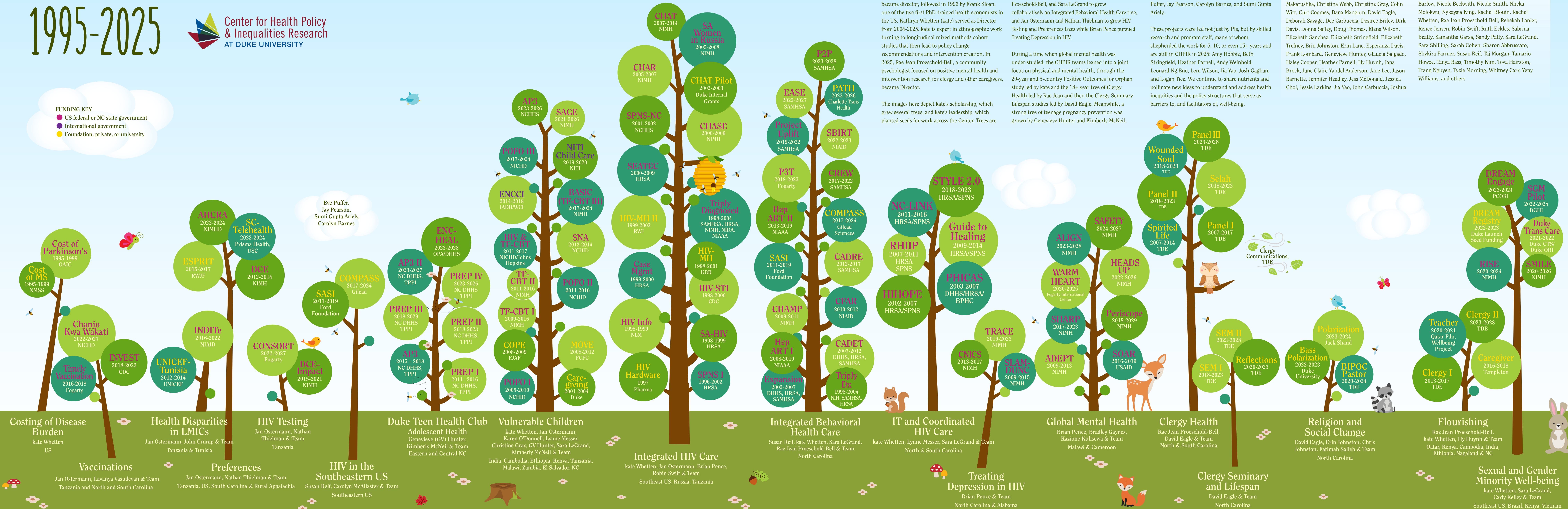


CHPIR FOREST OF GROWTH

1995-2025



FUNDING KEY
● US federal or NC state government
● International government
● Foundation, private, or university



The Duke Center for Health Policy & Inequalities Research (CHPIR) started in 1981. The first director was David Eddy, a PhD and MD mathematician who was the first to create a methodology for evidence-based medicine, leading to the first evidence-based clinical care guidelines. In 1988, David Matchar, a physician known for evidence-based stroke care guidelines, became director, followed in 1996 by Frank Sloan, one of the five first PhD-trained health economists in the US. Kathryn Whetten (kate) served as Director from 2004-2025. kate is expert in ethnographic work turning to longitudinal mixed-methods cohort studies that then lead to policy change recommendations and intervention creation. In 2025, Rae Jean Proeschold-Bell, a community psychologist focused on positive mental health and intervention research for clergy and other caregivers, became Director.

The images here depict kate's scholarship, which grew several trees, and kate's leadership, which planted seeds for work across the Center. Trees are

chosen because they support each other, sharing nutrients through their roots.

Work during kate's tenure started with kate's economic costing projects and studies on HIV/AIDS disparities, leading to an Integrated HIV Care tree of intervention studies. The seeds of these early projects allowed several investigators including Susan Reif, Rae Jean Proeschold-Bell, and Sara LeGrand to grow collaboratively an Integrated Behavioral Health Care tree, and Jan Ostermann and Nathan Thielman to grow HIV Testing and Preferences trees while Brian Pence pursued Treating Depression in HIV.

During a time when global mental health was under-studied, the CHPIR teams leaned into a joint focus on physical and mental health, through the 20-year and 5-country Positive Outcomes for Orphan study led by kate and the 18+ year tree of Clergy Health led by Rae Jean and then the Clergy Seminary Lifespan studies led by David Eagle. Meanwhile, a strong tree of teenage pregnancy prevention was grown by Genevieve Hunter and Kimberly McNeil.

An increased focus on mental health followed, growing the Global Mental Health tree and supporting not just the absence of disease but the presence of well-being, as seen in the Flourishing and Sexual and Gender Minority Well-Being trees. Public communication efforts are symbolized by the wind blowing the trees' leaves, and key collaborators with their own trees not shown here include Eve Puffer, Jay Pearson, Carolyn Barnes, and Sumi Gupta Ariely.

These projects were led not just by PIs, but by skilled research and program staff, many of whom shepherded the work for 5, 10, or even 15+ years and are still in CHPIR in 2025: Amy Hobbie, Beth Stringfield, Heather Parnell, Andy Weinhold, Leonard Ng'Eno, Leni Wilson, Jia Yao, Josh Gaghan, and Logan Tice. We continue to share nutrients and pollinate new ideas to understand and address health inequities and the policy structures that serve as barriers to, and facilitators of, well-being.

TEAM MEMBERS

Ace Robinson, Alicia Andrews, Alisa Barrett, Alonzo Felder, Amy Hobbie, Andy Weinhold, Anna Both Koons, Anna Holleman, Ashley Blewitt-Golsch, Barb Salgado, Becca Heine, Beverly Cates, Bitu Hamedani Greer, Blen Biru, Brian Flores, Brian Goings-Reid, Carla Mena, Carlina Shotwell, Carolyn Vance, Challice Overy, Chris Conover, Chris Foye, Christina Makarushka, Christina Webb, Christine Gray, Colin Witt, Curt Coomes, Dana Mangum, David Eagle, Deborah Savage, Dee Carbuccia, Desiree Briley, Dirk Davis, Donna Safley, Doug Thomas, Elena Wilson, Elizabeth Sanchez, Elizabeth Stringfield, Elizabeth Trefney, Erin Johnston, Erin Lane, Esperanza Davis, Frank Lombard, Genevieve Hunter, Glauca Salgado, Haley Cooper, Heather Parnell, Hy Huynh, Jana Brock, Jane Claire Yandel Anderson, Jane Lee, Jason Barnette, Jennifer Headley, Jess McDonald, Jessica Choi, Jessie Larkins, Jia Yao, John Carbuccia, Joshua

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