Why does Public Health matter?

"Public health [is] what society does collectively to assure the conditions for people to be healthy."
Institute of Medicine, November 2002

The health of the population is the goal of pubic health. Public health operates on the principles of disease prevention, health promotion and protection, and healthy public policy.

The *public health system* is the means we have chosen to achieve the goal of a healthy population. The public health system:
- Prevents epidemics and the spread of disease
- Protects against environmental hazards
- Prevents injuries
- Promotes and encourages healthy behaviours
- Responds to disasters and assists communities in recovery
- Assures the quality and accessibility of health services

For less than five cents on the health care dollar, over the past 50 years public health has increased life expectancy by 20 years. This achievement has resulted from a number of initiatives (e.g., vaccinations, motor-vehicle safety, safer workplaces, safer and healthier foods, healthier mothers and babies, etc.).

So, what's the problem?

"Public health prevents illnesses and, therefore, its victories are silent victories."
Michael Rachlis, February 2003

Public health's success – and its silence – have led to a gradual eating away at the infrastructure needed to enable the public health system to function effectively.

Infrastructure is *"the systems for policy development, monitoring and surveillance, research and evaluation, workforce development and program delivery that direct and support action to promote, protect and maintain the health of the population."*
(Nutbeam, 1998, p. 301)

These problems are not exclusive to Canada – reports by the WHO and, in the US, by the Institute of Medicine, have also highlighted the issue.

In "The Future of the Public's Health in the 21st Century," the Institute of medicine summed up the problems in the US public health system that were revealed by September 11, 2001:

> *The glare of a national crisis highlighted the state of the infrastructure with unprecedented clarity to the public and policy-makers: outdated and vulnerable technologies; a public health workforce lacking in training and reinforcements; antiquated laboratory capacity; lack of real-time surveillance and epidemiological systems; ineffective and fragmented communications networks; incomplete domestic preparedness and emergency response capabilities; and communities without access to essential public health services.*
>
> *Although these problems became apparent in a time of crisis, they gave rise to concerns about the integrity of the day-to-day functioning of the structures that promote and protect the public's health in the face of food safety issues, exotic or re-emerging microbes, and escalating chronic disease.*
> (page 3)

Increasing our investment in Public Health is essential for reducing the burden of illness and injury on families and the health care system.

What's needed?

We need a lens that provides a snapshot of public health capacity in Nova Scotia. It should enable us to:
• Identify strengths and gaps
• Define priorities
• Inform stakeholders
• Focus new initiatives and research

We need a quick way for decision-makers and the public to identify what programs and resources are needed to achieve positive public health results.

The attached Public Health Capacity Framework is PHANS' contribution to initiating discussion on this topic.

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PUBLIC HEALTH ASSOCIATION OF NOVA SCOTIA (PHANS)
THE PUBLIC HEALTH CAPACITY FRAMEWORK

Public Health Results	Markers (Capacities needed to ensure results)	Provincial		Federal	
		Infrastructure requirements	Investment Requirements	Infrastructure requirements	Investment Requirements
Individuals and communities are protected from epidemics and the spread of **disease**	• Active surveillance system monitoring chronic, communicable & risk of bioterrorism •National Immunization Program				
Individuals and communities are protected from **environmental hazards**	• Sufficient systems to monitor, regulate & enforce the quality of air, water, food, soil and waste management • Sufficient systems to monitor, regulate & enforce occupational health & safety • Process & standards enforced to clean-up contaminated sites				
Individuals and communities are mobilized to prevent and manage unintentional and intentional **injuries**	• Integrated, comprehensive injury prevention strategy, standards that are implemented and monitored for intentional injuries • Integrated, comprehensive injury prevention strategy, standards that are implemented and monitored for unintentional injuries • Integrated, comprehensive management response for injuries is implemented, monitored and evaluated				
Individuals and communities are mobilized to choose **healthy behaviors**	• • •				
Individuals and communities are prepared for **disasters** & assisted in response and recovery	• Integrated, organized disaster plan and training • Integrated, organized response to disasters • Integrated, organized recovery that includes prevention				
Individuals and communities are assured **quality health** services	•Population health approach with intersectoral collaboration on determinants of health •Public participation, capacity development, empowerment •evaluation •Policies supportive of health				
Individuals and communities are assured **accessible health** services	• Universal access to culturally-relevant integrated & timely primary health services • Universal access to culturally-relevant integrated & timely secondary health services • Universal access to culturally-relevant integrated & timely tertiary health services				
All levels of government develop, implement, monitor & evaluate **public policy** that supports health	• • •				

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References

Canadian Public Health Association website: http;//www.cpha.ca

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Nutbeam, 1998, p. 301

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