Survey of Overseas Members

FPH International Committee

May 2007

Authors:

Jo-anne Alner, Specialist Public Health Trainee

South West London, Surrey and Sussex Training Programme

Isobel Duckworth, Specialist Public Health Trainee

Yorkshire and the Humber Training Programme

Sushma Acquilla, International Faculty Adviser

Faculty of Public Health
4 St Andrew's Place, London, NW1 4LB

Registered charity no. 263894

Executive Summary

As of May 2007, three hundred and ninety members of the Faculty reside in countries outside the UK. This document reports the findings of a survey of the needs of those overseas members, which was undertaken by the Faculty of Public Health (FPH) International Committee during December 2006. The objectives of the survey were to:

- engage overseas members more actively in Faculty affairs
- review what the Faculty can do for overseas members
- seek the views of overseas members on what they can do for the Faculty.

12.5% of the members responded to the survey. This report details the comprehensive comments received from the members and their views of what the Faculty currently does, what it could in the future offer them and what they as members think they could offer the Faculty.

When asked what services already offered by the Faculty were of most value, the most frequent responses were the newsletter *ph.com* and the *Journal of Public Health*.

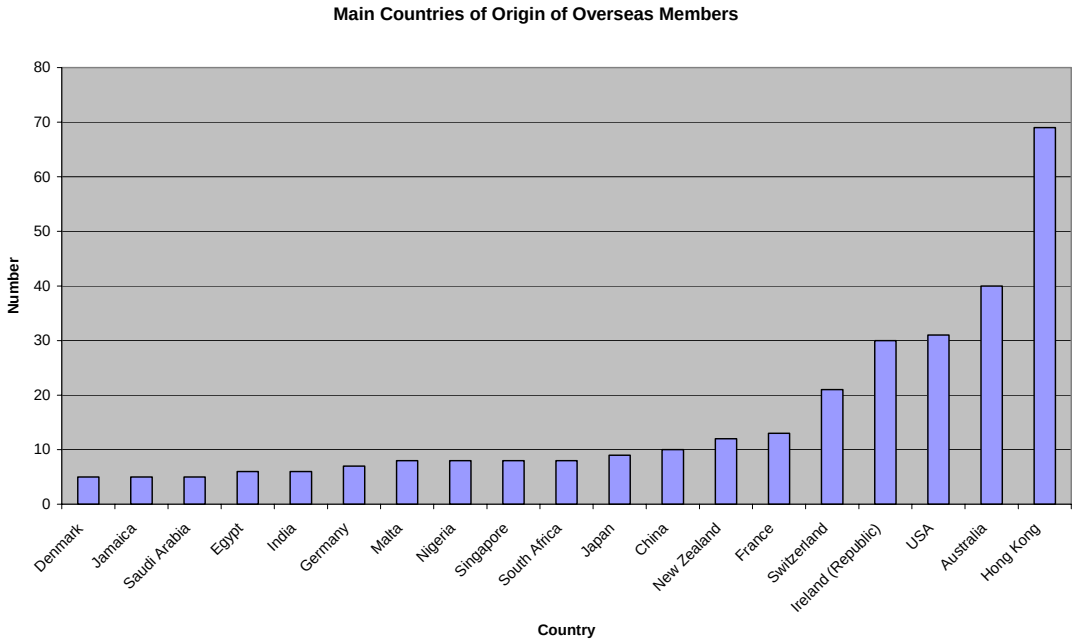
The following three priorities were identified by overseas members as services they would like the Faculty to offer them:

- a directory of overseas members
- web based CPD activity via electronic communications
- a web based decision forum to promote and exchange information on international health issues

A clear message emerged from the survey calling for the Faculty to collaborate more with other international public health agencies/institutions. It was felt this would strengthen the voice of the international public health community to promote balanced evidence based public health messages.

Introduction

The survey aimed to engage with those members of the Faculty who reside outside the UK. As of May 2007, there were three hundred and ninety international members, a slight increase from December 2006, from sixty different countries.



This survey was based on a questionnaire that had been piloted previously with 38 overseas members during the summer of 2006, to which five had responded.

Method

The survey gathered information on the educational and demographic background of overseas members and included questions about members' views of Faculty services, strengthening FPH international policy/advocacy, and developing international education and standards. It also included questions on FPH support for overseas members more generally. The survey was posted out to all overseas members (384) during the second week of December 2006, with a deadline for responses set at January 19th 2007.

Results

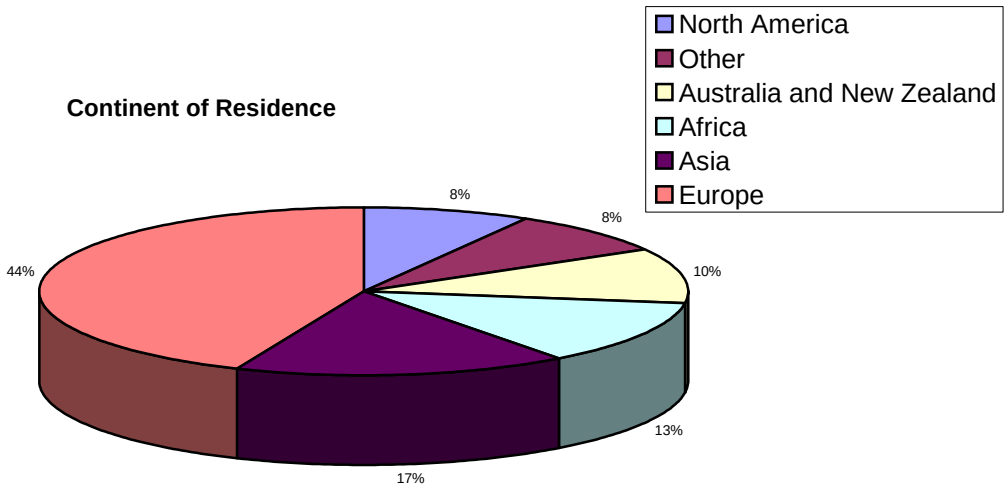
Members' responses

48 responses were received, giving a 12.5% (48/384) response rate to the survey. The pilot surveys (n=5) were included in the final analysis.

The majority of respondents were male (79%), between the ages of 41 and 65 years (62.5%) and resident in Europe (44%). 25% of respondents were over 65 years old

and considered themselves retired from active public health practice. Just over half of the respondents (51%) were registered with a UK body.

Figure one.



Methods of communication

92% of respondents had access to the internet. 79% of respondents preferred to be contacted by email rather than by post. The majority of those who preferred to be contacted by post were over 65 years old (n=8/9).

Services offered by the Faculty

When asked what services the Faculty already offers which they found of use, the most frequent responses were the newsletter, *ph.com,* (46%), the *Journal of Public Health* (27%) or did not state anything or said that the Faculty did not provide anything useful (21%). When asked if an international exam should be set, 35% agreed and 35% did not state an opinion. 21% disagreed, a few strongly.

When asked to prioritise what services they would like the Faculty to offer, the weighting described in table two was applied which resulted in the following list of preferences.

Table one.

Respondents preference	Total Count	Service	
1	198	C	Provide a directory of overseas members
2	192	B	Set up web based CPD activity via electronic communications
3	185	A	Develop a web based decision forum to promote and exchange information on international health issues.

4	181	E	Assist in setting standards for public health by working with relevant colleagues in colleges and organisations in other countries.
5	178	D	Provide support and advice in the development of overseas public health training programmes through electronic networks.
6	153	F	Set up and publicise special interest groups for overseas members
7	90	G	Provide opportunities for mentorship between UK and overseas members

Table Two.

Service	**Count**						
	1ST Priority (weighted x7)	**2ND Priority (weighted x6)**	**3rd Priority (weighted x5)**	**4th Priority (weighted x4)**	**5th Priority (weighted x3)**	**6th Priority (weighted x2)**	**7th Priority (weighted x1)**
A	13	7	5	3	3	2	2
B	15	7	4	3	2	3	1
C	16	3	9	2	3	2	2
D	8	7	7	5	3	6	0
E	11	9	2	5	5	2	1
F	7	9	6	6	3	3	0
G	7	0	2	2	2	2	13
Not Stated	4	14	20	22	27	28	29

The members were asked if they were interested in receiving trainees from the UK. The majority had not previously received trainees from the UK but were willing to do so in the future.

Table Three

	Received supervised UK trainees in the past	**Attended "training the trainer"**	**Interested in having trainees from the UK on attachment**
Yes	2 (4%)	7 (15%)	21 (44%)
No	29 (60%)	18 (37%)	7 (15%)
N/A or N/S	17 (35%)	23 (48%)	20 (42%)

The members were given the opportunity to suggest what action the Faculty could take to improve the services offered to overseas members (see appendix for full list of comments).

A clear message emerged from the survey calling for the Faculty to collaborate more with other international public health agencies/institutions. It was felt this would strengthen the voice of the international public health community to promote

balanced evidence based public health messages. Collaboration was seen as more important than increasing membership. Agencies identified were the European Union, World Health Organisation and the Ministries of Health, PH Faculties and PH Colleges of individual countries.

Other suggestions regularly expressed were improving access to evidence/literature through the website, setting standards for training and education, improving the opportunities to participate in consultation exercises and setting up special interest groups electronically. Members were keen for the Faculty to have a better understanding of the needs of developing countries through two way exchange programmes, supporting overseas placements for trainees/members and utilising the knowledge and experience of the members/organisations working in those countries. It was also felt by a number of members that fees payable to the Faculty should be reduced according to their country of residence.

Conclusion

The FPH International Committee is grateful to all those who responded to the survey. It will consider the findings of this report and a paper will be produced in response for wide dissemination.

Action which has already been taken, in support of one of the suggestions, is that an electronic networking group has been set up on international issues. Details on how to join this group can be found at http://new.fph-groups.org.uk/

Acknowledgements

Thanks to

Ann Reid for designing the pilot questionnaire and Sheila Paul who collated the pilot results. To all the FPH International Committee members who commented on the survey tool and to Caroline Wren for organising the pilot and main survey.

For further details on the survey and the work of the FPH International Committee contact Caroline Wren - carolinewren@fph.org.uk.

Appendix

Suggestions of other services the Faculty may offer overseas members included:

"Collaboration between O/S and UK members in terms of research"
"Improve communication"
"Visit PH training institutions to gain first hand understanding of needs."
"Exchange programmes, facilitate travel in overnight stays, facilitate networking"
"Public health services for travellers"
"Access to electronic literature/evidence base"
"Provide placements, active visitation to approve overseas sites"
"Equality of opportunity to participate in consultation, committees, set up European group"
"Reduce rates for overseas fellows"
"Hard to comment"
"Access to electronic literature/evidence base via website, allow international members to register for training programmes in their home countries once they have passed Part A"
"Support and collaboration with overseas based CPD of similar faculties, collaboration with overseas faculties and colleges in PH reciprocity and standards of training"
"Special interest groups in international public health, international service training"
"Enhance network to major funding sources, career opportunities, on job training for frontline workers"
"Advocacy of evidence based PH"
"Conference calls on topical issues, exchange programmes, dialogue on problematic issues to learn from others"
"Be active Internationally. Clearing house for ph jobs."
"Better coordination with AFPHM re documentation of CPD"
"Review and periodical assessment of local programmes"
"Support for secondments and attachment of UK trainees and members to overseas centres"
"Keep up-to-date with any faculty changes or other updates"
"International flavour to newsletter, etc"

When asked how the Faculty could expand its membership to overseas colleagues, the following comments were made:

"Adjust annual dues accordingly to country"
"Circulate publications, publicise web site and have more joint meetings"
"Make itself more relevant"
"Does it need to, who would benefit, collaboration more important than membership"
"Offer tangible benefits"
"Awarding honours to overseas physicians in important positions"
"Recommendation system - colleague can recommend someone else"
"Support CPD in members current places of work"
"Joint initiatives more appropriate than expanding membership"
"Establishing collegial/faculty reciprocity"
"Linkage with national professional orgs, universities and PH Int. orgs."
"Language is a barrier, translate documents into other languages"
"Through universities and postgraduate institutions"

“Interesting them in post grad training/qualifications”
“Expanding membership exam for overseas candidates”
“Make membership cheaper, offer reciprocal membership to overseas parallel organisations”
“International exam”
“Link with national ministries of health and universities”
“Provide professional assistance”

When asked what they would like to see the Faculty doing with regard to advocacy and international policy, the following comments were made:

“Exchange visits between countries, develop policies that lead to health improvement in training of PHP in developing countries.”
“Demonstrating an interest In public health policy and practice in EU, in line with RCP’s, for example in both medical and public health, reflecting on its application in UK.”
“Continuing and strengthening cooperation with WHO/EURO.”
“Guidance for setting training standards in various countries”
“Question whether Faculty can influence. Case by case attempt to provide evidence, letter from president most credible way.”
“I am not sure”
“Become more familiar with developing countries health issues in context of economics, politic, tech, culture, trade and aid.”
“Collaboration with WHO and schools of PH more appropriate”
“Be a voice in support of greater international equity in health and related matters.”
“Promoting effective and relevant advice on screening and cancer control”
“Collaborate with WHO”
“Nutrition adequacy, immunisation adequacy and availability, payment for health services”
“Advocacy and support the link between health and development, inc. mental health”
“Food trade, counterfeit drugs, public health effects of war”
“Fair trade, migration of health workers, International tobacco marketing”
“Fair trade, food and energy policies, climate change, emerging infection, arms trade.”
“International policy e.g. first un global road safety.”
“Tobacco, nutrition, alcohol”
“Due to lack of capacity and orientation doubt faculty can play large role. Faculty not ready to go global.”
“Advocate migrant and mobile populations.”
“More active in working with international bodies, e.g. WHO at policy level”
“Set up international teams or groups on specific areas of PH”
“Support apprenticeship and mentorship training with Ministries of health and WHO”
“Sharing and consultancy network, enhance competencies of field workers”
“Support for implementation of international health regulations, commentary on WHO initiatives.”
“Advocacy that PH polices should be evidence based”
“More active participation”
“Advancing levels of epidemiology skills in developing countries”
“Very difficult to find something all would agree on”
“Promote examples of good practice”
“More EU related work”
“Work closely with WHO, Ministries of health and universities”
“Advocacy for international public health research and implementation.”

"Technical material and support effective exchange programme"
"Development"

When asked what they would like to see the Faculty doing with regard to international education standards, the following comments were made:

"Exchange visits between professional in training institutions, strengthen capacity building web based discussion and educational programmes."
"Exchange programmes, contribute to the development of curricula in other countries"
"Faculty respected overseas, should support smaller countries."
"Develop working relationships, assist in short term training in priority areas, organise conferences and exhibitions in developing countries."
"Offering support and expertise"
" Collaborate with WHO"
"Universal; standards on food safety and quality, radiation exposure, cancer mental health"
"Online courses"
"Integrated CPD with other professional bodies to develop interface domains"
"Communicable disease"
"Promote and teach, violence and injury prevention course"
"Keep published good articles which can be easily picked up"
"Develop public health functions to communicate to non-specialists migration health issues"
"Faculty is seen as the international leader, needs to work more closely with similar bodies in other countries in areas of standards and assessment."
"More active through WHO in under graduate, postgraduate and CPD in PH training"
"Advocate ethical decision making"
"Setting standards on training"
"Horse has bolted"
"Better co-ordination of curricula"
"Support public health training within int. org, support for continuing education. organising int. courses"
"More on policy that promotes cost effective and value for money, education, low cost tech, reduction of inequities, income policies."

When asked how they would like the Faculty to act on international professional affairs, the following comments were made:

"Joint meetings with similar professionals in various countries."
"Faculty representation rather than individuals who are members of the faculty"
"Determine its role through a process of consultation and sharing ideas. Need to be specifically resourced."
"Address the brain drain, offering opportunities for more post grad students for less cost"
"Support PAITO / WHO with their activities"
"Take medicine out of party politics"
"Link with AFPHM"
"Migration of health workers"
"Depend on political climate"

“Promote European wide standard setting.”
“Struggling to see the role”
“Recognise work done outside UK”
“Support the work of WHO, secondment and attachment of trainees to WHO and Ministries of health”
“Consultancy and sharing of expertise, act as a change agent, connections to major sources of funding”
“Provide a calm and balanced view on international issues”
“More participation”
“Reciprocity on specialist qualifications”
“Build relationships with PH orgs. in North American in addition to Australia and developing nations”
“More active in the WHO work”
“Co-ordinate int. exchange visits in Environmental Health and Epidemiology”
“More involvement between the strength of the professions, the media and politics”

Improvements suggested for the international section of the website included:

“Inform people it exists”
“Update advisors details”
“Unwieldy, far too many unclear subsections”
“Web based upload facility for project documents, offers of consultancy”
“Online CPD activities”