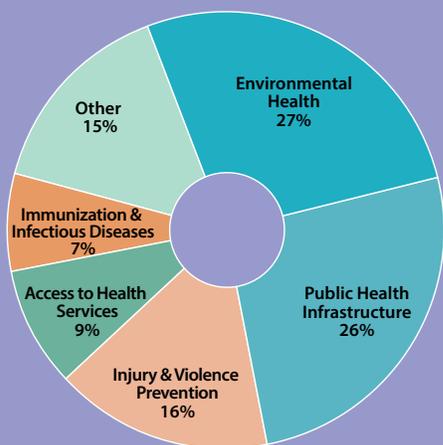


Preventive Health and Health Services Block Grant

New York

How New York Invested PHHS Block Grant Funding

Total FY 2015 Funding: \$10,150,340



New York used PHHS Block Grant funding for its Migrant and Seasonal Farmworker Health Program, providing high-quality and culturally appropriate care to more than 25,000 migrant and seasonal farmworkers and their families.

Ensuring Access to Care for Migrant and Seasonal Farmworkers

Each year, about two-thirds of New York's migrant and seasonal farmworkers (MSFWs) receive healthcare services. During the growing season, MSFWs commonly work long hours and don't receive compensation when they are away from the fields or orchards. When farmworkers need medical care, they frequently have to choose between seeking care and remaining on the job so they can get paid. MSFWs and their families often experience major challenges in accessing healthcare, such as lacking nearby health services, facing language and culture differences, having limited financial resources, and lacking health-related knowledge. Frequent relocation also makes seeking and continuing healthcare services difficult for MSFWs.

The New York State Department of Health (NYSDOH) used Preventive Health and Health Services (PHHS) Block Grant funding to create New York's Migrant and Seasonal Farmworker Health Program. The program provides about 26,000 MSFWs and their families with access to high-quality, culturally appropriate health and social support services.

The program funds 12 contract agencies to deliver health-related services to MSFWs and their families in 30 counties. Typically, 17,000–20,000 people receive medical, dental, and support services each year. Outreach, health screenings, referrals, and follow-up activities to migrants in camp settings are the mainstay of migrant health services. These services reduce the barriers faced by MSFWs in accessing care such as inconvenient hours, shortages of bilingual staff, transportation issues, and lack of follow-up care.

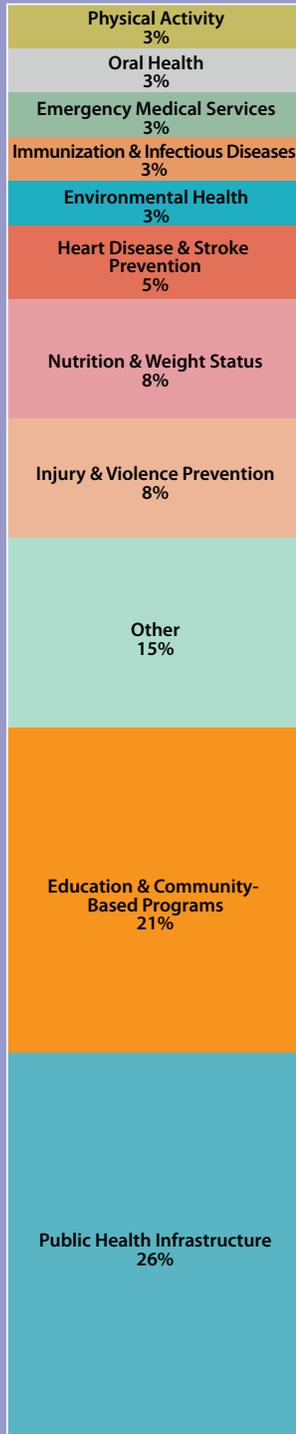
In 2015, more than 25,000 MSFWs received medical, dental, and social support services through the MSFW Health Program. In addition, about 60,500 MSFWs were educated about health-related topics like immunization, chronic diseases, nutrition, and injury prevention. The contract agencies also provided blood pressure screening to nearly 13,500 MSFWs and arranged follow-up care for workers with diagnosed health or dental conditions.

The PHHS Block Grant funding is helping NYSDOH's Migrant and Seasonal Farmworker Health Program make tremendous progress in protecting the health of this vulnerable population—providing access to preventive care and health services to these workers and their families.



Preventive Health and Health Services Block Grant

2015 Top-Funded Health Areas



Excludes all non-discretionary funding: administrative costs (up to 10%), direct assistance, and funds set aside for sexual violence (rape prevention).

What is the PHHS Block Grant?

The Preventive Health and Health Services (PHHS) Block Grant provides flexible federal funding to 61 states, tribes, and US territories. These grantees use the funding to meet vital public health needs within their jurisdictions that align with national priorities—the Healthy People (HP) 2020 objectives.

Block Grant Investment Across the Nation

In fiscal year 2015, the 61 grantees received about \$126 million from the PHHS Block Grant to support critical programs and services. Most funds (85%) supported HP 2020 objectives in 10 key areas: 1) Public Health Infrastructure, 2) Education and Community-Based Programs, 3) Injury and Violence Prevention, 4) Nutrition and Weight Status, 5) Heart Disease and Stroke Prevention, 6) Environmental Health, 7) Immunization and Infectious Diseases, 8) Emergency Medical Services, 9) Oral Health, and 10) Physical Activity.

Public Health Infrastructure was the most funded area (26% of total funding); 43 grantees directed funds toward public health systems assessment, health improvement planning, accreditation, quality improvement, laboratory services, and other infrastructure activities. Education and Community-Based Programs was the second-most funded area (21% of total funding); 29 grantees directed funds toward community-based primary prevention services, worksite health promotion programs, and culturally appropriate community health programs.

Grantees also directed funds toward supporting local organizations working to improve community health (27% of total funding) and reduce health disparities (23% of total funding).