

Pipeline Workgroup Policy Statement

May 23, 2008

Preamble

An adequate supply of well-trained public health workers is a necessary part of a healthy society. Unfortunately, the number of public health workers in the United States is projected to drop drastically in the coming years as more workers are eligible for retirement and budget cuts disallow hiring, tuition reimbursement, and other recruitment methods. The overall number of governmental public health workers dropped more than 28% between 1980 and 2000.¹ In recent surveys, the Association of State and Territorial Health Officials found that the average age of a state public health employee is 47 and that over 50% of some state health agency workforces will be eligible to retire by 2012.² The Association of Schools of Public Health determined that over 250,000 more public health workers are needed by 2020.³

In addition to a projected shortage in numbers, available data have shown that a significant quantity of the public health workforce has insufficient training and expertise in the specific profession in which they are employed. The Council of State and Territorial Epidemiologists, for example, estimates that almost 50% of state epidemiologists lack degrees in epidemiology.⁴ According to the 2003 Institute of Medicine Report, *Who Will Keep the Public Healthy*, “many of the workers who are currently employed in [public health] are unevenly prepared to face today’s public health challenges.”⁵

With these difficulties in mind, the Council on Linkages Between Academia and Public Health Practice (the Council) set out to map the pipeline of governmental agency public health workers, charting how, when, why, and where people enter and leave governmental public health. After an extensive literature review, the Council concluded that the necessary data are significantly lacking. The Council, however, maintains that the collection of this type of data is an essential first step to developing effective policies and programs for ensuring a well trained and adequately sized governmental public health workforce.

As such, the Council has released the following policy statement to convey to policy makers/funders and potential data collectors the importance of gathering data on the workforce

¹ Institute of Medicine. *Training Physicians for Public Health Careers*. 2007. Washington, DC: The National Academies Press.

² Association of State and Territorial Health Officials. *2007 State Public Health Workforce Survey Results*. <<http://www.astho.org/pubs/WorkforceReport.pdf>>. Accessed 29 April 2008.

³ Rosenstock L, et al. Confronting the Public Health Workforce Crisis: ASPH Statement on the Public Health Workforce. *Public Health Reports*, Volume 123, May-June 2008, pp: 395-398.

⁴ Council of State and Territorial Epidemiologists. *2006 National Assessment of Epidemiologic Capacity: Findings and Recommendations*, <<http://www.cste.org/pdf/files/2007/2006CSTECAFINALFullDocument.pdf>>. Accessed 29 April 2008.

⁵ Institute of Medicine. *Who Will Keep the Public Healthy: Educating Public Health Professionals for the 21st Century*. 2003. Washington, DC: The National Academies Press.

flow into and out of governmental public health agencies. The Council hopes that the policy statement will lead potential collectors of data (on both the practice and academic sides of public health) to request funding and potential funders to be receptive to these requests.

Policy Statement

Whereas, recent studies have shown that the governmental agency public health workforce exists in too few numbers to meet current and emerging needs to protect the public's health.

Whereas, effective strategies are necessary to recruit and retain a skilled and competent governmental agency public health workforce to meet current and future needs.

Whereas, the Council on Linkages Between Academia and Public Health Practice (Council) has determined that insufficient data exist to understand the flow of workers into and out of governmental agency public health to develop recruitment and retention strategies to address the greatest opportunities for attracting and retraining skilled and competent governmental agency public health workers.

Whereas, determining the actual numbers of governmental agency public health workers entering the workforce, from where these workers enter the workforce, and why these workers choose to leave the workforce are essential pieces of information that can lead to effective recruitment and retention strategies.

Be it resolved that the Council calls for immediate action that will enable its member organizations and other relevant public health and public health-related academic and practice organizations to collect comprehensive data on the flow of workers into an out of governmental agency public health.

Intended Outcomes

1. Practice and academic organizations should seek funding to collect the relevant data from their constituents. Specifically, practice organizations should focus on collecting data from entering and exiting employees and academic organizations should focus on where students go after graduation. The Council will serve as the coordinating body, ensuring that all organizations collect data in a standardized way. The Council will also serve as a central repository for collected data.
2. Alternatively, the Council can seek funding to develop two online surveys itself (i.e., one for graduates of academic institutions and the other for public health workers) and work with practice and academic organizations to see that these surveys are distributed to the constituents. The surveys would help organizations collect data on graduating students from academic programs and public health professionals entering and exiting the governmental workforce.