

Congress of the United States

Washington, DC 20515

February 20, 2024

Mandy Cohen, MD, MPH
Director
Centers for Disease Control and Prevention
1600 Clifton Road
Atlanta, GA 30329

Dear Dr. Cohen,

We write to express our concern over the Center for Disease Control and Prevention's (CDC) decision to cease funding the Rocky Mountain Prevention Research Center (RMPRC). As you may know, the Rocky Mountain RMPRC is a CDC-funded Prevention Research Center (PRC) dedicated to identifying public health problems and focusing on the development, testing, and evaluation of public health interventions that can be applied widely, with a particular emphasis on underserved communities.

The RMPRC is based in the Colorado School of Public Health (SPH), which is built on the collective expertise and vision of faculty at three leading educational and research institutions: the University of Colorado, Colorado State University, and the University of Northern Colorado. The RMPRC has a diverse portfolio of leading-edge research, innovative public health practices, and workforce training that applies a population lens to prevent mental illness and substance misuse while simultaneously promoting overall health and well-being.

In 1984, Congress authorized the U.S. Department of Health and Human Services (HHS) to create a network of academic research centers to conduct community-based applied public health research to address chronic diseases and other leading causes of death and disability in the United States. The RMPRC was first funded by the CDC PRC Network in 1998. Since then, the CDC has funded it every five years for nearly 20 years to serve the Rocky Mountain region. This funding has been so critical to the Rocky Mountain Region (CDC Region 8) that it even predates the founding of Colorado SPH. This funding has specifically benefited programming, research, and life-changing outcomes in all but four counties within Colorado.

With more than 200 community and research partners in the Rocky Mountain Region, the RMPRC is partnering with communities, especially those underserved and rural populations, to respond to their unique needs of communities while responsibly leveraging resources. This has propelled the RMRPC to unprecedented heights, yielding remarkable successes and leaving a significant impact on Colorado communities. Recent examples of RMPRC successes include:

- Developing and testing an innovative, multi-level community intervention called STANCE (*Supporting Trauma Awareness in Childhood Environments*) to prevent the intergenerational transmission of adverse childhood experiences in the San Luis Valley, which was translated to other rural communities across CO and the region.
- Creating three health promotion programs, the Culture of Wellness in Preschools, the Integrated Nutrition Education Program, and the *Text2LiveHealthy Program*, that have been accepted into the United States Department of Agriculture (USDA) 's Supplemental Nutrition Assistance Program Education (SNAP-Ed) toolkit as evidence-based programs and are currently being delivered in schools and preschools throughout Colorado.
- Delivering innovative online workshops and training on critical evidence-based public health skills and knowledge to aid the current workforce in addressing rising mental illness and substance misuse rates.

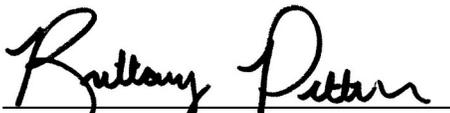
- Promoting the health and well-being of more than 1,000 early childhood care providers in both rural and urban areas of Colorado through the implementation of the Fostering Resilience in Early Education (FREE) and the Well-being of the ECE workforce in Low-resourced Locations (WELL) programs.
- Working closely with our state and local public health departments to increase COVID-19 vaccine uptake and reduce vaccine hesitancy throughout Colorado's rural and underserved communities.

Despite receiving an approved application score, we understand that the CDC decided to approve but not fund the RMPRC for the next 5-year funding cycle. The decision to not fund a qualified program will directly impact the health and well-being of Coloradans and our neighboring states. As Colorado and the Rocky Mountain Region grow in population and respond to emerging needs and crises related to unmet mental health and substance misuse needs (e.g., young people, rural and urban underserved communities, etc.), we believe it is imperative that the decades of funding benefitting the RMPRC at the Colorado SPH continue, or the impact will be felt for generations to come.

Over the past five years, the RMPRC has supported health promotion and workforce training programs that have reached tens of thousands of children and adults in the Rocky Mountain Region. Additionally, researchers at the RMPRC have published more than 100 academic articles to advance public health research, including chronic disease prevention and physical and mental health promotion. In our view, this loss in funding will roll back progress that we have made as a state and region, precisely at a time when it is needed the most - a time when there are escalating mental illness, substance misuse, and overdose rates, especially among our rural and underserved communities.

We believe that maintaining funding for the RMPRC is essential to ensuring all Coloradans and residents of the Rocky Mountain Region achieve health equity by optimizing social-emotional, mental, and physical health. We ask the CDC to provide us with more information on why the decision not to fund RMPRC was made despite their receiving a fundable score. We believe that the merits and successes of the RMPRC are self-evident based on 20 years of successful programming, research, and community engagement. We encourage you to consider restoring the CDC's investment in the Rocky Mountain Region.

Sincerely,



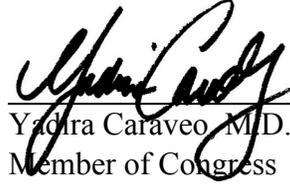
Brittany Pettersen
Member of Congress



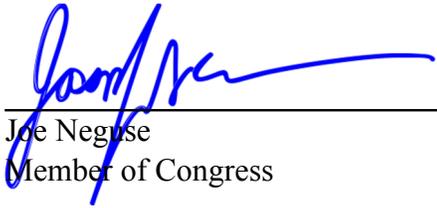
Jason Crow
Member of Congress



Diana DeGette
Member of Congress



Yadira Caraveo, M.D.
Member of Congress



Joe Neguse
Member of Congress