



Simply put, in the absence of a radical shift towards prevention and public health, we will not be successful in containing medical costs or improving the health of the American people. - Barack Obama, Obama '08

Investing in state and territorial public health systems is a direct investment in the health and wellness of the American people. The goal of public health is to foster a nation of healthy people who will help strengthen America's economy by creating a more productive workforce and will lessen the burden on medical costs by lowering the need for intensive treatment for chronic diseases.

Public health does this by:

- Incorporating positive opportunities for health, including physical activity and access to healthy food choices and protects Americans from the *primary factors*¹ contributing to heart disease, cancer, stroke, and injury - the leading causes of death and disability in America.
- Providing tools that enable individuals to take responsibility for their own health and encourages them to improve the health of their states and communities.
- Developing and implementing national, state, and local policies using science based evidence that promotes prevention and wellness.
- Taking action to reduce health disparities and improve health outcomes for populations most at risk within the states, particularly women and children and racial and ethnic minorities.
- Working with a wide range of sectors (agriculture, transportation, education, Medicaid etc.)² to include health in all policies.³

Expanding public health preventive programs is fundamental to achieving significant or enduring health reform. A 21st Century U.S. health system must include universal access to public health services that protect the health of all Americans throughout their lives.

Public health services focus on eliminating the underlying causes of poor health throughout the population by:

- Keeping Americans informed of the steps they can take to adopt lifelong, health seeking behaviors.
- Providing services that help Americans stop addictive substance use, eat healthily, increase physical activity, reduce misuse of prescription

¹ McGinnis JM and Foege W. *JAMA*. 1993 Nov 10;270(18):2207-12 These factors include behavioral and largely preventable factors such as tobacco use, poor diet and physical inactivity (obesity), lack of child restraint and seat belt use, and alcohol consumption, as well as microbial agents and toxins.

² McGinnis JM, Williams-Russo P, Knickman JR. The Case for More Active Policy Attention to Health Promotion. *Health Affairs* (Millwood). 2002;21:78-93.

³ Bullets developed from testimony given by Acting CDC Director Richard Besser before the House Committee on Energy and Commerce, Subcommittee on Health, March 31, 2009. http://energycommerce.house.gov/index.php?option=com_content&task=view&id=1559&Itemid=95



medication, receive immunizations, breath clean air, consume safe food and water, and protect against injury.

- Creating resilient communities able to prevent and respond to natural and manmade disasters.

Investment in Public Health = Investment in Healthy Americans

An average American spends less than .1% of his or her time each year in a healthcare setting. The other 99.9% of their time is spent in daily behaviors and environments that are sometimes hazardous to their health. Unhealthy behavior patterns and environments, many of which can be modified by preventive interventions, cause 70% of all deaths in the United States.

Health reform will fail unless it includes prevention at both the individual and community level. Health reform must include universal access to public health services that support healthy communities. For example, the 2000 U.S. Surgeon General's Report, *Reducing Tobacco Use*, found that it takes a comprehensive approach including health policies such as indoor clean air, support for state quitlines, targeted media education and counseling by a health provider.

Science has proven that state and community policies save lives, reduce illness and save medical costs. Effective health reform must include scientifically proven strategies for prevention and wellness.

We seek a health reform bill that will create and maintain a dedicated, stable funding stream for state population based public health programs that provides an additional \$20 billion a year for public health programs. This represents an increased investment of \$67 per person – and offers the potential to save millions of lives and tens of billions in health care spending.

This investment will:

- Strengthen core disease surveillance and monitoring systems by funding each state and territorial public health agency to ensure a highly trained workforce in the two key public health sciences of epidemiology and laboratory.
- Support a national electronic health information exchange system that integrates public health and clinical data to support individual and population based care.
- Address the leading underlying causes of death, disability, and acute and chronic disease through comprehensive funding for risk reduction programs focusing on known behavioral and environmental factors such as tobacco control, obesity, substance abuse, injury and communicable diseases in every state and territorial health agency.⁴

⁴ Leading causes of death: heart disease, cancer, stroke, chronic lower respiratory disease, accidents, diabetes, Alzheimer's, influenza/pneumonia, nephritis/nephritis, and septicemia. National Center for Health Statistics 2005.



Public Health – An Essential Component of a Healthy America

- Incorporate the recommendations of the Task Force on Community Preventive Services and the Centers for Disease Control and Prevention in federal and state policies and programs.
- Provide a comprehensive public health benefits package for all that includes clinical services recommended by the U.S. Preventive Services Task Force on Clinical Preventive Services to all Americans, such as disease management, self health management and access to immunizations, preventive health screenings, and other essential services.
- Strengthen the recruitment and retention of public health professionals to address the shortage of public health workers, so that state and local public health agencies can respond to natural and manmade disasters, infectious disease outbreaks, foodborne illness, and other public health threats and emergencies. ASTHO supports \$10 million in funding for the Public Health Loan Repayment program in section 338 of the Public Health Service Act (42 U.S.C. 254q-1) and reauthorization and funding of Title VII of the PHSA, which includes grants to state and local governments (Section 765)
- Fund state and territorial health agencies to remove barriers to health access, including cost constraints and transportation issues.
- Invest in public health agency quality improvement, including accreditation.