

2009 ECA RESULTS IN BRIEF: TRIBAL EPIDEMIOLOGY

BACKGROUND

The Tribal module from the 2009 Epidemiology Capacity Assessment (ECA) collected data from 19 individual epidemiologists representing six of the thirteen Tribal Epidemiology Centers. The goal of the assessment was to collect information about how tribal epidemiologists divide their time among different program areas and how much education and training they have received in academics and, specifically, in epidemiology.

The Tribal Epidemiology Module was sent to Tribal Epidemiology Directors in April 2009 with instructions to forward the assessment to their epidemiologists. Data were collected between April and June 2009.

RESULTS

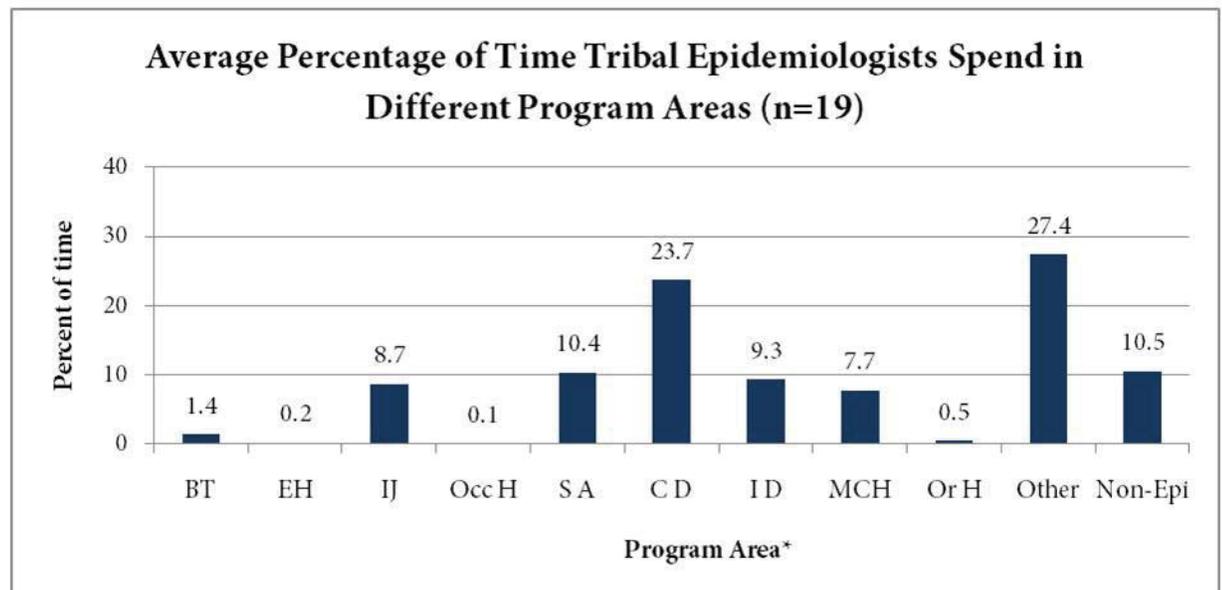
Respondents were asked to indicate the percentage of time spent working in various program areas of epidemiology and on duties unrelated to epidemiology. Within certain areas, respondents selected subcategories in which they worked.

On average, tribal epidemiologists spend more than half of their time working in chronic diseases and other non-disease-specific epidemiology areas (e.g., surveillance or community health profiles).

WORKFORCE

The majority of respondents were full-time employees (95%), half of which have at least five years experience as an epidemiologist. Three maintain an appointment at a university, academic center, or related institution. No respondents indicated an appointment with the CDC. Of the 19 respondents, 3 hold MD or DO degrees, 5 have PhD, DrPH, or other doctoral degrees, 10 have MPH, MSPH, or other master degrees, and 1 has a BA, BS, BSN, or other bachelor degree. Two respondents received epidemiology training from a tribal college or university.

Responding tribal epidemiologists received funding from IHS funds, CDC funds, non-CDC federal funds, state funds, and other sources. Notably, no respondents indicated funding from Federal Bioterrorism funds or local funds. The diverse source of funding for such a small number of individuals is important to note. Further research will elucidate funding gaps and tribal epidemiology capacity.



*BT = Bioterrorism and Emergency Response; EH = Environmental Health, IJ = Injury, OH = Occupational Health, SA = Substance Abuse, CD = Chronic Disease, ID = Infectious Disease, MCH = Maternal and Child Health, OrH = Oral Health, Other, Non-Epi = Duties other than Epidemiology