Future challenges for Public Health, next 50 years

To paraphrase Karl Marx, the epidemiologists have described the world. Our task is to change it. We now know a great deal about the causes of disease and the distribution within populations. We also know a lot about what works on a small scale. Our problem is that we find it difficult to scale up interventions or to change policies in ways that make a real difference a population level. Health public policies are built on evidence and reason. Today, these principles are under attack, from politicians who see the truth as optional and by powerful vested interests using ever more sophisticated means to shape public opinion.

The wider public health workforce consists of professions that have the opportunity or ability to positively impact the health and wellbeing of the public through their work and are not always employed directly in a public health role. These professions can make an impact. Appropriate education and training in public health is key to make public health workforce an agent of change from community to government. We know that we need truly interdisciplinary approaches to analyse the threats to health and to evaluate the effectiveness of responses. Yet we often find difficulty in putting them into practice. Who creates the silos? And for which purpose? What actions do we need to take in the global public health community to promote and sustain interdisciplinary working? And what changes in the wider society do we need to advocate for to make this happen?

High quality, sustainable health systems are essential to enhance health and wealth and to achieve societal well-being. High quality health systems include not only the right to quality health-care but also equity. Evidence-based, cost-effective investments and rigorous assessment are key to guarantee high quality health systems. How can we improve health, wealth and societal well-being by investing in health systems? Which investments inside and beyond the health system should be performed to increase quality and reduce inequities? How can we guarantee that health systems are sustainable, resilient and accessible?

The public health community worldwide is looking for leadership but too often is failing to find it. We need individuals who can inspire, motivate, and influence those who can promote health and who can confront those who undermine it. What does public health leadership look like? Where will that leadership come from? How do we create and sustain a new generation of leaders? How do we support potential leaders who face barriers based on their gender, nationality, ethnicity, or other characteristics?

These are the challenges that we have to tackle now and in the future.