



Division of Nutrition, Physical Activity, and Obesity (DNPAO)

**National Center for Chronic Disease Prevention and Health Promotion
Centers for Disease Control and Prevention (CDC)
FY 2023 Labor HHS Appropriations Bill**

	FY 2021	FY 2022	FY 2023 President's Request	FY 2023 TFAH Request
Division of Nutrition, Physical Activity, and Obesity	\$56,920,000	\$58,420,000	\$58,420,000	\$125,000,000

Background:

Despite the continuing rise in obesity and its health and economic consequences, the United States has not created a comprehensive response to the obesity epidemic. Furthermore, the level of investment in policies and programs on obesity prevention has not met the level of the crisis. The obesity epidemic is a complex problem that requires a multifaceted approach to ensure that healthy eating and active living are accessible and affordable to all people and all communities. Moreover, the racial and ethnic disparities that characterize COVID-19 and obesity are a stark reminder of the effects that underlying social and economic conditions and structures have on the health and well-being of Americans at the individual, family, neighborhood, and national level.

According to Trust for America's Health's *State of Obesity 2021* report, 42.4 percent of U.S. adults have obesity.¹ That represents a 39 percent increase since 2000. Similarly, the rate of obesity among children has more than tripled from 5.5 percent in 1976-1980 to 19.3 percent in 2017-2018.²

Since 1 of 3 Americans of all ages have obesity, millions of Americans are at higher risk for hypertension, high cholesterol, type 2 diabetes, heart disease, certain cancers, and many other negative health outcomes. Obesity is also one of the leading drivers of preventable chronic diseases and health care costs in the United States. A 2016 study found that obesity increased annual medical expenses by \$149 billion.³ Excess weight prevents nearly one in four young adults from qualifying for military service⁴ and 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.⁵ Furthermore, higher rates of chronic disease in the U.S. have worsened the impact of the COVID-19 pandemic, as evidenced by higher rates of hospitalization and mortality among individuals with COVID-19 who have underlying medical conditions, including obesity.

Impact:

By working in partnership with states and communities, CDC's Division of Nutrition, Physical Activity and Obesity (DNPAO) protects the health of all Americans by supporting healthy eating, active living, and obesity prevention in early care and education facilities, hospitals, and worksites; builds capacity of



state health departments and national organizations to prevent obesity; and conducts research, surveillance, and evaluation studies. Of note, DNPAO’s State Physical Activity and Nutrition (SPAN) Program and High Obesity Program (HOP) grant recipients have demonstrated the ability to continue effective chronic disease program efforts while addressing COVID-19 pandemic challenges by pivoting quickly to respond to community needs to

provide food security and safe access to physical activity.

DNPAO partners with national, state, territorial, and local groups to advance several obesity prevention initiatives, including⁶: State Physical Activity and Nutrition Program (SPAN), Active People, Healthy NationSM, Racial and Ethnic Approaches to Community Health (REACH) Program, the High Obesity Program (HOP), and the Childhood Obesity Research Demonstration (CORD) project.

- The **State Physical Activity and Nutrition Program (SPAN)** funds states to implement evidence-based strategies at state and local levels to improve nutrition and physical activity. Yet, CDC’s current funding level can only support 16 states (out of 50 approved but unfunded applications) and no territories. Areas of work focus on supporting breastfeeding, disseminating food service guidelines, implementing new community physical activity access strategies, and integrating both nutrition and physical activity standards in statewide early care and education (ECE) systems. It is estimated for each additional \$1.2 million in SPAN funding, an additional state could be added to the program. TFAH recommends that increases in DNPAO funding prioritize bringing on more states into the SPAN program. Compared with the estimated \$190 billion in obesity-related healthcare costs that the United States spends annually, increasing SPAN funding would be a small investment that could substantially reduce overall healthcare costs.⁷
- DNPAO’s newest initiative, **Active People, Healthy NationSM**, (partially executed through SPAN, HOP and REACH), supports communities, including CDC-funded sites, to use specific evidence-based strategies to increase physical activity (such as creating activity-friendly routes to everyday destinations, etc.) to encourage 27 million Americans to become more physically active by 2027. For more information, visit www.cdc.gov/activepeoplehealthynation.

FY 23 Appropriations Recommendation:

Fund CDC’s DNPAO at \$125 million for FY 2023 to allow CDC to expand SPAN to all 50 states and the territories, continue building state-level capacity, scaling local community interventions, and implementing Active People, Healthy Nation. TFAH recommends that 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 \$3.8 trillion in annual healthcare costs.⁸

¹ <https://www.tfah.org/report-details/state-of-obesity-2021/>

² <https://www.cdc.gov/nchs/data/hestat/obesity-child-17-18/obesity-child.htm>

³ <https://www.tfah.org/report-details/state-of-obesity-2021/>

⁴ Maxey H, Bishop-Josef S, and Goodman B. *Unhealthy and Unprepared*. Washington, DC: Council for a Stronger America, October 2018. <https://www.strongnation.org/articles/737-unhealthy-and-unprepared>

⁵ Centers for Disease Control and Prevention and Mission: Readiness. (2017). Unfit to serve: obesity is impacting national security. <https://www.cdc.gov/physicalactivity/downloads/unfit-to-serve.pdf>

⁶ For a detailed list of current DNPAO state grantees, go to: <https://www.cdc.gov/nccdphp/dnpao/state-local-programs/funding.html>

⁷ <https://www.tfah.org/report-details/pandemic-proved-underinvesting-in-public-health-lives-livelihoods-risk/>

⁸ <https://www.cdc.gov/chronicdisease/about/costs/index.htm>