

Competent Workforce: Today's Trends Impacting Tomorrow's Health



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Objectives

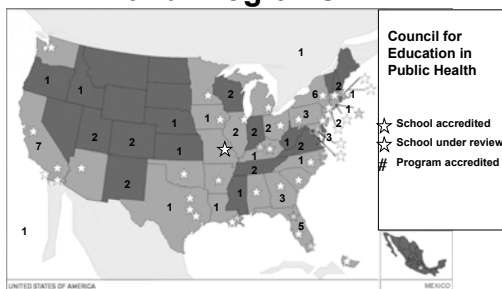
- Identify competencies that drive training and credentialing of public health educators and explore how credentialing/accreditation contributes to a competent workforce.
- Consider trends relevant to developing a competent workforce.
- Explore implications of these trends for enhancing professional competency.



We are all called to be architects of the future, not its victims.

- R. Buckminster Fuller

Accredited Schools and Programs



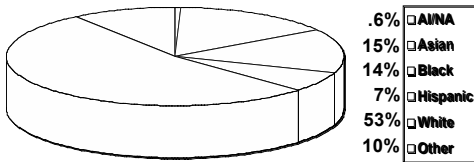
Source: modified from Assoc Schools of Public Health, www.asph.org, 2006 and Council for Education in Public Health, www.ceph.org, 2006.

Accreditation and Its Benefits

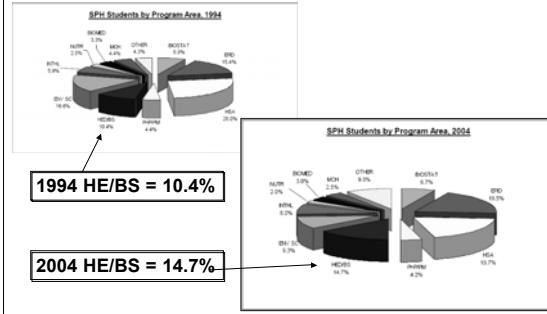
- Rigorous peer review process (self-study and site visit).
- Exposure to core public health areas (Epidemiology, Biostatistics, Environmental health, Health services administration, Health education/Behavioral sciences).
- Eligibility for federally-sponsored internships and fellowships as well as scholarship opportunities.
- Requirements reflect current training needs.

Public Health Students 2004

27,969 applications (67.6% female)

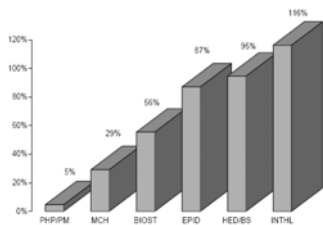


HE/BS Attracting More Students

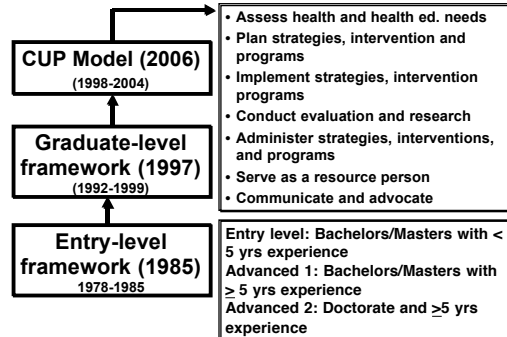


HE/BS Graduating More Students

Program Areas with the Largest Growth
(Percent Increase of Graduates Between 1993 & 2004)



Health Education Competencies



Credentialing and Its Benefits

- | | |
|---|---|
| <p>Certified Health Education Specialist (CHES)</p> <ul style="list-style-type: none"> 1558 individuals were grandfathered as CHES (1988) CHES examinations started (1990) Today, more than 5000 CHES worldwide | <p>CHES Benefits</p> <ul style="list-style-type: none"> Measure of quality at the individual level Better defined standards/competencies than accreditation Minimal standards Cost and recertification |
|---|---|

Predicting the Future is Hard

1899

"Everything that can be invented has been invented."

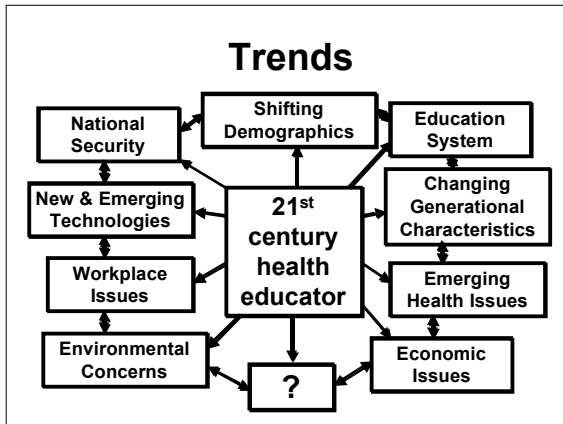
-Charles H. Duell, Commissioner of the US Patent Office



1981

"640K ought to be enough for anybody."

-Bill Gates, Co-Founder, Microsoft



Trends: US Demographics

Projections of U.S. Elderly Population

Year	Mean Age	Pop. 65+ (million)	% Of Pop. 65+	% inc. from 2000 in 65+ Pop.
2000	36.5	34.71	12.6	--
2005	37.2	36.17	12.6	4.2
2010	37.8	39.41	13.2	13.5
2020	39.0	53.22	16.5	53.3
2030	39.9	69.38	20.0	99.9
2040	40.3	75.23	20.3	116.8
2050	40.3	78.86	20.0	127.2

Why is This Relevant?

Exhibit 2-13: Distribution of Total Patient Care Hours, by Patient Age: General Primary Care Physicians

Trends: US Demographics

Race and Ethnicity Selections, 1980-2000

Why is This Relevant?

Language, Behaviors/Risks, Values, Attitudes, Culture, etc.

III-C(4): *Incorporate demographically and culturally sensitive techniques when promoting programs*

VII-B(4): *Use culturally sensitive communication methods and techniques.*

Trends: Technology

- **Rate of change:**
 - every 10 seconds a new web site.
 - every 10 minutes a new technology.
 - every 10 days a new product or service.
- **The amount of change we experience in one day today equals the change our grandparents had in one year!**

Trends: Computer Technology

Distance Education and Online Learning

“On Demand” Information

“OCW provides an opportunity for those who are motivated and interested to gain unique insights into public health as a profession and as a career at no cost to them.”

—Dean, Johns Hopkins Bloomberg School of Public Health <http://ocw.jhsph.edu>

JHSPH Open CourseWare

Trends: Health Issues Change in Rank Order of Global Disease Burden

1990	2020
Lower respiratory infections 1	1 Ischemic heart disease
Diarhoeal diseases 2	2 Unipolar major depression
Conditions - perinatal period 3	3 Road traffic accidents
Unipolar major depression 4	4 Cerebrovascular disease
Ischemic heart disease 5	5 COPD
Cerebrovascular disease 6	6 Lower respiratory infections
Tuberculosis 7	7 Tuberculosis
Measles 8	8 War
Road traffic accidents 9	9 Diarrhoeal disease
Congenital anomalies 10	10 HIV

February 2006



*Oops...she did it
again!*

May 2006



Implications and Conclusions

The Environment

The Workforce

Preparation Programs

- Accreditation & Credentialing
- Demographic shifts
- Emerging technologies and health issues

Improved Linkages

- Collaboration
- Continuing education
- Advisory boards
- Practice-based training (lectures and placements)