Dear Chairs Aderholt and Baldwin and Ranking Members DeLauro and Capito:

As Congress works to draft the Labor, Health and Human Services, Education and Related Agencies (Labor-HHS) appropriations legislation for fiscal year (FY) 2024, the undersigned organizations request that you allocate $130.42 million for FY 2024 to the Centers for Disease Control and Prevention’s (CDC) Division of Nutrition, Physical Activity, and Obesity (DNPAO) and Active People, Healthy Nation. DNPAO invests in evidence-based strategies that support active living and healthy eating in states and communities across the nation. DNPAO’s programs help prevent and address obesity and reduce the risk of other chronic diseases, such as heart disease, diabetes, stroke, and cancer.

From 2015-2020, only 1 in 3 military-aged U.S. adults met body mass index (BMI) eligibility and were adequately physically active.¹ In addition, the Department of Defense spends $1.5 billion annually on health care related to obesity for active duty and former service members and their families.² Obesity is also one of the leading drivers of health care costs in the United States. A 2016 study found that obesity increased annual medical expenses by $260.6 billion.³ In addition, underlying medical conditions and chronic diseases linked to nutrition insecurity and inadequate levels of physical activity increased the risk of hospitalization and mortality among individuals infected with COVID-19, and a recent systematic review showed that physical activity significantly reduces COVID-19 morbidity.⁴

¹ https://www.sciencedirect.com/science/article/pii/S0749379722004238
Obesity and many of the chronic conditions linked to it are preventable. Due to funding constraints, DNPAO is currently employing obesity prevention evidence-based strategies in a limited number of states and communities. An increase in FY 2024 funding for DNPAO will allow CDC to expand two critically important programs that could substantially reduce health care costs:

- **The State Physical Activity and Nutrition (SPAN) program** funds 16 states out of 50 approved applicants to implement evidence-based obesity prevention strategies. SPAN programs are effective at empowering state and local leaders to increase access to physical activity for residents. Following the White House Conference on Hunger, Nutrition, and Health, the National Strategy on Hunger, Nutrition, and Health calls for the expansion of SPAN to all 50 states and the territories because of the program’s ability to address root causes of chronic disease by increasing rates of breastfeeding, creating more opportunities for physical activity, and improving nutrition guidelines. Some examples of SPAN activities include:
  - Kentucky’s SPAN program has developed shared road opportunities for bike routes and sidewalks for residents that are experiencing poverty, have insufficient transportation, or have a disability.
  - Utah’s SPAN program assisted 23 out of 45 of Utah’s labor and delivery hospitals as well as 7 out of 16 rural hospitals in the state to become fully trained in the Stepping Up for Utah Babies program, which promotes and supports breastfeeding.

- **Active People, Healthy Nation** supports communities to use evidence-based strategies to increase physical activity to encourage 27 million Americans to become more physically active by 2027. In addition, Active People, Healthy Nation is providing technical assistance for low resource communities, such as small rural towns, to access resources from the Bipartisan Infrastructure Law (BIL) to create safe and convenient spaces for physical activity.
  - The program has trained over 2,100 community leaders to develop action plans for expanding opportunities for physical activity and has worked with national partners to implement Complete Streets policies in over 1,600 jurisdictions.
  - Twelve rural communities in Louisiana are applying for funding to build safe and accessible bicycling and walking infrastructure made available in the BIL, in comparison to only one community applying before APHN’s technical assistance and the BIL.

We greatly appreciate your consideration of our request to provide $130.42 million in FY 2024 for CDC’s Division of Nutrition, Physical Activity and Obesity. We urge the Committee to ensure a DNPAO increase is made in the context of an overall increase for CDC’s National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP), which is critically needed to address chronic disease conditions that account for more than 90% of the nation’s $4.1 trillion in annual healthcare costs.⁵

Sincerely,

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⁵ https://www.cdc.gov/chronicdisease/about/costs/index.htm