

GAO Highlights

Highlights of [GAO-17-693](#), a report to congressional committees

Why GAO Did This Study

CDC, an agency within HHS, created the SIP program in 1993 as a supplemental funding mechanism to support health promotion and disease-prevention research being done at its PRCs. Currently, there are 26 PRCs. In fiscal years 2014 through 2016, CDC awarded more than \$40 million for SIPs. SIP topics vary from year to year but are to be aligned with public health priorities, such as the Healthy People 2020 Objectives—HHS's 10-year national objectives for improving Americans' health. SIPs are sponsored and primarily funded by CDC organizational units, referred to as sponsoring units.

House Report 114-195 included a provision for GAO to review the SIP program. This report describes (1) what research CDC chooses to fund through the SIP mechanism, and (2) what have been identified as advantages and disadvantages of SIP eligibility being limited to PRCs. GAO reviewed documents from CDC and analyzed CDC data on SIPs awarded in fiscal years 2014 through 2016. GAO also interviewed CDC officials, including officials from 5 of the 10 sponsoring units that together accounted for over 90 percent of SIP funding during this time period, officials from 4 PRCs with varying experience with SIPs, and 4 organizations with knowledge of prevention research.

View [GAO-17-693](#). For more information, contact Marcia Crosse at (202) 512-7114 or crossem@gao.gov

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CENTERS FOR DISEASE CONTROL AND PREVENTION

Use of Special Interest Projects to Fund Prevention Research Centers

What GAO Found

The Centers for Disease Control and Prevention (CDC) uses the Special Interest Project (SIP) mechanism to fund community-based prevention research that would benefit from a multidisciplinary group of researchers. SIPs are supplemental funding awards that focus on topics of interest or gaps in knowledge or research and can also support the development of state and local public health interventions and policies. SIPs are only available to CDC's Prevention Research Centers (PRC)—selected academic health centers at universities with schools of public health or medical schools with residency programs in preventive medicine.

CDC officials said that they would choose the SIP mechanism when the research they want to fund is intended to involve community-based organizations or members of the community. They also use SIPs when they seek access to researchers who have established partnerships with diverse population groups across the country. They would not choose the SIP mechanism when the research they want to fund is not focused on public health prevention, including research that is clinical or laboratory-based; would be better suited for an entity other than an academic health center; or would be better funded through a contract to allow CDC to direct the research protocol. CDC's collaborations with experts in the field—including those at other federal agencies—help to inform its development of the research funding opportunities offered through SIPs. For example, CDC officials use information they learn through participation in multiagency workgroups and advisory committees to identify gaps in knowledge that SIP funding could help to address. CDC officials also stated that this collaboration can also help to avoid potential duplication of research.

The key advantage of SIPs being limited to PRCs is the ability to rapidly initiate research, according to officials with whom GAO spoke—including officials from CDC, PRCs, and organizations with knowledge of prevention research. Factors cited as contributing to this ability included the research infrastructure and community relationships already established at the PRCs. Officials from CDC and outside organizations also identified a few potential disadvantages to limiting eligibility for SIPs, including the potential for reduced access to expertise from researchers or others who are not affiliated with the universities in which PRCs are located, although some noted that PRCs may bring in outside expertise through subcontracts with other entities.

The Department of Health and Human Services (HHS) provided technical comments on a draft of this report, which GAO incorporated as appropriate.