CSTE Non-Infectious Disease News

CSTE's Non-Infectious Disease (Non-ID) News is a quarterly feature publication that highlights non-infectious disease related programs and activities from across CSTE and its public health partners. To suggest content for Non-ID News, please contact Preksha Malhotra at pmalhotra@cste.org.

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CSTE Updates

This section includes updates and opportunities relevant to non-infectious disease epidemiology across CSTE programs.

Announcing New CSTE Leadership: Non-ID Steering Committee Chairs & Vice Chairs and Subcommittee Chairs

CSTE is excited to announce the appointment of 10 new Steering Committee and Subcommittee Leaders! See the list below for the newly appointed leaders in non-ID Steering Committees and Subcommittees. Thank you to all the candidates for their interest and willingness to serve CSTE through their leadership roles!

Steering Committee Vice Chairs:

- Marija Borjan, PhD, MPH, New Jersey – Environmental Health and Occupational Health (EH/OH) Steering Committee
- Shalini Parekh, MPH, Tennessee – Chronic Disease/Maternal & Child Health (CD/MCH) Steering Committee

Subcommittee Co-Chairs:

- Annalyse Bergman, MPH, Alabama (Chronic Disease Subcommittee)
- Khristina Morgan, MPH, CHES, Virginia (Chronic Disease Subcommittee)
- Kacey Ingalls, MPH, Washington (Environmental Health Subcommittee)
- Elizabeth (Betzy) Wasilevich, PhD, MPH, Michigan (Environmental Health Subcommittee)
- Luigi Saavedra, MPH, New Mexico (Maternal & Child Health Subcommittee)
- Deborah Mbotha, PhD, Washington (Maternal & Child Health Subcommittee)
- Dylan Pell, LMSW, MPH, New Mexico (Substance Use and Mental Health Subcommittee)

Approved 2023 CSTE Position Statements are Available

The 2023 CSTE Position Statements that were approved at the Annual Conference are now available in the CSTE Position Statement Archive! During the CSTE Annual Business Meeting on Thursday, June 29, 2023, the Council voted to approve 11 position statements to become CSTE policy. See below for the related Maternal & Child Health position statements that were accepted:

- 23-MCH-01: Update to the Neonatal Abstinence Syndrome (NAS) Standardized Case Definition
- 23-ID-02: Standardized Surveillance Case Definition for Congenital Cytomegalovirus (cCMV) Infection and Disease
- 23-ID-03: Public Health Reporting and National Notification of Invasive Cronobacter Infection Among Infants
- 23-ID-08: Standardized Surveillance Case Definition for Toxoplasma gondii Infection and Toxoplasmosis, including Congenital Toxoplasmosis
- 23-ID-10: Update to Public Health Reporting and National Notification for Non-congenital and Congenital Zika Virus Disease

CSTE Connect

CSTE is excited to announce and debut a new benefit exclusive to our members: CSTE Connect, which was launched during the CSTE 2023 Annual Conference! CSTE Connect is the premier online hub for public health professionals working in and around epidemiology. It's a community of communities; a forum that serves interests as diverse as our membership. We hope you use it as a place to ask questions, highlight successes, and share experiences and resources all in one platform, available 24/7.

As a CSTE member, you already automatically have full access to the platform. If you haven't started using CSTE Connect already, here's how:

- Start by logging in to CSTE Connect using the same credentials as on the "Members Only" section of the CSTE website.
- Then, update your profile and set your email preferences. Be sure to read through the Help/FAQs as well.
- Once logged in, you should see two communities you can start interacting with: *Member Central* and *CSTE Position Statements*. As more communities are launched, members can expect to join online discussions relevant to the areas of their work and interest, connect with other CSTE colleagues, and have access to resources shared in communities.

If you have any questions or feedback on CSTE Connect, please email Ben McClanahan, Online Community Specialist at bmcclanahan@cste.org.

Release: State, Tribal, Local, and Territorial Public Health Agency Approaches to Long COVID-19/Post COVID-19 Condition Surveillance

State, Tribal, Local, and Territorial Public Health Agency Approaches to Long COVID-19/Post COVID-19 Condition Surveillance was developed by CSTE Long COVID-19/Post COVID-19 Conditions (LC/PCC) Workgroup*, with input from members, and in collaboration with the Association of State and Territorial Health Officials (ASTHO) and the Centers for Disease Control and Prevention (CDC). The document provides a summary of public health approaches for monitoring and assessing LC/PCC within a jurisdiction – including examples and models, lessons learned, potential gaps, and needs moving forward. This document aims to provide these experiences and lessons learned to ultimately advance LC/PCC surveillance and guide public health action.

**The LC/PCC Workgroup was a short-term workgroup formed by CSTE to develop this document and included jurisdictions that had put in place or were planning to establish LC/PCC surveillance in their jurisdictions.*

Law Enforcement-Involved Injuries and Fatal Encounters (LEIFE) Webinar Recording Available

In June 2022, CSTE passed Position Statement 22-INJ-01, *Standardized Surveillance Case Definition for Law Enforcement-Involved Injuries and Fatal Encounters (LEIFE) Among Community Members* to support the goals of estimating the burden of LEIFE at the national, state and local

levels, characterizing populations at increased risk of LEIFE, providing best practice guidance for detection of cases from traditional and non-traditional data sources, and incorporation of open-sourced data to improve the completeness of detection of cases.

CSTE hosted the webinar “Standardized Surveillance Case Definition for Law Enforcement-Involved Injuries and Fatal Encounters (LEIFE) Among Community Members” in June 2023. The webinar provided background information on LEIFE, an overview of current data collection systems, examples of LEIFE surveillance in action in various jurisdictions, and how you can get involved. To join the LEIFE mailing list, please complete this form.

Webinar Recording Link: CSTE (sharefile.com)

CSTE COVID-19 Pregnancy Status Webinar Recording Available

In January 2022, CSTE and CDC convened a multidisciplinary workgroup of subject matter experts and public health partners to identify recommendations to improve pregnancy status reporting accuracy and completeness. The emphasis of this effort was on COVID-19 surveillance with applicability to conditions affecting maternal and child health. The CSTE COVID-19 Pregnancy Status Reporting Workgroup met for over a year, also producing a practical guidance document for state, tribal, local, and territorial epidemiologists to accompany the recommendations.

CSTE hosted the webinar, “Improving Capture of Pregnancy Status for COVID-19 and Other Reportable Conditions: Recommendations and Guidance for STLT Health Agencies.” This webinar provided an overview of the two CSTE products focused on improving capture of pregnancy status for COVID-19 and other reportable conditions. State and local jurisdictions presented potential approaches for using electronic case reporting (eCR) and electronic laboratory reporting (ELR) to capture pregnancy status. The two documents are in final clearance and will be available this fall. The webinar materials are linked below and are available in the CSTE Webinar Library.

Link to Webinar Recording
Link to Webinar Slides

CSTE Launches Updated Applied Epidemiology Competencies (AECs)

CSTE is excited to announce the release of newly revised and updated Applied Epidemiology Competencies (AECs)! First updated in 2008, the AECs define the knowledge, skills, and abilities needed in the role of an epidemiologist. The 2023 AECs demonstrate how the expectations of epidemiologists have changed due to new challenges, technologies, and methodologies.

The updated AECs outline the responsibilities of applied epidemiologists across four new tires that progress based on skill: **Foundational**, **Intermediate**, **Practiced**, and **Advanced**. This new structure can be better adapted to the job class structure of any jurisdiction and ensures continued alignment with the Core Competencies for Public Health Professionals, so they can be used together. The competencies also include health equity and principles of diversity, equity, inclusion, and accessibility (DEIA) in all elements. For more information or questions about the Applied Epidemiology Competencies, please contact WFResources@cste.org.

Data Science Team Training: Applications Open Fall 2023

The Data Science Team Training program is a team-based, on-the job training program to promote data science upskilling at STLT (state, territory, local, tribal) public health agencies. Learners in the 12-month fully remote Data Science Team Training (DSTT) program work collaboratively on a project that addresses a current agency need related to DMI.

Program participants will upgrade their skills in data science through didactic instruction in online courses, working on priority projects, peer-to-peer learning, training stipend for professional development, and coaching from subject matter experts. Applications for the fourth cohort of STT are now open and the deadline is October 6, 2023, see the DSTT webpage for more information.

CSTE Leading Epidemiology, Advancing Data (LEAD) Program: Applications Open Through October 30

Applications for the 2024 CSTE Lead Program are open now through **October 30th**. The purpose of the program is to provide leadership training for applied epidemiologists at state, territorial, local and tribal health departments. LEAD intends to enhance the applied epidemiology workforce with competency-based on-the-job leadership development training for mid-career applied epidemiologists. The program aims to develop leaders for CSTE member-led activities. Participants will benefit from guidance from their onsite supervisor, project sponsor (individual with project technical expertise, and mentor (experienced epidemiologist). A prospective applicant webinar will be held on **September 26 at 1pm EST** as an opportunity to learn more about the program content and structure. Register here.

Learn more or access the application link here. Please contact Sarah Auer (sauer@cste.org) with any questions.

CSTE AEF Class 22 Host Site and Candidate Applications Open October 2

CSTE Applied Epidemiology Fellowship (AEF) Program Application Opens October 2! The CSTE

Applied Epidemiology Fellowship (AEF) is a two-year competency-based fellowship for Masters- or Doctoral-level graduates interested in an applied epidemiology career. Since beginning in 2003, the fellowship has had over 400 fellows complete the program and pursue an epidemiology career at the state and local levels.

Fellows will have access to research experiences, training opportunities, and professional development in the respective subject area of interest(s). Successful candidates will be matched and placed at a state, tribal, local, or territorial health department with two mentors who will serve as professional guidance throughout the fellowship. To learn more about AEF, how to become a potential host site and or fellow, and apply, please visit the webpage.

CSTE Meetings

Western States Occupational Network Meeting (WestON): September 28-29, 2023

The annual Western States Occupational Network Meeting (WestON) will be held September 28-29 at the Colorado School of Public Health, CU Anschutz Medical Campus in Aurora, CO. WestON provides a unique opportunity for western states, National Institute for Occupational Safety & Health (NIOSH), and Occupational Safety and Health Administration (OSHA) federal partners to meet and address workplace safety and health issues and to further develop collaborations and partnerships to enhance state-based surveillance and prevention of work-related injuries and illnesses. Please email Cailyn Lingwall (clingwall@cste.org) for more information.

CSTE 2023 Syndromic Surveillance Symposium – Save the Date

As part of the National Syndromic Surveillance Program (NSSP) Community of Practice (CoP), CSTE is hosting the 4th annual Syndromic Surveillance Symposium on December 5-7, 2023. The Symposium is scheduled to be virtual. More information about registration will be available later this fall. Save the date!

CSTE 2023 Annual Conference – Plenary & Breakout Session Recordings Available

All plenary and breakout session recordings are available from the CSTE 2023 Annual Conference on the online agenda and Conference mobile app. Roundtable and poster sessions were not recorded. Session recordings are only available to registered attendees.

CSTE 2024 Annual Conference – Save the Date

The CSTE 2024 Annual Conference will be held in Pittsburgh, Pennsylvania from June 9-13, 2024. Save the date; we hope to see you there!

The following groups may be of interest to our CSTE non-infectious disease members with ongoing activities related to non-infectious disease topics. To join one of the CSTE Subcommittees, make sure you are logged into your CSTE member account, click the link to the Subcommittee page, and click "Join Group" under the group name. To join one of the workgroups, contact CSTE staff to be added to the email list and receive meeting information.

CSTE Subcommittee/Workgroup Highlight

Neonatal Abstinence Syndrome (NAS) Surveillance Workgroup

The special Non-ID News 2023 conference issue, released in June, featured the NAS Workgroup, and we are excited to share that the proposed NAS standardized surveillance case definition position statement passed. This accomplishment could not have been executed without the work of the NAS Surveillance Leadership Group and NAS Surveillance Workgroup chaired by Luigi Garcia Saavedra (CSTE member, Substance Use Epidemiology Section Manager at the New Mexico Department of Health). As chair, Luigi worked closely with CSTE staff and consultants to prepare for the consensus process and serve as the subject matter expert. Luigi also presented the Update to the Neonatal Abstinence Syndrome Standardized Case Definition to various audiences during the consensus process including state epidemiologists and the MCH subcommittee during the 2023 CSTE Annual Conference in Salt Lake City.

Additional support to the revisions of the NAS standardized surveillance case definition was provided through the CSTE NAS Standardized Surveillance Implementation Pilot project. Since 2020, six jurisdictions (Arizona, Florida, Georgia, Massachusetts, Philadelphia, and Tennessee) piloted the 2019 NAS standardized surveillance case definition and submitted data to CDC. Through these site experiences with collecting NAS data, recommendations were based on practical applications. While the implementation pilot project has concluded, four of the jurisdictions will continue to work with CDC and CSTE to conduct special analysis projects to explore the feasibility of longitudinal surveillance among infant born with NAS and support to referral services to families impacted by NAS.

Next for the NAS Surveillance Workgroup is the development of the NAS Surveillance

Implementation Guide to supplement the case definition. The work is expected to start in September 2023 and finish by July 2024. If you are interested in joining the NAS Surveillance Workgroup and participating in this work, please contact Victoria Walker at vwalker@cste.org.

The following CSTE Subcommittees and Workgroups have ongoing projects and/or discussion topics:

- **Alcohol Epidemiology**
  - Call Schedule: Currently every other month, 1st Thursdays at 1:00pm ET
  - CSTE Contact: Cailyn Lingwall, clingwall@cste.org
- **Cannabis**
  - Call Schedule: Every other month, 4th Thursday at 1:00pm ET
  - CSTE Contact: Cailyn Lingwall, clingwall@cste.org
- Chronic Disease
  - New call schedule coming soon
  - CSTE Contact: Preksha Malhotra, pmalhotra@cste.org
- **Climate, Health, & Equity**
  - Call Schedule: Every other month, 4th Monday at 2:00pm ET
  - CSTE Contact: Kyra Parks, kparks@cste.org
- **Disaster Epidemiology**
  - CSTE Contact: Andrew Adams, aadams@cste.org
- Environmental Health
  - Call Schedule: As needed
  - CSTE Contact: Kyra Parks, kparks@cste.org
  - *Environmental Health in Schools Workgroup*
    - Call Schedule: Every other month, 2nd Wednesday at 1:00 pm ET
    - CSTE Contact: Kyra Parks, kparks@cste.org
  - *PFAS Workgroup*
    - Call Schedule: Every other month, 3rd Thursday at 3:00pm ET
    - CSTE Contact: Kyra Parks, kparks@cste.org
- **Epi Methods**
  - CSTE Contact: Maria Patselikos, mpatselikos@cste.org
  - Call Schedule: 3rd Wednesday of the month at 1:00pm ET
  - *Spatial Analysis Workgroup*
    - Call Schedule: 3rd Tuesday of the month at 1:00pm ET
    - CSTE Contact: Maria Patselikos, mpatselikos@cste.org

- **Health Equity**
  - Call Schedule: Every other month, 4th Thursdays at 2:00pm ET
  - CSTE Contact: Kyra Parks, kparks@cste.org
- **Injury Epidemiology and Surveillance**
  - New call schedule coming soon
  - *Injury Surveillance Workgroup*
    - Call schedule: 1st Wednesday of the month at 2:00pm ET
    - CSTE Contact: Danielle Boyd, dboyd@cste.org

Maternal and Child Health

  - New call schedule coming soon
  - CSTE Contact: Valerie Goodson, vgoodson@cste.org
- **Occupational Health Surveillance**
  - CSTE Contact: Cailyn Lingwall, clingwall@cste.org
- **Overdose**
  - Call Schedule: 2nd Thursday of every other month at 1:00 pm ET
  - CSTE Contact: Danielle Boyd, dboyd@cste.org
- **Prescription Drug Monitoring Program**
  - Call Schedule: Every other month, 4th Thursday of the month at 1:00pm ET
  - CSTE Contact: Danielle Boyd, dboyd@cste.org
- **Public Health Law**
  - Call Schedule: Quarterly
  - CSTE Contact: Sunbal Virk, phlaw@cste.org

- **Substance Use & Mental Health**
  - Calls scheduled as needed
  - CSTE Contact: Danielle Boyd, dboyd@cste.org
- **Tribal Epidemiology**
  - Call Schedule: Quarterly
  - CSTE Contact: Colin Gerber, cgerber@cste.org

Member Spotlight

This section highlights CSTE member projects and accomplishments in the area of non-infectious disease epidemiology, allowing readers to learn more about their colleagues in the field. Contact Preksha Malhotra at pmalhotra@cste.org with questions or to nominate yourself or others to be featured.

Melissa Murray Jordan, MS, MPH

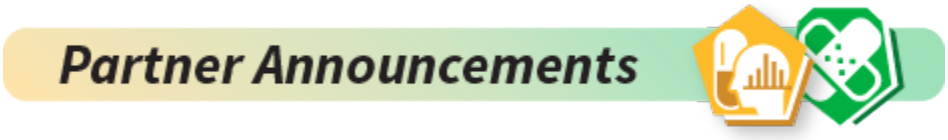
Assistant Deputy Secretary for Health
Florida Department of Health

Melissa Jordan has been with the Florida Department of Health since 2003, and currently serves as the Assistant Deputy Secretary for Health. The Office of the Deputy Secretary for Health is responsible for oversight of the Department's major program and policy areas including the divisions of Community Health Promotion, Disease Control and Health Protection, Emergency Preparedness and Community Support, Public Health Statistics and Performance Management, and the offices of Medical Marijuana Use and Minority Health. She is also leading efforts to expand Florida's public health response to injury and substance use disorder through the establishment of new evidence-based initiatives.

Melissa spent the first seven years of her career in chronic disease epidemiology, before moving in 2010 to environmental epidemiology where she served as a Senior Environmental Epidemiologist and principal investigator for the Environmental Public Health Tracking Program. In January 2017, she became the Director of Public Health Research, overseeing the Department's research initiatives and Florida's noninfectious disease surveillance and epidemiology programs. In November 2019, Melissa became the Division Director of Community Health Promotion, managing

a team of more than 300 public health professionals and an annual budget of approximately $1 billion in state and federal funding. In this role, she oversaw a wide range of public health activities including noninfectious disease surveillance and epidemiology programs, tobacco and chronic disease prevention, maternal and child health, violence and injury prevention, WIC, and the Department's research initiatives.

Melissa has been involved with CSTE for more than 19 years and was elected to the Executive Board in 2018. She considers CSTE her professional home and welcomes the continued opportunities supported by CSTE to learn from peers and grow professionally. She has been involved with abstract review and planning for the CSTE Annual Conference for several years. Until this year, she spent many years as the chair of the Environmental Health Subcommittee and participates in a variety of other subcommittees and workgroups. She founded the Environmental Health in Schools Workgroup in 2016. She has been involved in various Occupational Health and Injury efforts as well as the Neonatal Abstinence Syndrome (NAS) Workgroup. Melissa has been engaged in many projects focused on the use of GIS, small area estimation, and the development of sub-county indicators and profile reports. The use of community data to target resources and drive decision making is a passion of hers. She is also excited to support various DMI related activities at the federal, state, and local levels. Melissa was driven to run for the CSTE Executive Board to represent noninfectious disease epidemiology and surveillance programs. She strongly encourages her colleagues and friends throughout the CSTE noninfectious disease realm to become members of CSTE and volunteer for leadership positions.



This section includes announcements and content relevant to epidemiologists working across non-infectious disease topics from CSTE partners. Contact Preksha Malhotra at pmalhotra@cste.org if you would like to submit an announcement.

September is Suicide Prevention and Awareness Month

September was Suicide Prevention Month – a time to raise awareness and discuss this highly stigmatized and important topic. Like any mental health condition, suicidal thoughts can impact anyone and should be considered a serious issue. The purpose of this month is to spread awareness and key information to make sure that individuals, friends, and families have access to resources they need to get help and discuss suicide prevention (NAMI).

As we close out this Suicide Prevention and Awareness month, please see some of these resources and fact pages that can be shared throughout the year:

- CDC's Suicide Prevention Resource for Action: This resource includes strategies with the best available evidence to prevent suicide. There are three components that states and communities can use to inform their suicide prevention efforts: 1) Strategies are the actions to achieve the goal of preventing suicide, 2) Approaches are the specific ways to advance each strategy, 3) Policies, programs, and practices included have evidence of impact on suicide, suicide attempts, or risk and protective factors.
- Provisional Suicide Deaths in the United States, 2022: This media statement released by CDC in August 2023 shares the latest provisional estimates for suicide deaths in the United States in 2022. "After declining in 2019 and 2020, suicide deaths increased approximately 5% in the United States in 2021. The provisional estimates released today indicate that suicide deaths further increased in 2022, rising from 48,183 deaths in 2021 to an estimated 49,449 deaths in 2022, an increase of approximately 2.6%. However, two groups did see a decline in numbers, American Indian and Alaska Native people (down 6.1%) and people 10-24 years old (down 8.4%)." HHS Secretary Xavier Becerra, CDC's Chief Medical Officer Debra Houry, and U.S. Surgeon General Vivek Murthy provided comments.
- Johns Hopkins University: CDC Provisional Data: Gun Suicides Reach All-time High in 2022, Gun Homicides Down Slightly from 2021: "Gun suicides continued to reach all-time highs, increasing 1.6% from a previous record in 2021; 26,993 people died by gun suicide in 2022. While the increase in gun homicides has gained public awareness, less attention has been paid to the growing epidemic of gun suicides – which historically make up the majority of gun deaths. The gun suicide rate has steadily increased, nearly uninterrupted, since 2006. In 2021 it reached the highest levels since the CDC began recording such data in 1968; and this past year, in 2022, it surpassed that record."
- Mental and Substance Use Disorders Prevalence Study: Findings Report: The Mental and Substance Use Disorders Prevalence Study (MDPS) provides the most updated prevalence estimates of various mental health disorders in the U.S. adult population. The study is funded by Substance Abuse and Mental Health Services Administration (SAMHSA) as part of a cooperative agreement with RTI International. The pilot program provides prevalence rates of mental and substance use disorders including past year and lifetime schizophrenia spectrum disorders, past-year bipolar I disorder, major depressive disorder, generalized anxiety disorder, posttraumatic stress disorder, obsessive-compulsive disorder, anorexia nervosa, and past year alcohol, opioid, cannabis, stimulant and sedative/hypnotic/anxiolytic use disorders.
- CSTE ICD-10-CM Injury Surveillance Toolkit, Special Emphasis Reports Template: CSTE, in partnership with CDC, developed topic-specific Special Emphasis Reports for use with ICD-10-CM coded hospitalization and emergency department data. State health department injury and violence prevention programs and their partners use Injury Special Emphasis Reports to move injury data into action and highlight specific prevention needs. There are linked materials for many topics including suicide.

- CDC Social Media Resources: CDC's Injury Center has provided many social media graphics and messages focused on the key role personal connections play in preventing suicide. Use the social media resources to share the message that suicide is preventable.

National Fentanyl Prevention and International Overdose Awareness Day

August 21 is recognized as National Fentanyl Prevention and Awareness Day™. This day was established to remember those lost to illicit fentanyl poisoning and to spread awareness on the devastation this drug has brought to hundreds of thousands of impacted family members and friends. Learn more about the dangers of illicit fentanyl here: https://facingfentanylnow.org/fentanyl-facts/.

August 31 is recognized as International Overdose Awareness Day™. International Overdose Awareness Day (IOAD) is the world's largest annual campaign to end overdose, remember those who have died from overdose without stigma, and recognize the grief of the affected family and friends. The theme for IOAD 2023 was "Recognizing those people who go unseen". Learn more about the 2023 campaign here.

Emerging Substances: What you should know about Xylazine

Xylazine is a tranquilizer that is increasingly being found in the US illegal drug supply and is linked to overdose deaths. This is a life-threatening drug and even more dangerous when mixed with opioids like fentanyl. The White House's Office of National Drug Control Policy declared fentanyl mixed with xylazine an emerging threat and released a National Response Plan in July 2023. To learn more about Xylazine, visit this CDC webpage.

- Recent publication of NVSS, Vital Statistics Rapid Release, Drug Overdose Deaths Involving Xylazine: United States, 2018-2021
- MMWR: Illicitly Manufactured Fentanyl-Involved Overdose Deaths with Detected Xylazine – United States, January 2019-June 2022

New Study in *Journal of Adolescent Health*: Teens who parents binge drank were more likely to drink alcohol

A new CDC study published in September 2023 in the *Journal of Adolescent Health* found that adolescents whose parents binge drank had a four times increased chance of drinking compared to adolescents whose parents did not binge drink. This study shows that the risk of drinking alcohol

affects more than just the person drinking and a parent's drinking habits can directly impact their children. Every year in the United States, over 140,000 people die from excessive alcohol use, 4,000 of those are people under the age of 21. Implementing effective population level policy strategies such as increasing the cost of alcohol by increasing alcohol taxes and regulating the alcohol sales can decrease drinking among adults and adolescents.

de Beaumont Foundation: MADE for Health Justice Communities Announced

de Beaumont Foundation has announced grants to four communities in Arizona, Maryland, Oregon, and Pennsylvania to pursue data-driven initiatives that advance racial justice and health equity through Modernized Anti-Racist Data Ecosystems (MADE) for Health Justice. The initiative seeks to accelerate the development of health-focused local data ecosystems that center principles of anti-racism, equity, justice, and community power.

Recent Environmental Health MMWR Publications

The following environmental health publications were released in CDC's Morbidity and Mortality Weekly Report (MMWR):

Asthma-Associated Emergency Department Visits During the Canadian Wildfire Smoke Episodes — United States, April – August 2023: As wildfires and wildfire smoke continue to increase throughout the United States, the resulting symptoms of wildfire smoke exposure are a concern for public health. Wildfire smoke is a combination of multiple gases and particles, of which the particulate matter is the pollutant of most public health concern due to its risk of exacerbating existing respiratory, cardiovascular, and metabolic health conditions. CDC used National Syndromic Surveillance Program data to measure numbers and percentages of asthma-associated emergency department (ED) visits on days with wildfire smoke, compared to days without wildfire smoke. This report states that emergency department visits for asthma were 17% higher than expected during 19 days of wildfire smoke during April-August 2023 from the Canadian wildfires. Public health officials, clinicians, and policymakers can use the data showing changes in asthma-associated ED visits during occurrence of wildfire smoke to monitor and work on decreasing exposure.

Notes from the Field: Asthma-Associated Emergency Department Visits During a Wildfire Smoke Event — New York, June 2023: From June 6-8, 2023, there was poor air quality of "unhealthy" or "very unhealthy" across New York, due to the high concentrations of particulate matter caused by the smoke from Eastern Canadian wildfires. Particulate matter from wildfire smoke is linked with a higher risk of medical emergencies, such as asthma exacerbations. Asthma-associated emergency department visits increased over 80% on the day with the highest exposure to wildfire smoke.

New MMWR Vital Signs: Maternity Care Experiences in the U.S

In a 2023 survey, one in five women reported mistreatment, such as privacy violations or verbal abuse, during maternity care. Mistreatment was reported most often by Black, Hispanic, and multiracial mothers and those with public insurance or no insurance. Implementing quality improvement initiatives and provider training to encourage a culture of respectful maternity care, encouraging patients to ask questions and share concerns, and working with communities are strategies to improve respectful maternity care. View the MMWR here.

NACCHO's 2023 Preparedness Summit: Tabletop Exercise for the Inclusion of MCH Populations in Emergency Preparedness and Response

The recent COVID-19 pandemic, natural disasters, and other public health emergencies have shown how necessary it is to support and prioritize maternal & child health (MCH) populations in the development of emergency preparedness and response (EPR) training, exercises and plans. National Association of County & City Health Officials (NACCHO) with funding from the CDC's Division of Reproductive Health, launched a Virtual Learning Collaborative (VLC) to foster collaboration between MCH and EPR employees within local health departments. The VLC is guided by the U.S. Department of Health and Human Services (HHS) Maternal-Child Health (MCH) Emergency Planning Toolkit, which consists of training exercises and case example discussions to increase the capacity of local health departments to support their MCH populations during EPR activities.

NACCHO led the 2022-2023 VLC members through an in-person tabletop exercise during their 2023 Preparedness Summit, facilitated by Health Communications Consultants (HCC). Read more about the tabletop exercise and activities here.

APHL Opioid Community of Practice: New Lab Matters Article – Neonatal Abstinence Syndrome: To Screen or Not to Screen

The Fall 2023 Edition of Lab Matters by the Association of Public Health Laboratories (APHL) is now available. This edition features the article "Neonatal Abstinence Syndrome: To Screen or Not to Screen" on page 20. The article examines Neonatal Abstinence Syndrome (NAS), considerations and recommendations for universal screening and using the Newborn Screening Dried Blood Spots for NAS testing. To learn more about laboratory surveillance in NAS testing, read "Laboratory Data

in Neonatal Abstinence Syndrome Surveillance" published in 2022 by the Overdose Biosurveillance Task Force.

MMWR: Progress Toward Hepatitis B Control and Elimination of Mother-to-Child Transmission of Hepatitis B Virus – World Health Organization African Region, 2016-2021

In 2019, the World Health Organization African Region (AFR) accounted for 60% of all new chronic hepatitis B virus (HBV) infections. Chronic HBV infection is the leading cause of cirrhosis and liver cancer. By 2021, all 47 AFR countries provided 3 doses of hepatitis B vaccine (HepB3) to infants, and 14 (30%) provided a birth dose (HepB-BD). Implenting HepB-BD, improbing HepB3 and HepB-BD coverage, and monitoring (elimination of mother-to-child transmission) EMTCT interventions are essential ways to improve hepatitis B control and EMTCT in AFR. View the MMWR here.

Call for Papers: Advancing Chronic Disease Data Modernization Enhancements to Meet Current and Future Public Health Challenges

Preventing Chronic Disease (PCD) welcomes submissions for its upcoming collection, "Advancing Chronic Disease Data Modernization Enhancements to Meet Current and Future Public Health Challenges." The nation's health data systems are often antiquated, resulting in a myriad of negative effects on chronic disease prevention and health promotion efforts. This collection will feature peer-reviewed papers showcasing efforts under way by federal, state, tribal, local, and territorial public health agencies to collect, use, and share data. The deadline to receive final manuscripts is November 30, 2023.

Public Health and Homelessness Toolkit

On July 18, CDC Foundation and CDC Special Populations Unit shared the Public Health and Homelessness Toolkit, which provides strategies, best practices and other resources to assist health departments serving people experiencing homelessness.

Behavioral Health Surveillance Toolkit

With the support of CDC's Office of Readiness and Response, RAND Corporation researchers have developed an online, interactive toolkit for state, territorial, local and tribal public health departments to assist with conducting behavioral health surveillance following disasters and other public health emergencies.

Webinar: Workforce Wellness Recharge: Preventing and Addressing Burnout in the Public Health Workforce

Monthly Workforce Wellness Recharge sessions are designed to help prevent and address burnout in the public health workforce by providing a safe online space for a facilitates group learning, reflection, and support. Participants will learn about holistic integration of their physical, mental, and spiritual well-being to help improve engagement and presence in their work. Activities and resources will also identify opportunities for self-management and personal development despite adversity, health equity deficits, unexpected events, and daily stressors or frustrations. The goal is to improve the quality of service delivery and improve performance outcomes with advanced work-life balance.

Each session will use the same format but will offer new tools, resources, and discussions focused on the needs of the participants in the room. This is an online, interactive session on September 26, 2023 from 12-1:30 pm ET, register here.

This section contains resources that might be valuable to non-infectious disease epidemiologists.

1. Reproductive Health and Disasters (RHAD) Assessment Toolkit 2.0: https://cdn.ymaws.com/www.cste.org/resource/resmgr/mch/RHAD_Toolkit_Final_January_2.pdf
2. CSTE Emergency Medical Services Nonfatal Opioid Overdose Standard Guidance: https://cdn.ymaws.com/www.cste.org/resource/resmgr/opioidsurv/EMS_Nonfatal_Opioid_Overdose.pdf
3. 2019 CSTE Nonfatal Opioid Overdose Standardized Surveillance Case Definition: https://cdn.ymaws.com/www.cste.org/resource/resmgr/ps/ps2022/19-CC-01_FINAL_appendices_up.pdf
4. National Emergency Medical Services Information System (NEMSIS): https://nemsis.org/what-is-nemsis/
5. National Association of State EMS Officials (NASEMSO): https://nasemso.org/
6. Recommendations for the Use of Emergency Medical Services Data to Identify Nonfatal Opioid

Overdoses: https://cdn.ymaws.com/www.cste.org/resource/resmgr/ps/ps2022/Recommendations_for_EMS_NFOO.pdf

7. CSTE Overdose Anomaly Toolkit: Introduction: https://odalerts.cste.org/
8. NSVRC: Building Safe Online Spaces Together: https://www.nsvrc.org/saam?ACSTrackingID=USCDC_393-DM79824&ACSTrackingLabel=VP%20List%20VetoViolence%20Digest%20April%202022&deliveryName=USCDC_393-DM79824
9. Youth Violence Prevention Action Kit: https://www.sandyhookpromise.org/take-action/get-involved/youth-violence-prevention-action-kit/?ACSTrackingID=USCDC_393-DM79824&ACSTrackingLabel=VP%20List%20VetoViolence%20Digest%20April%202022&deliveryName=USCDC_393-DM79824
10. CSTE ICD-10-CM Injury Surveillance Toolkit: https://resources.cste.org/Injury-Surveillance-Methods-Toolkit/

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