Reinvesting in a 21st Century Public Health System

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How would you describe the funding situation for your health jurisdiction in recent years?

A. Increasing
B. Stable
C. Decreasing
D. Other (please type in chat)
Historical Trends of Public Health Funding
Revenue Sources of Public Health Funding

**Primary Funding**
- **Federal funds** – 48%

**Secondary Funding**
- **State general funds** – 25%

Source: Trust for America's Health – [https://www.tfah.org](https://www.tfah.org)
Core program funding for the CDC has **fallen** over the past decade.
State funding has been **historically unstable**, and is lower today than in 2008.
Staffing capacity at state departments has **decreased steadily** over the past decade:

Estimated Total Number of State Health Agency Full-Time Employees, 2010-2016

- **2010**: 106,459
- **2012**: 100,468
- **2016**: 97,230

Estimated Average Number of State Health Agency Full-Time Employees, 2010-2016

- **2010**: Mean 2,129, Median 1,210
- **2012**: Mean 2,010, Median 1,152
- **2016**: Mean 1,945, Median 1,090

Source: Trust for America's Health – [https://www.tfah.org](https://www.tfah.org)
State Public Health Workforce

Percentage of state health agency positions vacant:

- 0%
- 1–5%
- 6–10%
- 11–20%
- 20% or higher
- No data

Source: Trust for America's Health – https://www.tfah.org
Investment in public health varies by state, but is **trending downward**

Per capita expenditures for 2015 (N=49):

- **$201 or higher**
- **$151 – $200**
- **$101 – $150**
- **$51 – $100**
- **$1 – $50**
- **No data**

Source: Trust for America’s Health – [https://www.tfah.org](https://www.tfah.org)
Since the 2008 recession, local staffing has decreased by over 20%:

Estimated size of LHD workforce over time

Source: Trust for America's Health – https://www.tfah.org
In Europe, for every $1.00 spent on health care, $2.00 is spent on public health and social services.

In the US, for every $1.00 spent on health care, $0.55 is spent on public health and social services.

The United States spends more on medical care than on social services and public health combined.

Source: Trust for America’s Health – [https://www.tfah.org](https://www.tfah.org)
Question for the Viewers

Based on current funding levels, how would you rate your state’s preparedness for PH emergencies?

A. Well-prepared
B. Generally prepared
C. Generally unprepared
D. Very unprepared
E. Other (please type in chat)
Risks and Consequences of Disinvestment
Emergency preparedness and hospital preparedness funding has been cut **31% over the past decade**:

[Chart showing funding levels from FY2006 to FY2019]

Source: Centers for Disease Control & Prevention – [https://www.cdc.gov](https://www.cdc.gov)
Emergencies Are Increasing

Federal public health emergencies per year
State and Local Response: COVID-19

- **Epidemiology** - investigating cases
- **Laboratory** - testing specimens
- **Quarantine** - setting policies, identifying locations to house people
- **Screening** - staffing at airports & other sites
- **Collaborating with clinical sites** - screening, diagnosing, and treating patients
- **Media** - providing information
- **Policy-making** - advising elected officials & taking emergency action
Consequences of Underfunding for COVID-19 Response

For communities, underfunding results in:

- Slowed response
- Limited capacity to test
- Low capacity for contact tracing
- Outdated data systems
- Old-school communications systems
Consequences of Underfunding for Health Equity

For communities, underfunding results in:

- Elevated chronic disease - diabetes, heart disease, obesity
- Elevated infectious disease - COVID, HIV
- Lack of timely and/or accurate data by race/ethnicity
- Inadequate resources in affected communities
- Lack of culturally/linguistically appropriate efforts
- Limited community input
Priorities for Reinvestment
Public health agency leadership roles must transform to better meet upstream challenges.

Chief health strategists must understand and address the primary causes of illness, injury, and premature death.

Source: Trust for America's Health – https://www.tfah.org
Demand for health-related services and facilities will only increase with an aging population:

Percentage of US Population

Total Population Over 65

Source: United States Census Bureau – [https://www.census.gov/data.html](https://www.census.gov/data.html)
Use Effective Approaches

- Use evidence-based interventions
- Respect the culture, language and experience of communities
- Track impact

Example: City Health, an initiative of the de Beaumont Foundation and Kaiser Permanente
Find and Use Varied Data Sources

- Access data from health care and non-health sectors
- Strive to get closer to real-time
- Aim for standardization and consistency

**Example:** PHAST Uniform Chart of Accounts

- PHAST is the *Public Health Activities and Services Tracking* project housed at the University of Washington
  - [coa.phastdata.org](http://coa.phastdata.org)
Collaborate with a Broad Array of Allies

- Integrate with the health care system
- Develop strong partnerships with non-health sectors
- Assure input from community members
Promote Equity and Address Social Determinants

✓ Promote racial equity and combat structural racism

✓ Promote policies that alter conditions in communities, workplaces, and schools
Current Efforts with Congress

- Increase public health infrastructure by $4.5 B (150 groups endorse)
- Improve data collection & analysis systems, including by race/ethnicity
- Establish scaled up contact tracing initiative
- Strengthen focus on impact of systemic racism/other discrimination
- Change social/economic conditions to promote health (SDOH line item)
- Use COVID attention to drive long-term change
A Chat with John Auerbach

Betty Bekemeier

John Auerbach
QUESTIONS?

To ask a question, please click the icon in the Zoom toolbar to open your Q&A Pod.
Resources

**Centers for Disease Control & Prevention**  
Cross-Jurisdictional Sharing of Public Health Services  
[https://www.cdc.gov/stltpublichealth/cjs](https://www.cdc.gov/stltpublichealth/cjs)

**City Health**  
Helping Cities Thrive – An Initiative of the de Beaumont Foundation and Kaiser Permanente  
[https://www.cityhealth.org/](https://www.cityhealth.org/)

**Data Across Sectors for Health (DASH)**  
Nationwide collaborative for sharing public health data  
[https://dashconnect.org/](https://dashconnect.org/)

**PHAST Uniform Chart of Accounts**  
Public Health Activities & Services Tracking  
[https://coa.phastdata.org/](https://coa.phastdata.org/)

**Trust for America’s Health**  
The Impact of Chronic Underfunding on America’s Public Health System: Trends, Risks, and Recommendations (2020 Report)  