

Lincoln Trail District Health Department

Sara Jo Best

Public Health Director

Lincoln Trail District Health Department

Serving Hardin, LaRue, Marion, Meade, Nelson, and Washington Counties



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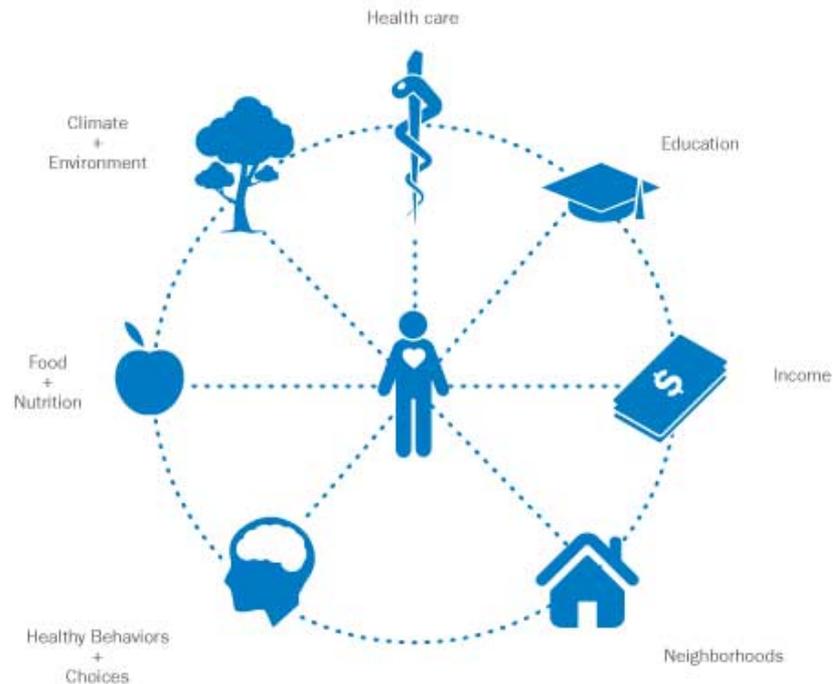
“Public Health is the constant
definition of the unacceptable.”
-Geoffrey Vickers



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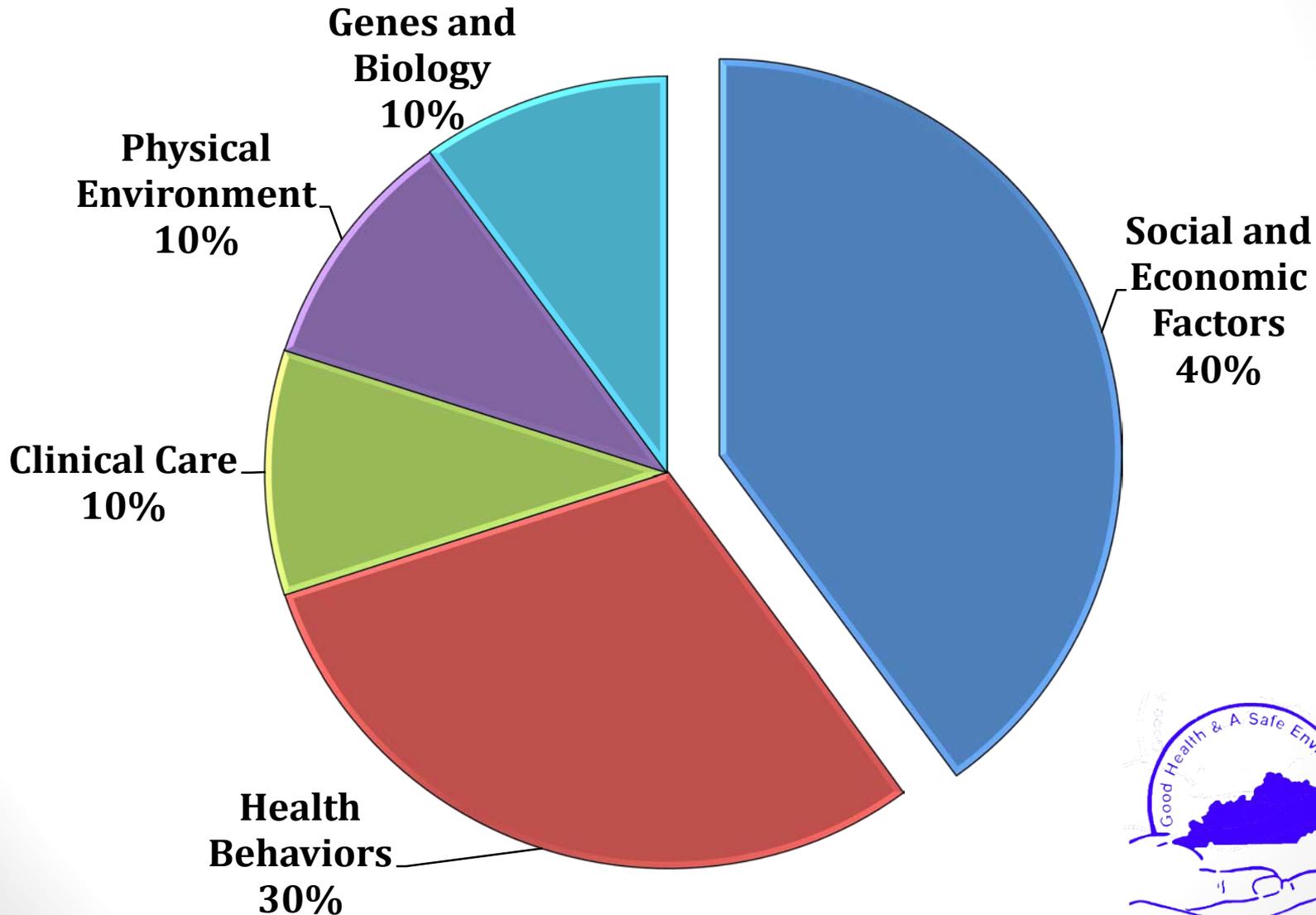
Public Health Begins at the Local Level

Social, environmental and individual factors influence our health as well as the opportunity to make healthy choices.

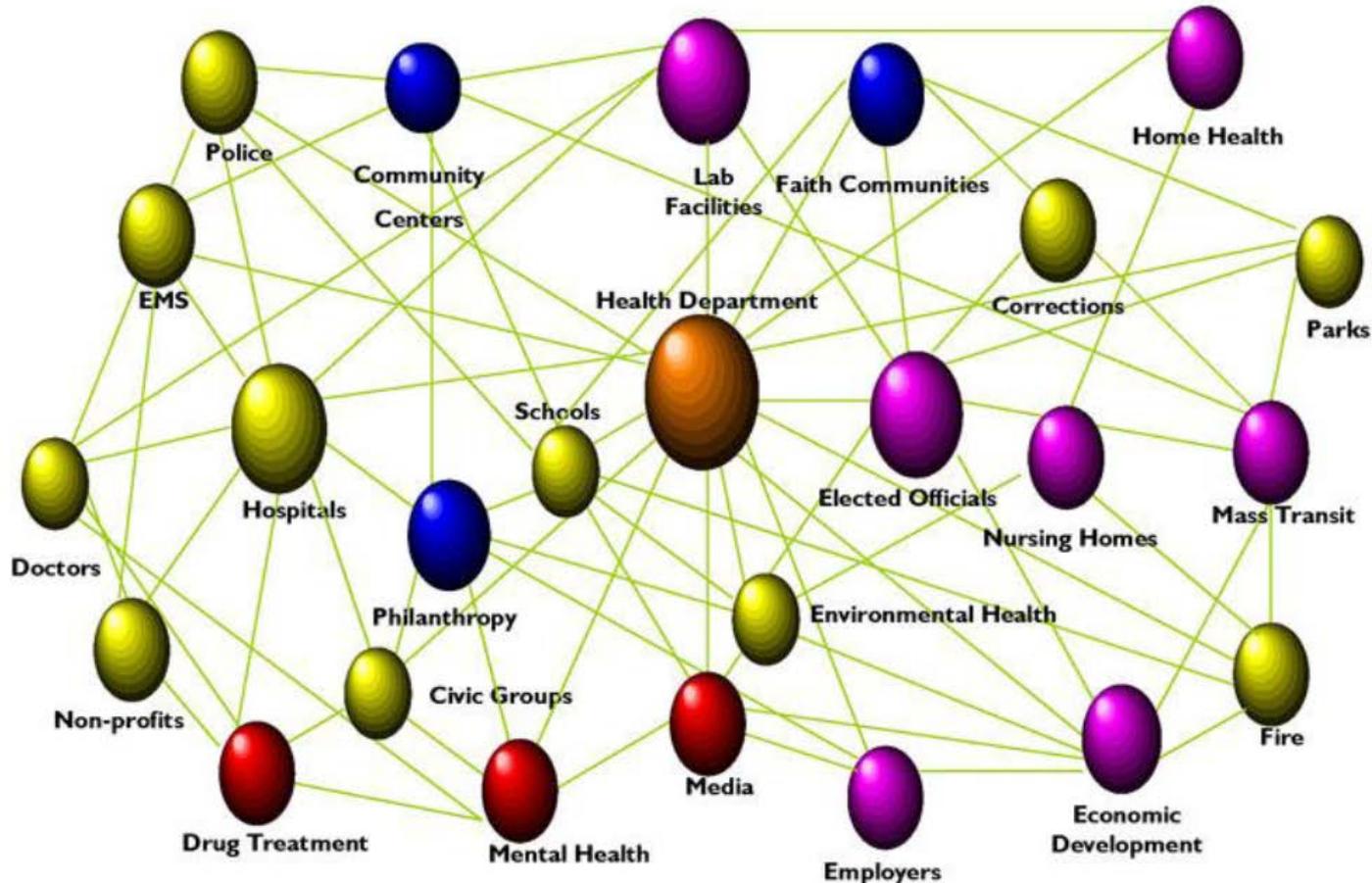


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Determinants of Health



Who is Public Health?



“Public health is what we, as a society, do collectively *through organized actions* to assure the conditions in which *all* people can be healthy.” – Institute of Medicine (1988), Future of Public Health

Social Determinants of Health

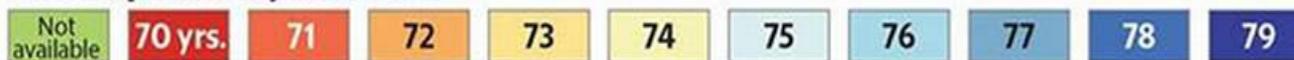
**The complex, integrated,
and overlapping social
structures and economic
systems that are responsible
for most health inequities.**

Centers for disease Control (CDC) 2014, and Commission on Social Determinants of Health (CSDH), World Health Organization (WHO) 2008.



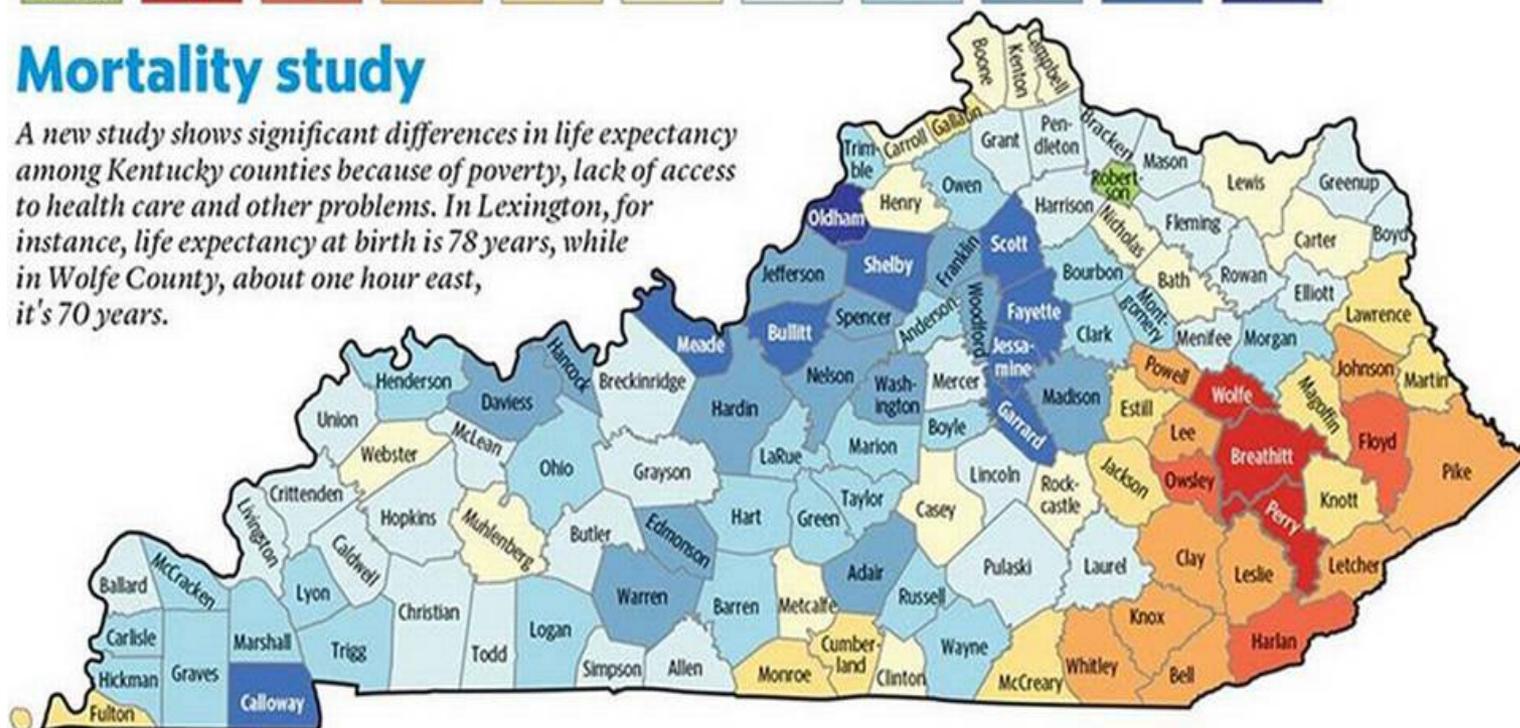
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Life expectancy at birth:



Mortality study

A new study shows significant differences in life expectancy among Kentucky counties because of poverty, lack of access to health care and other problems. In Lexington, for instance, life expectancy at birth is 78 years, while in Wolfe County, about one hour east, it's 70 years.



Sources: VCU Center on Society and Health

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Impact of Social Health Spending

Figure 1: U.S. maps of health outcomes and social-to-health spending ratio quintiles, 2009

Map A: Percent of adult population that is obese^a



Map B: Percent of adults who reported 14 or more days in the last 30 days as mentally unhealthy days^a



Map C: Lung cancer mortality rate per 100,000 population^a



Map D: Social-to-health spending ratio^b



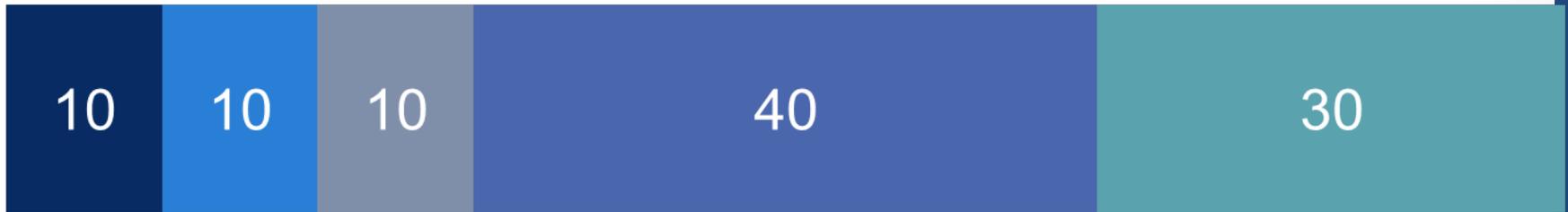
^aFor **Maps A, B, and C** red indicates highest quintile (i.e., poorest health outcomes) and green indicates lowest quintile (i.e., best health outcomes).

^bFor **Map D**, red indicates lowest social-to-health spending ratio; green indicates highest social-to-health ratio (calculated with Medicare plus Medicaid as the denominator).

How do we invest in health?

Determinants of Health

■ Health Care ■ Environment ■ Genetics ■ Socio-Economics ■ Behaviors



0% 10% 20% 30% 40% 50% 60% 70% 80% 90% 100%

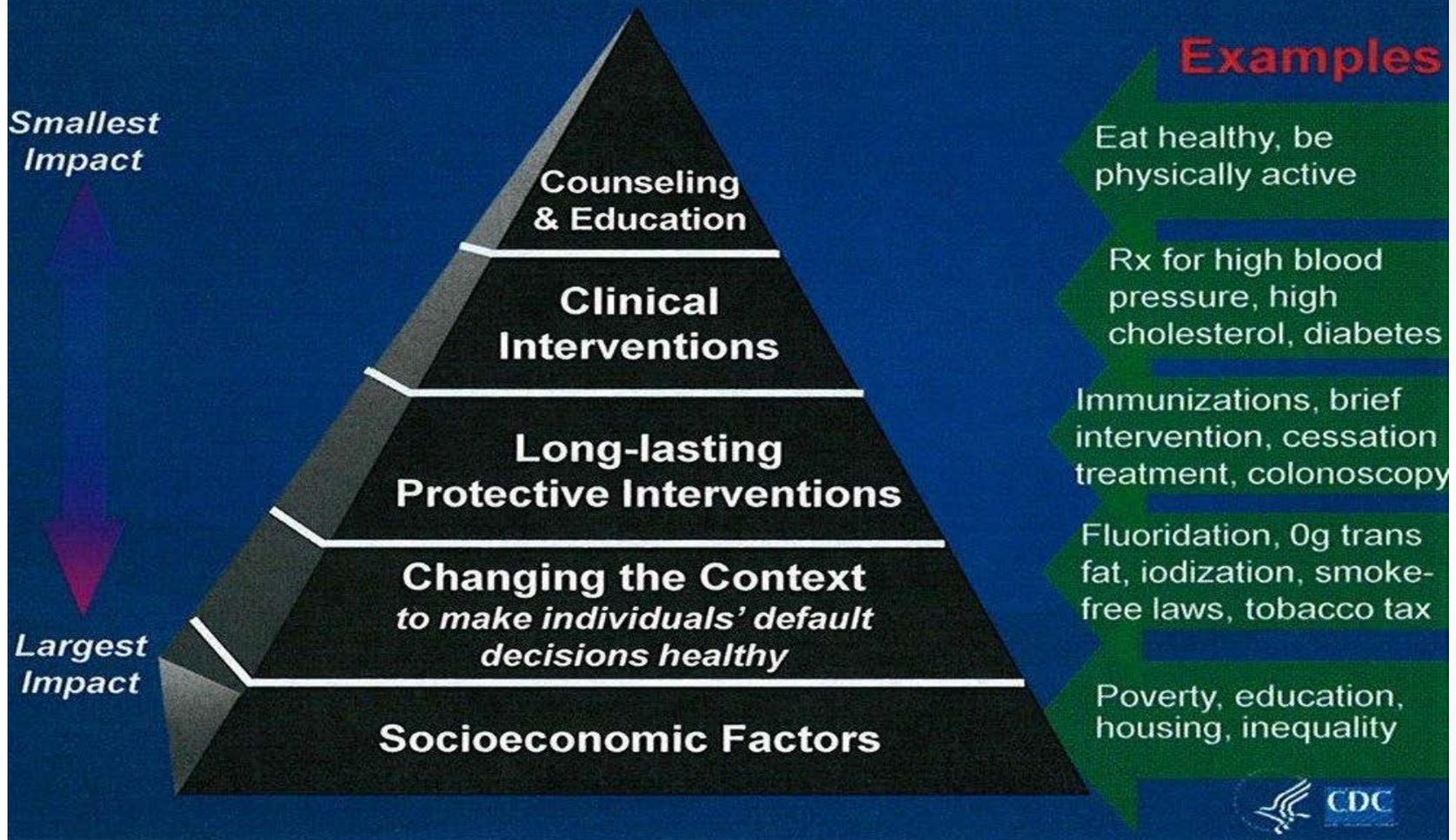
Distribution of Resources

■ Medical Care ■ Public Health



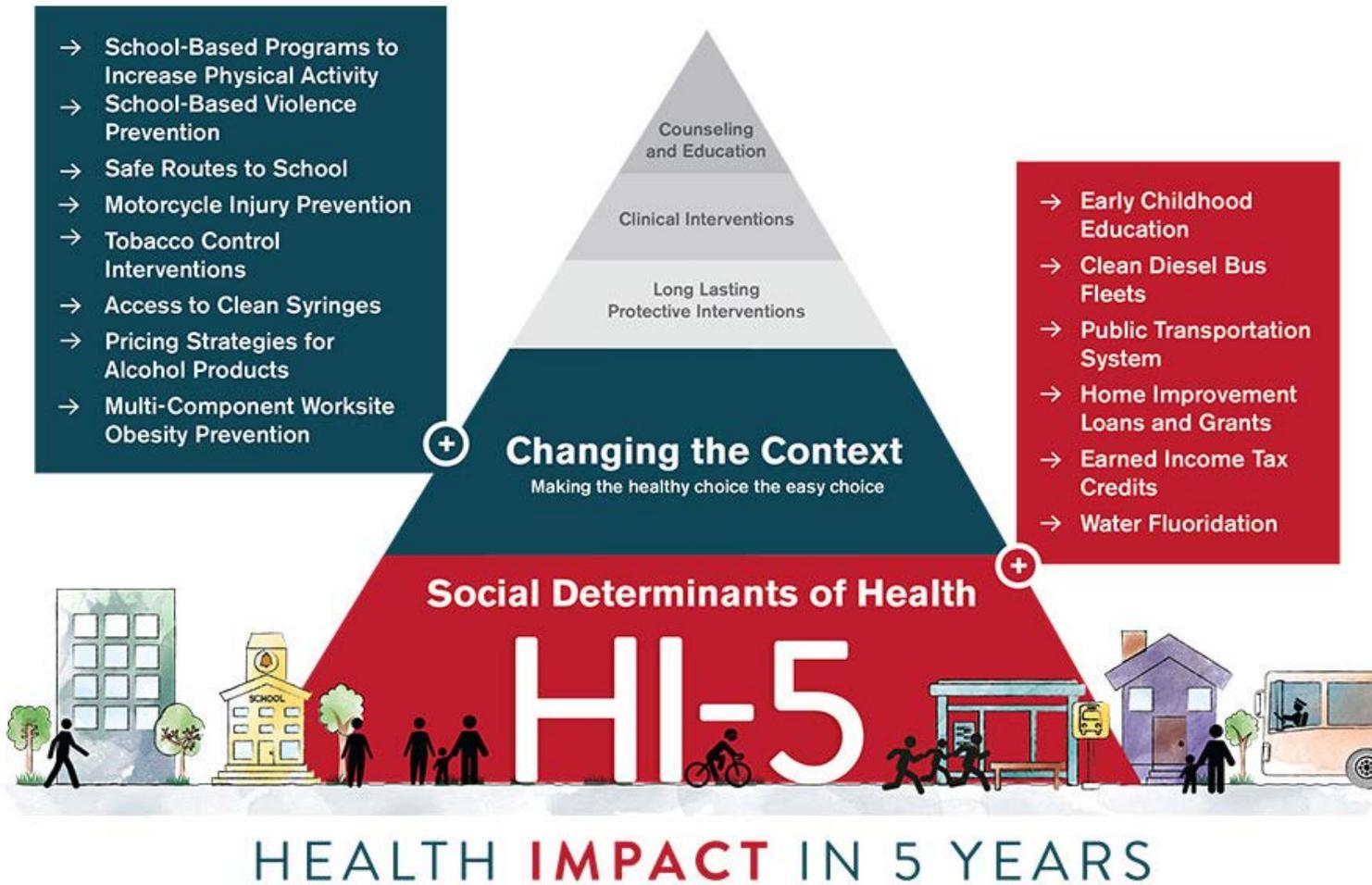
0 20 40 60 80 100

Factors that Affect Health



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HI-5 and the Health Impact Pyramid

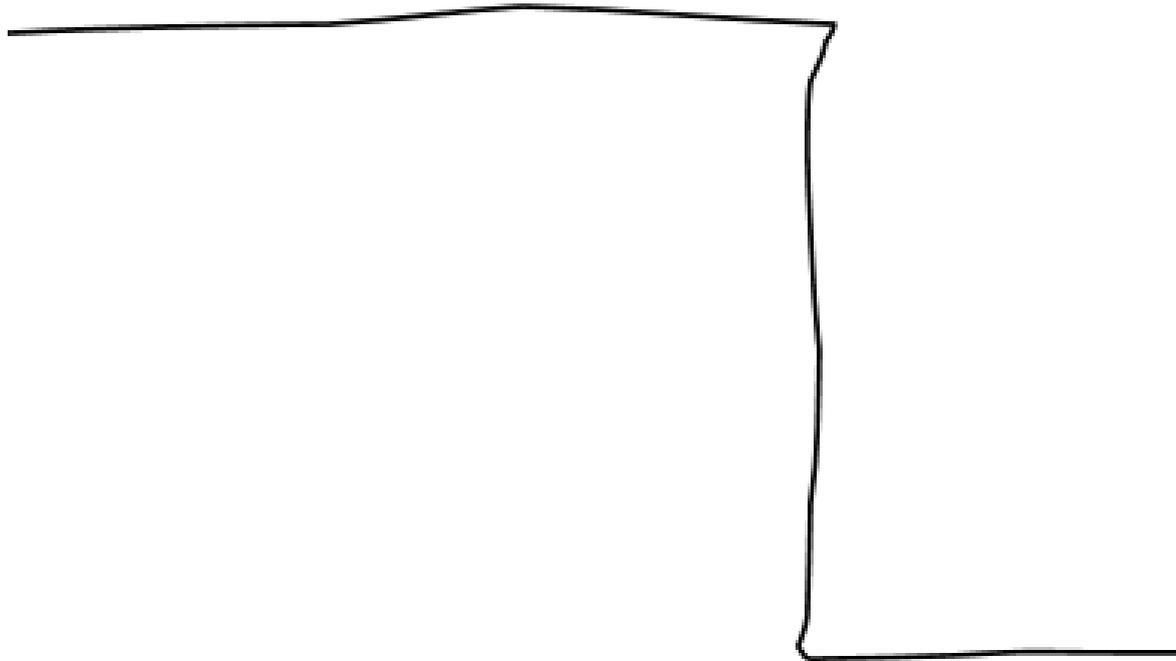


Source: CDC



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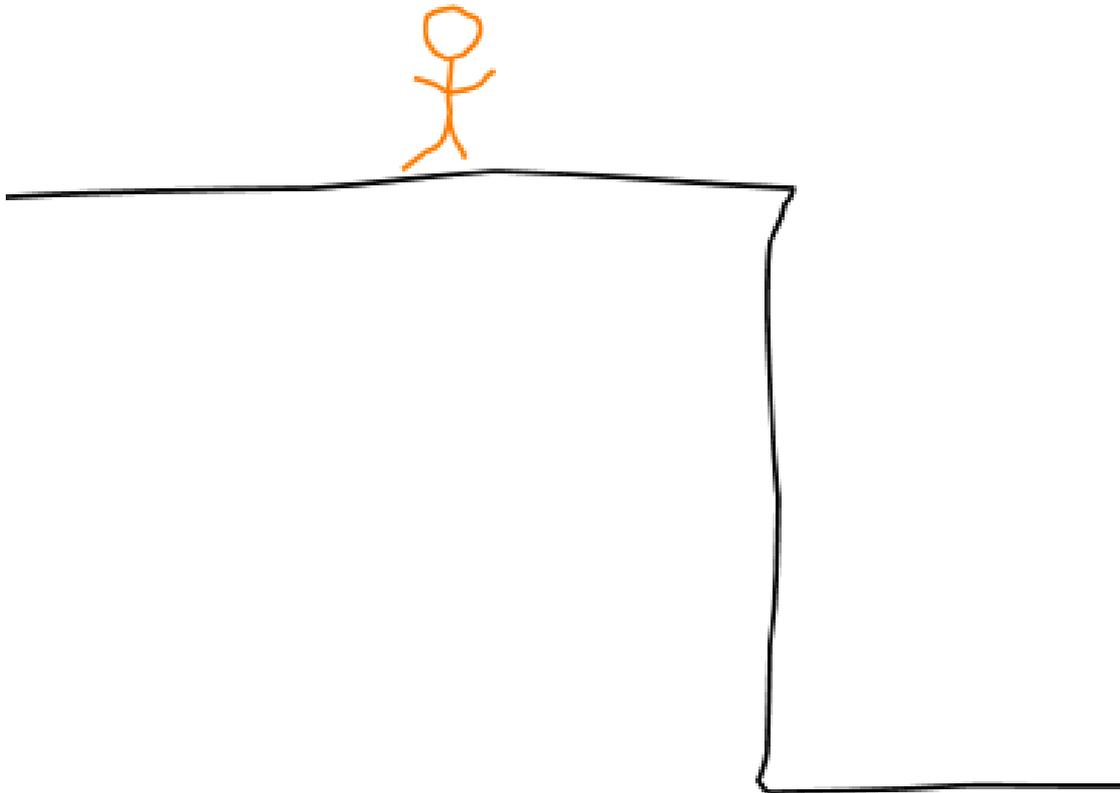
Levels of health intervention



Jones CP et al. *J Health Care Poor Underserved* 2009.



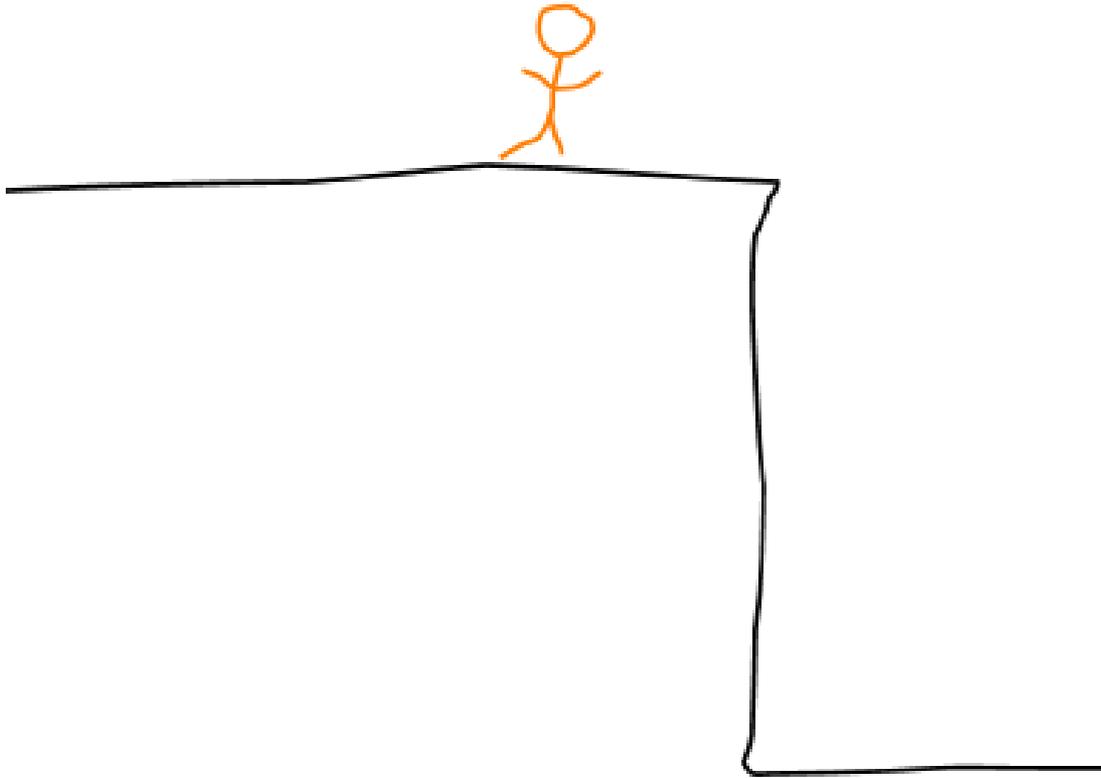
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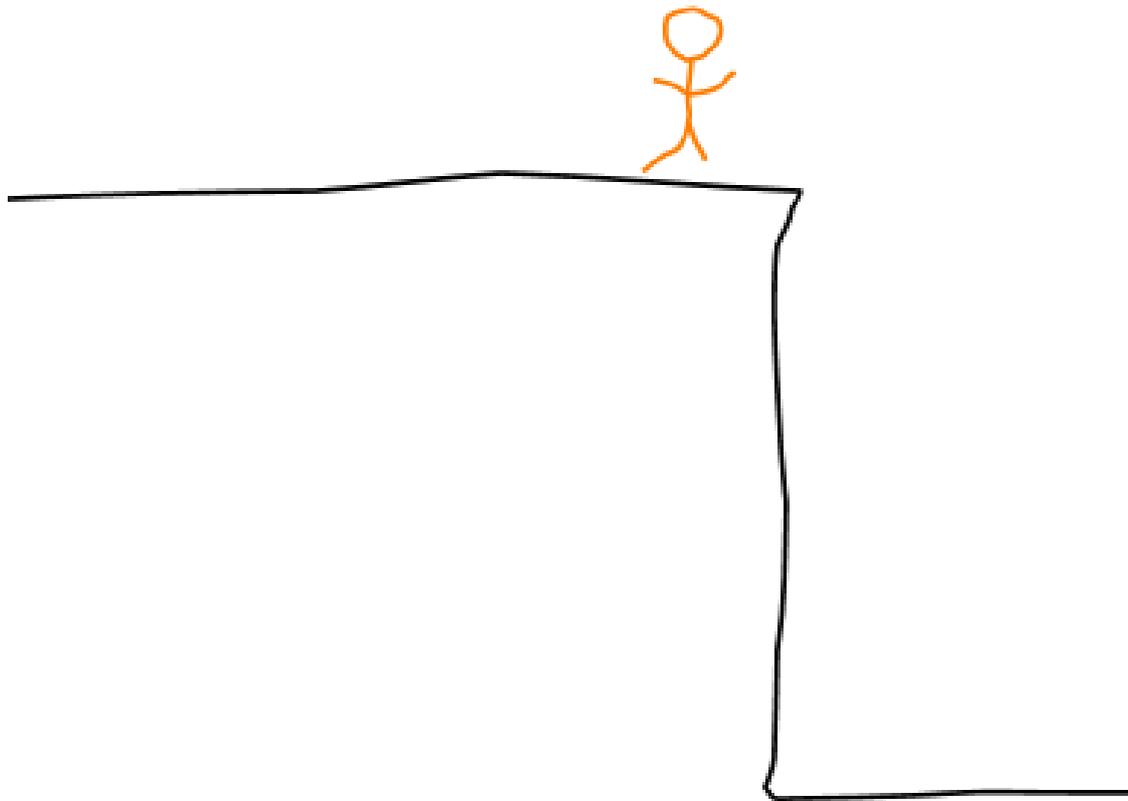
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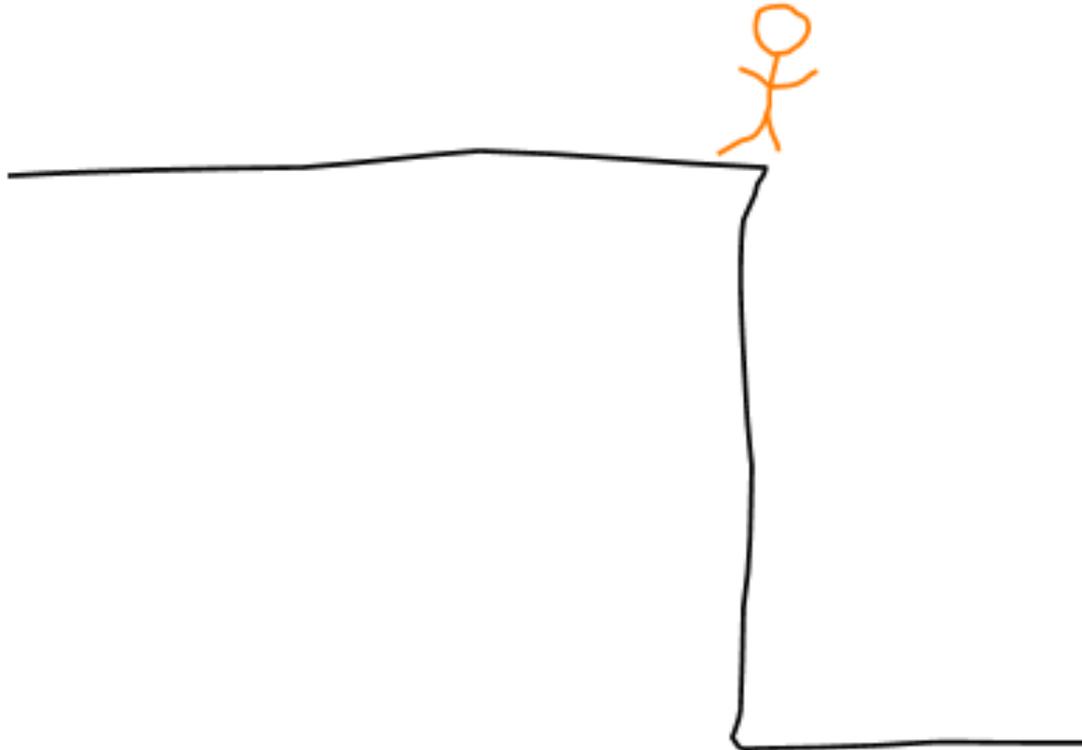
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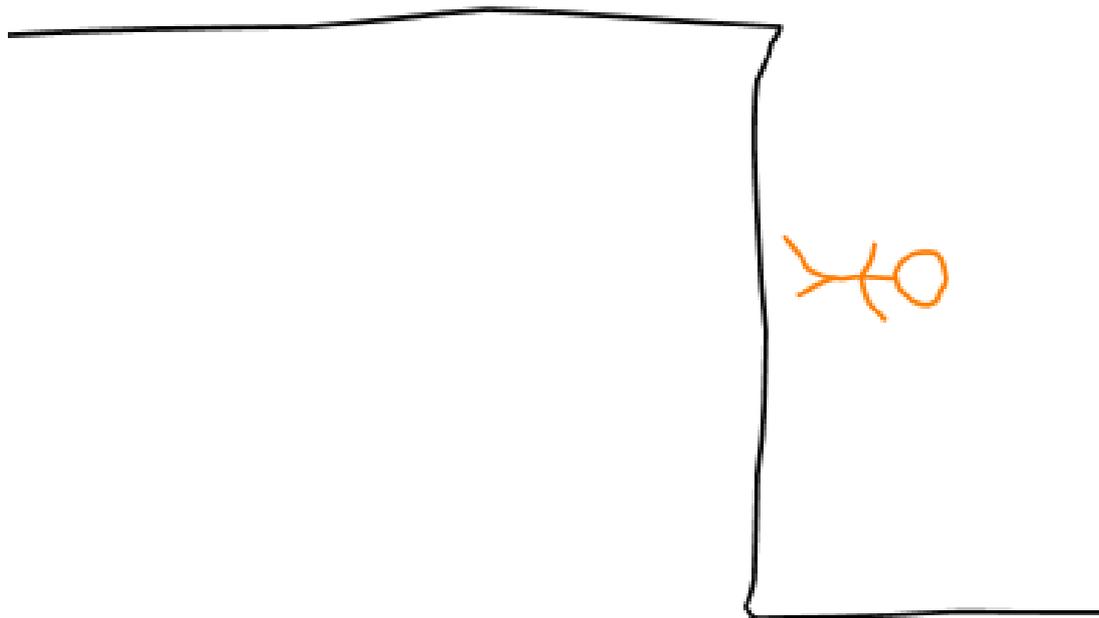
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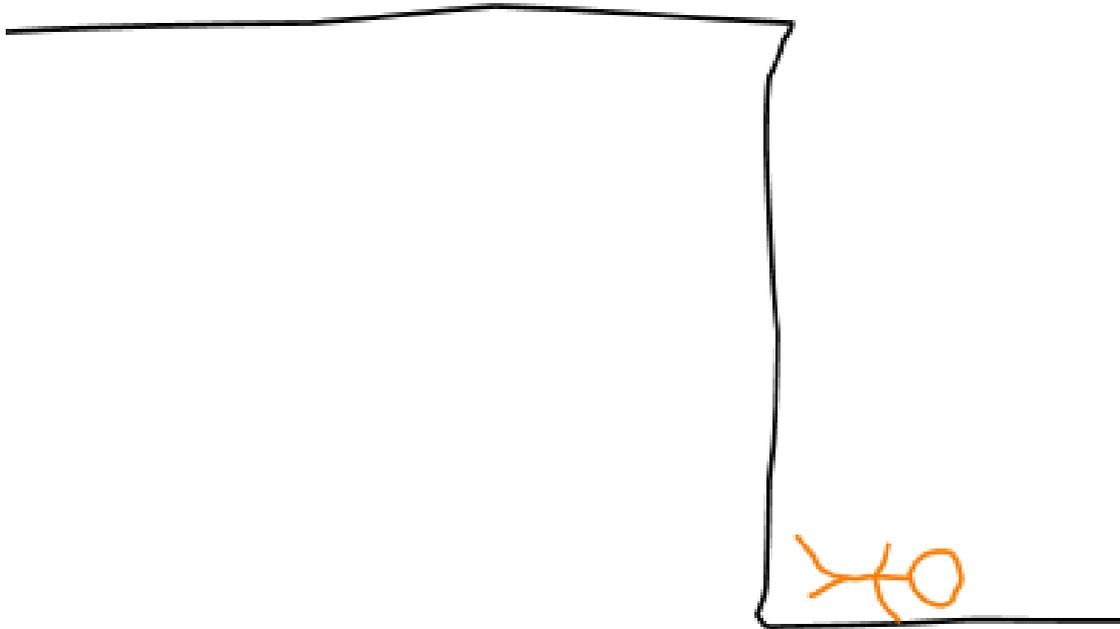
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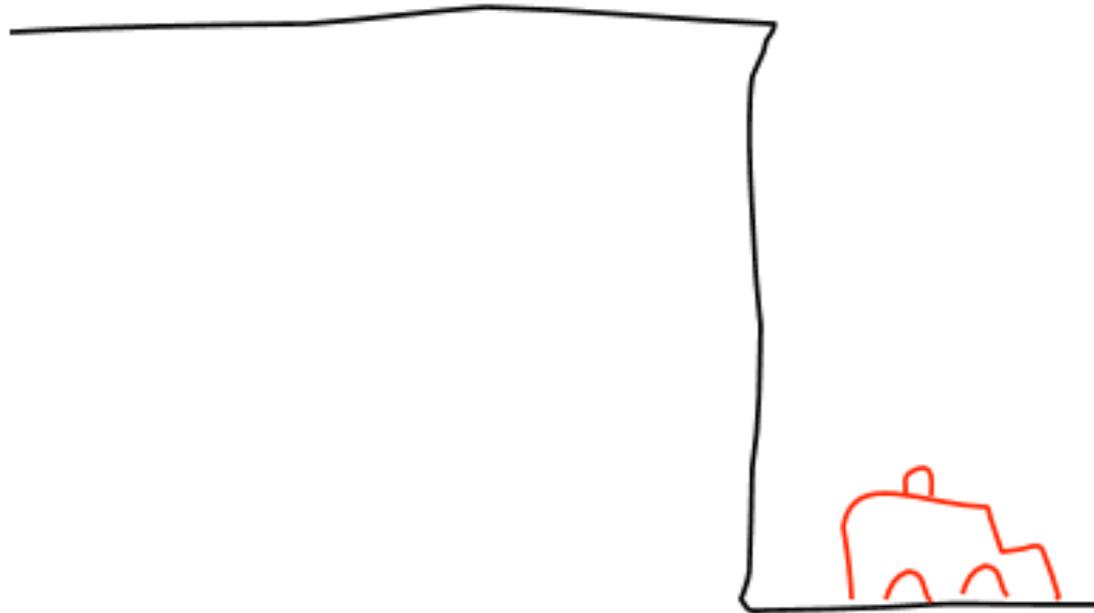
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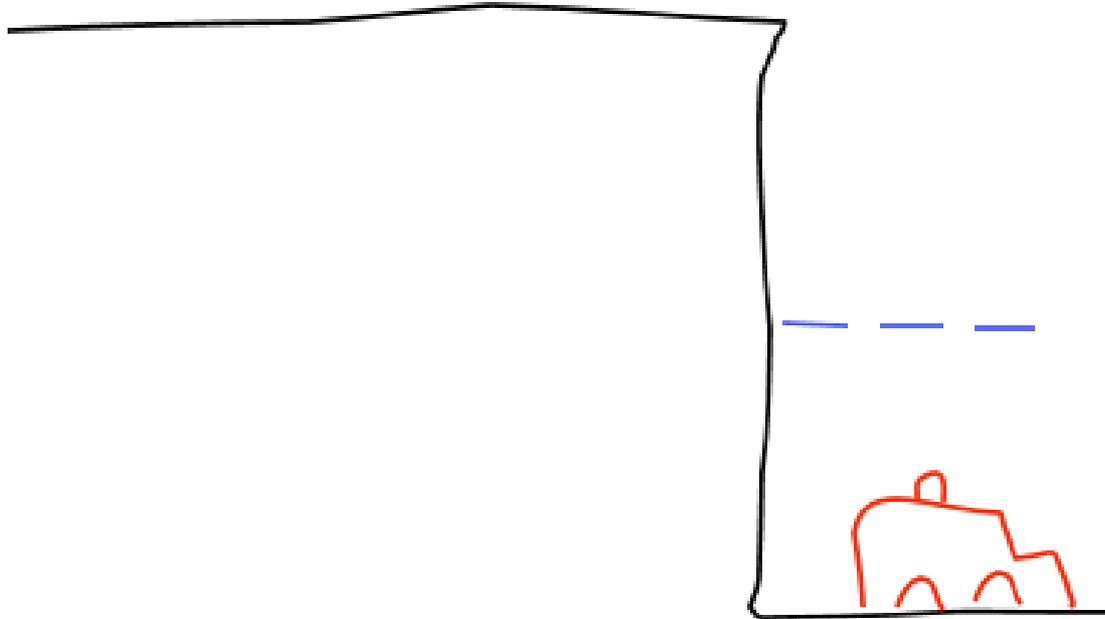
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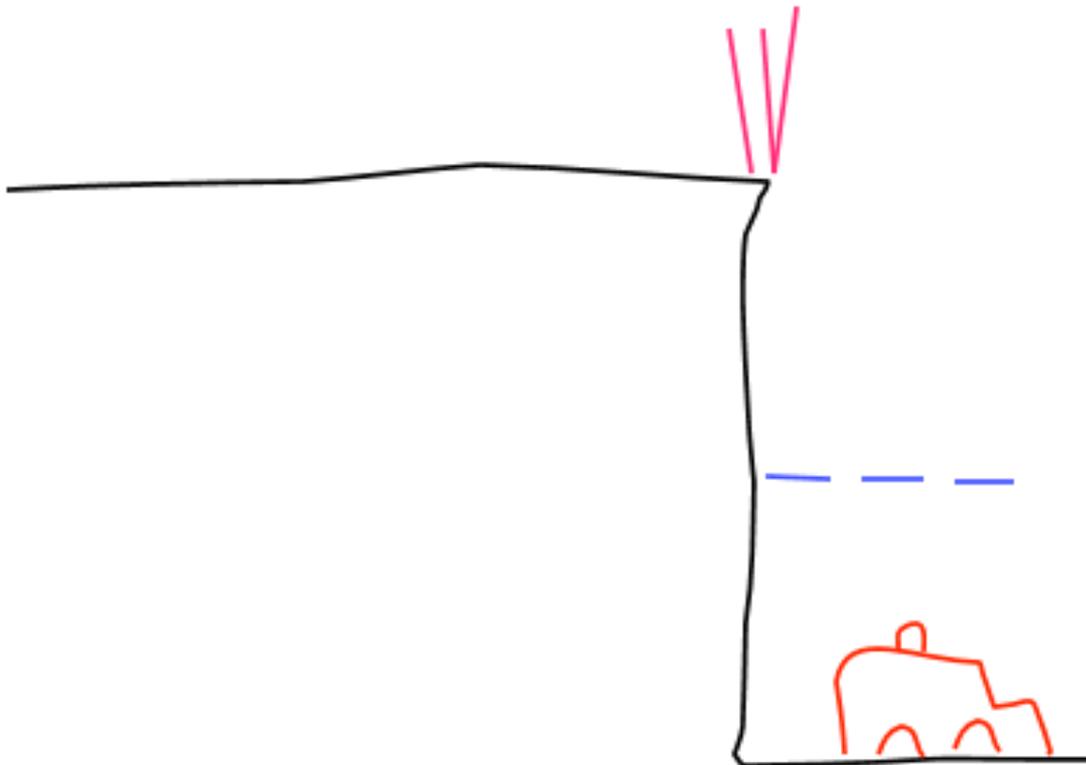
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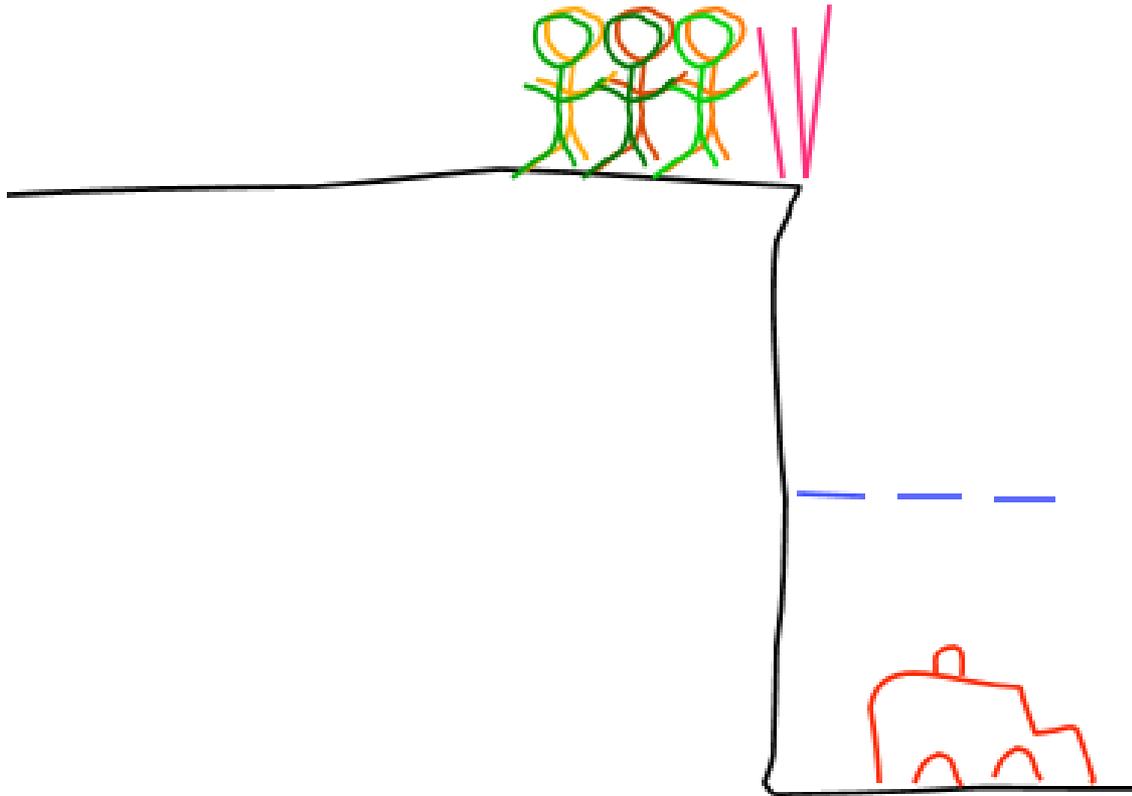
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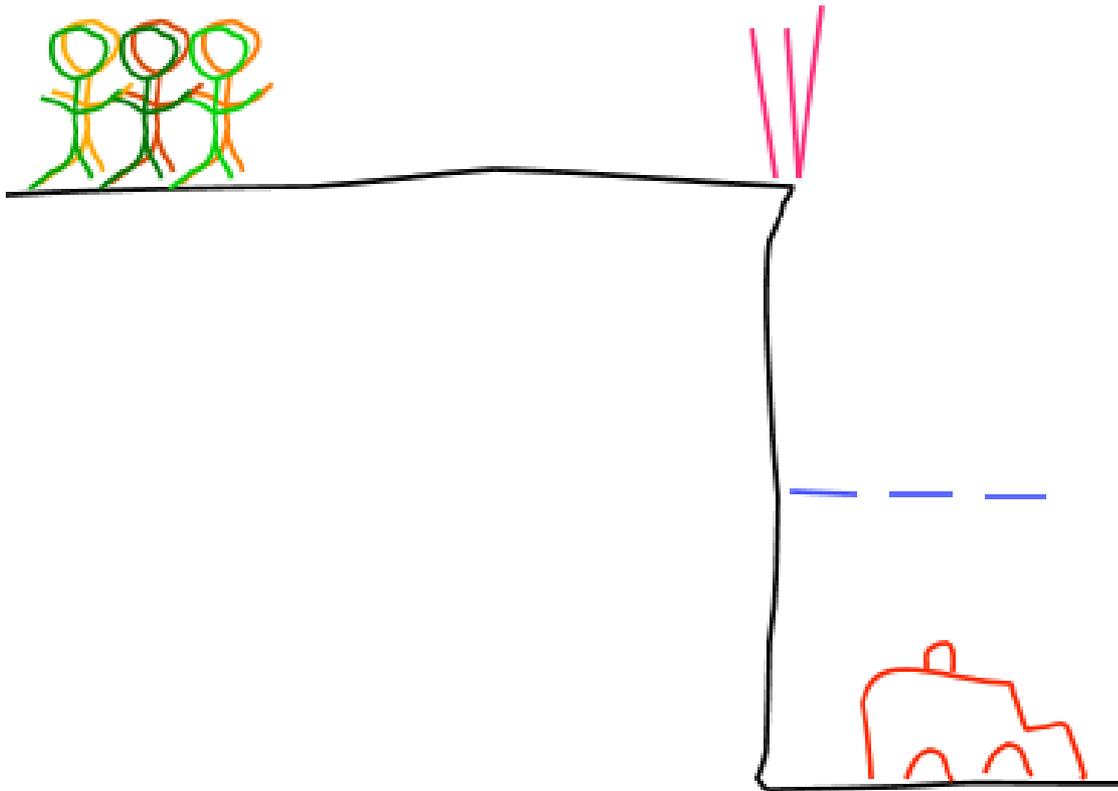
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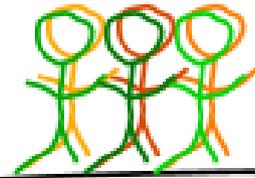
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Addressing the
social determinants of health



Primary prevention

— — — — —
Safety net programs and
secondary prevention



Medical care and
tertiary prevention

Jones CP et al. *J Health Care Poor Underserved* 2009.



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Tertiary prevention aims to soften the impact of an ongoing illness or injury that has lasting effects. This is done by helping people manage long-term, often-complex health problems and injuries (e.g. chronic diseases, permanent impairments) in order to improve as much as possible their ability to function, their quality of life and their life expectancy.

Examples include:

- cardiac or stroke rehabilitation programs, chronic disease management programs (e.g. for diabetes, arthritis, depression, etc.)
- support groups that allow members to share strategies for living well
- vocational rehabilitation programs to retrain workers for new jobs when they have recovered as much as possible.

Secondary prevention aims to reduce the impact of a disease or injury that has already occurred. This is done by detecting and treating disease or injury as soon as possible to halt or slow its progress, encouraging personal strategies to prevent re-injury or recurrence, and implementing programs to return people to their original health and function to prevent long-term problems.

Examples include:

- regular exams and screening tests to detect disease in its earliest stages (e.g. mammograms to detect breast cancer)
- daily, low-dose aspirins and/or diet and exercise programs to prevent further heart attacks or strokes
- suitably modified work so injured or ill workers can return safely to their jobs.



Primary prevention aims to prevent disease or injury before it ever occurs. This is done by preventing exposures to hazards that cause disease or injury, altering unhealthy or unsafe behaviors that can lead to disease or injury, and increasing resistance to disease or injury should exposure occur.

Examples include:

- legislation and enforcement to ban or control the use of hazardous products (e.g. asbestos) or to mandate safe and healthy practices (e.g. use of seatbelts and bike helmets)
- education about healthy and safe habits (e.g. eating well, exercising regularly, not smoking)
- immunization against infectious diseases.



Primordial prevention consists of actions to minimize future hazards to health and hence inhibit the establishment factors (environmental, economic, social, behavioral, cultural) known to increase the risk of disease. It addresses broad **health determinants** rather than preventing personal exposure to risk factors, which is the goal of primary prevention.

Example: outlawing smoking in public represents primordial prevention, whereas a campaign against smoking would be an example of primary prevention.



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Parable - Babies in the River



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