Community Health Encyclopedia Article

Community Health

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While personal health care services deal directly with individuals for the maintenance of health or the control or cure of disease, community health services are directed toward population groups. Those involved in the management of community-based health problems work toward solutions, often geared toward preventive medicine and health promotion. Emphasis in community health care often includes measures to increase accessibility.

As early as 1946, the Hill-Burton Act allocated federal funds, in amounts based on population distribution, for new hospital construction. The authors of this legislation and its later revisions believed that because the national government could not know all the needs of people in the country's thousands of cities and towns, planning should take place at the state level. Amendments in 1954 broadened the program to include nursing homes, rehabilitation facilities, and chronic disease facilities. The Community Health Services and Facilities Act of 1961 made federal grants available to meet identified local health needs. The National Health Planning and Resources Development Act of 1974 assisted in the establishment of Health Systems Agencies, which had the objectives: improve the health of residents of a health service area while restraining increases in the cost of providing residents with health services; increase accessibility, acceptability, continuity, and quality of health services to residents of that area while preventing unnecessary duplication of services; and, preserve and improve competition in the health service areas. These agencies emphasized issues of concern to their local communities, such as programs to address migrant health and minority health care needs; access to services for the poor and rural residents; management of environmental health issues; and, provision for mental health care services.

In the '80s and '90s, the high cost of health care has become a major focus of the federal government. Methods of cost containment for the Medicare and Medicaid programs continue to be pursued. State government involvement in planning health care services has varied dramatically. Prosperous states, such as New York and Massachusetts, continue to actively pursue solutions to health problems with regulations and state spending, while other states view health services as local and federal issues and provide only the traditional health functions of disease control and maintenance of birth and death records. As public interest in health promotion and prevention continues to increase, local hospitals are often assuming the role in planning, marketing, and providing a wide range of health services in most communities.