# Module 3: Identifying Health Problems

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**Winston Liaw, MD, MPH** has reported no conflicts of interest relative to this program.

**Jennifer Rankin, PhD, MPH, MS, MHA** has reported no conflicts of interest relative to this program.

**Andrew Bazemore, MD, MPH** has reported no conflicts of interest relative to this program.

### Agenda

- Gathering quantitative data
- Gathering qualitative data
- Social determinants of health
- Prioritizing health problems

### Objectives

- List the steps involved with gathering quantitative data about a community
- List the steps involved with gathering qualitative data about a community
- Define social determinants of health
- List the steps involved with prioritizing health problems



"Winston – aka Winnie"

Age: 7 years

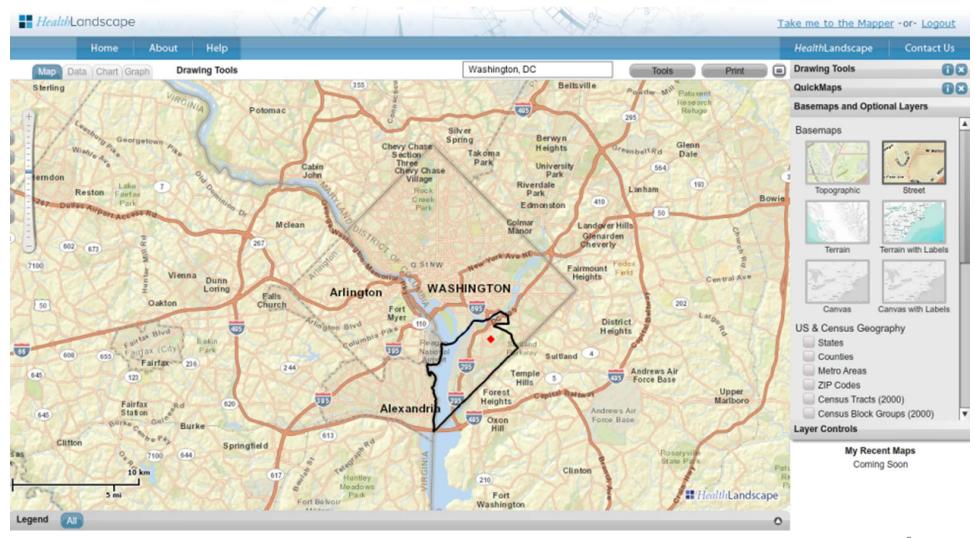
Weight: 70

pounds (95%)

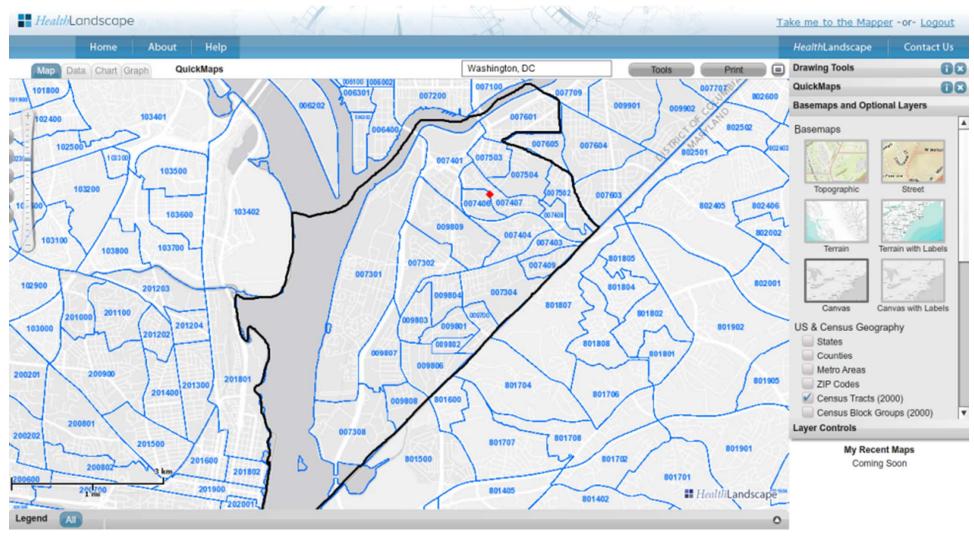
**Body Mass** 

Index: 20 (> 95%)

# Refining community = Ward 8



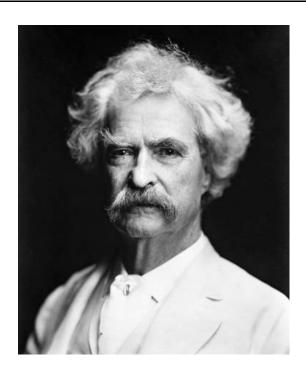
# Refining community = Census Tract 007407



# **STATS**

# **STORIES**





Mullan F, Focht C, Hayashi S, Gofin J, Gofin R, Neumark Y, Epstein L. Community oriented primary care: An implementation guide.

#### **Demographic Data:**

Data from DC Department of Health – State Center for Health Statistics Administration 1999 \*Census data from Census 2000

	US	DC	Ward 8	Ward 3	Combined Census Tracts*
Total population	272,690,813	523,124	60,485	68,093	51,696
% of city		100%	11.56%	13.02%	9.88%
% Population<18	25.80%	18.40%	33.50%	18.60%	33.7%
% Population Black	12.80%	61.90%	89.60%	4.20%	95.20%
% Population White	82.40%	34.60%	8.30%	89.50%	2.8%
% Population	11.50%	7.60%	2.30%	13.00%	0.80%
Hispanic					

### Number, age, gender, race

Lichtenstein C, et al. Community oriented primary care: Continuing the cycle at Good Hope Road. Unpublished report.

#### **Births and Deaths**

Data from DC Department of Health-State Center for Health Statistics, 1999

	US	DC	Ward 8	Ward 3
Live Births	3,959,417	7513	1237	854
Rate (per 1000 population)	14.5	14.5	20.40	12.5
Infant Mortality (per 1000)	7.1	15	27.5	5.9
% of infant deaths in city		100%	30.1%	4.4%
Deaths (all ages- per 100,000)	877	1162	952.1	925.2
# of deaths to children (1-19yo)	Not Avail	81	17	2
% of child deaths in city		100%	21%	2.50%

Lichtenstein C, et al. Community oriented primary care: Continuing the cycle at Good Hope Road. Unpublished report.

#### TABLE 3-16.--TOTAL DEATHS AND INFANT DEATHS BY CENSUS TRACT: DISTRICT OF COLUMBIA, 2005

### VITAL STATISTICS OF THE DISTRICT OF COLUMBIA

2005

CARLOS CANO, MD INTERIM DIRECTOR, DEPARTMENT OF HEALTH

JOHN O. DAVIS-COLE, Ph.D., MPH INTERIM SIGNOR DEPUTY DIRECTOR CENTER FOR POLICY, PLANNING, AND EPIDEMIOLOGY

FERN JOHNSON-CLARKE, PHD CHEEF, RESEARCH AND ANALYSIS DEVISION STATE CENTER FOR HEALTH STATISTICS

January 29, 2008

	Deaths				
Census Tract	All Ages	Under 1 Year of Age			
Total	5,454	108			
000	99				
010	27	-			
011/b	3	-			
020	3	- 2			
021	2	-			
022	12	-			
030	4	12			
031/b	7	-			
040	10	2			
	4				

Table 1. Understanding Overweight and Obesity in the District								
	Ward 1	Ward 2	Ward 3	Ward 4	Ward 5	Ward 6	Ward 7	Ward 8
% Overweight	39%	35%	31%	39%	38%	30%	33%	30%
% Obese a	19%	13%	12%	22%	30%	19%	40%	42%
% African American <sup>b</sup>	43%	30%	6%	78%	88%	69%	97%	92%
% Hispanic <sup>b</sup>	23%	9%	7%	13%	3%	2%	1%	2%
% Caucasian <sup>b</sup>	35%	56%	84%	10%	8%	27%	1%	6%
Average house- hold income <sup>c</sup>	\$63,000	\$98,000	\$128,000	\$78,000	\$49,000	\$69,000	\$39,000	\$29,000
% consuming five servings of fruits and veg- etables <sup>a</sup>	37	33	37	32	30	35	24	32
Number of grocery stores d	6	11	14	2	3	6	2	2
Food Access Score e	C-	C+	В	C+	С	В-	С	D-
Percentage getting recom- mended levels of moderate or vigorous physical activity <sup>a</sup>	70	81.4	84.9	61.7	59.2	84.9	58.5	54.7
Average distance to park <sup>f</sup>	132 m	135 m	165 m	157 m	206 m	127 m	170 m	254 m
Violent Crimes g	1341	906	124	911	1179	1102	1121	4596

<sup>&</sup>lt;sup>a</sup> Behavioral Risk Factor Surveillance Survey, 2007.

<sup>&</sup>lt;sup>g</sup> D.C. Metropolitan Police Department Geocoded Information Management System Preliminary Data (Violent Crime = Homicide, Sex Abuse, Robbery, Assault with a Deadly Weapon)



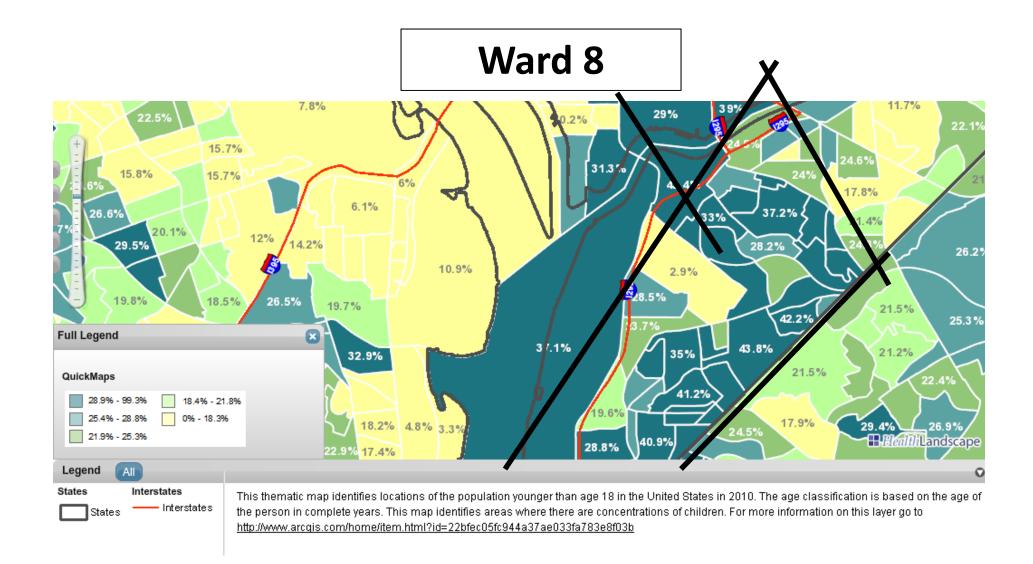
<sup>&</sup>lt;sup>b</sup> U.S. Census Bureau, 2000.

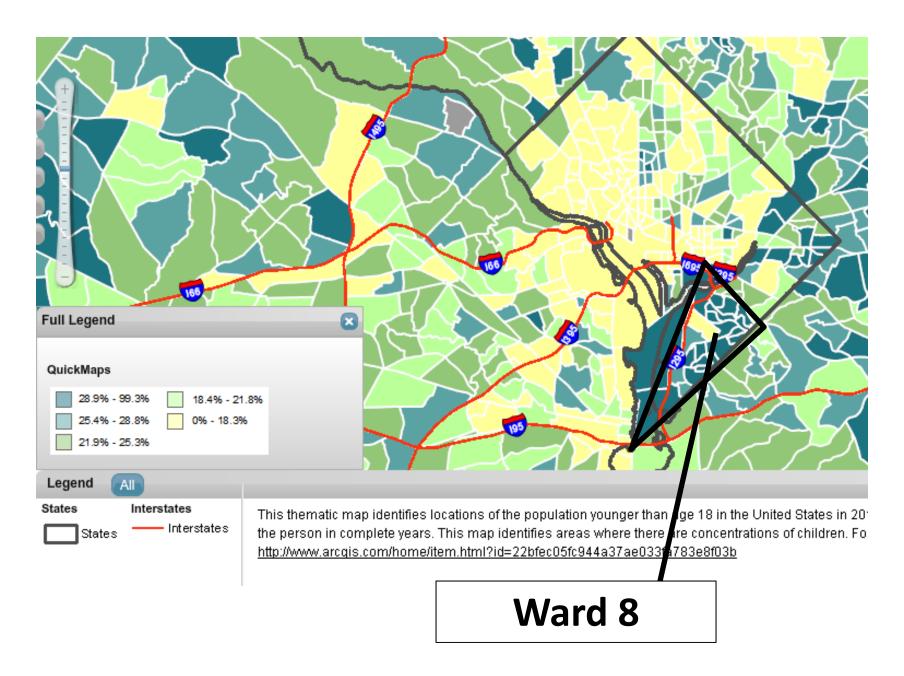
<sup>&</sup>lt;sup>c</sup> Social Compact, Washington, D.C. Neighborhood Market DrillDown, 2007.

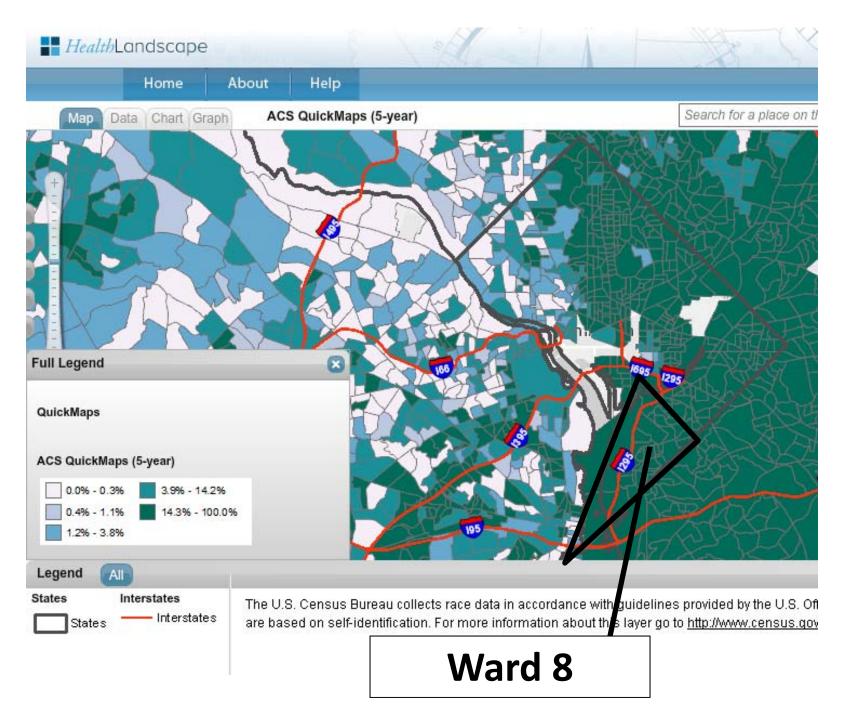
<sup>&</sup>lt;sup>d</sup> Social Compact, Washington, D.C. Grocery Gap Analysis, 2008.

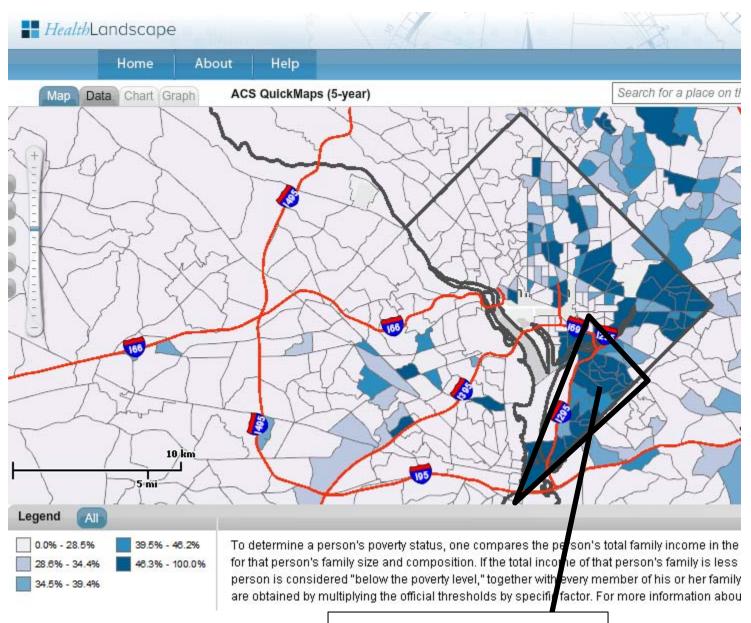
e D.C. Hunger Solutions, Healthy Food, Healthy Communities, 2006.

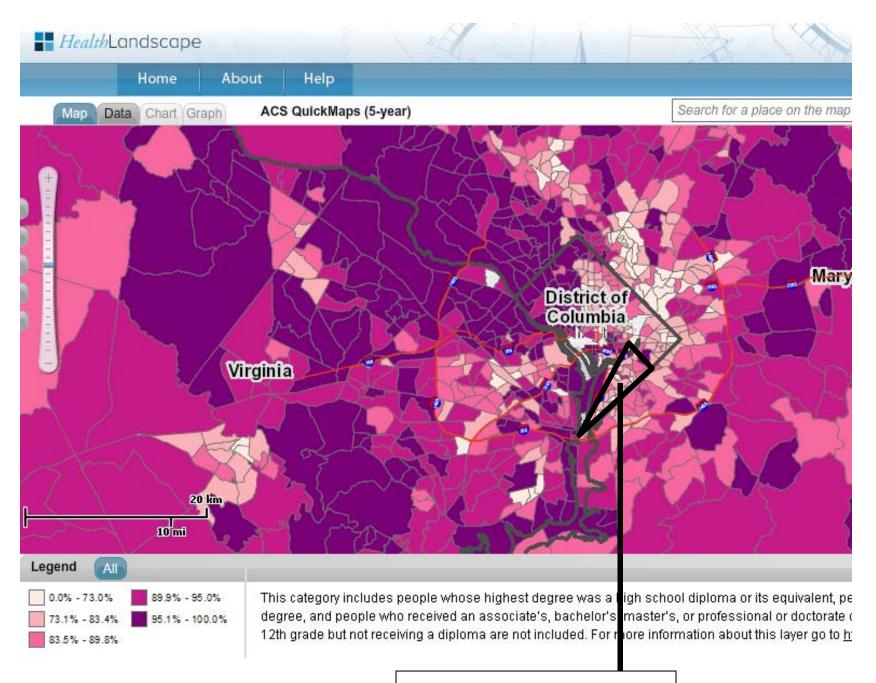
<sup>&</sup>lt;sup>f</sup> D.C. Office of the Chief Technology Officer, 2007.















#### Enter Address, City, County, State, or Zip

#### ADD DATA LAYER



Real Estate Analysis

Neighborhood Conditions Activity Education

Money & Income

**Demographics** 

0wners & Renters

Jobs & Economy

Federal Guideline

#### 

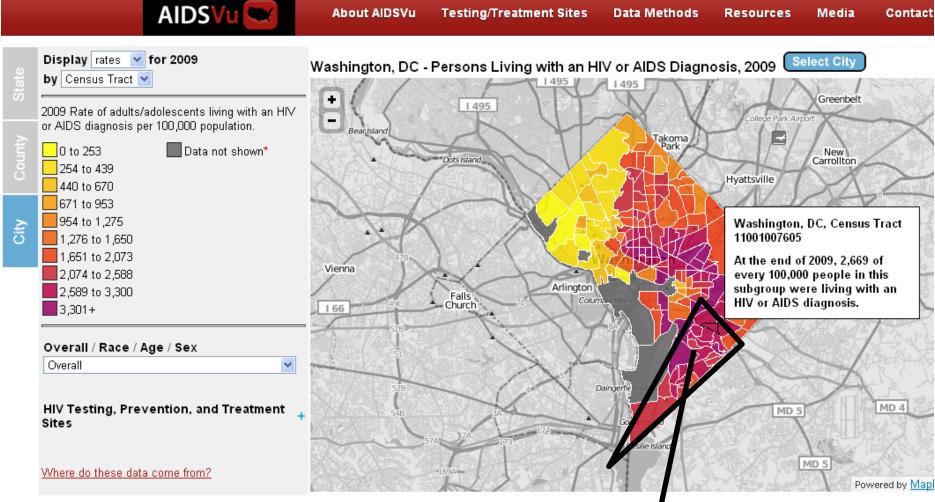
Hide Legend Legend Change View Change Year: 01 02 03 04 05 06 07 08 09 10 11 Change Variable Type Edit Ranges Insufficient Data LSA NOTLSA Shade by: Block Group 🔻 Change legend colors Source: TRF Clear Data Layer



Subscriber-shared Sites

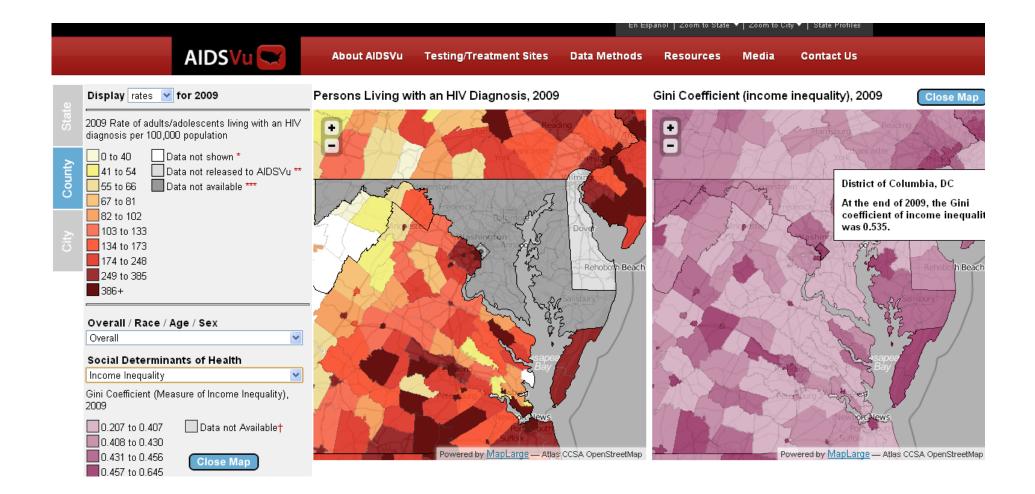
**Federal Housing** 

United States > District of Columbia > Washington > 20019 Wesley Heights Woodley Park Landover Park 295 Glover Park Burleith Huntsville Trinidad 29 Fairmount Heights Cherrydale Arlington **Washington** Fort Myer Ballston Walker Bon Air Buckingham Arlington Forest Westmont encarlyn Oakland Forest Parkgler No nset Manor Claremont Fore den Terrace North Fairlington Beverley Hills Silver Hill Park Gordons Corner Monticello Park Morn Deer Park Heights Del Ray Brookville Chapel Hill Manor Oaks Camp. ©2009 NAVTEQ™ prest Heights My Custom Regions 🔻 Email This Page | Build Custom Region | Aerial | Save



\* Data are not shown to protect privacy because of a small number of cases and by a small population size. See <u>Data Methods.</u>

NOTE: Data represent persons living with an HIV or AIDS diagnosis in Washington, DC at the end of 2009 and who were reported as of 12-31-11.



#### Qualitative

- Key informant interviews
  - Social worker who works in Ward 8
  - Employee, nearby homeless shelter
  - Staffer, city council person
  - Director, local Boys and Girls Club chapter
  - Outreach specialist, local clergy partnership
  - Owner, local day care center
  - School nurse, nearby elementary school
- Focus groups
  - Patients
  - Clinic staff

Mullan F, Focht C, Hayashi S, Gofin J, Gofin R, Neumark Y, Epstein L. Community oriented primary care: An implementation guide.

#### Sample questions:

- What are the strengths of the community?
- What areas could be improved in the community?
- What are the barriers to improvement?
- What are the most pressing health concerns in the community?
- What are the causes of these health problems?
- What are the specific barriers to addressing these health problems?
- Who do the people call in the community when they need help or advice?
- Do you feel safe in the community? Why or why not?

- Brainstorming
- Nominal group technique
- Delphi
- Ringi

- Problems identified by the qualitative process:
  - School dropouts
  - HIV/AIDS
  - Lack of access to nutritional foods
  - Lack of access to safe areas to exercise
  - Teenage pregnancies
  - Dental caries
  - Asthma
  - Depression
  - Drug use
  - Crime
  - Job training
  - Affordable housing
  - Increasing rates of diabetes





#### Potential health issues to address



Medical conditions:

Diabetic nephropathy

Coronary artery

Coronary artery disease

Poverty Education Income

**Social determinants:** 

### **Determinants of Health**

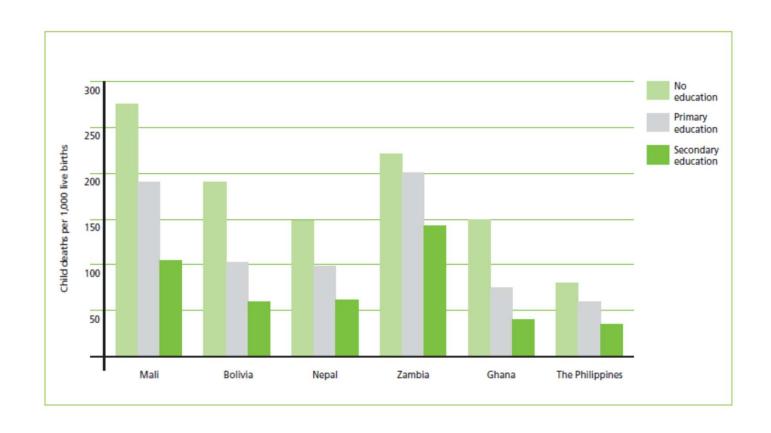
- 1) Genes and biology
- 2) Medical care
- 3) Health behaviors
- 4) Social characteristics



# **DETERMINANTS OF POPULATION HEALTH** genes & biology social/societal characteristics health behaviors total ecology medical care

http://www.cdc.gov/socialdeterminants/FAQ.html

### Child Mortality, By Maternal Education



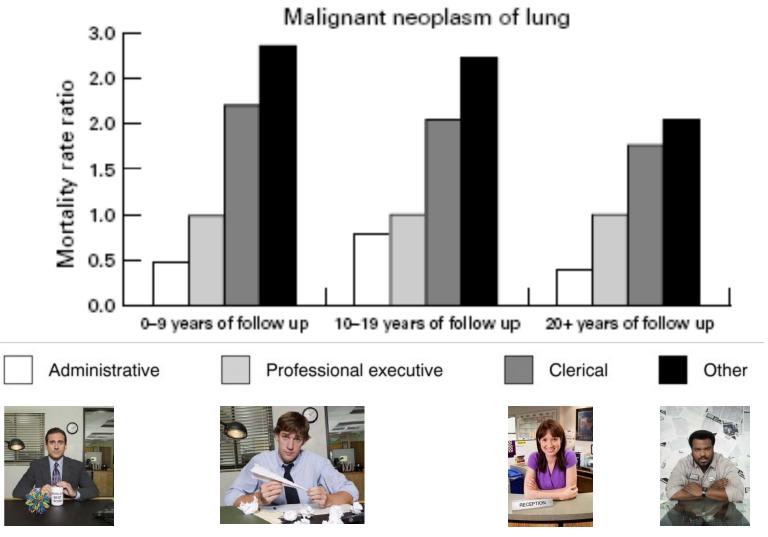
Watkins K. The Oxfam education report. Bath, England: Redwood Books, 2000.

### Social Determinants of Health - Work



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### Social Determinants of Health - Work



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#### Strategic Plan



#### Vision, Mission, Goals, Sub-goals and Guiding Principles

#### Vision

Healthy Communities, Healthy People

#### Mission

To improve health and achieve health equity through access to quality services, a skilled health workforce and innovative programs.

#### Goal IV: Improve health equity

#### Sub-goals

- a. Reduce disparities in quality of care across populations and communities.
- h. Monitor, identify and advance evidence-hased and promising practices to achieve health equity.
- Leverage our programs and policies to further integrate services and address the social determinants of health.
- d. Farther with diverse communities to create, develop, and disseminate innovative community-based health equity solutions, with a particular focus on populations with the greatest health disparities.

## Prioritization

	Problem	Magnitude	Severity	Feasibility	Total
1	Increasing rates of HIV/AIDS among women				
2	Few safe areas for children to exercise				
3	Dental caries / oral health				
4	Job training				
5	Lack of access to nutritional foods				
6	School dropouts				

# Prioritization

	Problem	Magnitude	Severity	Feasibility	Total
1	Increasing rates of HIV/AIDS among women	3.2	4.8	3.7	11.7
2	Few safe areas for children to exercise	4.8	4.7	4.2	13.7
3	Dental caries / oral health	4.3	3.5	3.2	11
4	Job training	4.1	4.1	2.1	10.3
5	Lack of access to nutritional foods	4.6	4.5	4.1	13.2
6	School dropouts	3.9	4.8	4.1	12.8

### Take Home Messages

- Both quantitative and qualitative data are important to characterize your community
- Online mapping tools can help you visualize and communicate health problems more effectively
- Social determinants have a significant impact on health
- Involving the community in generating, validating, and prioritizing health problems is critical

Thank you for completing the module.

Please complete this evaluation survey to help us make it better!

https://www.surveymonkey.com/s/5BP3MT6

To obtain, CME credit, you must complete these two additional surveys (complete CME instructions are on the next slide):

1) Continuing Medical Education Form:

https://www.surveymonkey.com/s/53NGY5S

2) Module 3 Quiz:

https://www.surveymonkey.com/s/5GRD3TD

### To Obtain CME Credit

- In order to obtain CME credit, you must complete the following tasks:
  - Complete the module(s) or case study.
  - Complete the post-activity quiz (There are quizzes for each module and case study).
    - The last question of the quiz provides a prompt to indicate your email address. If you want to receive CME credit, you must provide your email address so that we can document the score of your quiz appropriately.
  - Score at least 75% on the quiz (For quizzes with 4 questions, you must answer at least 3 questions correctly. For quizzes with 5 questions, you must answer at least 4 correctly).
  - Complete the CME certification form.
    - In order to match the CME certification form with your quiz, you must provide the same email address that you provided during the post-activity quiz.