DIRECT FROM CDC ENVIRONMENTAL HEALTH SERVICES

Report Summary: The Role of Local Environmental Health **Departments in Tick-Related** Activities and Services

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Editor's Note: NEHA strives to provide up-to-date and relevant information on environmental health and to build partnerships in the profession. In pursuit of these goals, we feature this column on environmental health services from the Centers for Disease Control and Prevention (CDC) in every issue of the Journal.

In these columns, authors from CDC's Water, Food, and Environmental Health Services Branch, as well as guest authors, will share insights and information about environmental health programs, trends, issues, and resources. The conclusions in these columns are those of the author(s) and do not necessarily represent the of cial position of CDC.

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ases of tickborne disease have more disease, and Heartland virus disease (Rosen-services and activities (NACCHO, 2019). The tickborne diseases (Rosenberg et al., 2018). Farley, Forrester, & Mead, 2015). Certain regions of the U.S. have been more greatly impacted than others. For example, reported tickborne diseases in the U.S. have professionals were commonly involved in reported cases of spotted fever rickettsiosis become a vexing public health issue, placing increased dramatically from 2016-2017, with strain on state and local health departments New England, East North Central, and Middle (Rosenberg et al., 2018). Slightly more than Atlantic regions reporting a 215%, 78%, and half of all local health departments (LHDs) 65% increase in cases, respectively. Similarly, provide vector control services and a recent reported cases of anaplasmosis increased by survey of the environmental health (EH) 39% (Heitman et al., 2019). Furthermore, workforce shows that 38% of EH profestickborne diseases are emerging, including sionals reported working in vector control Borrelia miyamotoi disease, Bourbon virus (Gerding et al., 2019; National Association

than doubled in the past 13 years and berg et al., 2018). Causing further alarm, the represent three quarters of all reported number of counties in the northeastern U.S. vectorborne disease cases in the U.S. Lyme dis-at high risk for Lyme disease has increased by in various tick activities, including their prac-

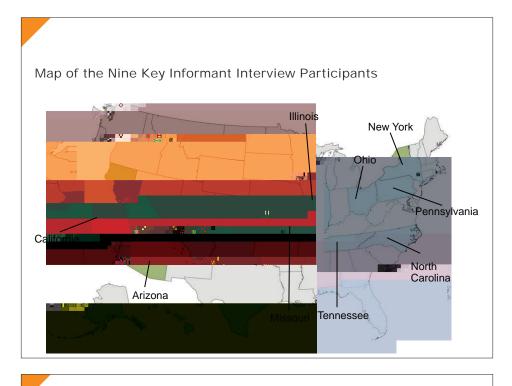
The steadily increasing numbers of

of County and City Health Of cials [NAC-CHO], 2016). In addition, a web-based review of vector control programs suggested that 39% of programs offering tick services were LHD EH vector control programs (Ruiz, Vanover, Parale, & Gerding, 2018).

While many LHDs perform vector surveillance and control activities, the number and types of tick-related activities performed is poorly understood. To this end, the Centers for Disease Control and Prevention (CDC) and the National Association of County and City Health Of cials (NACCHO) partnered on an effort to gain a better understanding of current LHD EH department tick-related activities and services offered and their needs for strengthening and enhancing those services. From March to May 2019, key informant interviews were conducted with eight local EH departments and one tribal EH department (Figure 1) with varying geographic locations, population size served, population densities, and levels of sophistication of tick and vector control

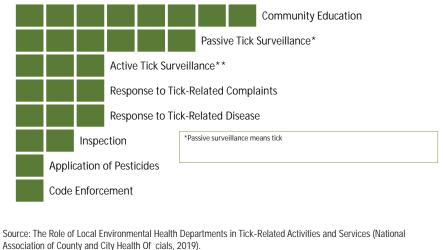
key informant interviews sought to identify the level of involvement of EH professionals ease alone accounted for over 80% of reported more than 320% since the late 1990s (Kugeler. tices and resources they use, as well as their technical assistance and resource needs.

> Among EH departments interviewed, EH passive tick surveillance and community education and outreach but they were less likely to be involved in tick control and management (Figure 2). EH professionals utilized resources from CDC's website, state health departments, and local universities to answer tick-related questions and they found it useful to partners both internally and externally for tick-related activities. Partner



Tick-Related Activities Performed by Key Informant Interview Participant

Most of the vervez professionals interviewed perform community education and passive tick surveillance.



ships were leveraged for increased capacity to conduct tick-related activities such as public outreach, surveillance, control, and management. Additionally, EH professionals were aware of current and emerging tick issues in their jurisdiction and cited Lyme disease as a top concern. In contrast, some respondents cited that the public, upper-level management, including boards of health, and medical professionals were unaware that ticks are an issue in their communities.

EH professionals reported challenges that include a lack of direct funding and inadequate staf ng for tick-related activities (see sidebar). While EH professionals face barriers to conducting tick-related activities, the respondents highlighted a few key opportunities for strengthening capacity or enhancing efforts:

- [Conducting routine tick surveillance, even on a small scale, to establish baselines and provide insight into trends.
- [Using a community health improvement plan to identify ticks as a priority for their communities and help justify resources for tick-related activities.
- [Engaging constituents in the development of tick-related policy can provide understanding into community concerns and priorities.

The key informant interviews and subsequent report provide insight into the role of EH departments in tick activities and services, as well as the challenges they face. As tickborne diseases continue to grow and threaten the publics health, communities might look to their local EH departments to provide resources and solutions. EH professionals should seek opportunities to strengthen tick-related services in order to meet the needs of their communities and protect public health.

ADVANCEMENT OF THE PRACTICE

EH professionals are encouraged to use available resources to enhance their knowledge