

# Dear public health person, I've been watching you.

By Andrew Holtz, MPH

As a journalist on the health beat, I've been watching the people of public health for a couple of decades: practitioners in the field, researchers in labs, and administrators in offices. And recently, I've had a close-up view of the academic form of public health as I chewed my way to an M.P.H. degree.

I've got a few things to say to you.

First, nobody really knows what you do...other than some vague images of mass immunizations, disease outbreak investigations, and maybe an anti-smoking campaign. When 1,234 registered voters were asked what the term "public health" made them think of, during a survey conducted for the Pew Charitable Trusts in 1999, about half the respondents opted for "Government provided healthcare system for all" or "Healthcare for the poor."

Actually, I was somewhat surprised that nearly as many chose one of the other two options, "Protecting the population from disease" and "Policies/Programs that maintain healthy living conditions," which are much closer to the 1988 Institute of Medicine definition: "Public Health is what we, as a society, do collectively to assure the conditions in which people can be healthy."

Before you can try to raise the standing of public health in the minds of the public (and legislators), you need to communicate a clear understanding of what public health is and, more importantly, what it could be.

## The Value of Values

Values are the basis of all public policy. (Whether you agree with the values is a separate matter.) Even if the values framing a debate are not explicitly proclaimed, all policy decisions are rooted far more firmly in beliefs than in facts. I attended a tobacco control planning meeting, in a neighboring state, that included Republican and Democratic members of the state's legislature. As the public health experts

spelled out their carefully constructed, research-based rationale for proposed program components, it was clear that neither group of politicians was paying much attention. The Republican members were skeptical of any expansion of government involvement in personal health behaviors, while the Democrats uncritically applauded interventions to protect individuals from addiction to a deadly commercial product.

Public health must be built on a firm scientific base, but public policies will (and indeed should) reflect the hopes and desires, along with the fears and concerns, of the public and its representatives. Practitioners in



### When you hear the term *public health*, which of the following do you think of?

Government provided healthcare system for all	24%
healthcare for the poor	23%
Protecting the population from disease	16%
Policies/Programs that maintain healthy living conditions	27%
Not sure	10%

*Public Opinion Research on Public Health, Environmental Health and the Country's Public Health Capacity to Adequately Address Environmental Health Problems. Conducted for the Pew Charitable Trusts by the Mellman Group Inc. and Public Opinion Strategies Inc. May 1999*

public health should be clear about their ultimate purpose and avoid getting bogged down in public discussions of minutiae or intermediate goals. Tobacco control programs should reduce cigarette consumption, but that evaluation measure should not be confused with the objective of creating an environment in which people can avoid being trapped by nicotine addiction.

#### Sometimes We Just Want to Have Fun

Those who work in public health should not attempt to use the high value they place on health to trump other, sometimes competing, values, such as autonomy or pleasure or cultural tradition. For example, in Indian communities where tobacco has historical and ritual significance,

the goal of tobacco control experts should not be to eradicate tobacco use, but rather to provide community members with tools they can use to resist the commercialization of tobacco.

The caricature of public health advocates as "Health Nazis" who want to purge flavor and fun from the world stems from a perceived clash of values. Whether this conflict is the result of inattention to the desires of others or inarticulate communication about how to fit public health advances into full, rich lifestyles, advocates for public health must examine their actions and prescriptions through a multifaceted lens of values. Not only will this step help improve the practical success of public health proposals by avoiding clumsy stumbles into unnecessary spats, the focus on values will increase the likelihood that interventions serve the broadest public good, as well as specific health goals.

#### No One Gets out of Here Alive

Death is never prevented; it is only delayed. People implicitly understand this point, which fuels skepticism about the abilities of public health "do-gooders." I've got a fluorescent pink bumper sticker I picked up in Germany that reads, "Wer nicht raucht stirbt gesund!" which translates to "Whoever doesn't smoke, dies healthy!" Notwithstanding the fact that public health research and projects are pitifully under-supported (as compared to our spending on medical trials and

interventions) and that there is much, much more that can be done to prevent premature death and reduce disability, death will not be defeated by public health measures. Be careful not to oversell what public health programs and policies can offer. Prideful claims only foster more skepticism. Infusing proposals and advice with a realistic understanding of what public health institutions, workers, and approaches

how much control we feel we have over the important things in our lives, how much respect we get from those around us.

Immunizations and education campaigns are examples of a couple of the tools available to promote public health, but practitioners must heft tools of every description in order to truly pursue the broad definition of public health. The armamentarium must include political strategy, business

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can actually accomplish, in terms of reducing suffering, limiting disability, and preventing early deaths, will ultimately enhance the credibility of public health advocates.

#### Break out of the Health Ghetto

If public health is viewed as separate from work (or play) from family, from school, from the rest of life, then it will be seen as frequently irrelevant. Look back at the 1988 Institute of Medicine definition of public health as what we do to "assure the conditions in which people can be healthy." Those conditions include the homes we live in, the streets we drive (or walk or bike, if the neighborhood is designed properly), the buildings we work in, the schools we attend, the parks we play in. Those conditions also include the social environment:

savvy, even a good fashion sense. To put it in television terms, knowing how to program the "Discovery Health" channel is all well and good, but the audience (the public) is over at "E! Entertainment." Collaborations between tobacco control programs and commercial advertisers, between obesity programs and urban planners, between suicide prevention programs and law enforcement are examples of the



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multidisciplinary approaches that will be critical to addressing all the conditions that determine how healthy we can be.

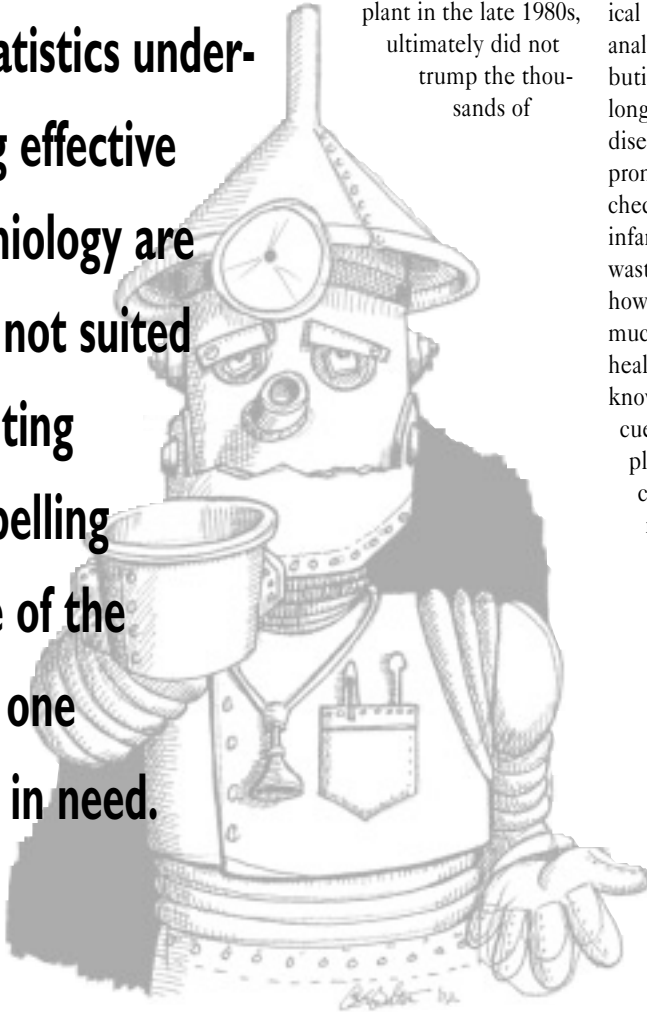
### No "Poster Child," No "Rescue 911"

Put one sick kid on a billboard or a TV news story and mass attention and donations will flow. Lay out an ironclad, fact-filled argument that thousands or millions of children are at risk (but you can't say for sure which children or exactly when) and it may get no notice at all. Recently a reporter at the Los Angeles Times, who has covered important health policy stories for years, mentioned to me that he has

never experienced anything like the reader reaction triggered by a series on a family trying to get experimental treatment for their children, who have an inherited lethal metabolic disorder.

It is a wonderful attribute of humanity that so many people respond to individual stories of crisis. It is understandable that it is harder to spark such an emotional reaction to a "population level" threat. The statistics underpinning effective epidemiology are simply not suited to painting a compelling picture of the face of one person in need. Perhaps the most remarkable piece of the history of the Oregon Health Plan is that Coby Howard, the boy denied state funding for an organ transplant in the late 1980s, ultimately did not trump the thousands of

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unidentified children who benefited from preventive health services provided by the state. Sick children are in the province of medicine, so people promoting public health efforts simply have to find ways to make their case without leaning on those sympathy-evoking images.

Public health programs will also never have the easy access to our wallets enjoyed by the medical system. Point all you want to analyses about the larger contribution of public health to longevity and the prevention of disease and disability, nothing prompts people to write blank checks like a tumor or myocardial infarct. Here again, it is a usually waste of breath to complain about how illogical it is to spend so much more on sick care than health promotion. Individuals know when they have been rescued by treatment. When people go to their physicians, they can point to a specific service received (even if they complain about the bill.) However, they will never feel the same sense of personal benefit from preventive measures. Deal with it.

### Keep at It

Public health efforts are important. You know that. But remember, most of the time most people are thinking about other things. They will never

really understand what you do. Nevertheless, if you understand what they value, what they desire and what they fear, then you will have a better chance of showing how public health efforts fit into the lives of every one of us—and greater success justifying the investments that offer rewarding improvements in the conditions that allow us to be healthy.



Former CNN Medical Correspondent Andrew Holtz is an independent journalist covering health and medicine from Portland, Oregon. His work has appeared on PBS, Oregon Public Broadcasting, TLC, TV programs in Japan and Britain, magazines including *InTouch* and web sites such as *ReutersHealth.com*. Holtz is the President of the Association of Health Care Journalists. He is a member of the Multnomah County Bicycle and Pedestrian Citizen's Advisory committee. He recently completed work on a Masters degree in Public Health. Holtz is married and has two children.