



# Connecticut

## \$6,042,516

Funding for AR Activities  
Fiscal Year 2024

One of 10 sites for the Emerging  
Infections Program

## Funding to Health Departments



\$196,720

**AR Laboratory Network:** Labs detect, support response to, and prevent the spread of AR threats across the nation—and inform innovations to detect AR.

CDC's AR Lab Network provides nationwide lab capacity to detect AR and inform local prevention and response activities to stop the spread of antimicrobial-resistant germs and protect people. Collaboration from the local to national levels results in more rapid response for detecting AR and closes the gap between local capabilities and the data needed to combat AR in the United States.

Learn more: [www.cdc.gov/antimicrobial-resistance-laboratory-networks/php/about/domestic.html](http://www.cdc.gov/antimicrobial-resistance-laboratory-networks/php/about/domestic.html)



\$234,171

**Fighting AR in Health Care:** State, territory, and local public health partners prevent HAIs, support rapid detection and response, and improve antibiotic use.

CDC-funded HAI/AR Programs form a network of health departments that prevent, respond to, and contain HAI/AR threats and promote appropriate use of antibiotics. HAI/AR programs protect patients and healthcare personnel, improve healthcare safety and quality, and use data-driven prevention strategies to combat AR threats in health care.

Learn more: [www.cdc.gov/healthcare-associated-infections/programs/index.html](http://www.cdc.gov/healthcare-associated-infections/programs/index.html)



\$436,285

**Food Safety Projects** protect communities by rapidly identifying antimicrobial-resistant foodborne bacteria to stop and solve outbreaks and improve prevention.

Connecticut uses whole genome sequencing to track local outbreaks of *Salmonella*, *Campylobacter*, *Shigella*, and *Escherichia coli*, identifies AR genes, and shares surveillance data with PulseNet. When outbreaks are detected, local CDC-supported epidemiologists respond to stop their spread. Connecticut conducts active, population-based surveillance for foodborne diseases through CDC's Emerging Infections Program.

Learn more: [www.cdc.gov/food-safety/foods/antimicrobial-resistance.html](http://www.cdc.gov/food-safety/foods/antimicrobial-resistance.html)

The AR Investment Map includes data from CDC's largest funding categories for AR. It represents fiscal year 2024 extramural funding that supports AR activities from multiple funding lines in CDC's annual appropriations. Some work received full or partial funding from one-time supplemental appropriations.

**AR:** antimicrobial resistance  
**HAI:** healthcare-associated infection  
**IPC:** infection prevention and control

**NHSN:** National Healthcare Safety Network  
**STI:** sexually transmitted infection

CDC provides critical support to protect people from antimicrobial resistance.

[ARinvestments.cdc.gov](http://ARinvestments.cdc.gov)





\$100,000

**Fungal Disease Projects** improve our ability to track resistance to antifungals and stop it from spreading.

Connecticut conducts surveillance to identify fungal diseases, monitor for new and emerging AR, and implement strategies to prevent the spread of AR in high-risk areas. Connecticut conducts population-based surveillance for *Candida* bloodstream infections through CDC's Emerging Infections Program.

Learn more: [www.cdc.gov/fungal/antimicrobial-resistant-fungi](http://www.cdc.gov/fungal/antimicrobial-resistant-fungi)

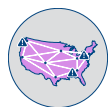


\$2,270,340

**The Emerging Infections Program (EIP) HAI Component** helps answer critical questions about emerging HAI threats, advanced infection tracking methods, and AR in the United States.

The Connecticut EIP performs population-based surveillance for *Clostridioides difficile*, invasive *Staphylococcus aureus*, and resistant gram-negative bacteria. They also conduct HAI and antimicrobial use prevalence surveys and surveillance for invasive *Escherichia coli* infections to support vaccine evaluation.

Learn more: [www.cdc.gov/healthcare-associated-infections/php/haic-eip/index.html](http://www.cdc.gov/healthcare-associated-infections/php/haic-eip/index.html)



\$75,000

**The Emerging Infections Program (EIP) sites** improve public health by translating population-based surveillance and research activities into informed policy and public health practice.

Active Bacterial Core surveillance (ABCs) is an active laboratory- and population-based surveillance system for invasive bacterial pathogens of public health importance. ABCs provides infrastructure for further public health research, which may include special studies to identify disease risk factors, evaluate vaccine efficacy, and monitor the effectiveness of infection prevention policies.

Learn more: [www.cdc.gov/abcs](http://www.cdc.gov/abcs)

## Funding to Universities & Healthcare Partners



\$2,730,000

**Yale New Haven Health Services Corporation: Innovative Prevention & Tracking**

CDC's Project Firstline is a collaborative of partners that provides innovative and effective IPC training for U.S. healthcare workers and the public health workforce. It offers resources in a variety of formats to meet the diverse learning needs and preferences of those working to ensure safe care in healthcare settings. Partners host events, create tools, and publish resources to help frontline healthcare workers better understand and apply IPC correctly. This work was partially supported by emergency supplemental funding.

Learn more: [www.cdc.gov/project-firstline/index.html](http://www.cdc.gov/project-firstline/index.html)

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