
Ebola: Local Health Departments' Role in Global Crisis



Experience with the Ebola outbreak highlights local health departments' essential role in responding to global health threats posed by infectious diseases, according to a special article in the March/April issue of the *Journal of Public Health Management and Practice*. The journal is published by Lippincott Williams & Wilkins, a part of Wolters Kluwer Health.

In a special "News from NACCHO" feature, Frances Bevington, Katie Schemm, Lilly Kan, and Chris Aldridge of the National Association of County and City Health Officials (NACCHO) discuss lessons learned from assisting US health departments in response to Ebola. They write, "Local health departments, within the United States and abroad, are the first to respond to infectious disease threats, and as such, play a critical role in achieving the Global Health Security Agenda."

As the voice of 2,800 US local health departments, NACCHO has been closely monitoring the Ebola outbreak and working to help coordinate national preparedness and response efforts. One key function has been responding to requests for technical assistance from county and city health departments.

Bevington and coauthors summarise key areas in which local health departments asked for help in responding to the Ebola threat--with important implications for their frontline role in protecting global health security.

- Interpreting and implementing federal guidelines. When the first domestic cases of Ebola occurred, local health departments requested assistance from NACCHO in accessing and implementing federal guidance. Urgent issues included handling of medical waste, and especially the use of personal protective equipment (PPE). "Perceived and real conflicts" between federal and state guidance contributed to confusion over isolation and quarantine of travellers arriving from West Africa.
- Forming partnerships to prepare for and coordinate response. Health departments needed to act quickly in concert with local healthcare partners--especially when federal agencies asked hospitals to help in identifying and managing possible Ebola cases. The experience highlights the importance of healthcare coalitions between public and private health organisations in the community in planning, training, and responding to public health emergencies.
- Communicating accurate and timely risk information. Local health departments urgently needed informational resources on Ebola--including materials in appropriate languages and reading levels--to stem fear and panic caused by misinformation and rumours. "While the number of cases were low, the level of response necessary to mitigate both perceived and actual risk to the public was extremely high," the NACCHO authors write.

Based on their experience, NACCHO offers recommendations to help local health departments better prepare for global health security threats. These include:

- Having dedicated staff to interpret federal guidance, work with community partners, respond to information requests, and disseminate risk information.
- Participating in health care coalitions to improve coordination between local health care departments and healthcare facilities.

- Working with state health departments to review and test isolation and quarantine plans, as well as to plan for the resources needed when global health threats occur.
- Seeking opportunities to learn about global health security threats, such as the upcoming 2015 Preparedness Summit.

Especially at a time of shrinking federal budgets, "Local health departments cannot respond to global health security threats alone," the NACCHO authors write. The Ebola experience demonstrates the need for "sustainable preparedness" and resources to support local responses to global health threats. Bevington and coauthors conclude, "Fully achieving the Global Health Security Agenda will require an ongoing investment in developing the capacity and capability of local health departments to prepare for and respond to threats like Ebola."

Source: [Wolters Kluwer Health](#)

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