

# County Health Rankings & Roadmaps Research Grants 2021 CALL FOR PROPOSALS

## Background

The County Health Rankings & Roadmaps (CHR&R) is a program of the University of Wisconsin Population Health Institute (UWPHI), supported by the Robert Wood Johnson Foundation (RWJF) to mobilize local communities, national partners, and leaders across multiple sectors to improve health and increase health equity. CHR&R Research Grants serve an important role in strengthening and enhancing CHR&R tools and their utility to further health and health equity. Funding for this solicitation is provided by UWPHI as part of its grant from RWJF to support CHR&R. UWPHI will support studies that align with the CHR&R program goals, particularly those to build awareness of the multiple factors that influence health, engage and activate local leaders from many sectors in creating sustainable community change, and grow community power to ensure that people and places have what they need to thrive.

Intended to serve as a call to action, the Rankings have ignited important conversations and activities focused on improving health and increasing health equity in communities across the country. We have seen the emergence of multi-sector collaborations in communities that include business, education, public health, health care, community organizations, community members, foundations, and policymakers aiming at addressing the root causes of poor health and health disparities 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.

In addition, the CHR&R program has supported local leaders, concerned citizens, and policymakers in their efforts to create strong and healthy communities. This approach encourages communities to work together to move from data to action by identifying priorities for change, and then using evidence about what works to change policies and systems in ways that create opportunities for everyone to reach their health potential. CHR&R's Action Center and What Works for Health provide communities with guidance, tools, and evidence-informed strategies to improve health, with a specific focus on policy and system change.

Entering its second decade, the CHR&R program seeks to build upon the foundation it helped to lay regarding the multiple determinants of health. Going forward, the overarching goals are to continue to support improvement in community health and accelerate actions to advance health equity across multiple domains with focuses including differences by place and race/ethnicity. Our work will include disseminating contextualized data and measures, curating evidence and guidance, and strengthening a narrative infrastructure to advance deep health equity<sup>1</sup> and promote social solidarity<sup>2</sup>.

More information on the CHR&R program, including a recently released reflection on the program's first ten years, can be found by visiting [www.countyhealthrankings.org](http://www.countyhealthrankings.org).

<sup>1</sup> Deep health equity refers to diagnoses of core social problems within historical contexts, and with an expansive vision of solutions that promote healing from ongoing historical trauma and freedom from constructs of social domination.

<sup>2</sup> Social solidarity refers to recognition of the interdependence and shared fates between groups of people.

## The County Health Rankings Model

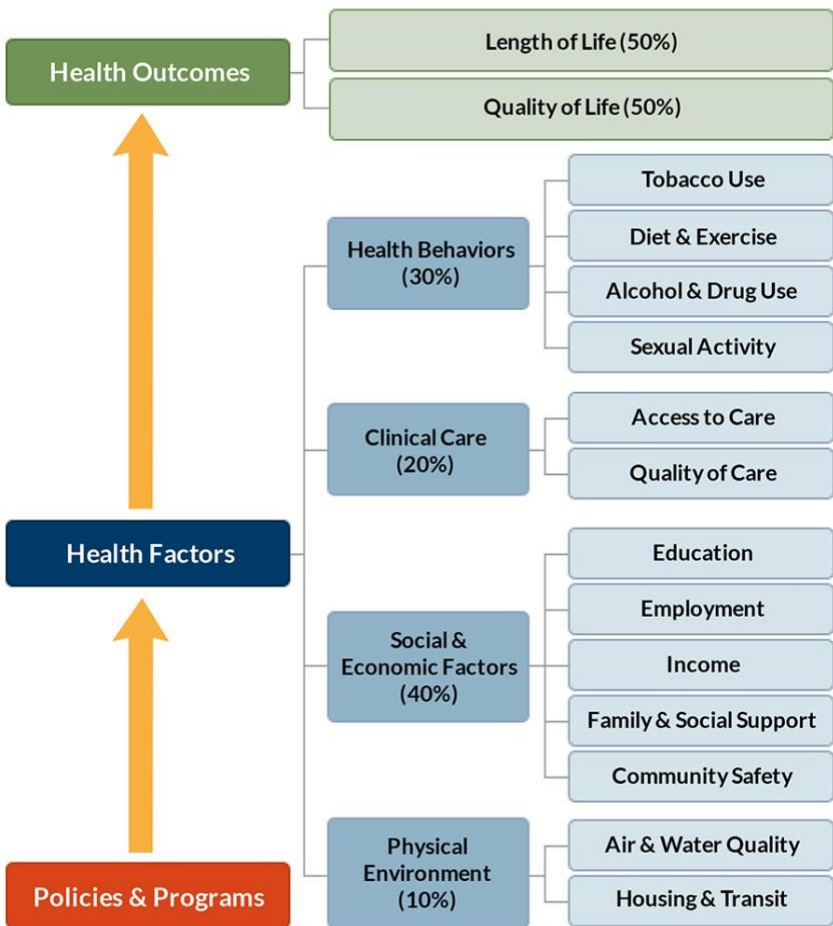
The conceptual model for the Rankings provides a visual that can guide applicants as they think about research ideas that might fall within the scope of this Call for Proposal (CFP). The model shown here is described in greater detail on the CHR&R website at [www.countyhealthrankings.org/model](http://www.countyhealthrankings.org/model). It is based on a population health model, incorporating social, clinical, behavioral, economic, and environmental determinants of health.

The model includes two categories of health outcomes (length and quality of life) that are weighted equally to rank Health Outcomes for each county within a state.

These outcomes are determined by a set of modifiable Health Factors (i.e., multiple determinants of health): health behaviors, clinical care, social and economic factors, and the physical environment. While policies and programs impact health factors and health outcomes, they are currently not incorporated into the Rankings.

As the goals of the program evolve from understanding and communicating the multiple determinants of health to include the multiple determinants of health equity, so too will the CHR&R Model. Guided by the four focuses of the Public Health Critical Race Praxis<sup>1</sup>:

- 1) Contemporary Racial Relations;
  - 2) Knowledge Production;
  - 3) Conceptualization and Measurement;
  - and 4) Action,
- the CHR&R will begin advancing a health equity model and measures through collaborative and participatory scholarship. One example of such scholarship is the CHR&R Research Grants.



County Health Rankings model © 2014 UWPHI

<sup>1</sup> Public Health Critical Race Praxis tailors Critical Race Theory to the field of public health, thus facilitating its use for health equity research. See [Ford & Airhihenbuwa, Ethnicity & Disease, 2018](#)

## County Health Rankings & Roadmaps Research Grants

This CFP, “The CHR&R Research Grants,” plays an important role in strengthening and enhancing the impact of efforts to improve health and increase health equity. The goal of these research grants is to provide scholarly inquiry from outside the program to identify potential improvements to the CHR&R tools that will increase their strategic use and impact. Investigators will work either independently or collaboratively to address a set of questions based on the research focuses provided below.

### Areas for Research

Informed by Public Health Critical Race Praxis, the 2021 CFP will have four focus areas: 1) Contemporary Patterns of Racial Relations; 2) Knowledge Production; 3) Conceptualization and Measurement; and 4) Action. We have provided several *examples* of research topics below that are most relevant to strengthening CHR&R data and tools to enhance their use for learning and impact. However, investigators are encouraged to submit innovative proposals for other research topics that fit within the four focus areas of research.

1. Contemporary patterns of racial relations and spatial inequities using the CHR&R data and tools
  - a. Exploring structural drivers of racism and spatial inequities, and the contemporary mechanisms through which power imbalances operate using methods such as process tracing and the CHR&R data and tools
  - b. Examining the intersections of identity, such as race, ethnicity, and place of populations that are systematically marginalized
  - c. Exploring quantitative, qualitative, or mixed- methodologies to evaluate the diffusion of narratives, framing, or audience response to population health and health equity, and the underlying values that animate action.
  - d. Integrating the full spectrum of knowledge and evidence (e.g., the lived experiences of ethnic groups, [tribal ecological knowledge](#)) into What Works for Health strategy profiles
2. Knowledge production that supports understanding of the context of racial inequity and systemic racism for inclusion in CHR&R. This includes exploring conceptual areas such as:
  - a. Wealth building and community financial health (e.g., banking access, community development investments, cost of living)
  - b. Environmental justice and climate change (e.g., regional climate events, place-based risks and mitigation strategies)
  - c. Healthy democracy for civic participation and representation (e.g., census and voter participation, gerrymandering)
  - d. Family and social support (e.g., child abuse and neglect, community allostatic load, social connectedness)
  - e. Community assets and health-related quality of life (e.g., wellbeing, self-rated health, spirituality, happiness, loneliness)
  - f. Education system (e.g., local funding, education quality, school integration)
  - g. Ethical and policy issues related to the social determinants of health and interventions intended to advance health equity

3. Conceptualization and measurement of spatial and racial differences that evolve CHR&R data sources, methods, tools, and narratives
  - a. Exploring new data repositories and collection efforts as data sources for the Rankings to allow access to more timely and inclusive information (e.g., electronic health records, social media)
  - b. Exploring adjustments to ranks or other value-based sorting that acknowledges the variation within-county or among racial and ethnic groups in measures of health and opportunity
  - c. Place-based assets and resource allocation that might complement or replace people-oriented measures (e.g., number of local job opportunities vs unemployment rate)
  - d. Capturing the intersectionality of racial, spatial, and other axes of inequity, including an understanding of how region-specific context effects racial inequities across diverse geographies
  - e. Exploring methods to highlight positive deviance (aka bright spots, resilience, places with conflicting factors and outcomes) and understand the determinants of this deviance
  - f. Developing approaches to set health and health equity benchmarks with transparency around underlying values for progress and tracking county-level health factors and outcomes over time
  - g. Exploring the methodological considerations for rank calculations using multiple imputation or other methods to account for missing data in counties with smaller populations
  - h. Assessing new strategies and methods, such as legal epidemiology, to identify policies and programs to include in What Works for Health that advance health equity by race/ethnicity
  
4. Actions to counter racial, spatial, and power inequities to strengthen the potential for CHR&R to contribute to change
  - a. Exploring ways to promote community engagement in the creation, interpretation, and use of data by populations that have been systematically underrepresented or marginalized from data
  - b. Exploring policies, systems, or environmental changes as structural elements that favor certain population groups based on race, gender, education, or level of urbanization
  - c. Co-designing a process to engage What Work for Health users in developing a disparity rating framework that could inform strategy selection and implementation
  - d. Assessing how What Works for Health strategies align with tribal community or ethnic group priorities, and identifying additional strategies for CHRR database to fill gaps
  - e. Expanding the vocabulary with which to discuss poorly understood racial and power relations (e.g., tokenism, skepticism)

Successful applicants will demonstrate how the proposed research will benefit and strengthen the CHR&R tools or enhance their use to improve health and health equity. Proposed research must fit into the general focus areas described above, but applications are not bound by the examples that are given. Applicants are encouraged to demonstrate innovative approaches to improving data accessibility, communication, or usability that can enhance an understanding of complex and intertwined health factors.

## Total Awards

Up to \$600,000 will be available for research under this CFP, with a combination of:

- Targeted studies—up to \$50,000 for a maximum of 12 months.
- Complex/comprehensive studies—up to \$100,000 for a maximum of 12 months. Applicants seeking higher funding amounts will need to clearly specify the data collection or analysis steps requiring the higher amount.

## Eligibility Criteria

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

- Applications must be submitted by tax exempt educational institutions, government agencies, or nonprofit organizations that are tax exempt under Section 501(c)(3).
- We welcome applications from investigators in a wide range of disciplines, including: health, social and behavioral sciences, biostatistics, environmental science, political science, demography, spatial data science, community psychology, history, economics, and/or informatics, and other relevant fields.
- We invite a diverse group of applicants, including early career researchers, practitioners, and individuals who work in non-academic settings.

## How to Apply

There are two stages in the competitive proposal process: (1) applicants submit a 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.

## Stage 1: Brief Proposal

### Required Content for Brief Proposals

The CHR&R team is asking for a Brief Proposal from those eligible to apply (see Eligibility Criteria above). The Brief Proposal should include the five sections of content outlined in the Brief Proposal Form (see page 9) and adhere to the length and formatting guidelines specified below:

Section	Length	Format
1. Applicant Information	Page limit: 1	Use Brief Proposal Form (page 9)
2. Project Description	Page limit: 3	Double-spaced, 11 pt. Arial Font
3. Experience Conducting Similar Research	One paragraph for each key participant (max of 150 words per paragraph)	Double-spaced, 11 pt. Arial Font For each key person, include a 4-page biosketch (NIH format or similar) in the appendix.
4. Work Plan	Page limit: 2	Double-spaced, 11 pt. Arial Font
5. Summary Budget	Page limit: 1	Use Project Budget Form (page 11)

## Selection Criteria

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

1. A clearly defined focus on research within one of the four focus areas of interest: 1) Contemporary Racial Relations; 2) Knowledge Production; 3) Conceptualization and Measurement; and 4) Action.
2. Rationale for how the findings will improve population health or advance health equity and be useful to the CHR&R program and others, including practitioners and researchers.
3. 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.
4. A description of data source(s) and sound methods for the proposed research.
5. Demonstrated experience conducting research.
6. A clear and feasible plan for achieving the proposed research and a timeline of key events.
7. A budget that aligns spending with objectives and strategies.
8. Commitment to and capacity of the applicant organization to implement the proposed research; manage the grant funds; administer and track expenditures and funding, if ultimately selected.

Proposals should succinctly describe the rationale/hypothesis, supportive data, and methods. The proposal must assure reviewers that the question being asked is important, that it addresses one or more of the specific research areas outlined in this CFP, and that the data collection methods, measures, hypotheses, and analyses will rigorously be developed and clearly described. **We place a high value on clarity and brevity in the proposal.**

Proposals may include collaborative research efforts conducted jointly by two or more organizations or research centers working together. 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 and pending budget revisions, but the core members should be defined in the proposal.

## Successful Applications

Successful applications will feature the necessary skills and expertise to ensure the investigators can feasibly and appropriately address the targeted content areas/questions within the broader focuses. We anticipate investigators submitting an application will review materials on our website related to the conceptual model as well our research methods, data sources, etc., and familiarize themselves with the CHR&R data and evidence available for download on the website: [www.countyhealthrankings.org](http://www.countyhealthrankings.org).

A successful application will also demonstrate capacity of the applicant organization to implement the proposed research; manage the grant funds; administer and track expenditures and funding; and provide quarterly progress reports.

An expected deliverable for research projects is a publication-ready manuscript submitted to a peer-reviewed journal. If the product is focused on additions to the CHR&R model or new methodology for ranking or rating, a methods white paper will be acceptable in place of a manuscript.

## Brief Proposal Follow-up

The reviewers may contact applicants with questions if necessary; please be sure to include email/phone contact information on the cover page of the Brief Proposal. The UWPHI team will notify all Brief Proposal applicants following the review of the Brief Proposal.

## Stage 2: Full Proposal

### Expectations for Full Proposals

Applicants of selected research proposals will be invited to submit a Full Proposal. More details regarding the format 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 on their expertise and approach.

### Expectations for Grantees

1. Work with the University of Wisconsin-Madison, Research and Sponsored Programs (RSP) to establish grant contract and payments.
2. Provide a detailed work plan to the UWPHI team within 4 weeks of notification of award.
3. Participate in monthly conference calls in the first three months and then once per quarter thereafter with UWPHI staff, other grantees, or researchers, as needed.
4. Prepare 3 brief (1-2 pages) quarterly progress reports for submission to the CHR&R team.
5. At the close of the grant, deliver a copy of a submitted paper for publication and/or provide a more detailed white paper on study methods to the CHR&R team.
6. Share findings and methodology with external audiences as appropriate.
7. Work with the CHR&R communications staff to plan and participate in the dissemination of findings.

### Timeline for CHR&R Research Grants

- May 21, 2021 Questions on the CFP due to County Health Rankings & Roadmaps
- May 28, 2021 Frequently Asked Questions posted on CHR&R website:  
[www.countyhealthrankings.org/researchgrants](http://www.countyhealthrankings.org/researchgrants)
- June 4, 2021 Brief Proposals due by 6:00 pm ET
- June 25, 2021 Notification to all applicants
- July 23, 2021 Full Proposals due
- August 2021 Announce final selection
- Sept 1, 2021 Start date for funded projects

# County Health Rankings & Roadmaps

Building a Culture of Health, County by County

## SUBMISSION:

By June 4<sup>th</sup>, 2021, 6:00 pm ET, submit completed Brief Proposal via email to:  
County Health Rankings & Roadmaps  
[research@chrr.wisc.edu](mailto:research@chrr.wisc.edu)

*Please note: In fairness to all applicants, CHR&R will not accept late submissions.*

**QUESTIONS:** For further information about the application or administration of funds, please contact CHR&R at [research@chrr.wisc.edu](mailto:research@chrr.wisc.edu) or (608) 265-8240.

## County Health Rankings & Roadmaps Responsible Staff Members:

### Leadership

**Sheri Johnson**  
Co-Director

**Marjory Givens**  
Co-Director

### Population Health Research Team

**Keith Gennuso**  
Team Leader

**Elizabeth Blomberg**  
Research & Analytics Scientist

**Suryadewi Nugraheni**  
Research & Analytics Scientist

**Nicholas Schmuhl**  
Research & Analytics Scientist

### About the University of Wisconsin Population Health Institute [www.uwphi.pophealth.wisc.edu/](http://www.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.

### About the Robert Wood Johnson Foundation <http://www.rwjf.org/>

The Robert Wood Johnson Foundation (RWJF) is working to improve the health and well-being of everyone in America, reflecting the Guiding Principles, “We act as good stewards of private resources, using them to advance the public interest with a focus on helping the most vulnerable.”



# County Health Rankings & Roadmaps

Building a Culture of Health, County by County

# County Health Rankings & Roadmaps

Building a Culture of Health, County by County

## 2021 County Health Rankings & Roadmaps Research Grants Brief Proposal Form

By June 4<sup>th</sup>, 2021 (6:00 PM ET), submit completed application via email to  
County Health Rankings & Roadmaps  
[research@chrr.wisc.edu](mailto:research@chrr.wisc.edu)

### 1. Applicant Information

Organization Name	
Organization Tax Identification Number	
Address	
Website	
Project Director	
Phone	(    )
Email	
Contact for questions during process (if different from Research Director)	
Phone	(    )
Email	

## 2. Project Description

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

- 1) Your proposed hypothesis/question(s), how it/they fit(s) within the four focus areas of research described in the CFP and how the findings will be useful to CHR&R program and others, including practitioners and researchers
- 2) Supportive data/studies
- 3) Data sources and quantitative or qualitative methods you propose to use to test the hypothesis/question
- 4) Anticipated opportunities and challenges that are likely to affect the research project, including a plan for how challenges will be addressed
- 5) The importance and anticipated impact of the research and how the findings could be used to advance health equity

Responses to this section of the proposal should not exceed 3 pages.

## 3. Experience Conducting Similar Research

Please describe your experience in conducting similar research and approaches that focus on health equity using one paragraph (up to 150 words) for each key person working on the proposed study within your organization. Attach biosketches as an appendix. (4-page limit on individual biosketches)

## 4. Work Plan

Include expected deliverables (e.g., manuscript, white paper, etc.), roles/FTEs (include collaborating partners external to your organization, if applicable), and project timeline.

Responses to this section of the proposal should not exceed 2 pages.

**5. Project Budget**

Provide estimated total costs for each category for the funding period (earliest start date is September 1, 2021 and latest end date is August 31, 2022) with a brief budget narrative.	
Personnel (Salary and Fringe)	
Supplies	
Travel	
Consultants	
Other Direct Costs	
Indirect <i>(may not exceed 12% of above costs)</i>	
<b>TOTAL</b>	
Budget Narrative	