

February 26, 2007

Connecticut Legislative Public Health Committee- Public Hearing Testimony

Senator Handley and Representative Sayers and Members of the Public Health Committee,

My name is Carolyn Wysocki and I am the New England Regional Director of the National Association of Local Boards of Health (NALBOH) I am here to voice my support for Committee Bill No. **667 AN ACT CONCERNING FUNDING FOR LOCAL PUBLIC HEALTH DEPARTMENTS.**

NALBOH has over 800 members from 41 states with 125 from New England and 13 from Connecticut. The mission of NALBOH is to prepare and strengthen boards of health, empowering them to promote and protect the health of their communities through education, training and technical assistance.

NALBOH works closely with the Centers for Disease Control and Prevention (CDC), National Association of County & City Health Officials (NACCHO), Association of State and Territorial Health Officials (ASTHO), American Public Health Association (APHA), Association of Schools of Public Health (ASPH), Public Health Foundation (PHF) and other others on mutual projects such as the Governance, State and Local Health Department Performance Standards, the development of the National Accreditation Program for Health Departments, Tobacco Control & Prevention,, Environmental Health Programs and Emergency Preparedness.

Emergency Preparedness recently became integrated within the Public Health arena with funding from the federal government. That funding is now in question but the need is not. Expansion of Environmental Health Services relating to Indoor Air Quality, Effects of Toxic Chemicals on Public Health, Land Use Health Risk Assessments, Pollution and Global Warming will also need resources to develop and implement programs for the prevention of related illnesses and diseases.

According to the NACCHO 2005 Survey Profile, local health departments in Connecticut currently receive less funding from their State (13%) than a majority of the 2,300 respondents while local governmental entities provide more funding (48%) in comparison to the composite of all respondent.. The range per capital aid is from \$9.00 in Massachusetts to \$94.00 in Maryland. Connecticut Local Health Departments rank about 33/47 states in amount of state funding received and 4/47 from local funding.

Connecticut is a wealthy State and can afford to put additional moneys into Public Health. Should the Federal funding cease and the Emergency Preparedness Program was mandated to continue without State funding, there would be a considerable financial burden on the local communities and program modifications or eliminations would probably be necessary.

Restoring funding to local health departments by increasing the per capital aid by 50% would help to continue coordination efforts of the Emergency Preparedness program and the development and implementation of prevention programs prior to new emerging health needs becoming a disaster or of epidemic proportions.

In closing, I'd like you to keep my slogan in you thought as you deliberate the pros and cons of Bill 667, and that is "**Prevention is my Intention**" let "**Prevention be your Intention**".

Sincerely

Carolyn Wysocki

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