

State and Territorial Health Agencies and the Zika Virus

Since early 2016, the Association of State and Territorial Health Officials (ASTHO) has supported state and territorial health agencies (S/THAs) in the fight against the Zika virus. Of particular public health concern is the maternal-fetal transmission of the virus, which can result in severe birth defects like microcephaly. In addition, current research suggests that in rare cases, the uncommon nervous system disorder Guillain-Barre syndrome (GBS) can be associated with Zika.

The Zika virus is transmitted principally by *Aedes aegypti* and *Aedes albopictus* mosquitoes, the same mosquitoes that transmit dengue, yellow fever, and chikungunya viruses. As of April 4, 2018, there have been 5,676 travel-associated and locally acquired Zika virus disease cases reported in the U.S. states and Washington, D.C., and 37,190 cases reported in the U.S. territories and freely-associated states.¹ Zika virus transmission is a large concern, especially in parts of the country where the mosquito vectors are present and local disease transmission is possible. This issue brief outlines the activities that S/THAs are conducting as part of their work on Zika prevention and response.

Presence of Zika Virus Vectors and Cases

More than half of S/THAs have detected the presence of Zika virus vectors in their jurisdictions since January 2016 (**Figure 1**). Almost all S/THAs report at least one confirmed case of travel-associated Zika virus since January 2016 (**Figure 2**).

Figure 1: Presence of Zika Virus Vectors in State/Territory since January 2016 (N=50)

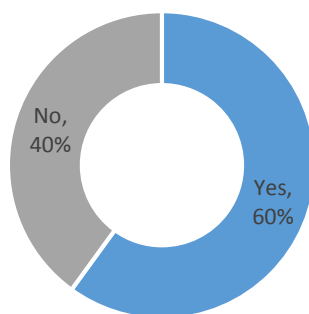
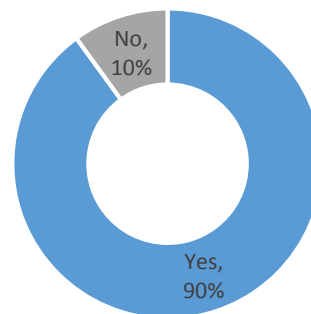


Figure 2: Confirmed Travel-Associated Zika Cases in State/Territory since January 2016 (N=51)

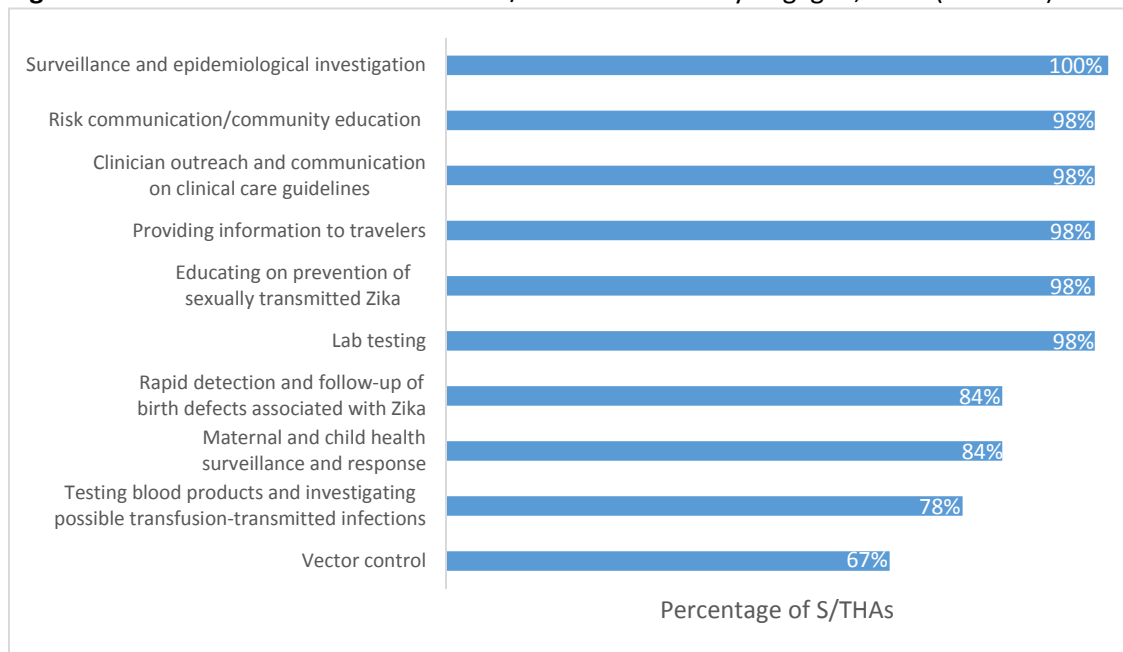


State and Territorial Health Agency Activities

S/THAs are involved in a number of Zika virus outbreak response activities. **Figure 3** depicts S/THAs' Zika prevention and response activities. All responding agencies indicated that they perform Zika virus surveillance and epidemiological investigation.

¹ CDC. "Zika Virus Disease Cases Reported to ArboNET." Available at <https://www.cdc.gov/zika/index.html>. Accessed 05-02-2018.

Figure 3: Zika-Related Activities in which S/THAs are Currently Engaged, 2017 (N=48-51)*



*Note: Response options for this question included “currently engaged,” “planning to engage,” “neither engaged nor planning to engage,” or “not sure.”

State and Territorial Health Agency Resources

Despite the increasing demands on S/THAs to respond to new threats like the Zika virus, in 2017, many S/THA total² budgets either remained the same (46%) or decreased (31%) from their 2016 levels. In 2018, 39 percent of S/THAs expect their budgets to decrease from 2017, while 36 percent of agencies expect their budgets to stay the same. In addition, when asked to predict which services would be affected by a potential CDC budget reduction, 33 percent of S/THAs indicated that preparedness and response services, such as Zika virus activities, would be affected. S/THAs provide vital, comprehensive public health services, and this critical work requires continued, robust public health funding.

Data Source

This data is from ASTHO’s 2017 Forces of Change Survey, an annual survey completed by the state and territorial health agencies that comprise ASTHO’s membership. ASTHO is the national nonprofit organization representing public health agencies in the United States, the U.S. Territories, and the District of Columbia, and the over 100,000 public health professionals these agencies employ. The full 2017 Forces of Change Survey Report can be accessed at <http://www.astho.org/Research/Forces-of-Change/>.

Acknowledgements

For more information about the Forces of Change Survey, please email ASTHO’s Research and Evaluation team at profile@astho.org. For more information about ASTHO’s work on the Zika virus, visit <http://www.astho.org/Zika/>.

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² Agencies were asked to report on total budgets, and response options did not distinguish between usual funding streams and congressional emergency supplemental appropriations.