



9th European Public Health Conference

9 - 12 November 2016

Vienna, Austria

# Vienna 2016

# All for Health – Health for All

Workshop:

Health assessments in support of decision-making

*Training for health assessments and public health leadership  
through immersive and experiential learning*

Martin Mengel, Agence de Medecine Préventive, Paris France

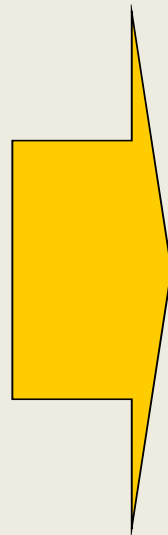
Kasia Czabanowska, Maastricht University

# Background

- Evidence-based decision making, as through health assessments, is part of the working routine within the health sector
- Health assessments are integrative and cross-cutting → novel, practice-based approaches for educational curricula are needed
- Challenges in international disease surveillance and public-health action on regional, continental, and global levels
- Working in institutions confronts public health leaders with political sensitivities and the need to balance national and European mandates.
- Importance of communicating of evidence for PH leaders → Introduction in public health academic curricula to meet training needs
- Master of Health Policy and Management and European Public Health (Maastricht University)
- A case study on the use and communication of evidence and leadership through immersive training and students' satisfaction

# Levels of leadership and areas of communications skills

- Personal leadership
- Team leadership
- Agency leadership
- Community leadership
- Professional leadership



- Interpersonal communication
- Active listening
- Public speaking
- Interviewing
- Written communication
- Computer skills
- Media advocacy
- Cultural sensitivity
- Feedback
- Delegation
- Framing
- Dialogue, discussion, and debate
- Meeting skills
- Health communications
- Social marketing
- Mentoring and facilitation
- Conflict resolution
- Negotiation

# Educational process and knowledge co-creation:

- Groups of students discuss and act out different levels of leadership:
- Personal level: Why do we do what we do?
  - Motivation, vision, self-perception
  - Case/study adapted from my personal experience
- Intra-institutional level: What do those around us do and why?
  - How do we perceive each other, how do we perceive ourselves?
- Inter-institutional level: Institutions also show “behaviour”. How do they behave and why?
- What is the evidence-base behind the actions of all actors?

## **Case Study – Lead a Pan-European Outbreak Investigation**

By Martin Mengel, MD MSc MSE

### **Summary**

Modern international disease surveillance and public-health action unfolds on a regional, continental, and even global scale. This context poses several challenges: intercultural leadership, political sensitivities, balancing national and European mandates.

### **Learning Objectives**

- Identify leading public-health organizations in Europe on national and European level
- Identify political constraints affecting leadership in public-health on European level
- Identify cultural constraints affecting leadership in public-health on European level
- Lead a group of people with different, partly conflicting interests
- Lead over distance

## The Learning case: A Pan-European disease outbreak

A rise in cases of severe diarrhoea due to a rare serotype of *Salmonella* has been detected in country A. Responding to an urgent ECDC request, a total of 5 EU Member States report potentially associated cases.

Following reports of similar biological profiles and travel related cases from several countries in the EU, the ECDC in fulfilment of its mandate to facilitate the development and implementation of joint actions convenes a teleconference (TC) with the Ministries of Health from the affected countries.

As the majority of cases reported in country A are not travel related, it is suggested that it is likely that the source of infection is in A, a locally consumed product of local or imported origin. The country A participant refutes this hypothesis and refuses to allow any further studies. He suggests that the published literature points to country B as the source for this . Its spokesperson is outraged.

As an organizer of this TC, how do you react?

→ At the end, the groups get to read the publication that resulted from an actual, similar outbreak investigation

# Motivations and Concerns in Institutional Interactions

The "understand each other" - Matrix						
Previous experiences, feelings, expectations, attitudes of A towards B						
A → B	ECDC	WHO	CDC	Country A	Country B	Country C
ECDC						
WHO						
CDC						
Country A						
Country B						
Country C						

## Results: High Student performance and Satisfaction

	Grades for		
	<u>Presentation</u>	<u>Paper</u>	<u>Total</u>
Group 1	8	9	8,5
Group 2	9	9	9
Group 3	9	8	8,5
Group 4	9	8	8,5
Group 5	9	8,5	8,75

TRAINING 3: Leadership in European Public Health		<i>N</i>	<i>M (1-10)</i>		<i>SD</i>
4b.	Overall grade for this training:	19	8.0	+	0.6
		<i>N</i>	<i>M (1-5)</i>		<i>SD</i>
4c.	The assignments of the training were clear	20	3.5		0.9
4d.	The supervision during the training was sufficient	20	4.4	+	0.8
4e.	The feedback on the assignments was helpful	20	4.2	+	0.8
4f.	The training fits with the content of the unit	20	4.3	+	0.7



# Lessons learnt

- Learning through an authentic experience like a real life story developed and presented by a public health leader involved in similar events and collaboration, co/creation of knowledge and understanding leads to high student performance and satisfaction
- Immersive experiential learning is an effective method to train public-health leaders to develop and practice competencies in:
  - understanding the importance and use of scientific evidence,
  - Communication
  - Negotiation
  - Cultural awareness
  - Coalition building

# Recommendations

- Train necessary skills as early as possible, e.g.:
  - Generating, using and communicating evidence
  - Wide array of public-health tools, including health assessment
- Create an authentic learning experience
  - Including a well-balanced mix between academic excellence and health professionals teaching real-life example
  - Immersive and experiential learning, such as teaching through case studies would be an effective way to teach conducting and using health assessments

# Thank you for your attention!

Further info:

- Kasia Czabanowska:  
[kasia.czabanowska@maastrichtuniversity.nl](mailto:kasia.czabanowska@maastrichtuniversity.nl)
- Martin Mengel:  
[mmengel@aamp.org](mailto:mmengel@aamp.org)