**Faculty of Public Health Projects Scheme brief**

**Those wishing to apply for approval and advertisement of their projects should email this completed form to:** **educ@fph.org.uk****. This form should be completed by the Project Lead.**

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| **Name of the Project Lead** | Dr Rachel Handley |
| **Contact details** | Email: handley.re@gmail.comTelephone: +447502396960 |
| **Date** | 08/08/2025 |

### Project Details

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| **Title and brief description of the project with summary of key roles and outputs expected from the registrar** | **Developing global curriculum modules for public health workers on Peace and Public Health****Summary of Key Roles and Outputs Expected from the Registrar**:The registrar will take a leadership role in coordinating and advancing this high-profile global initiative. They will:* Conduct a global review of existing curricula and frameworks
* Engage and convene a wide range of international stakeholders
* Draft a core global curriculum and adaptation toolkit
* Contribute to publications and dissemination activities
* Build professional networks with WHO, ASPHER, EUPHA, GNAPH, and other global partners
* Gain leadership experience in a pioneering area of public health education
* Shape the future direction of public health training on peace and conflict prevention

**Context**Public health work is inherently social and political, especially when seeking to address poor health outcomes at their ‘upstream’ causes i.e. those social, economic and political determinants of health. The building blocks for health and a flourishing society include social equity, inclusion and fair application and access to basic human rights. These upstream drivers for public health closely overlap with the building blocks for peace. Despite the urgent and growing global need for peace and security, and increasing public health burden of violent conflict across the world, there is currently no formal core public health training on the causes, prevention and mitigation of conflict and the promotion of peace. In the UK, the FPH published a statement[[1]](#footnote-1) asserting that the public health professionals have a significant role in preventing violence. A key area recommendation was to review educational materials on violence for our curriculum and look to accredit relevant interdisciplinary resources and courses on violence as a public health problem.”At the European level, the Association of Schools of Public Health in the European Region (ASPHER) and the European Centre for Peace and Development are developing a public health core curriculum module for conflict and war, but there is a recognised need to include a stronger emphasis on prevention of conflict and war, and the promotion of peace peacebuilding.Globally, peace and security is a growing priority including within primarily health-based organisations and initiatives. At the 77th World Health Assembly in 2024 a paper[[2]](#footnote-2) was brought to progress the work of the Global Health Peace Initiative which included a clear mandate to build capacity for peace work.**The project**This project offers a unique opportunity to take a leadership role in shaping a new frontier of public health education. The successful registrar will work with global partners to coordinate the production of globally adaptable curriculum on peace promotion, peacebuilding and conflict prevention for public health professionals.**Phase 1: Global Review and Synthesis**Initial scoping has identified that there is a critical gap in the global public health curriculum regarding peace[[3]](#footnote-3). The first phase of this project is to review existing curricula and frameworks of thinking from a range of relevant disciplines from a range of relevant disciplines to inform the development of a new global curriculum, including:* The building blocks of peace as relating to equity, security and health
* Peace-building and conflict awareness as part of a hazards approach to Emergency Preparedness, Resilience and Response
* Violence prevention at individual, community and societal levels including Trauma informed approaches
* Peace Building Practices and Research
* Health as a Bridge for Peace
* International and humanitarian law and human rights law
* Ethical frameworks for advocacy, political negotiations and reconciliation
* Leadership skills for peace
* Building peace into all policies

**Phase 2: Curriculum Development and Stakeholder Engagement**Building on the findings from Phase 1, the second phase will involve working with a diverse range of stakeholders to draft an adaptable global curriculum and implementation framework. The aim of the curriculum is to equip public health workers worldwide to take effective action for peace, regardless of their context of peace, fragility or conflict. There would be two primary initial audiences for the curriculum:1. New cohorts of public health professionals within formal public health training programmes
2. Public health workers and related health practitioners currently operating in settings where knowledge of conflict and peace is especially relevant.

Rather than create one curriculum for all settings, this project will produce a well-defined core curriculum that global partners will tailor for their specific cultural, political and health systems contexts. Expected OutputsBy the end of this project, key outputs will include:* Scoping review of topics relevant for the global curriculum (a paper)
* Draft base curriculum (core learning outcomes, teaching modules, slides)
* Policy brief and summary report aligned with the Global Health for Peace Initiative
* Presentations at key conferences and roundtable groups (e.g. EUPHA, WHO, ASPHER)

Depending on time scales and registrar preferences optional outputs would include:* Adaptation toolkit for global partners
* Evaluation of pilot training courses in conflict settings
* Short online learning component to support broad dissemination (optional)
* Opportunities for publication in peer-reviewed journals or through WHO partner channels

**Partners and Global Impact**A wide range of global partners are already engaged in this initiative:* Global Network for Academic Public Health (GNAPH)
* Association of Schools of Public Health in the European Region (ASPHER)
* European Public Health Association (EUPHA)
* European Centre for Peace and Development
* WHO
* UK Health Security Agency

To ensure the curriculum is globally relevant and avoids Eurocentric bias, broad and inclusive stakeholder engagement will be a priority throughout the project. **Conclusion**This project offers a rare opportunity to contribute to a globally significant initiative at the intersection of public health, peace, and security. The successful registrar will take on a leadership role, collaborate with international experts and institutions, and help shape a pioneering curriculum that has the potential to influence public health practice worldwide. |
| **Name of the organisation supporting the project** | This is a global project, bringing together partners from a wide range of public health settings. The project will be hosted by the Global Violence Prevention Special Interest Group (SIG) and governance will be provided via the Faculty of Public Health Global Health Committee. It is anticipated that progress reports will be shared with the Global health Committee However, the work and any output will belong collectively to all global partners that contribute.Supervision support and input will come from the hosts of the ‘Public Health for Peace Collaborative’: namely Farhang Tahzib, Dr Sara Lavinia Briar and Dr Rachel Handley. |
| **Where will the Registrar be based for the duration of the project?**  | Remote working with optional in-person meetings in various UK locations depending on Registrar’s preference. The Project Supervisor is based in the South West.  |
| **Please set out the Learning Outcomes and likely competencies to be achieved by the registrar from Public Health Specialty Training Curriculum** | **Learning Outcomes that could be achieved**1.5 Display data using appropriate methods and technologies to maximise impact in presentations and written reports for a variety of audiences.2.3 Drawing on available evidence, build consensus around a public health position, perhaps because of uncertainty, opinion imbalance or gap in knowledge and understanding. (The process of building consensus should take account of stakeholder needs and views to facilitate system-wide leadership and change)3.1 Demonstrate knowledge of current national and international policies and strategies that affect health and wellbeing.4.1 Use a range of leadership styles effectively as appropriate for different settings and organisational cultures.4.2 Demonstrate appropriate presentation, communication and listening skills, as appropriate for the audience or individual. Communicate in clear written format and in presentations to a range of organisations and audiences.4.4 Design, lead and manage complex areas of work in multi-agency settings to a successful conclusion or suitable endpoint within available resources and timescale.5.1 Influence or build healthy public policies across agencies, demonstrating an awareness of structural determinants to health, and different social, cultural, political and religious perspectives on health.5.2 Be an advocate for public health principles and action to improve the health of the population or subgroup.6.1 Demonstrate knowledge and awareness of hazards relevant to health protection.8.9 Deliver and evaluate education and training activities for academic or service audiences in a wide range of virtual and in person formats, for large and small groups9.8 Demonstrate cultural competence and is able to work effectively in cross-cultural situations both internally and externally to the organisation.**Optional Extra Learning Outcomes that this project could be adapted to include**3.4 Demonstrate engagement and co-production with stakeholders, including the public and representatives of the political system, throughout the development of policy, strategy, programmes of work or action plans4.8 Use influencing and negotiating skills in a setting where you do not have direct authority to advocate for action on a public health issue of local, national, or international importance.7.2 Describe and apply the ethical and legal principles of resource allocation in health and care services as it applies to both individuals and groups.7.7 Lead or contribute to the implementation of change across health and care systems with reference to a model of change.8.7 Make a significant contribution to the design and implementation of a study of any methodology in collaboration with appropriate team and relevant partner (e.g. academic partner).8.8 Write and submit an article of sufficient quality for publication in a peer review journal. |
| **Start and end date of project (project duration)** | September 2025 – August 2026 but applications for 6 months will be considered |
| **Time requirement for the Registrar on the project (days per week)** | 2-3 days a week with the option of more that one applicant (e.g. shared with 1.5 days a week each). |
| **How many Registrar places are available on this project?**  | One or two depending on time commitments and level of experience  |
| **Location of Project Lead** | Bristol |
| **Details of the approved Project Supervisor (please include email)** | Dr Rachel Handley, Rachel.Handley@somerset.gov.uk or personal email: handley.re@gmail.com  |
| **Will there be accommodation/travel costs associated with this project? If so who would be expected to cover this cost?** | No travel costs anticipated but there may be options to access small travel bursaries through the Public Health for Peace group if needed. |
| **Please describe how the project will work in practice.** | Regular meetings with Project Supervisor (weekly or fortnightly as the project progresses).Regular collaborative meetings with core working group on progressing the Public Health for Peace work. This group will be able to provide input and expertise on past and current work to progress peace as a health agenda on the international stage (approximately monthly).Updates on progress will be submitted to the Global Violence Prevention SIG and the Global Health Committee in the FPH. The work in the first phase with be primarily self-directed and desk-based. Regular review meetings can be online with minimal requirements for travel.During the second phase, to facilitate collaboration with stakeholders it is anticipated that there will be a greater number of meetings which will take a range of formats including hosting workshops and delivering presentations. The wider Public Health for Peace group will support applications for funding to attend conferences if relevant.  |

**Projects Scheme application checklist**

This is only a guide and other criteria may be used for specific projects or training locations. Please record if you think you have met the following criteria and if not please provide details about why the criteria will not be met.

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| **The Registrar has completed the MFPH exam or has an appropriate level of experience** | **Preferable but not essential**  |
| **The Registrar has a named Project Supervisor for the duration of the project** | **YES**  |
| **The TPD for the Registrar has seen and approved the project** | **YES / NO** |
| **The Registrar’s Educational Supervisor has seen the project and agrees that it meets the Registrar’s training needs** | **YES / NO** |
| **There is clarity on the process for the Project Supervisor and Educational Supervisor to communicate about the Registrar’s progress** | **YES / NO** |
| **The project brief clearly describes the Learning Outcomes and competencies expected** | **YES / NO** |

1. [the-role-of-public-health-in-the-prevention-of-violence.pdf](https://www.fph.org.uk/media/1381/the-role-of-public-health-in-the-prevention-of-violence.pdf) [↑](#footnote-ref-1)
2. [Global Health and Peace Initiative](https://apps.who.int/gb/ebwha/pdf_files/WHA77/A77_R9-en.pdf) [↑](#footnote-ref-2)
3. [War and peace in public health education and training: a scoping review - PubMed](https://pubmed.ncbi.nlm.nih.gov/39182022/) [↑](#footnote-ref-3)