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Budget Cuts Can Be Hazardous To Our Health

By Robin Baker, Ph. D., Senior Policy Analyst

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West Nile virus, whooping cough, influenza and the hanta virus are poised to hit Colorado again this year. Local health departments are the first line of defense in tracking these diseases and in notifying and protecting you and your family from outbreaks.

All the while, these health departments have sustained unending budget cuts — cuts that, if continued, will endanger the safety and health of all of us.

One consequence of health departments doing a good job is they are often invisible. Average people rarely know what public health workers are doing behind the scenes. As in a ball game, the referee's performance is at its best when no one notices.

The critical services provided by our local health departments, like a good referee, are taken for granted.

Every day, we breathe the air, enjoy clean water, drop the kids off at school or daycare, or perhaps eat out at a favorite restaurant. All the while, toxic air emissions are being monitored and controlled, we feel confident that daycare facilities and schools are sanitary, that our food is free of disease-causing organisms and that infectious diseases are being controlled.

In the evening as people kick back and relax, they may not think about the public health professionals that are on call to respond to hazardous waste spills or to a hospital reporting a contagious disease. Without even realizing it, you and each Colorado resident benefits from public health every day, and thanks to public health, our lives have a good chance of being long and healthy.

One consequence of the invisible nature of public health work is that during an economic downturn, policymakers think it won't hurt to cut the public health budget.

After all, there is no reason to believe that the unwavering performance of state health professionals will nose-dive.

Besides, only 2 percent of the total government spending for public health departments come from the state's General Fund. Most funding comes from federal sources. Even though federal funds are declining, some dollars keep coming. So, it can't hurt public health much if the state doesn't provide financial support, right? The answer is yes and no.

Yes, cuts in state funding do hurt public health by undermining that first line of defense and exposing all of us to serious health threats. Health threats will continue to emerge as the population grows and global travel increases. Federal funds are earmarked for specific programs and are prohibited from replacing state funds.

And the answer is no, because we won't feel the consequences at first. Public health workers are not stereotypical pencil-pushers. They are dedicated roll-up-your sleeves professionals.



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Local health departments, clinics, hospitals and physicians will still do their jobs, and they will continue to absorb the growing costs until they can't anymore.

Consider that public health departments were hard hit when Colorado faced an unprecedented \$980 million state budget shortfall in 2002.

Health department programs aimed at protecting food safety, inspecting child care centers and public shopping areas and monitoring the safety of our water and air were cut by more than 30 percent between 2002 and 2004.

Funding for immunization and youth crime prevention programs also fell.

Budget pressures forced local health departments in Otero, Bent, Phillips, Sedgwick, Alamosa, Conejos, Delta, Mesa and Denver counties to reduce services for prenatal and child health programs.

Budget cuts also eliminated population-based state funding of about \$1.50 per person. Today the state provides nothing.

This per capita funding was the baseline funding, the glue that held local health departments together as a functional statewide network.

Per capita funding paid for local health department staff to coordinate regional agreements and training. This kind of collaboration and mutual aid between rural and urban departments is key when a disease outbreak occurs.

In small rural counties, per capita funding keeps the doors open, pays the professional staff to monitor disease and warn us of an outbreak such as West Nile virus as soon as possible.

Persistent budget erosion is slowing Colorado's progress toward meeting national and state public health performance targets. In 2002, 15 of 24 measures were not being met. More recent data is not available.

Like a good referee who watches to ensure the players stay within the rules and play the game safely, public health officials watch for threats from epidemics, environmental hazards and disasters.

When our health or safety is threatened, public health officials — like the referee — call foul. But they can't do that if they are no longer part of the game.

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