

NACCHO's 2024 Federal Legislative and Policy Agenda

NACCHO's mission is to improve the health of communities by strengthening and advocating for local health departments. The Federal Legislative and Policy Agenda guides NACCHO's work in its interactions with federal agencies and Congress. The Agenda is informed by local health department input and approved annually by the Board of Directors.

In 2024, NACCHO will continue to advocate on behalf of all aspects of local health department activities, including responding to ongoing and emerging public health emergencies, and confronting public health challenges faced at the community level, including those that have been exacerbated over the past few years. To ensure federal policy is responsive to and supportive of its members, NACCHO will advocate for meaningful inclusion of local health department expertise in policy planning and implementation, and for designated federal funding for local health departments.

COVID-19, mpox, and other recent public health emergencies brought to the fore the critical role of governmental public health—especially local health departments—in all aspects of daily life, and exposed the consequences of years of underinvestment in our public health system. More is needed to bolster these efforts at all local health departments in both the short- and long-term. With a stronger public health infrastructure, local health departments can expand essential prevention and health promotion efforts at the community level to tackle these and other communicable disease threats, including substance-use disorder, climate change, and health disparities to improve the overall health of communities.

Therefore, NACCHO will 1) continue efforts to push for robust federal investment to strengthen the public health workforce and 2) bolster core public health functions, including sustainable, flexible, disease-agnostic funding for public health infrastructure and data modernization, and will 3) continue to address the many challenges that local health departments, in coalition with other stakeholders, face every day.

Policy decisions both within and outside the traditional health sphere impact health status. To better address population health and wellbeing, NACCHO seeks opportunities to promote collaboration between and integration of the public health and healthcare sectors and advocates a health-in-all-policies approach. NACCHO also supports the incorporation and adoption of principles of social justice into public health practice to eliminate the root causes of health inequities.

NACCHO's 2024 Legislative Priorities

- Strengthen and support the **public health workforce**
- Bolster and improve access to **federal public health funding**, including resources to support **public health infrastructure** and **data modernization** at the local health department level
- Ensure **federal public health funding flows** from the federal level to states and local communities quickly and equitably
- **Address wide range of public health concerns** through work in coalition with partners



Public Health Workforce

The public health workforce—the backbone of our nation’s governmental public health system—faces significant challenges that predate the COVID-19 pandemic and will almost certainly persist into the future. Local health departments lost 21 percent of their workforce capacity in the decade before the pandemic, with the number of full-time equivalent local health department workers dropping from 5.2 per 10,000 people in 2008 to 4.1 per 10,000 people in 2019.ⁱ While COVID-19 supplemental funds temporarily bolstered the workforce during the height of the pandemic to near 2008 levels nationally, the positions added were largely for contract workers, particularly at very large local health departments. Many smaller health departments saw very little, if any staffing increases during the emergency.ⁱⁱ In all cases, the emergency funding that led to these increases is short lived and may lead to additional job losses in the coming year.ⁱⁱⁱ Local health departments of all sizes need sustained, flexible funding to increase and sustain their workforce for the long term to handle the daily needs of their community, as well as to be better positioned when emergencies strike.

More must be done to shore up the local health department workforce for the long term and ensure there are public health professionals in place to protect and respond to the needs of the public. A 2022 analysis found that public health departments need at least 80,000 more full-time equivalent positions—an increase of nearly 80 percent—to provide a minimum set of public health services.^{iv} That estimate encompasses only the

bare minimum needed to sustain the public health system, without accounting for additional workforce that may be temporarily required to respond to an emergency like COVID-19 or other challenges.

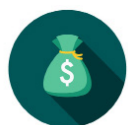
The need to expand the local health department workforce is compounded by pressures that may lead existing workers to leave the field. A 2022 analysis found that nearly one-third of the public health workforce is considering leaving their organization in the next year and 44 percent said they are considering leaving within the next five years. Whether or not they plan to leave, more than half of current public health workers reported symptoms of post-traumatic stress disorder and many are struggling with their mental health.^v

Combined, these forces create an urgency to address our public health workforce crisis by better supporting existing staff and bringing new staff into the field. After significant advocacy by NACCHO and its members and coalition partners, Congress passed and President Biden signed the Consolidated Appropriations Act of 2023, which reauthorized the Public Health Workforce Loan Repayment Program, representing a significant step forward. In 2024, NACCHO will work with Congress to secure adequate funding to support and sustain this new federal loan repayment program for public health professionals who agree to serve three years in a local, state, or tribal health department. Moving forward, NACCHO will also work with the Health Resources and Services Administration to implement the loan repayment program so that it can be a useful tool for health



departments to recruit and retain top talent, building a workforce that can address current as well as future public health challenges.

NACCHO will continue to support the vital work of public health officials, staff, and authority in the face of increased politicization. Public health officials around the country have been harassed, threatened, fired, or retired early because of political disputes over public health measures in response to COVID-19. Between January 1, 2021, and May 20, 2022, 61 new state laws passed across more than half of states that limit or transfer public health authority. These laws remove authority from public health agencies to exercise their expertise and the flexibility needed for day-to-day public health protection and emergency response.^{vii} NACCHO calls on policymakers at the local, state, and federal level to support local health officials, including by preserving or restoring their authority and through mental health resources and supports, so they are empowered to implement evidence-based policies and recommendations. Emerging research suggests limiting public health authority undermines public health efforts and raises serious concerns about how localities will prevent and respond to current and future public health challenges.^{viii} Moreover, federal public health guidance needs to be clear, consistent, and science-based to support these public servants at the local level.



Public Health Funding

Federal public health funding is critical to the work of local health departments, and NACCHO will continue its efforts to ensure strong federal investments in public health programs and that those investments efficiently and equitably make it to local health departments at the community level.

- **Rebuild and sustain the governmental public health system:** COVID-19 has reinforced the need for sustained investment in local health departments to enable them to address existing public health challenges and be prepared to respond to future public health emergencies. **NACCHO calls for sustainable, disease-agnostic, mandatory funding to support local public health infrastructure, including data modernization and workforce development.**



- **Maintain the strength of Centers for Disease Control and Prevention (CDC):** CDC has unmatched expertise and experience in tackling a broad array of public health issues, including new and emerging challenges. NACCHO will continue to advocate for robust funding for CDC so the agency can effectively support programs to address federal, state, and local public health priorities.
- **Other appropriations:** NACCHO will continue to advocate for strong appropriations in FY2024 and FY2025 for public health programs within the CDC, Food and Drug Administration, Health Resources and Services Administration, and the Administration for Strategic Preparedness and Response. NACCHO also opposes cuts to the authorization levels of the Prevention and Public Health Fund.
- **Ensure funding reaches local health departments:** It is important that all entities throughout the continuum of governmental public health are empowered and resourced to work together to support our shared mission. Unfortunately, federal funding intended by Congress to support all levels of the governmental public health enterprise continues to have variable reach (e.g., in amount, timeliness, and requirements) to local public health agencies. Therefore, NACCHO will continue to advocate for substantial additional investments in the governmental public health system at all levels (federal,

state, local, tribal, and territorial), **as well as funding designated specifically for local health departments so that they can continue to lead on all public health priorities.** NACCHO also supports **public tracking of disbursement of federal public health funds down to the local health department level** to identify best practices and address challenges. Such transparency and accountability should be accompanied by **greater local health department involvement** and consensus in state public health decision-making concerning the distribution and uses of federal funds at the local level.



Supporting Public Health through Coalitions and Partnerships

NACCHO will continue to work in coalition with partners to address broad public health challenges including:

- **Access to healthcare**, including Affordable Care Act programs and Medicaid
- **Behavioral and mental health services**
- **Chronic disease prevention**, including active living, nutrition, and food security
- **Informatics**, including interoperable data exchange between public health and healthcare providers
- **Emergency preparedness**
- **Environmental health**, including climate, food and water safety, and vector borne disease prevention and control
- **HIV, STI, and viral hepatitis prevention**
- **Infectious disease prevention**, including vaccines and antimicrobial resistance
- **Injury and violence prevention**, including gun violence
- **Maternal and child health** promotion
- **Reproductive health** and family planning services
- **Substance use disorder** prevention and treatment
- **Tobacco control** and prevention, including e-cigarettes

References

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- ^v de Beaumont Foundation, Public Health Workforce Interests and Needs Survey, <https://debeaumont.org/ph-wins/2021-findings/>
- ^{vi} Kaiser Health News, Over Half of States Have Rolled Back Public Health Powers in Pandemic, <https://khn.org/news/article/over-half-of-states-have-rolled-back-public-health-powers-in-pandemic/>
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