

APPROACHES TO EFFECTIVE REORGANIZATION

**Larry J. Gordon, M.S., M.P.H., Director
New Mexico Scientific Laboratory System**

APHA session on "Trends in Reorganization Affecting Environmental Health,"

San Francisco, California, November 8, 1973

**Published in NEWSLETTER, Conference of Local Environmental Health
Administrators, Inc., July 1, 1977**

When discussing issues and ramifications associated with reorganization of official environmental program matters, a fair percentage of my professional peers in environmental health are somewhat paranoid, threatened, and seem to be more in a position of protecting their territories and fiefdoms than showing leadership and imagination responding to the public and political clamor to protect and improve the environment. With regard to this particular session, I must confess that I consider that a great amount of the problem is evidenced in the title of the session, this being, "Trends in Reorganization Affecting Environmental Health." Although it is not probably a popular stance among my peers, it is questionable that many of the basic and priority environmental problems could be managed on a "health" basis only. But, before getting into that I, further, usually find that the issue with my professional peers revolves around the question of whether environmental programs should be organized within a health department or elsewhere. Many health departments do not even know what to do with the environmental programs which they have. Too many state and local health departments still have a disorganized and archaic fragmentation not only between the state offices and the local health departments, but have not even properly organized existing environmental programs. Too many health departments have had such

environmental programs as occupational health and safety, housing conservation and rehabilitation, radiation, food quality, and others organized in such a manner as to be fragmented from other environmental programs with no overall environmental coordination or direction. A few years ago, I was privileged to work as one of a number of APHA consultants who prepared recommendations for reorganizing what is probably the largest local health department in the world, this being the Los Angeles County Health Department. At one point, I asked the then Los Angeles County Health Officer if he felt he had any problems regarding organization and fragmentation of his environmental programs, to which he answered in the negative. A cursory review indicated that he had separate and discrete components within his department dealing with environmental sanitation (which was oddly submerged and lost within the Bureau of Preventive Medicine), radiological health, institutional sanitation, occupational health, his twenty-some district environmental programs, and a separate component for the so-called Public Health Engineer. Further, he had organizational components with the Division of Environmental Sanitation fragmented into such programs as: water supply, swimming pools, cross-connections, and plumbing, for a few examples. While the examples of his in-house organizational programs may seem ridiculous, the review indicated that there were other governmental entities other than the health department responsible for air pollution control, water pollution control, solid wastes management and mosquito control. Then, when someone tried to interface this confusion with the state level programs administered by the Water Pollution Control Board, the various components of the State Health Department and a number of other state agencies, one became thoroughly lost. Public health officials would do well to properly organize their

own houses as a first step in preventing transfer of programs to new or separate departments. So much for in-house organizational issues.

Before I delve into the question of locating environmental programs within or without health departments, I feel I must dwell further on the issue associated with, and connotations of, the word "health." I know of but few environmental problems that can satisfactorily and effectively be addressed on the basis of health goals only. More often than not, attempts to solve environmental problems on a pure health basis are an invitation to ineffectiveness, loss of programs, and ultimate reorganization. Most problems must be handled on a multiple goal basis of health, safety, comfort, and wellbeing. As examples, proper and effective water pollution controls demand protection of the biota by standards more stringent than required to protect human health as specified in the federal drinking water standards. The eighty-mile atmospheric visibility we prize throughout most of the western United States cannot be substantiated solely on the light of current cause and effect health knowledge. Even something as traditional, accepted, and commonplace as a food protection program must involve considerably more than inserting thermometers into refrigerators and dishwashers. Other factors should include liquid waste, water pollution, water supply, solid waste and air pollution and, therefore, cannot be effectively administered solely on a health basis. Those of us in this room are probably mostly products of some school of public health and a tradition of public health and, for the most part, we were probably inoculated with the World Health Organization definition of "health" at early stages of our careers. Logically, those of us having been so inoculated may feel that "health" covers all the foregoing examples and, therefore, health goals are sufficient. This might be true if our political and citizen leaders had also gone to a school of public health and received the same inoculation. However, it has been my observation that few, if any, of our political and citizen leadership subscribe to the WHO definition and utilize different vocabularies.

I will now indicate some of the pros and cons for locating and organizing environmental programs within a health type department, and I'll commence with some of the pros:

1. There is a firm health basis for many aspects of many

environmental problems and these can be properly addressed

by personnel imbued with a knowledge and philosophy of public health.

- 2. There must be ongoing coordination between environmental personnel and those responsible for epidemiology and vital statistics if efforts are to be effective and economical.**
- 3. Removing environmental programs from health departments has frequently been done on a piece-meal basis, thereby resulting in increased costs, public confusion, and professional bickering.**
- 4. Most states that have attempted to transfer program components from health agencies have done so only at the state level and have not arranged for an effective mechanism for coordinating environmental services so removed with those environmental program responsibilities of local health departments.**
- 5. Health departments, for the most part, have long been geared to a mission of consumer and public protection.**
- 6. Health departments already have a pool of environmental manpower, and mechanisms to aid in insuring the availability of such manpower in future years.**
- 7. Re-organization invariably results in program confusion, delays, and temporary ineffectiveness.**

Now for some cons:

- 1. Many health agencies have not satisfactorily nurtured and promoted environmental activities within the health department framework.**
- 2. Most health departments have been reluctant to recognize that environmental activities require a strong regulatory component..**

- 3. Most health departments have not provided the necessary visibility and organizational status for environmental programs.**
- 4. Most health departments have been organized on a political subdivision basis instead of an environmental problem shed basis.**
- 5. Public health may, at times, actually be in conflict with the principles of ecology and environmental protection.**
- 6. Many citizens, environmentalists, conservationists, and politicians have become dissatisfied with the degree of effectiveness of health departments on matters of environmental protection.**
- 7. Recent major changes in federal programming, budgets, and legislation have demanded that health departments emphasize programs of personal health and health care, sometimes to the detriment of environmental protection programs.**
- 8. Merging of health and welfare departments in a number of states has intensified activities relating to welfare and health care resulting in the splintering and fragmentation of environmental protection activities.**
- 9. Many public health programs have not developed a rational case to substantiate the ecological, administrative and program interdigitation of environmental factors.**
- 10. Comprehensive health planning, by largely ignoring the environment and multiple goals, has served as a factor in fragmenting environmental programs from health departments.**
- 11. Many health departments have not understood or accepted the fact that environmental protection programs can frequently be based on more stringent standards if they address multiple goals rather than minimal health standards:**

12. Many health professionals have been extremely naive about politics, and have demonstrated a lack of knowledge about organizational problems and public expectations.

Some of you may be thinking that, based on the foregoing, I am recommending that environmental programs not be organized within health departments. Such is not necessarily the case. However, we cannot show the requisite degree of leadership and organizational ability if we continue to bury our collective professional heads in the sand and ignore the real world.

As the expression goes, "Some of my best friends are public healthers," but:

How many health departments have really become involved in a comprehensive environmental effort?

How many health departments have become serious about administering effective environmental programs if such demand strong regulatory methods?

How many health departments have been willing to, or capable of, venturing into the unknown and addressing problems of transportation, land-use, energy alternatives and needs, and the environmental impact of population?

How many health departments have effectively prioritized environmental efforts and budgets instead of comfortably continuing to administer traditional programs even when other more serious environmental problems have emerged and demanded attention?

How many health departments have really been willing to utilize multiple goal programming and change their program methods to effectively address modern environmental problems?

How many environmental healthers will trade their security blankets of bureaucratic insulation against decisions, responsibilities, and public criticism for the necessary role of visibility, responsibility, authority, and accountability whether in a health department or another agency?

How many environmental healthers have attempted to obstruct attempts to change organizational situations for self-serving reasons of territorial defense rather than the reason of public service and environmental protection?

Citizens, dissatisfied with the status of environmental decay, are no longer idle observers, but have become creative participants and knowledgeable leaders in the struggle to stem the tide of environmental deterioration. Frequently, citizens have opted for new organizational patterns for environmental programs as a first step in this struggle. Unknowingly, these eager citizens have frequently become the allies (if not the pawns) of lobbyists for polluters who are eager to achieve the same end results for different reasons. The polluters' reasons are not to provide an organization for more effective delivery of environmental services, but to place the environmental agency more fully in the political arena, place polluters on environmental boards, and thereby make the agency more likely to react to political pressures. If we could believe that political pressures represent a good cross section of citizen desires, this would be good. However, if political pressures represent the efforts of the most shrewd, articulate, well-financed efforts of major polluters or advocacy groups, then it becomes of questionable desirability for those who believe

in consumer protection and governmental responsiveness and accountability. Most of the current efforts to reorganize environmental programs that transfer them from health departments are based on the patterns set by the federal government. The federal Environmental Protection Agency is erroneously touted as a comprehensive environmental agency when, in fact, it is not as broad in scope as its major predecessor agency, the Consumer Protection and Environmental Health Service of the USPHS. However, due to the pattern set by the federal government, many states have reorganized or are in the process of reorganizing environmental programs. Regrettably, most of them are making the same mistakes as were made at the federal level and are really not developing environmental protection agencies, but, rather, air-water-wastes agencies. This has, as previously stated, left major environmental programs in health agencies and has further fragmented environmental efforts, thus compounding problems of ineffectiveness, public confusion and professional bickering between peer personnel.

I am completely convinced that, given proper conditions and safe guards, effective environmental programs can properly and logically be organized within a department which also deals with health problems---and you will notice that I did not say a health department. Perhaps such a department might be termed something like "Department of Health and Environmental Protection" or "Department of Environmental Control and Health".

But let's talk about some of the "controls and safeguards" if such programs are to remain in a department which also handles pure health problems.

1. Experience has demonstrated that the public and political leaders are willing to pay for environmental protection and environmental programs, but they wish to line item or earmark such budgets if they are part of a budget dealing with other

matters in addition to environmental problems. Therefore, such a department should have an earmarked budget for its environmental programs.

2. Statutory arrangements must insure that environmental program decisions are made at the environmental manager's organizational level.

3. The environmental program director must have complete freedom to deal directly and effectively with peer agencies involved in environmental management.

4. There should be comprehensive programming for problems of air, water, solid wastes, radiation, occupational health and safety, noise, food protection, insects and rodents, water supply, liquid wastes, environmental chemicals and environmental injuries. And, in addition, there should be authority for, and a capability of, addressing such issues as energy, land-use, transportation, and population.

5. There must be freedom for the environmental director to vie for and achieve the top leadership role in the department.

6. There must be a strong regulatory component.

7. All problems should be programmed on a multiple goal basis, not merely a health basis.

8. There must be a sound statutory base and procedural mechanisms

for all programs.

It is not too late to retain comprehensive and effective environmental programs in those health-type agencies that wish to make changes such as I have outlined. For others, the path is clear and the trends are already in motion. The environment will be managed.

