



POLICY PRIORITIES

Big Cities Health Coalition members work on the front lines to address a host of emergent and chronic public health challenges, from infectious disease outbreaks to drug overdose to natural disasters. To fully protect the public's health in cities across the nation, we need to...

- ▶ **invest in public health infrastructure and a skilled workforce** to promote the health and safety of all.
- ▶ **change broader structures outside of clinical settings that significantly impact health** (social drivers of health) and improve health for all community members.

THE BIG PICTURE

Fund the Centers for Disease Control and Prevention (CDC) to support its infrastructure as well as local and state public health work in communities. Almost 80% of CDC domestic resources directly support state and local health systems.

▶ **Public Health Infrastructure**

Public health funding is usually tied to specific diseases or conditions, but in 2022, Congress made a multi-year investment in necessary, cross-cutting capabilities. These funds expire in 2027, leaving health departments facing a funding cliff. Discretionary annual appropriations would ensure our governmental public health system is best equipped to protect our communities' everyday health.

- ▶ **Data Modernization** Public health data systems need long-term, sustained investment to ensure interoperability and just-in-time, actionable data. Congress must direct CDC to invest in local data systems and publicly report spending at each level of government.

- ▶ **Public Health Preparedness** Reauthorize the [Pandemic and All-Hazards Preparedness Act \(PAHPA\)](#) to maintain key legal authorities that bolster our nation's preparedness for public health emergencies, including emerging infectious diseases.

- ▶ **Substance Use** Maintain CDC [OD2A](#) funding for local health departments' overdose prevention programs. In 2023, 107,543 people in the US died from drug overdose, a 3% decrease from 2022. This is the first annual decrease since 2018 so maintaining momentum is critical. Local health departments must be free to provide low-barrier prevention, care, and treatment for those seeking assistance.

▶ **Infectious Disease Prevention**

Maintain funding for CDC infectious disease programs, which are essential to disease prevention and keeping communities healthy in an outbreak. This includes funding tools for infectious disease control such as testing, case reporting, and wastewater surveillance, as well as the National Immunization Program, which enables local health departments to provide vaccines for communicable diseases.

▶ **Chronic Disease Prevention**

[Chronic diseases account](#) for most illness, disability, and death in the US and are the leading drivers of our \$4.5 trillion in annual health care costs. Tobacco use is the leading preventable cause of disease, disability, and death in the US resulting in \$240 billion in health care spending. CDC, FDA, and Congress must continue to support efforts to prevent chronic diseases, including tobacco prevention efforts.

▶ **Injury and Violence Prevention**

Maintain funding for CDC's injury and violence prevention programs. Injury is the leading cause of death among persons aged 1–44. Injuries and violence cost \$4.2 trillion annually. CDC's programs include suicide prevention; suicide is the second leading cause of death for people ages 10–34. Some populations – such as veterans, people who live in rural areas, and tribal populations – have higher rates of suicide than others.

The Big Cities Health Coalition (BCHC) is a forum for the leaders of America's largest metropolitan health departments to exchange strategies and jointly address issues to promote and protect the health and safety of their residents. Collectively, BCHC's 35 member jurisdictions directly impact more than 61 million people, or one in five Americans.

- ▶ **Visit bigcitieshealth.org or contact Chrissie Juliano at juliano@bigcitieshealth.org**