



Future public health governance: investing in young professionals

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COVID-19 has taught us how fragile our public health systems are and how much we rely on skilled leadership in healthcare, academia, and politics. The pandemic has

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uncovered an ugly truth—that public health leadership can prevent disaster or bring failure. The public and global health ecosystem is becoming increasingly volatile and uncertain. Over the next 100 years, public health leaders will have to tackle new and complex challenges as they emerge. For that to be successful, we need to prepare and empower that next generation to recognize and solve these problems. That requires considerable investments in nurturing them early in their careers. Young professionals are the de facto future of public health. They are the sources of innovative ideas, are tuned into emerging topics, and can suggest fresh ways to approach them. We will bequeath their generation a dynamic, fluid public health landscape and we must prepare them to meet the likely challenges of the next century. We need to involve them in decision-making, encourage interdisciplinary collaborations, foster communication skills, and equip them with the skills they need to face the future.

Socio-political and environmental changes over the last hundred years have created a variety of new public health challenges (Koplan and Fleming 2000). These challenges will likely continue to grow over the next century. We face and will be facing 1) an ageing population with increasingly prevalent chronic conditions and comorbidities that are straining our healthcare systems, (2) mounting evidence that ecosystems, biodiversity, human-animal interaction, globalization, and health outcomes are complex and interrelated, (3) the disruptive force of health digitalization, which raises new ethical dilemmas about privacy, security, access and (mis)use, and (4) persistent health inequities (Koplan and Fleming 2000; Menvielle et al. 2017). To meet these complex challenges, future public health leaders will need to produce novel ideas, unconventional solutions, and adopt interdisciplinary approaches.

We, therefore, argue that we need to invest in the public health leaders of tomorrow, in academia, policy circles, and beyond. First, we believe that we should invest in actively involving young public health professionals in decision-making. Decision-making processes go beyond merely making the right choice. They are about

formulating arguments and defending them, communicating them to others, and effectively expressing opinions, all of which are essential elements of good leadership. Second, we argue for collaborations, especially across disciplines and from an early stage on, allowing young public health professionals to develop much needed interpersonal skills and broaden their horizons. We especially argue for collaborations across fields that traditionally tend to miscommunicate, e.g., science and policymaking (Wellstead et al. 2018). In public health, it is essential to understand the value of dialogue, partnership, and cooperation. Future public health leaders must be able to work productively with communities, stakeholders, and interest groups, allowing them to leave their professional boundaries and build partnerships. Third, we must invest in building capacity to translate knowledge and communicate risks to interest groups, stakeholders, and the general population. Public health is all about collective action, and collective cannot be achieved without communication. Finally, we argue for more training opportunities available to young public health professionals, targeting future-oriented and transferable skills like critical thinking and conceptual reasoning.

A good example of such an investment is the International Journal of Public Health Young Researcher Editorial (YRE) series. It was launched in 2018 and is designed to give this new generation of public health experts a voice by sharing their views in an environment in which less well-established and renowned researchers are often overlooked (Berger and Künzli 2018). The YRE also aims to encourage young public health researchers to develop their academic writing, communication, and collaboration skills.

Since its establishment, it has published ten high-quality editorials across five countries, addressing a broad array of topics, from vaccinations to palliative care, aging, digital health, and nutrition. It is autonomously led by a team of young researchers, for young researchers, acting as a training platform that serves all the investments mentioned above. It fosters decision-making, empowers collaborations, fosters communication skills, and facilitates transferable skills. The YRE will continue to invest in the public health leaders of tomorrow, especially those in underrepresented communities and resource-limited settings while fostering diversity of opinions across a broad range of topics that cover all facets of the ever-changing public health ecosystem. We would like to see more institutions do the same.

References

- Berger A, Künzli N (2018) Welcome to the third training pillar of IJPH: young researcher editorials. *Int J Public Health* 63:1009–1010. <https://doi.org/10.1007/s00038-018-1159-6>
- Koplan JP, Fleming DW (2000) Current and future public health challenges. *JAMA* 284:1696–1698. <https://doi.org/10.1001/jama.284.13.1696>
- Menvielle L, Audrain-Pontevia AF, Menvielle W (2017) *The digitization of healthcare: new challenges and opportunities*. Palgrave Mcmillan, London
- Wellstead A, Cairney P, Oliver K (2018) Reducing ambiguity to close the science-policy gap. *Policy Des Pract* 1:115–125. <https://doi.org/10.1080/25741292.2018.1458397>

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