

PRESS RELEASE



FOR IMMEDIATE RELEASE:
March 10, 2011

Contact: Mike Townsend
202-715-3450
mtownsend@lungusa.org

American Lung Association Calls for Spending Bill to Protect Public Health

Statement of Charles D. Connor, President and CEO of the American Lung Association

WASHINGTON—The U.S. House of Representatives failed to protect the public health by passing H.R.1. The American Lung Association applauds the Senate for recognizing this failure, and rejecting this harmful bill.

We now call on the House and Senate to work together to fund the federal government for the remainder of the fiscal year in a way that protects the health of all Americans, especially our children, seniors, and people with chronic diseases such as asthma.

H.R.1, as passed by the House, was toxic to public health. It ignored the well-being of our people and would have had dire consequences for all Americans, particularly people with lung diseases, including lung cancer and emphysema. Among them are more than 7 million children with asthma.

We were especially alarmed that this toxic bill promoted toxic air. Through massive budget cuts and appropriations “riders,” H.R.1 would have slashed the Environmental Protection Agency’s (EPA’s) budget by about one third, decimating its ability to protect the public health from life-threatening air pollution. Amendments to the bill would have blocked implementation of the Clean Air Act and its lifesaving protections. These amendments would have prevented EPA from updating and enforcing standards for the cleanup of toxic air pollutants, like soot and mercury.

These provisions would have meant millions of Americans would be forced to breathe unhealthy air that can cause asthma attacks, heart attacks, strokes, cancer and premature death.

But H.R.1’s assault on public health didn’t stop at the air we all breathe. It also would have cut the budget of the Centers for Disease Control and Prevention by 25 percent. And it would have cut \$1 billion from the National Institutes of Health, as well as block implementation of the Affordable Care Act. Such cuts would have major impacts on lung health that range from cuts in medical research to cure diseases like lung cancer, to reducing efforts to keep kids from starting smoking – the leading cause of preventable illness and death in America.

When the House passed H.R.1, it also ignored the voice of the people. The American Lung Association recently released a bipartisan poll that found:

- 69 percent of likely voters think the EPA should update Clean Air Act standards with stricter limits on air pollution.
- 68 percent feel that Congress should not stop the EPA from updating Clean Air Act standards.
- A bipartisan 69 percent majority believes that EPA scientists - not Congress - should set pollution standards.

The American Lung Association is pleased that the Senate recognized that, as passed by the House, H.R. 1 was public health poison. Any bill to fund the federal government must protect the public health by restoring funding for critical agencies. The message for congressional leaders moving forward is that tough fiscal choices must be made without jeopardizing public health.

###

About the American Lung Association

Now in its second century, the American Lung Association is the leading organization working to save lives by improving lung health and preventing lung disease. With your generous support, the American Lung Association is "Fighting for Air" through research, education and advocacy. For more information about the American Lung Association, a Charity Navigator Four Star Charity and holder of the Better Business Bureau Wise Giving Guide Seal, or to support the work it does, call 1-800-LUNG-USA (1-800-586-4872) or visit www.LungUSA.org.

NEWS

For More Information, Contact:
David Fouse, 202-777-250
david.fouse@apha.org



American Public Health Association
800 I Street, NW
Washington, DC 20001-3710
(202) 777-APHA • Fax: (202) 777-2534
comments@apha.org • www.apha.org

Remarks

Georges C. Benjamin, MD, FACP, FACEP (E)
Executive Director
American Public Health Association

March 10, 2011

Thank you for joining us today. I'm Dr. Georges Benjamin, executive director of the American Public Health Association. I am here today to express our deep concerns with the House-passed Continuing Resolution that would have slashed public health funding and restricted EPA's ability to protect the public's health from dangerous air pollution.

First off, I would like to thank Senator Boxer and her colleagues in the Senate who voted to reject this misguided legislation that would have eliminated or weakened many existing public health safeguards.

The Continuing Resolution passed by the House contained dangerous cuts to public health programs and agencies, including the Environmental Protection Agency, the Centers for Disease Control and Prevention and the Food and Drug Administration.

The House bill would have cut the EPA's budget by nearly 30 percent, which would hamper enforcement of clean air, water and other safeguards at the federal and state level.

The House bill would have reduced the Clean Water State Revolving Fund and Drinking Water State Revolving Fund by a combined 56 percent. These critical funds help our local governments pay for sewage and wastewater treatment and help ensure our communities have access to safe drinking water.

The House bill also proposed additional cuts in state and local assistance that could seriously hamper efforts to protect our most vulnerable populations,

including children and pregnant women from toxics like lead, asbestos, PCBs and other hazardous wastes.

In addition to these drastic cuts in EPA's budget, the House measure also contained a number of policy riders that would have weakened existing protections under the Clean Air Act, including provisions to block EPA from regulating carbon pollution and other greenhouse gases, and regulating cement kilns, which emit 16,000 pounds of toxic mercury into our air each year.

For four decades now, the EPA — through the Clean Air Act — has helped millions of Americans live healthier, safer, more productive lives. It's one of the great public health interventions of the last forty years. As a physician and public health practitioner, I know that the Clean Air Act's protections against premature disease, disability and death are a vitally important tool for ensuring the health of our population.

In 2010 alone, the reductions in fine particle and ozone pollution from the 1990 Clean Air Act amendments prevented more than:

- 160,000 cases of premature mortality;
- 130,000 heart attacks;
- 13 million lost work days; and
- 1.7 million asthma attacks.

Some of us are old enough to remember why we passed this landmark legislation in the first place. Others — including some in Congress — unfortunately suffer from selective memory loss.

I remember pollution-filled cities where the air was so thick you could not only smell it, you could taste it and almost feel it.

Wisely, over the years as the science has grown more abundant and the health threats better understood, we've strengthened the Clean Air Act to include protections from ground-level ozone or smog, volatile organic compounds and hazardous air pollutants.

And now we have climate change: one of the greatest public health challenges of our time.

We need to follow the science in upholding EPA's authority to use the Clean Air Act to reduce pollution and protect public health. We urge Congress to reject drastic cuts to public health and any riders that would weaken or eliminate existing, proven public health safeguards and instead pass a bill that invests in the public's health and keeps America healthy.

#

Founded in 1872, the APHA is the oldest and most diverse organization of public health professionals in the world. The association aims to protect all Americans and their communities from preventable, serious health threats and strives to assure community-based health promotion and disease prevention activities and preventive health services are universally accessible in the United States. APHA represents a broad array of health providers, educators, environmentalists, policy-makers and health officials at all levels working both within and outside governmental organizations and educational institutions. More information is available at www.apha.org.

American Academy of Pediatrics

DEDICATED TO THE HEALTH OF ALL CHILDREN™



AAP Headquarters
141 Northwest Point Blvd
Elk Grove Village, IL 60007-1019
Phone: 847/434-4000
Fax: 847/434-8000
E-mail: kidsdocs@aap.org
www.aap.org

Reply to
Department of Federal Affairs
Homer Building, Suite 400 N
601 13th St NW
Washington, DC 20005
Phone: 202/347-6600
Fax: 202/393-6137
E-mail: kids1st@aap.org

Executive Committee

President
O. Marlon Burton, MD, FAAP

President-Elect
Robert W. Block, MD, FAAP

Immediate Past President
Judith S. Palfrey, MD, FAAP

Executive Director/CEO
Enrol R. Aiden, MD, FAAP

Board of Directors

District I
Carole E. Allen, MD, FAAP
Arlington, MA

District II
Henry A. Schaeffer, MD, FAAP
Brooklyn, NY

District III
Sandra Gibson Hassink, MD, FAAP
Wilmington, DE

District IV
Francis E. Rushton, Jr, MD, FAAP
Beaufort, SC

District V
Marilyn J. Bull, MD, FAAP
Indianapolis, IN

District VI
Michael V. Severson, MD, FAAP
Brainerd, MN

District VII
Kenneth E. Matthews, MD, FAAP
College Station, TX

District VIII
Mary P. Brown, MD, FAAP
Bend, OR

District IX
Myles B. Abbott, MD, FAAP
Berkeley, CA

District X
John S. Curran, MD, FAAP
Tampa, FL

Statement of Jerome Paulson, MD FAAP on behalf of the American Academy of Pediatrics March 10, 2011

Thank you, Senator Boxer. My name is Dr. Jerome Paulson, and I'm here today on behalf of the American Academy of Pediatrics as incoming chair of the AAP's Council on Environmental Health

The children of the United States need clean air, unpolluted water, and protection from other environmental health hazards in order to grow and develop normally. The parents, grandparents and other adults who love those children expect the Environmental Protection Agency to prevent environmental health hazards from occurring, to clean up those hazards that already exist and to monitor the environment for new problems. An underfunded Environmental Protection agency will not be able to protect the children, or the adults, of our Nation.

The environment has an especially profound effect on children's health. Children are disproportionately vulnerable to all toxic exposures; they breathe faster than adults, spend more time outside, and have proportionately greater skin surface exposed to toxins. A given dose of a toxin will have a greater impact on a child than on an adult not only due to their smaller size, but because of the nature of their growing bodies and minds. At sensitive points in child development, toxins can have especially harmful effects.

The Environmental Protection Agency supports a wide range of programs to protect child health. The AAP is deeply concerned that H.R. 1 proposes to cut almost one-third of the EPA's budget for Fiscal Year 2011. Allow me to remind everyone that Fiscal Year 2011 is already almost half over, so cuts of this magnitude would have a massive impact on the EPA's operations through the remainder of the fiscal year. A cut of one-third is indiscriminate almost by definition – a thoughtful assessment of all of the programs involved would have required much more selective reductions.

The proposed cuts to the EPA's budget for this year would have a devastating effect on efforts to protect child health by cleaning up air pollution, water pollution, and toxic waste. They mean that more children will be exposed to dangerous toxins; more pregnant women will not be protected from hazardous exposures; and we will essentially consent to more children being sickened. Some of those children can be expected to suffer lifelong ill effects, such as loss of IQ related to lead exposure, or reduced lung capacity as air pollution stunts the development of their lungs.

The cuts proposed for EPA and its environmental protection programs in H.R. 1 represent a significant setback for both child health and public health. The AAP commends the Senate for rejecting these proposals and urges Congress to do no harm to our nation's children in the federal budget process.

**Remarks of Sarah Bucic, MSN, RN
On Behalf of the American Nurses Association
March 10, 2011**

Good morning. I am Sarah Bucic, speaking on behalf of the American Nurses Association which represents the interests of America's three-point-one million registered nurses.

Environmental Health is one of the foundations of the nursing profession; after all it was Florence Nightingale who established as the first rule of nursing... "Keep the air within as pure as the air without"

But the 'purity' and safety of our air is at risk. Proposed restrictions and drastic cuts to the EPA like those we saw in H.R. 1 represent a serious threat to the public's health. These types of cuts could put us all at risk by impeding or even preventing the EPA from enforcing the laws that protect the safety of our air and water, and guard us against hazardous chemical exposures.

Studies continue to demonstrate a link between chemical exposure and serious illnesses, including cancer, reproductive and developmental disorders, neurological diseases and asthma.

And it is our most vulnerable populations whose health is most at risk: children, the elderly, the urban poor, and those with chronic conditions.

Making healthy choices is not enough to prevent chemical exposure and its inherent risks: what good is eating fruits and vegetables if they were grown in contaminated soil and water? What are the benefits of exercise if the air we breathe is polluted? When I was diagnosed with thyroid cancer, less than 18 months after the birth of my daughter- I examined my life to see what

behavior, what actions may have contributed to this diagnosis. It was then that I started to really scrutinize the impact of environmental factors on our health.

ANA has long recognized that a clean, safe environment is a fundamental requirement for ensuring the health of our patients, our families, and our community. We will continue to work with our patients, our colleagues and our state and federal elected officials and agencies to preserve environmental protections vital to a healthy productive society.



8403 Colesville Road
Suite 920
Silver Spring, MD 20910
(202) 347-1895

Good morning. My name is Duane Taylor, and I am an ear, nose, and throat doctor just up the road in Bethesda, Maryland. On behalf of the National Medical Association, the nation's African American physicians, I took the time out of a busy schedule to bring a simple message: "we must defend the EPA, not defund it", as some are proposing.

My line of work involves helping people breathe better. My job is less stressful if my patients can breathe clean air and drink clean water. Hacking \$3 billion from core EPA programs that reduce pollution going into the nation's rivers, and help states clean up toxic waste sites, to cite just two examples, is a leap in the wrong direction. It is bad for my patients, and it is bad for all of us.

But the situation is far worse for vulnerable communities. Low income populations, ethnic minorities, children, the nation's elderly, those with compromised immune or respiratory systems, are all at increased risk of exposure to harmful poisons if the EPA cannot perform core public health functions. For those who may be unaware - **lung cancer kills more people than all other cancers combined.** Pollution in the air only increases the likelihood of more people getting lung cancer, not to mention asthma, COPD, and other chronic diseases that cost the health care system billions every year. We are all better off if the EPA can help us prevent some of these diseases.

Every state here represented has budget challenges. If our governors and state houses cannot benefit from the funds H.R. 1 seeks to eliminate, then that's an extra burden that they can ill afford. Worse yet, that's an extra burden on pregnant women and their unborn children, who are especially vulnerable to environmental hazards. With some of the worst infant mortality rates in the industrialized world, **the United States cannot afford to turn its back on investments that have made us progressively healthier in the last three decades.**

The EPA was originally a Republican idea, but it yields nonpartisan dividends. We owe it to every doctor, and every patient, to keep it that way. Thank you for your attention.



We help the world breathe
PULMONARY • CRITICAL CARE • SLEEP

*American Journal of Respiratory
and Critical Care Medicine®*

*American Journal of Respiratory
Cell and Molecular Biology®*

*Proceedings of the American
Thoracic Society®*

DEAN E. SCHRAUFNAGEL, MD
President

NICHOLAS S. HILL, MD
President-Elect

J. RANDALL CURTIS, MD, MPH
Immediate Past President

MONICA KRAFT, MD
Vice President

PATRICIA W. FINN, MD
Secretary-Treasurer

STEPHEN C. CRANE, PhD, MPH
Executive Director

**Statement of the American Thoracic Society
Presented by**

Kent E. Pinkerton PhD
Chair of the ATS Environmental Health Policy Committee
March 10, 2011

I am Dr. Pinkerton, Professor of Pediatrics at the University of California at Davis, and I am speaking today for the American Thoracic Society. The American Thoracic Society understands why Congress is taking steps to reduce America's federal spending. The American Thoracic Society DOES NOT understand why Congress is taking steps to reduce America's health.

In addition to significant spending cuts, the House passed bill, H.R. 1, includes a number of provisions that undermine the health standards of the Clean Air Act. If enacted, H.R. 1 will allow big polluters to emit more pollution into the air American's breathe. It will allow cement kilns to put more mercury, ozone and particle pollution into the sky and allow industry to pump unlimited amounts of carbon pollution into the earth's atmosphere.

More pollution is bad for America's health.

The American Thoracic Society is professional organization of over 15,000 members who treat patients with respiratory, critical care and sleep-related illness. As doctors and scientists who treat patients with lung conditions, we know firsthand how air pollution can harm people's health. The science is compelling and conclusive – air pollution is bad for your health.

Air pollution is bad for the 34 million Americans diagnosed with asthma. We know that patients with asthma who are exposed to air pollution have more asthma attacks, emergency room visits and hospitalizations, and--in rare but tragic situations--die as a result of asthma attacks triggered by air pollution.

Air pollution is equally bad for 12 million Americans with chronic obstructive pulmonary disease or COPD. COPD is the third-leading cause of death in the U.S. Again, scientists know that patients with COPD who are exposed to air pollution end up sicker and frequently die as a result of air pollution.

Air pollution is particularly bad for Californians. Six of the 10 US cities with the worst air pollution are in the California Central Valley.

Whether you are healthy or sick, young or old – air pollution is bad for your health.

We urge Congress to protect the health of all Americans and reject the attacks on the Clean Air Act contained in H.R. 1.

#####



*The ATS is a proud participant
in the 2010 Year of the Lung.*

61 Broadway, 4th Floor
New York, NY 10006-2755
P. (212) 315 - 8600
F. (212) 315 - 6498
www.thoracic.org

ATS 2011 • International Conference • May 13 – 18 • Denver, Colorado



Press Statement by Peter Wilk, MD
Executive Director, Physicians for Social Responsibility
March 10, 2011

It is with deep concern about the grave attacks on public health that I join my colleagues in the health community today. The \$ 3 billion dollar cuts to Environmental Protection Agency's (EPA) budget that is found in H.R. 1 would slash significant progress we have made in clean air, clean water and toxic pollution controls in our communities over the past 40 years. These cuts represent a 30% decrease in the Agency's current budget.

If these deep decreases are not avoided the ripple affect is that all states and local programs that depend on EPA's grants to support vital public health programs will be greatly undermined. Core public health programs that will suffer from a reduced infusion of EPA federal funding include: water sanitation programs that help provide safe and clean drinking water, air pollution programs that assist states to achieve national air quality goals and monitor its progress, controlling toxic chemicals in our environment whether they are coming from a hazardous waste sites, as an accidental releases from local industry or from the house next door with flaking lead paint.

In the end I am not here today to bemoan the lack of funding to support jobs for government employees. Instead, Physicians for Social Responsibility is concerned about the immediate ramifications these potential rollbacks would have to public health protections on the lives of children, pregnant women, the elderly, those with respiratory, cardiovascular, and communities already bearing a disproportionate burden of environmental pollution.

When it comes down to it, it is these people that will pay the cost of these shortsighted actions. Whether it is by paying for more medications, additional doctor visits, hospitalizations, lost workdays, medical care related to pre-mature births and developmental delays from chemical exposures, or loss of life from preventable environmental-related disease. In a nation in which 60% of all personal bankruptcies¹ are related to high medical costs most U. S. families are only a serious illness away from financial ruin. The grievous budgetary reductions proposed by HR 1 to EPA core public health programs will be felt in the pocketbook of everyday Americans and by health care insurance carriers – clearly this is not a cost savings but a shifting of burden unfortunately to those who can ill afford to shoulder its weight.

In closing, on behalf of Physicians for Social Responsibilities 50,000 health professional members and concerned citizens I would like to leave you with a thought – where a Nation puts its money is the closest barometer for how we define our values. In the case of the House HR 1 EPA budget cuts the signal is clear that the protections of human life comes lowest on the totem pole. It is now up to the Senate to restore a common sense approach to fiscal accountability that doesn't sacrifice lives as a means to an end. I wish to thank Senator Boxer and the other Senators with us today who champion tirelessly for the health of our communities, families and our patients.

Physicians for Social Responsibility
1875 Connecticut Avenue NW, Suite 1012, Washington, DC 20009
(202) 667-4260 • www.psr.org
Kristen Welker-Hood, ScD MSN, Director Environmental Health Programs and Policy
(202) 587-5244 – kwelker-hood@psr.org

¹ D. U. Himmelstein, D. Thorne, E. Warren, S. Woolhandler. (2009). Medical Bankruptcy in the United States, 2007: Results of a National Study. *The American Journal of Medicine*. 122(8): 741-46.



**Statement from Dr. Jeffrey Levi, Executive Director, Trust for American's Health
Senate Environmental and Public Works Committee Press Event
Thursday, March 10, 2011 at 11:00 a.m.**

Good morning. My name is Dr. Jeffrey Levi and I'm the Executive Director of Trust for America's Health or TFAH. Many thanks to Chairwoman Boxer and members of the Senate Environment and Public Works Committee for this opportunity to offer remarks on the importance of the Clean Air Act and the work of the Environmental Protection Agency.

TFAH is a nonprofit, nonpartisan public health advocacy organization dedicated to saving lives by making disease prevention a national priority.

To simply say that this country has a chronic disease problem would be an understatement of epidemic proportions. Today, more than half of all Americans live with one or more chronic diseases or conditions -- many of which are linked to or exacerbated by the quality of the air we breathe. More than 75 percent of the approximately \$2.4 trillion dollars spent on health care in this country every year is spent on chronic disease patients, with much of it paid by public insurance programs such as Medicare and Medicaid.

The burden of chronic disease is a threat to the federal budget, American competitiveness, and our quality of life. For over 40 years, the EPA, operating under the Clean Air Act, has been working to protect American families from harmful air pollution and associated health effects, most notably cardiovascular and respiratory chronic diseases.

We are therefore incredibly concerned that legislative proposals to restrict EPA's ability to maintain or update clean air standards would have serious negative consequences for public health. As others will attest to today, these negative effects can and would include increased medical complications, increased hospitalizations, and even mortality. Simply put - the science says air pollution is bad for our health. Rolling back EPA's ability to protect the public from this threat literally has life and death stakes.

Similarly, deep and unwarranted cuts to EPA funding, as we saw in the failed H.R. 1, would cripple EPA's ability to conduct not only its Clean Air Act obligations, but many of its other core functions. This includes EPA efforts to ensure safe and clean drinking water, to clean up contaminated areas, and to protect consumers against toxic substances like lead, PCBs, and many others.

Forty years ago we made a commitment as a nation to clean air for all Americans, regardless of age, geography, race, or socioeconomic status. It would be unhealthy, in just about every sense of the word, to break that commitment today. We are therefore opposed to any efforts that would rollback decades worth of progress we've made towards protecting Americans from an unhealthy environment.