FOR IMMEDIATE RELEASE June 13, 2023

The Negative Impact of the Debt Ceiling Agreement on Public Health: The Imperative for Sustained Investments in Public Health Infrastructure

June 13, 2023 – The Association of Schools and Programs of Public Health applauds the bipartisan agreement that raises the debt ceiling and establishes top-line spending caps for the appropriations process, limiting the potential for deep spending cuts to critical ongoing federal programs. We look forward to working with Congress and the Administration as Fiscal Year 2024 (FY'24) funding bills are developed to raise priority issues for academic public health, including education, research, and training.

However, we are deeply concerned that the agreement also rescinds hundreds of millions of dollars of public health funding that was intended to mitigate the lingering impacts of the COVID-19 pandemic and make needed improvements to public health infrastructure. Given the reality of a budgetary "freeze" in FY'24, and an estimated one-percent increase in FY'25, it may take years to regain the rescinded public health resources.

As schools of public health, we have a responsibility to our communities and to our students - the future members of the public health workforce - to advocate for stronger, consistent support from local and federal policymakers.

Public health interventions improve health outcomes and save money by preventing or reducing the burden of diseases, decreasing healthcare costs, and increasing economic productivity. According to a **2020 report** by Trust for America's Health (TFAH), investing in public health saves money by preventing injury and illness.

The need for regular and sustainable funding for public health became increasingly apparent during the COVID-19 pandemic. With stop-and-go government funding often arriving too late to make an impact, sustained public health investments are needed now more than ever. A recent New York Times **article** discussed the pitfalls of "stop-and-go" federal funding in COVID-19 hotspots, spotlighting how chronic disinvestment in public health leaves state agencies and departments unprepared to quickly scale up emergency responses and workforce needs.

It is vital we break the cycle of the boom-and-bust approach to public health funding and continue to build its infrastructure. The lessons from the current pandemic must catalyze a commitment to building a resilient global and domestic public health infrastructure, preparing us for the challenges of today and those of the future.

