

A paradox of public health leadership:

Towards resilience in the context of vulnerability

Interviews with Public Health Practitioners

- “I think a lot of these are probably more about what a public health role at maybe a more senior level will look like.”
- “We’re all leaders aren’t we?”
- “You don’t have to have a job title manager to be a leader. So I think maybe that’s where it’s about sort of promoting the importance of that sort of mind-set and some of these things that come along with it.”
- “I think it’s good to get people in early and thinking that way and then obviously observing and shadowing more senior people”

Shickle et al. The applicability of the UK Public Health Skills and knowledge Framework to the Practitioner workforce: Lessons for competency framework development. Submitted 2017

The Five Talents for Public Health leadership

- **Mentoring-Nurturing:** Articulate strong sense of public health shared values and develop talent to join and progress the public health cause
- **Shaping-Organising:** Influencing the public health agenda through preparation, administration and delivery
- **Networking-Connecting:** Initiating, maintaining and cultivating relationships between individuals and organisations to build influence and credibility
- **Knowing-Interpreting:** Generating, synthesising and communicating information to derive power and authority via interpretation for others
- **Advocating-Impacting:** Combining the powers of persuasion, political currency and the ability to take appropriate risks to make the right decisions happen

Day, Shickle et al. Training public health superheroes: Five talents for public health leadership. J Public Health 2014 Dec; 36(4): 552-61

Interviews with Public Health Practitioners

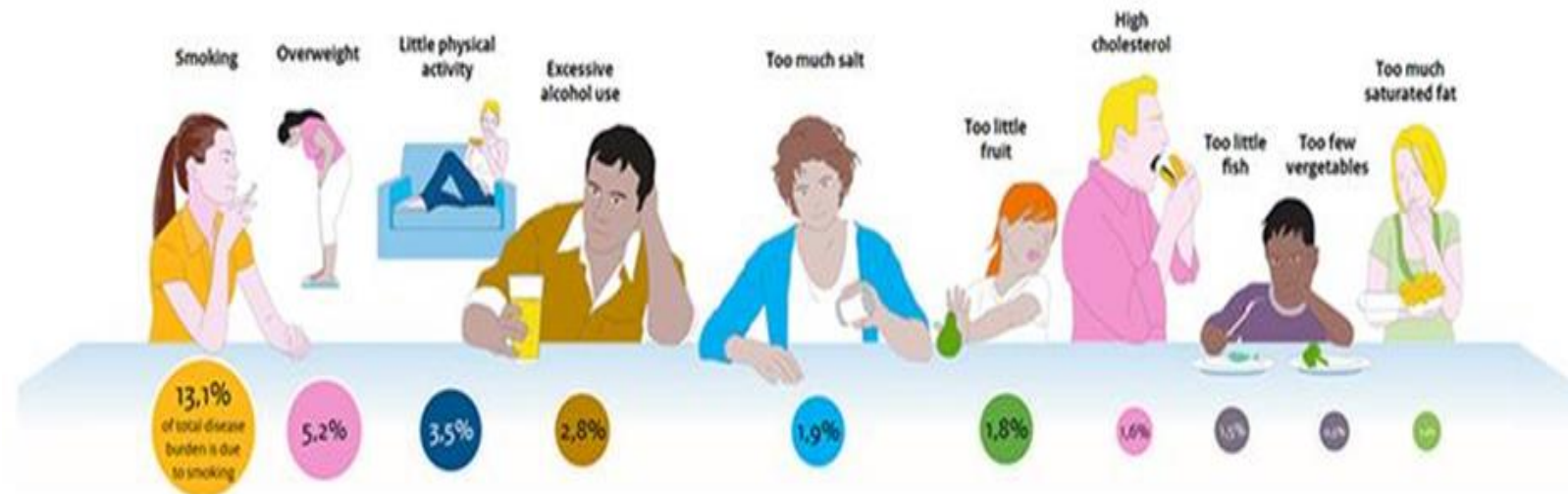
“I find the leadership thing a bit of a weird animal really because it’s not something that’s talked about or pushed until you get to a senior level. There isn’t at any point that somebody says ‘right we want to develop you in to leading properly’. That never actually happens. I think it’s just expected organically for people to pick up on that, and then you get to a point where you’re bombarded with things that are aimed at people working in a particular level that are about leadership, but they’re already working at that level so how did they get there without leadership training, this is, that’s the bit of chicken and egg to me, it’s not really talked about.”

Talent for Public Health Leadership	Current training methods
Mentoring - Nurturing	<ul style="list-style-type: none"> Brief courses for trainers on the theory of mentorship and preferred learning styles
Shaping – Organizing	<ul style="list-style-type: none"> Workplace-based training with pre-/post-meeting debriefs Management theory taught via postgraduate courses and test by examination
Networking – Connecting	<ul style="list-style-type: none"> Mainly work-based training Formal media training courses, and opportunistic interaction with media in the workplace
Knowing – Interpreting	<ul style="list-style-type: none"> Postgraduate courses on the knowledge and skills of public health, tested by examination
Advocating – Impacting	<ul style="list-style-type: none"> Workplace-based training

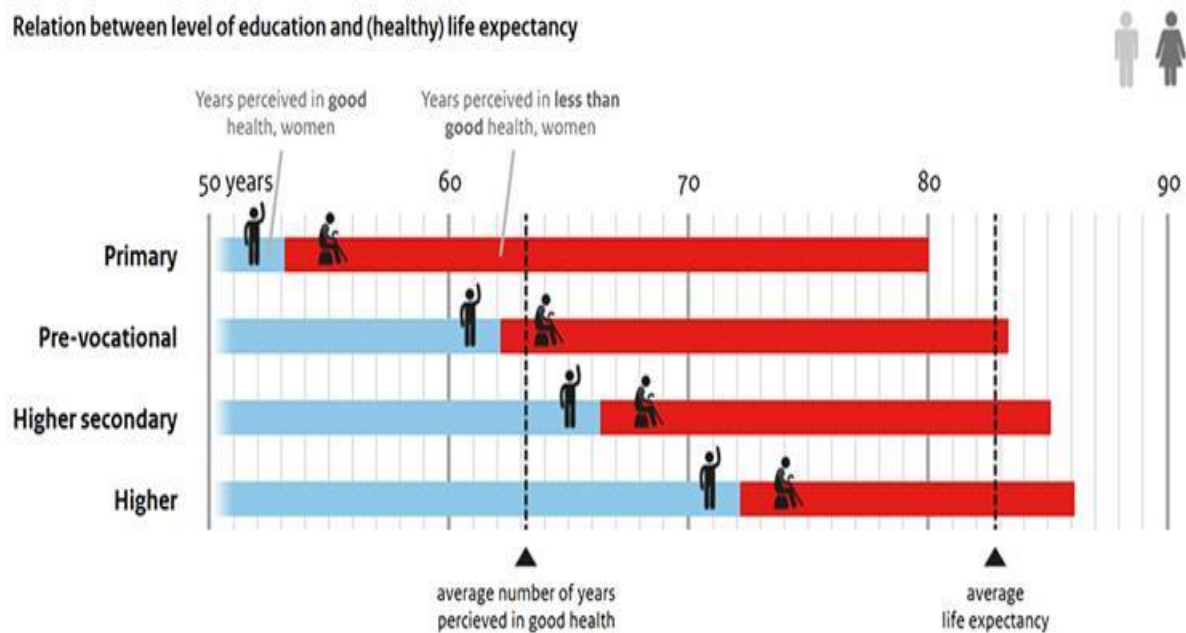
A paradox of public health leadership:

Towards resilience in the context of vulnerability

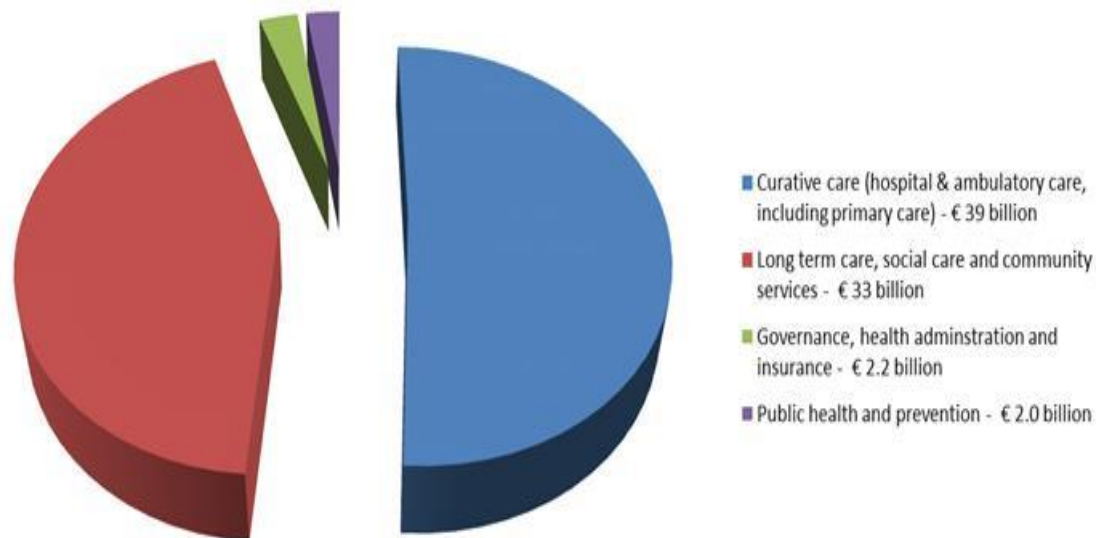
Contributions of various determinants to the total Dutch disease burden (Percentages not to be added together)



Relation between level of education and (healthy) life expectancy



Public expenditure on health (2016)



Nowotny c.s.: Science 1.0 → 3.0

autonomy science

influence society

1.0

Independent,
autonomous science:
Science separated from
society,
Enlightenment

2.0

Institutionalization,
Linear cause-effect
relations,
Modernism
(Mode-1)

3.0

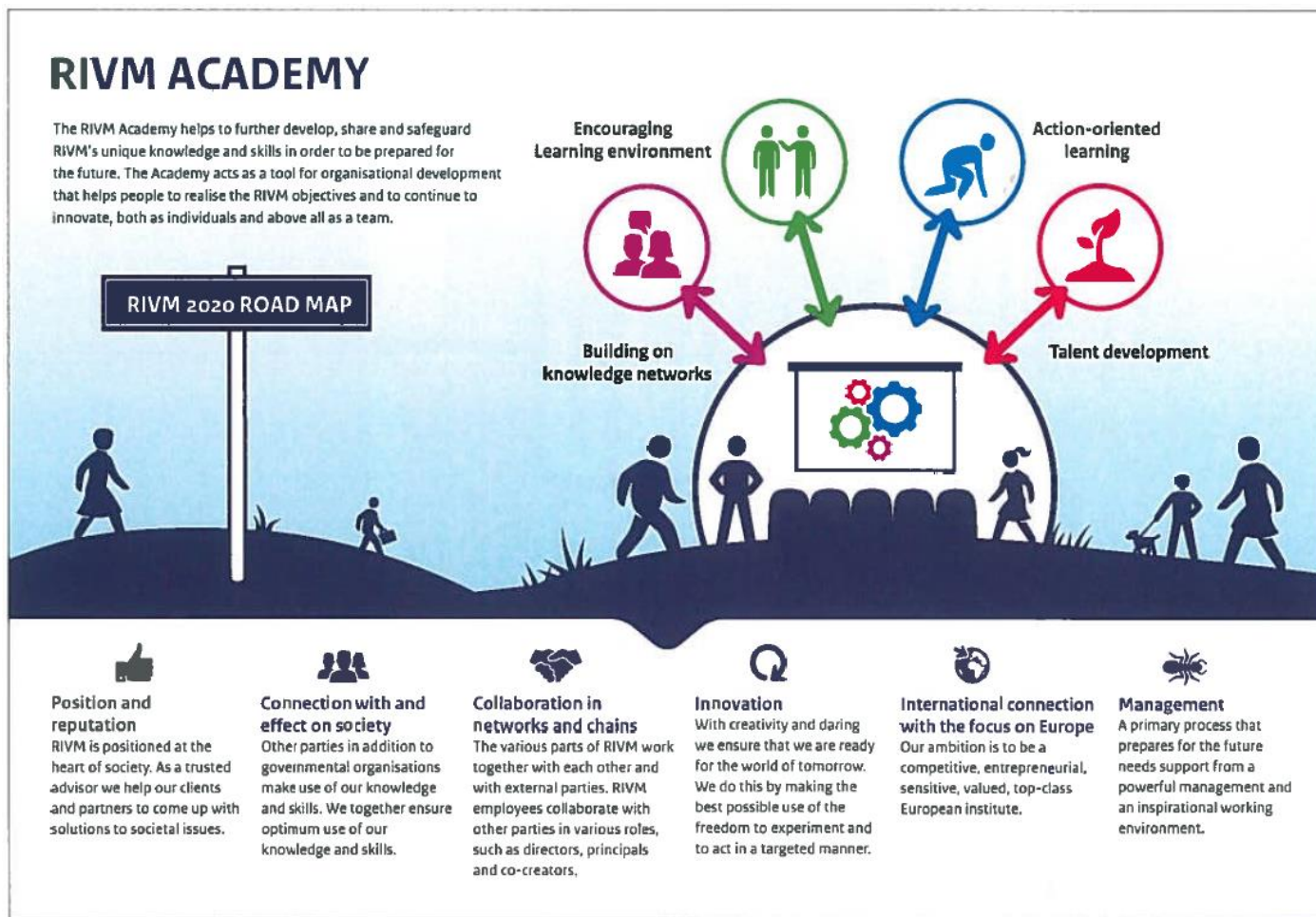
Questions AND answers
in interaction with
society,
Postmodernism
(Mode-2)

Re-Thinking Science

Knowledge and the
Public in an Age
of Uncertainty

Helga Nowotny,
Peter Scott and
Michael Gibbons

Leadership in Public Health is all about Linking and Bridging!



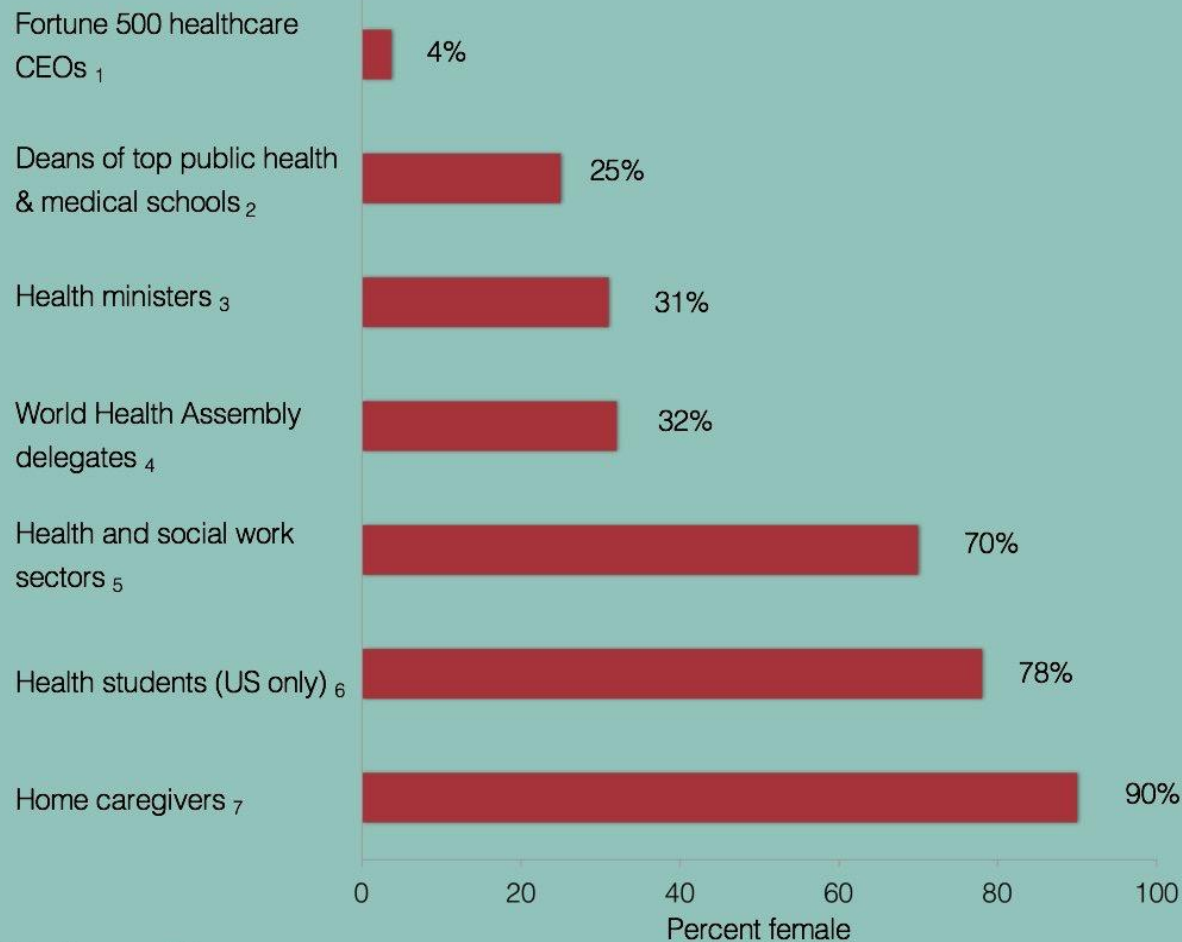
A paradox of public health leadership:

Towards resilience in the context of vulnerability



A paradox of public health leadership:

Towards resilience in the context of vulnerability



1. Forbes Global 500 List for healthcare sector, 2016
2. US News and World Report: Best Global Universities for Social Sciences and Public Health, Best Global Universities for Clinical Medicine, 2017
3. World Health Organization's Member States, 2017
4. World Health Organization's 70th WHA List of Delegates and Other Participants, May 2017
5. International Labour Organization: Improving employment and working conditions in health services, 2017
6. Council of Graduate Studies: Graduate Enrollment and Degrees, 2017 (US only)
7. Women and Gender Equity Knowledge Network and the Health Systems Knowledge Network of the WHO Commission on Social Determinants of Health, 2007

A paradox of public health leadership:

Towards resilience in the context of vulnerability