Public Health in the Past 30 Years

by Louise Lex

Methamphetamine, HIV/AIDS, West Nile virus, and antibiotic resistance have become part of our vocabulary, but these words were virtually unknown as recently as the 1970s. New diseases have emerged, and yet some of the older diseases such as tuberculosis have not been eliminated. In fact, some have become resistant to drugs once thought of as panaceas. Another change in public health is the very definition of what is a health problem. Violence and substance abuse, once considered to be personal concerns, now are viewed as significant health problems.

Regardless of changing terminology and disease threats, public health has focused on three fundamentals: assessing health problems, ensuring that services are available to meet the problems, and developing policies that result in longer, healthier lives. Someone defined this goal as dying young at an old age.

Public health in recent decades has attended to Iowans’ everyday health, including seeing that everyone who needs a flu shot gets one and that young children sit in child-safety seats (something not considered important in the 1970s).

Although public health is most effective when it is invisible, because it has prevented an epidemic or the spread of disease, people take special notice of its work during disasters. After United Flight 232 crashed in Sioux City in 1989, more than half of the passengers and crew survived. Pilot Al Haynes credited the preparation and cooperation of communities, the airport, and health workers, as well as their emergency response group drill and an annual update of the response plan. Haynes also credited the outpouring of support, in that “400 people showed up spontaneously to give blood with no call for donors having been sent out; they just arrived because they figured it would be needed.”

Iowans today consider environmental contaminants as one of their major concerns. Only schools and economic issues (unemployment, taxes, and government budgets) rank higher. Citizens have called for environmental protection to reduce the effects of such contaminants as lead-based paint. Iowa ranks fifth among the states in the percentage of housing built before 1960; third, before 1940. Lead-based paint was not banned until 1978. The rate of lead poisoning among Iowa children under age six is four times the national average. Since the 1990s, local programs have been initiated, and more than half of Iowa children born in 2000 have received at least one blood-lead test.

One of the most difficult challenges in public health is changing health behaviors. Change goes well beyond an individual deciding to stop smoking, to exercise more frequently, or to improve nutritional choices. Family income, health insurance coverage, peer pressure, community support, media influences, and access to parks and outdoor recreation are but a few of the forces that shape individual or group health behaviors. Risky behaviors can lead to such diseases as cancer, heart disease, and stroke—Iowa’s three top killers. Public health now recognizes the multifaceted nature of risk factors and knows well that one-shot efforts do not bring about change. The task is to rally community and health partners in public and private arenas to use science-based methods that eliminate risky behaviors, reduce specific diseases, injuries, and impairments, and address environmental and system challenges. For example, between 2000 and 2002, community partnerships and Just Eliminate Lies (JEL), a youth-led movement, helped reduce tobacco use by 13 percent among high school students, and by 31 percent among middle school students.

In the 21st century, public health in Iowa has broadened its umbrella to include partners that cross economic, political, and social boundaries. A prime example is Healthy Iowans 2010, a strategic plan to advance the boundaries of healthy living and the quality of life. Developed by some 500 concerned Iowans from 200 organizations, the plan was updated in 2005 by another 425 Iowans. Organizations involved have taken responsibility to see that specific actions result in reaching goals.

In 1848, Alexis de Tocqueville noticed Americans’ proclivity for joining forces to assist one another. He said, “From that moment, they are no longer isolated... but a power seen from afar whose actions serve for an example and whose language is listened to.” Although collaboration is part of the American heritage, Iowans have rediscovered its value in health planning and implementing programs.

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