



Statewide Impacts of National Zika Response

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Like Ebola and bird flu before it, Zika is the latest infectious disease threat to emerge into the public spotlight. While we are cautiously optimistic that transmission of Zika in Minnesota will be low, the outbreak has exposed other problems—specifically, the challenges of maintaining a strong public health emergency preparedness system in the face of increasingly uncertain federal support.

Researchers and health officials have known of Zika for decades but considered it a minor health threat. The recent outbreaks in Latin America, however, have linked the virus to increased risk of microcephaly, an otherwise rare but devastating birth defect in which infants are born with an abnormally small head.

Fortunately, the mosquito primarily blamed for spreading Zika—a tropical pest called *Aedes aegypti*—has never been found in Minnesota. The other mosquito known to be capable of spreading Zika—*Aedes albopictus*—is a very rare visitor to Minnesota and is thought to be unable to survive our winters.

Unfortunately, Minnesotans with travel plans may still have reason for concern. The mosquitoes known to transmit Zika live not only in Latin America but also in parts of the southern and eastern United States. The virus also can be spread by sexual contact.

The bottom line is that Zika is going to be around for a while, and with more than 470 travel-associated cases already reported in the U.S., the outbreak may get worse before it gets better. Public health officials at all levels have been working hard to inform people, monitor for potential Zika cases among travelers and strongly encourage pregnant women to postpone travel to Zika-affected areas. Governments are also stepping up efforts to control mosquito populations—especially in southern states where *Aedes aegypti* lives.

Earlier this year, President Obama requested \$1.8 billion from Congress to bolster Zika-fighting efforts. As of the time this article was sent to press, however, Congress has yet to act. As a result, the Centers for Disease Control and Prevention (CDC) has been forced to redirect money from state and local public health emergency preparedness (PHEP) grants to fund Zika-response activities.

No doubt, the immediate threat of Zika demands a response. However, public health officials around the country have voiced concerns that this redirecting of federal funds—coming on the heels of a string of federal funding cuts—will have immediate and wide-reaching effects on our nation’s overall emergency response system and communities’ ability to plan for and respond to other emergencies that threaten public health.

PHEP is Minnesota’s main funding source for statewide emergency preparedness work. The CDC’s need to redirect our state’s funds to other states and territories means Minnesota’s PHEP grant will be reduced by \$744,000 beginning July 1. This represents a 7% cut to our base funding award and 10% cut to the Cities Readiness Initiative, which supports emergency preparedness in Anoka, Carver, Chisago, Clay, Dakota, Hennepin, Isanti, Mille Lacs, Le Sueur, Ramsey, Sibley, Scott, Sherburne, Washington and Wright counties, as well as four cities in the metro area.

The Minnesota Department of Health is taking immediate action to reduce costs and absorb this federal funding cut. In addition, some changes will impact local governments, including:

- Decreasing funding and support for local health departments;
- Reducing the amount of medication on hand for emergencies;
- Dropping the number of exercises to practice emergency response procedures; and
- Eliminating strategic planning sessions with community partners.

We are concerned about the impact these cuts will have on our ability to plan for and respond to emergencies throughout the state and the impact they will have on local health departments and the communities they serve.

We shared these concerns with Minnesota’s congressional delegation and were pleased to see Senator Franken co-sponsor a bill to fully fund the President’s Zika request, which would lessen the need to redirect existing PHEP grants. We urge Congress to fully join the fight to protect Americans from Zika and preserve our PHEP capacity to respond to the myriad other public health crises that demand government action—from natural disasters to terrorist threats, infectious disease outbreaks and more.

Minnesota’s public health community remains committed to protecting the people of our state from public health threats. To maximize our chance of success, state and local efforts in this regard require a strong, sustained, stable investment in our PHEP system and collaboration by federal partners. ■



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