LEADERSHIP IN PUBLIC HEALTH: REDUCING INEQUALITIES AND IMPROVING HEALTH

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Summary: There is a developing consensus that public health organisations should engage in building leadership capacity. To develop effective public health leadership therefore requires these organisations to actively engage in developing more leaders at every level. This article aims to stimulate debate on the kind of public health leadership needed today to reduce inequalities and improve health and well-being. Definitions and a new model of public health leadership are discussed, and its meaning is further explored via the results of interviews with European public health leaders. Some new developments in transformational public health leadership training and capacity building initiatives are highlighted.

Keywords: Public Health Leadership, Continuous Professional Development, Public Health Capacity, Europe

Introduction

Although leadership is a well-known concept within organisational science, public health leadership has still not been well-defined. There is a developing consensus that public health organisations should engage in building leadership capacity. To develop effective public health leadership therefore requires these organisations to actively engage in developing more leaders at every level.

A key driver in improving leadership within public health is that the nature of the challenges faced by such professionals is evolving. The combination of a range of socioeconomic drivers, including ageing populations and workforces, globalisation, consumerism and individualism all have an effect on health and health-related issues leading to increasing health inequalities. In addition, modern global developments include: over consumption, increasing social inequalities and rising rates of mental distress and disorder. In Europe, these challenges are currently exacerbated by the impact of global recession and austerity measures that have been introduced in many European countries, which are putting health systems under significant financial pressures and forcing them to deliver more with diminishing resources. Therefore, developing effective leadership is essential.
What is public health leadership?

Definitions of public health leadership vary from the idea that it includes commitment to the community and the values it stands for to the argument that public health leaders differ from leaders in other sectors as they are required to balance corporate legitimacy, whilst also existing outside the corporate environment. A more collaborative world will require a new generation of leaders in public health with new mindsets, an appetite for innovation and interdisciplinary collaboration and a strong dose of political savvy. A public health leader “must be the transcendent, collaborative ‘servant leader’ who knits and aligns disparate voices together behind a common mission.”

Public health leadership competency framework

Whilst considerable work has been done in the development of leadership competencies in the field of health worldwide, these frameworks seem very generic and none have been specifically developed to support the educational curriculum for public health professionals. A new model has been developed within the framework of the Leaders for European Public Health Erasmus Multilateral Curriculum Development Project (LEPHIE), supported by the EU Lifelong Learning Programme. Based on a review of public health and public health leadership competency frameworks, leadership literature and expert review panels, the framework was developed to support the continuing professional development (CPD) curriculum and facilitate self-assessment of public health leadership competencies.

Competencies are composites of individual attributes (i.e. knowledge, skills, and attitudinal or personal aspects) that represent context-bound productivity. Fifty-two competencies are distributed around nine domain areas, including: Systems Thinking, Political Leadership, Building & Leading Interdisciplinary Teams, Leadership and Communication, Leading Change, Emotional Intelligence & Leadership in Team-based Organisations, Leadership Organisational Learning & Development, Ethics and Professionalism. The Public Health Leadership Competency Framework can serve as a useful tool in identifying gaps in knowledge and skills and shaping adequate competency-based CPD curricula for public health professionals. It is also an attempt to define, profile and position public health leadership through a systematically developed, comprehensive and multidisciplinary competency framework which can be used by public health professionals as a tool for self-assessment and personal development planning.

Leadership in the contemporary public health context

The results of a recent survey carried out by the Association of Schools of Public Health in the European Region (ASPHER) reveal that it is still not common for leadership development to be included in European public health training programmes. At the same time, The Lancet Commission raised the question of how higher education institutions delivering public health education can provide the content and context to initiate a major reconsideration of working and learning patterns which incorporate novel forms, based on the principles of inter-professional collaboration. In response to this need, a model representing the meaning of contemporary public health leadership in a European context was developed based on in-depth interviews with prominent European public health leaders within the LEPHIE Project.

Box 1: Six themes shaping public health leadership

- European public health context
- Inner path of leadership
- Essence of leadership
- Emerging styles of leadership
- Future leader’s imperatives
- Benefiting society and improving wellbeing

Source: Reference

The interviews were conducted to develop an understanding of the nature of public health and identify skills needed by public health leaders to successfully meet present and future patient and population health requirements as well as help tackle health inequalities. The model consists of six themes identified from the interview data (see Box 1). This model does not reflect a particular leadership theory or orientation but presents a picture of current public health leadership based on the real life experiences of public health leaders. However, elements of it resonate with aspects of generic theories such as transformational leadership, situational leadership, and servant leadership.

The content of the interviews showed that public health leaders, confronted with major shifts in the nature of ill health...
and growing diversity within health professions, have to make decisions in an increasingly complex environment. To add a further layer of challenge, globalisation and the economic crisis significantly impact on public health functions and how to operationally deal with existing and emerging health problems. These problems establish a strong mandate for public health leaders to develop more proactive health service models. Public health leaders need horizontal, alliance-based leadership, allowing them to work closely with stakeholders at all levels of society to effectively meet the challenges of population health and well-being. They should be driven by values of social justice, equity, honesty and responsibility, coupled with expertise, ability to discern trends in the midst of complexity and to capitalise on those trends by creating smart, adaptive strategies in an evolving environment.

Public health leaders demand leadership skills and behaviours that value decision-making by inclusion, collaboration and the broader participation of interdisciplinary health care teams engaging all members in shared leadership roles and collaborating with publicly-led health and equity related campaigns. Today’s leaders need to be enablers and facilitators who support groups in creating and achieving shared goals. This principle of leadership is reflected in the notion of empowerment: enabling people to improve their health and address its determinants. Such an approach reflects transformational leadership, in which power for change is based on goals that serve a higher purpose, in this case better health and wellbeing as a societal goal. This is the essence of the new framework for European public health leadership.

**Public health leadership training: a vision for the future**

Since leadership, in general, is still not common at undergraduate, postgraduate and CPD level of public health education, there is a need for providers of public health training to practically develop more progressive curricula which incorporate leadership.

CPD options may be optimised if they are collaborative, interdisciplinary, inter-professional as well as global and digital. The CPD course LEPHE1 delivered by Maastricht University* and developed in collaboration with ASPHER, can serve as an example of such a training course targeted at busy public health professionals. Bearing in mind that the key to differentiating leadership in public health from other areas is the context, this course includes current meaningful public health problems and challenges which participants try to solve by using problembased learning methods. Participants take responsibility for and plan their own learning as they construct or reconstruct their knowledge. Learning becomes a collaborative process by sharing a common goal, responsibilities, and learning needs through open interaction. The content of the course is based on the Public Health Leadership Competency Framework, which also serves as a self-assessment tool in executive coaching which supports individual leader development and is an indispensable part of training to produce effective public health leaders.

In developing the content of other new public health leadership courses, a starting point may be to identify the competency capacities of future leaders in relation to population health and well-being and apply the results of the interviews with public health leaders to inform education, training and culture change throughout public health workforce. Topical cases, active and inquiry-based learning processes should be at the heart of the learning experience. Participants should be encouraged to engage directly with community organisations and draw on the knowledge sources that inform public health theory, policy and practice. Blended learning – a combination of face to face, print and information technology – is encouraged as it supports busy professionals interested in developing their expertise through CPD and facilitates transformational learning for health equity.

However, the question remains: who should take responsibility for the development of public health leadership that is fit for purpose, accessible and supports the career development path of public health leaders?

**Developing public health leadership capacities**

It seems that there is a strong awareness among the public health professional community – supported by targeted policies such as the Health 2020 and the WHO European Action Plan about the importance of developing public health leadership to tackle health inequities and inequalities. Moreover, WHO Essential Public Health Operations (EPHOs) form a framework for the entire public health system. In particular, EPHO No. 7 on *Assuring a sufficient and competent public health workforce* is a key operation for WHO to promote strategies supporting the development of a public health workforce. At the same time, it provides a mandate for developing the adequate and modern training in which public health leadership can play a prominent role.

In 2013, the WHO Regional Office for Europe delegated responsibility to ASPHER to lead its working group on EPHO No. 7. The development of a public health workforce and shaping the public health profession is a key action area focusing on preparing the public health disciplinary cluster to face and respond to the health and health care challenges of the 21st Century. In this area, WHO and ASPHER concentrate on collaboration to develop comprehensive educational strategies for public health based on the systematic mapping of member states’ workforce capacities. With direct access to public health schools and departments, the development and adaptation of public health leadership programmes as well as leadership competencies have significant potential for success.
Facets of public health in Europe

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Number of pages: 400; ISBN: 978 033526420 9

In the last two centuries, public health has reduced the impact and prevalence of infectious diseases, but much remains to be done to reduce noncommunicable diseases, such as heart disease and cancer, which comprise the bulk of the disease burden on the WHO European Region. This book takes a broad but detailed approach to public health in Europe and offers the most comprehensive analysis of the Region available. It considers a huge range of key topics in public health.

In addition, the authors consider the existing public health structures, capacities and services in a range of European countries, identifying what needs to be done to strengthen action and improve outcomes for public health.

Reflecting the broad geographical scope of the entire WHO European Region, this book uses examples from a diverse range of countries to illustrate different approaches to public health. It is essential reading for anyone studying or working in the field of public health, especially those with an interest in European practice.

Contents: Introduction; The changing context of public health in Europe; Monitoring the health of the population; The health security framework in Europe; Occupational health and safety; Environmental health; Food security and healthier food choices; Health care public health; Screening; Health promotion; Tackling the social determinants of health; Intersectoral working and health in all policies; Health impact assessment; Organization and financing of public health; Developing the public health workforce; Developing public health leadership; Public health research; Knowledge brokering in public health; Drawing the lessons.

References


