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BOOK REVIEWS

Book review of "Pandemics and Polarization: Implications of Partisan Budgeting for Responding to Public Health Emergencies"

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Budgeting for public health emergencies in the United States (US) is on the decline. This is largely due to funding standoffs between the two dominant parties, republicans and democrats, in the US Congress. The author, Nathan Myers, takes a deep dive to explore how these budgetary decisions have become increasingly partisan over time. He examined differences in party votes and provided compelling examples with recent disease outbreaks where partisan bickering created delays and reduced funding, which contributed to unnecessary deaths and suffering. This book sheds light on how these political feuds are detrimental to the public health system by limiting its ability to respond quickly and effectively to infectious outbreaks.

Myers begins by re-enacting a public health emergency exercise with all the panic and confusion that typically goes into the fear of a possible worldwide pandemic. He paints a realistic picture to discuss some of the key issues that emerge when a virus has been discovered with no known vaccine to protect against it. Immediately, attempts to institute the three major components of public health preparedness: surveillance, countermeasures, and coordination between different levels of government and countries surfaced. Myers' stressed how each of these activities needs access to funding at the outset of an outbreak in order to readily deploy a health care workforce, begin rapid diagnostics to detect the spread of a virus or infection, as well as the ability to expedite development and distribution of the newly created vaccines.

Overall, Myers makes a persuasive argument by taking the reader step-by-step through different public health emergencies in recent history and how they were poorly addressed with delayed timing and insufficient funds largely due to partisan related issues. The essential components of public health preparedness – surveillance, countermeasures, and coordination – were consistently not optimally conducted due to a slow response from the US government. He highlighted that even in the midst of a clearly recognizable public health emergency, the funding could still come too late and be minimal compared to the request and need.

Myers primarily focused on the appalling handling of the Zika virus and what could happen in future epidemics if no action is taken to address partisan federal budgeting for public health emergencies. In this example, he identified serious gaps in the US public health emergency infrastructure, which has implications for the world. The initial outbreak of the Zika virus occurred during a US government funding showdown, which have become longer and more prevalent events. This shutdown led to months of stagnation in the US Congress before $1.1 billion in funding was finally passed for a Zika response, but this was "too little, too late" (p. 18).

Another notable example is the perception of underestimation, and Myers credited the H1N1 influenza with inadvertently contributing to this belief. Essentially, the virus did not prove to be as severe as predicted and had a successful response by developing, producing, and distributing 126.9 million doses of vaccine to 81 million people (p. 47). Myers suggested that because the H1N1 virus did not result in the projected harm, then it had cultivated an air of underestimation by the public and legislators, which could lead to a false sense of security, and fewer overall dollars to respond to future public health emergencies. Voters are less likely to advocate for public health emergency funding if they don't feel it is a problem "[they] sense that money is being spent on something that may never happen… it is an issue that continues not to poll very highly" (p. 88). If voters are indifferent to public health emergencies, then legislators may not be as inclined to prioritize this type of funding.

A third major concern that Myers identified is with the current US political system and legislators is the trend to pander to the voting base, especially if it is in an election year. This influence has implications for public health emergencies in that legislators may pass controversial travel bans and quarantines to appear decisive for their base. However, the Centers for Disease Control and Prevention and the National Institutes of Health strongly recommend not passing these problematic measures, which could unduly harm basic human rights. Instead, there should be increase surveillance, such as a fever watch, as one example of an effective, but less dramatic response.

Myers provided additional recommendations that all circle back to overcoming partisan budgeting by creating stronger incentives for better communication, surveillance, and care in cases of public health emergencies. His thoughtful critique highlights significant gaps in how dangerously intertwined partisan politics are with responding to epidemics, which could result in a devastating loss of life for America and worldwide. Hopefully, this book will spark an overdue debate on this topic, which goes beyond party lines and provide needed protection against foreseeable emergencies.

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