



AMERICAN PUBLIC HEALTH ASSOCIATION

For science. For action. For health.

American Public Health Association Testimony for the Record
U.S. Senate Appropriations Committee Hearing
U.S. Government Response: Fighting Ebola and Protecting America
November 7, 2014

The American Public Health Association champions the health of all people and all communities. We strengthen the public health profession. We speak out for public health issues backed by science. We are the only organization that has a 140-plus year perspective and brings together members from all fields of public health. We appreciate the opportunity to submit written testimony for the record on the U.S. Senate Appropriations Committee's hearing on the U.S. government response to the Ebola outbreak. APHA strongly believes that Congress must invest in our nation's public health infrastructure to keep all Americans safe from threats like Ebola and also from the threats we face that lead to many more deaths each year including other infectious diseases and chronic diseases like diabetes and cancer.

Ebola is a severe, often deadly disease that can infect humans and nonhuman mammals such as monkeys and bats. The disease is spread by direct contact—such as through broken skin (a wound or rash) or the mouth, eyes or nose—with the body fluids of a person who is sick with the disease and has symptoms. Objects with body fluids on them, such as needles, can also spread Ebola. Body fluids include blood, vomit, feces, saliva, breast milk, sweat and semen. Ebola cannot be transmitted by air or water, or, in general, by food (in the United States), according to the U.S. Centers for Disease Control and Prevention.

CDC and other federal agencies are on the front lines both in working to stop the Ebola epidemic at its source and also in ensuring that the virus does not spread within our borders. We strongly support, and we thank you for providing, the additional funding to address the Ebola outbreak included in the most recent continuing resolution for both CDC and the Biomedical Advanced Research and Development Authority.

We urge you to work closely with President Obama and his administration to fully fund the \$6.18 billion Ebola emergency funding request recently submitted to Congress. The request would provide \$4.64 billion in immediate funding as well as a \$1.54 billion contingency fund to ensure adequate resources are available should unforeseen challenges arise. This comprehensive proposal would provide much needed funding for preparedness and prevention, treatment, training and research for agencies and programs within the Department of Health and Human Services including CDC, the Public Health and Social Services Emergency Fund, the National Institutes for Health and the Food and Drug Administration. CDC would receive \$1.83 billion for prevention and preparedness activities to strengthen our nation's ability to address infectious disease outbreaks and other public health emergencies at home and abroad. Additionally, the proposal would provide funds for other key agencies involved in ending the Ebola outbreak including the U.S. Department of State, the U.S. Agency for International Development and the

Department of Defense. It is critical that the full funding request be provided as emergency funding and not be subject to the current budget caps. It would be counterproductive to reduce funding for other critical public health programs to pay for this public health emergency.

In order to ensure CDC, and the state and local health departments that it supports, are prepared to deal with the threat from Ebola and the many other health threats that face our communities, Congress must ensure that our public health system has the resources it needs to keep the public safe. Unfortunately, over the past several years, funding for CDC has been significantly reduced. When adjusting for inflation, CDC's program level budget is nearly 10 percent lower than it was in 2010. If it were not for the mandatory funding provided to CDC through the Prevention and Public Health Fund, CDC's budget would be operating at levels comparable to what the agency received in 2004. Within CDC, funding for the Public Health Emergency Preparedness cooperative agreement, which provides critical resources to state and local health departments to respond to public health emergencies including infectious disease outbreaks, bioterrorism and natural disasters, has been cut by more than 30 percent since 2007. It is important to note that more than 70 percent of CDC's budget supports public health and prevention activities by state and local health organizations and agencies, national public health partners and academic institutions. A strong federal investment in CDC is especially important given the ongoing budget cuts at all levels of government that have resulted in the loss of more than 51,000 high-skilled state and local public health jobs and the furlough of many more positions. In a time of growing threats, this failure to adequately fund our nation's primary public health agency and its partners cannot continue.

In addition to the reductions in CDC's preparedness program, the Hospital Preparedness Program, funded through the Office of the Assistant Secretary for Preparedness and Response, has been cut by nearly a third since 2010, resulting in the loss of personnel, expertise, and coordination within healthcare coalitions charged with protecting the healthcare system during a disaster. This funding is critical to ensuring that hospitals are ready to effectively respond in emergency situations.

We also believe that we must base our response to the Ebola outbreak, including the treatment of the heroic health workers who are helping to treat those infected with the disease and bring its spread to a halt, using our most current understanding of the science. First and foremost, we believe that all health workers working with patients with Ebola must receive the training and personal protective equipment recommended by CDC without exception. All health care facilities must have appropriate administrative procedures in place to protect all health workers from exposure and prevent further spread of the disease.

APHA fully supports the Centers for Disease Control and Prevention's interim guidance for monitoring and movement of individuals who may have been exposed to Ebola. By measuring a person's risk of being exposed to Ebola, public health workers can quickly determine the right level of care to provide and reduce the possibility of the virus spreading.

Our goal is to minimize risk. By putting in place proper protections, such as appropriately monitoring individuals, we can safely manage this disease and reduce its harmful impacts worldwide. Because of this, APHA opposes measures announced recently by several states

requiring the quarantining of asymptomatic health workers who have returned to the U.S. after caring for patients with Ebola in affected countries.

We ask states to follow CDC's national risk-based standards to ensure that the disease has no further impact anywhere in this country. While we understand there is concern among the public about this disease, we need to follow the science, which is being reinforced every day. Ebola can only be transmitted by direct contact with the body fluids of individuals experiencing symptoms. Until an individual has symptoms, he or she is not contagious.

We strongly urge elected leaders at all levels to defer quarantine powers to public health officials. It is a public health measure that ought to be used with extreme care and only under the most urgent circumstances. Misuse or overuse of quarantine authority will erode public trust and thwart future efforts to control infectious disease when you need it most.

The U.S. government response to the Ebola outbreak will take a multifaceted approach and will require a sustained investment in efforts to strengthen health systems and infrastructures in West Africa and in other parts of the globe where public health infrastructures are either nonexistent or weak. It will also require a sustained and robust investment in our nation's public health system including the programs at CDC and other federal health agencies. We believe it is critical that Congress get back to the business of regular order in the annual appropriations process, eliminate the crippling effects of sequestration and in doing so prioritize funding for our nation's local, state and federal public health agencies.