

#### PUBLIC HEALTH INFRASTRUCTURE FUNDING: SUPPORTING LOCAL COMMUNITIES

# **Our public health** infrastructure needs ongoing investment.

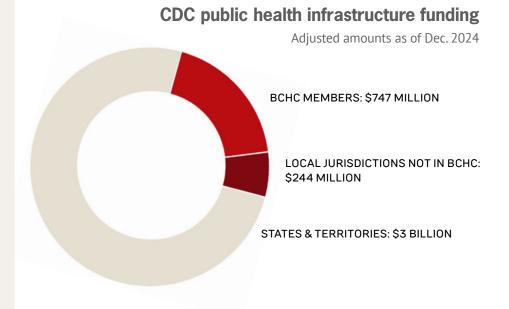
As of December 2024, the U.S. Centers for Disease Control and Prevention (CDC) has awarded \$4.5 billion over five years to strengthen public health infrastructure across the nation. These funds help ensure that 107 state, territorial, and local health departments have the people, services, and systems they need to address their communities' most pressing health needs. Everyone in the U.S. lives in a jurisdiction receiving funding under these Public Health Infrastructure Grants.

These funds expire November 2027, so health departments face a funding cliff that will result in significant staff and capacity reductions. Infrastructure is never a onetime investment; it requires consistent updating. Therefore, **Congress should continue to** provide funding through the public health infrastructure and data modernization lines in CDC's budget. These dollars can continue building a stronger public health system ready to face future health threats and ongoing challenges.

### LOCAL HEALTH DEPARTMENTS NEED INFRASTRUCTURE FUNDING

To assess and improve the health of people living in communities across the country, governmental public health departments at all levels need appropriate infrastructure. By equipping state and local health departments with these necessary people, services and systems, we can drive improved health outcomes and build more resilient and prosperous communities. Investment in foundational services – like communication, policy, workforce development and community partnerships – leads to measurable improvements for states and local communities.

Part of what makes the Public Health Infrastructure Grants unprecedented is that some were delivered directly to local health jurisdictions. Typically, federal funding comes to local health departments through their state health agencies.



#### Spotlight: Modernizing public health data systems

Public health relies on local data – and the ability to synthesize that data at the state and federal levels. Before 2020, data infrastructure was lacking in most governmental public health jurisdictions. There is still a great deal of **data modernization** work to do on to make our nation's patchwork of health data systems interoperable.

## PUBLIC HEALTH INFRASTRUCTURE GRANT DOLLARS AT WORK

CDC's Public Health Infrastructure Grant (PHIG) program boosts local, state, and territorial public health in three core areas:



**Workforce** Recruiting, training, retaining, and supporting a public health staff that can address their community's complex needs.



**Foundational capabilities** Strengthening core organizational functions that disease-specific grants don't usually cover, such as health education and communication with the community.



**Data modernization** Creating a more modern and efficient data infrastructure so jurisdictions can respond to and report on public health data more quickly.

## Examples from big city health departments

**Community health teams** LA County Public Health has formed teams that combine staff from the health department, community organizations, and health care. These teams conduct home visits to 8,000 homes annually to identify community health needs and guide people to services.

**Skilling up** Health departments in Louisville, Memphis/Shelby County, and Portland/Multnomah County have used PHIG dollars to provide first-time managers with leadership training and support staff who want to pursue advanced degrees or become certified as lactation consultants.

**Career development** Public Health–Seattle & King County created a summer camp to give youth aged 15–23 hands-on exposure to public health careers and services, aiming to inspire a new generation to join the field.

**Performance management** The health departments in Columbus, Philadelphia, and San Antonio (among others) have used PHIG funds to modernize systems that measure and improve performance.

*Get more details about these and other PHIG-funded improvements at health departments from the BCHC and PHIG Partners websites (click logos below).* 



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. **bigcitieshealth.org** 

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Well-funded public health infrastructure enables work such as (top to bottom): mobile services for neighborhoods that have little health care access (Seattle); greening projects that contribute to safer neighborhoods and healthier diets (Philadelphia); programs that intervene in community violence before it starts and support local youth (Minneapolis); lead testing for children and removal of lead from older homes (Los Angeles); and educational programming to prevent diabetes (Houston).





