Focusing on a professional continuing education program in group discussion leadership skills for Louisiana public health workers, this study assessed the overall value of training to participants, and sought relationships between certain background characteristics and the value ascribed to the training experience. The Kropp-Verner Evaluation Scale and a personal data sheet were administered to 118 local and 57 state personnel who had completed training. Overall ratings of training were generally quite high. Three variables—sex, profession or occupation, and location of training sessions—were associated with perceived value of training. The variables of age, formal education, affiliation (state or local), years of experience in public health, and previous knowledge methods and techniques, proved insignificant. A relative lack of significant differences indicated the program's wide appeal among public health personnel. (LY)
AN EVALUATION OF

LEADERSHIP TRAINING IN LOUISIANA

By

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CHAPTER I
INTRODUCTION

Background

As a result of a grant from the Public Health Service, three states were selected for participation in statewide demonstration projects relative to continuing education for public health workers. These were Alabama, North Carolina and Louisiana. Alabama commenced its operation in September of 1967 and North Carolina in April of 1968. Louisiana officially began in October of 1968.

The Continuing Education Program is comprised of three components--television programs, study manuals and group discussion sessions. Study manuals on a given topic are sent to the participants, and a television program is then broadcast relative to the same topic. This is followed by a group discussion session to ascertain the applicability of the material in the manuals and on television to the problems of local health units. The end result, hopefully, will be an improvement in the delivery of health services to public health clientele.

Purpose of the Study

Since one of the major components of the Continuing Education Program is group discussion, a decision was made to train discussion leaders. This was done in Louisiana in October of 1968. The purpose of this study was to ascertain the value the public health participants felt that this had for them. More specifically, the purpose was to determine the overall value of the training to the participants and to determine if there were any differences in the value ascribed to the training and certain characteristics of the participants.
Methodology

Source of Data

At the time of this study, Louisiana was divided into four regions relative to public health--northeast, northwest, southeast, southwest. In each region, there was a nurse, a sanitarian and a secretary, each known as a regional consultant. These twelve regional consultants were each asked to consult with the local parish health directors in their respective region and to recommend at least ten persons in their own discipline that they felt were leaders or potential leaders. At the State Department of Health, the Division Directors were requested to recommend the potential participants.

Individual letters were then sent to each potential participant by Mrs. Mary E. Causey, State Public Health Educator, inviting them to attend a certain training session. It was necessary to control the number of participants attending any one session due to the factor of role-playing. Therefore, a decision was made to conduct five of these sessions throughout the State of Louisiana (see Appendix A). A total of 155 persons completed the leadership training. Thirty-seven of these were State Department of Health employees and 118 were local health employees.

Collection of Data

Two instruments were used to collect the data in this study. The first was an evaluation scale developed by Russell Kropp and Coolie Verner.

The second was a personal data sheet.

---

The evaluation scale was pretested on more than 600 public health employees in Alabama and North Carolina.

It was decided that the evaluation forms should be administered by someone other than the faculty members directly involved in the training. It was felt that this would provide the participants with a better opportunity to reveal their frank opinions. Mrs. Mary E. Causey, State Public Health Educator, Louisiana State Department of Health, administered the evaluation forms. The participants were told to read through all of the Kropp-Verner Scale items and then to check only those items that described most accurately their reactions to the total training sessions. They were then requested to fill out the personal data form. No names were collected on any of these forms.

The data obtained were coded, punched on data processing cards, and analyzed using the facilities of the Memphis State University Computer Center.

Description of Dependent Variable

The dependent variable in this study was the degree of value of the training sessions as rated by the attitude of the participants. This was determined through the use of a scale developed by Kropp and Verner. The scale consisted of twenty items in rank order of value, with item number one being the best thing that could be checked about the training; item number two, the second best; item number three, the third best; and so on, with item number twenty being the least favorable response.

A median score value, using appropriate scale construction techniques and statistical analysis, was determined for each item by Kropp and Verner. This ranged from 1.13 for item number one to 10.89 for item number twenty. The closer a participant's score approximated 1.13, the higher the rating for

1Ibid.
the training session. When this scale was administered to the participants in Louisiana, the scores ranged from 1.58 to 6.76. The mean score for all 157 participants was 3.45, which placed the value of the leadership training at item number five on the twenty-item scale.1 This indicated a very favorable reaction towards the overall value of the leadership training.

Due to the high ratings received, a decision was made to divide the Kropp-Verner scores into two groups (high and very high), with the resulting categories being as equally divided as possible. It was felt that this would provide a relative measure of the degree of expressed value of the leadership training suitable for the purposes of comparative analysis in this study. This resulted in the following groupings:

1. High: Those participants scoring 3.46 or more. This comprised 77 participants.
2. Very High: Those participants scoring less than 3.46. This comprised 78 participants.

Statistical Technique

Statistical association between variables was examined by means of the chi-square test of significance. It was decided to accept the .05 level as the criterion level that any test of significance must meet before the null hypothesis would be rejected. That is, in any chi-square test, the difference between the observed and expected frequencies must not have a probability of occurring purely by chance more than five times in one hundred or the

1The mean score by location of training session was as follows:
New Orleans: 3.51
Lafayette: 3.26
Alexandria: 3.39
Monroe: 3.69
Shreveport: 3.51
association would be considered insignificant.

**Hypothesis**

The null hypothesis was developed that there is no association between the value of the leadership training and the following variables:

1. Sex of the Participants
2. Age of the Participants
3. Years of Experience in Public Health of the Participants
4. Formal Education of the Participants
5. Previous Knowledge of Leadership Training by the Participants
6. Professional Discipline of the Participants
7. Whether Participants Were Local or State Employees
8. Location of Training Sessions in Order of Occurrence
CHAPTER II

PRESENTATION OF DATA

The purpose of this chapter was to test the null hypothesis that there is no association between the value of the leadership training as stated by the participants and the following independent variables: (1) sex; (2) age; (3) years of experience in public health; (4) formal education; (5) previous knowledge of leadership methods and techniques; (6) professional discipline; (7) type of personnel; and (8) location of training sessions in order of occurrence. The format of this chapter will reflect these categories.

Sex

Table 1 indicates that there was a significant association between the value the participants ascribed to the leadership training and their sex. Almost 58 per cent of the females placed its value in the very high category as compared with only 35.8 per cent of the males.

Age

According to Table 2, no significant association was found between the age of the participants and the value they placed on the leadership training. There was a tendency for those participants under 45 years of age not to rate it quite as high as those 45 years of age and older; however, as stated previously, the results were not significant.

1For a summary of the null hypotheses tested, including chi-square values, degrees of freedom, probability levels, and whether rejected, see Appendix D.
<table>
<thead>
<tr>
<th></th>
<th>High</th>
<th>Very High</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Number</td>
<td>Per Cent</td>
<td>Number</td>
</tr>
<tr>
<td>Male</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>34</td>
<td>64.2</td>
<td>19</td>
</tr>
<tr>
<td>Female</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>43</td>
<td>42.2</td>
<td>59</td>
</tr>
</tbody>
</table>

\(^{a}\text{Significant}\)
<table>
<thead>
<tr>
<th>Age</th>
<th>High</th>
<th>Very High</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Under 35</td>
<td>18 (51.4)</td>
<td>17 (48.6)</td>
<td>35 (100.0)</td>
</tr>
<tr>
<td>35-44</td>
<td>25 (54.4)</td>
<td>21 (45.6)</td>
<td>46 (100.0)</td>
</tr>
<tr>
<td>45 and over</td>
<td>31 (45.6)</td>
<td>37 (54.4)</td>
<td>68 (100.0)</td>
</tr>
</tbody>
</table>

Note: Not significant
Years of Experience in Public Health

No significant association was found between the value the participants ascribed to the leadership training and the number of years of experience they possessed in public health (Table 3). There was a tendency for the participants to rate it higher as the number of years of experience increased. Approximately 48 per cent of those participants with less than 20 years of experience gave it a very high rating, while this increased to 65.5 per cent for those with twenty (20) or more years of experience.

Formal Education

Table 4 shows that there was no significant association between the value the participants ascribed to the leadership training and their educational level. Those without a college degree tended to rate the training higher than did those with a college degree (54.9 per cent in the very high category as compared with 45.2 per cent respectively); however, as stated previously, the results were not significant.

Previous Knowledge of Leadership Methods and Techniques

According to Table 5, no significant association was found between the value the participants ascribed to the leadership training and the amount of previous knowledge they possessed on the subject. Those that had taken a short course or academic course tended to rate it slightly higher than did those with little or no previous knowledge.

Professional Discipline

A significant association was found between the value the participants ascribed to the leadership training and their professional discipline of work.
TABLE 3.-Degree of value of leadership training and years of experience in public health

<table>
<thead>
<tr>
<th>Years of Experience</th>
<th>High Number</th>
<th>High Per Cent</th>
<th>Very High Number</th>
<th>Very High Per Cent</th>
<th>Total Number</th>
<th>Total Per Cent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Less than 10</td>
<td>25</td>
<td>52.1</td>
<td>23</td>
<td>47.9</td>
<td>48</td>
<td>100.0</td>
</tr>
<tr>
<td>10-19</td>
<td>30</td>
<td>50.9</td>
<td>29</td>
<td>49.1</td>
<td>59</td>
<td>100.0</td>
</tr>
<tr>
<td>20 or more</td>
<td>10</td>
<td>34.5</td>
<td>19</td>
<td>65.5</td>
<td>29</td>
<td>100.0</td>
</tr>
</tbody>
</table>

aNot significant
TABLE 4.—Degree of value of leadership training and formal education of participants

<table>
<thead>
<tr>
<th>Educational Level&lt;sup&gt;a&lt;/sup&gt;</th>
<th>High</th>
<th></th>
<th></th>
<th>Very High</th>
<th></th>
<th></th>
<th>Total</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Number</td>
<td>Per Cent</td>
<td>Number</td>
<td>Per Cent</td>
<td>Number</td>
<td>Per Cent</td>
<td></td>
<td></td>
</tr>
<tr>
<td>College degree</td>
<td>45</td>
<td>54.8</td>
<td>33</td>
<td>45.2</td>
<td>73</td>
<td>100.0</td>
<td></td>
<td></td>
</tr>
<tr>
<td>No college degree</td>
<td>37</td>
<td>45.1</td>
<td>45</td>
<td>54.9</td>
<td>82</td>
<td>100.0</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<sup>a</sup>Not significant
TABLE 5.—Degree of value of leadership training and previous knowledge of leadership methods and techniques by the participants

<table>
<thead>
<tr>
<th>Previous Knowledge</th>
<th>High</th>
<th>Very High</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Academic course</td>
<td>12</td>
<td>14</td>
<td>25</td>
</tr>
<tr>
<td></td>
<td>46.2</td>
<td>53.8</td>
<td>100.0</td>
</tr>
<tr>
<td>Short course</td>
<td>20</td>
<td>23</td>
<td>43</td>
</tr>
<tr>
<td></td>
<td>46.5</td>
<td>53.5</td>
<td>100.0</td>
</tr>
<tr>
<td>Little or no knowledge</td>
<td>41</td>
<td>37</td>
<td>78</td>
</tr>
</tbody>
</table>
|                     | 52.6 | 47.4      | 100.0

\*Not significant
Approximately 61 per cent of the "other" category gave it a very high rating, while this receded to 60.0 per cent for the nurses, 55.8 per cent for the secretaries, and 30.4 per cent for the sanitarians.

**Type of Personnel**

Table 7 indicates that there was no significant association between the value the participants ascribed to the leadership training and whether they were employed at the state or local level. Local health personnel placed 53.4 per cent of their responses in the very high category as compared with 40.5 per cent of the state department personnel.

**Location of Training Sessions in Order of Occurrence**

A significant association was found between the value the participants ascribed to the leadership training sessions and the location of the training sessions. There was no pattern as to the training being better or worse from beginning to end. The Lafayette session received the most responses in the very high category (73.3 per cent), followed by Alexandria (57.1 per cent), Monroe (53.8 per cent), New Orleans (48.8 per cent), and Shreveport (27.0 per cent). No explanation is offered for the divergence in ratings other than the one at Shreveport. The writer was not present at this session; however, it was reported that the presence of a domineering authority figure caused some problems throughout the morning session.

\[1 \text{Other was a term used to designate a conglomeration of several other disciplines that did not have enough participants separately to be analyzed.}\]
<table>
<thead>
<tr>
<th>Discipline</th>
<th>High</th>
<th>Very High</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sanitation</td>
<td>32</td>
<td>14</td>
<td>46</td>
</tr>
<tr>
<td>Nursing</td>
<td>20</td>
<td>30</td>
<td>50</td>
</tr>
<tr>
<td>Secretarial</td>
<td>19</td>
<td>24</td>
<td>43</td>
</tr>
<tr>
<td>Other</td>
<td>5</td>
<td>8</td>
<td>13</td>
</tr>
</tbody>
</table>

\*Significant
<table>
<thead>
<tr>
<th>Type</th>
<th>High</th>
<th></th>
<th>Very High</th>
<th></th>
<th>Total</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Number</td>
<td>Per cent</td>
<td>Number</td>
<td>Per cent</td>
<td>Number</td>
<td>Per cent</td>
</tr>
<tr>
<td>Local health personnel</td>
<td>55</td>
<td>46.6</td>
<td>63</td>
<td>53.4</td>
<td>118</td>
<td>100.0</td>
</tr>
<tr>
<td>State department personnel</td>
<td>22</td>
<td>59.5</td>
<td>15</td>
<td>40.5</td>
<td>37</td>
<td>100.0</td>
</tr>
</tbody>
</table>

\(^a\)Not significant
TABLE 8.—Degree of value of leadership training and location of the training sessions in order of occurrence

<table>
<thead>
<tr>
<th>Location</th>
<th>High</th>
<th></th>
<th>Very High</th>
<th></th>
<th>Total</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Number</td>
<td>Per Cent</td>
<td>Number</td>
<td>Per Cent</td>
<td>Number</td>
<td>Per Cent</td>
</tr>
<tr>
<td>New Orleans</td>
<td>21</td>
<td>51.2</td>
<td>20</td>
<td>48.8</td>
<td>41</td>
<td>100.0</td>
</tr>
<tr>
<td>Lafayette</td>
<td>8</td>
<td>26.7</td>
<td>22</td>
<td>73.3</td>
<td>30</td>
<td>100.0</td>
</tr>
<tr>
<td>Alexandria</td>
<td>9</td>
<td>42.9</td>
<td>12</td>
<td>57.1</td>
<td>21</td>
<td>100.0</td>
</tr>
<tr>
<td>Monroe</td>
<td>12</td>
<td>46.2</td>
<td>14</td>
<td>53.8</td>
<td>26</td>
<td>100.0</td>
</tr>
<tr>
<td>Shreveport</td>
<td>27</td>
<td>73.0</td>
<td>10</td>
<td>27.0</td>
<td>37</td>
<td>100.0</td>
</tr>
</tbody>
</table>

aSignificant
CHAPTER III

SUMMARY AND CONCLUSIONS

Background

The purpose of this study was to evaluate the leadership training sessions provided for public health workers in Louisiana. This training was sponsored by the Southern Branch of The American Public Health Association in cooperation with the Louisiana State Department of Health.

Methodology

The data used in this study were obtained from public health workers who participated in the five leadership training sessions in Louisiana in October, 1968. The participants were selected by the regional consultants in cooperation with local health directors and by the State Board of Health Division Directors.

The total population of those participants completing the training was used in this study. This consisted of 155 persons—118 from local health parishes and 37 from the State Department of Health. Data were obtained through the use of an evaluation scale and a personal data sheet. Data were analyzed using the facilities of the Memphis State University Computer Center.

The null hypothesis was developed that there was no significant association between the value the participants ascribed to the leadership training and the following independent variables:

1. Sex of the Participants
2. Age of the Participants
3. Years of Experience of the Participants
4. Formal Education of the Participants
5. Previous Knowledge of Leadership Methods and Techniques
6. Professional Discipline
7. Type of Personnel
8. Location of Training Sessions in Order of Occurrence

**Findings**

**General**

Out of a possible range of 1.15 to 10.89, the mean score for all 155 participants was 3.45 (the closer the score approximated 1.13, the better the rating). This placed the value of the training at item number five on a twenty item scale arranged in rank order of value, with item number one the best and item number twenty the least best.

**Variables Tested**

Of the eight variables tested, only three were found to be associated with the degree of value ascribed to the leadership training sessions by the participants. These were: (1) sex; (2) professional discipline; and (3) location of the training sessions in order of occurrence. Therefore, based on the data presented in this study, the null hypothesis of no association between these variables and the value of the leadership training was rejected.

The five variables in which there was no significant association were: (1) age; (2) years of experience in public health; (3) formal education; (4) previous knowledge of leadership methods and techniques; and (5) type of personnel.

In general, those participants who rated the training the highest were females and employed as nurses.
Conclusions

Based on the data presented in this study, the leadership training was very successful. The mean score was so favorable that the data were analyzed in groups of high and very high rather than low and high. Also, the fact that there were very few significant differences found in the analysis indicated its wide appeal to all public health workers.
APPENDICES
LOCATION OF TRAINING SESSIONS IN ORDER OF OCCURRENCE, DATES HELD, NUMBER OF PERSONS PARTICIPATING, AND TRAINING INSTRUCTORS

1. State Office Building
   New Orleans, Louisiana
   October 2, 1960
   41 Persons Participated
   Conducted by Edward Collins and Donnie Dutton

2. Lafayette Parish Health Unit
   Lafayette, Louisiana
   October 3, 1968
   30 Persons Participated
   Conducted by Edward Collins, Donnie Dutton, and Don Seaman

3. Rapides Parish Health Unit
   Alexandria, Louisiana
   October 4, 1968
   21 Persons Participated
   Conducted by Edward Collins

4. Ouachita Parish Health Unit
   Monroe, Louisiana
   October 10, 1968
   37 Persons Participated
   Conducted by H.P. Hopkins and Forest Ludden

5. Caddo-Shreveport Parish Health Unit
   Shreveport, Louisiana
   October 11, 1968
   26 Persons Participated
   Conducted by H.P. Hopkins and Forest Ludden
WITTEN COMMENTS RECEIVED FROM THE PARTICIPANTS IN THE FIVE LEADERSHIP TRAINING SESSIONS FOR PUBLIC HEALTH WORKERS IN LOUISIANA*

New Orleans

1. I think the presentation and material were excellent.
2. It had to be interesting simply because time passed so fast.
3. The workshop was excellent, but needed to be more than one day.
4. The information provided is valuable, very rewarding and well presented.

Lafayette

1. A worthwhile day
2. Very interesting, informative and a day well spent.
3. The speakers were all good. Every one had a very enjoyable day from comments I have heard.
4. Very good program - stimulating.
5. Very good
6. I would like to see this presented to all public health workers.

Alexandria

1. Enjoyed all day very much. Dr. Collins was very educational and enjoyable. This was well planned.
2. Enjoyed very much the lectures by Dr. Collins. Very informative and well planned.
3. I enjoyed this discussion.

*These comments were typed from the hand written sheets just as they were without any attempt to make editorial corrections.
Monroe

1. Enjoyed the way the meeting was conducted very much.

Shreveport

1. I gained some knowledge of leadership characteristics; I feel that I can apply the information given today.

2. I feel I would need several more specific sessions before I could confidently be a group leader.
SUMMARY OF RESPONSES FROM THE FIVE LEADERSHIP TRAINING SESSIONS IN LOUISIANA USING THE KROPP-VERNER EVALUATION SCALE

1. 30 It was one of the most rewarding experiences I have ever had.
2. 32 Exactly what I wanted.
3. 97 I hope we can have another one in the near future.
4. 123 It provided the kind of experience that I can apply to my own situation.
5. 219 It helped me personally.
6. 79 It solved some problems for me.
7. 131 I think it served its purpose.
8. 60 It had some merits.
9. 36 It was fair.
10. 1 It was neither very good nor very poor.
11. 2 I was mildly disappointed.
12. 2 It was not exactly what I needed.
13. 3 It was too general.
14. 1 I am not taking any new ideas away.
15. 1 It didn't hold my interest.
16. 1 It was much too superficial.
17. 1 I leave dissatisfied.
18. 1 It was very poorly planned.
19. 1 I didn't learn a thing.
20. 1 It was a complete waste of time.
SUMMARY OF RESPONSES FROM THE NEW ORLEANS LEADERSHIP TRAINING SESSION USING THE KROPP-VERNER EVALUATION SCALE

1. **5** It was one of the most rewarding experiences I have ever had.
2. **8** Exactly what I wanted.
3. **23** I hope we can have another one in the near future.
4. **33** It provided the kind of experience that I can apply to my own situation.
5. **31** It helped me personally.
6. **20** It solved some problems for me.
7. **27** I think it served its purpose.
8. **15** It had some merits.
9. **5** It was fair.
10. **0** It was neither very good nor very poor.
11. **1** I was mildly disappointed.
12. **1** It was not exactly what I needed.
13. **0** It was too general.
14. **0** I am not taking any new ideas away.
15. **1** It didn't hold my interest.
16. **0** It was much too superficial.
17. **0** I leave dissatisfied.
18. **0** It was very poorly planned.
19. **0** I didn't learn a thing.
20. **1** It was a complete waste of time.
SUMMARY OF RESPONSES FROM THE LAFAYETTE LEADERSHIP TRAINING SESSION USING THE KROPP-VERNER EVALUATION SCALE

1. ___ 12 It was one of the most rewarding experiences I have ever had.
2. ___ 9 Exactly what I wanted.
3. ___ 23 I hope we can have another one in the near future.
4. ___ 23 It provided the kind of experience that I can apply to my own situation.
5. ___ 22 It helped me personally.
6. ___ 18 It solved some problems for me.
7. ___ 27 I think it served its purpose.
8. ___ 6 It had some merits.
9. ___ 4 It was fair.
10. ____ It was neither very good nor very poor.
11. ____ I was mildly disappointed.
12. ____ 1 It was not exactly what I needed.
13. ____ 1 It was too general.
14. ____ I am not taking any new ideas away.
15. ____ It didn't hold my interest.
16. ____ It was much too superficial.
17. ____ I leave dissatisfied.
18. ____ It was very poorly planned.
19. ____ I didn't learn a thing.
20. ____ It was a complete waste of time.
SUMMARY OF RESPONSES FROM THE ALEXANDRIA LEADERSHIP TRAINING SESSION USING THE KROPP-VERNER EVALUATION SCALE

1. 6 It was one of the most rewarding experiences I have ever had.
2. 5 Exactly what I wanted.
3. 14 I hope we can have another one in the near future.
4. 17 It provided the kind of experience that I can apply to my own situation.
5. 19 It helped me personally.
6. 14 It solved some problems for me.
7. 19 I think it served its purpose.
8. 9 It had some merits.
9. 3 It was fair.
10. It was neither very good nor very poor.
11. I was mildly disappointed.
12. It was not exactly what I needed
13. It was too general.
15. It didn't hold my interest.
16. It was much too superficial
17. I leave dissatisfied.
18. It was very poorly planned.
19. I didn't learn a thing.
20. It was a complete waste of time.
SUMMARY OF RESPONSES FROM THE MONROE LEADERSHIP TRAINING SESSION USING THE KROPF-VERNER EVALUATION SCALE

1. 4 It was one of the most rewarding experiences I have ever had.
2. 6 Exactly what I wanted.
3. 18 I hope we can have another one in the near future.
4. 30 It provided the kind of experience that I can apply to my own situation.
5. 29 It helped me personally.
6. 18 It solved some problems for me.
7. 36 I think it served its purpose.
8. 21 It had some merits.
9. 12 It was fair
10. It was neither very good nor very poor.
11. 1 I was mildly disappointed.
12. It was not exactly what I needed.
13. 1 It was too general.
15. It didn't hold my interest.
16. It was much too superficial.
17. I leave dissatisfied.
18. It was very poorly planned.
19. I didn't learn a thing.
20. It was a complete waste of time.
SUMMARY OF RESPONSES FROM THE SHREVEPORT LEADERSHIP TRAINING
SESSION USING THE KROPP-VERNER EVALUATION SCALE

1. 3 It was one of the most rewarding experiences I have ever had.
2. 4 Exactly what I wanted.
3. 19 I hope we can have another one in the near future.
4. 20 It provided the kind of experience that I can apply to my own situation.
5. 18 It helped me personally.
6. 9 It solved some problems for me.
7. 22 I think it served its purpose.
8. 9 It had some merits.
9. 6 It was fair.
10. 1 It was neither very good nor very poor.
11. I was mildly disappointed.
12. I was not exactly what I needed.
13. 1 It was too general
15. I didn't hold my interest.
16. It was too superficial.
17. I leave dissatisfied.
18. It was very poorly planned.
19. I didn't learn a thing.
20. It was a complete waste of time.
<table>
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<th>Variable</th>
<th>Chi-square Value</th>
<th>Degrees of Freedom</th>
<th>Probability Level</th>
<th>Failed to Reject (F) or Rejected (R)</th>
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<td>P &lt; .01</td>
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<td>Professional discipline</td>
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<td>Type of personnel</td>
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<td>14.95</td>
<td>4</td>
<td>P &lt; .01</td>
<td>R</td>
</tr>
</tbody>
</table>
KROPP-VERNER EVALUATION SCALE*

Please follow directions carefully: Read all twenty of the following statements. Check as many statements as necessary to describe your reaction to the conference.

1. _____ It was one of the most rewarding experiences I have ever had.
2. _____ Exactly what I wanted.
3. _____ I hope we can have another one in the near future.
4. _____ It provided the kind of experience that I can apply to my own situation.
5. _____ It helped me personally.
6. _____ It solved some problems for me.
7. _____ I think it served its purpose.
8. _____ It had some merits.
9. _____ It was fair.
10. _____ It was neither very good nor very poor.
11. _____ I was mildly disappointed.
12. _____ It was not exactly what I needed.
13. _____ It was too general.
14. _____ I am not taking any new ideas away.
15. _____ It didn't hold my interest.
16. _____ It was much too superficial.
17. _____ I leave dissatisfied.
18. _____ It was very poorly planned.
19. _____ I didn't learn a thing.
20. _____ It was a complete waste of time.

*Dr. R. Kropp and Dr. C. Verner, Florida State University

IF YOU WISH, ADD ANY COMMENTS ON REVERSE SIDE OF THIS PAGE.
INDIVIDUAL INFORMATION

SEX

______ Male
______ Female

AGE


EXPERIENCE IN PUBLIC HEALTH


FORMAL EDUCATION

______ Doctorate
______ Master's Degree
______ Bachelor's Degree
______ Registered Nurse
______ Secretarial, technical graduate
______ Business school graduate
______ Some college
______ High school graduate
______ Less than high school graduate

PREVIOUS KNOWLEDGE OF LEADERSHIP TRAINING

______ Had one or more academic courses
______ Had one or more short courses
______ Have little or no knowledge

DISCIPLINE

______ Medicine or Administration
______ Sanitary Engineering or Sanitation
______ Nursing
______ Health Education
______ Secretarial
______ Medical Technology
______ Scientist

I WORK FOR

______ Local Health Department
______ State Board of Health

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