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Community Health, Population Health and Public Health:

❖ Definition of Public Health:

The CDC Foundation defines public health as “the science of protecting and improving the health of people and their communities.”

Public health professionals work to prevent the spread of illness in a particular population, which can be as small as a single neighbourhood or as large as an entire country. Their work is largely preventive, as they take steps to ensure that a population has clean food and water, and design informational campaigns to teach the public about health and wellness.

However, preventive action is not all that public health professionals do. They also work to understand the spread of disease in certain populations, particularly after a health-related outbreak. By studying the patterns of various diseases and how they can affect a population, public health professionals provide vital information to key decision-makers, both in the healthcare sphere and in government. In this way, public health plays a vital role in making sure that a population is as healthy as possible.

Public health may combat infectious disease, or work to educate teens and adults on tobacco and alcohol use, or work on air quality education for asthmatics. Public health tends to focus primarily on large scale concerns or threats, such as vaccination and disease prevention, injury and illness avoidance, healthy behaviors, and minimizing outbreaks that jeopardize public health.



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❖ Definition of Community Health:

Community health is a branch of public health which focuses on people and their role as determinants of their own and other people's health in contrast to environmental health, which focuses on the physical environment and its impact on people's health. Community Health shares similarities with both population health and public health but tends to be more strictly geographically based. Community health often tackles a broader spectrum of issues than either population health or public health, such as influencing public policy, creating shared community resources, and taking a more holistic approach to healthy living. Community health directly addresses the social determinants of health — the collection of social and economic circumstances that can prevent people from attaining and maintaining positive health outcomes. The term "Community health" refers to the health status of a defined group of people, or community, and the actions and conditions that protect and improve the health of the community. Those individuals who make up a community live in a somewhat localized area under the same general regulations, norms, values, and organizations. Community health is a major field of study within the medical and clinical sciences which focuses on the maintenance, protection, and improvement of the health status of population groups and communities. It is a distinct field of study that may be taught within a separate school of public health or environmental health. The WHO defines community health as: environmental, social, and economic resources to sustain emotional and physical well being among people in ways that advance their aspirations and satisfy their needs in their unique environment.

For example, the health status of the people living in a particular town, and the actions taken to protect and improve the health of these residents, would



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constitute community health. In the past, most individuals could be identified with a community in either a geographical or an organizational sense. Today, however, with expanding global economies, rapid transportation, and instant communication, communities alone no longer have the resources to control or look after all the needs of their residents or constituents.

Community health is a medical specialty that focuses on the physical and mental well-being of the people in a specific geographic region. This important subsection of public health includes initiatives to help community members maintain and improve their health, prevent the spread of infectious diseases and prepare for natural disasters.

Community health is inextricably tied to individual wellness. “Good community health equates to healthy people, as a community is the ecosystem or environment in which people live,” says Thomas G. Bognanno. “It is difficult to be healthy personally if your community is unhealthy.”

Instead of studying diseases directly (applicable for population health), community health focuses on how factors such as socioeconomic hardship and cultural standards affect overall health. The work of community health professionals, “helps to reduce health gaps caused by differences in race and ethnicity, location, social status, income, and other factors that can affect health.” Often, they design health education programs to reach communities and encourage healthy behaviors.

As caregivers strive for improved health outcomes, the traditional separation between models is diminishing. Methods to directly impact the social determinants of health may have been perceived as the role of community health but now providers across the spectrum of care are demanding access to social determinant information to help drive better care decisions and ultimately better outcomes.



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Emerging care models reflect this convergence. State-based Medicaid Accountable Care Organizations (ACOs) involve a level of financial risk-sharing for providers. These financial incentives drive providers to expand care beyond the traditional walls of medicine to include social determinants of health, expand access to care, incorporate behavioral health, and consider alternative treatment options.

Behavioral health systems of care (SOC) deliver improved behavioral health services by viewing behavioral health as a community-wide problem that demands a community-wide solution. These SOCs incorporate behavioral health screening into multiple medical touchpoints, directly involve families in care decisions, and utilize community services and supports to build a network of care and support for individuals and families.

The trend toward whole-person care encompasses the goals and aims of many of these care models. Under whole person care, providers strive to treat the full care needs of a patient through one coordinated care delivery system. Patients may receive primary care, chronic care, behavioral health, and employment or housing assistance from a coordinated care network. Food pharmacies, for example, enable medical providers to write prescriptions for food and nutrition needs as a way to improve patient health. Like superheroes, each care delivery model has its own unique strengths. But also like superheroes, their impact is greater when they unite together. As collaboration increases and traditional models give way to more comprehensive models of care, we all benefit as a result.

Medical interventions that occur in communities can be classified as three categories:

1. Primary healthcare,
2. Secondary healthcare, and



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3. Tertiary healthcare.

Each category focuses on a different level and approach towards the community or population group. In the United States, community health is rooted within primary healthcare achievements. Primary healthcare programs aim to reduce risk factors and increase health promotion and prevention. Secondary healthcare is related to "hospital care" where acute care is administered in a hospital department setting. Tertiary healthcare refers to highly specialized care usually involving disease or disability management. The success of community health programmes relies upon the transfer of information from health professionals to the general public using one-to-one or one to many communication (mass communication). The latest shift is towards health marketing.

❖ **Definition of Population Health:**

The simplest definition of population health is the health outcome of a group of individuals. In a broader sense, population health includes the health outcomes themselves and the efforts to influence those outcomes. While the terms "population" and "health" are generally understood terms, they can be used in a way that describes a more narrow group than may initially be apparent.

"Population" describes a patient population with a similar characteristic. But that characteristic can vary: age, geographic proximity, similar diagnosis, employees of the same company, disabled persons, or groups based on socioeconomic status or ethnicity are all examples of populations. Thus a "population" can be a broad term encompassing patients who are rather dissimilar clinically to a narrow term encompassing patients who share highly similar clinical profiles.



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Even the term “health” can vary in meaning. It may mean a full return to healthy functionality, such as after an accident or temporary illness. It may mean patients achieving the best possible wellness given the complexity of long-term chronic diseases. It may mean health comprised of both physical and behavioral health, or it may mean healthy behaviors, such as patients undergoing substance abuse treatment. All of the above can be components addressed by population health.

Population health differs from community health only in the scope of people it might address. People who are not organized or have no identity as a group or locality may constitute a population, but not necessarily a community.

Women over fifty, adolescents, adults twenty-five to forty-four years of age, seniors living in public housing, prisoners, and blue-collar workers are all examples of populations. As noted in these examples, a population could be a segment of a community, a category of people in several communities of a region, or workers in various industries. The health status of these populations and the actions and conditions needed to protect and improve the health of a population constitute population health.

The actions and conditions that protect and improve community or population health can be organized into three areas: health promotion, health protection, and health services. This breakdown emphasizes the collaborative efforts of various public and private sectors in relation to community health.

Health promotion may be defined as any combination of educational and social efforts designed to help people take greater control of and improve their health.

Health protection and **health services** differ from health promotion in the nature or timing of the actions taken. Health protection and services include the implementing of laws, rules, or policies approved in a community as a

result of health promotion or legislation. An example of health protection would be a law to restrict the sale of hand guns, while an example of health services would be a policy offering free flu shots for the elderly by a local health department. Both of these actions could be the result of health promotion efforts such as a letter writing campaign or members of a community lobbying their board of health.



❖ Why is Community Health important?

The community you live in is part of who you are. Even if you don't see your neighbors every day, you recognize that the decisions you make impact those around you. You're all in it together, and you wouldn't have it any other way! Improving your community and helping others is often at the top of your mind. So when the phrase "community health" crossed your radar, you had to know more.

Community health is the intersection of healthcare, economics and social interaction. Unfortunately, many people are unaware of the role this type of healthcare plays in their everyday lives.



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❖ Difference between Public Health and Community

Health:

Because public health and community health share the same ultimate goal, some of their efforts are similar. For example, professionals in both fields may be involved in developing health education programs or health plans. However, the greatest difference between the two fields lies in their respective focuses:

1. Public health focuses on the scientific process of preventing infectious diseases, while community health focuses more on the overall contributors to a population's physical and mental health.
2. Another major difference between public health and community health is where these professionals tend to work. In the United States, most public health initiatives fall under the jurisdiction of federal departments of public health, such as the CDC or the Food and Drug Administration. Many public health professionals work in offices and laboratories with local or state health departments, hospitals, and colleges and universities. By contrast, community health professionals often work on a more localized scale, from state and county jobs to local hospitals (though some community health professionals also work at the CDC).
3. Public health incorporates the interdisciplinary approaches of epidemiology, biostatistics and health services, environmental health, community health, behavioral health, health economics, public policy, insurance medicine and occupational health (respectively occupational medicine) are other important subfields. Community Health is a discipline concerned with the study and improvement of the health characteristics of



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different communities. Community health tends to focus on geographical areas, and includes primary, secondary and tertiary healthcare.

❖ Factors that affect Community and Population Health:

There are four categories of factors that affect the health of a community or population. Because these factors will vary in separate communities, the health status of individual communities will be different. The factors that are included in each category, and an example of each factor, are noted here.

1. **Physical factors:** Geography (parasitic diseases), environment (availability of natural resources), community size (overcrowding), and industrial development (pollution).
2. **Social and cultural factors:** Beliefs, traditions, and prejudices (smoking in public places, availability of ethnic foods, racial disparities), economy (employee health care benefits), politics (government participation), religion (beliefs about medical treatment), social norms (drinking on a college campus), and socioeconomic status (number of people below poverty level).
3. **Community organizationL:** Available health agencies (local health department, voluntary health agencies), and the ability to organize to problem solve (lobby city council).
4. **Individual behaviour:** Personal behavior (health-enhancing behaviors like exercising, getting immunized, and recycling wastes).

❖ Three Tools of Community Health Practice:

Much of the work of community health revolves around three basic tools:

1. Epidemiology,



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2. Community Organizing, and
3. Health Education

Epidemiology is the study of the distribution and determinants of diseases and injuries in human populations. Such data are recorded as number of cases or as rates (number per 1,000 or 100,000). Epidemiological data are to community health workers as biological measurements are to a physician. Epidemiology has sometimes been referred to as population medicine.

Community Organizing is bringing people together to combat shared problems and increase their say about decisions that affect their lives. For example, communities may organize to help control violence in a neighborhood.

Health Education involves health promotion and disease prevention (HP/DP) programming, a process by which a variety of interventions are planned, implemented, and evaluated for the purpose of improving or maintaining the health of a community or population. A smoking cessation program for a company's employees, a stress management class for church members, or a community-wide safety belt campaign are examples of HP/DP programming.

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