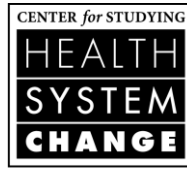


NEWS RELEASE
For Embargoed Release
12:01 a.m. EDT
Wednesday, April 16, 2008



Contact:
Alwyn Cassil (202) 264-3484
acassil@hschange.org

*Providing Insights that Contribute
to Better Health Policy*

Public Health Workforce Shortages Imperil the Nation's Health

Public Appears Unaware of Escalating Threats to Such Basic Services as Disease Surveillance

Editor's Note: An advance copy of the embargoed study is available by emailing acassil@hschange.org. The study will be available online at www.hschange.org after the embargo lifts at 12:01 a.m. EDT Wednesday, April 16, 2008.

WASHINGTON, D.C.—As the post-9/11 spotlight on shoring up the nation's public health system fades, local health departments face a mounting workforce crisis as they struggle to recruit, train and retain qualified workers ranging from nurses to epidemiologists, according to a study released today by the Center for Studying Health System Change (HSC).

Factors influencing the workforce shortage include inadequate funding, uncompetitive salaries and benefits, an exodus of retiring workers, insufficient supply of trained workers, and lack of enthusiasm for public health as a career choice, according to the study, which was supported under a grant from a special solicitation for Public Health Systems Research through the Robert Wood Johnson Foundation's Health Care Financing and Organization Initiative, which is administered by AcademyHealth.

“While local public health agencies have worked to improve workforce monitoring and planning, recruitment, retention, development and training, and academic linkages, little progress has been made to alleviate the shortages,” said Debra A. Draper, Ph.D., HSC associate director and coauthor of the study with HSC Senior Consulting Researcher Robert E. Hurley, Ph.D., of Virginia Commonwealth University; and Johanna R. Lauer, an HSC health research assistant.

Based on interviews with public health officials in Cleveland; Greenville, S.C.; Indianapolis; Little Rock, Ark.; Orange County, Calif.; and Phoenix, the study's findings are detailed in a new HSC Research Brief—*Public Health Workforce Shortages Imperil the Nation's Health*—available online at www.hschange.org. Representatives of key state and national public health organizations also were interviewed to obtain additional insights and perspectives.

Shortages of critical personnel and deficits in key skill areas ranged from significant to severe across public health agencies in each of the six communities, with general agreement that public health nurses are the most difficult personnel to recruit and retain, according to the study.

In some communities with public health laboratories, such as Greenville, Orange County, and Phoenix, agencies have difficulty hiring and retaining microbiologists and laboratory technicians. In Little Rock and Orange County, where local health departments also provide medical care, pharmacists and physicians reportedly are reluctant to work for the government for a variety of reasons, including low salaries. In most communities, local health departments also struggle to

—MORE—

recruit and retain epidemiologists, sanitarians, clerical staff and information technology specialists.

Other key study findings include:

- Universally, respondents described public health funding as inadequate, undermining public health agencies' ability to recruit and retain a sufficient and trained workforce. Many respondents attributed inadequate funding to the general lack of political support for public health.
- Funding difficulties preclude most local public health agencies from effectively competing with other organizations, often private, that are seeking workers with similar training and skills. Uncompetitive salaries were the most frequently cited reason for being unable to attract candidates to public health, especially new graduates who face large student loans.
- Across the six communities, respondents discussed public health's "silent crisis"—the aging of the public health workforce and the looming exodus of workers eligible for retirement.
- Across communities, an insufficient supply of trained public health workers has reportedly contributed to workforce shortages, especially for public health nurses. In addition to nurses, there are shortages of other workers with advanced degrees and public health training. While respondents acknowledged there are more schools of public health and training programs than existed a decade or so ago, most graduates—reportedly 80 percent—do not end up in the public sector.
- Respondents echoed a common sentiment about the need to generate enthusiasm for public health as a career. As an Ohio public health official suggested, "Most people come to public health because they fall into it, not because it was presented as a great career opportunity."

The study concluded that shortages are likely to persist and to worsen given aggressive competition from the private sector and overall scarcity of key health professionals. Moreover, while workers' skill deficits are less apparent than worker shortages, they may be more consequential in adversely affecting the quantity and quality of public health services.

###

The Center for Studying Health System Change is a nonpartisan policy research organization committed to providing objective and timely research on the nation's changing health system to help inform policy makers and contribute to better health care policy. HSC, based in Washington, D.C., is funded in part by the Robert Wood Johnson Foundation and affiliated with Mathematica Policy Research, Inc.