



United States–México Border Health Commission

**U.S. Border States Early Warning Infectious
Disease Surveillance (EWIDS) Project**

A White Paper

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U.S. Border States EWIDS Project

Overview

Starting in Fiscal Year 2003, the U.S. Department of Health and Human Services, Assistant Secretary for Preparedness and Response (ASPR), created the *U.S. Border States Early Warning Infectious Disease Surveillance (EWIDS) Project* to enhance the ability of border states and border jurisdictions (including tribes) to rapidly detect and respond to infectious disease outbreaks along the international border. The U.S. Border States EWIDS Project is designed to build the capacity of public health systems of all 20 U.S. Border States (including Alaska) to establish or improve their cross-border early warning of infectious diseases, either naturally occurring or of a bioterrorist nature.

Under this unique collaboration with the U.S. Centers for Disease Control and Prevention (CDC), an agency of the Department of Health and Human Services, border states that receive EWIDS funding are required to submit project proposals designed to improve the ability to rapidly detect, identify, report, and respond to infectious disease outbreaks associated with potential bioterror agents or other major public health biological threats along the border. These proposals include projects that improve infectious disease surveillance, epidemiological investigation, laboratory diagnostics and/or health alert messaging capacities and capabilities, and workforce development and training.

Between fiscal years 2003 and 2008, the U.S. southern border states of Arizona, California, New Mexico, and Texas have received a combined total of more than \$23 million in U.S. border states EWIDS funding for the implementation of cross-border activities with the six neighboring México northern border states directly across the international border.

The amount of funding received by a U.S. border state is dependent on the number of recorded inbound land border crossings, as determined annually by the U.S. Department of Transportation, commensurate with that state's share (percent) of total U.S. border crossings for that border (either northern or southern). Border states that do not have an official border crossing are awarded a predetermined base amount.

Goals and Objectives

The ultimate goal of the project is to develop and improve borderwide, state-to-state, and state-to-province mechanisms that will achieve effective cross-border exchange of infectious disease surveillance information among neighboring border jurisdictions.

Specific program goals and objectives include the following:

- Develop and implement a cross-border, interoperable, disease tracking system designed to rapidly detect illness resulting from exposure to a bioterrorist threat agent or other emerging infectious disease of urgent public health consequence
- Enable trans-border capabilities for detection, identification, reporting, and launching of cross-border investigations for infectious disease outbreaks
- Share clinical, laboratory, and epidemiological information electronically with public health officials in neighboring jurisdictions
- Train public health personnel in infectious disease surveillance and epidemiology-related activities



U.S. Southern Border Regional Accomplishments

Arizona

The Arizona Department of Health Services (ADHS), Office of Border Health (OBH), continues to collaborate with the Arizona Center for Public Health Preparedness (AzCPHP). This current fiscal year, the OBH and AzCPHP are developing an internet-based training program for public health professionals along the U.S.-México border. This binational training program includes infectious disease surveillance and epidemiology concepts, principles and laboratory methods, and information technologies that are relevant to the detection, reporting, and investigation of infectious disease cases and outbreaks.

The ADHS OBH developed binational capabilities for Arizona's Medical Electronic Disease Surveillance Intelligence System (MEDSIS). MEDSIS allows Arizona and Sonora to share binational infectious disease case information for defined binational cases electronically and securely via the internet in English (AZ) and Spanish (Sonora, MX). Sonora State-level epidemiologists have received training on the MEDSIS system. The binational use of MEDSIS will be implemented June 5, 2009, to coincide with the Arizona-Mexico Commission/Comisión Sonora-Arizona Summer Plenary Session.

Arizona and Sonora developed and agreed on draft protocols for communication, binational investigations, and sharing of public health information. These draft protocols are currently being utilized during the H1N1 influenza outbreak response and were used for previous binational incidents. The protocols include a list of agreed upon binational notifiable communicable diseases and case definitions for response to epidemiologic events. The protocols will also be finalized and presented to the Governors of Arizona and Sonora at the Arizona-Mexico Commission/Comisión Sonora-Arizona Summer Plenary Session.

Arizona (State and Border County & Tribal Health Departments) is currently developing a border-wide situational awareness and surveillance system along the Arizona-Sonora region. Once the system is established, all information will be shared among Arizona and Sonora's public health partners, as well as the other eight U.S.-México border states.

California

The California EWIDS program established new sentinel sites in its network of hospitals, clinics, epidemiologists, and laboratories conducting active sentinel surveillance for influenza-like illness (ILI). Currently, sites have been established in the following locations: one in Tijuana (Centro Salud, Zona Centro), one in San Diego County (American Indian Health Center), and two in Imperial County (two different sites within the Clinica Salud del Pueblo system, Calexico, and El Centro). Under EWIDS, California is updating a common list of notifiable diseases and case definitions and required data elements to reduce significant barriers to the successful exchange of cross-border early warning surveillance information. In addition, the state continues to provide ILI surveillance support to Imperial County and has reactivated ILI surveillance with the Indian Health Medical Centers and Sharp Chula Vista Hospital in San Diego County.

California developed cooperative relationships and is currently implementing joint ILI surveillance operations with Tijuana, Baja California, México, to receive approval on the newly updated infectious disease binational case reporting system. During the early stages of the H1N1 influenza outbreak, the California Office of Binational Border Health (COBBH) served as a staging area for CDC and CDPH epidemiological surveillance teams that have since been deployed to assist San Diego and Imperial Counties in the investigation of the outbreak.



New Mexico

The New Mexico EWIDs program established a *Border Influenza Surveillance Network* which began as a successful binational influenza surveillance project, initiated in 2007 with support of the U.S.-México Border Health Commission. The New Mexico Department of Health's (DOH) Office of Border Health, Epidemiology and Response Division, and Region 5 Public Health Office partnered with Chihuahua State Health Services and the Border Infectious Disease Surveillance System (BIDS) to gather ILI data, implement rapid testing, and confirm influenza strains circulating in Juarez, México, during the 2007-2008 and 2008-2009 influenza seasons. Surveillance results, which were received and confirmed by the New Mexico Scientific Laboratory Division, indicated that influenza activity (initiation of the season, virus types, and percent of ILI in both Chihuahua and New Mexico) is similar, with the first cases occurring almost simultaneously and similar strains in circulation. The project is also successfully transporting specimens across the U.S.-México border in accordance with U.S. and Mexican regulations.

As part of its EWIDS education and outreach objectives, the Department of Health's Office of Border Health and Infectious Disease Epidemiology Bureau hosted a training conference entitled *Definitions and Investigations of Binational Infectious Disease Cases*. A total of 75 participants responsible for infectious disease epidemiology and control in hospitals, community health centers, private practice, and local, state, and federal public health authorities from New Mexico, Texas, and California attended the training. As a bi-product of the training, DOH will enhance its infectious disease case investigation protocols and forms to ascertain binational cases.

New Mexico also carried out research for the study entitled *A Survey Assessment of Notifiable Condition Reporting, Health Care Services and Medical Case Management of Binational Inmates in New Mexico Border County Detention Facilities and Select Border Impact Area Detention Facilities*. The final report of this study will be published in the spring of 2009.

Texas

The Texas EWIDS program continues to actively develop and sustain local and binational capacity to establish early warning infectious disease surveillance and reports the following update:

- The EWIDS collaboration with counterparts in Tamaulipas, México, is developing a binational basic epidemiology training module.
- The EWIDS project has been updating the laboratory database and analyzing a laboratory assessment for the entire Texas-México border region.
- The Region 8 EWIDS team (covers Texas-Coahuila border area) has been actively working with their border medical centers and federally qualified health clinics to implement active syndromic surveillance systems.
- The Region 9/10 EWIDS team (covers Texas-Chihuahua border area) has developed an influenza-like illness and gastrointestinal illness surveillance project in their more rural border areas; are in the process of completing the evaluation on surveillance of incoming bus passengers project; and have been working on the implementation of a border infectious disease surveillance exercise scheduled for July, 2009, in El Paso, Texas.
- The Region 11 EWIDS team (covers Texas-Tamaulipas-Nuevo León border area) continues their weekly binational exchange of 56 standard notifiable infectious disease conditions with Tamaulipas and Nuevo León, México.



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Providing Leadership on Border Health Issues to –

Facilitate Identification, Study, and Research

Be a Catalyst to Raise Awareness

Promote Sustainable Partnerships for Action

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United States – México Border Health Commission

The mission of the United States-México Border Health Commission (BHC) is to provide international leadership to optimize health and quality of life along the United States-México border.

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