Vision | State and territorial health agencies advancing health equity and optimal health for all.

Mission | Support, equip, and advocate for state and territorial health officials in their work of advancing the public's health and well-being.

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Foreword

Building a Healthier Nation is an overview of state and territorial public health agency priorities intended to help policymakers understand the current capacity of the public health system and frame future opportunities and challenges facing state and territorial governmental public health leaders. Informed by a comprehensive review of state and territorial health improvement plans, scans of state legislative activity, and the Association of State and Territorial Health Officials (ASTHO) Profile of State and Territorial Public Health and Forces of Change surveys, this report describes five major issues facing state and territorial public health agencies and provides a look at their priorities in the year to come.

The work of public health is often invisible to many. The public expects its water to be clean, its food to be safe, and the environment to be free of hazards and disease threats. Generally, we only “see” public health when there is a problem: a disease outbreak, a natural disaster, or an environmental health emergency. However, public health saves lives every day. Whether you see them or not, state and territorial public health professionals work to protect us from health threats, promote our health, and prevent us from experiencing diseases. These efforts promote optimal health for all—not just for one person, but for the entire population. The illustration on the back cover highlights just a few ways that public health helps to protect you and your neighbors on a daily basis.

Faced with limited resources, as well as evolving and emerging health threats, state and territorial public health agencies must balance competing demands for investments in health while ensuring that federal dollars are directed toward public health priorities within their jurisdictions. On average, state and territorial public health agencies rely on federal agency support for 48 percent of their program revenue. Recent reductions to public health funding at the state and territorial levels have led to limited capacity to respond to public health emergencies and other urgent health priorities. Proposed reductions, as well as ongoing dialogue around the federal budget and future investments in public health, have created uncertainty at the state and territorial levels, leading to freezes and reductions in the workforce, which has a direct impact on the performance of core public health activities.

As a nation, we must increase investment in efforts to promote health, prevent disease, and protect America’s health security at the state and territorial levels. Failure to take action today will result in increased suffering from poor health and increased spending for treatment in the future.
Investing in Public Health is an Investment in America’s Safety and Security

Now is not the time to reduce support and investment in state and territorial public health.

In fact, the opposite is true: increased investment in public health today will result in improved health for all Americans and reductions in future healthcare-related costs and lost productivity.

The five priorities discussed in this report represent many different challenges that state and territorial public health agencies address on a daily basis. All have unique solutions, and all are critical to a healthier nation.
What Keeps the United States Healthy?

The individual choices we make play a crucial role in our health. But health is also influenced by other factors, such as where we live, what we do, and how we spend our free time. Recent studies suggest that there are various influences on our overall health and wellness and many are not simply biological. Part of ensuring optimal health for all means addressing the health needs of people who experience poor health more than others. For example, the rate of infant death among African American women in the United States is twice as high as the rate among white women. Public health addresses the root causes of infant mortality for all Americans, but has a specific focus on reducing premature death and addressing persistent gaps in communities of color and other places where there are differences between racial and ethnic groups, neighborhoods, and other demographics.

More Investments in Public Health Are Needed

With so much attention on health insurance and rising healthcare costs, it is not surprising that investments in prevention and public health programs often get short changed. The United States spends more of its annual gross domestic product on healthcare—not public health—than any other country. A remarkably small amount of federal dollars is spent on prevention: less than three cents of every federal dollar spent on health goes to public health programs. Given the major role that public health and prevention can play in reducing future healthcare costs, it is critical that we increase federal investment in disease prevention and health promotion programs at the state and territorial levels.

Why do we continue to spend so much to treat illnesses and diseases when there are proven, effective, and far cheaper strategies to prevent them in the first place?
State and Territorial Health Agency Priorities

The work of public health spans a number of communicable and non-communicable disease threats. The capacity to support this work requires a skilled workforce and a well-resourced public health infrastructure. The following five issues represent some of the greatest challenges facing public health nationwide in 2018 and present tremendous opportunities to protect and promote health if we act now.

Addressing the Opioid Crisis and Preventing Substance Misuse and Addiction

As overdose deaths reach epidemic proportions, it is clear that substance misuse and addiction is a major public health concern in the United States. Almost eighteen out of 100 people report using illicit drugs or misusing prescription drugs. In 2016, there were over 60,000 deaths due to drug overdoses—more than 100 deaths daily. Opioid addiction has fueled a resurgence in heroin use and created an illegal market for illicitly manufactured fentanyl, an extremely dangerous synthetic drug. State public health leaders have responded by issuing statewide public health emergency declarations, which have expedited action and supported rapid implementation of effective interventions. Some of these actions include mandated monitoring programs to track opioid prescriptions, new public awareness and opioid misuse prevention campaigns, and expanded access to treatment, recovery, and other prevention programs. While these interventions hold promise for reversing overdose rates, sustainable solutions will require multi-prong, government-wide approaches that rely on both public and private commitment to stem the addiction epidemic sweeping our nation.

Integral to the public health approach to addressing substance misuse and addiction is understanding the need to prevent individuals from turning to opioids or other illicit substances in the first place. Preventing addiction is the best way to end our nation’s current epidemic: we will not treat our way out of this emergency. In this regard, major federal investments in treatment and recovery should also be complemented with funding for prevention. Federal funding should be used to support the Centers for Disease Control and Prevention (CDC) and state and territorial public health agencies to strengthen public health surveillance, expand opioid misuse and addiction prevention campaigns, link electronic health records and prescription drug monitoring programs, expand partnerships and collaboration with law enforcement, as well as increase access to naloxone and link patients to medication-assisted treatment and other services. The most enduring solutions will come from influencing social norms and increasing understanding that addiction is a disease, not a moral failing.

**Synthetic Opioid Deaths Across the United States**

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Reducing Illnesses and Deaths from Preventable Chronic Diseases

Injuries and illness from chronic diseases such as cancer, heart disease, stroke, diabetes, and substance misuse are the most common, costly, and preventable health conditions facing America today. High rates of tobacco use and obesity make cancer and heart disease our nation’s leading causes of death. Obesity is the top reason that potential military recruits are unable to serve: 71 percent of young people would not be able to join the military if they wanted to due to obesity. Effective public health approaches to reducing rates of chronic disease require multiple strategies that are supported by public health programs, policies, and partnerships in many different settings, such as communities, schools, and workplaces.

State and territorial public health agencies play a significant role in supporting successful public health initiatives to reduce chronic disease risk factors, including measures to limit tobacco exposure and improve the nutritional quality of school meals. States have led efforts to ban smoking in public places and restrict youth access to tobacco products through price increases and social messaging. These actions have led to reduced youth and adult tobacco use, as well as slowed childhood obesity rates. However, there is still much work to do in chronic disease prevention and control. Only half of individuals with high blood pressure are appropriately treated and less than two-thirds of adults have been screened for colon cancer. The Prevention and Public Health Fund is a critical source of funding, supporting over 30 percent of the CDC’s National Center for Chronic Disease Prevention and Health Promotion and 100 percent of the Preventive Health and Health Services Block Grant. State and territorial public health agencies rely on this funding, combined with discretionary dollars, to bolster their efforts to address the tremendous inequities in rates of chronic disease morbidity and mortality between racial and ethnic groups and prioritize chronic disease prevention activities.

For every dollar, the United States spends 97 cents on healthcare delivery and 3 cents on prevention and public health.

INVEST WISELY: PREVENTION SAVES LIVES AND MONEY

- For every $1 spent on tobacco cessation, we save $55 in averted healthcare costs to treat tobacco-related illness.
- Investing $1 in substance use prevention can lead to as much as $34 in return.
Preventing Infectious Disease Outbreaks

The work of public health has always involved major efforts to prevent infectious disease outbreaks. This year marks the 100-year anniversary of the 1918 Influenza Pandemic, an outbreak estimated to have infected a third of the world’s population, resulting in tens of millions of deaths nationwide. Over the last several decades, public health innovations have helped dramatically reduce the spread of infectious disease. However, largely preventable infectious diseases still pose a grave threat to our nation’s health. Sexually transmitted diseases are rising at an alarming rate. In 2016, reported cases of gonorrhea, syphilis, and chlamydia increased for the third consecutive year. Between 2.7 and 3.9 million people suffer from chronic hepatitis C in the United States. In addition, healthcare-associated infections, including antimicrobial resistant pathogens, cause hundreds of thousands of illnesses and deaths among U.S. patients each year. Many of these infections could be prevented with increased investments in public health agencies. Addressing preventable infectious diseases not only saves lives, it saves money: for example, routine childhood vaccination can prevent 42,000 early deaths, and save $13.5 billion in direct costs and $68.8 billion in total society costs.

State and territorial public health agencies across the country are instrumental in helping to fight these infections through immunization, risk reduction and prevention education, and linking individuals to care, especially in areas and populations that are disproportionately affected. However, state and territorial budget cuts to related health agency programs have resulted in staff layoffs, reduced clinic hours, and increased patient co-pays, which can deter patients from seeking care leading to increased spread and severity. Reinvestment in this core activity of public health is needed to protect Americans from preventable infectious diseases and prepare for emerging threats in the years to come.

STDs in the United States, 2016

STDs impact the nation’s health as rates increase for a third year

1.59 million cases of chlamydia
468,514 cases of gonorrhea
27,814 cases of syphilis


In 1918, policemen in Seattle wear masks made by the Red Cross during the influenza epidemic.
Source: U.S. National Archives.

In 2018, the flu vaccine offers the best defense against getting the flu and spreading it to others.
Managing Public Health Emergencies: Preparation, Response, and Recovery

In 2017, the overall cost of weather-related disasters exceeded $300 billion, making it the costliest year on record. Three major hurricanes, several wildfires and mudslides, floods, as well as record-setting cold temperatures across the nation challenged both public health and state and local governments in 2017 and 2018. In addition, violent incidents like mass shootings, civil unrest, and escalating nuclear threats challenged the capacity of health agencies to respond. Emergency preparedness and response is a critical (if sometimes invisible) activity that public health carries out on a daily basis. State and territorial public health agencies play a crucial role in national security and have, over the years, enhanced their capacity and ability to effectively manage the consequences of local, regional, and national emergencies, thus saving lives and helping to prevent injury and illness.

State and territorial public health agencies continue to face multiple challenges, including an ever-evolving list of public health threats. Federal investment in state and local agencies has helped to build and sustain a strong public health and medical preparedness system, both as a frontline defense and safety net. In addition, these investments have allowed jurisdictions to plan, train, and exercise, as well as purchase laboratory and communications equipment, medical countermeasures, and personal protective equipment for first responders. However, critical federal investments in state and territorial public health preparedness have declined over the last several years, despite increasingly severe natural disasters and other threats.

In 2017, the Public Health Emergency Preparedness (PHEP) program was funded at $658 million, a $260 million decrease from 2002. Moreover, during the Zika and Ebola outbreaks, states and territories waited many months for an infusion of resources which speaks to the need for increased investments in PHEP, the Hospital Preparedness Program, and a robust public health emergency response fund.
Protecting Our Drinking Water from Environmental Health Threats

The United States has one of the safest drinking water supplies in the world, but there are continued and emerging challenges that need to be addressed to maintain excellence in drinking water safety, including improvements to an aging infrastructure, addressing emerging chemical and microbial contaminants, nutrient overloading, as well as harmful algal blooms (HABs). Complex emergencies and outbreaks associated with drinking water sanitation and hygiene trigger emergency responses because of their potential to cause community-wide outbreaks and disruption. Lead can still be found in multiple environmental sources, including drinking water from service lines. Safe lead service line replacement is needed to help remedy this problem for millions of residents who receive water from old pipes. Per- and polyfluoroalkyl substances (PFAS) found in drinking water, as well as HABs in recreational water, also pose problems for state and territorial public health agencies. A class of man-made chemicals persistent in the environment and used in a variety of consumer and industrial products, PFAS tap water pollution has been reported in more than 27 states. While CDC and the Environmental Protection Agency have been supporting state and public water systems’ efforts to reduce exposure to PFAS and HABs, states still issue their own health advisories and notices.

State and territorial public health agencies are reliant on sustained federal funding to support ongoing oversight of public water supplies. They are responsible for implementing mitigation measures to reduce chemical exposure and communicate these risks to the media and general public. To better address these issues, primary prevention strategies are needed to protect drinking water systems by preventing contamination of drinking water supplies, developing sustainable and reasonable regulations for all water systems, increasing data sharing to better inform public health policy, and developing effective methods for communicating water quality information and any health risks associated with drinking water. State and territorial public health agencies and their environmental health and protection partners are in urgent need of resources to bolster protection of drinking water supplies and identify future threats.
About ASTHO

ASTHO is the national nonprofit organization representing the state and territorial public health agencies of the United States, U.S. territories and freely-associated states, and the District of Columbia. ASTHO’s members, the chief health officials of these jurisdictions, are dedicated to formulating and influencing sound public health policy and ensuring excellence in public health practice.

For more information, visit www.astho.org.

References

Public Health is All Around You
Here’s how:

Food and Nutrition
Foods found in grocery stores and meals served in your favorite restaurant are safe from harmful bacteria and other contaminants and are stored or prepared in a clean environment.

Clean Water
Drinking water in your home, workplace, school, and community and recreational waters like public swimming pools and beaches are closely monitored and tested for your safety and enjoyment.

Immunizations
Important childhood and adult immunizations, including an annual flu shot, are readily available in health clinics, workplaces, and physicians’ offices and protect you and your loved ones from serious illnesses that are vaccine-preventable.

National Security
Preparing for, responding to, and recovering from public health emergencies and disasters such as hurricanes, floods, tornados, wildfires, mass casualty incidents, industrial accidents, acts of terrorism, and epidemics saves lives and minimizes illness and injury.

Mental Well-being
Many effective prevention, treatment, and recovery programs are available to help people with mental health and substance use disorders.

STD Clinics
Sexually transmitted disease (STD) clinics are readily available to provide confidential counselling and testing services to help prevent, diagnose, and treat STDs.

Physical Fitness and Exercise
Your neighborhood is healthy and safe, giving you the opportunity to take your kids to the playground and enjoy evening walks and other forms of exercise.

Injury Prevention
Whether at home or out in public, laws and other measures are in place to help prevent injuries like motor vehicle crashes, drowning, poisoning, overdose, and falls.

Smoke-Free Public Places
Smoke-free laws prohibit smoking at work, restaurants, and schools, and help protect you from secondhand smoke exposure.

Newborn Screening
Performing screening tests as soon as a baby is born can identify many life-threatening genetic illnesses before any symptoms begin.

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