

National Environmental Health Association

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Senator Patty Murray, WA, Chair Senate Committee on Health, Education, Labor, and Pensions Washington, DC

Senator Richard Burr, NC, Minority Chair Senate Committee on Health, Education, Labor, and Pensions Washington, DC

RE: Incorporating Environmental Health within the Prepare for and Respond to Existing Viruses, Emerging New Threats, and Pandemics Act (PREVENT Pandemics Act)

Senators Murray and Burr,

The National Environmental Health Association (NEHA) represents more than 6,600 governmental, private, academic, and uniformed services sector environmental health professionals in the U.S., its territories, and internationally. NEHA is the profession's strongest advocate for excellence in the practice of environmental health as it delivers on its mission to build, sustain, and empower an effective environmental health workforce.

- Environmental health professionals assure healthy, safe, and prosperous communities.
- Environmental health professionals often work outside traditional health departments and might be omitted from the benefits of the legislation if not specifically called out.
- Environmental health professionals are allies in environmental justice efforts.
- Environmental health professionals are on the front lines in climate and health issues.

NEHA applauds the Senate Committee's bipartisan effort to reform the public health system. The COVID-19 pandemic has stressed the nation's public health workforce and demonstrated weaknesses in its public health system. Over 860,000 people in the U.S. have died due to COVID-19 and that number may soon increase to over 1 million. The nation's public health workforce is overwhelmed and exhausted.

To achieve the goals of the PREVENT Pandemics Act, the committee must recognize the critical importance that the environmental health workforce contributes to public health. Environmental health is the second largest constituent of the public health workforce, second only to nursing. It is the foremost program in most rural and frontier public health agencies in the U.S. Furthermore, environmental health programs are primarily funded by state and local governments.

Simply put, the PREVENT Pandemics Act will fail to achieve its goals without recognizing environmental health and its contributions to the public health.

- Environmental health is the second largest constituent of the state, tribal, local, and territorial (STLT) public health workforce.
- State and local environmental health programs are 95% funded by state and local governments, receiving only 5% of their funding from federal resources.
- Environmental health professionals collect a majority of the public health data in this country, and report on the status of public health in this nation.
- Environmental health provides public health to most of rural and frontier America.
- Approximately 20% of all local health department directors are environmental health professionals.

As the second largest sector of the public health workforce, environmental health practitioners have been essential in delivering public health services during the COVID-19 pandemic. Research by NEHA shows environmental health practitioners in state and local health departments were actively engaged in COVID-19 response and recovery (National Environmental Health Association [NEHA], 2020). Their efforts on COVID-19 were key in safely reopening and restoring the economy, providing emergency response operations, performing contact tracing, and assisting in communication efforts, in addition to their customary responsibilities. The environmental health workforce accepted their new roles and responsibilities even though it placed them at risk from contracting the disease. These changes came at the cost of forgoing their customary environmental health responsibilities, which suffered from a lack of attention during the COVID-19 pandemic.

For STLT governments to expand their overstretched public health departments with additional staff, this effort must include environmental health. The public health community needs a robust environmental health workforce to ensure that food is safe to eat, water is safe to drink, and the environment is safe and healthful for this nation's people. Public health cannot operate, nor the economy reopen and thrive, without an adequately trained and certified environmental health workforce.

Researchers who studied the delivery of environmental health services have observed that environmental health is dominated by local challenges and is frequently shaped by local politics. Funding and resources come from STLT sources, with some jurisdictions contributing up to 95% of environmental health funding with less than 5% coming from federal agencies. In addition, environmental health services operate through self-generating revenue sources, such as permitting, licensing, and other fees, further emphasizing the local focus of environmental health services (Dyjack et al., 2007).

Environmental health, as a profession and practice, is one of the most significant contributors to STLT public health. Environmental health professionals are responsible for identifying, investigating, and controlling harmful environmental exposures to prevent related illness and injury (NEHA, 2013; Resnick et al., 2009). They are the programs that collect most public health data.

NEHA strongly encourages the hiring and training of environmental health practitioners. This workforce has suffered a significant decline in practitioners in STLT health departments since 2008 (National Association of County and City Health Officials, 2020), even though environmental health services are performed in virtually every health department, from the smallest rural to the largest urban departments. Enteric and infectious disease surveillance and control is the responsibility of

environmental health professionals in much of this country. Rural and frontier health departments often only have environmental health practitioners operating their public health departments.

Environmental health is the key to providing local public health services.

There are specific sections of the PREVENT Pandemics Act that could be improved by including and strengthening environmental health provisions. The act must:

Sec. 102. Appointment and authority of the director of the Centers for Disease Control and Prevention (CDC).

- Include acknowledgement of environmental health as part of the specific functions of the director.
- Require that the CDC agency-wide strategic plan to include the CDC's National Center for Environmental Health (NCEH) and recognize its role in achieving the goals of this act.

Sec. 103. Public health and medical preparedness and response coordination.

- Specifically request the Assistant Secretary of Preparedness and Response (ASPR) to address environmental health concerns when clarifying ASPR's role and responsibilities.
- Require whenever ASPR performs any national- and state-level full-scale exercises that the ASPR plans include environmental health needs, especially at the STLT level.

Sec. 111. Improving state and local public health security.

• Require STLT agencies to include and acknowledge their environmental health departments within their CDC Public Health Emergency Preparedness cooperative agreements.

Sec. 114. Assessment of containment and mitigation of infectious diseases.

 Require in the U.S. Government Accountability Office (GAO) report on STLT preparedness and response plans to study the impact that environmental health had on the mitigation and spread of COVID-19.

Sec. 211. Modernizing biosurveillance capabilities and infectious disease data collection.

- Add environmental health collection methods to the list of topics for discussion at the annual
 public health meetings to improve situational awareness, especially since environmental health
 programs are the primary collectors of public health data.
- Recognize that environmental health reaches across many agencies, including the CDC/NCEH,
 Food and Drug Administration, U.S. Department of Housing and Urban Development, and U.S.
 Environmental Protection Agency, and that environmental public health officials reside in and
 have an important role in each agency.

Sec 213. Supporting public health data availability and access.

- Recognize the importance of environmental health programs in the collection of all public health data modernization efforts, especially in the smallest and least resourced public health programs.
- Recognize that when the secretary of the U.S. Department of Health and Human Services (HHS)
 works with STLT public health departments, this effort will be lacking unless environmental
 health departments are acknowledged and included.

Sec. 214. Epidemic forecasting and outbreak analytics.

Recognize during the development of forecasting models for public health emergencies and
infectious disease outbreaks by the CDC director that environmental health is a key component,
especially with vector borne outbreak and natural disaster responsibilities falling under many
STLT environmental health programs.

Sec. 221 Improving recruitment and retention of the frontline public health workforce.

- Ensure that the Public Health Workforce Loan Repayment Program includes environmental health professionals.
- Require GAO in its evaluation of the public health workforce to include the contributions the environmental health workforce provided during the COVID-19 pandemic.

Sec. 222. Awards to support community health workers and community health.

Allow funds used by STLT agencies to recruit, hire, and train community health workers to
include the environmental health workforce. Furthermore, support of education and training in
communities must include the environmental health workforce.

Sec. 402. Strategic National Stockpile (SNS) equipment maintenance.

• Ensure that the SNS includes items necessary for the environmental health workforce.

Sec. 404. Improving transparency and predictability of processes of the Strategic National Stockpile

• Require that the secretary of HHS includes environmental public health officials at the annual meetings to share information about the maintenance and use of the SNS.

Sec. 409. Provision of medical countermeasures to Indian programs and facilities

• Ensure that tribal environmental health programs are included in the deployment of medical products during a public health emergency.

Both present and future public health departments will need environmental health practitioners to perform environmental health services. Without acknowledging the second largest segment of the public health workforce, as well as the services they provide means that STLT health departments will never achieve the goals sought by this effort. Environmental health is critical to ensuring a strong public health workforce both now and in the future.

By disregarding the environmental health workforce, the efforts of the PREVENT Pandemics Act to support the development of the next generation of public health leaders will neglect a critical part of the workforce responsible for environmental public health.

As the U.S. Senate seeks to work with leaders from across the public health community, NEHA recommends that this work includes leaders from the environmental public health community. Being part of this effort will acknowledge the value provided by the environmental health workforce, while ensuring that this effort achieves the maximum success for the STLT public health workforce.

NEHA supports PREVENT Pandemics Act and wants to see it succeed yet has doubts of its success if the second largest sector of the public health workforce is not included.

NEHA looks forward to working with your offices on this effort.

Ray Knoage

Sincerely yours,

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Senator Roy Blunt, MO, Minority Chair

Senate Subcommittee on Department of Labor, Health and Human Services, and Education, and Related Agencies

Representative Rosa DeLauro, CT, Chair

House Subcommittee on Labor, Health and Human Services, Education, and Related Agencies

Representative Tom Cole, OK, Ranking Minority Member

House Subcommittee on Labor, Health and Human Services, Education, and Related Agencies

Representative Brenda Lawrence, MI, Vice Chair

House Committee on Appropriations

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