Communities Putting Prevention to Work
At A Glance

Chronic Disease in the United States

Chronic diseases cause premature death, reduce quality of life, and increase medical costs for millions of Americans. Eighty-six percent of annual health care expenditures in the United States are spent treating and managing chronic diseases and conditions.

Communities Putting Prevention to Work

The Communities Putting Prevention to Work (CPPW) initiative awarded $403 million to 50 communities of varying sizes across the nation to implement environmental-level interventions. These interventions were aimed at preventing and reducing causes of many chronic diseases, including obesity, physical inactivity, tobacco use, and exposure to secondhand smoke.

Benefits of Communities Putting Prevention to Work

CPPW increased access to healthy foods. Through CPPW, healthy foods became more common in vending machines, and healthy foods become more available and more affordable in corner stores. CPPW made physical activity easier through improved urban design and land use plans, creation of bike lanes and walking trails, and guidelines requiring daily physical activity in school and childcare settings. CPPW decreased tobacco use/exposure through restricting the sale of tobacco to youth, expanding smoke-free areas in workplaces, restaurants, bars, campuses, parks, and beaches, reducing secondhand smoke exposure in multi-unit housing complexes, and expanding smoking cessation services.

Local evaluation efforts indicate that the CPPW initiative was linked to many short-term benefits (up to 3 years). Some of the many examples include the following:

- The Seattle, WA, CPPW program was directly associated with a decline in obesity prevalence in low-income school districts, while non-CPPW school districts showed no such decline.
- In Los Angeles County, CA, community members' use of school facilities for physical activity was 16 times higher in schools involved in the program than in other schools.
- Prior to New York City's Health eQuits program, 23% of smokers had received at least one smoking intervention; afterwards, 54% had.

Impact of Communities Putting Prevention to Work

The Prevention Impacts Simulation Model (PRISM) was used to estimate medical costs associated with all risk factor related cardiovascular events and averted deaths and disability from 2010 through 2020. PRISM indicated that if these community health improvements begun in CPPW can be sustained between 2010 and 2020, 14,000 chronic disease related deaths and $2.4 billion in health care costs can be averted. CPPW demonstrated both health and economic benefits of large-scale community interventions. In addition, CPPW increased local capacity to implement/evaluate public health interventions, developed numerous products that support the work of public health departments nationwide, and provided valuable lessons to CDC regarding ways to better support communities.