

Adaptive Leadership for Improving Strategic Planning

The Challenge

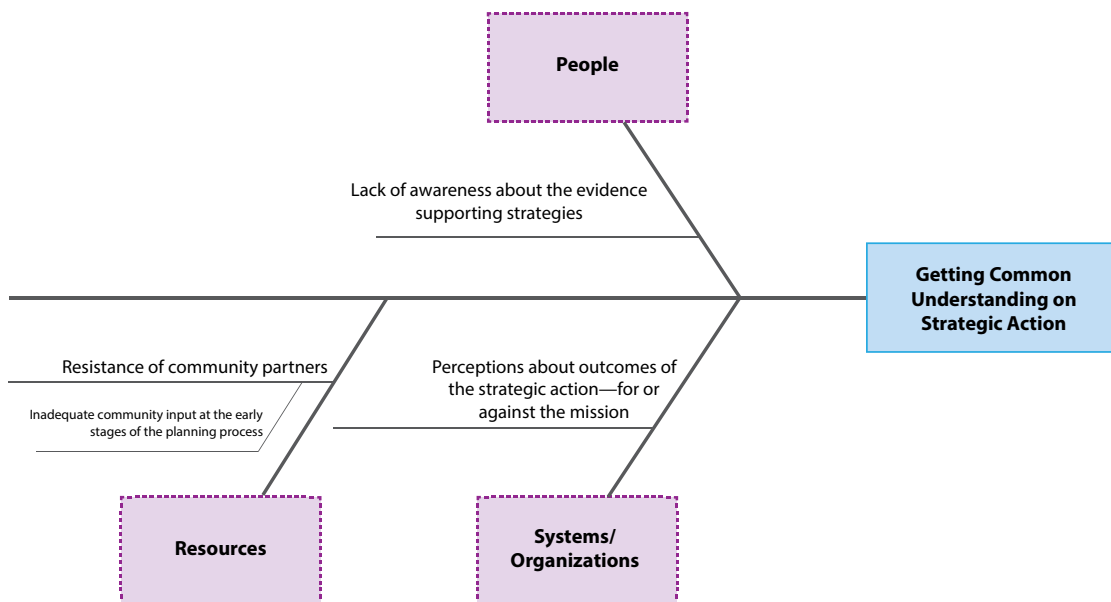
The Louisiana Department of Health (LDH), Office of Public Health (OPH)/Bureau of Family Health is the sole Title X grantee in Louisiana. LDH/OPH/Bureau of Family Health is a direct service provider and oversees 65 Title X-funded service sites across the state to ensure that low-income, uninsured, and underinsured individuals and families have access to a range of family planning and preventive health services. Every five years, LDH/OPH/Bureau of Family Health develops a strategic plan to meet its organizational goals, such as increasing client access to care in rural areas. At times, however, its stakeholders have not been able to agree on what strategies are needed, hampering their implementation. LDH/OPH/Bureau of Family Health staff wanted to identify the main reasons for stakeholder disagreement and find ways to address them. Increasing their adaptive leadership capacity would help them understand their challenge better, build stakeholder agreement so that the strategic plans are implemented, and ultimately benefit clients across the state.

Adaptive Leadership
is the ability to effectively manage change in complex and uncertain environments.

Adaptive Leadership Tools for Understanding Complex Challenges

The FPNTC introduced LDH/OPH/Bureau of Family Health to multiple tools for understanding complex challenges and building agreement. LDH/OPH/Bureau of Family Health first used the **Cause and Effect Diagram** to identify the potential root causes of their problem in three key categories—**People, Resources, and System/Organization**. Lack of awareness about the evidence supporting proposed strategies was identified as one root cause within the People category. Resistance of regional stakeholders and community partners was identified as a root cause in the Resources category. Upon further exploration, inadequate input from the regional stakeholders and community partners at the early stages of the strategic planning process was identified as an underlying cause. The Cause and Effect Diagram helped start the conversation and build a shared understanding of their challenge’s causes.

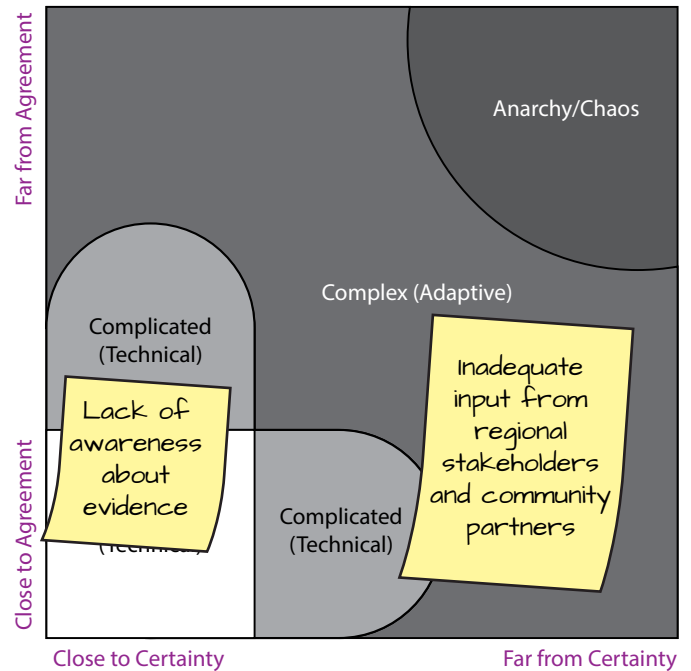
EXAMPLE OF LOUISIANA DEPARTMENT OF HEALTH CAUSE AND EFFECT DIAGRAM



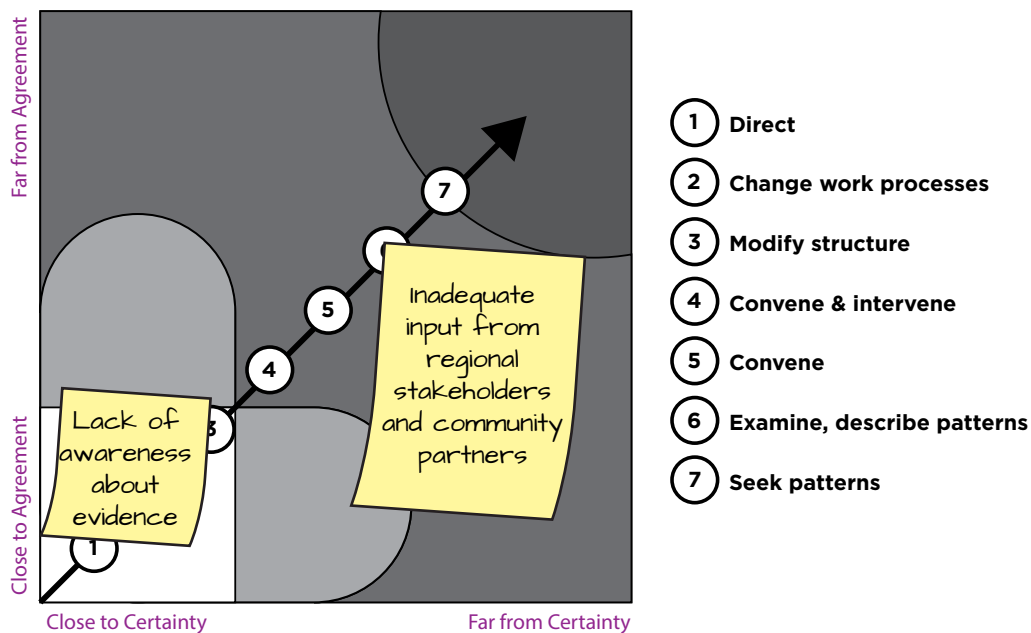
LDH/OPH/Bureau of Family Health staff then used the [Agreement and Certainty Matrix](#).¹ This tool helped them identify which root causes of their problem were technical and could be addressed with known solutions and which causes of the problem were adaptive (complex) and lacked agreed-on solutions. For example, there was high certainty and agreement that **lack of awareness** about the evidence supporting needed strategies was a simple, straightforward problem with a known solution. **Inadequate input from the regional stakeholders and community partners during the early stages of the strategic planning process** was considered to be an adaptive issue. There was high agreement that including regional stakeholders and community partners early on would improve strategic planning, but less certainty about how to best gather and incorporate their input.

Next, the staff identified **Approaches for Developing Solutions** based on the technical or adaptive nature of the causes. Making this distinction helps reduce resources spent on technical solutions that are ineffective when addressing adaptive problems. Adaptive challenges require using approaches that can increase the certainty or agreement on which solutions to pursue. For example, a **Direct Approach** would address the lack of awareness of evidence supporting strategies. Providing evidence to stakeholders would improve their ability to agree on the most effective strategies. Staff identified the **Convene** approach for including regional stakeholders and community partners in the strategic planning process to better understand their priority needs and to get input on potential strategies.

AGREEMENT AND CERTAINTY MATRIX



APPROACHES FOR DEVELOPING SOLUTIONS AGREEMENT AND CERTAINTY MATRIX



¹ Adapted from Zimmerman (2001) based on concepts from Stacey (1996) and application of the matrix by Dr. Stephen Larned.

The [Hexagon Readiness Tool](#) was used to advance LDH/OPH/Bureau of Family Health's ability to make informed decisions and agree on potential strategies. This tool helps organizations assess the applicability of strategies according to six criteria: Need, Resource supports, Evidence, Usability, Capacity to implement, and Fit with current initiatives. The staff practiced using this tool to assess the potential for telehealth services to reach rural populations. Staff discussed the guiding questions for all the factors, completed individual ratings based on criteria, and calculated a group score. This practice session illustrated how LDH/OPH/Bureau of Family Health could make decisions by assessing what is required to move forward with that strategy.

Lastly, LDH/OPH/Bureau of Family Health staff used the [Prioritization Matrix](#) for prioritizing strategies based on the effort it takes to implement them and their potential impact on the desired outcome(s). Convening regional stakeholders and community partners was seen as a high-effort and high-impact activity. Raising stakeholder awareness about the evidence supporting strategies was seen as a "quick win," because it took relatively low effort with potential for high impact on decision making and strategic planning.

Highlights

Using adaptive leadership tools, LDH/OPH/Bureau of Family Health staff was able to understand the complexity of their challenge and assess ways to improve its strategic and programmatic planning overall. Evaluation results of FPNTC support to LDH/OPH/Bureau of Family Health showed that the tools helped staff share their different perspectives and work through a persistent problem they were facing. The staff strongly felt that the Cause and Effect diagram was able to break down and individualize the issues most important for advancing their family planning project's strategies. The Agreement and Certainty matrix helped build critical thinking and problem-solving skills for categorizing technical and adaptive challenges and strategies. As one staff member summarized, "the group work and real examples worked well in demonstrating how to use this tool for other organizational projects." Overall, these tools helped staff build their capacity to understand and analyze complex system issues. LDH/OPH/Bureau of Family Health found that these tools helped to identify what is needed to reach agreement on strategies and actionable plans.

"The group work and real examples worked well in demonstrating how to use this tool for other organizational projects."

– LDH Staff Member

Visit fpntc.org to learn more about adaptive leadership tools, such as [Cause and Effect Diagram](#), [Agreement and Certainty Matrix](#), and the [Hexagon Readiness Tool](#) to tackle complex challenges in your setting and to strengthen your service system.

References

1. Zimmerman, B. (2001). "Ralph Stacey's Agreement & Certainty Matrix | Better Evaluation." Betterevaluation.org. Accessed, April 16, 2019.
2. Stacey, Ralph D. 1996. *Complexity and Creativity in Organizations*. San Francisco: Berrett-Koehler.
3. Metz, A. & Louison, L. (2019) *The Hexagon Tool: Exploring Context*. Chapel Hill, NC: National Implementation Research Network, Frank Porter Graham Child Development Institute, University of North Carolina at Chapel Hill. Based on Kiser, Zabel, Zachik, & Smith (2007) and Blase, Kiser & Van Dyke (2013).

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