



PREVENTION
RESEARCH CENTERS
BUILDING THE SCIENTIFIC
RESEARCH BASE WITH
COMMUNITY PARTNERS

AT A GLANCE 2009

NATIONAL CENTER FOR CHRONIC DISEASE PREVENTION AND HEALTH PROMOTION
IMPROVING HEALTH AND QUALITY OF LIFE FOR ALL PEOPLE







What is the Prevention Research Centers Program?

In 1984, Congress authorized the U.S. 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 administer the Prevention Research Centers (PRC) Program and to provide leadership, technical assistance, and oversight.

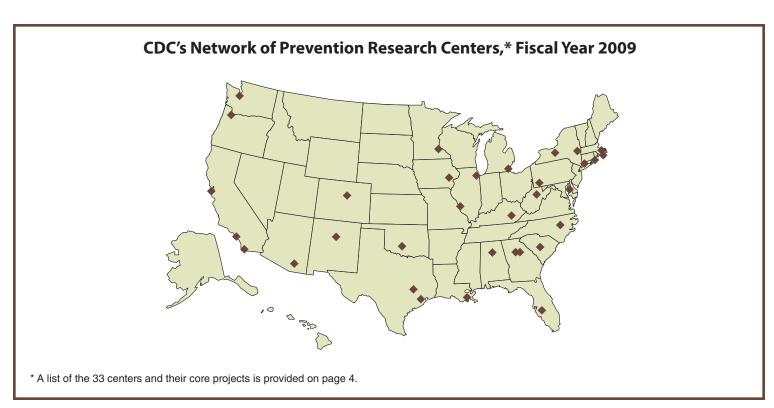
Today, CDC supports 33 centers associated with schools of public health or medicine throughout the country. Each center conducts at least one core research project with an underserved population that has a disproportionately large burden of disease and disability. In addition to conducting core research, the centers work with partners on special interest projects (defined by CDC and other HHS agencies) and on projects funded by other sources. As a result, the PRCs' portfolio includes hundreds of projects each year.

The PRCs involve community members, academic researchers, and public health agencies in finding innovative ways to promote health and prevent disease. The partners design, test, and disseminate strategies—often as new policies or recommended public health practices.

All centers share a common goal of addressing behaviors and environmental factors that contribute to chronic diseases such as cancer, heart disease, and diabetes. Several PRCs also address injury, infectious disease, mental health, oral health, and global health.

Some centers work with distinct populations, such as African Americans and Latinos in inner cities, Mexican Americans along the U.S.-Mexico border, American Indians in New Mexico and Oregon, residents in rural communities who live below the poverty level, and people with hearing disabilities. Other PRCs focus on youth or older adults. The PRC Program reaches 41 million people in 66 partner communities.

Through scientific rigor, collaborative partnerships, practical application, and community acceptance, the PRCs continue to find new ways to improve the nation's quality of life.







































How Does CDC Work with PRCs to Improve the Nation's Health?

Networking for Knowledge

PRCs encourage interaction among faculty from different disciplines, thus bringing an array of expertise to each project. This blending of expertise is essential to solving complex health and psychosocial problems. Departments of education, social work, psychology, anthropology, and many others work with the schools of public health and medicine.

The PRC network also fosters collaboration among the centers. Groups of PRCs collaborate in thematic networks that address cancer prevention and control research, healthy aging, physical activity policy research, Latino health, and cardiovascular health research and translation. Because each center in a network offers a unique geographic location and community relationship, researchers can simultaneously test strategies in different settings.

The PRCs also work closely with state and local health departments, the private sector, state education agencies, and national and community organizations. Through these partnerships, promising research findings are translated into practical, costeffective prevention programs in communities.

Gaining and Sustaining Community Trust

To encourage trust, the academic institutions and community partners that constitute the PRCs make long-term commitments and take time to build solid working relationships. Researchers strive to respect the dignity of project participants and the values of the community. As a result, communities are able to make the needed changes and sustain them over time.

These principles also are applied at the national level. A representative from each PRC community is appointed to the National Community Committee, a group of motivated and dedicated individuals who make recommendations to the PRC Program about how to ensure community collaboration. The program now offers the Partnership Trust Tool, a survey and discussion guide that helps spark dialogue and align partners' perceptions of each other.

Training Leaders in Public Health Research

In collaboration with the Association of Schools of Public Health (ASPH), the PRCs offer 2-year fellowships for doctorallevel students of racial or ethnic minority origin. Thirty-five fellows have gained hands-on experience with projects directed by the centers and their partners. The PRCs also offer extensive continuing education for health practitioners, public health professionals, and aspiring leaders seeking challenge and growth.

PRC training includes an evidence-based public health course, a physical activity and public health course, a social marketing education program, institutes on several health topics, and workshops requested by state health departments for their staffs. PRCs also offer training in selected Latin American countries.

Future Directions

The PRC Program continues to promote dissemination of interventions. It is testing the feasibility of a Web-based dissemination tool to help practitioners put proven interventions into use.

The PRC Program continues to collaborate with other CDC divisions and public health partners such as medical institutions funded by the National Institutes of Health's Clinical and Translational Science Awards to translate research into practice and advance the field of dissemination research. The PRCs also will work across organizational lines to cosponsor forums and other discussions of crosscutting research and research designs for complex interventions.

In 2008, CDC and an external evaluation team completed a 5-year evaluation of PRC's community-based participatory research; organizational structure; types and goals of research; and the diversity of its training, technical assistance, and mentoring. An ASPH Blue Ribbon Panel, also convened in 2008, analyzed the program and made recommendations for its future. Findings from these assessments are being applied to enhance the rigor of PRC research and ensure accountability to stakeholders.









































Prevention Research Centers: Core Projects

University of Alabama at Birmingham

Reducing the health risks and health disparities in Alabama's underserved, rural, predominantly African American communities.

University of Arizona

Influencing policy and conducting behavioral interventions to prevent and control diabetes in multiethnic communities along the Arizona-Mexico border.

Boston University

Improving the health and well-being of Boston's public housing residents.

University of California at Berkeley

Improving health in California's Korean American communities.

University of California at Los Angeles

Involving parents in promoting health, reducing risk behaviors, and preventing disease among adolescents.

University of Colorado

Reducing the risk for overweight, obesity, and diabetes among children and adults in the Rocky Mountain region of Colorado.

Columbia University

Developing a tailored Web site to improve communications to promote the health of low-income minority communities.

Emory University

Reducing health disparities and preventing cancer in rural southwest Georgia.

Harvard University

Improving nutrition and physical activity among children and adolescents.

University of Illinois at Chicago

Preventing diabetes in Chicago's low-income, underserved minority communities.

University of Iowa

Empowering community organizations in rural Iowa to improve the health and quality of life of community residents.

Johns Hopkins University

Preparing young people in Baltimore to be healthy and productive adults.

University of Kentucky

Preventing and controlling cancer among residents in rural Appalachian Kentucky.

University of Michigan

Increasing the ability of communities to reduce health disparities and improve residents' health.

University of Minnesota

Preventing and reducing risk behaviors among teenagers and promoting healthy adolescent development.

Morehouse School of Medicine

Building the capacity of low-income, African American communities to promote health, prevent disease, and reduce health disparities.

University of New Mexico

Promoting the mental health and well-being of American Indian youth and their families.

University of Albany, SUNY

Preventing chronic diseases through community-based interventions.

University of North Carolina at Chapel Hill

Reducing the risk for obesity among rural, low-income, and minority women by empowering them to make healthy life changes.

University of Oklahoma

Promoting healthy lifestyles among students in Oklahoma's public schools.

Oregon Health and Science University

Improving the health of American Indian, Alaska Native, and Native Hawaiian communities.

University of Pittsburgh

Preventing disease and promoting healthy, active lives for older adults in Pennsylvania.

University of Rochester

Promoting health and preventing disease among people who are deaf or hard-of-hearing.

Saint Louis University

Reducing risk for heart disease, stroke, and cancer among residents in medically underserved, rural areas of Missouri.

San Diego State University and

University of California at San Diego

Increasing physical activity and improving health among Latinos in San Diego.

University of South Carolina

Promoting health through physical activity.

University of South Florida

Using community-based prevention marketing to improve community health.

Texas A&M Health Science Center

Preventing diabetes and other chronic diseases in underserved rural communities.

University of Texas Health Science Center at Houston

Investigating influences on children's behavior as they age to early adulthood.

Tulane University

Improving health behaviors of New Orleans residents through neighborhood reconstruction and environmental change.

University of Washington

Sustaining physical activity among older adults.

West Virginia University

Improving health and quality of life among rural adolescents.

Yale University

Preventing or reducing chronic disease among residents of Connecticut's economically disadvantaged cities.

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