



Council of State and Territorial Epidemiologists

September 30, 2002

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Gianfranco Pezzino, MD, MPH
State Epidemiologist
Kansas

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Medical Director/State Epidemiologist
Iowa

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Epidemiology Program Coordinator
Deputy State Epidemiologist
Connecticut

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Senior Epidemiologist
Washington State

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State Epidemiologist
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Public Health Medical Officer
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State Epidemiologist
New Mexico

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State Epidemiologist
Florida

Executive Director

Patrick J. McCannon, MPH

The Honorable David Obey
Ranking Minority Member
Subcommittee on Labor, Health
and Human Services and Education Appropriations
1016 Longworth House Office Building
Washington, D.C. 20515

RE: FY 2003 Funding for Behavioral Risk Factor Surveillance System

Dear Representative Obey:

The Council of State and Territorial Epidemiologists (CSTE) urges you to match the Senate appropriation of \$8 million for CDC's Behavioral Risk Factor Surveillance System (BRFSS). The BRFSS has been level funded at \$1.8 million for many years and yet it is a primary source of information to guide intervention, policy decision, and budget direction at the local, state and federal level for a host of health problems, especially chronic diseases. It is the source of data for 24 of the 73 chronic disease indicators, six areas of the Healthy People 2010 leading health indicators and serves as the core source of surveillance for multiple public health programs across the CDC.

The President's FY 2003 budget request included \$2.8 million for BRFSS, but \$1 million was transferred from CDC's HIV/AIDS surveillance activities – another area of CDC's budget that is seriously underfunded. Currently, states receive only an average of \$113,000 per year from CDC for their BRFSS activities. This means few states are able to analyze and translate the data they collect into long-term disease prevention and control programs and policies. Additional funding would significantly improve data collection infrastructure, timeliness, and analysis that will not only improve guidance for state-based public health activities, but allow state to state comparisons, state to national comparisons, and a more solid foundation for national resource and other decisions with regard to a range of public health activities.

CSTE is a professional association representing the 57 states and territories and over 400 public health epidemiologists working in states, territories, local and federal health agencies. Public health epidemiologists work together to detect, prevent, and control conditions that impact the public's health. CSTE sincerely appreciates the support that the Subcommittee provides for the Centers for Disease Control, and other public health agencies and activities. CSTE urges you to match the Senate and provide \$8 million in FY 2003 for BRFSS – a small, but very cost-efficient investment addressing some of the most costly diseases affecting the U.S. population.

Sincerely,

Gianfranco Pezzino, MD, MPH
President



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