

WHY PUBLIC HEALTH IS THE SEXIEST PROFESSION OF THE 21ST CENTURY

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Public Health workers today need to lead from the front and have faith in their own inner voice and be the source of strength which the world so desperately falls short of. Let this mark the renewal of a new project in world history. Public health can only be a calling for those who seek to listen. The world is waiting. - **Dr. Edmond Fernandes. MBBS, MD, PGD-PHSM**

Community Medicine is understood by different names today (Social Medicine, Preventive Medicine, Public Health, Community Health) and perhaps suffers an existential crisis thanks to regulatory agencies that have never really understood the branch and have not gone beyond dry textbooks and sundry lectures. The Medical Council of India seems to take forever to understand that Community Medicine is a clinical branch and barely able to comprehend the field.

For medical students, the interest in community medicine dies a natural death (because of no exposure to real-time field work) and there are two types of people who join the MD – Community Medicine (Specialty branch of medicine) field. One set of them join the branch because they are madly in love with it and the other set join the branch because they had to fall in love by force because they did not get other branches.

To an ordinary lay man, they are unaware of Community Medicine as a discipline and it is not their ignorance. The fault-lines can be traced back through the decades.

Why then do I call it the sexiest profession of the 21st century?

What binds us together is stronger than what drives us apart and community medicine is the umbrella of medicine which connects the dots together. It is an enterprise of responsibility, a living embodiment of what it means to be human and watch the true face of human suffering in all its fullness.

Community Medicine is not about the textbook of Park which MBBS students read, it is even less about anything to do with Park at all. But opinions and conclusions are drawn because Park is what medical students end up reading, they do not go 50 kms from the area of the medical college to understand the human face behind disease and death, poverty and pathogens, have not visited institutes of national importance, do not engage with UN agencies and civil society organisations and lack the will to volunteer.

But I firmly believe that Community Medicine is the single most authoritative branch of medicine the world has ever witnessed, if not understood. Yet some organisations and institutions pay poorly. Public health workers deserve much more than what they ask. They sacrifice the prime time of their lives and moments facing field challenges, grant challenges and red-tapism in the bureaucracy which suffers from stage 4 Cancer.

It is a public health problem when children die in their infancy, it is a problem of public health when motherhood is politicized and when we see human face as a statistical number while interpreting maternal mortality. It is a public health problem when people die in Syria from a civil war and when the Geneva Convention fails. It is a public health problem when the Sendai Framework for Action is not implemented to strengthen disaster resilience around the world. It is a public health problem when it becomes difficult to create a green corridor for organ and cadaveric transplant and when we do not have accurate statistics for most of the problems. It is a public health problem when



sometimes our numbers are nothing but fiction.

Great responsibility lies in the hands of public health specialists not only in India, but also around the world. Public health workers and the world at large must understand that the future of human kind that would come after; lies in their hands. The focus cannot remain merely to target certain diseases which are sizeably high, but concerted effort needs to be made for all diseases whether it is chronic kidney diseases, whether it is road traffic injuries, whether it is neglected tropical diseases, whether it is even trachoma.

What public health workers do in the field and amidst communities will be the brand incarnate for all times to come. Society will judge us not by what we speak, but by what we have achieved. Yes, history is evidence that public health victories like eradication of Small Pox, and then Polio changed human destinies forever. It was a hard fought battle involving government departments, civil society organisations and well-meaning volunteers who gave their time, sweat and every bit to make the world a better place.

A community medicine doctor touches thousand souls at a time. For some public health doctors, it happens through their community centric clinics, for others it's through policy reforms, for others it's through research, for some others it's through training and for many others it's through academia.

I believe, that more people die with diabetes and hypertension and malaria and diarrhoeal diseases than people who die from rare diseases. That's why public health matters. That's why governments need to co-operate and relate. That's why corporate companies need to foster hands of friendship. Community medicine is at the very heart of the health system and much depends on how this rank and file performs in society, for society.

The time has come when community medicine must rise up and redeem that promise which sustained hope for centuries. It is time to give voice to those millions who thirst for a healthy life.

The day every Indian and every global citizen of the world will have access to affordable and quality healthcare at their door-step is the day when public health workers can afford to claim their victory. That is our challenge, this is our moment. Can we rise together to ensure this happens in our lifetime and leave the world more beautiful than what we inherited?

For this to happen, our public health infrastructure will have to be improved, heavy investment is necessary in this sector and corporate companies must come out of their private centric commerce and join hands with field organisations. Government agencies must fast-track public health matters which organisations bring up from time to time and not resort to time delay tactics which we witness every-day. They are accountable if not to their own people, certainly to their maker.

Lastly for the benefit of many professionals who wonder what are the options as a Community Medicine or Public Health Specialist from a job perspective, these are a few that come to my mind.

- 1. Join Civil Society Organisations (CSOs) and work as consultants in the field or as research officer, training officer and many more.
- 2. Join United Nation agencies like WHO, UNICEF, UNDP, UNHCR and likes in different capacities.
- 3. Join as Epidemiologist in health systems institutions.



- 4. Join Government departments, ministries at central and state government levels.
- 5. Join as a faculty in healthcare universities.
- 6. Join public and private sector industries as technical experts.

CREDIT:

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