

Remarks by Gov. Christine Gregoire

Aspen Institute Excellence in State Public Health Law Project

“Public Health and the Power of State Government”

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It takes a certain group of people—while the rest of America is on summer vacation—to sit in a conference room and talk about things like “changing the delivery of oral health services for high-risk children” or “improving the walkability of the built environment.”

But have no doubt, I am one of the biggest champions of a strong, trusted public health system and I can’t thank you enough for your work and dedication. Like many things in the public sphere, the better you do your jobs, the less people notice.

Globalization, dwindling resources, competing priorities, a media landscape that is fueled by panic, and a million social media “experts” on any given topic have made your jobs all the more relevant—and difficult.

First off, the public health system needs advocates. While Mayor Bloomberg may be the high water mark, not every Governor, Mayor, County Executive or council member or legislator will care, or even know about, the importance of public health.

For me, I had two big influences that shaped my understanding. The first was my mom and the second was my very trusted and incredibly able Secretary of Health, Mary Selecky.

I grew up in a household where my mom, a single-mother, smoked two-and-a-half packs of unfiltered camels a day. I spent most of my life pleading, with no success, for my mom to quit. Though she lived far longer than most smokers, smoking robbed her of truly enjoying her golden years.

I still remember the day in 1997 when, as a young Attorney General, I had finally had enough of the tobacco companies lies and filed a lawsuit against them because they had broken the public’s trust.

When people died in car wrecks we mandated seat belts and air bags. When kids were crippled with polio we demanded a vaccine. When Americans became addicted to street drugs we launched a counter campaign. Yet when one million more kids were smoking cigarettes each year and nothing was happening, it was time for change.

And it wasn’t that kids were finding their way to cigarettes, it’s that cigarettes were finding their way to them. I became one of five attorneys general directly involved with the negotiations with the tobacco companies and every week—week after

week—we'd meet in a conference room in downtown New York. Every Monday morning, for 49 Mondays, I'd fly to from Seattle to New York.

In the end we won a \$206 billion settlement, still the largest settlement to date in the world. We used our state's share of that money to decrease youth smoking by half and adult smoking by 30 percent. We also used it to put tens of millions of dollars into the Life Sciences Discovery Fund to make Washington a center of health care and public research.

The second influence that really led me to the power of public health was my Health Secretary, Mary Selecky. Mary knew when to use the power of a Governor, and when not to. And she also knew there were other advocates, and other powerful voices that should and could be used in the public health battle. In fact, Mary herself became a very trusted voice and media go-to because she knew when to sound the alarm and when not to.

She made certain that key members in our state legislature knew what public health facilities operated in their districts and how many people they employed. She did the same with our US congressional members and she made sure they knew that the public would not only expect her team to perform during a public health crisis, but that the public would also look to their leadership. She created buy-in and invested everyone in the system, because she knew at some point the system would touch everyone.

Together, we made certain that public health had a seat at the table for all critical decisions.

One of my first acts was to create a health care cabinet where I had Medicaid, the state's health care purchasing agency, social and health services, public health, and our budget director meet regularly. It was part of a broader effort to save health care dollars and to get Medicaid inflation rates to record lows. But it had the side benefit of putting public health into health care conversations that they traditionally were not a part of.

The result was that my first act as governor was signing an executive order extending health insurance to uninsured kids. It happened because public health identified the need, and we leveraged Medicaid to pick up the cost.

Like every one of you, the Great Recession nearly brought us and our state to our knees. I spent my second term dismantling so much of what I'd spent a career building and it was the toughest thing I've ever done.

Your budget is and will remain your biggest challenge. For us, and for many states, the recession was a fundamental reset and I don't see budgets growing back to the levels we previously had.

It brings me to a lesson that we learned early on in the recession—we had to fund what was essential and what had an outcome that we could show the public.

As Mary reminded me early on, “Health is wealth, let’s invest where there is a return.”

Prevention works and it saves money. One act I took was to sign an executive order to use our influence, as a purchaser of health care services for 1.3 million people, to include performance measures in state health contracts. Doing so we increased vaccination rates, supported tobacco cessation, and increased physical activity.

We made the case, we showed the proof, and showed the public and decision makers the return on investment.

To survive the crisis we used every tool we could. It used to be that each agency would come in and walk through their budget proposals with me. With the recession in full swing we could no longer do it that way.

So for a few grueling days, all of my cabinet directors and our budget staff sat around a very large table and each agency heard every other agencies budgets. At one point it was proposed to eliminate podiatry services in the Medicaid system. I asked what that would mean and was bluntly told that it would result in more amputations.

I had to leave the room for some fresh air. Not only were the decisions we were forced to make truly that serious, but had all players not been at the table, we may not have made the decision we did. In the end, podiatry services stayed in.

Now that I’m out office I spend as much time as I can with our beautiful new granddaughter. I know that through all of our efforts she’ll grow up in a world where she doesn’t see Joe Camel ads or billboards of celebrities endorsing Marlboros. I know she’s received her vaccinations and will continue to do so.

But she will face new risks, some we’ve seen and some that we haven’t yet tackled. She needs a public health system that remains vigilant and well supported. She needs you to find your advocates, build your partnerships, and really re-tool for this new, post-recession world that state and local governments must adapt to.

I’m still a firm believer that government has incredible power to improve and make better our lives—and it starts with your work. Back home in your states, remember to seize the bully pulpit and use your Governor, your Secretary of Health, and others to further this important work. Whether it’s an executive order needing only the stroke of a pen, or a longer, more sustained legislative effort bringing along a chorus of stakeholders, I urge you to innovate bold solutions, challenge the status quo, and usher public health into this new century. I have great faith in each of you that you will.