RELATIVE ADVANTAGES OF STATE DISTRICT PROGRAMS AS COMPARED WITH LOCAL PROGRAMS

By

Larry J. Gordon, M.S., M.P.H. Administrator, Health and Environmental Programs

New Mexico Health and Social Services Department

1977 Annual Meeting, Conference of Local Environmental Health and NEHA, San Diego, CA

For those of us who are old-timers in the field of environmental health administration, the charge to develop a paper dealing with organizational considerations always causes one to think back to the relatively simplified organizational patterns which existed when we first embarked upon our careers. The pattern was relatively uniform throughout the Nation -- state-level programs were a component of a state department of public health and local programs were a component of a city and/or county department of public health. Additionally, there was a commonly pecking order to the end that the state and/or local director of health was almost always a physician, and the state and/or local director of the environmental health component was almost always an engineer. How times have changed both in regard to organizational patterns and the types of personnel involved!

I began questioning the physician-engineer pecking order concept within a few weeks after I took my first job as a county sanitarian. However, few others were willing to either question this tradition or even constructively discuss it, so I kept most of my frustrations to myself for many years. I have finally learned that, for the most part, the mantle of leadership falls to those who earn it, so I do not find that the pecking order is worthy of any great discussions.

Within five years after becoming engaged in the field of public health I also began to have second thoughts about the traditional textbook patterns regarding the organization and delivery of environmental health services at the state and local level. Had I been the

only person having such concerns, I would probably be a gray-haired old county sanitarian at this time. However, I found that many of my most respected professional peers were having similar questions. I distinctly recall a high-level hallway conference I had regarding the organizational issue with Doctor A. Harry Bliss at the annual meeting of Western Branch, American Public Health Association, in Phoenix in 1954. Shortly thereafter I was privileged to become acquainted with Charlie Senn, and we variously discussed such organizational issues verbally and through correspondence from the 1950's up through the early 1960's. In reviewing some of my files in preparation for this discussion, I found such correspondence with Charlie Senn, Mort Hilbert, Joseph Lanoix of the World Health Organization, Dick Adams, and others, dating into the early 1960's. All were voicing similar concerns.

So much for such irrelevant recollections.

Time, citizen attitudes, professional qualifications, organizational patterns, priorities, program scope, goals, and program methods have changed. It is now almost impossible to find any semblance of uniformity among states or local governments concerning the manner in which their environmental health activities are organized and delivered.

Your conference leadership has requested that I spend a few minutes briefly describing the local and state environmental health organizational development in which I have been privileged to be involved.

First Example: The City of Albuquerque, New Mexico, had a reasonably traditional approach to "public health" until the mid-50s. Locally, all environmental and personal health activities were under the jurisdiction of a medical health officer to the end that there was a fairly traditional textbook approach. I began questioning this concept and organization and over a period of time prevailed upon the various local governing bodies and the state legislature to authorize a city Department of Environmental Health (it later became a city-county Department of Environmental Health) completely separate from the local public health functions that were assigned to a Department of Preventive Medicine and Personal Health. In 1975, this concept was reasonably commonplace and certainly well

accepted. However, in the mid-50s, implementation of this type of organization literally took place over the prostrate bodies of several medical health officers, the State Health Director, and some other leaders in the medical community; At the time of this separation and the creation of the two distinct departments, the environmental health activities were constrained to rather perfunctory activities in the field of milk and food sanitation and meat inspection, and involved a total of about 17 personnel. The environmental health programs had been stuck with the then time-honored formula of being allowed something like one-third the number of "sanitarians" as there were public health nurses.

Following a complete organization and budgetary separation with enhanced visibility, public information, planning, and programming, the Department of Environmental Health took on added functions involving water supply, water pollution control, air pollution control, radiation protection, occupational safety and health, insect and rodent control, pure food control, and housing conservation and rehabilitation. Later, the Department spawned

the city programs of model cities, low-rent public housing, and urban renewal, and was also given the quite questionable "privilege" of administering the Refuse Division and Animal Control Division. Within a few years, the department had grown from 17 to something like 460 personnel and a multi-million dollar budget.

Second Example: In 1967, the Governor of New Mexico, by Executive Order, merged the New Mexico Department of Public Health and the New Mexico Department of Welfare into an umbrella department termed the Health and Social Services Department. While this merger seemingly focused increased emphasis on problems of personal health and welfare, it also provided the opportunity to gain increased visibility, scope, and effectiveness for environmental health activities. I was privileged to be appointed Director of the newlyformed Environmental Services Division of the Health and Social Services Department. Top management of the Department were so engrossed in the overwhelming problems of welfare and Medicaid that the relatively small Environmental Services Division was somewhat left to do its own thing, and given the opportunity to accomplish basic planning, organizing, and programming. Thankfully, it was about this same time that the public in New Mexico, the Nation, and, indeed, the World finally became concerned about the status of the rapidly

deteriorating environment and the inability of existing programs, organizations, and approaches to satisfactorily cope with these problems.

During the 1970 gubernatorial campaign, promises were made to create an environmental protection agency within state government to better manage the environment. Following the election, I proposed that the environmental protection agency include all programs previously assigned to the Environmental Services Division, that there be a budget sufficient

to include all personnel in the Environmental Services Division plus all environmental health personnel previously known as county or district sanitarians, that it be based on the pursuit of goals including but much broader than mere "health," and that new and necessary programs be authorized. During the legislative process, the terminology for the proposed agency was changed from Environmental Protection Agency to the New Mexico Environmental Improvement Agency, and it was organized within and as an integral component of the New Mexico Health and Social Services Department. From an authorized strength of something like 37 personnel assigned to the Environmental Services Division in 1967, the agency expanded and prospered to a strength of 260 in 1973, and included such programs as food protection, air quality, water quality, water supply, radiation protection, occupational safety and health, noise control, solid wastes management, environmental chemicals, insect and rodent control, swimming pool safety and sanitation, subdivision control, etc.

The New Mexico Environmental Improvement Agency is so organized that certain specified functions are administered directly from the central office. Other functions are administered through five regional offices with the central office providing such functions as development of standards and regulations, training, and technical assistance to the regions.

I find it difficult to really speak to the title of this paper in that it infers that there are advantages of state district programs as compared with local programs. I believe, and have found, that either will work or in some cases either will not work, depending on a number of considerations. The basic issue is, "Is the job being done?"

Some of the issues which must be considered are:

1) Adequate budget;

2) Professional staffing;
3) Available laboratory facilities;
4) Organizational visibility;
5) Freedom of regulatory action;
6) Ease of interagency communication and cooperation;
7) Comprehensiveness of program components;
8) Reasonable shielding from vested interests and political intervention; 9) Appropriate mission and goals; and
10) Sound legislative base designed for results instead of procedural delays.
At different times and places, either a local program or a state district program may be
more effective, based on the foregoing management considerations.
There may be a few inherent differences between state and local programs, as follows:
1) State districts may find it easier to manage the environment on a problem-shed basis
rather than on a limited and artificial political jurisdiction basis. This is not always true
inasmuch as we can cite many examples of local governments grouping together through
ioint powers agreements in order to provide services on a problem-shed basis.

2) Some of the high priority program endeavors such as water pollution, water supply, air

pollution, and solid wastes may be better managed by a state agency, not only due to the

complex federal program requirements, but also due to the need for statewide uniformity.

- 3) There may be a conflict of interest problem when local environmental health agencies are attempting to regulate the proprietary functions of local government. This could include water pollution, solid wastes, water supply, air pollution, and institutions. However, a similar conflict may develop when state agencies regulate proprietary state functions.
- 4) I believe that most of us would concede that the higher priority problems to be addressed by a state agency would, of necessity, include air pollution and water pollution, The priorities of a local agency may be different due to differences in programs and program scope.
- 5) The organizational alignments in a few states indicate the possibility of a conflict of interest, in that these few states have not understood the difference between the concepts of environmental utilization as promoted by departments of agriculture, mining, forestry, wildlife, etc., and the concepts of environmental protection. Attempts to combine environmental utilization with environmental protection results in a flagrant conflict of interest and further deterioration of our environment.
- 6) Both state and local environmental health programs are sometimes included in organizations devoted to sickness treatment rather than prevention. This usually results in misplaced priorities and inadequate budgets for preventive programs.