Public health funding: The state of West Virginia spends an average of $220.80 a year on the public health needs of each resident, the highest state spending level in the nation. The state receives an additional $24.87 per person in funding from CDC (20th in the nation) and $50.86 per person from HRSA (3rd in the nation). The Prevention and Public Health Fund has awarded over $29 million in grants to West Virginia since 2010 for community and clinical prevention efforts and improvements to public health infrastructure.

Access to care: 11.3 percent of West Virginia residents do not have health insurance, compared to the national average of 13.1 percent.

Health measures: West Virginia has the highest smoking rate in the nation (26.7 percent of adults) and the 3rd highest cancer death rate (221.6 deaths per 100,000 people). The state has the 2nd highest obesity rate among adults in the nation (35.7 percent), the highest rate of diabetes (14.1 percent of adults) and the 6th highest rate of cardiovascular deaths (299.6 deaths per 100,000 people). Additionally, the state has the 7th highest infant mortality rate in the nation (7.4 deaths per 1,000 live births).

The road ahead: West Virginia has public health strengths such as the lowest incidence of infectious disease and the lowest prevalence of excessive drinking in the nation. However, the state clearly continues to face many public health challenges as described above. Additionally, there has been a 47 percent increase in drug deaths in the past two years (from 22.0 to 32.4 deaths per 100,000 people, the highest rate in the nation) and a 43 percent increase in children living in poverty from 18 to 25.7 percent of children in the past 10 years.

In response to an informal survey sent to our membership and 53 state Affiliates:

- A public health worker told us, “...education and awareness activities in regions where field staff are vacant have been greatly reduced - in one district by over half.”

- An employee at a district health department lamented, “The Municipal Health Services Program termination, as a CMS waiver program, impacts the elderly and disabled...The loss of our SAMHSA Family Works grant hurts African American pregnant females by reducing access to AODA and mental health services.”