Editorial

PUBLIC HEALTH IS TRULY INTERDISCIPLINARY

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ABSTRACT

Introduction: There are some interesting on-going existential debates in Public Health. One of these is around the question whether Public Health is a single academic/professional discipline. There are two quite distinct and opposing views. Some argue that Public Health is a broad-ranging single discipline covering sub-disciplines such as epidemiology, management, health psychology, medical statistics, sociology of health & illness and research methods. Those who argue the latter, are implying that: (a) Public Health is the overarching dominant discipline, which brings these sub-disciplines together; and (b) that a true Public Health practitioner amalgamates all these individual elements. Others argue that Public Health is more an overarching world view or approach for wide-ranging group of professionals and academics. In this view some Public Health professionals are first trained as clinicians, others as psychologists, health economists, health management, statisticians, or demographers, and so on and have later specialised in Public Health.

These debates are not purely theoretical debates as they can link to jurisdictional claims, about who can call themselves a Public Health practitioner and who can't. This argument can go one step further to cover claims as to who can and who can't legitimately practise or teach Public Health. The latter argument can be very divisive for Public Health, as it fails to recognise the important contribution made by other disciplines. But this is in fact not true as Public Health needs the full range of other professions and disciplines to lead and contribute to its teaching, research and consultancy practice. Public health has been a multidisciplinary enterprise since the latter half of the previous century.

Our View on Public Health

Making claims that Public Health is a single discipline that can only / or even best be practice and taught by those with an undergraduate degree in Public Health suggests a rather limited understanding of the broad church that is Public Health. Whether undergraduate Public Health training such as Bachelor in Public Health (BPH) degree enables unique qualities for leadership in public health is certainly plausible but unproved, and justifications have so far been little more than special pleading. This rather limited view of Public Health is perhaps an ideological claim made by empire builders. We believe that public health is the science and art of promoting, protecting, and improving health and wellbeing through organised efforts of

Editorial

society. We would argue that Public Health is more a worldview and an approach than a specific discipline in its own right. The three authors all call themselves Public Health academics or specialists in Public Health, although our initial training and early careers are very different. For example the first author of this paper has a first degree in Demography, a MSc in International Health & Management and a PhD in Public Health, the second one has first degree in Sociology, a Master degree in Education and a PhD in Medical Sociology, and the third author has a first degree in Health Education, Masters in Health Promotion and a PhD in Public Health. In other words, each of us brings a different set of qualifications, skills, perspectives and insights to the discipline of Public Health. All three are working internationally, in terms of Public Health teaching, research, programme design, publications and hence sharing Public Health in the global arena. Hence, we argue strongly that Public Health practitioners (be it experts, planners, policy-makers or teachers) need to work with a multidisciplinary team to address difficult public health issues and challenges.