

## Final Report on ZAC and ZACP LDP

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Grace Mwatali, Sharifa Salmin, William Kiarie

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5 key words: ZAC, ZACP, LDP, Tanzania, orientation

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Leadership, Management and Sustainability Program

Management Sciences for Health

784 Memorial Drive

Cambridge, MA 02139

Telephone: (617) 250-9500

[www.msh.org/lms](http://www.msh.org/lms)

**REPORT ON THE ORIENTATION OF ZAC AND ZACP MANAGEMENT  
STAFF ON THE LEADERSHIP AND DEVELOPMENT PROGRAM (LDP)**

**May 12-14, 2010, Zanzibar**

**Authors:** Grace Mtawali, MSH; William Kiarie, MSH; Sharifa Awadh MSH.

## **1.0 Background**

MSH through the Leadership and Management Sustainability project (LMS) in earlier days of the LMS, in collaboration/partnership with East and Southern Management Institute (ESAMI), based in Arusha and later without ESAMI, has provided capacity building to the Zanzibar AIDS Commission (ZAC) in areas of organizational development but no ZAC staff have not gone through the LDP training.

LMS has provided LDP training to 233 staff drawn from District AIDS Coordinating Committees (DACCOMS), Technical AIDS Coordinating Committees (TAC) and the Zanzibar Ministry of Health and Social Welfare (MOHSW) from both Unguja and Pemba Islands. Through these personnel, ZAC is responsible for coordinating HIV/AIDS activities - for example ensuring that the work of the LDP trained personnel (LDP alumni) links closely with the HIV/AIDS policy and strategic plans. ZAC is also expected to support all stakeholders who are conducting HIV/AIDS activities in the country, including the activities of the LDP alumni, coaches, and facilitators. A majority of these alumni have started LDP projects that require scaling up or technical and sometimes financial support. This need has been recognized by ZAC. Hence they requested LMS to support LDP training for a team drawn from Zanzibar AIDS Control Programme (ZACP) and Zanzibar AIDS Commission. The goal of the training is to ensure that the two organizations provide effective technical support and coaching. The skills of the LDP alumni as well as the work they have successfully began needs to be sustained. LMS, in collaboration with the MOHSW and support from the World Health Organization (WHO), has trained 9 local LDP trainers and provided them with systematic mentoring to equip them with the necessary skills and resources to coach to new and existing LDP teams, thereby ensuring the potential for sustaining the LDP in Zanzibar is fully realized. The current MSH Project Coordinator has adequate LDP knowledge and appropriate skills, and will be an important resource to ZAC, ZACP and the Ministry of Health LDP trainers.

The purpose of this ZAC and ZACP LDP workshop was to strengthen the capacity of ZAC and ZACP to support the work of LDP alumni and their

organizations while applying the LDP principle that states, “*Managers must also be Leaders. Leaders are developed and are seen at all levels of an organization.*”

## **2.0 DESCRIPTION OF THE ORIENTATION**

This part of the report provides the detailed steps taken in the development of the LDP orientation of ZAC and ZACP managers. Some comments from participants’ evaluation are also included in the report.

### **2.1 Planning the orientation**

#### **2.1.1 Developing a common understanding of issues**

A participatory approach involving MSH and ZAC and ZACP was used to plan the orientation training. The lead facilitator held several electronic and face to face communications with ZAC and used experience from other ZAC/MSH technical assistance outcomes, such as MOST Action Plan and findings such as shown in Attachment Number 1, to prepare an adapted LDP for orienting the ZAC and ZACP staff. See Attachment Number 2 for the Schedule of the Orientation on LDP.

#### **2.1.2 Objectives of the training**

A set of workshop objectives were developed to ensure that by the end of the workshop participants would be able to:

1. Apply principles of the Leadership Development Program for their own work and organizations.
2. Use the Challenge Model to address work-related challenges.
3. Support and strengthen the teams (TAC, DACCOMS and Ministry of Health Middle Level Managers that have been previously trained in LDP, using coaching skills as appropriate.
4. Access necessary leadership and management resources online in Zanzibar to support their work.
5. Advocate for further investment in leadership and management at all levels to build stronger health systems, organizations and programs.

## **2.1.2 Conducting the orientation**

Interactive and participatory methods were applied, whereby the facilitators provided short lectures to introduce the topic, followed by active large group discussion and small group work. Participants engaged in role plays to model coaching skills and a problem solving exercise that stimulated creative thinking. The use of games and active exercises also supported learning during the orientation. To influence change of participants' attitudes about the LDP principles, a real example of an LDP team which had achieved the planned measurable result was presented by Mrs. Firdaus, a member of the LDP team which made history in the government system by establishing a Gender Unit in the Ministry of Water and Construction (See Attachment Number 3.0). All participants expressed inspiration with the success of the actual example of the LDP approach. In order to sustain interest and commitment from various policy officials they asked her to present her LDP success story at forums of senior policy officials (to be determined through consulting with the MOHSW Minister, also an alumnus of the LDP). As one way of providing a reference and back-up for the newly acquired knowledge and skills, four copies of the Handbook entitled "Managers who Lead"; four copies of CDs of the same book, and six posters from the book were provided to the ZAC and ZACP teams through their directors, divided equally between the two organizations. These materials were very much appreciated and are on demand by other participants, for individual ownership.

## **2.1.3 Monitoring and Evaluating the Orientation**

### **Expectations of participants of the orientation**

Participants presented their expectations of the LDP orientation training at the beginning of the workshop. Facilitators emphasized that participants should continuously compare them with the workshop objectives and outcomes for each session as a way of self monitoring the acquisition of LDP knowledge and skills. Fortunately the expectations shared closely linked with the learning objectives.

## **Morning Recap sessions**

Facilitators led participants through morning recap sessions during which special individual insights were shared and proposals for improving any part of the orientation process or logistics were accepted and applied during subsequent sessions. The main issue for which remedial action had to be made was time allocation for sessions. However, flexibility by both participants and facilitators effectively handled this issue. Responses showed progressive learning, especially on applying the leading and managing practices. A majority of participants mentioned the interrelated leading practices of scanning; setting priorities; focusing; inspiring and mobilizing; and the importance of team work and paying attention to complimenting talents /skills, to indicate that those were the areas in which the LDP Orientation was helping them significantly. This also came out during the the feedback on the games and small work groups.

Monitoring of participants' learning progress was also done through observing active participation and listening to spontaneously expressed comments on the LDP.

## **End of the Orientation Evaluation**

A written evaluation form with three areas from the LDP facilitator's guide was administered at the end of the workshop. All participants completed it. The evaluation showed significant satisfaction with the orientation. The main responses are shown below, in abridged phrases or statements.

### **The skills or facts which I learned**

- Leadership can be learned;
- the practice of scanning, inspiring;
- using the Resource Mobilization Tool and Stakeholder Analysis;
- the Challenge Model;
- teamwork;
- that LDP makes individuals committed to their work;

- how to scan, mobilize, inspire and plan to implement and face challenges for achieving results at the work place;
- the importance of a leader focusing on one thing at a time in order to get results;
- acknowledging others' actions;
- complaints versus compliance;
- vision and mission;
- action plan;
- coaching through break downs;
- the workshop builds confidence.

**The skills that I will apply:**

- LDP skills will be applied at my work and home;
- I will teach others and continue applying the LDP;
- We will apply the LDP in our work place teams.

**Suggestions to facilitators:**

- Deliberatively move from one subject to another to prevent confusing us, otherwise you were great.
- Do the follow-up on this Orientation as we practice the LDP at work.
- Communicate when you are coming to do coaching at our work place.
- Keep conducting these workshops and refresher training because they are beneficial to work place.
- Make similar trainings 5 days long.
- Involve all members of an organization in LDP.
- Ensure these same facilitators continue to train as a team.

**3.0 Way forward.**

In order to continue strengthening the newly acquired LDP practices, participants agreed to use the Challenge Model in relation to the vision and mission which they had begun to work on during the Orientation Workshop.

Each team requested Sharifa Awadh, MSH Project Coordinator in Zanzibar, and the local facilitators to provide the assistance/coaching they need. With the impending end of the LMS project, it was agreed that the Challenge Models for each team would be completed by June 4, 2010.

#### **4.0 Major Accomplishments of the Orientation**

In summary, the following were accomplished as a result of the Orientation:

1. The workshop objectives were achieved to an acceptable level, on the whole. Agreement by participant teams on the Way forward and commitment to implement it
2. A common understanding of the LDP and the status of the LDP in Zanzibar was achieved.
3. Twenty two (22) senior managers of ZAC and ZACP staff have acceptable level of LDP knowledge, practices/skills and commitment for providing participatory support to previous alumni of the LDP for whose work they are responsible.
4. To ensure effective coaching and sustaining the LDP program, the 22 ZAC and ZACP staff were provided with names of the MOHSW officers who were trained as LDP trainers.
5. The ZAC Chairlady continued to pledge support to the LDP alumni in her closing remarks.
6. ZAC and ZACP received two copies of each of the *Managers Who Lead* plus two extra CDs of the same book.
7. One ZACP program officer requested to have and received her own hard copy of the *Managers Who Lead*.

#### **4.0 Acknowledgement**

The LDP Facilitator team appreciates the collaboration between MSH/UN Joint Program, the Ministry of Health and Social Welfare, Zanzibar and all management officials from ZAC, ZACP and other stakeholders who contributed to the success of the activity. The participants' commitment and full attendance demonstrates the value they give to LDP.

## **ANNEX 1: ZAC & ZACP Leadership Development Program**

**Day 1: 12 May 2010**

**8.30 Arrival and Registration**

**9.00 Welcome and Opening Remarks – *MSH and ZAC*  
Brief on LDP in Zanzibar 9.15 Introductions**

**9.30 Ground Rules and Expectations  
Workshop Objectives and link to Expectations**

**10.00 LDP approach and Overview**

**10.30 Tea Break**

**11.00 What do Leaders do?**

**11.45 Understanding Leading and Managing**

**12.45 Link between Leadership/Management and Results**

**1.15 Lunch**

**2.15 Developing a Vision for ZAC/ZACP HIV/AIDS Programs**

**3.15 Introduction to the Challenge Model**

**4.15 Close and Tea**

**Day 2: 13 May 2010**

**9.00-9.20 Review Day One**

**9.20 Challenge Model (completed)**

**10.00- 11.00 Games for LDP Skills' application.**

**8.45 Urgent and Important Matrix**

**9.30 Root Cause Analysis**

**10.00 Developing Action Plans**

**10.30 Tea Break**

**11.00 Principles of Coaching**

**12.00 Teams review one TAC Results Workshop presentation - Challenge model, action plan and M&E Framework and note coaching areas**

**1.00 Lunch**

**2.15 Teams to carry out mock coaching based on the TAC Results Workshop presentation reviewed**

**3.30 Facilitators feedback on the mock coaching**

**4.15 Close and Tea**

**Day 3: 14 May 2010**

**8.30 Review Day Two**

**8.45 Presentation on the LDPs carried out in Zanzibar (DACCOM and ZAC) (*Based on the ongoing Zanzibar LDP review*)**

**9.45 Discussions on the status, achievements and challenges of the LDP program**

**10.30 Tea Break**

**11.00 Presentation by the Unguja Ministry of Water Construction, Energy and Lands (MWCEL) – based on their Results Workshop Presentation**

**11.30 Q&A**

**12.00 Teams to identify ways of supporting and coaching the MWCEL and other LDP teams**

**12.30 Lunch**

**2.30 Discussions on the way forward and ways of strengthening leadership in the health sector**

**3.15 LDP Resources - Leadernet etc**

**3.30 Discuss the assignment for teams and follow-up plans**

**4.00 Workshop Evaluation and Close**

## **ANNEX 2:**

### **BRIEF ON THE MEETING OF SHARIFA AWADH AND GRACE MTAWALI ON IDEAS TO HELP PLAN THE SPECIAL LDP FOR ZAC**

#### **Introduction**

There have been LDP training programs conducted by MSH for DACCOMS; TAC and currently for Senior Managers of Zanzibari MOHSW. In addition, there is a pool of TOT trainers with basic training as facilitators of LDP and two of the seven participated in three LDP workshops and a Results LDP Workshop. One has participated in one workshop. But all are qualified tutors of professional health programs. However, ZAC which is the coordinating body for HIV/AIDS program has not built their capacity in the area of LDP. ZAC has some skills on which to build LDP skills, for example applying MOST for organizational self assessment, implementing the MOST Action Plan and obtaining results from the experience with MOST. MOST incorporates the MSH Leading and Managing for Results Model. Hence, the proposed LDP orientation workshop for ZAC, is an appropriate supplement to the MOST action plan and follow-up.

The **purpose of the meeting** of two MSH staff (Sharifa Awadh and Grace Mtawali) with two of ZAC staff (Bi. Asha Abdulla and Halima) was to discuss their expectations for the proposed LDP orientation; provide the facilitator with ideas for adapting the “LDP curriculum/training design”, propose dates for when ZAC is likely to be accessible, and share the MSH and LDP Lead trainers’ general concept about the proposed LDP training. Halima is the link person for activities of HIV/AIDS and reports by DACCOMS, HIV/AIDS in work places etc.

#### **Major outcomes of the meeting**

- A general and common understanding that the unique LDP orientation will be an adaptation of the usual phased LDP, which is usually preceded by a Senior Alignment Meeting.
- A list of issues which ZAC has encountered as they provide support to various HIV/AIDS institutions/programs.
- Proposed dates for the ZAC LDP Training to take place back to back with the Workshop on LDP Results for the Senior Managers of MOHSW. A fourth day was preferred, rather than three in order to give sufficient time to the leading and management practices.

#### **What we discussed and obtained**

MSH team described the purpose of the visit and let ZAC share their expectations and rationale for undergoing LDP training, and other information necessary to plan for their LDP given the limited time remaining for the LMS/MSH program.

**The following list of issues were discussed (not in any priority order):**

1. The LDP participants will be multisectoral. Out of 25, 20 will be from ZAC and 5 from ZACP. Sharifa will convey the message after the meeting of March 12, 2010 because the ZACP Head was out of the country at that time.
2. TAC prepares their own public sector reports, at the individual ministerial level only.
3. Districts do submit reports on HIV/AIDS activities to ZAC. An M &E focal person for ZAC exists in districts and other relevant partners with ZAC.
4. ZAPMOS and other forms are not completely linking with government forms (SEE No. 2 ABOVE). ZAC has to search the relevant data from the narrative part of those forms. ZAC wish that the workplace interventions were reflected in the ZAPMOS as well as the narrative part of the reports.
5. There are no reports from the private sector HIV/AIDS services. That is from the ABCT. Zanzibar Branch. This “branch/service” needs to be revived. They seem unresponsive to reporting requirements.
6. ZAPMOS at district level “does not exist”. DACCOMS , despite performing many HIV/AIDS activities, do not share reports.
7. ZAC feels there is an issue of linking CCE, TANESA, and LDP as regards supportive supervision and mentorship which is conducted by ZAC. Currently ZAC alone, conducts this supervision for ZAPMOS
8. ZAC does not report its uniquely own activities. For example: IEC Materials developed and distribution; training conducted

**NOTE: The above issues and observation provide the LDP facilitation team with some familiarity of the challenges facing the ZAC/ZACP teams who will be participating in the LDP orientation training. It is understood that they need not address all the issues, of course.**

**Sharing the LDP MSH proposes.**

The MSH team presented that the LDP we had in mind would present selected Leading and Managing Practices in order to strengthen the “coaching role/function of ZAC/ZACP as they do their HIV/AIDS coordination among public (and private sector if possible) institutions. Where there are LDP trained persons, ZAC/ZACP will team up with them as needed in order to promote results –oriented programs.

When sharing what the L &M practices would be the main focus, ZAC emphasized the need to also do more on the practice of “aligning/mobilizing and inspiring”. Otherwise we all agreed on the proposed MSH approach.

**Dates for the ZAC/ZACP LDP PROPOSED:**

**May 2010, back to back with the LDP Results Workshop of the Senior Managers of MOHSW. These dates were later agreed to be May 12-15, 2010.**

**In an out-of the meeting short discussion, Grace mentioned that she deliberately avoided the discussion on source of funding for the ZAC/ZACP LDP Workshop. Sharifa offered to pursue the matter with UN but in collaboration with Ken Heise.**

### ANNEX 3: Participant List

	Title	First Name	Last Name	Gender M/F	Facility / Institution & Postal Address	e-mail address
<b>1</b>	Ms	Amina	M. Ameir	F	<b>M &amp; E Officer/ZAC</b>	██████████
<b>2</b>	Mr	Sihaba	Saadat	M	Advocacy Officer/ZAC	██████████
<b>3</b>	Mr	Ramadhan	I. Hassan	M	STI Control Officer/ ZACP	██████████
<b>4</b>	Ms	Husna	A. Abdulla	F	Head of Finance and Administration/ ZAC	██████████
<b>5</b>	Mr.	Hafidh	S. Ahmed	M	Data Manager/ ZACP	██████████
<b>6</b>	Ms	Maryam	A. Khamis	F	STI Coordinator/ ZACP	██████████
<b>7</b>	Ms	Ruzuna	AbdulRahim Mohammed	F	Administrator VCT&CTC/ ZACP	██████████
<b>8</b>	Ms	Fatma	M. Hamad	F	HBC Coordinator/ ZACP	██████████
<b>10</b>	Mr	Moh'd	Said Moh'd	M	M & E Officer/ZAC/Pemba	██████████
<b>11</b>	Ms	Skujuwa	Abdulla Hamad	F	Admin Secretary/ZAC/Pemba	██████████
<b>12</b>	Mr	Abeid	Juma Ali	M	Policy & Planning/ ZAC	██████████

<b>13</b>	Mr	Gharib	Said Gharib	M	M & E Data Manager/ ZAC	██████████
<b>14</b>	Mr	Ally	Mbarouk Omar	M	Advocacy Officer / ZAC/ Pemba	██████████
<b>15</b>	Mr	Ali	Haji Hamad	M	Program Officer/ ZAC	██████████
<b>16</b>	Mr	Hamid	S. Nassor	M	FBO Coordinator/ ZAC	
<b>17</b>	Ms	Nuru	R. Mbarouk	F	Head Advocacy	██████████
<b>18</b>	Ms.	Halima	A. Mohammed	F	Head of Planning & Policy/ ZAC	██████████
<b>19</b>	Ms	Asha	A. Abdulla	F	Executive Director ZAC	██████████
<b>20</b>	Dr.	Mohammed	J. U. Dahoma	M	Program Manager ZACP	██████████
<b>21</b>	Mr	Suleiman	S. Omar	M	IEC/BCC/ ZAC	██████████
<b>22</b>	Mr	Kimwaga	Muhiddin Ali	M	M & E Coordinator	██████████