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Charles Darwin University

## Taking care of the public health student and early career community in Australia their views

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We acknowledge that it is useful to ponder, from an academic gaze, the strategies that should or should not be adopted to 'take care' of the student and early career community in the field of public health. We also agree that many early career researchers have considerable experience in other areas, namely practice and policy contexts, equipping them to act at the research-policy-practice nexus from the outset of their careers. But in the true spirit of community consultation, it seems sensible to ask the constituents of the early career community – the majority young females – what support mechanisms they perceive are needed to ensure they can be the most effective public health leaders of tomorrow.

During the recent Population Health Congress in Brisbane, the International Union for Health Promotion & Education (IUHPE), through the IUHPE Student & Early Career Community Network (ISECN),<sup>2</sup> facilitated a breakfast workshop. This workshop aimed to create a forum for the health promotion/public health student and the early career community (SECC) to network and exchange ideas about their professional interests, needs and support mechanisms; and to identify avenues to foster their future participation in the public health arena. A range of professional organisations with a public health and/or health promotion orientation were invited to share what they were doing to support this community. The organisations that participated included the Australian Health Promotion Association; the Public Health Association of Australia; the Asia-Pacific Academic Consortium of Public Health; the Australasian Society for Behavioural Health & Medicine; the International Society for Behavioral Medicine; the Victorian Health Promotion Network; and the LaTrobe University Public Health Student's Association. We now take the opportunity to report back on a few key issues discussed by the 30+ participants.

First, the public health community should congratulate itself for ensuring that a wide range of professional development and career enabling initiatives are being offered for the student and early career community (SECC). These ranged from mentoring programs, student conferences, student representation within organisational structures, awards, scholarships and web forums – to name just a few. However, we should take stock for just a moment. The second issue identified, was that very few of these initiatives were developed or implemented in partnership. That is, we are yet to combine limited human and financial resources across the aforementioned public health organisations to facilitate a critical mass within the SECC. It was suggested that combining resources will inevitably strengthen public health action in Australia. Joint memberships, scholarships, conferences, and mentoring programs might be a useful starting point – acknowledging that some state jurisdictions have already started doing this quite well. This leads to the third issue, which relates to lack of co-ordination to support the SECC at the national level.

While it was acknowledged that certain initiatives, such as the National Health & Medical Research Council Capacity Building Grants in Population Health 2002-2006, are important,<sup>1</sup> they somehow fall short of what this community is looking for. There was a general consensus that the establishment of a national population health agency with a specific focus on supporting the public health SECC could assist in addressing this gap. Ideally

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## Taking care of the public health student and early career community in Australia: their views

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We read with interest the editorial in the ANZJPH entitled 'taking care of early-career public health researchers and practitioners'.<sup>1</sup>

such an establishment would prevent the duplication of effort and professional resources directed at SECC. We are not suggesting the establishment of another professional body – there are already too many to choose from. Rather, we are suggesting that a consolidated effort is required to best meet the needs of Australia's future public health workforce. Such collaboration may well require some of the existing professional associations to think more laterally and be more flexible about the types of activities they offer for the SECC. Perhaps profit gained from the recent Congress could be used to build infrastructure at the national level to encourage collaborative action that supports this group. This is likely to build a more robust and well networked public health SECC. We see the SECC as including passionate, intelligent individuals who are committed to working towards a healthier and equitable future. Co-ordinated efforts are now needed to ensure their ongoing involvement. Now is the time for action.

### References

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