

EMBARGOED FOR RELEASE
10 pm ET; April 25, 2016

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NATION'S PREPAREDNESS FOR PUBLIC HEALTH EMERGENCIES IS IMPROVING, 2016 INDEX SHOWS

*Index assesses all 50 states
for emergency preparedness and health security*

Assessments related to Zika testing, safe drinking water, show mixed trends

PRINCETON, NJ—An annual assessment of health security and preparedness shows the nation is relatively well-prepared for managing an emergency, although performance on some measures in specific states can be improved. The Robert Wood Johnson Foundation released the results of the 2016 National Health Security Preparedness Index, which shows the United States scoring 6.7 on a 10-point scale for preparedness—an improvement of 3.6 percent since the Index began three years ago.

“In order to keep Americans safe, we need to know how well equipped the nation and each state within it, is to prevent and manage widespread health emergencies,” said Risa Lavizzo-Mourey, MD, president and CEO of the Robert Wood Johnson Foundation, which funds and directs the Index. “Every sector needs a yardstick to clearly show where progress is being made and where improvement can occur. America’s health security is no exception.”

Using more than 100 different measures—ranging from flu vaccination rates, number of hospitals, and presence of food inspection programs; to infrastructure and planning measures such as participation in drills by public health laboratories, percentage of people covered by wireless 911, and hazard planning for public schools—the Index provides a composite score that reflects the most comprehensive picture of health security preparedness available.

The Index found that the nation’s health protections are not distributed evenly across the U.S., with a preparedness gap of 36 percent between highest and lowest states in 2015. A total of 18 states achieved Preparedness Index levels that significantly exceeded the national average in 2015, with many of these leading states located along the Eastern seaboard or clustered in the Upper Midwest and Southwestern U.S. Conversely, 16 states lagged significantly below the national preparedness level in 2015, including clusters of states in the Deep South and Mountain West regions.

Some states with comparatively low levels of preparedness are located in geographic regions that face elevated risks of disasters, indicating a need for focused improvements in high-risk and low-resource areas.

- **Laboratory testing capabilities relevant to Zika have trended upward** but are not universally available across the U.S.
- **Laboratory testing capabilities relevant to drinking water have trended downward** in the Index.
- **Fully compliant public drinking water systems trended downward.**

- **Changes in employment patterns and practices have mixed effects on health security.**

"State and local public health agencies are on the front lines in responding to public health emergencies," said Dr. Stephen Redd, director of the U.S. Centers for Disease Control and Prevention (CDC's) Office of Public Health Preparedness and Response. "The Index is a tool that can help us all see where investments since 2001 to build public health emergency response capacity have paid off and where more investment and work is needed."

Based on a model informed by experts in public health, emergency management, government, academia, health care, and other sectors, researchers collect, aggregate, and measure preparedness data from a wide variety of sources. The final measures fall into six categories, each of which is assessed independently.

- **Incident and Information Management**, or the ability to mobilize and manage resources during a health incident, scored 8.4 on the 10-point scale, the highest-scoring domain in the 2016 Index and a 2.4 percent improvement since the Index began in 2013;
- **Health Security Surveillance**, or the ability to collect and analyze data to identify possible threats before they arise, scored 7.5, an improvement of 7.1 percent since 2013;
- **Countermeasure Management**, or the ability to mitigate harm from biologic, chemical, or nuclear agents, scored 7.0, an improvement of 6.1 percent since 2013;
- **Environmental and Occupational Health**, which measures the ability to prevent health impacts from environmental or occupational hazards, scored 6.4, a decline of 4.5 percent since the Index began, but flat compared to last year;
- **Community Planning and Engagement**, which measures how communities mobilize different stakeholders to work together during times of crisis, scored 5.4, an improvement of 8.0 percent since 2013; and
- **Health Care Delivery**, which includes the state of health care systems during everyday life, as well as in emergency situations, scored 5.1, a decline of 1.9 percent since 2013, but flat compared to last year.

"Health security is a shared responsibility across many different sectors and stakeholders—not just government, and not just health care," said Glen Mays, PhD of the University of Kentucky, who leads a team of researchers who manage the Index. "By combining 134 measures from more than 50 different sources, we gain a more complete picture of preparedness as a whole that can inform future directions and priorities."

Originally developed by the CDC as a tool to drive dialogue to improve health security and preparedness, the Index remains a collaborative effort, involving more than 35 organizations. Feedback from state preparedness directors, state health officials, and others helps shape the Index each year.

For more information about the National Health Security Preparedness Index, visit www.nhsipi.org.

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