June 1, 2018

Re: Outside Witness Testimony from Mary Ann Johnson, Ph.D. on behalf of the American Society for Nutrition (ASN) prepared for the Subcommittee on Labor, Health and Human Services, and Education, and Related Agencies regarding National Institutes of Health (NIH) and Centers for Disease Control and Prevention/ National Center for Health Statistics (CDC/ NCHS) Fiscal Year 2019 funding.

The Honorable Roy Blunt
Chairman
Appropriations Subcommittee on Labor, Health and Human Services, Education and Related Agencies
U.S. Senate
Washington, DC 20510

The Honorable Patty Murray
Ranking Member
Appropriations Subcommittee on Labor, Health and Human Services, Education and Related Agencies
U.S. Senate
Washington, DC 20510

Dear Chairman Blunt and Ranking Member Murray:

Thank you for the opportunity to provide testimony regarding Fiscal Year (FY) 2019 appropriations. The American Society for Nutrition (ASN) respectfully requests at least $39.3 billion dollars for the National Institutes of Health (NIH) and $175 million dollars for the Centers for Disease Control and Prevention/ National Center for Health Statistics (CDC/ NCHS) in Fiscal Year 2019. ASN is dedicated to bringing together the world's top researchers to advance our knowledge and application of nutrition, and has more than 6,500 members working throughout academia, clinical practice, government, and industry.

National Institutes of Health (NIH)
The NIH is the nation’s premier sponsor of biomedical research and is the agency responsible for conducting and supporting 86 percent of federally-funded basic and clinical nutrition research. Although nutrition and obesity research make up less than eight percent of the NIH budget, some of the most promising nutrition-related research discoveries have been made possible by NIH support. NIH nutrition-related discoveries have impacted the way clinicians prevent and treat heart disease, cancer, diabetes and other chronic diseases. For example, from 2001 to 2011, the U.S. death rate from heart disease has fallen by about 39 percent and from stroke by about 35 percent\(^1\). However, the burden and risk factors remain high. With additional support for NIH, additional breakthroughs and discoveries to improve the health of all Americans will be made possible.

\(^1\) https://www.heart.org/idc/groups/ahamah-public/@wcm/@sop/@smd/documents/downloadable/ucm_470704.pdf
Investment in biomedical research generates new knowledge, improved health, and leads to innovation and long-term economic growth. From FY 2003 to 2015, the NIH lost 22% of its capacity to fund research due to budget cuts, sequestration, and inflationary losses. Such economic stagnation is disruptive to training, careers, long-range projects and ultimately to progress. Since FY 2016, Congress has begun to restore the NIH budget but there is much work to be done; in real dollars, the NIH budget is still 16 percent below the FY 2003 level. **ASN recommends at least $39.3 billion dollars for NIH in Fiscal Year 2019** to support NIH nutrition-related research that will lead to important disease prevention and cures. A budget of $39.3 billion will allow NIH to support at least 400 additional early career and early established investigators while still providing much needed increases to other parts of the portfolio. NIH needs sustainable and predictable budget growth to fulfill the full potential of biomedical research, including nutrition research, and to improve the health of all Americans.

**Centers for Disease Control and Prevention National Center for Health Statistics (CDC NCHS)**

The National Center for Health Statistics, housed within the Centers for Disease Control and Prevention, is the nation’s principal health statistics agency. **ASN recommends a Fiscal Year 2019 funding level of $175 million dollars for NCHS** to help ensure uninterrupted collection of vital health and nutrition statistics and help cover the costs needed for technology and information security maintenance and upgrades that are necessary to replace aging survey infrastructure. A decade of flat-funding has taken a significant toll on NCHS’s ability to keep pace.

The NCHS provides critical data on all aspects of our health care system, and it is responsible for monitoring the nation’s health and nutrition status through surveys such as the National Health and Nutrition Examination Survey (NHANES), that serve as a gold standard for data collection around the world. Nutrition and health data, largely collected through NHANES, are essential for tracking the nutrition, health and well-being of the American population, and are especially important for observing nutritional and health trends in our nation’s children.

Nutrition monitoring conducted by the Department of Health and Human Services in partnership with the U.S. Department of Agriculture/Agricultural Research Service is a unique and critically important surveillance function in which dietary intake, nutritional status, and health status are evaluated in a rigorous and standardized manner. Nutrition monitoring is an inherently governmental function and findings are essential for multiple government agencies, as well as the public and private sector. Nutrition monitoring is essential to track what Americans are eating, inform nutrition and dietary guidance policy, evaluate the effectiveness and efficiency of nutrition assistance programs, and study nutrition-related disease outcomes. Funds are needed to ensure the continuation of
this critical surveillance of the nation’s nutritional status and the many benefits it provides.

Through learning both what Americans eat and how their diets directly affect their health, the NCHS is able to monitor the prevalence of obesity and other chronic diseases in the U.S. and track the performance of preventive interventions, as well as assess ‘nutrients of concern’ such as calcium, which are consumed in inadequate amounts by many subsets of our population. Data such as these are critical to guide policy development in health and nutrition, including food safety, food labeling, food assistance, military rations and dietary guidance. For example, NHANES data are used to determine funding levels for programs such as the Supplemental Nutrition Assistance Program (SNAP) and the Women, Infants, and Children (WIC) clinics, which provide nourishment to low-income women and children.

Thank you for the opportunity to submit testimony regarding FY 2019 appropriations for the National Institutes of Health and the CDC/ National Center for Health Statistics. Please contact John E. Courtney, Ph.D., ASN Executive Officer, at 9211 Corporate Boulevard, Suite 300, Rockville, Maryland 20850, jcourtney@nutrition.org or 240-428-3650, if ASN may provide further assistance.

Sincerely,
Mary Ann Johnson, Ph.D.
2017-2018 President, American Society for Nutrition