



COVID-19 PANDEMIC FURTHER STRAINS PUBLIC HEALTH WORKFORCE



LEGISLATIVE OVERVIEW SERIES: 2022 PUBLIC HEALTH SPOTLIGHT

INTRODUCTION

Prior to the COVID-19 pandemic, investment in public health was declining nationwide. ASTHO's 2020 Profile of State and Territorial Public Health—the only comprehensive source on public health agency resources and infrastructure trends—showed a nearly 10% reduction in public health workforce between 2012 and 2019 and a 10.3% decrease in state and federal public health funding between 2010 and 2018.¹ Although public health agencies maintained core services despite the reduction in funding, the underinvestment left a tenuous and fragile public health system to respond to the COVID-19 pandemic.

The public health workforce weathered extraordinary conditions in responding to the COVID-19 pandemic, including long shifts, potential exposure to the disease, and abuse and threats from the public.² These intense conditions negatively impacted the mental and emotional health of the workforce, with 52.8% of public health workers reporting symptoms of anxiety, post-traumatic stress disorder (PTSD), or suicidal ideation in Spring 2021.³

State legislatures are considering several measures to support the beleaguered public health workforce in 2022, including efforts to increase the number of public

health workers, addressing threats of violence experienced by public health officials, and working to create sustainable public health funding so the public health system will be better prepared for the next public health emergency.

LEGISLATIVE TRENDS

INCREASING PUBLIC HEALTH WORKFORCE CAPACITY

The increased demands on the public health and healthcare sectors over the course of the COVID-19 pandemic demonstrated the need to rapidly staff up and strengthen systems to cultivate a future workforce. Many states and territories issued emergency executive orders to increase the pool of potential workers by recognizing professional licenses issued by other jurisdictions, permitting retired professionals to renew their license, or authorizing students to perform certain tasks.⁴ Additionally, at least two states (New York and Rhode Island) considered legislation to join the Emergency Volunteer Health Practitioners Act in 2021, which would standardize health care volunteers during declared emergencies.

At least two states (California and Tennessee) enacted laws to expand the public health workforce in 2021. California's new law makes the State Public Health Officer a member of the Interagency Advisory Committee on Apprenticeship and would allow public health students to participate in "earn and learn" settings so they can be compensated while participating in workplace applied learning programs. Tennessee's new law requires the board of licensing facilities to create rules to permanently credential qualified nurse aides who were temporarily licensed through Tennessee's COVID-19 emergency staffing actions.

ADDRESSING THREATS OF VIOLENCE TO PUBLIC HEALTH WORKERS

Public health officials in 35 states and Washington D.C. have legal protections against harassment in the course of their professional duties.⁵ These protections can include criminalizing obstruction of government operations, disruption of public business, or threatening, harassing, or intimidating a public servant. During the 2021 state legislative sessions, at least five states (Colorado, Georgia, Oklahoma, Oregon, and Utah) enacted laws that further protect public health workers from harassment or threats of violence.



Public health workers with more weekly work hours and greater involvement in COVID-19 response reported more severe symptoms of depression, anxiety, PTSD, and suicidal ideation.³

The new laws passed in Georgia and Oklahoma both require that personal phone numbers and email addresses of public health officials remain confidential. Utah amended an existing law, which required the state Department of Public Safety to provide security to certain public officials, to include any executive branch appointee or employee engaged in policymaking (e.g., the state health officer issuing a public health order). Colorado's new law makes disseminating the personal information of a public health worker or contractor a criminal misdemeanor if the action poses an "imminent and serious" threat to the safety of them or their family. Oregon's new law, which applies to all residents, allows a person to sue someone for releasing personal information online with the intent to harass, humiliate, or injure.

EFFORTS TO SUSTAIN FUNDING

With an influx of public health funding to address the COVID-19 pandemic unlikely to continue, many states and territories are working to identify ways to sustain funding to continue supporting their workforce needs. At least four states (California, Connecticut, Montana, and Nevada) considered bills in 2021 to develop a commission or taskforce to assess public health funding needs; Montana and Nevada enacted related laws. Montana's law created a health advisory commission, staffed by the Department of Public Health, and includes of a bipartisan group of legislators and executive branch appointees to make recommendations for spending American Rescue Plan funding. Nevada's new law creates a Public Health Resource Office tasked with assessing the unmet needs within public health services, opportunities for additional federal and private funding, and make recommendations for improving coordination to maximize efficiency within the public health system.

LOOKING AHEAD

State legislation that would support the public health workforce in 2022 could include:

- Reassessing professional licensing requirements to retain and expand the public health workforce.
 - Specializing mental and behavioral health support for public health workers and organizations.
 - Protecting public officials, including public health workers, from threats, intimidation, and harassment.
 - Assessing spending and efforts to sustain funding for public health workers, including removing hiring and salary caps and increasing compensation.
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 4. The Council of State Governments. "2020-2021 Executive Orders: Licensing." Available at <https://web.csg.org/covid19/executive-orders/#> Accessed 01-12-2022.
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A nationwide survey of public health workers found that approximately 12% received job-related threats since the beginning of the pandemic and nearly 25% felt bullied, threatened, or harassed due to their work.²

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