Embedding Equitable Data Practices in Local Public Health Data Systems

Public Health Alliance Regional Equity Learning Collaborative
Thursday, October 6, 2022
Virtual Training Logistics

Try to Minimize Distractions
• Please mute your mic and try to reduce background noise
• Remember to mute yourself when you are not speaking

Engage and Participate
• The space is what we make it! We encourage keeping your camera on
• Ask questions and share comments/feedback in the chat
• Utilize the Raise Hand feature if you would like to be unmuted during the discussion portion of the agenda
• Utilize the feedback reactions
• Slido – engage on your phone or computer

Additional Questions
• Contact Ana at abonilla@phi.org or Delia at dmelendrez@phi.org

Image Source: LinkedIn
Beyond Native Land Acknowledgements: Becoming Better Settlers

“It is important to understand the longstanding history that has brought you to reside on the land, and to seek to understand your place within that history. Land acknowledgements do not exist in a past tense, or historical context: colonialism is a current ongoing process, and we need to build our mindfulness of our present participation.”

-Northwestern University
Native American and Indigenous Initiatives
Session 4: Refresher
Advancing Equity in Workforce Development

What did we learn?

• Shared language and concepts

• Identified workforce development strategies that offer shared, direct benefits to communities

• Explored practice and policy changes that ensure equitable and inclusive recruitment, hiring, retention, and promotion practices
Session 5: What to Expect? Embedding Equitable Data Practices

What can you expect from today’s session?

• Shared language and concepts
• Explore data practices as a strategy to advance equity
• Identify equitable data practices that can be implemented within your jurisdiction
Why Focus on Embedding Equity in Public Health Data Systems?

• Data are a powerful lever for change → policy & systems change
• Cross-sectoral opportunities for change
• Help shape population health narratives
• Identify and understand inequities and structural factors

Image Source: Health Leads
Group Poll: How are you currently using data in your work?

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THE 10 ESSENTIAL PUBLIC HEALTH SERVICES

To protect and promote the health of all people in all communities

The 10 Essential Public Health Services provide a framework for public health to protect and promote the health of all people in all communities. To achieve optimal health for all, the Essential Public Health Services actively promote policies, systems, and services that enable good health and seek to remove obstacles and systemic and structural barriers, such as poverty, racism, gender discrimination, and other forms of oppression, that have resulted in health inequities. Everyone should have a fair and just opportunity to achieve good health and well-being.
Public Health Data Gaps that Hinder Health Equity

- Data not shared with community
- Sexual Orientation and Gender Identity data
- Lack of disaggregated race/ethnicity data
- Lack of data at the community/neighborhood level
- Inability to conduct a systematized assessment of SDOH with population health outcomes
What Does it Mean to Embed Equitable Data Practices in Our Data Systems?

Image Source: Data Driven Detroit
Group Poll: What does an equitable data system mean to you?

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A Modern Transformed Public Health Data System

- Accountable and reflects perspectives of local communities
- Sustainable and fully integrated
- Disaggregated, comprehensive and timely data
- Solution focused analysis
- Address racism and racial/ethnic
- Facilitate restorative systems

- RWJF, Charting a Course for an Equity-Centered Data System: Recommendations from the National Commission to Transform Public Health Data Systems

Image Source RWJF, Charting a Course for an Equity-Centered Data System
Framework for Equitable Data Practices

- Predatory Engagement
- Passive Engagement
- Savior-Designed Engagement
- Ally-Designed Engagement
- Equity-Empowered Engagement
- Liberatory Model
Group Poll: Where do you think your current data system falls on this spectrum?

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Where Are We Now?

Image Source: data.org, Rising Equitable Community Data Ecosystems (RECoDE)
Recommendations

DATA COLLECTION

DATA ANALYSIS & INTERPRETATION

REPORTING OF DATA & FINDINGS

DATA INTO ACTION
Recommendations: Data Collection

Expand and improve collection of demographic data
- Race/ethnicity
- Age
- Sexual Orientation and Gender Identity
- SDOH Factors – Occupation, income, housing, transportation, etc.
- Community of Residence

Build trust and share power to ensure local community voice is represented
- “Nothing about us, without us”

Elevating Community Voice through Qualitative & Quantitative Data
Recommendations: Data Analysis & Interpretation

**Ground-truthing**

- Make sure that the community has a voice and say what the numbers say. Can unveil what is being masked by the data or different interpretations of root causes.

**Disaggregation of data**

- Race/ethnicity
- Age
- Gender
- Etc.

**Acknowledging and addressing biases**
Recommendations: Reporting of Data Findings

Support comprehensive and transparent public reporting of disaggregated data

• Local health jurisdictions should prioritize the public release of data that is:
  • At actionable, community-level geographies
  • **Disaggregated** by race/ethnicity when possible
  • Accessible to a wide audience
  • Updated **frequently** and **transparently**
Recommendations: Data Into Action

- Community Data Stewards
- Policy Action Guides
- Health Equity Metrics
The Enhanced HPI 3.0
Advancing Health Equity Through High-Quality Data
WHY THE HEALTHY PLACES INDEX?

- Life expectancy and well-being are heavily tied to the community conditions in which we live
- Social conditions vary drastically by neighborhood
- To create lasting systems change, both race and place must be recognized and understood
WHY THE HEALTHY PLACES INDEX? (cont.)

- For these reasons, the HPI was launched in 2018 and is now in its third evolution
- The tool works to advance health equity through open and accessible data to implement actionable solutions
WHAT IS THE HEALTHY PLACES INDEX?

- HPI provides data and policy recommendations to:
  - Compare the health and well-being of communities at the neighborhood level
  - Quantify the factors that shape health
  - Turn data into actionable solutions

- The HPI has become a **go-to data tool** for hundreds of state and local government agencies, foundations, advocacy groups, hospitals and other organizations
WHAT IS THE HEALTHY PLACES INDEX? (cont.)

- HPI 3.0 now evaluates the relationship between 23 social drivers of health and life expectancy at birth
- Produces a score representing a “ranking” of conditions compared to other neighborhoods
- Measures organized by eight policy action areas:
  - Economic
  - Social
  - Education
  - Transportation
  - Neighborhood
  - Housing
  - Clean Environment
  - Healthcare Access
WHO CAN USE THE HEALTHY PLACES INDEX?

- **Anyone!** The HPI is a free and easy-to-use data and policy platform
- Additional players that can benefit from the HPI:
  - State and local leaders
  - Government agencies (*Transportation, Parks and Recreation, etc.*)
  - School districts
  - CBOs and more
COMMUNITY IMPACT

The HPI has been used to identify and respond to community needs in ways that keep growing and evolving, such as:

- COVID-19 Blueprint Health Equity Metric
- Affordable housing & rental assistance programs
- Food security & nutrition assistance
- Active transportation funding
- Climate-related investments
- And much, much more
COMMUNITY IMPACT (cont.)

Over a **billion dollars** has been directed toward community investments including **$272 million** of COVID-19 assistance to neighborhoods hit the hardest during the pandemic.
RACE & PLACE FRAMING

Applying a race and place framing to neighborhood-level data:

- Provides sound, quality data for residents, advocates and leaders
- Helps communities better advocate for their unique needs
- Guides leaders to develop more equitable, community-forward solutions
- Allows leaders and community providers to scale resources appropriately for each region
Identifying small, dispersed racial/ethnic populations

USE CASE:
Community-based organizations and advocacy groups serving specific populations

Use Filter by Race/Ethnicity and select the population or subpopulation
Set specific population count or percent of population threshold
Tracking improvements or declines in a community over time

USE CASE:
Measuring preschool enrollment to check progress towards city goals

Two different years of data — from HPI 2.0 and HPI 3.0 — can be compared side-by-side using the Compare Data function
Assessing how indicators vary by race/ethnicity

USE CASE: Cherished Futures, analyzing the community conditions that drive inequities in birth outcomes

Many data layers such as health outcomes, community conditions, and other key factors can now be mapped by race/ethnicity using the View Indicators function
Breakout Groups: Cross-sharing & Learning

- Explore local community conditions and health outcomes in the Watts Neighborhood using the Healthy Places Index (HPI)
- Discuss connections with health outcomes
- Think about solutions public health can implement in partnership with the communities they serve.
Break
Speaker

Reverend Debra Williams
CEO
Building Resilient Communities
Break
Group Check-In

Based on what we have discussed so far in today’s session, can you see some areas of improvement for your own work and/or department?

= I can see some areas for improvement and I’m ready to discuss!

= I’m sure there are plenty of areas, but I’d love some help from my team to explore further

= Things are going great-I see limited to no areas of improvement.
Change Team Breakouts (30 mins):

- What are some of the key takeaways from today’s session?
- What do you see as the next steps for you and/or your organization?
- Who needs to be a part of the conversation in your organization to lead this change?
- What will you hold yourself (individually or as a group) accountable to doing?
Closing & Next Steps

• **Next Steps**
  - Identify 1-2 places to enhance departmental capacity
  - Session 5 Office Hours:
    Wednesday, November 2\textsuperscript{nd}: 1pm-3pm

• Regional Equity Learning Collaborative:
  Session 6
  - Early 2023