

# Comparative Analysis of State Public Health Law Reform Efforts Following the Turning Point Model State Public Health Act

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# Objectives

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- Public Health Law Reform in the 21st Century
- The Turning Point Statute Modernization Project
- Assessing the Turning Point Act – Analyses from Key Jurisdictions



# Public Health Law Reform

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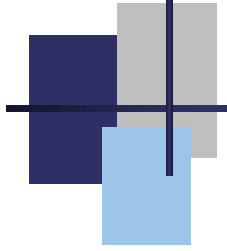
- Many national, state, tribal, and local governments and private sector entities concur:
- “Public health law in the United States is ripe for reform”

# Assessment of State Public Health Law

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- Antiquated. Public health statutes are outdated and may fail to reflect modern constitutional norms, public health and biological sciences, individual and population ethics, and public health practices, policies, and relationships
- Unfocused. Public health law does not always articulate a clear mission for public health, nor reflect core or essential public health services.
- Inconsistent and Complicated. Public health law is varied and complicated, difficult for the public to comprehend, and challenging at times for health officials to implement





# State Public Health Law Reform

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**“...the Nation’s public health infrastructure would be strengthened if jurisdictions had a model law and could use it regularly for improvements.”**

**DHHS, *Healthy People 2010***

*(similarly stated in IOM, *Future of Public Health . . .*, 2003)*



# Benefits of Public Health Law Reform



- Modernize and amend antiquated laws to keep pace with scientific developments
- Reflect modern constitutional, legal, and ethical norms
- Clarify public health legal powers and duties
- Stimulate public health dialogue with policy makers and communities
- Improve communication and working relationships within the public health system
- Improve public health programs/outcomes



# Risks of Public Health Law Reform

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- Statutory editions may change the landscape of public health practice
- Changes in public health laws may add costs without matching resources
- Statutory reform in state legislatures is fraught with potential complications and compromises
- Modernizing laws does not assure improved public health practices



# The Turning Point Statute Modernization Project

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- Transform and strengthen the legal framework for the state public health system through a collaborative process to develop a model state public health law.
- The Turning Point Model State Public Health Act
  - **Phase I:** State Public Health Law Assessment
  - **Phase II:** Development of a Model Law
    - Turning Point Model State Public Health Act - released September 16, 2003
  - **Phase III:** Dissemination & Education







# Impact of the Model Law Effort

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- Education of the public health community
  - Increased discussion and awareness
- Activity at the state legislative level
  - Tracking of bills introduced and passed
- Systemic impact on states
  - Relationships and structures have changed



# The Turning Point Act - States That Have Introduced And Passed Bills Or Resolutions

- States use the Act to assess their existing state public health laws
- Example: Alaska HB 95, passed in June 2005, is directly based on multiple provisions of the Act.



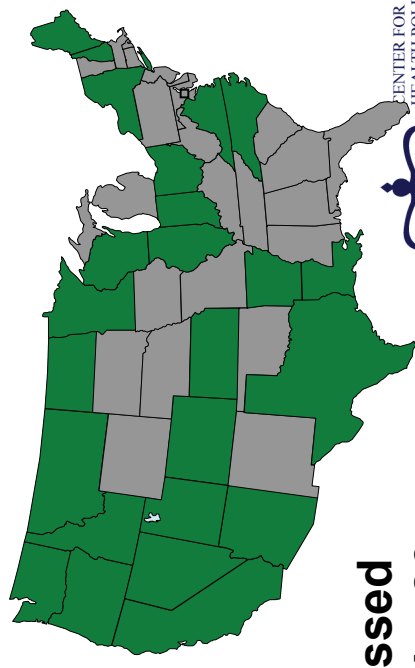
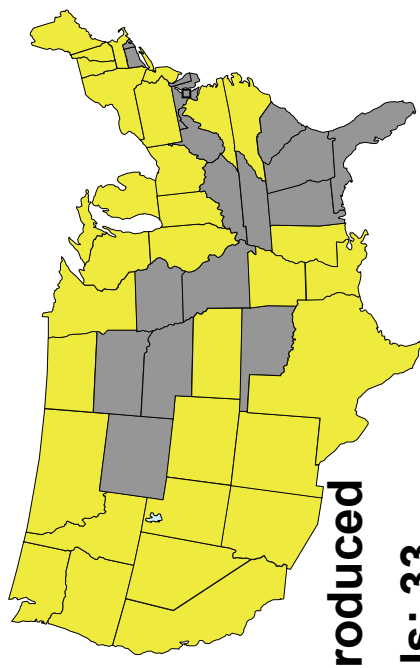
Introduced

Bills: 33



Passed

Bills: 26



# Assessing the Impact of the Turning Point Act: a Comparative Case Study

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- **Justification**
  - Assess how the Turning Point Act is currently being used by state and local law- and policy-makers in legislative and regulatory reform initiatives
- **Scope**
  - Describe the effectiveness of the Turning Point Act as a means to promote public health through legal reforms at the state and local levels
- **Implications**
  - Apply lessons learned from the Turning Point Act experience to future reform efforts





# Methodology

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- Cases Selected - Successes and failures
- Interviewees - Legislators, Bureaucrats, Advocates
- Semi-Structured Interviews
  - Role of the informant
  - Public health problems addressed by the changes
  - Obstacles to changes in state law and the strategies used to overcome these obstacles
  - Subsequent changes in public health regulation, organization or programs based on legal reforms
  - Expected changes in public health outcomes



# Example—A Process Model of Successful State Public Health Law Reform: Alaska

## Stage I: The Emergence and Utilization of the Turning Point Act

- **Dominant Actors**
- Turning Point Collaboration
- Division of Public Health
- **Key Forces**
- Agenda Setting
- **Result**
- Model Developed for Discussion of Issue

## Stage II: The Development of Draft Law

- **Dominant Actors**
- Division of Public Health
- Office of the Attorney General
- **Key Forces**
- Public Health Necessities
- Political Efforts
- **Result**
- State Law Developed to Pursuant to Turning Point Act

## Stage III: Legislative Action

- **Dominant Actors**
- Legislators
- Division of Public Health
- Executive Branch
- Advocacy Groups
- **Key Forces**
- The Turning Point Experience
- Politicization of Public Health
- Executive Prerogative
- **Result**
- Reform of State Public Health Law



# Case Study Conclusions—State Political and Policy Efforts Matter

## ALASKA

- *The Turning Point Experience*
- *Politicization of Public Health*
- *Top-Down Reform*

## SOUTH CAROLINA

- *Lack of an External Galvanizing Force*
- *Bureaucratic Expansiveness and the Risk of Backsliding*

## WISCONSIN

- *The Turning Point Experience*
- *Stakeholder Collaboration*
- *Bottom-Up Reform*
- *Strong Legislative Champion*

## NEBRASKA

- *Stakeholder Collaboration*
- *Lack of Executive Support*
- *Risk of Backsliding*
- *Selective Incorporation*



# Comparative Analysis

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- **Facilitators of Successful Law Reform**
  - Agenda Setting
  - Gap Analysis
  - Key Partnerships
  - Legislative Champion
- **Inhibitors to Successful Law Reform**
  - Lack of Impetus for Public Health Reform
  - Unaltered Model Legislative Language
  - Fear of Backsliding
  - Lack of Leadership





# Study Conclusions

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- States selectively incorporate provisions of the Turning Point Act into law based upon individual, political, and institutional factors.
- This project provides resources to support future state modernization efforts
- For more information on legislative tracking and comparative case studies, see:
  - Center for Law and the Public's Health: [www.publichealthlaw.net/Resources/Modellaws.htm](http://www.publichealthlaw.net/Resources/Modellaws.htm)
  - Center for Health Policy: [http://www.nursing.columbia.edu/chphsr/projects/law/public\\_health.html](http://www.nursing.columbia.edu/chphsr/projects/law/public_health.html).







# What next?

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- **Dissemination**
  - Get this information to the public health community to help further reform efforts
- **PHSR agenda**
  - Keep legal structure/content questions and variables visible within PHSR
  - Maintain data base on statutes
- **Potential next study of Model Act**
  - Assemble all passed bills and identify
    - Least used section(s)
    - Most amended section(s)
  - Reconvene workgroup to consider additions or amendments

