



CRA Budget in Focus: Department of Health & Human Services

CRA proposes a funding level of \$90.3 billion for the Department of Health & Human Services in FY24—a decrease of \$37.2 billion or 29.2 percent from FY23 enacted levels. This decrease would amount to 25% of the \$147 billion in savings needed to return nondefense discretionary spending to the FY19 level. The Department (HHS) is a key purveyor of radical gender theory in the medical field and infuses Critical Race Theory (CRT) through the guise of “health equity” as part of its research emphasis. HHS provided the bulk of the medical guidance during COVID, resulting in lockdowns and mask mandates, all while sub-agencies like the NIH promulgated the very destructive “gain of function” research that, while unproven, is thought to potentially be linked to the virus. Additionally, HHS has positioned itself through its myriad competitive grant programs as a key supporter of the abortion industry and the transgender medical agenda. It has irreparably harmed thousands of confused and at-risk minors in the name of a woke ideology at war with fundamental biological truth.

Key Definitions

Gain of Function is the term used for medical research that alters a pathogen's genetic composition to make it more virulent, artificially improving its ability to cause more severe disease for the purported reason of developing potential safeguards. While not yet proven, this type of research remains a potential origin of the COVID-19 virus.

Gender-Affirming is the woke phraseology used by advocates of radical gender theory to mask the scientific reality that puberty blockers, cross-sex hormone therapy, and genital surgery result in irreversible chemical castration and genital mutilation. The term intentionally softens the gruesome procedures, particularly when inflicted on confused minors, teenagers, and youths, to deflect public attention from reality. Proponents of the phrase are adherents of radical gender ideology and those in an increasingly woke medical establishment who have abandoned biological truth and the Hippocratic oath.

Health Equity is another derivative of critical theory designed to infuse CRT and other radical ideologies into the medical field. Health equity adopts the woke framework that racism, sexism, transphobia, homophobia, bigotry, and other maladies are inherent to the health system. Thus the health system must be radically rebuilt to achieve equal outcomes. Arguably, this is the most destructive iteration of critical theory as the implementation, practice, and execution of “health equity” may very well come at the expense of people's lives.

A Bureaucracy Weaponized Against Biological Truth, Health, and Innocent Life

- 1. The National Institutes of Health (NIH), through its National Institute of Allergy and Infectious Diseases (NIAID), funded “gain of function” research at the Wuhan Institute of Virology. The Department of Energy confirms the lab was the source of the COVID-19**

virus.¹ The NIH has refused to cooperate with inquiries into its role in funding the research, which included former NIAID Director Anthony Fauci lying under oath that the NIH “has not ever, and does not now fund, gain-of-function research in the Wuhan Institute of Virology.”²

2. **The NIH is actively pushing research touting guidelines from the radical World Professional Association of Transgender Health (WPATH), arguing for “gender-affirming” hormones and surgical mutilation, including on minors.**³ The underlying research relies heavily on noted trans activist Jack Turban, a key promoter of the mutilation-for-profit model that has been at the center of public outrages at places like Vanderbilt and Boston Children’s Hospital.⁴
3. **The NIH continues to fund human fetal tissue harvesting in which the agency provides taxpayer-backed grants for prospective applicants to use baby parts, including babies killed by abortion or born alive after induced abortion, for “medical research.”** The NIH supplied a \$3 million grant to the University of Pittsburgh for a fetal “tissue hub.”⁵
4. **During the aftermath of the COVID pandemic, Surgeon General Vivek Murthy released a document from HHS outlining methods for fighting “COVID misinformation.”** The Surgeon General’s guidance includes calls for teachers and educators to indoctrinate students into dismissing those who “deny scientific consensus on health issues,” using social media platforms to increase censorship, and enlisting government-funded programs to silence dissent.⁶
5. **The Centers for Disease Control and Prevention (CDC) considered issuing CRT-inspired regulatory guidelines prioritizing minorities and certain races ahead of white American citizens for access to the COVID-19 vaccine.** Now, the CDC has launched a “vaccine equity” initiative for racial and ethnic minorities, distributing nearly \$6 billion to organizations to “address COVID-19 health disparities” through the lens of “health equity,”⁷ which prioritizes the delivery of

¹ Lerner, S., Hvistendahl, M., Hibbett, M. (September 9, 2021). “NIH Documents Provide New Evidence U.S. Funded Gain-of-Function Research in Wuhan,” *The Intercept*.

<https://theintercept.com/2021/09/09/covid-origins-gain-of-function-research/> and Gordon, Michael and Strobel, Warren. “Lab Leak Most Likely Origin of Covid-19 Pandemic, Energy Department Now Says.” (February 26, 2023). *The Wall Street Journal*.

<https://www.wsj.com/articles/covid-origin-china-lab-leak-807b7b0a>

² U.S. Senate Committee on Health, Education, Labor, and Pensions (May 11, 2021). “An Update from Federal Officials on Efforts to Combat COVID-19,” *C-SPAN*.

<https://www.c-span.org/video/?511511-1/dr-fauci-cdc-director-walensky-testify-efforts-combat-covid-19>

³ National Center for Biotechnology Information at the National Institutes of Health (January 19, 2022). “Medical Interventions for Transgender Youth,” Nokoff, N. MD, University of Colorado Anschutz Medical Campus, *National Library of Medicine*. <https://www.ncbi.nlm.nih.gov/books/NBK577212/>

⁴ Nerozzi, T. (October 8, 2022). “Vanderbilt University Suspends Gender Affirmation Surgery for Minors,” *The New York Post*.

<https://nypost.com/2022/10/08/vanderbilt-university-suspends-gender-affirmation-surgery-for-minors/>

⁵ Heipel, E. (August 9, 2021). “Investigate Now: Federal Grants Sponsored Possibly Live Baby Harvesting at University of Pittsburgh,” *The Federalist*.

<https://thefederalist.com/2021/08/09/investigate-now-federal-grants-sponsored-possibly-live-baby-harvesting-at-university-of-pittsburgh/> and Congressional Letter. (September 21, 2021).

<https://www.cassidy.senate.gov/newsroom/press-releases/cassidy-colleagues-demand-doj-investigation-on-illegal-fetal-tissue-research>

⁶ U.S. Public Health Service, Department of Health and Human Services (2021). “Confronting Health Misinformation: The U.S. Surgeon General’s Advisory on Building a Healthy Information Environment,” *U.S. Public Health Service*.

<https://www.hhs.gov/sites/default/files/surgeon-general-misinformation-advisory.pdf>

⁷ Centers for Disease Control and Prevention, Department of Health and Human Services (March 29, 2022). “COVID-19 Vaccine Equity for Racial and Ethnic Minority Groups,” *Centers for Disease Control and Prevention*. <https://www.cdc.gov/coronavirus/2019-ncov/community/health-equity/vaccine-equity.html>

health services factoring race, ethnicity, sex, etc. The vast majority of these organizations have policy advocacy initiatives fueling the praxis of CRT through DEI and antiracism efforts, while others advance a wide spectrum of policies routinely associated with the partisan agenda of the Democrat party or conduct research that aligns with the aims of those efforts.

6. **The Centers for Medicare and Medicaid Services (CMS) announced a proposal to provide reimbursement bonuses to physicians who “create and implement an anti-racism plan” as part of adjusting Medicare payments.** The specific instructions require doctors to view race as a “political and social construct” instead of a physiological one, which could easily harm patient health outcomes if doctors alter genetic testing practices.⁸
7. **The CMS and HHS Office of Civil Rights proposed a rule on August 4, 2022, requiring insurance companies to cover chemical castration and sex change surgeries.** The rule waters down religious and conscience objections to these horrific experimental procedures as well as abortion.⁹

Examples of Woke Grant Funding

- A \$3.2 million grant through the Centers for Disease Control and Prevention (CDC) to the **National LGBT Cancer Network in Rhode Island** for tobacco-related cancer “disparity” for the LGBTQ population.
- A \$1.4 million grant through the Centers for Disease Control and Prevention (CDC) to the **Los Angeles LGBT Center** for the “Get Yo’ Life Program” to “reduce HIV transmission” among black gay males in southern Los Angeles.
- A \$10.4 million grant through the Centers for Disease Control and Prevention (CDC) to the **International Rescue Committee** for “strengthening HIV prevention” in allegedly underserved populations worldwide. The organization is a globalist entity dedicated to increasing refugees inside the United States and pushing for citizenship for the DACA population.
- A \$3.6 million grant through the Centers for Disease Control and Prevention (CDC) to the **Advocates for Youth based in Washington D.C.** for the “safe and supportive environments” initiative, which aims to facilitate radical gender theory among at-risk youths, often without parental consent.
- A second \$250,000 grant through the Centers for Disease Control and Prevention (CDC)’s AIDS grant program to the **Advocates for Youth in Washington D.C.** for “reducing HIV transmission” among youths between the ages of 18-24 who are black, “Latinx,” identify as transgender, or “genderqueer/gender non-conforming.”
- A \$3.5 million grant through the Centers for Disease Control and Prevention (CDC) to the **University of Maryland** for “increasing mental health care” for LGBT clients of the university system, specifically to advance “gender-affirming” care that targets vulnerable adolescents for chemical castration and genital mutilation.
- A \$890,000 grant through the Centers for Disease Control and Prevention (CDC)’s HIV program to **The Institute of Women & Ethnic Studies based in New Orleans** for “special projects of

⁸ Sibarium, A. (December 16, 2021). “Biden Administration Offers Bonuses to Doctors Who Implement ‘Anti-Racism Plans,’ *The Washington Free Beacon*.
<https://freebeacon.com/biden-administration/biden-administration-offers-bonus-to-doctors-who-implement-anti-racism-plans/>

⁹ Office of Civil Rights and Centers for Medicare and Medicaid Services, Department of Health and Human Services (August 4, 2022). “Notice of Proposed Rulemaking to Amend Section 1557 of the Affordable Care Act,” *U.S. Department of Health and Human Services*.
<https://www.federalregister.gov/documents/2022/08/04/2022-16217/nondiscrimination-in-health-programs-and-activities>

national significance.” The organization advances the notion that structural racism explains higher infant mortality rates among minority populations and supports infusing Social Emotional Learning (SEL) techniques to promulgate radical gender theory.

- A \$8.1 million grant through the Centers for Disease Control and Prevention (CDC) to the **International Organization for Migration based in Washington D.C.** for “advancing the global health security agenda” to perpetuate the authoritarian agenda of the World Health Organization. The group promotes “orderly migration” from third-world nations into the United States.
- A \$4.7 million grant through the Centers for Disease Control and Prevention (CDC) to the **National Minority AIDS Council** for “training and technical assistance.” The organization engages in pro-Black Lives Matter racial activism and promotes radical gender theory.
- Three grants totaling \$8 million grant through the Centers for Disease Control and Prevention (CDC) to **AccessMatters based in Philadelphia** for “comprehensive HIV prevention projects” and “family healthcare.” The organization advances abortion services through the lens of “equity” to target and push abortion on vulnerable minority populations.
- A \$1.5 million grant through the National Institutes of Health (NIH) to the **Society for the Advancement of Chicanos and Native Americans in Science** for “culturally responsive” academic and job training to “diversify” the medical field. The group explicitly rejects assimilation into the American way of life and instead “takes a radical approach to lead with culture and identity” as the focus of their STEM programs.
- A \$519,000 grant through the National Institutes of Health (NIH) to **Johns Hopkins University** for “enhancing diversity” for future Ethical, Legal, and Social Implications (ELSI) researchers, infusing race essentialism into the human genome project and other genetic research projects.
- A \$339,000 grant through the National Institutes of Health (NIH)’s mental health research program to **The Centre for Addiction and Mental Health in Canada** for “mental health intervention initiatives” for transgender women facing “gender-based violence and mental health disorders” in Brazil.
- A \$246,000 grant through the National Institutes of Health (NIH)’s Minority Health and Health Disparities Research program to **Iris Media Inc.** for “culturally responsive stress reduction” in the black community.
- A \$1.5 million grant through the National Institutes of Health (NIH) to the **University of Miami (FL)** for the “Monitoring Microaggressions and Adversities to Generate Interventions for Change (MMAGIC)” program for black women living with HIV.
- A \$582,000 grant through the National Institutes of Health (NIH) to the **Medical College of Wisconsin** for a “diversity summer health research program” available to prospective attendees based on their racial, ethnic, and self-described gender identity.
- A \$3 million grant through the National Institutes of Health (NIH)’s Child Health and Human Development Research center to the **Pacific Institute for Research and Evaluation** for “implementing school nursing strategies” to reduce adolescent suicide for LGBTQ children, such strategies set the child on the “gender-affirming” path to irreversible damage. The organization is also anti-2 amendment and adopts the race essentialism framework of CRT.
- A \$1.3 million grant through the Administration for Children and Families (ACF) to **Thrive St. Louis Inc.** for “sexual risk avoidance education.” The organization prioritizes abortion over adoption and parenthood and facilitates “pre-abortion screenings.”
- A \$456,000 grant through the Administration for Children and Families (ACF) to **A New Day based in New Mexico** for “transitional living programs for specialized programs” targeted solely at helping runaway homeless youths who are presumed LGBTQ and between the ages of 16 and 21.
- A \$10 million grant through the Administration for Children and Families (ACF) to the **University of Maryland** for the “National Quality Improvement Center” for LGBTQ children, including

“two-spirit” children in foster care. The University of Maryland Medical System provides child gender transition procedures. It specifies that “medical treatments typically do not start until a child reaches puberty – on average age 10 for female puberty and ages 11-12 for male.”

- A \$570,000 grant through the Administration for Children and Families (ACF) to the **Los Angeles LGBT Center** for the “Street Outreach Program” to provide services solely to runaway homeless youths who are presumed LGBTQ. Such targeting inflicts radical gender ideology on already vulnerable kids.
- Another \$900,000 grant through the Administration for Children and Families (ACF) to the **Los Angeles LGBT Center** for addressing LGBTQ domestic violence.
- A \$800,000 grant through the Administration for Children and Families (ACF) to **Planting Justice based in California** for “urban farm enterprises.” The organization allegedly advances “food justice” to fight against supposed systemic racism within the industrialized food ecosystem.
- A \$25,000 grant through the Administration for Children and Families (ACF), specifically the Head Start Program, to the **University of Oklahoma** for “culturally responsive practices and child outcomes” to infuse race essentialism in early Head Start programs.
- A \$1.5 million grant through the Administration for Children and Families (ACF) to **Tapestri Inc. based in Georgia** for trafficking victims assistance programs focusing on illegal immigrants. The organization advocates for lenient enforcement and greater levels of immigration.
- A \$920,000 grant through the Administration for Community Living (ACL) for **Services and Advocacy for GLBT Elders (SAGE) based in New York** for a “national resource center” on growing old as a member of the LGBT community.
- A \$50,000 grant through the Agency for Healthcare Research and Quality (AHRQ) to the **Society for Academic Emergency Medicine** for “diversity, equity, and inclusion” to develop a research agenda for addressing “systemic racism in emergency medicine.”
- A \$1 million grant through the Centers for Medicare & Medicaid Services (CMS) to the **Soros-funded Tides Center** for “medical access and reauthorizing the Children’s Health Insurance Program.” Aside from paying the group to lobby Congress, Tides’ mission is to advance economic socialism and race essentialism.
- A \$2.1 million grant through the Health Resources and Services Administration (HRSA) to **Frontier Nursing University in Kentucky** for promoting “nursing workforce diversity,” infusing the nursing profession and care provision with race essentialism.
- Two grants totaling \$11.5 million through the Health Resources and Services Administration (HRSA) to the **Los Angeles LGBT Center** for “early intervention and treatment” for low-income minorities with HIV.
- A \$2 million grant through the Office of the Assistant Secretary for Health (OASH) to **Planned Parenthood Mar Monte** for “sexual education equity” to implement a “coordinated, systems-level approach to offer power through choices” by promoting abortion through youth influencers.
- A \$18.9 million grant through the Office of the Assistant Secretary for Health (OASH) to **AccessMatters in Philadelphia** for “comprehensive family planning services” in Southeastern Pennsylvania to facilitate and increase abortions in mostly minority communities.
- A \$197,000 grant through the Office of the Assistant Secretary for Health (OASH) to the **Michigan Organization on Adolescent Sexual Health** for “building a movement for Michigan Gay-Straight Alliances” to “improve the health of LGBTQ youth.”
- A \$1.8 million grant through the Substance Abuse and Mental Health Services Administration (SAMHSA) to the **University of Iowa** for the “National American Indian and Alaska Native Trauma Center” due to trauma inflicted by “generational systemic racism.”

Major Discretionary Savings:

In millions of dollars

Program/Agency	FY23	CRA FY24	Difference (\$)	Difference (%)
Centers for Disease Control & Prevention	8,344,000	4,413,823	-3,930,177	-47.1
STD Prevention	1,391,056	450,000	-941,056	-67.7
Chronic Disease Prevention	1,430,414	400,000	1,030,414	-72.0
Environmental Health	246,850	0	-246,850	-100.0
Public Health Scientific Services	754,497	58,000	-696,497	-92.3
Occupational Health	362,800	111,362	-251,438	-69.3
Global Health	629,843	0	-628,843	-100.0
National Institutes of Health	46,539,000	33,789,000	-12,750,000	-27.4
NIAD	6,562,000	3,281,000	-3,281,000	-50.0
Minority Health Disparity Institute	524,000	0	-524,000	-100.0
Cross-Cutting CRT Cut	NA	NA	-100,000	NA
Private Sector Indirect Cost Rate	NA	NA	-5,000,000	NA
Fogarty International Center	95,000	0	-95,000	-100.0
Buildings & Facilities	350,000	0	-350,000	-100.0
Office of the Director	2,651,000	1,000,000	-1,651,000	-62.3
Child Health & Human Develop.	1,749,000	0	-1,749,000	-100.0
Administration for Children & Families	31,013,000	16,387,500	-14,625,500	-47.2
LIHEAP	1,500,00	0	-1,500,000	-100.0
Refugee Programs	6,787,000	430,000	-6,357,000	-93.7
Head Start	11,997,000	5,998,500	-5,998,500	-50.0
Community Services Block Grant	770,000	0	-770,000	-100.0
Other Agencies/Programs	41,666,000	35,734,097	-5,931,903	-14.2
Total, Department of HHS	127,562,000	90,324,420	-37,237,580	-29.2