Strength in Numbers: Data and assessment strategies for public health success

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Public Health
• What we do collectively, as societies, to create conditions in which people can be healthy
• Health: a complete state of physical, mental and social wellbeing and not merely the absence of disease or infirmity
Public Health

• Health
• Welfare
• Wellbeing
• Quality of life
• Happiness

Public Health

• Population-focused
• Prevention-driven
• Community-oriented
• Rooted in social justice principles
• System leadership-dependent
• Politically volatile
Public Health Systems

• “public health” happens in many places, but only governmental public health bears the responsibility to promote, protect and improve the health of people living in or visiting the state of Tennessee

Where does public health happen?

• ???
What does this say about Public Health’s System Leadership role?

• ???

Why Systems Leadership?

• Brave New Public Health Programs
  – Flat or declining resources for all public health, health, and human services
  – Continued downsizing, reorganization
  – Major (or not) reforms of the health care financing and delivery system
  – HUGE competing priorities
  – Persistent and emerging needs, growing demand
Public Health Systems

• Many elements to systems leadership
  – Communication
  – Coordination, cooperation, collaboration
  – Comprehensive approaches
  – Leadership

• Two critical elements often not well understood nor appreciated
  – Data
  – Partnerships

Strength in Numbers

• These are two very powerful allies upon whom to call for guidance and support in building public health systems that assure conditions in which everyone can be healthy and enjoy the highest possible quality of life.
Strength in Numbers
- One: NUMBERS, i.e. DATA
- What gets measured gets changed.
- No data? No problem!

Data → Information → Knowledge → Action

- Without data, yours is just another opinion.

Strength in Numbers
- Two: NUMBERS, i.e. PEOPLE
  - Public health belongs to the public
  - Data mean little if the public is not behind an issue, a problem, a solution
  - We can accomplish more together than we ever can apart

Collaboration → cooperation → congratulations!
Strength in Numbers

• Public health programs are responsible to assess in order to advocate for rational policy and to assure health through services, supports and rational resource allocation

• Remember DATA is the necessary precursor to information and knowledge

Strength in Numbers

• The availability of timely, high quality, informative data systems is essential to our ability to
  – Assess needs
  – Identify strengths
  – Monitor trends
  – Identify emerging or persisting problems
  – Justify budgets and activities
  – Allocate resources
  – Manage programs (end programs . . .)
  – Evaluate efforts
  – Form partnerships
Strength in Numbers

• As true as this is at the state level, it is almost more true at the community level where “knowing” is critical to action
  – How should scarce dollars be allocated?
  – What services need to be available?
  – Who is most at risk?
  – Who is capable of contributing to the solution?

Strength in Numbers

• Data come in many forms and at the community level you may have more opportunities to take advantage of this
  – State or federally reported county-level data
  – Locally generated routine data
  – Multi-agency program data
  – Community “voices” (focus groups, town meetings, key informant interviews, etc)
Strength in Numbers

• Population data: census
• Vital records: birth, deaths
• Surveys and surveillance: BRFSS, YRBS, PRAMS, Fatality Reviews
• Program management: PTBMIS, Home visiting
• Health care facilities: hospitals, nursing homes

Not surprisingly, the “data” part of the numbers is often connected to the “people” part of the numbers

• To get the data you need, you have to develop partnerships
• To develop partnerships that work, you need data to guide your efforts
Strength in Numbers:
The Prenatal Care Example
- Everyone understands that prenatal care is important, but what do we monitor?
- Is there a difference among women who:
  - Start early but don’t receive adequate visits?
  - Do not start early but receive adequate visits?
  - Start early and receive excessive visits?
  - Receive no visits at all?

Strength in Numbers:
The Immunization Example
- Everyone understands that children should be immunized, but what do we monitor?
- Is there a difference among children who:
  - Receive early vaccines but not late ones?
  - Receive all vaccines at 1 year 11 months?
  - Receive all vaccines according to schedule?
  - Receive no vaccines at all?
Strength in Numbers:
Cause of Death Example
• What are the leading causes of death in this state?
• What are the leading causes of those causes?
• What does this say about the nature of our efforts? Who must we partner with? Can we share information and develop collective plans?

Strength in Numbers
• The data shall set you free!
• The data supplies the “knowing”, which drives the destruction of the barriers and suggests avenues for success
Small Group Exercise
- Establishing priorities
- The Arkansas Example

Small Groups Report Back
- Themes?
- Data issues?
- Solutions?
Strength in Numbers
• Data are necessary . . .
  – Data are essential to describe the state of health, the magnitude of disease and causal factors, to explore possible solutions and to evaluate the impact of interventions
  – this is essential for effective planning to promote health, set priorities and allocate scarce resources

Strength in Numbers
• . . . but not sufficient
  – what does the public say is important to them?
  – what do they perceive as the most serious health problems?
  – what do they believe to be the most significant risk factors?
  – what are they willing to accept in the way of solutions?
Advocacy

• “Strength in numbers” refers not only to the data, but to the people whose support you can marshal behind your ideas
• The data alone do not make the case
• Opinions, however passionate, do not make the case
• You need BOTH to succeed

Strength in Numbers

• Partnerships are critical to your success
  – In using data effectively
  – In addressing problems that you “know” about and can do something about
  – In building sustainable systems
• By definition, you know this to be true
Strength in Numbers

• As a population-focused effort, public health agencies often bring an important perspective together with community-based data that other programs serving various constituents often lack.

• At the same time, our resources are woefully inadequate to the task at hand – creating conditions in which people can be healthy and thrive.

Strength in Numbers

• We have to be the conscience of the community of people and professionals collectively serving the interests of our community populations.

• We have to invite to the table the partners that can act in addressing the issues illustrated by the data.

• We have to bring to the table the numbers that tell the story and guide the action.
Strength in Numbers

“Tell me please which way I ought to go?” asked Alice.

“That depends on where you want to get to” said the Cheshire Cat.

“I do not care where”, replied Alice.

“Then it does not matter which way you go” said the Cat.

Lewis Carroll, Alice in Wonderland

Strength in Numbers

• DATA and PEOPLE help set the direction, set the goals, prompt the action, demand the changes we all desire
• In health, quality of life and . . .
Happiness

- Happy life years
  - Life-expectancy at birth multiplied by average happiness on range 0-1
  - Costa Rica first
  - United States #19
  - Zimbabwe last

Wellbeing

- Gallup tracks America’s Wellbeing every day on a scale from 0 (worst) to 100 (best)
- Wellbeing = enjoying a state of happiness
- Currently, Americans are at 66.5
Health is Wellbeing

- Gallup-Healthways Wellbeing Index
  - Life Evaluation 50.0
  - Emotional Health 79.6
  - Work Environment 46.9
  - Physical Health 76.9
  - Healthy Behaviors 63.8
  - Access to Basic Necessities 82.0

State of Tennessee Well-Being, 2010

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<tr>
<th>Domain</th>
<th>Result</th>
<th>Rank</th>
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<tr>
<td>Well-Being Overall</td>
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<tr>
<td>Life Evaluation</td>
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<tr>
<td>Emotional Health</td>
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<tr>
<td>Basic Access</td>
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May you live in interesting times . . .

- Latest census figures show more people living in poverty, a greater income gap between the richest and the poorest, more people uninsured, more people struggling to meet basic necessities
- Our leadership role is critical!

Public Health

- “People should take more responsibility for their own health, absolutely, but we also collectively need to ensure that the conditions exist in which healthier choices are actually realistic”

  » Jan Malcolm, CEO, Courage Center
Strength in Numbers

- I wish you all the best in your efforts and I look forward to learning of your many successes.
- Thank you!