March 20, 2020

Re: Outside Witness Testimony from Richard Mattes, M.P.H., Ph.D., RD 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 2021 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) 2021 appropriations. The American Society for Nutrition (ASN) respectfully requests at least $44.7 billion dollars for the National Institutes of Health (NIH) and $189 million dollars for the Centers for Disease Control and Prevention/ National Center for Health Statistics (CDC/ NCHS) in Fiscal Year 2021. ASN is dedicated to bringing together the world’s top researchers to advance our knowledge and application of nutrition, and has more than 7,000 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 percent1. 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 $44.7 billion dollars for NIH in Fiscal Year 2021** to support NIH nutrition-related research that will lead to important disease prevention and cures. A budget of $44.7 billion will allow NIH to continue its commitment to the Next Generation Researchers Initiative; provide $404 million already authorized through the 21st Century Cures Act for key research initiatives; and provide a 3 percent budget increase across NIH Institutes and Centers, allowing them to bolster research areas in need of resources. NIH needs sustainable and predictable budget growth to fulfill the full potential of biomedical research, including nutrition research, that is aimed at improving the health and well-being of all Americans, as well as global populations.

**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 2021 funding level of $189 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. The U.S. is a leader in this area and 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. This is an invaluable source of data that has been and can continue to be used to address major health issues as they arise.

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, iron, folate, iodine, vitamin D, and other micronutrients 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 2021 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, jcourney@nutrition.org or 240-428-3650, if ASN may provide further assistance.

Sincerely,
Richard Mattes, M.P.H., Ph.D., RD
2019-2020 President, American Society for Nutrition