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Enhancing Collective Efficacy: Practical Considerations for Public Health Agencies

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Disclosures

Dr. Barnett does not have any conflicts of interest to disclose

Learning Objectives

- Define the concept of collective efficacy and its relevance to public health organizations.
- Describe two examples of public health scenarios in which collective efficacy can benefit public health organizational functioning.
- Describe strategies for building collective efficacy in public health organizations and their partners.

Defining collective efficacy and its relevance to public health organizations



Definition of Collective Efficacy

The shared belief in a group's capacity to reach its goals (Bandura, 1997)

Collective Efficacy: Relevance to Public Health Organizations

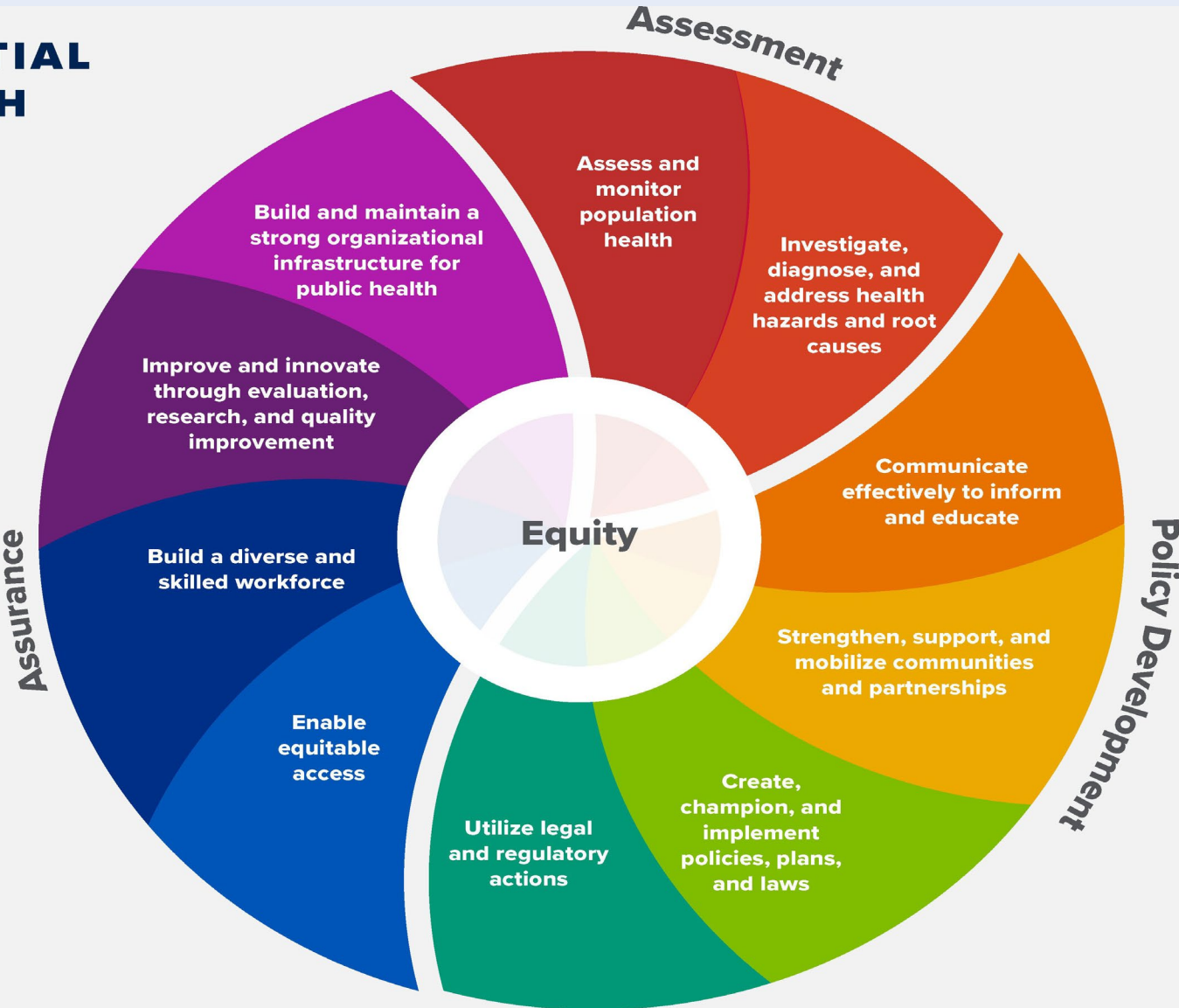
- *Collective efficacy can help:*
 - build the overall **confidence of a public health organization's workforce in their ability to reach objectives** (e.g., *10 Essential Public Health Services*)
 - public health organizations collectively prepare to **work with partner agencies** and to **tackle emerging public health issues** (e.g., *"public health preparedness system"*)

Essential Public Health Services: Collective Efficacy Perspectives

THE 10 ESSENTIAL PUBLIC HEALTH SERVICES

To protect and promote the health of all people in all communities

The 10 Essential Public Health Services provide a framework for public health to protect and promote the health of all people in all communities. To achieve optimal health for all, the Essential Public Health Services actively promote policies, systems, and services that enable good health and seek to remove obstacles and systemic and structural barriers, such as poverty, racism, gender discrimination, and other forms of oppression, that have resulted in health inequities. Everyone should have a fair and just opportunity to achieve good health and well-being.



The 10 Essential Public Health Services

1. Assess and monitor population health status, factors that influence health, and community needs and assets
2. Investigate, diagnose, and address health problems and hazards affecting the population
3. Communicate effectively to inform and educate people about health, factors that influence it, and how to improve it
4. Strengthen, support, and mobilize communities and partnerships to improve health
5. Create, champion, and implement policies, plans, and laws that impact health

The 10 Essential Public Health Services (cont'd)

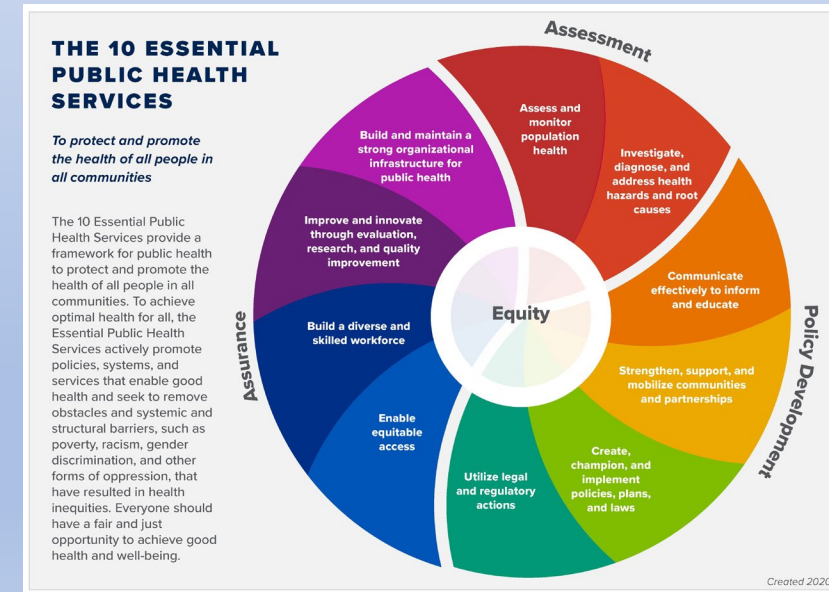
6. Utilize legal and regulatory actions designed to improve and protect the public's health
7. Assure an effective system that enables equitable access to the individual services and care needed to be healthy
8. Build and support a diverse and skilled public health workforce
9. Improve and innovate public health functions through ongoing evaluation, research, and continuous quality improvement
10. Build and maintain a strong organizational infrastructure for public health

Collective Efficacy: Relevance to Public Health Organizational Fulfillment of *10 Essential Public Health Services*

- *Each* of the 10 Essential Public Health Services can be enhanced through collective efficacy-building in public health agencies by:
 - **building the collective confidence** of the public health workforce to **leverage their existing strengths and to collectively prepare to work with partner agencies** and to **tackle emerging issues** in public health

Collective Efficacy: Relevance to Public Health Organizational Fulfillment of *10 Essential Public Health Services* (cont'd)

- Of relevance to organizational fulfillment of all 10 Essential Public Health Services, building **collective efficacy** has been found to:
 - Be associated with **team cohesion and team mental models** as a predictor of perceived performance potential
 - Be a mediator in promoting **team creativity**
 - Impact **stress management and job satisfaction**.
 - Lead to **better overall group performance**



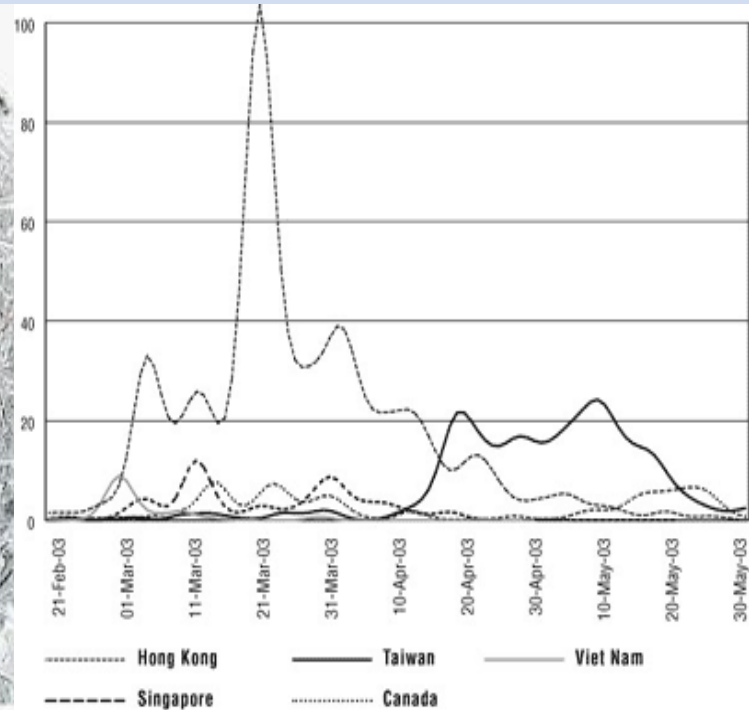
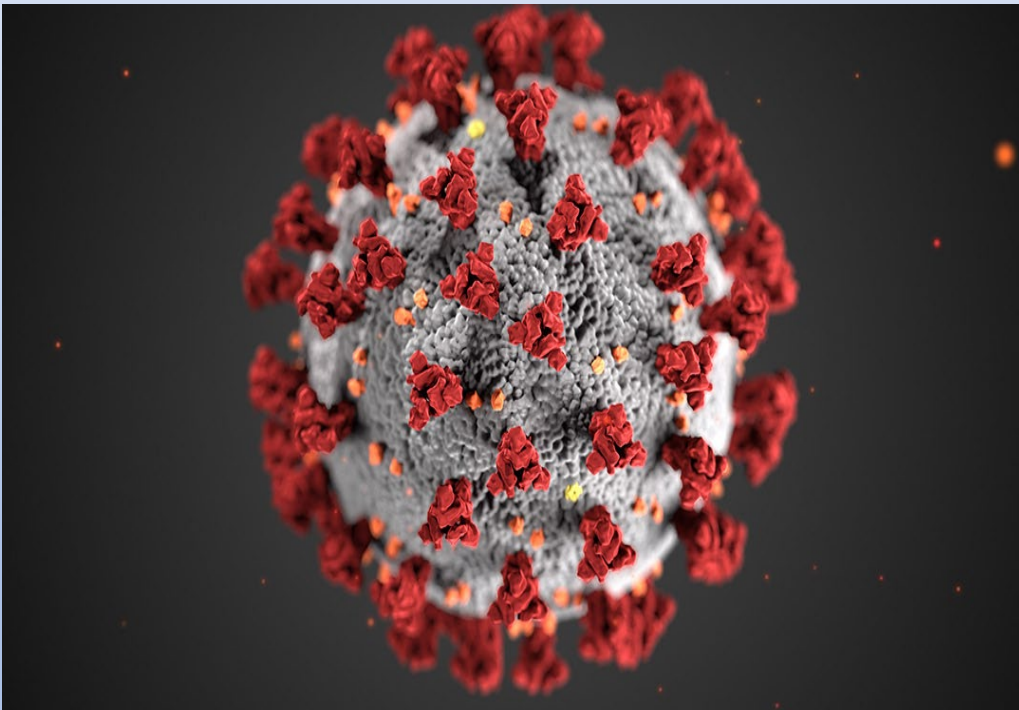
Barriers to Collective Efficacy in Public Health Organizations

- **Barriers** to collective efficacy in public health agencies include:
 - Significant budget cuts and critical reduction in the size of their workforce
 - "Silos" within public health agencies
 - Need to do more with fewer resources
 - Workforce burnout (COVID-19 pandemic-related and otherwise)

Facilitators of Collective Efficacy in Public Health Organizations

- **Facilitators** of collective efficacy in public health agencies include:
 - Building and leveraging crosscutting or core skills and competencies in nontechnical areas such as management, communication, and leadership
 - Advocating for interdivisional and interagency integration
 - Cross-pollinating with partners and stakeholder to exchange skills to achieve collective impact in “transdisciplinary approach”

Scenarios in which collective efficacy can benefit public health organizational functioning



Public Health Response to Emergencies & Disasters

Collective efficacy can enhance public health agencies' responses to emergencies and disasters through:

- team-based approaches to response, **across divisions/units within a public health department**
- fortifying cross-agency partnerships **across the Public Health Emergency Preparedness System**

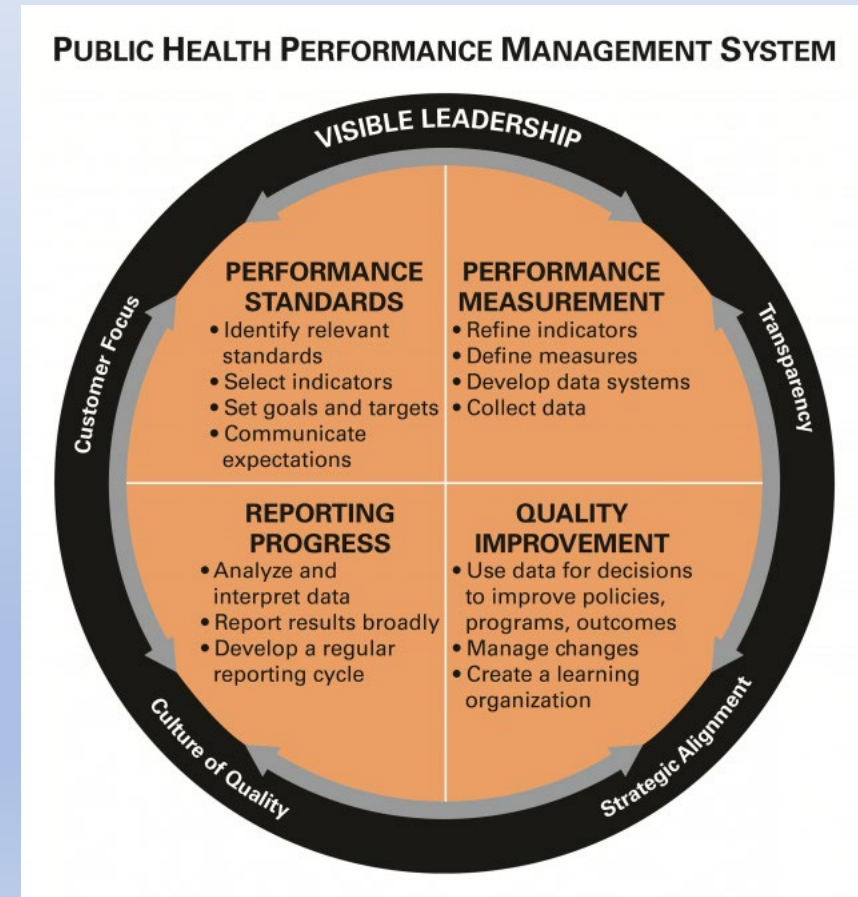


Pertinence of Collective Efficacy to 'All Hands on Deck' Public Health Crisis Response

- Potential examples:
 - Providing front-office phone personnel with fact sheets to augment crisis risk communication
 - Cross-training of personnel in basic public health emergency response principles and practices (e.g., incident management, contact tracing, others)

Relevance of Collective Efficacy to Continuous Quality Improvement (CQI) Initiatives in Public Health Organizations

- Team-based approach to CQI to:
 - Increase efficiencies in public health organizational services
 - Enhance community satisfaction in public health services
 - Increase systematic approaches to Plan-Do-Study-Act cycle for CQI in public health agencies



Strategies for building collective efficacy in public health organizations and their partners



Train Using the Principles of Adult Learning

- “Learn by doing”
 - Question and answer dialogues
 - Role playing
 - Problem solving
- Increases knowledge retention
- Increases individual and group efficacy

Train Across Tiers

- Bring together:
 - Frontline staff (tier 1)
 - Program managers (tier 2)
 - Division chiefs (tier 3)
- Include trainings with participant interaction
 - Role playing, scenario-based learning
- Employees learn daily pressures and sources motivation colleagues face
 - Increases one's sense of value of the work their colleagues perform

Train Across Divisions or “Silos”

- Increases understanding and appreciation employees have for work being done in other divisions
- Increases organizational flexibility
 - Reduces risk that staff turnover results in the loss of critical knowledge
- Particularly helpful for frontline (tier 1) employees
 - May typically deal with discrete tasks as opposed to thinking about the agency as a whole

Train Tier 1 Employees on the Functions of the Health Department as a Whole

- Employees will understand their position within the department
- Increased ability to utilize the workforce during staff turnover or emergencies
- Provides tier 1 employees with knowledge of the variety of functions and stakeholders involved in the agency
 - Increased sense that agency resources are being used in a variety of ways to support the wellbeing of the agency and its staff
 - Increased understanding that the well being of the agency depends upon coordinated efforts of the entire workforce

Train in Interagency or Multistakeholder Settings

- Training with other agencies at the local, state and federal levels
 - And/or community partners or stakeholders in public and private sectors
- Provides employees with an outside perspective on the value of their work
 - Increased appreciation for the skills and function of their agency's workforce → increased belief that their colleagues can operate effectively

Train Personnel in Groups Where Different Tiers/Position Levels Can Interact

- Face-to-face interactions are key to building self efficacy
 - This type of training is likely to also be key for building collective efficacy
- Classroom-based, in-person workshops
- Ensure participants interact with a diverse group of stakeholders beyond those with whom they typically engage

Key Takeaways

- Collective efficacy in public health agencies can optimize fulfillment of the Essential Public Health Services.
- Building collective efficacy in public health agencies can involve fortifying bridges within health departments and between health departments & partner agencies/institutions.
- Collective efficacy can allow public health agencies to do more with limited resources.
- Training using principles of adult learning is a strategy for building collective efficacy in public health organizations and their partners.

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Thank You

Questions?

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