

## OP-ED

### Public Health and Politics

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When I first started working in public health, my supervisor told me that in Ohio, Board of Health members are appointed, rather than elected, to keep politics out of public health. It did not take me long to learn that you really cannot ever separate politics and public health. It is easy to see the impact of politics in some public health programs and policies like healthcare reform, Planned Parenthood, and Tobacco-21 legislation. Politics extend well beyond these highly visible issues, into state and local legislation, policy decisions, and funding allocations.

Politics often reflect the will of those with power (money) and influence. Public health typically lacks both of those. Our grant funding and public employee policies often restrict our ability to lobby lawmakers or run for office, leading many to err on the side of caution and avoid trying to influence politics completely. This even further erodes our ability to advance effective public health policies.

We need to learn to become better advocates for public health policy and systems change, including in areas outside of traditional public health programming. There are many opportunities to advance a Health and Equity in All Policies (HEiAP) approach to policies and legislation that have an impact on the determinants of health, including housing, education, transportation, food insecurity, social justice, and more. The Ohio Public Health Association has championed legislation to incorporate HEiAP into the legislative process, but you can also work to adopt HEiAP in your local communities.

Who we elect and the relationships we build with those officials have an impact on all levels of government. Elected leaders can champion public health issues, like increasing newborn home visitation programs and passing T-21 legislation, or put up barriers to advancing community health, like cutting funding to public health or restricting Medicaid eligibility. While our local boards of health are not elected, they are appointed by elected officials who often select members that reflect their views.

As public health practitioners, it is our responsibility to make our voices heard in order to provide solutions to problems, to promote effective policies, and to express our opinions as the subject matter experts that we are, and as members of the voting public. Step up and run for an elected office because we need more public health professionals in positions that can have a direct impact on public health policy and funding decisions.

I encourage you to be active in your professional associations, build relationships with your elected officials, and advocate for public health. To learn more about advocacy, and how it is different from lobbying, visit [www.apha.org/advocacy](http://www.apha.org/advocacy).

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