### MEETING PEOPLE

# A Maltese Medic in Copenhagen



YOU HAVE OCCUPIED VARIOUS HEADSHIP POSITIONS WITHIN THE MINISTRY OF HEALTH AND YET YOU HAVE ALWAYS SEEMED TO MANAGE EFFECTIVELY YOUR WORK, RESEARCH PROJECTS AND ACADEMIC COMMITMENTS. WHAT IS KEY TO THIS, CONSIDERING THE FACT THAT YOU HAVE A BUSY FAMILY?

I do love travelling, swimming, the theatre, going to Gozo, as well as attending activities with my three children but the rest of my waking hours I simply work! So, my answer to your question is that it is key to have support. I readily admit to being a workaholic but I have been fortunate as my parents and my husband, himself also a doctor, have provided presence and stability to the children over the years during my long working days and travels although I still tend to coordinate everyone's timetables remotely.

## YOU ARE A FOUNDING MEMBER OF THE MALTESE ASSOCIATION OF PUBLIC HEALTH MEDICINE AND HAVE BEEN ALSO PRESIDENT OF THE EUROPEAN PUBLIC HEALTH ASSOCIATION. WHY SPECIALISE IN PUBLIC HEALTH?

I guess the answer can be traced to my summer internship in the UK when I was a 4th year medical student at King's College. I loved walking over Westminster Bridge with the Houses of Parliament on one side of the Thames and Guy's and St Thomas' on the other. One day, I vividly remember asking myself ... which direction should I follow? Although I loved clinical work with patients, I was increasingly drawn to politics through my activism in student and youth organizations as I was discovering that in politics you can affect the lives of so many people with just one single decision.

That seed was subsequently nurtured by the late Prof. Herbert Michael Gilles - born to Maltese parents in Egypt and eventually becoming a visiting lecturer to the University of Malta. I learnt to appreciate that public health effectively weaves the clinical knowledge with one's ability to put forth political decisions that affect the health of people.

So to me, Public Health quintessentially means pacing Westminster bridge ...something I have done incessantly for the past two decades. It entails bridging two separate worlds; leading health services with clinicians whilst concomitantly engaging with politicians to ensure effective decision-making to protect, promote and invest in people's health.

## BETWEEN 2011 AND 2013 YOU WERE APPOINTED AS CHIEF MEDICAL OFFICER, THE FIRST WOMAN TO ACTUALLY OCCUPY THAT POST. DID THIS CREATE RIPPLES?

By the time I was appointed Chief Medical Officer I was a seasoned face at the Ministry of Health. However, ten years earlier, in 2001, when appointed as Director EU & International Affairs, at age 27 I was the youngest director ever, a woman and to top it all ... 8 months pregnant. My onerous obligations included participating in interministerial meetings at the Office of the Prime Minister in the run-up to Malta's accession into the EU. I found myself amongst 12 men with a median age somewhere between 40 and 50 years. That period was challenging, but diffidence gave way to comradeship and support; and I treasure those memories fondly to this very day. Fast forward to 2020 and I can boldly say that in the health sector, many key leadership positions are now held by women.

#### WHO ARE YOUR ROLE MODELS?

Undoubtedly, Martin Mckee, Professor of Public Health at the London School of Hygiene and Tropical Medicine. For the last 23 years he has been my colleague, mentor and friend. He is highly intelligent but humble to the core at the same time, a rare find nowadays ... always available to mentor students and early career professionals. I was tremendously fortunate since when I was at the London School of Hygiene and Tropical Medicine in 1998, he asked me to write the first WHO Health Systems in Transition report for Malta, my very first publication. Many years later, having worked closely together on several projects, he encouraged me to contest the election to become his successor as President of the European Public Health Association

Another person who influenced me profoundly is Dr Gro Harlem Brundtland, who served as Director-General of WHO between 1998 and 2003. In 1999, as a junior public health doctor working at the Ministry of Health, I was informed that I would form part of Malta's delegation to the World Health Assembly in Geneva just a few days before the event. This, I got to know later, was precipitated by a policy decision by Dr Brundtland strongly recommending that if a country delegation had more than three people, at least one had to be a woman.

I have never met Dr Brundtland yet, her lifetime achievements inspired me. Apart from being DG of WHO and previously Prime Minister of Norway, she remains well known for her early contribution to sustainable

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development ... and had four children! ... making me realise that it was possible to reach the highest positions, exert global influence and yet also be a mother.

## HOW DO YOU VIEW THE RELATIONSHIP BETWEEN PUBLIC HEALTH AND POLITICS?

Health and a country's wealth have a symbiotic relationship. COVID-19 has triggered much debate on whether health or the economy should prevail. In practice it has taught us clearly that we cannot have one without the other. But most of all, that economic and health experts should realise better that economic growth and health are in themselves both means to an end ... a fulfilled and dignified lifetime where well-being plays a central role. GDP is the most important economic indicator for a country. Yet, is it a good enough measure of a country's progress? Complementing GDP with social indicators related to quality of life and well-being, as well as environmental indicators has been advocated as an alternative way to actually measure the real wealth of a country.

## IN YOUR OPINION WHAT ARE MALTA'S CHALLENGES WHEN IT COMES TO SOCIAL DETERMINANTS OF HEALTH?

In recent years Malta registered progress in reducing overall tobacco consumption, as well as alcohol use in 15-year olds. However, we still are facing formidable challenges with obesity and diabetes as well as air pollution. In keeping with this the Maltese Association of Public Health Medicine has submitted various proposals to better regulate unhealthy foods and to increase walkability in Malta.

One must appreciate that those groups which are most adversely affected by obesity, exposure to air pollution and tobacco use and adverse mental health - are those who have the least education, lowest incomes and lack job skills. Health inequalities and the wider determinants of health need to be addressed far more vigorously if we want to continue to make effective progress in health, the economy and society.

## LAST MAY YOU WERE APPOINTED DIRECTOR OF THE DIVISION OF COUNTRY HEALTH POLICIES & SYSTEMS AT WHO. WHAT LIES ON YOUR AGENDA?

Reflecting on the role of health systems, health and society to better shape a post-COVID world is an opportunity not to be missed. There are various areas which need to be addressed. Championing collaboration between member states with a view to gain access to better and cheaper medicines is one of them. Another area relates to transforming sustainable health service delivery and addressing the healthcare workforce shortage amongst the 53 countries within the WHO European region. Digital health enablers play an important role in this. Even locally, is there a need for patients, including elderly ones, to visit hospital to receive investigation results when these require little or no intervention? Can't this be done via telemedicine? Another priority area is mental health where the European Region

has a significant disease burden and much more needs to be done from a political perspective as well as service transformation.

## YOU ARE NOW BASED IN COPENHAGEN, RIGHT? FOR HOW LONG?

I have now moved to Copenhagen. My contract runs until May 2021 and may be renewed. We will take it from there one step at a time

## YOU ARE NOT THE ONLY MALTESE PERSON TO HOLD A PROMINENT ROLE WITHIN THE WHO. DR GAUDEN GALEA, WHO'S REPRESENTATIVE IN CHINA, FEATURED PROMINENTLY DURING THE PANDEMIC. ARE YOU FOLLOWING HIS STEPS?

Dr Galea, founder of The Synapse, has been my friend and mentor for many years. We have always been in contact. Since 2013, I completed my PhD, subsequently became president of the European Public Health Association, and have always been the sort of person to ask myself what next now? Dr Galea encouraged me and was key in my decision to apply for the post of Director of the Division of Country Health Policies & Systems at WHO.

WHO IS CURRENTLY FACING BIG CHALLENGES,
MOST NOTABLY RELATED TO FUNDING. THE US - THE
BIGGEST FUNDER CONTRIBUTING MORE THAN \$400
MILLION IN 2019 - HAS RECENTLY ANNOUNCED
THAT IT WILL STOP FUNDING. THE BILL AND MELINDA
GATES FOUNDATION, ALSO BASED IN THE US, ARE THE
SECOND BIGGEST FUNDERS - MORE THAN THE UK AND
NORTHERN IRELAND PUT TOGETHER - CONTRIBUTING
OVER \$200 MILLION. WHAT ARE YOUR VIEWS ON THIS?

The US government has been a very strong and important partner for WHO since inception. WHO is working with several partners for proper forward planning.

### WILL YOUR CHILDREN FOLLOW YOUR STEPS?

Our elder son is reading architecture, our daughter loves the performing arts and is increasingly drawn to international affairs; possibly our youngest son could become a doctor. I always advise them to choose a career which they love doing ... because this means that work will not be a burden but something that gives them joy.

#### I READ THE SYNAPSE BECAUSE ....

The journal has improved considerably under your stewardship. My family likes to read it since it provides an insight in research being conducted locally. It is also the only local medical publication which we still physically receive at home and ends up lying around on the kitchen table for a few days so it is very convenient for us to read. Keep up the good job!

The views and opinions expressed in this interview are solely of the interviewee and do not necessarily reflect the official policy or position of WHO.