PolicyLab: An Experiment in Charting New Frontiers

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Editor's note: This is the first in a series of blog posts that we will be publishing throughout the year in recognition of PolicyLab's 10th anniversary and our ongoing efforts to chart new frontiers in children's health research and policy. We invite you to check back for more content in the months to come!

Over ten years ago, we came together from two very different fields because of the same problem: despite so much wealth in our region and country, children were not doing well. One of us (the policy advocate/lawyer) never imagined herself working in academic medicine; she spent her career advocating for program and policy change from outside big systems. The other one (the pediatrician/researcher) was on a quest to influence the health of the children he saw weekly in his practice and who were the focus of his health services research. He knew that in order to do this, he would have to move his work outside of the hospital walls.

We realized that coming together from our separate worlds – while no silver bullet – might help us shape better solutions to what seemed liked intractable problems.

As it stood in 2008, Children's Hospital of Philadelphia (CHOP) had an emerging health services research group that was doing important research on programs and practices for vulnerable children and families, but there was an opportunity to enhance the impact and spread of this research. These skilled clinician academicians often lacked the training and partnerships needed to most effectively vet, share or design their work for the decision makers who could implement those new programs or policies – policymakers, health care system administrators and nonprofit leaders.

We were certainly not the first to recognize the need to close this gap between research and applied policy, but at the time CHOP was willing to invest in the development of a program whose central mission was focused on just that, so we seized the opportunity to form what is now PolicyLab.

In order to accomplish our mission of achieving optimal child health and well-being by informing program and policy changes through interdisciplinary research, we first needed to change the environment in which we conducted research. While our researchers' treatment and care as clinicians at CHOP gave us firsthand knowledge of the urgent needs children and families had, we needed to concede that we could not develop and evaluate programs or policies responsive to those needs without cultivating policymakers' perspectives on the research questions we were asking. Those questions had to be developed alongside one another.

And when it came to policymakers, we had to take a broader lens than just thinking about legislators who pass laws or executive leaders who develop budgets. At a very basic level, much of health policy is affected by agencies that serve children and families. We, therefore, needed closer relationships to child-serving agencies in our community.

While we diversified our relationships outside the hospital, we also had to look inward at the organization of our center. In 2008, we were largely comprised of physician faculty who worked within small research teams to advance their work. We realized early on that the composition of the center should reflect the interdisciplinary nature of its leadership. We are proud to have established a center with experts in medicine, public health, social work, psychology, law, biostatistics, health services research, population health, policy and communications. This untraditional approach to team building within academic medicine has resulted in a vibrant work environment where all ideas come to the table to inform larger visions for how best to achieve innovation for children, adolescents and families.

Along the way, as our collaborative research endeavors have proven successful for children in our community and beyond, we have established a growing number of partnerships across state and local agencies. It is an unfortunate reality that many public agencies operate on tight budgets with thinly staffed departments – staff who are administering programs are also the ones burdened with identifying and implementing best practices from research. Often, these competing priorities slow the infiltration of evidence-based innovation into public systems. PolicyLab's ability to serve as evaluators and technical assistants for state and local programs has allowed those leaders to make more informed decisions about program replication and improvements to their models.

This close collaboration has also helped our researchers realize that policymakers and program leaders are easily frustrated by research timeframes – three years for a "gold standard" study seems like a luxury at best, and makes researchers seem out of touch with policy timeframes. Therefore, our partnerships have pushed us to consider more efficient, pragmatic trials and mixed-methods surveys to help guide more timely quality improvement within their programs.

As we approach our 10th anniversary, we could not be prouder of the journey we have taken, both within CHOP, and across the region and country with our partners. Our team, now approaching 90 terrifically talented, interdisciplinary team members, keep us fresh and innovative in ways we could not have imagined a decade ago. And the examples that our theory of change is working are now many. From informing the reauthorization of children's health coverage through our work on affordability of dependent health insurance coverage, to pioneering work in primary care innovation, to developing novel population health solutions for children with special health care needs like asthma or behavioral or psychosocial needs, we have challenged ourselves to design and test novel solutions that are truly improving the health and well-being of all youth – from early childhood through adolescence.

We will have a lot to share with you in the coming months about these successes and our efforts to chart new frontiers in children's health research and policy. This will build towards a children's health policy forum this fall, for which we will invite many of our partners and colleagues to join us in discussing what growing and changing needs of children and families should inform our next decade of work. This experiment of ours has been the most rewarding partnership of our careers. We are grateful for the contributions of our colleagues and the many partners we've developed outside of CHOP over the years, and we're already looking forward to what the next 10 years will bring.

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