

## Birth Defects Surveillance Program Personnel

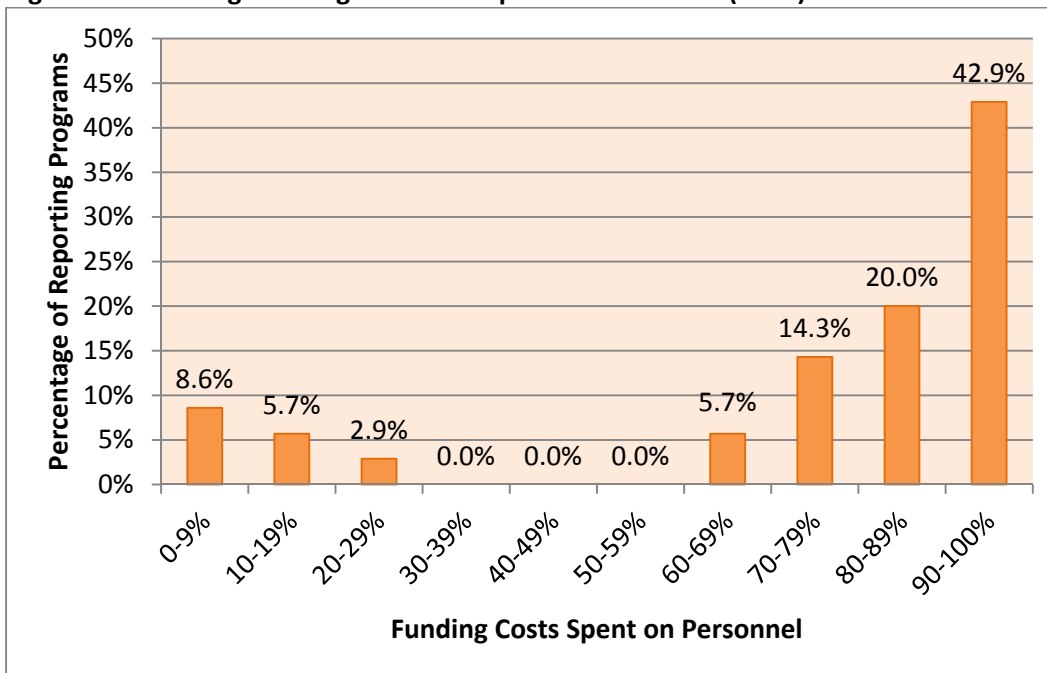
To be successful, birth defects surveillance programs require personnel with a variety of skill sets. Such personnel include data abstractors, information technology staff, epidemiologists, statisticians, support staff, and program administrators. The overall goals and objectives of each state's program and its strategies for gathering data determine which roles are needed and how many individuals are needed to fill them.

### Methods and Results

In 2009, ASTHO conducted an online survey of 43 state and territorial birth defects programs to assess their approaches to birth defects surveillance and tracking. Due to the number of staff roles that are required to run successful surveillance programs, a large percentage of program funds are often devoted to staffing expenses. Nearly two-thirds of reporting programs indicated that at least 80 percent of their budget was dedicated to personnel costs, with 42.9 percent (n=15) of responding programs reporting that personnel accounted for 90-100 percent of their annual costs (Figure 1). Programs reporting less than 30 percent of overall expenses for staff may rely in large part on in-kind contributions of time from partners to complete the tasks required of surveillance systems.

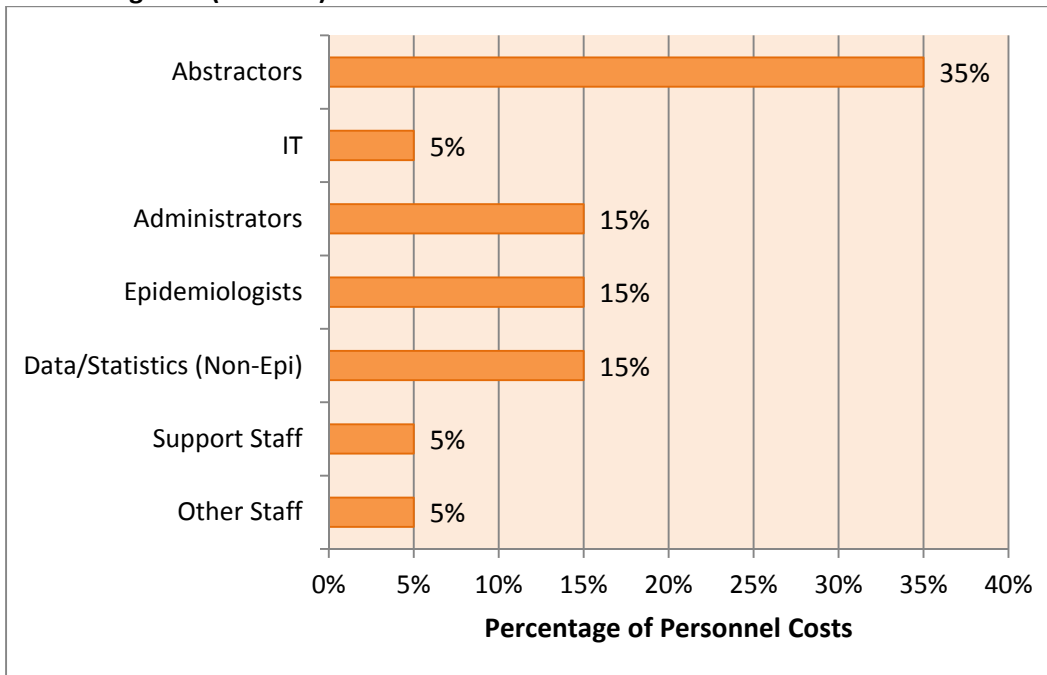
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**Figure 1. Percentage of Program Funds Spent on Personnel (n=35)**



Staff distribution in the various roles and how positions are funded depends on the state program's objectives and whether they are using passive or active case ascertainment strategies. Programs often receive in-kind support for select services within their surveillance programs, which would not be reflected in their staff expense reporting. Such in-kind support allows for direct funds to be allocated to other aspects of their program. To assess the distribution of costs for each of the various positions, programs reported their estimated percentage of personnel costs by role (Figure 2).

**Figure 2. Median Program Costs Associated with Personnel Roles for Reporting State-Based Programs (n=14-29)\***



\*Note: Categories are not mutually exclusive; not all states responded to all personnel role categories.

Despite the important role birth defects surveillance plays in improving public health, these programs often face budget cuts and challenges. Given that a majority of state-based programs' funding is devoted to personnel, staff positions may be at risk of elimination or reduction should program funding become inadequate. Nearly 40 percent of respondents reported that their program staff had decreased over the past two years (2007-2009), with only 13.9 percent of states indicating their staff had increased. Such personnel cuts may affect the future success of birth defects surveillance programs.

### Future

State-based birth defects surveillance programs anticipate that their funding streams will continue at the same proportional levels over the next two years (2010-2011), and approximately 30 percent of respondents expect their staff to increase. However, although the proportions of funding from each source may remain the same, the actual amounts may decline, which may put certain staff positions at risk of elimination depending on the program's overall objectives and the skill sets required to meet those objectives.

While programs may have been able to capitalize on partners' in-kind services to provide necessary skills needed for surveillance activities, programs should continue to seek additional, diverse funding at state and national levels in anticipation of any budget cuts. Birth defects programs must also continue to expand their partnerships with other agencies to ensure that children and families affected by birth defects are identified and continue to receive appropriate referrals and services, despite any personnel changes that may occur.