

# Framing public health education to meet the needs of professionals for war and peacebuilding: A commentary<sup>1</sup>

Colette Cunningham<sup>1</sup>  <https://orcid.org/0000-0001-8641-341X>

Lisa Wandschneider<sup>2</sup>  <https://orcid.org/0000-0001-7527-0353>

<sup>1</sup> School of Public Health, University College Cork, Ireland

<sup>2</sup> Department of Epidemiology and International Public Health, School of Public Health, Bielefeld University, Bielefeld, Germany

*Address for correspondence:* Colette Cunningham, C.Cunningham@ucc.ie

## ■ Abstract

Public health plays a crucial role in restoring, protecting and promoting health of affected populations in times of war and armed conflict. Even though health effects of war are well explored, the development of competencies to address the public health impact had received little attention in public health curricula. We suggest building upon the WHO-ASPHER Competency Framework originally designed to strengthen Public Health Services in the European Region. It provides an already established framework for Schools of Public Health and additional public health organizations and, at the same time, can be extended to understand and prevent the political, economic, social, and cultural determinants of war.

**Key words:** ASPHER, Europe, competencies, peacebuilding, peace through health, public health professionals, public health education, war, war prevention

**Słowa kluczowe:** ASPHER, Europa, edukacja dla zdrowia publicznego, kompetencje, pokój, specjaliści zdrowia publicznego, wojna

## ■ War and public health

On February 24, 2022, the world watched in dismay as Russia invaded Ukraine. Six months into the conflict and the war is having devastating consequences for health and health services. This war came on the back of the two-year COVID-19 pandemic, with countries across Europe, including Ukraine, struggling to recover from the great pressures faced by health services during the pandemic, especially the needs of those with serious infectious and chronic conditions. The Ukrainian health system, suddenly, was also dealing with casualties from attacks on densely populated areas, the destruction of healthcare infrastructure, a displaced workforce along with the lack of healthcare supplies [1, 2].

War and armed conflict have detrimental effects on population health—also on a global scale. Therefore, public health plays a crucial role in restoring, protecting and promoting health of affected populations in times of war. Health related effects of war and war-like scenarios, as well as well public health efforts to prevent war and promote

peace, have been increasingly recognized and conceptualized in public health scholarship [3, 4]. But the question is, are Schools of Public Health (SPHs) preparing public health graduates to deal with the multiple issues of war and public health? In May 2022, The Medical University of Gdansk and ASPHER held a Special Meeting on the War in Ukraine and Public Health, where discussions explored the impact of war on public health and the need for public health curriculum adaptations. This commentary is based on presentations from the authors at the Gdansk Special Meeting.

## ■ The role of schools of public health in times of war

In 2020, the World Health Organization (WHO) and the Association of Schools of Public Health in the European Region (ASPHER) stated, “The need to invest in the public health workforce is as great now as it has ever been” [5]. It is even more true today in the face of the Ukrainian war. The need for a competent public health workforce to respond to the healthcare needs of war is crucial [4, 5]. Scientific

discourse on integrating war in public health teaching is scarce, especially in Europe. As early as 2009, the American Public Health Association approved the policy statement, “The Role of Public Health Practitioners, Academics, and Advocates in Relation to Armed Conflict and War,” acknowledging then, that even though the health effects of war were well known, the development of competencies to prevent war had received little attention. It also proposed competencies for SPHs to integrate special programmes into professional preparation in order to increase understanding and to prevent the political, economic, social, and cultural determinants of war, particularly militarism [6]. A content analysis of public health curricula in 10 SPHs in the US, highlighted that these addressed primarily competences relating to emergency preparedness, disaster response and refugee health while issues like peace promotion, proliferation and weapons were neglected. A systematic and comprehensive approach to war and primary prevention thereof, acknowledging the cross-sectoral interactions (e.g., military personal, humanitarian organizations, economical and policy-based trade-offs), was lacking [7].

## Adapting public health curricula

To date, much of the focus of public health education has been on the importance of strengthening competencies of the health workforce to achieve the Sustainable Development Goals (SDGs) and Universal Health Coverage (UHC), with little or no mention of training or indeed equipping health care professionals to deal with the consequences

of war—or the role of public health in preventing war and promoting peace. Essentially, the focus of public health training puts an emphasis on the causes of disease and limiting adverse health outcomes in populations [6]. So, how then can we foster change in public health teaching practices, and integrate competencies relating to the consequences of war on health?

We suggest building upon the WHO-ASPHER Competency Framework (Fig. 1) that was originally designed to strengthen Public Health Services in the European Region [5]. Understanding that competencies are defined here as combinations of individual attributes (such as knowledge, skills and personal or professional attitudes) that individuals require to undertake the role they are expected to take on [5]. It provides an already established framework for SPHs and additional public health organizations and, at the same time, can be extended to understand and prevent the political, economic, social, and cultural determinants of war. Thereby, it presents an ideal basis for integrating specific training related to war and its consequences and for building public health competencies in this area.

The WHO-ASPHER Competency Framework (Fig. 1) already promotes a multidimensional framework through the three main categories: 1) Content and Context; 2) Relations and Interactions; 3) Performance and Achievements.

Along with the outlined set of competencies in the framework, we outline the additional competencies specific to war and peacebuilding that could be included to ensure public health professionals are prepared for dealing with war and peacebuilding work proactively.

### The WHO-ASPHER Competency Framework categories are:

#### Content and context

1. Science and practice
2. Promoting health
3. Law, policies and ethics
4. One Health and health security

#### Relations and interactions

5. Leadership and systems thinking
6. Collaboration and partnerships
7. Communication, culture and advocacy

#### Performance and achievement

8. Governance and resource management
9. Professional development and reflective ethical practice
10. Organizational literacy and adaptability



Figure 1. WHO-ASPHER Competency Framework

Source: [5].

## 1. Content and Context

- a) *Science and Practice*: Explore evidence of disease in war and conflict and how it influences practice in both war and peacebuilding. The implications of war and conflict on healthcare and the role of public health including peacebuilding.
- b) *Promoting Health*: Adapt traditional health promotion strategies to the context of war. For example, a health promotion campaign to empower war-torn and displaced populations and to learn lifesaving knowledge and skills such as a Water, Sanitation and Hygiene (WASH) programme [8]. This could prevent the spread of water-borne diseases and avert an outbreak of a public health emergency. Such programmes also have potential to be used in peacebuilding programmes for conflicting communities.
- c) *Law Policies and Ethics*: Lessons on the international legal frameworks relevant to war, peacebuilding and healthcare as well as the possible ethical dilemmas faced in this context. Applying a rights-based approach to healthcare during war and peacebuilding.

## 2. Relations and Interactions

- a) *Leadership and Systems Thinking*: Practical training for the application of Public Health Emergency Management and leadership. Teaching preparedness through *The Preparedness Cycle*. Risk communication in a time of war and peacebuilding. Conflict resolution skills training.
- b) *Collaboration and Partnerships*: Working together in the midst of war and peacebuilding; understanding who are the key players, relationships, organizations, collaboration and partnerships.
- c) *Communication, Culture and Advocacy*: Communication skills for Complex Humanitarian Crises (CHE). Cultural competencies. Advocacy communication strategies and skills.

## 3. Performance and Achievement

- a) *Governance and Resource Management*: The role of governance in war and peacebuilding. Essential resource management skills in the midst of CHE.

- b) *Professional Development and Reflective Ethical Practice*: Specific emphasis on being able to act according to ethical standards with integrity and professional accountability for the public good in times of war and peacebuilding. Tools to manage conflict-of-interest situations when working in war-torn environments.
- c) *Organizational Literacy and Adaptability*: Providing tools to build resilience at times of threat or challenge. Personal and work-related stress management. Use of technology and social media in war and peacebuilding. The ability to use appropriate methods, digital technologies, data collection and storage of information in times of war and peacebuilding.

Public health opposes war intrinsically – but, at the same time, public health professionals need to be qualified to protect and restore population health in times of war to the greatest possible extent. ASPHER, has committed to take a leading role in advancing war and peace related competencies in the European context by establishing a Taskforce and bringing together Schools of Public Health across the region. The Task Force on War will focus on three key areas: 1) scientific advisement; 2) neighboring countries and refugee context; 3) training and broader academic context [9].

According to Oleksii Korzh, head of the Department of General Practice—Family Medicine at Kharkiv Medical Academy of Postgraduate Education,

Displacement of both people and medical staff, including specialists, and attacks on healthcare facilities have had a major impact on the healthcare system. Additionally, disruption to supply chains and systems means that necessary medicines and medical devices may not be available at the right place and at the right time. [...] the whole system is under pressure [10].

Public health professionals are forced to learn and adapt to new ways of working in times of war and peacebuilding. Therefore, it is of utmost importance to integrate war and peacebuilding into education programmes for public health professionals.

## Notes

1. The text was written by C.C. and L.W., both of whom contributed equally. All authors approved the final version prior to submission.

## References

1. Leon D.A., Jdanov D., Gerry C.J., Grigoriev P., Jasilionis D., McKee M., Meslé F., Penina O., Twigg J., Vallin J., Vågerö D., *The Russian Invasion of Ukraine and its Public Health Consequences*, “The Lancet Regional Health – Europe” 2022; 15 (100358), doi: <https://doi.org/10.1016/j.lanpe.2022.100358>.
2. WHO News release, *One Hundred Days of War Has Put Ukraine's Health System under Severe Pressure*, 2022, June 3, <https://www.who.int/news/item/03-06-2022-one-hundred-days-of-war-has-put-ukraine-s-health-system-under-severe-pressure> (accessed: 11.10.2022).
3. Levy B.S., Sidel V.W., *War and Public Health*, Oxford University Press 2008, doi: <https://doi.org/10.1093/acprof:oso/9780195311181.001.0001>.
4. Arya N., *Approaching Peace Through Health with a Critical Eye*, “Peace Review” 2019; 31 (2): 131–138, doi: <https://doi.org/10.1080/10402659.2019.1667560>.
5. WHO Regional Office for Europe, *WHO-ASPHER Competency Framework for the Public Health Workforce in the European Region*, Copenhagen 2020.

6. Wiist W.H., Barker K., Arya N., Rohde J., Donohoe M., White S., Lubens P., Gorman G., Hagopian A., *The Role of Public Health in the Prevention of War: Rationale and Competencies*, "American Journal of Public Health" 2014; 104 (6): e34–e47, doi: 10.2105/AJPH.2013.301778.
7. White S.K., Lown B., Rohde J.E., *War or Health? Assessing Public Health Education and the Potential for Primary Prevention*, "Public Health Reports" 2013; 128 (6): 568–73.
8. DEVEX, *WASH at the Heart of Peace and War*, podcast, 2021, <https://www.spreaker.com/user/15404881/wash-and-peacebuilding> (accessed: 27.08.2022).
9. Wandschneider L., Namer Y., Davidovitch N., Nitzan D., Otok R., Leighton L. et al., *The Role of Europe's Schools of Public Health in Times of War: ASPHER Statement on the War Against Ukraine*, "Public Health Reviews" 2022; 43 (1604880), doi: 10.3389/phrs.2022.1604880.
10. Holt E., *Ukraine Invasion: 6 Months on*, "The Lancet" 2022; 400 (10353): 649–650, [https://doi.org/10.1016/S0140-6736\(22\)01635-X](https://doi.org/10.1016/S0140-6736(22)01635-X).