VISION

State and territorial health agencies advancing health equity and optimal health for all.

MISSION

To support, equip, and advocate for state and territorial health officials in their work of advancing the public’s health and well-being.
ASTHO’s Environmental Health Program

- Part of larger Health Security portfolio.
- Currently 7 staff members on team.
- Work on a variety of EH issues: food and water safety, vector-borne and zoonotic diseases, HiAP, climate change, EH Informatics, and convening the state environmental health directors.
- Variety of resources available
ASTHO Program Highlights

- Health in All Policies
- Water Preparedness
- Environmental Public Health Tracking
- Vector-Borne Disease
- Food Safety
- Climate and Health
Health in All Policies (HiAP)
Health in All Policies is a collaborative approach that integrates and articulates health considerations into policy making across sectors, and at all levels, to improve the health and equity of all communities and people.
Why HiAP?

• Health determined by *factors outside health* care and public health

• *Complex problems* that cannot be solved by health agency alone

• Demand for *greater efficiency and accountability* in government agencies as resources dwindle
Key Elements of HiAP

• Defining mutually beneficial goals
• Cross-sector collaboration
• Stakeholder engagement
• Opportunity for policy change
• Promotion of health and health equity.
Foundations of HiAP

- **Relationships**
  - Policymakers
  - Political will
  - Cross-sector or community relationships
  - Public support
  - Federal/national partnerships

- **Informational Resources**
  - Evidence about the impacts of policies on the social determinants of health
  - State and local data
  - Tools to analyze health impacts
  - Health promoting evidence-based policy alternatives

- **Personnel Resources**
  - HiAP champion or spokesperson
  - Leadership support and health-focused staff in partner agencies
  - Health agency staff with diverse skills and expertise

- **Funding Resources**
  - Federal grants
  - Private/foundation grants
  - State general funds
  - Payment for consultation from other agencies

- **Legal Resources**
  - Existing state laws supporting health considerations in other sectors
  - New state legislative initiatives
  - Federal mandates or guidelines
# Benefits and Challenges to HiAP Implementation

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<th>Benefits</th>
<th>Challenges</th>
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<td>New and lasting partnerships are formed that can reap benefits long into the future.</td>
<td>Policymaking is a complex bureaucratic and political process.</td>
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<td>Health is considered in policies that may have historically overlooked certain outcomes.</td>
<td>Specific HiAP interventions may be effective in one context, but not in another.</td>
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<td>Additional stakeholders are involved in the decision-making process about public policies and programs.</td>
<td>HiAP operates in complex and dynamic systems that involve a range of sectors and disciplines, drawing on multiple, specialized knowledge bases.</td>
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<td>Equity issues are brought to the forefront.</td>
<td>Evaluation parameters may be difficult to agree on given differing organizational cultures and expectations.</td>
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<td>Increased understanding of the social and environmental determinants of health.</td>
<td>Policy and process changes may be required in several sectors and departments to achieve shared objectives.</td>
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Phases of Implementation

Implementation Activities

**Informational**
- Build support for HIAP
- Conduct trainings for health/other sector partners
- Host a HIAP leadership institute
- Integrate HIAP into local university curriculums
- Collect and promote promising practices
- Provide resources and support to local health departments
- Share health data and metrics
- Host partnering/networking meetings
- Create effective public messaging about HIAP and health equity

**Consultative**
- Invite participation from other sectors into state health planning processes or advisory groups
- Provide health-based consultation to another sector
- Address community concerns

**Engaging**
- Engage with stakeholders and communities
- Define a common language across sectors
- Integrate HIAP into Affordable Care Act requirements
- Integrate health considerations into funding mechanisms
- Participate in a cross-sectoral strategic planning process

**Collaborative**
- Identify complementary goals or activities with another partner agency
- Bolster existing agency programs and/or services
- Create or participate in multi-agency workgroups, councils, or task forces
- Create health performance metrics across sectors
- Conduct HIAs or HLAs
- Educate policy makers about HIAP
- Integrate health considerations and/or metrics into ongoing permitting or planning processes
- Fund HIAP initiatives jointly with another agency
Phases of Implementation

Informational
• Agency exchanges information with partners who share similar values

Consultative
• Agency leads activities and solicits periodic input from partners

Engaging
• Partners join lead agency in planning and/or implementing activities

Collaborative
• Partners share responsibility throughout planning & implementation
Health in All Policies and Lead Collaborative

Supported by the Centers for Disease Control and Prevention, National Center for Environmental Health
Water Preparedness & Response:
A Scan of State and Territorial Health Agencies
Goals for Water Preparedness Survey Data

• Better understand gaps and challenges in state drinking water preparedness efforts, including planning, response, and recovery phases.

• Identify strengths and understand the complexities of water preparedness.

• Reflect on documented challenges to help inform next steps and opportunities.
Agency Structure

• Oversight of Public Water Systems
  • EH oversees 47%

• EH largely able to collaborate with other programs despite varying relationship structures
Water Preparedness Planning

Risk Communication

- 77% of agencies engage in risk communication activities

Opportunity for information-sharing and collaboration on Risk Communication strategies.

Figure 7. State and Territorial Health Agency Hazard Assessment Activities

- Providing risk communication: 77.1%
- Looking at flood maps: 65.7%
- Conducting sampling: 62.9%
- Other: 45.7%

(N=35)
Water Emergency Response

Public Water System
- 16% of agency program management changes during water emergency

Private Water System
- 32% of agency program management changes during water emergency

Management of response can change depending on whether water supply is Public vs. Private and whether response is Routine vs. Emergency.
State Requests for Guidance Materials

- **PER- AND POLYFLUOROALKYL SUBSTANCE (PFAS) GUIDANCE MATERIALS.**
- **GUIDANCE ON RESPONDING TO EMERGING CONTAMINANTS.**
- **INFORMATIONAL VIDEOS ON WATER ISSUES.**
- **BEST PRACTICES AND EXPERT RECOMMENDATIONS FOR ADDRESSING EMERGING ISSUES.**
ASTHO Water Preparedness Resources

• State of Water Preparedness Report
  • Water Preparedness Brief *(coming soon)*

• PFAS
  • Risk Communication Clearinghouse: [www.astho.org/PFAS](http://www.astho.org/PFAS)
  • Risk Communication FAQs *(coming soon)*

• Harmful Algal Blooms
  • ASTHOExperts video *(coming soon)*
  • Guidance document for clinicians *(coming soon)*
Environmental Health Tracking: CDC’s National Tracking Network

- The National Tracking Network (NTN), started in 2002, uses health, exposure, and hazard information and data from national, state, and city sources.

- Surveillance that explores the relationships between environmental exposures and health outcomes in areas where people live and work, using maps, charts, and other visualizations tools.

- CDC funds 25 state and one local health department to develop tracking networks.
ASTHO’s EPHT Fellowship Program

- **Est. 2008** to help non-funded states build tracking knowledge and capacity
- 3-4 fellows are matched with CDC tracking states, who provide mentorship, resources, and technical support for 6-9 months
- **27 unfunded states and cities** have participated
- ASTHO provides fellows with a **travel stipend** for a 1-2 day site visit with their mentor state
Vector-Borne Disease Program

- ASTHO works closely with the National Association of Vector-Borne Disease Control Officials (NAVCO)
- NAVCO develops and maintains close working relationships among state, federal, and other agencies engaged in public health vector control, promotes effective health measures in the field of vector control, and facilitates the exchange of technical and applied knowledge among the membership
Food Safety: About CIFOR

**Vision:** Local, state, and federal partners collaborating effectively to reduce the burden of foodborne illness in the U.S.

**Mission:** To improve methods at the local, state, and federal levels to detect, investigate, control, and prevent foodborne disease outbreaks

**Approach:** identify barriers, develop projects through workgroups to address gaps in overcoming barriers
CIFOR Member Organizations and Agencies

https://cifor.us/products/guidelines
Climate Change

Many state and territorial health departments are already working to combat the health impacts of climate change such as extreme heat, changes in vector-borne disease patterns, and transmission of waterborne diseases. ASTHO is helping its members prepare for climate change in the same way they prepare for natural disasters, extreme weather, and bioterrorism.

Building Climate Change Capacity

Climate Change Capacity Building Grants
ASTHO, in conjunction with the Centers for Disease Control and Prevention/National Center for Environmental Health, funds and supports demonstration projects that establish coordinating opportunities for climate change at state and territorial health agencies (S/THAs).

Climate-Ready Territories
ASTHO's Climate Ready Territories project provides technical assistance and training opportunities to support insular area health agencies prepare for and respond to the health effects that climate change may bring to their communities.

ASTHO's Climate Change Needs Assessment Surveys
ASTHO aims to help state health agencies prepare for health effects related to climate change by building capacity for climate change response.

Climate Change: A Serious Threat to Public Health
This brief fact sheet summarizes the highlights of ASTHO’s comprehensive needs assessment on climate change. The fact sheet is intended for use by policymakers, community leaders and other key stakeholders.

Workforce Resources For Climate Change Programs
In difficult economic times, it can be difficult to find the needed workforce capacity to address climate change as a public health issue. Fortunately, there are a few programs that could potentially fill this gap on a temporary basis. This one page primer contains important details about the Public Health Prevention Service, the Epidemic Intelligence Service, and CSTE Fellows.

Climate Change Resources

ASTHO's Extreme Weather and Climate Readiness: Toolkit for State and Territorial Health Departments
This toolkit, a product of ASTHO’s Climate Change Collaborative, outlines a comprehensive approach to integrating climate readiness into seven key public health programs.

Interactive Climate Adaptation Map
An interactive Esri map that showcases state health agency climate adaptation plans and resources.
Climate Ready Territories Program