A core CDC responsibility is to help state, tribal, local, and territorial health departments prepare for and respond to emerging health threats. We provide public health authorities with information, tools, staff, and training. We support state and local actions to promote health and protect people in their communities. We also make sure public health departments get what they need to improve performance, share resources, and identify and respond quickly to challenges in the evolving public health system.

787
CDC has 787 field staff working in state, tribal, local, and territorial health agencies and other organizations.

267
267 public health projects build state, tribal, local, and territorial public health capacity through cooperative agreements with 25 national public health partner grantees.

CDC works with tribal public health leaders to save lives and protect people throughout tribal lands in the U.S.
**KEY ACCOMPLISHMENTS**

- Hired the largest class (145) in the history of the Public Health Associate Program, increasing workforce capacity to 261 associates supporting state and local health departments.

- Helped health departments improve performance and efficiency through the National Public Health Improvement Initiative. As a result, the Alaska Native Tribal Health Consortium more than doubled tobacco cessation program referrals. Arkansas increased patients completing latent tuberculosis treatment by 26% (from 55% to 81%); and Michigan reduced its unable-to-locate rate from 23.6% to 11.6%, helping to ensure that more people with syphilis entered treatment.

- Released the *Prevention Status Reports 2013*, which monitor state use of data-driven policies and practices aimed at reducing 10 critical health problems. These reports help states establish benchmarks, conduct health assessments, inform strategic planning, and improve policies.

**TRIBAL HEALTH DEPARTMENTS PLAY CRITICAL ROLE IN REDUCING STDs**

When the Montana Department of Public Health and Human Services investigated an unusual increase in gonorrhea cases, the investigation led to an area surrounding several American Indian reservations. Tribal health departments and the Indian Health Service (IHS) quickly responded and worked with state health officials to increase testing for sexually transmitted diseases (STDs) in local clinics.

Health officials first noticed a rapid increase in gonorrhea cases in 2012. The trend continued through 2014, with a disproportionate number of those infected living on tribal lands. Gonorrhea is a curable STD that can cause infections in the genitals, rectum, and throat. CDC guidelines for treatment include the medications ceftriaxone and azithromycin. Sexually active men and woman, especially those with multiple sex partners who do not use condoms consistently, are at risk for this common STD.

After tribal health departments and the IHS worked together to improve testing practices in clinics that service tribal populations, gonorrhea rates returned to baseline U.S. incidence rates. Work is underway to improve how outbreak investigations, STD testing, and public health responses are coordinated on tribal lands.