




Public Health 3.0



PUBLIC HEALTH

What we do together as a society to ensure the conditions in which everyone can be healthy.

PUBLIC HEALTH 1.0



(late 19th/most of 20th Century)

Comprehensive public health protection—from primary prevention through treatment—becomes possible for the first time in history.

Development of an astonishing array of health-protecting **tools** and **capacity** with increasingly sophisticated techniques for ensuring sanitation and food safety.

PUBLIC HEALTH 2.0



(1980s to Present Day)

By late in the 20th century, there was ***tremendously uneven*** public health capacity at the local levels.

Health Departments strained to address new infectious disease challenges as well as the growing challenge of chronic disease prevention and preparedness.

Governmental public health ‘came of age’ – culminating in today’s Health Department accreditation movement.

PUBLIC HEALTH 3.0



Economic
Opportunity



Housing



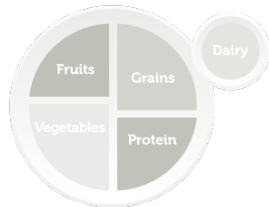
Environment



Education

Social Determinants of Health

are the conditions in which people are born, live, work and age.



Food



Safe Neighborhoods



Transportation

What is PUBLIC HEALTH 3.0 ?

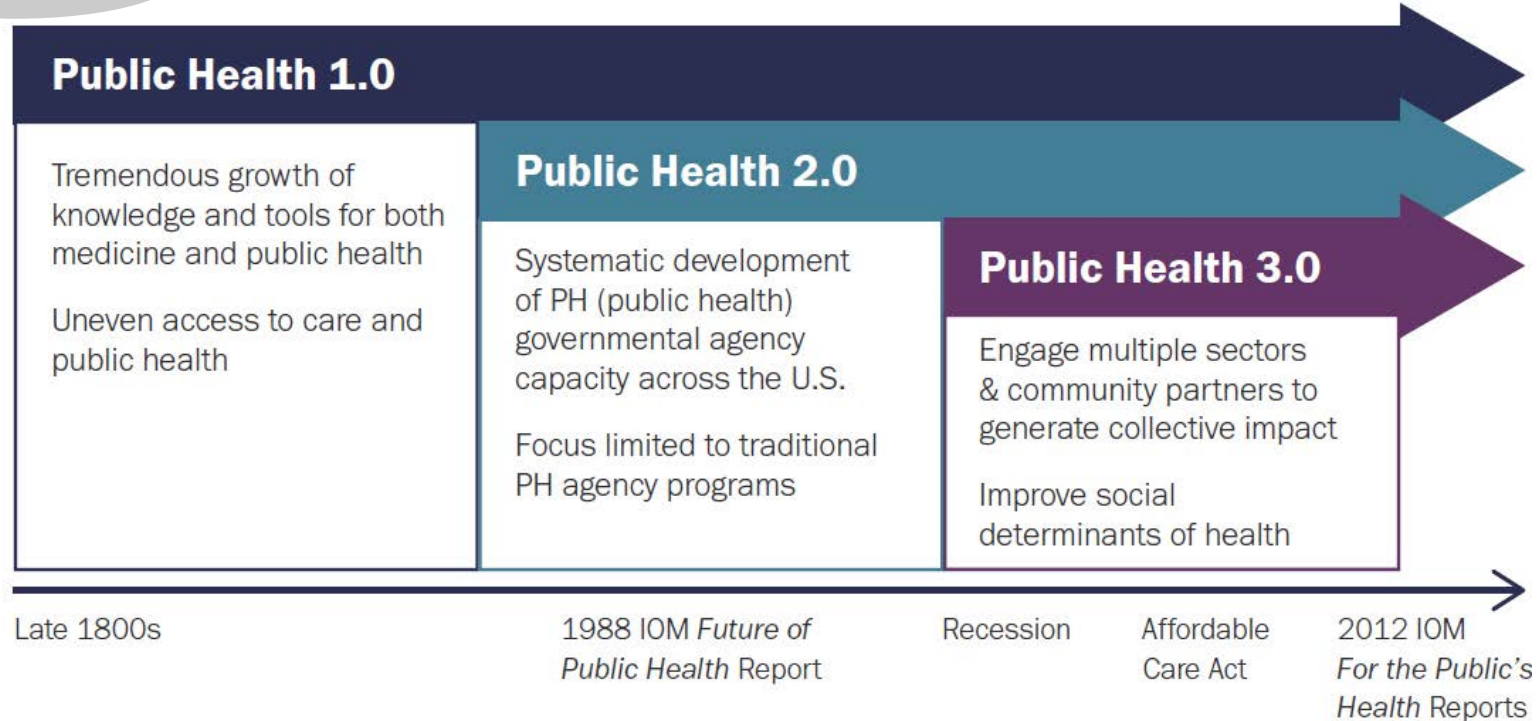


A significant upgrade in public health practice to a modern version that emphasizes **cross-sectorial** environmental, policy- and systems-level actions that directly affect the **social determinants of health**.

Local Public Health Leaders
as the **Chief Health Strategist**

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TIMELINE



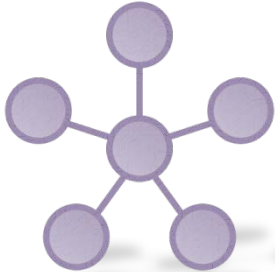
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KEY COMPONENTS



**LEADERSHIP &
WORKFORCE**

**ESSENTIAL
INFRASTRUCTURE**



**STRATEGIC
PARTNERSHIPS**

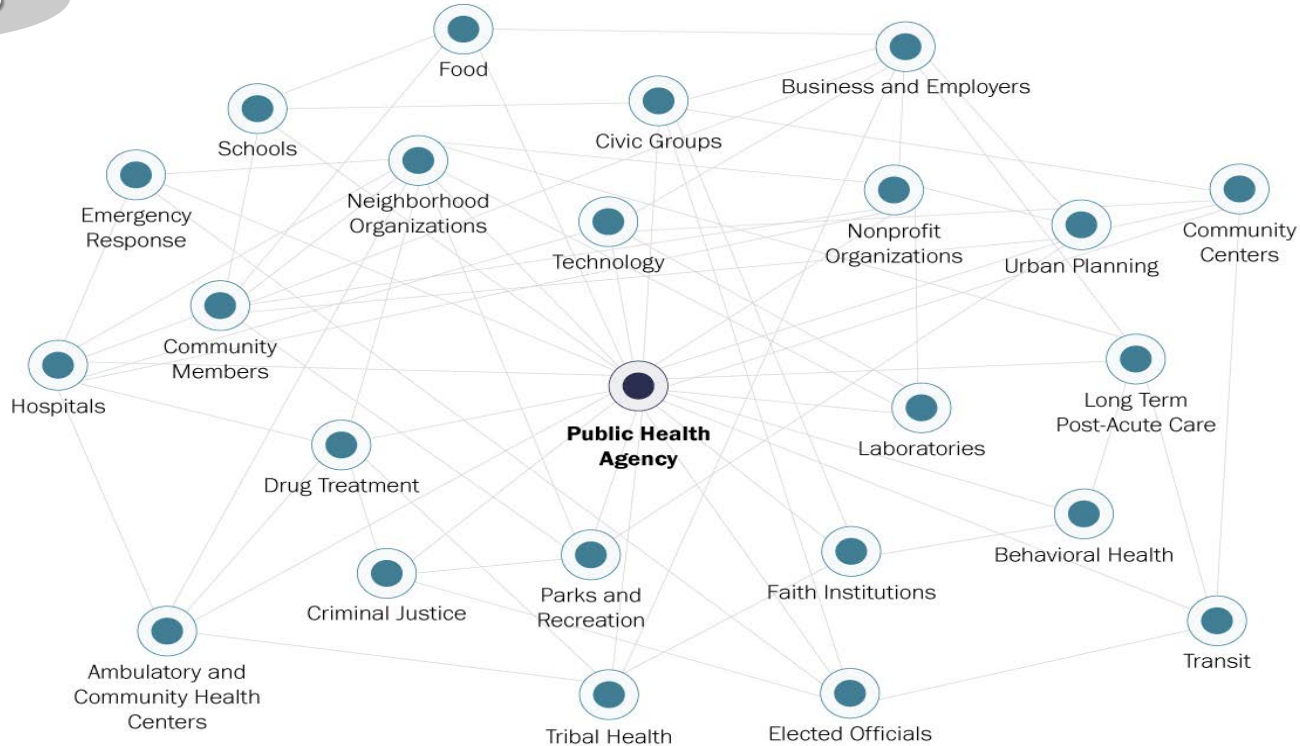
**DATA, ANALYTICS
& METRICS**



**FLEXIBLE &
SUSTAINABLE
FUNDING**

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SYSTEMS



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LISTENING
TOUR

Allegheny, PA

April 4, 2016

Santa Rosa, CA

April 12, 2016

Nashville, TN

June 14, 2016

Kansas City, MO

June 21, 2016

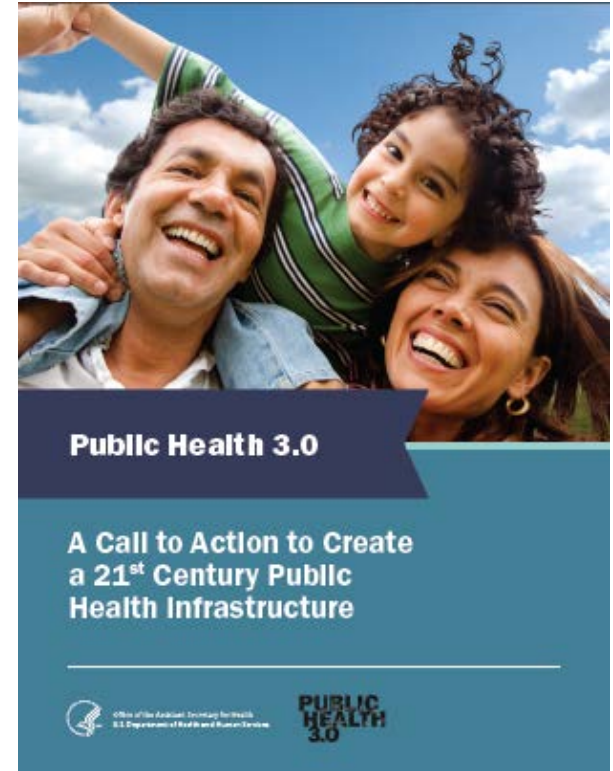
Spokane, WA

July 11, 2016

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RECOMMENDATIONS

Our recommendations reflect **what we heard** across the country. We propose **five key recommendations** that define the conditions needed to support health departments and the broader public health system as it transforms.



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RECOMMENDATIONS

Public health leaders should embrace the role of **Chief Health Strategist for their communities**—working with all relevant partners so that they can drive initiatives including those that explicitly address “upstream” social determinants of health. Specialized Public Health 3.0 training should be available for those preparing to enter or already within the public health workforce.

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RECOMMENDATIONS

Public health departments should engage with community stakeholders—from both the public and private sectors—to form vibrant, **structured, cross-sector partnerships** designed to develop and guide Public Health 3.0–style initiatives and to foster shared funding, services, governance, and collective action.

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RECOMMENDATIONS

Public Health Accreditation Board (PHAB) criteria and processes for department **accreditation should be enhanced** and supported so as to best foster Public Health 3.0 principles, as we strive to ensure that every person in the United States is served by nationally accredited health departments.

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RECOMMENDATIONS

Timely, reliable, granular-level (i.e., sub-county), and **actionable data** should be made accessible to communities throughout the country, and clear **metrics** to document success in public health practice should be developed in order to guide, focus, and assess the impact of prevention initiatives, including those targeting the social determinants of health and enhancing equity.

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RECOMMENDATIONS

Funding for public health should be enhanced and substantially modified, and innovative funding models should be explored so as to expand financial support for Public Health 3.0–style leadership and prevention initiatives. Blending and braiding of funds from multiple sources should be encouraged and allowed, including the recapturing and reinvesting of generated revenue. Funding should be identified to support core infrastructure as well as community-level work to address the social determinants of health.

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WHAT'S
NEXT?

Fall 2016:

***Regional Public Health 3.0
Roundtables and Workshops with
OASH Regional Health Administrators
at the ten HHS Regional Offices***

Tell us your story:

www.healthypeople.gov/ph3