



Robert Wood Johnson Foundation

Robert Wood Johnson Foundation **Scholars in Health Policy Research**



2013–2014 Call for Applications

Application Deadline

October 8, 2013

Program Overview

(For complete details, refer to specific pages noted below.)

Purpose (page 7)

The *Robert Wood Johnson Foundation Scholars in Health Policy Research* program develops and supports a new generation of creative health policy thinkers and researchers within the disciplines of economics, political science and sociology. Each year the program selects up to nine highly qualified individuals for two-year fellowships at one of three nationally prominent universities with the expectation that they will make important research contributions to future U.S. health policy.

Total Awards

- Up to nine fellowships will be awarded in this grant cycle.
- Scholars will receive stipends of \$89,000 each year of the two-year fellowship.

Eligibility Criteria (page 9)

- We invite recent graduates of doctoral programs in economics, political science and sociology, including junior faculty, to apply.
- We will give preference to applicants who have not previously worked extensively in health or health policy research.
- Applicants must have received a doctoral degree after January 1, 2009, but no later than July 15, 2014.

Selection Criteria (page 10)

We will evaluate proposals using the selection criteria on page 10.

Key Dates and Deadlines

- **October 8, 2013 (3 p.m. ET)**—Deadline for receipt of applications.
- **January 6–31, 2014**—Finalist interviews.
- **February 2014**—Notification of acceptance.
- **August 2014**—Fellowships begin.

How to Apply

Applications for this solicitation must be submitted via the RWJF online system. Visit www.rwjf.org/cfp/hprschol2 and use the *Apply Online* link. If you have not already done so, you will be required to register at <http://my.rwjf.org> before you begin the application process.

Please direct inquiries to:

Phone: (617) 353-9220

Email: rwjf@bu.edu

www.healthpolicyscholars.org

Background

The Affordable Care Act of 2010 promises to reshape American health care. The legislation calls for expanding health insurance coverage, restructuring the delivery system to improve quality and value, eliminating health care disparities, strengthening public health, enlarging the health care workforce, and encouraging prevention and wellness in communities and workplaces.

Yet, despite passage of this historic legislation, formidable challenges remain. Health insurance exchanges, for example, are complex structures that require careful design in the face of financial, legal and political obstacles in some states. Likewise, the formation of accountable care organizations to deliver high-quality, affordable care presents unusual challenges for hospitals and physician groups. Additional policy reforms are needed to bring health care spending under control and to meet the health needs of millions of Americans not touched by the new law.

Even with well-implemented system reforms, larger problems still face the nation—some with deep economic, political and social roots. These problems include childhood obesity, substance abuse, HIV/AIDS, depression and other mental disorders, and some infectious diseases and conditions associated with unhealthy lifestyles. These problems burden the health care system and public health agencies with challenges that lie beyond their traditional missions. Compared with other industrialized nations, the United States continues to perform poorly on numerous indicators of health status.

About the Cover

Daniel Navon (Sociology, Harvard University), Colleen Carey (Economics, University of Michigan), Erica Czaja (Political Science, University of California, Berkeley/San Francisco) and Robert McGrath (Political Science, University of Michigan) at the 2013 annual meeting for the *RWJF Scholars in Health Policy Research* program.

Photo: Paul Papier, Papier Photographic

The field of health policy research offers exciting opportunities to help reform our health care system in ways that promote the health of our people, improve access to health care, and increase the quality, equity and efficiency of care delivery. Clearly, any sector of the economy that is expanding to consume almost one-fifth of the gross domestic product deserves the attention of the most gifted scholars.

The social science disciplines of economics, political science and sociology have made important contributions to health policy research by providing useful and insightful frameworks for understanding and analyzing the health sector and its problems.

In the current environment—marked by an aging population, the increased prevalence of chronic illness and of conditions associated with culture and lifestyle, and an overburdened public health system—the United States urgently needs social scientists who will apply their disciplinary perspectives to complex policy questions.

Economists may inform the policy discussion by:

- assessing the effects of continued health spending growth on federal and state budgets, as well as alternative policy options for controlling such growth and increasing the value obtained from health care;
- analyzing the implications and effects of different tax policies on the health and well-being of populations and of individuals;
- increasing our understanding of the cognitive factors that influence the health care decisions of individuals and organizations and the behavioral effects of those decisions;
- analyzing the effects of organizational changes on the delivery, cost and quality of care and on the willingness of competing organizations to serve diverse population groups;

- studying the economic burden of disease on different populations caused by disparities in access to care; and
- evaluating the impact of health and health care workforce policy changes on patients' health outcomes and on the entry of new professionals to the workforce.

Political scientists may furnish fresh insights into such areas as:

- the politics of health reform, including the ways in which legislative battles over reform proposals are strategically framed and fought, and how political disagreements over policy implementation are addressed and resolved;
- the respective roles of federal and state governments in health reform, including regulation of the financing and delivery of care;
- the role of public opinion in shaping policy;
- the balance of power among major players that may shift as a result of changing policies;
- the influences that interest groups and the media exert over health policy decisions; and
- the political and social forces that empower and mobilize communities to address health problems.

Sociologists may contribute to the policy debate by:

- analyzing the social and cultural factors that impede the ability of diverse populations to enroll in health insurance programs and to obtain needed health care;
- increasing our understanding of the effects of changes in the structure and organization of the health and health care delivery system;
- assessing the impact of the changing roles and functions of health and health care providers;
- studying the role of social networks in improving health decision-making through information exchange and patient empowerment;
- providing a framework for understanding how social movements affect the nation's health; and
- expanding our knowledge of the socioeconomic and cultural determinants of health.

The interplay among all three disciplines, when brought to bear on any single issue, results in a rich, multidisciplinary perspective that enhances problem definition and resolution.

The Program

The *Robert Wood Johnson Foundation Scholars in Health Policy Research* program helps to develop a new generation of creative health policy thinkers and researchers within the disciplines of economics, political science and sociology. Each year, the program enables up to nine highly qualified individuals to undertake two-year fellowships at one of three nationally prominent universities:

- the University of California, Berkeley, in collaboration with the University of California, San Francisco—under the direction of John Ellwood, PhD;
- the University of Michigan—under the direction of Edward Norton, PhD; and
- Harvard University—under the direction of Katherine Swartz, PhD.

All three sites have nationally recognized social science departments and professional schools whose faculties have significant health policy expertise. Scholars in the program have the opportunity to work closely with faculty from the social sciences—as well as from medicine, public health and public policy—in an environment conducive to disciplinary and multidisciplinary learning and collaborative research.

Scholars will have access to the full range of university resources, including libraries, computers, databases and research support. They will receive stipends of \$89,000 each year from the Robert Wood Johnson Foundation.

Scholars will be free from teaching, consulting and administrative responsibilities during their participation in the program. We provide support directly to the participating universities, which, in turn, provide stipends to the scholars. Some financial support also is available for scholars' research expenses, including travel.

- We invite recent graduates of doctoral programs in economics, political science and sociology, including junior faculty, to apply. At each site, the program brings together talented individuals to learn about health, health policy and the perspectives of the other two disciplines. We expect that scholars will pursue careers within their disciplines, making important research contributions to future U.S. health policy.

Curricular activities at the participating universities are designed to be flexible to meet scholars' educational needs and interests. Specific activities vary by institution, but generally include seminars, workshops, tutorials and independent research projects. At each institution, these offerings are intended to accomplish three objectives:

1. Educate scholars about health, health care, the organization and financing of the health care delivery system, and the health policy-making process.
2. Expose scholars to a learning environment in which each comes to appreciate the perspectives and methods of other social science disciplines, in addition to medicine and public health.
3. Offer scholars the opportunity to develop a health policy research agenda, and to conduct relevant research and analysis under the guidance of and in collaboration with distinguished faculty mentors.

The program's goal is to produce scholars who:

- have the commitment and capacity to inform and influence U.S. health policy discussions through their research, publications and active involvement as scholars in the policy-making process;
- bring a fresh perspective to important and perplexing questions facing health policy-makers today;
- understand and appreciate social science disciplines other than their own;

- continue to undertake research in their respective disciplines; and
- infuse their home disciplines with policy research questions related to health and health care.

Current and former scholars have pursued diverse and flexible career paths both during and after completing the program. Program alumni hold positions in top academic departments across the country, publish in prestigious journals (see pages 15–16), advise government officials at all levels, and have received numerous awards for their contributions to health and health policy. For examples, please visit: <http://healthpolicyscholars.org/alumni/career-paths>.

Eligibility Criteria

- Applicants must have received a doctoral degree in economics, political science or sociology after January 1, 2009, but not later than July 2014. For those expecting to receive degrees in 2014, all degree requirements must be completed by July 15, 2014.
- We will give preference to applicants who have not previously worked extensively in the areas of health or health policy research.
- Applicants must be U.S. citizens or Permanent Resident Green Card Holders at the time of application and, if accepted, must not receive support from other research fellowships/traineeships while enrolled in the program.
- Additionally, applicants cannot be related by blood or marriage to any Officer* or Trustee of the Robert Wood Johnson Foundation, or be a descendant of the Foundation’s founder, Robert Wood Johnson.

** The Officers are the Chairman of the Board of Trustees; President and CEO; Chief of Staff; General Counsel; Secretary; Assistant Secretary; Treasurer; and Assistant Treasurer of the Foundation.*

Diversity Statement

Consistent with RWJF values, this program embraces diversity and inclusion across multiple dimensions, such as race, ethnicity, gender, age and disadvantaged socioeconomic status. We strongly encourage applications from candidates who will help us expand the perspectives and experiences we bring to our work. We believe that the more we include diverse perspectives and experiences in our work, the better we are able to help all Americans live healthier lives and get the care they need.

Selection Criteria

The following criteria will be considered in the course of the application review process:

- The applicant's potential to contribute creatively as a social scientist to future U.S. health policy thinking—either by identifying emerging health policy issues and problems or by bringing new insight to the examination and analysis of existing issues and problems.
- The applicant's commitment to a career consistent with the program's purpose and goals.
- The quality of the applicant's past research, including dissertation.
- The applicant's capability to undertake this challenging program.
- Recommendations by faculty and other individuals with whom the applicant has studied or worked.

The national program office (NPO) screens all applications and forwards them to members of the national advisory committee, the program site directors and RWJF staff for extensive review.

We select approximately 25 finalists for interviews with faculty at one or more of the participating universities. From these finalists, we will select up to nine scholars to receive fellowships.

Use of Grant Funds

We have made grants to the three participating universities in accordance with RWJF's regular funding guidelines. Under the program, the universities provide scholars with their stipends, access to health insurance, expenses associated with the move to their fellowship site and funds for a computer. Financial support also is available at each university for expenses associated with scholars' research, including travel.

How to Apply

Applications for this solicitation must be submitted via the RWJF online system. Visit www.rwjf.org/cfp/hprschol2 and use the *Apply Online* link. If you have not already done so, you will be required to register at <http://my.rwjf.org> before you begin the application process.

Please direct inquiries to:

Phone: (617) 353-9220

Email: rwjf@bu.edu

RWJF does not provide individual critiques of applications submitted.

Program Direction

Boston University serves as the national program office, and provides direction and technical assistance for the *Robert Wood Johnson Foundation Scholars in Health Policy Research* program located at:

Robert Wood Johnson Foundation Scholars in
Health Policy Research

Boston University

53 Bay State Road

Boston, MA 02215-2197

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Responsible staff members at the national program office are:

- Alan B. Cohen, ScD, *program director*
- Catherine M. Player, MA, *deputy director*
- Melissa Manolis, MS, *program manager*

Responsible staff members at the Robert Wood Johnson Foundation are:

- Lori A. Melichar, PhD, *senior program officer*
- Nancy Fishman, MPH, *senior program officer and team director*
- Lois Shevlin, *senior program financial analyst*

For more information on the program and application requirements, please visit www.healthpolicyscholars.org.

**National Advisory
Committee**

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Professor of the Economics of Medicine, *Emeritus*
Harvard Medical School
Boston, MA

Scholar Publications

Recent publications by program alumni include:

Baughman RA (Cohort 8–Michigan) and Smith KE. “Labor Mobility of the Direct Care Workforce: Implications for the Provision of Long-Term Care.” *Health Economics*, 21(12): 1402–1415, 2012.

Centola D. (Cohort 13–Harvard). “Social Media and the Science of Health Behavior.” *Circulation*, 127: 2135–2144, 2013.

Carman KG (Cohort 10–Harvard). “Inheritances, Intergenerational Transfers, and the Accumulation of Health.” *American Economic Review*, 103(3): 451–455, 2013.

Cawley J (Cohort 6–Michigan & NAC) and Maclean JC. “The Consequences of Rising Youth Obesity for U.S. Military Academy Admissions.” *Applied Economic Perspectives and Policy*, 35(1): 32–51, 2013.

Feldman EA (Cohort 1–Yale). “The Genetic Information Nondiscrimination Act (GINA): Public Policy and Medical Practice in the Age of Personalized Medicine.” *Journal of General Internal Medicine*, 27: 743, 2012.

Giaimo S (Cohort 1–Berkeley/UCSF). “Behind the Scenes of the Patient Protection and Affordable Care Act: The Making of a Health Care Co-op.” *Journal of Health Politics, Policy and Law*, 38(3): 599–610, 2013.

Levy H (Cohort 5–Berkeley/UCSF). “Health Reform: Learning from Massachusetts.” *Inquiry*, 49(4): 300–302, 2012.

He D, Mellor JM (Cohort 3–Yale), Jankowitz E. “Racial and Ethnic Disparities in the Surgical Treatment of Acute Myocardial Infarction.” *Medical Care Research and Review*, 70(3): 287–309, 2013.

Moran J (Cohort 4–Michigan) and Scanlon D. “Slow Progress on Meeting Hospital Safety Standards: Learning From The Leapfrog Group’s Efforts.” *Health Affairs*, 32(1): 27–35, 2013.

Hurd MD, Martorell P, Delavande A, Mullen KJ (Cohort 12–Harvard), et al. “Monetary Costs of Dementia in the United States.” *New England Journal of Medicine*, 368: 1326–1334, 2013.

Nyhan B (Cohort 16–Michigan), Reifler J, Ubel P. “The Hazards of Correcting Myths About Health Care Reform.” *Medical Care*, 51(2): 127–132, 2013.

Oberlander J (Cohort 2–Berkeley/UCSF). “Unfinished Journey—A Century of Health Care Reform in the United States.” *New England Journal of Medicine*, 367: 585–590, 2012.

Pollack HA (Cohort 1–Yale). “State Medicaid Policy and Health Reform.” *Journal of Health Politics, Policy and Law*, 38(1): 161–163, 2013.

Timetable

We will make a new solicitation for applicants for the *Robert Wood Johnson Foundation Scholars in Health Policy Research* program each year. The schedule for 2013–2014:

- **October 8, 2013 (3 p.m. ET)***
Deadline for receipt of applications.
- **January 6–31, 2014**
Finalist interviews.
- **February 2014**
Notification of acceptance.
- **August 2014**
Fellowships begin.

** All applications must be submitted via the RWJF online system. All applicants should log in to the system and familiarize themselves with online application requirements well before the final submission deadline. Staff may not be able to assist all applicants in the final 24 hours before the submission deadline. In fairness to all applicants, late applications will not be accepted.*

About the Robert Wood Johnson Foundation

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 health and health care, the Foundation works with a diverse group of organizations and individuals to identify solutions and achieve comprehensive, measurable, and timely change.

For more than 40 years, the Foundation has brought experience, commitment and a rigorous, balanced approach to the problems that affect health and health care. 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.

For more information, visit www.rwjf.org. Follow the Foundation on Twitter at www.rwjf.org/twitter or on Facebook at www.rwjf.org/facebook.

Sign up to receive email alerts on upcoming calls for proposals at <http://my.rwjf.org>.



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Foundation

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