



## *The State of Public Health in California*

Years of flat funding and budget cuts to vital public health agencies and programs at both the federal and state levels have taken their toll on California and the nation as a whole, complicating public health efforts. Additional resources are needed to adequately support improving access to care, controlling diseases, eliminating health disparities, and other public health activities. Make public health a priority this year and help us move towards developing a healthy society.

### **The Facts:**

- **Public Health Funding:** The state of California spends an average of \$78.23 a year on the public health needs of each resident. While this amount is the 7<sup>th</sup> highest level in the nation, it still falls short of the \$100+ allocated by some states. Total public health spending in California, including federal sources such as money from HRSA and CDC, amounts to an average of \$132 per person, an amount that is well below the national median.
- **Disease and Access:** Funding shortages mean that California still faces significant health challenges. For example, the state has the 11<sup>th</sup> highest rate of infectious disease in the country (23.7 cases per 100,000 people) and 19 percent of the population is uninsured.
- **Health Disparities:** African Americans in California experience 67 percent more premature deaths than do whites. Residents of rural areas of California are 29 percent more likely to die prematurely than are those who live in the suburbs of large cities.
- **The Road Ahead:** Although California has made recent improvements in many public health areas, such as reducing its infant mortality rate, the state continues to face many public health challenges.

Sources: United Health Foundation's State Snapshots; Trust for America's Health, *The State of Your Health Report, 2008 Edition*.

In response to an informal electronic survey sent out to our membership and 53 state affiliates:

A county Public Health Worker from California told us, *"Bioterrorism funding and HRSA grants were supposed to build infrastructure for public health. They have sapped the core functions and imposed additional duties on all staff in all programs. The public health nursing shortage is desperate. I think the situation is worse than dire."* He also described the impact of reduced services on the public health department's credibility in the community: *"Unless [the public] directly interfaces with us due to a sanitary inspection or a disease they do not even know we exist."*

Another Public Health Worker from Salinas, California concluded by noting: *"How can public health departments work with little or no money to implement programs and plans that seem to be just ink on paper?"*

*Founded in 1872, APHA is the oldest, largest and most diverse organization of public health professionals in the world. The association aims to protect all Americans and their communities from preventable, serious health threats and strives to assure community-based health promotion and disease prevention activities and preventive health services are universally accessible in the United States. [www.apha.org](http://www.apha.org).*