

DEBBIE DINGELL
6TH DISTRICT, MICHIGAN

102 CANNON HOUSE OFFICE BUILDING
WASHINGTON, DC 20515
(202) 225-4071

HOUSE COMMITTEE ON
ENERGY AND COMMERCE
SUBCOMMITTEE ON
HEALTH
COMMERCE, MANUFACTURING, AND TRADE
COMMUNICATIONS & TECHNOLOGY

HOUSE COMMITTEE ON
NATURAL RESOURCES
SUBCOMMITTEE ON
WATER, WILDLIFE, AND FISHERIES
ENERGY AND MINERAL RESOURCES

Congress of the United States
House of Representatives
Washington, DC 20515

DISTRICT OFFICES:
2006 HOGBACK ROAD
SUITE 7
ANN ARBOR, MI 48105
(734) 481-1100

WOODHAVEN CITY HALL
21869 WEST ROAD
WOODHAVEN, MI 48183
(313) 278-2936
WEBSITE: DEBBIEDINGELL.HOUSE.GOV

September 17, 2026

The Honorable Robert F. Kennedy, Jr.
Secretary of Health and Human Services
United States Department of Health and Human Services
200 Independence Ave., SW
Washington DC, 20201

Dear Secretary Kennedy:

We write to express serious concern about the current staffing challenges and hiring processes at the Centers for Disease Control and Prevention's (CDC) National Center for Injury Prevention and Control (Injury Center). Our goal is to ensure that Injury Center grantees have the support they need to operate effectively, and that staff have the resources required to ensure appropriate oversight of federal funds allocated by Congress to injury and violence prevention efforts. The Injury Center is the nation's leading authority on preventing injuries and violence, which remain the leading cause of death for Americans ages 1 to 44¹. The Center funds programs in every state addressing urgent public health challenges, including suicide, overdose, intimate partner violence, falls, and drowning. Its staff provide technical expertise, data analysis, and oversight that ensure federal investments are used effectively and efficiently. Thanks in part to the Injury Center's work, we have seen an unprecedented 26% reduction in overdose deaths rates from 2023 to 2024².

Currently, CDC is facing significant workforce challenges due to recent reductions in force (RIFs) and ongoing hiring constraints across the agency. These staffing challenges have been especially acute at the Injury Center³. More than 200 staff members have been eliminated through RIFs, and the Center is operating with only a fraction of the full-time equivalent (FTE) employees it started with in 2025. The agency is down to fewer than 400 FTE currently, compared to over 700 in January 2025. This has left the Injury Center with critical vacancies, a significant loss of institutional knowledge, and a lack of stable leadership.

¹ Centers for Disease Control and Prevention, "Injury Center Priorities," updated Mar. 4, 2026, <https://www.cdc.gov/injury/priorities/index.html>.

² MF Garnett and AM Miniño. "Drug Overdose Deaths in the United States, 2023-2024," *NCHS Data Brief*, no. 549. (January 2026), <https://stacks.cdc.gov/view/cdc/174639>

³ G Massetti et al., "Separation from the CDC and Its Consequences for the Public Health Workforce: Findings from the CDC WISE Survey," *Health Affairs Scholar* 4, no. 7 (2026), <https://doi.org/10.1093/haschl/qxag189>

Despite submitting a request to HHS leadership for more than 150 positions to address these vacancies, the Center has only received approval to begin hiring for 40 positions. Additionally, the positions approved for hire do not match the positions that Injury Center leadership requested. Additionally, according to Injury Center officials, no new staff have been hired because the process remains lengthy, confusing, and difficult to navigate.

Since human resource functions were centralized at the Department of Health and Human Services (HHS) and no longer operate within CDC, hiring officials have shared that the protocols are no longer clearly defined and thus require them to expend more time and resources as they engage with multiple HHS offices in attempts to be responsive. This fragmented process places a substantial administrative burden on hiring officials and contributes to significant delays. Among the additional burdens, hiring officials are now required to interview every applicant received. To keep the number of mandatory interviews manageable, officials set relatively low caps on the number of applications accepted. This poses two distinct challenges. First, announcements close as soon as the cap is reached, even if the cap is reached before the closing date that was initially stated. This severely limits the applicant pool and reduces the Injury Center's ability to recruit a wide range of highly qualified subject-matter experts. Second, this imposes a significant human resource burden on the agency. For example, even a small applicant pool capped to 20 applicants requires 20 separate interviews and does not permit the agency the ability to rule out unqualified candidates to streamline this process.

Further challenges exist around ensuring employees affected by RIFs have access to these new postings. Despite the requirement that these employees must receive priority notification, this has not been the case under the new hiring processes. Without timely notification, priority hiring requirements are effectively undermined, making the hiring process less efficient and increasing the risk that the Injury Center will lose access to experienced, highly qualified personnel. Together, the consequences extend beyond individual hiring decisions. Internally, prolonged vacancies and uncertainty undermine morale, disrupt continuity, and create avoidable onboarding and training costs. Externally, hard-won progress in reducing overdose deaths and other preventable injuries is at risk, and the nation's ability to respond quickly and effectively to growing and evolving public health challenges is fundamentally undermined. If left unresolved, these challenges could contribute to a broader collapse of the nation's injury and violence prevention capacity.

We respectfully request that you:

1. Review the current hiring process to ensure the Injury Center can fill vacancies that reflect its most urgent mission and workforce needs.
2. Establish clear, streamlined hiring protocols with defined responsibilities, timelines, and points of contact across HHS and CDC.

3. Reconsider requirements that effectively mandate interviewing every applicant, allowing officials to accept broader applicant pools and conduct merit-based screening.
4. Create a timely notification and application process for qualified employees affected by reductions in force when relevant positions are announced.
5. Ensure hiring officials receive advance or immediate notice when their announcements are posted.

Prompt action is needed to ensure that the National Center for Injury Prevention and Control and other CDC centers can recruit and retain the workforce necessary to fulfill their mission. We appreciate your attention to these concerns and respectfully request a review of the processes described above.

Sincerely,



Debbie Dingell
Member of Congress



Brian Fitzpatrick
Member of Congress