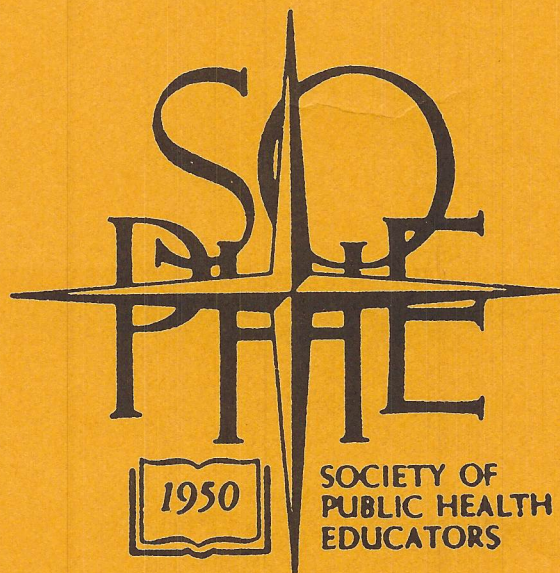


REFLECTIONS ON FULFILLING OUR
PROFESSIONAL RESPONSIBILITIES

Presidential address given by Jeannette J. Simmons

SOPHE Annual Meeting



NOVEMBER 10, 1963

HOTEL PRESIDENT

KANSAS CITY MO.

REFLECTIONS ON FULFILLING OUR PROFESSIONAL RESPONSIBILITIES
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From the vantage point as President of SOPHE, I have had an opportunity to observe the functions and total operations of the Society. On the whole it is amazing the number of fellows who accept extensive responsibility and fulfill demanding commitments. It is also honest to report that SOPHE also has some Fellows who accept appointments but do not deliver, and those who for various reasons find it necessary to decline when asked. The President's office also serves as a focal point for the cross flow of communication about the profession and the organization. Differing opinions, ideas and methods for achieving the objectives SOPHE has set for itself are expressed by members within the Society, health educators who are not Fellows, and members of other related professional organizations. Today I wish to do some reflective thinking with you about progress made and the tasks that lie ahead in our efforts to further the profession of public health education. My concern is that you look at yourself, your contribution and understanding and hopefully this analysis will enable you to discuss with others the benefits and accomplishments attained by the organization.

SOPHE has just completed its 13th year and is beginning to show definite signs of maturation. Growth and behavior during the adolescent years will undoubtedly be somewhat erratic. The founders of the Society set high standards. They have brought honors to the profession; they have won very significant acceptance in wide areas of operation; all of this has created a good foundation upon which we can build. I trust that we have the maturity to put the history of our profession in perspective and look upon the mistakes or differing views as part of the process of growth and not as points for continual antagonism. We need to take time to discuss, listen and think creatively

but not be afraid to act. Imperfect action is better than inaction, for while nothing is accomplished through inaction, the mistakes that may occur through imperfect action can be corrected. I hope we can progress in the spirit expressed by the taxi driver who explained the inscription on the Archives Building in Washington "the past is prologue" as "You ain't seen nothing yet".

Yesterday we had an opportunity to think together about the educational principles and process we utilize in health education practice. Today I would like us to think in terms of applying those same principles and process to the operation of the Society.

Let us start with a definition. "A profession is based on and is custodian of a body of specialized knowledge, a set of attitudes and a group of skills which it is pledged to enlarge and improve. A professional organization furthers these goals by seeking competence in its membership, serving the needs of its members, maintaining ethical standards, influencing public policy in its field and promoting group solidarity."

J. Douglas Brown, Dean of the Faculty of Princeton University, has described a profession as being man-centered in two ways: (1) a profession demands practitioners who are free and responsible individuals and who through their personal integrity, dedication and courage can be depended upon to establish and maintain their personal standards of performance; (2) a profession, no matter how technical the procedure it employs, demands that its practitioners be primarily motivated by service to their fellow men.

He goes on to point out that a learned profession is still more demanding for it requires years of preparation of the whole man and his knowledge and skills. It requires the learning approach throughout life as a means of fulfilling one's responsibility to one's fellow man through the ready application of new knowledge.

Dean Brown describes the two major periods in education for preparation in the learned professions as having the same basic pattern but a different educational emphasis. The first, is the man-centered period in which a liberal education is provided. The second is a subject-centered period which occurs in professional education. "During both of these periods a person is educated in conformity followed by education in creativity. These two forms of personal development cannot be separated for they are mutually reinforced. It is necessary to gain a foundation of method and content to which he conforms rather than creates. This learning comes primarily from our accumulated heritage. During the period of creativity it is necessary to integrate knowledge into a pattern understandable to one's self. A truly liberal education is necessary in ideas, values, reason, judgment, imagination and discovery. In the period of education when creativity is foremost, content becomes secondary to process. The aim is the development of an individual intellectually and morally responsible, alert and understanding. It is education for life and not a profession. It is a lamp and not a ladder. Successfully attained, it will effect one's tone and attack in any profession throughout life. Creativity is a slant of personality; it is the cake and not the icing. Education for a profession must emphasize the power of attack rather than the power of retention, even though the latter remains of great importance.

"Professional preparation should aim for the unfinished product; a person whose training has maximized his ability to learn from his subsequent experience. He must have sufficient competency to be effective in his work, but also enough autonomy for independence in thought and action." ¹

Such expectations in academic preparation and philosophic outlook do indeed set high standards for us to reach toward. If we are to be considered members of a profession, we have a responsibility to continually enhance

our competency through: reading widely and critically, listening intelligently and reacting with inquiry; participating in creative discussions; and examining our experiences in an objective manner with others. We owe a special tribute to the Fellows who were willing to prepare and present material at this meeting. Speaking to one's colleagues is a most difficult assignment. Their presentations set an excellent standard for us.

In the past year during discussions with other disciplines on professional preparation and performance there has been a continuing and underlying phrase, "ability to make judgments" which has been used to distinguish between a professional person and a technician. They have raised questions about whether or not certain public health disciplines should be considered a profession. What does judgment involve? Judgment is vital in reasoning and decision-making. It is crucial in activities involving analysis, appraisal and choice between alternatives. It requires intellectual capacity, education and a moral outlook to exercise judgment at a high level of responsibility. This is, in my opinion, the art of a profession and should be practiced on the basis of broad knowledge, penetrating wisdom and moral certitude. No rules, regulations or formulae for guidance in formulation of judgments can be given. A professional person must be able to judge the validity of data and information and to determine their significance in relation to an immediate problem at hand. If public health educators are to be recognized as professional persons, they must demonstrate ability to exercise judgment in the application of basic educational concepts to the analysis of a situation and in the development and use of appropriate methods and materials that will contribute to understanding and desirable action.

The papers presented yesterday illustrated that we can and do function in this way and that we are able to be very creative in the development of most fruitful approaches. The profession needs to find additional ways to

motivate its members to document their experience so it can be reviewed by others and considered as a possible contribution to an improvement in the practice of public health education and can be used in the substantiation of theory.

The philosophic and basic principles of health education are relevant to the development of SOPHE. We should diligently work toward their effective application. We need to obtain an increased knowledge of the values and behavior characteristics of all SOPHE Fellows if we are going to successfully communicate with each other and realistically plan and operate the Society's program. In this regard, I have a concern for how well we have developed the skills of listening. Do we listen with an attitude of acceptance, sensitivity, patience, respect, interest, concern, willingness, sympathy and appreciation? Do we withhold our judgment until a person has completed the presentation of an idea, suggestion or comment? A remark I heard recently seems apropos: "Stop inventing difficulties with an idea until the merit has a chance to show through".

We have a continuing and essential responsibility to improve the Society's relationships with other health educators and other professional disciplines. This involves improving our communication skills in relation to these individuals and groups. Part of this may be a critical review of our behavior. Do we exhibit a warm, friendly, relaxed, open, free and frank manner as we work toward obtaining mutual respect, trust and confidence? Some of these difficulties have been identified as differences in vocabulary and focus. The literature contains many studies about the difficulties of inter-professional communications. A block to communication that has been described is one caused by each specialty having a different conceptual framework that it utilizes in its work, thinking and communication. In this connotation, it is not so much the different language they use but rather the different ways of conceiving and perceiving events.

Dr. Lawrence Frank in an article in the December 1961 APHA Journal discusses this problem in inter-professional communications. He says: "We might say that a major obstacle to attempted communication among disciplines and professions is not only the language but the concepts and assumptions, the criteria of credibility which each participant relies upon in his work and uses in his thinking and attempted communication. These often unspoken assumptions, these rarely formulated preconceptions are taken for granted by the members of each group who imply but do not explicitly disclose them in their attempts at communication. But the recipient of these messages with his own conceptual framework, his professional assumptions and his criteria of credibility must interpret any message in his own conceptual framework and by so much, distort or even wholly negate, that intended message. A self-conscious awareness on the part of each member of a discipline that he must deliberately strive to communicate with others who do not share his professional training, experience, terminology and concepts is one step toward better communication." ² Dr. Frank goes on to list other ways of approaching the problem of interdisciplinary communication.

In discussion with the Joint Committee on Study of Education for Public Health, members of the Board stressed the importance of all public health disciplines receiving their education in a School of Public Health with some joint courses. This offers an opportunity to build better understanding of the role and function of each discipline that will be working together and hence, form a basis for better interdiscipline communication.

I would like to quickly enumerate other items that are of concern in fulfilling our responsibilities to both our professional organization and as professional persons.

During this year, I have heard persons exhort against others who have not granted them recognition; it would appear they are trying to demand

respect or assume that it can be legislated. I would propose that respect must be earned.

A profession has the responsibility to establish and enforce a code of ethical behavior for its members. As previously stated, the prime motivation of a professional person should be to render service to members of society and every truly professional person should cultivate the qualities of integrity and industry. At this meeting and throughout the coming year, we have an opportunity to become involved in the development of a Statement of Ethics for SOPHE.

A profession must of necessity support its own institutions for pre-service and in-service education. As the body of knowledge increases and the level of responsibilities for professional positions rises, the profession must look at the type and amount of education and experience that is necessary for the preparation of future practitioners. We need to help determine the most effective combination of undergraduate courses, personality traits, and motivations desirable for the selection of students for graduate courses in public health education. Extended field training, internships and supervision are all important areas that are now being considered and explored by those responsible for the planning of practical experience in the application of principles, the exercise of judgment, and the examination and analysis of work experience. Several schools of Public Health are experimenting with a two year program and various combinations of courses and planned learning experiences. The total profession has a responsibility to contribute to these efforts.

Along with the preparation of new members of the profession, we have the responsibility for continuing education of all Fellows. As a Society we have developed three mechanisms for doing this. The first and most obvious is the Annual Meeting where ideas can be presented, exchanged, discussed and evaluated. In my remarks last year, I expressed concern at the limited number

of Fellows who can attend a national meeting. The Board recognized that Chapters can fulfill some of this need, but we must also develop some ways of providing similar opportunities for Fellows who reside in the more isolated areas; one possibility is through some type of regional meetings.

The second contribution to continuing education for Fellows is through the publication of Monographs. In the past five years, this publication has gained professional recognition and status and now is cited frequently as a reference in other journals and textbooks. It is encouraging to have more SOPHE Fellows contributing articles. Contributions to the professional body of knowledge, however, remains one of the major unmet professional responsibilities of the vast majority of the Fellows. Each of us must find ways to exert the type of self-discipline it takes to commit ourselves to the printed word.

The third area is the Standing Committee that we re-defined in the recent By-Laws change: "The Continuing Education Committee". This committee has responsibility for providing opportunities for professional growth of members of the Society primarily, but also, in general for the field of health education. Its effectiveness will be in ratio to the response that all Fellows give to the acceptance of responsibility for the development of educational opportunities and of course, by participating in the opportunities that become available.

The adequacy and quality of a profession depends on the quality of the people who enter it. We must encourage able young people to seek the necessary training. This recruitment obligation is now being more realistically accepted by SOPHE. To serve this function of the Society the Recruitment Committee has been made a Standing Committee. Methods of selective recruitment are being developed and evaluated. In addition to the college visitation program, COSTEP in the PHS and similar programs in other official and voluntary

agencies, SOPHE is exploring possible methods of tapping the unique resource of the returning Peace Corps volunteer.

In addition to the academic preparation of members, we still must face the utilization of the "gifted amateur". Such a person is one who is able to perform many of the profession's skills and to utilize the specialized knowledge of the field without obtaining the professional degree. Of the truly capable, I have little quarrel because they resemble the persons who helped to identify our specialty area and provided the experience upon which the learning patterns for academic preparation could be organized. We do have a concern for those who are able to perform in only limited aspects of the field and with selected parts that are related to surface functions. To effect a change in this regard, we must meet the need for more definitive standards, better interpretation of role and function, and narrow the gap between the supply and demand for public health educators. Also, I propose that we need to look at the various elements of our present positions to determine which tasks fall into a technical area that can be done by a trained, non-professional person; which tasks can be better handled by another specialty; and in relation to the remaining functions, systematically analyze how they are being performed and on the basis of such an analysis constantly seek ways to improve our efficiency and effectiveness.

We now have a standing committee on Professional Preparation and Practice which must carefully study these problems. An Ad Hoc Committee in 1960 drew up a study proposal for which the Board has been seeking to find financial support. An Ad Hoc Exploratory committee has just been appointed to meet with the APHA Professional Examination Service staff. This committee will look at the problems associated with the development and utilization of tests that are purchased by official and voluntary health agencies as well as medical care organizations to be used in the selection of persons for vari-

ous positions that include health education functions. Many of the examination requests related to health education function are for program representatives and titles other than "Public Health Educator". The present tests available have many inadequacies. It is my belief that improvement in these tests will be one of several concrete steps that need to be taken to improve the employers understanding of our specialty area and the competencies necessary to perform health education functions.

A request has been made to the APHA Committee on Professional Education to revise the seven year old statement on the "Educational Qualifications and Functions of Public Health Educators". The Society is ready to work with this committee in such an endeavor.

The organization of Chapters (we now have three) increases the opportunity for policies and programs to be initiated and implemented at the local level. As this grass roots continues, so will the potential for SOPHE members to become involved in the decision-making process of the Society.

The September 28th issue this Fall of the Saturday Review carried an article on "Political Frustration: Cause and Cure". A quotation from this seems appropriate: "Joining a group for professional and social reasons we are sometimes shocked to find how we are used to bolster a national lobby that offends us. Joining an organization the better to express ourselves politically, we are invariably shocked to discover that we have become nothing but a statistic. An exultation of the group shrinks the role of the individual because the association establishes a vested interest that its members are committed to support. Delegates should be strictly accountable to the openly arrived at opinions of the membership in a debated, pre-convention meeting." ³

For SOPHE to avoid being this type of organization, we need to increase the mechanism whereby the opinions of Fellows can be made known. I trust you will fully utilize the opportunities at this meeting to make your views known.

Although we have expanded the budget and scope of the Society significantly in the past two years, we must look toward a further increase in our financial resources so we can support committee meetings and working conferences. Committees serve the Society in the important function of reviewing and presenting material upon which policy determinations can be made. Since this type of deliberation can be accomplished most satisfyingly by face-to-face discussions, we are at present operating on a base of committee selection by geography. Paid expenses to committee meetings can result in more representative groups and allow all Fellows to participate on the basis of interest and ability to contribute rather than limitations by place of residence.

Leadership roles have even more demanding expectations of time, travel and secretarial assistance. These expenses should also be provided so any member could be free to accept the responsibility of leadership. This could broaden the base of those who could provide direction to the business of the Society, be representative of its philosophy and practice in numerous meetings with other professions and groups, have an opportunity to find ways for the enrichment of the experiences of other members, and interpret the purpose and direction of the organization to the Fellows in a manner that will enlist confidence.

Your officers and Board do serve in decision-making roles and for the organization to move forward the Fellows must place confidence in these persons and accept that although decisions must often be made rather quickly, the Board does try to carefully weigh alternatives and evaluate possible effects. Choices must be made with firmness and a realization that one cannot always be right. It is quite often impossible for the Fellows to know all of the background that goes into arriving at a decision, so there must be trust and faith in the decisions made by the Board members and officers. As leaders, we should not expect perfection of ourselves or others. Insight and a sense of humor are major assets. . . this Board has exhibited these qualities.

In the past year and a half, the leadership role has been given a lift through the employment of a part-time Executive Director. Not only has communication been increased but more importantly, the business of the organization is being handled in an orderly manner, and with professional dignity. The potential growth of the organization and a greater realization of productivity from the work of the committees will be achieved as we are able to increase the amount of staff. We should look soon to obtaining sufficient financial support to employ a full time Executive Director and secretary.

The achievement of our professional goals also depends upon our ability to interpret the role and function of public health educators to the many "publics" in society. In this regard, each Fellow has a part in establishing good relations. The performance each gives in his respective position and the kind of service that is exhibited will be basic to how the public interprets our profession. In addition, the Society is embarked on a program to broaden SOPHE contacts with other health professions and the general public through the Citation Awards, and by joining with other organizations in the pursuit of mutual interests. All programs and actions of the Society are a part of the foundation upon which the organization's public image is built.

A statement made by Dr. Wayne Reed provides an excellent summary: "The well-being of a profession is like that of any other great community or commonwealth. It calls for an enlightened, vigorous, and persistent citizenship on the part of all its members."⁴

Finally, Hanshel Frankel has said, "It takes a live fish to swim upstream; any dead one can float down". May we, as Fellows, and the Society take as our example in this regard, "the Vigorous Salmon of the Columbia River in the Pacific Northwest".

- 1 Brown, J. Douglas. "Education for A Learned Profession". J. of Med. Ed., Vol. 35, No. 5, May 1960.
- 2 Frank, Lawrence K. "Interprofessional Communications". APHA Journal, Vol. 51, No. 12, December 1961.
- 3 Rienow, Robert and Leona Train. "Political Frustration: Cause and Cure" Saturday Review, September 28, 1963.
- 4 Reed, Wayne O. "A Profession's Major Tasks". "D.O." Vol. 3, No. 12, Aug. 1963.



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November 15, 1962

President-Elect

THOMAS E. ROBERSON, M.S.P.H.
Room 5425, HEW Building, South
U. S. Public Health Service
Washington 25, D. C.

TO: ALL SOPHE FELLOWS

FROM: Jeannette Simmons, President

RE: Acceptance of the 1963 Challenges Ahead!

Vice-President

NORMAN A. CRAIG, M.P.H.
PAHO/WHO, Region of Americas
1501 New Hampshire Avenue, N. W.
Washington 6, D. C.

As a profession that works to replace superstition with facts and understanding, I am asking you to join with me in a practical demonstration. The turn of events makes me not only your 13th president but also my term of office will be 13 months! It is my good fortune that the Society's house is in order and with your active support we can make these 13 months into a most productive and profitable period for SOPHE.

Secretary

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42 Broadway
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SOPHE Gains Momentum and Continuity:

The November Newsletter and Board Highlights provide specific information about the accomplishments of the past year and aspirations for the coming year. The ideas and proposals made by SOPHE Fellows in the past decade are now bearing fruit. SOPHE's current momentum and continuity are, in large measure, due to the establishment in April 1962 of an Executive Office with a part-time Director. Limitation of funds continues to prevent the fuller achievement of the purposes and functions of your professional organization.

Trustees

DORIS DAVENPORT, M.P.H.
JOHN MCCORMICK, M.S.P.H.
DANIEL SULLIVAN, M.P.H.
.....Terms expire 1963

MARY F. ARNOLD, DR. P.H.
JEROME GROSSMAN, PH.D.
GRANVILLE W. LARIMORE, M.D., M.P.H.
.....Terms expire 1964

Fellows Role in Growth and Support

SOPHE is a professional organization that serves the purposes and functions as outlined in the yellow brochure enclosed. It is not just another organization! If members of the profession wish to support these ideas, then they must help the organization grow in size and function so the Society will have a more emphatic voice in the development and implementation of standards, in recognition of the Public Health Educator's unique contribution and in furthering the philosophy of Public Health Education.

What role can Fellows play individually in the growth and support of SOPHE? Each of us can interpret the purposes, actions and potential of the organization to members of the profession who do not belong. In addition, the Fellows who are now contributing their time, talent and energy that make the publication of Monographs possible, need your support! This kind of professional literature enhances our recognition with other professions but to do this we must make the publication known to other professional persons. You can help support Monographs by getting your organization, health agencies, college libraries and other professional disciplines to subscribe.

Monograph Supplement #1

The material developed by the Research and Standards Committee will be made available to SOPHE Fellows free, and be sold to others for \$2.50. To pay for this publication we will need to sell a minimum of 700 copies -- this averages out to about two sales per SOPHE Fellow. As the advance sale announcement comes out, with a reduced price incentive, we trust you will make your quota.

Let's apply Health Education principles to our organization:

Do we consciously view actions of the Society as meeting the needs and views of the Fellows? Difficulties appear to arise when we tend to perceive others as having the same personal needs, desires and purposes that we have. We are not "one group", but many, and members differ in their views and values. Do we try to identify the motives, values and methods to use with the "peer groups" we are trying to reach? Do we start where people are within our organization and in our work with other organizations? Do we get the facts before we offer criticism? Communication from the Fellows is exceedingly important, but I would trust that a seeking out of the facts would be in order prior to a denouncement of any action. It is, of course, most disheartening and exceedingly destructive to have Fellows criticize the Society to non-members.

Realistic Expectations:

When we wish SOPHE would do this or that -- let's ask ourselves: How? What all is involved? What resources are needed? Are they available? Each Fellow should continue to stand up unflinchingly for his convictions, but let none of us turn aside from the Society because it cannot or does not meet all of our demands. This will only minimize the steady, though painful advances that have been made, and close the door to the profession's growth. We need to recognize the organization for what it is --- imperfect but indispensable.

After action is taken we all have 20-20 rear vision. This perfect rear vision makes it possible for us to find it difficult to understand why we didn't see more clearly and work more consistently toward our targets. Despite such errors in judgement, I hope the Board will not be criticized for a lack of steadfastness of purpose and flexibility of approach . . . we know that this kind of behavior alone will guarantee that the actions or ideas which we are exploring will be tested to the full.

Time for Expansion:

Two years ago, at our Annual Meeting, Louisa Haas reminded us of the cycle of life -- characteristics of all living things. They are: growth - division - reconstruction - expansion - rest - and growth again. SOPHE has gone through growth - recently some division - and this past year, reconstruction. Now it's time for expansion.

Your Part:

It is a leader's responsibility to lead--but my effectiveness will be dependent upon how well each of the Fellows shoulders his part of the burden and responsibility. I call upon you to take up your responsibilities. I welcome your suggestions and ideas.