



## **Academic Health Departments: Core Concepts Working Document**

### **Definition**

An academic health department (AHD), or teaching health department, represents a formal affiliation between an academic institution and a public health practice organization. Typically, an AHD joins a health professions school and a state or local health department, although other public health practice organizations may be involved. Health professions schools are academic institutions housing schools or programs in public health, medicine, nursing, dentistry, environmental health, health education, or any of a variety of other health fields.<sup>1,2</sup>

The AHD arrangement is the public health equivalent of the “teaching hospital” affiliation that formalizes the relationship between medical schools and hospitals. It exists to strengthen the linkage between public health practice and its broad academic base and is designed to enhance public health education and training, research, and service. AHDs can serve as public health training sites for students of public health and the clinical health sciences, as well as sites for research and practice involving both academic and practice communities.<sup>1,2</sup>

### **Attributes**

A variety of types and levels of partnership exist between academic institutions and health departments. While these can represent productive collaborative relationships, potential benefits to both types of institutions may be maximized by formalizing the relationships between the partners. A comprehensive AHD may exhibit some or all of the following attributes:

- Involvement of, at minimum, one health professions school and one public health practice organization
- Formal written partnership agreements between institutions
- Shared personnel, often in the form of faculty or staff who are jointly appointed and funded
- Organizational structures that allow the sharing of resources between partnering institutions
- Exchange of resources or other forms of compensation between partnering institutions as services are provided
- Collaborative efforts to provide education and training for students and public health professionals grounded in public health theory and practice
- Joint proposal and implementation of research projects
- Shared support for and participation in providing public health services
- Collaborative and mutually beneficial relationships<sup>1,2</sup>

### **Purpose**

The AHD is meant to enhance public health education and training, research, and service by facilitating collaboration across the academic and practice communities. As such, it responds to several key issues facing the public health field. Use of the AHD model may help to address:

- Concerns regarding the separation of education and public health practice and the relatively low percentage of public health practitioners with formal public health education, faculty with public health practice experience, and graduates seeking employment in health departments
- Concerns related to the level of preparedness of students and public health professionals to meet local public health needs

- Health departments' limited abilities to access the expertise necessary for assessing and responding to community health needs
- The lack of quality community-based or applied public health research
- The need for continuing education and exposure to public health innovation for public health professionals in both academic and practice environments<sup>2,3,4,5</sup>

## Benefits

One defining characteristic of the AHD is that benefits are realized by all partnering institutions and the communities served by the health departments as a result of the AHD affiliation.

Numerous benefits may be derived from an effective AHD relationship and may include:

- Increased awareness of and appreciation for public health practice and respect for public health professionals
- Increased capacity for performing core public health functions and meeting community health needs
- An ability to maximize and target the use of scarce resources
- Additional, and better qualified, professionals providing public health services
- Public health graduates better prepared to enter the workforce with a solid foundation and skills in public health theory and practice
- Enhanced career opportunities and broader career options for public health graduates
- Enhanced opportunities for recruitment of public health graduates and professionals into practice environments and public health practitioners into academic environments
- Better integration of public health principles in health sciences curricula
- Lifelong learning opportunities for public health professionals
- Increased opportunities for applied research addressing local public health issues, as well as access to communities and community-based data for research purposes
- Enhanced opportunities for grant funding
- Increased access to academic resources and expertise to improve the provision of public health services
- The exchange of fresh ideas and perspectives
- A broader and more cohesive communication network for disseminating information relevant to public health
- Advances in the science of public health and an expansion of the knowledgebase for public health decisions and policies
- A rethinking of the division within public health in which academic institutions focus on education and research, while practice institutions focus on service<sup>2,3,6,7,8,9</sup>

Ultimately, AHDs strive to improve the public health system and, in so doing, the health of the communities they serve.<sup>1,3</sup>

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<sup>1</sup> Keck WC. (1998). *A Proposal to Examine the Question of What Should be Done to Facilitate the Development of Academic Health Departments*. Available from [http://www.phf.org/resourcestools/Documents/developing\\_academic\\_health\\_departments.pdf](http://www.phf.org/resourcestools/Documents/developing_academic_health_departments.pdf)

<sup>2</sup> Keck WC. (2000). Lessons learned from an academic health department. *Journal of Public Health Management and Practice*; 6(1): 47-52.

<sup>3</sup> Association of Schools of Public Health. (n.d.). *Academic Health Departments: Pioneering Academic-Practice Collaboration*. Available from <http://www.asph.org/UserFiles/AcademicHealthDepartments.pdf>

<sup>4</sup> Conte C, et al. (2006). Academic health departments: From theory to practice. *Journal of Public Health Management and Practice*; 12(1): 6-14.

<sup>5</sup> Institute of Medicine. (1988). *The Future of Public Health*. Washington, DC: National Academy Press.

<sup>6</sup> Kegler MC, et al. (2006). Multiple perspectives on collaboration between schools of public health and public health agencies. *Public Health Reports*; 121: 634-639.

<sup>7</sup> Livingood WC, et al. (2007). Assessing the status of partnerships between academic institutions and public health agencies. *American Journal of Public Health*; 97(4): 659-666.

<sup>8</sup> Mahan C, Silver GB. (2006). More practice, but still not perfect. *Journal of Public Health Management and Practice*; 12(1): 28-30.

<sup>9</sup> Swain GR, et al. (2006). Local health department and academic partnerships: Education beyond the ivy walls. *Journal of Public Health Management and Practice*; 12(1): 33-36.