

Public health leadership in a globalised world

CABANOWSKA, Katarzyna, SMITH, Tony <<http://orcid.org/0000-0001-8743-4677>> and RETHMEIER, Ken

Available from Sheffield Hallam University Research Archive (SHURA) at:

<http://shura.shu.ac.uk/12945/>

This document is the author deposited version. You are advised to consult the publisher's version if you wish to cite from it.

Published version

CABANOWSKA, Katarzyna, SMITH, Tony and RETHMEIER, Ken (2015). Public health leadership in a globalised world. *South Eastern European Journal of Public Health*, 136-140.

Copyright and re-use policy

See <http://shura.shu.ac.uk/information.html>

Title:	N 3.6 PUBLIC HEALTH LEADERSHIP IN A GLOBALISED WORLD
Module information	This module can be organized for up to 5 ECTS, corresponding per ECTS to 30 hours student workload, thereof around 10 contact hours of lecturing/supervision; in total: up to 50 contact hours and up to 100 hours assigned to voluntary work, including a field visit and report.
Authors	Katarzyna Czabanowska, Tony Smith, Ken Rethmeier
Address for correspondence	Dr. Katarzyna Czabanowska, Dr. Tony Smith, Dr. Ken Rethmeier INTHEALTH Faculty of Health Medicine and Life Sciences, Maastricht University. Duboisdomain 30, 6229 GT Maastricht, The Netherlands Tel: 0031 43 3881592 Email: kasia.czabanowska@maastrichtuniversity.nl
Key words	Public Health, leadership, systems thinking, leading change, communication in globalised world, political leadership, leadership theories and global leadership values.
Topics	Leadership is a well-known concept within organisational science, public health leadership has still not been well-defined. A recent WHO report acknowledges that contemporary health improvement is more complex than ever before and requires leadership that is “ <i>more fluid, multilevel, multi-stakeholder and adaptive</i> ” rather than of a traditional command and control management variety. Today’s public health professionals therefore need to be able to lead in contexts where there is considerable uncertainty and ambiguity, and where there is often imperfect evidence and an absence of agreement about both the precise nature of the problem and the solutions to it. There is a need to discuss the vital role of leadership and governance in public health globally . Indeed, the presence of competent leaders is crucial to achieve progress in the field. A number of studies have identified the capability of effective leaders in dealing with the complexity of introducing new innovations or evidence-based practice more successfully.
Learning objectives	This Course aims to introduce you to and help you to develop: <ol style="list-style-type: none"> 1. leadership competencies through the following: 2. Examining the key debates around Leadership in Public Health in relationship to modernism, postmodernism, technological change and their implications for leaders within organisations. 3. Introducing key theoretical frameworks that underpin leadership learning, and enable the critical use of this knowledge and understanding by applying theory to actual practice within the context of Public Health. 4. Developing the ability to reflect on the Public Health leadership role and development needs of individuals, so that personal and professional development planning for a leadership role is built upon sound analysis of self in context. 5. Stimulating self-assessment of leadership competencies by the participants to help identify knowledge gaps and further training needs in leadership.
Teaching methods	Blended learning, using online and face to face environment, interactive lectures, PBL and discussion.
Who should apply	Public health or health professionals and holding a master degree or an equivalent, aspiring for a leadership position or currently in a leadership position but aiming at improving their leadership attributes representing C1 – C2 level of English.
Career opportunities	Work for an organisation that advocates for health, insures health or supports stakeholders in the area of health (e.g.NGOs, associations), work for the local government, health department, authorities at local or international level, work for European or global institutions that deal with health issues, public

	health or health service provider working in international environment, in the educational field in the area of management and administration, teaching and research, health industry, pharmaceuticals, health insurance, medical devices and other related areas, which work on the global market and finally policy, administration of public institutions, non-governmental organizations and consulting firms.
Assessment of students	Two final assessment tasks are proposed: Written: A leadership development project that a participant would like to introduce in his/her professional practice and be aligned with the personal development goals. The level of detail that can be attained in the project description depends on e.g. the participants' views, goals, expectations...etc. Oral: A 15-minute presentation based on the content of the project and leadership development plan for the future public health career vision including global dimension. Selecting one theory of leadership and discuss how this might be applied to successfully implement change in one area of public health practice having global impact.
COMMENTS on the module by lecturers and students	???

Public Health Leadership in a Globalised World

The Rationale

Given the challenges facing public health professionals such as globalization, health threats, an ageing society, and social and health inequalities which result in the increased level of unpredictability, a multidisciplinary public health workforce needs to be supported by new skills and expertise. Developed countries face complex issues of ageing populations, a rising burden of chronic disease and the challenge of cost-containment, while confronted with rising expectations and new technologies. On the other hand the developing countries are still struggling with the control of infectious diseases, efficient delivery of vital health care services and adequate education. One of the functions of public health is to assure a competent and adequately trained public health workforce. A function that is also in line with WHO New European policy for health, Health 2020, where investing in capacity for public health, change, innovation and leadership constitute key actions principles. Therefore it is of crucial importance that educational needs of public health professionals are met with the adequate educational offerings targeting the deficit competencies.

The development of leadership skills is pivotal to delivering effective public health services. The rationale is that leadership skills are key to both the implementation of organisational changes necessary to improve the performance of healthcare systems, and to working successfully across traditional departmental, organisational, intersectoral and national boundaries to develop productive partnerships with a range of stakeholders, including service users and healthcare professionals, in order to develop impactful public health interventions. Professional development of public health leaders therefore requires the instruction which is competency-based to help them develop the abilities to address complex and evolving demands of health care systems in order to improve the health of served populations and understand unique cultural diversity and varied approaches to public health world wide. The development, acquisition and assessment of new skills should be supported by adequately tailored educational programs in order to improve health and tackle health inequalities, which are becoming a key priority for public health professionals and leaders.

Objectives of the course

The importance of understanding leadership as part of achieving Public Health goals is critical to reducing inequality and improving health. However the rapidly changing environment and huge variations in available health resources makes leadership in Public Health a complex and constantly evolving issue. It is important for those of us in public health, or entering public health roles for the first time, to have some understanding of leadership as it relates to our chosen field of work.

This Course aims to introduce you to and help you to develop leadership competencies through the following:

1. Examining the key debates around Leadership in Public Health in relationship to modernism, postmodernism, technological change and their implications for leaders within organisations.
2. Introducing key theoretical frameworks that underpin leadership learning, and enable the critical use of this knowledge and understanding by applying theory to actual practice within the context of Public Health.
3. Developing the ability to reflect on the Public Health leadership role and development needs of individuals, so that personal and professional development planning for a leadership role is built upon sound analysis of self in context.
4. Stimulating self-assessment of leadership competencies by the participants to help identify knowledge gaps and further training needs in leadership.

Theoretical Approaches

The course builds upon the Leadership for European Public Health Programme (Lephie) and is adapted to reflect the global public health leadership perspective through adequately tailored cases/problems. The proposed sessions in the course are built around the domains constituting public health leadership competency framework. *Systems Thinking, Political Leadership, Collaborative*

leadership: Building and Leading Interdisciplinary Teams, Leadership and Communication, Leading Change, Emotional Intelligence and Leadership in Team-based Organizations, Leadership, Organizational Learning and Development.

However, it is proposed to include only several elements of the Framework such as:

Leadership theories,
Systems thinking
Collaborative leadership
Global Leadership values
Political Leadership
Leading change

Educational Approach

PBL is used as the instructional model in the development and implementation of the leadership curriculum. Students work on tasks in small groups attempting to solve real problems. They are viewed as active participants in learning, rather than passive recipients of knowledge and take responsibility for and plan their own learning as they construct or reconstruct their knowledge networks. Learning in PBL is also a collaborative process in which students have a common goal, share responsibilities, are mutually dependent on each other for their learning needs, and are able to reach agreement through open interaction. Knowledge transfer can be facilitated by learning in meaningful contexts, and problem-based learning nurtures the ability of learners to solve real-life problems whilst fostering communication and cooperation among students. PBL is also seen as highly impactful as an approach to LLL. Learning is contextual, collaborative, and constructive and the students can regulate their own learning. During small group discussions online, the participants collaborate to come up with possible explanations for the problem. Learners are required to use skills from different competency domains in order to solve any given problem. Understanding, in this context, develops knowledge of domains in a way that can be used frequently to assist in further problem solving.

Interactive lectures, tutorial group meetings and other collaborative session are offered to participants at a distance via a virtual learning environment such as Blackboard or Moodle, via which course material can be directly downloaded from the intranet (internal internet network). The combination of BL and PBL enables the participants to explore the main leadership theories in the context of public health by including a range of activities for self-development and assessment, face to face contact, e-learning, project work, problem solving and self-directed learning, supervised by international content experts as tutors.

Required Reading:

1. Czabanowska K, Smith T (2013) Module Book, Lephie Project Group
2. Czabanowska K, Rethmeier KA, Lueddeke G, Smith T, Malho A, Otok R, Stankunas M. Public Health in the 21st Century: “Working Differently Means Leading and Learning Differently” (A qualitative study based on interviews with European public health leaders). Eur J Public Health 2014; doi: 10.1093/eurpub/cku043.
3. Czabanowska K. Leadership in public health: reducing inequalities and improving health. Eurohealth incorporating Euro Observer 2014;20/3.
4. Czabanowska K, Malho A, Schröder-Bäck P, Popa D, Burazeri G. Do we develop public health leaders? Association between public health competencies and emotional intelligence: a cross-sectional study . BMC Medical Education 2014;14:83, doi: 10.1186/1472-6920-14-83.
5. Czabanowska K, Smith T, Könings KD, Sumskas L, Otok R, Bjegovic-Mikanovic V, Brand H. In search for Public Health Leadership: Competency Framework to support leadership curriculum - a consensus study. Eur J Public Health 2014;24/5:850-6, doi: 10.1093/eurpub/ckt158.
6. Gopee N, Galloway J. Leadership and Management in Healthcare. London: Sage Publications, 2007.

7. Maxwell JC. *The 5 Levels of Leadership: Proven Steps to Maximize Your Potential*. New York, Boston, Nashville: 2011.
8. Northouse PG. *Leadership: theory and practice*. 5th ed. USA: Sage Publications, 2010.
9. Rowitz L. *Public Health Leadership*. Sudsbury MA: Jones & Bartlett Publisher, 2003.
10. Schein EH. *Organizational Culture and Leadership*. San Francisco, CA: Jossey Bass Wiley, 2004.
11. Yukl G. *Leadership in Organizations* (6th ed.). Saddle River, NJ: Prentice Hall, 2005.