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Georgia Health Policy Center Scholarship:
A Review and Five-Year Strategic Plan for Research
2019 Progress Report

Georgia State University

ANDREW YOUNG SCHOOL
OF POLICY STUDIES

Research Overview

For more than 20 years, the Georgia Health Policy Center (GHPC) has lived its mission of integrating research, policy, and programs to advance health and well-being. It is at the intersection of the problem-solving and research cycles that the center sees its greatest opportunity to contribute both to practice and to academia. GHPC remains actively committed to further increasing its research output and strengthening its research partnerships across the Georgia State University community and beyond.

In 2015, GHPC completed its strategic research assessment and resulting Research Strategic Plan. The center's executive leadership team — the CEO and directors — have primary responsibility for the implementation of the plan.

The Research Strategic Plan has three major areas of focus: capacity, infrastructure, and financial strategy. Each area has specific action steps. But, broadly:

- Research capacity will be increased through expanded research faculty appointments, strategic engagement with faculty from other academic or research units, development of research-focused staff mentorship, and alignment of GHPC research growth with other college and university strategic initiatives.

- Research infrastructure will be strengthened by encouraging a focus of publication efforts toward the revised target journal list, clarifying and promoting scholarship goals for existing staff and new hires, and promoting a culture of research through recognition of research productivity.

- Research financial strategy will include examining the use of limited GHPC funds to incentivize staff research productivity and seeking research grants to support applied research projects tied to our programmatic work.

Through 2020, the center will work with staff and partners to implement these actions and measure annual progress toward achievement of the overarching goals. What follows is a report on progress made during calendar year 2019. In the last quarter of 2020, GHPC will undertake another comprehensive assessment. This will result in publication of the next volume of the five-year strategic research plan (2021-2025) for release in the first quarter of 2021.

2019 Steps Toward Fulfillment of GHPC's Five-Year Research Plan

Research Capacity

GHPC is committed to expanding its research capacity over this five-year period by taking steps at all personnel levels: students, staff, and faculty. The ultimate goal of expanding research capacity is to increase the percentage of published peer-reviewed papers that are directly related to project work. In order to increase opportunities for school and university collaboration, GHPC will expand the use of research faculty appointments for center staff most interested in research leadership and production.

2019 accomplishments in the area of building research capacity included:

- Discussing definition of research products and possibly changing the umbrella term to capture efforts under scholarship.
- Continuing to build a centerwide approach to mentorship and supervision that expands staff's research capacity and productivity.
- Expanding use of research appointments with Jessica Smith being appointed as a research assistant professor within the dean's office of the Andrew Young School of Policy Studies.
- Supporting pursuit of terminal degrees, with five staff using the Georgia State University Tuition Assistance Program and one completing a dissertation.
- Expanding engagement with research centers and faculty throughout Georgia State University.
- Building relationships with affiliated faculty, both internal to Georgia State University and at external universities.
- Meeting with faculty advisers of the public management and policy, and economics graduate programs at Georgia State University about how to expand graduate student participation in GHPC research.
- Working with 19 graduate research assistants in calendar year 2019.
- Glenn Landers, Karen Minyard, and Angela Snyder are participating on four dissertation committees through the departments of Public Management and Policy, Economics, and Computer Information Systems.
- Aligning GHPC research capacity with the Andrew Young School's strategic priorities through active planning and participation in Dean

Wallace's Policy in the Digital World initiative (both in the design phase and the strategy workgroups), as well as the Child Policy Lab.

- Meeting monthly through GHPC's research seminar. By piloting monthly presentations around a common content area, participation included representatives from the Aligning Systems for Health, behavioral health, community health systems development, maternal and child health, Medicaid, Money Follows the Person, and sickle cell disease surveillance teams, as well as directors, affiliated faculty, and early-career GHPC researchers. Additionally, the structure of the monthly research meeting was revised to organize around project teams' publication pipelines.

Research Infrastructure

The building of research infrastructure at GHPC will ultimately be addressed through hiring and through research recognition and incentivization. In 2019, the center made progress toward this goal:

- Reinforcing expectations for research productivity through performance evaluations and implementation of the career ladder for research staff.

- Launching an implementation science workgroup that meets monthly to discuss frameworks and models that may promote the translation of project-based work into scholarly presentation.

- Taking an active role in the Realist Network of the Americas and the planning of the International Conference for Realist Research, Evaluation, and Synthesis 2020.

- Planning the redesign of the leadership program, which when launched in 2020 will include modules on the GHPC model of engaged research for new staff.

- Establishing a competencies workgroup, led by Annette Pope, to foster skills that enable staff to effectively work in GHPC's applied research environment.

- Forming a six-member research strategy workgroup committee, representatives of the directors' project portfolios, to prioritize goals for 2020 and plan for external review of the execution of the 2016-2020 Research Strategic Plan.

- Promoting GHPC peer-reviewed publications and presentations through the Andrew Young School's Policy News in the ATL (formerly Dean's E-news), as well as through the GHPC website, social media,

partner newsletters, and other university communications channels, as appropriate. In addition, poster presentations were presented during our annual internal Summer Poster Series designed to highlight research dissemination and enhance knowledge sharing.

- Implementing the research recognition plan to strengthen the culture of celebrating research at GHPC through one-slide, one-minute overviews of published research to staff, office door art recognition for those who recently published or presented, and the bulletin board display in the breakroom highlighting recent research products.

Financial Strategy

Progress in the areas of research capacity and infrastructure can be accelerated by a financial strategy that supports academic research output while keeping in mind that GHPC is currently funded primarily through grants and contracts. For 2019, GHPC continued to align its financial strategy with the Research Strategic Plan:

- Funding buyouts for directors with academic faculty appointments to support time for research activities. Specifically, GHPC funds support 10% of Glenn Landers' time for research, the School of Social Work supports 10% of Ann DiGirolamo's time, and Public Management and Policy continues to fund 25% of Angie Snyder's time.

- In calendar year 2019, GHPC exceeded its goal of submitting two research-focused grants per year by submitting 12 research grants and receiving two new awards, plus maintaining two previously awarded, ongoing research grants. Please note that submissions and grant decisions may or may not occur in the same year.

- The management team and executive team are considering options for incentivizing research using GHPC's limited discretionary funds.

About the Georgia Health Policy Center

GHPC provides evidence-based research, policy analysis, and translational services for communities and decision-makers. The center focuses on solutions to complex issues facing health care today, including behavioral health, child health and well-being, community health systems development, global health, health and health care financing, health in all policies, health system transformation, long-term services and supports, maternal and child health, population and global health, and rural health. GHPC works at the local, state, and national levels to improve health at the community level. Today, GHPC is at work throughout Georgia and in more than 200 communities in all 50 states and internationally, helping communities achieve health improvement.

GHPC by the Numbers
24 years of service
86 staff members
Works in 50 states, and globally in 4 countries
70+ active contracts
~100 diverse clients
(Based on calendar year 2019)

Staff
With growth in the number of contracts and projects the center has undertaken, there has been continued growth in center staff. The size of GHPC has more than doubled over the past 10 years, from 24 staff members in 2011 to 86 at the end of calendar year 2019.

GHPC Funding
In fiscal year (FY) 2019, GHPC received approximately $12.3 million in external funding from 70-plus active grants and contracts. The vast majority of the center's funding (95%) comes from sponsored awards. The FY 2019 mix is consistent with the center's recent funding history. The sponsored funds are used to complete the awarded projects' goals and objectives, while the funding that comes from university and state contributions is used for the center's nonsponsored project work, including salary support.
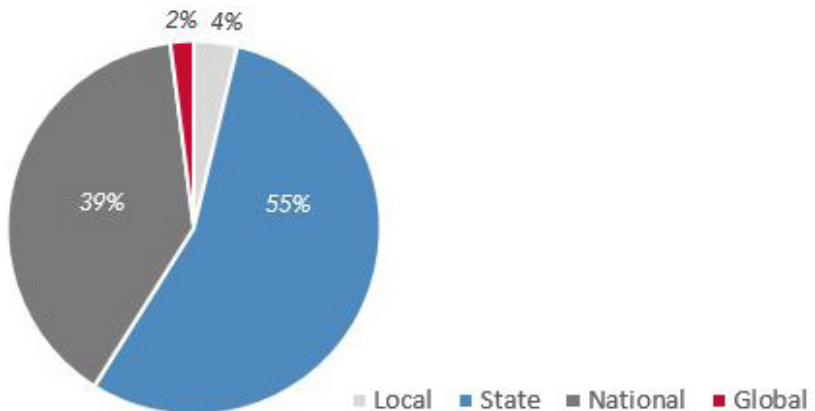
GHPC's sponsored funding has grown from nearly $5 million in 2009 to $12.3 million in FY 2019.

Figure 1: Sponsored Funding, 2009-2019

Sponsored revenue is received from both public agencies and private partners. The funders also represent a mix of local, state, national, and, to a lesser degree, international work.

Figure 2: Sponsored Revenue by Funder Type, FY 2019

GHPC Research Output

The following breakdown of research output reflects continued documentation of the center's research productivity. In the appendix there is a full list of GHPC publications for 2019, including books, book chapters, and peer-reviewed publications. In 2019 the center showed an uptick in book-related publications, including self-publishing its first book, copublishing a book with the Ireland Research Board, and contributing chapters to two additional books. Table 1 illustrates total research-related outputs between 2006 and 2019.

Table 1. Number of Peer-Reviewed Publications, Presentations, Posters, 2009-2019

	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
Publications*	2	4	4	4	6	12	9	16	19	16	12
Podium Presentations	17	20	16	6	27	22	24	22	35	46	45
Poster Presentations	12	15	13	11	12	17	18	16	12	10	14

*Publications include peer-reviewed journals, books, and book chapters.

There is ongoing interest in evaluating the relationship between GHPC contracts and publications. Of the 12 peer-reviewed articles published in 2019, eight publications (two-thirds) were tied to a GHPC grant or contract. This suggests that GHPC staff members are not completely reliant on grants to produce research outputs.

Table 2. GHPC Publication Breakdown (Books, Book Chapters, Peer-Reviewed Publications), 2010-2019

	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
Total Publications	4	3	4	6	12	9	16	19	16	12
Publications from Contracts	2	2	2	5	7	6	12	4	7	8
Publications With Faculty Co-author	2	2	0	1	2	5	2	5	7	5
Publications on Target Journal List	1	1	1	2	2	4	2	4*	3*	2*

*The target journal list was revised in 2017.

The ratio of contract to noncontract publications remained relatively steady until 2017, when a higher than average percentage of publications were from staff involvement in research outside of their core GHPC work. This often includes work tied to staff's dissertations. In 2019, the ratio moved back to more than half of publications being associated with a contract.

We also continue to see a trend with a larger percentage of publications with affiliated faculty co-authors. GHPC has taken active steps to strengthen partnerships with affiliated faculty to boost research productivity. Some contracts are associated with more publications than others.

Table 3. GHPC Grants and Contracts Associated With Books, Book Chapters, and Peer-Reviewed Publications, 2010-2019

Contracts Associated With 3 or More Publications	Contracts Associated With 2 Publications	Contracts Associated With 1 Publication
Atlanta Regional Collaborative for Health Improvement (4)	GA Department of Behavioral Health and Developmental Disabilities	Colorado Health Foundation
GA Department of Community Health (10)	Health Law Partnership	GA Governor's Office of Children and Families
GA Department of Public Health (4)	Healthcare Georgia Foundation	Health Resources and Services Administration
National Network of Public Health Institutes (3)	Robert W. Woodruff Foundation	Interdepartmental agreement with the School of Public Health
Philanthropic Collaborative for a Healthy Georgia (3)		Ireland Research Board
U.S. Centers for Disease Control and Prevention (12)		National Maternal Child Health Workforce Development Center
		Prisma Health
		Robert Wood Johnson Foundation
		RTI International

Next Steps

The following actions to advance research productivity are planned for 2020 in each of the three focus areas:

Research Capacity

- Add two to three additional GHPC faculty appointments.
- Further develop research mentorship and supervision opportunities for GHPC staff.
- Engage master's and doctoral students so that hiring is aligned with projects to produce academic research output.
- Develop processes to clarify and reinforce expectations for research productivity for all project staff and work with supervisors to help relay these expectations to staff during check-in meetings and annual performance reviews.
- Expand strategic engagement with faculty from other academic or research units to increase peer-reviewed papers.
- Continue to identify opportunities to align GHPC research capacity with the Andrew Young School's strategic plan and other university strategic initiatives.

Research Infrastructure

- Ensure job descriptions and interviews place adequate emphasis on research skills.
- Develop a broad package of incentives to foster research productivity.
- Grow external recognition of GHPC as a leader in engaged scholarship.

Financial Strategy

- Submit two research grants in 2020 with GHPC as a primary applicant.
- Explore and strategically invest in data purchases that can be reused for research projects.

Appendix: 2019 GHPC Peer-Reviewed Articles, Books, and Book Chapters

* denotes that the publication has an affiliated faculty co-author

Ashford, R., Brown, A., Brown, T., Callis, J., Cleveland, H., Eisenhart, E., et al. (2019). Defining and operationalizing the phenomena of recovery: a working definition from the recovery science research collaborative. *Addiction Research & Theory*, 1-10. No contract

Courtemanche, C., Marton, J. H., Ukert, B., Yelowitz, A., & Zapata, D. (2019). Effects of the Affordable Care Act on health behaviors after three years. *Eastern Economic Journal*, 45(1), 7-33. No contract

Courtemanche, C., Marton, J. H., Ukert, B., Yelowitz, A., Zapata, D., & Fazlul, I. (2019). The three year impact of the Affordable Care Act on disparities in insurance coverage. *Health Services Research*, 54(S1), 307-316. No contract

Crockett, A. H., Heberlein, E. C., Smith, J. C., Ozluk, P., Convington-Kolb, S., & Willis, C. (2019). Effects of a multi-site expansion of group prenatal care on birth outcomes. *Maternal and Child Health Journal*, 23(10), 1424-1433. Prisma Health

DiGirolamo, A.M., Ochaeta, L., & Mejia Flores, R. M. (2019). Early childhood nutrition and cognitive functioning in childhood and adolescence. In M Ramirez-Zea and M. Mazariegos (Eds.), *Estudio Longitudinal de Oriente del INCAP: 50 Años Contribuyendo a la Nutrición Pública*. INCAP. No contract

Fasano, R. M., Branscomb, J., Lane, P., Josephson, C., Snyder, A., & Eckman, J. (2019). Transfusion service knowledge and immunohaematological practices related to sickle cell disease and thalassemia. *Transfusion Medicine Reviews*. U.S. Centers for Disease Control and Prevention

Johnson, N., Paris, N., Baker, N., Durden, K., Parker, C., & Patterson, A. (2019). From Macro to Micro—Transdisciplinary Statewide Networks Drive Innovations in Cancer Care. In V. X. Wang (Ed.), *Handbook of Research on Transdisciplinary Knowledge Generation* (pp. 242-261). Hershey, PA: IGI Global. Georgia Department of Public Health

Manteuffel, B., Alderman, L., Branscomb, J., & Minyard, K. (2019). Systems thinking and the opioid epidemic in Georgia. *In A Public Health Guide to Ending the Opioid Epidemic*. Oxford University Press. Georgia Department of Public Health

Minyard, K., Heberlein, E., Parker, C., Landers, G., Adimu, T., Sutton, C., et al. (2019). Bridging for Health: Improving Community Health Through Innovations in Financing. E. Heberlein (Ed.). Atlanta, GA: Georgia Health Policy Center. Robert Wood Johnson Foundation

Minyard, K., Manteuffel, B., Smith, C., Attell, B., Landers, G., Schlanger, M., & Dore, E. (2019). *Treatment services for people with co-occurring substance use and mental health problems. A rapid realist synthesis*. HRB Drug and Alcohol Evidence Review. Ireland Research Board

Snyder, A. B., Zhou, M., Theodore, R., Quarmyne, M.-O., Eckman, J., & Lane, P. A. (2019). Improving an administrative case definition for longitudinal surveillance of sickle cell disease. *Public Health Reports*, 134(3), 274-281. U.S. Centers for Disease Control and Prevention

Tang, A., Branscomb, J., Zhou, M., Snyder, A., & Eckman, J. (2019). Characterizing complication risk from multisite, intermittent transfusions for the treatment of sickle cell disease. *Pediatric Blood & Cancer*, 23(10). U.S. Centers for Disease Control and Prevention

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