Committee on Assuring the Health of the Public in the 21st Century
The Committee’s Charge

Create a framework for assuring population health in the U.S. in the 21st Century

To be broader than 1988 report, *The Future of Public Health*
The Committee’s Vision

Reiterate the vision of Healthy People 2010

“Healthy People in Healthy Communities”
Background

- Great national health achievement in the 20th century, *but*
- U.S. falling short in international comparisons
- Poor return on investment in health
- Concern about the government public health infrastructure’s ability to meet future health challenges
Lack of Response to 1988 Report

• No fundamental reform of the statutory framework for public health in most of nation

• Increased funding for public health infrastructure primarily limited to bioterrorism and emergency preparedness

• Gaps remain in workforce capacity and competency, information and data systems, and the organizational capacity of state and local health departments and public health laboratories
21st Century Public Health Challenges Include:

- Globalization
- Advances in scientific and medical technologies
- Demographic transition
Health = public good = social goal of many sectors and communities

Government has fundamental, statutory duty to assure the health of the public, but

Government cannot do it alone

Need for intersectoral engagement in partnership with government.
In 1988 report, public health refers to the organized efforts of society, both government and others, to assure the population’s health.

- This 2002 report elaborates on the efforts of the other potential public health system actors.
The Public Health System

Assuring the Conditions for Population Health

- Community
- Health care delivery system
- Governmental Public Health Infrastructure
- Employers and Business
- Academia
- The Media
Areas of Action for Public Health

• Adopt a population-level ecological approach
• Strengthen the governmental public health infrastructure
• Build partnerships
• Develop systems of accountability
• Base policy and practice on evidence
• Enhance communication
Determinants of Population Health

Living and working conditions may include:

- Psychosocial factors
- Employment status and occupational factors
- Socioeconomic status (income, education, occupation)
- The natural and built environments
- Public health services
- Health care services
Multiple Determinants of Population Health

- Biology
- Behavior
- Social, Family & Community Networks
- Living & Working Conditions
  - Employment & occupation
  - Education
  - Socioeconomic status
  - Psychosocial factors
  - Natural and built environment
  - Public & health care services
- Broad social, economic, cultural & environmental policies at global, national, state & local levels.
Addressing the Challenges: Ecological Model of Health

• An Ecological Model includes:
  – multiple determinants of health
  – linkages and relationships among determinants are emphasized
  – multiple strategies by multiple sectors
Infrastructure

Recommendations to government public health agencies

Make leadership training, support, and development a priority within government public health agencies and the academia that prepares the workforce.
Infrastructure

Recommendations to the Secretary of HHS and DHHS agencies

Develop a research agenda and estimate the funding needed to build the evidence base that will guide policy making for public health practice.
Community

Recommendations to government and others

Local health departments should support community-led efforts to promote and protect health.
Health Care Delivery System

Recommendations to government and others

All public and privately funded insurance plans should include age-appropriate preventive services and provide evidence-based coverage of oral health, mental health, and substance abuse treatment services.
Employers and Business
Recommendations to government and business

The corporate community and public health agencies should engage in joint efforts to strengthen health promotion and disease and injury prevention programs for employees and their communities.
Academia

Recommendations to academia and funders

Federal funders of research and academic institutions should recognize and reward faculty scholarship related to public health practice research.
CDC should authorize an analysis of the funding levels necessary for effective Prevention Research Center functioning, as well as the amount of prevention research occurring in other institutions and organizations.
NIH should increase the portion of its budget allocated to population- and community-based prevention research.
Academia
Recommendations to Congress

Increase funding for HRSA programs that support public health students, the Public Health Training Centers, and the National and Regional Leadership Institutes that train public health and community leaders.
Academia

Recommendations

Academic institutions should develop criteria for recognizing and rewarding faculty scholarship related to service activities that strengthen public health practice.
Who Will Keep the Public Healthy?

Educating Public Health Professionals for the 21st Century

Institute of Medicine

THE NATIONAL ACADEMIES
Advisers to the Nation on Science, Engineering, and Medicine
New Content Areas Needed

- Informatics
- Global Health
- Cultural competency
- Ethics
- Community-based Participatory Research

- Genomics
- Policy and Law
- Communication
Recommendation for Community Collaboration

Schools of public health should:

– position themselves as active participants in community-based research, learning, and service

– provide students with didactic and practical training in community-based public health activities.
Recommendation for Community Collaboration

Community-based organizations should have enhanced presence in schools’ advisory, planning, and teaching activities.
Recommendation for Governmental Health Agencies

• Actively assess the public health workforce development needs in their region;
• Develop incentives to encourage continuing education and degree-program learning;
• Assure that those in public health leadership and management positions have formal public health training.
Recommendation for Governmental Health Agencies

• Develop plans in partnership with schools of public health for assuring that public health education and training needs are addressed.

• Engage in faculty and staff exchanges and collaborations with schools of public health.
Recommendation for Access to Life-Long Learning

- Schools of public health should assure access to life-long learning opportunities for:
  - public health professionals,
  - other members of the public health workforce, and
  - other health professionals who participate in public health activities.
Recommendation for Governmental Health Agencies

• Support increased participation of public health professionals in the education/training activities of schools/programs of public health, especially practitioners from local and state public health agencies; and

• Improve practice experiences for public health students through increased numbers and types of agencies that serve as sites for practica.
Provide increased funding to:

- Support increased participation of public health professionals in the education and training activities of schools; and
- Improve practice experiences for public health students.
Educational Contribution of Public Health Professionals to Academia

- Provision of on-site practicum opportunities for students,
- Mentoring and career counseling,
- Service on school advisory committees, and
- Participation in classroom teaching.
Schools of Public Health Recommendation for Faculty

• There should be major changes in criteria used to hire and promote school of public health faculty. Criteria should reward experiential excellence in the classroom and the practical training of practitioners.
Funding Recommendations

• There should be a significant increase in public health research support (i.e., population health, primary prevention, community-based and public health systems research).
Funding Recommendations

Provide increased funding to:

• Develop competencies and curriculum in emerging areas of practice;
• Fund degree-oriented public health fellowship programs;
• Provide incentives for developing academic/practice partnerships;
Funding Recommendations

• CDC should redirect current extramural research to increase peer reviewed investigator-initiated awards in population health, prevention, community-based and public policy research.

• CDC should reallocate a significant portion of current categorical public health research funding to competitive extramural grants in population health, prevention, community-based, and public health policy research.
Unanswered Questions about Public Health Workforce Development

• Little systematic information about:
  – Use of various education/training opportunities
  – Courses and topics most frequently sought
  – Effectiveness of different types of education and training modalities
  – Level of use and value of distance education
  – How to increase the diversity of the workforce