

Remarks

by

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Regional Director, WHO South-East Asia***

at the

***Workshop on “Public Health Education in India:
Issues, Challenges and the Way Forward”***

***Tivoli Garden Resort, Chattarpur Road, New Delhi, India
18 August 2005***

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Challenges and the Way Forward”,
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**DR SAMLEE PLIANBANGCHANG, REGIONAL DIRECTOR,
WHO SOUTH-EAST ASIA REGION**

Colleagues,

Ladies and Gentlemen,

- I am very happy to be among high-level public health professionals this morning.
- I thank the organizers of the workshop for inviting me to say a few words on the topic of Public Health Education in India: Issues, Challenges and the Way Forward.
- It is a fact that India has had a strong foundation in public health education.
- We have had:
 - the All India Institute of Public Health and Hygiene in Calcutta,
 - the National Institute of Communicable Diseases in Delhi,

- the National Institute of Nutrition in Hyderabad, and
 - the National Tuberculosis Institute in Bangalore.
 - There are also many more public health education programmes being run in various medical colleges.
- All these institutes provide internationally reputed public health education in various specific areas.
 - During my time as a medical student in the early 1960s, any of our professors, if graduated from these institutes were considered to be really experts, and also very good teachers.
 - I personally had the privilege to visit NICD once during the 1970s.
 - I was very much impressed with many training curricula and programmes in epidemiology, developed and run by this institute.
 - India is perhaps, the only pioneer in this part of the world in the area of public health education.

- However, we would not have realized that what issues we had had in our public health interventions and services in this country until there was a plague outbreak in India in 1994.
- This was followed by a number of outbreaks of other communicable diseases, such as malaria, meningitis, dengue fever, diarrhoea and others.
- Some other diseases that were once under control, like tuberculosis, re-emerged.
- Then, we started talking about whether things had gone wrong with the public health system in the country.
- This type of situation was worrying all of us, including WHO, which is a public health organization.
- In 1999, we had our in-house review of the situation at the Regional Office with participation of concerned officials from the Ministry of Health and Family Welfare.
- It was concluded that public health infrastructure and services in India needed urgent attention, otherwise health of the public would be at a greater risk of becoming worse.

- This type of public health situation was prevailing, not only in India, but also in other countries in the South-East Asia Region.
- Therefore, at the end of 1999, WHO convened a Regional Conference on Public Health Education and Practice in the South East Asia Region in the 21st century in Calcutta.
- The overall purpose of this conference was to critically review the public health situation, including public health education and practice in the Region; and to identify effective ways and means to improve or strengthen such education and practice.
- In this perspective, we believe that the best way to strengthen public health infrastructure and services is through strengthening public health workforce.
- And the best way to strengthen public health workforce is through strengthening public health education.
- The main outcome of that Regional Conference was the Calcutta Declaration on public health.

- This Declaration provides a broad strategy and framework of action for strengthening public health education in the South-East Asia Region in this century.
- Since then, WHO has taken a number of actions in following up on the outcome of the Conference including the Calcutta Declaration.
- However, improvement in public health education has still a long way to go, if we would like to ensure the availability of effective public health interventions and services, which are the pre-requisite of good health for all people.
- I left WHO in 2000 and returned in 2004.
- As a part of my promise to the Member States, since the beginning of my Regional Directorship, I have placed improvement in public health at the top of my priority list, and, therefore, the public health initiative has been pursued by WHO with particular emphasis on public health education.
- In this initiative, which has a five-year time frame, we are pursuing activities in four main areas. These are:

1. Development of a regional strategic vision for improvement of public health education and practice in the Region. This is through a Strategic Advisory Group formed at the beginning of last year.
 2. Networking of public health education institutions, by linking the corresponding national institutions in the Region and outside, for countries to help each other.
 3. Direct support to countries in the establishment of public health education programmes/schools, and
 4. Strengthening of public health infrastructure, including public health education, through collateral activities. Contribution from existing public health programmes.
- In practice, each country may have its own specific approach in strengthening of public health infrastructure, education and practice.
 - For India, the infrastructure for public health education already exists. As I mentioned earlier, we should start this improvement and strengthening from what we already have.

- In addition, we should also pay special attention to the Community Medicine Programmes which are being run at various medical colleges.
- This approach, of involving medical colleges, will take us a long way in ensuring a close linkage between medical services provided through the network of medical institutions, and public health services, which are carried out in the community and population at large.
- At the same time, the Government of India has also launched an initiative to establish schools of public health through collaboration with the reputed schools of public health in the USA.
- This is also an excellent idea.
- These new schools may help to speed up the implementation of new ideas, new initiatives, and newly reformed educational programmes.

Colleagues,

- We urgently need public health workforce to effectively develop and implement public health programmes of the country.

- Public health programmes include malaria control, tuberculosis control, diarrhoeal disease control, water and sanitation, nutrition, immunization and many more.
- There are some specific features of public health programmes that need public health expertise in their development and implementation. These are:
 - Emphasis on health promotion and disease prevention;
 - Community and population-based;
 - Ecologically and environmentally based;
 - Multi-sectoral and multi-disciplinary;
 - Towards health for all and all for health; and
 - Particular attention to the poor, underserved and vulnerable groups of population.
- Furthermore, in light of today's global situation, there have been many rapid changes in the world.
- A lot of these changes have a direct bearing on health of the population, and, on the way, we develop and manage public health intervention programmes.

- These changes include globalization, liberalization of trade, advancement in information and communication technology, rapid worldwide transportation, and advancement in health science and technology.
- These need to be taken into account seriously when public health education programmes are developed for supporting today's public health interventions and services anywhere in the world.
- In addition, to be really effective, public health interventions and services have to be framed within the socio-cultural, political and economic context of the country concerned.
- Public health education, therefore, needs to produce a public health workforce that can fulfil this basic requirement in health development in each country.
- Public health work is meant to improve, not only the physical, but also the mental and social health and well-being of the population.
- Therefore, the country-specific situation is an important consideration in the development of a public health education programme in any particular country.

- Effective public health work can certainly help reduce the workload in medical institutions – when people are healthy, they will not fall sick, and, therefore, they do not need medical treatment.

Ladies and gentlemen,

- WHO will do everything possible to assist the Government of India in the improvement and strengthening of public health education in the country.
- I am sure my country office under the leadership of Dr Salim Habayeb, WHO Representative, will always be at the disposal of the Government, and at the disposal of all concerned and interested institutions in pursuing this noble mission in the health area.
- I finally thank you all for your kind attention, and I wish the workshop all success.
- Thank you.