УДК 614.253:316.728
DOI 10.11603/1681-2786.2016.4.7549

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ON THE ISSUE OF TRAINING OF PUBLIC HEALTH SPECIALISTS

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Purpose: to study approaches to training of public health specialists in other countries, the recommendations of European Centre for Prevention and Disease Control (ECDC); and to propose the system of training of public health specialists in Ukraine.

Materials and methods. Materials for the study were the systems of training of public health specialists, similarities and differences between public health physician specialists in Russia, Kazakhstan, Uzbekistan, studied the recommendations of European Centre for Disease Prevention and Control (ECDC). The following methods were used: structural and logical analysis, content analysis, descriptive modeling. The system approach was the methodological base of research.

Results and conclusions. During research were analyzed the training system of public health specialists in Russia, Kazakhstan, Uzbekistan, studied the recommendations of European Centre for Prevention and Disease Control which allowed to recommend data for using and implementation for the training of public health specialists in Ukraine.

KEY WORDS: **public health, specialist, training, system.**

Today's interconnected world has produced a distinct need for physician specialists in public health and preventive medicine. As the industrialized world confronts aging populations, rising health care costs, and a growing epidemic of chronic disease, it is clear that the focus of health care must become more preventive than curative. Although public health and preventive medicine exists in various forms worldwide, the literature has not yet examined different national strategies for postgraduate medical training in this unique speciality [5;12].

The public health system has been forming in Ukraine since 2015 [5;8]. SE "Public Health Center of Ministry of Public Health of Ukraine" was established in 2016. Also, in the same year, the Cabinet of Ministers of Ukraine decided to introduce a specialty "public health" in Ukraine [1;6].

The changes to the public health system provide real opportunities to make a significant impact on the health of the population. Central to this is ensuring that the public health system continues to have a highly skilled and motivated workforce across all three domains of public health – health protection, health promotion and healthcare public health – wherever they are in the system. It is necessary to encourage a discussion of the list of core competencies by experts in the field of public health, and also to review and update the list at regular intervals, because public health practice and knowledge evolves.

The public health knowledge and intelligence function underpins the delivery of public health practice across all three domains. This function concerns the management of knowledge needed to inform action including: analysis of data and statistics; learning from practical experience and sharing best practice; and implementing new knowledge gleaned through research. Staff working in knowledge and intelligence roles has a wide range of skills, spanning analysis, statistics and epidemiology, alongside knowledge management, library and information services, as well as interpretation and evaluation [11;14;15].

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Materials and methods. During research was analyzed the system of training of public health specialists, similarities and differences between public health physician specialists in Russia, Kazakhstan, Uzbekistan, studied the recommendations of European Centre for Disease Prevention and Control (ECDC). The following methods were used: structural and logical analysis, content analysis, descriptive modeling. The system approach was the methodological base of research.

Results and discussion. The analysis of the training system of public health specialists in Russia [2;3], Kazakhstan [4], Uzbekistan [7] and recommendations of European Centre for Prevention and Disease Control allowed to recommend for using the following data in Ukraine.

Public Health Medicine is an area of specialisation in the branch of medical practice that specialises in

public health. Public Health has been defined as the science and art of preventing disease, prolonging life and promoting health through the organised efforts of society. The principal aims of Public Health Medicine are: to provide leadership and advocacy for health in all policies; to identify, define and describe the health needs of populations with due consideration to vulnerable groups; to prioritise and plan for the provision of optimal, evidence-based preventive and health care services to the population and particular target groups within; to monitor and evaluate the quality and effectiveness of such services There are several operational areas in specialisation within Public Health Medicine, which include the following: development and management of health information systems; surveillance and control of communicable and non-communicable diseases; epidemiology and research; health promotion and disease prevention; environmental health policy, surveillance and control of environmental health hazards; assessing the evidence of effectiveness of health and healthcare interventions, programmes and services; health care planning and health services research; health care services standards setting, monitoring and evaluation; health care management; health policy and strategy development and implementation; strategic leadership and advocacy for healthy public policy; collaborative working for health, including International Public Health [9;12].

The Public Health Medicine Specialist Training Programme includes both an

academic and a practical component. Trainees are required to attain the skills and knowledge in the following competence areas: 1) surveillance and assessment of the population's health and well-being, identification of health and social determinants and identification of inequalities; 2) promoting and protecting the population's health and well-being; 3) assessing the evidence of effectiveness of health and healthcare interventions, programmes and services and developing quality and risk management within an evaluative culture; 4) collaborative working for health, working with and for communities; 5) developing health programmes and services and reducing inequalities; 6) policy and strategy development and implementation; 7) strategic leadership and advocacy for health; 8) research and development; 9) ethically managing self, people and resources; 10) Academic Public Health.

The public health workforce should be receptive to research and innovation, so that patients and the public receive the best quality and most cost-effective public health advice and interventions. Research provides the evidence that public health practitioners and advisers will need in order to identify the best quality advice to offer the public and the most cost-effective public health interventions. Public health evaluation and research will therefore be critical in enabling public health practice to develop. Its necessary conduct high quality research to increase the evidence base for effective public health practice [10;11].

Public health specialists must:

- to deal with complex public health issues either lead, or work with senior colleagues on the planning and delivery of policies and programmes ("interventions") that aim to influence the health of groups of people ("populations") at local, regional and national levels;
- to plan and lead the evaluation of such programmes;
- to provide professional, evidence-based, and ethical advice to guide the commissioning of services, ensuring that they are high-quality, clinically safe, cost-effective, and that they will improve health and wellbeing and reduce health inequalities across primary care, secondary care, and social care;
- to lead on the gathering and interpretation of information;
- to work with a range of organisations;
- to be responsible for departmental budgets, daily management of staff, supervision (eg of public health specialty registrars), delivery of core training, and the commissioning of research projects [11].

Competencies for public health specialists in the field of epidemiology are very important. Two main elements are critical for building and strengthening epidemiological capacity: infrastructure – resources in terms of budget, facilities, equipment, etc. of national public health administrations; human resources – sufficient numbers of trained and/or experienced professionals. To fill the gaps in professional performance, it is necessary to define the tasks and skills required of field epidemiologists. The development of such a list of core competencies was highlighted as a priority among the conclusions of the first ECDC consultation with EU Member States on training in field epidemiology. The ECDC, along with a group of experts, has developed a list of suggested core competencies for field epidemiologists working in public health institutions in the European Union, at all levels, from sub-national (provinces, districts, regions) to national and supra-national (European and international), which can be recommend for training specialists of public health in Ukraine. An agreed definition of the term "field epidemiologist" is not available, but the group of experts has proposed one for the purpose of this activity. The term "Field epidemiologist": an epidemiologist who applies the science of epidemiology to the prevention and control of public health problems and works in intervention and response activities [11].

Core competency is a combination of knowledge, skills and abilities that a professional must demonstrate and that are critical to perform work effectively. Core competencies are defined first for middle-level professionals, as opposed to junior or senior epidemiologists. Despite the risk of creating

artificial categories in the career development ladder, this approach has been taken to facilitate the process. At a later phase, the competencies can be developed for other career stages. The term “core” indicates that the competencies should be a minimum pre-requisite for any field epidemiologist, regardless of the level he/she occupies in the public health administration. They should be common to all professionals in this field. The list may have several users: employers, such as public health institutes and administrative bodies at all levels, who may use the list to assess their epidemiological capacities and needs; epidemiologists themselves who may use the list for planning and evaluating their own career development. The list can be use for design strategies and programmes to train future generations of epidemiologists in order to meet the needs of public health agencies. The list of core competencies in the public health system can help to: agree on a definition of “field epidemiologist” and achieve the recognition of the profession; allow Member States to assess their resources and define their needs; set priorities by teachers and curriculum developers; and increase the comparability of field epidemiology training programmes, which could facilitate mobility in Ukraine through accreditation initiatives [9–15].

List of core competencies for field epidemiologists in the public health administrations of the European Union, grouped by categories and domains (table). This list of core competencies is intended to be used as a reference document for various institutions and individuals related to public health. It will be updated periodically, in collaboration with its intended users (public health institutes, training programs, etc.). The list may have several users: employers, such as public health institutes and administrative bodies at all levels, who may use the list to assess their epidemiological capacities and needs; and epidemiologists who may use the list for planning and evaluating their own career development. In addition, teachers and facilitators can use the list to design strategies and programs to train future generations of epidemiologists in order to meet the needs of public health agencies. This list is not intended as a regulatory document, a prescriptive text or a ready-to-use curriculum [13;15].

Table. **Areas and domains in public health epidemiology**

Category	Area	Domain
Specific for the profession	Public health	1. Public health science
		2. Public health policy
	Applied epidemiology	3. Risk assessment
		4. Public health surveillance
		5. Outbreak investigation
		6. Epidemiological studies
		7. Infectious diseases
		8. Laboratory issues
		9. Public health guidance
Common to other professions	Biostatistics	10. Probability
		11. Inferential statistics
		12. Sampling
	Applied informatics	13. Internet
		14. Statistical and other data analysis
		15. Editing and presentations
	Communication	16. Risk communication
		17. Written communication
		18. Oral communication
		19. Use of new technologies
	Management	20. Planning and use of resources
		21. Team building and negotiation
	Capacity development	22. Mentorship
		23. Training
	Ethics	24. Protection of individuals
		25. Confidentiality
		26. Conflicts of interests

Areas specific for the profession includes two areas such as the area of public health and the area of applied epidemiology [13].

Public health includes two domains: domain "public health science": 1. Use current knowledge of epidemiology of diseases to guide public health or epidemiological practice. 2. Provide epidemiological input to develop measurable relevant objectives of public health programs. 3. Use knowledge of specific sociological and cultural factors in the population to conduct studies and recommend public health actions relevant for the affected community. And domain "public health policy": 1. Understand and analyze legal public health policy documents at local, national and European level. 2. Use epidemiological findings to plan public health programs. 3. Implement public health programs: translate policy into public health practice. 4. Identify effective health promotion measures for specific problems. 5. Identify appropriate health prevention measures for specific problems. 6. Evaluate the impact of an intervention on population health. 7. Measure health outcomes to guide decision making in prevention strategy. 8. Use evaluation results of program progress towards objectives and outcomes in further program planning and modification. 9. Identify an appropriate public health intervention based on surveillance data [13].

Applied epidemiology includes next domains: 1) domain "Risk assessment" (identify sources of information about potential public health threats, conduct risk assessments: verify, using critical thinking, if a public health problem exists and describe its magnitude, identify surveillance data needs for risk assessments of public health threats); 2) domain "Public health surveillance" (Run a surveillance system, Conduct surveillance data management, Perform descriptive analysis of surveillance data, Interpret disease and public health events trends from time series analysis, Identify key findings from surveillance data analysis and draw conclusions, Evaluate surveillance systems, Recognise the need for and set up a new surveillance system, Use event-based surveillance, also called epidemic intelligence, to detect health threats, Be familiar with laws on surveillance and reporting of communicable diseases at national, EU level and globally (International Health Regulations); 3) domain "Outbreak investigation" (Create a case definition and adjust it as necessary during the investigation, Describe the outbreak in terms of person, place and time, Generate hypothesis about the cause and/ or risk factors of the outbreak, Conduct analytical epidemiological investigation to identify the source, Recommend appropriate evidence based measures to control the outbreak, Report and present results of an investigation); 4) domain "Epidemiological studies" (Write a study protocol using investigation techniques consistent with the public health problem, Conduct epidemiological studies, Report and present results of a study, Recommend evidence-based interventions in response to epidemiological findings); 5) domain "Infectious diseases" (Be familiar with transmission dynamics of infectious diseases); 6) domain "Laboratory issues" (Interpret the diagnostic and epidemiological significance of reports from laboratory tests, Be familiar with different methods for diagnosis and typing, including molecular tests, Communicate effectively with the laboratory team); 7) domain "Public health guidance" (Identify, review and assess relevant literature and other evidence, Develop evidence based guidelines for surveillance, prevention and control of communicable diseases and other acute public health events, Identify appropriate target groups for guidelines) [11;13].

General areas, common to other professions includes next areas such as:

1. Biostatistics (domain "Probability": apply basic concepts of probability; domain "Inferential statistics": calculate and interpret point estimates and confidence intervals of measures of central tendency and dispersion, calculate and interpret point estimates and confidence intervals of measures of disease frequency; calculate and interpret point estimates and confidence intervals of measures of association and impact; calculate and interpret significance tests; domain "Sampling": select an appropriate sampling strategy).

2. Informatics (domain "Internet": use internet sources to conduct literature search; use web-enabled databases; domain "Statistical and other data analysis": use database software packages for entering and managing data; use software packages for statistical analysis (measures of association, testing, and logistic regression; draw conclusions from the results of analysis; domain "Editing and presentations": use software for writing, editing and creating presentations).

3. Communication (domain "Risk communication": apply the basic principles of risk communication, adjusting the message when presenting results of an investigation to different audiences: media, general public, professionals and policy makers; domain "Written communication": write a report of an epidemiological investigation for decision makers; write an article for a scientific journal; write an abstract; write a press release; produce documents, reports, letters, meeting minutes, etc; domain "Oral communication": incorporate interpersonal skills in communication with colleagues and with the other audiences; analyse and synthesise main points in a speech; provide objective feedback (descriptive, rather than judgemental); domain "Use of new communication technologies": use communication technologies (videoconference, teleconference, e-mail, etc.) effectively).

4. Management (domain "Planning and use of resources": plan, prioritise and schedule tasks in a project; monitor progress and quality against specific

targets, adjust schedules and make changes if necessary; manage available resources (staff, time, budget, etc) effectively; conduct epidemiological activities within the financial and operational planning context; prepare an activity report; domain "Team building and negotiation": be an effective team member, adopting the role needed to contribute constructively to the accomplishment of tasks by the group (including leadership); promote collaborations, partnerships and team building to accomplish epidemiology programme objectives; develop community partnerships to support epidemiological investigations; mutually identify those interests that are shared, opposed or different with the other party to achieve good collaborations and conflict management).

5. Capacity development (domain "Mentorship": mentor peers or junior epidemiologists; assist others to clarify thinking, create consensus, and develop ideas into actionable plans; domain "Training": train junior epidemiologists).

6. Ethics (domain "Protection of individuals": respect and adhere to ethical principles regarding human welfare; follow ethics principles and guidelines for planning studies, conducting research, and collecting disseminating and using data; apply relevant laws to data collection, management, dissemination and use of information; domain "Confidentiality": respect and adhere to ethical principles regarding data protection and confidentiality regarding any information obtained as part of the professional activity; domain "Conflicts of interests": handle conflicts of interests) [11;13;15].

Conclusions

The system of preparation of public health specialists in Ukraine in accordance with the leading European trends was proposed. These materials contain a complete data of categories, areas and domains, as well as a complete list of proposed competencies. The list of competencies also includes general competencies outside the field of public health or applied epidemiology if these competencies are essential to accomplishing the task at hand.

Prospects of the further researches. Public health is changing, and the public health workforce will need to change with the aim to understand our public health workforce better, to give a clearer roadmap for future career pathways and skills development, to give assurance on the competence and professionalism of all public health specialists, to improve connections between commissioners of education and training and the end users, to promote leadership skills, to embed public health knowledge and capacity across the healthcare workforce. The impact of this strategy will be monitored and will enable to identify what further actions might be needed to ensure of normal level and quality of education of workforce on specialty "public health" in Ukraine.

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К ВОПРОСУ О ПОДГОТОВКЕ СПЕЦИАЛИСТОВ ПО ОБЩЕСТВЕННОМУ ЗДОРОВЬЮ

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Цель: изучить подходы к подготовке специалистов общественного здоровья в других странах, рекомендации Европейского Центра профилактики и контроля над заболеваниями; предложить систему подготовки специалистов по общественному здоровью для Украины.

Материалы и методы. Материалами исследования были данные о подготовке специалистов по общественному здоровью в России, Казахстане, Узбекистане, рекомендации Европейского Центра по профилактике и контролю над заболеваниями. Использованы следующие методы: структурно-логического анализа, контент-анализа, описательного моделирования. Методической базой стал системный поход.

Результаты и выводы. Проведен анализ систем подготовки специалистов по общественному здоровью в России, Казахстане, Узбекистане, изучены рекомендации Европейского Центра профилактики и контроля над заболеваниями, что позволило рекомендовать для использования и внедрения в Украине данные относительно подготовки специалистов по специальности «Общественное здоровье».

КЛЮЧЕВЫЕ СЛОВА: **общественное здоровье, специалист, подготовка, система.**

ДО ПИТАННЯ ПРО ПІДГОТОВКУ СПЕЦІАЛІСТІВ З ГРОМАДСЬКОГО ЗДОРОВ'Я

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Мета: вивчити підходи до підготовки спеціалістів з громадського здоров'я в інших країнах, рекомендації Європейського Центру з профілактики та контролю захворювань; запропонувати систему підготовки спеціалістів із громадського здоров'я для України.

Матеріали та методи. Матеріалами дослідження слугували дані щодо підготовки спеціалістів з громадського здоров'я у Росії, Казахстані, Узбекистані, рекомендації Європейського Центру з профілактики та контролю захворювань. Використано наступні методи: структурно-логічного аналізу, контент-аналізу, описового моделювання. Методичною базою дослідження став системний підхід.

Результати та висновки. У ході дослідження проведено аналіз систем підготовки спеціалістів із громадського здоров'я у Росії, Казахстані, Узбекистані, вивчено рекомендації Європейського Центру з профілактики та контролю захворювань, що дозволило рекомендувати для використання та запровадження в Україні дані щодо підготовки фахівців за спеціальністю «Громадське здоров'я».

КЛЮЧОВІ СЛОВА: **громадське здоров'я, спеціаліст, підготовка, система.**

Рукопис надійшов до редакції 20.12.2016 р.

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