

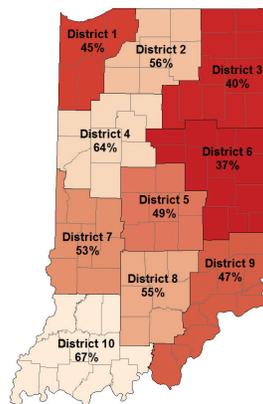
# Indiana Public Health System Review: **Overview**

Indiana's public health system is chronically underfunded and undervalued. Indiana ranks 48th for state-provided public health funding. Hoosiers also experience higher rates of preventable diseases and injuries as well as healthcare costs compared to other states. Indiana ranks 41st out of 50 states for overall health. The purpose of this report is to summarize the current state, including the challenges and strengths, of system and to make recommendations for improvements to the system.

## Evidence shows that when communities invest more in public health, they actually spend less on health care and live longer.

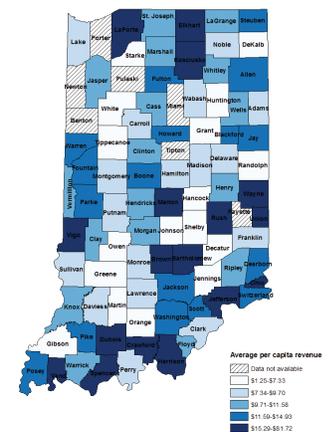
### Indiana Average Proportion of Activities Completed by Local Health Departments *(weighted by population)*

However, findings presented in this report show that Indiana communities are less likely to be implementing nationally recommended public health activities compared to other states. Across the 10 health districts in Indiana, an average of 50% of the 20 recommended public health activities are being conducted, ranging from 40% to 67%.



### Indiana Average Public Health Per Capita Spending by County

Indiana's communities also receive less public health funding comparatively. In fact, Indiana's Local Health Departments rely on local sources for the majority of their budgets, unlike most other US communities that rely equally on federal, state, and local funding. This ensures that less resourced communities that likely have a greater need for the protection and preventive services provided by public health also have less funding and less capacity to ensure that they receive them.



The national median for local public health spending is \$41 per person. All but 4 of Indiana's counties spend below the national 25% percentile of \$23 with 37 spending less than \$10 per capita.

## A key finding of this report is that many key Indiana stakeholders are unable to differentiate between public health and healthcare.

While both work to improve the health of Hoosiers, public health is focused on preventing illness and protecting the population from injury, communicable diseases, and premature death whereas, the vast majority of the time, healthcare primarily serves to treat disease and injury and is focused on making people well again.

## Insights from Qualitative Interviews with 50 Stakeholders Including Policymakers, Business Leaders, Healthcare Leaders, and Public Health Experts

- Public health is not well understood and is undervalued.
- Public health does not have sufficient funding to be as effective as needed.
- There is a lack of specific types of public health expertise at the local level.
- There is a lack of connectedness and communication between the state health department (SHD) and local health departments (LHDs).
- There is insufficient technology and essential infrastructure coupled with inconsistent data for evidence-based decision making.
- The local public health system is not providing the essential public health services consistently across communities.

## Key Recommendations

- There needs to be a uniform approach to delivering the Foundational Public Health Services across the state.
- One way to ensure that all communities, even those supported by small local health departments, are provided the foundational public health services is to create a district-level mechanism that will enable resource sharing in support of local health departments.
- The State Health Department's oversight capabilities and its capacity to support the local public health delivery system need to be strengthened.
- Under the auspices of the state board of health, a multi-disciplinary state-wide implementation committee should be created and tasked with executing the recommended implementation steps outlined in the report.