

## Public Health Leadership in the Age of Bioterrorism

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The terrorist attacks of September 11<sup>th</sup> have profoundly changed our country in ways that still are not yet clear. All of us, regardless of the kind of work we do, have significant adjustments ahead.

As tragic as these events were, they have created an unprecedented opening for state and local public health agencies. Discussion in the media regarding the purpose of public health surveillance and the need for timely, accurate information is now more common. There is also a new willingness on the part of an array of agencies and individuals to want to know what is needed of them to improve public health surveillance.

Recent anthrax exposures tested the public health system in new and unforeseen ways, and the issue of public health preparedness is now paramount. Federal and state legislators are providing more funding, and with it, requiring more accountability. Whether it is a Response Plan for Bioterrorism or Smallpox, the Health Alert Network, or the State Plan for the National Electronic Disease Surveillance System (NEDSS), public health agencies will face remarkable challenges in the years ahead. How will they respond?

Will they actively and appropriately involve the full range of private sector partners necessary to assure that comprehensive, realistic plans are developed? Or will they take an isolationist approach that believes that the agency can create plans in a vacuum and achieve compliance simply because of their statutory authority?

***The manner in which public health agencies approach these critical tasks will determine their success for years to come. It is important***

***that agencies realize this, and that they take all steps necessary to assure long-term success.***

What does this mean for public health? We believe it can be summarized in the following five points:

1. Have a strategic vision that addresses your agency's evolving role.
2. *Lead*, don't dictate.
3. Know (or learn) how to partner.
4. Communicate a credible, clear and consistent message.
5. Provide rewards and recognition for jobs well done.

### **Have a strategic vision that addresses your agency's evolving role**

The 1988 Institute of Medicine report entitled *The Future of Public Health* stated that the three primary functions for public health departments will be assessment, policy development, and service assurances. This vision was challenging or threatening to some health departments that traditionally provided direct services. Market forces related to how services are reimbursed are directly affecting public health agency roles, and may be requiring significant changes.

Some health departments have completed strategic planning processes that have helped them to "reposition" their agencies. They have recognized that changing market forces are affecting how they must operate. Even if this plan has been completed, making changes is often difficult.

Public health agencies are but one of several important providers that serve to assure community health. The realization of this role

and the ability to communicate it effectively to other partners in the community is more important than ever.

Public health must be better able to operate in an Internet-enabled world. This means more than just having an e-mail address and a web site. It means being able to exchange data with interested agencies according to industry standards so that data handling is more efficient.

CDC's NEDSS project and the Public Health Conceptual Data Model (PHCDM) are providing guidelines for an information system architecture that seeks to bring public health agencies more fully into the information age. The reality is that most agencies have severe deficiencies in this area due to lack of budgets, and most technology platforms need substantial upgrades.

Agency leadership needs to become fully cognizant of the CDC Vision in this area and their state's NEDSS Strategic Plan, because these provide the framework for the future. The most important aspect of this area is that the public health agency must be able to interoperate electronically with hospitals, labs, and private sector healthcare providers to achieve the real value of computerized information systems.

This will lead to the creation of more real-time systems which can monitor and assess community health indicators and alert appropriate parties when untoward events appear to be occurring. These are the kinds of systems that elected officials and residents want and expect, and public health agencies must be able to deliver on this important objective.

### ***Lead, don't dictate***

Leadership is much more than just style, it requires substance. It involves an understanding of the agency's role, an appreciation of the local environment, and the needs at hand. The biggest challenge here may be for the agency leadership. As the role of the public health agency is evolving, public health leadership is critical here to see that it evolves appropriately at the state and local levels.

True leaders are able to communicate and inspire. They let others know about needs and opportunities, and to help them find ways in which mutual benefits are achieved through collaboration. Public health agency leadership

must rise to the challenge with a message that infuses this desire with action, action that leads to the achievement of the proper vision.

Public health agencies never could achieve their missions alone. They have always needed cooperation from other entities, although they have not always received it. Some health departments may still operate from a belief that because they have mandates in place (e.g. communicable disease reporting) that they will have compliance.

In an age of bioterrorism, the widespread acknowledgment of under-reporting and the lack of compliance with communicable disease reporting rules can no longer be tolerated. Instead of a heavy hand that attempts to mandate compliance from a punitive perspective, though, new ways to make it easier for private providers to "do the right thing" are needed.

The challenge is in moving from being a passive recipient of information to a more dynamic organization that is part of a continuum of agencies and institutions with an interest in community health. It requires an ability to recognize how to effectively "market" the agencies role and the benefits it can provide to various partners. This may be new ground for public health, but it must be done.

### **Know (or learn) how to partner**

Leadership doesn't necessarily mean being "in charge." In fact, it might be much more productive, and perhaps more appropriate, to have certain activities headed by private sector representatives, and have the public health agency serve in an active collaborator role.

Many public health agencies have not done a good job of reaching out to the private sector. Some agencies take the view that their role is to regulate, and do not actively and effectively involve private sector partners. We believe that agencies with this view are going to be less likely to be successful in achieving their mission.

Simply put, public health agencies *must* learn how to partner. Operating in a mode in which it is believed that having statutory authority is sufficient to obtain cooperation is doomed to fail. Public health agencies play a critical role, but many must learn to play it according to a new and different set of operating principles.

Because public health agencies are impartial with no vested interests except improving community health, they are a natural convener of all interested parties. They can use this position to be a neutral party that seeks to create solutions that lead to improvements in health status. If done with too heavy a hand though, this approach can be viewed as bureaucratic, and so the approach must be done with knowledge and skills critical for successful coalition development.

Public health agencies have sometimes been reluctant to create coalitions, fearing a lack of control or that the group may attempt to “dictate” to them. They may sometimes create a nominal group that is not independent, and few results are achieved.

Great things are possible when the focus is on collaboration. At its core, this means helping partners find the value in cooperating with public health. Since most private sector organizations are bottom line oriented, this will most often be an economic value, but it could also be a community relations or other type of value as well.

The importance is to learn how to state the issue in ways that have meaning for your partner—using their language, their value system, and their perspective. This way, it becomes much more real and important to them, and can help to assure their commitment.

Public health must abandon the belief that just because there is a mandate that there will be compliance. Instead, it has to creatively show the benefit of compliance, and the value of cooperation. This can lead to partnerships that exceed the abilities of either entity to achieve alone. More importantly, though, it is the only way in which public health agencies will be able to truly achieve their mission and effectively improve community health.

### **Communicate a credible, clear and consistent message**

In times of crisis, a trusted source of information is critical. Public health agencies can and should be this source, but there can be risks.

Agency leadership should already be known to local media as reliable sources of information.

Credible spokespersons must be competent to speak about the subject at hand. An important case in point is the requirement that only trained medical professionals speak on diagnosis or treatment issues.

Many agencies have explicit public information protocols, and the effectiveness of these measures needs to be re-evaluated in light of recent experiences with bioterrorism. While many agencies found their response to be lacking, this experience provided a “dry run” that can be analyzed in retrospect so that improvements can be made for the next time.

While it is important to assuage public anxiety, it is equally important to not overstate what is currently known and being done. This can be difficult for agencies that value the public’s trust and want to assure them that all reasonable steps are being taken to bring the situation under control. But misinformation is ultimately more damaging, and the ability to maintain public confidence while acknowledging that all the facts are not yet known is critical.

The bottom line is that greater communication and collaboration with a variety of other agencies may be necessary so that a reliable, accurate message can be delivered. This may present a challenge to the public health agency’s belief that it must be in control. The reality is that in today’s environment, the ability to work *collaboratively and proactively* will define success.

### **Provide rewards and recognition for jobs well done**

Leading, partnering and effectively communicating with outside agencies may require new skills, or new ways of perceiving the public health mission or function. This may require risks that may challenge traditional views, but it must be embraced if the agency is to be successful.

It is important that agency leadership encourage bold (but astute) actions among staff members, by letting them know clear expectations about what is needed for the agency to be successful. Proactive outreach to whole new layers of agencies may be needed, including the Metropolitan Medical Response System, Emergency Preparedness agencies, or state, county and federal criminal investigation

agencies, to name a few. More importantly, the approach to traditional partners, including hospitals, laboratories, and private medical providers, may need to be re-evaluated, to assure that it is truly collaborative and productive in today's rapidly changing environment.

Involving private sector partners will also result in unexpected successes and opportunities that need to be maximized. Important lessons will be learned that increase the likelihood of success, as more perspective and experience is brought to the task.

Ceremonies to recognize and reward good work provide more than just acknowledgment. They can build important bridges that create ties that can lead to closer collaboration in the future.

These are challenging and demanding times for public health agencies. They offer an opportunity for unprecedented leadership. With focused determination, conviction and collaboration, agencies and individuals will find the skills needed to meet the challenges ahead.

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*About the author: Mr. Hughes has over 20 years experience in public and private health agencies, and directs STC's Health Division, which provides consultation and guidance to state and local health departments nationwide in areas related to population-based registries, privacy, legislation and related issues.*

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