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A collaborative study including Dr. Gulzar Shah, associate dean for research at the Jiann-Ping Hsu College of Public Health Georgia Southern University examines laying the groundwork for evidence-based public health. The researchers examined variation in the use of evidence-based decision-making (EBDM) practices across local health departments (LHDs) in the United States and the extent to which this variation was predicted by resources, personnel, and governance. This study used data from the National Association of County and City Health Officials’ (NACCHO) Profile of Local Health Departments, the Association of State and Territorial Health Officials’ (ASTHO) State Health Departments Profile, and the US Census. Using 2-level multilevel regression models, the study found that resources, workforce, and governance predicted the use of evidence-based decision making (EBDM) practices used by LHDs. Expenditures per 1000 population, having a top executive with a public health degree, the presence of certain staff categories, and participation in Health Impact Assessment (HIA) training were positively associated with use of EBDM practices. LHDs in states with decentralized governance used significantly more EBDM practices. The study found more workforce-related predictors than resource predictors. Thus, the study concluded that although resources are related to LHDs’ use of EBDM practices, the way resources are used (e.g., the types and qualifications of personnel hired) may be more important.