Chapter 17 Public Health Leadership

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ABSTRACT

Management of demands in health sector requires an appropriate leadership, regarding health leadership. This chapter aims to analyze (1) the concept of health leadership, (2) contemporary models of health leadership, (3) leadership skills/competencies, and (4) innovation issues. The authors reviewed papers conveniently selected on B-On, PubMed, and Google Scholar (2015 to 2020). Keywords were selected. Results: (1) health leadership is narrowly related to ethical issues and the well-being of populations, (2) several public health leadership models were identified (e.g., transformational, transactional, or server), (3) leaders' sense of ethical responsibility, and health leadership must create products/services or processes with added value. Health leadership present unique specificities due to ethical/deontological motives. Although some models of health leadership are pointed as more suitable (e.g., transformational or servant/altruistic leadership), it seems an ideal leadership model does not exist. Academies must investigate the role health leadership models, health leaders, and ensure training.

INTRODUCTION

In recent years, key public health problems have emerged, such as the sustainability, quality and affordability of health services, along with the appearance of new health technologies (e.g. more expensive medicines and medical devices), the increase in average life expectancy or the growth of chronic health problems and bacterial resistances. Importantly, bacterial resistances may compromise the future of humanity, if a wide spectrum of new antibiotic molecules are not developed. Nowadays, a public health leader is required to resolve a variety of problems, namely the management of external pressures from various stakeholders (e.g. pharmaceutical industry, patient associations, governments) or the management of internal pressures (e.g. health teams and / or clients / patients) (Al - Habib, 2019; Lister et al., 2017).

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Moreover, humanity is currently facing an unprecedent health crisis, with COVID-2019 pandemic and the urgent need of controlling virus spreading and taking mitigation measures (Nicola et al., 2020). It should be noted that the performance of health organizations is closely related to leadership practices and styles, and to the strategies and values of leaders (WHO, 2016).

Leaderships that effectively mobilize institutional resources and that apply transdisciplinary learning to maximize beneficial health impacts are lacking in health systems. More than ever, public health leaders are essential to make decisions in complex environments, with the involvement of various interest groups (Reddy et al., 2017). The decision-making process of health leaders must be made with respect for the well-being of the populations, despite the coexistence of economic and political limitations (Popescu & Predescu, 2016; Reddy et al., 2017). Besides, the management of economic resources and decisions related to the cost-benefit binomial, a leader in public health must manage personnel in terms of the proper use of therapies and follow therapeutic guidelines. Thus, ensuring the health of communities. Health-trained leaders, such as physicians are better prepared to achieve results than non-clinical leaders, which can be justified by the facts that clinical leaders / managers detain more technical knowledge and present more skills (Al- Habib, 2020).

In view of all these challenges, the state of art of an effective leadership in public health was reassessed in the present paper. Thus, assuming that health leadership is related to certain specificities and characteristics (Popescu & Predescu, 2016; Reddy et al., 2017), the aims of the present work were to analyze and discuss the following topics: concept of leadership in public health (i), contemporary models and theories of leadership in public health (ii), skills and competencies of health leaders (iii), impact of public health leaders on innovation (iv) and paradigmatic examples of successful leadership in public health (v).

Background

The concept of leadership is multidimensional and transversal to various areas and organizations. This concept is widely studied and defined by several authors in scientific literature (Al - Habib, 2019; Grimm et al., 2015). For instance, Grimm et al. (2015) identified six fundamental domains in the area of leadership, which are related to diverse competencies / skills of leaders of any area:

- (i) Community / Organization: "responsiveness, i.e. ability to be fully aware of the community and the
 system around them"; this domain is related to skills, such as community service, work connection,
 impact on organizations or decision making for the benefit of organizations or other systems;
- (ii) *Ability to inspire*: "ability of relating to others in a way the best of their personality is highlighted"; this domain is related to skills, such as collaborating and promoting teamwork, building affectionate relationships and guiding or developing others;
- (iii) *Results*: "ability to focus on results and achieve them"; this domain is related to competencies, such as communication of organization's purpose, vision and strategies (leading to results), decision-making ability, clear offer of directions / guidelines and of thinking;
- (iv) *Social Intellect*: "ability to listen and get involved with others"; this domain is related to competencies, such as being involved in conflicts and controversies, managing feelings, actively listen concerns and feelings or sharing power and influence;

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