

Young leaders in public health in Latin America and the Caribbean: insights from the eSAC Project

To the Editor:

Public Health is the science and art of preventing disease, prolonging life, and promoting health and well-being through organized community efforts (1). Growing public health challenges in Latin America and the Caribbean (LAC) and the potential for Information and Communication Technologies (ICTs) to help address the issues (2, 3), therefore, prompted the University of Toronto (Toronto, Canada) to collaborate with the Pan American Health Organization (PAHO) and the International Development Research Center (Ottawa, Canada; IDRC) on the "Public eHealth Innovation and Equity in Latin America and the Caribbean project (eSAC)" (4). Its aim was to improve the health and well-being of marginalized populations in LAC and 'push the envelope' by encouraging researchers, policymakers, practitioners, entrepreneurs, innovators, the media, and the general public to think beyond traditional eHealth solutions that typically focus on the individual, to ITC uses that might impact public health and the social determinants of health (4).

The engine behind the eSAC community was a group of five Young Professionals (YPs) who operated as a virtual team to catalyze the community's development. The YPs were Latin American and Caribbean professionals, 25–35 years of age, each with a proven record of practical interest in eSAC-related areas. Collectively, they were fluent in all of the major Western languages spoken in LAC. The YPs were selected in 2011 from 400 applications. The interview process included a face-to-face workshop with the top 10 candidates. Each YP was the top candidate from one of the five LAC sub-areas (the Andes, Brazilian or Amazon area, Central America, the Caribbean, and the Southern Cone).

This letter shares the insights of three of the five YPs who completed the 18-month eSAC project and the Professional Development Program in tandem (August 2011–March 2013) (Figure 1). Their responsibilities included multiple activities to promote the core concepts of eSAC through social media, local governments, and academic settings, while concurrently completing 33 two-hour training sessions on public health, health equity, and ICTs.

The YPs' efforts produced three main concrete products: a qualitative study on use of ICT to address the health needs of underserved populations in LAC (5); the Caribbean eHealth Webinar series; and eSAC

weekly tweetchats and bulletins. Following this experience, the YPs were asked to respond to eight openended questions; their answers were anonymized and complied for thematic analysis.

YPs reported that the most important reason for their initial interest in this project was their strong desire to become a public health leader, followed by the unique and interesting challenge of working with a completely virtual team. One YP was also motivated by the opportunity to meet other young professionals from LAC and create a collaborative public health network. YPs acknowledged the challenge of linking equity, public health, and ICTs. All three YPs stated that their expectations of the project were met, particularly their understanding that public eHealth needs effective teams and working environments.

YPs stated that their most valuable learnings came from reflecting on what public health, equity, and ICTs truly mean for a complex global environment. They concluded that geographical boundaries are becoming obsolete when addressing regional issues and that shared public health challenges can be addressed by collaborative networks of experts, stakeholders, and communities from all countries in LAC. Also, public health issues, though local in nature, are intricately linked to broader impacts at the global level. And while the eSAC project was completed in July 2014, collaboration among community members is continuing through social media.

YPs also learned that ICTs can be intimidating to some population groups; while to others, technology is simply part of everyday life. They also stated that although ICT use has expanded broadly over the last decade, significant challenges remain, including inequities in health care access and disparities in technological literacy. They felt that to effectively contribute to the population's health, public health leaders need to be aware of the vast contextual range that exists in LAC.

In all, the eSAC project gave YPs a unique opportunity for professional and personal development. Leading eSAC-related efforts was empowering, and challenged the YPs to contemplate the area's complex public health issues. They leveraged a range of ICTs, including all the major social media venues, professional communication tools, and academic publications. Ultimately, from the YPs' perspective, LAC is a complex region that comprises great social, economic, and cultural diversity and where effectively addressing public health issues requires not only a broad knowledge base, but also the ability to transform knowledge into policy and practice in novel ways.

FIGURE 1. General description of the eSAC project, the Professional Development Program for Young Professionals and its main products

The eSAC aims: (http://en.esacproject.net/)

- 1. To contribute to the improvement of health and well-being of marginalized population groups in the region.
- To 'push the envelope' by stimulating researchers, policymakers, practitioners, entrepreneurs, innovators, the media, and the general public to think beyond traditional eHealth solutions with an individual-level focus, by exploring the use of ICTs in public health, and exploring its impact on the social determinants of health.



The Professional Development Program:

Thirty-three 2-hour sessions within 18 months, structured in three distinct stages that organically responded to the changing needs of the project:

- 1) Internal conceptual stage: These first sessions were conducted among eSAC team members only and had the objective of discussing and reaching a common understanding of the project's main conceptual themes and their intersection.
- 2) Internal conceptual stage with academic guest lecturers: The second stage consisted of closed sessions with subject-matter experts to inform and enrich the team's understanding of the project's main conceptual themes and their intersection.
- 3) Public interchange stage with practitioners and skills for knowledge translation: Based on the results of the evaluation conducted at the end of the second stage, the team transitioned to a two-pronged approach: development of young professionals skills as knowledge translators for decision-making and the sharing of practical experiences in the field.



Main products:

- 1. One qualitative study about the use of ICT to address the health needs of underserved populations in Latin America and the Caribbean (currently in press)
- 2. Caribbean eHealth Webinar series
- 3. eSAC weekly tweetchats
- 4. eSAC bulletins

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