

PLAYING TO OUR MUTUAL STRENGTHS: Philanthropy and Governmental Public Health

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Recently I transitioned from a career at the Centers for Disease Control and Prevention (CDC) to the de Beaumont Foundation—in both cases, working with state and local public health agencies and the organizations that support them. I still have much to learn, but the transition has already given me new perspectives on the relationship between public health and philanthropy: the challenges we share, in what ways we are dependent upon each other, and new ideas for how we might better support each other's mutual goals.

There is a widening divide between what we expect from government and what it is delivering. When government falls short in performing critical public health functions, important goals of philanthropy are put at risk. We need to take action to ensure a mutually reinforcing relationship.

The de Beaumont Foundation believes that governmental public health agencies are essential leaders and partners in their communities, protecting and promoting the public's health with effective policies and programs. When governmental public health agencies catalyze change, lead action, and engage partners, they save lives and make communities healthier.

Philanthropy plays a different but critical role. Grantmakers support key initiatives in their communities, respond quickly to emerging situations, and take calculated risks that government agencies cannot. We have the ability to stimulate innovation and enable community organizations to address defined needs.

Forging strong relationships between governmental public health and philanthropy allows both to maximize impact and leverage each other's strengths. Governmental public health can use policy to build healthier communities and can create shared resources (community-level data, for example) that advance philanthropy's work with community-based grantees. Philanthropy can innovate and develop new models, while governments can bring them to scale. Governments are responsible for creating broad measures to protect the health of their populations, allowing philanthropy to target more defined, perhaps still unmet needs.

PHILANTHROPY NEEDS TO HELP GOVERNMENT HOLD UP ITS END

A key challenge is that most governments do not fully meet these needs today, imperiling our shared goals in promoting the health and well-being of all Americans. Philanthropy cannot go it alone. To start, we lack the resources and do not have the policy and regulatory levers available to public health agencies.

Today's public health agencies operate in a world characterized by resource constraints, disconnected data, programs operating in silos, and a workforce not fully equipped for new challenges to improving the health of the population. As a result of the 2008-2009 economic collapse, these agencies have lost more than 50,000 public health jobs in recent years. Analyses emerging from the de Beaumont Foundation's PH WINS survey reveal that we can expect a further brain drain in the years to come. Federal funding has not come close to replacing lost state and local resources, and funding for health initiatives has been increasingly unstable (notable examples include the elimination of CDC's Community Transformation Grants and Partnerships in Community Health program).

There are political challenges as well. Governments face diminished public trust and confidence, increasing the burden of proof on public health agencies to articulate a clear and compelling case for the work they do. The elected officials responsible for determining funding for public health agencies are increasingly disconnected from science and public health, and differences in time horizons, views on the role of government, ideology, and other factors complicate an already challenging dialogue. The long-standing bipartisan consensus on the importance of public health has never been at greater risk.

OUR HEALTH SYSTEM NEEDS A NEW PUBLIC HEALTH FOCUS

Like any sector coming out of the recession, public health agencies need to transform to meet new realities and challenges. A large part of this transformation is the shift “upstream”—toward addressing social and economic factors that play the largest role in determining health, rather than focusing on insuring and treating patients. Public health agencies can also embrace their role as their community’s “chief health strategist,” especially with regard to leading partnerships, promoting evidence-driven decisionmaking, and leading communitywide efforts to address the leading causes of illness and death.

Perhaps more fundamentally, we need a renewed social consensus about the importance of public *and* private investment in public health. Philanthropy can help rebuild public trust, improve the effectiveness of governmental public health agencies, and inspire a new generation to engage in public service.

THERE ARE PRACTICAL STEPS THAT PHILANTHROPY CAN TAKE TO HELP

Below are seven steps philanthropy can take to help strengthen governmental public health. If we are successful, we will have done a useful public service—but also furthered our own organizational goals, since an effective public health system can accelerate and amplify the work we do in communities across the United States. Many of these are at the core of the de Beaumont Foundation’s strategic priorities (see inset box), but are not unique to our work.

- 1) **Invest in innovations that governments can adopt.** Philanthropy can play a key role in developing new tools and techniques (for example, new informatics capacities or better ways to deliver services). Philanthropy can compensate for the public sector’s lack of research and investment capital, as well as its low propensity for risk.
- 2) **Resist the urge to take over.** It can be tempting to simply pick up the slack for public health agencies, but we must avoid assuming roles that are naturally those of government. We should not inadvertently make government less essential or undermine the case for public funding of public responsibilities.
- 3) **Encourage a two-way street between government and philanthropy.** We can work to identify opportunities for sharing, exchanging, or cross-recruiting employees and fellows. This would provide philanthropy with an “insider” understanding of their public-sector counterparts while giving talented government staff a chance to experience a foundation’s drive for innovation and change.
- 4) **Dare to be boring.** Philanthropy can help identify successful innovations already in practice and make it cheaper and easier for other public health agencies to adopt them. This may not be as sexy as high-profile “new” or “breakthrough” initiatives, but these often-invisible efforts are efficient and help build overall success. No resource-starved agency should have to reinvent the wheel.
- 5) **Partner directly with public health agencies.** Partnerships allow different entities to build on each other’s strengths—government’s strengths being policy levers, scale, and a broad view of the community; and philanthropy’s strengths being risk tolerance, community engagement, innovation, and an independent voice. We can also better connect our own community partners to their local public health agencies.
- 6) **Partner with other grantmakers in health.** Philanthropy can model constructive relationships by engaging directly with other funders. One example is the BUILD Health Challenge, in which five funders are collaborating to support 18 awardee sites, each of which comprises a partnership among health care systems, community-based organizations, and local health departments.
- 7) **Engage with elected officials.** We must use our collective voices in the community to help make the case for strong, effective public health agencies. Though many fear engagement in the political process and being burned by the proverbial “third rail,” we need to recognize that power and forward movement come from that same rail. We can do better at showing elected officials the work we do for their constituents as well as how public policy can amplify our impact. We can be more explicit when we

have innovations and discoveries that need to be scaled with public funding. We can use our voices to respectfully argue that philanthropy cannot replace government and that it is unacceptable to diminish important public services. Last but not least, we can show that there is much to be gained by a renewed, mutually supportive partnership between philanthropy and public health.

de Beaumont Foundation Strategic Priorities

- Strengthen public health practice through innovation, tools, and training;
- Connect public health agencies to key partners; and
- Elevate the role of public health by articulating the value of a transformed public health system.