



Summary Report:

Study of Stakeholder Perspectives 2002

Forward

The work of VicHealth requires collaboration with many diverse players. It involves action to influence individuals, sectors and organisations, as well as broader social systems. We are only one part of a complex web of government, NGO, academic and private groups working to improve health – especially for those who have the poorest health.

We must have constructive relationships with our stakeholders and the wider public health field to produce good results. To make sure that we understand how well we are doing in the eyes of our stakeholders, and to be able to identify our weaknesses, we'll be conducting a thorough study every three years.

This report is a summary of findings from our Study of Stakeholder Perspectives completed in 2002. The next comprehensive study is due in 2005.

This study showed us that VicHealth has a great deal of goodwill from our stakeholders – even from those who had their funding cease, or with whom we no longer actively engage.

The study confirmed that we'd made good progress on our efforts to work more collaboratively and respectfully with other organisations. Stakeholders reported valuing the support the organisation provided them to achieve success with their health promotion work. The study also confirmed support for our move away from investing in sponsorship of sport and the arts to a focus on wider community participation. VicHealth's role as an advocate for change is also valued.

However, our stakeholders have told us that we need to keep improving and sharpening our focus in the following ways: Providing greater clarity about how our new approach was going to deliver measurable results; providing better feedback on the progress of individual applications for funding; providing better feedback on the outcome of individual projects and the schemes as a whole; and leading by identifying and trialling innovative approaches to health promotion.

There was also some concern about whether the investigator-driven research, supported by our Fellowship and Scholarship program, was delivering the necessary impact on policy and practice.

Concurrent with this study was a review of our organisation's strategic directions and the internal operating structure. Many of you will already be aware of the changes that have occurred at VicHealth since August 2003, driven by the findings of these reviews.

A restructure along health action areas, rather than a settings approach will strengthen our ability to make a measurable difference in regard to specific health issues. Each unit is now accountable for developing a comprehensive program of activity to support a more tightly defined health goal. This includes a sharper focus on relevant research, more coherent reporting on evaluation and achievements, and clearer advocacy agendas.

We've also added a new unit called Health Promotion Innovations. This unit is accountable for ensuring we stay forward looking.

This is an exciting time for VicHealth; the whole team feels energised and clearer on their purpose and direction. I'm extremely grateful for the time and effort many stakeholders put into providing us with the information that helped shape our next three years. I'm confident that they will support good results for all of us in our efforts to improve the health of Victorians.



Rob Moodie
CEO

Introduction

The Victorian Health Promotion Foundation is an independent statutory body established by the *Tobacco Act (1987)*. VicHealth's mission is to build the capabilities of organisations, communities and individuals in ways that:

- change social, economic, cultural and physical environments to improve health for all Victorians; and
- strengthen the understanding and the skills of individuals in ways that support their efforts to achieve and maintain health.

The Study of Stakeholders' Perspectives is a triennial survey to obtain regular feedback on VicHealth's strategic achievements and performance in areas of relationship management, knowledge transfer, and operational matters, such as communication and the grants management process. This feedback assists VicHealth in its strategic and operational planning.

The first survey was conducted in 2000 by the Australian Institute of Primary Care at La Trobe University. Wallis Consulting conducted this latest study in 2002.

Methodology

The 2002 Study of Stakeholders' Perspectives uses a combination of qualitative (interview) and quantitative (survey) approaches in eliciting the stakeholder perspectives. The qualitative part of the Study focuses on the stakeholders' views of VicHealth's strategic directions and factors affecting VicHealth's organisational capacity to deliver on the outcomes. The survey part of the Study is about matters relating to operational performance.

The group of stakeholders who provided their feedback in the 2002 Study of Stakeholders' Perspectives included:

- key stakeholders – those agencies and/or individuals who have developed a close association with VicHealth over time and are in a position to comprehensively comment on its organisational development and the challenges it faces; and
- industry partners – key players in the public health system who are likely to be more familiar with health promotion or VicHealth's position in the health promotion field.

Forty four organisations represented the above two categories.

Other respondents included:

- current VicHealth grant holders;
- organisations whose funding ceased between the years 1999-2002; and
- organisations unsuccessful in securing VicHealth's funding during 1999-2002.

These stakeholder groups were represented by 308 organisations participating in the Study. The inclusion of organisations who had been rejected for funding and whose funding period had ceased is a key difference between the 2002 and 2000 studies. This does have the effect of representing a wider range of positive to negative responses in the 2002 Study.

VicHealth's staff, Board of Governance, the public, and stakeholders with legislative responsibilities were not included in the Study.

Main findings: successes and challenges

General

Interviews with the key stakeholders and industry partners indicated that VicHealth is viewed as:

- an authoritative leader and a recognised voice in the health promotion arena;
- independent from government and politically influential;
- innovative, progressive and flexible;
- credible with the industry and the general community;
- the peak body, broadly based, impartial, big picture, not tied to narrow interests; and
- a 'treasure trove' of knowledge, influence, evidence, advice, funds, methods and skills.

The Study also indicated that VicHealth can have the biggest impact on the goodwill it engenders amongst its stakeholders by placing the most emphasis on **support** (and especially the key attributes that drive it, for example making the information available for projects, informing stakeholders of the strategic directions, supporting organisations in achieving their goals etc), followed by the **relationship** VicHealth enjoys with stakeholders then **operational performance** and then **advocacy**.

Key stakeholders and industry partners view VicHealth as an agency that complements government through innovation:

"It [VicHealth] should focus on difficult areas and difficult ideas. For the amount that goes in the value is incredible. I think VicHealth pioneered a lot of stuff, I would like it to be even more entrepreneurial."

"If VicHealth is only funding, then it might as well become part of the government. Anyone can distribute money. Some of the research VicHealth has done, the government did not have the guts to do. That side of the business is extremely important..."

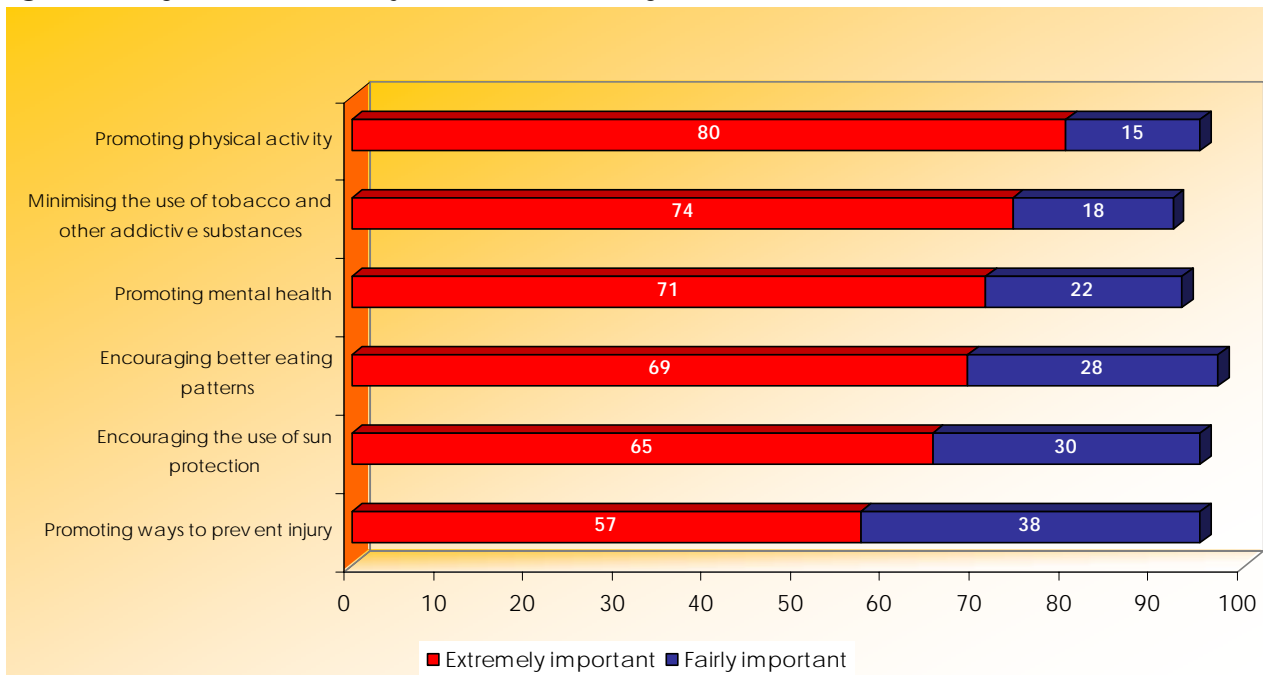
Strategic directions and key policies

On strategic matters, VicHealth enjoys widespread support even from organisations that do not receive funding. The change from being a provider of sponsorship funds to adopting a participatory approach to promoting better health outcomes in a broader sense is understood and applauded.

VicHealth's recent changes to the way it funds arts and sports are also understood in principle. Stakeholders display faith in VicHealth since they support the general move, but do not fully understand how the changes will work in practice. Stakeholders would like to see the desired outcomes better communicated and how the success will be measured made more explicit.

The stakeholders' responses indicated that VicHealth's primary objectives should lie in the areas of promoting physical activity, minimising the use of tobacco and other addictive substances, and promoting mental health.

Figure 1. Key VicHealth's objectives as seen by the stakeholders



Nine in ten grant holders in 2002 (compared to eight in ten grant holders in 2000) support that VicHealth is "moving in the right direction". Importantly, eight in ten of the past grant holders or whose funding applications were rejected still broadly support VicHealth's directions.

These findings corroborate the results of face-to-face interviews where the prevailing feeling was that VicHealth is moving in the right direction.

Organisations outside the health industry find that the broader health promotion agenda can increase the potential and legitimacy of their cause:

"They are [VicHealth] to be congratulated for taking up mental health, it is under-developed ... They should think more about social impacts, the science is under-developed and needs re-branding for legitimacy."

"Their [VicHealth] biggest strength is their willingness and openness to explore, and a holistic view of community and well-being, not just a health model – they are up there with the world leaders in recognising this change..."

Two thirds of the stakeholders (66%) strongly agree that VicHealth provides leadership in health promotion innovation and is a knowledgeable and progressive organisation (49%). This is reflected in the feedback by the key stakeholders and industry partners:

"They demonstrate the very latest thinking. I was surprised – I thought they would be advocates for the health profession, but they are strong advocates for innovative programs."

However, there is less agreement about the elements of this leadership, with the smaller proportion of stakeholders seeing VicHealth as developing new ideas in health promotion. As well, some stakeholders argue that VicHealth may, to some degree, have lost its "cutting edge":

"They have had a change in style; they were cutting edge, innovative – but chaotic with less follow through. Now they are more measured, but not leading – I guess like any organisation that has matured, they have gotten better at some things –like political influence, but lost energy and creativity. They have stuck to their course, but are less able to respond to other agendas."

It is also recognised by the majority of the stakeholders that VicHealth's model for improving the health of Victorians is a successful approach that is implemented through encouraging healthy environments and working in a range of settings.

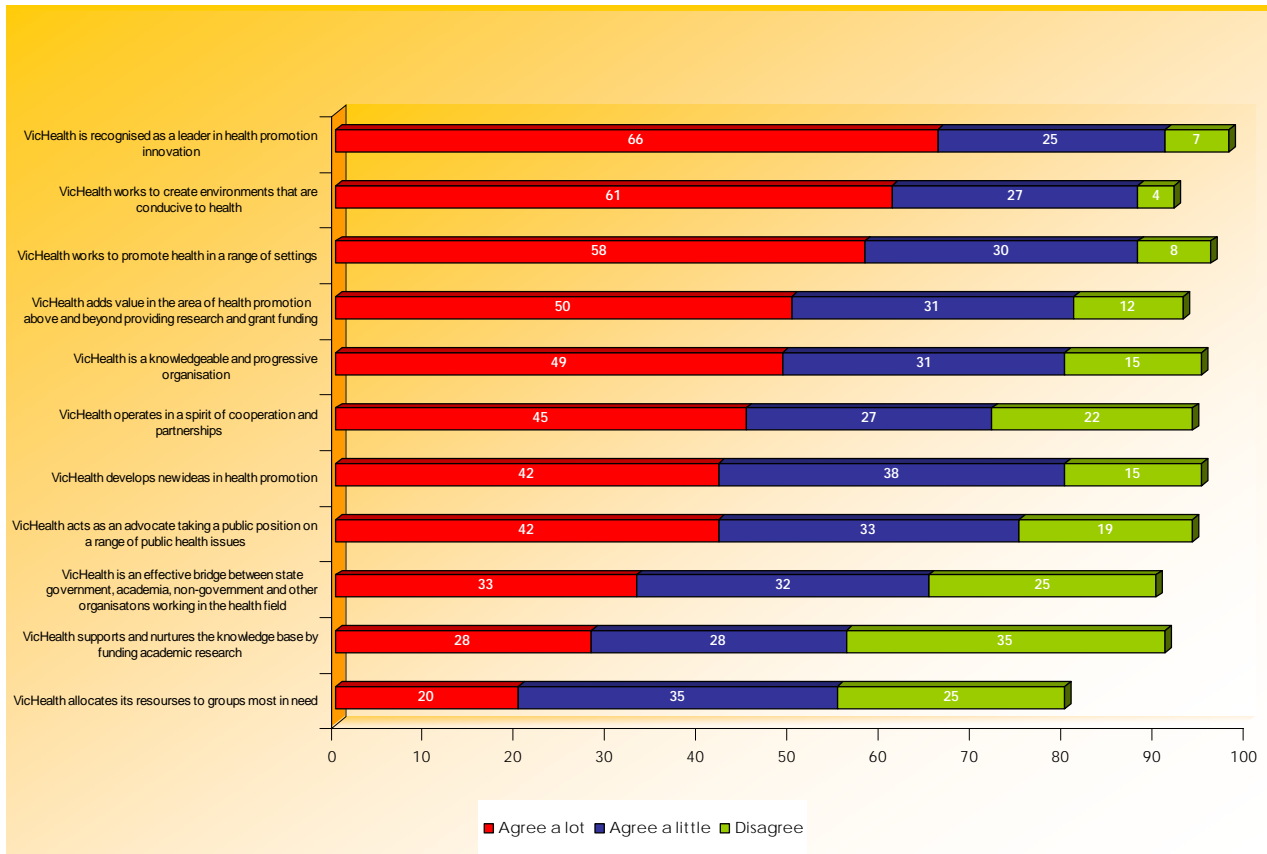
A high proportion of stakeholders (81%) agree to some degree that VicHealth adds value in the area of health promotion above and beyond providing research and grant funding.

There is a level of disagreement about VicHealth's approach to the funding of academic research. Concerns were expressed about whether VicHealth's funded research is making an impact on policy and practice.

"The senior fellowships are great. They increase capacity."

"They [VicHealth] have a very high priority on research, in a classical paradigm... They support research of an academic discipline ... A lot of claims are made for the research that they do, and this does not just apply to VicHealth, but often the connection with the real world is tenuous."

Figure 2. Value of VicHealth



Despite the concern about the relevance of funded research to policy and practice, stakeholders reflected that VicHealth is quite a strong advocate in the health field. About 50% of all the stakeholders strongly agree that VicHealth influences public policy through its position and is able to push public debates on health issues. Feedback provided by the key stakeholders and industry partners further confirms that VicHealth’s strength is in advocacy:

“Advocacy is critical; it can be as joint show of strength – or separate tasks. They [VicHealth] can be a different voice on a particular health issue. On politically sensitive issues they can step between [conflicting] interest groups.”

“VicHealth does punch beyond its weight.”

Managing external relations

Taken in total, the majority of organisations indicated that their involvement with VicHealth revolved around short or medium term funding for a project. Regardless of the length of a stakeholder’s association with VicHealth, this relationship is very valued:

“It’s based on respect for each other and the contribution each has to make. There’s a collegiate feeling – the people you deal with make you feel part of the family. This is more important than a formalised contractual relationship.”

Respondents were asked to what extent the relationship with VicHealth conferred benefits. Figure 3 shows that past grant holders and organisations that did not get funding still receive some substantial benefits from being involved with VicHealth.

Figure 3. Benefits of relationship with VicHealth as perceived by stakeholders

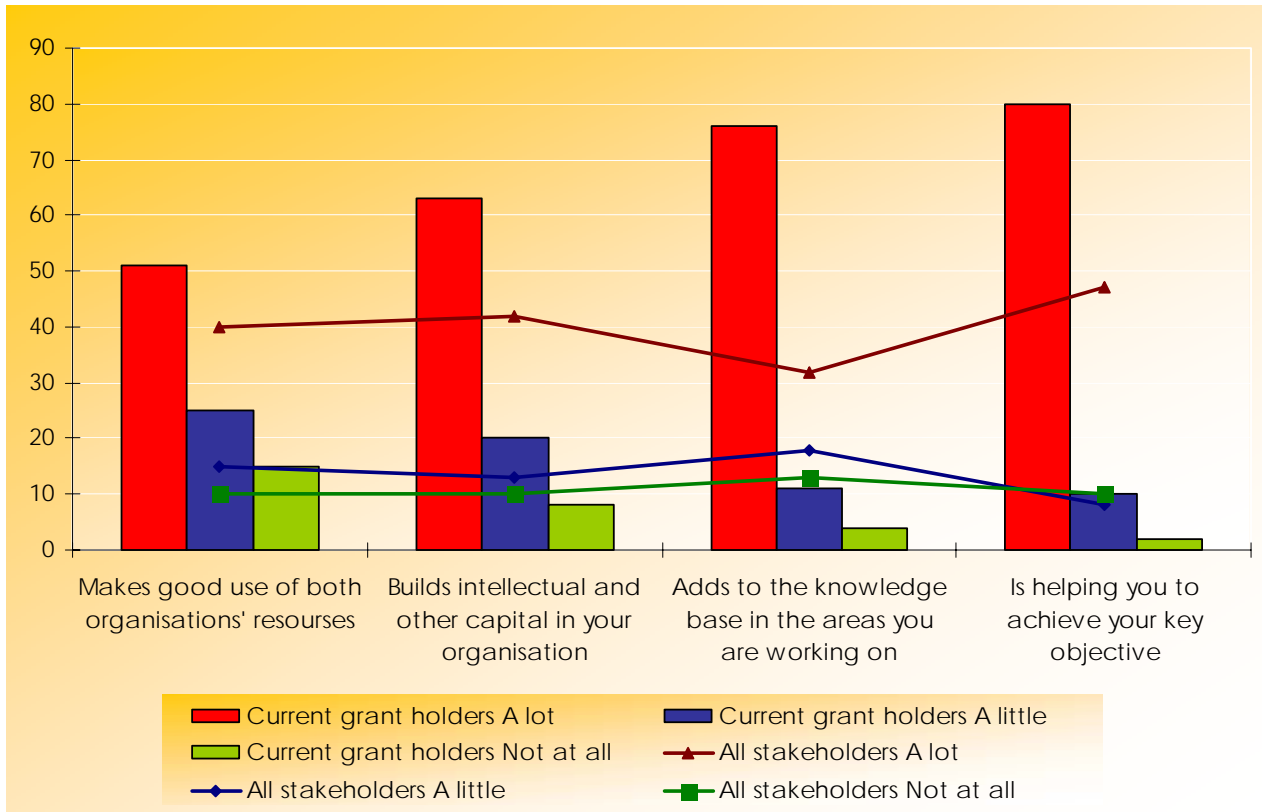
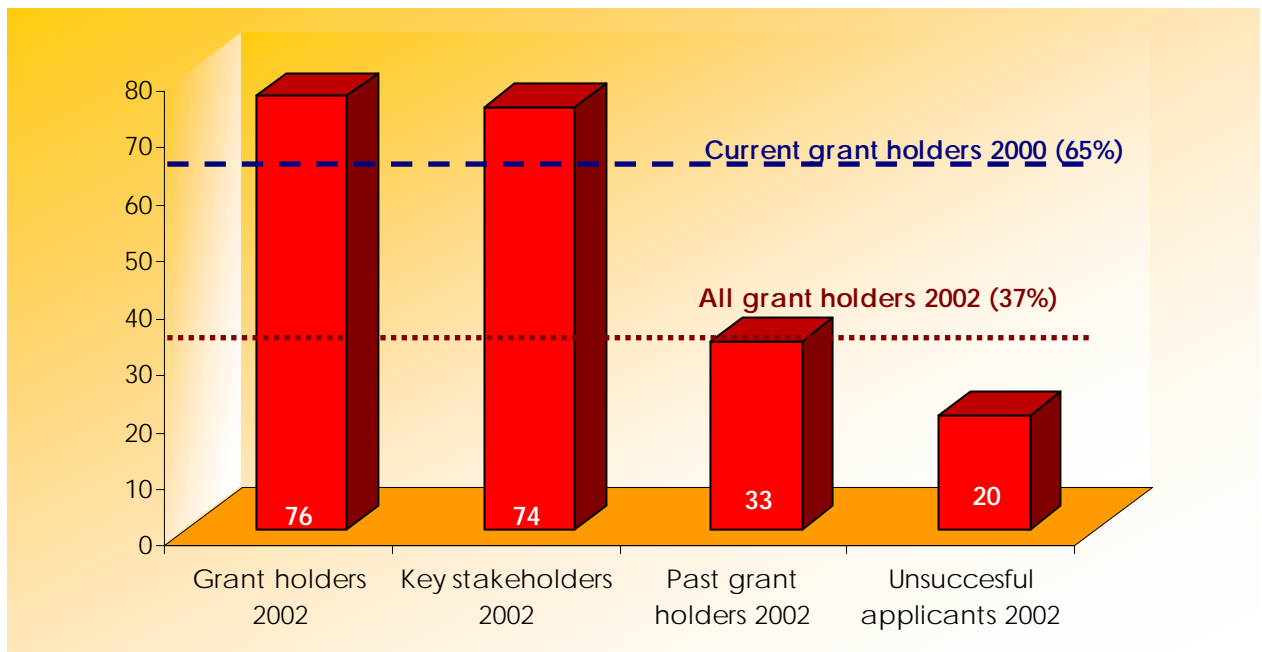


Figure 4 shows, grant holders are very complimentary in their rating of the quality of the relationship with VicHealth, and the rating by current grant holders has improved since last measured in 2000. Those unsuccessful in securing VicHealth's funding gave the only 'fair' and 'poor' ratings. They also rated the quality of the relationship lowest.

Figure 4. Quality of relationship with VicHealth



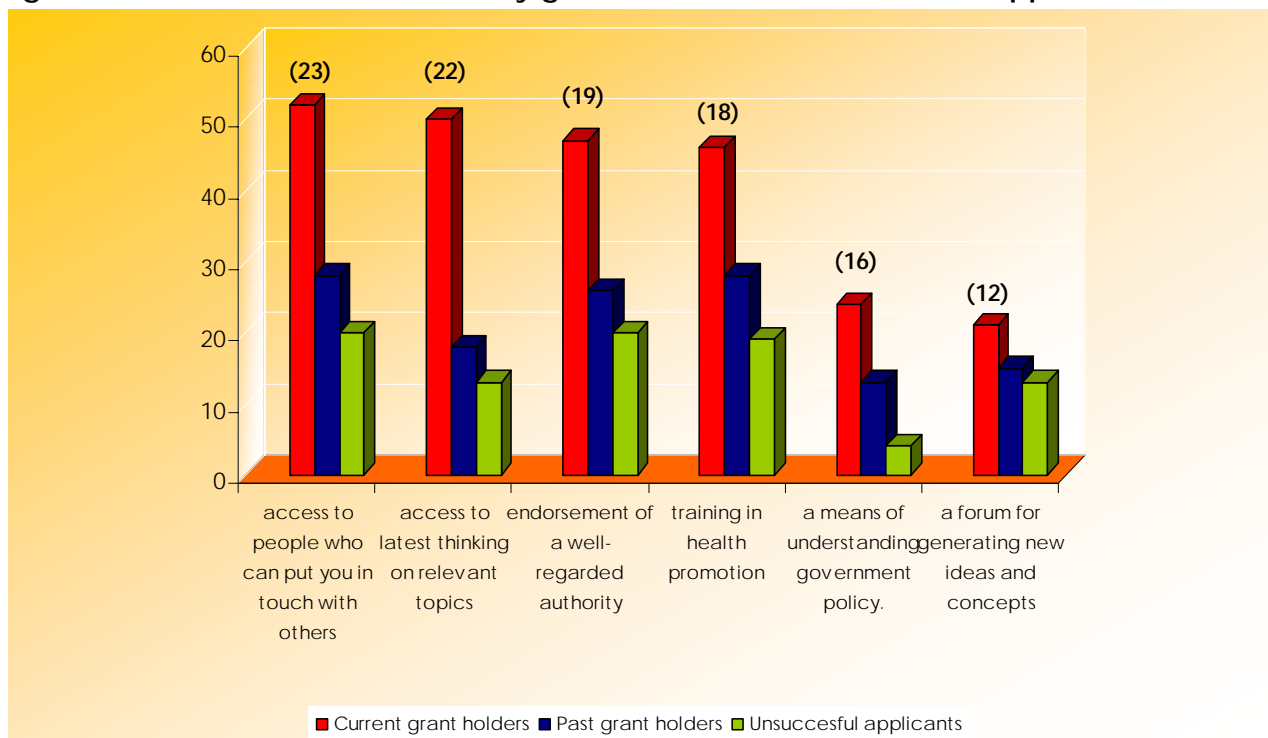
The Study compared the change in the quality of the relationship in 2002 to that which existed in the year of the prior to the Study. A significant proportion of the stakeholders (34%) indicated that the relationship improved in the past year (with 45% of current grant holders indicating this trend), 58% of the stakeholders considered that the relationship quality was about the same and 8% of the stakeholders indicated that the relationship worsened. The latter was most evident among the past grant holders. The main reasons for deterioration of the relations were reduced amount of contact and communication flow, and reduced or ceased funding.

Apart from the grant monies, the stakeholders value the following VicHealth's assets (figure 5):

- access to people who can put you in touch with others;
- access to latest thinking on relevant topics;
- endorsement of a well-regarded authority;
- a forum for generating new ideas and concepts;
- training in health promotion; and
- a means of understanding government policy.

Other services and support valued by the stakeholders include access to infrastructure (computers, meeting rooms) and library.

Figure 5. VicHealth's assets valued by grant holders and unsuccessful applicants



* The figures in brackets are an importance index derived by multiplying the percentage of organisations in receipt of that type of assistance by the proportion of those who rate its importance as 'fairly' or 'extremely' important.

Operational aspects

Managing Grants

Respondents were asked to rate VicHealth on the aspects of its operations. 'very good' and 'excellent' ratings are shown in figure 6. Not surprisingly, those whose application for funding had been rejected were much more likely to offer 'fair' and 'poor' ratings for all areas of operation. Notwithstanding this, when looking at the total result across all stakeholders, the excellent/very good ratings were more than double the proportion who gave fair/good ratings – for most operational areas.

There were a few exceptions, however, where the balance between excellent/very good and fair/poor was about even:

- Keeping you informed of the progress of your application (27% excellent/very good and 25% fair/poor);
- Taking an interest in the findings of your work (28% excellent/very good and 24% fair/poor); and
- Being informed about the outcomes of evaluations (22% excellent/very good and 21% fair/poor).

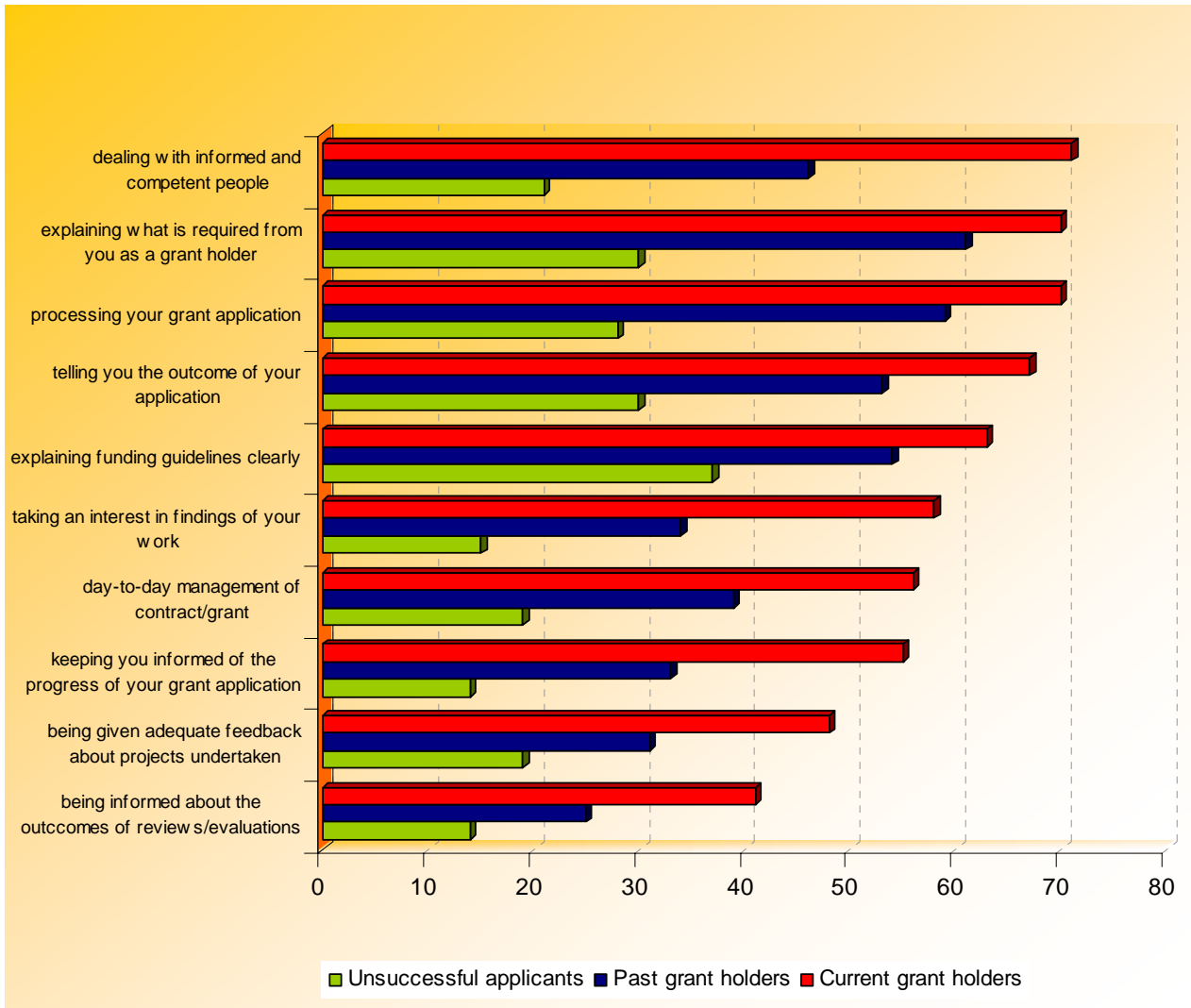
The overall conclusion is that in most operational matters VicHealth is performing exceedingly well. However, VicHealth falls down in the area of "closing" the loop with criticisms amongst current and past grant holders on giving feedback, showing interest in the work being done and promoting findings. This reflects qualitative comments from key stakeholders mentioned previously.

"It would be really good to get the results of the evaluation back. It would be good to know how the information is used. There are certain things we have to evaluate and we see benefit from doing this, but we don't hear back. It would be good to close the loop."

Comparison of the operational aspects between the 2000 and 2002 study indicates that in 2002, VicHealth's operations improved in the following areas compared to 2000:

- Explaining the funding guidelines clearly;
- Explaining what is required of you as a grant holder; and
- Being given adequate feedback about projects undertaken.

Figure 6. "Very good" and "excellent" rating of VicHealth's operations



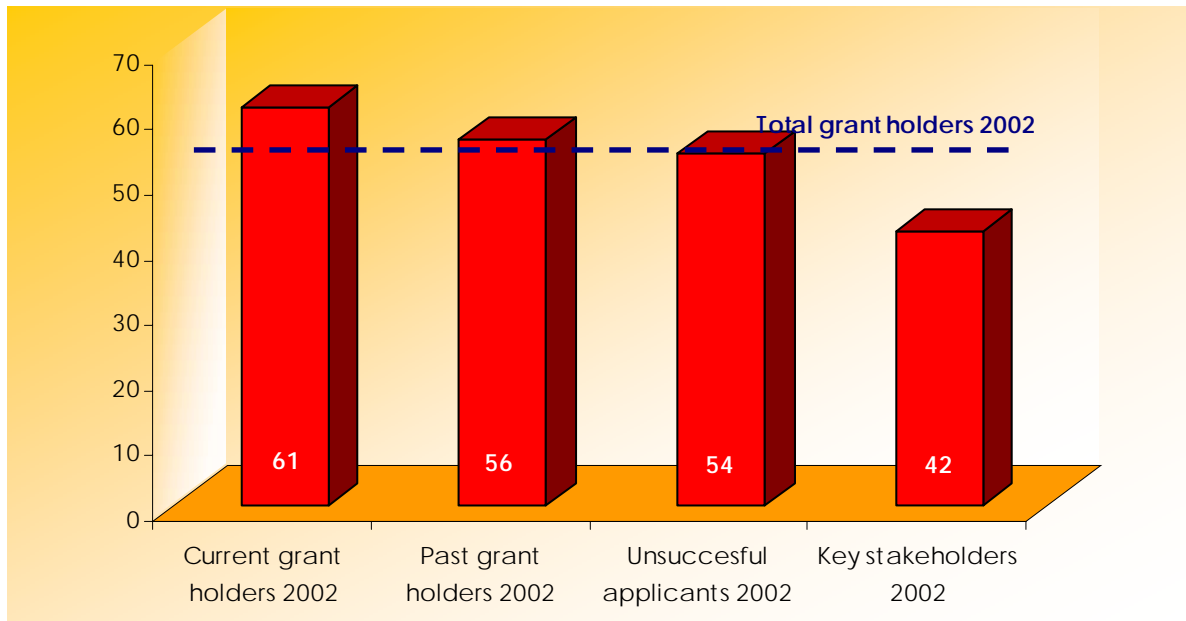
Although *expectations* and *ratings* levels do offer slightly different results, it is safe to say that VicHealth is performing better than it was two years ago in all its day to day operational dealings with stakeholders and especially amongst those in receipt of funding.

Information dissemination

One of the key roles VicHealth plays is in dissemination of information. To this end it runs seminars and public events, publishes a newsletter and maintains a website as well as publishing incidental reports.

In overall terms, VicHealth is rated fairly well as a collector and disseminator of the information, although least well by key stakeholders as the chart 7 shows.

Figure 7. Stakeholders that rated VicHealth's as a collector and disseminator of information as "excellent" or "very good"

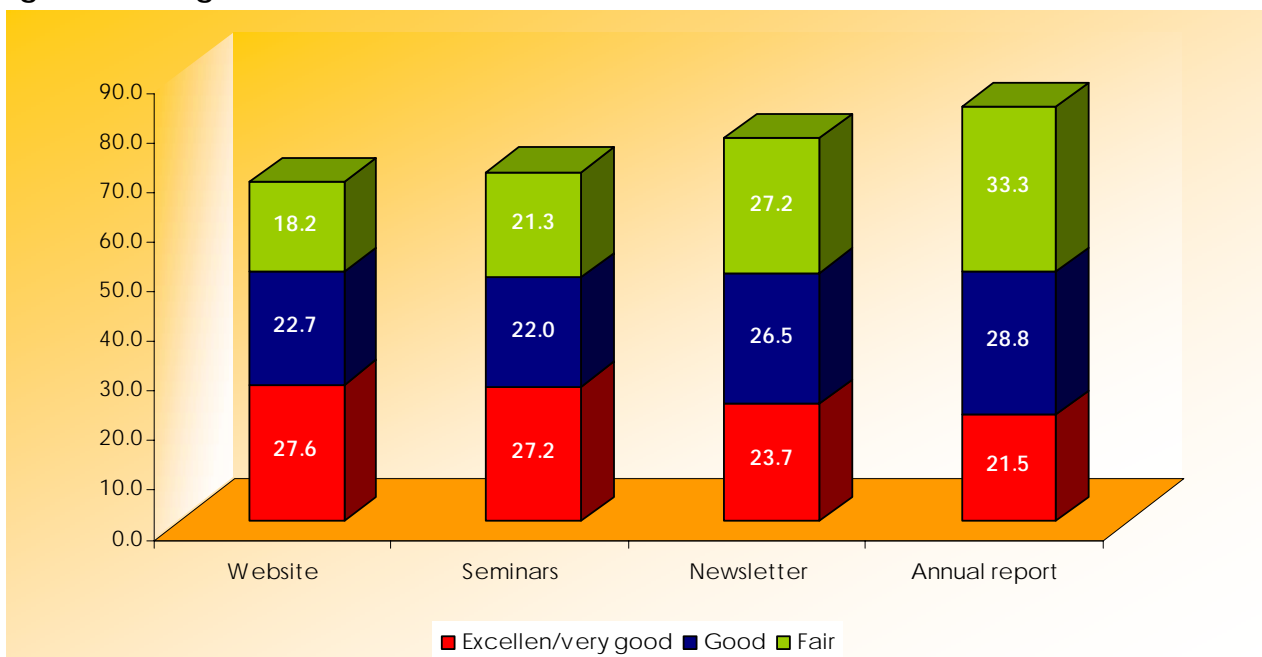


This rating probably reflects the sentiment voiced in the qualitative research that there is a lot of information gathered but it tends to fall into a black hole.

This view is fairly consistent across all respondent types **and** it is the only one where key stakeholders rated VicHealth lower than other respondent groups.

VicHealth's information sources, such as publications, seminars and website are widely used and information contained within them is regarded as being of high quality, reliable and credible by a high proportion of the stakeholders.

Figure 8. Rating of VicHealth's information sources



*Adjusted by the number of responses for each information source

The content of the products was also well regarded especially in terms of reliability and credibility. However, 12% of all respondents rated relevance as 'fair' offering some scope for improvement. Timeliness is another potential area for improvement, although the growing use of the website should render this less of a problem in future.

Figure 9. Credibility, reliability, relevance and timeliness of the VicHealth's information

