

IPHA History Lesson: 1964-1968 Dr. Ronald Eckoff

1964-1968 was a time of great progress in local and state public health in Iowa and the Iowa Public Health Association was a major player. The IPHA presidents were Grace Plude, Director, Des Moines VNA in 1964-65; Jack Clemens, Environmental Health, IDPH in 1965-66 (Note: Jack passed away this winter); Melvin Lightner, Health Educator, Des Moines-Polk County Health Department in 1966-67 (recall Mel's quote in the last issue of this newsletter); and Frank Kilpatrick, Environmental Health Division of Preventive Medicine, University of Iowa in 1967-68. (Frank was the first secretary of the Johnson County Board of Health and passed away two years ago.)

The following summary is taken from Frank's president's message in the March 1968 newsletter.

The spirit and soul of IPHA is described in Article II of the constitution, which states, 'The object of the association shall be to safeguard and promote the personal and public health of the residents of Iowa.' Without this article and the practical applications of it, we might as well fold up and spend our membership dues somewhere else. Now, what really is the object of our promotional and safeguarding efforts? How practical and effective have our efforts been? How can they be made more effective?

How practical have our efforts been? Concerned as its members have been, and diligent as their works were, no great progress in the interest of public health of this state was evident until recent years. That precious asset of society, the health of its people, had been thrust into a dark corner of public attention where its pleas for release produced only social conscious salving actions.

By 1964 the program of the State Health Department, measured by per capita expenditures for its budget, had sunk to the position of 49th lowest in the nation – the grand sum of 28 cents per capita. For a period of years the office of State Health Commissioner remained vacant because of a statutory limit of \$7,500 on the salary. By 1964 the Commissioner, who is the chief physician of this state in responsible charge of health level evaluation, health services planning and the furnishing of community health services, received a salary of only \$11,000 a year. The State Board of Health had no real authority and its membership was determined on the basis of occupation of other offices. Until 1967 the legal basis for the provision of local community health services in Iowa had not been updated in any effective manner for more than 100 years.

The status of health in this state had NEVER been effectively measured. If it were, I am confident the findings would be appalling. Efforts to coordinate public health and other social services in the interest of efficiency, economy and elimination of conflicts and duplication are conspicuously absent or not in evidence.

In 1964 a social consciousness commenced to emerge in Iowa concerning public health. IPHA was not solely responsible for it but was among the important forces that were. The Governor appointed a public health advisory committee and charged it with the responsibility of describing the health problems of the state and prescribing remedies including needed legislation. IPHA was represented on the committee which included representatives of the health professions, the State Health Department, the Medical School of Iowa and the legislature. IPHA furnished special counsel to the committee and to the legislature with respect to the health legislation recommended by the committee. A group of informed citizens, known as county representatives, was organized for local response to the needs of legislators for information. This effort, in which IPHA so strongly participated, was highly successful. A 50 percent increase in the State Health Department's budget and a realistic salary for the Commissioner of Public Health was authorized. The State Board of Health was reconstituted of members selected on the basis of their capabilities to serve and was given policy making and regulatory authority. A water pollution control commission was established with powers adequate to deal with the state's water pollution problems.

In 1966 and 1967 IPHA continued its efforts in the legislative and public information fields in close liaison with the State Health Department. The reservoir of informed citizen support was expanded to about 270 community service workers. Proposed legislation was drafted. Counsel was again furnished to legislators. It is always difficult, if not impossible, to say to what extent efforts of this kind were responsible for subsequent results. Nevertheless, the archaic, ineffective, 100 year old legal basis for local health service was repealed and replaced by a law under which effective local health services may be provided. No, this law is not perfect. The important procedure for funding such services was deleted during the legislative process, together with certain other minor provisions. However, a new era for local public health programs has been born. IPHA, just recently, has promoted attendance at workshops, conducted by the Cooperative Extension Service of ISU and the State Health Department, to implement the development of local health services under the new law.

In addition to the local health service law, legislation was enacted providing for an air pollution control activity in the state. IPHA subsequently recommended candidates to the Governor for appointment to the new Air Pollution Control Commission and a number of these, including our own president elect, were appointed.

One last note from Frank's Report of the President at the conclusion of his term in May 1968.

Perhaps the best place to start this report is where we left off – the Annual Meeting of 1967 in Fort Dodge. At that meeting, the Chairman of your Legislative Committee presented his report, dripping with pessimism because none of the legislative objectives of IPHA appeared to have the slightest prospect of enactment that year. But miracles still happen. Less than one month later, in the last days of the legislative session our proposed local health legislation – Senate file 342 and the Air Pollution Control Act – House file 480 were lifted by sifting committees from the bottom to the top of the regular calendar and both were adopted with impressive majorities.

* In 2008, Iowa expended \$9 per capita in state general funds and \$66 total expenditures per capita.

The local health legislation that is referenced was Chapter 137 of the Code of Iowa, which is the one which was just revised in 2009.