What does Learning Culture have to do with Immunization Performance?

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Recorded for Linked workshop on: Strengthening HR capacity and performance management

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Date 6 June, 2023

Linked Immunisation Action Network

For a health system and its immunization program to function well, it also needs its health workers to perform well.

Multiple factors affect health worker performance and, by extension, immunization program performance.

But what are the <u>most important factors</u> that lead to health workers performing well?

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Introduction

Many of you identified health worker capacity and performance management as major challenges in reaching immunization equity targets and/or recovering from the impact of COVID-19 on your health system—with reaching zero-dose (unvaccinated) & under-vaccinated children and persistently missed communities as ongoing gaps.

To address immunization health worker performance in your countries, where do you start?

What can you do to better understand ("diagnose") what areas of health worker capacity strengthening are most needed in your context, and then work to address those specific areas?

Quiz - Which of these do you think is the biggest contributor to immunization staff performance globally? *Choose one*.

1. Improving motivation – Повышение мотивации

2. Creating continuous learning opportunities – Создание возможностей для непрерывного обучения

3. Promoting dialogue and inquiry – Содействие диалогу и изучению вопроса

4. Encouraging collaboration and team learning – Поощрение сотрудничества и группового обучения

5. Establishing systems to capture and share learning – Создание систем для сбора информации и обмена опытом

6. Empowering people toward a collective vision – Наделение людей полномочиями в рамках коллективного видения

7. Connecting the immunization program to its environment – Увязка программы иммунизации со средой

8. Leaders providing leadership for learning – Руководители, обеспечивающие руководство процессом обучения

Findings from a 2020 & 2022 Learning Organization Assessment

Majority opinion globally: *health worker motivation is one of the most important factors in program performance.*

What did a global 2020 & 2022 organizational learning assessment in middle and low-income countries show with immunization staff performance?*
- *Almost no correlation with motivation*
- *Strong correlation with learning culture*

Learning culture = *the capacity of the work environment to support learning and change*

*2020 n=3,638 (104 countries, 80% sub-national staff, 19% national); 2022 n=6,185 (99 countries, 73% sub-national, 18% national)

Examples of current immunization interventions to address health worker capacity & performance management gaps:

Traditional
- Training, both pre- and in-service (includes workshops, in-country or international)
- Review meetings that include data tracking (monthly, quarterly, annual; integrated or vertical)
- Supportive supervision (integrated or vertical; management & service delivery oriented)
- Exchange visits (in-country or to other countries)

Exploratory
- Behavioral Science methods that incorporate Human Centered Design, Continuous Quality Improvement, Service Experience Strengthening, etc.
- Peer learning collaboratives with a focus on adult learning methods
- Communities of Practice

These approaches, when blended & implemented well, can be very effective. But…are the right interventions being applied to address your country's specific weakest areas of learning & performance?

What Do You Think?

- How many of you believe organizations can learn?

- How many of you believe organizations don't learn, people learn?

A Learning Organization?

pause for video

Or Is This a Learning Organization?

● ● ● ● ●

pause for video

Looking Backward From Perfect...

- What would have to change?
  - Culture?
  - Structure?
  - Strategy?
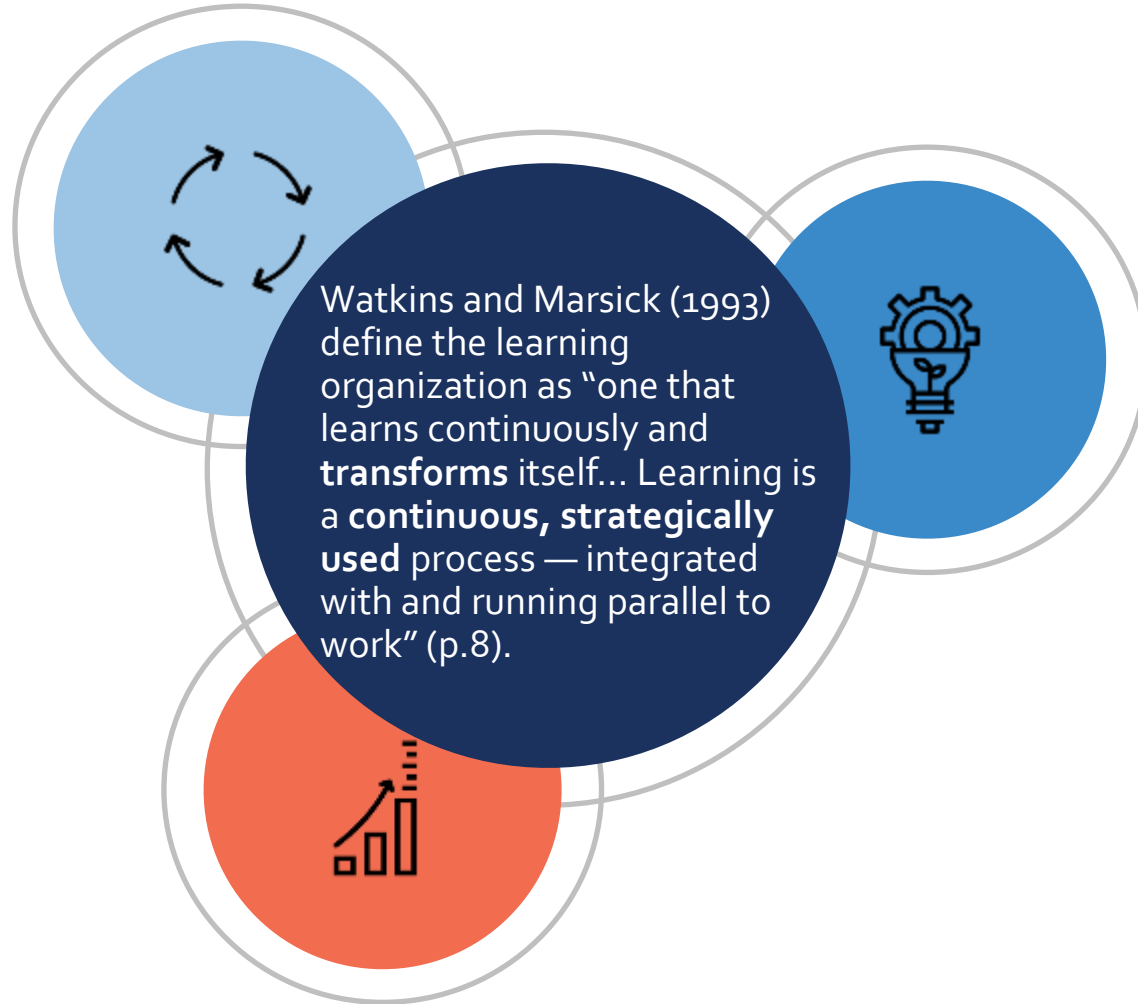 - Ideology? [Mission, Vision, Values]

Repositioning Learning

- Organizations can and do learn– but most of the time, that learning is unplanned, tacit
- Learning is at the heart of the organization when it is systematically embedded in the culture, in how we do things here

The Learning Organization

Watkins and Marsick (1993) define the learning organization as "one that learns continuously and **transforms** itself... Learning is a **continuous, strategically used** process — integrated with and running parallel to work" (p.8).
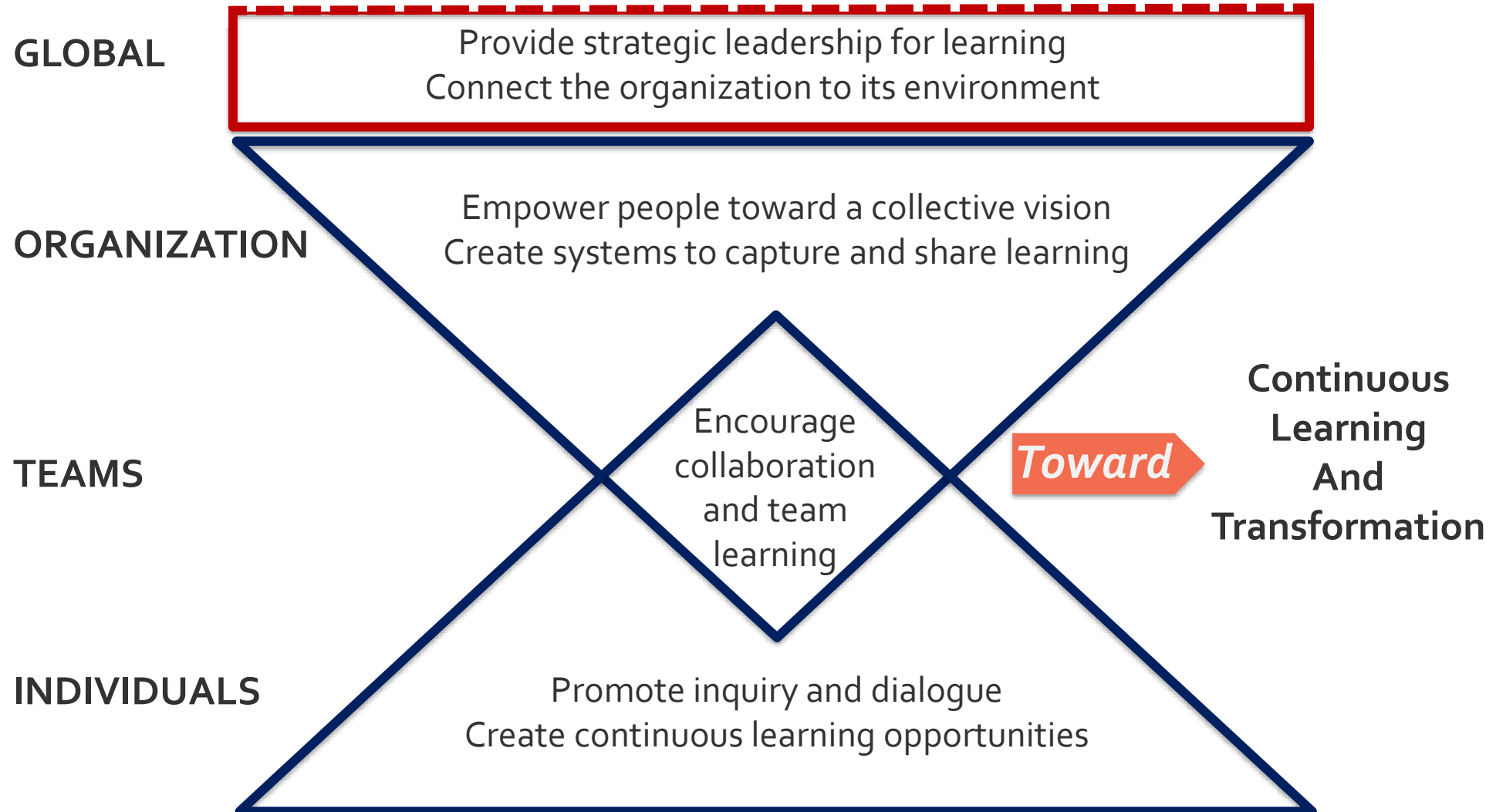
Three key components:
System-level, continuous learning

In order to create and encourage knowledge outcomes

That lead to improvement in the organization's effectiveness, and ultimately its value, as measured through both financial & non-financial [intellectual] capital

Learning Organization Action Imperatives

GLOBAL
Provide strategic leadership for learning
Connect the organization to its environment

ORGANIZATION
Empower people toward a collective vision
Create systems to capture and share learning

TEAMS
Encourage collaboration and team learning

Toward

Continuous Learning And Transformation

INDIVIDUALS
Promote inquiry and dialogue
Create continuous learning opportunities

The Dimensions of a Learning Organization Questionnaire [DLOQ]

— Translated into over 20 languages [*including Russian– see Kortsch, T., Bashenkhaeva, V., & Kauffeld, S. (2022). Learning from leaders: the mediating role of leadership between national culture and organizational learning culture. Human Resource Development International, 1-24.*]

— Listed in Psychtest database

— Over 100 published studies in multiple contexts

— Highly valid and reliable across contexts

Putting Theory into Practice in Immunization:

More on the 2020 & 2022 global immunization organizational learning DLOQ

Both DLOQ assessments showed a relatively low score for "continuous learning", which suggests that globally, immunization programs consistently:

- *Fail to create learning opportunities*
- *Have low ability to experiment and to take risks, low tolerance for failure*
- *Focus on task completion at the expense of developing capacity for future performance*
- *Do not adequately encourage learning or tie it to tangible organizational incentives*

*2020 n=3,638 (104 countries, 80% sub-national staff, 19% national); 2022 n=6,185 (99 countries, 73% sub-national, 18% national)
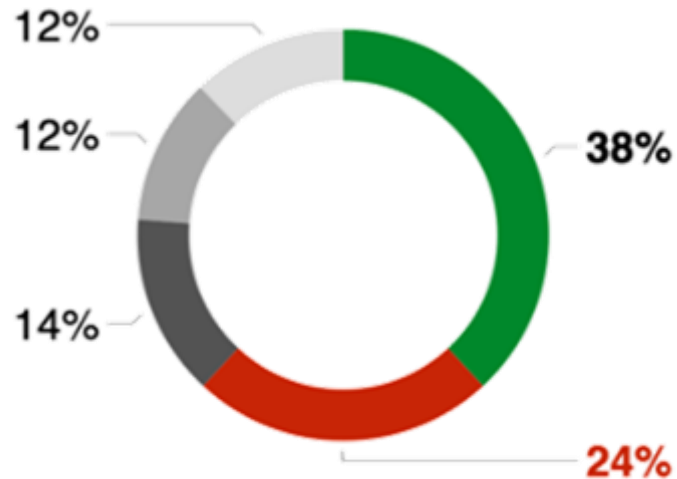
Summary of scores by component from 2020 & 2022 organizational learning assessments of immunization staff*
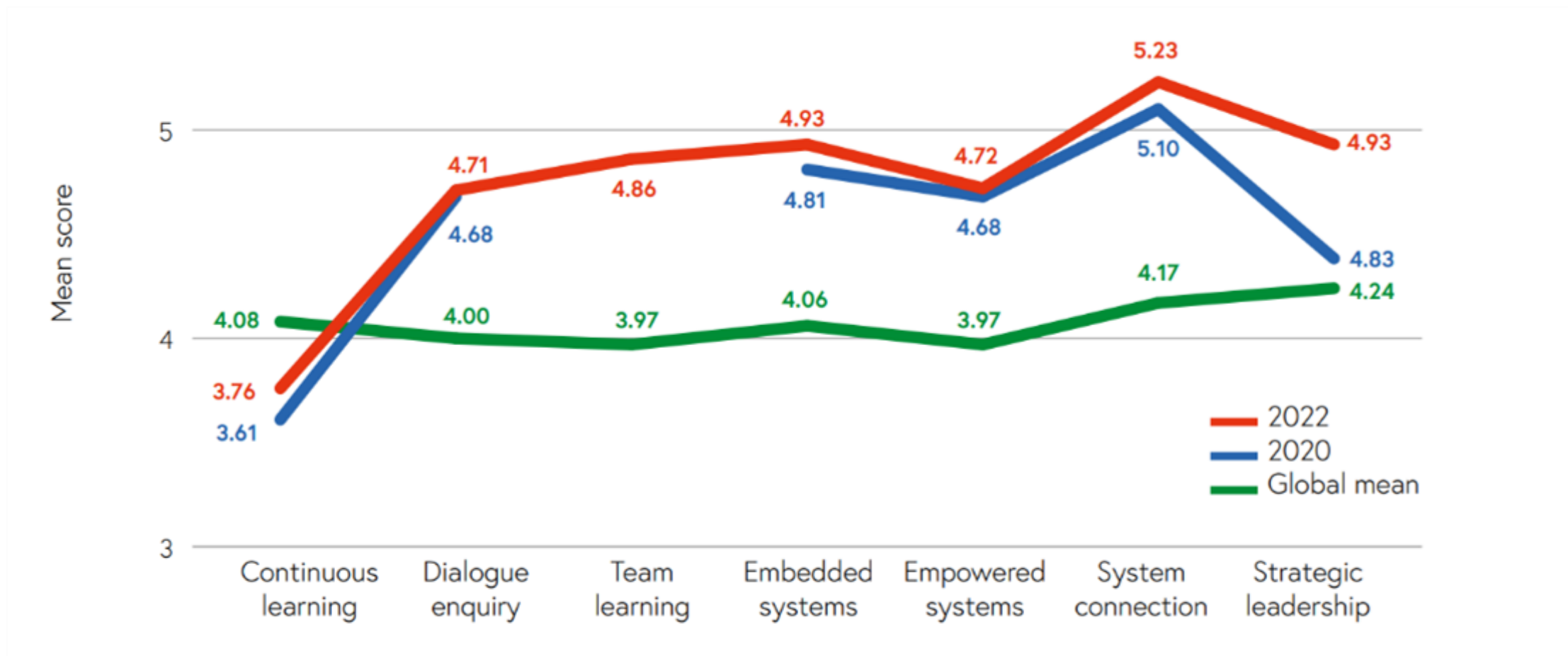
*2020 n=3,638 (104 countries, 80% sub-national staff, 19% national); 2022 n=6,185 (99 countries, 73% sub-national, 18% national)

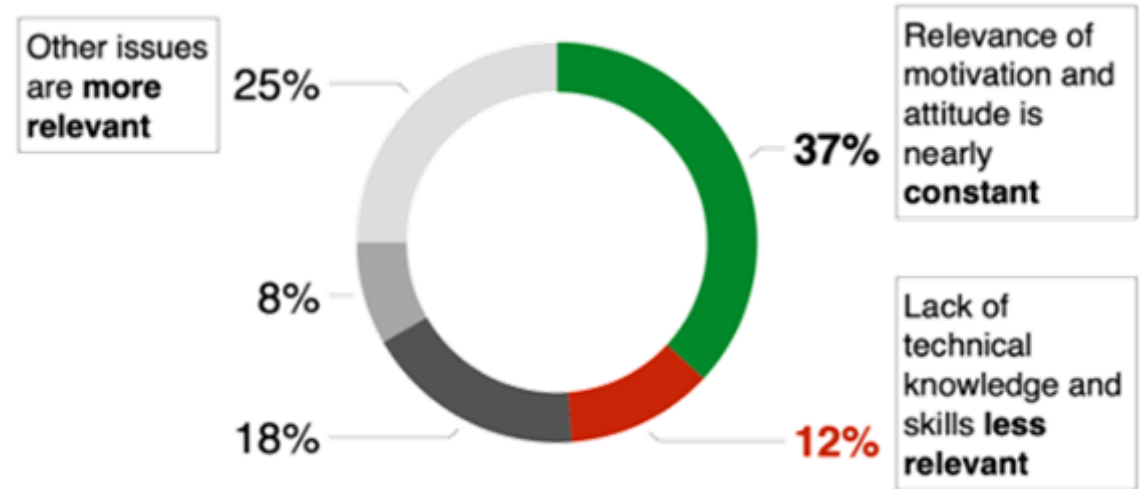# Motivation is key, technical knowledge & skills overestimated

What participants think is important

12%
12%
14%
38%
24%

Post-hackathon evaluation question (n=147):
"In relation to the most important action in your action plan to build the capacity of health workers, which human resource issue is most important?"
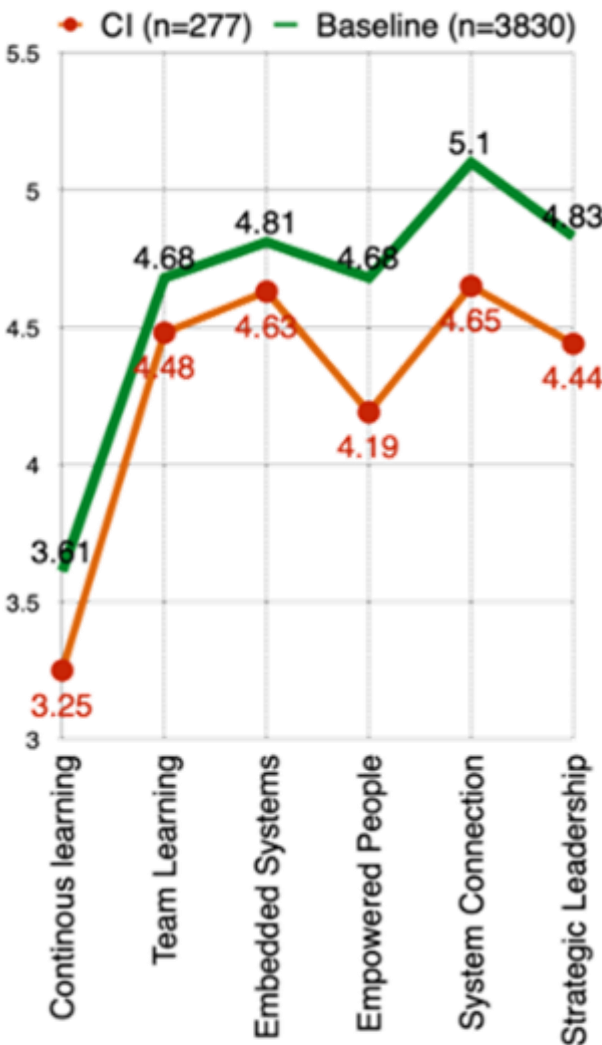
What is **actually** important in practice

Other issues are **more relevant**
25%
8%
18%
Relevance of motivation and attitude is nearly **constant**
37%
Lack of technical knowledge and skills **less relevant**
12%

Campaign survey question (n=84)
"Think about a time when health workers changed the way they did things, and this resulted in more people being vaccinated during the campaign. In relation to this testimony, which human resource issue was most important?"

- Lack of motivation and positive attitude among health workers
- Lack of technical knowledge and skills
- Lack of systems and tools
- Little or no access to innovative and flexible learning approaches
- None of these issues are relevant

What we found about learning culture with immunization staff in a West African country: gaps in support of experimentation, empowerment, and leadership

Chart legend: ◆ CI (n=277) — Baseline (n=3830)

Baseline values: Continous learning 3.61, Team Learning 4.68, Embedded Systems 4.81, Empowered People 4.68, System Connection 5.1, Strategic Leadership 4.83

CI values: Continous learning 3.25, Team Learning 4.48, Embedded Systems 4.63, Empowered People 4.19, System Connection 4.65, Strategic Leadership 4.44

Global baseline (March 2020, n=3830)
104 countries, 80% sub-national staff, 19% national, 65% MoH EPI

Failure to create learning opportunities
Low ability to experiment and to take risks, low tolerance for failure.
Focus on task completion at the expense of developing capacity for future performance.
Do not adequately encourage learning or tie it to tangible organizational incentives.

Côte d'Ivoire immunization staff (n=277)
Lower learning culture compared to baseline

Are people empowered toward a collective vision? People are not sufficiently involved in setting, owning, and implementing a joint vision; responsibility is dissociated from decision making so that people are not motivated to learn even when they are held accountable

Do leaders provide leadership for learning?
Leaders are not sufficiently modeling, championing, or supporting learning; not using learning strategically for business results

	Dimensions	Definition
CL	Create continuous learning opportunities	Learning is designed into work so that people can learn on the job; opportunities are provided for ongoing education and growth
DI	Promote dialogue and inquiry	People gain productive reasoning skills to express their views, and the capacity to listen and inquire into the views of others; the culture is changed to support questioning, feedback, and experimentation.
TL	Encourage collaboration and team learning	Work is designed to use groups to access different modes of thinking; groups are expected to learn together and work together; collaboration is valued by the culture and rewarded
ES	Establish systems to capture and share learning	Both high and low technology systems to share learning are created and integrated with work; access is provided; and systems are maintained
EP	Empower people toward a collective vision	People are involved in setting, owning, and implementing a joint vision; responsibility is distributed close to decision making so that people are motivated to learn for what they are held accountable
SC	Connect the organization/system to its environment	People are helped to see impact of their work on the entire enterprise; people scan environment and use information to adjust work practices; organization is linked to community
SL	Leaders provide leadership for learning	Leaders model, champion and support learning; leadership uses learning strategically for business results
FP	Financial performance	State of financial health and resources available for growth
KP	Knowledge performance	Enhancement of products and services because of learning and knowledge capacity (lead indicators of intellectual capital)
MP	Mission Performance	Extent to which the organization is currently fulfilling its mission in terms of client services.

	n	Continous learning	Team Learning	Embedded Systems	Empowered People	System Connection	Strategic Leadership
Global baseline	3830	3.61	4.68	4.81	4.68	5.10	4.83
CI Hackathon	277	3.25	4.48	4.63	4.19	4.65	4.44

Watkins, K.E., O'Neil, J., 2013. The Dimensions of the Learning Organization Questionnaire (the DLOQ): A Nontechnical Manual. Advances in Developing Human Resources 15, 133–147. https://doi.org/10.1177/1523422313475854

Watkins, K.E., Sadki, R., Kim, K., Suh, B., 2018. Changing Learning Paradigms in a Global Health Agency, in: Hamlin, B., Ellinger, A.D., Jones, J. (Eds.), Evidence-Based Initiatives for Organizational Change and Development. Business Science Reference, Hershey.

Conclusion

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Thank You