

WASHINGTON SQUARE CITIZENS LEAGUE

Discussion Forum 7:30-9:00 pm

Monday, November 2, 2026

PUBLIC HEALTH POLICY

Lucille Pilling, Moderator

THE GOOD, THE BAD AND THE UGLY; PUBLIC HEALTH IN THE US IN 2026

Reading/Reference List (articles attached)

Mitali Banerjee Ruths, MD, The Lesson of John Snow and the Broad Street Pump. APA Journal of Ethics. Virtual Mentor. 2009;11(6):470-472. doi: 10.1001/virtualmentor.2009.11.6.mhst1-0906. <https://journalofethics.ama-assn.org/article/lesson-john-snow-and-broad-street-pump/2009-06>

What is public health? <https://www.apha.org/what-is-public-health>

HHS Organization. <https://www.hhs.gov/about/organization/org-chart/index.html>

Callan, Benedicte. Lessons From a Year of RFK Jr. Disinformation
— His lies hide an ugly political agenda that is disastrous for public health
October 3, 2026. <https://www.medpagetoday.com/opinion/second-opinions/123249>

Abandoning Americans to Disease: The Trump Administration's Reckless Crusade is Harming America's Health. COMMITTEE DEMOCRATIC STAFF REPORT, COMMITTEE ON OVERSIGHT AND GOVERNMENT REFORM, U.S. HOUSE OF REPRESENTATIVES. <https://oversightdemocrats.house.gov/imo/media/doc/2026-06-23cogrdemspublichealthreport.pdf> (introduction pp1-6)

Defend Public Health, Whopper Retrospective.
[https://www.defendpublichealth.org/sites/default/files/2026-09/Whopper Retrospective FINAL-combined.pdf](https://www.defendpublichealth.org/sites/default/files/2026-09/Whopper%20Retrospective%20FINAL-combined.pdf) (List of Whoppers pp1-13)

RFK JR.'S MEASLY MESSAGING ON MEASLES
<https://www.defendpublichealth.org/opinion/whopper-week-rfk-jrs-measly-messaging-measles>

Pennsylvania health officials brace themselves as measles outbreak expected to spread
https://www.theguardian.com/us-news/2026/oct/04/pennsylvania-health-officials-measles-outbreak?CMP=Share_iOSApp_Other

Defend Public Health, People's Health Platform.
[https://www.defendpublichealth.org/sites/default/files/2026-04/People's Health Platform for WebsiteFINAL 0.pdf](https://www.defendpublichealth.org/sites/default/files/2026-04/People's%20Health%20Platform%20for%20WebsiteFINAL%200.pdf)

Mitali Banerjee Ruths, MD, The Lesson of John Snow and the Broad Street Pump. *APA Journal of Ethics*. Virtual Mentor. 2009;11(6):470-472. doi: 10.1001/virtualmentor.2009.11.6.mhst1-0906.
<https://journalofethics.ama-assn.org/article/lesson-john-snow-and-broad-street-pump/2009-06>

AMA Journal of Ethics®

Illuminating the Art of Medicine

The Lesson of John Snow and the Broad Street Pump

Mitali Banerjee Ruths, MD

In the mid-1800s, London physician John Snow made a startling observation that would change the way that we view diseases and how they propagate. He created a map depicting where cases of cholera occurred in London's West End and found them to be clustered around a water pump on Broad Street. This led him to believe that cholera was a waterborne disease, a conclusion that went against the Victorian "miasma theory" in which Londoners ascribed the source of cholera to bad airs or vapors entering the human body [1]. John Snow's conviction about the source for the London outbreak and his concern for public health compelled him to oppose the popular beliefs of his time and convince the local council in London's West End to disable the water pump on Broad Street. Although Dr. Snow could not identify the culprit under his microscope, the bean-shaped bacteria *Vibrio cholera* that thrives in brackish water, he had his map as evidence.

This map is a tremendous contribution to the field of epidemiology, for Dr. Snow recognized that part of treating disease requires viewing patients not as individual, isolated cases, but within the larger environment in which they live. From this perspective, he realized that he could best protect the health of his community by shutting down a water pump rather than waiting for cholera patients to visit his clinic in need of treatment. To achieve this, he used his geographic correlations of the outbreak as the logic to support a public health intervention to control London's cholera epidemic. Although John Snow's model is accepted as a way to frame our understanding of infectious diseases today, it can also give physicians a blueprint for approaching illness, particularly illness caused by or related to the patient's environment.

Today, epidemiologists view the strength, severity, and propagation of infectious diseases as a product of human and physical environment. They have pioneered our understanding of large-scale phenomena, like recent outbreaks of H1N1 (or swine flu), by tracking cases, monitoring the threat of a global pandemic, and cautioning the public through mass media. In a sense, each physician is called to be an epidemiologist on a smaller scale, viewing the people and cases of disease passing through a clinic within the context of their community and, more broadly, the environment surrounding that community, like Dr. Snow's patients in London's West End.

A clinical case in the issue of *Virtual Mentor* you are now reading discusses the role of a rural physician in bringing attention to a water source contaminated by runoff from nitrate-based fertilizers used in agriculture. It examines the ethical responsibility a physician bears when several cases of methemoglobinemia in young children caused by environmental pollution occur in the local community and argues that the physician has a duty to notify authorities, help raise awareness, and address the pollution in the local water supply.

Some may regard the role of public health advocate to be independent and separate from the practice of medicine, undertaken only by those doctors who feel motivated to become activists and who identify specific causes to champion. But advocacy within our communities can have immediate and preventive effects on the prevalence of disease. Furthermore, community

physicians are often the first to observe the effects of environment on the health of their patients. For these reasons, we can consider advocacy as part of our service to the community, part of the practice of medicine, and part of the oath we have taken to protect, restore, and ensure the health of our patients to the best of our abilities. Perhaps doctors have an ethical obligation to treat not only the “internal pathophysiology” of disease, for example how microorganisms like cholera cause illness, but also the “external pathophysiology” of health and disease—how our environment serves as a factor in determining our health.

Each passing day, week, and month bring new discoveries of how profoundly affected we are by our environment, as public attention is called toward the threat of mercury in fish, pollutants in the air, or trace amounts of medications in municipal water supplies. Certainly, more research must be conducted on how conditions rising in prevalence like asthma and cancer may be correlated with our environment. This research will largely be done in laboratories and in large-scale surveys and studies. Nonetheless, physicians are embedded in communities that are being affected by their environments now, making environmental education and advocacy a way to directly improve the health of the community. Doctors must stay informed about environmental changes and their impact on human health in the same way that they stay up-to-date on the latest diagnostic tools, current antibiotic guidelines, and new treatment modalities. Being aware of the big picture can shape how we use that knowledge to influence our practices and policies. As physicians, we can be watchful over the smaller communities that we serve; we can identify environmental factors that affect the health of our patients and their families; and, when we come across something that is causing harm to our patients, we can have the courage of John Snow to turn off the Broad Street pump.

References

1. Johnson S. *The Ghost Map: The Story of London's Most Terrifying Epidemic—And How it Changed Science, Cities and the Modern World*. New York, NY: Riverhead Books; 2006.

[Google Scholar](#)

Citation

Virtual Mentor. 2009;11(6):470-472.

DOI

10.1001/virtualmentor.2009.11.6.mhst1-0906.

The viewpoints expressed in this article are those of the author(s) and do not necessarily reflect the views and policies of the AMA.

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What is public health? <https://www.apha.org/what-is-public-health>

Public health promotes and protects the health of all people and their communities. This science-based, evidence-backed field strives to give everyone a safe place to live, learn, work and play.

Why is public health important?

Public health improves our quality of life, helps children thrive, reduces human suffering and saves money. Every day, the public health field is working – often behind the scenes – to prevent hazards and keep people healthy. For example, public health is responsible for:

- Tracking disease outbreaks and vaccinating communities to avoid the spread of disease.
- Setting safety standards to protect workers.
- Developing school nutrition programs to ensure kids have access to healthy food.
- Advocating for laws to keep people safe, including smoke-free indoor air and seatbelts.
- Working to prevent gun violence.
- Addressing the impact of climate change on our health.
- Declaring racism as a public health crisis.

Who are public health professionals?

Public health work spans government, business and nonprofit sectors. Here are some examples of public health professionals:

Restaurant inspectors

Community health workers

Nutritionists

Social workers

Public health physicians and nurses

Policymakers

First responders

Health educators

Scientists and researchers

Community planners

Epidemiologists

Occupational health and safety professionals

Sanitarians

Biostatisticians

What's the difference between health care and public health?

The health care industry treats people who are sick, while public health aims to prevent people from getting sick or injured in the first place. Public health also focuses on entire populations, while health care focuses on individual patients.

How does the American Public Health Association advance public health?

APHA champions the health of all people and all communities. We strengthen the public health profession. We speak out for public health issues and policies backed by science.

We are the only organization that combines more than 150-years' perspective, a broad-based member community and the ability to influence federal policy to improve the public's health.

APHA's [Vote for Health](#) campaign seeks to simplify the voting process for the public and shine a light on the impact voting has on our health.

APHA publishes the [American Journal of Public Health](#) and [The Nation's Health](#) newspaper. At our [Annual Meeting and Expo](#), thousands of people share the latest public health research.



Health & Human Services Organizational Charts

Office of the Secretary and HHS Divisions

This organizational chart outlines the structure of our leadership and divisions and how responsibilities are organized across the organization.

Secretary

- ❖ Deputy Secretary
- ❖ Chief of Staff

- Immediate Office of the Secretary (IOS)
- Office of Intergovernmental and External Affairs (IEA)
- Office of the Secretary (OS)

OS supports the HHS Secretary by overseeing operations, providing guidance, and ensuring laws are followed fairly. Our focus is on public health, health care, and human services.

- Office of the Assistant Secretary for Administration (ASA)
- Office of the Assistant Secretary for Financial Resources (ASFR)
- Office of the Assistant Secretary for Health (OASH)
- Office of the Assistant Secretary for Legislation (ASL)
- Office of the Assistant Secretary for Planning and Evaluation (ASPE)
- Office of the Assistant Secretary for Public Affairs (ASPA)
- Office of the Chief Information Officer (OCIO)
- Office for Civil Rights (OCR)
- Departmental Appeals Board (DAB)
- Office of the General Counsel (OGC)
- Office of Global Affairs (OGA)
- Office of Inspector General (OIG)
- Office of Medicare Hearings and Appeals (OMHA)
- Office of the Nat'l Coordinator for Health Information Technology (ONC)

Divisions

Our divisions administer a wide variety of health and human services and conduct life-saving research for the nation. (See next page)

- Administration for Children and Families (ACF)
- Administration for Community Living (ACL)
- Agency for Healthcare Research and Quality (AHRQ)
- Advanced Research Projects Agency for Health (ARPA-H)
- Administration for Strategic Preparedness and Response (ASPR)
- Agency for Toxic Substances and Disease Registry (ATSDR)
- Centers for Disease Control and Prevention (CDC)
- Centers for Medicare & Medicaid Services (CMS)
- Food and Drug Administration (FDA)
- Health Resources and Services Administration (HRSA)
- Indian Health Service (IHS)
- National Institutes of Health (NIH)
- Substance Abuse and Mental Health Services Administration (SAMHSA)

<https://www.hhs.gov/about/organization/org-chart/index.html>

Perspectives > [Second Opinions](https://www.medpagetoday.com/opinion/second-opinions/123249) <https://www.medpagetoday.com/opinion/second-opinions/123249>

Lessons From a Year of RFK Jr. Disinformation

— His lies hide an ugly political agenda that is disastrous for public health

by Benedicte Callan, PhD

October 3, 2026 • 4 min read

Benedicte Callan, PhD, is health policy consultant whose long career in international health policy has included teaching at Arizona State University, the University of Texas LBJ School of Public Affairs, and the School of Public and International Affairs at Princeton University. She is a member of [Defend Public Health](#), where she leads the RFK Jr. Whopper of the Week project.

If you think having accurate information about your health matters, then the U.S. has a problem. I know, because I've spent the last year working with a team to track Health and Human Services Secretary Robert F. Kennedy Jr.'s distortions, deceptions, and flat-out falsehoods, and analyze what we found. The results were shocking.

Large media outlets are often reluctant to say that a public figure has lied, arguing -- not unreasonably -- that they can't read the person's mind or know their intent. But sometimes the patterns become so obvious they cannot be ignored. That's exactly what happened in our first year of tracking and debunking Kennedy.

Kennedy is consistently, relentlessly dishonest. Now into our second year of tracking his falsehoods, we have no chance of running out of material. Maybe more importantly, his statements consistently follow well-established disinformation techniques, the kind used by people whose job is to spread misleading propaganda.

For example, he regularly makes claims that appear designed to frighten people, especially parents. Propagandists know that strong emotions like fear and anger often override facts and logic in the human psyche, and Kennedy regularly spins scary but demonstrably false stories. He has suggested that:

- Lyme disease is a manufactured bioweapon;
- Vaccines may cause autism;
- Antidepressants may make people violent; and
- Fluoride lowers intelligence.

As we've documented weekly, these claims have no scientific basis. But they create doubt and uncertainty about medicine and science that have real consequences, including declining vaccination rates and states and cities ending drinking water fluoridation.

Kennedy also likes to persuade using stories instead of data. Skilled propagandists know that gripping stories can be powerfully persuasive, and Kennedy tells them with relish.

One of his favorite tall tales involves Americans having been healthier when his uncle, John F. Kennedy, was president. "I was raised in a time where we did not have a chronic disease epidemic," Kennedy testified during his confirmation hearing, suggesting that since his uncle's

presidency, the percentage of children with chronic illnesses had surged from 2% to 66%. At times he's given different figures, but the message stays the same. His claims are nonsense. A 1960 National Health Survey, released during the Kennedy presidency, reported that 41% of the country had one or more chronic conditions. The numbers have indeed gone up a bit since then but, given that the U.S. population has gotten older (and people live with now-treatable conditions that would have killed their grandparents), those changes aren't a big surprise.

More importantly, U.S. life expectancy jumped from 69.7 years in 1960 to 79 years in 2024. Children are five times less likely to die in infancy or early childhood than when Kennedy was president, largely due to vaccines. Americans were not healthier then than today.

But the key thing is that stories -- even true stories -- aren't data. If my uncle drank Dr. Pepper every day and lived to be 105, that doesn't prove that drinking Dr. Pepper daily leads to long life. Kennedy uses stories because they persuade and because the actual facts nearly always undercut his case. When he does cite data, Kennedy carefully cherry-picks the few snippets that support his preconceived views and ignores or dismisses the rest, often claiming, as conspiracy theorists regularly do, that any information contradicting him is corrupt or tainted.

A close look at Kennedy's deceptions also provides a window into his warped and punitive attitudes toward health. During his Senate confirmation hearing, Kennedy vowed "to make people more accountable for their own health." And individual responsibility is one of his recurring themes. But he ignores the many factors that are beyond a person's control. How do you "eat real food" if you can't afford it? Or if you live in a food desert? Or you work 60 hours a week for minimum wage just to pay the rent?

There's a term for those factors that Kennedy obscures: "social determinants of health." Everything in your life -- your job, your income, your neighborhood, and more -- affects your ability to stay healthy. We know that poverty and unsafe housing, for example, have a huge impact, no matter how much a person wants to stay healthy. And we know that race, gender, immigration status, sexual orientation, gender identity, and other factors play a huge role, because discrimination and stereotyping still exist. Kennedy not only disregards all this, he's cut off research that would help us understand it better -- terminating hundreds of NIH research grants for the sin of daring to mention subjects like "equity," "racial disparities," "minority health," "LGBTQ populations," and "COVID-19."

Kennedy uses personal responsibility as a smokescreen obscuring all his actions against public health. He is destroying the government programs that help our communities create safer environments, help people make healthier choices for their families, and improve access to healthcare. Kennedy's lies matter because they hide an ugly political agenda that the public needs to understand.

We don't have to put up with this. Soon, Americans will vote to elect a new Congress, as well as a variety of state and local offices. Voters need to make clear to candidates of every party that we cannot allow federal health leaders charged with protecting our lives to be gushers of disinformation. We must ask every candidate what they will do to protect public health and to bring honest leadership back to the Department of Health and Human Services.

Abandoning Americans to Disease: The Trump Administration's Reckless Crusade is Harming America's Health. COMMITTEE DEMOCRATIC STAFF REPORT, COMMITTEE ON OVERSIGHT AND GOVERNMENT REFORM, U.S. HOUSE OF REPRESENTATIVES.

<https://oversightdemocrats.house.gov/imo/media/doc/2026-06-23cogrdemspublichealthreport.pdf>
(introduction pp1-6)

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June 23, 2026

For months, Oversight Democrats have been investigating the Trump Administration's systematic and sweeping attack on our public health infrastructure. Today's report, "Abandoning Americans to Disease: The Trump Administration's Reckless Crusade is Harming America's Health," details the findings from our comprehensive review of thousands of pieces of evidence and interviews with over 80 officials, experts, and researchers both inside and outside the government.

The facts speak for themselves. RFK Jr. and the Trump administration have pursued dangerous policies with catastrophic impacts. We document how they have undermined access to vaccines, slashed critical research, gutted food assistance for thousands of children, and have stripped away health care from millions of people. They have also betrayed the promises that RFK Jr. made to his supporters. Healthy, nutritious food is less affordable and less accessible to those who need it most. Big polluters and corporate interests have been allowed to harm the American people.

The fight for our public health is personal for me. I was Mayor of Long Beach through the worst of COVID-19. We learned hard lessons. My mom was a frontline healthcare worker, assisting nurses and doctors—and a proud SEIU member. That summer of 2020, my mom got COVID and passed away. My stepfather then got COVID and also died. My mom would have been the first in line for the vaccine that would have saved her life. But now we are watching conspiracy theorists undermine lifesaving vaccines while attacking the fabric of our public health system.

The disaster that RFK Jr. and Donald Trump are fueling isn't visible every day. But COVID-19 showed how an invisible threat can become a catastrophe in an instant. Millions of people will feel the impact of these policies. Their actions will make the American people sicker. Innocent people will die waiting for cures which RFK Jr. prevented or delayed. Others will die waiting for treatment. Others will get sicker.

This report is a critical step to unmask a growing crisis and to hold wrongdoing accountable.

Sincerely,



Robert Garcia
Ranking Member

EXECUTIVE SUMMARY

Every American knows someone suffering from disease or injury, or is suffering themselves. We know that Americans of all ages, from our kids to our seniors, are developing chronic diseases at much higher rates than in other wealthy countries. We also know our health and safety depend on a wide range of other protections, including from violence, hazardous pollution, and infectious disease. Many Americans put their faith in Donald Trump to Make America Healthy Again, trusting his alliance with Robert F. Kennedy, Jr., to lead them into a brighter future. Americans wanted this to be a future where they had improved access to healthy, whole foods free of contamination; where their health was prioritized over corporate profits; and where they could hope for new innovations and discoveries to support longer lives free from devastating diseases.

Oversight Democrats believe it is critical to build on the world class public health infrastructure and safeguards we have in this country to provide stronger protections against threats to Americans' health. But since stepping into office in 2025, President Trump and his Administration have gutted these safeguards and infrastructure while breaking their promises to Make America Healthy Again repeatedly, and with alarming indifference.

To get a more comprehensive picture of the Trump Administration's effects on Americans' health, Oversight Democrats investigated how its actions have held up to its Make America Healthy Again promises. This investigation involved interviews with more than 80 sources, including current and former senior public health officials and federal employees, scientists, researchers, health care providers, advocates, parents, and other individuals impacted by the Administration's actions.

Oversight Democrats found that the Trump Administration's sweeping dismantling of health programs, policies, and infrastructure far outweigh any benefits from other Administration policies. The result has been a methodical elimination of the safeguards that have quietly protected and advanced Americans' health for years, leaving us newly vulnerable to threats as diverse as foodborne illness, increased violence, exposure to pesticides and chemicals, and diseases long considered eradicated in this country.

Across more than 100 case studies, Committee Democrats found that the Trump Administration's actions are often in direct contradiction to its MAHA messaging. Committee Democrats also found that the Trump Administration has repeatedly sacrificed glaringly obvious opportunities to preserve or advance the health of all Americans in order to achieve comparatively minor, short-lived cost savings or political wins.

When comparing across case studies, it became clear that in many cases, the Trump Administration is following an especially dangerous pattern: the Trump Administration is 1) increasing risk to Americans' health; 2) reducing treatment options for Americans once they do become sick or injured; and 3) eliminating data collection so that the harms of their actions are harder to track. For example, the public is receiving fewer critical warnings about disease outbreaks at the same time that the Trump Administration is driving more disease outbreaks and cutting funding for research into new treatments and more effective responses.

From imposing the effects of an anti-vaccine agenda on all Americans, to canceling scientific research and needlessly delaying medicines and treatments, to dismantling the programs that keep Americans safe in their daily lives, to increasing food insecurity and kicking millions of Americans off their health insurance, the Trump Administration is making Americans less healthy and less safe. Meanwhile, corporate polluters and large agribusiness food corporations will be allowed to continue policies proven to harm public health on a large scale. The evidence is clear: the Trump Administration is not making Americans healthier—it is abandoning Americans to disease.

KEY FINDINGS

1. MEDICINE AND TREATMENT

A. The Trump Administration gutted America's health research infrastructure by terminating or suspending more than \$16 billion being used to fight diseases like cancer, Alzheimer's, and diabetes. Despite litigation and court orders which forced the Administration to restore funding, more than \$1.1 billion in research funding remains canceled.

B. The Trump Administration has undermined the research that fights chronic and deadly diseases while simultaneously pursuing policies that increase Americans' risk of developing these diseases.

C. The Trump Administration has allowed vaccine misinformation to destroy promising new mRNA treatments.

D. The Trump Administration is ceding the brightest minds in research and future medical breakthroughs to other countries.

2. SAFETY, TRACKING, AND ACCESS

A. The Trump Administration is dismantling public health programs that protect Americans from major health threats, including some of the very diseases Secretary Kennedy has promised to fight. B. The Trump Administration is putting wealth and profit over Americans' access to clean water and safe, healthy food. C. The Trump Administration is rolling back or dismantling federal programs that ensure Americans have access to health care.

3. VACCINES

A. The Trump Administration has restricted, delayed, and complicated access to vaccines for millions of Americans, including by politicizing a key vaccine advisory committee.

B. The Trump Administration's attacks on childhood vaccines raise risks of serious illness and needless death for children.

C. The Trump Administration increased risks of illness, hospitalization, and long-term chronic disease by taking away COVID-19 vaccines from people trying to keep their families safe.

D. The Trump Administration pushed out respected scientists, canceled lifesaving vaccine research, and censored evidence that demonstrates vaccines are safe.

METHODOLOGY

Since October 2025, Committee Democrats have investigated the effects of the Trump Administration on public health, including the Administration's cuts to scientific research, efforts to dismantle public health and science agencies, and changes to vaccine policies. During the course of the investigation, Committee Democrats spoke with more than 80 current and former senior public health officials and federal employees, scientists, researchers, health care providers, advocates, parents, and other individuals who were present or personally affected as the Trump Administration implemented its upheaval. All individuals were selected for their unique vantage point of the Trump Administration's actions and for their significant experience in public health, science, research, or the federal government.

INTRODUCTION

For decades, the United States has had one of the most successful and robust scientific research and medical innovation systems in the world, responsible for groundbreaking discoveries and approaches to public health that have saved and improved millions of lives.¹ At the same time, studies consistently find that the United States spends more on health care than other countries but experiences worse health outcomes, with Americans dying three years earlier on average than people in similarly-positioned

countries.² A 2025 study found a generalized decline in children’s health over the past 17 years, with U.S. children nearly twice as likely to die than children in other high-income countries, more likely to have chronic health issues, and more likely to be diagnosed with conditions like anxiety, depression, eating disorders, and obesity.³

An effective approach to “Making America Healthy Again” would involve building on America’s world-class research and innovation system while meaningfully addressing the drivers of poor health. The Trump Administration has done the opposite, disrupting and politicizing American research and innovation while making the drivers of poor health worse, including cutting Americans’ access to safe and healthy food, affordable health care, vaccines, and programs that reduce health hazards.

The Trump Administration’s approach is striking considering its broad campaign promise to “Make America Healthy Again.” The Make America Healthy Again (MAHA) movement of the Robert F. Kennedy, Jr., and then Donald Trump presidential campaigns was formalized on February 13, 2025, through an executive order that created a “MAHA Commission” (the Commission) and tasked the Commission with developing a MAHA strategy.⁴

The Commission’s first report, published on May 22, 2025, states, among other things, that ultra-processed foods and pesticides are linked to negative health outcomes, including childhood diseases and chronic disease.⁵ Its second report, the MAHA Strategy, published on September 9, 2025,⁶ does not propose any direct changes to ultra-processed foods or pesticides, and even describes EPA’s existing pesticide review processes as “robust.”⁷

The Trump Administration has yet to show any concrete results that address any of these legitimate concerns, and has instead largely implemented policies and gutted programs in a manner that severely threatens Americans’ health.⁸ Based on the findings chronicled throughout this report, it is clear that the Trump Administration has broken its promises to all Americans and made the country sicker, not healthier.

¹ Delfino S, Larson A, Haines D, Grell R., World-Class Innovation, but at What Cost? A Brief Examination of the American Healthcare System, Cureus (June 3, 2023) (online at <https://pmc.ncbi.nlm.nih.gov/articles/PMC10317843/>).

² The Commonwealth Fund, U.S. Health Care from a Global Perspective, 2026 (May 28, 2026) (online at www.commonwealthfund.org/publications/issue-briefs/2026/may/us-health-care-global-perspective-2026)

³ New Research Reveals Alarming Decline in U.S. Children’s Health, UCLA Health (July 7, 2025) (online at www.uclahealth.org/news/release/new-research-reveals-alarming-decline-us-childrens-health).

⁴ Establishing the President’s Make America Health Again Commission, The White House (Feb. 13, 2025) (online at www.whitehouse.gov/presidential-actions/2025/02/establishing-the-presidents-make-america-healthy-again-commission/).

⁵ Read the Full “Make America Healthy Again” Report, New York Times (May 22, 2025) (online at www.nytimes.com/interactive/2025/05/22/us/maha-master-docdocx.html)

⁶ Read the Full “Make America Healthy Again” Report, New York Times (May 22, 2025) (online at www.nytimes.com/interactive/2025/05/22/us/maha-master-docdocx.html); MAHA Commission, Strategy Report: Make Our Children Healthy Again (Sept. 9, 2025) (online at www.whitehouse.gov/wp-content/uploads/2025/09/The-MAHA-Strategy-WH.pdf).

⁷ The New MAHA Report Lacks Teeth, Experts Say, TIME (Sept. 9, 2025) (online at <https://time.com/7315789/maha-report-strategy-plan-rfk-jr/>).

⁸ Study Finds Children in U.S. Became Increasingly Unhealthy Over Past 17 Years, PBS (July 7, 2025) (online at www.pbs.org/newshour/health/study-finds-children-in-u-s-became-increasingly-unhealthy-over-past-17-years).



Whoppers in Review: RFK Jr's Killer Year of Lies

By: Benedicte Callan, PhD; Mary Canales, RN, PhD; David Goldberg, MD; Aurora Horstcamp, MD; Elizabeth T. Jacobs, PhD; Bruce Mirken; David Moskowitz, MFA; Miriam Rabkin, MD, MPH, Alicia Yamin, JD, MPH, PhD

Introduction

Over the strenuous objections of public health experts, including Defend Public Health, in February 2025 the U.S. Senate confirmed Robert F. Kennedy Jr. as Secretary of Health and Human Services (HHS). Once in office, Kennedy began dismantling U.S. health agencies and spewing disinformation that has had deadly impacts, undermining the public's trust in health science and sowing confusion. Kennedy has used the materials he produces in his official capacity as HHS Secretary, including official documents, websites, videos, podcasts, and even a cooking show, as state-sanctioned propaganda in support of his fringe beliefs.

As a unique volunteer advocacy organization fighting to protect the health of all Americans from the Trump administration's attacks on science and public health, members of Defend Public Health (DPH) found ourselves uniquely positioned to take on Kennedy's deceptions. DPH represents thousands of professionals who work in clinical practices and government agencies, as social workers, lab technicians, healthcare providers, scientists, health journalists, lawyers, and policymakers, enabling us to invoke a wide variety of expertise.

A group of public health professionals within DPH decided to track and debunk Kennedy's assertions by posting a "Whopper of the Week" on our website as a counterpoint to Secretary Kennedy's statements. The first Whopper was published on September 2, 2025. Each Whopper follows the same structure: Identify the lie, show why it is untrue, explain its political or commercial utility, and explore the risks it poses to the health of the people of the United States. Some of Kennedy's statements subtly twist a true statement; for example, while it is true that diet is related to diabetes, changing one's diet alone typically will not cure it. Others are blatant conspiracy theories, such as his claim (despite some equivocation more recently) that HIV does not cause AIDS. The aim of weekly Whoppers was not to counter every falsehood; there were simply too many. Instead, we chose Whoppers that were egregiously wrong, politically salient, and reflected Kennedy's thought processes or priorities.

In a democracy, the head of the government agency responsible for public health is accountable for providing accurate information to the public that reflects the current understanding of the science, the agency's understanding of a problem, and the types of actions it proposes to support the population. Official statements and other communications from the Secretary of Health and Human Services necessarily must reflect a degree of deference to and respect for the expertise of the agency staff as well as other independent researchers.

Kennedy, on the other hand, consistently undermines science, the importance of government programs, the norms of what constitutes public health, and the dedicated workforce of HHS. His actions weaken federal public health infrastructure, and when experts are silenced at

the risk of losing their jobs, the convoluted, fringe ideas of Kennedy and the MAHA coalition gain attention. Taken together, the Whoppers illustrate why Kennedy's leadership is antithetical to the established concepts of good governance or the belief that government can be a positive force in making people's lives and health better. Each falsehood reveals a world in which information is obscured, one or more programs or roles of public health are undermined, and wide swaths of the population are put in danger.

Documentation of the frequency and scope of Kennedy's lies is important to create an annotated record of this government-sanctioned disinformation in order to ensure it is not lost to history or minimized by those seeking to whitewash the damage he has done to public health in the U.S. Just as importantly, we want to give the public factual information about the harms these lies cause. The Whoppers provide readers with enough information to confirm a particular claim is untrue, expose Kennedy's techniques and suggest his motivations, and point to reliable sources of information on the topic. Ideally, readers will learn, share and amplify the truth. Our hope is to create a multitude of messengers grounded in medical, scientific and political reality, who can confidently refute Kennedy's firehose of falsehoods, and ultimately provide politicians with sufficient evidence to remove him from office.

After one year of Whoppers, what have we learned about Kennedy's communication strategy, policy priorities, governing style, and effectiveness as a leader? Read on for a summary of 12 lessons gleaned from closely following Kennedy's agenda of destruction.

Appendix 1. Chronology of the Whoppers of the Week.

#	Whopper Titles	Dates
1	<u>Kennedy Claims That COVID19 Vaccines Are Accessible to All Who Want Them</u>	9/03/25
2	<u>Robert F. Kennedy Jr., Claims That Vaccines Cause Autism</u>	9/10/25
3	<u>1.2 Million Americans Died Of COVID19. But the Secretary of Health and Human Services Has No Idea</u>	9/17/25
4	<u>Kennedy's Lies About Fluoride Undermine Public Health</u>	9/24/25
5	<u>RFK Jr. Blames Tylenol Taken in Pregnancy for Autism</u>	9/30/26
6	<u>RFK Jr. is Dead Wrong That Babies Won't Get Hepatitis B</u>	10/08/25
7	<u>RFK Jr. Frightens Parents with False Claims About COVID Vaccine Dangers</u>	10/15/25
8	<u>RFK Jr.'s Claims of "Immune Overload" is Nonsense and Ignores How the Immune System Works</u>	10/22/25
9	<u>RFK Jr. Makes Up Spooky Stories about Old Men Being More Virile than Teens</u>	10/29/25

10	<u>RFK Jr. Wants to Remove Aluminum From Vaccines and Endanger Americans' Health</u>	11/05/25
11	<u>RFK Jr. Says He Gets Fan Mail from Scientists and Doctors. The Letters Sent to Congress Actually Ask for His Resignation</u>	11/12/25
12	<u>RFK's "Unbiased" Vaccine Panel is actually packed with Anti-vaxxers</u>	11/19/25
13	<u>RFK Jr. Has Plainly Stated His Belief in the Falsehoods of AIDS Denialism</u>	11/26/25
14	<u>RFK Jr. Wants You to Fortify Your Immune System So He Can Deprive You of Modern Medicine</u>	12/03/25
15	<u>No, RFK Jr., Antidepressants Don't Cause Mass Shootings</u>	12/10/25
16	<u>RFK Jr. Spreads Disinformation Again About Vaccines and Food Allergies</u>	12/17/25
17	<u>RFK Jr. Cloaks Anti-vaxx Quackery in the Language of Informed Consent</u>	1/07/26
18	<u>Lyme Disease Is Not a Bioweapon!</u>	1/14/26
19	<u>RFK's Obsession with Placebo Controlled Safety Trials is Dangerous</u>	1/21/26
20	<u>RFK's Upside Down Food Pyramid is a Cardiologists's Nightmare</u>	1/28/26
21	<u>Healthcare for Trans Kids is Medicine, Not Ideology</u>	2/04/26
22	<u>RFK Jr.'s Bogus Attacks on Mifepristone Threaten Abortion Access</u>	2/11/26
23	<u>RFK Jr went to Samoa to spread antivax ideas and lied about it to Congress</u>	2/19/26
24	<u>Americans Were Not Healthier When RFK Jr.'s Uncle Was President</u>	2/25/26
25	<u>No, RFK Jr., Guidance About Menopausal Hormone Therapy Isn't a "War on Women"</u>	3/11/26
26	<u>In a Deadly Flu Season, RFK Jr. Discourages Vaccination</u>	3/18/26
27	<u>RFK Jr.'s Search for Hidden Vaccine Injuries Fails Again</u>	3/25/26
28	<u>RFK Jr. Waffles on Glyphosates to Cover Policy Weakness</u>	4/1/26
29	<u>RFK Jr.s' War on Public Health is Framed as "Restoring Trust"</u>	4/8/26
30	<u>RFK Jr.'s Peptide Vibes Influence FDA Policies</u>	4/15/26
31	<u>Food dyes: RFK Jr. talks big, does little</u>	4/22/26
32	<u>RFK Jr. Denies Role of Vaccines in History of Child Mortality</u>	4/29/26

33	<u>It Takes a Village and RFK Jr. Is the Village Idiot</u>	5/06/26
34	<u>RFK Jr. Places "Flu Freedom" Above Military Readiness</u>	5/13/26
35	<u>Kennedy Denies the One Big Beautiful Bill Act's Spending Cuts to Medicaid</u>	5/20/26
36	<u>Kennedy Spreads Nonsense About Antidepressants</u>	5/27/26
37	<u>RFK Jr. Slanders Immigrants, Blaming Them for Infectious Disease Outbreaks</u>	6/03/26
38	<u>RFK Jr. is Silent as Trump Demotes Graduate Health Degrees</u>	6/10/26
39	<u>RFK Jr.'s Diet Cure for Diabetes Is Too Simplistic</u>	6/17/26
40	<u>Moms.gov Hides Information Moms Need to Be Healthy</u>	6/24/26
41	<u>Raw Milk is Risky. RFK Jr. Wants Americans to Drink More of It</u>	7/01/26
42	<u>RFK Jr. Says Obesity Rates Dropped Under Trump. Omits the Role of GLP-1 Drugs</u>	7/08/26
43	<u>RFK Jr.'s Podcast Is an Anecdote Factory with No Scientific Relevance</u>	7/15/26
44	<u>RFK Jr. Risks Making Americans Smokers Again</u>	7/22/26
45	<u>RFK Jr. Claims We'll Lead Medical Discovery – and Cuts Research</u>	7/29/26
46	<u>Yes, RFK Jr., Your Cuts Did Weaken the Cyclospora Response</u>	8/05/26
47	<u>The Executive Order on Vaccines is not Gold Standard Science</u>	8/12/26
48	<u>RFK Jr. Silences Preventive Health Experts and Harms Primary Care</u>	8/19/26
49	<u>Kennedy Fails on Ultra-Processed Foods</u>	8/27/26
50	<u>RFK Jr. Wants Us to Believe a Baby Died "With" Measles, Not "Of" Measles</u>	9/03/26

<https://www.defendpublichealth.org/opinion/whopper-week-rfk-jrs-measly-messaging-measles>

Opinion, October 7, 2026

Whopper of the Week: RFK Jr.'s Measly Messaging On Measles

RFK JR.'S MEASLY MESSAGING ON MEASLES

"I have never been anti-vaccine." – Robert F. Kennedy Jr., April 16, 2026

SUMMARY

The MMR vaccine is safe and highly effective at preventing measles, but Health Secretary Robert F. Kennedy Jr. continues to send mixed messages to Americans, despite multiple regional outbreaks throughout the country. As of October 1, 2026, the CDC reports 3887 confirmed measles cases, far surpassing the 2025 total, while Pennsylvania has reported five measles associated deaths for the year. Kennedy has defended himself in Congress against the accusation that he is in part responsible for the highest number of measles cases seen since 1991. "I have never been anti-vaccine," he told Congress last April. Surprisingly, in August Kennedy told Dana Bash on CNN that "parents should get their children vaccinated for measles." But in September, speaking to his MAHA base, Kennedy avoided talking about the measles and renewed his attacks on vaccines, casting doubt on their safety, efficacy and timing, and promising his agency would "ask the questions that you and millions of American parents have been asking for years."

Secretary Kennedy is unwilling to deliver the clear, simple message that measles is a serious disease that can be safely avoided with two doses of the measles, mumps, rubella (MMR) vaccine.

WHY THIS IS A WHOPPER

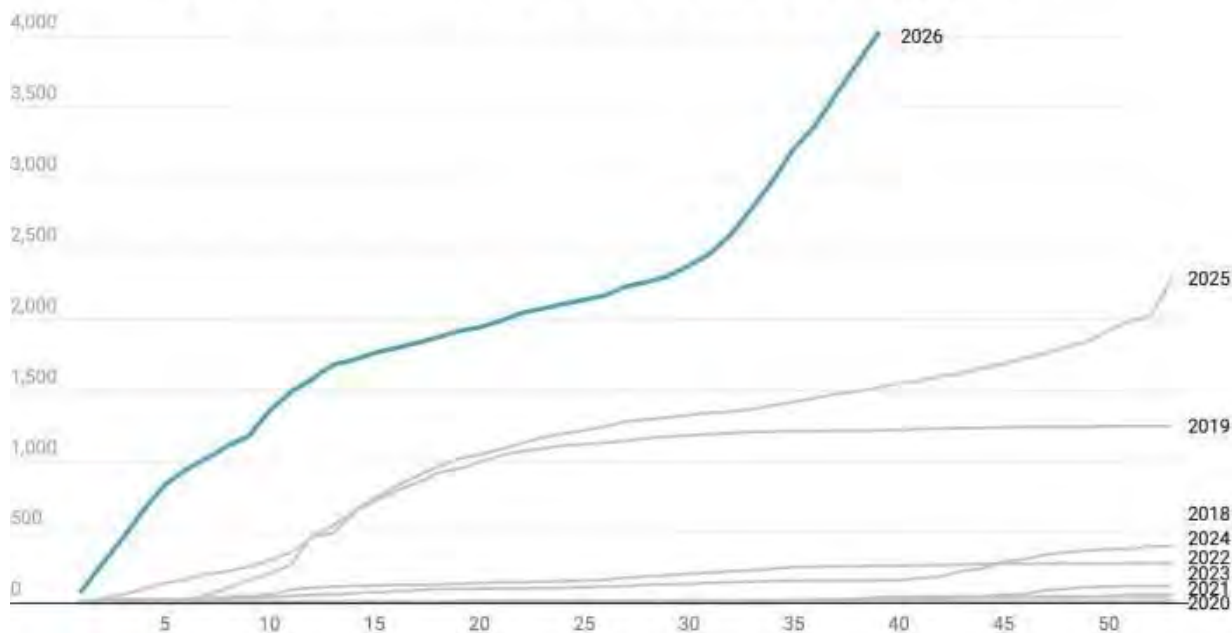
Measles is the most contagious human infectious disease. When exposed to the measles virus, 90% of the unvaccinated will get infected. In the current outbreak, 97% of the cases have been among unvaccinated individuals. Fortunately, measles is also easily preventable. Two doses of MMR vaccine in childhood are about 97% effective at preventing measles, providing long-term and possibly lifelong immunity.

Before the introduction of the measles vaccine in 1963, measles epidemics would occur every 2-3 years. In the United States, there were an estimated 3-4 million cases of measles each year, leading to 48,000 hospitalizations, 1,000 cases of encephalitis, and 400 to 500 deaths. Over the last thirty years, measles vaccination has prevented an estimated 104 million cases and 85,000 deaths in the United States.

Alarming, MMR vaccination rates have been declining as parents opt out of vaccination due to personal or religious reasons and vaccine misinformation is amplified on social media. During the

2025-2026 school year, only 92.4% of kindergarteners were vaccinated against the measles, down from 95.2% in 2019-2020. The percentage change is small, but dipping below the 95% immunization rates allows the virus to spread due to loss of herd immunity. According to data from Johns Hopkins University, measles cases in the U.S. have been growing rapidly since 2025. [See Figure below.]

Cumulative measles cases reported in the United States by year



From: <https://publichealth.jhu.edu/ivac/resources/us-measles-tracker>

For decades, Kennedy has minimized measles, claiming it is a mild disease and easy to treat. “The cure for measles is chicken soup and vitamin A,” he told an Amish community in Lancaster County, Pennsylvania in 2021. Vitamin A does not cure measles; it is only recommended in malnourished, vitamin A deficient individuals who are rare in the US. There is also no evidence that cod liver oil or antibiotics work – or chicken soup, for that matter. There is no cure for the measles, but if exposed you can still prevent illness if an MMR vaccine is given within three days.

Measles is a serious illness. The CDC reports that close to 10% of cases in the 2026 outbreak have required hospitalization, while the figure for Pennsylvania is 20%. Measles can cause complications such as ear infections, severe diarrhea, pneumonia, encephalitis (brain swelling), or death. Certain groups such as infants, pregnant women and immunocompromised are at higher risk of complications. One in one thousand cases of measles leads to encephalitis which can cause permanent brain damage. One to three out of every thousand children will die from respiratory or neurological complications.

Kennedy has also falsely claimed that measles “boosts your immune system later in life against cancers, atopic diseases, cardiac disease.” No such studies exist. Kennedy lauds the supposed benefits of “natural measles” but ignores the damage it causes to the immune cells that can wipe out 11-73% of a person’s antibody repertoire and leave them vulnerable to other infections, like mumps or whooping cough, for years. He also fails to mention that 1 in 25,000 measles cases will develop a rare and fatal brain complication, subacute sclerosing panencephalitis, 7-10 yrs after the initial infection.

Kennedy has acknowledged that the MMR vaccine is effective, but on safety he hedges with “It’s safe for most people.” That’s misleading. While no vaccine is risk free, the risks associated with the measles disease far outweigh those of immunization for the general population. A Cochrane Review of 138 studies, with millions of participants, found that the MMR vaccine does not lead to increased risk of autism, leukemia, asthma, hay fever, type 1 diabetes mellitus, gait disturbance, Crohn’s disease, demyelinating diseases, or bacterial or viral infections.

WHY IT MATTERS

Kennedy is not only fostering doubt among parents, as Secretary of Health he is also creating new barriers to vaccination. On August 10, 2026, President Trump signed an executive order recommending the MMR vaccine be separated into its three components (measles, mumps and rubella). According to Paul Offit, a pediatric infectious disease specialist at the University of Pennsylvania, that means “you get six shots instead of two, which will benefit you in no way in terms of better safety or better efficacy.” It will, however, make it harder and more expensive for parents to complete the vaccination series by requiring more visits to the pediatrician and more time off from work.

The Director of the American Academy of Pediatrics, Andrew Racine criticized the President’s announcement as dangerous. “The only purpose of this announcement is to sow confusion so that more people doubt the importance of vaccines. Delaying or skipping shots is risky, especially as measles continues to spread and children go back to school.”

Measles cases in the United States are the highest they have been in 35 years. Secretary Kennedy’s words and actions matter. He should clearly endorse the MMR vaccine, publish trustworthy data and help states respond to outbreaks. Instead, his message is muddled and he pushes policies that confuse parents and reduce vaccine access. This November vote for public health candidates at the midterm elections and encourage Congress to impeach Kennedy before he does further damage to the health of our children and our nation.

Contributions by: Aurora Horstkamp, M.D., Benedicte Callan, Ph.D., Bruce Mirken, David

https://www.theguardian.com/us-news/2026/oct/04/pennsylvania-health-officials-measles-outbreak?CMP=Share_iOSApp_Other

Pennsylvania health officials brace themselves as measles outbreak expected to spread

Most counties don't have their own health agencies, and some specific population groups have low vaccination rates

Tobi Thomas *Health and inequalities correspondent*

Sun 4 Oct 2026 06.00 EDT Last modified on Mon 5 Oct 2026 14.56 EDT

Pennsylvania health officials brace for expected spread of measles outbreak

Most counties don't have their own health agencies, and some specific population groups have low vaccination rates

Pennsylvania is bracing for a wave of measles cases, with some public health officials concerned that it's "only a matter of time" until the disease spreads beyond the outbreak's center.

Last week the state reported its fifth measles-associated death amid 943 confirmed cases across 39 counties. The outbreak comes amid concerns that public health in the US has been hit by increasing vaccine skepticism, especially due to the power and influence of the controversial health secretary, Robert F Kennedy Jr.

Contributing to the challenge is that Pennsylvania is one of the few US states where its counties mostly lack their own health department, with only seven of its 67 counties having their own.

Lancaster county, which doesn't have its own health department, has seen the highest number of cases, at 381, believed to be mostly among the Amish or similar religious groups who have historically low rates of measles, mumps and rubella (MMR) vaccine uptake. Health officials, doctors and other members of the community in the county are now attempting to establish its own health department to better tackle the outbreak.

Jeanne Franklin, the director of Chester county's health department, said that her county, which has the third highest number of cases, at 83, is preparing for an influx of cases from neighboring Lancaster.

"We have a very long border with Lancaster county, and these types of disease don't care about borders," Franklin said. "It's going to keep going and find a person who isn't vaccinated. We're operating with the assumption that the disease may jump and spread to non-Plain [Amish] community members. Our goal is to prevent that, but we assume that it may happen."

She added that although many Amish people have not been vaccinated, it's not because they are anti-vaxxers, but rather because "they were either unaware of it or they don't seek out healthcare as frequently as other residents".

She added: "But they're willing to have the conversation and make a decision on what's happening today. They're not making decisions based on the myths out there, but because their neighbors are impacted."

Amid active surveillance of measles cases, contact tracing and setting up community vaccination centers, the county is also working to dispel misinformation some of its residents have regarding the safety of the vaccine.

"We have people in key positions saying it isn't an outbreak, it isn't a problem. We have people who approach our nurses and say that they were told the vaccine will make them sterile, or that there's a

microchip within it,” Franklin said.

But for Franklin, the fact that Chester county is one of the few counties to have its own health department is a clear advantage in the race to stop the spread of the disease.

“By having our own health department [it] means that we already have the infrastructure in place, and we prepare for these things all year round,” Franklin said. “With the number of counties [the state has] to provide support to, they can’t possibly know all the key partners in a geographical area.”

She added: “The state has a finite set of employees, while I can pull my employees away from their normal jobs and say we need help with this. We live here, we know it, and we’re working with the communities and the organizations who know us. I think every county needs a health department, but we’re just not set up that way in Pennsylvania while other states are.”

Dr Richard Lorraine, the medical director of Montgomery county’s office of public health, said that it was a “matter of time” before the third most populous county in Pennsylvania would begin to see measles cases.

“We recognize that essentially it’s all around us, and so a big focus for the county is immunization,” Lorraine said. “It’s the best preventative measure and where the county is focusing its efforts on.”

Working closely with community organizers, Lorraine said the county was making sure that every resident was able to be vaccinated regardless of their insurance status.

“Because we are a public health agency, our mandate is to provide for members of our population for the most part who are underinsured, and there’s a very high percentage who aren’t insured,” Lorraine said. “And through our partnership with pharmacies we’re able to open these clinics for everyone. So whether you have insurance or if you don’t, we can work it out so that someone is able to administer a vaccine.”

Lora Werner, the director of the Delaware county health department, said that her agency was facing several challenges in protecting residents from the virus.

Among them was the collapse of Crozer Health, Delaware county’s largest healthcare system, due to bankruptcy last year.

“They were a huge provider of pediatric care,” Werner said. “And although we do have a high vaccination rate across Delaware county, there are pockets where they aren’t as good.”

For Werner, the newly established local health department has been a gamechanger for promoting public health initiatives in the county.

“We are the newest health department on the block, and we’re so passionate about the fact that we’re now here and can serve our residents,” Werner said. “We’re deeply integrated into the social networks.”

She added: “Creating a new department was very challenging, and we’re a very odd state in this regard,” Werner said. “If you want to have one you need to have a referendum to establish one. But it’s not required, so we have a mishmash of the counties that have taken that step and those that have not.”

The Guardian has approached the Pennsylvania health department for comment.



Science.
Compassion.
People Power.

People's Health Platform

After a year of relentless attacks on the health of Americans from the highest levels of government, Defend Public Health believes it is critical to not just fight back against those attacks, but to articulate a positive vision for what U.S. public health can and should be in the future. In our view, we can't just rebuild what has been broken. We must build something better, more expansive, that truly gives everyone in the U.S. access to what they need for a healthy life.

Executive Summary

1. **Guarantee healthcare for all.** Immediately restore cuts in programs like Medicaid and move swiftly to create a healthcare system that truly covers everyone without cost getting in the way.
2. **Put science back in public health.** Restore scientific integrity to federal science institutions as well as funding for needed research while putting qualified professionals in charge.
3. **Rebuild public health infrastructure.** Rebuild, expand and reimagine public health infrastructure at all levels, emphasizing improved community engagement and accountability.
4. **Protect and expand access to sexual, reproductive and gender-affirming healthcare.** End political attacks on contraception, abortion, gender-affirming care and other forms of sexual and reproductive health care and protect access to this care.
5. **Combat health inequity.** Act to ensure all have an equal chance at good health, regardless of race, ethnicity, economic status, disability, rural residence, LGBTQ+ status, etc., and make sure health programs and research support such efforts.
6. **Make our communities healthier and safer.** Because health isn't just about medicine, implement policies ensuring access to the things required for a healthy life, like access to healthy food, clean air, and safe, sanitary housing.
7. **Save our health by saving our planet.** Recognize the dire threat pollution and climate change pose to life and health and restore and strengthen policies to promote clean air and renewable energy.
8. **Prepare for the next pandemic.** Because we know the next pandemic is coming, rebuild and strengthen the infrastructure to protect us from it.
9. **Rejoin global efforts to protect the public's health.** Because we can't go it alone in an interconnected world, rejoin the WHO and other international organizations and efforts to protect health.
10. **Tax the billionaires to invest in our public health.** Enact a fair tax system that makes the wealthy pay their fair share and get billionaires' money out of politics so that we can finally make the investments we need.

People's Health Platform

1. **Guarantee healthcare for all**

We must ensure that everyone can get the healthcare they need. This should include immediately reversing cuts made to Medicaid and the Affordable Care Act, but that is just the beginning. We can begin now to build a national healthcare system that guarantees everyone in the U.S. the care they need, including comprehensive pregnancy and postpartum care for at least one year, evidence-based preventive care, and treatment for mental health and substance use disorder, without cost getting in the way and without the unconscionable burden of medical debt.

2. **Put science back in public health**

Scientific integrity must be restored at the National Institutes of Health, Centers for Disease Control and Prevention, the Environmental Protection Agency and other governmental organizations. Funding for life-saving research, including research related to diversity, equity and inclusion, must be restored, and political appointees with no training, experience, or knowledge of public health must be removed, particularly those in leadership roles. Instead, qualified professionals who will ensure access to safe, effective medicines and vaccines and promote their appropriate use must be placed in key roles. Along with these steps, federal officials must combat misinformation instead of promoting it, as the current administration has done.

3. **Rebuild public health infrastructure**

Robust public health practice goes hand-in-hand with public health research. The public health system at the state and local levels must be reimaged and rebuilt with multipronged efforts to increase funding and training opportunities to fill critical workforce gaps that have been created by the current administration's decimation of public health programs. These rebuilt programs must include robust data collection and dissemination systems, real community engagement and greater accountability as essential to these efforts.

4. **Protect and expand access to sexual, reproductive and gender-affirming healthcare**

End political attacks on contraception, abortion, gender-affirming care and other forms of sexual and reproductive health care. The government must act to protect rights, not undercut them, and accelerate progress toward a world characterized by reproductive justice. Legal protections for this care, which is essential to health and wellbeing, must be firmly established.

5. **Combat health inequity**

Everyone in the U.S. should have the chance to survive and thrive. Today in this country, your life expectancy depends on your ZIP code, and systemic discrimination against Black, Indigenous, AANHPI, Latino/a/e/x, and other people of color, those with disabilities, and the LGBTQ+ population all contribute to substantial differences in health between groups of people. Further, our policies too often overlook the impact of wealth, income, or living in rural areas. This has all led to stark differences

across the country in your risk of getting sick and your chance of getting the care you need. We must address structural racism, end political attacks on vital efforts to ensure that all of us, regardless of where we live or what groups we belong to, have the same chance to live a healthy life, and aggressively address these inequities. Problems like this can be fixed, but only if we try. Efforts to fix them are common-sense programs to keep all Americans healthy.

6. Make our communities healthier and safer

Health isn't just medicine; it depends on the state of our communities and access to the basics we need for a healthy life. We must ensure access to safe, sanitary housing, nutritious food, clean water, and safe places to exercise, work and play, and must address gun violence, making these efforts an urgent priority. We should celebrate the contributions our immigrant neighbors make to our communities, protect their health, and end unconstitutional immigration enforcement that endangers families and communities. Instead of lecturing Americans on what they should eat, immediately reverse cuts to programs like SNAP that actually help people to eat a healthy diet and find ways to expand them where needed. Mount a serious effort to eliminate "food deserts," where little or no fresh food is currently available. Reverse recent cuts to EPA water pollution protections and ensure access to clean water. Support common-sense measures to reduce gun violence, which is the number one cause of death for U.S. children, such as laws requiring secure storage of firearms, closing loopholes for background checks for firearms sales, and reducing or eliminating the sale of weapons with large-capacity magazines.

7. Save our health by saving our planet

Climate change is an existential threat to all of us, and threatens our health in many different ways. Renew and increase efforts to reduce climate change, which has already begun to impact our lives and health. Pass legislation to restore the EPA endangerment finding and strengthen air pollution standards. Reverse the cuts and attacks on federal agencies that are working to protect our environment and double down on investments in clean energy and in programs to encourage use of clean cars and appliances.

8. Prepare for the next pandemic

The next pandemic is coming, and the infrastructure to protect us against it has been decimated in the U.S. We need to restore and strengthen these programs at our research and public health agencies. This includes removing the needless restrictions that strangle U.S. research on pandemic pathogens and vaccine development. Fund urgently-needed research and disease monitoring so that we're ready for the next viruses or bacteria that threaten us.

9. Rejoin global efforts to protect the public's health

The U.S. has left the World Health Organization and other international health bodies, which means we're trying to go it alone against global health threats. It just won't work, because viruses and bacteria don't care about borders. Recognize that we can never be safe from preventable disease if

the rest of the world isn't safe and act accordingly: Rejoin the WHO and other worldwide organizations and efforts that protect lives and health and restore funding for global health programs under USAID. Restore foreign assistance that, before recent cuts, saved the lives and health of millions around the world. Establish a U.S. Department of Global Health Equity to strengthen our work with other nations and international organizations.

10. Tax the billionaires to invest in our public health

Economic exploitation and extraction have robbed the public sector, making our public health and health systems weaker, making us sick, and putting oligarchs in charge of our nation's priorities. It's time to fix this. We can make the investments we need by addressing our unfair tax system and focusing on policies proven to advance health. We can tax the rich, fairly tax capital gains, change the tax code to make sure corporations pay their fair share, cancel student debt, get private equity firms out of our hospitals, and most importantly get billionaires and their money out of politics. We can accomplish all of what we need to do if we confront those stripping our nation for parts and profit.

Defend Public Health is a volunteer-driven network of public health researchers, healthcare workers, advocates and allies fighting to protect the health of all from the Trump administration's cruel attacks on proven, science-based public health policies. We believe that everyone has the right to what they need for a healthy life, regardless of race, ethnicity, religion, disability, sexual orientation, gender or gender identity.

DefendPublicHealth.org