Public Health Theory and Practice.
A Proposal for its Development in the Countries of the Americas

In late 1989 the Pan American Health Organization entered into an agreement with the American Association of Schools of Public Health (ASPH) and the Latin American and Caribbean Association of Public Health Education (ALAESP) to conduct a joint preliminary assessment of the Region's situation and trends in the area of public health. This undertaking would ultimately form the basis for a broader proposal for cooperation. The present project serves as a corollary to lines of action implemented by a group of technical programs of PAHO and other institutions during the period 1987-1990 which made it increasingly apparent that there is need to implement a more comprehensive approach in the field of public health.

This new initiative of the Organization is an outgrowth of increasing world awareness that public health is currently in a state of crisis. In the face of changing circumstances, most societies are no longer able to promote and protect their own health. The initiative draws its justification from the insufficient progress that has been made by the countries toward the goal of Health for All by the Year 2000 and at the same time from the new demands being posed by the socioeconomic situation in the Region, which have made the aforementioned crisis all the more patent and have underscored the need to look for alternatives.

Originally the problem was thought to lie in the schools or in the public health education process—as was the case, for example, during the 1970s. However, evidence now places the issue in a far more complex dimension when judging the behavior of customary health practices and various available health indicators.

The fact is that a major portion of the Latin American population—mostly the socioeconomic groups with the lowest standards of living—is at excessive risk of illness and death. This is true for all age groups and for most health problems, particularly those that should already have been overcome. In all the countries, including the most developed ones, there continue to be significant geographical differences in terms of mortality, morbidity, and access to basic health services, which are even more marked between the different social groups.

It has been estimated that more than 130 million people lack regular access to basic health services. Moreover, with the growth in population projected for 1990-2000, this figure is expected to increase by another 100 million. Thus the health services will have to gear up to meet the needs of 230 million more people in addition to those already being covered while at the same time improving the quality of the medical care currently provided and giving increased emphasis to health promotion and protection.

It is now important to raise political and scientific awareness of the critical problems and deficiencies in public health and to focus on the practices and motivations that have characterized the situation in the Americas, in order to encourage the formulation of guidelines that will shape the decisions needed in the medium and long term. In keeping with processes currently under way at the global level, the project conceives of public health not just as a field of professional specialization but, more importantly, as a duty of the state and, above all, as a commitment of society to its health ideals.

The objectives are on the one hand, to describe and account for the situation of public health and its major trends in the Americas within the context of the new challenges posed by the social situation in general and by health in particular and, on the other hand, to identify ways of revitalizing or reorienting the conceptual, methodological, and operational practice of public health in the countries of the Region, especially through the promotion of sectoral leadership, research, and advanced training in public health.

Conceptual and Referential Framework

Public health is regarded as the means, whether organized or not, by which society translates into action its commitment to seek the attainment of its health ideals. It is recognized that the development of society's wealth of knowledge, attitudes, traditions, beliefs, and practices with regard to health is causally related to changes in the economic, political, and social context. At present, this context in the Region of the Americas is characterized by profound economic crisis, a growing trend toward democratization, and increasingly active social participation.

Even though the health situation differs markedly between subregions, countries, areas within a single country, and population groups, on the whole it is characterized by a decline in communicable diseases and a rise in noncommunicable diseases and damages or risks to the environment as a result of growing industrialization and urbanization, coupled with an aging population. In the health services, the perennial problems remain: the programs are largely vertical and disconnected from the infrastructure that should serve the population and the environment on a comprehensive basis; coverage is low; emphasis is placed on the curative approach; the quality of care remains poor; and the services have become progressively less accessible. The recent trend toward privatization of health care is
raising a number of questions and will undoubtedly undermine public services even further. Public health education has failed to keep pace with the social, economic, and political changes that are taking place, which necessitate a shift to new, more complex theory and practice. Finally, in most of the countries there is a sizeable gap between theory and practice.

Against this backdrop, a promising sign has been the attempt to reorient national health systems by developing and strengthening local health systems—a Regional political commitment that corresponds to an operational tactic within the primary health care strategy. Also encouraging is the clearer trend toward population-based intervention strategies, active health promotion, tapping into multisectoral potential and the potential of popular wisdom, recognition of the role of the family, and espousal of the values inherent in such concepts as health, participation, citizenship, social control, and others.

Principal Characteristics of Present Line of Action

The central focus of analysis, promotion, and development efforts under the project will be public health theory and practice as expressed through service, education, and research. The basic approach will move, scientifically, from the specific to the general and, geographically, from the national to the regional level.

The analytical component will not only view a cross-section of reality but will go on to take a longitudinal look, both retrospective and prospective, at the challenges, processes, and most important actors in the field of health. One facet of this analysis will involve a study of the political, scientific, technical, and operational changes that have taken place, while another will look at the repercussions these transformations have had on the social processes of service, education, and research. It should be possible, therefore, to examine—or anticipate—the interaction over time between specific problems or ideals, on the one hand, and, on the other, specific actions or programs.

Information will be gathered from a number of sources (individuals, institutions, studies, publications) at the national, subregional, and Regional level. The counterparts for the different components of the present project may be either national (ministry of health, social security, university, research institutions) or international (for example, Economic Commission for Latin America and the Caribbean, World Bank, Inter-American Development Bank, Kellogg Foundation, United States Centers for Disease Control and other). In both previous dimensions, the focal points may be persons, groups, or institutions.

Expected Outcomes and Actions

As already indicated, the description and assessment of the situation and trends in public health theory and practice that will emerge from the present proposal are expected to serve as a basis for the promotion and, hopefully, the generation of a movement aimed at the formulation and adoption of policy guidelines or directives for social action in this area in the Region of the Americas. The following intermediate outcomes and actions are expected:

1. Initial reflection (individual and collective contributions). Implementation of the present proposal will lead to the consolidation of previous PAHO work in this area and also to requests for contributions from selected experts. These contributions, taken as a whole, should represent the various views of public health theory and practice in the Region. On this basis, an attempt will be made to put together a collective picture. All the contributions will be widely disseminated in the hope of generating extensive discussion on public health theory and practice in the Region.

2. Fostering of critical awareness (national and subregional meetings). As an essential part of the process, group discussion and reflection will be promoted in selected countries or subregions in order to encourage the development of specific areas. The openings for action identified during this phase will constitute important reference points for channeling PAHO technical cooperation.

3. Partial description and analysis of the development of public health (line of research). Based on a document or proposed plan outlining the corresponding objectives, categories of analysis, variables, areas of study, and methods, national or subregional studies will be promoted according to the size and sociocultural characteristics of the populations as well as the availability of critical information.

4. Dissemination of conceptual, methodological, and operational materials (publications). These will include reports written by experts on experiences to date, institutional accounts, and summaries of meetings and studies planned or carried out in the course of the project.

5. Regional guidelines for the reorientation of public health (Region-wide scientific meeting). Presentations requested from institutions, groups, or invited experts will be discussed and analyzed in a major scientific conference. The basic documents, conclusions, and recommendations from this meeting will be widely distributed with a view to stimulating concrete action at the country level.

6. Creation of a political momentum (Consensus conference). A group of leaders in the fields of education and service, from the northern and southern parts of the Hemisphere will analyze a document on the public health situation and formulate a series of conclusions and recommendations for future development. The recommendations will take the form of a declaration or manifesto that will be widely disseminated.

7. Theoretical, methodological, and operational development (development networks). An effort will be
made to set up development nuclei in institutions or consortiums of institutions wherever political, technical, and operational conditions are such that they will permit selective progress in the review of difficulties encountered or progress made toward filling the gaps identified during the process. Formation of an informal network will be encouraged in order to facilitate the exchange of theoretical, methodological, and instrumental information and to help ensure that the knowledge or technologies generated are applied to the specific institutional and social reality in each country.

**Tentative Timetable**

The proposal is intended to be implemented at three levels: conceptual and referential, with emphasis on understanding the problem; methodological, with emphasis on development; and operational, with emphasis on application and development. These levels comprise the various activities either under way or planned, as described below.

During the last quarter of 1990, a series of reference documents were prepared offering different perspectives on the basic values and determinants of public health theory and practice in the Region. These documents* were distributed to selected experts for review, and their comments or reactions were consolidated and presented at a meeting held in New Orleans, Louisiana, on 21-24 October 1991. This event was sponsored by the ALAESP and the ASPH, with the support of PAHO and participation by the authors of the respective documents.

The participants concluded that public health is currently in a state of profound crisis and that it is suffering from the following deficiencies:

- Inability to meet the needs of society. Fundamentally, the crisis lies in the polarization of theory and practice—in other words, the inability to use the knowledge that is produced in ways that will influence the social situation. But the crisis is more far-reaching than this: there is also a need to rethink theory and practice themselves.

- Inadequacy of current explanatory models. Public health is focused on the concept of disease. To get beyond this point will involve redefining its basic concepts, redefining the field of knowledge, and rethinking the theory in terms of disciplines that provide explanatory models drawn from the social sciences.

- Limitation of public health practice to patient care, with little concern for the prevention of disease. This reduces the health sector to a network of medical care services and public health to the management of these services. Public health is not in a position to take advantage of the opportunity for reconstruction that the civil society is currently procuring through organizations that are looking for ways to cope with disease, especially in the face of government cutbacks in the provision of basic services. The rethinking of public health practice will involve redefining such basic concepts as society, state, sector, and population, as well as articulating actions aimed at building widespread consciousness based on social control in response to the privatization of health care. It will entail advocating a form of government that will foster the democratization of power, participation by the people, and due regard for social movements.

The participants also looked closely at trends in public health theory and practice with a view to suggesting modifications and proposing new strategies.

The group discussed the continuity of this initiative, pointing out, with respect to analysis, the importance of multicenter projects that will allow greater in-depth study of the determinants of the public health crisis and, in regard to promotion, the need to influence the grass-roots level and to expand debate in technical, scientific, and political terms as well as within the entities or institutions involved.

The foregoing individual and collective contributions will add a great deal to subregional and national discussion, which in turn will serve as a basis for determining the work that needs to be done in the areas of service, research, and education and for preparing a proposal (development plan) for the corresponding studies. These activities will receive technical and financial support from PAHO. The meetings and research that are planned for 1992-1993 will require the mobilization of special funds. It is expected that in 1992 a workshop for the promotion of research projects will generate proposals for consideration by the PAHO/WHO Research Grants Program.

One of the medium-term goals is to hold a Region-wide conference on the subject, tentatively scheduled for late 1994, which will include progress reports on the foregoing activities as well as the national and subregional studies. The consensus conference is expected to be held in 1995. The financing of these activities will require considerable external resources in addition to special PAHO funds.

Further activities related to theoretical and practical development, aimed at achieving the fundamental objective of the project, will be programmed later on, as theoretical, methodological, and operational gaps are detected and potential development centers are identified.