

Dear Hosts of the D&D 2017,
ASPHER Immediate Past President and Past Presidents,
Members of the Honours Committee,
Deans and Directors of the SPH,
Mr Director,
Colleagues
Ladies and Gentlemen,

First, Let me thank you for the trust and confidence you gave me to lead this organisation for the next two years. I am proud and grateful for this opportunity and promise to use it to maximise its potential benefit for ASPHER.

I am determined to continue and build on the legacy of the 50 years of ASPHER, mindful of the current unique and favourable policy agenda of WHO and the EU Health Programme, building upon the work of earlier and immediate predecessors professors Vesna Bjegovic-Mikanovic and Jaqueline Müller-Nordhorn on implementing the ASPHER Strategy 2020 and its five objectives and other important ASPHR projects and initiatives, acknowledging a continuous input of professor Anders Foldspang through the development of European Public Health Core Competencies project and European Public Health Reference Framework as well as great dedication and commitment of its Director Robert Otok. But I would like to leave my own mark on the future achievements of ASPHER.

The “Ever Closer Union” a vision of Jean Monnet is at crossroads these days. While we witness and are affected by the extremist and populist forces which threaten the rights and freedoms not only of the vulnerable populations but all of us who abide in the values of fairness, equity, solidarity and respect, now even more and with a greater effort, in spite of and above all we the academic ASPHER community with our partner organisations and institutions have to unite in the contribution to the attainment of a high level of health protection. *Health* is the greatest value the attainment of which can serve as a glue to further bind and bring together the diverse European communities, thus contributing to addressing the political challenges faced by the Union.

However, nothing can be done without the people, well educated and trained, competent, effective, efficient **public health workforce**, the development, professionalization and support of whom is the main strategic aim of this ASPHER Presidency.

It seems that never more than now, public health professionals equipped with interdisciplinary knowledge and skills, political savvy and leadership capabilities, able to work across sectors, understanding their role through the structure of public health functions or operations, life long learners able to adapt and actively develop their professional path are needed to address a complex and evolving nature of current European public health problems.

These problems include: the sustainability of health systems, ageing, migration, health inequalities, unmet needs of vulnerable populations and their rights, insecure and crisis situations, NCDs as well as old or emerging CDs, still unexplained onset of autoimmune syndroms, mental health problems more and more affecting young people and insufficient or insufficiently supported health workforce.

There now appears to be a growing consensus that higher education institutions should engage to make public health a wanted, important profession for the young generation, and for those who are already in the field but experience lack of professional identity due to unclear professional profiles and job descriptions. We should make public health to be the first and informed choice and not a less wanted alternative when medicine is no longer an option.

Now, let me explain how.

Our proposed agenda will be supported by three guiding principles such as:

1. Collaboration and inclusion building and sustaining strong and effective relationships with our partners in European Region and globally. Here, the tribute is paid to the power of partnerships and collective efforts. Only more coherent and interconnected initiatives, with a strong inter-sectoral component, bringing together many stakeholders may have impact on favourable for public health policies and regulations.

- We will continue and maintain close work with APHEA for the benefit of enhancing the quality and standards of public health education and training,
- maintain and develop further the successfully established links with WHO Europe through existent collaborations and the newly established Coalition of Partners which creates a potential opportunity for ASPHER members to be involved and share their expertise to support the countries undergoing health reforms,
- the EC through the Health Policy Plaform, and policy dialogue on public health workforce professionalization,
- the ECDC strenghtening public health capacities through training, communication, competency development,
- European public health networks: EUPHA, our partner with whom we collaborate in the organisation of annual EPH Conference getting very much valued visibility through the ASPHER plenary sessions, we wish to continue and strengthen our mutual efforts, find synergies and complementarities in the area of public health education and training as well as public health leadership development,
- EPHA, our partner, advocate and supporter,
- global networks: World Federation of Public Health Associations (WFPHA)
- World Federation of Academic Institutions for Global Health (WFAIGH),
- global actors such as: American Association of Schools and Programs of Public Health (AASPH) and
- Asian-Pacific Consortium for Public Health (APCPH).

A special attention will be placed to the inclusion of and collaboration with associations and networks of young public health professionals which will manifest itself in stronger representation of young public health professionals both in the research area further developing the Young Researchers' Forum project and ASPHER governance structures including a younger colleague as an observer in the ASPHER Executive Board meetings (proposed and selected as a result of a democractic process initiated by member schools).

2. Creating performance enhancing culture. Giving support and visibility to various initiatives of the Members such as research activities, specific topics of interests which can be reflected in the work of the working groups benefiting the development of the educational programmes and curricula, supporting good practice exchange, promoting public health educational innovations and encouraging the publishing with Public Health Reviews and Young researchers.

3. Accountability and responsibility – for the implementation of the proposed agenda we will keep ourselves accountable in front of the members, partner organisations and stakeholders, and public health professionals.

Last year in Athens, I proposed a vision for my presidency, the strategic Model for Public Health Workforce development which integrates the past, present and future efforts of ASPHER, its members and collaborating partners. The model has already been proposed by ASPHER as a theme at the European Commission Health Policy Forum and as such should contribute to strengthening the position of public health profession at the EU policy context.

The specific parts of the model represent the strategic areas for ASPHER presidency and include: public health workforce professionalisation, education and training, translation of evidence into public health practice, education and training. The implementation of the themes will require the commitment, development of strong leadership, collaboration and communication with the stakeholders.

Today, I am presenting how in practice I propose to operationalise this Model:

Professionalisation

1. Striving to include public health workforce professionalisation on the European policy agenda building on the Joint Statement on Public Health Workforce endorsed by many European stakeholders.
2. Establishment of ASPHER Commission on Public Health Professionalisation in the context of our collaboration with WHO Coalition of Partners as a joint effort with including the work of Objective 3 of the Strategy, inviting experts in the area: (public health) law, professional self-governments and professional regulations in the EU member states, ethics and professionalism, public health education, standards and norms, competence-based education and competencies, CPD, career development models, licensing and accreditation, certification and recognition of public health competencies, policy lobbying and advocacy. The Commission will be expected to develop the recommendations and criteria which can be used by countries, governments, higher education and policy structures to support the development of public health workforce.
3. Development of Public Health Professional Competencies Model which will support self-assessment, CPD, career planning and training and retraining. Recognize and continue the persevering work of professor Foldspang on the European Public Health Reference Framework – EPHCCP, link with EPHOs.

Public Health Education and Training

4. Continue the implementation of the ASPHER Strategy 2020 with a special attention to the implementation of Objective 1
5. Introduce ASPHER Best Practice Educational Award encouraging best practice sharing including the MPH curricula and and short public health CPD courses in close collaboration with APHEA.
6. Establishment of ASPHER Public Health Training Academy in collaboration with Maastricht University and the UM Campus Brussels. ASPHER can on one hand serve as a hub gathering all information about available public health CPD training provided

by the member schools and collaborating partners and also providing some short courses also within the capacity of its membership network.

Translation of Evidence to inform Public Health Education and Training

7. Supporting the development and maintaining the culture of evidence-based learning and translating research into educational practice at the same time securing specifically dedicated forum for exchange and presentations at the annual Deans' and Directors' Retreats and publications.
8. Initiating and maintaining scientific debates and policy dialogues over current and pressing public health issues linking academia, policy and practice, mobilising resources to develop collaborative projects publications or policy briefs (Migration, Public Health Education and Training etc.).
9. Supporting further development of the Public Health Reviews – a unique journal towards obtaining the IF.

In order to achieve the the proposed agenda, strengthen and give more visibility to Public Health workforce we need to focus our attention on the cross-cutting issues:

Communitaion and wide stakeholder involvement: develop and maintain a systematic and effective communication and advocacy strategy to involve and sustain our collboartions and attract new members and partners as well as connect with similar organisations in other parts of the world and strengthen the role of our organisation as the important public health stakeholder who stands up and is counted when the issues of public health education, training and professionalisation of public health workforce are discussed.

Leadership: a behavioural change is needed and this can be achieved through the development and implementation of Public Health Leadership at all levels with specifically tailored programmes based on public health sytem context but also by supporting countries and building their public health leadership capacities. Building a culture of system thinkers, who take opportunity to introduce change and innovation, who are social entrepreneurs stedfast to cultural, moral and emotional compass who actively develop their profession.

Our proposed agenda is modest against a huge task of the development of Public Health Workforce and its professionalisation but together ASPHER constitutes a great collective knowledge and expertise to support this agenda. Relying on the slodarity, strong involvement and support of the ASPHER members, the Executive Board, Honours Committee, Working Groups and ASPHER management we will strive to shape the profession to become stronger for the the attainment of high level of health protection in spite of the political problems which we face nowadays in Europe, in hope of contributing to bringing back the unity through health.



Katarzyna Czabanowska
ASPHER President

Rennes, 31 May 2017

Professor Katarzyna Czabanowska is the ASPHER President. She holds an Associate Professor position at the International Health Department, Maastricht University, the Netherlands. She directs Governance and Leadership in European Public Health programme. Her research focus is on public health workforce development and professionalisation in Europe, European public health leadership, women leadership in health care and academia, employability, Lifelong Learning and competence-based education. She has developed the public health leadership competency framework which supports training and continuous professional development of public health professionals. Her research is reflected in many publications including articles published in peer reviewed journals, books, book chapters. She holds honorary positions at: Jagiellonian University Medical College, Krakow, Poland and the University of Sheffield and the IU Richard M. Fairbanks School of Public Health, Indiana, the US. She serves as



an WHO expert on issues related to public health services, workforce planning and leadership. She is a President of the European Public Health Association (EUPHA) Working Group on Public Health Leadership and a winner of the Polish Person 2015 in the Netherlands Award in the category Science and Technique.

Selected publications:

1. KM Czabanowska, K Rethmeier. Value-based leadership an integral part of a public health leadership curriculum: EJPH (2016) 26 (suppl 1): ckw165.004 DOI:
2. K. Martakis, K. Czabanowska, P. Schröder – Bäck. Teaching Ethics to Pediatric Residents: A Literature Analysis and Synthesis. *Klin Padiatr* 2016; 228: 263–269; DOI <http://dx.doi.org/10.1055/s-0042-109709>
3. Czabanowska K. Public health competencies: prioritization and leadership. *Eur J Public Health*. 2016 Aug 19. pii: ckw125. DOI: 10.1093/eurpub/ckw125
4. Müller-Nordhorn J, Bjegvic-Mikanovic V, Ortok R, Czabanowska K, Foldspang A. Fifty years of serving public health: The Association of Schools of Public Health in the European Region moving forward to the next half-century. Editorial *Int J Public Health*. DOI 10.1007/s00038-016-0824-x
5. Alessandra Lafranconi; Bernardo L Gomes; Mindaugas Stankunas; Suzanne M; Babich; Kenneth A Rethmeier; Katarzyna Czabanowska. Medical leadership: from inspiration to education. *The Lancet* Vol 386 October 17, 2015 p. 1532
6. Stankunas, Mindaugas; Czabanowska, Katarzyna; Avery, Mark; Kalediene, Ramune; Hobbs, Suzanne Havala. The implementation of problem based learning in health service management training programs: experience from Lithuanian university of health sciences. *Leadersh Health Serv*. 2016 Oct 3;29(4):392-401
7. T. Smith, M. Stankunas, K. Czabanowska, N. de Jong, S. O'Connor, S. Fowler Davis. Principles of all-inclusive public health: developing a public health leadership curriculum, *Public Health* (2015),
8. Schröder-Bäck, Peter; Duncan, Peter; Sherlaw, William; Brall, Caroline; Czabanowska, Katarzyna (2014) Teaching Seven Principles for Public Health Ethics: Towards a Curriculum for a Short Course on Ethics in Public Health Programmes. *BMC Medical Ethics* 15:73.
9. Katarzyna Czabanowska, Kenneth A. Rethmeier, George Lueddeke, Tony Smith, André Malho, Robert Otok, Mindaugas, Stankunas. Public Health in the 21st Century: “Working Differently Means Leading and Learning Differently” (A qualitative study based on interviews with European public health leaders). *European Journal of Public Health* 2014; doi: 10.1093/eurpub/cku043.
10. Katarzyna Czabanowska, André Malho, Peter Schröder-Bäck, Daniela Popa and Genc Burazeri. 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.
11. Katarzyna Czabanowska: LEADERSHIP IN PUBLIC HEALTH: REDUCING INEQUALITIES AND IMPROVING HEALTH. Eurohealth incorporating Euro Observer — Vol.20 | No.3 | 2014
 12. Pampuri O, Czabanowska K, Hysa B, Roshi E, Burazeri G. Public health leadership competency level among health professionals in a South Eastern European country (Original research). *SEEJPH* 2015, posted: 10 February 2015. DOI 10.12908/SEEJPH-2014-40
 13. Orjola PAMPURI, Katarzyna CZABANOWSKA, Enver ROSHI, Genc BURAZERI, A Cross-cultural adaptation of public health leadership competency framework in Albania. *Management în sănătate*. XVIII/2/2014; pp. 21-24
 14. Suzanne Hobbs, Mindaugas Stankunas , Ken Rethmeier, Mark Avery, Katarzyna Czabanowska. Clinical leadership improves health outcomes, but do we have it? *The Lancet*, 11/2013; 382(9903):1483-4. DOI:10.1016/S0140-6736(13)62285-0].
 15. Katarzyna Czabanowska, Tony Smith, Mindaugas Stankunas, Mark Avery, Robert Otok. Transforming public health specialists to public health leaders. The role of LEPHIE project. *The Lancet*. 2013 Feb 9;381(9865):449-50. doi: 10.1016/S0140-6736(13)60245-7
 16. Katarzyna Czabanowska, Tony Smith, Karen D. Könings, Linas Sumskas, Robert Otok, Vesna Bjegovic-Mikanovic, and Helmut Brand. In search for Public Health Leadership Competency Framework to support leadership curriculum – a consensus study. *The European Journal of Public Health* 2013; doi: 10.1093/eurpub/ckt158.
-