Northwest Center for
Public Health Practice

SCHOOL OF PUBLIC HEALTH

Needs for Data and Capacity-Building to Address Rural Health Disparities

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Health Equity, Inequities, Disparities, etc.

"…I think a lot of people in our community don't really understand health disparities. […] the general population, I think, does not have a very good understanding of that."

"That [training on understanding health disparities] would be very helpful. I think that is definitely a challenge. I don't think people have a good understanding of what it means."

"…[I]n public health, we have to recognize what the health disparities are and then also how to address them. And I think, especially when we're having new staff who we hire into public health, they need that training. I mean, everybody needs that training because I think it's very beneficial."

"It [training on understanding health disparities] absolutely would because I think not everyone has the same understanding, so grounding people in an understanding would be great."

Shared Language and Understanding

Task: In pairs, match the term with its definition

Term	Definition
1. Health equity	A. Differences in health that are avoidable, unfair and unjust.
2. Health disparities	B. Attainment of the highest level of health for all people.
3. Health inequities	C. The range of personal, social, economic and environmental factors that influence health status.
4. Determinants of Health	D. Difference in health outcomes among groups of people.

A Video is Worth a Million Words?

A Deeper Dive…

Figure 2

Social Determinants of Health

Economic Stability	Neighborhood and Physical Environment	Education	Food	Community and Social Context	Health Care System
Employment	Housing	Literacy	Hunger	Social integration	Health coverage
Income	Transportation	Language	Access to healthy options	Support systems	Provider availability
Expenses	Safety	Early childhood education		Community engagement	Provider linguistic and cultural competency
Debt	Parks	Vocational training		Discrimination	
Medical bills	Playgrounds				
Support	Walkability	Higher education			Quality of care

Health Outcomes
Mortality, Morbidity, Life Expectancy, Health Care Expenditures, Health Status, Functional Limitations

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In reality…

[A]s the health district, what is our mission or role in that particular situation? We're needing to do our strategic plan and deciding – Is it our job to – What is our job? What's our role in dealing with an issue with the health disparities? As the health district, what can I do about that? What are our roles in dealing with different social determinants of health?

SHARE-NW

Solutions in Health Analytics for Rural Equity across the Northwest
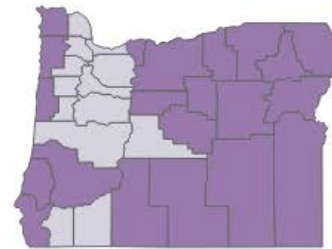
Goals

To address health disparities in rural communities through:

1. Provide data for decision-making

2. Improve access to data

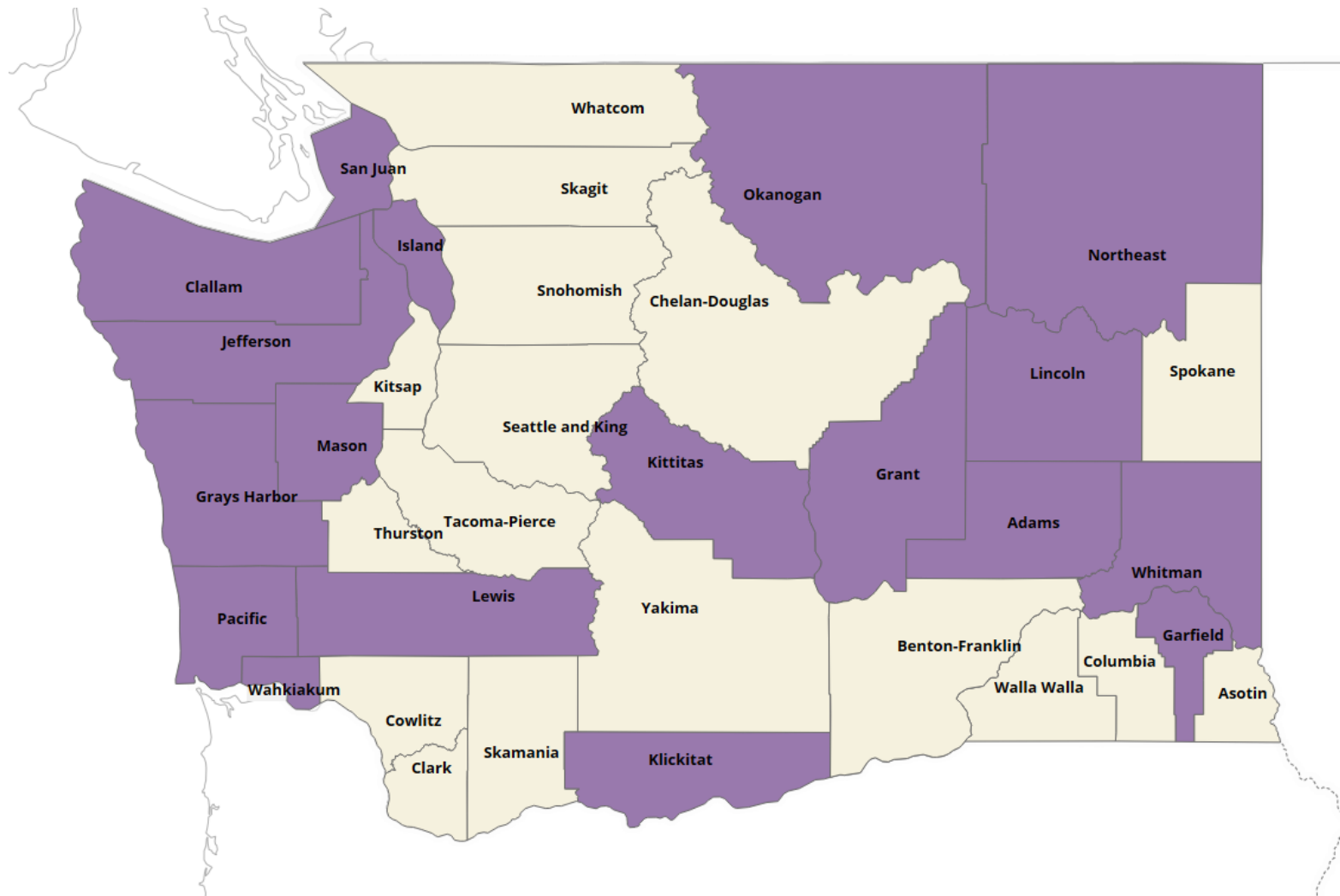3. Increase capacity for data use and data-driven decision-making

Project Overview

- **When:** 5-year grant, July 1, 2017 - June 30, 2022

- **Where:** 70 rural health jurisdictions in AK, OR, WA, & ID

- **How:** Training, learning communities, data visualizations, technical assistance

Rural LHDs in WA

First year

- Identified Partners and Equity Advisory Committee

- Evaluation

  - Identified health disparities and priorities; data sources; **gaps in capacity**; and training needs

  - Methods

    - Key informant interviews

    - Analysis of CHAs and CHIPs

    - Training evaluation surveys

  - Assessed capacity for and use of data visualizations

- Training

  - Data in decision-making (WA, ID, and OR)

Goal 1

Identify **gaps in capacity** for data-driven decision-making to address SDOH

Methodology
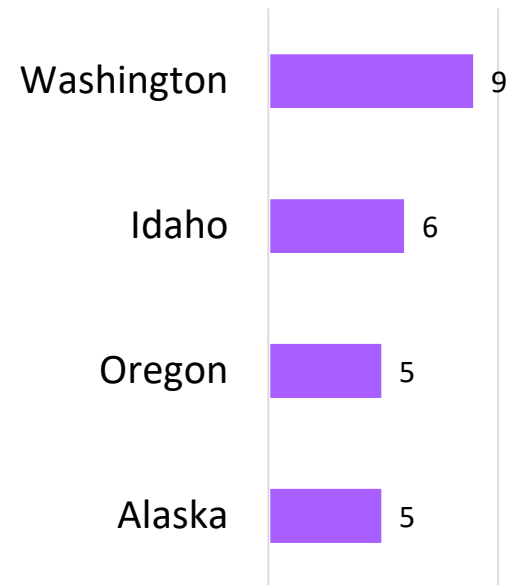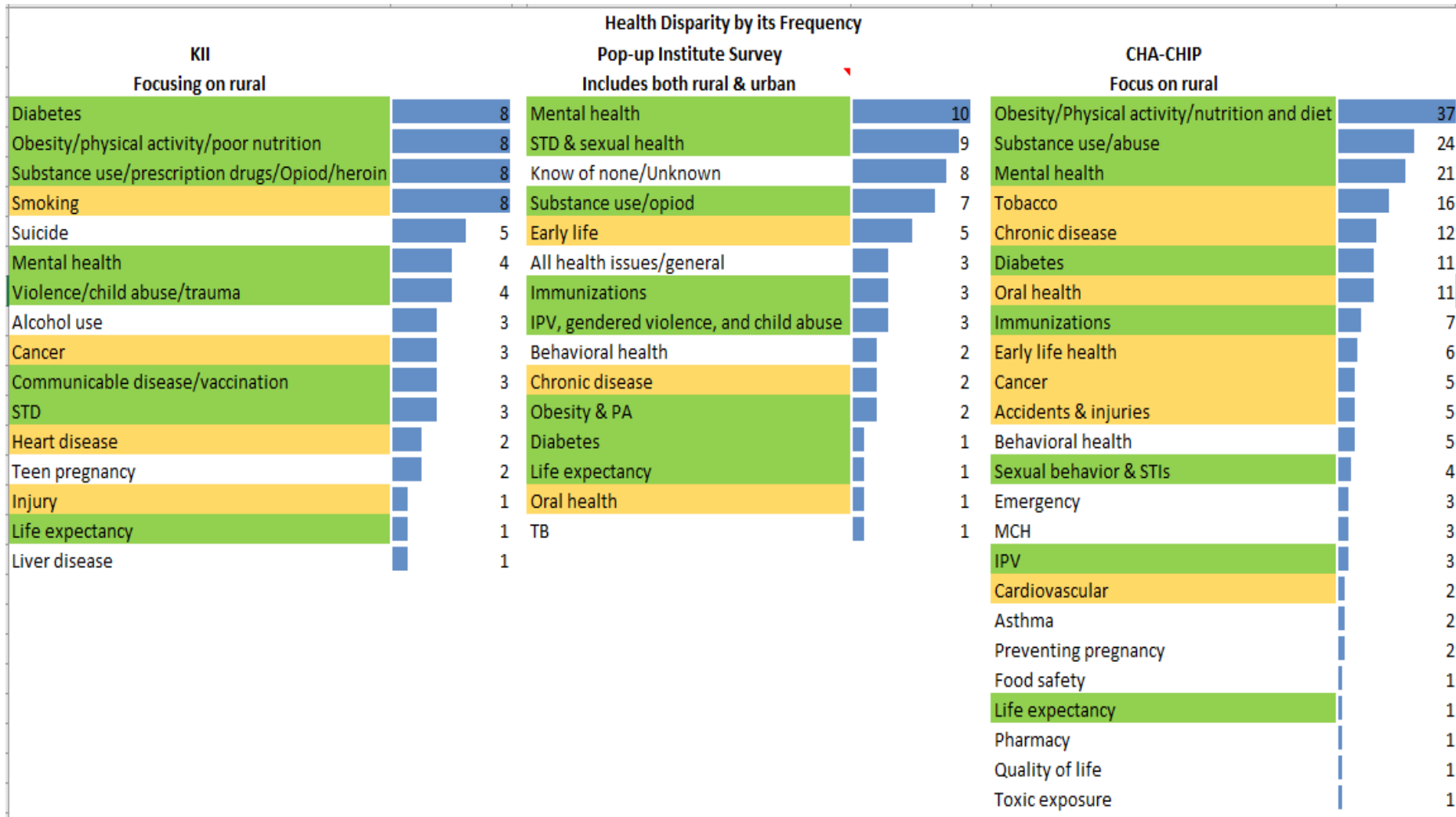
25 Key Informant Interviews

- 30-45 minute semi-structured telephone interviews

- "What are the challenges or barrier to accessing or using those data sources [you would like greater access to in order to better understand the health disparities in your jurisdiction]?"

Interviews by State (n=25)

State	Count
Washington	9
Idaho	6
Oregon	5
Alaska	5

User Input on Health Priorities

Health Disparity by its Frequency

KII Focusing on rural		Pop-up Institute Survey Includes both rural & urban		CHA-CHIP Focus on rural	
Diabetes	8	Mental health	10	Obesity/Physical activity/nutrition and diet	37
Obesity/physical activity/poor nutrition	8	STD & sexual health	9	Substance use/abuse	24
Substance use/prescription drugs/Opiod/heroin	8	Know of none/Unknown	8	Mental health	21
Smoking	8	Substance use/opiod	7	Tobacco	16
Suicide	5	Early life	5	Chronic disease	12
Mental health	4	All health issues/general	3	Diabetes	11
Violence/child abuse/trauma	4	Immunizations	3	Oral health	11
Alcohol use	3	IPV, gendered violence, and child abuse	3	Immunizations	7
Cancer	3	Behavioral health	2	Early life health	6
Communicable disease/vaccination	3	Chronic disease	2	Cancer	5
STD	3	Obesity & PA	2	Accidents & injuries	5
Heart disease	2	Diabetes	1	Behavioral health	5
Teen pregnancy	2	Life expectancy	1	Sexual behavior & STIs	4
Injury	1	Oral health	1	Emergency	3
Life expectancy	1	TB	1	MCH	3
Liver disease	1			IPV	3
				Cardiovascular	2
				Asthma	2
				Preventing pregnancy	2
				Food safety	1
				Life expectancy	1
				Pharmacy	1
				Quality of life	1
				Toxic exposure	1

Health Priorities

**Obesity
Physical Activity
Nutrition**

Diabetes

Tobacco

**Mental Health
Suicide
Substance Use**

**Injury
Violence**

Oral Health

Key Gaps

Limited access

Data unavailable

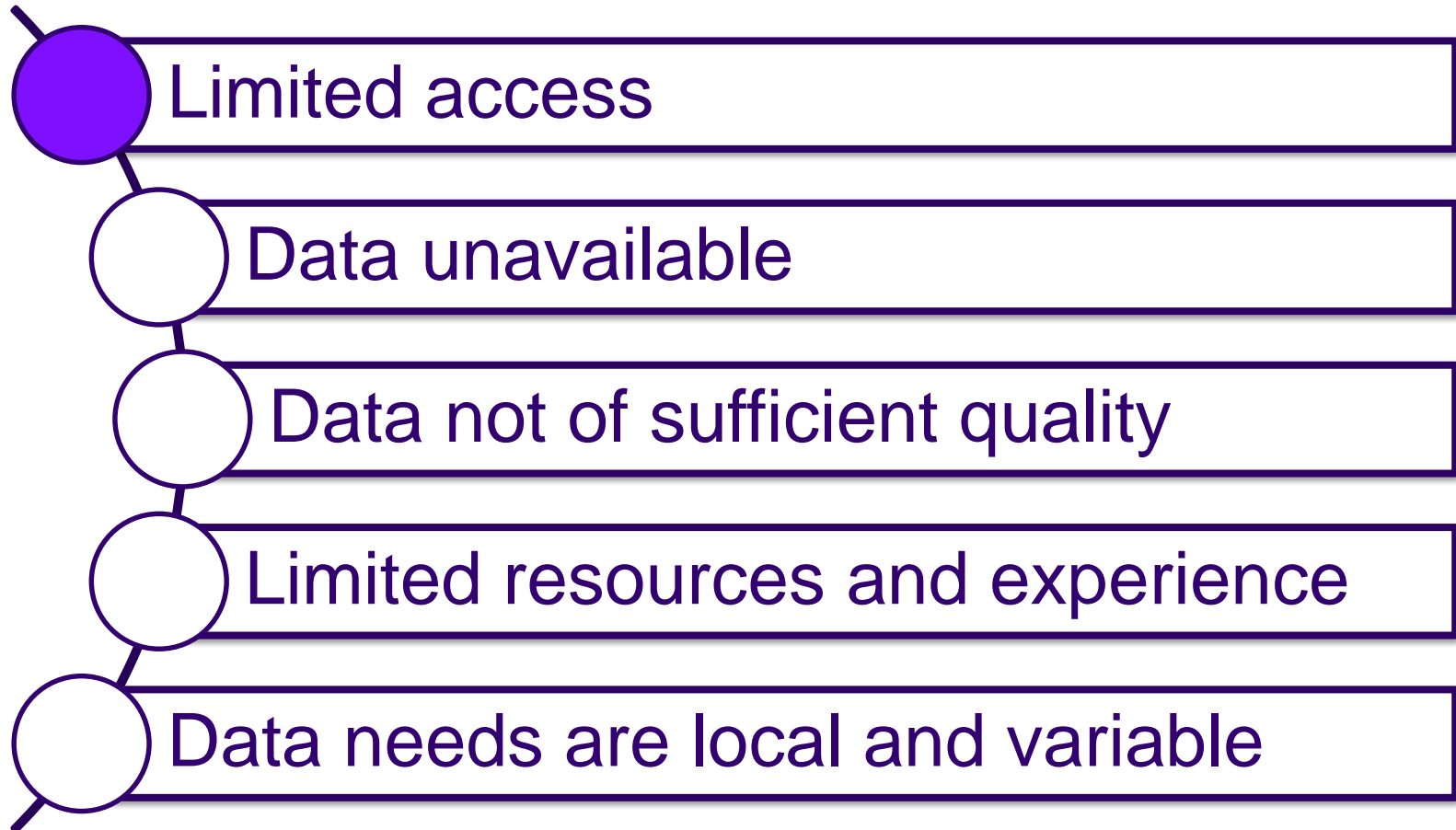Data not of sufficient quality

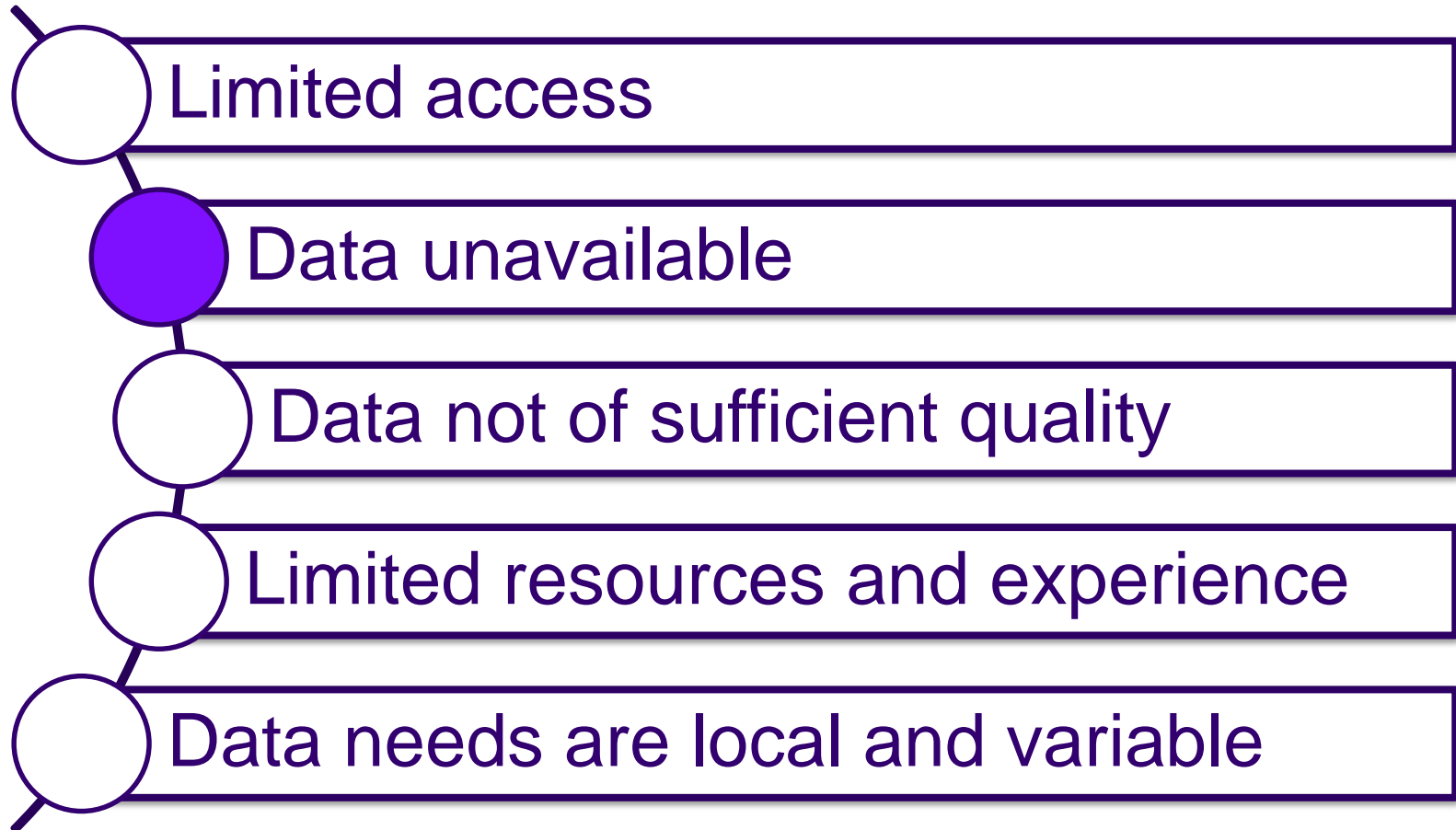Limited resources and experience

Data needs are local and variable

Limited Access

They [different data sources] all are kind of silo-ed... It feels sometimes like **you just have to go to so many sources** *to get each individual type of thing you're looking for.*
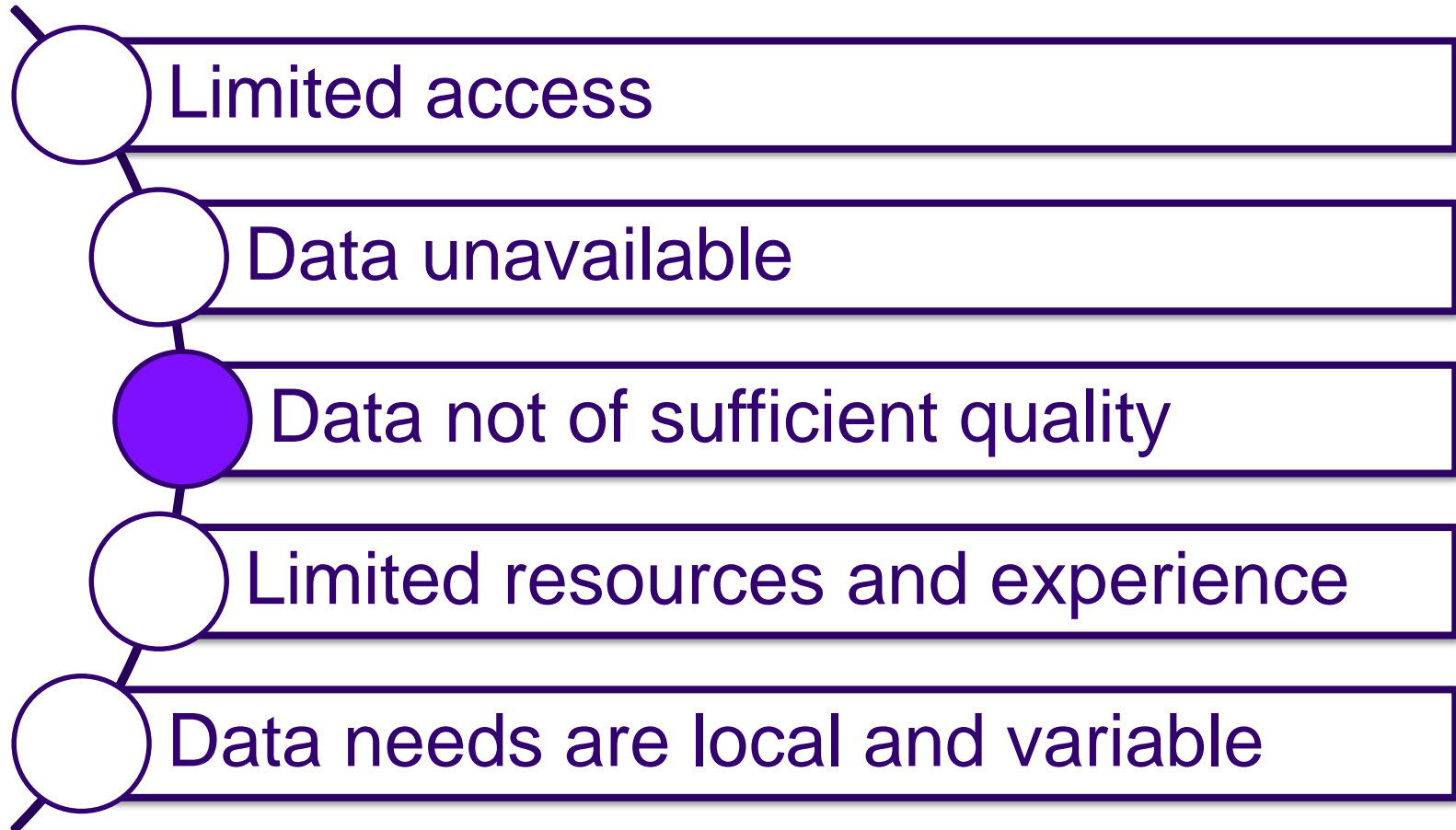
Key Gaps

- Limited access
- Data unavailable
- Data not of sufficient quality
- Limited resources and experience
- Data needs are local and variable

Data are Unavailable

*It's just not out there. **I mean, there is no data**. At least no data sources that are looking at current data on health inequities…*
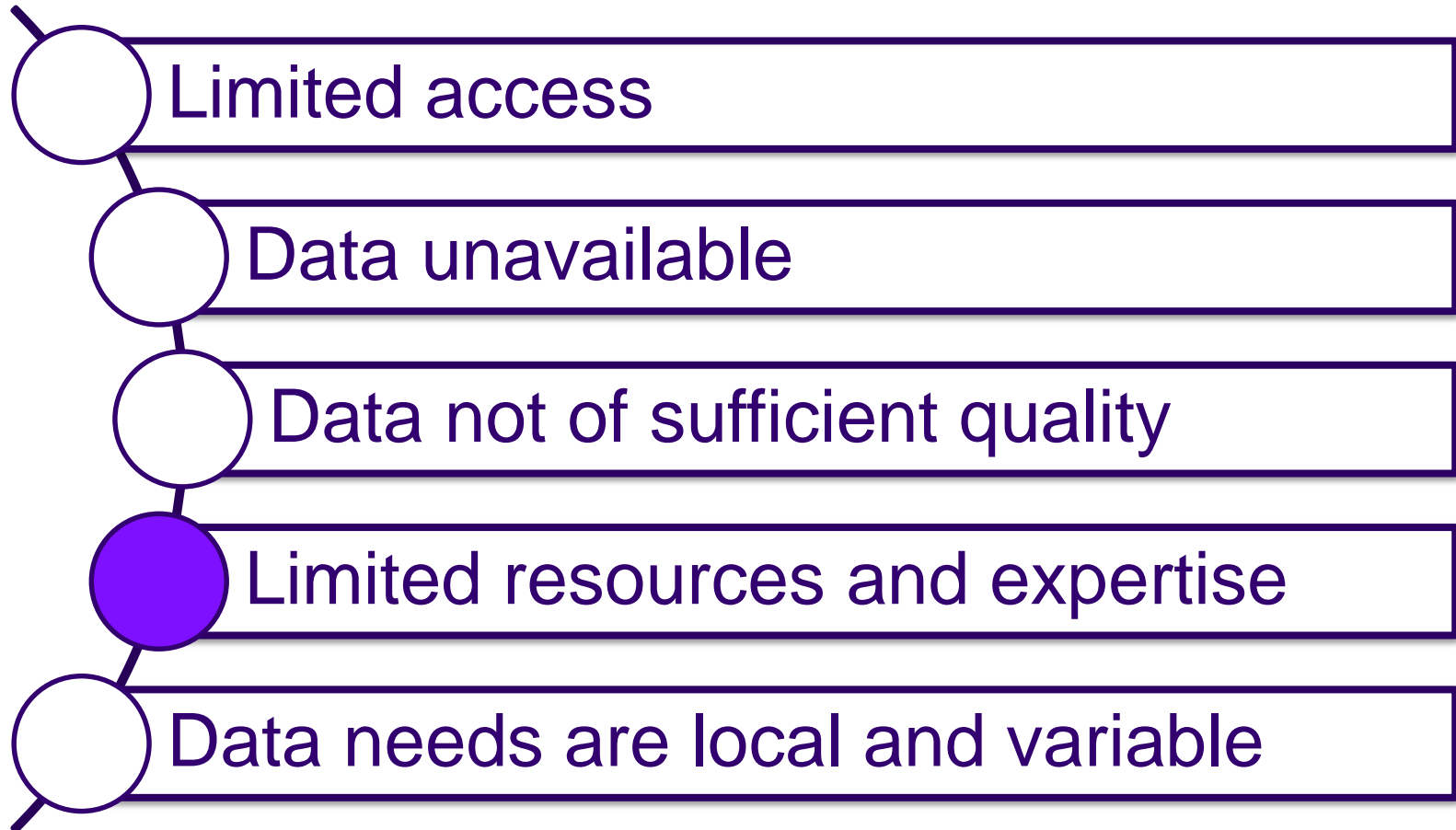
Key Gaps

- Limited access
- Data unavailable
- Data not of sufficient quality
- Limited resources and experience
- Data needs are local and variable

Data Quality

The data that we do have isn't necessarily accurate, *which means it may not be the data we want to use anyway….that seems to be underneath most of the data we have access to.*

Less Accurate → More Accurate

Key Gaps

- Limited access
- Data unavailable
- Data not of sufficient quality
- Limited resources and expertise
- Data needs are local and variable

Limited Resources and Expertise

*There are **so many folks in our rural facilities who are doing 18 different jobs at once**. ….helping them connect to what they can actually do with the data, I think, is a challenge.*

Key Gaps

- Limited access
- Data unavailable
- Data not of sufficient quality
- Limited resources and experience
- Data needs are local and variable

Data Needs are Local and Variable

There are 29 federally recognized tribes in Washington…So, ***29 individual sets of unique stories and data that go with it****.*

Your Experiences

- Which gaps in capacity has your agency faced?

- How have you handled them?

Closing the Gaps

Identify data sources, data needs and key gaps
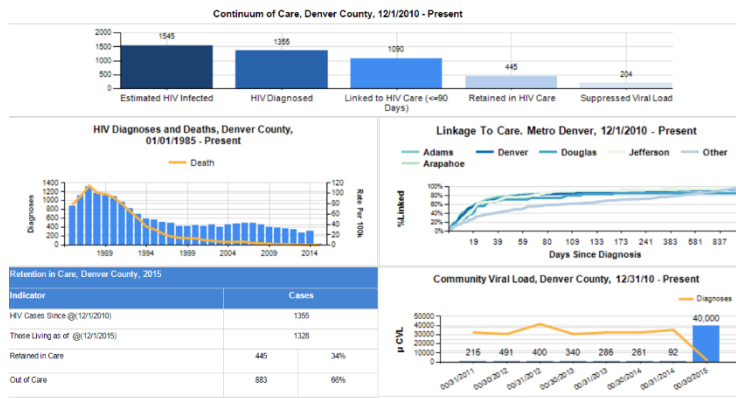

Create a visualization tool informed by needs and gaps

Usability testing of prototype data dashboard

Next steps: Training practitioners to find, use, and create data

Data Visualization: Dashboards

Next Steps

- Create linked data sets and data hub

- **Develop interactive data dashboards,** focusing on 6 areas of health disparities:

- Develop trainings

Get Involved!

We want your input!
See sign-up sheet for
more information
or E-mail

phast@uw.edu

Participant Activities

2018/19: Give feedback on data
visualization mockups and test
dashboard

2020/21: Receive
invitation to participate in
online and in-person
trainings

Thank You

To our partners:

State of Alaska Department of Health & Social Services
Idaho Association of Public Health District Directors
Idaho Department of Health and Welfare
State of Washington Department of Health
WA State Association of Local Public Health Officials
Oregon Health Authority
Oregon's Coalition of Local Health Officials
Northwest Portland Area Indian Health Board
Funder: Office of Minority Health