



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 2026 Labor HHS Appropriations Bill**

	FY 2024	FY 2025	FY 2026 President's Request	FY 2026 TFAH
Division of Nutrition, Physical Activity, and Obesity	\$58,420,000	N/A	N/A	\$130,420,000

Background:

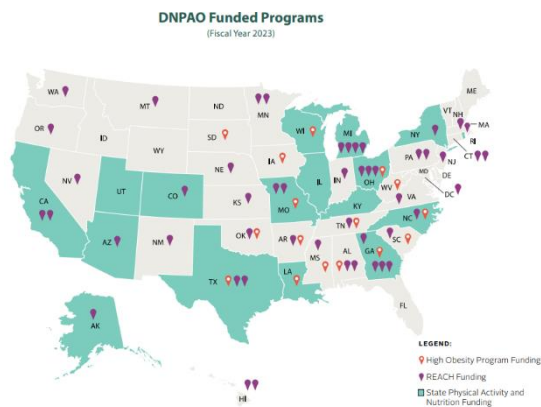
Combating chronic diseases that are the leading drivers of healthcare costs is critical to successfully reducing healthcare spending and improving people's lives. Targeting diet-related diseases, like obesity, requires a multifaceted approach to ensure that healthy eating and active living are accessible and affordable to all people and in all communities. 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 2024* report, nearly 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 to serve in the military.³ 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 \$173 billion in higher medical costs annually in the United States.⁵

Prioritizing prevention and supporting communities to address the factors that fuel conditions like obesity are key to improving outcomes. By providing flexible funding and technical assistance, the Centers for Disease Control and Prevention's (CDC) Division of Nutrition, Physical Activity and Obesity (DNPAO) gives everyone the opportunity to make healthy choices by supporting access to healthy foods, active living, and childhood 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. Compared with the annual \$173 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.

The High Obesity Program (HOP) funds 16 land-grant universities in states where at least one county has an obesity rate of 40 percent or higher. Land-grant universities then utilize their rural community extension service offices and partner with local leaders to implement programs to increase access to fresh fruits and vegetables and increase opportunities to be physically active. For example, HOP grantees have partnered with farmers markets to increase acceptance of SNAP benefits and ensure families have safe places to play, like sports fields and playgrounds.

Recommendation:

Fund CDC's DNPAO at \$130 million for FY 2026 to allow CDC to expand SPAN to all 50 states and territories, continue building state-level capacity and scale local community interventions. 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 \$4.5 trillion in annual healthcare costs.⁷

¹ <https://www.tfah.org/report-details/state-of-obesity-2024/>

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/report-details/state-of-obesity-2024/>

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

⁷ <https://www.cdc.gov/chronic-disease/data-research/facts-stats/index.html#:~:text=The%20impact%20of%20chronic%20diseases,chronic%20and%20mental%20health%20conditions.>