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## Government support and commitment to university-level public health education, research and workforce development is critical

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The education and training provided by the Council of Academic Public Health Institutions of Australasia (CAPHIA) member institutions has underpinned the Australasian response to COVID-19.

To advance public health safety and ensure the wellbeing of our local communities, the current and future public health workforce needs a range of government supported collaborative programs and strategies.

It is vital to include CAPHIA and its members in the development and implementation of enhanced public health workforce planning. Without explicit communications pathways between CAPHIA, its member institutions and government, public health workforce planning, education and implementation will continue to be detached and siloed, rather than integrated and focused on supporting public health pathways and the future workforce. This includes plans for the implementation of the National Preventive Health Strategy, once released by the Australian Government.

Now more than ever the Australian Government must be steadfast in their support and commitment to university-level public health education and research agendas. Key to this is the maintenance of a skilled and educated public health workforce.

To achieve this, CAPHIA and the Public Health Association of Australia (PHAA) call on the Federal and State Governments to commit support through financial investment in their 2022 Budget process to the following four key initiatives:

### **Better Government support for the future public health workforce**

*Increase the number of Commonwealth Supported Places for public health undergraduates & postgraduates*

Higher education in Australia needs to change and evolve in order to cater to labour market demands and an increasingly diverse student population.<sup>1</sup> To build Australia's future public health workforce it is critical that funding towards Commonwealth Supported Places (CSPs) for public health undergraduates and postgraduates is increased. Not only will this allow students facing educational disadvantages to successfully complete higher education,<sup>2</sup> it will also enable universities, especially those in regional areas, to meet the costs associated with the delivery of higher education.<sup>2</sup>

### **Practical experience for newly trained public health professionals**

*The development and funding of a national public health officer training program is critical to support public health professionals in their important public safety roles*

As outlined by the PHAA<sup>3-5</sup> a national training program could be a partnership between the Australian Government and all states and territories. If based on the similar program organised by the New South Wales Health Department, a national program would ensure that Australia is prepared to handle any future communicable and non-communicable disease challenges. This program rotates public health professionals through a range of public health workplaces so that broad practical experience can be obtained by those who have completed a Masters of Public Health.

By recruiting individuals from a wide range of educations and/or career backgrounds, this national program could be designed to meet the needs of public health sub specialities including Aboriginal and Torres Strait Islander Health, biostatistics, epidemiology, health

promotion, program evaluation and others.<sup>3-5</sup> This 'graduate' style program fills a current obvious gap in supporting the public health workforce.

### **Ongoing professional development for the current public health workforce**

*Government funded micro-credentials for the public health work force are key to ensuring continued high standards of service delivery within Australian communities*

The COVID-19 pandemic has revealed gaps in "the size, training, structure and credentialing of the public health workforce".<sup>3,4</sup>

Ongoing professional development is critical to ensure that the workforce receives appropriate up-to-date training. Further national investment across the public health workforce through significant numbers of fully funded micro-credentials should be made available to those currently engaged in public health workforce roles. CAPHIA is well placed to administer this national roll out and ensure a diverse mix of skills and credentials is available throughout Australia.

Further, as outlined in our submission to the Review of the Australian Qualifications Framework (AQF),<sup>6</sup> CAPHIA recommends the expansion of the AQF to include micro-credentials and introduce a credit points system to enable easier comparisons between Australian and international qualifications. This could include funding CAPHIA to partner with member universities offering micro-credentials, in the same way the VET sector can offer Certificate 1-4 qualifications.<sup>6</sup> University-level micro-credentials could be harmonised with existing systems of professional education (i.e. such as doctors and psychologists) to ensure appropriate recognition of public health skills gained in these courses.<sup>6</sup>

### **Long-term strategic planning with public health stakeholders**

Government strategic planning that incorporates the view of public health stakeholders including educators and researchers needs to be long-term and include a thorough review of the scope and needs of the public health workforce in Australia into the future, as recommended

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by two decisions of National cabinet in June (<https://www.pm.gov.au/media/national-cabinet-statement-0>) and November (<https://www.pm.gov.au/media/national-cabinet-2>) 2020, be implemented as a matter of urgency.

These proposed strategies are clearly in the national interest and ensure that, through investment in the public health workforce, the safety and well-being of Australian communities is maintained. If you would like to support these three initiatives, please email [caphia@phaa.net.au](mailto:caphia@phaa.net.au).

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