

Preventive Health & Health Services Block Grant

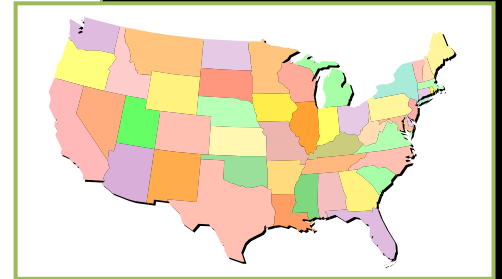
FY 2011
\$131 M

Leveraging Resources for Maximum Impact

REQUEST: Fund the Preventive Health and Health Services (PHHS) Block Grant at \$1.31 billion. The flexibility of this grant allows each state/territory to address its unique public health challenges and target resources where funding is most needed. Our FY 2011 requested funding would restore the grant to its funding level a decade ago.

Basic Facts:

- ✓ Authorized in 1981, the PHHS Block Grant gives states the autonomy and flexibility to tailor prevention and health promotion programs to their particular public health needs. Grantees use funds to provide support to areas where no federal support exists, or where categorical states funds are grossly insufficient for leading causes of illness, disability and death in their states/territories.
- ✓ Sixty-one grantees include all 50 states, the District of Columbia, 2 American Indian tribes, and 8 U.S. territories are funded.
- ✓ PHHS Block Grant funding addresses a wide range of vital public health programs: chronic disease prevention and control, emergency medical services, environmental health, infectious disease prevention and control, community-based education, injury prevention and control, disease and risk factor surveillance, and lead poisoning prevention.
- ✓ PHHS Block Grant funding enables rapid response to emerging health threats, such as rapid identification and improved response to outbreaks of emerging infectious diseases (e.g. West Nile Virus) and outbreaks of deadly salmonella or other foodborne infections.
- ✓ Approximately 69% of states use PHHS Block Grants to enhance the effectiveness of categorically funded programs and leverage other resources for greater preventive health impact.
- ✓ In FY 2008, about 43% of PHHS Block Grant funds were distributed by states to local entities to address county and local public health needs.
- ✓ A web-based Block Grant Management Information System tracks how grantees are meeting their objectives and performance measures and provides public accountability.
- ✓ The needs for PHHS Block Grants are expected to grow. A March 2010 report from the Trust for America's Health (TFAH) and the Robert Wood Johnson Foundation (RWJF) found federal spending for public health has been flat for nearly five years, while states cut nearly \$392 million for public health programs in the past year.
 - These devastating cuts in public health funding have left communities around the country struggling to deliver basic disease prevention and emergency preparedness services.
 - States are expected to cut budgets even more in the coming year, which will further limit the ability of public health departments to carry out services for chronic disease prevention, HIV/AIDs, food and water safety, bioterrorism and emergency preparedness, and other areas.



**FY 2011 Requested
\$131 million**

**President's Budget
\$102 million**

**FY 2010 Approved
\$102 million**

Preventive Health & Health Services Block Grant



~~~~~ Leveraging Resources for Maximum Impact ~~~~~

## Examples of PHHS Funding:

- In Kansas, Pennsylvania and 17 other states, there is no categorical funding source for heart disease and stroke prevention; block grant funds provide the only source of funding.
- In New York, Block Grant funds provide a substantial portion of local initiatives in diabetes prevention, as categorical diabetes funds are grossly inadequate.
- In several states, Block Grant funds support screening of additional women in the Breast and Cervical Cancer Screening Program. Categorical funds allow for screening only a small portion of eligible women.
- Many states have used PHHS Block Grant funding to address unanticipated public health emergencies, and/or to implement heart attack, stroke, and other cardiovascular disease prevention programs, dental health programs, child safety seat or smoke detector programs, and public health education programs designed to deter youth tobacco use and underage drinking, to promote good nutrition and increased physical activity.

## PHHS Block Grant: 2008 Aggregate Summary – 50 States & the District of Columbia

| Program Area                                                                    | Number of States | Total Funding Amount    |
|---------------------------------------------------------------------------------|------------------|-------------------------|
| <b>CHRONIC DISEASE/RISK FACTORS</b>                                             |                  |                         |
| Cardiovascular                                                                  | 17               | \$12.605 million        |
| Healthy Cities and Communities                                                  | 9                | \$1.904 million         |
| Cancer                                                                          | 9                | \$1.361 million         |
| Diabetes                                                                        | 6                | \$1.294 million         |
| Other Chronic Diseases                                                          | 16               | \$4.178 million         |
| Asthma                                                                          | 2                | \$259,558               |
| Injury Prevention                                                               | 23               | \$5.811 million         |
| Oral Health – Water Fluoridation                                                | 18               | \$2.587 million         |
| Community Preventive Services. – Physical Activity, Nutrition, Tobacco, Obesity | 22               | \$9.956 million         |
| Worksite Wellness and Risk Reduction                                            | 4                | \$907,991               |
| <b>Chronic Disease/Risk Factor Totals</b>                                       |                  | <b>\$40.863 million</b> |
| <b>INFECTIOUS DISEASES</b>                                                      |                  |                         |
| AIDS/STD                                                                        | 12               | \$1.852 million         |
| Tuberculosis Control                                                            | 8                | \$3.504 million         |
| Childhood Immunization                                                          | 4                | \$1.081 million         |
| Community Waterborne Disease                                                    | 3                | \$248,151               |
| Food Safety                                                                     | 3                | \$1.729 million         |
| General Infectious                                                              | 6                | \$2.295 million         |
| Arthropod Disease                                                               | 1                | \$227,500               |
| Integrated Viral Hepatitis                                                      | 2                | \$119,326               |
| Rabies Prevention and Control                                                   | 2                | \$120,202               |
| Hospital Acquired Infections                                                    | 1                | \$90,400                |
| <b>Infectious Diseases Totals</b>                                               |                  | <b>\$11.267 million</b> |

| Program Area                              | Number of States | Total Funding Amount |
|-------------------------------------------|------------------|----------------------|
| <b>OTHER ESSENTIAL PROGRAMS</b>           |                  |                      |
| Sex Offenses Prevention                   | 48               | \$7.271 million      |
| Emergency Medical Services                | 17               | \$5.320 million      |
| Data Collection and Publication           | 17               | \$3.149 million      |
| Office of Multicultural Health            | 7                | \$843,234            |
| Environmental Health & Epidemiology       | 8                | \$1.599 million      |
| Workforce Development                     | 5                | \$481,672            |
| Family Health Services/Maternal and Child | 5                | \$821,675            |
| Target Health Programs and Evaluation     | 4                | \$1.711 million      |
| Access, Infrastructure, Integration       | 20               | \$7.976 million      |
| Hazardous Wastes, Lead, Radiation, Soil   | 3                | \$960,090            |
| Mental Health/Suicide                     | 5                | \$449,470            |
| Fetal & Infant Death/Low Birth weight     | 1                | \$339,000            |
| Migrant & Rural Health                    | 2                | \$571,298            |
| Violence Prevention                       | 4                | \$709,749            |
| Community Sanitation                      | 1                | \$157,480            |
| Vital Statistics                          | 1                | \$1.450 million      |
| Performance Standards                     | 4                | \$1.150 million      |
| Field Coordination                        | 2                | \$1.04 million       |
| Trauma Care Systems                       | 2                | \$316,537            |
| Poison Control Systems                    | 4                | \$357,523            |
| Chemical Risk Reduction                   | 1                | \$168,416            |
| <b>Other Essential Programs Totals</b>    |                  | <b>\$36,843,063</b>  |

*Advocating for healthier people through health education on behalf of the 30,000 members of the American Association for Health Education; American College Health Association; American Public Health Association/Public Health Education & Health Promotion Section; Coalition of National Health Education Organizations; Council of Accredited MPH Programs; Directors of Health Promotion and Education; Eta Sigma Gamma; National Association of Chronic Disease Directors; National REACH Coalition; and Society for Public Health Education.*