exercise, write a brief description of your key constraint. This becomes the head of your fishbone diagram.
2. Explore the root causes of your key constraint by asking why the constraint exists. Keep asking “why?” until you derive a root cause that you can change. Usually, this requires you to ask “Why?” for ~ 3- 5 times.
3. Use the Fishbone tool. The **key constraint** is the head of the fish; and, the **causes** of the key constraint are the bones of the fish.
4. Once you reach a **root cause** (an underlying cause contributing to the key constraint), determine an action to address or fix it, so that it becomes an “actionable root cause.” Draw a box around the actions to each of your root causes. These are the **action-solutions** to all of your root causes.
5. Examine the action-solutions. Which of these is the key that will initiate the process of change to overcome the key constraint? This is your strategic move. Highlight this with a **red box**. Summarize your strategic move in a concise statement.

GUIDE QUESTIONS

- What are some of the root causes for your key constraint that can be acted upon?
- What solutions exist to address and resolve the “actionable root causes”?
- Among these possible solutions, which one is a key strategic move that if implemented, has the greatest potential to bring about the necessary change and overcome the key constraint?

PROGRESS CHECK: Are you on track?

Review the spider web for your specific problem.

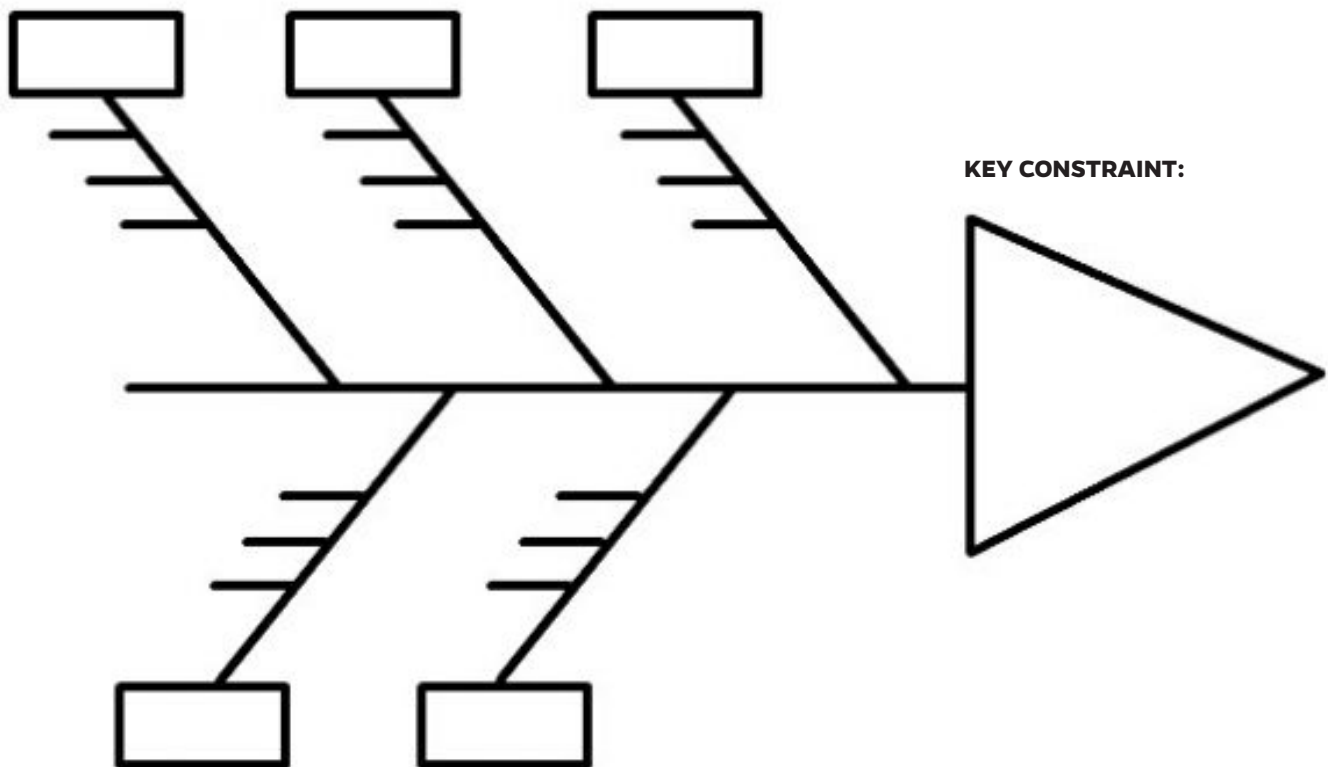
- Are the root causes of the key constraint clearly defined?
- Does the analysis help you to identify where you can act to achieve progress in relation to your key constraint for enhanced tobacco control?
- Have you identified the strategic move that needs to happen first, to catalyze the process of change?
- Does the strategic move address the key constraint/barrier?
- Does the approach make sense? Is the overall logic clear?
- Are there more appropriate or alternate approaches? If yes, why are you not using them?

Fishbone Root Cause Analysis

Specific problem statement

Public places are smoke-free by law, but enforcement is inconsistent. Some public places, like restaurants and bars, are supposed to be smoke-free but air monitoring studies show that as much as 70% still have evidence of secondhand smoke.

Priority (Key constraint/barrier) - the “weakest leg”



Strategic move to address an actionable root cause and start the process of change to overcome the key constraint

Example

Specific problem statement

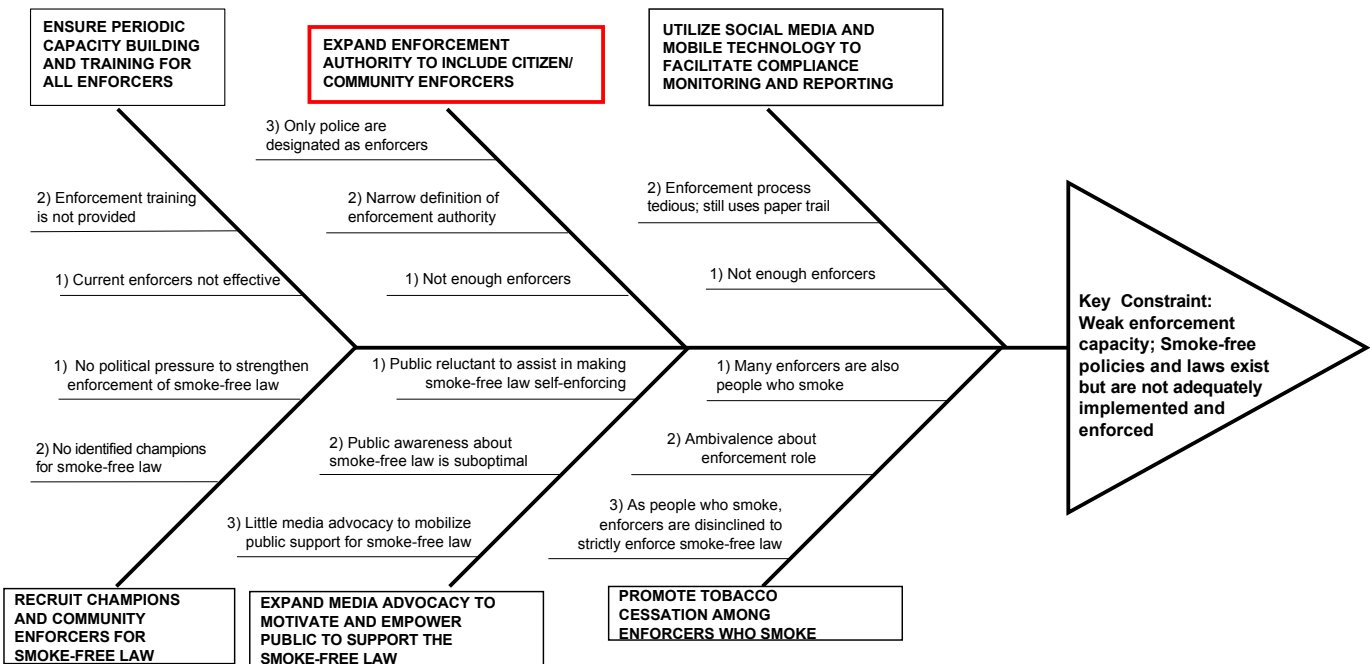
Public places are smoke-free by law, but enforcement is inconsistent. Some public places, like restaurants and bars, are supposed to be smoke-free, but air monitoring studies show that as much as 70% still have evidence of second hand smoke.

Priority (Key constraint/barrier) – the “weakest leg”

Enforcement/implementation capacity – smoke-free policies and laws exist but are not adequately implemented and enforced.

REMEMBER:

- The **key constraint** is the head of the fish.
- **The causes** of the key constraint are the bones of the fish.
- In the sequence of related causes, the last one is the **root cause**.
- Each root cause should have an **action-solution** within a box.
- The key action-solution – the strategic move – that has the greatest potential to bring about the necessary change to overcome the key constraint should be highlighted by a red box.



Strategic move to address an actionable root cause and start the process of change to overcome the key constraint: COMMUNITY-BASED PARTICIPATORY ENFORCEMENT

We will work to expand the enforcement authority to include community volunteers, and recruit, train and designate potential champions/community enforcers among the public, to increase the pool of enforcers.

Session 6

Mapping out your critical stakeholders – Who do we need to bring on board to create the desired change to strengthen tobacco control?

Background

Tobacco control is a multi-sector undertaking. To create effective change for tobacco control requires us to engage with multiple stakeholders and audiences.

Effective leaders understand the importance of identifying key stakeholders and developing a strategic communication approach for each audience, to engage them in the process of legislating change to prevent and control tobacco use.

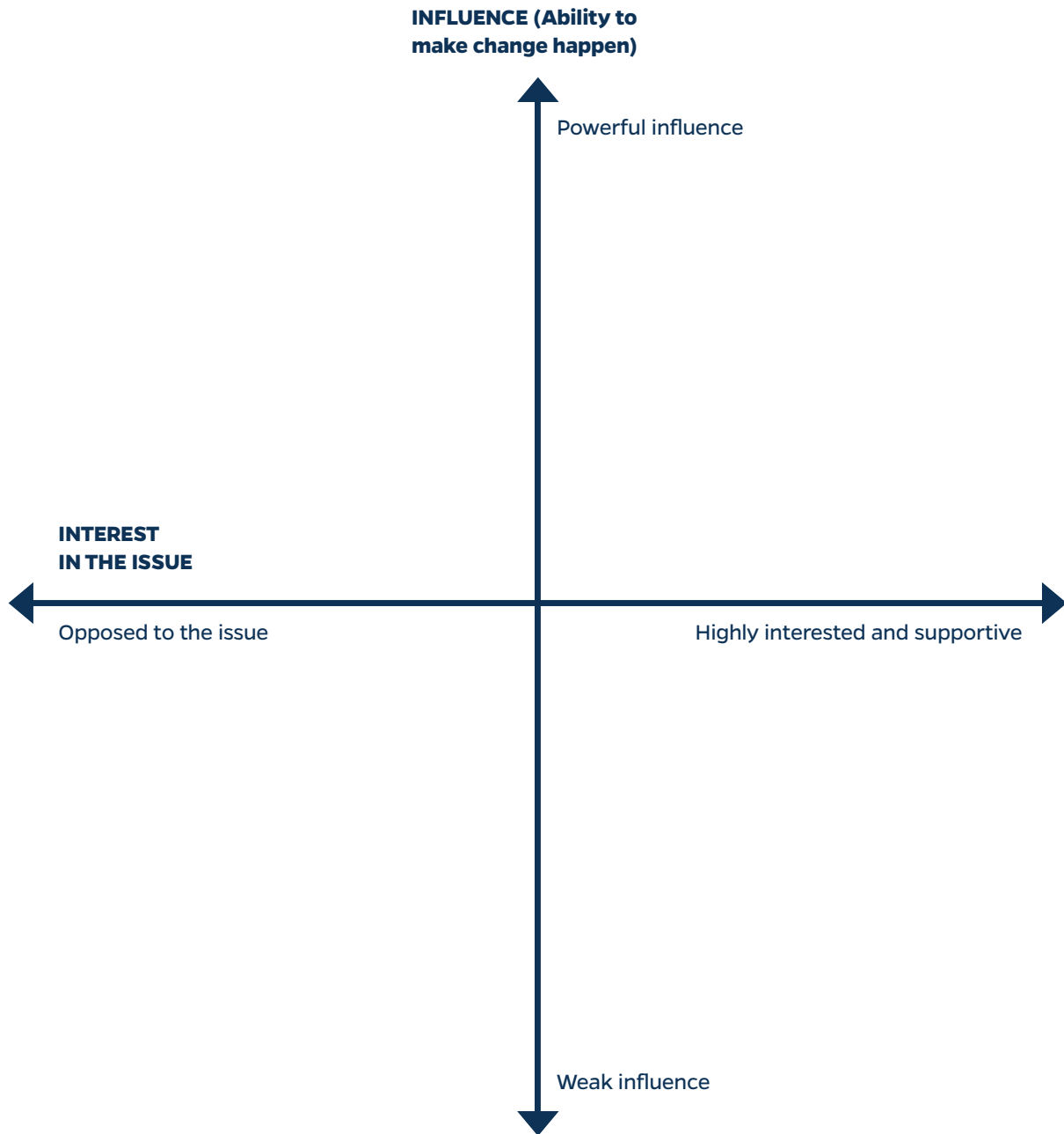
Objectives

- To identify the key stakeholders for creating change in tobacco control through our strategic moves to overcome the key constraint; and,
- To assess where each stakeholder is located on the influence-interest grid.

Instructions

1. Review your key constraint and strategic move/s for action to strengthen your selected tobacco control area from the previous exercises.
2. Identify all the stakeholders you need to engage, to fully implement this strategic move.
3. Situate each stakeholder group on the influence – interest grid below. This grid visually assists in gauging each stakeholder’s standing with regards to their ability to influence the process of change as well as their interest in your specific action area of tobacco control. Ideally, your primary audience should be in the upper outer right-hand quadrant of the grid—that is, highly influential and highly interested in tobacco control. Sometimes, however, your critical stakeholder may be highly influential but not highly interested; this is where advocacy is especially vital—how do you convince highly influential but uninterested stakeholders to support a strategic tobacco control intervention?
4. Are there stakeholders who could oppose efforts to create change? How would you manage these stakeholders?
5. Are there interconnections between the various stakeholders? Use lines to depict these interconnections. How would you use this knowledge of the relationships across the different stakeholders to assist you in creating positive legislative change? Who are your potential champions? Your gate-keepers? Your connectors? Your “powers-behind-the-throne”?
6. Select a critical audience and describe a representative member of that audience (i.e. develop a socio-demographic profile of the representative member):
 - a. What are they interested in? How can you link their interests to the tobacco control action?
 - b. How can you reach them?
 - c. What will move them to the desired action?

Stakeholders Map: Influence - Interest Grid

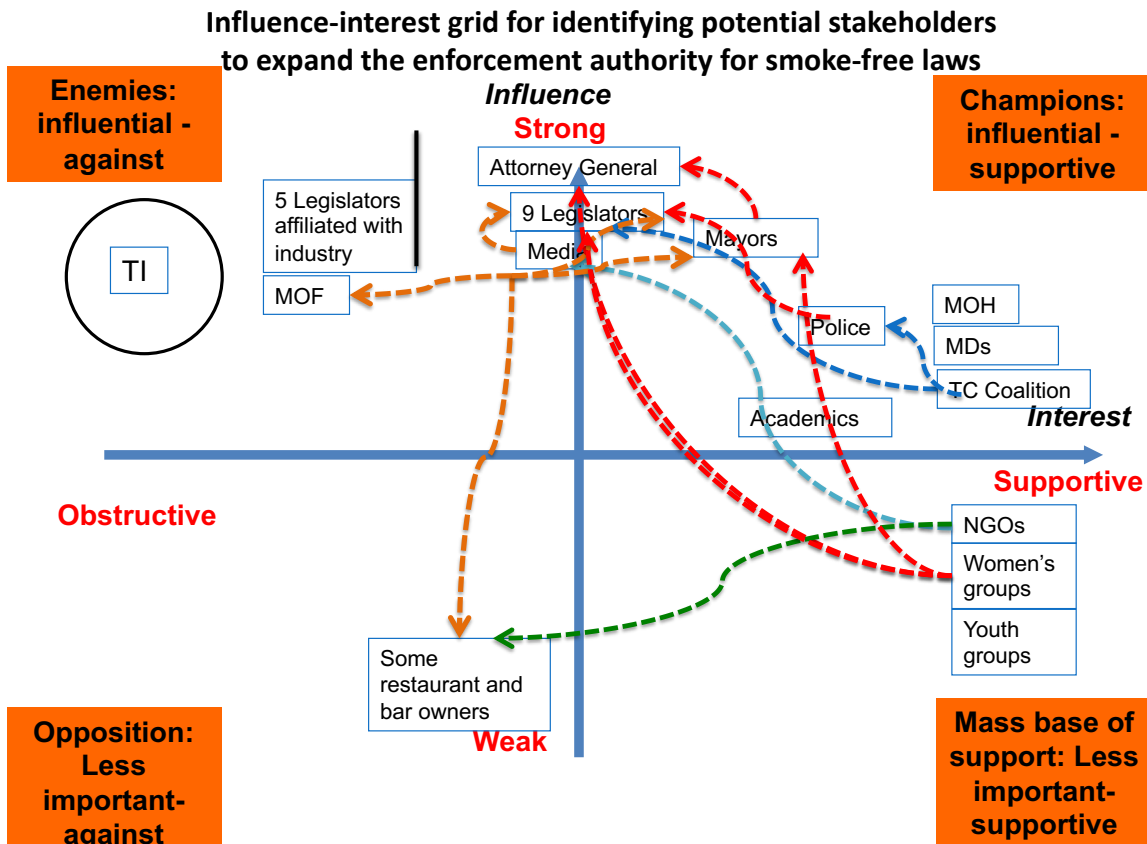


Who is your critical stakeholder audience? Describe a representative member of that audience.

Example

NOTE

The dashed lines indicate which stakeholder individual or group exerts influence over or is connected to other key stakeholders. Each stakeholder with links to others is assigned a color, to facilitate the visualization of the connections.



Who is your critical stakeholder audience?

Describe a representative member of that audience.

THE ATTORNEY GENERAL – He can designate enforcement authority outside of the police department. Very keen about being re-elected. Motivated by recognition, power, service, or justice; neutral on tobacco control. Wants to have an image of being honourable, pro-community, pro-social justice and pro-development. Relies on traditional and social media to gauge popularity; active on Twitter/X.

PROGRESS CHECK: Are you on track?

- Have you identified key stakeholders?
- How interested and influential are they in tobacco control?
- Which stakeholders can you engage to help you to create the change you want to achieve?
- How can you reach your critical stakeholders? Who are the connectors? Gate-keepers? Powers-behind-the-throne?
- Which stakeholders should you avoid and monitor?

Session 7

Advocating for change –

How do we advocate to the critical stakeholders to support and promote our strategic move for tobacco control?

Background

Effective leaders are good communicators. We need to learn how to “frame” our messages about creating change for tobacco control, so that the messages capture the attention of stakeholders, and convince them to support the desired strategic action.

This requires that we:

- Identify clearly the specific stakeholder audience we aim to reach;
- Seek to understand what our audiences value;
- Define the perceived benefits that can move specific audiences to act in support of the change we want to achieve; and,
- Develop messages that address the value and benefits of supporting our strategic move for our selected audience – framing the message to capture the eyes/ears, the mind, the heart and the hands of our specific stakeholder audience.

Instructions

1. Assume that your selected stakeholder audience will be arriving at the workshop shortly.
2. Using the results from the previous exercises, create an advocacy message to promote the tobacco control action you want your key stakeholder(s) to take. Fill in the table to guide you.

| | |
|---|--|
| Who is your primary stakeholder audience? | |
| What do you want him/her/them to do? | |
| What will move them to act and do what you want? Identify the key benefit for your audience. | |
| How else can you reach them? What other communication channels can you use? | |
| How will you know if your advocacy message to your selected audience has been successful? | |

3. Then be prepared to communicate your audience advocacy pitch to the plenary group. First, describe your specific stakeholder audience, based on the socio-demographic profile you developed during the stakeholder mapping exercise and on the table you completed above. Then pretend the plenary group is your selected audience. Use your imagination. Remember to “catch” the **eyes/ears**, the **mind**, the **heart** and the **hands** of your audience! You can use any audio-visual means of communication to get your advocacy message across clearly and compellingly – Photovoice, song, dance, poetry, drama, etc. Be creative. Be brief. No more than 2-3 minutes allotted per team performance.
4. A panel of referees will listen/watch and provide feedback. The most compelling team will receive a prize!

GUIDE QUESTIONS

At the end of each of the teams’ advocacy demonstrations, we will all come together in plenary and reflect on all the performances.

CRITERIA FOR DISCUSSION:

- Which advocacy strategy caught your attention? Which advocacy strategy presented compelling evidence for urgent action?
- What features made it stand out?
- Which advocacy features didn’t work as effectively?
- If you were the audience, which advocacy strategy convinced you to take up the proposed action?
- Which advocacy team would you support and invest in?
- What are the practical take-home lessons on advocacy from this exercise?

Example

| | |
|---|---|
| Who is your primary stakeholder audience? | Attorney General |
| What do you want him/her/they to do? | Expand enforcement authority for smoke-free laws to include community volunteers |
| What will move them to act and do what you want? Identify the key benefit for your audience. | Expanding the enforcement authority for smoke-free laws to community volunteers empowers the public to contribute to health policy enforcement while creating a safe and healthy environment for everyone. It will demonstrate that you as AG are pro-health, pro-community, and pro-justice. |
| How else can you reach them? What other communication channels can you use? | <ul style="list-style-type: none"> • Influencers through mayors and the police • Social media campaign on Twitter |
| How will you know if your advocacy message to your selected audience has been successful? | Issuance of implementing rule to include community enforcers |

Notes

Annexes

Annex 1

What makes a good leader? Dimensions of leadership

Objectives

- To reflect upon the essential qualities of leadership
- To recognize the two critical dimensions of leadership

Instructions

1. Working individually, list down as many qualities of leaders that you can think of, using Post-it paper. Use one Post-it sheet for each leadership quality.
2. Share your results with the other members of your group.
3. Group together those qualities that are similar.
4. Then situate the corresponding Post-it sheets in the Table below:

| CHARACTER | COMPETENCE |
|-----------|------------|
| | |

Discussion Questions

- Which qualities are absolutely essential for all leaders?
- Which of these qualities do you possess?
- Which do you need to acquire or enhance?

Teaching Points

Most of what we consider as essential leadership skills can be categorized under 2 broad headings – competence and character.

Competence refers to the knowledge and skills that enable you to perform effectively as a leader. Some of these skill sets include:

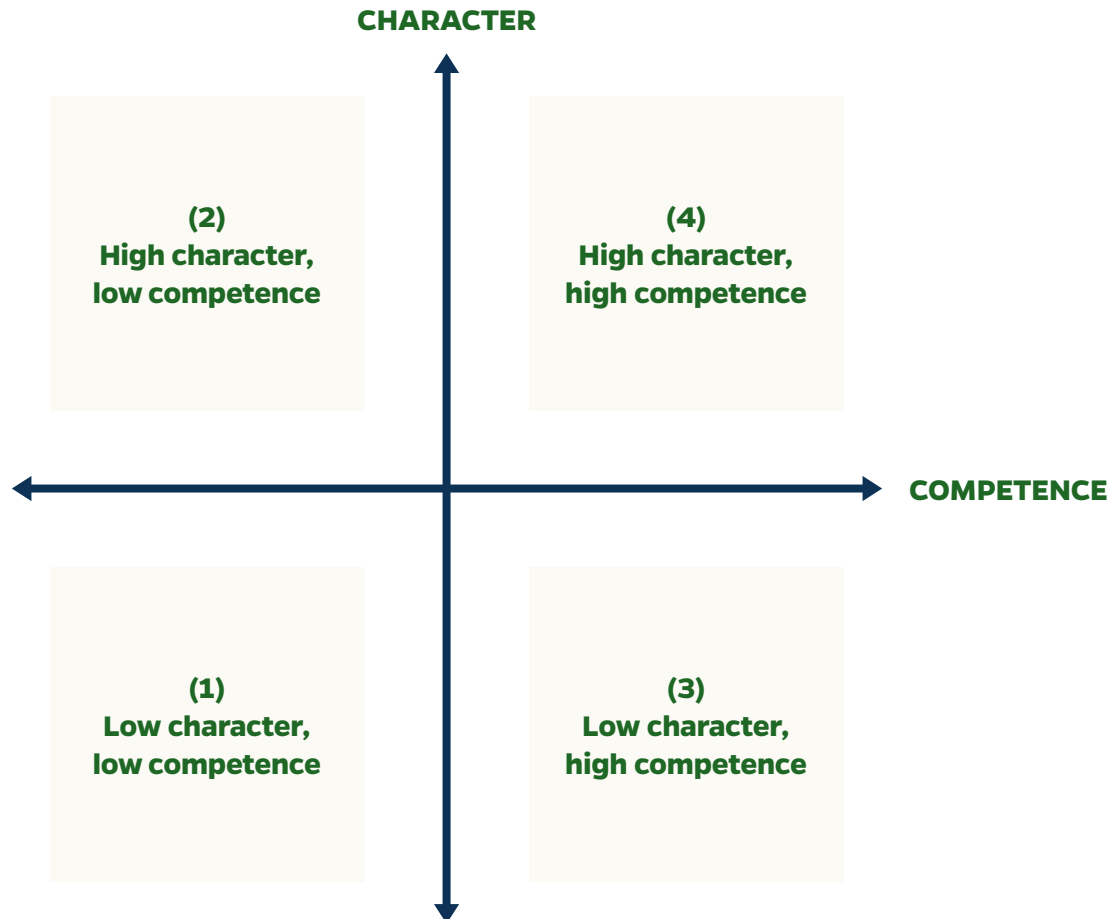
- The ability to generate bold visions and to secure buy-in towards a shared vision;
- The efficiency in organizing and implementing a strategic set of actions to realize the vision;
- The technical knowledge and skills in your area of work; and,
- The capacity to motivate others and turn them into a team.

Competence is what gains you **respect** among your peers.

Character refers to innate qualities and values that engender **trust**. These reflect the inner values of the person, and include integrity, honesty, curiosity, and empathy, for example.

Leadership requires both character and competence.

The matrix below shows four potential combinations of character and competence.



- (1) Individuals without either set of qualities are not leaders.
- (2) Those with high character but low competence are potential leaders; if they acquire the necessary skill sets, they could become effective leaders.
- (3) Those with high competence but low character are dangerous; they may be able to lead others but they lack the principles and qualities to make them trustworthy.
- (4) Effective leaders have both high character and high competence. They are able to lead others towards a positive goal.

Questions For Reflection

- Can you think of examples for each of the combinations in the matrix?
- While effective leaders need both character and competence, which do you think is more important? Why?

Annex 2

What kind of leader are you? Identifying leadership styles

Objectives

- To reflect upon my own strengths and challenges as a leader
- To understand and value different kinds of leadership

Instructions

1. Complete the questionnaire below. Rate how true the following statements are as they pertain to you, with 1 being very untrue and 10 being very true.
2. Each item on the questionnaire is color-coded. Tally up your scores for each color. The color with the highest score is your dominant leadership style.
3. Form a group with the color of your dominant leadership style and meet others with the same style.
4. Brainstorm with your group on the strengths and challenges of your particular leadership style. How does your style of leadership relate to people with other leadership styles? Use the following guide questions to facilitate the discussion.

Guide Questions

- What are the greatest strengths and advantages of our leadership style? In what circumstances does our leadership style thrive?
- What are the challenges/disadvantages of this leadership style?
- In what ways might our approach to leadership be a challenge for people with other leadership styles? When there is conflict among team members, how would we advise others to approach people with our leadership style?

Teaching Points

1. Leadership is not “one size fits all.”
2. Within ourselves, we may have various leadership styles.
3. The situation, and the nature of our followers determine the necessary style. Adapt as needed.

Leadership Style Questionnaire

From 1-10, rate how true these statements are with 1 being untrue and 10 being true

| 1-10 RATING | STATEMENTS When I am among a group of colleagues... | LEADERSHIP CODE |
|-------------|--|--------------------|
| 1 | I don't need to be in charge of a group, but I enjoy making detailed plans that everyone will carry out. | |
| 2 | I am the nurturing type who takes care of everyone. | |
| 3 | I am the listener. I hear what people are saying and make sure everyone has a voice. | |
| 4 | I am the logical one. I enjoy working through puzzles and equations. | |
| 5 | I am the peacekeeper who listens to everyone and finds a reasonable compromise. | |
| 6 | I look at all sides of a situation before arriving at a solution. | |
| 7 | I can be stubborn when I feel passionately about something going my own way. | |
| 8 | I am the dreamer who is always thinking of new and exciting ideas. I believe there is no limit to what we can achieve. | |
| 9 | I like to tackle tasks, problems, and projects with a well-thought out plan. | |
| 10 | I am friends with just about everyone I meet. | |
| 11 | I am drawn to hands-on tasks. I like making tangible products. | |
| 12 | I like to take risks and try ideas before knowing if they will work or not. | |
| 13 | I like to think of new solutions to old problems. | |
| 14 | I am the energetic one who is always ready to roll up my sleeves and get to work. | |
| 15 | I am the artistic one and people see me as creative. | |
| 16 | I don't like trying something unless I'm pretty sure it will work the first time. | |
| 17 | I like to get things done quickly. | |
| 18 | Sometimes I can seem disorganized. | |
| 19 | People are quick to trust me. | |
| 20 | I make most decisions based on facts, data and numbers. | |
| 21 | I am good at coming up with big ideas, but not always good at following through to make them happen. | |
| 22 | Often it takes me a long time to make decisions because I need more information. | |
| 23 | I am good at being in charge of groups and keeping groups focused. | |
| 24 | People see me as someone who will get the job done, no matter what. | |
| 25 | Sometimes I have a hard time saying no to people and end up taking on too much. | |

SCORE TABLE

| GREEN | YELLOW | RED | BLUE |
|--------|--------|--------|--------|
| SCORE: | SCORE: | SCORE: | SCORE: |

INTERPRETATION

| GREEN | YELLOW |
|---|--|
| <p>GREEN LEADERS bring everyone together. They resolve conflicts amongst team members and ensure that all team members are feeling good. Greens are great at building relationships within groups and creating a positive environment for groups. They are often seen as great “people people.”</p> | <p>YELLOW LEADERS propel the team with action. They lead by example, motivating people and maintaining the team’s momentum as they move toward the goal. They keep teams focused and can be persuasive in getting their way. They are often seen as reliable people who follow through and get things done.</p> |
| RED | BLUE |
| <p>RED LEADERS use their logic-based skills to make sure that groups are being realistic and achievement focused. They analyze the team’s goals and actions and decide the best possible way to achieve the goals, given specific conditions and circumstances. Reds do a lot of calculating, analyzing, systemizing, organizing and budgeting. They are great at providing solutions that “make the most logical sense”</p> | <p>BLUE LEADERS dream and inspire. They are the idea-makers, they approach problems in new ways and tackle tasks differently than others. Blues are always thinking, brainstorming, suggesting and looking ahead at where the team can go. They are often seen as “big picture” thinkers.</p> |

Annex 3

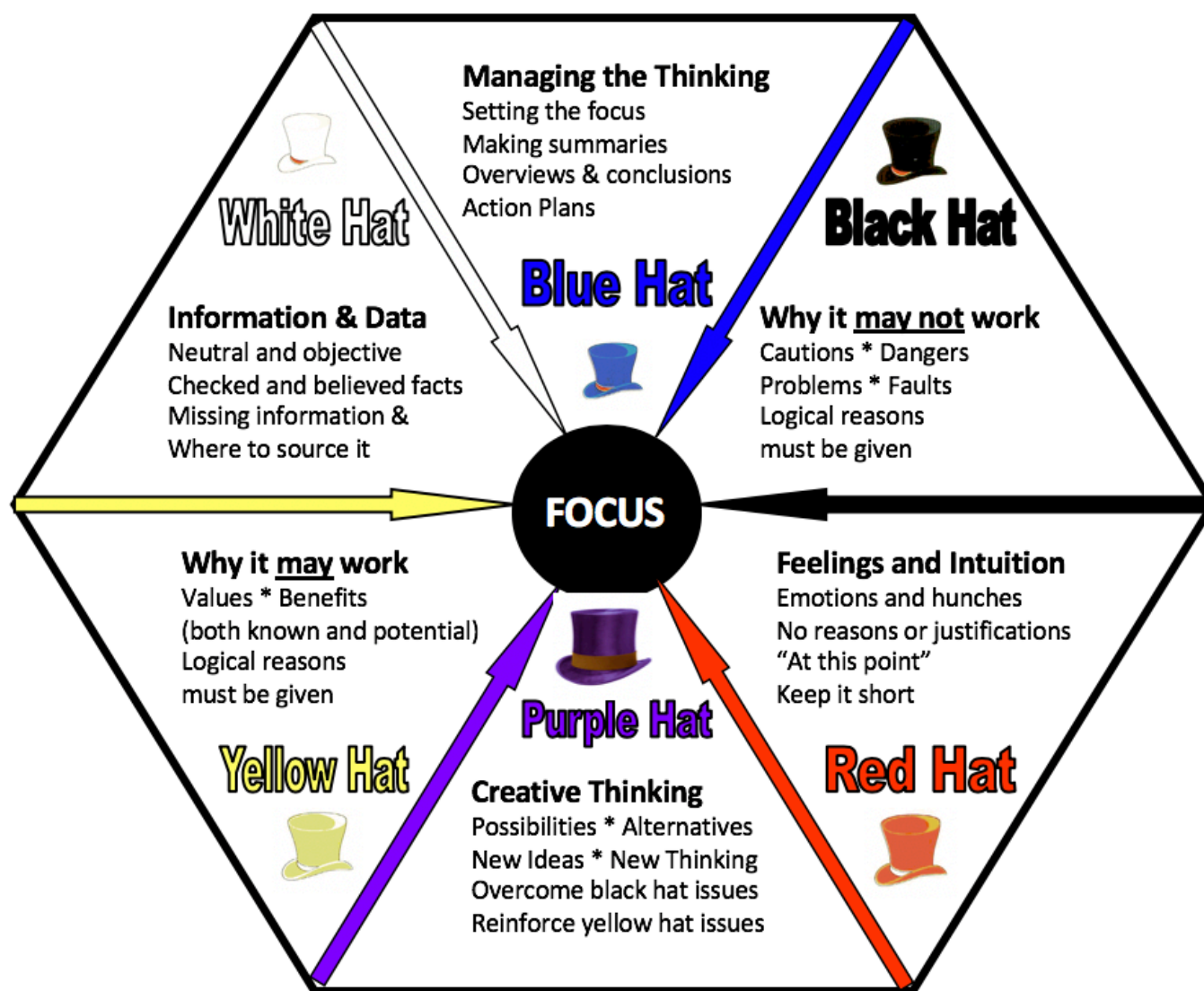
How can we enhance decision-making as leaders?

De Bono's six "thinking hats"

Background

Different stakeholders may have diverse agendas and priorities. Effective leaders are able to navigate and steer the negotiations process to achieve their desired outcomes. This skill involves the ability to perceive and examine the different sides of an issue before going into negotiations with other stakeholders.

De Bono's "Six Thinking Hats"³ is a time-tested tool that provides a framework to focus and broaden thinking by separating out six different elements of thinking: white hat—information, yellow hat—benefits, black hat—risk, purple hat—creativity, red hat—gut instinct, and blue hat—process. Using the 6 thinking hats helps you understand the full complexity of a decision, and spot issues and opportunities to which you might otherwise be blind.



³ de Bono, E. (1985). Six thinking hats. Boston: Little, Brown.

Objective

To become familiar with a tool that forces a consideration of diverse perspectives surrounding an issue.

Instructions

1. Select an overall facilitator who will wear the BLUE hat.
2. Recall the strategic move or key action you identified in Session 5, Activity 2 (Fishbone analysis).
3. Go through each of the remaining hats (white-black-red-yellow-purple) as a group and think about the strategic move/key action using the different perspectives under each thinking hat.
 - List your thoughts on the flip sheet.
 - Stick to the hat in current use so that everyone is thinking in the same mode at the same time.
 - Time limit: 5 minutes per hat (25 minutes overall)
4. After going through all of the hats, re-examine the strategic move/key action through the different perspectives generated.

Guide Questions

- Did the “6 thinking hats” help to enhance your understanding of the potential and diverse perspectives regarding the strategic move/key action?
- Will it help you to anticipate potential reactions from stakeholders?
- Will it help you to firm up your negotiation position?

Annex 4

How do leaders prioritize for success? The prioritization matrix

Background

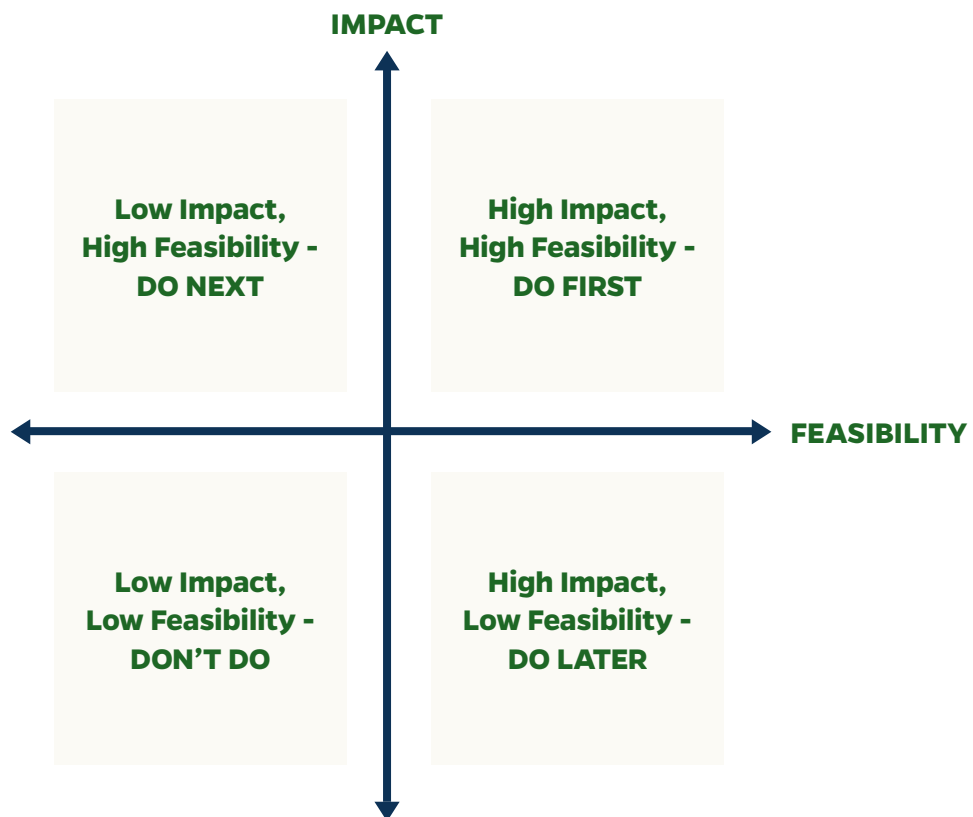
Tobacco control requires a comprehensive set of diverse strategic interventions to effectively reduce tobacco consumption. Leaders are often faced with the challenging task of selecting which intervention to focus on first, given that in many countries resources are limited and not all of the identified interventions can be accomplished all together at the same time.

Objective

To learn to use the **prioritization matrix** in logically selecting which high-value tasks and activities need to be accomplished first.

Instructions

1. In relation to the current situation regarding tobacco control in your country, that you identified in in Session 2, list down all the possible tobacco control interventions to improve the current situation and move closer towards your vision. Use Post-it notes, and list one tobacco control intervention per Post-it.
2. Using a scale from 0 to 5, rate each task/activity based on:
 - **IMPACT** - If this intervention is accomplished, a significant positive change towards reducing tobacco consumption will occur.
 - **FEASIBILITY** - Opportunity, timing, political support, resources and local capacity and skills make it feasible to implement the intervention within the immediate future.
3. Situate each Post-it on the Prioritization Matrix below.
4. Select the interventions that emerge as the “high-value” priorities.



Annex 5

How can leaders “sharpen the saw”? A self-care exercise

Background

Stephen Covey, in his book *The 7 Habits of Highly Effective People*,⁴ exhorts leaders to “sharpen the saw.” A leader’s most precious tool is himself/herself and keeping that tool well-honed and in excellent shape is vital to sustainable performance as an effective leader. Self-care is a necessary investment to ensure that leaders stay on top of their game at all times.

Objective

To be mindful of the need to make time for self-care in the midst of the demanding life of a leader.

Instructions

1. There are four dimensions of our nature, and each must be exercised regularly, and in balanced ways:
 - Physical
 - Socio-emotional
 - Mental
 - Spiritual
2. Make a list of activities that would help you renew yourself along each of the four dimensions.
3. Select one activity for each dimension and list it as a goal for the coming week.
4. At the end of the week, evaluate your performance in relation to each of the 4 dimension’s activities.

Guide Questions

- What led you to succeed or fail to accomplish each goal?
- Can you commit to a specific “sharpen the saw” activity in all for dimensions each week?
- What do you project will happen if you neglect self-care as a leader?

⁴ Covey, S. R. (1997). *The 7 Habits of Highly Effective People: Powerful Lessons in Personal Change*. 25th anniversary edition. Simon & Schuster, 2013.

Recommended Readings

The following technical content areas are fundamental to a good understanding of the critical issues regarding tobacco use prevention and control. It is recommended that people using this workbook review their knowledge in these areas to complement the activities and leadership tools contained herein. Some of the more relevant references are listed below.

| TECHNICAL CONTENT AREA | REFERENCES |
|---|---|
| <p>Principles of tobacco control</p> | <ul style="list-style-type: none"> • NCI Tobacco Control Monograph Series 21 - The economics of tobacco and tobacco control. (NCI and WHO, 2017) Available at http://cancercontrol.cancer.gov/brp/tcrb/monographs/21/index.html. • Building blocks for tobacco control: a handbook. (WHO, 2004) Available at https://www.who.int/publications-detail-redirect/9241546581 |
| <p>The WHO Framework Convention on Tobacco Control</p> | <ul style="list-style-type: none"> • Guidelines and policy options and recommendations for implementation of the WHO FCTC. (WHO, 2013–2017) Available at https://www.who.int/fctc/treaty_instruments/en/ • History of the WHO Framework Convention on Tobacco Control. (WHO, 2009) Available at https://apps.who.int/iris/bitstream/handle/10665/44244/9789241563925_eng.pdf;jsessionid=CAFC3C5C8DFE74D7450922DE9ABCOE83?sequence=1 |
| <p>The tobacco epidemic</p> | <ul style="list-style-type: none"> • The tobacco atlas, 6th edition. (ACS/Vital Strategies, 2018) Available at https://tobaccoatlas.org • The health consequences of smoking - 50 years of progress: A report of the Surgeon General. (US DHHS, 2017) Available at https://www.ncbi.nlm.nih.gov/books/NBK179276/pdf/Bookshelf_NBK179276.pdf • WHO Report on the global tobacco epidemic. (WHO, 2021) Available at https://www.who.int/teams/health-promotion/tobacco-control/global-tobacco-report-2021 • WHO global report on trends in prevalence of tobacco smoking 2000-2025, 2nd edition. (WHO, 2018) Available at https://apps.who.int/iris/bitstream/handle/10665/272694/9789241514170-eng.pdf?ua=1 |
| <p>Evidence for effective interventions</p> | <ul style="list-style-type: none"> • Tobacco plain packaging: global status update. (WHO, 2021) Available at https://www.who.int/publications/i/item/9789240051607 • Tobacco product regulation: basic handbook. (WHO, 2018) Available at https://www.who.int/publications/i/item/tobacco-product-regulation-basic-handbook |

| | |
|--|--|
| <p>Evidence for effective interventions (cont.)</p> | <ul style="list-style-type: none"> • Earmarked tobacco taxes: lessons learnt from nine countries. (WHO, 2016) Available at https://www.who.int/publications/i/item/9789241515825 • The economic and health benefits of tobacco taxation. (WHO and FCTC Secretariat, 2015) Available at https://www.who.int/publications/i/item/WHO-NMH-PND-15.6 • Smoke-free movies: from evidence to action, 3rd edition. (WHO, 2015) Available at https://www.who.int/publications/i/item/9789241509596 • MPOWER in action. (WHO, 2013) Available at https://www.iccp-portal.org/system/files/resources/mpower_2013.pdf • Treating tobacco use and dependence, 2008 update. (US Department of Health and Human Services, 2008) Available at https://www.ahrq.gov/professionals/clinicians-providers/guidelines-recommendations/tobacco/clinicians/update/index.html |
| <p>Countering the tobacco industry</p> | <ul style="list-style-type: none"> • A snapshot of the tobacco industry in ASEAN Region. (Southeast Asia Tobacco Control Alliance, 2019) Available at https://seatca.org/dmdocuments/TI%20Snapshot%202019.pdf • Tobacco industry interference with tobacco control. (WHO, 2009) Available at https://www.who.int/publications/i/item/9789241597340 |
| <p>Communications and advocacy</p> | <ul style="list-style-type: none"> • Social marketing: Changing behaviors for good, 6th edition. (Lee and Kotler, 2019) • Influencer: The new science of leading change. (Greeny et. al, 2013) |
| <p>Leadership in public health</p> | <ul style="list-style-type: none"> • Visionary leadership in health: Delivering superior value. (Satia, Kumar and Liow, 2019) • Global health leadership: Case studies from the Asia-Pacific. (Withers and McCool, 2018) • The fifth discipline - The art and practice of the learning organization. (Senge, 2006) • The 7 habits of highly effective people. (Covey, 2004) |
| <p>Emerging issues in tobacco control</p> | <ul style="list-style-type: none"> • Emerging issues in tobacco control: The rise of electronic products and implications for policy, planning and practice. (US CDC, 2019) Available online at https://tobwis.org/resources/view/364/KingB_Wisconsin_Department_of_Health_Services_FINAL_Revised.pdf • Heated tobacco products (HTPs) market monitoring information sheet, 2nd edition. (WHO, 2020) Available at https://www.who.int/publications/i/item/WHO-HEP-HPR-2020.2 |



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Over time, and with successive tobacco control leadership programs, the exercises in the workbook underwent progressive revisions, reflecting the feedback and experience of each cohort of program participants and global progress in tobacco control. This current version contains the updated set of leadership skills-building exercises selected through a joint consultation between Tobacco Control Leadership Program course director, Mr. Stephen Tamplin (IGTC) and Dr. David.

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