



STATE OF THE STATE: EPI EDITION

NCPHA Fall Educational Conference
September 2025

**Can I be real a second? For just one millisecond?
Let down my guard and let me tell you how I feel a second?**





EXCLUSIVE

HEALTH NEWS

CDC is pulling back \$11B in Covid funding sent to health departments across the U.S.

“Now that the pandemic is over, the grants and cooperative agreements are no longer necessary,” federal health authorities wrote to funding recipients this week.



EXCLUSIVE

HEALTH NEWS

CDC is pulling back \$11B in Covid funding sent to health departments across the U.S.

“Now that the pandemic is over, the grants and cooperation authorities wrote to funding recipients this week.”



RFK Jr. removes all 17 members of CDC's vaccine advisory committee

The committee makes recommendations on the safety and efficacy of vaccines.

By [Mary Kekatos](#)

June 9, 2025, 7:35 PM



Removal of CDC panel 'undermines value of vaccines': Doctor Dr. Amesh Adalja, a senior scholar at Johns Hopkins University, says Health and Human Services Secretary Robert F. Kennedy Jr.'s action makes the U.S. "less prepared for infectious disease threats."

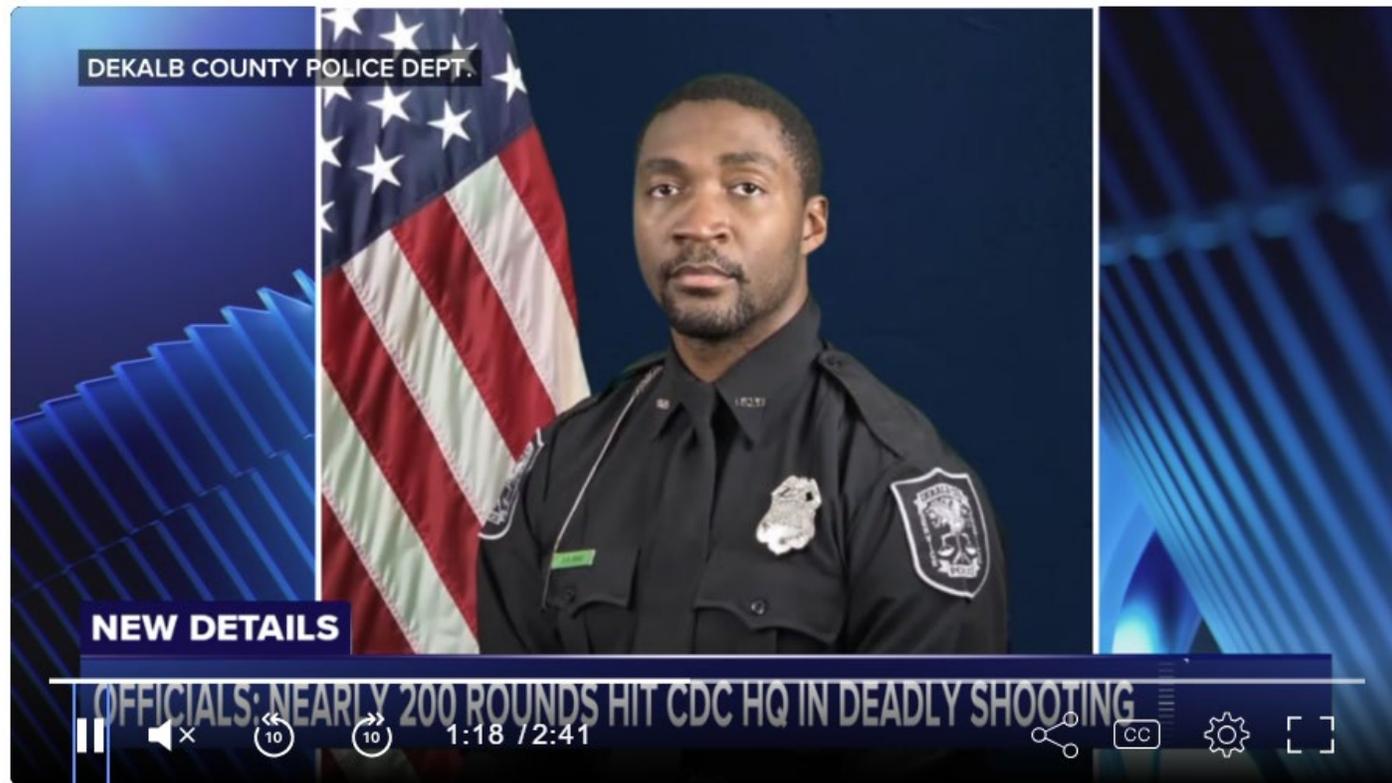
EXCLUSIVE

CDC director says misinformation 'led to deadly consequences' in campus shooting

Nearly 200 rounds struck facilities on the campus, officials said.

By [Mary Kekatos](#)

August 12, 2025, 1:03 PM



Suspected gunman in CDC shooting fired nearly 500 rounds: Officials Chris Hosey, director of the Georgia Bureau of Investigation (GBI), said almost 500 shell casings were recovered. Of those rounds, about 200 struck facilities on the CDC campus.

to health

17 members of CDC's vaccine

on the safety and efficacy of vaccines.



vaccines': Doctor Dr. Amesh Adalja, a senior scholar at Johns Hopkins secretary Robert F. Kennedy Jr.'s action makes the U.S. "less prepared for

CDC in crisis: who are the top officials resigning or being forced out?

CDC
conse

Nearly 200

By [Mary Kek](#)
August 12, 20

Four senior officials resign in protest at health secretary's handling of vaccine policy and agency's direction as CDC director resists attempt to oust her



DEKAI
NEV
OFF

Suspected g
Investigation
campus.

▶ CDC staff clap out senior officials who resigned after Monarez firing - video

ers of CDC's vaccine

efficacy of vaccines.



. Amesh Adalja, a senior scholar at Johns Hopkins
neddy Jr.'s action makes the U.S. "less prepared for

CDC in crisis: who are the top officials resigning or being forced out?

CDC
cor

New Research: Proposed CDC Budget Cuts Harm Public Health and State and Local Economies

Nearly

By [Mar](#)
August

Proposed budget would lead to shrinking state and local economies and 42,000 jobs lost nationwide, according to a new analysis

🕒 September 10, 2025

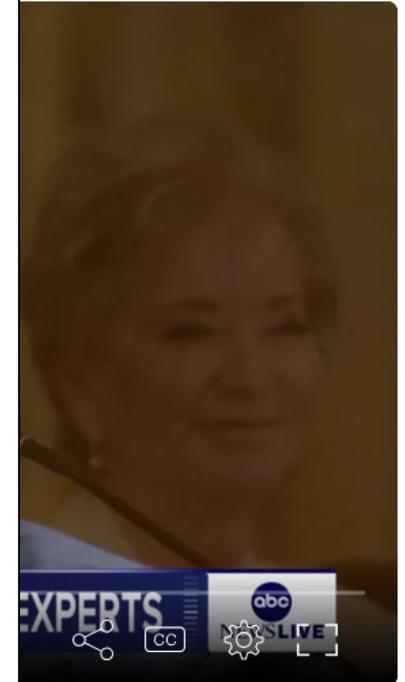


Suspe
Investigation
campus.

▶ CDC staff clap out senior officials who resigned after Monarez firing - video

CDC's vaccine

nes.



senior scholar at Johns Hopkins
takes the U.S. "less prepared for



Volume 14, Issue 7
July 2025

Article Contents

Conflicts of interest

JOURNAL ARTICLE

Beyond the Tip of the Iceberg: Impacts of Federal Actions on State and Local Public Health Infrastructure

[Annabelle de St. Maurice](#) , [Sharon Balter](#) , [Kelly Kimple](#) , [Zack Moore](#) ✉

Journal of the Pediatric Infectious Diseases Society, Volume 14, Issue 7, July 2025, piaf064,
<https://doi.org/10.1093/jpids/piaf064>

Published: 12 June 2025 **Article history ▼**



PDF



Split View



Cite



Permissions



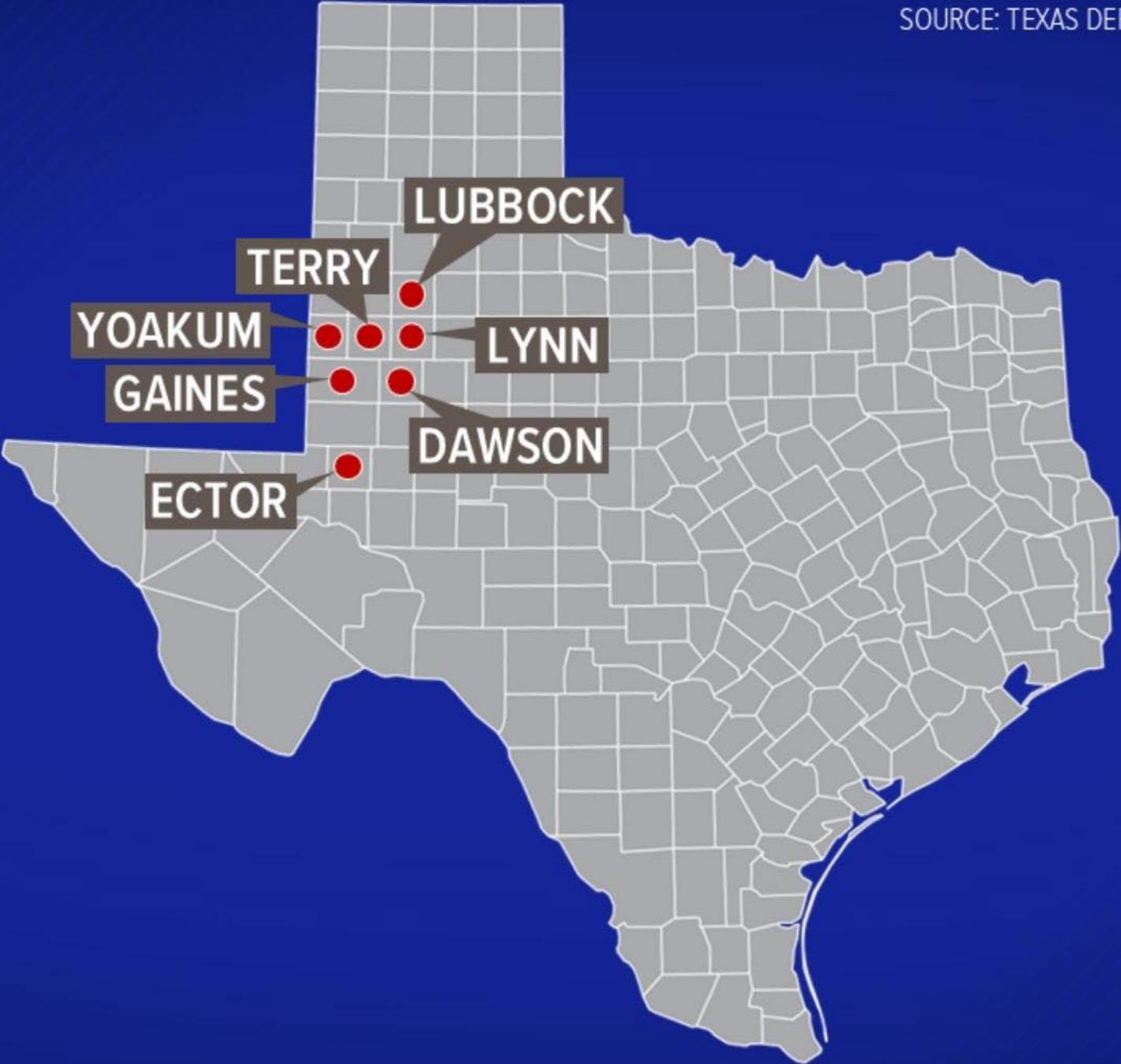
Share ▼

EPIDEMIOLOGY SECTION UPDATE 2025

- Measles
- Vector-borne diseases
- Syphilis
- Respiratory viral diseases
- Vaccines
- Environmental threats

Measles





**MEASLES
TESTING**



Cumulative Cases

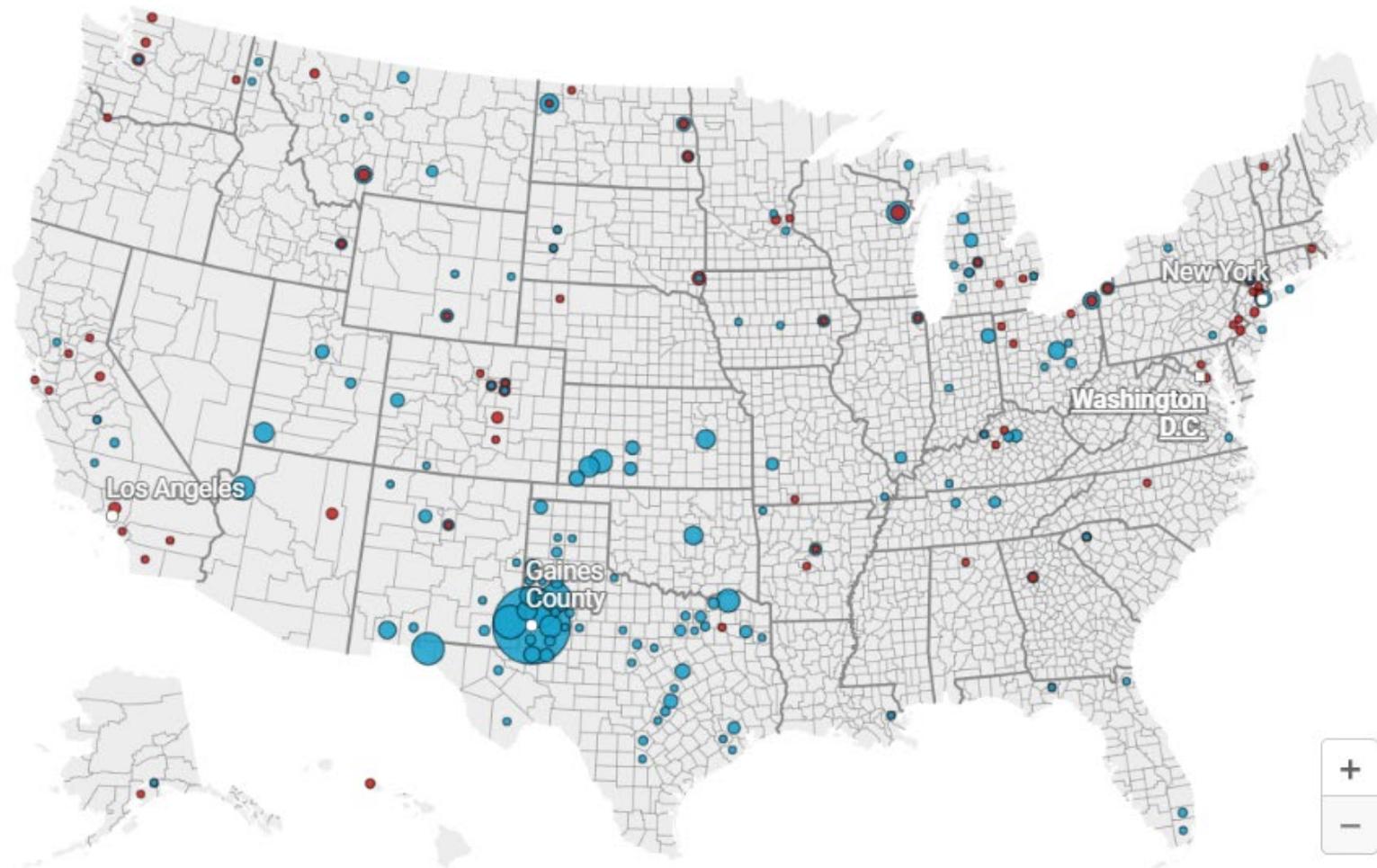
Recent Cases

U.S. MEASLES CASES

January 1, 2025 - Sep 15, 2025

1474

Cumulative measles cases reported in the United States in 2025





Cases

1491

92%
unvaccinated

Hospitalized

12%

Mostly <5
years

Deaths

3

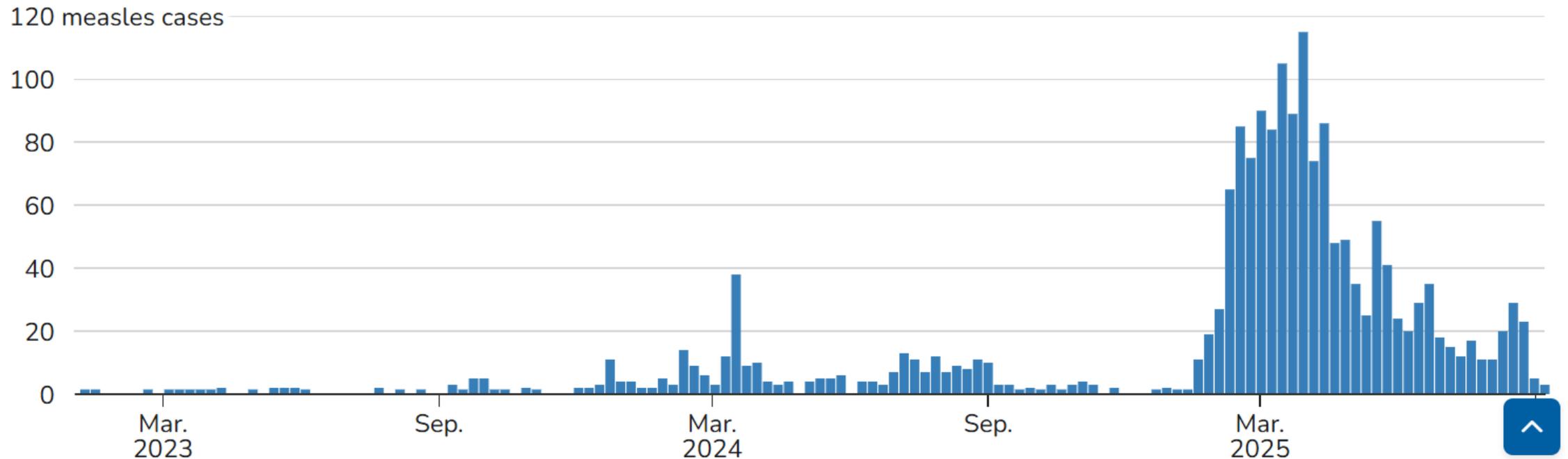


First Case of Measles Identified in North Carolina

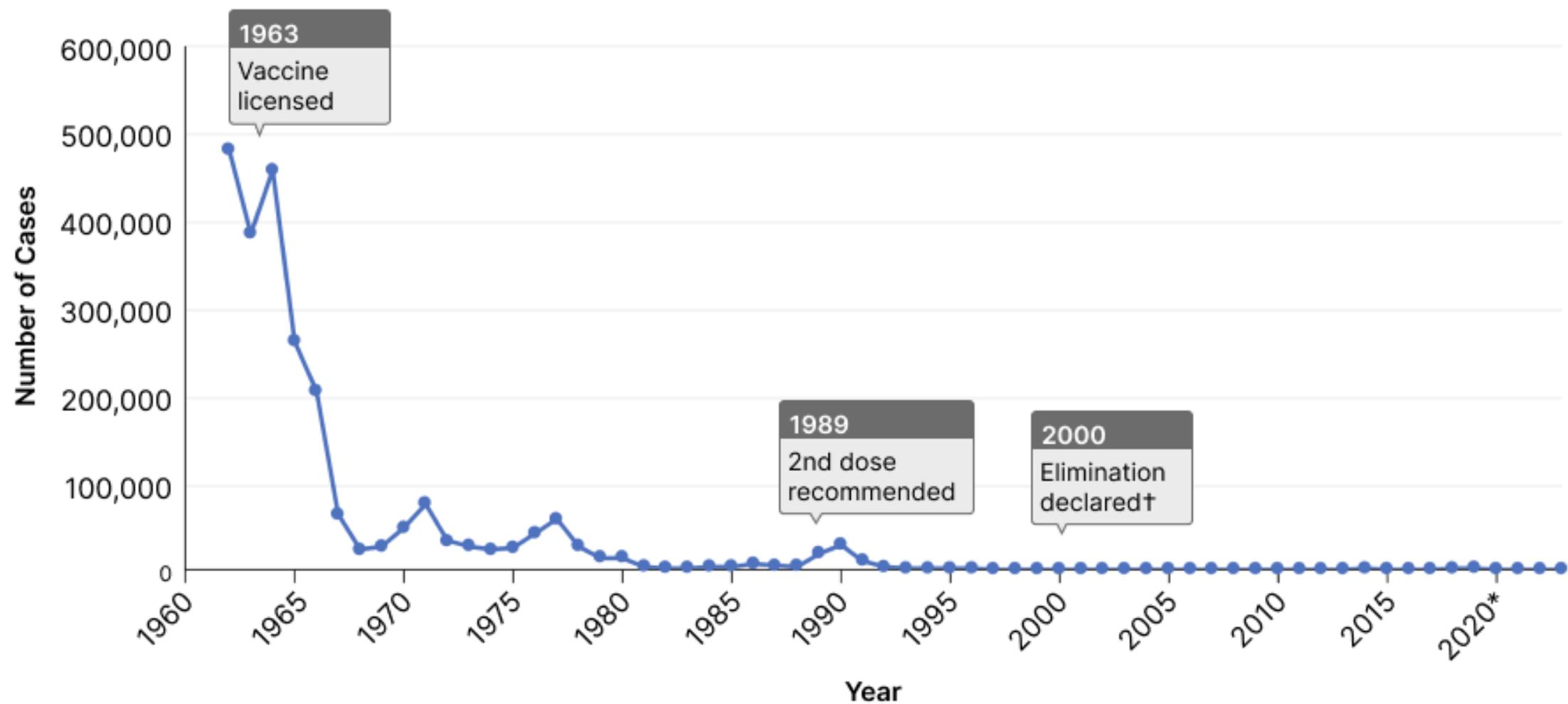
Measles Outbreak

Weekly measles cases by rash onset date

2023–2025* (as of September 9, 2025)



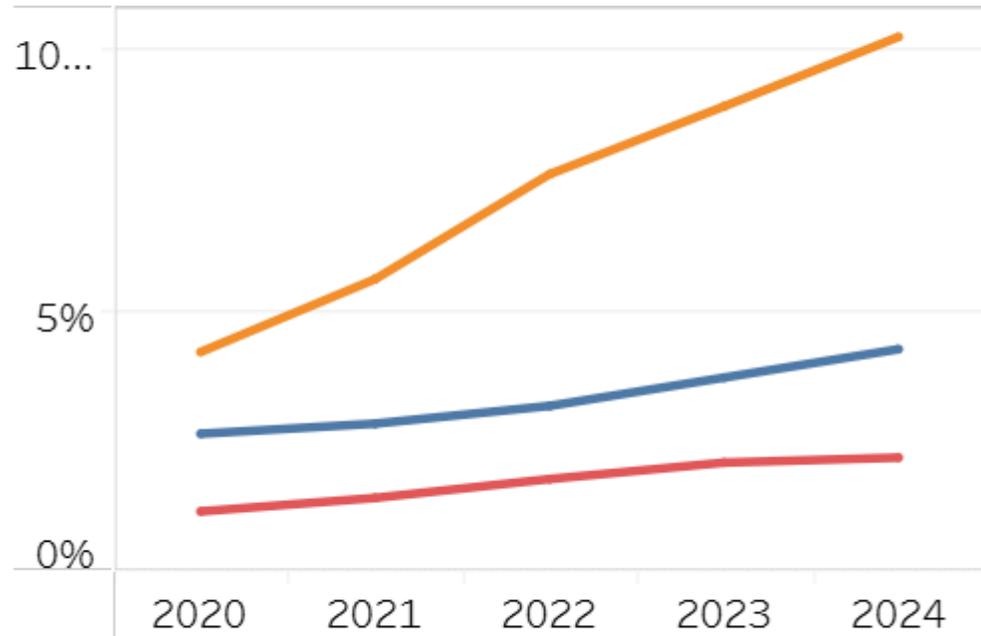
Reported Measles Cases in the United States from 1962 – 2023*



Exempt by School Type and Year

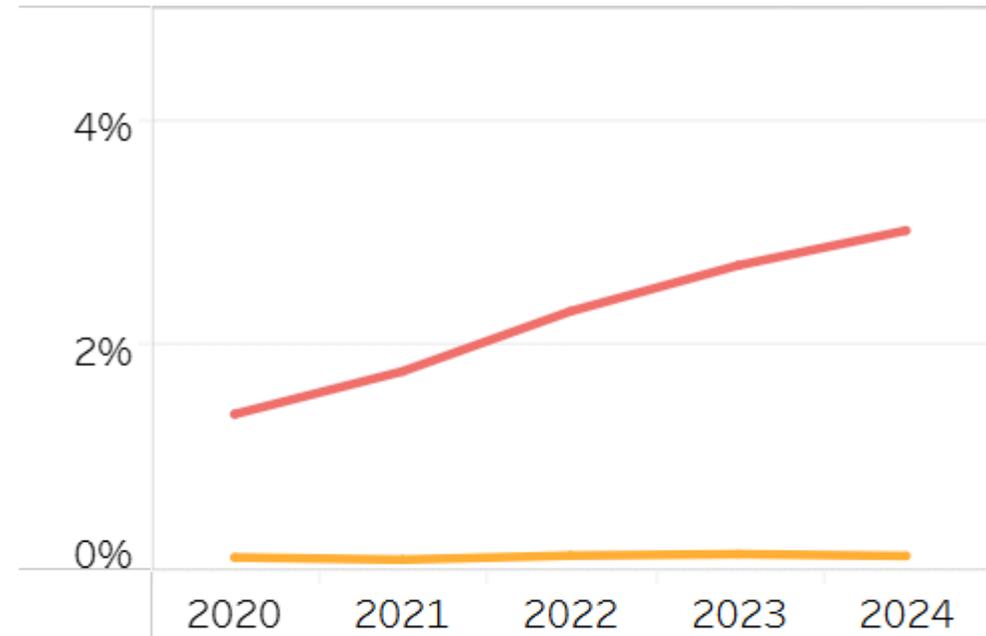
Select a status

Exempt



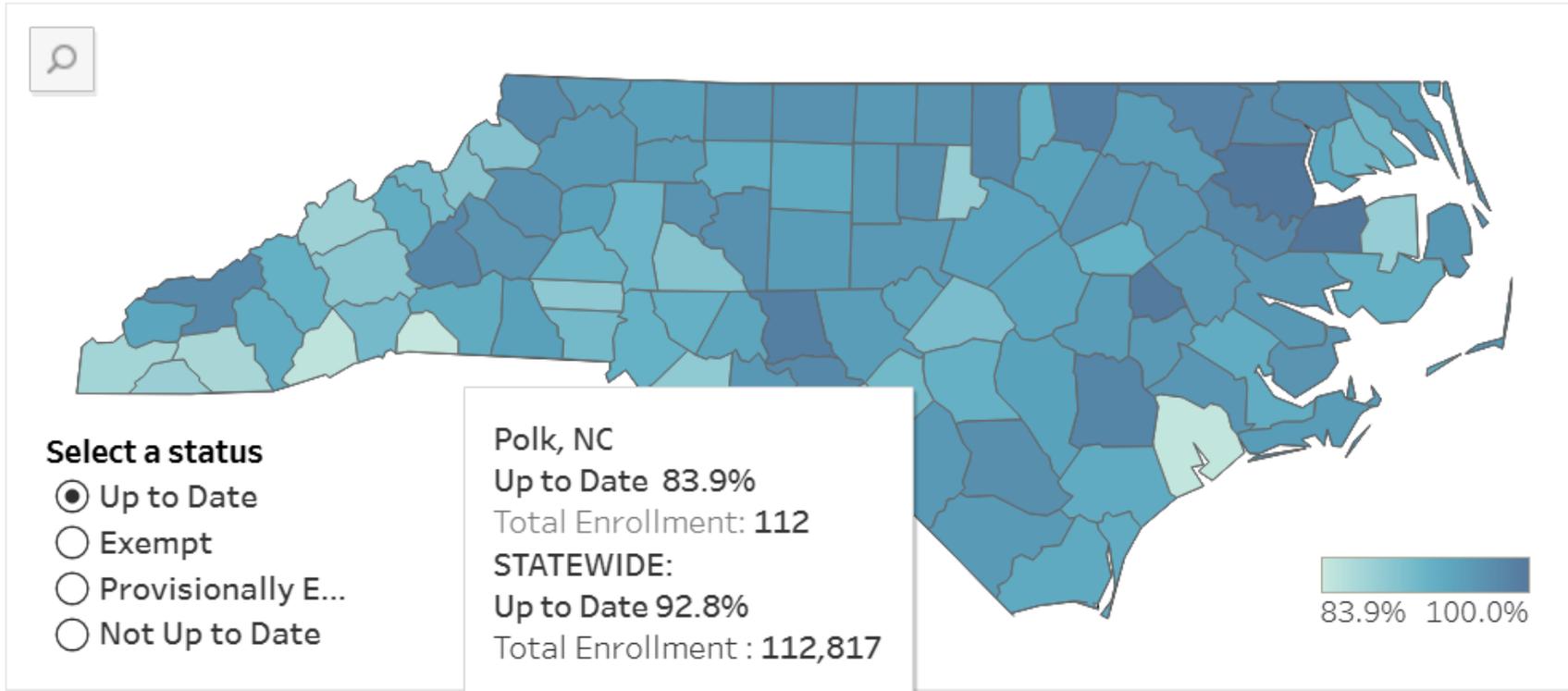
■ Charter ■ Private ■ Public

Exemptions by Type and Year

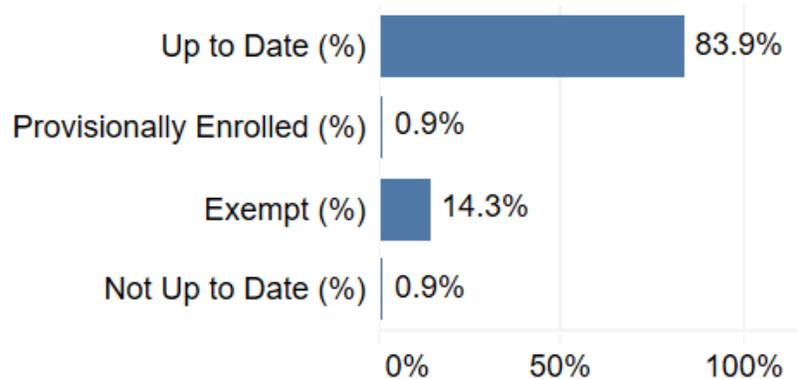


■ Medical Exemption (%)
■ Religious Exemption (%)

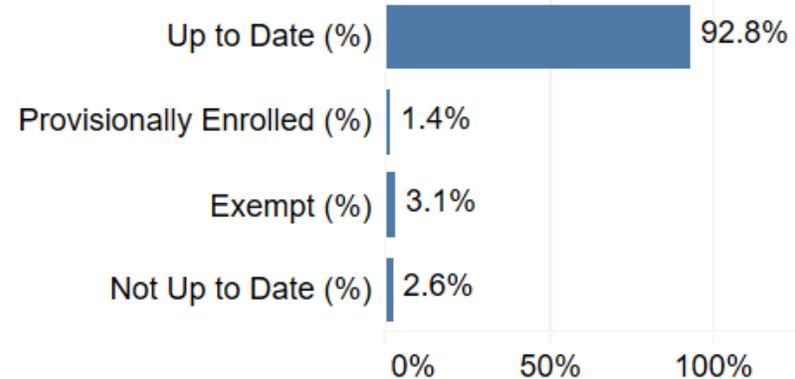
Kindergartners with Up to Date status by County in 2024



Polk Kindergarten Compliance, 2024



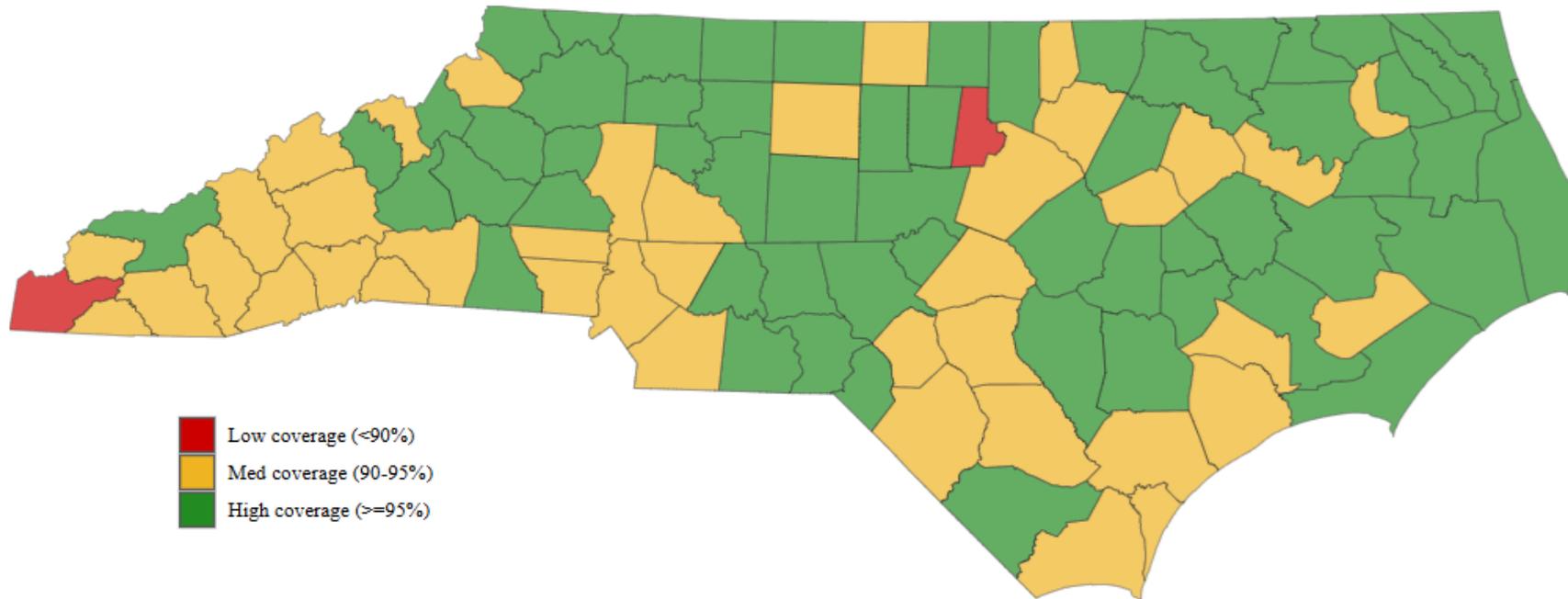
State Kindergarten Compliance, 2024



ACCIDDA Vaccination coverage-based risk of measles transmission in elementary schools in North Carolina

This page shows estimates of Measles-Mumps-and-Rubella (MMR) elementary school vaccination rates. The visuals show estimates made at the school-and-grade level, and then summarized to the school or county level. The estimates come from locally reported kindergarten data, for both public and private schools, and from North Carolina specific data from national immunization surveys.

County-level vaccination coverage estimates based on K-5 vaccination rates

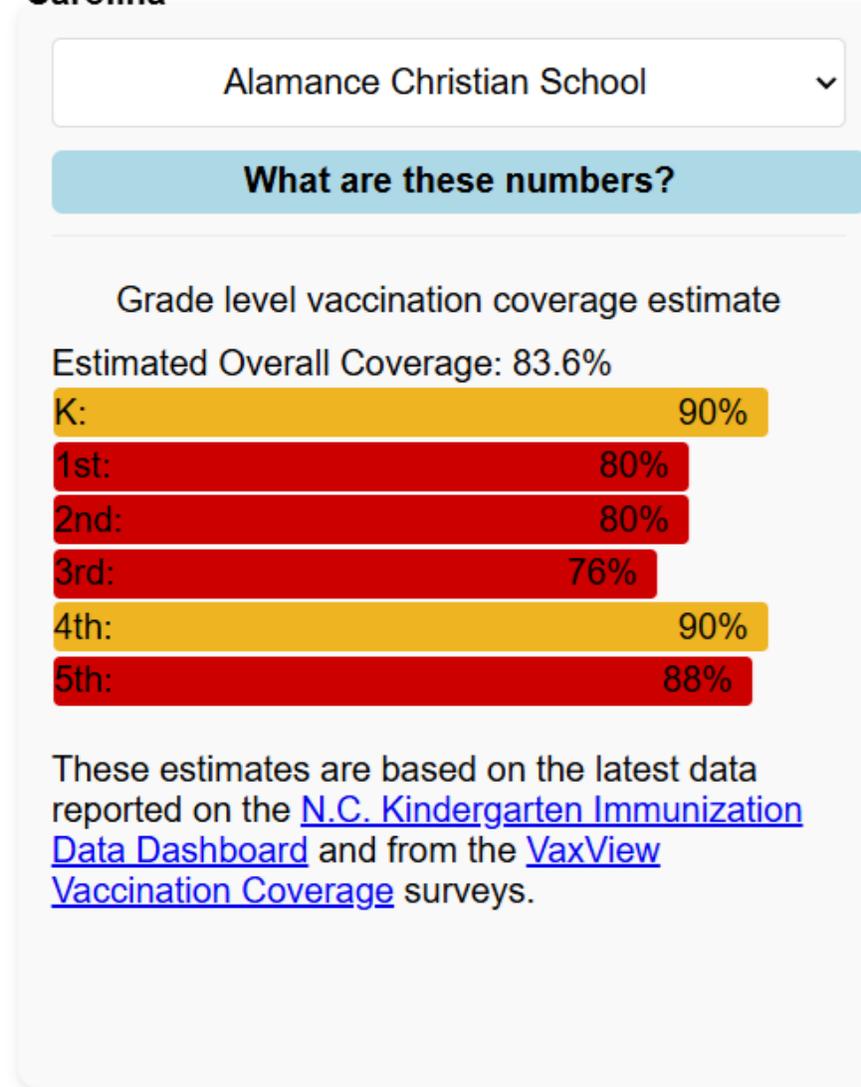
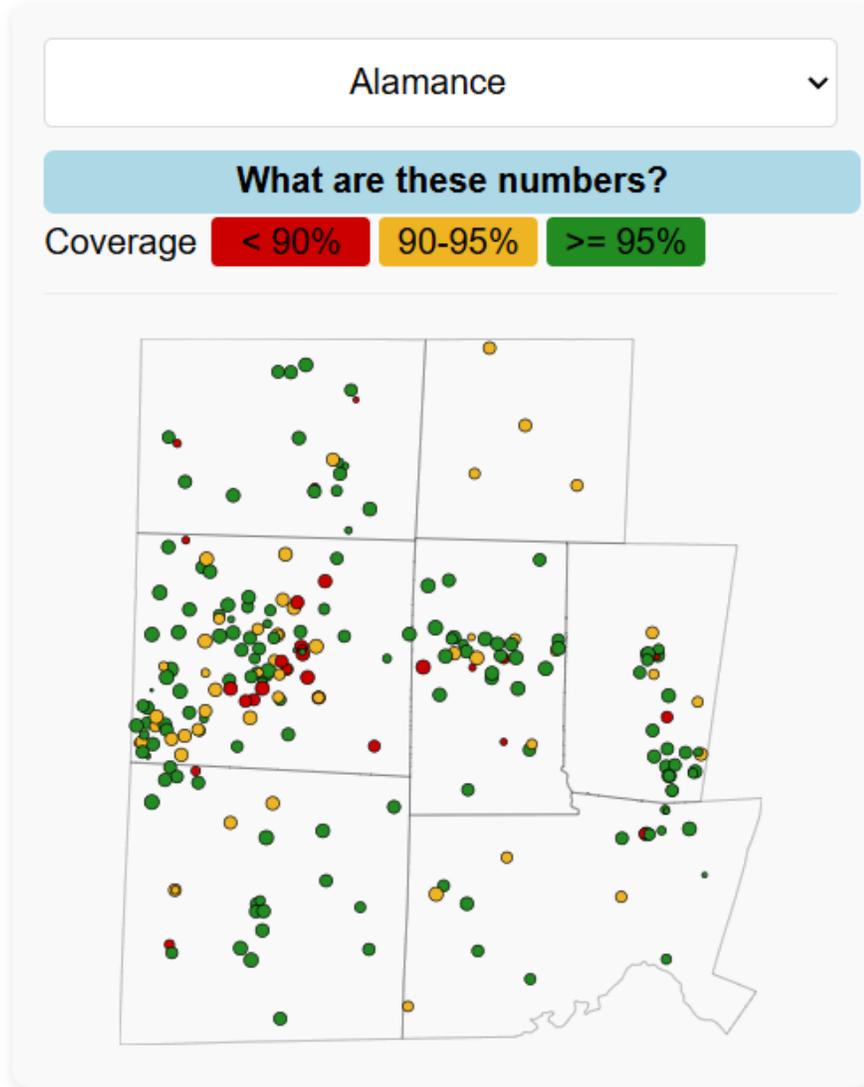


Estimated

overall coverage in

▼ elementary schools

ACCIDDA Vaccination coverage-based risk of measles transmission in elementary schools in North Carolina



Vector-borne Diseases



Health officials warn of rising West Nile virus cases

SEPT. 14, 2025 / 01:36

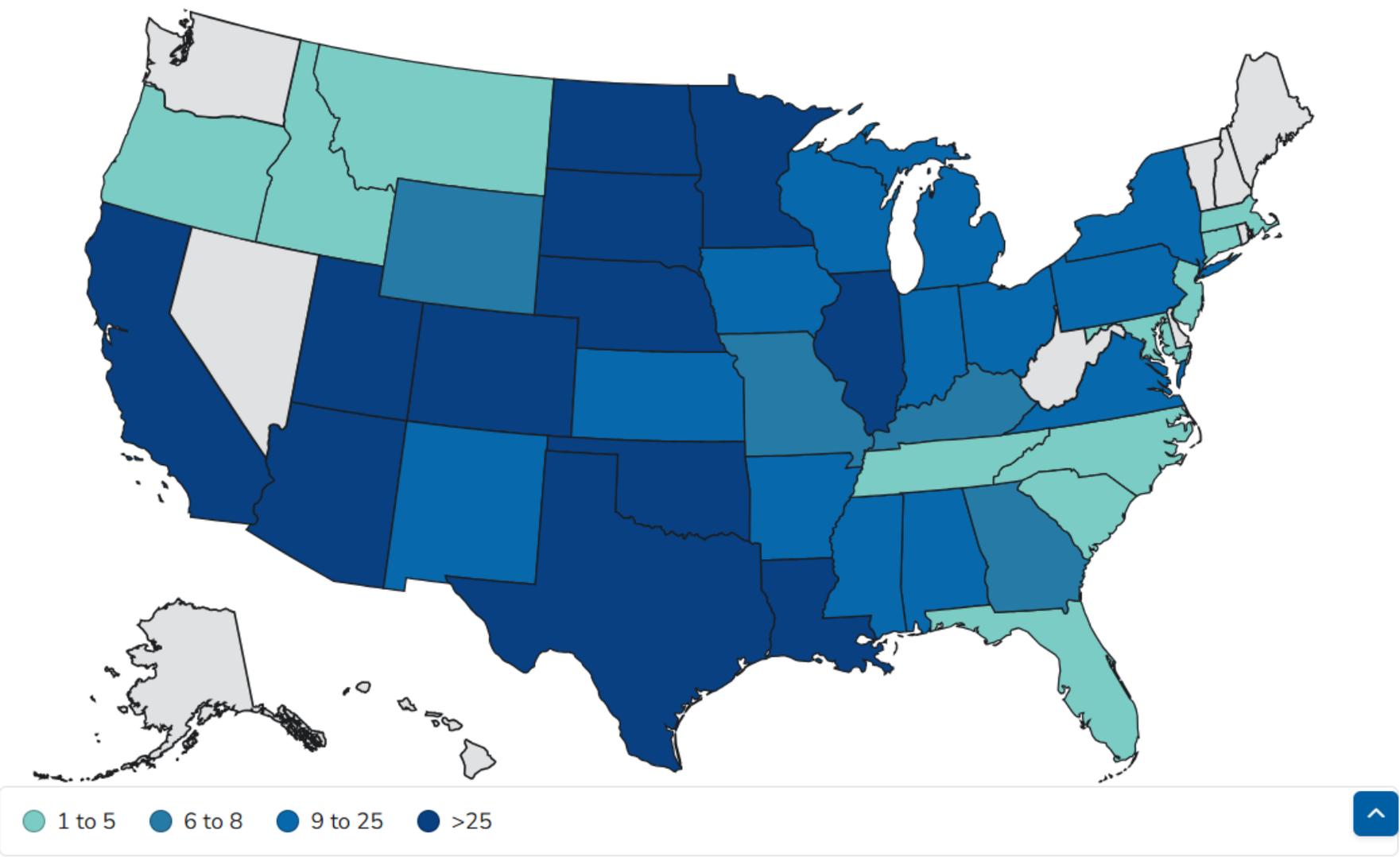


OFFICIALS WARN ABOUT DRAMATIC SPIKE IN WEST NILE VIRUS

00:07 / 01:36



West Nile virus human disease cases reported by state of residence, 2025



SOURCE: CDC data as of Sept 16, 2025



Durham County Department of Public Health News Update

Durham County confirms first case of West Nile virus in 2025

July 30, 2025



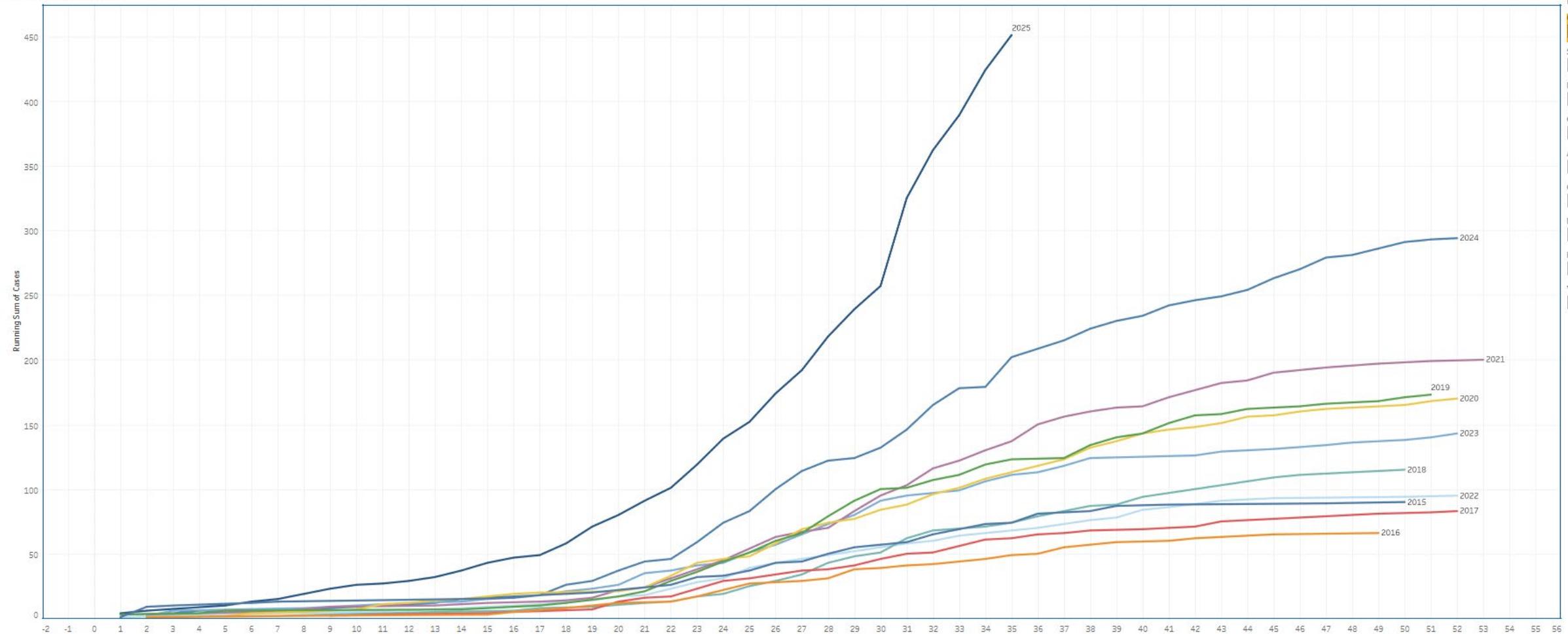
Public Health





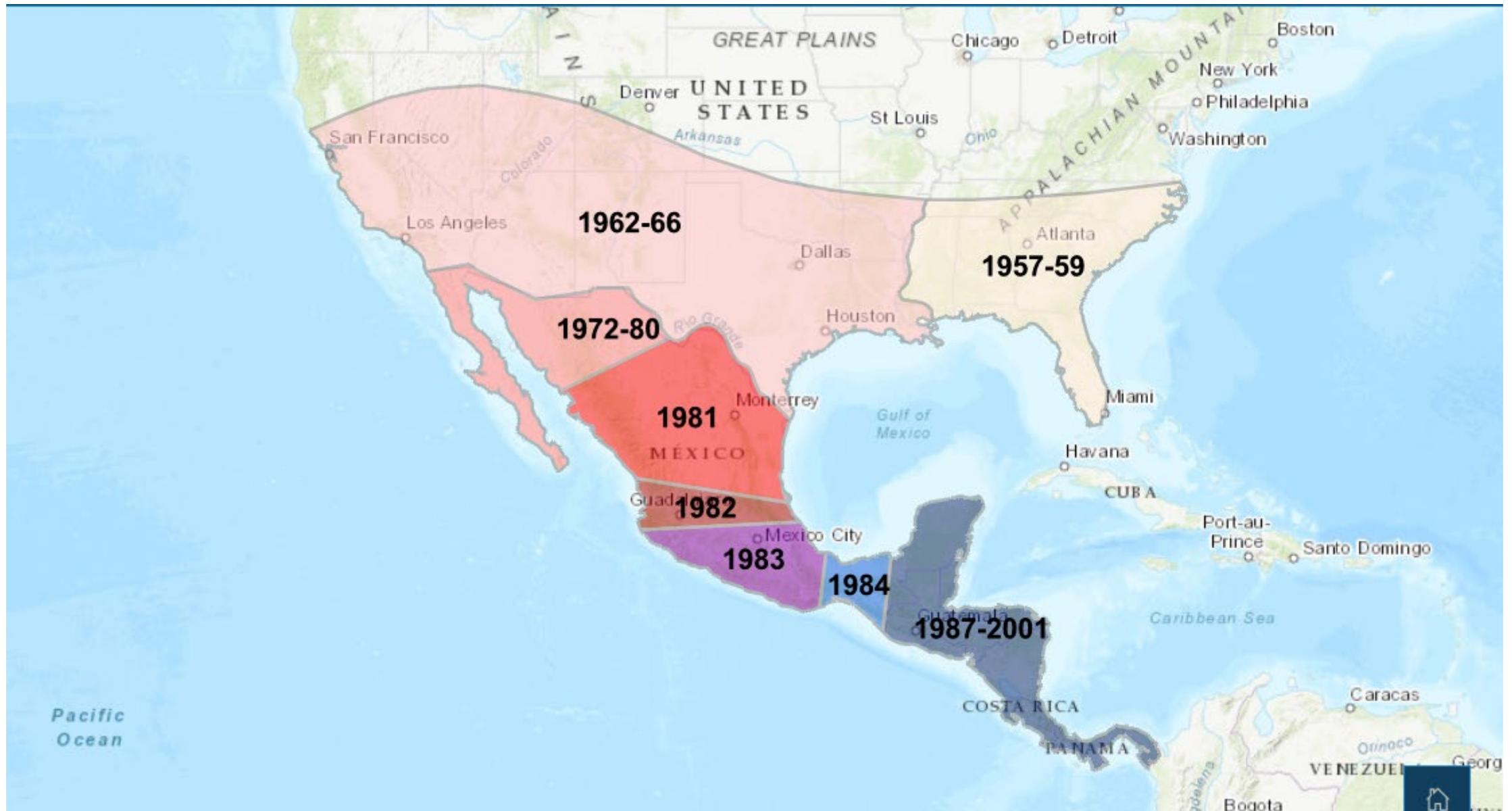
Ehrlichiosis case reports increasing during the past two years

Running Totals WS



Disease: Ehrlichiosis
Classification: (Multiple values)
Status: (All)
NCALHD Region: (All)
County: (All)
Age Group: (All)
Gender: (All)
Race: (All)
Hispanic: (All)
Year: (All)







[Home](#)

[Food](#) ▾

[Farming and Ranching](#) ▾

[Forestry](#) ▾

[Sustainability](#) ▾

[Trade and Markets](#) ▾

[About](#) ▾

[Search](#)

[Home](#) > [About USDA](#) > [News](#) > [USDA Press Releases](#) > [USDA Announces Sweeping Plans to Protect the United States from New World Screwworm](#)

PRESS RELEASE

USDA Announces Sweeping Plans to Protect the United States from New World Screwworm

PUBLISHED: August 15, 2025

SHARE:



Rare human screwworm case confirmed in Maryland

Federal officials have been concerned the flesh-eating New World screwworm could devastate the beef industry.

Updated August 25, 2025

 4 min

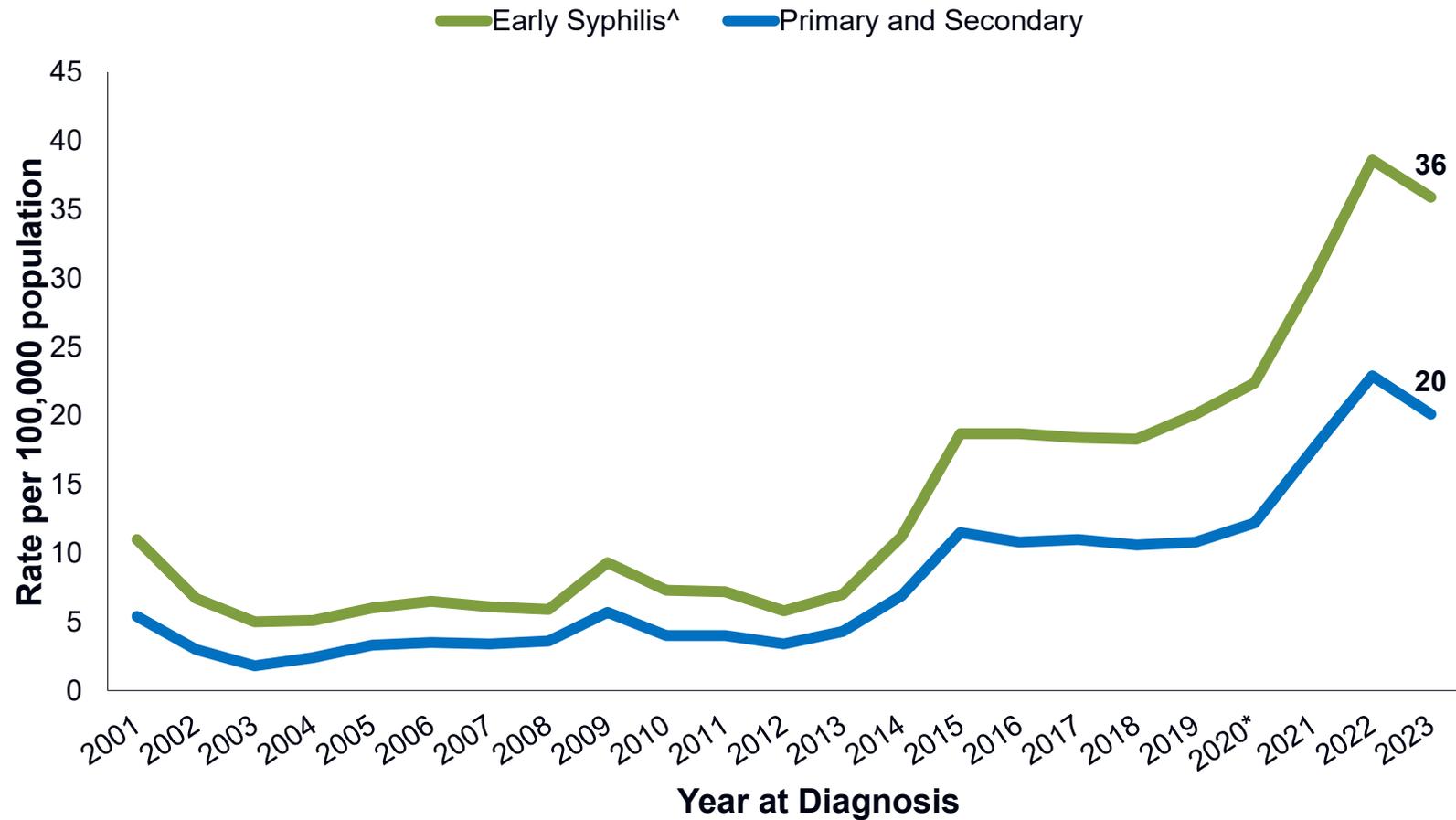
 Summary



 160

Syphilis

The syphilis epidemic is growing in NC

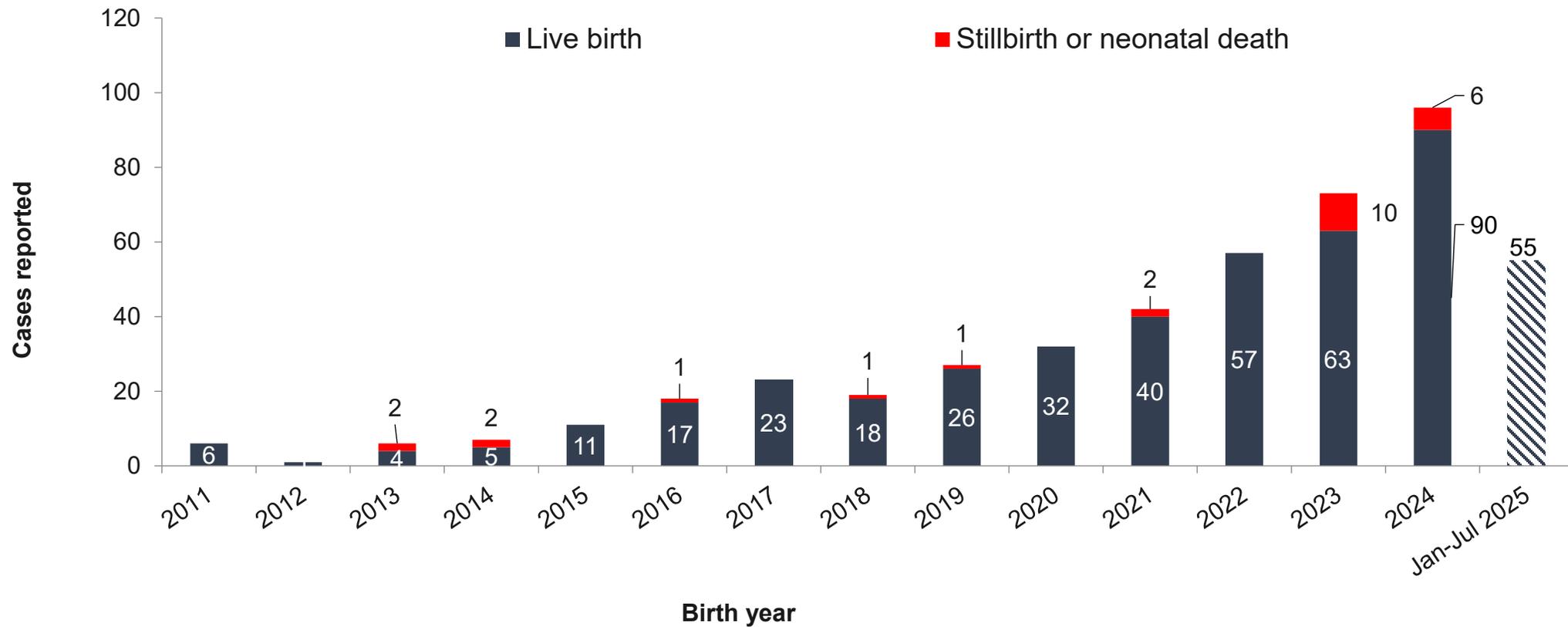


^Early syphilis is defined as primary, secondary, or early non-primary non-secondary (formerly early latent) syphilis.

*2020 data should be treated with caution due to reduced availability of testing caused by the COVID-19 pandemic.

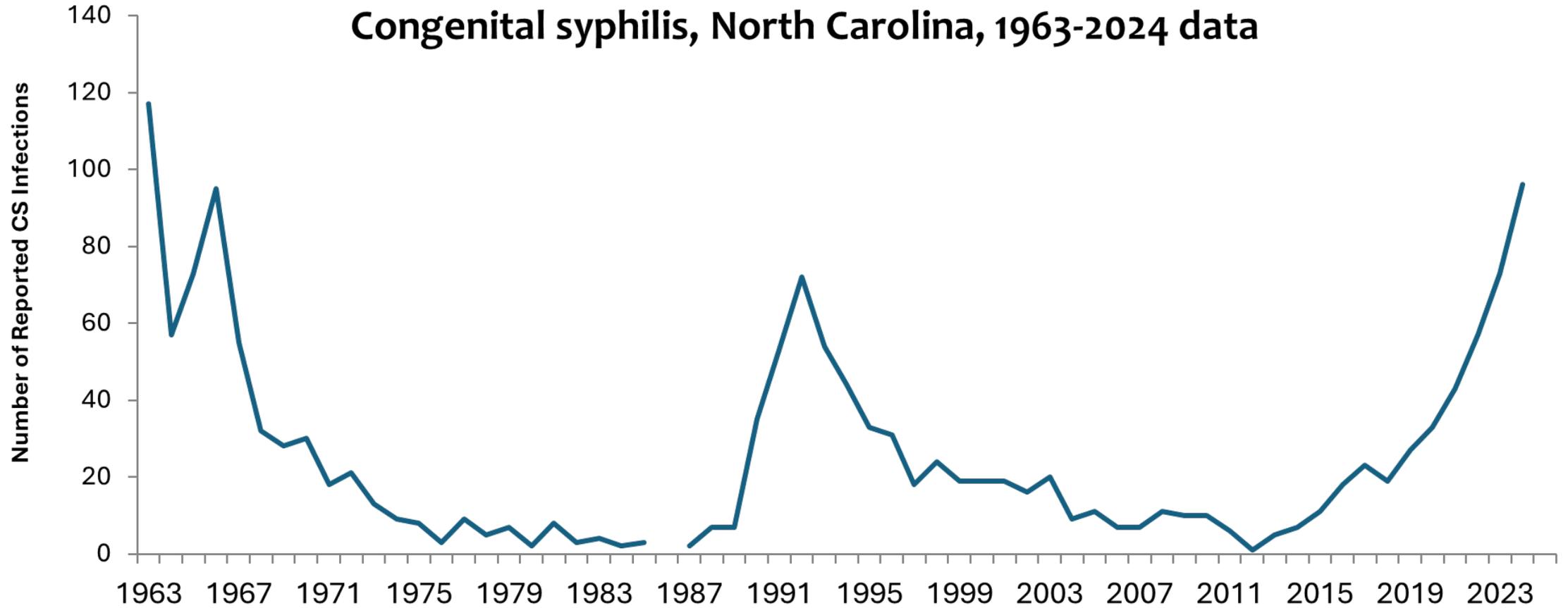
Data Source: North Carolina Electronic Disease Surveillance System (NC EDSS) (data as of July 1, 2024).

Congenital syphilis is also surging



Data sources: NC EDSS 8/1/2025 and EvalWeb 8/2025; 2025 data are preliminary

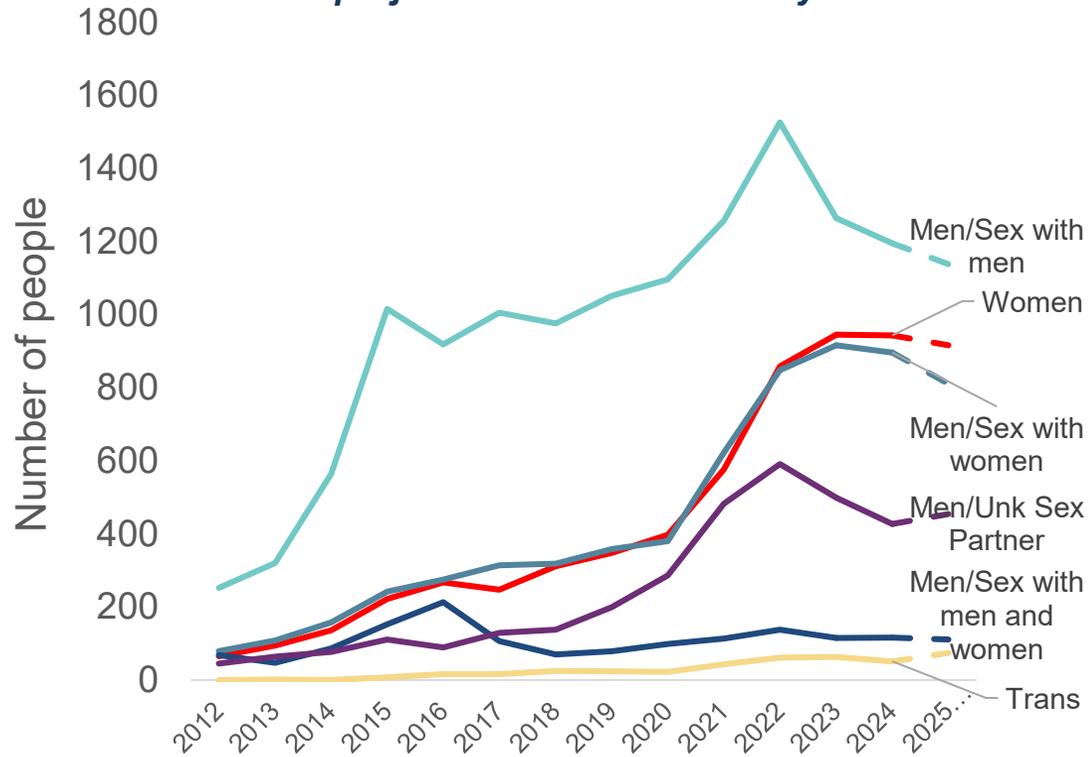
Congenital syphilis, North Carolina, 1963-2024 data



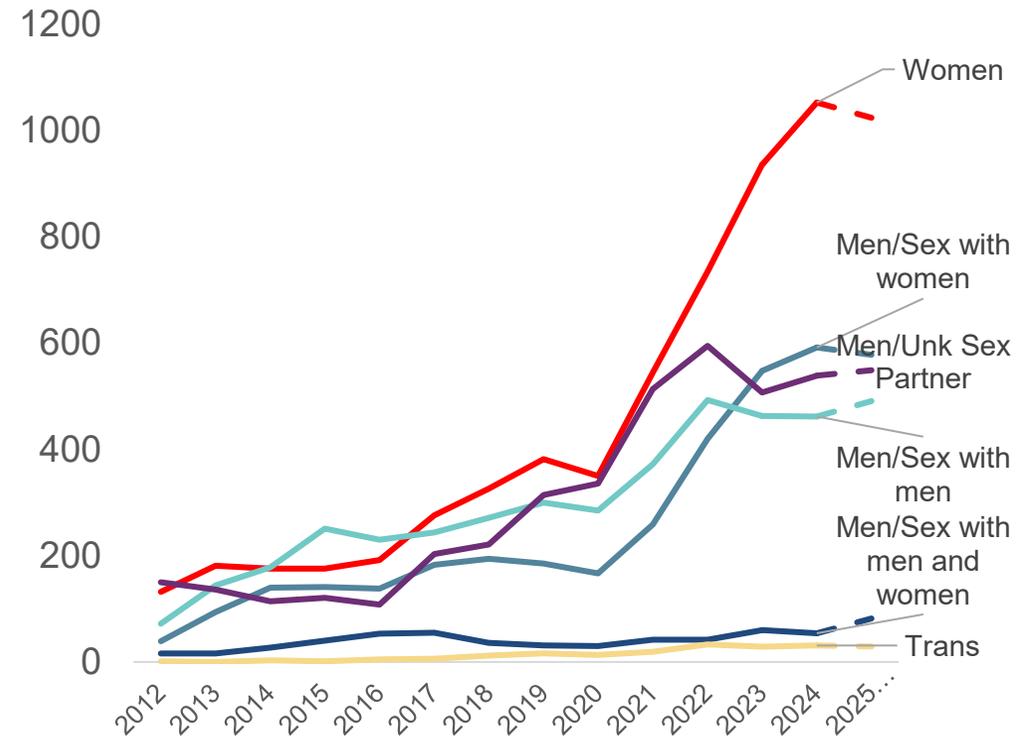
Data Source: North Carolina Electronic Disease Surveillance System (NC EDSS) (data as of July 2025). *2024 data are still preliminary and subject to change

Some reason for optimism?

Early Syphilis in North Carolina,
**2025 projected based on Jan-May data*



Late/Unk Syphilis in North Carolina,
**2025 projected based on Jan-May data*



Data Source: North Carolina Electronic Disease Surveillance System (NC EDSS) (data as of July 2025).
 *2024 data are still preliminary and subject to change

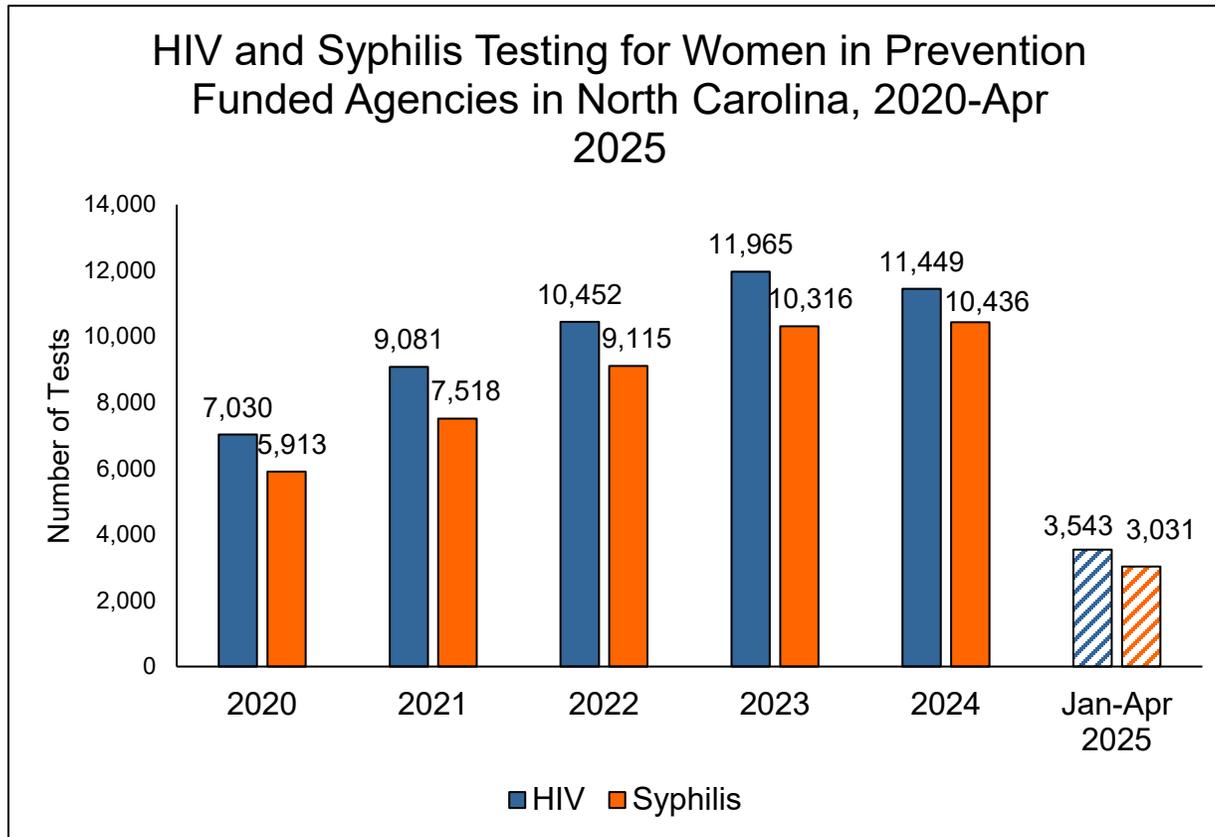


North Carolina Control Measures

North Carolina Public Health Rule Regarding Syphilis And Pregnancy: [10A NCAC 41A .0204](#)

- All pregnant women shall be tested for syphilis at the 1st prenatal care visit, between 28 and 30 weeks of gestation and at delivery.
- Hospitals shall determine the syphilis serologic status of the mother prior to discharge of the newborn so that, if necessary, the newborn can be evaluated and treated

Public Health Actions and Impacts



Proportion of cases prevented June 1, 2024 – May 31, 2025

302 pregnancies completed among people with syphilis

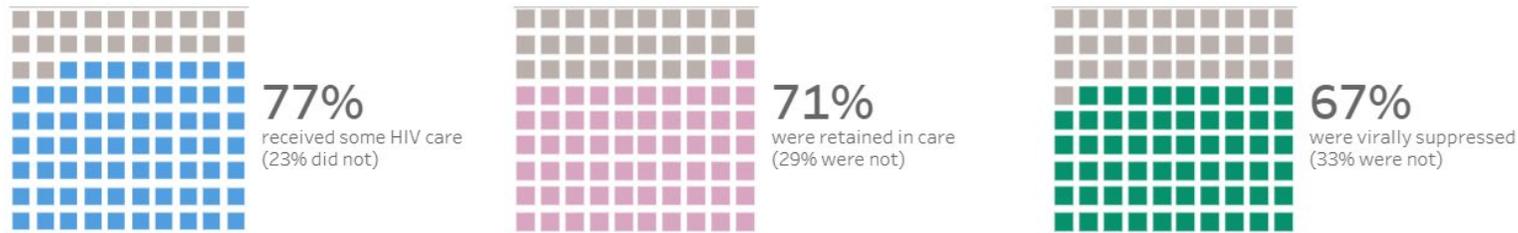
91 CS cases, 211 cases of congenital syphilis prevented

Prevented = 70%

New HIV continuum of care dashboard



HIV Care Outcomes in North Carolina, 2023 For every 100 people overall diagnosed with HIV in NC:



The gray boxes represent NC residents who did not receive HIV care, were not retained in care, and were not virally suppressed. These are the people we want to support.

You can live with HIV and be healthy.

North Carolina's viral suppression rate of 67% is around the same as the national rate: among US areas with complete laboratory reporting, 65% of people living with HIV are virally suppressed (CDC, 2022).

Our goal is to raise the percentage of individuals with viral suppression to at least 80%.

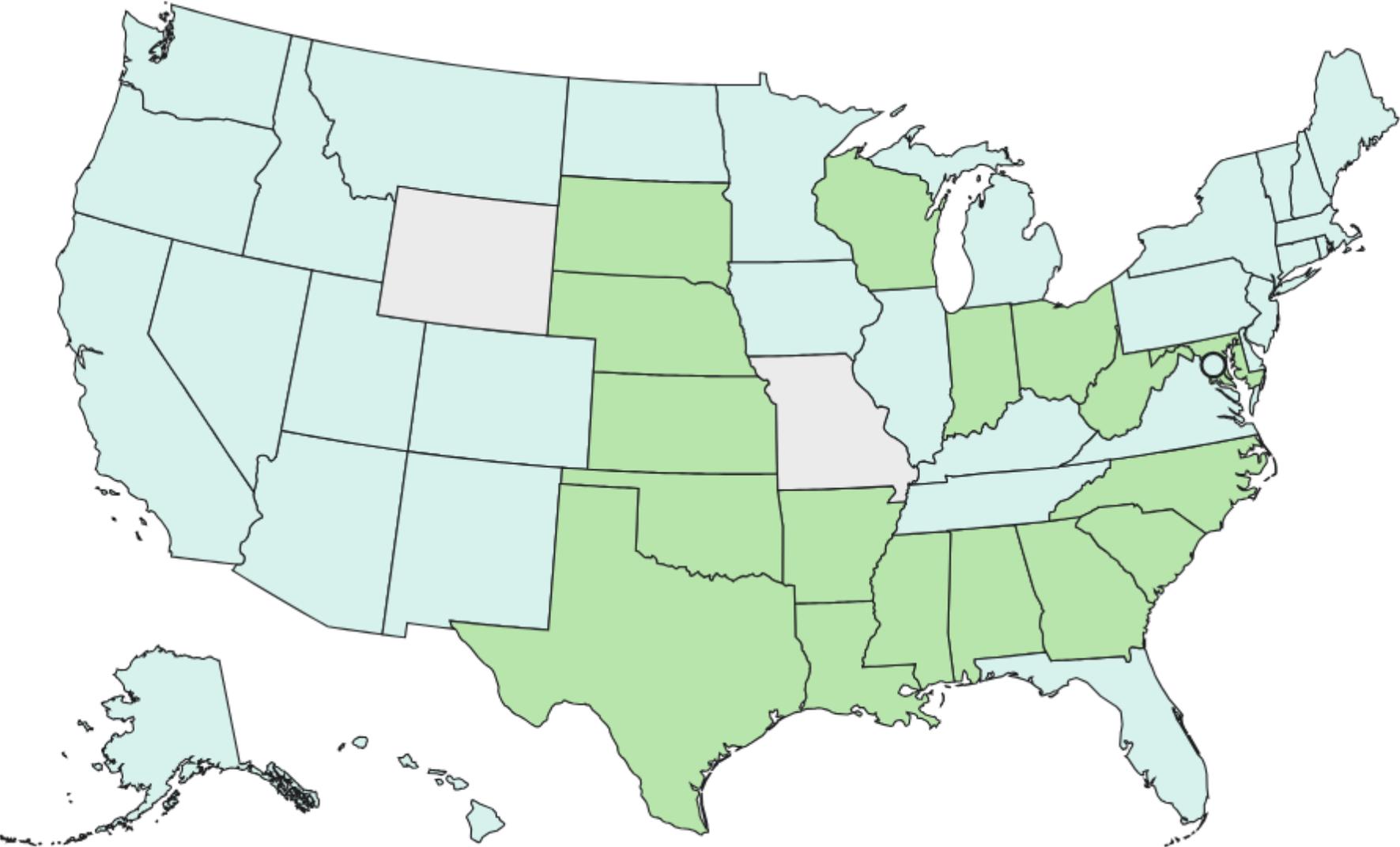


COVID, FLU AND RSV

A photograph of seven wooden blocks arranged in a row on a solid orange background. The first block is stacked vertically, with the letter 'E' on top and 'PA' on the bottom. The remaining six blocks are single and contain the letters 'N', 'D', 'E', 'M', 'I', and 'C' in order from left to right. The blocks are light-colored wood with a visible grain.

**E
PA** **N** **D** **E** **M** **I** **C**

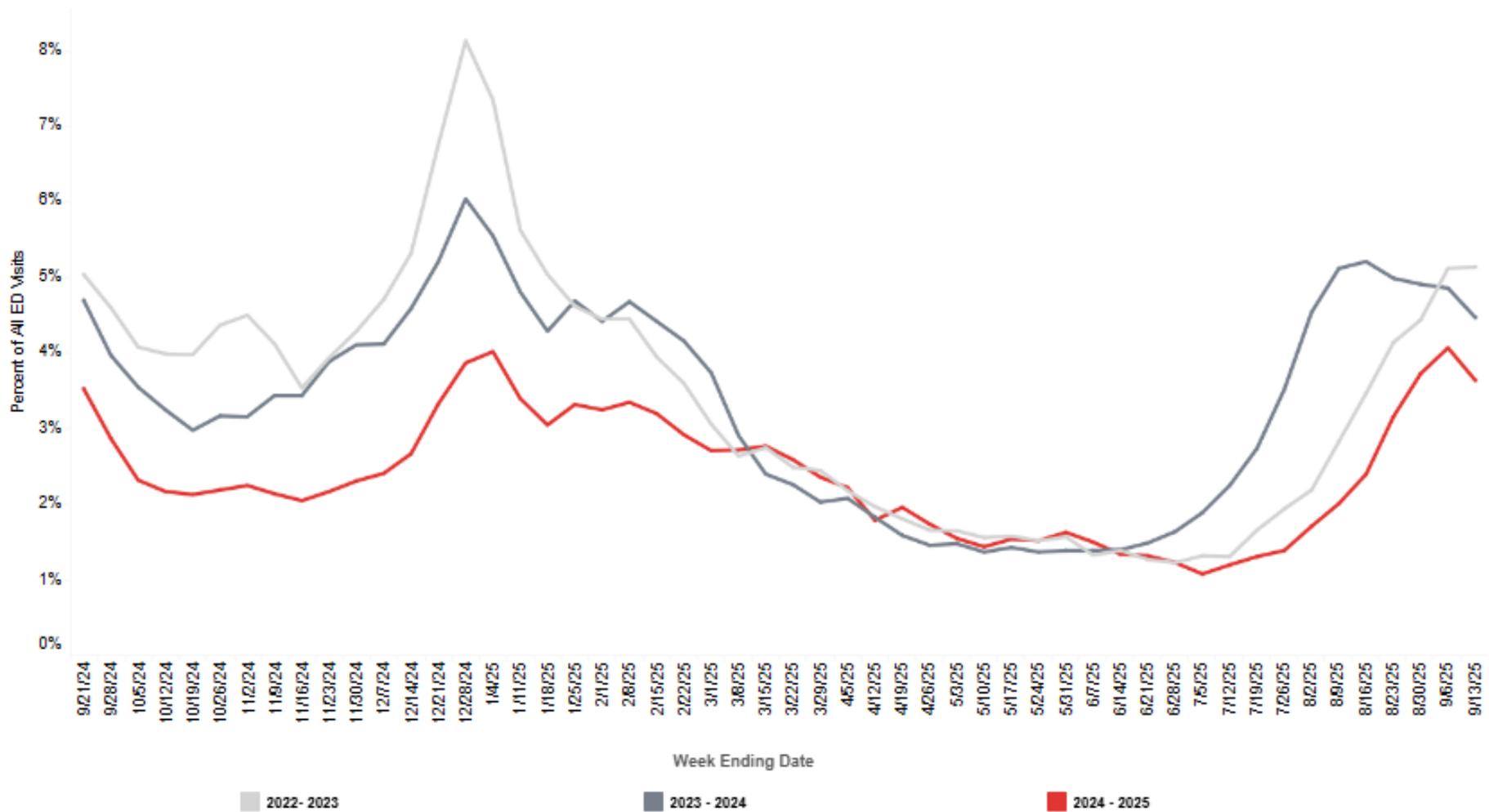
Acute Respiratory Illness



Percentage of COVID-like Illness (CLI) Emergency Department (ED) Visits



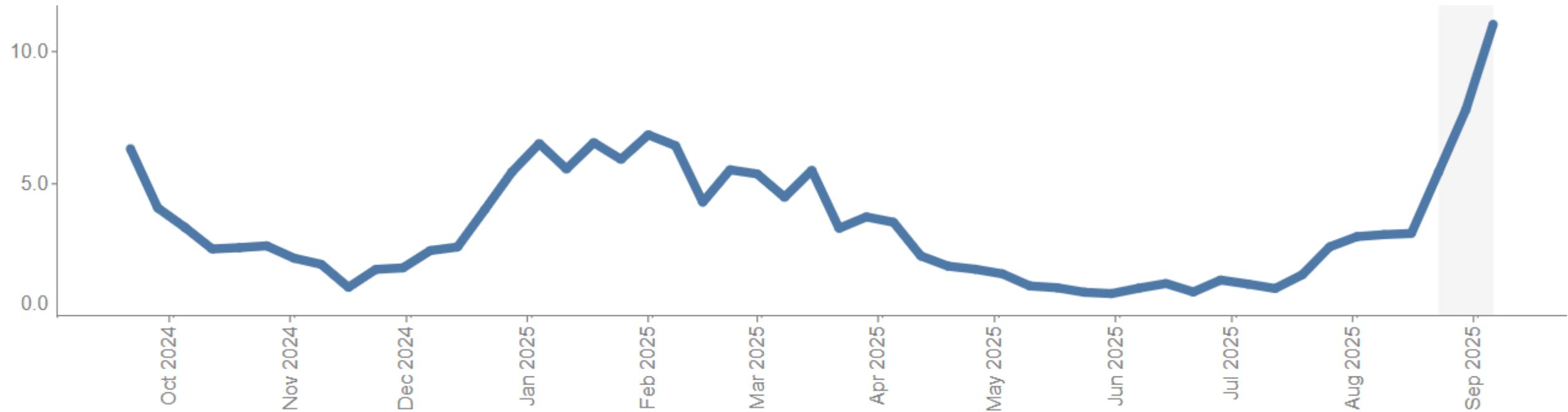
What Percentage of ED Visits this Season are for COVID-like Illness Compared to Previous Seasons?



COVID-19 Wastewater Monitoring

Latest Week: The wastewater viral activity level statewide is **11.0** which is **Very High** for COVID-19. *Wastewater viral activity levels may indicate the risk of infection in an area.*

■ COVID-19



The wastewater viral activity level indicates whether the amount of virus in the wastewater is Very Low (0 to 2), Low (>2 and <=3.4), Moderate (>3.4 and <=5.3), High (>5.3 and <=7.8) or Very High (>7.8). [More Info](#)

CDC'S RESPIRATORY VIRUS ACTIVITY LEVELS

Emergency department visits in **the United States**

COVID-19

Decreasing 

Flu

Increasing 

RSV

Increasing 

Emergency department data is used to monitor changes in people seeking medical care. [Read more »](#)

CDC'S RESPIRATORY VIRUS ACTIVITY LEVELS

Wastewater viral activity level in **the United States**

COVID-19

High

Flu[†]

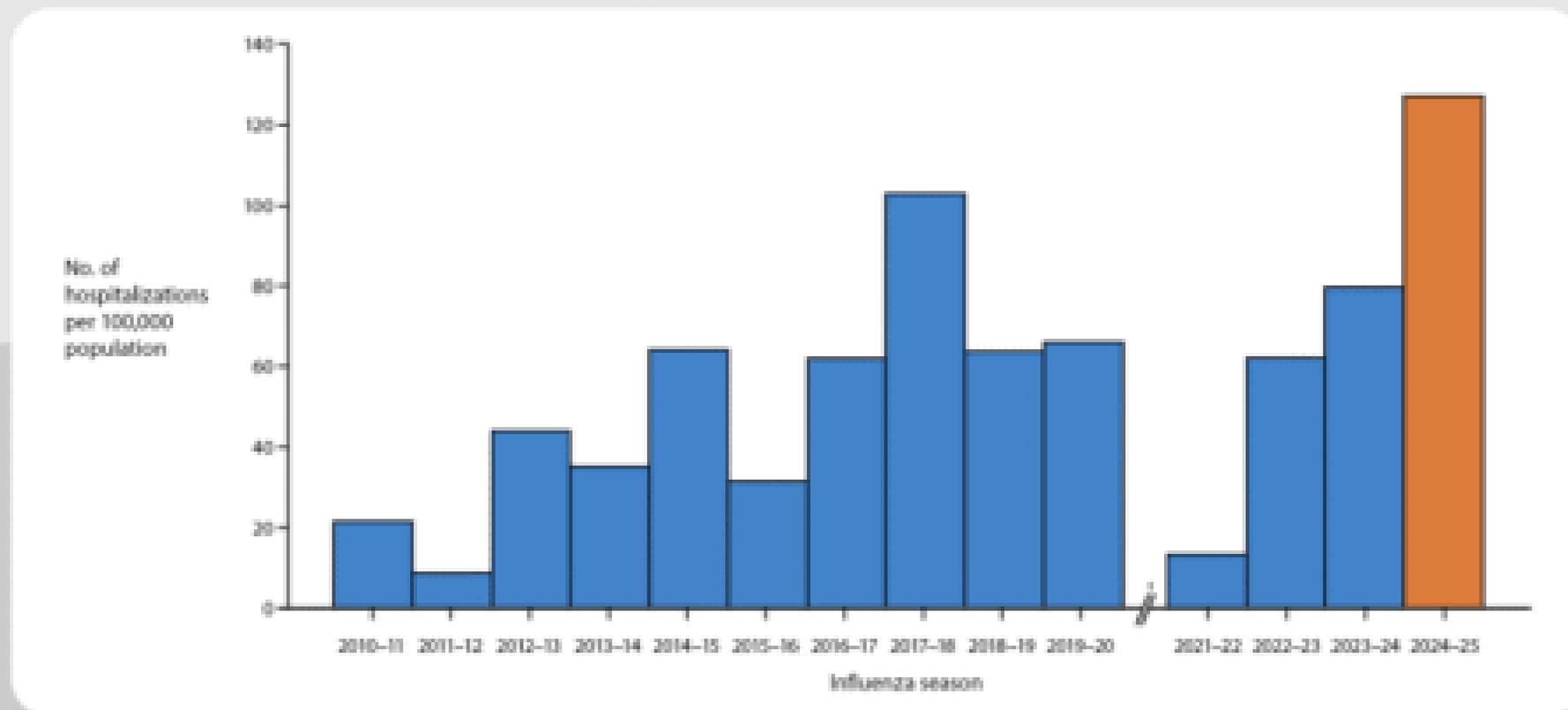
Minimal

RSV

Minimal

Wastewater (sewage) monitoring may provide an early warning that levels of infections are increasing or decreasing in your community, even when people don't have symptoms. [Read more »](#)

The cumulative 2024-25 flu season hospitalization rate was the highest in more than a decade



Flu vaccination can reduce the risk of flu-related hospitalization

MMWR

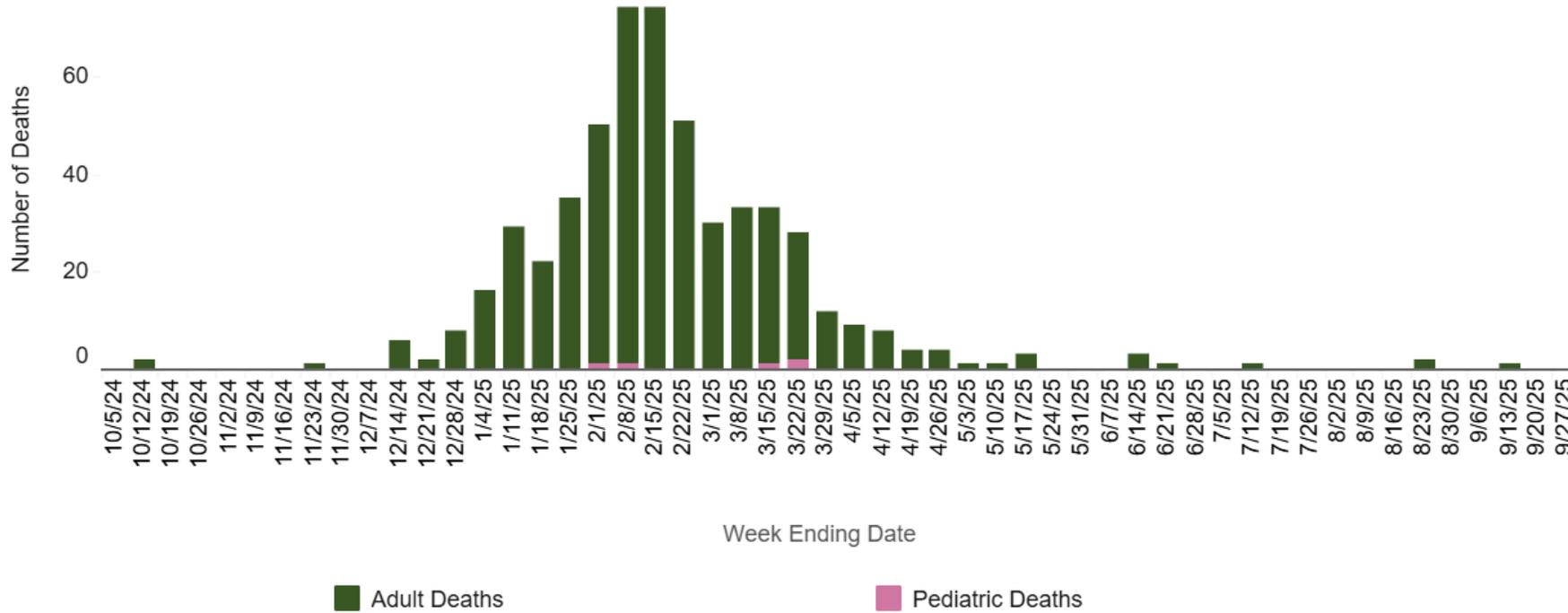
[†] Data from the 2020-21 season were excluded from the analysis because of low numbers during the COVID-19 pandemic.

bit.ly/4m6E6lg

SEPTEMBER 11, 2025



Laboratory Confirmed Influenza-Associated Deaths reported in North Carolina 2024-2025



Total Deaths (10/5/2024- 9/27/2025)

Adult Deaths	539
Pediatric Deaths	5
Total Deaths	544

In this bar graph, deaths are reported among adults a green bar would display the count and in the event of a pediatric death, a stacked pink bar on top . Information about Influenza-associated deaths from past seasons can be found at [DHHS: DPH: NC Influenza Data \(ncdhhs.gov\)](https://ncdhhs.gov) below flu death graphs.

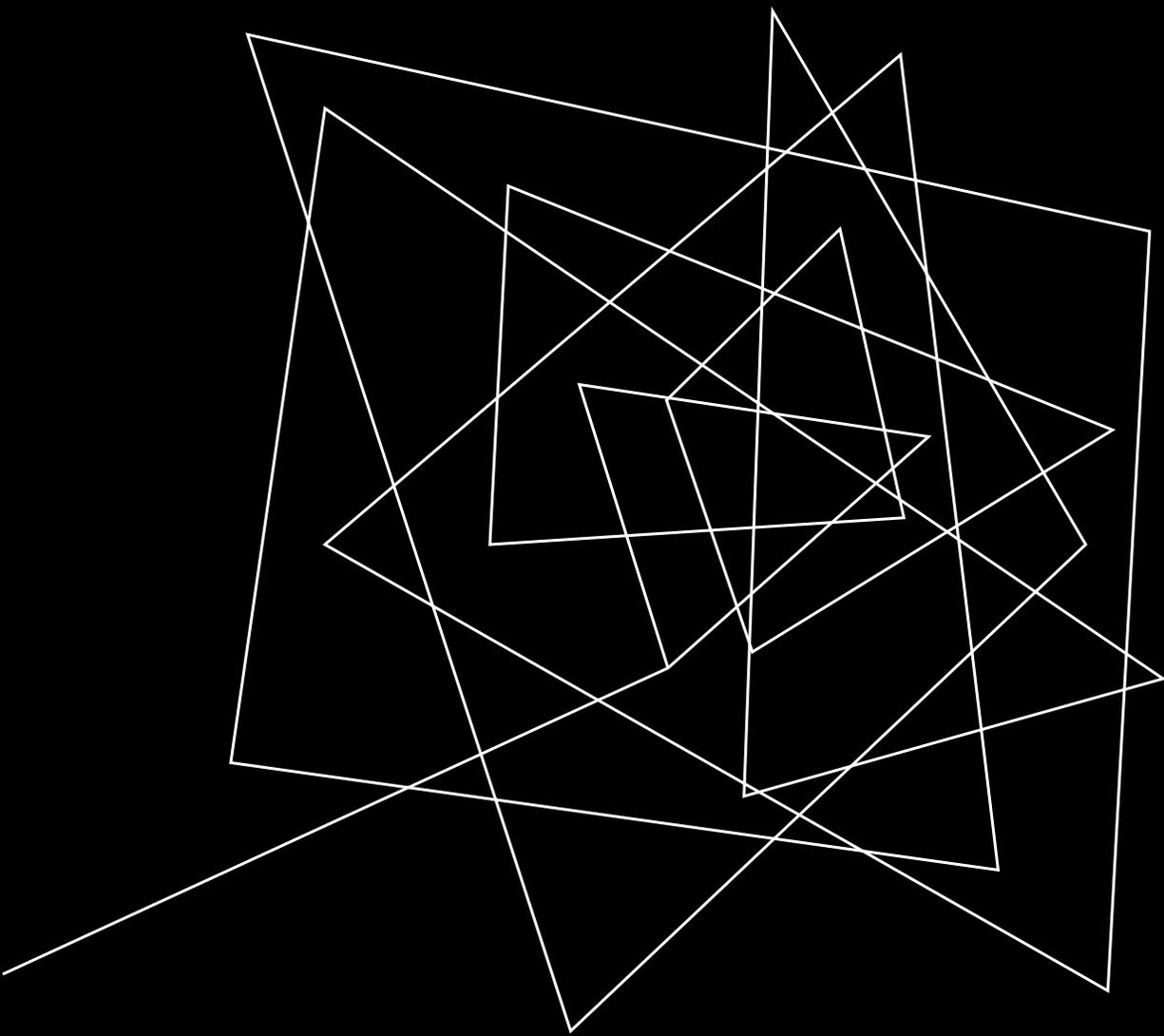


Hover over icons for information.

September 17, 2025

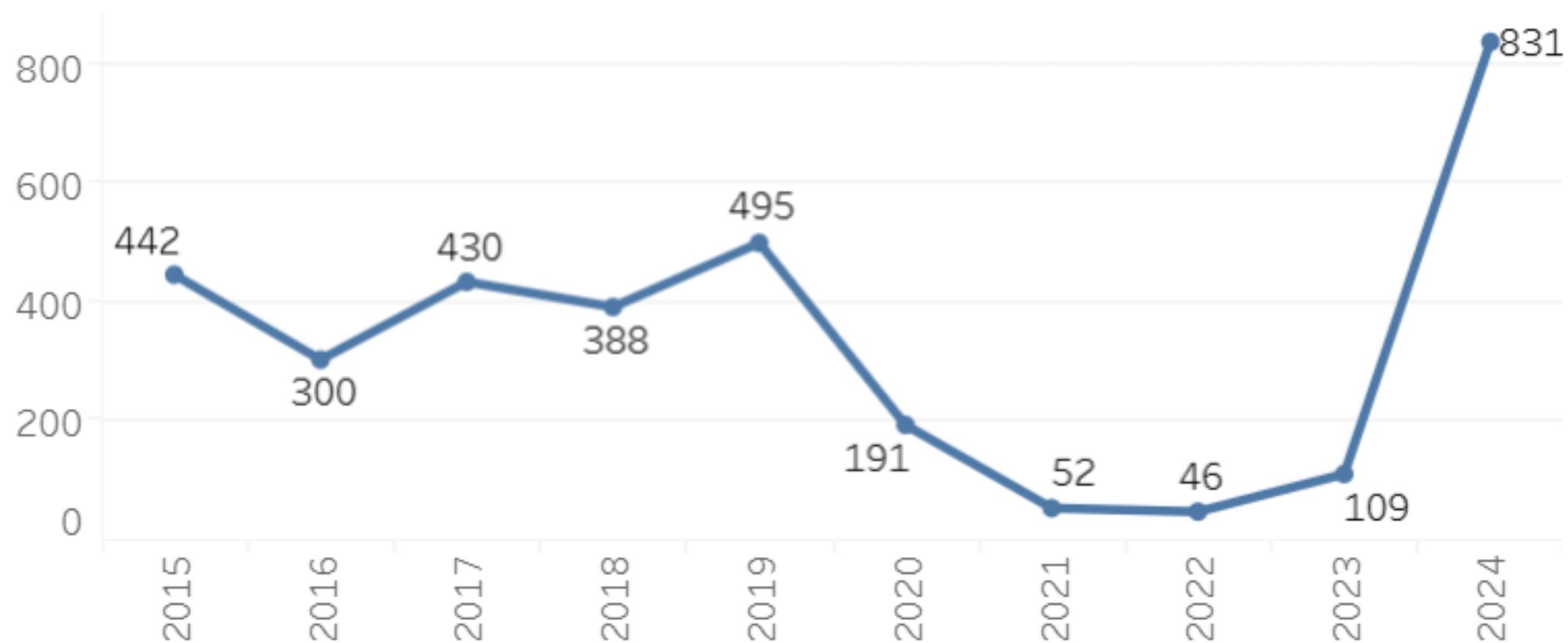
2025-2026 RESPIRATORY SEASON

- **CDC Outlook: CDC expects the upcoming fall and winter respiratory disease season in the United States will likely have a similar number of combined peak hospitalizations due to COVID-19, influenza, and RSV compared to last season**
- **Emergence of new COVID variants, influenza subtypes, lower vaccine uptake or effectiveness could impact this outlook**
- **<https://www.cdc.gov/cfa-qualitative-assessments/php/data-research/season-outlook25-26.html>**

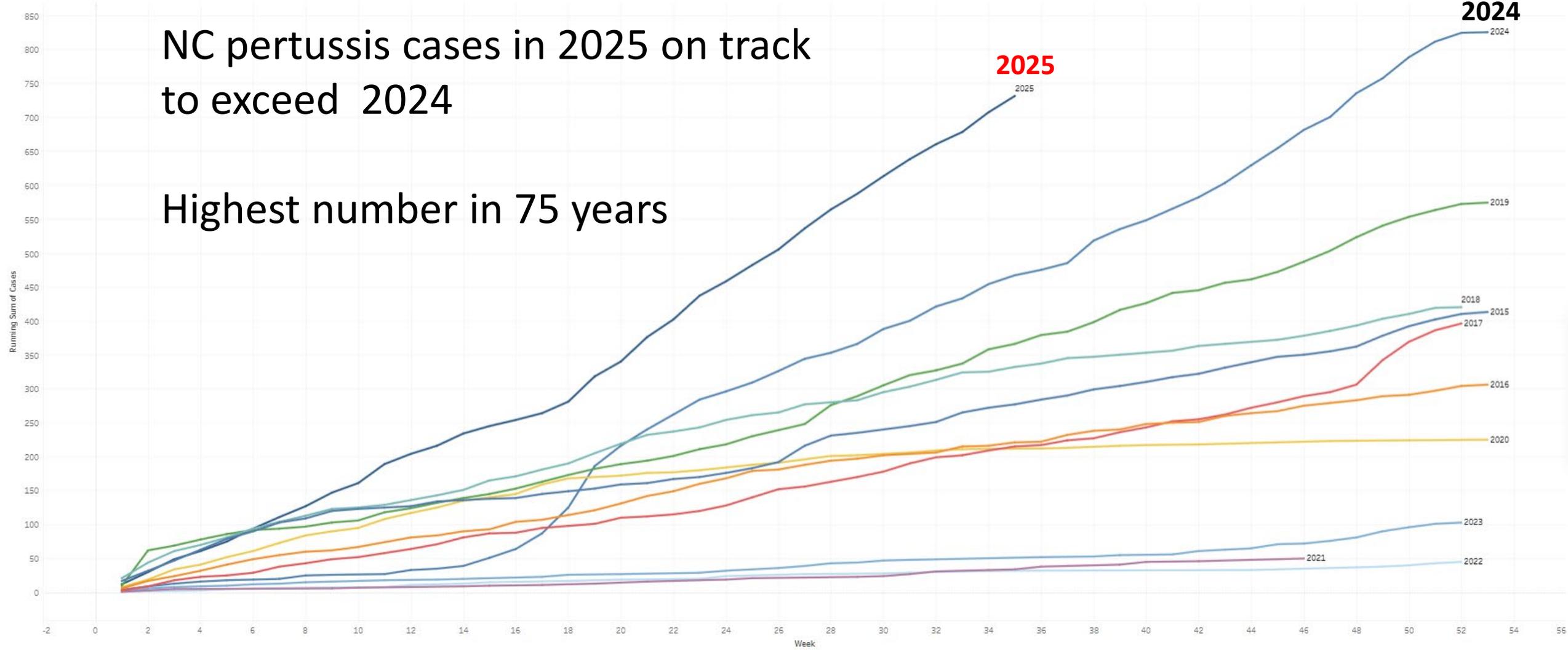


(OTHER)
VACCINE-
PREVENTABLE
DISEASES

Pertussis Reported Cases in North Carolina from 2015 - 2024



Running Totals WS



NC pertussis cases in 2025 on track to exceed 2024

Highest number in 75 years

2025

2024

2019

2018

2015

2017

2016

2020

2023

2022

2021

2025

2025

2024

2019

2018

2015

2017

2016

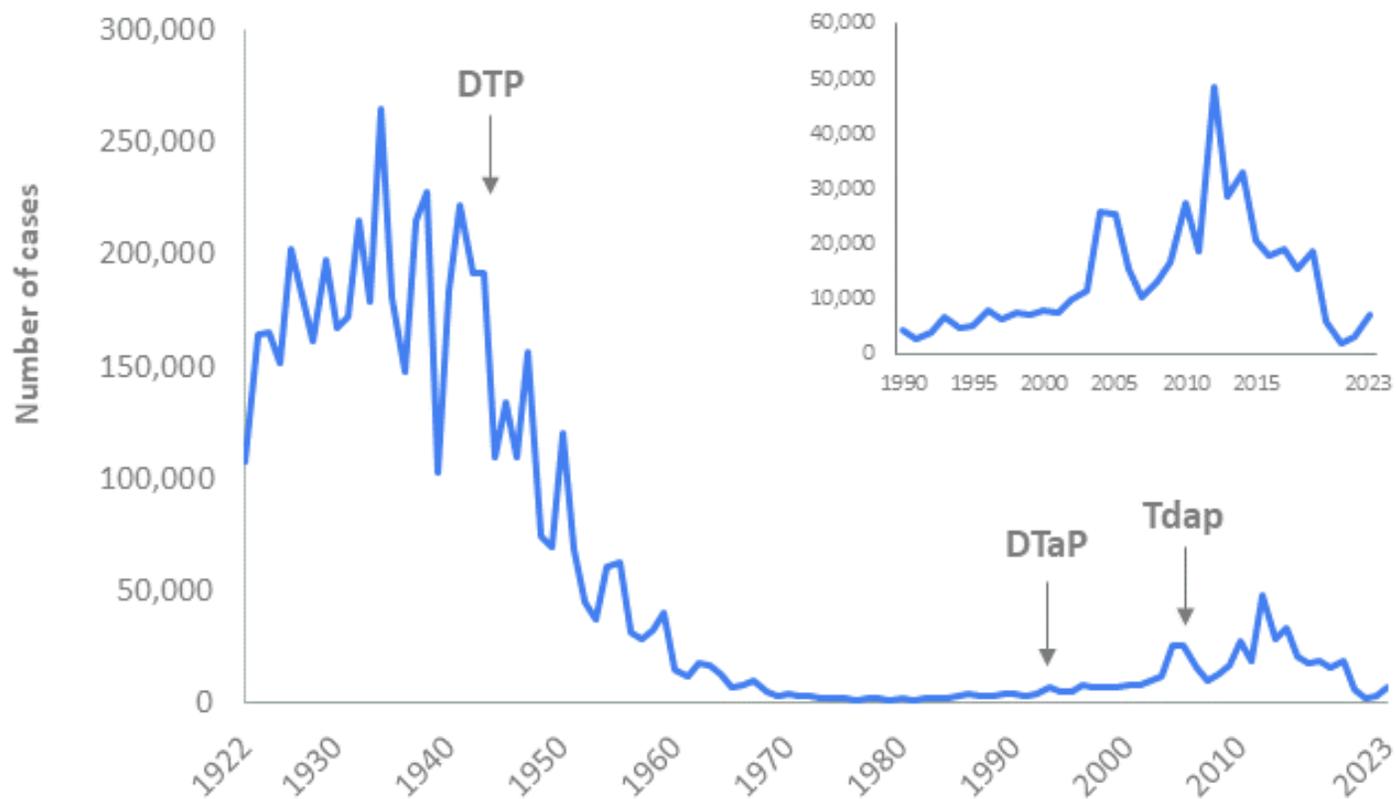
2020

2023

2022

2021

Reported NNDSS pertussis cases: 1922-2023



http

SOURCE: CDC, National Notifiable Diseases Surveillance System

Whooping Cough (Pertussis)

Whooping cough is a serious respiratory illness. It is caused by *Bordetella pertussis* bacteria. It can cause violent coughing fits. Whooping cough is most harmful for young babies and can be deadly.

How does it spread?

- Coughing
- Sneezing
- Sharing breathing space

Early Symptoms

Often, early symptoms are mild, like a common cold, and can include:

- Runny nose
- Low fever
- Sneezing
- Mild cough

Symptoms in Babies

Babies younger than 6 months old with pertussis often do not have a typical cough. In the early stages, babies may:

- Gasp or gag
- Turn blue around the mouth
- Feed poorly
- Stop breathing

Symptoms after 1-2 weeks

Symptoms can get worse fast and can last for months. They include bad coughing attacks that may lead to:

- A "whoop" sound
- Vomiting
- Problems breathing
- Difficulty sleeping
- Extreme tiredness

See a health care provider or call your local health department if you have whooping cough symptoms.

WHOOPING COUGH VACCINES

People of all ages need

Make sure your child gets all 5 doses of the DTaP vaccine to help protect against whooping cough, diphtheria, and tetanus.

DTaP for young children	Tdap for adolescents	Tdap for pregnant women	Tdap for adults
<ul style="list-style-type: none"> ✓ 2, 4, and 6 months ✓ 15 through 18 months ✓ 4 through 6 years 	<ul style="list-style-type: none"> ✓ 11 through 18 years, preferably at age 11 through 12 	<ul style="list-style-type: none"> ✓ During the 27th-36th week of each pregnancy 	<ul style="list-style-type: none"> ✓ Anytime for those who have never received it ✓ Consider a booster dose of Tdap every 10 years for your tetanus booster

Stop the spread. If You Have Whooping Cough:

- Contact your baby or child's doctor as it is important to treat whooping cough early. Whooping cough is usually treated with antibiotics.
- **Stay home.** Avoid contact with others until you have finished treatment.

NC DEPARTMENT OF HEALTH AND HUMAN SERVICES
Division of Public Health

Tosferina (Pertussis)

La tosferina es una enfermedad respiratoria grave. Es causada por la bacteria *Bordetella pertussis*. Puede causar ataques de tos violentos. La tosferina es más dañina para los bebés pequeños y puede ser mortal.

¿Cómo se contagia?

- Tos
- Estornudos
- Compartir espacio para respirar

Síntomas iniciales

A menudo, los primeros síntomas son leves, como un resfriado común, y pueden incluir:

- Secreción nasal
- Fiebre baja
- Estornudos
- Tos leve

Síntomas en bebés

Los bebés menores de 6 meses con tosferina a menudo no tienen una tos típica. En las primeras etapas, los bebés pueden:

- Jadear o tener arcadas
- Ponerse azules alrededor de la boca
- Comer mal
- Dejar de respirar

Síntomas después de 1 a 2 semanas

Los síntomas pueden empeorar rápidamente y pueden durar meses. Incluyen fuertes ataques de tos que pueden provocar:

- Un sonido de "whoop"
- Vómitos
- Problemas para respirar
- Dificultad para dormir
- Cansancio extremo

Consulta a un proveedor de atención médica o llama a tu departamento de salud local si tienes síntomas de tosferina.

VACUNAS CONTRA LA TOSFERINA

Personas de todas las edades necesitan

Asegúrate de que tu hijo reciba las 5 dosis de la vacuna DtaP, para ayudar a protegerlo contra la tosferina, la difteria y el tétanos.

DTaP para niños pequeños	Tdap para adolescentes	Tdap para mujeres embarazadas	Tdap para adultos
<ul style="list-style-type: none"> ✓ 2, 4 y 6 meses ✓ 15 a 18 meses ✓ 4 a 6 años 	<ul style="list-style-type: none"> ✓ 11 a 18 años, preferiblemente de 11 a 12 años 	<ul style="list-style-type: none"> ✓ Durante la semana 27-36 de cada embarazo 	<ul style="list-style-type: none"> ✓ En cualquier momento para aquellos que nunca lo han recibido ✓ Considera recibir una dosis de refuerzo de Tdap cada 10 años para su refuerzo contra el tétanos

Detén la propagación. Si tienes tosferina:

- Ponte en contacto con el médico de tu bebé o niño, ya que es importante tratar la tosferina a tiempo. La tosferina suele tratarse con antibióticos.
- **Quédate en casa.** Evita el contacto con otras personas hasta que hayas terminado el tratamiento.

DEPARTAMENTO DE SALUD Y SERVICIOS HUMANOS DEL CAROLINA DEL NOROESTE

Pertussis Vaccination Messaging



- Ensure both children and adults are up-to-date on DTaP/Tdap vaccinations
- Work with local OB offices to encourage Tdap administrations during the 27th through 36th week of each pregnancy
- Encourage local hospitals and childcare centers to promote Tdap vaccination among workers.

Vaccine Update

Why Do We Care?



Immunizations protect America's children every day

CDC estimates that vaccination of children born between 1994 and 2023 will:

- Prevent more than 500 million illnesses
- Avoid more than 1 million deaths
- Save nearly \$3 trillion

 bit.ly/mm7331a2
AUGUST 8, 2024 

Comparison of 20th Century Annual Morbidity and Current Morbidity: Vaccine-Preventable Diseases

Disease	20th Century Annual Morbidity [†]	2024 Reported Cases ^{††}	Percent Decrease
Smallpox	29,005	0	100%
Diphtheria	21,053	1	> 99%
Measles	530,217	266	> 99%
Mumps	162,344	358	> 99%
Pertussis	200,752	35,435	82%
Polio (paralytic)	16,316	0	100%
Rubella	47,745	9	> 99%
Congenital Rubella Syndrome	152	0	100%
Tetanus	580	32	94%
<i>Haemophilus influenzae</i>	20,000	25*	> 99%

[†] JAMA. 2007;298(18):2155-2163

^{††} CDC. National Notifiable Diseases Surveillance System, Weekly Tables of Infectious Disease Data. Atlanta, GA. The Office of Public Health Data, Surveillance, and Technology (OPHDST). Available at: [Weekly statistics from the National Notifiable Diseases Surveillance System \(cdc.gov\)](https://www.cdc.gov/nndss/weekly-tables/). Data submitted (U.S. Residents, excluding U.S. Territories) through Dec 28, 2024; accessed on Jan 30, 2025; diphtheria and polio case counts reported by CDC Program.

**Haemophilus influenzae* type b (Hib) < 5 years of age. An additional 8 cases of Hib are estimated to have occurred among the 181 notifications of *Haemophilus influenzae* (< 5 years of age) with unknown serotype.

Comparison of Pre-Vaccine Era Estimated Annual Morbidity with Current Estimate: Vaccine-Preventable Diseases

Disease	Pre-Vaccine Era Annual Estimate	2022 Estimate (unless otherwise specified)	Percent Decrease
Hepatitis A	117,333 †	11,500 *	90%
Hepatitis B (acute)	66,232 †	13,300 *	80%
Pneumococcus (invasive)			
all ages	63,067 †	17,400 #	72%
< 5 years of age	16,069 †	900 #	94%
Rotavirus (hospitalizations, < 3 years of age)	62,500 † †	18,400 ##	71%
Varicella	4,085,120 †	34,238 ###	99%

† JAMA. 2007;298(18):2155-2163

†† CDC. MMWR. February 6, 2009 / 58(RR02);1-25

* CDC. Viral Hepatitis Surveillance - United States, 2021

CDC. Unpublished, Active Bacterial Core Surveillance, 2021

New Vaccine Surveillance Network 2022 data (unpublished); U.S. rotavirus disease now has biennial pattern

CDC. Varicella Program 2022 data (unpublished, provisional and subject to change)



March 7:

HHS announces study to assess repeatedly debunked claim that vaccines are linked to autism

March 12:

More than 40 NIH grants related to vaccine hesitancy were canceled

March 11:

Secretary Kennedy claims measles vaccine causes deaths every year

March 16:

NIH officials told academic centers to remove references to mRNA vaccine technology

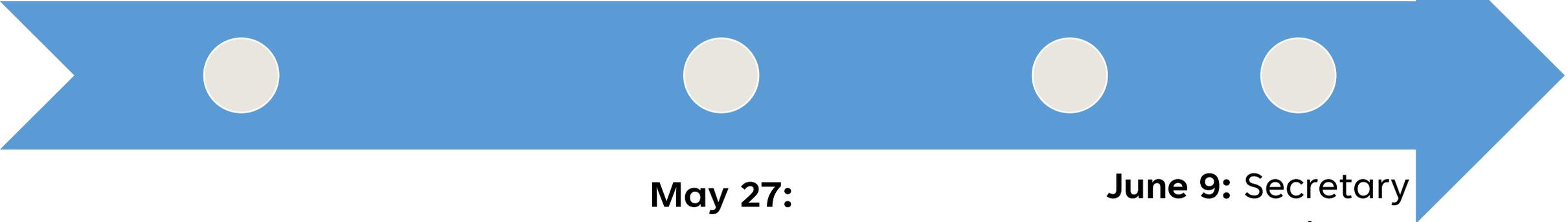


May 20:

FDA announces COVID-19 vaccines are recommended only for people over age 65, or 12- to 64-year-olds with a qualifying medical condition

May 30:

NIH cancels HIV vaccine development projects



May 27:

HHS pulls recommendations for COVID-19 vaccines for healthy children and pregnant women

June 9:

Secretary Kennedy announces plan to reconstitute the ACIP and removes all 17 members

The Vaccine Integrity Project



Securing the Foundation: Stakeholder Insights and Strategies for Maintaining a Strong Vaccine Infrastructure Across the US

Report from the Vaccine Integrity Project

<https://www.cidrap.umn.edu/vaccine-integrity-project/reports>



VIP Recommendations Across Seven Domains

- 1. Addressing Vulnerabilities and Establishing Priorities**
- 2. Strengthening Communication and Information Dissemination**
- 3. Developing and Disseminating Clinical Tools and Guidelines**
- 4. Building an Overarching Coalition for Strategy and Alignment**
- 5. Maintaining the Nation's Vaccination Infrastructure**
- 6. Providing Assistance to State and Local Health Departments**
- 7. Safeguarding Insurance Coverage**

<https://www.cidrap.umn.edu/vaccine-integrity-project/reports>

A young child with curly brown hair and dark eyes is being held by an adult in a red shirt. The child is wearing a blue and white striped shirt. Another person's hands are visible near the child's mouth, possibly administering a vaccine or a small object. The background is a plain, light-colored wall.

Insights from NCDHHS
Parent Survey &
Provider Strategy Lab

Study Methods

This table outlines the methodologies used in the two complementary studies: one capturing parent perspectives and the other gathering insights from immunization providers.

	Parent Vaccine Confidence Survey	Neimand Strategy Lab (NSL) – Provider Insights
Dates	March 13 – April 1, 2025	February 27 (live), Feb 28 – Mar 7, 2025 (asynchronous)
Audience	NC adult residents (18+) with children	Immunization providers (VFC/VFA and others)
Sample Size	753 respondents	176 participants
Methodology	Online quantitative survey	Moderated and independently completed digital discussion board
Study Participation Length	14 minutes	60-minute live session and 30-minute asynchronous session
Key Focus Areas	Vaccine behaviors, trust, motivators, concerns, messaging	Vaccine philosophy, confidence, hesitancy, communication



Summary Observations

Parents' desire to protect their children drives decisions to and NOT to vaccinate

- While parents **who vaccinate their children do so to protect them** from serious or potentially deadly illnesses, **parents who *do not* vaccinate do so to protect their children** from perceived potential danger of vaccines.

Providers Play a Key Role, But Parents Want Agency

- While medical professionals offer trusted information and encouragement about vaccines, parents ultimately decide what's best for their child. The most compelling messaging and calls to action **reinforce parents' role in making vaccination decisions in partnership with providers** to best protect their child.

Rising Fears About Vaccine Safety and Eroding Trust

- Parents who choose not to vaccinate often cite concerns about side effects, allergic reactions, and long-term health impacts. These safety concerns are growing, while trust in health authorities and immunization guidelines continues to decline. At the same time, awareness of recent measles outbreaks appears to increase willingness to vaccinate—especially among persuadable parents.

Summary Observations - Continued

School/childcare requirements matter

- Just over half of North Carolina parents whose children have received at least some vaccinations say they would still follow the recommended schedule even without school or childcare requirements.
- Three in 10 say they would skip some, delay them, or forgo vaccines altogether without childcare/school requirements, while one in 10 are unsure what they would do.

Not all vaccines are considered equally important

- Level of perceived importance is closely linked to likelihood of getting child(ren) the vaccine
- **Most important:** Polio and Chicken Pox
- **Least important:** COVID-19 and flu

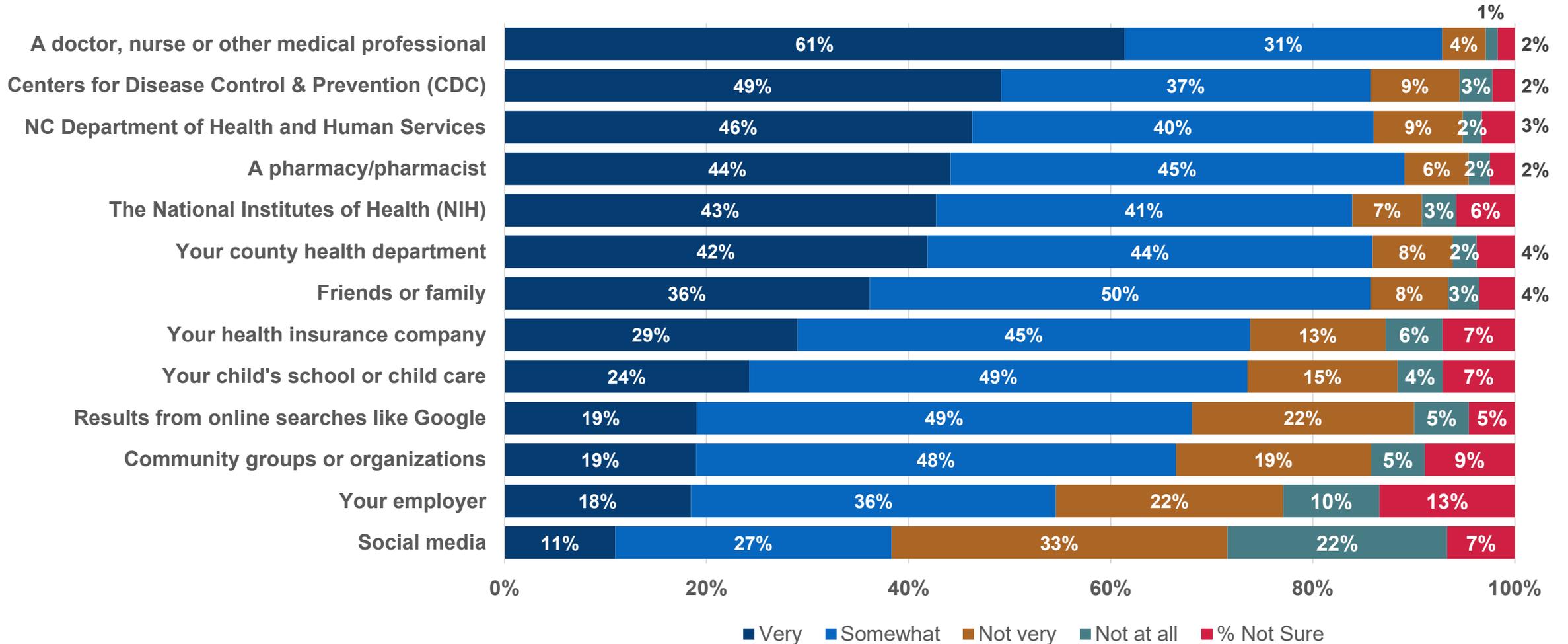
NCDHHS is Highly Trusted

- **Six in 10 parents consider medical professionals a very trustworthy source** for vaccine information and recommendations for their child and nearly **half say the CDC and NCDHHS are very trustworthy sources.**



Health Providers Are the Most Trusted Source for Child Vaccine Information

Trustworthiness of Source for Info/Recommendation for Child Vaccines

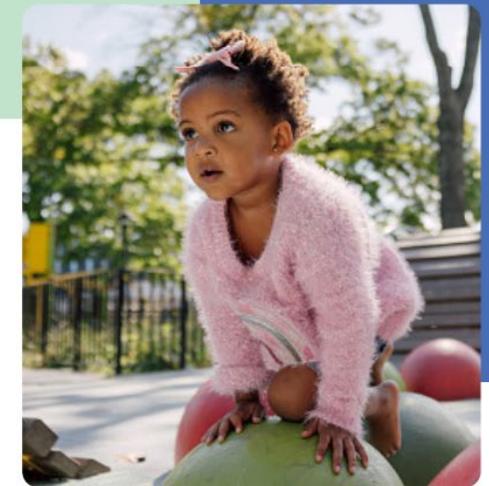


NCDHHS Childhood Vaccines Toolkit launched June 24, 2025!

Vaccines protect what matters most – your child’s health.

Children’s immune systems are built to handle the thousands of everyday germs they encounter. But some germs are different. They are dangerous and can cause serious harm. Vaccines teach children’s immune systems how to fight dangerous germs without the risk of serious illness.

Compared to what children’s immune systems handle daily, the exposure from a vaccine is very small. Serious side effects from vaccines are extremely rare. Millions of children are safely vaccinated each year.



**Don’t let diseases of the past
become part of your child’s future.**



Provider Toolkit Materials

The below materials are available online for download:

- Talking points and best practices for providers to engage with families based on research
- Parent-focused materials in English & Spanish:
 - **Poster** with information on vaccine-preventable diseases
 - **Four rack cards**, each focused on one of four key vaccines (Hib, DTaP/Tdap, PCV, and RSV)
 - **Fact sheet** with information on three key vaccines and guidance on where to find more information
 - **Customizable email template** for partners and providers to share information with communities on vaccines and vaccine-preventable diseases

VaccinesForKids.nc.gov



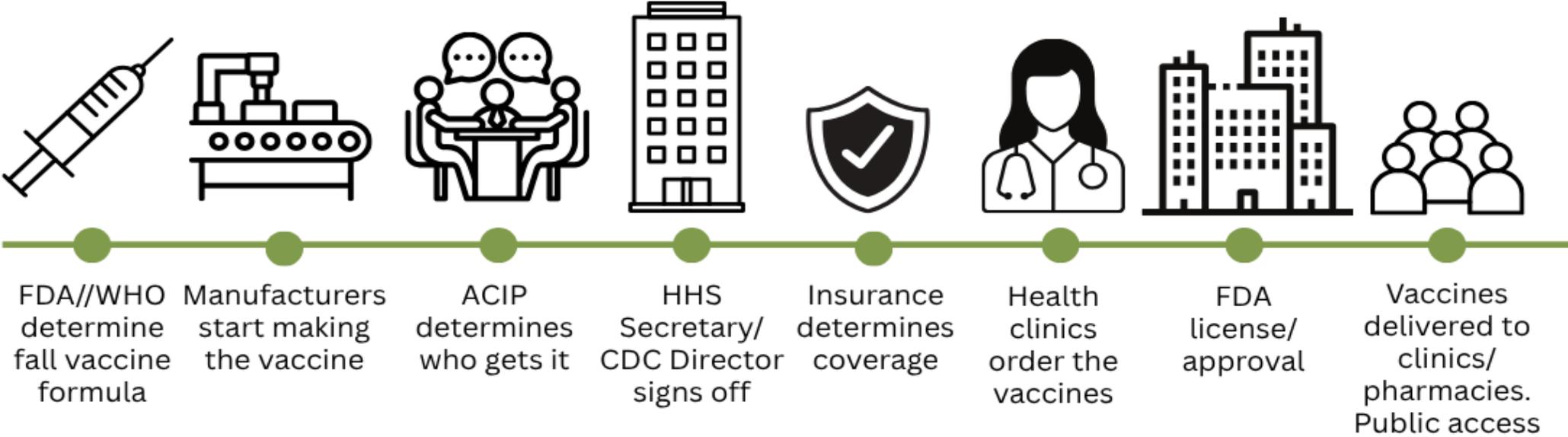
VacunasParaNinos.nc.gov



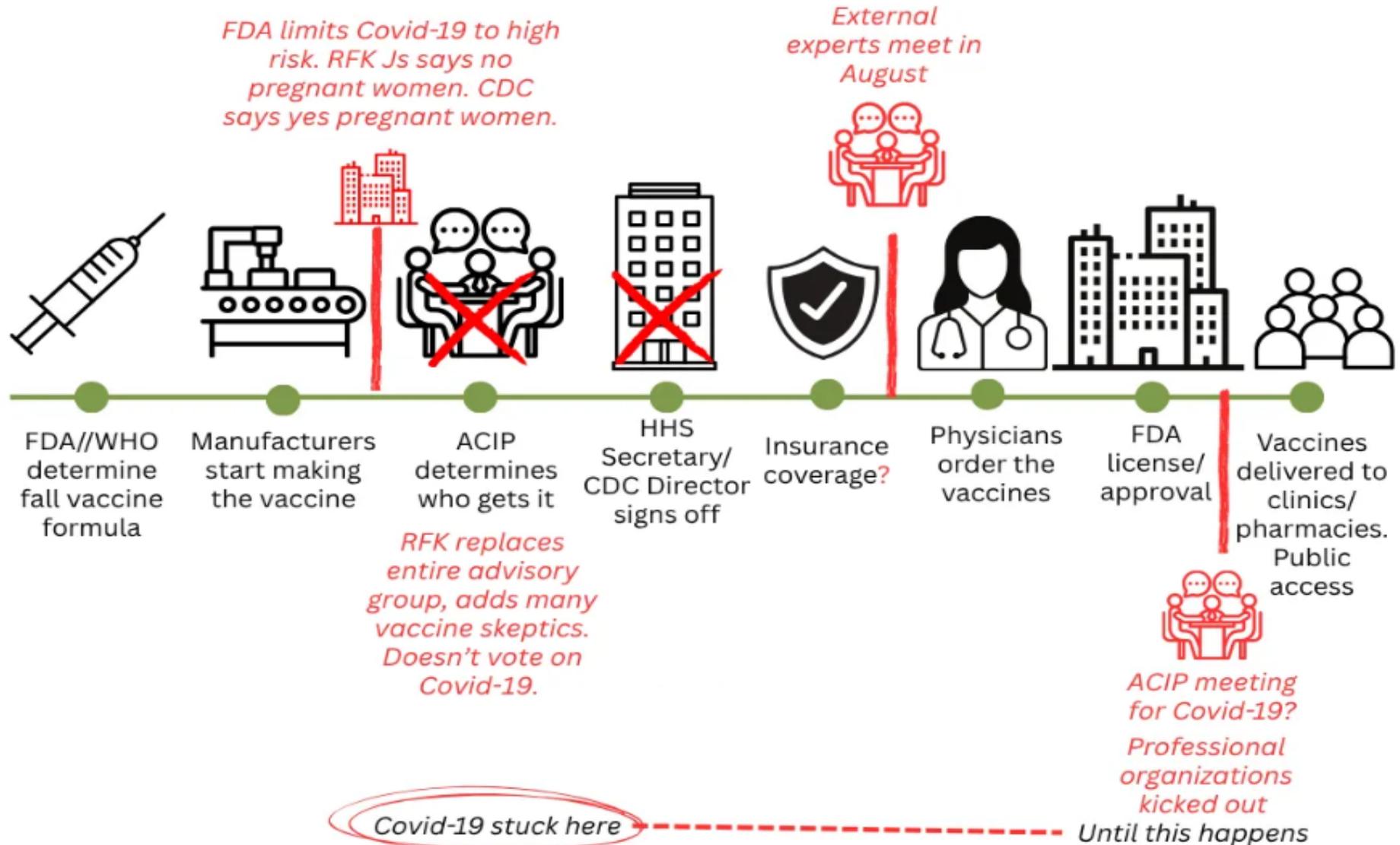


COVID Vaccine Availability

What usually happens...



2025 Disruptions



COVID Vaccines: Current FDA Approvals (August 2025)

Pfizer/BioNTech (COMIRNATY[®], mRNA vaccine):

- Approved for use in people ≥ 65 years or 5–64 with high-risk condition
- Previous EUA for children 6 months–11 years withdrawn

Moderna (mNEXSPIKE[®] & Spikevax[®], mRNA vaccines):

- mNEXSPIKE: lower dose vaccine for people with prior COVID-19 vaccine
 - Approved in July 2025 for use in people ≥ 65 years and 12-64 years with ≥ 1 high-risk medical condition
- Spikevax:
 - Approved for use in people ≥ 65 years, and people 6 months–64 years with ≥ 1 high-risk medical condition

Novavax (adjuvanted protein vaccine):

- Approved on May 16, 2025 for use in people ≥ 65 years and people 12-64 years with ≥ 1 high-risk medical condition

NOTE: No COVID vaccines available through VFC until there is an ACIP recommendation

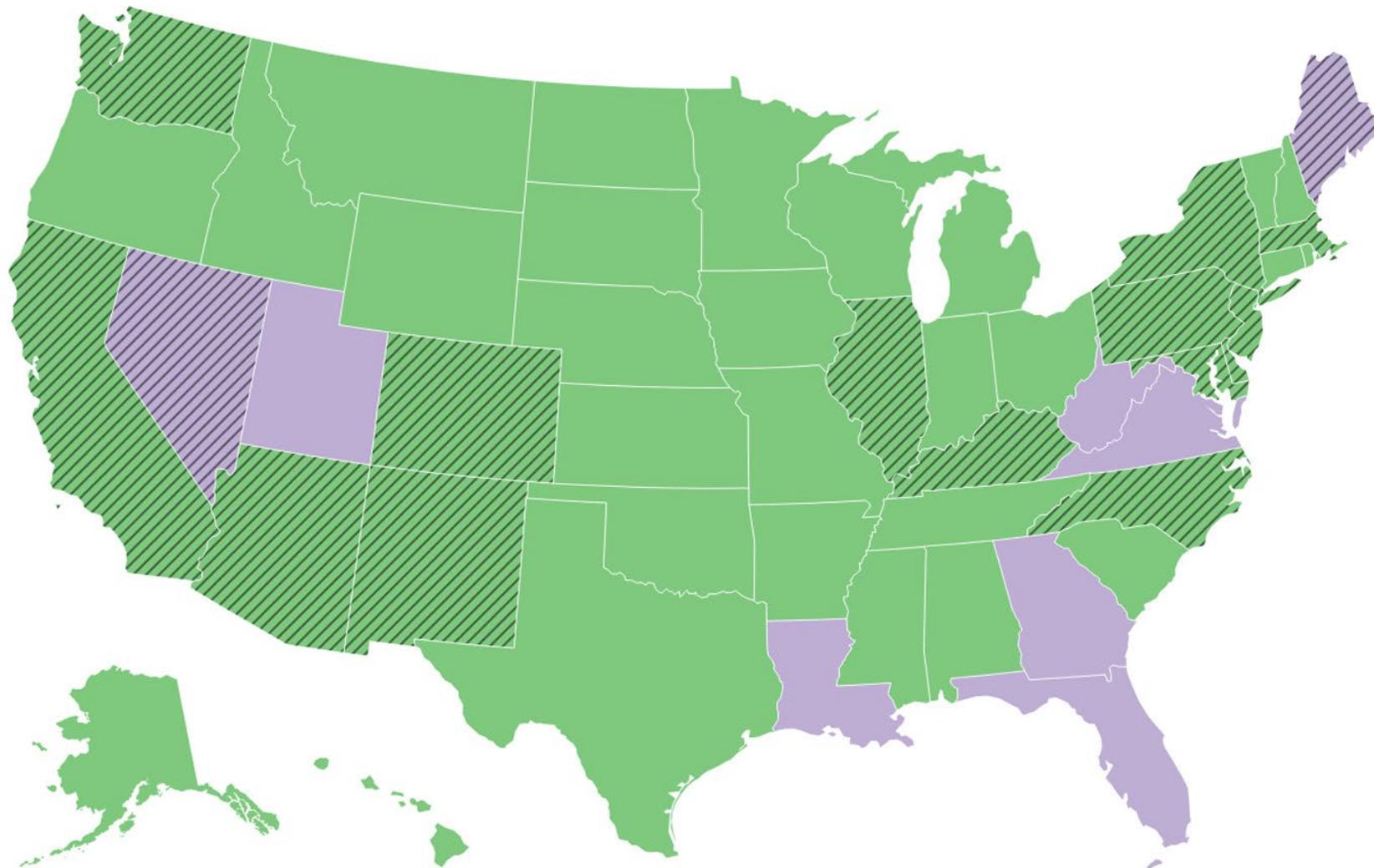
<https://www.fda.gov/vaccines-blood-biologics/vaccines/vaccines-licensed-use-united-states>

<https://products.modernatx.com/spikevax>

Covid-19 Vaccine Availability, by State

As of September 12, 2025

■ No prescription needed ■ Yes, need a prescription for certain age groups ▨ Taken an action



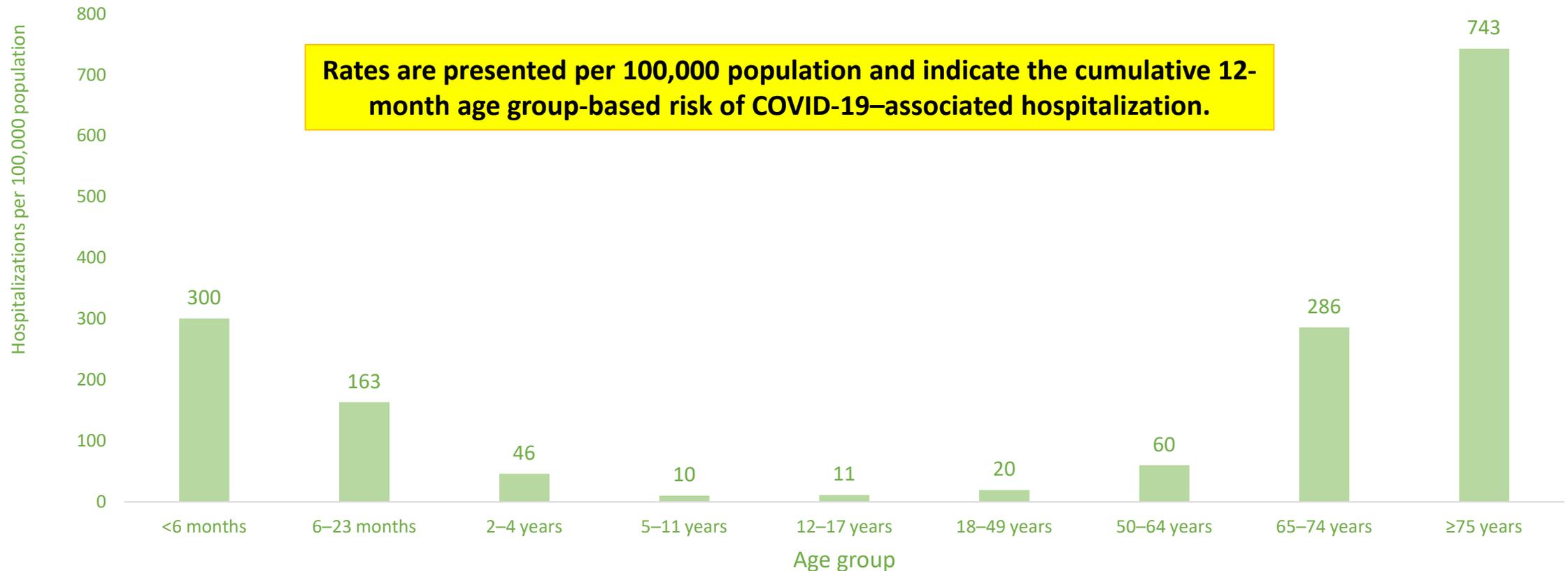
FRIDAY, SEPTEMBER 12, 2025

Governor Josh Stein, NCDHHS Hold Virtual Press Conference Announcing Increased Access to COVID-19 Vaccines

MEDIA ADVISORY — North Carolina Governor Josh Stein and the North Carolina Department of Health and Human Services invite members of the media to attend a virtual press conference at 3:15 p.m. today, Sept. 12, to discuss access to COVID-19 vaccines.

Rates of COVID-19–associated hospitalization are highest among the youngest and oldest age groups

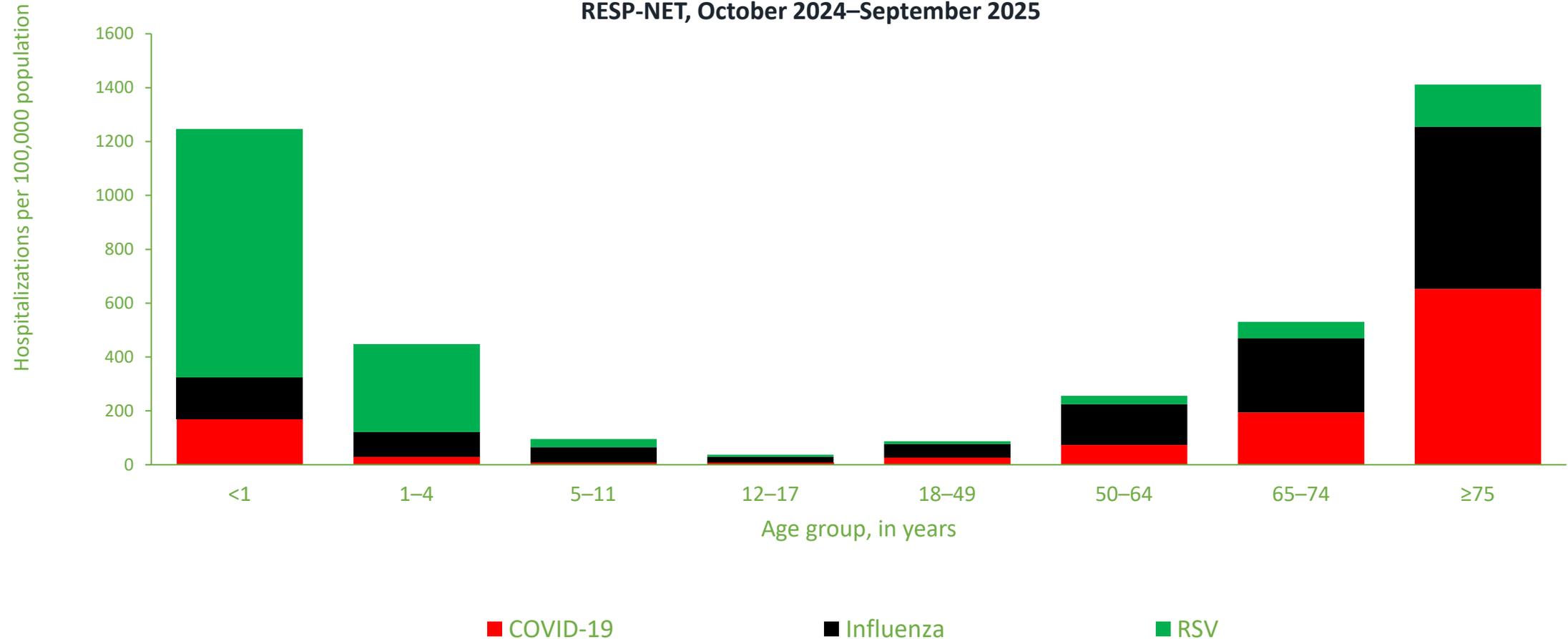
Population-based COVID-19–associated hospitalization rates (per 100,000 population), by age group — COVID-NET, June 2024–May 2025



A COVID-19–associated hospitalization is defined as laboratory-confirmed SARS-CoV-2 in a person who (a) lives in a defined COVID-NET surveillance catchment area AND (b) tests positive for SARS-CoV-2 (using a laboratory-based molecular, antigen or serology test) within 14 days before or during hospitalization.

Rates of respiratory virus-associated hospitalizations vary by age group and pathogen.

Cumulative rates of COVID-19-, influenza-, and respiratory syncytial virus (RSV)-associated hospitalizations — RESP-NET, October 2024–September 2025



Rates for all three pathogens (COVID-19, influenza, and respiratory syncytial virus [RSV]) are laboratory-confirmed. Data source: <https://www.cdc.gov/resp-net/dashboard/>
Note that rates are not adjusted for testing or limited to admissions where the respiratory infection is the reason for admission. Influenza surveillance was conducted October 2024–April 2025.



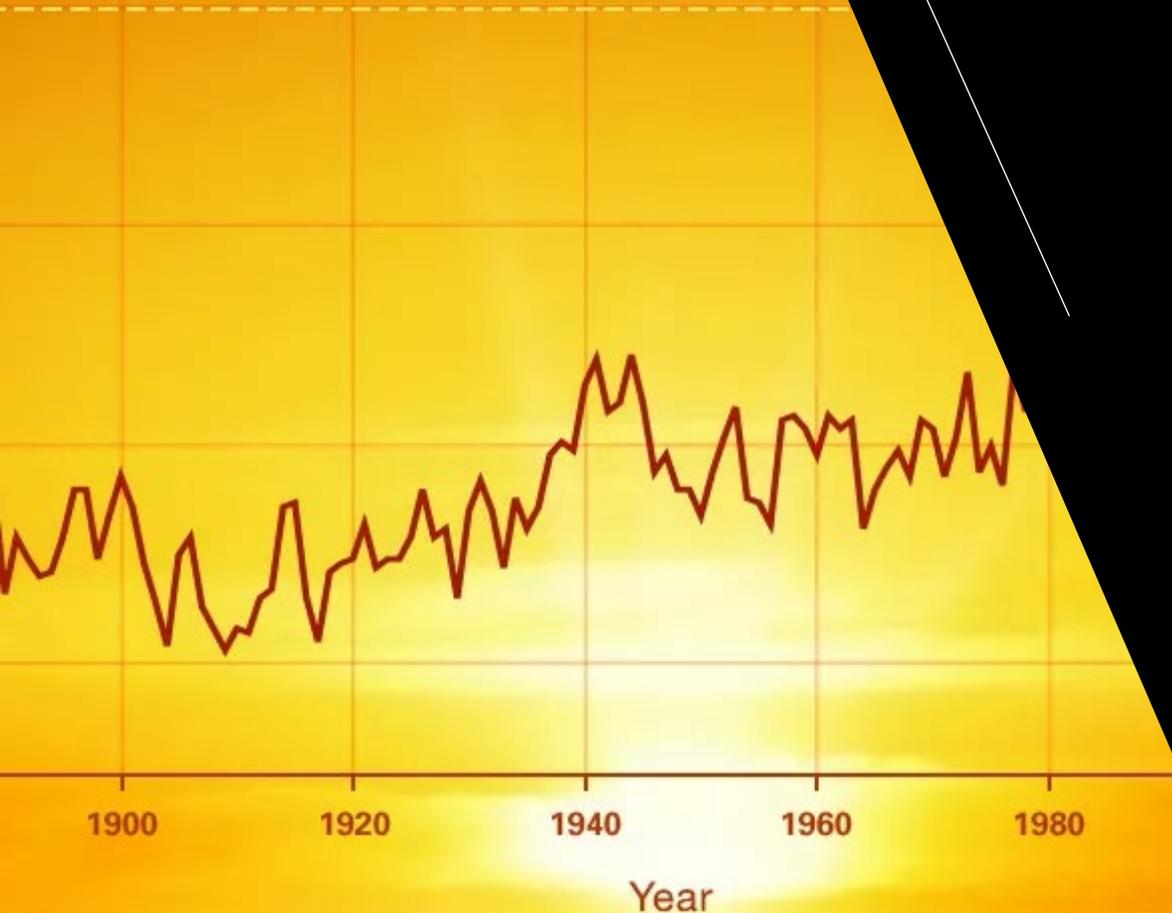
2025-2026 Combined Respiratory Vaccine Recommendations

	Influenza Vaccine	RSV Immunization	COVID-19 Vaccine
Infants and Children	<p>All children 6 months and older Some children 6 months to 8 years may need multiple doses <small>AAFP, AAFP, CDC</small></p>	<p>All infants <8 months + children 8-19 months with risk factors (nirsevimab, clesrovimab), typically Oct-Mar, if no maternal RSV vaccine <small>AAFP, AAFP, CDC</small></p>	<p>All children 6-23 months + children 2-18 years with risk factors or if parent desires vaccine <small>AAFP, AAFP</small></p>
	OR		
Pregnancy	<p>All At any point in pregnancy <small>ACOG, AAFP, CDC</small></p>	<p>32-36 weeks gestation (Pfizer, Abrysvo only) Typically Sept-Jan <small>ACOG, AAFP, CDC</small></p>	<p>All At any point in pregnancy <small>ACOG, AAFP</small></p>
Adults 18-50	<p>All <small>AAFP, CDC</small></p>	<p>See Pregnancy <small>AAFP, CDC</small></p>	<p>All <i>Especially important for people with risk factors or who have never received a vaccine</i> <small>AAFP</small></p>
Adults 50+	<p>All High-dose, recombinant or adjuvanted flu vaccine preferred for 65+, if available <small>AAFP, CDC</small></p>	<p>All 75+ and adults 50-74 with risk factors One lifetime dose of RSV vaccine <small>AAFP, CDC</small></p>	<p>All <i>Especially important for people with risk factors or who have never received a vaccine</i> <small>AAFP</small></p>

September 2025

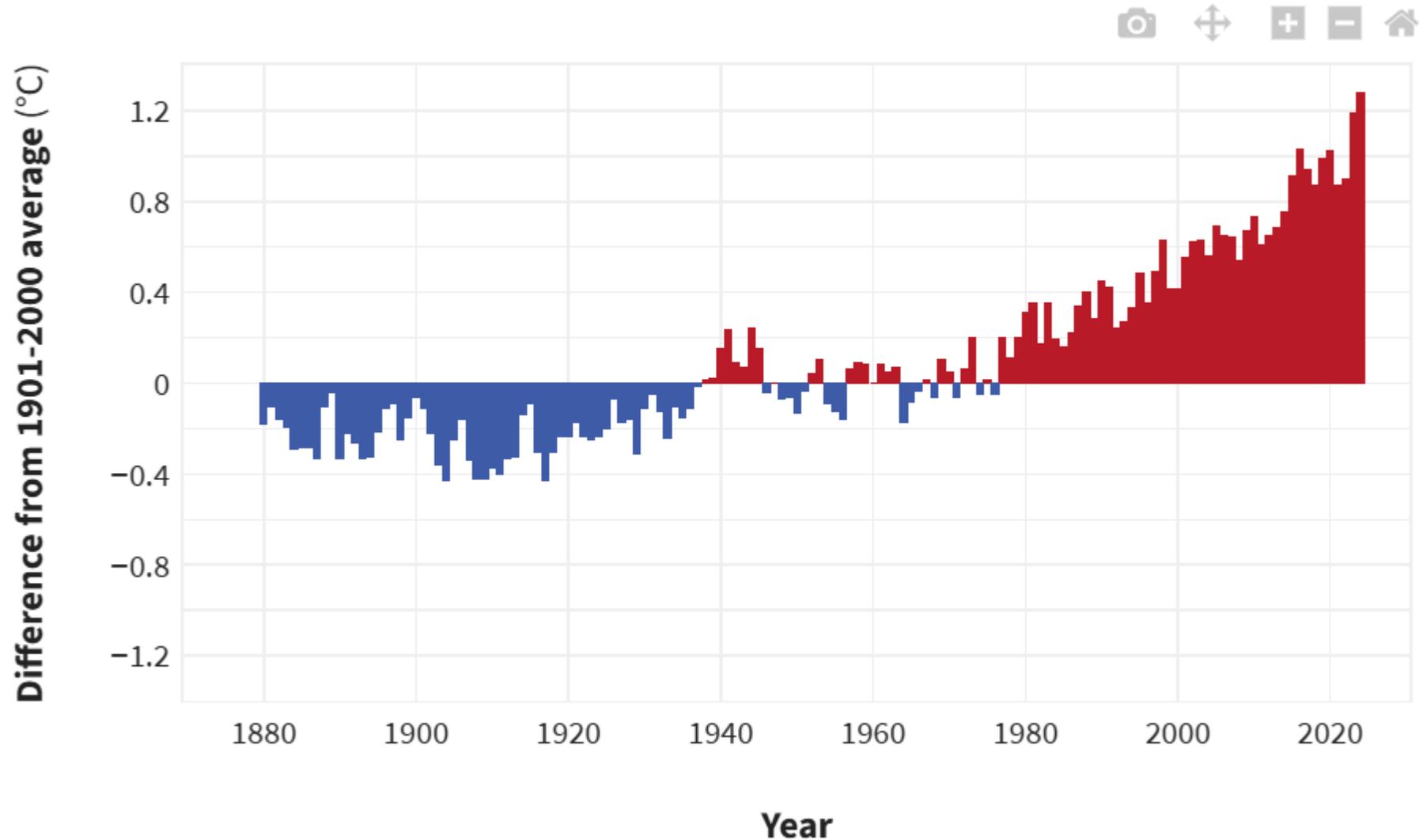
Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
31	1	2	3	4	5	6
7	8	9	10	11	12	13
14	15	16	17	18		20
21	22	23	24	25	26	27
28	29	30	1	2	3	4

above 1951-1980 baseline



ENVIRONMENTAL HAZARDS

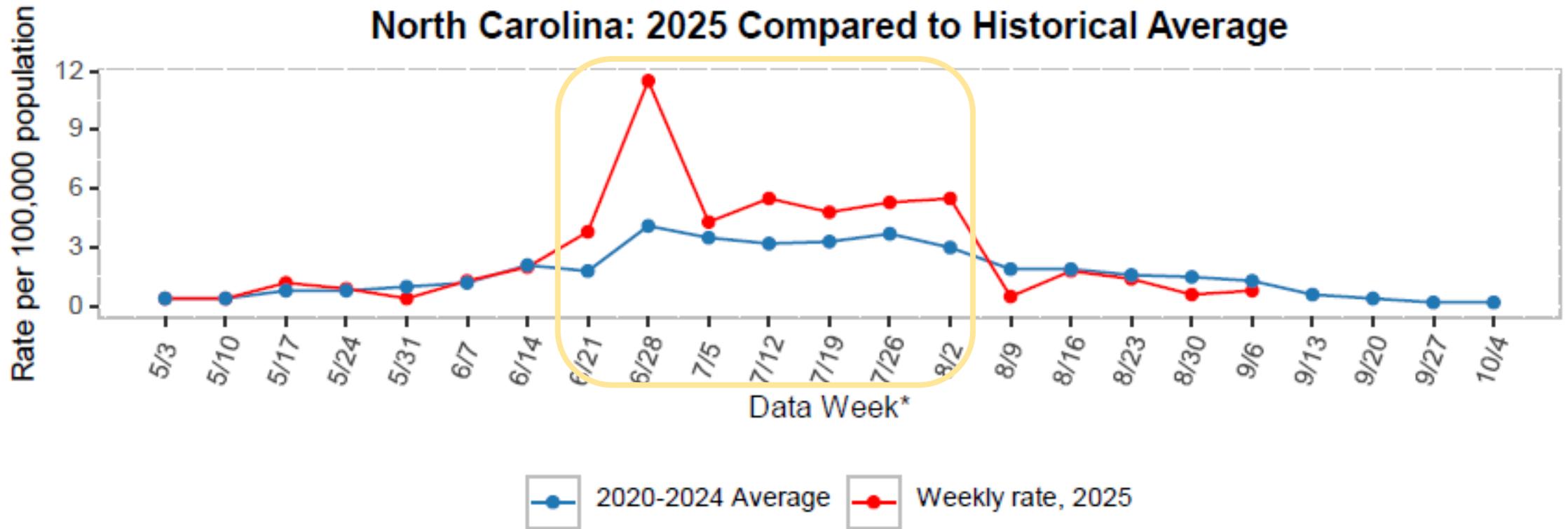
GLOBAL AVERAGE SURFACE TEMPERATURE



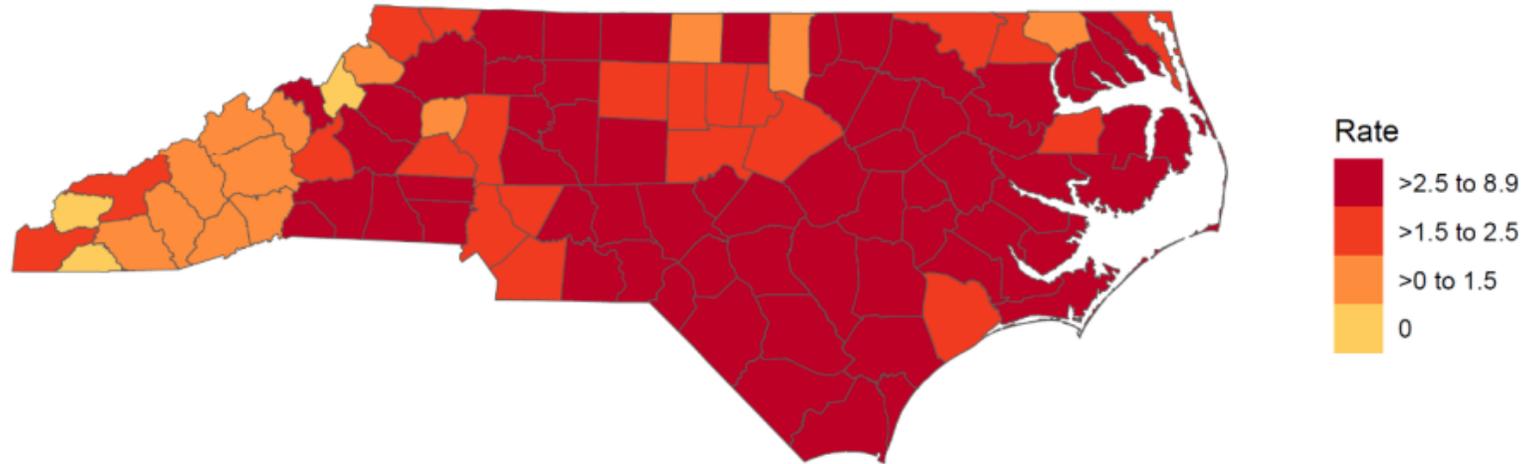
Source: <https://www.climate.gov/news-features/understanding-climate/climate-change-global-temperature>

HEAT-RELATED ILLNESS IN NORTH CAROLINA

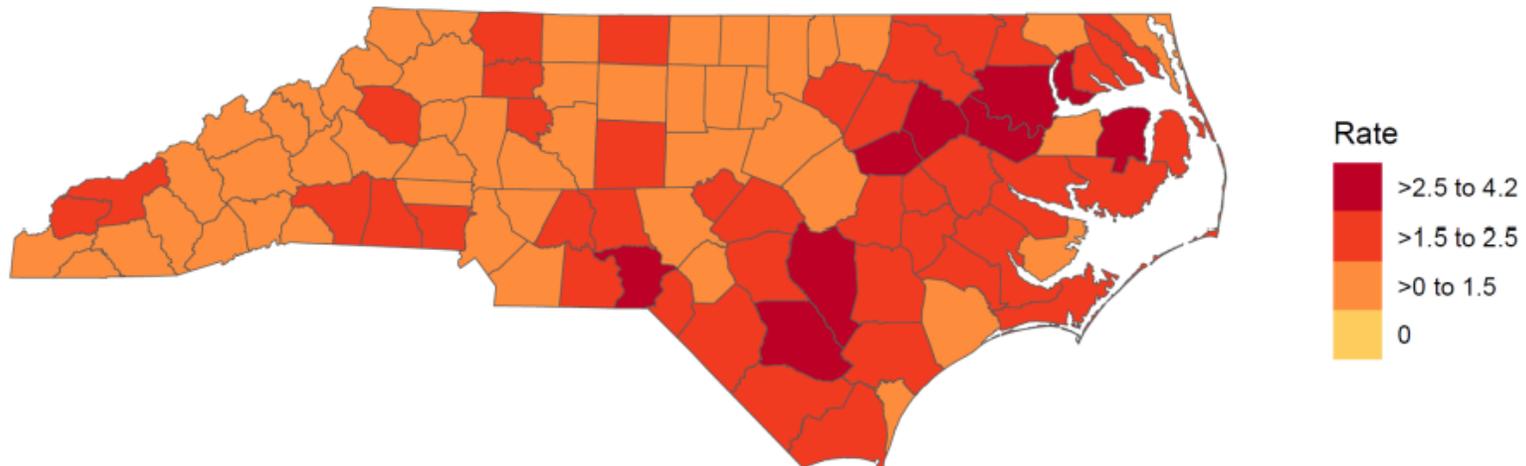
**Figure 4. Rate of Emergency Department Visits for Heat-related Illness
North Carolina: 2025 Compared to Historical Average**



**Figure 2a. Average Weekly Rate of Heat-related Illness Emergency Department Visits per 100,000 Population
May 1–July 12 (2025)**



**Figure 2b. Average Weekly Rate of Heat-related Illness Emergency Department Visits per 100,000 Population
May 1–July 12 (2020–2024)**



<https://www.ncdhhs.gov/news/press-releases/2025/07/31/ncdhhs-urges-caution-outdoors-amid-record-high-heat-related-illnesses>

HEAT HEALTH ALERTS NOW STATEWIDE!



Check on Your Neighbor When There is a Heat Health Alert

- Help your neighbor find a cool place like a library or another neighbor's home
- Encourage them to drink lots of water
- Know the signs of heat related illness and **call 911 if there is an emergency**

HEAT ILLNESS Signs and Symptoms

What To Do

Heat Stress



- Heavy sweating
- Nausea or vomiting
- Muscle cramps
- Headache
- Fatigue

- Drink water/electrolyte drinks
- Cool down with fan or A/C
- Loosen clothing
- Move to a cooler place
- Rest



Heat Exhaustion



- Heavy sweating
- Muscle cramps
- Nausea or vomiting
- Weakness
- Dizziness
- Headache
- Fainting

- Move to a cool place
- Loosen clothing
- Drink water
- Place cold cloths on body and change frequently to keep cool
- Take a cold bath/shower
- Seek medical attention



Heat Stroke



- Hot, red, dry or damp skin
- Confusion
- Nausea
- Irritability or aggression
- Fainting
- Weakness

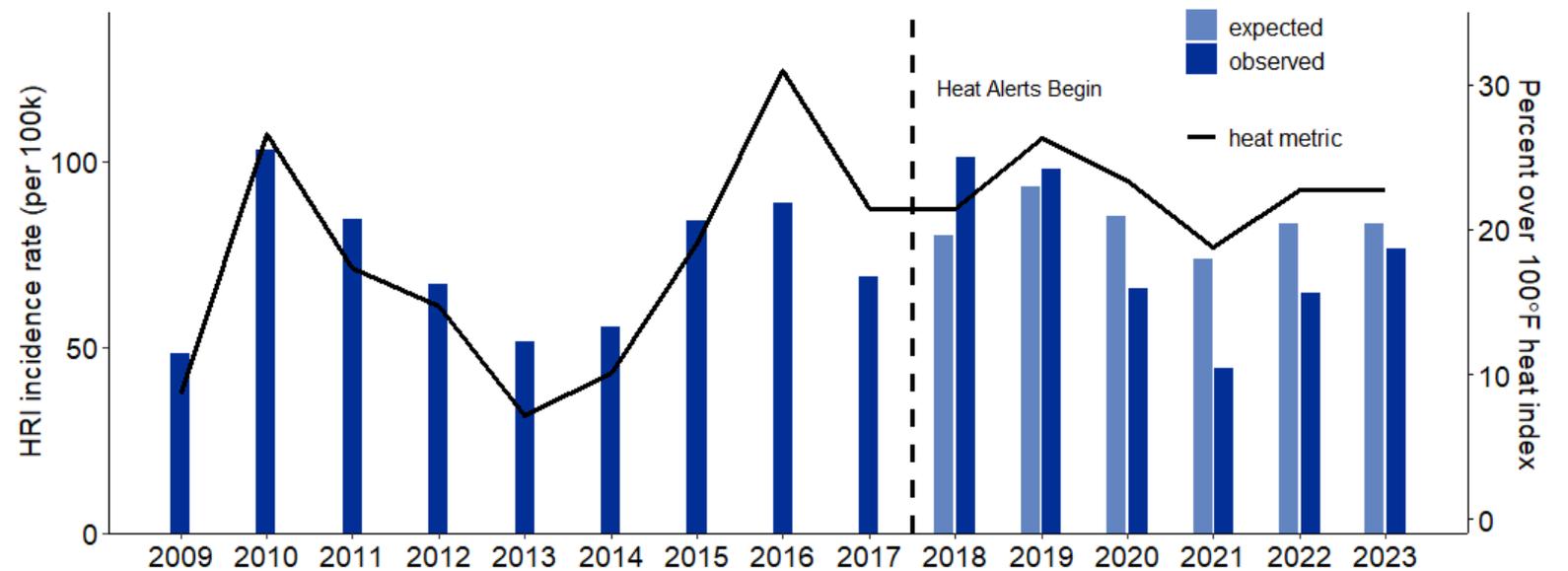
- **Call 911 immediately**
- Move to cooler place
- Take a cold bath/shower
- Place cold cloths or ice packs on body
- Remove outer clothes



PREVENTING HEAT RELATED ILLNESS

1. Heat Alert system blasts warnings and heat illness information to stakeholders
2. Pilot project in the Sandhills showed possible decrease in heat-related illness ED visits

Heat Alerts begin in 2018 in the Sandhills Region



NEW TOOLS!



North Carolina Fish Consumption Advisories

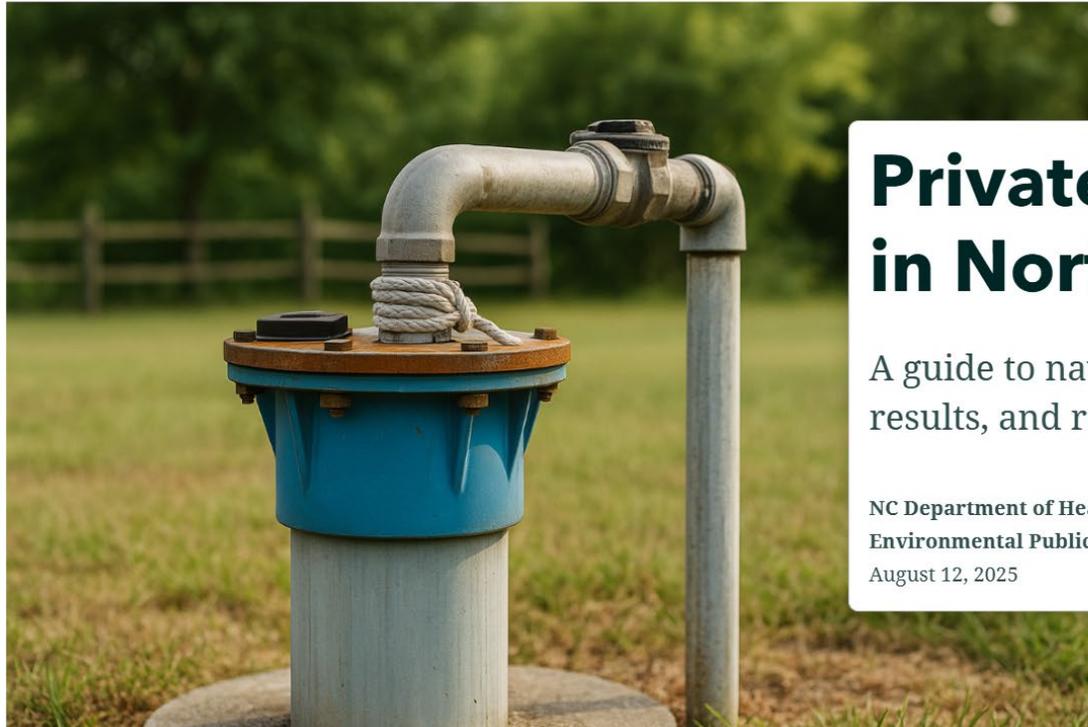
This webpage provides statewide and water body-specific advisory information for various fish species in North Carolina.

NC Department of Health and Human Services • Division of Public Health
August 11, 2025

NEW TOOLS!



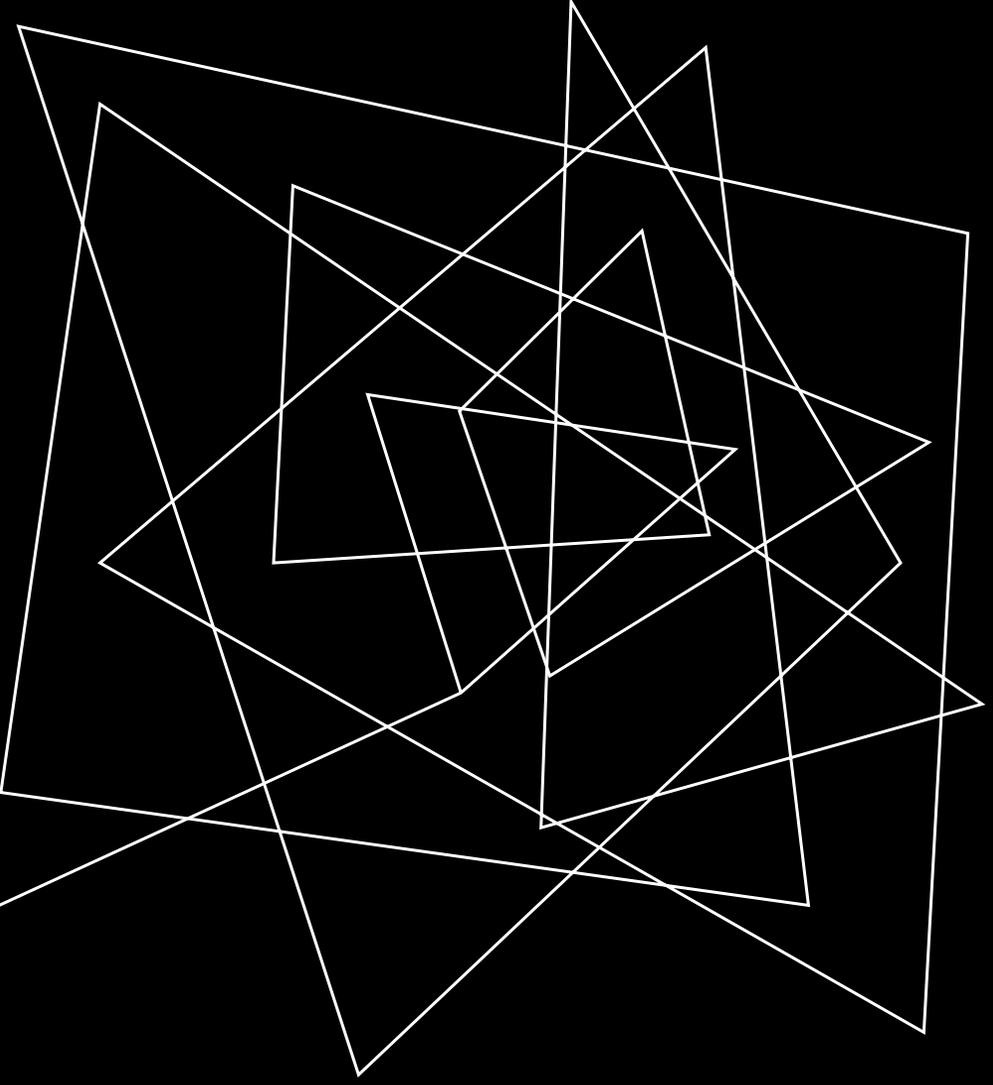
Private Well Testing in North Carolina



Private Well Testing in North Carolina

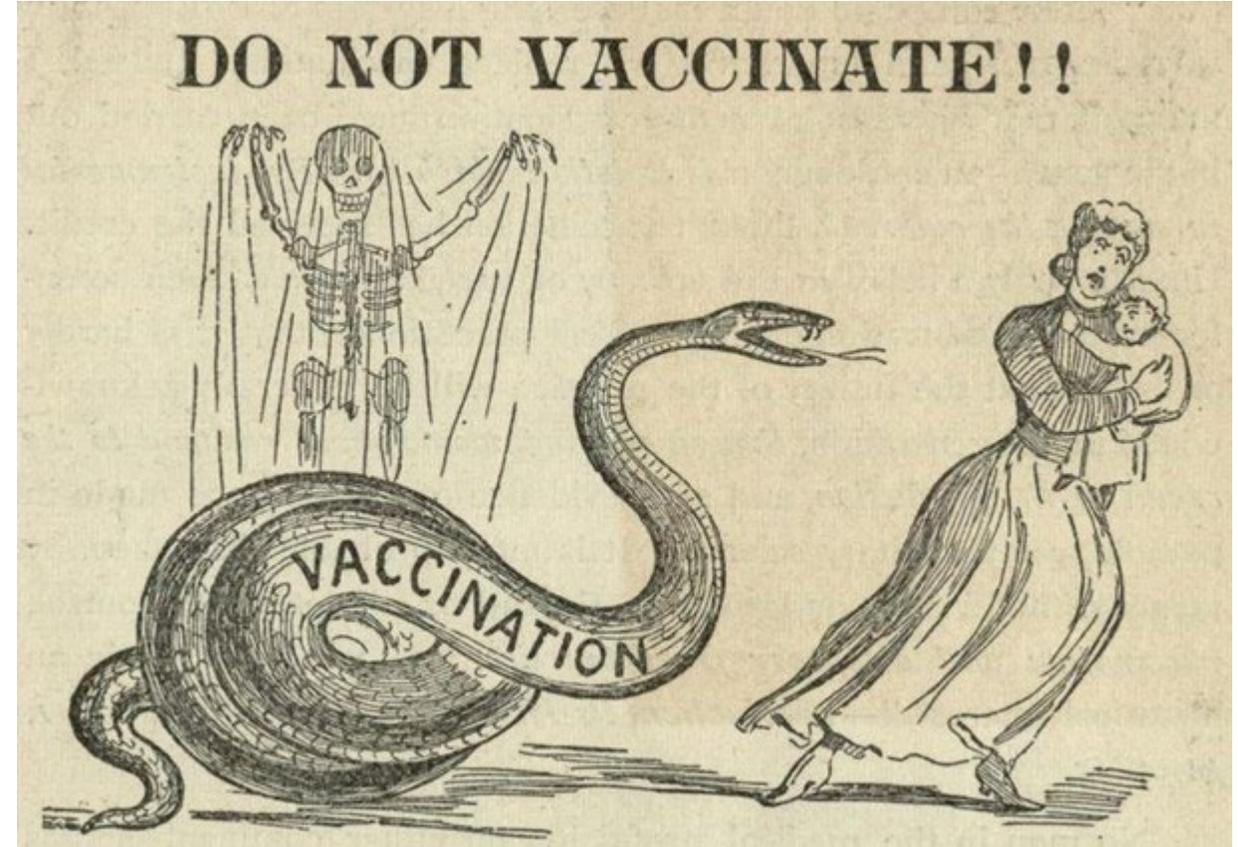
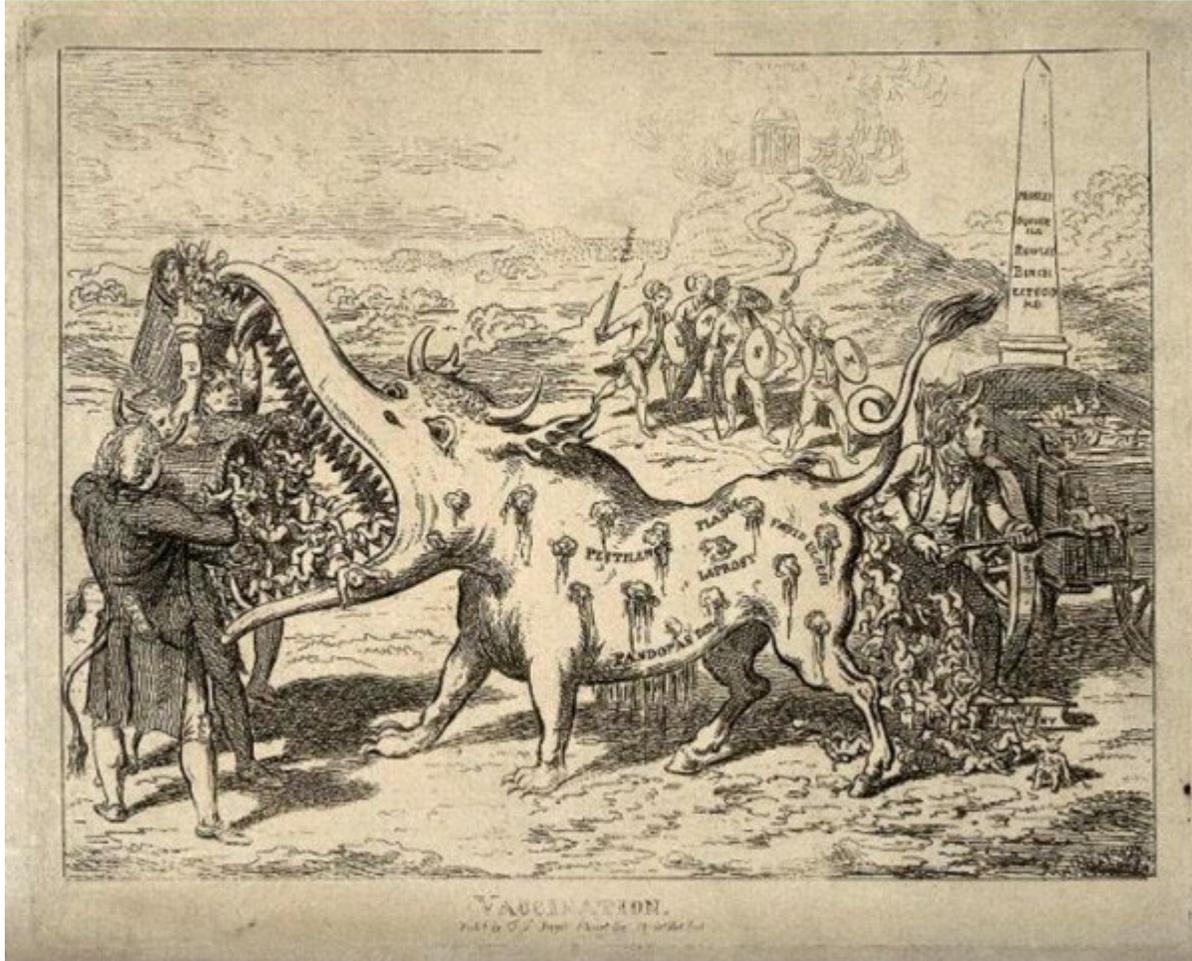
A guide to navigating private well testing, results, and regional patterns in NC.

NC Department of Health and Human Services •
Environmental Public Health Tracking Program
August 12, 2025



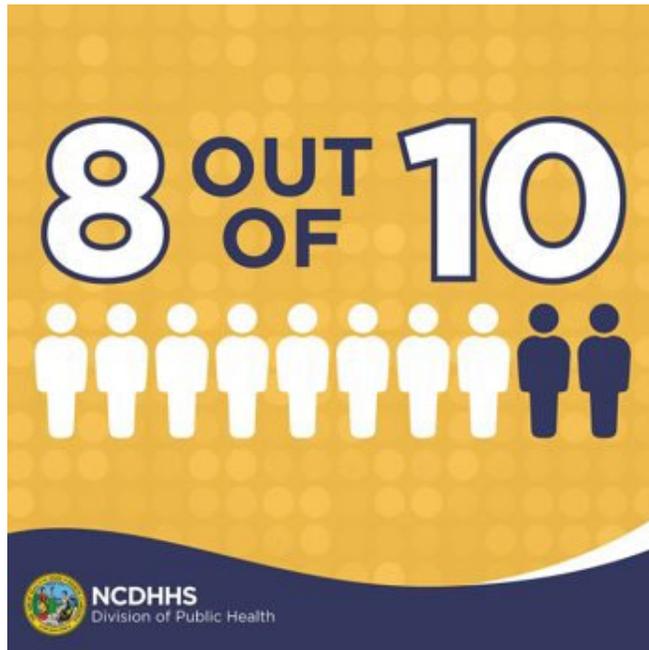
THE BIG PICTURE

MANY PATTERNS ARE REPEATED



Left: Furor over smallpox inoculations in Boston, 1721
Above: Antivaccine publication in England, 1892

PUBLIC HEALTH TRUST DATA



- **8 of 10 North Carolinians believe government health agency is key to improving the health of our state.**
- **Public Health is Personal, Local, and Trusted: the more they know us and our work, the more likely they are to trust us.**

PUBLIC HEALTH MATTERS MORE THAN EVER

In 2025, North Carolinians overwhelmingly recognize the critical role of public health in their lives:

- 81% say the work of NCDHHS is extremely or very important to improving health statewide — up from 77% in 2024.
- 66% rate the NC public health system as good or excellent at protecting residents from health threats and preventing illness — up from 59% in 2024.

TRUST IN PUBLIC HEALTH IS STRONG AND GROWING

Compared to 2024, trust has increased:

- 73% trust local health departments quite a lot or a great deal
- 67% of North Carolinians have a great deal or quite a lot of trust in NCDHHS
- Ratings for caring, effectiveness and credibility of public health institutions have improved



THANK YOU

Zack Moore, MD, MPH

State Epidemiologist

North Carolina Division of Public Health

zack.moore@dhhs.nc.gov

919-703-5126