



Evolution of Public Health

Public Health 1.0

- Began in the late 1800s.
- Focused on how to prevent disease through actions like food and water safety standards, giving vaccines and antibiotics, and the study of health problems that affect groups of people.

Public Health 2.0

- Began in the 1980s.
- Made new systems and standards to fight chronic disease and new threats, such as the HIV/AIDs outbreak.
- Defined common goals and functions for public health at every level of government.

Public Health 3.0

- Began in early 2000s.
- A focus on how where we live, work, learn, and play impacts our health and the need to combine efforts with partners in other sectors to improve health.

Key Features of Public Health 3.0

- Leaders who reach across sectors and have a strong, diverse workforce
- Thoughtful approach of new partners to share goals, plans, and funding
- Access to enough funding that can be braided and shared across work
- Actions based on timely local data, sharing data between partners, and building workforce skills to study data
- Strong systems that support health equity, cultural awareness, and partnerships

How the Public Health Workforce can Achieve Public Health 3.0

1. Be a “Chief Health Strategist” in your community to bring people together and make an impact on the spaces where we live, work, learn, and play to improve the community’s health.
2. Engage partners from other sectors, like health care, justice, schools, housing, and others.
3. Support the Public Health Accreditation Board (PHAB) goal to improve public health systems and quality.
4. Collect good, local data to guide planning efforts and target actions.
5. Blending and braiding funding sources as allowed to enhance partner efforts and create wider project impacts.

[Learn more about actions you could take to move your health department or community to Public Health 3.0.](#)

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How does this apply to the State Health Improvement Plan (SHIP)?

- The SHIP uses the Collective Impact framework to help the Public Health and Safety Division (PHSD) engage partners from other sectors and align efforts to improve the health of Montanans.
- The SHIP is a public health improvement process outlined in PHAB standards for an accredited health department, which is a status the PHSD maintains voluntarily.
- The SHIP uses Montana-specific data for planning purposes.
- SHIP implementation involves blending and braiding funding from a range of different programs to support its costs.