

## **Centers for Disease Control and Prevention Fiscal Year 2022 Grants Summary Profile Report for**

#### **Marshall Islands**

This profile includes selected CDC grants and cooperative agreements provided to health departments, universities, and other public and private agencies in Marshall Islands. Refer to the "About the Data" section below for important qualifying statements about the data.

#### 2022 Population Estimate:

**Timeframe:** 10/01/21 - 09/30/22

CATEGORY	<b>OBLIGATED AMOUNT</b>	PERCENTAGE
Chronic Disease Prevention and Health Promotion	\$230,000	7.0%
Cross-Cutting Activities and Program Support	\$74,375	2.2%
Emerging and Zoonotic Infectious Diseases	\$204,191	6.2%
HIV/AIDS, Viral Hepatitis, STI and TB Prevention	\$622,189	18.8%
Immunization and Respiratory Diseases	\$1,353,892	40.9%
Public Health Scientific Services (PHSS)	\$126,588	3.8%
Public Health Social Services Emergency Fund (PHSSEF)	\$697,990	21.1%
Vaccines for Children	\$0	0.0%
Grand Total	\$3,309,225	100.0%

CATEGORY & SUB-CATEGORY	<b>OBLIGATED AMOUNT</b>	
Chronic Disease Prevention and Health Promotion	\$230,000	
Diabetes	\$86,600	
Heart Disease and Stroke	\$4,000	
Racial and Ethnic Approach to Community Health (REACH)	\$39,400	
Tobacco	\$100,000	
Cross-Cutting Activities and Program Support	\$74,375	
Coronavirus Preparedness and Response Supplemental	\$33,635	
Preventive Health and Health Services Block Grant - PPHF	\$40,740	
Emerging and Zoonotic Infectious Diseases	\$204,191	
Emerging Infectious Diseases	\$65,591	
Epi and Lab Capacity Program - PPHF	\$105,000	
Vector-borne Diseases	\$33,600	
HIV/AIDS, Viral Hepatitis, STI and TB Prevention	\$622,189	
Domestic HIV/AIDS Prevention and Research	\$202,942	
Sexually Transmitted Infections (STIs)	\$136,660	

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CATEGORY & SUB-CATEGORY	OBLIGATED AMOUNT
Tuberculosis (TB)	\$282,587
Immunization and Respiratory Diseases	\$1,353,892
Immunization and Other Respiratory Diseases	\$1,305,563
Influenza/Influenza Planning and Response	\$48,329
Public Health Scientific Services (PHSS)	\$126,588
Surveillance, Epidemiology, and Informatics	\$126,588
Public Health Social Services Emergency Fund (PHSSEF)	\$697,990
PHSSEF COVID-19 Activities	\$697,990
Vaccines for Children	\$0
Vaccine Purchases	\$0
Grand Total	\$3,309,225

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Total: \$3,309,225 **Grantee** Category **Sub-Category Grantee Project Title Grantee City** Line **Grantee Name** Amount County PREVENTION AND CONTROL OF CHRONIC **Chronic Disease** REPUBLIC OF THE DISEASE AND ASSOCIATED RISK FACTORS IN THE MARSHALL ISLANDS Majuro Marshall Islands Prevention and Health Diabetes Undefined \$86,600 U.S. AFFILIATED PACIFIC ISLANDS, U.S. VIRGIN MINISTRY OF HEALTH Promotion ISLANDS, AND PUERTO RICO PREVENTION AND CONTROL OF CHRONIC Chronic Disease REPUBLIC OF THE DISEASE AND ASSOCIATED RISK FACTORS IN THE 2 Prevention and Health Heart Disease and Stroke MARSHALL ISLANDS Majuro Marshall Islands Undefined \$4,000 U.S. AFFILIATED PACIFIC ISLANDS, U.S. VIRGIN Promotion MINISTRY OF HEALTH ISLANDS, AND PUERTO RICO PREVENTION AND CONTROL OF CHRONIC Chronic Disease Racial and Ethnic REPUBLIC OF THE DISEASE AND ASSOCIATED RISK FACTORS IN THE 3 Majuro Marshall Islands Approach to Community MARSHALL ISLANDS Prevention and Health Undefined \$39,400 U.S. AFFILIATED PACIFIC ISLANDS, U.S. VIRGIN MINISTRY OF HEALTH Promotion Health (REACH) ISLANDS, AND PUERTO RICO PREVENTION AND CONTROL OF CHRONIC Chronic Disease REPUBLIC OF THE DISEASE AND ASSOCIATED RISK FACTORS IN THE MARSHALL ISLANDS Prevention and Health Tobacco Majuro Marshall Islands Undefined \$100,000 U.S. AFFILIATED PACIFIC ISLANDS, U.S. VIRGIN MINISTRY OF HEALTH Promotion ISLANDS, AND PUERTO RICO Coronavirus Preparedness REPUBLIC OF THE Cross-Cutting Activities 5 and Response IMMUNIZATION AND VACCINES FOR CHILDREN MARSHALL ISLANDS Majuro, Marshall Islands Undefined \$33,635 and Program Support Supplemental MINISTRY OF HEALTH Preventive Health and REPUBLIC OF THE Cross-Cutting Activities PREVENTIVE HEALTH AND HEALTH SERVICES 6 Health Services Block MARSHALL ISLANDS Maiuro Undefined \$40,740 and Program Support **BLOCK GRANT? 2022** MINISTRY OF HEALTH Grant - PPHF EPIDEMIOLOGY AND LABORATORY CAPACITY FOR REPUBLIC OF THE **Emerging Infectious Emerging and Zoonotic** 7 PREVENTION AND CONTROL OF EMERGING MARSHALL ISLANDS Majuro, Marshall Islands Undefined \$65.591 Infectious Diseases Diseases INFECTIOUS DISEASES (ELC) MINISTRY OF HEALTH EPIDEMIOLOGY AND LABORATORY CAPACITY FOR REPUBLIC OF THE **Emerging and Zoonotic** Epi and Lab Capacity 8 PREVENTION AND CONTROL OF EMERGING MARSHALL ISLANDS Majuro, Marshall Islands Undefined \$105.000 Program - PPHF Infectious Diseases **INFECTIOUS DISEASES (ELC)** MINISTRY OF HEALTH EPIDEMIOLOGY AND LABORATORY CAPACITY FOR REPUBLIC OF THE **Emerging and Zoonotic** 9 Vector-borne Diseases PREVENTION AND CONTROL OF EMERGING MARSHALL ISLANDS Majuro, Marshall Islands Undefined \$33,600 Infectious Diseases INFECTIOUS DISEASES (ELC) MINISTRY OF HEALTH ACCELERATING THE PREVENTION AND CONTROL REPUBLIC OF THE Domestic HIV/AIDS HIV/AIDS, Viral Hepatitis, OF HIV, VIRAL HEPATITIS, STDS AND TB IN THE MARSHALL ISLANDS Majuro, Marshall Islands \$202,942 Undefined STI and TB Prevention Prevention and Research

MINISTRY OF HEALTH

U.S.-AFFILIATED PACIFIC ISLANDS



Total: \$3,309,225

Total	Total: \$3,309,225									
Line	Category	Sub-Category	Grantee Project Title	Grantee Name	Grantee City	Grantee County	Amount			
11	HIV/AIDS, Viral Hepatitis, STI and TB Prevention	Sexually Transmitted Infections (STIs)	ACCELERATING THE PREVENTION AND CONTROL OF HIV, VIRAL HEPATITIS, STDS AND TB IN THE U.SAFFILIATED PACIFIC ISLANDS	REPUBLIC OF THE MARSHALL ISLANDS MINISTRY OF HEALTH	Majuro, Marshall Islands	Undefined	\$136,660			
12	HIV/AIDS, Viral Hepatitis, STI and TB Prevention	Tuberculosis (TB)	ACCELERATING THE PREVENTION AND CONTROL OF HIV, VIRAL HEPATITIS, STDS AND TB IN THE U.SAFFILIATED PACIFIC ISLANDS	REPUBLIC OF THE MARSHALL ISLANDS MINISTRY OF HEALTH	Majuro, Marshall Islands	Undefined	\$282,587			
13	Immunization and Respiratory Diseases	Immunization and Other Respiratory Diseases	IMMUNIZATION AND VACCINES FOR CHILDREN	REPUBLIC OF THE MARSHALL ISLANDS MINISTRY OF HEALTH	Majuro, Marshall Islands	Undefined	\$1,238,993			
14	Immunization and Respiratory Diseases	Immunization and Other Respiratory Diseases	EPIDEMIOLOGY AND LABORATORY CAPACITY FOR PREVENTION AND CONTROL OF EMERGING INFECTIOUS DISEASES (ELC)	REPUBLIC OF THE MARSHALL ISLANDS MINISTRY OF HEALTH	Majuro, Marshall Islands	Undefined	\$66,570			
15	Immunization and Respiratory Diseases	Influenza/Influenza Planning and Response	IMMUNIZATION AND VACCINES FOR CHILDREN	REPUBLIC OF THE MARSHALL ISLANDS MINISTRY OF HEALTH	Majuro, Marshall Islands	Undefined	\$48,329			
16	Public Health Scientific Services (PHSS)	Surveillance, Epidemiology, and Informatics	EPIDEMIOLOGY AND LABORATORY CAPACITY FOR PREVENTION AND CONTROL OF EMERGING INFECTIOUS DISEASES (ELC)	REPUBLIC OF THE MARSHALL ISLANDS MINISTRY OF HEALTH	Majuro, Marshall Islands	Undefined	\$126,588			
17	Public Health Social Services Emergency Fund (PHSSEF)	PHSSEF COVID-19 Activities	EPIDEMIOLOGY AND LABORATORY CAPACITY FOR PREVENTION AND CONTROL OF EMERGING INFECTIOUS DISEASES (ELC)	REPUBLIC OF THE MARSHALL ISLANDS MINISTRY OF HEALTH	Majuro, Marshall Islands	Undefined	\$697,990			
18	Vaccines for Children	Vaccine Purchases		REPUBLIC OF THE MARSHALL ISLANDS, HEALTH SERVICES	Majuro-Marshall	Majuro	\$0			
						Total	\$3,309,225			





#### **Data Included**

- The grants and cooperative agreements data in this report include funding obligated and awarded (i.e., obligated funds) domestically to States, the District of Columbia (DC), U.S. Territories and Freely Associated States in fiscal year 2022 (FY22; 10/1/21 to 9/30/22) from CDC's domestic appropriations.
- In addition to including the value of cooperative agreements for immunization programs, the data also includes the value of vaccines purchased and provided through the Vaccines for Children program.
- Because the data includes funds obligated in FY22, it may include funding authorized through legislation passed in previous years, but only the amount actually obligated in FY22.
- The funding data is categorized by CDC budget line (i.e., by the CDC appropriation account used to make the investment), primarily as shown in CDC's and the Agency for Toxic Substances and Disease Registry's (CDC/ATSDR's) FY22 Operating Plans. Additional funding categories and subcategories also were included to capture COVID-19 supplemental funding obligated in FY22, whether directly appropriated to CDC or through funding transfers from the Department of Health and Human Services (HHS), and funds transferred from HHS for the Drug Free Communities Support program. The data also includes funding provided through the American Rescue Plan Act of 2021 (Public Law No: 117-2).

#### **Data Excluded**

- This data does not include any CDC expenditures, such as contracts, personnel, direct assistance, or other CDC operational and administrative costs.
- The following grants and cooperative agreements data were outside the scope of this profile and were excluded: funding of International activities, Reimbursable Agreements (funds from other federal agencies to support their missions), Cooperative Research and Development Agreements, Royalties, User Fees and Intra-Departmental Delegation of Authority funds (e.g., fund transfers to CDC from HHS; as noted in the "Data Included" section, there were two exceptions: funding transferred from HHS to CDC for the COVID-19 response and the Drug Free Communities Support program were included), Gifts and Donations, Global Health funds, and Buildings and Facilities funds.

Therefore, the funding profiles data do not reflect CDC's total appropriations.

#### **Data Sources**

• Funding data is from the CDC Office of Financial Resources (for grants and cooperative agreement data) and the CDC National Center for Immunization and Respiratory Diseases (for Vaccines for Children vaccine purchase data)





#### **Data Interpretation and Use**

- These data are useful as a snapshot of CDC grant and cooperative agreement funding provided to grantees within states, DC, and U.S. territories and freely associated states by CDC budget line. However, caution should be used in interpreting variations across years or jurisdictions. Several reasons for variations are (1) the amounts, purpose, and focus of funding provided by Congress each year can vary, and (2) changes in national and/or CDC/ATSDR priorities and strategies due to factors such as urgent and emerging health threats and changes in population health status and needs. In terms of funding opportunities, (1) not all eligible entities apply for every program opportunity, (2) most federal funding is awarded via a competitive or merit-based process and not all eligible entities that apply are funded for every program, and (3) some funding is allocated according to a pre-set formula (such as per capita allocation or a need- based funding allocation), which is sometimes specified in law.
- Users of this site and data should be aware of various factors that make comparisons of data between jurisdictions and by per capita difficult to interpret and may lead to inaccurate conclusions in the absence of more in-depth study. Some of those factors include the following:
  - o CDC has many different grant types with varying application eligibility and award criteria such as population disease burden, per capita formula-based, competitive based on proposal merit, non-competitive, etc.
  - Awards made to an entity will typically reflect the geographic location of the entity's official business or billing address such as a State capitol for a State government award. The awards therefore will not reflect the actual geographic application of the funds by the grantee in carrying out the purpose of the grant.
  - o CDC makes awards to various national associations that carry out national public health programs that have nationwide impact; however, the awards will be reflected in the geographic jurisdiction of the association's main office.
  - o In addition, there may be variation across years for where a program/activity resides in CDC's organizational and budget structure. Funding sources linked to a particular program/activity may also vary year-to-year. Therefore, it is possible for a multi-year project to fall into one category or sub-category one year and into another the next. In addition, funding categories may be added or deleted as CDC's budget changes year to year (e.g., funding categories are deleted because their shorter-term funding sources expire). This makes 1:1 comparisons of one year's set of projects to another year's set of projects under each category or sub-category a challenge.

#### For More Information

CDC Budget

CDC Funding

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