



Essential, Exceptional & Equity-Centered: A Public Health Journey of Purpose

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WE STAND WITH PUBLIC HEALTH

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JOHNS HOPKINS
Bloomberg School of
Public Health


astho

NACCHO
National Association of
County and City Health Officials



**Public Health is
sipping from the
funding firehose...!**





*“In order for the light to shine so brightly,
the darkness must be present”*

-Francis Bacon



**Public health has traveled in the
darkness and begun to be the light...**

We are...

Essential

/uh-sen-shuhl /

adjective

- 1 Absolutely necessary; indispensable
- 2 Pertaining to or constituting the essence of a thing



The EXODUS of Public Health

What History Can Tell Us About the Future

Amy L. Fairchild, PhD, MPH, David Rosner, PhD, James Colgrove, PhD, MPH, Ronald Bayer, PhD, and Linda P. Fried, MD, MPH

We trace the shifting definitions of the American public health profession's mission as a social reform and science-based endeavor. Its authority coalesced in the late nineteenth and early twentieth centuries as public health identified itself with housing, sanitation, and labor reform efforts. The field ceded that authority to medicine and other professions as it jettisoned its social mission in favor of a science-based identity. Understanding the potential for achieving progressive social change as it moves forward will require careful consideration of the industrial, structural, and intellectual forces that oppose radical reform and the identification of constituencies with which professionals can align to bring science to bear on the most pressing challenges of the day. (*Am J Public Health*. 2010;100:54–63. doi:10.2105/AJPH.2009.163956)

NEARLY A CENTURY AGO, public health official Hibbert Hill wrote a provocative book, *The New Public Health*. In it he sought

man himself. The old public health . . . failed because it sought them . . . in every place and in every thing *where they were not*.¹

For Hill, to improve the health of the nation, one had to begin changing behavior a single person at a time. The field had to abandon universalist environmental solutions—introducing pure water, sewage systems, street cleaning—and begin focusing on training people how to live cleaner, more healthful lives. Bacteriology held out hope for “efficient” public health. The logic of the sanitarians’ ideas ultimately

magnitude”—than improving housing for millions.²

Hill’s analysis reflected one of two major strands of Progressive Era thought: efficiency as repudiation of reform through social, as opposed to individual, action. Hill sought a model for addressing disease that could limit the myriad responsibilities public health had accumulated in the nineteenth century. It also marked the beginning of a struggle to define the mandate of public health, a struggle that has consumed the field since the early years of the twentieth century. At the heart of the more than one hundred ef-



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(Fairfield, Rosner, Colgrove, Bayer & Fried; *Am J Public Health*. 2010;100:54–63. doi:10.2105/AJPH. 2009.163956)



The Legacy of Public Health: **Effective Coalescence!** (social reform and science-based)

Public Health's historic role in addressing health inequity through social justice.

PUBLIC HEALTH as a modern institution arose as a response to industrialization. Historic advances in health status resulted from its actions...	Abolition of child labor	Social Security Act
	Shortening the work day	Clean Air Act
	Reductions in scale of poverty	Mine Safety Act
	Minimum wage	OSHA
	Improved sanitation	
	Food safety	
	Adequate housing	Medicare

Jettisoning the Legacy of Public Health: social mission for a science-based identity

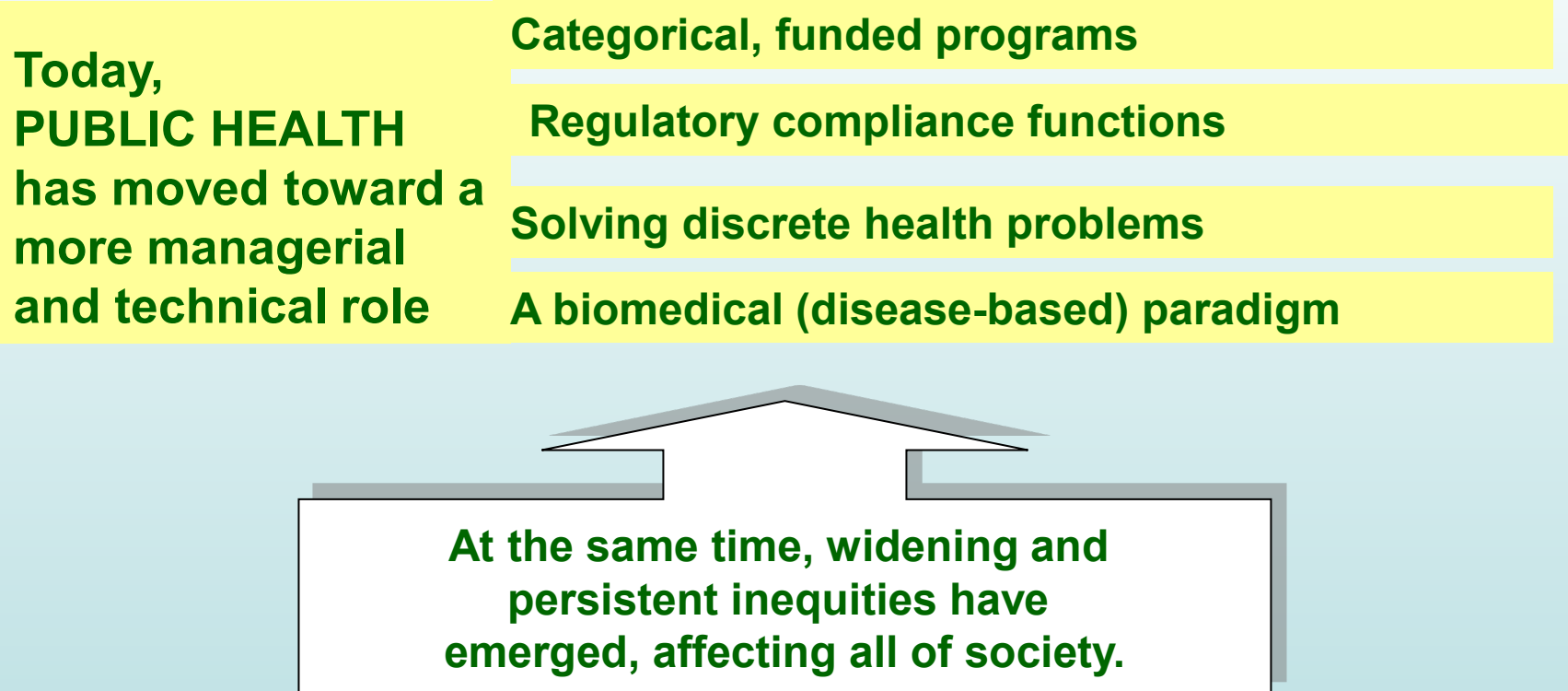
Today,
PUBLIC HEALTH
has moved toward a
more managerial
and technical role

Categorical, funded programs

Regulatory compliance functions

Solving discrete health problems

A biomedical (disease-based) paradigm



At the same time, widening and
persistent inequities have
emerged, affecting all of society.

The Negro health problem is one of the “white man’s burdens”

L.C. Allen, AJPH, 1914

The negro is here for all time...placed in contact with the white man, he became a good imitator

William Brunner, MD, AJPH, 1914

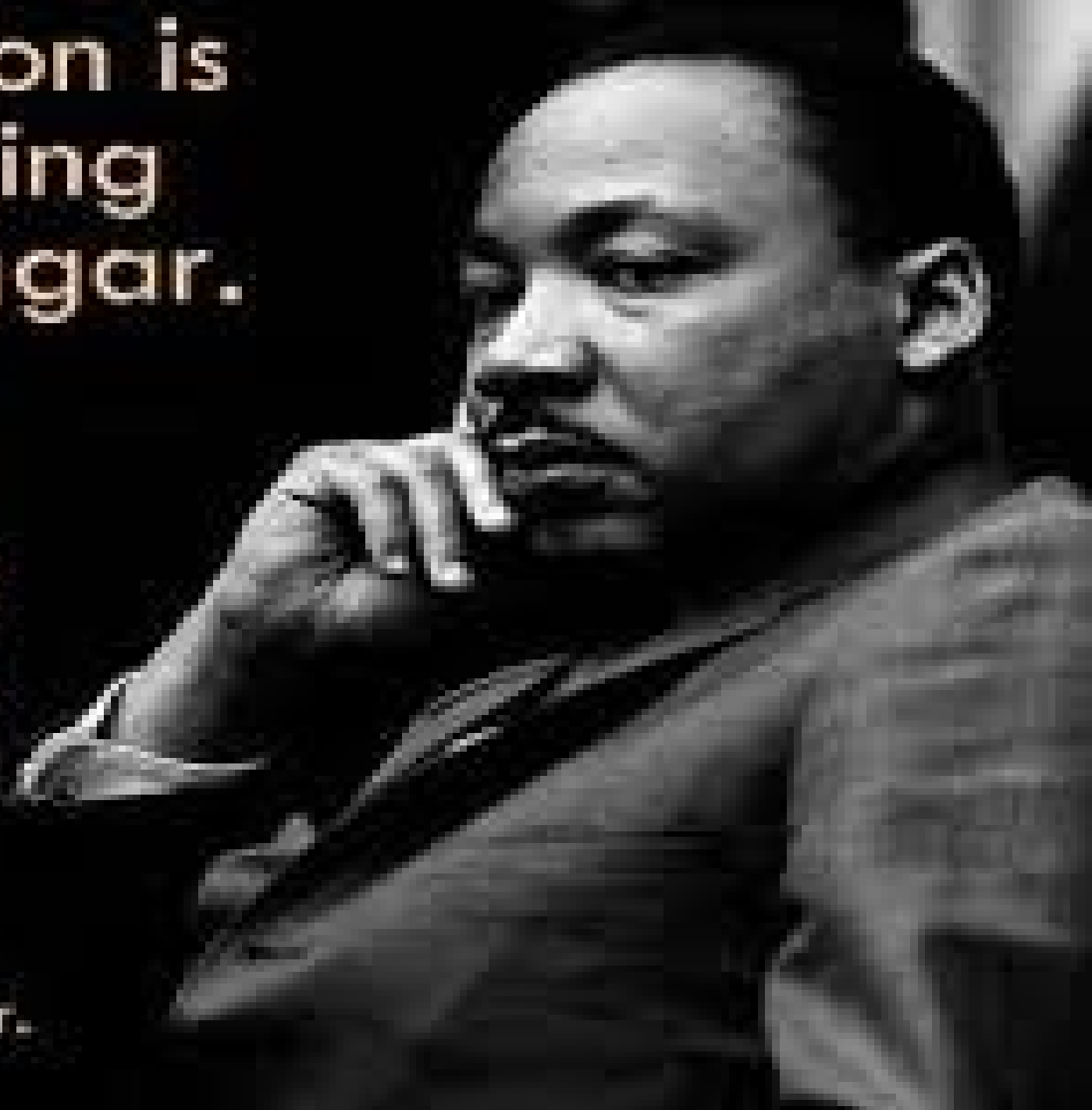
*Ignorance and poverty on the part of the negro...
are the prime factors*

A.G. FORT, PH. B., MD, AJPH, 1914



"True compassion is more than flinging a coin to a beggar. It comes to see that an edifice which produces beggars needs restructuring."

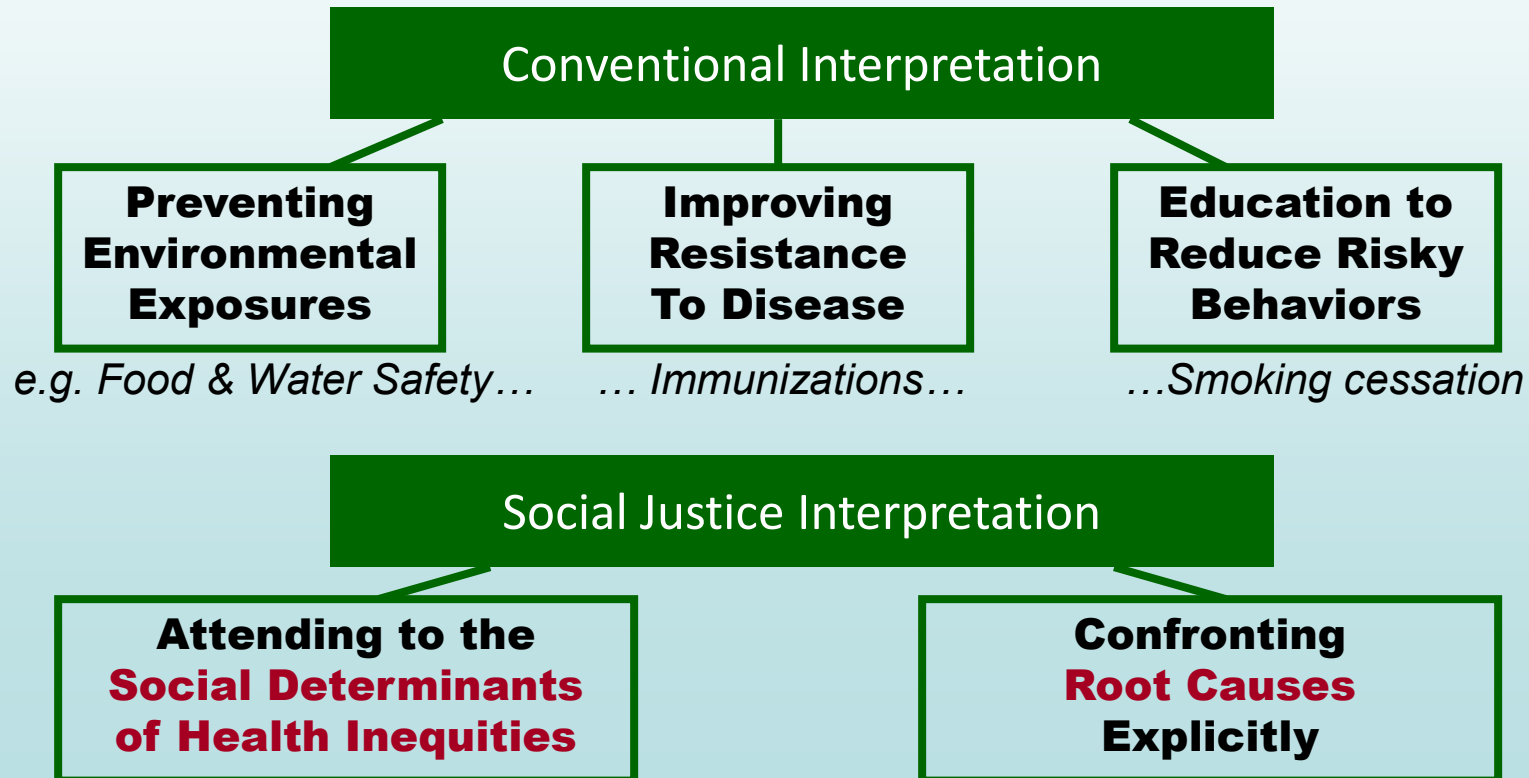
Rev. Dr. Martin Luther King, Jr.



“Restructuring Edifices”: A Social Justice Framework

Primary Prevention

The prevention of diseases and conditions before their biological onset.



We are...

Exceptional

/ik-sep-shuh-nl /

adjective

- 1 Unusually excellent
- 2 Superior



Simply put, in the absence of a radical shift towards prevention and public health, we will not be successful in containing medical costs or improving the health of the American people.

*President Barack Obama
(during his 2008 campaign)*



“All history shows that ignorance, poverty, and oppression are enemies of health and longevity”

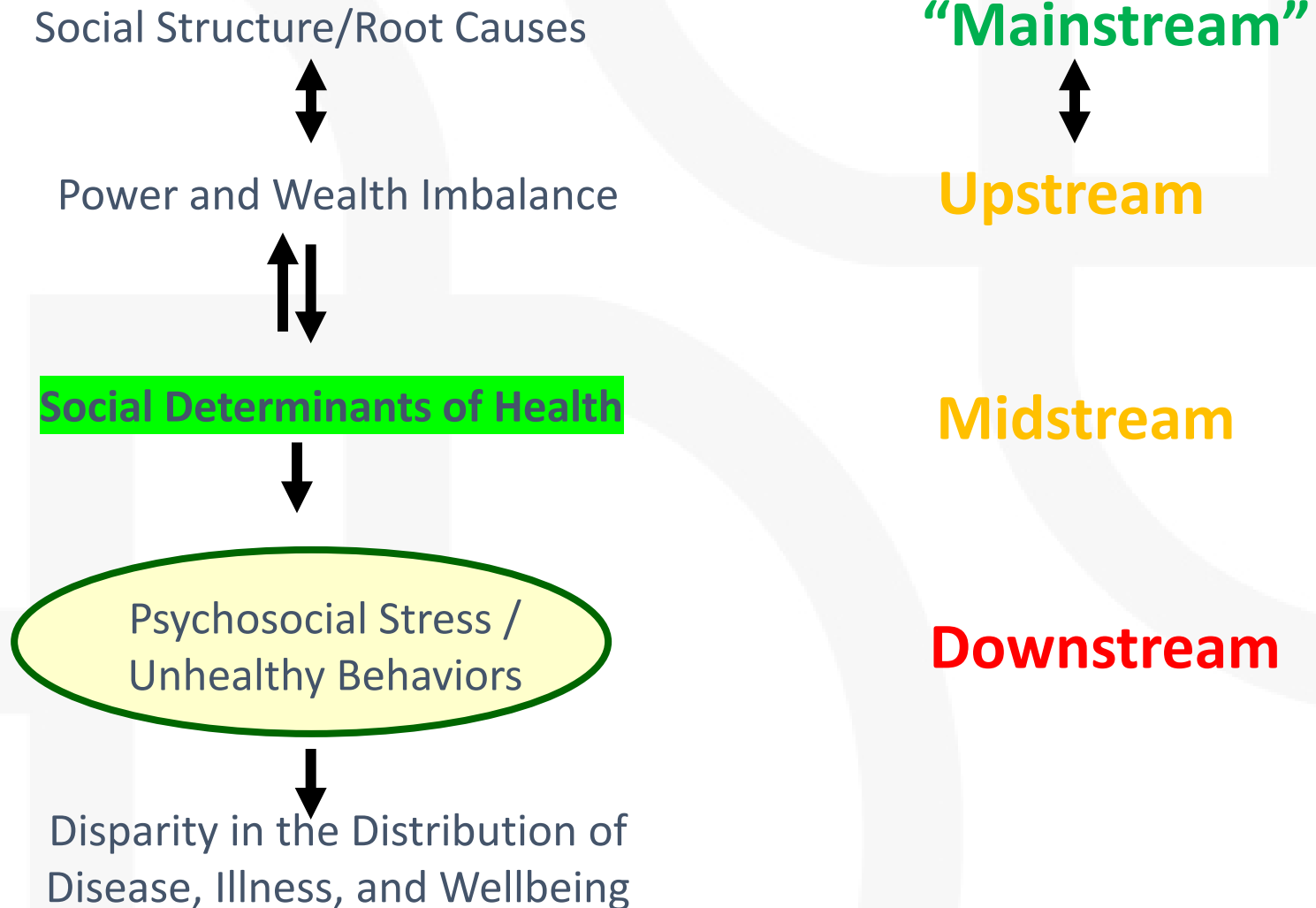
Charles V Roman, AJPH, 1917



“Fifty Years Progress of the
American Negro in Health and
Sanitation”



Addressing Root Causes Upstream: Mainstream

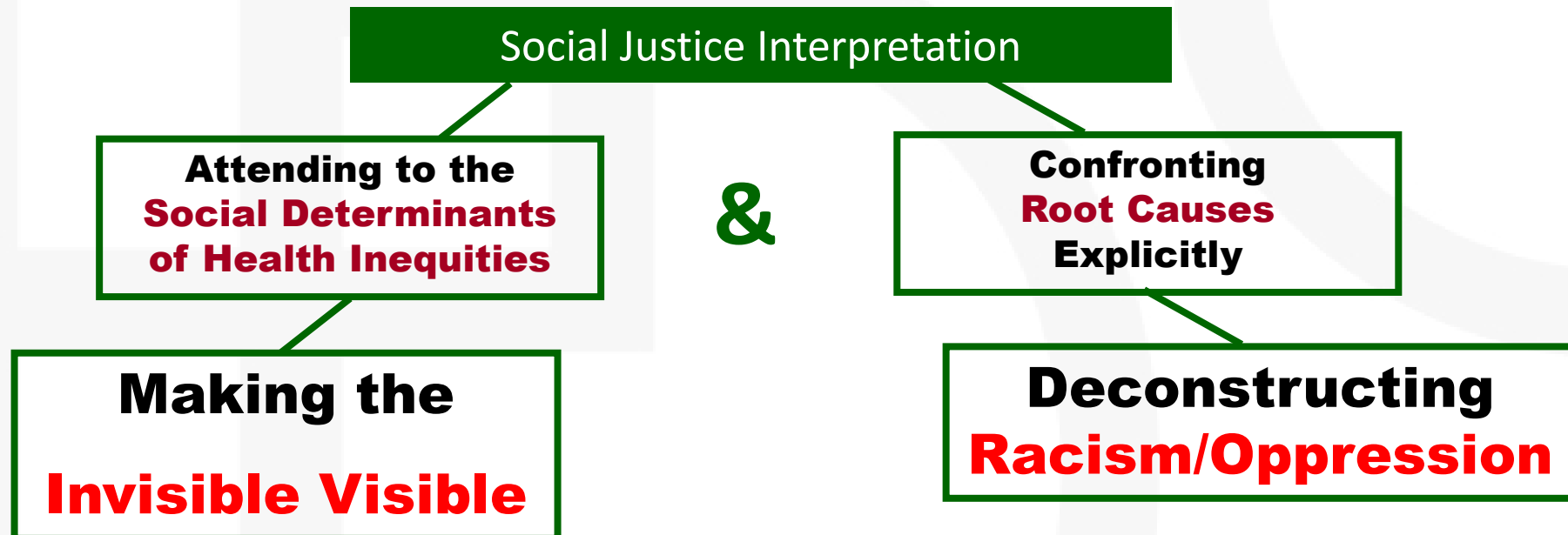


A Social Justice Framework

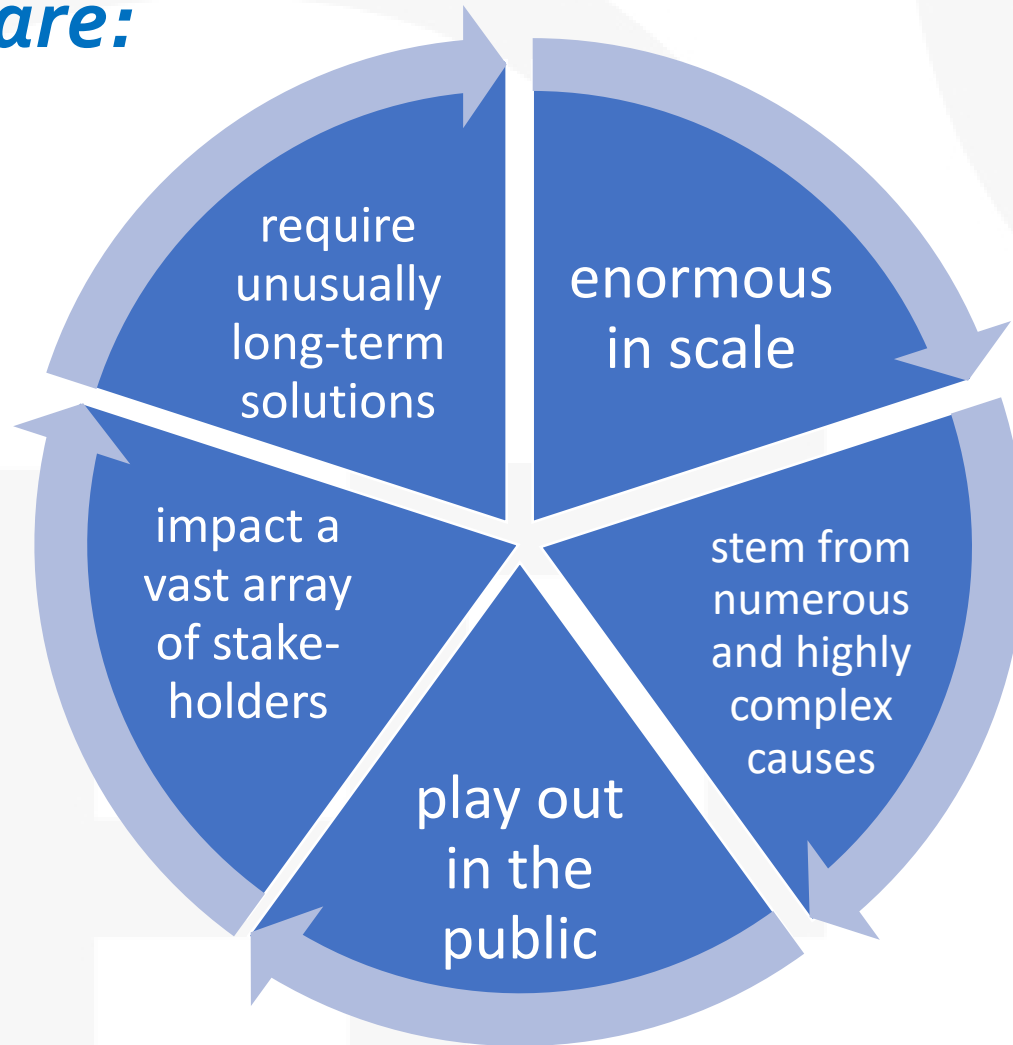
Upstream Prevention

*The absence of unfair, unjust advantage or privilege based on race, class, gender, or other forms of difference.

*Public Health is what **we** as a society do **together** to advance the conditions necessary for good health



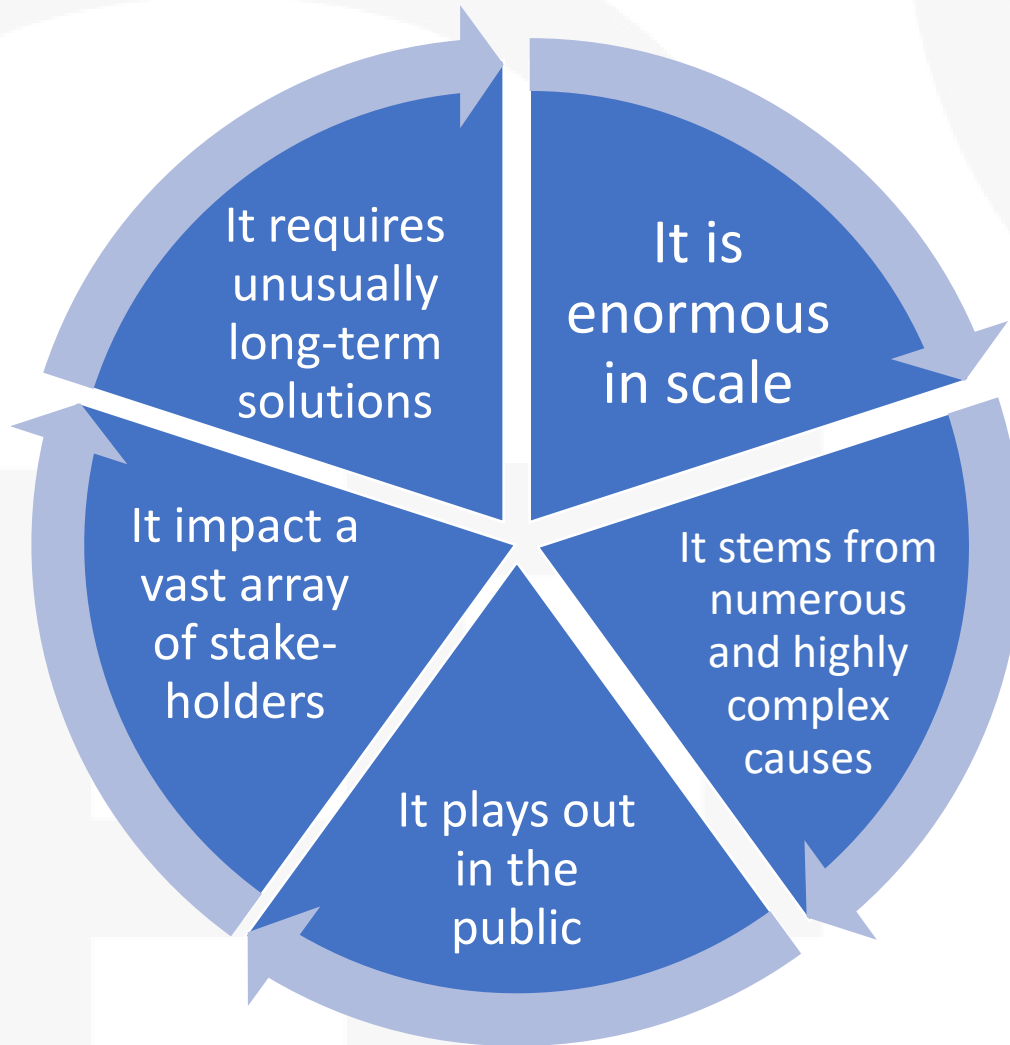
They are:



***Public health
problems
pose special
challenges***

Koh & Jackson (2009) Fostering PH Leadership, Journal of PH, 31 (2), 199





Racism also poses special challenges

R Canady adaptation: Koh & Jackson (2009) Fostering PH Leadership, Journal of PH, 31 (2), 199



"When you get these jobs that you have been so brilliantly trained for, just remember that your real job is that if you are free, you need to free somebody else. If you have some power, then your job is to empower somebody else. This is not just a grab-bag candy game"

- Toni Morrison

We are...

Equity-Centered

/ ek-wi-tee /

noun

- 1 The policy or practice of accounting for the differences in each individual's starting point when pursuing a goal or achievement, and working to remove barriers to equal opportunity, as by providing support based on the unique needs of individuals



A Public Health Journey of Purpose:

Shifting the narrative:

"...it asks us to deeply dig into long-held assumptions, in a web of meaning mostly invisible, unexpressed, and taken for granted."

Source: Advancing Public Narrative for Health Equity and Social Justice. 2018. NACCHO.



Our Responsibilities as PH Practitioners: The PH Code of Ethics

- PH should address principally the fundamental causes of disease & requirements for health aiming to prevent adverse health outcomes (Princ 1)
- PH should advocate & work for the empowerment of disenfranchised community members, aiming to ensure that the basic resources and conditions necessary for health are accessible to all (Princ 4)



Our Responsibilities as Public Health Practitioners: Agents of Health Equity

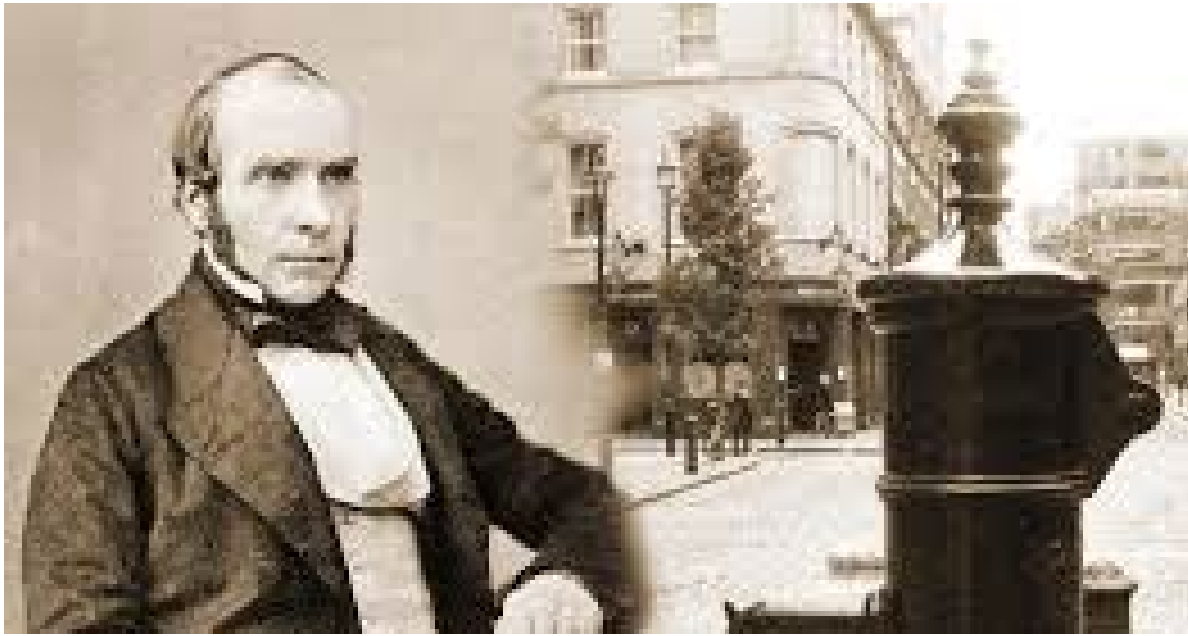
- To reclaim Public Health's role in addressing health inequity through social justice.
- To transform public health practice from its strict regulatory and categorical functions to one that addresses the root causes of health inequity:

**Institutional
Racism**

Class Oppression

**Gender
Discrimination
and Exploitation**







The Public Health Journey & YOU

“Generations will
judge us not by
what we say but
by what we DO.”

Ellen Johnson Sirleaf

DOING Health Equity Assumptions for the Journey

- Relationships are primary...
 - We are created for relationship
- The “Mighty Mouse” Myth
 - Leading with humility
- “Tone at the top”
- Respect and Trust are *earned* not given
- Keep people whole & keep people at the table



An aerial photograph showing a two-lane asphalt road that curves gracefully through a dense forest. The trees are in peak autumn color, displaying vibrant shades of orange, yellow, and brown. To the left of the road, a calm body of water reflects the sky. The overall scene is serene and picturesque, suggesting a journey through nature.


DOING Health Equity Assumptions for the Journey

- “Everybody grinnin’ ain’t tickled”
 - Everyone saying “health equity” does not mean Health Equity
- You can’t fake it until you make it
 - *“You have little influence with those who feel your underlying contempt” – MLK, Jr*
- The Fairness Oxymoron
- The privilege & power paradox
 - “To whom much is given, much is required”
- Good enough is NOT good enough!

There is a brighter day ahead for the colored man or a darker night for the white man. Liberty and health are coming to all or going from all. We shall have either a day of democracy and life or a night of tyranny and death.

Charles V. Roman, 1917





Leading as a Health Equity Change Agent

- As you reflect on these health equity leadership points, what stands out for you as particularly relevant or stimulating for your work?
- As you see yourself trying to apply these ideas, what challenges do you envision experiencing?
- What would you need to overcome these challenges?
- What opportunities for tone setting actions have you taken, or can you take to advance equity?



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