

The Impact of Chronic Underfunding on America's Public Health System: Trends, Risks, and Recommendations, 2023

Decades of underfunding have left the nation's public health system ill-equipped to protect the health of Americans. Health emergencies have illuminated weaknesses in the nation's public health infrastructure, including antiquated data systems, insufficient public health laboratory capacity, an under-resourced public health workforce, and the need for improved public health communications. These foundational public health capacities require increased, flexible, and sustained spending.



Limited funding for preventive care

 The country spends \$4.3 trillion on healthcare, but only about 4 percent of that goes to public health and prevention. Today, roughly 60 percent of the U.S. adult population has at least one chronic disease, such as obesity, diabetes, or heart disease. Treating these chronic diseases, along with mental health conditions, accounts for the vast majority of U.S. healthcare spending. Public health approaches can save lives and reduce healthcare costs, but many states don't receive adequate funding to prevent illnesses and injury.

Public health preparedness cuts

 Two primary programs focused on public health preparedness have been cut drastically over the past two decades. The Public Health Emergency Preparedness program has been reduced by half, and the Healthcare Readiness and Recovery Program has been cut by two-thirds over the past two decades when adjusting for inflation. This means every community is less protected than it should be.

For the full report, please go to: https://www.tfah.org/report-details/funding-2023/





Total State Funding: \$282,292,322



Public Health Funding Percent Change, FY 21-22:

6.87%

UNITED STATES



State CDC Funding, FY 23: \$9,200,000,000

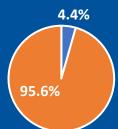


CDC Funding Percent Change, FY 14-23:

6% after inflation

CY2021 National Health **Expenditures**





Public Health and Prevention All other health services