

Committee on Energy and Commerce
Opening Statement as Prepared for Delivery
of
Subcommittee on Health Chairwoman Anna G. Eshoo

Hearing on “Empowered by Data: Legislation to Advance Equity and Public Health”

June 24, 2021

“Underfunded and under threat.” That was the Associated Press and Kaiser Health News’ indictment of the U.S. public health system based on their award-winning investigation last year.

The investigation found that since 2010, spending for state public health departments dropped by 16% per capita and spending for local health departments fell by 18%. At least 38,000 state and local public health jobs have disappeared since the 2008 recession.

Our hollowed-out public health system explains why we’ve seen Covid-19 cases tracked using fax machines and Covid-19 vaccines recorded on white paper cards.

These antiquated methods are embarrassing for a nation that once had a globally respected public health system, and our disarrayed data collection has broader consequences for many Americans. It has allowed racial health disparities to flourish without intervention. As the common maxim goes “you can’t manage what you can’t measure.”

The 13 bills our Subcommittee is considering today begin to rebuild our public health systems beyond pen-and-paper data collection and inconsistent definitions. Several of the bills use data to help our health systems improve the overall health and wellness of local populations rather than treat individual sickness.

I’m proud to co-lead with Representative Peters, the *Health STATISTICS Act*, which directs the CDC to develop uniform public health data standards for state and local health departments.

Put simply, public health data is a mess. A striking example is the incomplete and inconsistent Covid-19 case counts and death tallies, which is addressed by bills authored by Representatives Castor, Speier, and Bera.

Beyond Covid-19, inconsistent public health data have been raised repeatedly as an issue before this Subcommittee in hearings. An example is that there’s not a single standard for how to define a gun death or a maternal death.

My legislation with Representative Peters carries out several recommendations from the GAO and the National Academies of Science to make vital health statistics electronically available and comparable.

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Robust and accessible public health data is a critical tool for our state and local officials in their efforts to address the social determinants of health that perpetuate the inequities in our communities.

Rep. Barragán's *Improving Social Determinants of Health Act* builds on and complements the *Health STATISTICS Act* by authorizing a new CDC program that would use the improved and available health data to address structural challenges such as unsafe housing, poor transportation, or food deserts.

The remaining bills work together to use public health data to address health disparities starting at conception, through childhood, and into adulthood.

I'm proud that our Subcommittee is once again leading the charge in a bipartisan way to promote health equity through evidence-based, data-driven policy. Taken together, these 13 bills will make real and lasting change to rebuild our public health system so we can address both new health emergencies like Covid-19, as well as the systemic issues of poverty and racial inequality.