

5-3-13 Making Public Health a Reality and a Priority

I participated in a conference call more than a month ago with our Massachusetts Department of Public Health (MDPH). I finally found the time this week to respond to that conversation.

The purpose of the call was a hopeful one; after years of budget cuts and reductions in staff, it looked like there was a chance of budget “increases” to MDPH. When reductions and cuts are replaced by restorations to the slashed budgets, that it is not really an increase; it is more like a rescue. It is an allocation toward restoring specific programs and staff that reap the benefits of both alleviating public health threats and preventing others. Research has proven the old proverb that an ounce of prevention is worth a pound of cure. If people have known this for hundreds of years, why is that we are still talking about it? Let’s do something about it! Here’s my letter of support to restore funding to MDPH:

Dear Massachusetts Legislators,

I am writing in support of a budget increase for the Massachusetts Department of Public Health, as a critical infrastructure for the well being of the residents of and visitors to the State of Massachusetts.

I have been the health agent for the Town of Halifax since 2000. When I began, I expected that most of the job involved kitchen inspections and perc tests for septic systems. How far from the truth that expectation fell. As I became more familiar with the numerous duties of a board of health since the time of Paul Revere to now, the more I realized the need for teamwork, public education and outreach and ongoing education for myself and my department so that we could be prepared to respond to the needs of my town. As more time passed, I realized that no public health department can respond to all the needs of the people and the environment without the assistance and expertise of our colleagues. How could the towns that experienced hepatitis A outbreaks in 2001 and 2002 respond effectively without the assistance of our Massachusetts Department of Public Health? They could not have.

Being a health agent for more than a decade has been a remarkable journey, indeed, seeing the death of a child from Eastern Equine Encephalitis, numerous potential anthrax incidents after 9-11, indoor air quality problems at the elementary school, the arrival of pandemic influenza H1N1, requiring the design and implementation of numerous emergency dispensing sites, an increase in substandard housing, an increase in hoarding cases, the closure of public beaches due to blue-green algal blooms and the increase of arbovirus diseases such as Eastern Equine Encephalitis, West Nile virus, and tick borne diseases such as Lyme, Anaplasmosis, Tularemia and Babesiosis, to name a few.

In addition to the mandated inspections and the emergency responses, there are also new topics always appearing on the horizon. Yesterday, I was learning about the new CORI requirements for ice cream truck vendors, today I am continuing the review of the medical marijuana guidelines while updating algae information for our new watershed association and this week will participate in a seminar on climate change.

I have turned to our Department of Public Health for each of these topics (and more) for guidance, technical assistance, expertise, data analysis and protocol review. While they need us at the local level to inform them and to implement and enforce the State’s regulations, we cannot succeed without the support and guidance at the State level.

We try to keep up with the times and changes. We have turned from paper copies of reportable diseases to the online MAVEN system and the town website is kept updated with a wide range of board of health information, activities and links to other resources, such as MDPH. I am very grateful for that partnership.

At the local level, we are in the trenches, triaging as best we can, but how will we be capable of winning the battle, or preventing the next one, if the experts are not capable of helping us? How can they be capable if they do not have the staff and resources to be prepared? How can they be prepared if they are not supported?

I support MDPH with my letter. That is not sufficient, though; we need you. How will you support public health in Massachusetts? I implore you to reach across the aisle and across the State to improve the success of public health in Massachusetts by supporting the budget necessary to make that a reality.

Sincerely,

Cathleen Drinan, Halifax Health Agent and the Halifax Board of Health