



**ARTHRITIS PROGRAM  
FY 2016 APPROPRIATIONS FACT SHEET  
CENTERS FOR DISEASE CONTROL AND PREVENTION**

FY 2015	President's 2016 Budget	FY 2016 Suggested
\$9,599,000	\$13,148,000	\$13,148,000

Arthritis is the nation's most common cause of disability. It limits the activities of 22.7 million Americans, such as by preventing them from being able to climb stairs or walk more than short distances. For 1 of 3 adults of working age (18–65 years) with arthritis, it can limit the type or amount of work they do or whether they can work at all. However, people can manage and reduce the symptoms of arthritis and CDC, state health departments, and other partners work together to improve the lives of Americans with arthritis.

**Basic Facts About Arthritis**

- Arthritis affects 52.5 million Americans, over one in five adults, an increase from 46 million in 2005 and 50 million in 2010. By 2030, that number is expected to rise to nearly 67 million. Nearly two-thirds of people with arthritis are under 65 years old.
- More than half of adults with diabetes (52%) or heart disease (57%) and one-third of obese adults also have arthritis. Physical activity is a crucial element of managing these conditions, and arthritis presents unique barriers to increasing physical activity, thus compounding these chronic diseases.

**Cost Of Arthritis**

- Arthritis costs the U.S. \$128 billion per year, nearly \$81 billion in direct medical costs and \$47 billion in lost earnings. These costs are expected to increase substantially because of the aging population and increases in obesity and physical inactivity.
- State costs due to arthritis ranged from \$121 million in Wyoming to \$8.4 billion in California, also with growing trends.

**Quality Of Life Can Be Improved For People With Arthritis**

- Effective interventions for arthritis are drastically underutilized. Self-management education programs have been demonstrated to improve health status and increase health behaviors, while physical activity has significant benefits for people with arthritis. In addition, weight control and injury prevention addressed in these programs can lower risks and improve symptoms.
- More widespread use of evidence-based interventions by increasing access and availability could improve the quality of life for millions of people with arthritis.
- Early diagnosis and management can decrease disability associated with arthritis.

**CDC's Arthritis Program**

- CDC currently funds 12 states to implement and disseminate effective public health approaches to address arthritis. For example, using CDC state arthritis funding, the Utah State Department of Health is partnering with University of Utah Health Care to develop and expand the infrastructure for systematic delivery of

the Chronic Disease Self-Management Program (CDSMP). Ten clinics compose this system and collectively represent the only university healthcare system in Utah.

- Additionally, the Arthritis Foundation (AF) is using CDC funding to partner with Stanford University and the National Council on Aging to expand technical support, training, marketing and dissemination activities to make the evidence-based, online *Arthritis Self-Management Program* available nationwide. CDC works with national partners to disseminate evidence-based programs through national networks and systems of care. Since 2011 the YMCA, through a partnership with NACDD and the CDC, began to offer the evidence-based EnhanceFitness™ intervention to adults with arthritis in YMCAs in 8 states and is now offering this intervention nationwide through its national network of state associations and local branches. As of August 2014, Enhance®Fitness has been disseminated to 105 sites in 22 states. CDC and NACDD also are partnering with the National Recreation and Parks Association to implement the AF Exercise Program and Walk with Ease in local park agencies to increase the reach of these interventions. Thus far these interventions are in 28 local parks and recreation agencies, with plans to expand.
- CDC conducts surveillance and epidemiological analyses to assess the burden of arthritis, including the impact on different population groups and those that may be underserved. CDC also conducts research to evaluate new modes of physical activity and self-management awareness and promotion for people with arthritis to ensure the newest state of the science and the maximum reach for effective programs.

With the launch of the National Public Health Agenda for Osteoarthritis in early 2010, CDC and stakeholders have a continuing commitment to improving quality of life for people with arthritis. Using proven strategies of self-management education, physical activity, injury prevention and weight management, public health can help achieve healthier lives for millions of Americans.

For more information, visit: <http://www.cdc.gov/arthritis/>

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