BOX 1



WHAT SKILLS WITHIN EACH COMPETENCE DOMAIN TOMORROW'S WORKFORCE SHOULD HAVE FOR HP IN A TIME OF CHANGES

In the **Enable change** -domain the top-one demand for future skills focused on the *citizens' own initiative to enable change*. "In the future, a professional must strengthen citizens' ability to take responsibility for their own health and wellbeing." Of all respondents 75 % considered this as an essential competence. In Finland even 78 % of respondents compared to 67 % of Estonian ones. Related to this trend, skills for need- and client-based HP approach were emphasized especially by the Finnish respondents (63 %) compared to the 41 % of Estonian ones. In both countries *strengthen cooperation across different sectors and fields* was considered as essential competence for all by the majority of respondents (68 %). The creation of *a healthy work and living environment* was top-two competence in Estonian HP (62 %) while 39 % of the Finnish respondents considered it as an essential competence.

Communication. Traditional communication skills were valued highly by respondents in both countries. In the future a professional have to be able to communicate by using plain language instead of jargon (70 %); to assess critically the sources of HP information (59 %) as well as communicate by using evidence based information (57 %).

It was surprising that use of social or new interactive digital communication channels were considered more often as desirable communication competence rather than essential one in both countries. Social media was even considered by 32 participants as not relevant. Cooperation with communication experts (36 %) was evaluated most often as specific competence being relevant for some but not for all.

In the domain of **Knowledge / Awareness**, the three knowledge areas were considered by over 50 % of the respondents as essential competence for promoting health and wellbeing in the future in both countries. First, the professionals have to know the core concepts and principles of HP (67 %). Second, they have to be able to identify the risk and protection factors of health (64 %). Third, in the future a professional has also to identify potential emerging health risks (55 %).

Identification of the risk and protection factors was the most often valued competence by the Finnish professionals (71 %). Estonian professionals prioritized most often awareness of the core concepts and principles applied in the field (64 %). Taken together, these competences are all about benchmarking awareness of a safety and healthy environment. The knowledge of multidisciplinary HP, its theoretical and research basis as well as awareness of how to reduce inequalities and use technological application in future HP work, were also considered by many respondents as the essential skill demands for future competences.



The international follow up (37 %) and national HP policies / programs (33 %) were most often considered as specific competence and relevant for some but not for all professionals by the respondents in both countries.

Advocacy. Generally, the ratings of respondents are broadly *distributed across* the different value *categories* in the advocacy domain. In this domain there was, however, one clear advocacy skill considered by majority of respondents as essential one. Of the respondents 59 % considered that, in the future, a professional must *demonstrate the positive impacts* and effects of HP actions. Half of the Estonian respondents emphasized as an essential skill also to empower citizens and communities for HP in the future.

The policy and media related activities to advocate health and wellbeing were most often considered as specific competence rather than essential for all.

Mediate through Partnership. The collaboration with specialists from different sectors and fields (60 %) as well as cooperation between key stakeholders (48 %) were considered most often as core competences of mediating through partnership in both countries. In other items there were, however, interesting differences between Estonian and Finnish respondents in their evaluations. Statistical analyses will indicate later whether these are statistically significant. Estonian respondents seem to prioritize participation in different kind of network activities more often than Finnish ones. Majority of Estonian respondents (54 %) considered participation in local and regional HP networks as an essential way to mediate HP activities while only 28 % of Finnish participants considered local and regional networking as an essential competence for all. The competence to apply different method and tools for cooperation and networking was also prioritized slightly more often by Estonians (45 %) than Finnish 37 %.

International cooperation was considered as specific competence by 70 % of the Finnish respondents compared to 40 % by Estonian ones. Also participation in national HP network was seen as a specific competence more often by Finns (54 %) than by Estonians (27 %).

Leadership. Generally, leadership competences are considered by some 30 % of respondents as Essential, some 30 % ones as Desirable and some 30 % as Specific (+10, - 10 %). The competence profiles for leadership are quite similar in Estonia and Finland in the sense that responses have been distributed around one-third to each value category. Generally, the competence base required for effective HP leadership seems to be broad involving skill demands for leadership at the policy-, strategic-, management- and service-level.

Needs assessment. The most essential skill in this domain was an ability to *identify key drivers for and barriers to HP actions*, according to 58 % of respondents in Estonia and Finland. The identification of professional competence and training needs in HP were valued as essential by 42 % of the all respondents. The skill to identify the needs and set priorities for HP by involving citizens and stakeholders with, was prioritized by the Estonian respondents (44 %) as a second-top skill in this domain.

The assessments of the Specific skill demands differed between Estonian and Finnish respondents. Finnish respondents considered *data monitoring* (46 % vs. 26 %EE) and application of different assessments methods (46 %) as specific competences more often than Estonian ones (28 %, second item in the domain).



Planning and implementation. The skill to "use the best practices for promoting health and wellbeing" was top-one in Planning and Implementation -domain considered both by Estonian respondents (61 %) and Finnish ones (67 %). Generally compared to the Finnish respondents, Estonian ones assessed planning and implementation skills more often as essential for all professionals. While the Finnish respondents considered these skills more often as specific: such as development of evidence based policies (FI 56 % vs. EE 37 %), or formulation of appropriate and measureable objective (FI 34 % vs. EE 12 %). Skills to design and test of new methods for HP was prioritized as a specific competence in both countries.

Evaluation and research. There were no clear priorities or trends for future skill demands in Evaluation and Research domain shared by the Estonian and Finnish respondents. Some differences emerged in the profile of competences assessed as specific. Generally, the Finnish respondents used more the specific competence value category compared to Estonian ones.

The skill to "evaluate the impact and benefit of guidance and counselling at the individual level" was considered as top-one core competence by half of the Finnish respondents compared to third of the Estonian ones. Half of the Estonian respondents agreed instead that skill "to use evaluation findings to improve HP actions" was essential competence compared to 38 % of Finns. Future challenges