



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 2025 Labor HHS Appropriations Bill**

	FY 2023	FY 2024	FY 2025 President's Request	FY 2025 TFAH
Division of Nutrition, Physical Activity, and Obesity	\$58,420,000	\$58,420,000	\$58,420,000	\$130,420,000

Background:

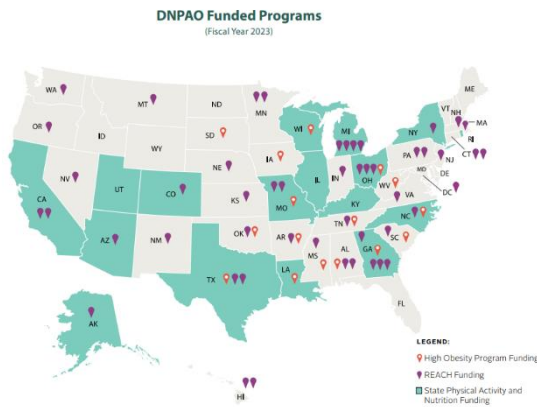
Although rates of obesity continue to increase, the current level of investment in policies and programs for obesity prevention does not meet the level of intervention needed. The obesity epidemic is a complex problem that requires a multifaceted approach to ensure that healthy eating and active living are accessible and affordable to all people and in all communities. Living with obesity also increases the risk of developing other chronic conditions, like hypertension, high cholesterol, type 2 diabetes, heart disease, certain cancers, and many other negative health outcomes.

According to Trust for America's Health's *State of Obesity 2023* report, 42 percent of U.S. adults live with obesity.¹ That represents a 37 percent increase since 2000. Similarly, the rate of obesity among children has increased 42 percent from 2000 to 2020.² Among military-aged U.S. adults, only 1 in 3 met body mass index (BMI) eligibility and were adequately physically active,³ 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.⁴ Obesity is also one of the leading drivers of health care costs in the United States. A 2021 study found that obesity accounted for \$170 billion in higher medical costs annually in the United States.⁵ High rates of obesity and other chronic diseases puts Americans at higher risk for severe outcomes during pandemics and other health emergencies.

Addressing community factors that are barriers to health could prevent these outcomes by making the healthy choice the easy choice. By supporting states and communities, the Centers for Disease Control and Prevention's (CDC) 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; building capacity of state health departments and community-based organizations to prevent obesity; and conducting research and evaluation studies.

Impact: DNPAO partners with national, state, tribal, and local groups to advance several obesity and chronic disease prevention initiatives, including: State Physical Activity and Nutrition Program (SPAN), Racial and Ethnic Approaches to Community Health (REACH) Program, the High Obesity Program (HOP), and Active People, Healthy NationSM.

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 17 states (out of 50 approved but unfunded applications) and no territories. It is estimated for each additional \$1.2 million in SPAN funding, an additional state could be added to the program.⁶ Key SPAN outcomes during the previous SPAN grant period (October 2018 to September 2023) include:

- 19,289,572 people have enhanced access to activity-friendly routes to more easily reach everyday destinations;
- 3,844,073 children learned about the importance of nutrition and physical activity in early care and education settings;
- 710,484 infants were born in hospitals with updated breastfeeding standards;
- 1,740,106 people were impacted by new or improved breastfeeding support programs.

TFAH recommends that increases in DNPAO funding prioritize expanding SPAN to all 50 states and territories, a recommendation also made in the [National Strategy on Hunger, Nutrition, and Health](#). Compared with the annual \$170 billion in increased medical costs related to obesity-related healthcare that the United States spends annually, increasing SPAN funding would be a small investment that could substantially reduce overall healthcare costs.

Active People, Healthy NationSM (partially implemented through SPAN, HOP, and REACH) supports communities to use evidence-based strategies to increase physical activity to encourage 27 million Americans to become more physically active by 2027. The initiative includes building capacity of low resource communities to complete applications for resources from the Bipartisan Infrastructure Law (BIL) to create safe and convenient spaces for physical activity.

FY 25 Appropriations Recommendation:

Fund CDC’s DNPAO at \$130 million for FY 2025 to allow CDC to expand SPAN to all 50 states and territories, continue building state-level capacity, scale local community interventions, and implement Active People, Healthy Nation to help underserved communities access BIL funds. 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 diseases, which together with behavioral health conditions account for more than 90% of the nation’s \$4.1 trillion in annual healthcare costs.⁷

¹ <https://www.tfah.org/wp-content/uploads/2023/09/TFAH-2023-ObesityReport-FINAL.pdf>

² *Ibid.*

³ <https://www.sciencedirect.com/science/article/pii/S0749379722004238>

⁴ <https://www.cdc.gov/physicalactivity/resources/unfit-to-serve/index.html>

⁵ <https://www.tfah.org/wp-content/uploads/2023/09/TFAH-2023-ObesityReport-FINAL.pdf>

⁶ <https://pubmed.ncbi.nlm.nih.gov/33470881/>

⁷ <https://www.cdc.gov/chronicdisease/about/costs/index.htm>