

LOCAL HEALTH DEPARTMENTS NEED ZIKA FUNDING NOW

Public Health Emergency Preparedness (PHEP) funds are essential for local Zika response and other threats



A virus primarily spread to people through mosquito bites, most often by the *Aedes* species

THE FACTS ON THE ZIKA VIRUS



Transmission is primarily occurring in Central and South America and the Caribbean, but many other areas including the United States are at risk



Risks of infection include birth defects and other serious health issues

LOCAL HEALTH DEPARTMENTS PROTECT COMMUNITIES AGAINST ZIKA AND OTHER HEALTH THREATS

Local health departments (LHDs) already perform a variety of Zika response activities making these agencies vital to keeping communities safe from this dangerous virus.



COLLABORATE WITH OTHER ZIKA RESPONSE PARTNERS

69%

State health departments

46%

Environmental health agencies

32%

Vector control agencies



INCREASE READINESS FOR THE ZIKA VIRUS

35%

Deliver training to LHD staff

34%

Create response plans

29%

Investigate potential Zika cases



PROVIDE EDUCATION AND OUTREACH ABOUT ZIKA

47%

Educate general public

39%

Discuss pregnancy risks with women

35%

Share resources with healthcare providers

THE ZIKA FUNDING DILEMMA: LOCAL HEALTH DEPARTMENTS LACK CAPACITY FOR EMERGENCIES



Congress has yet to provide additional funding to respond to the Zika Virus threat.



The Centers for Disease Control and Prevention has redirected Public Health Emergency Preparedness (PHEP) funds as a solution.



PHEP funds were taken from local and state health departments, decreasing their response capacity for Zika and other emergencies.



Relevant funds for infectious disease, epidemiology, lab capacity, vector control, and environmental health also remain stagnant.

WITHOUT CONGRESSIONAL APPROVAL FOR ADDITIONAL ZIKA FUNDING, LOCAL HEALTH DEPARTMENTS WILL BE IMPEDED FROM PROTECTING THE COMMUNITIES THEY SERVE...

52% predict an average of 8.5% cuts to their PHEP funding



LOCAL HEALTH DEPARTMENTS

47% predict a negative impact on staffing due to PHEP funding cuts

predict the following five vital preparedness activities will be most negatively impacted:

75%
community preparedness

48%
volunteer management

43%
medical countermeasures

38%
emergency coordination

36%
community recovery