Public Health in Transition: Embracing and Preparing for the Future

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Supporting State Affiliates

We need to:

- develop more leaders and improve leadership ability to advance our work
- engage members in more robust and effective advocacy for public health
- reach out to new (and different) partners and build more effective collaborations
Continued Support by:

- Lifting the spirits of the public health workforce and serve as a champion for the work that they do
- Spend as much time as possible learning about their issues
- Translate their stories and experience into effective advocacy
APHA and MPHA

- Partners in serving the public’s health
- A place where everyone knows what you do!
- International, national, regional, state and local perspectives
- Advocacy, professional development
- Health in all policies
- Focused on priorities
- Effective and sustainable organizations
APHA’s 2013 Overarching Priorities

• Creating health equity
• Ensuring the right to health and healthcare
• Building public health infrastructure and capacity
Social Injustice

“Of all the forms of inequality, 
injustice in health is the most shocking and inhumane.”

-Dr. Martin L. King, Jr.
APHA Values – November 2013

- Community
- Science and evidence-based decision-making
- Health equity/Social justice
- Prevention and wellness
- Real progress in improving health
Global Health Equity

“Our most basic common link is that we all inhabit this planet. We all breathe the same air; we all cherish our children’s future; and we are all mortal.”

• U.S. President John F. Kennedy
IOM Report: U.S. is #17

- Compared U.S. data with statistics from 16 peer developed countries
- Lagging behind other countries in life expectancy and health; expressed the gravity of the situation

*Institute of Medicine Report*, January 2013
Social and Economic Conditions

Fewer safety net programs that can buffer the negative health effects of poverty and other social disadvantages.

Higher levels of poverty (especially for children), more income inequality, and lower rates for social mobility.
Underlying Causes of Poor Health Outcomes: Social Determinants of Health

- Socioeconomic Status
- Educational Opportunities
- Discrimination
- Housing
- Physical & Built Environment
- Food Security
- Child Development
- Culture
- Social Support
- Healthcare Access & Quality
- Transportation
- Working Conditions

Source: Adapted from Krieger, 2003; Adler, 2002; Marmont, 2010; Kawachi, 2002, CDC, 2010
Mechanism by Which Adverse Childhood Experiences Influence Health and Well-Being Across the Lifespan

The Adverse Childhood Experience (ACE) Pyramid represents the conceptual framework for the study.
http://www.cdc.gov/violenceprevention/acestudy/pyramid.html
Creating a Shared Vision

“The best way to predict the future is to create it.”

-Peter F. Drucker
Create the Healthiest Nation in One Generation

Eliminating Health Inequity

PORTIONS HAVE GROWN
SO HAS TYPE 2 DIABETES, WHICH CAN LEAD TO AMPUTATIONS
Looking Upstream to Address Root Causes

A Public Health Framework for Reducing Health Inequities

- **Upstream**
  - Social Inequities
    - Class
    - Race/ethnicity
    - Immigration status
    - Gender
    - Sexual orientation
  - Institutional Power
    - Corporations & businesses
    - Government agencies
    - Schools
    - Laws & regulations
    - Not-for-profit organizations
  - Living Conditions
    - Physical environment
    - Land use
    - Transportation
    - Housing
    - Residential segregation
    - Exposure to toxins
    - Social environment
      - Experience of class, race, gender, immigration
      - Culture, incl. media
      - Violence
    - Economic & Work Environment
      - Employment
      - Income
      - Retail businesses
      - Occupational hazards
    - Service environment
      - Health care
      - Education
      - Social services
  - Risk Behaviors
    - Smoking
    - Poor nutrition
    - Low physical activity
    - Violence
    - Alcohol & other drugs
    - Sexual behavior
  - Disease & Injury
    - Communicable disease
    - Chronic disease
    - Injury (intentional & unintentional)

- **Downstream**
  - Mortality
    - Infant mortality
    - Life expectancy

- Emerging Public Health Practice
  - Strategic partnerships
    - Advocacy
  - Community capacity building
    - Community organizing
    - Civic engagement
  - Individual health education
  - Health care
    - Case management

- Policy
What is the Goal of HiAP?

• Ensure decision makers are informed about the health, equity, and sustainability consequences of policy options during the policy development process.

• Policy outcomes reflect those consequences.

• Improve population health and equity.
Intersectoral Collaboration

Bring together partners from the many sectors that play a major role in shaping the economic, physical, and social environments in which people live:

- Health and Human Services
- Parks and Recreation
- Hospitals
- City Planning
- Human Resources
- Food
- Housing
- Transportation
- Education
- Environmental Protection

Interagency collaboration requires strong relationships that are built on a foundation of trust, mutuality, and reciprocity.

Focus on deep and ongoing collaboration.
How Long and How Well We Live

- Genetics: 30%
- Behaviors (alcohol, tobacco, diet, physical activity): 40%
- Health Care: 10%
- Environment: 5%
- Social Circumstances: 15%

Source: Adapted from McGinnis JM & Foege WH. Actual causes of death in the United States. JAMA 1993; 270(18):2207-12; McGinnis JM, Williams-Russo P, & Knickman JR. The case for more active policy attention to population health promotion. Health Affairs 2002; 21(2):78-93
In health there is liberty. Health is the first of all liberties, and happiness gives us the energy which is the basis of health.

-- Henri-Frederic Amiel
Leading Through Personal and Organizational Advocacy

- Find ways to support your organization’s goals without breaking rules or policies
- Join professional public health associations because they support your advocacy efforts
- Get to know your own elected officials; contact them outside of the legislative session and on your own time
- Inform to educate and persuade people by sharing personal stories
Imagine what would be possible if:

- We had the right messages
- Delivered in the right way
- To the right people
- At the right time
- A strong, unified voice can make an impact!
People don’t fall in love with a population!
“The challenges are great....”

- Remarks by Donald Berwick, MD

- Lack of confidence in science
- Need to use our global brains
- A lack of creativity for new ways to make effective and cost effective change
- Defending the poor—not popular
- The “miracle” of prevention
- Naming the excess spending in healthcare
This will require leadership!

“Today the need for leadership is too great to leave its emergence to chance.”

Anyone can be a leader

- Leadership is about the ability to influence others through relationships – not a title
- Leaders are not born – they are developed
- Important to “build your bench”
- Effective leaders are evaluated on their ability to develop leadership in others
Essential skills necessary to serve as a competent leader

- Relationships
- Lifelong learning
- Vision
- Passion
Importance of Relationships

- Most fundamental of all human needs
- Trust, respect, good communication
- Amplify the voice of individuals
- Learn to reach out to those who do not think and feel the same as you
Lifelong Learning

- Ecological model for leadership development (Rowitz)
- Thinking critically, with an open mind
- Bringing others to the table by using all of your skills
- Much of this is more “art” than “science”
Vision

- “Healthiest Nation in One Generation”
- Vision moves people forward
- Requires creativity, innovation, imagination
- You must engage others in the process
- Who are the ‘imagineers’ in Michigan?
- Story telling about how you will make a difference
Passion for your work and service

- Reflect on the time when you first started working in public health...what motivated you?
- Nurture your passion
- “A small group of thoughtful people could change the world. Indeed, it’s the only thing that ever has.”
  --Margaret Mead
The Future is Ours to Create

- Thinking 10, 20, 30 and more years ahead
- Manage the power, the policies, and lead people toward a better, healthier future
- Leadership is not for the timid
- Let people see the leader in you!
“Leadership is like a relay race—make sure you pass the baton to the next person.”

Dr. David Satcher  
Former U.S. Surgeon General
Developing the Right Type of Leaders for the Future

- Leaders need resilience, courage, and creativity
  - Building the stomach for the journey (Heifetz and Lewinsky)
  - Model the way (Kouzes and Posner)
  - Create an environment that encourages innovation and creativity
  - Make time to “practice” creative thinking
  - Change your perspective (go to the balcony)
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