



National Association of County & City Health Officials

*The National Connection for Local Public Health*

## **FOR IMMEDIATE RELEASE**

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## **ONE IN TWO LOCAL HEALTH DEPARTMENTS CONCERNED ABOUT THE IMPACT OF LOOMING CUTS ON THEIR ZIKA RESPONSE EFFORTS**

**Washington, DC, May 16, 2016**—Two newly released studies of county, city, and state health departments starkly illustrate the need for continued Public Health Emergency Preparedness (PHEP) funding to safeguard our nation’s health. The studies were conducted by the [National Association of County and City Health Officials](#) (NACCHO) and the [Association of State and Territorial Health Officials](#) (ASTHO), in coordination with the [Association of Public Health Laboratories](#) (APHL), and the [Council of State and Territorial Epidemiologists](#) (CSTE).

On March 16, 2016, the Centers for Disease Control and Prevention (CDC) announced a shift of \$44.2 million from the current fiscal year state and local base PHEP grants to pay for the Zika response. The CDC took this action because Congress has not appropriated emergency Zika funding to pay for current and future CDC Zika preparedness and response activities as requested by President Obama in February. These studies were undertaken to determine how the redirection of PHEP grants may affect local health departments’ ability to carry out their mandate to protect the public’s health.

The studies reveal PHEP spending cuts will decrease local health departments’ ability to plan and respond to emergencies. The studies also indicate local health departments are estimated to receive an 8.5% reduction in PHEP grant funding. In particular, half of local health departments that responded to NACCHO’s study expected

PHEP funding cuts to have some or significant impact on their local health department's jurisdiction's Zika preparedness and response, as well as other emergency efforts. Many respondents expressed concern that the redistribution of funds threatens the sustainability of preparedness programs and sets a dangerous precedent.

“When you weaken the local public health infrastructure, you weaken a community's ability to respond to emerging threats, natural disasters, or any emergency. Local health departments are rightfully concerned because their ability to respond after an emergency is directly related to their capacity and preparedness before the emergency,” said LaMar Hasbrouck, MD, MPH, NACCHO's executive director.

Local health departments reported that public health preparedness capabilities most negatively impacted by PHEP funding reprogramming are community preparedness, followed by volunteer management, and medical countermeasure dispensing. They also reported that pre-event readiness, the availability of supplies and staffing levels will be hampered by funding cuts. Nearly half of local health departments reporting expected a decrease in staffing capacity as a result of cuts with local health departments predicting the high possibility of staffing cuts hiring freezes, furloughs, and the reassignment/reduction of staffing duties.

Said James S. Blumenstock, ASTHO's chief program officer, health security, “The survey results clearly show that, no matter how necessary it may be to reprogram funds for a specific emergency, it will have consequences on the overall preparedness and response capabilities of our nation's public health system. All the more reason why we urge the Administration and Congress to come together and swiftly provide needed resources to combat Zika, including restoration of the Public Health Emergency Preparedness Cooperative Agreement funds.”

Respondents expressed concern about their ability to perform adequately with limited or reduced money for supplies, training, exercises or personnel. Local health departments perform a myriad of critical services including epidemiological investigations, disease surveillance, community outreach and education, and preventative services as part of Zika and other disease preparedness and response activities. But how much more can

they do with less? Local health departments want to serve but they need the resources to mount a sustainable and effective public health effort. What if there is another virus, another emergency, or what if Zika infections become more and more common in the United States?

It is challenging to address local health departments' Zika preparedness in the context of other ongoing activities and competing priorities. However, with emergency Zika funding, local health departments will be better prepared if and when cases of disease go up and will have increased capacity to respond when the risk is greatest. If Congress approves emergency Zika funding to restore and increase local and state health department funding, this is possible.

[Click here to read the studies.](#)

## **ABOUT NACCHO**

The National Association of County and City Health Officials (NACCHO) is the national nonprofit association representing the approximately 2,800 local health departments (LHDs) in the United States, including city, county, metro, district, and tribal agencies. NACCHO's vision is health, equity, and security for all people in their communities through public health policies and services. NACCHO's mission is to be a leader, partner, catalyst, and voice for local health departments in order to ensure the conditions that promote health and equity, combat disease, and improve the quality and length of all lives.

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