Mission
To reduce illness and death associated with emerging and zoonotic infectious diseases and to protect against the unintentional and intentional spread of infectious diseases.

Major Programs
• Core Infectious Diseases— including:
  Antimicrobial Resistance (AR)
  Preparedness and Emerging Infections
  Healthcare-associated Infections (HAI)
  Infectious Disease Laboratories
  High-consequence Pathogens
  Vector-borne Diseases
• National Healthcare Safety Network (NHSN)
• Food Safety
• Advanced Molecular Detection (AMD)
• Quarantine and Migration

Goal Highlights
Develop high impact interventions and partnerships to prevent, detect and control:
• Outbreak detection and response
• State and local public health support
• New pathogen investigation and discovery
• Diseases of special and vulnerable populations (e.g., refugees and immigrants)

Why We’re Here
• Every year, over 2 million people get antibiotic-resistant infections. At least 23,000 people die as a result.
• One in 25 hospitalized patients has healthcare-associated Infections.
• Each year, about 80,000 refugees and 500,000 immigrants come to the United States from around the world.
• Salmonella causes about 1 million foodborne infections, 20,000 hospitalizations, and 380 deaths annually, with health care costs of $365 million per year.
• To-date, over 900,000 suspected cases and over 18,000 laboratory-confirmed cases of the Chikungunya Virus have been reported in the Americas since its first local transmission in the Western Hemisphere in 2013.

Selected Recent CDC-supported Epi-Aid Investigations

How We Work
• Respond to outbreaks.
• Provide technical and financial assistance to states.
• Provide laboratory expertise and specialized testing.
• Perform research, data collection, and analysis.
• Collaborate with state and local health departments.
• Develop guidelines.
• Develop and deliver high impact interventions.
• Monitor surveillance systems to track infections and prioritize prevention.
Impact Highlights

Averted over 500,000 foodborne illnesses and saved about $100 million in direct medical costs in 2010

Showed a decline of national HAI rates using NHSN: 46% reduction in central line-associated bloodstream infections since 2008

Strengthened revised overseas tuberculosis (TB) diagnosis and treatment by increasing the proportion of US immigrant applicants screened for TB from 78% to 84%. The total number of U.S. foreign-born TB cases diagnosed has also declined from 7,731 in 2007 to 6,193 cases in 2013

FY 2016 President’s Budget Request

A total of $699 million requested includes:
- $294 million above overall FY 2014 Enacted level
- $645 million in in Budget Authority (BA)
- $54 million from Prevention and Public Health Fund (PPHF)

Budget Highlights

- $264 million increase for CDC’s AR initiative to expand the nation’s ability to fight antibiotic resistance and fully implement CDC’s activities under the National Strategy for Combating Antibiotic-Resistant Bacteria.
- $10 million for laboratory capacity and safety to maintain CDC’s ability to respond to outbreaks, determine unexplained illnesses, support state and local diagnostics, and improve pathogen identification of emerging and re-emerging diseases.
- $14 million above the FY 2015 Enacted level for the NHSN to extend HAI prevention efforts to additional healthcare facilities and conduct applied research on interventions for infection prevention.

Emerging and Zoonotic Infectious Diseases Funding History

For more information, please visit www.cdc.gov/budget