

Public Health has helped add 25 of the additional 30 years of life we now experience – only five of those additional years are attributed to clinical medicine. ODH is dedicated to continuing to protect and improve the lives of Ohioans.

## How does the Preventive Health and Health Services Block Grant (PHHSBG) Protect and Promote Health in Ohio?

An investment of \$10 per person per year in proven community-based programs to increase physical activity, improve nutrition, and prevent tobacco use and exposure can save Ohio more than \$685 million annually, including \$185 million to Ohio Medicaid, within five years.

**\$10**  
INVESTMENT  
per person

SAVES OHIO  
**\$685 M**  
ANNUALLY

This is a return of \$6 for every \$1.<sup>1</sup>

The PHHSBG plays a critical role in building capacity at the state and local level to improve health outcomes through policy and systems changes, partnerships, resource sharing and implementation of proven evidence-based public health programs.

The PHHSBG provides the flexibility to target emerging needs in Ohio and fills voids in current public health funding. With these funds, Ohio has begun to address its unique public health priorities including:

- Reducing the incidence of chronic disease and obesity
- Reducing prescription drug abuse, falls among older adults and traumatic brain injuries among children.
- Preventing sexual assault and intimate partner violence

### Prevention is the most cost-effective way of reducing overall costs in the future.

Currently, three public health priorities addressed by the PHHSBG cost Ohio and its residents upwards of \$60 billion each year:

- Obesity and chronic disease are the most common causes of death and disability in Ohio, with an economic impact of approximately **\$56.8 billion per year**.<sup>2</sup>
- Unintentional fatal drug poisonings cost Ohioans **\$3.6 billion** annually<sup>3</sup> while non-fatal, hospital-admitted poisonings cost an additional **\$35.5 million** each year.
- On average annually in Ohio, direct treatment charges for fall-related hospitalizations total \$298.5 million.<sup>4</sup>
- Unintentional injuries are the leading cause of death and disability for children and youth. In addition the tragic loss of life, unintentional injuries to children younger than 19 cost Ohio \$1.8 billion annually in direct medical costs, work-loss and quality of life loss.<sup>5</sup>
- Taking into account short-term medical care, mental health services and lost productivity, sexual assault cost Ohioans **\$4.3 million** in 2009 or \$5,100 per victim.<sup>6,7</sup> Ohio also spent approximately **\$3.5 million** to pay for 6,186 rape examination kits in 2010.<sup>8</sup>

### Ohio will lose \$4.5 million in funding

The President's FY 2012 budget request, eliminates the PHHSBG, a grant that provides \$4.5 million in funding to the Ohio Department of Health (ODH) allowing the state to address vital public health needs and challenges in innovative and locally defined ways.<sup>9</sup> Loss of this funding will leave the state unable to address these critical issues and will result in the elimination of several important public health programs.

# Programs impacted by PHHSBG

"...you may promise yourself every thing-but health, without which there is no happiness. An attention to health then should take place of every other object. The time necessary to secure this by active exercises, should be devoted to it in preference to every other pursuit"  
 – Thomas Jefferson

## Creating Healthy Communities (CHC) Program \$2,217,156

Addresses obesity and chronic disease in Ohio by mobilizing stakeholders at the county-level to create communities that support healthy living.

- Provides \$1.7 million in funds to 16 high-risk counties to address risk factors in schools, worksites, health care and community settings utilizing population-based, public health interventions.
- Recently awarded the *Preventive Health and Health Services Block Grant 2010 Champion Award for Program Delivery* from the U.S. Department of Health and Human Services.
- In 2010, CHC counties adopted 65 policies and 227 environment and system changes, impacting almost 5 million high-need Ohioans.

## Violence and Injury Prevention (VIP) Program \$1,031,465

The VIP Program uses statewide data sources to surveil the leading causes of injury death and disability in Ohio and to identify priority areas for action.

- Local communities mobilize coalitions to assist in the implementation of population-based initiatives to make communities safer related to the VIP Program's priority areas of:
  - **Falls Among Older Adults:** Grantees implement multi-faceted, evidence-based strategies to increase strength and balance, manage medications, promote vision checking and conduct home hazard assessment and modifications.
  - **Prescription Drug Abuse:** Grantees are working to raise awareness about the issue among the public, train health care prescribers and encourage use of the prescription monitoring program, conduct poison death reviews and address local needs related to the issue.
  - **Traumatic Brain Injury among Youth:** Grantees are working to implement evidence-based strategies such as the adoption of helmet distribution programs, new policies and environmental changes related to bicycle/pedestrian safety and youth sports.
- In 2010, injury prevention grantees trained 16,391 Ohioans, implemented 97 environmental assessments and modifications and adopted 4 new policies to make Ohio communities safer.



**Bicycle helmets  
save \$48 for every \$1 spent.<sup>11</sup>**

## Sexual Assault and Domestic Violence Prevention (SADVP) Program \$278,016

Ohio's sexual violence prevention efforts include a coordinated state plan and funding to 21 local communities to implement local sexual violence prevention efforts.

- Program interventions impact nearly 250,000 Ohioans annually.
- The PHHSBG is the only funding source available at the state level to coordinate sexual assault crisis services.
- The SADVP Program is responsible for reviewing and updating hospital protocols and maintaining standards for the implementation of sexual assault crisis services in communities.

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## Center for Health Promotion (CHP) \$496,811

CHP strengthens the public health infrastructure in Ohio by providing public health professionals with the latest tools, resources and services that are necessary to perform their jobs more efficiently and effectively.

- Provides technical assistance on social marketing, such as campaign planning, focus group facilitation, and radio and TV script writing. ODH staff, local health departments, community-based organizations, external partners and other public health professionals can access actionable marketing information.
- Marketing information allows public health practitioners to more effectively reach diverse populations with public health information and messages.
- Without the CHP, Ohio's public health infrastructure will be ill-equipped to meet today's public health challenges.

## Chronic Disease Epidemiology \$177,441

The goal of an epidemiologist is to reduce public health risks by studying the pattern of disease in population groups, societies, and cultures.

- Elimination of PHHSBG funding would result in a reduction of statewide capacity to identify high-risk populations for chronic disease, develop effective interventions and evaluate those intervention strategies.

## Women's Health Program \$66,188

Identifies issues that affect women's health and advocates for women's health concerns within state government and throughout the state of Ohio.

- Loss of block grant funding would lead to the termination of the Women's Health Coordinator (WHC) who is responsible for promoting healthy outcomes for women and girls. The WHC is also charged with preventing and responding to domestic violence by implementing and evaluating domestic violence workplace policies for state employees.

1. *Prevention for a Healthier America: Investments in Disease Prevention Yield Significant Savings, Stronger Communities.* Trust for America's Health. February 2009.
2. DeVol, Ross, and Armen Bedroussian, *An Unhealthy America: The Economic Burden of Chronic Disease*, Milken Institute, October 2007.
3. Children's Safety Network Economics & Data Analysis Resource Center.
4. Ohio Hospital Association.
5. Children's Safety Network Economics & Data Analysis Resource Center.
6. Ted Miller, Mark Cohen, & Brian Wiersema, U.S. Department of Justice, *Victim Cost & Consequences: A New Look*. (1996).
7. Office of Criminal Justice Services, Ohio Department of Public Safety, 2009.
8. Crime Victims Assistance and Prevention Program, Ohio Attorney General, 2010.
9. The FY 11 appropriation for the PHHSBG is \$100.25 million.
10. Children's Safety Network Economics & Data Analysis Resource Center.