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Report from the Field: The Impact of COVID-19 on Local Vector Control Activities

—As mosquito and tick season approaches, local health departments across the country are limiting vector control activities due to the COVID-19 pandemic —

Washington, DC, May 5, 2020 – Today the National Association of County and City Health Officials (NACCHO), representing the country’s nearly 3,000 local health departments, released new data documenting the impact of the COVID-19 response on important vector control programs that protect individuals from mosquito- and tick-borne diseases in communities across the country. The COVID-19 response has taken time, attention, and personnel away from all other unrelated health priorities, as already-underfunded and understaffed local health departments respond to the pandemic. In doing so, existing services are strained or paused, with health impacts that will ripple through communities. Vector programs are no exception, with program impacts related to staff being pulled to the COVID-19 response, reduced services to comply with social distancing requirements, and curtailed surveillance testing due to laboratory resource constraints.

Vector programs in local health departments have been experiencing varying levels of impact from COVID-19 to their routine operations, ranging from minimal impact to entire vector programs being shut down, or large portions of staff being realigned for COVID-19 response activities. Even areas that have experienced outbreaks in vector-borne disease in the past year have had their local vector

programs deemed “nonessential” during the COVID-19 pandemic, halting surveillance and control activities that can detect or prevent vector-borne disease threats before they affect the community.

Additional impacts include:

- Reduced or suspended services and activities, often because staff are pulled away to focus on COVID-19 response.
- Shuttered outreach, education, and prevention efforts due to implementing social distancing guidelines and lack of staff.
- Hindered ability to bring on temporary staff or interns. Many vector organizations rely on seasonal hires to support mosquito season trapping and control during the warmer months.
- Limited ability to test mosquito samples for disease due to decreased laboratory capacity from COVID-19 surge. For some, this means longer wait times for results, only being able to test select mosquitoes, or having to find testing alternatives to their jurisdictional or state labs entirely.
- Prioritization of PPE for COVID-19 is leading to supply shortages in vector programs, as N95 masks are also used for chemical control applications.

Despite the workforce and resource challenges, these programs are finding ways to adapt and fulfill their critical public health function while still maintaining social distancing. These include:

- Ramping up the dissemination of educational materials to their communities through various media outlets (social media, radio, etc.).
- Using mapping tools to look at mosquito habitat and prioritizing efforts in areas where the most good can be done for the greatest number of residents.
- Focusing surveillance efforts on the areas that have historically yielded positive pools of specimens.
- Establishing a statewide collective of vector control professionals to discuss strategies in maintaining program operations and navigating the challenges brought by COVID-19.
- Equipping vector program personnel to set and collect surveillance traps from home.

The full report can be found [here](#).

Tickborne diseases hit a record high in the United States in 2017, with nearly 60,000 reported cases, including 42,743 cases of Lyme disease. Cases decreased in 2018, but are still significantly higher than they were in the early 2000s.

West Nile virus is the leading cause of domestically acquired mosquito-borne disease in the continental U.S. In 2018, 48 states and the District of Columbia (DC)

reported 2,813 cases of domestic mosquito-borne arboviral disease, including 2,647 (94%) West Nile virus disease cases. Other diseases — including eastern equine encephalitis, Jamestown Canyon, La Crosse, Powassan, and St. Louis encephalitis viruses — cause sporadic cases of disease and occasional outbreaks.

Reports from the Field is a series highlighting the impact of COVID-19 on other public health priorities. To learn more, see <https://bit.ly/3fg5h2h>

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About NACCHO

The National Association of County and City Health Officials (NACCHO) represents the nation's nearly 3,000 local governmental health departments. These city, county, metropolitan, district, and tribal departments work every day to protect and promote health and well-being for all people in their communities. For more information about NACCHO, please visit www.naccho.org.