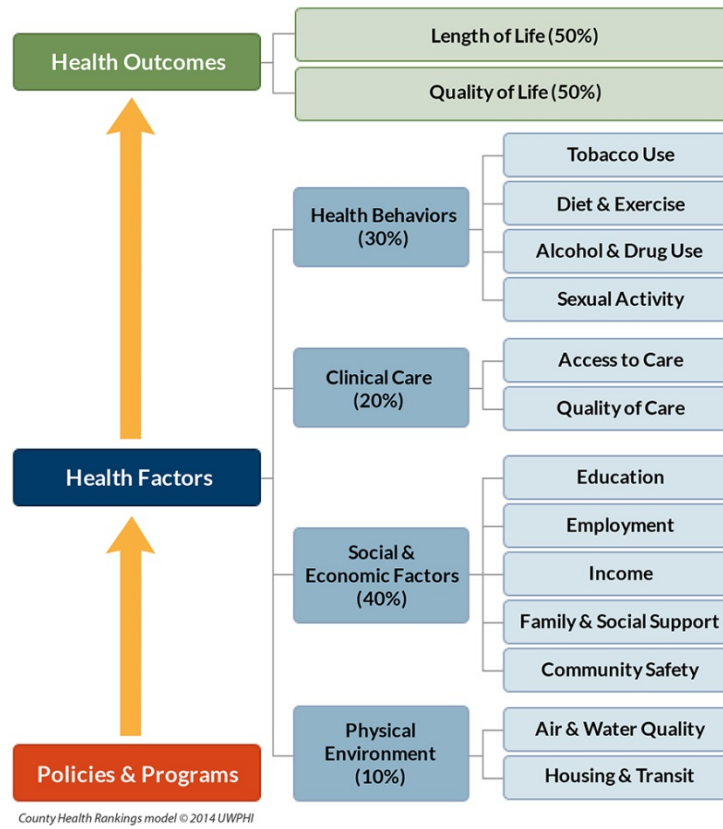


## County Health Rankings Research Grants 2017 CALL FOR PROPOSALS



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

**Brief Proposal Deadline: May 3<sup>rd</sup>, 2017**

## County Health Rankings Research Grants Overview

### Purpose

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

### Total Awards

Up to \$300,000 will be available for research under this Call for Proposals (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 health, social and behavioral sciences, biostatistics, environmental science, political science, economics, and/or informatics, and other relevant fields.
- We invite a diverse group of applicants, including early career researchers, and individuals who work in non-academic settings.

### How to Apply

A Brief Proposal should be submitted to CHR&R at UWPHI using the form provided on pages 10-12. See page 6 for details.

### Selection Criteria

Complete selection criteria can be found on page 8.

### Key Dates and Deadlines

- April 7, 2017 Questions on the CFP due to County Health Rankings & Roadmaps  
Email: [research@match.wisc.edu](mailto:research@match.wisc.edu)
- April 14, 2017 Frequently Asked Questions posted on CHR&R website:  
[www.countyhealthrankings.org/researchgrants](http://www.countyhealthrankings.org/researchgrants)
- May 3, 2017 Brief Proposals due by 6:00 pm ET
- May 22, 2017 Notification to all applicants
- June 23, 2017 Full Proposals due
- Mid-July, 2017 Announce final selection
- August 1, 2017 Start date for funded projects

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

## 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 a successful future, to establish financial security, and to live in safe communities that promote positive relationships among family and friends are increasingly recognized as important health interventions. These factors also 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) collaborated to establish the *County Health Rankings & Roadmaps* (CHR&R) program. The goal of the *County Health Rankings & Roadmaps*, first launched in 2010, is to inform and mobilize local communities, national partners, and leaders across multiple sectors to improve health and advance health equity. In partnership with RWJF, CHR&R meaningfully contributes to measuring our nation’s progress toward building a [Culture of Health](#). For more information on the RWJF Culture of Health Action Framework, visit [www.cultureofhealth.org](http://www.cultureofhealth.org).

The *County Health Rankings* (*Rankings*) are based on a model of population health (shown on the cover) that emphasizes many of the 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 rates of high school graduation, unemployment, or violent crime, and the percentage of children living in poverty. The *Rankings* are unique in their ability to measure the overall health of each county in all 50 states on the multiple factors that influence health and to call attention to the differences in opportunities and health outcomes among peer counties. A similar effort underway since 1990, [America’s Health Rankings](#), has ranked the health of populations in all 50 states using a composite measure including health outcomes and determinants.

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 working together to take aim at 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.

The CHR&R program can support local leaders, concerned citizens and policymakers in their efforts 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 create opportunities for everyone to reach their health potential. The *Roadmaps to Health* Action Center provides customized technical assistance to communities on strategies to improve health, with a specific focus on policy and system change. For more information on the CHR&R program visit [www.countyhealthrankings.org](http://www.countyhealthrankings.org).

### **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 proposals (CFP). The model is shown on the cover and is described in greater detail on the CHR&R website at [www.countyhealthrankings.org/our-approach](http://www.countyhealthrankings.org/our-approach). 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: 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*.

The current underlying measures and data sources can be found on the website at [www.countyhealthrankings.org/ranking-methods/data-sources-and-measures](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 of the compiled dataset, and expert opinion. The criteria used for selecting measures can be found on the website at [www.countyhealthrankings.org/resources/criteria-selecting-or-revising-measures](http://www.countyhealthrankings.org/resources/criteria-selecting-or-revising-measures)

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 (EXCEL) and SAS formats.

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

This CFP, “The *County Health Rankings* Research Grants,” serves an important role in strengthening and enhancing the impact of the *Rankings*. The goal of these research grants is to provide scholarly inquiry from outside the program to identify potential improvements to the *Rankings* that will increase their strategic use and impact. Researchers will work either independently or collaboratively to address a set of questions based on the research categories provided below.

### **Areas for Research**

For this CFP, we are focusing on three categories of research that are most relevant to strengthening the *Rankings* model and methods, or enhancing their use for learning and impact. We have provided several *examples* of research topics below; however, investigators are encouraged to submit innovative proposals for other research topics that fit within the three categories of research.

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

- a) Exploring opportunities to analyze disparities in Health Factors or Outcomes using the *Rankings* data
- b) Developing analytic approaches to use *Rankings* data to more effectively convey issues related to health inequities across demographic or population groups within or across counties
- c) Developing approaches to measures of health care value (quality/costs) and benchmarks for such measures
- d) Testing alternative methods for addressing small sample sizes in counties and effective approaches to tailor generation of estimates based on population size

- e) Developing modeling strategies, such as small area estimation or Bayesian modeling, to improve reliability and coverage for measures that are currently included in the *Rankings*
- f) Testing alternative ways to rank or compare counties and approaches to tracking county-level Health Factors and Outcomes over time

**2) Exploration of novel data sources/measures for inclusion in the *Rankings***

- a) Drawing on new data repositories and collection efforts, such as electronic health records or social media, as data sources for measures in the *Rankings* that can allow for access to more timely information

Developing new data for measures or new methods utilizing existing data to address:

- b) Opportunities to build local community power and civic agency, or structural inequity, such as social systems or norms that favor certain population groups based on race, gender, education, or level of urbanization,
- c) The dimension of Programs and Policies in the *Rankings* model by providing county-level data that examines policies, systems, and environmental changes as structural elements that affect Health Factors and Outcomes,
- d) The Physical Environment section of the *Rankings* model to improve measurement and understanding of important health-related factors or mediators in the areas of transit, housing, air and water quality, the built environment or climate preparedness/resiliency,
- e) Family and Social Support, such as child abuse and neglect, or social connectedness, to improve the measures within the Social and Economic Factors section of the *Rankings* model, or
- f) Measures of overall well-being and/or healthy life years.

**3) Quantitative analyses of *Rankings* data or results**

- a) Using *Rankings* data as a starting point to assess health disparities or inequities and their drivers within or across counties
- b) Using *Rankings* data or results with other sources of information, such as measures of public health, medical care, community characteristics, and/or population health expenditures and investments, to conduct new analyses that could enhance the *Rankings* and drive changes in population health and health equity
- c) Using *Rankings* data to understand how changes in Health Factors are related to changes in Health Outcomes
- d) Using *Rankings* data to ascertain the economic costs and/or benefits associated with changes in county-level health outcomes

Successful applicants will demonstrate how the proposed research will benefit and strengthen the *Rankings*, or enhance their use to improve county-level population health and health equity. Proposed research must fit into at least one of the three general categories 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.

## 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 health, social and behavioral sciences, environmental science, political science, economics, biostatistics and/or informatics, and other relevant fields.
- We invite a diverse group of applicants, including 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 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.

### Required Content for Brief Proposals

The CHR&R UWPWI 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 10) and adhere to the length and formatting guidelines specified below:

Section	Length	Format
1. Applicant Information	Page limit: 1	Use Brief Proposal Form (page 10)
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 12)

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.

### Successful Applications

Successful applications will feature the necessary skills and expertise to ensure the researcher(s) can appropriately address the targeted content areas/questions within the broader categories. 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 [www.countyhealthrankings.org/ranking-methods](http://www.countyhealthrankings.org/ranking-methods).

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

The unit of analysis for the quantitative projects should include the county level in order to allow for incorporation of research findings into the current ranking system. Qualitative or mixed methods approaches, by their design, may use other levels of analysis.

An expected deliverable for research projects is a manuscript submitted for 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 will be acceptable in place of a manuscript.

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.

#### **Timeline for County Health Rankings Research Grants**

- April 7, 2017 Questions on the CFP due to County Health Rankings & Roadmaps  
Email: [research@match.wisc.edu](mailto:research@match.wisc.edu)
- April 14, 2017 Frequently Asked Questions posted on CHR&R website:  
[www.countyhealthrankings.org/researchgrants](http://www.countyhealthrankings.org/researchgrants)
- May 3, 2017 Brief Proposals due by 6:00 pm ET
- May 22, 2017 Notification to all applicants
- June 23, 2017 Full Proposals due
- Mid-July, 2017 Announce final selection
- August 1, 2017 Start date for funded projects

#### **SUBMISSION:**

**By May 3<sup>rd</sup>, 2017, 6:00 pm ET, submit completed Brief Proposal via email to:**  
**County Health Rankings & Roadmaps**  
[research@match.wisc.edu](mailto:research@match.wisc.edu)

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

## Brief Proposal Review and Next Steps

### 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 3 categories of interest: refinement of current methodology used in the *Rankings* model; explorations of new data sources or measures for the *Rankings*; or quantitative analyses of *Rankings* data or results
2. Rationale for how the findings will improve population health or advance health equity and be useful to the *County Health Rankings & Roadmaps* 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. Valid 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. Commitment to and 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.
8. A budget that aligns spending with objectives and strategies.

### 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; if selected, applicants will be asked to submit a Full Proposal.

### Expectations for Full Proposals

Applicants 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 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 *Rankings* 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.
4. Prepare 3 brief (1-2 pages) quarterly progress reports for submission to the UWPHI *Rankings* 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 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 and RWJF communications staff to plan and participate in the dissemination of findings.

**QUESTIONS:** For further information about the application or administration of funds, please contact CHR&R at [research@match.wisc.edu](mailto:research@match.wisc.edu) or (608) 262-7495.



## **County Health Rankings & Roadmaps Responsible Staff Members:**

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

#### **Julie Willems Van Dijk**

*County Health Rankings & Roadmaps and RWJF Culture of Health Prize*  
Director

#### **Marjory Givens**

*County Health Rankings & Roadmaps*  
Deputy Director of Data & Science

#### **Keith Gennuso**

*County Health Rankings & Roadmaps*  
Rankings Scientist

### **Robert Wood Johnson Foundation**

#### **Amy Slonim**

Senior Program Officer

#### **Andrea Ducas**

Program Officer

### **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** [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 40 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.

# County Health Rankings & Roadmaps

Building a Culture of Health, County by County

A Robert Wood Johnson Foundation program

## 2017 County Health Rankings Research Grants Brief Proposal Form

By **May 3<sup>rd</sup>, 2017 (6:00 PM ET)**, submit completed application via email to  
County Health Rankings & Roadmaps  
[research@match.wisc.edu](mailto:research@match.wisc.edu)

### 1. Applicant Information

Organization Name	
Organization Tax Identification Number	
Address	
Website	
Research 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 relates to the 3 categories of interest described in the CFP and how the findings will be useful to the *County Health Rankings & Roadmaps* 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

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.

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 August 1, 2017 and latest end date is July 31, 2018) 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	