Evidence for Action: Investigator-Initiated Research to Build a Culture of Health

BACKGROUND AND PURPOSE

Evidence for Action (E4A), a national program of the Robert Wood Johnson Foundation (RWJF), funds research that expands the evidence needed to build a Culture of Health. A Culture of Health is broadly defined as one in which good health and well-being flourish across geographic, demographic, and social sectors; public and private decision-making is guided by the goal of fostering equitable communities; and everyone has the opportunity to make choices that lead to healthy lifestyles. RWJF’s Culture of Health Action Framework, which was developed to catalyze a national movement toward improved health, well-being, and equity, guides E4A’s program strategy. Visit rwjf.org/cultureofhealth to learn more about the Action Framework and RWJF’s vision for building a Culture of Health.

E4A’s mission is to support rigorously designed quantitative, qualitative, and mixed-methods research that yields convincing findings about the population health, well-being, and equity impacts of specific policies, programs and practices. We primarily target research that directly tests the impacts of interventions on health outcomes. Evidence generated through E4A should be useful to practitioners and policymakers in making decisions, setting priorities, and allocating resources. Accordingly, projects we fund should yield findings that are generalizable to other sites and/or populations. We are especially interested in research examining the health impacts of program or policy interventions that address factors outside the domain of health care services or public health practice.

PROGRAM FIT

E4A is an investigator-initiated research funding program, and as such does not pose a specific set of research questions, topics, or categories for funding. This call for proposals (CFP) offers guidance and clarification about the types of projects that are likely to be a good fit with the program’s general goals and objectives. Research examples highlighted in this CFP are intended to provide context and stimulate thinking, not serve as rigid guidelines or restrictions. Investigators are encouraged to submit innovative proposals using any appropriate combination of research designs and methods.

APPROACHES AND OUTCOMES

E4A focuses on funding research that establishes evidence of causal relationships between an intervention and population health and well-being outcomes. Interventions are defined broadly to include programs, policies, and practices; and we consider health and well-being to be represented by a wide range of physical, mental, and emotional measures. Except in specific instances described later in this CFP, studies funded by E4A must include measures of health outcomes or of behaviors or other factors that are well-established determinants of health. We are most interested in population health effects, while also differentiating outcomes among subgroups within the population, so that possible unintended consequences of interventions for disadvantaged groups are not masked by population mean effects.

E4A proposals should be designed to answer a clearly articulated, testable research question. A variety of research designs and methods may be suitable to address such questions, including experimental and quasi-experimental
designs in which adequate control or comparison groups can be identified or established. Mixed methods may be appropriate to help explain mechanisms or provide context for findings. In limited cases, purely qualitative approaches may be considered for funding. E4A is particularly interested in building evidence on interventions that have immediate relevance in current social, policy, or cultural contexts, and as a rolling submission program can rapidly respond to time-sensitive funding requests. We encourage studies that take advantage of natural experiments, which involve changes in large-scale programs, policies, or practices and can sometimes provide unique opportunities to establish causation. We are also willing to consider research conducted outside the United States that demonstrates clear relevance or applicability to building a Culture of Health in the United States. Applicant organizations must be based in the United States or its territories, however; submissions from teams that include both U.S. and international members are eligible, but the lead applicant must be based in the United States.

As a research funding program, E4A does not fund the costs of program implementation or operations. Also, in line with E4A’s focus on evaluating interventions, we do not fund descriptive or exploratory science, literature reviews, needs assessments, or validation of screening tools.

Below we describe general areas of interest that align with the Culture of Health Action Framework’s four Action Areas, which guide E4A’s funding strategy:

• **Making Health a Shared Value (Action Area 1).** We are interested in the extent to which social norms and values can be changed through interventions to result in better health, well-being, and equity outcomes. RWJF’s vision of health as a shared value reflects the importance of establishing a population health mindset; strengthening people’s connectedness to their communities in ways that spur collective action; and civic engagement to bring about changes to society that enable populations to thrive. While we typically require that research projects examine health as a primary outcome, consideration will be given to projects that measure changes in these “drivers” of shared values as primary outcomes with health measures as secondary outcomes. To learn more about the type of research that is most relevant to Making Health a Shared Value, visit www.evidenceforaction.org/mhsv.

• **Fostering Cross-Sector Collaboration (Action Area 2).** There is insufficient evidence on the effectiveness of partnerships to improve population health, and specifically on the role that collaboration plays in achieving positive and sustainable outcomes. Empirical studies on the impacts on health outcomes resulting from collaboration across sectors could be used to inform the establishment of future networks and partnerships that address community health challenges.

• **Creating Healthier, More Equitable Communities (Action Area 3).** We have limited knowledge about how community-level programs and policies impact population health and equity. Research across multiple settings is needed to determine the characteristics of programs or policies that yield the greatest health impacts, and whether health benefits offset the cost of investments.

• **Strengthening Integration of Health Services and Systems (Action Area 4).** We need evidence on how health care systems can effectively work with nonhealth care systems or organizations, such as those providing supportive housing, healthy food access, or early childhood education. Few studies have rigorously connected strategies for integrating health care and nonhealth care organizations to individual and community health outcomes, or evaluated their return on investment.

In addition to aligning with one or more of the Action Areas, we are generally interested in research that will help inform efforts to:

• **Improve health outcomes and reduce inequities.** We support research that will provide evidence of what works to improve outcomes and reduce inequities, rather than research that only describes the existence or magnitude of inequities. E4A proposals should consider the equity implications of the proposed research and,
when appropriate, be able to disaggregate effects among subgroups to determine if there are distinct benefits or costs for vulnerable populations.

• **Establish generalizable best practices.** More evidence is needed on how programs and policies can be structured to maximize returns. For example, are global or targeted interventions more effective, and what are the relative advantages to directing policies at a whole population versus individuals or subgroups at greatest risk? Are there certain life stages during which investments produce disproportionately large long-term benefits? Findings that can be applied in a variety of policy and program contexts would be especially informative.

• **Develop and validate key measures.** Although our primary focus is on testing the impact of programs and policies on population health, well-being, and equity, a small portfolio of grants is dedicated to the development and validation of new measures and metrics of population health needed to capture the broader view of physical and mental health, well-being, and equity throughout the life course.

Our full [grantee portfolio](#) and more detail about research designs and outcome measures are available on our website.

**BUDGETS AND AWARDS**

There is not an explicit range for allowable budget requests. You should request the amount of funding you will need to complete and disseminate findings from your proposed research project - including direct and indirect costs for the entire duration of your grant. The size of the budget will be weighed in relation to the importance and likely contribution of the proposed work, with higher budgets subject to greater scrutiny. Grant periods are flexible up to 36 months; rare exceptions may be made for projects needing up to 48 months if sufficient justification is provided. Our preference is for projects that produce findings in the near term. Visit the [Grants](#) section of our website for a sense of the budget range of grants funded by E4A.

**SELECTION CRITERIA**

Studies will be evaluated based on the following criteria:

• **Rigor**—presence of a clear, data-driven research question; designed to draw causal inference and in such a manner that either positive or null findings will provide useful information; inclusion of an appropriate comparison group;

• **Actionability**—results can be used in the near term to inform priorities and decisions; findings can be translated to practice through programs, initiatives, or policies that influence individual or institutional decision-making and behavior;

• **Relevance**—clarity and importance of the research aims, hypothesis, and study population to the Culture of Health Action Framework and E4A program goals;

• **Contribution to the evidence base**—potential to address key knowledge gaps and contribute to scientific advancement;

• **Inclusion of health outcome measure(s)**—outcomes may include diverse dimensions of physical and mental health, or behaviors known to influence health and well-being; “health care access” alone is not considered a sufficient health outcome measure. For projects exclusively focused on “Making Health a Shared Value,” measures of drivers, assessed using validated instruments, will also be accepted in lieu of health outcomes;
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• **Feasibility**—access to study populations or needed data, qualifications of the team to carry out the proposed research, and appropriateness of budget and project timeline.

*Letters of Intent (LOIs)* will be evaluated based on the applicant’s ability to clearly articulate these components. Full Proposals will be evaluated based on more detailed explanations of these elements, such as: specificity of the design or approach for sampling, data collection, and analyses; theoretical framework, conceptual model, or rationale that guides the design of the study; access to needed data, settings and study populations; research qualifications, experience, and accomplishments of the proposed team; appropriateness of disciplines and perspectives represented; meaningful commitment of the investigators to the project; and the plan for communicating and disseminating results to scientists, policymakers, and relevant stakeholders.

**TECHNICAL ASSISTANCE**

E4A offers two Technical Assistance (TA) services. Selected eligible applicants who propose to evaluate an innovative or important intervention to address a critical population health issue—but without sufficient rigor of design or capacity to conduct research—are given the option to receive Design Consultation or Matching Services. Through Design Consultation, we work with applicants to improve the rigor and feasibility of their proposed study to better align with E4A criteria. Our Matching Service facilitates partnerships between organizations that have limited research capacity and qualified researchers to design and propose a new, more rigorous research project. To be referred to one of these forms of TA, applicants must first submit an LOI and meet all selection criteria aside from our standards for rigor and feasibility. Applicants who do not have a qualified researcher on their project team may indicate interest in being referred to receive Matching Services during the application process. Visit our Applicant Technical Assistance webpage for more information.

**GRANTEE EXPECTATIONS**

E4A highly values peer learning, as well as dissemination of research to inform decision- and policymaking. The following are expectations of all E4A-funded grantees:

• Attendance at an Annual Grantee Meeting (dates and locations vary). Funds for up to two individuals to attend this meeting for each year of the grant should be included in the proposed budget.

• Participation in peer networking activities with other E4A and RWJF grantees. These activities typically take place via virtual or online convenings.

• Pre-registration of study—including research questions, hypotheses, main variables, and analysis plan—on Open Science Framework (OSF) at the start of the grant period.

• In order to ensure RWJF supported research is made accessible to a wide and diverse audience, grantees who publish findings in peer-reviewed publications must do so in open access journals and/or must include funds in their budgets to cover the cost of making the resulting publications open-access (typically $2,000-$5,000 per manuscript).

• Participation in periodic progress check-ins throughout the grant period with E4A national program office (NPO) staff.

• During the grant period, coordination with E4A to develop and implement a plan to share findings with stakeholders beyond the research community, including policymakers and other decision-makers, when findings are available and as other timely opportunities arise.
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• Appropriate timelines and budgets built into the project plan for conferences, meetings, and other forms of dissemination, including after analyses are complete.

ELIGIBILITY CRITERIA
Preference will be given to applicants that are either institutes of higher education, public entities, or nonprofit organizations that are tax exempt under Section 501(c)(3) of the Internal Revenue Code and are not private foundations or Type III supporting organizations. Other types of nonprofit and for-profit organizations are also eligible to apply. The Foundation may require additional documentation. Applicant organizations must be based in the United States or its territories. Submissions from teams that include both U.S. and international members are eligible, but the lead applicant must be based in the United States.

OUR EQUITY, DIVERSITY, AND INCLUSION COMMITMENT
The Robert Wood Johnson Foundation is committed to building a Culture of Health that provides everyone in America a fair and just opportunity for health and well-being. Achieving this goal requires focus on equity, diversity, and inclusion. To that end, we are committed to fostering diverse perspectives. We recognize that individuals’ perspectives are shaped by a host of factors, such as their race, ethnicity, gender, physical and mental ability, age, socioeconomic status, gender identity and expression, sexual orientation, familial status, education, religion, legal status, military service, political affiliation, geography, and other personal and professional experiences.

We know that the presence of diverse perspectives alone is not sufficient. Therefore, we also are committed to creating inclusive environments where all individuals are encouraged to share their perspectives and experiences. We believe that only through valuing our differences and similarities, and remaining vigilant in advancing equity, will we be able to maintain an equitable workplace and actively pursue equity in all aspects of our work. We commit to being continuous learners and working alongside others to cultivate equity, diversity, and inclusion.

EVALUATION AND MONITORING
An independent research group selected and funded by RWJF will conduct an evaluation of the program. As a condition of accepting RWJF funds, we require grantees to participate in the evaluation.

Grantees are expected to meet RWJF requirements for the submission of narrative and financial reports, as well as periodic information needed for overall project performance monitoring and management. As part of the proposal process, finalists will be asked to disclose any financial arrangements (e.g., fees, funding, employment, stock holdings) or relationships that might call into question the credibility or perceived credibility of the findings, mirroring the types of disclosure requested by the field’s leading journals. At the close of each grant, the awardee is expected to provide a written report on the project and its findings suitable for wide dissemination.

APPLICANT SURVEY PROCESS
For selected programs, the Principal Investigator of the proposal will be contacted after submission by SSRS, in independent research firm. The Principal Investigator will be asked to complete a brief, online survey about the proposal process and applicant characteristics. This voluntary questionnaire will take no more than 15 minutes to complete. Responses provided to SSRS will not impact the funding decision for your proposal in any way.

SSRS will protect the confidentiality of your responses. RWJF will not receive any data that links your name with your survey responses.

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USE OF GRANT FUNDS
Grant funds may be used for project staff salaries, consultant fees, data collection and analysis, meetings, supplies, project-related travel, and other direct project expenses, including a limited amount of equipment essential to the project. In keeping with RWJF policy, grant funds may not be used to subsidize individuals for the costs of their health care, to support clinical trials of unapproved drugs or devices, to construct or renovate facilities, for lobbying, for political activities, or as a substitute for funds currently being used to support similar activities.

HOW TO APPLY
There are two phases in the competitive proposal process:

Phase 1: Letter of Intent (LOI)
Applicants first must submit a two-page LOI describing the proposed research through RWJF’s online Application and Review system.*

Phase 2: Full Proposals
Applicants whose LOI meets the outlined selection criteria are invited to submit a 10-page full proposal narrative along with a detailed budget, dissemination plan, and other supplemental information.

At either the LOI or full proposal stage, the NPO may provide feedback or request further clarification or revisions that would improve the proposal’s fit with E4A program goals. Applicants whose LOIs do not meet the criteria for rigor or feasibility—but satisfy all other selection criteria—may be offered TA. Guidelines and information, including a list of frequently asked questions, a description of TA services, and archived videos that provide an overview of the CFP and grantmaking process are available on the E4A website.

APPLICATION TIMELINE
Applications are accepted on a rolling basis. Applicants will generally receive notice within six to nine weeks of applying as to whether they are invited to submit a full proposal. Full proposals will be due two months from the date of notification. Funding recommendations will generally be made within eight weeks of receipt of the full proposal. In circumstances when a research opportunity is time sensitive, reviews may be expedited. An explanation of the time-sensitive nature of the research should be included in the LOI application.

*All LOIs and full proposals for this solicitation must be submitted via the RWJF online system. Visit www.rwjf.org/cfp/e4a2 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. All applicants should log in to the system and familiarize themselves with online application requirements.

PROGRAM DIRECTION
The Evidence for Action NPO is housed at the Center for Health and Community at the University of California, San Francisco, and provides direction and overall assistance for the program.

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Please direct questions about the program, selection criteria, or application content to the NPO staff. Email is the preferred method of contact. Please see the “How to Apply” section for information about the online application process.

Responsible NPO staff members:

• Nancy Adler, PhD, director
• David Vlahov, RN, PhD, co-director
• Maria Glymour, ScD, MS, associate director
• Laura Gottlieb, MD, MPH, associate director
• Erin Hagan, PhD, MBA, deputy director

Responsible staff members at the Robert Wood Johnson Foundation are:

• Claire Gibbons, PhD, senior program officer
• Alonzo Plough, PhD, MPH, vice president, Research-Evaluation-Learning Unit and chief science officer
• Sharleen Rajput, program financial analyst

ABOUT THE ROBERT WOOD JOHNSON FOUNDATION

For more than 45 years the Robert Wood Johnson Foundation has worked to improve health and health care. We are working alongside others to build a national Culture of Health that provides everyone in America a fair and just opportunity for health and well-being. 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 www.rwjf.org/manage-your-subscriptions.html.

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