PREVENTIVE HEALTH AND HEALTH SERVICES BLOCK GRANT

FY 2024 FACT SHEET

**Facts about the Preventive Health & Health Services Block Grant**

The Centers for Disease Control and Prevention’s (CDC) Center for State, Tribal, Local, and Territorial Support (CSTLTS) administers the Preventive Health and Health Services Block Grant whic allows 50 states, the District of Columbia, 2 American Indian tribes, 5 U.S. territories, and 3 freely associated states the autonomy and flexibility to tailor prevention and health promotion programs to their particular public health needs. The Block Grant allows grantees to address emerging health issues and gaps at the state and community level by focusing on their specific needs and unique challenges in innovative ways.

States use Block Grant funding to reduce premature deaths and disabilities by focusing on the leading preventable risk factors in their populations. Many states have also used this funding to address unanticipated public health emergencies such as outbreaks of deadly salmonella infections or West Nile Virus. States have also implemented heart attack, stroke, and other cardiovascular disease prevention programs, cancer screenings, oral health programs, child safety seat or smoke detector programs, and public health education programs designed to target at-risk populations.

**Evaluating Outcomes: Real Results**

CSTLT’s latest report, [Preventive Health and Health Services Block Grant Evaluation Report: 2019 Framework Measures Assessments](https://www.cdc.gov/phhsblockgrant/2019evaluationreport.htm), found that the program enabled: 688 agencies to improve the capacity of their information systems; 434 agencies to improve the efficiency and effectiveness of their operations, programs, and services; agencies to address 163 emerging public health needs; and agencies to implement 1,259 evidence-based public health interventions.

The emerging public health needs addressed were varied, with the top four topic areas accounting for half of all emerging needs reported. This included:

* 15% for infectious diseases, such as bacterial infections, viral infections, arboviral diseases, foodborne illnesses, and sexually transmitted diseases;
* 13% for chronic diseases and associated risk factors, or non-communicable diseases such as obesity, physical activity and nutrition, tobacco, and diabetes;
* 12% for public health infrastructure, including workforce development and health information technology; and
* 10% for substance abuse (e.g., opioid and prescription drug abuse, prevention, and education).

Of the public health interventions implemented, 209 addressed nutrition and weight status, 199 addressed injury and violence prevention, 192 addressed physical activity, 137 addressed cancer, and 128 addressed rape/attempted rape. For most health topic areas, evidence-based interventions accounted for over 85% of those implemented.

**Funding the Preventive Health and Health Services Bock Grant: A Critical Need**

The Block Grant is currently funding at $160 million. [These funds](https://www.cdc.gov/phhsblockgrant/allocation/index.htm) are used to provide support to areas where **no federal or state support exists** or where **federal categorical funds are not sufficient to meet the state’s needs.** Without this funding, many states would be unable to continue providing critical chronic disease prevention and health promotion programs to the people who need it most.