

April 23, 2023

Congresswoman Mariannette Jane Miller-Meeks, M.D. House of Representatives 1716 Longworth House Office Building Washington, DC 20515

RE: Energy and Commerce Committee RFI on CDC

Dear Congresswoman Miller-Meeks,

On behalf of 142 schools and programs of public health, representing over 11,000 faculty and over 81,000 students, we are pleased to provide comments on the House Energy and Commerce Committee's Request for Input (RFI) on the Centers for Disease Control and Prevention (CDC). The Association of Schools and Programs of Public Health (ASPPH) appreciates the opportunity to provide insights on the CDC on behalf of the academic public health community. Below are responses to the RFI questions most relevant to ASPPH's members and organizational mission.

Mission Creep: The CDC is the leading agency in the United States responsible for strengthening public health and protecting people from preventable illness, death, and health threats. ASPPH, along with the rest of the public health community, has vocalized the critical need for stronger investments in the CDC for years. At the same time, Congress continues to underfund this essential agency. The U.S. spends more than any other high-income nation on healthcare per capita, with worse outcomes. Investments in prevention and the U.S. public health system are key to improving health outcomes while also reducing future health care spending.

The CDC serves as the command center for our federal, state and local public health defense system. The agency protects against emerging and reemerging infectious diseases as well as man-made and natural disasters. From playing a leading role in the detection and mitigation of the COVID-19 pandemic in the U.S. and globally, to monitoring and investigating the mpox outbreak and other disease outbreaks, to pandemic flu preparedness, CDC is the nation's – and a global – expert resource and response center.

In addition to accomplishing and executing its "original mission," the CDC also addresses the complexities of the public health arena through a multidimensional approach. As the pandemic has demonstrated, chronic disease and infectious disease are inextricably linked. Indeed, in the absence of vaccines, good underlying health is the best way to prevent severe infection and death from communicable diseases. Therefore, any efforts to improve pandemic preparedness and prevent the spread of communicable diseases must also include efforts to prevent chronic disease, address health disparities, and ultimately, improve underlying health and wellness for all.

Chronic diseases are the leading causes of death and disability and, along with mental health conditions, account for an estimated 90 percent of the nation's \$4.1 trillion annual



health costs. The CDC's Prevention Research Centers (PRC) Program is a valuable network of academic research centers tasked with conducting community-based, applied public health research to address chronic diseases and other leading causes of death and disability in the U.S.

Prevention Research Centers: PRCs are led by ASPPH's member schools of public health and work with local communities to develop, test, and evaluate solutions to public health problems. During 2019–2024, CDC is funding 26 PRCs across the United States. Each PRC is funded for 5 years to maintain a research center and conduct prevention research that promotes health and prevents chronic illness and other diseases and disabilities. The solutions developed by PRCs are intended to be applied widely. In addition to creating healthier communities, PRCs have increased the public health workforce and conducted research that will guide future initiatives.

We believe the PRC program is a perfect example of the very complex linkages in public health. The recognition of these connections not only results in better health outcomes for Americans, but also yields a favorable return on investment. The focus of this program does not deviate from CDC's "original mission," but instead enhances it and keeps up with the pace of an ever-evolving public health landscape. CDC has experts across issues and supports communities to do the same. Crises like COVID-19 and Zika demonstrated the need for collaboration across multiple issues areas. During Zika, for example, CDC employed a cross-agency response that used infectious disease experts and experts in birth defects and maternal health to reduce the risk in pregnant women and infants.

O Leadership Structure and "Moving Forward" Reorganization: CDC "Moving Forward" is an ongoing process to ensure CDC can better deliver on its mission to protect the health, safety, and security of Americans. CDC acknowledges they needed to take steps to change the culture and processes of the agency to make it a more responsive organization. We support the organizational structure envisioned by "Moving Forward," as we believe this is a step in the right direction.

We also acknowledge the agency's constraints on budget, staffing, and authorities and join the broader public health community in advocating for at least \$11.581 billion for CDC programs in the FY 2024 Labor, Health and Human Services, Education and Related Agencies appropriations bill. Strong funding for CDC is critical to supporting all of CDC's activities and programs, as well as equipping the agency with resources necessary to implement the "Moving Forward" plan.

Partnerships with Academic Public Health: Through partnerships with schools and programs of public health, the CDC has made positive strides in protecting the health of Americans and equally as important, preventing illness. Some examples of collaborations with academia include the Prevention Research Centers, Injury Control Centers, and the Centers for Public Health Preparedness Program which was recently reauthorized.



We encourage the CDC to enhance its partnerships with academic public health, as the agency rolls out "Moving Forward." ASPPH's member institutions are located across the country and can leverage experts, faculty, students, and other tools to enhance CDC's goals under "Moving Forward" given the agency's current limitations.

Our member schools and programs provide expertise in areas of needed improvement identified by the agency's report. For example, the CDC's internal review concluded the need for prioritizing public health communications especially in times of crises. With ASPPH member institutions located all over the country, they play a pivotal role in delivering evidence-based, timely, and clear guidance to their respective communities. They achieve better transparency and effectively communicate with constituents, as well-established and trusted members of their community.

Workforce Reform: We are facing a public health workforce shortage and distribution problem. Academic public health plays a critical role in addressing the workforce needs of the future. Our member institutions are training the next generation of the public health workforce and ASPPH recently launched the Center for Public Health Workforce Development to address this critical need. Among several priorities are a CDC-funded cooperative agreement with the CDC Division of Workforce Development to strengthen population and public health workforce pathways. Working collaboratively with CDC and other national partner associations, ASPPH is identifying and supporting the implementation of best practices in leadership, data science education, training, recruitment, and retention practices.

Additionally, ASPPH partners with CDC on other workforce development programs including the Disease Intervention Specialists Workforce Development Program and the CDC Public Health Fellowship Program. CDC should consider expanding or creating similar programs in partnership with academic public health entities.

Disease Intervention Specialists Workforce Development Program: ASPPH has partnered with the CDC on The Disease Intervention Specialists (DIS) Workforce Development program, which was part of the American Rescue Plan Act of 2021. The partnership is essential to ensuring 21st century outbreak response needs through expanding and enhancing frontline public health staff, conducting DIS workforce training and skills building, building organizational capacity for outbreak response, and evaluating and improving recruitment, training, and outbreak response efforts.

ASPPH/CDC Public Health Fellowship Program: The ASPPH/CDC Public Health Fellowship Program offers culturally relevant and applied mentored learning experiences for early career professionals with graduate degrees in public health (Masters and Doctoral level). Through this program, the next generation of public health leaders have an opportunity to round out their academic training and gain practical public health



experience through exposure to state-of-the-art technology and databases; acquisition of skills and knowledge to enhance their careers; and interaction with technical experts in their chosen fields. Fellowship opportunities are available in various tracks including Emergency Preparedness, Overdose Prevention, Suicide Prevention, Mental Health, Health Equity, Health Education, Interpersonal Violence, and others.

Finally, schools and programs of public health played a critical role in combating COVID-19 in communities all over the country. We have documented this impact through our COVID-19 Storytelling Project, which provides examples of the critical onthe-ground work these institutions did during the pandemic and continue to do to this day.

Data and Surveillance: Data modernization activities are key to improving public health surveillance in the country. The CDC can strengthen current data standards and collection of reliable data to inform federal, state, and local public health decisions through partnerships with academia. Additionally, the CDC must be granted new authority to direct what and how public health data are reported.

The Center for Forecasting and Outbreak Analytics (CFA): ASPPH was pleased to see the creation of The Center for Forecasting and Outbreak Analytics (CFA). The Center plays an important role in convening the next generation of public health data professionals, expert disease modelers, emergency responders, and public health communicators. CFA addresses a critical need to improve the U.S. government's ability to forecast and model emerging health threats and take timely action to mitigate their effects, such as social and economic disruption. Faculty from ASPPH member institutions have played a critical role in standing up this new Center and it is important to continue the Center's academic partnerships.

Through continuing its work with schools and programs of public health and other academic institutions, the Center will have the ability to engage the nation's expertise in disease modeling, public health data analysis, research, and training to build workforce capacity in this emerging field. This will enable stakeholders at multiple levels to make more and better-informed decisions on preparing for and responding to the next public health emergency. As an interagency resource for early warnings related to emerging biological threats, the Center will support the public health system in detecting, responding to, and eventually preventing future epidemics and outbreaks.

Currently, CDC has no legal ability to direct what and how public health data are reported to CDC or other public health agencies. In order to operate effectively, the agency requires the authority to direct and coordinate data reporting, stewardship, and sharing across a complex public health ecosystem. Congress must grant this authority. A



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unified, common approach to data collection and sharing will be beneficial to the entire public health ecosystem.

ASPPH is grateful for the opportunity to work with you and the Energy and Commerce Committee on matters which involve the CDC. Please contact Tim Leshan (tleshan@aspph.org 202-296-1099 ext. 132) if we can provide additional information.

Sincerely,

Tim Leshan

Timothy E. Leshan, MPA Chief External Relations & Advocacy Officer Association of Schools and Programs of Public Health Boris D. Lushniak MD, MPH Chair, ASPPH Advocacy Committee And Dean and Professor University of Maryland School of Public Health

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