Public Health’s Role in Antibiotic Stewardship

Driver Diagram

**AIM**
Promote Optimal Antibiotic Use

**Goals**
- Preserve antibiotics for the future
- Decrease demand by the public for inappropriate use
- Reduce the spread of antibiotic resistance
- Decrease adverse events associated with inappropriate antibiotic use
- Decrease costs associated with antibiotic use

**PRIMARY DRIVERS**
Appropriate Use of Antibiotics

**SECONDARY DRIVERS**
Partnerships, Communication, Reimbursement, & Stewardship
- Provide information on which antibiotics are most effective within your community at a certain point in time
- Provide information on which diseases are prevalent within a community at a point in time
- Develop policies that create incentives for appropriate antibiotic use
- Develop appropriate policies for daycare, work, and school on appropriate attendance during illness (staying away and going back)

Surveillance, Analysis, Feedback, Triage, & Leveraging Resources
- Leverage existing infrastructure to promote better antibiotic use
- Use local resistance data to inform antibiotic choice
- Explore ways to gather use and prescribing data

Share Evidence Broadly, Provide Education, Create Urgency, & Empower Alternative Action
- Develop intervention plans for segmented target audiences (consumers, providers, insurers, policy makers, etc.)
- Change attitudes and perceptions about what constitutes appropriate antibiotic use
- Educate health departments and public health professionals
- Incorporate antibiotic usage into community assessment and improvement plans

**Goals**
- Preserve antibiotics for the future
- Decrease demand by the public for inappropriate use
- Reduce the spread of antibiotic resistance
- Decrease adverse events associated with inappropriate antibiotic use
- Decrease costs associated with antibiotic use

This model was developed collaboratively by public health professionals with expertise in antimicrobial resistance and quality improvement. This work was funded through a collaborative agreement between the Public Health Foundation and the U.S. Centers for Disease Control and Prevention.

March 2013 | Version 1.1