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Congress of the United States
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**SELECT COMMITTEE ON THE STRATEGIC
COMPETITION BETWEEN THE UNITED STATES
AND THE CHINESE COMMUNIST PARTY**

July 15, 2026

The Honorable Robert F. Kennedy Jr.
Secretary
U.S. Department of Health and Human Services
200 Independence Avenue, SW
Washington, D.C. 20201

Secretary Kennedy:

I write with grave concern regarding the current nationwide outbreak of *Cyclospora*, prompting fear amongst my constituents as they shop for food for their families. More than 4,000 people in at least 34 states have reportedly become ill, more than 140 have been hospitalized, and investigators have not confirmed the food source responsible.¹ I call upon the Department of Health and Human Services to take immediate action and reverse its previous decision to reduce federal foodborne-disease surveillance, staffing, and state public health support that has hampered the current nationwide response to the outbreak of *Cyclospora*.

In July 2025, HHS reduced FoodNet's required surveillance from eight pathogens to two. Active surveillance for *Cyclospora* and five other pathogens became optional.² FoodNet is critical because it links the CDC, FDA, USDA, and ten state health departments through a common surveillance system. Its staff regularly contact more than 700 laboratories to identify cases instead of waiting for reports to reach the federal government through passive systems. The Department must explain why it made this decision and how it expected the remaining systems and staff to perform the work.

HHS has defended the changes to FoodNet as a way to eliminate duplicative work and has stated that *Cyclospora* tracking continued through other federal systems.³ HHS has not identified which systems replaced FoodNet's active laboratory outreach, whether they require the same reporting, or whether they collect information with the same speed and consistency. Receiving reports through another database does not perform the same function as active surveillance and coordinated federal-state data collection.

The cuts to FoodNet was one of several actions that reduced public health capacity. In March 2025, HHS terminated \$11.4 billion in pandemic-era grants to state and local health departments, which supported staff, laboratories, and data systems.³ The CDC also disbanded its Division of Parasitic Diseases and Malaria, which housed federal expertise on *Cyclospora* and other parasitic

¹ PBS NewsHour, "What We Know About the Cyclosporiasis Outbreak Linked to Produce," July 13, 2026, <https://www.pbs.org/newshour/show/what-we-know-about-the-cyclosporiasis-outbreak-linked-to-produce>.

² Caroline Hopkins Legaspi, "Cuts to the Food Safety System Threaten Americans' Health," The New York Times, September 10, 2025, <https://www.nytimes.com/2025/09/10/well/cdc-foodnet.html>.

³ Brendan Rascius, "Spread of 'Explosive Diarrhea' Parasite in US Could Be Far Worse Than We Know Thanks to Trump Cuts," The Independent, July 14, 2026, <https://www.the-independent.com/news/world/americas/us-politics/parasite-diarrhea-cyclosporiasis-trump-cuts-b3014618.html>.

⁴ Madhura S. Vachon et al., "CDC Directed Funding Improves Foodborne Outbreak Reporting in U.S. States, 2009–2022," *Journal of Food Protection*, Vol. 88, Issue 9, 2025, <https://doi.org/10.1016/j.jfp.2025.100581>.

diseases.⁴ State officials now report chronic understaffing while responding to this outbreak and other public health threats.⁵

There is clear evidence that federal-state active monitoring programs greatly improve outbreak detection. The CDC's own research concluded that strengthening state and local investigation capacity improves surveillance and helps identify contaminated foods, pathogens, outbreak settings, and points of contamination before an outbreak causes fear amongst families.⁶ Evidence shows that CDC-funded foodborne-disease programs are key to outbreak detection and reporting.⁷ Therefore, I am confounded by the decisions that led us to the situation we are in today.

The public deserves to understand your rationale for hampering our nation's foodborne-disease detection systems. I ask that you provide written answers to the following questions by no later than August 3, 2026:

- Who at CDC directed the July 2025 reduction in FoodNet's required surveillance, when was the decision made, and what scientific, operational, and budget analyses supported this decision?
- What funding for FoodNet or related CDC foodborne-disease programs has been reduced, withheld, or redirected since January 2025? Please identify the amount and affected program for each change.
- How many employees working on FoodNet, foodborne diseases, or parasitic diseases have been terminated, reassigned, or billets left vacant since January 2025? How does current staffing compare with staffing at the end of 2024?
- Which CDC surveillance systems now perform the active laboratory outreach previously required for Cyclospora and the other five pathogens removed from FoodNet's required scope? Is reporting through those systems mandatory or optional?
- How many employees are currently assigned to the current cyclosporiasis outbreak surveillance and response?
- What evidence supports HHS's public statement that the FoodNet change has not affected the current outbreak investigation? Separately, has HHS assessed whether staffing losses or reductions in state and local funding have affected the response?

Thank you for your attention to this matter, and I look forward to your prompt reply.

Sincerely,



Greg Stanton
Member of Congress

CC: Centers for Disease Control and Prevention, Acting Director Jay Bhattacharya; Food and Drug Administration, Commissioner Kyle Diamantas; U.S. Department of Agriculture, Under Secretary for Food Safety Mindy Brashears

⁴ Madhura S. Vachon et al., "CDC Directed Funding Improves Foodborne Outbreak Reporting in U.S. States, 2009–2022," *Journal of Food Protection*, Vol. 88, Issue 9, 2025, <https://doi.org/10.1016/j.jfp.2025.100581>.

⁵ Daniel Dewey-Mattia et al., "Surveillance for Foodborne Disease Outbreaks—United States, 2009–2015," *MMWR Surveillance Summaries*, Vol. 67, No. 10, July 27, 2018, <http://dx.doi.org/10.15585/mmwr.ss6710a1>.