

Issue Brief

Is Maine Prepared to Become the Healthiest State in the Nation?

Public health policies and systems seek to improve the health of populations. Our public health system in Maine assures that we have safe drinking water, are prepared to respond to disasters, and have community-based prevention programs to decrease injury, disease, and premature death. While the term public health is often misunderstood and linked with indigent care, the system encompasses far more and provides essential health improvement services. These include:

- Preventing epidemics and the spread of disease
- Protecting against environmental hazards
- Preventing injuries
- Promoting and encouraging healthy behaviors
- Responding to disasters and assisting communities in recovery
- Assuring the quality and accessibility of health services¹
- Developing policies in the public's interest
- Assessing the health of populations

The Maine Center for Disease Control and Prevention within the Department of Health and Human Services has the primary responsibility for public health in our state and serves as the hub of our public health system. This system also includes public and private organizations that play an important role. The Institute of Medicine's 2003 report titled *The Future of the Public's Health in the 21st Century* identified five actors who, together with the government public health agencies, are in a position to act powerfully for health. These actors are depicted on page 2. While policymakers have not been singled out, they also play a critical role in the public health system.

The State of the Public's Health in Maine

Maine's State Health Plan articulates the goal of making Maine the healthiest state in the nation.² While a laudable goal, is it do-able?

The answer depends on how willing we are to invest in a population-based approach and build a public-private system for improving health in Maine. As the State Health Plan indicates, Mainers suffer from high rates of preventable chronic illnesses. While the medical system plays a critical role in treatment and rehabilitation of individuals, to have the greatest impact on our state's health, we need to focus on disease prevention strategies and public health approaches that support behavior change.

There are multiple determinants of health including access to medical care, genetic predisposition, social circumstances such as income, education and employment, environmental exposures, and individual behavioral choices.³ However, what most people don't realize is that our behavioral patterns and social and environmental circumstances play a far more significant role in mortality than access to high quality medical care.

In Maine, approximately 70% of deaths each year are a result of: 1) heart disease and stroke, 2) diabetes, 3) chronic lung disease, and 4) cancer.⁴ Given what we know about the leading causes of death in this country (e.g., tobacco use, poor diet, physical inactivity, alcohol use)⁵ and the

Fast Facts

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- In Maine, approximately 70% of deaths each year are a result of: 1) heart disease and stroke, 2) diabetes, 3) chronic lung disease, and 4) cancer.
- Current estimates reveal a dramatic 59% decline in tobacco use among young people in Maine since 1993.

Author: Brenda Joly, Ph.D.
Muskie School of Public Service
(207) 626-5003, bjoly@usm.maine.edu

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relationship of these factors to disease and death rates, we can make dramatic improvements in health by modifying behavioral patterns through proven public health prevention and intervention efforts. The question is whether we are willing to make the investments that require long-term commitments and adequate resources given that health improvements often come years down the road. And if so, what do we need to do to get there and what successes can we build on?

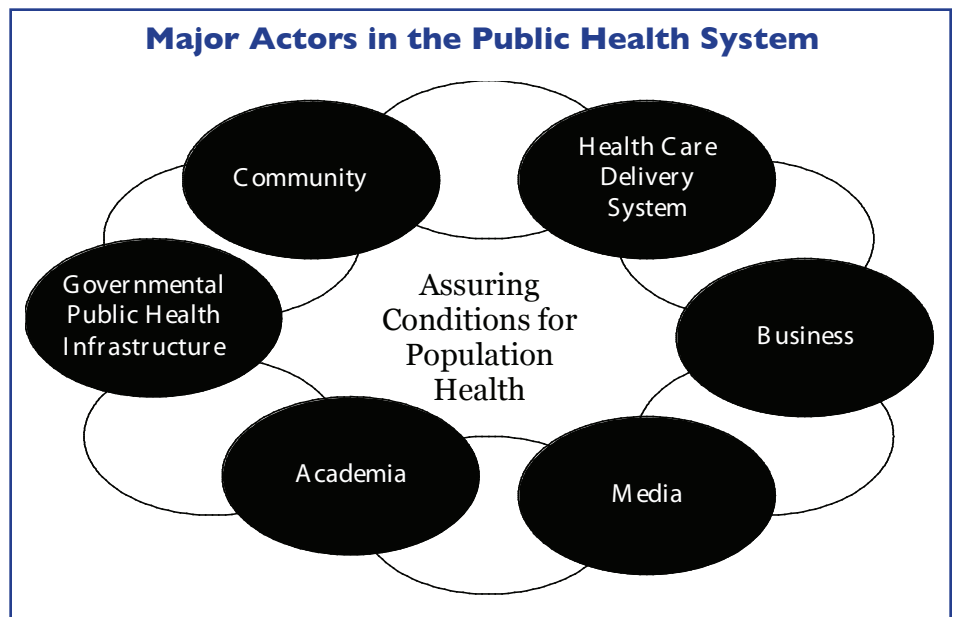
New Challenges in Public Health: Emergency Preparedness

Given the events of 9/11, the SARS outbreak and the recent attention to natural disasters, it is clear that our communities, our state, and our nation need to be prepared to detect and respond to these situations. While chronic diseases continue to claim the lives of our family members, friends, co-workers, and neighbors, we also need to be mindful of new public health challenges so that our public health system can continue to protect the health of our population.

Maine has taken on this challenge with federal funding that supports statewide efforts for bioterrorism and public health emergency preparedness. These funds are having a direct impact on our “ability to detect, treat and prevent injury and diseases that threaten the health of Maine citizens as a result of natural or man made events.”⁶ Our state public health agency is helping to protect our communities by building a coordinated system that will address natural disasters (e.g., pandemic influenza, floods, ice storms) and acts of terrorism.⁶

Our capacity in Maine to respond to this new public health challenge has dramatically increased over the past several years and we are more prepared to protect the health of our citizens. Examples of our increased capacity include:

- The establishment of a regional epidemiology program focusing on infectious disease surveillance and outbreak management statewide
- The creation of Regional Resource Centers to address high priority healthcare systems needs for emergency preparedness (e.g., communications equipment, personal protective equipment for health workers)
- The implementation of a 24/7/365 disease reporting system for immediate infectious disease case reporting or suspected outbreak reporting



- The training of health professionals in medical emergency response
- A Health Alert Network that enables the alerting of 2,000 public health partners with information on key public health events
- Enhanced laboratory systems that have the capacity to test for all bioterrorism agents and proper secure storage for holding suspected chemical and biological agents⁶

The collective efforts highlighted above, and many others, would likely not have been possible without the influx of funds that Maine received. Promoting and protecting the health of our population is an ongoing responsibility with long-term investments, but it is critical if we truly want to be the healthiest and most prepared state in the nation.

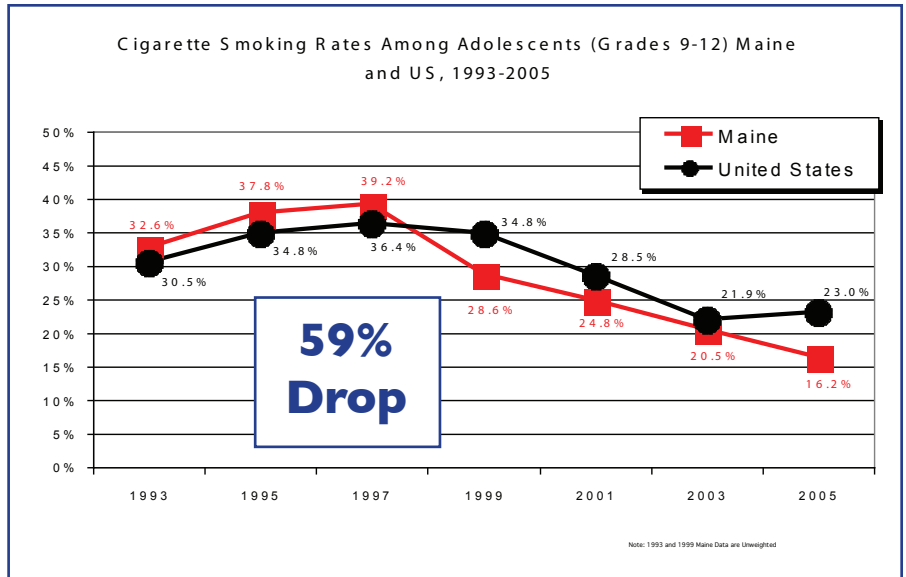
The Power of Public Health: A Success Story in Maine

Maine has been a leader among states in having committed a substantial portion of funds from the Master Tobacco Settlement Agreement to public health. These dollars are often referred to as *The Fund for a Healthy Maine* and are used to support public health initiatives that target smoking and other health improvement priorities.

This investment in public health is paying off. To date, one of our most powerful successes has been the reduction of youth tobacco use. Maine has implemented and evaluated a *comprehensive* approach that uses proven strategies to help prevent children and young adults from using tobacco. This hallmark approach includes policies, changes in the environment and a list of other strategies used to tackle the issue from multiple angles. As indicated below, current estimates reveal a dramatic 59% decline in tobacco use among young people in Maine since 1993.⁷ This remarkable

decrease is particularly noteworthy given the fact that Maine was once known to have the highest youth smoking rates in the country. Given what we know about the addictive nature of tobacco and the research suggesting that nearly one in five deaths in this country are attributed to tobacco, a decrease of this magnitude is a significant accomplishment with benefits that are far-reaching.

So, what do we need to do to build on our successes and to make a commitment to the health of Maine's population? *The Fund for a Healthy Maine* directly impacts our ability to deliver essential public health services in our communities and continued use of these funds to support public health efforts is critical. The allocations for state fiscal year 2007 are depicted below.



state, and local level and this impacts our ability to address public health needs throughout Maine in an efficient and adequate manner.

As a nation, approximately 95% of the trillion dollars we spend on health goes directly to medical care services, while only 5% is allotted to population-based or public health approaches.⁸ Yet, we know that in the 20th century, public health was responsible for adding 25 years to the life expectancy of people in the United States. This figure is in sharp contrast to medical care with a contribution of a mere five years.⁹

If we want to invest in the health of Mainers, we need to commit state and local resources that will allow us to implement and evaluate comprehensive initiatives that have the power to impact the health status of our communities and adequately address health disparities throughout the state. Our system cannot and should not rely solely on federal funds, tobacco settlement dollars, and foundation grants to address health problems in our state and communities.

<i>The Fund for a Healthy Maine Allocations</i>	
Use of Funds	SFY 07 Allocations (millions)
Tobacco-Related Allocation	
Community/School Grants	\$7.883
CDC Grant	\$1.094
Cessation/Evaluation/ Education/Countermarketing	\$6.54
Home Visits Allocation	\$4.716
Oral Health Allocation	\$1.011
Family Planning Allocation	\$.41
Total Allocations	\$21.654

Source: Maine CDC (2007) p. 3

Are We Prepared to Become the Healthiest State in the Country?

While Maine has a number of public health successes to be proud of, we also have challenges that affect our ability to improve the health of Maine citizens. If we truly want to become the healthiest state in the country, and perhaps the most prepared state, we need to address shortfalls in our public health system, including its financing, structure, workforce, and evidence base.

Public Health Financing

In order to make a significant contribution to the health of all people living in Maine, we need a commitment to invest in public health approaches that are comprehensive, such as the tobacco example. Our current system is under-funded at the national,

Public Health Structure

In order for us to achieve a high return on our financial investments, we need a stronger public health structure that is coordinated and accountable. Our system consists of a loose network of public and private entities that need to be better organized in order to more effectively and efficiently deliver the essential public health services. Our system also needs to develop more formal mechanisms for assessing our ability to deliver these essential services based on national performance standards. In response to the State Health Plan and LD 1614, a Public Health Work Group has been charged with the task of addressing these issues. A soon to be released final report will include recommendations for tackling our public health infrastructure needs.

Public Health Workforce

The public health workforce across the country lacks formal training and education in public health. According to the Bureau of Health Professions, only 20% of the estimated 400,000 to 500,000 public health professionals in this country have the education and training needed to effectively do their jobs.¹⁰ The situation in Maine mirrors that throughout the rest of the country. While there are relatively new formal public health degree and certificate programs in Maine, as well as workforce development opportunities, there are often few incentives for the existing workforce to participate. If we want our public health professionals to have the necessary knowledge and up-to-date skills needed to carry out our responsibilities, we need to develop strategies and innovative approaches that encourage education, training, and lifelong learning.

Public Health Evidence Base

Given the limited resources in public health, public health policies and programs must incorporate strategies that have been proven effective. However, our evidence base that we rely on to tell us what works with certain populations is somewhat limited. For example, we know that childhood obesity is a major public health problem in this country, yet leading experts are still trying to figure out the most promising practices for tackling this epidemic. Is the most effective approach one that focuses on access to healthy foods, changes in policy regarding advertising to children, removing vending machines from schools, changes to the school lunch menu, decreasing portion sizes, or all of the above? Do we, and should we, wait for all of the evidence to come forward before addressing this issue? Can we afford to sit back and wait while our rates of childhood obesity continue to escalate? Public health advocates would likely argue that the evidence base is critical, however, we need to act now and we can responsibly do so by developing and evaluating strategies that are based in theory, or driven by prior experiences and successes - such as the tobacco example. Public health has an obligation to act and if we want to make a difference, this means that sometimes we need to help contribute to the knowledge base rather than solely relying on it. Yes, some interventions will be highly successful and others may have a more modest impact, but if we want to address public health problems in the 21st Century we need to be responsive and on the ground using all of the tools at our disposal to improve health and quality of life while continuing to learn what works.

How Do We Become the Healthiest State in the Country?

So, how do we achieve our laudable goal of becoming the healthiest state? We begin by addressing our public health challenges and system deficiencies. To tackle these challenges we need to strengthen our public health constituency and work with all of

our public health partners to advocate for and implement comprehensive solutions that will impact the health of all people in Maine.

If Maine is to accomplish its goal, and if it does become the healthiest state in the country, our public health system will have another success to celebrate and all people in Maine will have another reason to be proud to live in this state.

For More Information

State Public Health Initiatives (including *The Fund for a Healthy Maine*)

Contact: Dora Anne Mills, MD, MPH

Director, Maine Center for Disease Control & Prevention

State Health Plan

Contact: Trish Riley

Director, Governor's Office for Health Policy and Finance

Websites of Interest

- Centers for Disease Control and Prevention: www.cdc.gov
- Public Health Foundation: www.phf.org
- National Association of City and County Health Officials: www.naccho.org
- Association of State and Territorial Health Officials: www.astho.org
- American Public Health Association: www.apha.org
- Maine Center for Disease Control and Prevention: <http://www.maine.gov/dhhs/boh/>
- Maine Public Health Association: www.mcph.org/mpha/MPHAindex.html
- Maine Center for Public Health: www.mcph.org
- Maine Network of Healthy Communities: www.thehcnetwork.org

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