The Role and Function of Small Isolated Public Health Departments: A Case Study in Three Western States

**Background:** Local Health Departments (LHDs) are a critical component of the health system in small isolated rural towns. Despite their importance, they have a low public profile, and little is known about what they do and how they work. This study used a case-study approach to obtain in-depth information about the role and function of six small western LHDs. This focused study follows two previous projects that surveyed LHDs in four western states to obtain general information about their staffing and organization.

**Methods:** We visited six LHDs during the summer of 2000, two in each of the states of Idaho, Montana, and Wyoming. In each location, we interviewed key staff at the LHDs, as well as selected local physicians. We used a semi-structured interview to determine the administrative structure of the LHD and relation to the state of which they were a part, the scope of services offered, the nature of their collaboration with other health care providers and entities at the local and state level, and the major issues that they were confronting in their local settings. A standardized national instrument for measuring the services provided by LHDs was used to allow us to compare our results to national data.

**Major Findings:**
- The role and function of rural LHDs is largely determined at the state level, and there are enormous differences in LHD roles and functions across the three states that we studied.
- These LHDs were very small (fewer than three full-time equivalents working in the average site), but they provide a relatively broad group of services compared with national studies. However, the smallest sites report having difficulty making these services available continuously.
- Partnerships with the local hospital and the local physicians—when they occurred—and support from the local county commissioners allowed more innovations and breadth in the provision of local public health.
- The unavailability of health insurance in the face of rural unemployment and poverty is reported as the greatest public health problem in all six LHDs we studied.

**Policy Implications:** The states are taking very different approaches to local public health. The greater the local districts are integrated with the state programs, and the more resources are made available through state outreach, the more effective the local public health program is likely to be.