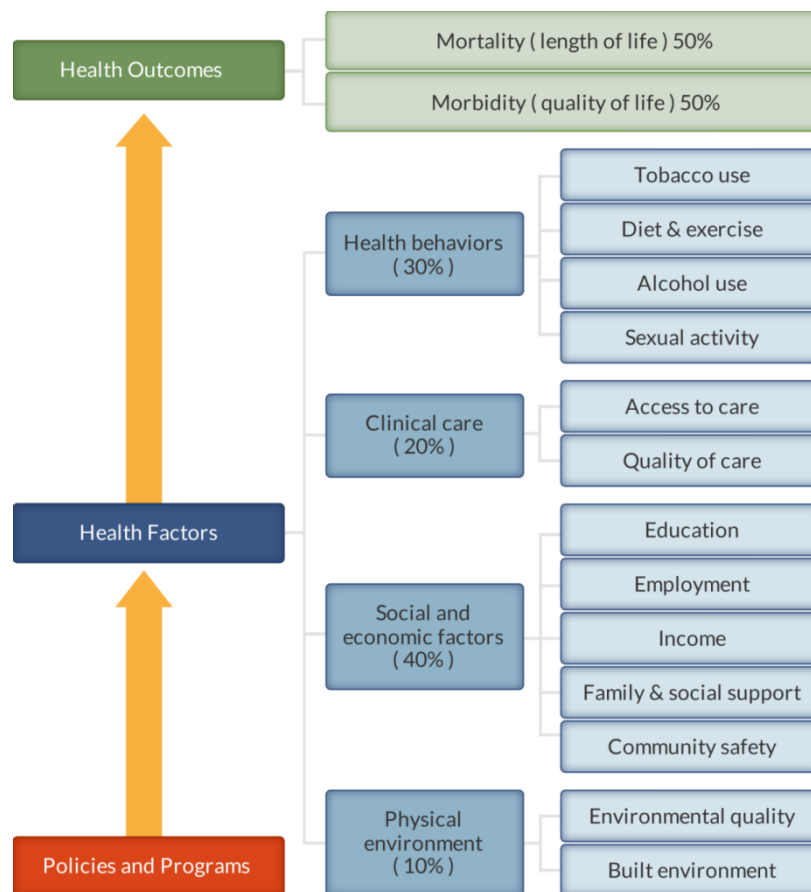




## County Health Rankings Research Grants

# 2012 CALL FOR PROPOSALS



County Health Rankings model ©2012 UWPHI

The *County Health Rankings & Roadmaps* program is seeking proposals from qualified researchers to strengthen and evaluate the impact of the *County Health Rankings*.

**Brief Proposal Deadline: November 19, 2012**



## County Health Rankings Research Grants Overview

For complete details, refer to specific pages/sections noted below.

### Purpose (page 3)

The Robert Wood Johnson Foundation (RWJF) and the University of Wisconsin Population Health Institute (UWPHI) are collaborators on the *County Health Rankings & Roadmaps* program to mobilize local communities, national partners, and leaders across multiple sectors to improve health. *County Health Rankings* Research Grants will serve an important role in strengthening and evaluating the *County Health Rankings (Rankings)*. Funding for this solicitation is provided by UWPHI as part of its grant funding from RWJF to support the *Rankings*. UWPHI will support studies by researchers for: quantitative analyses of *Rankings* data or results; refinement of current methodology used in the *Rankings* model; or, studies of the quantitative or qualitative impact of the *Rankings*. (See Areas for Research on page 4).

### Total Awards

Up to \$300,000 will be available for research funded under this Call for Proposals, with a combination of:

- Small studies—up to \$50,000 for a maximum of 18 months.
- Complex and comprehensive studies—up to \$100,000 for a maximum of 18 months. Applicants seeking higher funding amounts will need to clearly specify the data collection or analysis steps requiring the higher amount.

### Eligibility Criteria (Page 5)

To be eligible, an applicant organization must be located in the United States or its territories.

- Applications must be submitted by an educational institution or nonprofit organization that is tax exempt under Section 501(c)(3).
- We welcome applications from investigators in health, social and behavioral sciences, and other fields.
- We seek a diverse group of applicants, including minorities, early career researchers, and individuals who work in non-academic settings.

### How to Apply (Page 5)

A Brief Proposal should be submitted to the University of Wisconsin Population Health Institute. A form has been created for the Brief Proposal (pages 9-11).

### Selection Criteria (Page 7)

Complete selection criteria can be found on page 7.

### Key Dates and Deadlines (Timeline page 6)

- November 8, 2012 (2 pm ET)—Voluntary conference call for questions on the proposal. Registration is required—send e-mail to [Barbara.Rudolph@match.wisc.edu](mailto:Barbara.Rudolph@match.wisc.edu)
- November 19, 2012 (6 pm ET)—Deadline for receipt of Brief Proposal
- December 3, 2012—Notification to all applicants
- January 7, 2013—Full Proposals due
- February 4, 2013—Announce final selection
- March 1, 2013—Start date for all awards

## Background

We know that much of what influences our health happens outside of the doctor’s office—in our schools, workplaces, and neighborhoods. The ability to find good jobs, to prepare our children for college and career success, to establish financial security, and to live in safe communities that promote positive relationships among family and friends are not usually thought of as health interventions. However, these factors play an important role in our ability to lead long and healthy lives.

To better illustrate how these factors influence people’s health where they live, learn, work and play, and to identify solutions that make it easier for people to be healthy in their own communities, the Robert Wood Johnson Foundation (RWJF) and the University of Wisconsin Population Health Institute (UWPHI) have collaborated to establish the *County Health Rankings & Roadmaps* program. The goal of the *County Health Rankings*, launched in 2010, and the newer *County Health Roadmaps* is to mobilize local communities, national partners, and leaders across multiple sectors to improve health.

The *County Health Rankings (Rankings)* are based on a model of population health (shown on the cover) that emphasizes the many factors that, if improved, can lead to better health. The *Rankings* are released annually, providing a ranking of overall health for nearly every county in all 50 states. In addition, the *Rankings* identify the crucial factors that drive health in communities, such as high school graduation rates, unemployment rates, rates of violent crime, and the percentage of children in poverty. The *Rankings*, based on the latest data available for each county, are unique in their ability to measure the overall health of each county in all 50 states on the multiple factors that influence health.

Intended to serve as a call to action, the *Rankings* have ignited important conversations and activities focused on improving health in communities across the country. In these communities, we have seen the emergence of multi-sector collaborations that include: business, education, public health, health care, community organizations, community members, foundations, and policy makers working together to take aim at the root causes of poor health brought to light by the *Rankings*. These groups are identifying their community’s health needs, assets and priorities, and developing strategies to improve their residents’ health.

To encourage further, similar use of the *Rankings*, RWJF and UWPHI have developed the *County Health Roadmaps* project. Together, the *County Health Rankings & Roadmaps* program is a way for local leaders, concerned citizens and policy makers to create strong and healthy communities. This approach encourages communities to work together to translate the *Rankings* into action by identifying priorities for change, and then using evidence about what works to change policies and systems in ways that make it easier for people to be healthy and improve their quality of life.

The *Roadmaps* project includes the *Roadmaps to Health Community Grants* program; grants to national organizations working with local leaders in business, government, nonprofit organizations, and health care to improve population health; the *Roadmaps to Health Prize* to recognize communities whose promising efforts are leading to better health; and customized technical assistance to communities on strategies to improve health, with a specific focus on policy and system change. For more information on the *County Health Rankings & Roadmaps* program see <http://www.countyhealthrankings.org>.

### **The County Health Rankings Model**

The conceptual model for the *Rankings* provides a quick guide for the applicant's focus; it is shown on the cover and in much greater detail on the CHR&R website at [www.countyhealthrankings.org/our-approach](http://www.countyhealthrankings.org/our-approach). The model itself is based on a population health model incorporating social, biomedical, behavioral, economic, and environmental determinants of health.

The model includes two Health Outcomes (mortality and morbidity) that are weighted equally, and contribute 100% of the final Health Outcomes score for a county. These outcomes are impacted by both policies and programs and health factors. At this point, we only directly measure indicators for the underlying Health Factors (health behaviors, clinical care, social and economic factors and physical environment). While policies and programs impact health factors and health outcomes, they are not directly measured in the *Rankings*.

The health factors indicators in the model are directly measured but vary in terms of the strength of the evidence linking them to either mortality or morbidity. The indicators and sources can be found on the website at <http://www.countyhealthrankings.org/ranking-methods/data-sources-and-measures>, under "List of Measures and Sources".

The weighting assigned to the Health Factors was determined using five perspectives: history, review of the literature, weighting schemes used by other health rankings, analysis, and stakeholder opinion. Equal weights for the Health Outcomes were assigned because mortality and morbidity are equally important.

The underlying data used to construct the *Rankings* are available to the public; we anticipate quantitative researchers will avail themselves of the data via website downloads, reducing effort to locate data and re-create the analysis for testing. All data metrics (raw and conversions) are included for calculating the *Rankings*; data are released in CSV format (EXCEL).

### **County Health Rankings Research Grants**

Researchers have shown increasing interest in measuring and monitoring health; particularly the health of populations. New ways of conceptualizing and measuring health have led us to conclude that there are many components contributing to the health of a population. Yet, most often research efforts have focused on single indicators of health, rather than a combination of indicators, because of difficulties determining how to form a composite of the information and finding data sources to utilize for composites that are accessible, reliable, at the same unit of analysis, and for proximate time periods.

Two major efforts focus on rankings of entire populations:

- 1) Since 1990, [America's Health Rankings](#) have ranked the health of all 50 states using a composite measure including health outcomes and determinants.
- 2) In 2010, the [County Health Rankings](#) were released for the first time, ranking the health of nearly every county within each of the 50 states, based on a composite approach (CHR 2010).

This CFP, "The County Health Rankings Research Grants," serves an important role in strengthening and evaluating the impact of the *County Health Rankings*. When completed, the published work by external researchers will highlight potential improvements and the impact that has occurred from the *Rankings*

by providing disciplined inquiry from outside the program. While there have been some articles focused on the *County Health Rankings*, we desire a more focused effort.

Researchers will work either independently or together to address a set of questions based on the research categories provided below. Research should be validated by submission and publication in a peer-reviewed journal. Given the sometimes lengthy review process of peer-reviewed journals, the actual publication date may extend beyond the maximum funding timeline of 18 months.

### Areas for Research

We anticipate researchers submitting an application will review materials on our website related to the conceptual model as well our ranking methods, data sources, etc., and familiarize themselves with the *Rankings* data available for download on the website at <http://www.countyhealthrankings.org/ranking-methods>.

For this call for proposals, we are focusing on three categories of research that are most relevant to strengthening the *Rankings* or evaluating the impact of the *Rankings*. We have provided four *examples* of research topics within each of the three categories of research.

#### 1) Quantitative analyses of *Rankings* data or results

- a) Using the *Rankings* data as a starting point to assess disparities across or within counties
- b) Using the *Rankings* data to ascertain the costs associated with poor health within counties
- c) Using the *Rankings* data or results with other sources of information to conduct new analyses that could enhance the *Rankings* and drive changes in population health
- d) Using the *Rankings* results to identify trends

#### 2) Refinement of current methodology used in the *Rankings* model

- a) Examining our current methods of weighting the factors or the outcomes and through analyses determining whether modifications or additions would enhance the methodology
- b) Developing a stronger “Built Environment” section within the *Rankings* model
- c) Developing new methods for utilization of data/measures on green space, recreation, or housing quality
- d) Testing alternative methods for addressing small cell sizes in counties

#### 3) Study of the quantitative or qualitative impact of the *Rankings*

- a) Examining the impact of *Rankings* media coverage and uptake by policymakers
- b) Determining whether media coverage has led to community action related to the *Rankings*
- c) Determining whether trends in outcomes or factors are leading toward better health within counties
- d) Ascertaining which types of policies or programs are more likely to react to the *Rankings* information

Participants in this grant program will either demonstrate how additional research can benefit and strengthen the *Rankings* or will conduct an evaluation that will define the impact of the *Rankings* on policies and communities. Successful applications are restricted by the categories of research but are not bound by the examples.

### Eligibility Criteria

To be eligible, an applicant organization must be located in the United States or its territories.

- Applications must be submitted by an educational institution or nonprofit organization that is tax exempt under Section 501(c)(3).
- We welcome applications from investigators in health, social and behavioral sciences, and other fields.
- We seek a diverse group of applicants, including minorities, early career researchers and individuals who work in non-academic settings.

### How to Apply

There are two stages in the competitive proposal process: (1) applicants submit their Brief Proposal that describes the proposed study and, if invited, (2) selected applicants then submit a full proposal, line-item budget, budget narrative, and other documentation.

### Successful Applications

Successful applications will feature the necessary expertise to ensure the researcher(s) has the necessary skills to appropriately address the targeted content areas/questions within our more global categories.

If a collaborative research effort is used, it should include participation from a university or other organization with expertise in the area being addressed. While the individual research applicant need not have an explicit focus on health, the research group that is defined must include participation from researchers with expertise in health outcomes and statistics if focusing on changes to the methodology. By collaborating with research organizations such as a public health institute; a health policy organization; or a group with experience studying disparities, the research team will be better able to describe, understand, and demonstrate its role in achieving meaningful and practical research impact.

Applicants must clearly explain how any external members will participate in the proposed project. It is also possible to add expertise when needed during the course of the research if the work requires it, but the core members should be defined in the proposal. Applicants must fully describe how their research group will be managed and enlarged as necessary (if known at this point).

Successful applicants will have experience with research approaches, data management and analysis, and publication of findings in peer-reviewed journals.

The unit of analysis for the quantitative projects should be the county level. Other units of analysis would not allow us to incorporate findings from the research into the current ranking system. Qualitative approaches, by their design, may use other levels of analysis.

As mentioned above, an expected deliverable for research projects is publication in a peer-reviewed journal. If the paper is focused on additions to the *Rankings* or new methodology for ranking, a methods

white paper would assist us in implementing the results, but this would not substitute for a publication. The anticipated outcome of this new research is a more effective approach in the development and dissemination of the *Rankings* which further results in better health across counties.

**Submission of a Brief Proposal to CHR**

The University of Wisconsin Population Health Institute team is asking for a Brief Proposal from those eligible to apply (see eligibility criteria above). The Brief Proposal should include:

|  |   |   |
|--|---|---|
| 1. Applicant Information   |   | Use Brief Proposal Form (page 9)  |
| 2. Project Description   | Page limit: 4   | Double-spaced, 11 Font  |
| 3. Experience  | One paragraph for each key participant (max of 150 words per paragraph) | Double-spaced, 11 Font<br>Attach CVs as an Appendix (max 15 pages per CV) |
| 4. Work Plan including roles/FTEs (include collaborating partners if applicable) | Page limit: 2   | Double-spaced, 11 Font  |
| 5. Summary Budget  |   | Use Project Budget Form (page 11)   |

Proposals should succinctly describe the rationale/ hypothesis, supportive data, plan for statistical or qualitative evaluation and must assure reviewers that the question being asked is important and that the methodology applied to the question will be sound.

We place a high value on clarity and brevity in the proposal. Please restrict responses to the page limits. Excessively long Brief Proposals may distract the reviewers from the essence of the proposal. Fully written proposals submitted as Brief Proposals are unlikely to earn a better score than what would have been assigned to a much shorter well-written Brief Proposal.

The Brief Proposal form can be found on page 9.

**Timeline for County Health Rankings Research Grants**

|                   |  |
|-------------------|--|
| October 22, 2012  | Release of Call for Proposals  |
| November 8, 2012  | Conference call for applicants at 2:00 PM ET (Registration Required)<br>E-mail: Barbara.Rudolph@match.wisc.edu |
| November 19, 2012 | Brief Proposals due by 6 pm ET   |
| December 3, 2012  | Notification to all applicants   |
| January 7, 2013   | Full Proposals due   |
| February 4, 2013  | Announce final selection   |
| March 1, 2013     | Start date for funded projects   |
| August 31, 2014   | End of funded projects   |

## SUBMISSION:

By **November 19, 2012, 6:00 pm ET**, submit completed Brief Proposal via e-mail to:

**Barbara Rudolph, PhD, MSSW (UWPHI)**

Barbara.Rudolph@match.wisc.edu

## Selection Criteria

All proposals will be screened for eligibility and then reviewed using the following criteria:

1. Commitment to and capacity of the applicant organization to implement the proposed research; manage the grant funds; and administer and track expenditures and funding.
2. Demonstrated experience conducting research.
3. A clearly defined focus on either the outcomes and/or one of the four health factors included in the *Rankings* model, or on the impact of the *Rankings*; or, on new methodology/data or trends.
4. Rationale for how the findings will be useful to the *County Health Rankings and Roadmaps* program and others, including other researchers.
5. A clear and feasible plan with benchmarks for achieving the proposed research and a timeline of key events.
6. An analysis of the anticipated opportunities and challenges that are likely to affect the research project, including a plan for how challenges will be addressed.
7. Data source(s) for the proposed research.
8. A budget that aligns spending with objectives and strategies.

## Brief Proposal Follow-up

The reviewers may contact submitters with questions if necessary; please be sure to include e-mail/phone contact information on the cover page of the Brief Proposal. The UWPHI team will notify all Brief Proposal submitters following the review of the Brief Proposal; if selected, we will ask for submission of a Full Proposal.

## Expectations for Full Proposals

Submitters of selected research proposals will be invited to submit a Full Proposal. It is our intent to only select a small number of proposals to move forward. More details regarding the content of the Full Proposal will be provided at that time. In general, in a Full Proposal, applicants will refine their Brief Proposal and elaborate with more detail.

**QUESTIONS: For further information** about the application or administration of funds, please contact Barbara Rudolph, PhD, MSSW (UWPHI) at [Barbara.Rudolph@match.wisc.edu](mailto:Barbara.Rudolph@match.wisc.edu) or (608) 263-9312.

## Expectations for Grantees

1. Work with the University of Wisconsin-Madison, Research and Sponsored Programs (RSP) to establish grant contract and payments.
2. Within 4 weeks of notification of award, provide a detailed work plan to the UWPHI *Rankings* team.
3. Prepare a brief (1-2 pages) progress report quarterly for submission to the UWPHI *Rankings* team.
4. Submit at least one paper to a peer-reviewed journal within the 18-month award cycle.



5. At the close of the grant, the grantee is expected to submit a copy of their submitted paper for publication and provide a more detailed white paper on quantitative and qualitative methods used in the study to the UWPHI *Rankings* team.
6. Share findings and methodology with external audiences as appropriate.
7. Work with the CHR&R Communications Director and Robert Wood Johnson Foundation communications staff to plan and participate in the dissemination of findings.

### **About the University of Wisconsin Population Health Institute**

<http://uwphi.pophealth.wisc.edu/>

The University of Wisconsin Population Health Institute is the focal point within the University of Wisconsin School of Medicine and Public Health for translating public health and health policy research into practice. The Institute strives to:

- Address a broad range of real world problems of topical importance to government, business, providers, and the public;
- Promote partnerships of inquiry between researchers and users of research, breaking down barriers between the academic community and public and private sector policy makers; and
- Make useful contributions to public health and health policy decisions that improve the health of the public.

### **Principal Investigators: County Health Rankings**

Bridget Booske Catlin, PhD, MHSA

Program Director for Mobilizing Action Toward Community Health (MATCH), Senior Scientist

Patrick Remington, MD, MPH

Associate Dean, School of Medicine and Public Health

### **About the Robert Wood Johnson Foundation**

[www.rwjf.org](http://www.rwjf.org)

The Robert Wood Johnson Foundation focuses on the pressing health and health care issues facing our country. As the nation's largest philanthropy devoted exclusively to improving the health and health care of all Americans, the Foundation works with a diverse group of organizations and individuals to identify solutions and achieve comprehensive, meaningful and timely change. For more than 35 years the Foundation has brought experience, commitment and a rigorous, balanced approach to the problems that affect the health and health care of those it serves. When it comes to helping Americans lead healthier lives and get the care they need, the Foundation expects to make a difference in your lifetime.

Abbey Cofsky, MPH

Program Officer, Public Health

Naima T. Wong, PhD, MPH

Program Officer, Research and Evaluation, Public Health



# County Health Rankings & Roadmaps

A Healthier Nation, County by County

## 2012 County Health Rankings Research Grants Brief Proposal Form

By **November 19, 2012 (6 PM ET)**, submit completed application via e-mail to  
**Barbara Rudolph, PhD, MSSW (UWPHI)**  
Barbara.Rudolph@match.wisc.edu

### 1. Applicant Information

|  |       |
|--|-------|
| Organization Name  |       |
| Organization<br>Tax Identification Number  |       |
| Address  |       |
| Website  |       |
| Research Director  |       |
| Phone  | (   ) |
| E-mail   |       |
| Contact for questions during<br>process (if different from<br>Research Director) |       |
| Phone  | (   ) |
| E-mail   |       |

## **2. Project Description**

In this section, be sure to include the following information:

- 1) Your proposed hypothesis/question(s) and how it relates to the categories described in the CFP
- 2) Supportive data/studies
- 3) Statistical or qualitative methods you propose to use to test the hypothesis/question
- 4) Level of analysis and potential data sources

This section of the proposal should not exceed 4 pages.

## **3. Experience Conducting Similar Research**

Please describe your experience in conducting similar research using one paragraph (up to 150 words) for each key person working on the proposed study within your organization. Attach CVs as an appendix. (15 page limit on individual CVs)

## **4. Work Plan**

Include roles/FTEs (include collaborating partners external to your organization if applicable)

This section of the proposal should not exceed 2 pages.

