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Introduction

The growth of urban populations and the unique health needs of these communities drives the need for innovation in urban public health departments (Hearene, et al. 2015). With input from Big Cities Health Coalition (BCHC), AcademyHealth staff used the National Library of Medicine’s Health Services Research Projects in Progress (HSRProj) database to review trends in urban health services research (HSR) within participating BCHC Cities.

This project contributes to understanding HSR’s role in urban health, asking:
1. In which BCHC member cities is HSR conducted?
2. Among which of 25 urban health topics identified by the BCHC is HSR most commonly conducted?
3. Is there evidence of research collaboration among cities to study urban health; and what are the characteristics this collaboration?

Methods

To inform our research questions, HSRProj staff conducted three queries to identify relevant projects. HSRProj staff applied these three queries to projects with an initial start year of 2009-2014 which yielded 4,423 unique projects (Figure 1).

To evaluate the most relevant projects, staff distilled these 4,423 projects to those only at the union of all three queries, resulting in 149 projects (see Figure 2). HSRProj staff then coded and analyzed these 149 projects, using NVivo 9 software to tag projects by city and BCHC urban health topic.

Findings

What research topics are addressed in which city?

Most research projects are conducted in the largest cities with many major universities, hospitals and research centers. New York City is host to the most projects by far (n=144), followed by Baltimore (n=17). Boston, Chicago, Philadelphia, and San Francisco each host 12 projects, followed by Los Angeles (10), Seattle (10), and Houston (9).

The five most commonly researched BCHC topics across all cities are obesity (n=32), cancer (n=31), HIV (n=28), physical activity (n=28) and child health (n=21), as shown in Figure 3. E-coli, Healthcare Associated Infections, Laboratory Confirmed Infections and Motor Vehicles are topics that do not come up in any of the 149 projects. Half of all projects look at two or more 25 BCHC urban health topics.

Five categories of collaboration were identified:
1. No research collaboration;
2. Local research partnerships only within one BCHC city;
3. Collaboration by researchers within a BCHC city and a U.S. city that is not a BCHC member;
4. Collaboration by researchers within two or more BCHC member cities; and
5. International research partnerships between researchers in a BCHC city and a city outside of the U.S.

Figure 3: Most Researched BCHC Topics

<table>
<thead>
<tr>
<th>Topic</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tobacco</td>
<td>8</td>
</tr>
<tr>
<td>HIV</td>
<td>7</td>
</tr>
<tr>
<td>Childhood obesity</td>
<td>5</td>
</tr>
<tr>
<td>Obesity</td>
<td>4</td>
</tr>
<tr>
<td>Mental Health</td>
<td>3</td>
</tr>
</tbody>
</table>

Discussion

The existence of a forum like BCHC demonstrates there is already significant knowledge sharing and practice collaboration between member cities. However, the findings from this sample indicate only modest health services research collaboration among member cities. There is much more research collaboration between BCHC cities and non-member cities. Research collaboration between organizations in BCHC member cities focused on physical activity, obesity and substance abuse topics that reflect current country-wide public health concerns.

It is notable that there are only eight organizations or agencies funding all of the urban public health research in the sample of 149 projects. Overall, HSR projects on urban health within the BCHC cities are supported by a small proportion of the more than 365 supporting organizations in HSRProj, which may put these projects at risk for future sustainability.

Implications for Health, Policy, and Practice

The findings support the observations of Hearene et al. (2015) that the U.S. urban health agenda is responding to the need to understand chronic diseases (e.g. a focus on cancer and obesity).

Given the importance of the urban health agenda for public health in the U.S., the findings suggest further study to assess opportunities for multidisciplinary collaboration, and opportunities to engage public health departments.

HSRProj may be a useful tool to further inform policy and build an evidence base of health services research for urban health policy.

References & Acknowledgements

References


Resources

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For more information on HSRProj contact liz.koechlein@academyhealth.org or visit www.academyhealth.org/hsrproj

For more information about the Big Cities Health Coalition, visit http://www.bigcitiessh.org