

Local Public Health Workforce Incentives Package HB 2773 - \$47 million

The local public health workforce, across the country and here in Oregon, is in crisis.

The reasons behind this crisis are multi-factorial. Many stem from chronic underinvestment in the public health system that pre-dates the COVID-19 pandemic. Others arose due to the stressful working conditions and politicization of public health that local public health workers have experienced since 2020. According to [Oregon's Local Public Health Workforce Report \(2021\)](#), local public health workers are experiencing high levels of stress due to:

- Chronic underinvestment
- "Siloed" funding streams
- Comparatively low pay for the field
- Growing number of public health crises
- Increased scrutiny and criticism
- High levels of burnout & turnover
- Low-rates of entry into the field
- Insufficient housing availability

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We either need to invest in public health so those with MPHs [Master of Public Health] will want to come and work in local public health or we need to train people up.

-Carrie Brogoitti, MPH

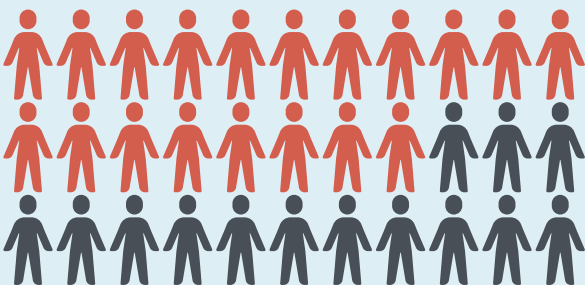
Union County Health Administrator

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The Time is Now.

Taken together, these conditions have created significant barriers to meeting statewide metrics and public health prevention goals. A \$47 million investment in the public health workforce will ensure workers are adequately trained, departments are appropriately staffed, and will support sustainable growth for Oregon's healthy and resilient communities.

LPHA Turnover During the COVID-19 Pandemic



Since March 2020, 19 of Oregon's 33 local health administrators have left their jobs. This does not account for turnover in non-leadership positions.

HB 2773 will:

- Ensure public health workers are recruited from local communities, with a focus on rural & underserved communities
- Provide scholarships and remove barriers for those seeking public health-focused education
- Establish higher education loan repayment programs
- Provide meaningful retention bonuses for those in service to local public health

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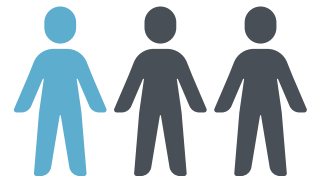
Current pay is out of touch with local needs.



In a 2022 report by CLHO, 26 of 30 health department administrators said the wages and benefits they could offer were key barriers to recruiting and retaining qualified public health professionals. HB 2773 would provide student loan repayment and retention bonuses for professionals who work in local health departments, making local public health departments attractive and competitive employers in today's economy.

Burnout continues to impact local public health.

21 out of 30 LPHAs interviewed said their staff have to "wear multiple hats" or fill multiple roles, and 13 reported their staff members were burnt out. This is consistent with national data which show nearly 1 in 3 public health professionals plan to leave their jobs in the next year. HB 2773 would stem this mass exodus by creating a pipeline to build up the local public health workforce and provide relief to the current workforce that has served through multiple emergencies.



Barriers exist to getting public health education and jobs.



We know communities are best served by trusted, local people who know their communities, yet strict job qualifications and barriers to higher education keep many people in underserved and rural communities from public health jobs. HB 2773 would remove barriers to pursuing public health training and would create opportunities for fulfilling, local careers in public health in all Oregon communities.

HB 2773 is supported by the following partners:



WASHINGTON COUNTY
OREGON



Urban League
of Portland

Empowering Communities. Changing Lives.



References: 1) Oregon Coalition of Local Health Officials. (2022). *Oregon's Local Public Health Workforce, 2021*. [Available here](#). 2) De Beaumont Foundation. (March 2022). *Rising Stress and Burnout in Public Health: Results of a National Survey of the Public Health Workforce*. [Available here](#).



For more information, contact Sarah Lochner, Executive Director
sarah@oregonclho.org | 503-507-7786 | oregonclho.org



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