

At A Glance 2015

Prevention Research Centers

Building the Foundation for Effective Public Health Strategies



Chronic diseases are among the most common, costly, and preventable of all health problems in the United States. The Centers for Disease Control and Prevention (CDC) 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.

CDC's National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP) supports these partners to work together to design, test, and share strategies that have been proven to improve community health.

Public Health Problem

Research Needed to Improve Community Health

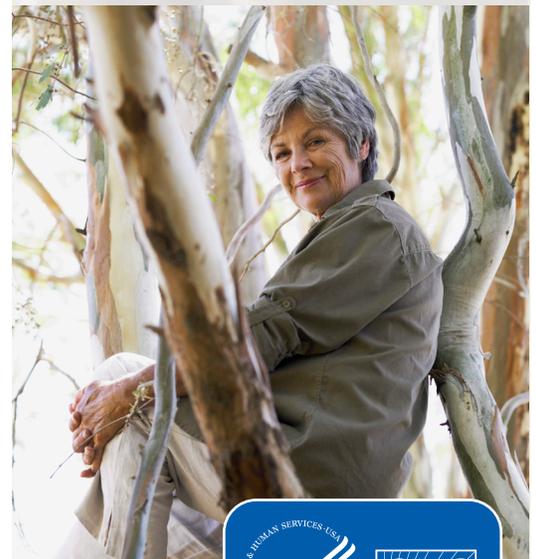
In 1984, Congress authorized the US Department of Health and Human Services (HHS) to create a network of academic health centers to conduct applied public health research. CDC was selected to provide leadership, technical assistance, and oversight for this network, which is called the Prevention Research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

CDC supports 26 centers connected with accredited schools of public health or schools of medicine with a preventive medicine residency program 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 US-Mexico border, rural residents who live below the poverty level, people who are deaf or hard of hearing, and youth or older adults.

Fast Facts

- ◆ The PRC Program is made up of 26 centers across the United States.
- ◆ PRCs work with at-risk communities to promote health and prevent chronic diseases such as cancer, heart disease, and diabetes.
- ◆ For every \$1 invested by CDC in 2013, PRCs received an average of \$7.93 in additional funds.
- ◆ The PRC network conducts hundreds of projects each year. PRCs work together to address research gaps and with other partners to translate research findings into effective prevention programs.



National Center for Chronic Disease Prevention and Health Promotion
Division of Population Health



Each center works to develop its capacity to conduct rigorous academic research with community partners. Through scientific rigor, collaborative partnerships, and practical application, 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 preventive research. For every \$1 invested by CDC in 2013, the PRCs received an average of \$7.93 in additional funds.

CDC's Response

NCCDPHP works in four key areas or domains: epidemiology and surveillance, environmental approaches, health care system interventions, and community programs linked to clinical services. This comprehensive approach supports healthy choices and behaviors, makes healthier options more available, and helps Americans better manage their health.

CDC is committed to leading strategic public health efforts to prevent chronic conditions and to end health disparities. With \$25.4 million in FY 2015 funding, the PRCs will conduct work in all of NCCDPHP's four domains. CDC also awarded \$12.3 million to 21 PRCs for 56 Special Interest Projects to design, test, and share effective public health prevention research strategies.

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 survey produced the first health surveillance data from deaf adults in Rochester, New York. Researchers will use the data to adapt an evidence-based intervention designed to increase healthy eating and physical activity among the deaf.

CDC's Network of Prevention Research Centers,
Project Period 2014-2019



Note: A list of the 26 centers and their core projects is provided on page 4.



Environmental Approaches

The Tulane University PRC addresses factors of the physical and social environment that influence diet and physical activity in New Orleans. The PRC supported coordination of the Healthy Food Retail Study Group and the development of recommendations for improving residents' access to healthy foods. The recommendations were used to develop 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 foods affordable in low-income communities.

Health Care System Interventions

Researchers from the University of Kentucky 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 more than twice as likely to complete the series as women who received standard care.

The PRC worked with its partners to adapt this program so it could be repeated in other underserved areas with high rates of cervical cancer. The program was eventually distributed throughout Kentucky, which led to requests for help from North Carolina and West Virginia to develop versions tailored to their states.

Community Programs Linked to Clinical Services

At the University of Arizona PRC (AzPRC), researchers are identifying guidelines for primary care best practices for community health workers (CHWs) that address chronic disease and mental health. The AzPRC is also helping to develop an effective CHW program model 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 and their 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, global health, physical activity policy, epilepsy management, nutrition and obesity policy, and workplace health. The variety of centers and community partners allows researchers to test strategies in many different settings at the same time.

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 the 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 in chronic disease prevention research from low-resource global settings 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, 2014-2019

University of Alabama at Birmingham

Preventing HIV/AIDS among at-risk African American adolescents living in disadvantaged neighborhoods.

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 high blood pressure by identifying effective and cost-effective methods.

University of California, San Francisco

Improving care of 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

Preventing substance abuse through life skills training 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 diseases 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

Promoting weight loss and maintenance in the workplace through behavioral economics and environmental change strategies.

University of Pittsburgh

Reducing obesity and subsequent chronic disease among older adults.

University of Rochester

Increasing healthy lifestyles among deaf adults who use 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 healthy eating by improving physical and social environments.

University of Washington

Increasing participation of older adults in a community exercise program (EnhanceFitness) through community programs linked to clinical services.

West Virginia University

Improving physical activity behaviors among children through school- and family-based approaches.

Yale University

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

For more information, contact

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