

# Groundbreaking Long COVID Economic and Research Calculations

This page serves as the central repository for the original economic and scientific impact calculations presented in *DEI Delusion: The Hidden Impact of Research in BIPOC Communities*. These calculations quantify the staggering cost of government inaction on Long COVID and the lost economic potential of a U.S.-led medical breakthrough.

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## The Cost of Inaction vs. Investment in Long COVID

### 1. NIH Long COVID Research Funding Cuts vs. Economic Losses

- **Congress allocated:** \$1.15 billion to NIH RECOVER over four years (2021-2024).
- **NIH cut funding to:** \$51 million for 2024.
- **Annual economic losses due to Long COVID:** \$3.7 trillion (Brookings, 2022).

#### Math Breakdown:

- If NIH had increased investment to **\$10 billion over four years**, that would be:
  - **\$10 billion ÷ 4 years = \$2.5 billion per year**
  - **\$2.5 billion ÷ \$3.7 trillion annual loss = 0.27%** of the total economic losses.
- Instead of making even this modest investment, the government is **absorbing a \$3.7 trillion annual loss**.

### 2. Workforce Losses and GDP Impact

- **Total U.S. workforce out due to Long COVID disability:** 4 million people (Brookings).
- **Average GDP contribution per worker:** \$143,000 per year.

#### Math Breakdown:

- **Total GDP loss:**
  - **4 million workers × \$143,000 = \$572 billion annually**
- **Potential GDP recovery if 50% of workers were accommodated or treated:**
  - **50% of 4 million = 2 million workers**
  - **2 million × \$143,000 = \$286 billion annual recovery**

This shows that **workplace accommodations and medical interventions could recover at least \$286 billion per year.**

### 3. Healthcare Costs vs. Prevention and Treatment Investment

- **Annual healthcare cost of Long COVID:** \$544 billion (Harvard Economist David Cutler).
- **Proposed annual research and treatment investment:** \$50 billion.

#### Math Breakdown:

- **Percentage of healthcare cost that would be covered by this investment:**
  - $\$50 \text{ billion} \div \$544 \text{ billion} = 9.19\%$

This means a **relatively small 9.19% investment** could **significantly reduce the overall burden.**

### The Untapped Market of Long COVID Treatments

- **Estimated global Long COVID patient population:** 65 million (WHO, 2024).
- **Potential revenue if an FDA-approved treatment captured even 10% of the global market:**

#### Math Breakdown:

- If treatment costs **\$10,000 per patient** and captures **just 10% of the global market:**
  - $65 \text{ million} \times 10\% = 6.5 \text{ million treated patients}$
  - $6.5 \text{ million} \times \$10,000 \text{ per patient} = \$65 \text{ billion in potential revenue annually}$
- If the treatment remains **on the market for 10 years**, that's:
  - $\$65 \text{ billion} \times 10 \text{ years} = \$650 \text{ billion in total market potential}$

This is a **trillion-dollar economic opportunity**, and yet the U.S. is failing to invest in research that could dominate this industry.

### The Bottom Line: Short-Term Cuts, Long-Term Financial Disaster

- A **\$50 billion annual investment** in research, treatment, and workplace accommodations could have **saved trillions in economic losses.**
- Instead, by dismantling federal Long COVID programs, the administration is **choosing to let the U.S. economy absorb a \$3.7 trillion loss annually** rather than making **targeted investments in solutions.**

## Sources for Calculations

These sources were used to verify and construct our original calculations:

- **Long COVID Economic Impact:** [Brookings Institution](#)
- **Workforce Losses from Long COVID:** [Brookings Institution](#)
- **Annual Healthcare Costs of Long COVID:** [Harvard Economist David Cutler](#)
- **NIH Long COVID Funding Cuts:** [NIH RECOVER Initiative, Federal Budget Reports](#)
- **Executive Order on the Reduction of Federal Bureaucracy:** [White House Executive Orders Archive, 2025](#)
- **Global Market for Long COVID Treatments:** [World Health Organization](#)
- **Chronic Disease and U.S. Healthcare Spending:** [CDC Chronic Disease Report, 2023](#)
- **Disparities in Federal Research Funding:** JAMA

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- **Journalists, policymakers, and researchers** are encouraged to cite and build upon these groundbreaking calculations.
  - For media inquiries visit [www.BIPOCEquityAgency.com](http://www.BIPOCEquityAgency.com)