

Case Study Role Play

Character: Pam Albright, Director of Women's and Maternal Health Section

What we know about Pam Albright:

- Long-time advocate for addressing women's health across the lifespan
- Wants to make the most of this window of opportunity to address perinatal depression
- Would like the legislation to include specific language encouraging the use of evidence-based screening tools during and after pregnancy by key health care professionals
- Thinks some of her colleagues want public health to take the lead in every aspect of the legislation, but believes that it is in everyone's best interest to forge more collaboration between public health and mental health
- Has two key stakeholders above her in the organizational hierarchy:
 - The head of the Division of Family Health (Pam Albright's boss), Dr. Steven Alvarez, is trained as a pediatrician. He is supportive of addressing perinatal depression, although his primary focus has been on child health.
 - The Commissioner of Public Health, Dr. Anne Siders, is a primary care doctor who has been with the department for 20 years. She is supportive of maternal and child health issues but is not an expert, and has been occupied in recent years with disaster planning (the state hosts a large nuclear facility) and with revamping the state laboratories.

What else can you infer about Pam Albright's motivations?

Who might be Pam Albright's allies?

What sources of conflict can Pam Albright anticipate?

How do you think Pam Albright approaches conflict (see "5 approaches" handout)?

Case Study Role Play
Character: Eric Benjamin, Director of Child Health

What we know about Eric Benjamin:

- Trained as a pediatrician
- Close colleague of Pam Albright's
- Has seen the negative effects of maternal depression on infants and is very supportive of any extra funding going to perinatal depression
- Would like to see a stronger role for public health in assuring that mothers are treated for perinatal depression, beyond simply referring them to mental health services
- Concerned about any further mandates or recommendations on pediatricians
- Understands that some pediatricians would welcome a greater role in addressing parents' mental health needs and even prescribing medications, but that others see these activities as significantly beyond their role
- Primary concern is funding for public health

What else can you infer about Eric Benjamin's motivations?

Who might be Eric Benjamin's allies?

What sources of conflict can Eric Benjamin anticipate?

How do you think Eric Benjamin approaches conflict (see "5 approaches" handout)?

Case Study Role Play

Character: Judith Stevens, Deputy Director of Medicaid/SCHIP

What we know about Judith Stevens:

- Has been in her position for four years
- Previously held Pam Albright's job, Director of the Women's and Maternal Health Section
- Continues to give Pam Albright regular, unsolicited advice about how to run the women's health section
- Regarded as extremely bright, but a far better manager of finances than people
- As Director of the Women's and Maternal Health Section, had rocky relations with local health departments

What else can you infer about Judith Stevens's motivations?

Who might be Judith Stevens's allies?

What sources of conflict can Judith Stevens anticipate?

How do you think Judith Stevens approaches conflict (see "5 approaches" handout)?

Case Study Role Play

Character: Jim Kennan, Health Director of Capital City Health Department

What we know about Jim Kennan:

- His LHD has a reputation as an incubator for promising practices and new approaches, including a well-regarded lay health visitor program
- Known as an extremely bright but impatient man, whose self-confidence and brash style can rub people the wrong way
- Would like to see a larger role for lay health visitors in screening for prenatal depression
- Would like more funding for local health departments to ensure that mothers receive the mental health services they need
- Has been frustrated in his workings with the local mental health agency
- Recognizes that the local mental health agency is under-funded and capable of handling only the most severe cases, but feels that the agency has not been responsive to his efforts to work with them to develop more effective referral mechanisms, including the use of lay health visitors
- Wants Pam Albright to be a tough negotiator with mental health, if not downright adversarial

What else can you infer about Jim Kennan's motivations?

Who might be Jim Kennan's allies?

What sources of conflict can Jim Kennan anticipate?

How do you think Jim Kennan approaches conflict (see "5 approaches" handout)?

Case Study Role Play

Character: Dawn Minton, Director of Starmount Health Department

What we know about Dawn Minton:

- Considered a leader in rural public health
- Has taken the Shannon Green tragedy very hard and wonders if her hands-off management style played some role; was aware of the lack of comprehensive mental health services and the “disconnect” between public health and mental health and wonders if she has done enough to bridge the gap
- Feels conflicted about the role of the local health department in assuring that women receive mental health services
- Has close colleagues at the local mental health agency that she is reluctant to criticize
- Frustrated with Jim Kennan’s vocal criticism of the whole system and takes it personally

What else can you infer about Dawn Minton’s motivations?

Who might be Dawn Minton’s allies?

What sources of conflict can Dawn Minton anticipate?

How do you think Dawn Minton approaches conflict (see “5 approaches” handout)?

Based on the information you have outlined about your character, decide for each of the following areas what your character's negotiating points are—e.g. which agency your character wants to take the lead in management/funding, any possible points of compromise, any points that are non-negotiable.

Rank the six areas in order of priority for your character.

_____ **Referral and Treatment** (developing more effective referral mechanisms, points of entry, and treatment options)

_____ **Resources and Training** (assisting a variety of practitioners in diagnosing and treating perinatal depression, use of evidence-based screening tools)

_____ **Standards and Guidelines** (guidelines and protocols for referrals and follow up for practitioners and lay health workers when perinatal depression is suspected)

_____ **Confidentiality** (balancing privacy and reporting issues with ensuring the health and safety of mothers and children)

_____ **Financing** (coverage from state Medicaid and third party insurers for services performed by all providers for screening and intervention)

_____ **Outreach** (developing a public awareness campaign for perinatal depression)

Five Approaches to Conflict

Competing:

- *Assertive and uncooperative*
- Pursuing your own concerns at another's expense
- Using power to win your position (e.g., rank, economic sanctions)
- Could include "standing up for your rights" or defending a position you believe is correct

Accommodating:

- *Unassertive and cooperative*
- The opposite of competing
- Neglecting your own concerns in order to satisfy the concerns of another
- Could take the form of selfless generosity, obeying an order when you would prefer not to, or yielding to another's point of view

Avoiding:

- *Unassertive and uncooperative*
- Pursuing neither your own concerns or those of your opponent
- Not addressing the conflict
- Could take the form of sidestepping an issue, postponing the resolution of a conflict, or withdrawing from a threatening situation

Collaboration:

- *Assertive and cooperative*
- The opposite of avoiding
- Attempting to jointly work toward a solution that fully satisfies the concerns of all involved
- "Digging into" an issue to identify and address the underlying concerns of all parties involved

Compromising:

- *Intermediate in both assertiveness and cooperativeness; the middle ground between competing and accommodating*
- Finding a mutually acceptable solution that partially satisfies both parties
- Addresses an issue more directly than avoiding, but does not explore it in as much depth as collaborating
- Could take the form of splitting the difference, exchanging concessions or seeking a quick middle-ground position