What Is the Prevention Research Centers Program?

Chronic diseases are among the most common, costly, and preventable of all health problems in the United States. CDC’s National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP) is at the forefront of the nation’s efforts to work with state and local public health agencies, academic researchers, and communities to find new ways to promote health and prevent disease. NCCDPHP supports these partners to work together to design, test, and share strategies that have been proven to work.

In 1984, Congress authorized the U.S. Department of Health and Human Services (HHS) to create a network of academic health centers to conduct practical public health research. CDC was selected to provide leadership, technical assistance, and oversight for this network, which is called the Prevention Research Centers (PRC) Program.

CDC supports 26 centers connected with accredited schools of public health or schools of medicine with a preventive medicine residency across the United States. Each center conducts at least one core research project with an underserved population that has high rates of disease and disability. The centers also work with partners on special interest projects (funded by CDC and other HHS agencies) and on projects funded by other sources. As a result, the PRC network conducts hundreds of projects each year.

All PRCs share a common goal of addressing behaviors and environmental factors that affect chronic diseases such as cancer, heart disease, and diabetes. Several PRCs also address injury, infectious disease, mental health, and global health. Some centers work with specific populations, such as African-Americans and Latinos in inner cities, American Indians in New Mexico and Oregon, Mexican-Americans along the U.S.–Mexico border, rural residents who live below the poverty level, and people who are deaf or hard of hearing. Other centers focus on youth or older adults.

Each center works to develop its capacity to conduct rigorous academic research with community partners. Through scientific rigor, collaborative partnerships, and practical application, the PRCs continue to find new ways to improve quality of life across the nation. The PRC network has also been able to leverage funding for additional research. For every $1 invested by CDC in 2013, the PRCs received an average of $7.99 in additional funds.

* A list of the 26 centers and their core projects is provided on page 4.
How Does CDC Work with PRCs to Improve the Nation’s Health?

CDC is committed to leading strategic public health efforts to prevent chronic conditions, help people be healthier, and end health disparities. To be more effective, the NCCDPHP is working to coordinate its efforts in four key areas or domains: epidemiology and surveillance, environmental approaches, health system interventions, and community programs linked to clinical services. Better coordination will lead to more effective interventions and more efficient use of resources. With $25.5 million in FY 2014 funding, the PRCs will conduct work in all four domains.

Epidemiology and Surveillance
Deaf and hearing researchers and community members from the University of Rochester PRC created the Deaf Health Survey (DHS), a video survey of health risk behaviors among deaf adults who use American Sign Language. Because national health surveys are not conducted in sign language, little is known about the health risk behaviors of deaf adults. The DHS produced the first health surveillance data from deaf adults in Rochester, New York. Researchers will use the data to adapt an evidenced-based intervention designed to increase healthy eating and physical activity among people who are deaf.

Environmental Approaches
The Tulane University PRC addresses factors of the physical and social environment that influence diet and physical activity in the city of New Orleans. The PRC supported coordination of a Healthy Food Retail Study Group and developed recommendations for improving residents’ access to healthy foods. The recommendations were used to create the Louisiana Healthy Foods Retail Program, which gives grants and loans to supermarkets, farmers markets, and food retailers to make fresh fruits, vegetables, and other healthy food affordable in low-income communities.

Health System Interventions
Researchers from the University of Kentucky PRC (UK PRC) developed and piloted a DVD titled “1-2-3 Pap” that encourages rural Appalachian women to complete the human papillomavirus vaccine (HPV) series, a primary strategy to prevent cervical cancer. Women who watched the DVD were 2.44 times more likely to complete the series than women who received standard care. The UK PRC is working with its partners to adapt this model so it can be repeated in other underserved areas with high rates of cervical cancer.

Community Programs Linked to Clinical Services
The University of Arizona PRC (AzPRC) is working to identify guidelines for primary care best practices for community health workers (CHWs) that address chronic disease and mental health. The AzPRC is also helping develop a CHW program that links primary care settings with community health services. An evaluation of a prevention program called Pasos Adelante (“Steps Forward”) found that CHWs were effective in motivating Latino adults to reduce their risk of heart disease, diabetes, and other chronic diseases related to diet and physical activity. Improvements were reported in participants’ body mass index, blood pressure, total cholesterol, and glucose levels.

Networking for Knowledge
PRCs encourage public health and medical faculty from different areas to work together to solve complex health and psychosocial problems. Groups of PRCs work together in thematic networks that address research gaps in cancer prevention and control, cognitive health, physical activity policy, epilepsy management, and nutrition and obesity policy. The variety of centers and community partners allows researchers to test strategies in many different settings at the same time.

The PRCs also work closely with health departments, the private sector, education agencies, and national and community organizations. These partnerships help translate promising research findings into practical, cost-effective prevention programs that are relevant to the needs of communities.

Future Directions
The PRC network recently added two new thematic networks. The Workplace Health Research Network will focus on promoting health in the workplace and translating research into sustainable workplace programs in communities across the country. The Global and Territorial Health Research Network will apply lessons learned to domestic programs.

The PRC Program will continue to promote the widespread use of effective interventions and support the development of comprehensive prevention research centers. During 2014–2019, each PRC will conduct a practical public health prevention research project in one of the following categories: Dissemination and Implementation Research, Public Health Practice-Based Research, or Intervention Research.
Prevention Research Centers: Core Projects

University of Alabama at Birmingham

University of Arizona
Strengthening prevention programs and links between primary care settings and county health departments.

University of Arkansas for Medical Sciences
Improving control of hypertension by identifying effective and cost-effective methods.

University of California, San Francisco
Improving care of young black men living with HIV through community engagement and support.

Case Western Reserve University
Improving access to nutritious food in low-income, low-access neighborhoods through farmers markets and education.

Dartmouth College
Reducing obesity and smoking among people with serious mental illness.

University of Illinois at Chicago
Increasing physical activity by improving access to the built environment and use of parks in the community.

University of Iowa
Increasing physical activity in communities by using lay health advisors.

Johns Hopkins University
Prevent substance abuse by providing training in life skills for adolescents.

University of Kentucky
Increasing colorectal cancer screening among adults in rural Appalachia.

University of Massachusetts Medical School-Worcester
Improving healthy eating and healthy activities with a built environment intervention.

University of Minnesota
Improving learning and academic performance and reducing health risk behaviors among middle school students and improving teacher skills.

Morehouse School of Medicine
Preventing sexually transmitted disease and HIV/AIDS among minority youth in urban areas.

University of New Mexico Health Sciences Center
Promoting healthy eating, active living, and tobacco-free living.

New York University School of Medicine and City University of New York School of Public Health
Improving management of high blood pressure among South Asians in New York City.

University of North Carolina at Chapel Hill
Preventing heart disease through community programs linked to clinical services.

Oregon Health & Science University
Using health promotion and chronic disease prevention to meet the health needs of tribal and other underserved regional communities.

University of Pennsylvania
Reducing obesity and subsequent chronic disease among older adults.

University of Rochester
Increasing healthy lifestyles among deaf adults who use American Sign Language.

University of South Carolina at Columbia
Increasing physical activity and healthy eating in churches in South Carolina.

University of South Florida
Increasing colorectal cancer screening among adults in partnership with the health department.

Tulane University
Increasing physical activity and nutrition through sustainable environmental and social improvements.

University of Washington
Increasing participation of older adults in a community exercise program (EnhanceFitness) by linking community programs to clinical services.

West Virginia University
Improving physical activity behaviors among children by using school-based and family-based approaches.

Yale University
Reducing obesity through improved nutrition and increased physical activity in multiple communities.

For more information, please contact the Centers for Disease Control and Prevention National Center for Chronic Disease Prevention and Health Promotion 4770 Buford Highway NE, Mail Stop F-78, Atlanta, GA 30341-3717 Telephone: 800-CDC-INFO (232-4636) • TTY: 888-232-6348 Contact CDC-INFO • Web: www.cdc.gov/prc