11-1-2001

Public Health Oped by Marc D Hiller Dr PH

Sharon Keeler

Follow this and additional works at: https://scholars.unh.edu/news

Recommended Citation
https://scholars.unh.edu/news/2639

This News Article is brought to you for free and open access by the Administrative Offices at University of New Hampshire Scholars' Repository. It has been accepted for inclusion in Media Relations by an authorized administrator of University of New Hampshire Scholars' Repository. For more information, please contact nicole.hentz@unh.edu.
Public Health Oped by Marc D Hiller Dr PH
Public Health Op-ed by Marc D. Hiller, Dr.PH

November 1, 2001

Editorial Page Editors:

We hope you will consider printing University of New Hampshire Professor Marc Hiller's following opinion-editorial. In light of the recent anthrax attacks, and the unknown future regarding bioterrorism, public health has become a critical issue. Professor Hiller is a highly-respected expert in the field of public health and medical ethics.

Sharon Keeler
Senior Writer
UNH News Bureau
sharon.keeler@unh.edu
603-862-1566

DO OUR STATE AND LOCAL HEALTH DEPARTMENTS HAVE THE RESOURCES THEY NEED TO PROTECT US FROM BIOTERRORISM?

By Marc D. Hiller, DrPH
Associate Professor of Health Managment and Policy
University of New Hampshire

In light of the anthrax exposures and deaths in New York, Washington, D.C., Florida and New Jersey, as well as the reported concerns in New Hampshire following the Sept. 11 terrorist attacks, I have been reminded of the role that state and local health departments play in dealing with disasters. Public health professionals in those cities have worked diligently to protect their citizens by carrying out basic public health activities that include everything from immunizing rescue workers against tetanus to responding to calls from the public with concerns about asbestos in the air.

Even more recently, Americans everywhere have
called local health departments to the front lines in America's war on terrorism and asked for their help in dealing with the threat of anthrax as a biological weapon. Our capacity to deal with this and other such dangers lies in the answer to one question: do our state and local health departments (e.g., Manchester, Nashua) have the resources they need to protect us?

Sadly, New Hampshire's public health systems have been neglected by funders for decades. This neglect stems more from the systems' successes than any other factor. Simply put, when public health works, we ignore it because there is no reason to think about it. We seldom see stories about cases of foodborne illnesses that are prevented today by public health professionals who inspect restaurants. What we want to know, and what helps us all sleep a little easier at night, is that if someone should become sick by eating food prepared by an infected worker or unsafe food products, our state and local health departments will be on the job to do whatever it takes to prevent us and our neighbors from becoming sick. We seldom see headlines about the premature deaths prevented and years of life extended by effective tobacco prevention and cessation programs. Yet, we expect that our medical care system will always be accessible and affordable to cure the heart disease, cancer, or chronic lung disease and asthma caused by years of inhaling the 4,000 toxins found in tobacco products (directly from smoking or indirectly through second-hand smoke).

That is what we want to believe. However, the reality is that the system is not as strong as we need it to be if our state and local health departments were working collaboratively to effectively deal with emerging threats like anthrax while continuing to carry out the daily business that protects us from older, more familiar dangers like foodborne illness.

New Hampshire's public health funding is overwhelmingly dependent on federal and grant funding. State support for public health largely remains stagnant. In fact, when inflation is considered, funding has actually decreased. This
lack of support has contributed little to strengthening public health infrastructure at the state or local levels, and if not addressed soon, will force public health administrators and local governments to make some difficult and potentially harmful choices about what these agencies can do for New Hampshire.

While New Hampshire boasts one of the best rankings in the nation with respect to the overall statewide health status of our population, these rankings pale dramatically when analyzed on many local community levels. Our commitment to promote a strong local public health infrastructure, as well as comprehensive health promotion and education efforts, prevention services, and protection efforts (including legislative and enforcement) need to be strengthened.

While Congress may eventually provide some relief through a planned funding proposal on terrorism that includes support for state and local public health, it is likely given the history of such proposals that this relief will be directed at larger states and local jurisdictions and will fall short when it comes to offering significant help to New Hampshire communities. What New Hampshire needs is to increase state support for the efforts by state and local health departments.

We live in a new era, one in which we will rely more than ever on public health. Our Governor, our State Legislature, and our local leaders (e.g., mayors, city and town councils, school officials) need to act now.

Marc D. Hiller, DrPH
(Dr. Hiller is a public health professional, associate professor of health management and policy at the University of New Hampshire, and past-president of the New Hampshire Public Health Association; he may be contacted at marc.hiller@unh.edu)

Back to UNH News Bureau