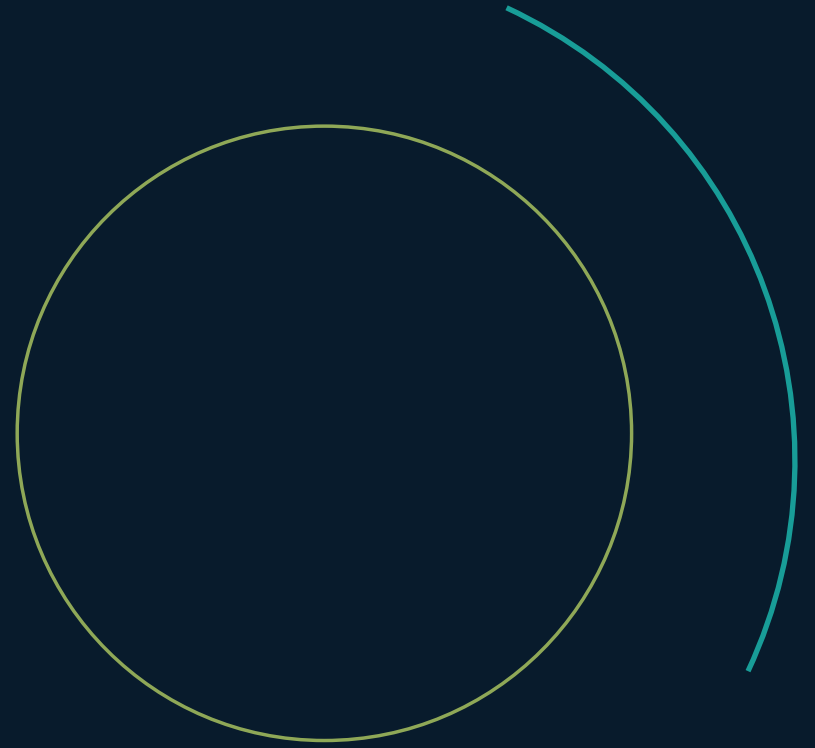
A STRATEGIC INVITATION | 2027

Beyond the Charter

The opportunity to become a continuously learning public health community



AUSTIN / TRAVIS COUNTY PUBLIC HEALTH COMMISSION

It began with a clear charge.

In 2022, City and County leaders established a joint advisory Commission.

“Explore the best/evidence-based public health practices … and provide recommendations.”

City Code § 2-1-174(E)(1) • amended October 23, 2025

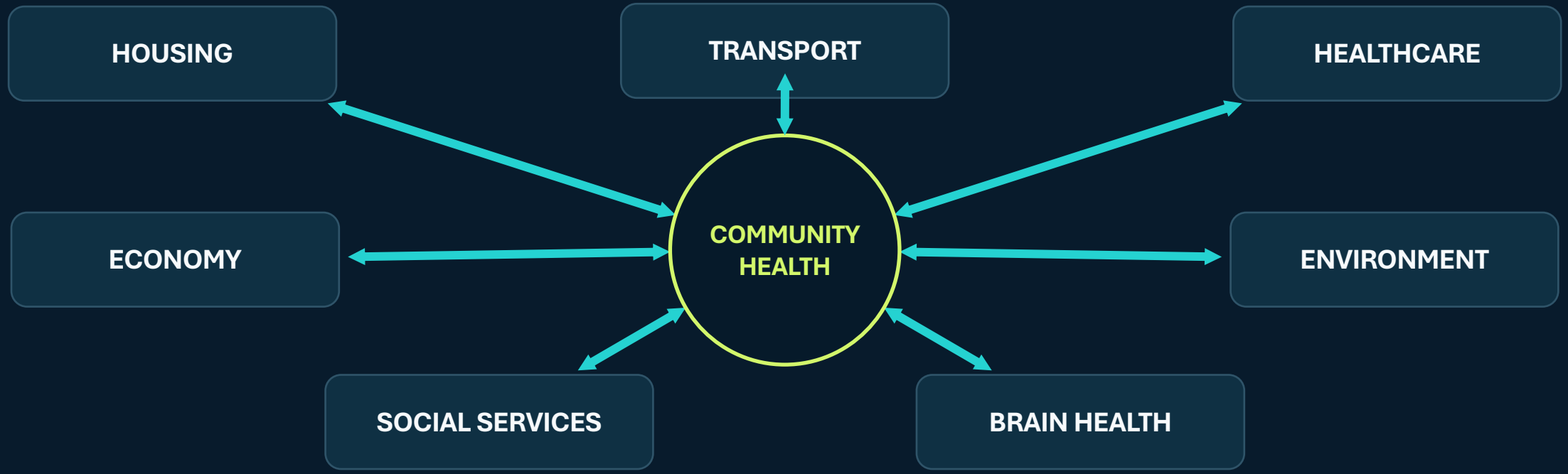
Five responsibilities. An expansive mandate.

The charter tells us what outcomes to seek—not which technologies to use.

01	**Evidence**	Identify evidence-based improvements
02	**Recommendations**	Advise City and County on programs and services
03	**Equity**	Address disparities among underserved populations
04	**Community voice**	Incorporate resident input on budgets and programs
05	**Accountability**	Report periodically to elected leaders

A system of systems

Community health emerges from interconnected systems—and improves when we (a) understand how they interact and (b) accelerate such interactions.



All seven domains also interact with one another.

Then the scientific possibilities changed.

AI is not just another administrative tool.

AGENDA 1

Use AI now

Improve surveillance, evidence synthesis, coordination, communications, and program evaluation.

AGENDA 2

Advance the science

Develop stronger causal, temporal, multiscale, and decision-oriented methods for community health.

First: make public health work smarter.

Near-term AI applications can support the professionals and services already in place.

EARLIER WARNING

Detect emerging risks and shifts in service demand

FASTER INSIGHT

Synthesize evidence and compare options

BETTER ACCESS

Identify referral and service bottlenecks

STRONGER EVALUATION

Track changes in quality, outcomes, and equity

Second: change how we understand health.

A deeper methodological agenda asks questions our current tools struggle to answer.

From snapshots	→	**to changing trajectories**
From correlation	→	**to causal explanations**
From separate datasets	→	**to coherent community models**
From predictions	→	**to tested intervention choices**

Imagine Austin could see around corners.

A plausible future—not a claim of capabilities already achieved.

01

ANTICIPATE

Recognize an emerging health risk before it becomes a crisis.

02

UNDERSTAND

See how housing, mobility, access, and economics interact.

03

COMPARE

Test plausible policy choices before committing resources.

04

LEARN

Measure what changed, for whom, and why.

Not a new agency. Not a new bureaucracy.

The Commission can be a catalyst without becoming the operator.

COMMISSION	Identify priorities • evaluate evidence • convene perspectives • recommend
AGENCIES & PARTNERS	Own implementation • manage data and operations • measure outcomes
CITY & COUNTY LEADERS	Set policy • authorize budgets • receive and act on recommendations

The transformative proposition:

BETTER EVIDENCE + **BETTER COORDINATION** = **GREATER VALUE**

The opportunity is already anchored in Austin.

Build on public health planning, local institutions, and community knowledge.

01

Community priorities

CHA/CHIP and resident experience provide the problems that matter.

02

Institutional partners

Public health, County services, Central Health, providers, universities, community groups.

03

Scientific capacity

Use appropriate data, epidemiology, informatics, statistics, and AI expertise.

From a vision to a disciplined first year.

A proposed 2027 agenda within the advisory mandate.

01	**Map the opportunity**	Identify needs, existing AI work, methods, and data constraints.
02	**Demonstrate near-term value**	Sponsor one narrow staff-owned AI workflow with validated measures.
03	**Test a scientific method**	Partner on one causal or dynamic analysis tied to a community priority.
04	**Advise both governing bodies**	Offer a formal recommendation with evidence, cost, safeguards, and owners.

Two questions that could reshape our future.

The immediate question and the scientific question belong together.

How can AI help Austin and Travis County do public health better?

What new methods must we develop to understand and improve community health?

THE INVITATION

What if our charter contains a much larger future?

A community that learns continuously how to improve its own health.

Not a departure from our charge. An ambitious expression of it.

Source and interpretation notes

Source-grounded charter; aspirational AI and methodological agenda.

Legal charter	City of Austin Ordinance 20221013-073 (2022); Ordinance 20251023-048 (2025), §2-1-174(E).
Current governance	Commission bylaws, approved by Council September 10, 2026.
Analytical analogy	User-provided “Artificial Intelligence and Cancer Research: Two Complementary Scientific Agendas.”
Local foundation	Austin public health community planning / CHA–CHIP; prior Commission strategic materials.
Important qualification	All proposed capabilities, partnerships, deliverables, spending constraints, and model concepts require validation and appropriate approval.