



January 17, 2019

Don Wright, MD, MPH, Deputy Assistant Secretary for Health  
Office of Disease Prevention and Health Promotion  
Office of the Assistant Secretary for Health  
U.S. Department of Health and Human Services  
200 Independence Avenue, SW  
Washington, D.C. 20201

RE: Comments on the Proposed Healthy People 2030 Objectives

*Submitted electronically to [HP2030@hhs.gov](mailto:HP2030@hhs.gov).*

Dear Dr. Wright:

The American Public Health Association, a diverse community of public health professionals that champions the health of all people and communities, appreciates the opportunity to comment on the proposed Healthy People 2030 objectives. APHA recognizes the key role the objectives play in setting the course to prioritize, implement and evaluate actions across a broad range of public health priorities at the national, state and local levels.

The Healthy People Initiative goals are closely aligned with APHA's three overarching priorities: 1) Building public health infrastructure and capacity; 2) Ensuring the right to health and health care; and 3) Creating health equity.

APHA sees tremendous opportunity to strengthen the focus on disparities and equity throughout the Healthy People 2030 objective topic areas. Creating health equity is a guiding priority and core value of APHA. By health equity, we mean that everyone has the opportunity to attain their highest level of health. Advancing health equity is critical to achieving APHA's central challenge of creating the healthiest nation.

Despite Healthy People Initiative goals and objectives over several decades, currently in the United States there are persistent and pervasive health disparities. In the 2015 midcourse review of national health progress toward Healthy People targets, only modest reductions were found in health disparities among the widespread health and social objectives examined.

Of the up to 492 trackable objectives by race/ethnicity, the Healthy People target was met or exceeded for 36.9 percent of Non-Hispanic white, 27.2 percent of non-Hispanic African American, 34.8 percent of Hispanic, 26.6 percent of American Indian/Alaska Native, 47.8 percent of Asian and 43.9 percent of Native Hawaiian or other Pacific Islander populations.<sup>1</sup>

APHA strongly encourages the maintenance of Healthy People 2020 objectives that allow the nation to measure its progress toward reducing and eliminating health disparities. APHA also encourages that Healthy People 2030 to include a specific strategy for regular reporting on health disparities data to see if gaps are narrowing or widening.

In addition, APHA is pleased to see that the social determinants of health, or SDOH, topic area remains in Healthy People 2030. The proposed SDOH objectives are important for measuring the nation's progress toward optimizing the conditions in which people are born, grow, live, work, learn and age.

To punctuate the significance of these determinants, in the final objectives APHA strongly supports the inclusion of complementary objectives related to the SDOH. These are organized by the categories included in Healthy People 2020: economic stability, education, neighborhood and built environment and social and community context.

### **Access to Health Services**

Health as a human right is one of APHA's foundational principles. APHA recognizes the importance of insurance coverage but believes it is only the first step toward access to health services. The Institute of Medicine defines access as "the timely use of personal health services to achieve the best health outcomes."<sup>2</sup>

APHA supports sustained implementation of the Affordable Care Act and the Public Health and Prevention to fund to continue to expand access to health care for millions of Americans and make prevention and public health a priority.

Affordability of care, availability of providers, necessary treatment within close proximity and cultural competency of providers all affect a person's ability to access care. APHA is pleased to see that some of these factors are considered in objectives **AHS-2030-05-07: Reduce the proportion of persons who are unable to obtain or delay in obtaining necessary medical care, dental care and prescription medicines**. We offer the following comments on proposed access to health services objectives.

#### **AHS-2030-05: Reduce the proportion of persons who are unable to obtain or delay in obtaining necessary medical care.**

Consider adding the Behavioral Risk Factor Surveillance System as a data source. It captures health care access and use of selected clinical preventive services recommended by the U.S. Preventive Services Task Force or the Advisory Committee on Immunization Practices among working-aged adults, by state, state Medicaid expansion status, expanded geographic region, and federal poverty level. It also captures primary type of health insurance coverage, continuity of health insurance coverage during the preceding 12 months, and other health care access measures, including unmet health care and prescription needs, medical debt, number of health care visits during the preceding year, and satisfaction with received health care. The inclusion of this data will provide more comprehensive picture of barriers to medical care.

We suggest maintaining this Healthy People 2020 developmental objective **AHS-4L: Increase the number of practicing primary providers**. Having an adequate primary care workforce is critical to ensuring that those with insurance can actually access care. This is particularly important for people living in underserved areas, including rural communities. In addition, to ensure Healthy People 2030 is aimed at reducing disparities in access to health services, we also suggest adding a new sub-objective to: **Increase the number of practicing primary providers in medically underserved areas**. The Health Resources and Services Administration tracks health professional shortage areas and medically underserved areas.

## **Environmental Health**

Environmental health is the branch of public health that focuses on the relationships between people and their environment, promotes human health and well-being and fosters healthy and safe communities. Environmental health is a key part of any comprehensive public health system. We offer the following comments on select proposed environmental health objectives.

### Outdoor Air Quality

#### **EH-2030-02 Increase trips to work made by mass transit**

Increasing trips to work made by mass transit is an important step toward improving air quality, reducing traffic and supporting a more active lifestyle. This objective should include such factors as availability and affordability and neighborhood design that may influence use of mass transit.

Additionally, this objective could be broadened to "increase trips to work by many modes of transportation," which would include increasing trips by walking, rolling and mass transit. If the objective is broadened, it is important to consider access to safe and connected walking and bicycling infrastructure.<sup>3,4,5</sup>

### Healthy Homes, Schools and Communities

To build healthy communities, all people must have access to safe, affordable and stable housing. Access to quality housing has a direct and tangible impact on ability to access quality education, as well as other social determinants of health. Housing quality, availability and affordability of housing impacts health.

Poor housing conditions are associated with such health conditions as increased risk of chronic diseases, injuries and poor mental health. Additionally, an average of 21,000 radon-related deaths occurs each year and costs the U.S. approximately \$2.9 billion in health care.<sup>6</sup> Asthma-related costs alone add up to \$56-\$63 billion annually.<sup>7</sup> Exposure to indoor allergens, lead, radon and more disproportionately impacts the health of people of color, low-income communities and children.

APHA strongly urges maintaining the "Healthy Homes and Healthy Communities" sub-category in environmental health and expanding it to include schools. It is well documented that environmental factors, such as indoor air quality; pesticide use; molds; lead in paint and water; poor sanitation, ventilation and lighting; and routine use of hazardous materials can adversely impact children's health and their ability to learn and thrive.

By the time they graduate high school, children will have spent over 15,000 hours in a school building. Yet, "no federal agency has responsibility for improving school physical environmental conditions or for preventing, identifying or managing children's environmental health in schools."<sup>8</sup> Providing opportunities to be active and learn healthy habits during childhood will lead to a foundation of healthy living throughout adulthood.

To demonstrate commitment toward the Healthy People 2030 goal to "Create social, physical and economic environments that promote attaining full potential for health and well-being for all," APHA recommends maintaining Healthy People 2020 objectives: **EH-16 (16.1-16.9): Increase the proportion of the Nation's elementary, middle, and high schools that have official school policies and engage in practices that promote a healthy and safe physical school environment.**

## Infrastructure and Surveillance

### **EH-2030-13-15: Increase the number of states, territories, tribes and the District of Columbia that monitor diseases or conditions that can be caused by exposure to lead poisoning.**

Broaden the scope of this objective and objectives 14 and 15 to state "increase number of states, territories, tribes and the District of Columbia that monitor diseases or conditions that can be caused by exposure to environmental health hazards" to account for other select hazards listed in Healthy People 2020, such as carbon monoxide poisoning and pesticide poisoning. In addition, these objectives should be broadened to include tracking over time, in addition to monitoring disease/condition outcomes.

APHA recommends maintaining the following Healthy People 2020 environmental health infrastructure and surveillance objectives:

### **EH-21: Improve quality, utility, awareness and use of existing information systems for Environmental Health.**

Creating an integrated infrastructure to collect and track crucial information is vital to a robust environmental health system. A cohesive environmental health tracking or surveillance system measures hazards, human exposures and health outcomes. The system must collect consistent, comparable data over time to identify problems. It must also provide real-time data to inform efforts to plan, execute and assess environmental health services.<sup>9</sup>

### **EH-23: Reduce the number of public schools and childcare facilities located within 150 meters of major highways in the United States.**

Research has shown exposure to traffic-related air pollution is detrimental to health. It exacerbates asthma and develops childhood asthma, is linked with cardiovascular disease, decreased lung functioning, adverse birth outcomes and childhood cancer.<sup>10</sup> It is particularly for children as their lungs are still developing and they breathe faster, meaning they take in more air than adults. Additionally, children are more likely to be outside to play, exposing them to traffic-related air pollution.<sup>11-12</sup>

We also propose that new environmental health infrastructure and surveillance objectives be added. First, we propose the following core objective: **Reduce exposure to Perfluoroalkyl and polyfluoroalkyl substances, or PFAS, in the population, as measured by blood or urine concentrations of the substance or its metabolites.** PFAS are man-made chemicals that have been used for decades in industry and consumer products, such as cookware, carpets and cosmetics. PFAS can migrate into air, dust, food, soil and both groundwater and surface water.

Exposure to PFAS may increase the risk of cancer and affect the immune system and the growth, learning and behavior of infants.<sup>13</sup> For nearly 20 years, the Centers for Disease Control has measured several types of PFAS in the U.S. population as part of the National Health and Nutrition Examination Survey and could be a potential data source for this proposed objective.

Next, we propose the following research objective: **"Track and monitor school environmental conditions that affect the health and success of children.** This could include indoor air quality, drinking water quality and access, air temperature, lighting, noise levels, ventilation, moisture, dust, polychlorinated biphenyls or PCBs, pesticides and asthma triggers. Based on research findings, establish relevant data sets for tracking children's environmental health.

The tracking of school facilities might include school food service inspections, fire safety inspections and school fire drill evacuations. Other possible studies: relationships between drop-out rates, above-average absenteeism, above-average asthma events and other school environmental factors.

## **Physical Activity**

Physical activity plays an important role in population health. There is strong evidence to support the association between physical activity and all-cause mortality. Physical activity helps prevent disease and improves physical and mental health. To promote physical activity among persons of all ages, APHA encourages maintaining the Healthy People 2020 objectives below:

### **PA-4: Increase the proportion of the nation's public and private schools that require daily physical education for all students.**

Schools can help children obtain physical activity throughout the day to contribute to overall good health. Research has shown that healthy, active students often have higher grades and better attendance, behaviors and cognitive performance.<sup>14</sup>

### **PA-6: Increase regularly scheduled elementary school recess in the United States.**

Recess provides an opportunity for children to be active, and it can positively impact educational, social and emotional outcomes.<sup>15</sup>

### **PA-9: Increase the number of states with licensing regulations for physical activity provided in child care.**

According to CDC, "more than 1 in 5 U.S. children ages 2 to 5 years are overweight or have obesity," and more than 60 percent of 3- to 5-year-old children participate in some form of non-parental care every week.<sup>16</sup>

### **PA-15: Increase legislative policies for the built environment that enhance access to and availability of physical activity opportunities.**

In 2016, the Community Preventative Services Task Force provided the recommendation of "built environment approaches combining transportation system interventions with land use and environmental design" to increase physical activity." This demonstrates the impact the built environment has on people to lead an active lifestyle, and it is important to continue to advocate for policies that will create environments that offer such opportunities.<sup>17</sup>

## **Preparedness**

"When a disaster strikes, a community needs to be prepared; it should have the tools and resources to be resilient against physical (infrastructure and human) and emotional damage."<sup>18</sup> The proposed Healthy People 2030 objectives are primarily focused at the individual and family level and ignore the systemic policies, practices and infrastructure needed to prepare for and respond to public health emergencies, including extreme weather events and deliberate attacks.

APHA recommends maintaining the Healthy People 2020 preparedness objectives below:

### **PREP-1 (developmental): Reduce the time necessary to issue official information to the public about a public health emergency; and PREP-2: Reduce the average time necessary to activate designated personnel in response to a public health emergency.**

As cited by CDC's Center for Preparedness and Response, it is vital for the nation to be prepared to "stop outbreaks before they become epidemics, help people affected by natural disasters and is fortified against the expected and can quickly pivot to handle the unexpected."<sup>19</sup>

It is important to understand how public health agencies respond to emergencies and inform the public to ensure that preventable deaths are avoided. State, county and city health departments must be prepared to provide communities the information they need in order to respond to emergencies.

#### **PREP-20: Increase in measures to protect children during disasters.**

Children's behaviors and physiology make them more susceptible to emergencies and the effects of disasters. For example, they breathe more air as compared to adults and therefore absorb harmful substances in the air faster.<sup>20</sup> Additionally, there is limited to no availability of specially designed equipment and medicines for children during emergencies.<sup>21</sup> It is necessary to continue to include PREP 20.1-20.3 in Healthy People 2030 to protect one of our most vulnerable populations. It targets child care providers to create an evacuation plan with a relocation site, plan for reuniting families and plan for children with access and functional needs such as disabilities.

The Healthy People Initiative has provided a national science-based agenda for improving the nation's health for nearly four decades. APHA appreciates the opportunity to comment on the Healthy People 2030 proposed objectives and is committed to galvanizing our members, affiliates and partners to achieve the Healthy People goals.

Sincerely,



Georges C. Benjamin, MD  
Executive Director

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<sup>1</sup> U.S. Department of Health and Human Services. *Healthy People 2020 Midcourse Review*. Washington, DC: DHHS Publication No. 2017–1042; 2016. <https://www.cdc.gov/nchs/data/hpdata2020/HP2020MCR-B03-Overview.pdf>.

<sup>2</sup> Institute of Medicine, Committee on Monitoring Access to Personal Health Care Services. *Access to Health Care in America*. Millman M, editor. Washington, DC: National Academies Press; 1993.

<sup>3</sup> U.S. Department of Transportation. *Public Transportation Trips Per Capita*. <https://www.transportation.gov/mission/health/public-transportation-trips-capita>. Published 2016. Accessed January 8, 2019.

<sup>4</sup> Centers for Disease Control and Prevention. *Public Transportation System: Introduction or Expansion*. <https://www.cdc.gov/policy/hst/hi5/publictransportation/index.html>. Published 2018. Accessed January 15, 2019.

<sup>5</sup> Transportation Research & Education Center at Portland University. *Manual on Pedestrian and Bicycle Connections to Transit*. U.S. Department of Transportation: Federal Transit Administration. <https://www.transit.dot.gov/sites/fta.dot.gov/files/docs/research-innovation/64496/ftareportno0111.pdf>. Published 2017. Accessed January 15, 2019.

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<sup>6</sup> Jacobs DE, Reddy AL. The Housing Environment. In: Knechtges PL, Kearney GD, Resnick BA, eds. *Environmental Public Health: The Practitioner's Guide*. Washington, DC: American Journal of Public Health; 2018.

<sup>7</sup> Ibid

<sup>8</sup> American Public Health Association. Establishing Environmental Public Health Systems for Children at Risk or with Environmental Exposures in Schools. <https://www.apha.org/policies-and-advocacy/public-health-policy-statements/policy-database/2018/01/18/establishing-environmental-public-health-systems-for-children>. Published November 2017. Accessed January 11, 2019.

<sup>9</sup> National Environmental Health Partnership Council. *Environmental Health Playbook: Investing in a Robust Environmental Health System*. [https://apha.org/-/media/files/pdf/topics/environment/eh\\_playbook.ashx?la=en&hash=FBAE72B837D58A3C3145602B1043250DE7BD41BD](https://apha.org/-/media/files/pdf/topics/environment/eh_playbook.ashx?la=en&hash=FBAE72B837D58A3C3145602B1043250DE7BD41BD). Washington, D.C.: American Public Health Association; 2017. Accessed January 15, 2019.

<sup>10</sup> Centers for Disease Control and Prevention. Community Design- Proximity to Highways. <https://ephracking.cdc.gov/showProximityToHighways.action>. Published 2018. Accessed January 11, 2019.

<sup>11</sup> World Health Organization. Air Pollution and Child Health: Prescribing clean air summary. <http://apps.who.int/iris/bitstream/handle/10665/275545/WHO-CED-PHE-18.01-eng.pdf?ua=1>. Published 2018. Accessed January 11, 2019

<sup>12</sup> U.S. Department of Transportation. Proximity to Major Roadways. <https://www.transportation.gov/mission/health/proximity-major-roadways>. Published 2016. Accessed January 11, 2019.

<sup>13</sup> American Public Health Association. Reducing Human Exposure to Highly Fluorinated Chemical to Protect Public Health. <https://www.apha.org/policies-and-advocacy/public-health-policy-statements/policy-database/2016/12/21/reducing-human-exposure-to-highly-fluorinated-chemicals>. Published November 2016. Accessed January 16, 2019.

<sup>14</sup> Centers for Disease Control and Prevention. Increasing Physical Education and Physical Activity: A Framework for Schools. [https://www.cdc.gov/healthyschools/physicalactivity/pdf/17\\_278143-A\\_PE-PA-Framework\\_508.pdf](https://www.cdc.gov/healthyschools/physicalactivity/pdf/17_278143-A_PE-PA-Framework_508.pdf). Atlanta, Georgia: Centers for Disease Control and Prevention, U.S. Department of Health and Human Services; 2017. Accessed January 11, 2019.

<sup>15</sup> National Network of Public Health Institutes, Health Resources in Action. Springboard to Active Schools: Keep Recess in Schools. [https://nnphi.org/wp-content/uploads/2017/07/Recess-Data-Brief\\_FINALversion\\_071817.pdf](https://nnphi.org/wp-content/uploads/2017/07/Recess-Data-Brief_FINALversion_071817.pdf). Accessed January 11, 2019.

<sup>16</sup> Centers for Disease Control and Prevention. Overweight & Obesity - Early Care and Education. <https://www.cdc.gov/obesity/strategies/childcareece.html>. Published 2018. Accessed January 11, 2019.

<sup>17</sup> The Guide to Community Preventative Services. Physical Activity: Built Environment Approaches Combining Transportation System Interventions with Land Use and Environmental Design. <https://www.thecommunityguide.org/findings/physical-activity-built-environment-approaches>. Published 2016. Accessed January 11, 2019.

<sup>18</sup> National Environmental Health Partnership Council. *Environmental Health Playbook: Investing in a Robust Environmental Health System*. [https://apha.org/-/media/files/pdf/topics/environment/eh\\_playbook.ashx?la=en&hash=FBAE72B837D58A3C3145602B1043250DE7BD41BD](https://apha.org/-/media/files/pdf/topics/environment/eh_playbook.ashx?la=en&hash=FBAE72B837D58A3C3145602B1043250DE7BD41BD). Washington, D.C.: American Public Health Association; 2017. Accessed January 15, 2019.

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<sup>19</sup> Centers for Disease Control and Prevention. In an Emergency, You Can't Respond Effectively if You're Not Ready. <https://www.cdc.gov/cpr/whatwedo/emergency.htm>. Published 2018. Accessed January 11, 2019.

<sup>20</sup> Centers for Disease Control and Prevention. Emergency Preparedness & Children: Protecting Our Future. [https://www.cdc.gov/cpr/whatwedo/00\\_docs/Issue-Brief-Children\\_508.pdf](https://www.cdc.gov/cpr/whatwedo/00_docs/Issue-Brief-Children_508.pdf). Published March 2018. Accessed January 16, 2019.

<sup>21</sup> Centers for Disease Control and Prevention. Emergency Preparedness & Children: Protecting Our Future. [https://www.cdc.gov/cpr/whatwedo/00\\_docs/Issue-Brief-Children\\_508.pdf](https://www.cdc.gov/cpr/whatwedo/00_docs/Issue-Brief-Children_508.pdf). Published March 2018. Accessed January 16, 2019.