

HARD DECISIONS:

Public Health Practice Change During Financial Crises

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Background



- Public health leaders are making hard decisions regarding major service & system operations cuts
(Green, 2006; Brownson et al. 2009)
- They lack adequate evidence for decision-making
- Local health department (LHD) services vary & change erratically relative to funding shifts
(Lenaway et al. 2006)
- PH Practice-based Research Networks (PBRN) can indentify & implement effective strategies for EBDM (evidence-based decision-making).

PUBLIC HEALTH
Practice-Based Research Networks

Research Question

What factors influence the adoption, implementation, & maintenance of evidence-based public health practices?



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Methods



- 2-phase, mixed methods
- Quantitative
 - Descriptive analysis--secondary data showing variation in service cuts to WA's 35 LHDs
 - 2009, 2010 LHD Activities & Services Inventory
 - 2009, 2010 county-level LHD expenditures
- Qualitative
 - 10 Semi-structured interviews with directors
 - Selected through maximum variation sampling
 - Review of process & selection with Advisory Group

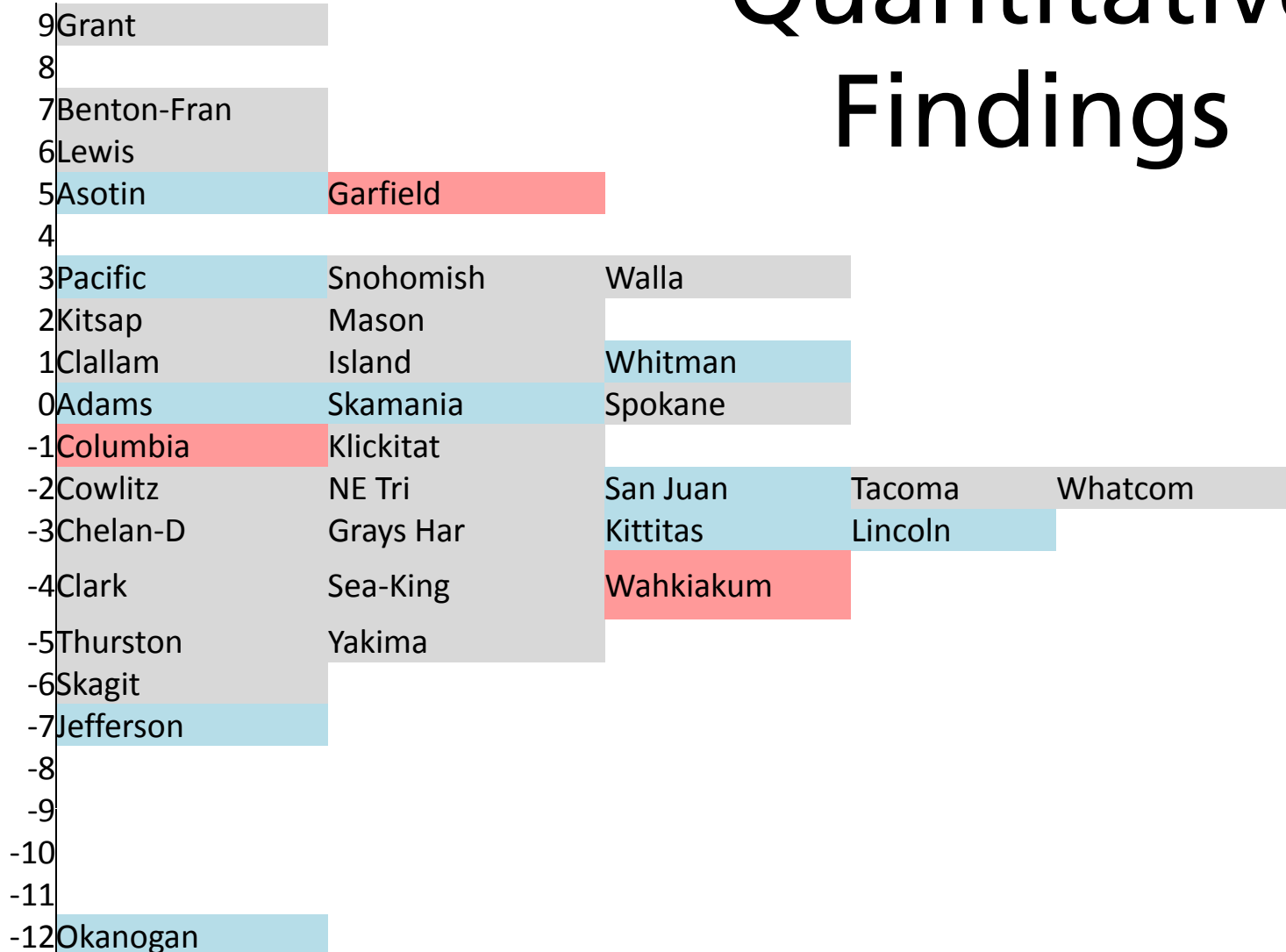
Analysis

- Used atlas.ti analytic software
- Established thematic codes
- Confirmed codes through inter-rater reliability
- Periodic review by full research team
- Periodic inter-rater reliability testing



Quantitative Findings

Composite Score



Interview Sample

Selected based on:

- Range-Service cuts/composite scores '08-'09
(e.g. Environmental Health, Emergency Prep.,
Communicable Disease Control)
 - biggest % increase/decrease in budget
 - biggest % FTE decrease
 - maintained most "EB programs"
 - largest LHDs east & west of Cascade Mtns
 - jurisdiction population size
- ...and validation with Advisory Committee

Preliminary Qualitative Findings

Major Themes

1. Evidence-based practice is not commonly referred to
2. Varied notions of “core” public health activities
3. Prioritization is not systematic



1. Evidence-based Practice

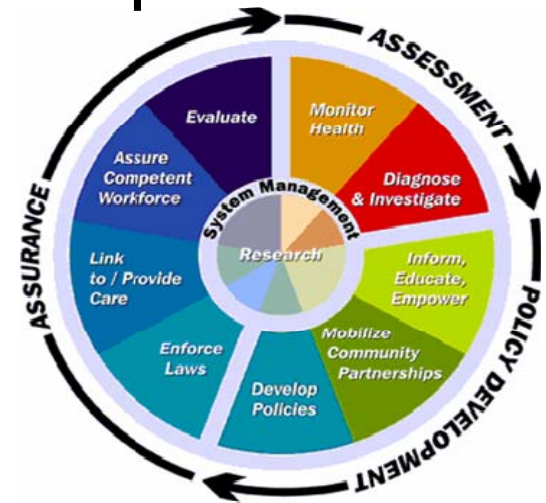


- No systematic use of programmatic evidence or data for decision-making
- Strong interest in evaluation, but few resources
- Data are hard to come by & use
- Expert opinion is highly regarded
- "Inaccessible" outcomes

“We get by. It’s not excellence. We don’t have an assessment team and that sort of thing. We have one person who knows how to access the data....but we seemed to have done fine. We’re very visible in the community. We are on different boards,...interact with our community. And sometimes that’s a little bit more difficult to demonstrate.”

2. "Core" PH Activities

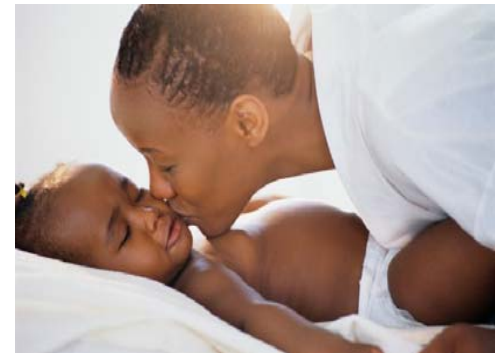
- Perceptions of fundamental PH services
 - Vary across LHDs
 - Differ between LHD leader perceptions & national discussions
- Types of fundamentals:
CD control, population-focused, MCH, "safety-net"
- Crosswalk w/ 10 Essential PH Services



“...we probably chose communicable disease because it is traditional--& same with immunization. Part of the old public health, I guess--disease investigation, surveillance, & reporting.”

3. Prioritization

- “Limited” prioritization needed
 - Mandates & categorical funding trump “real” decision-making
- Factors directing priorities
 - Population- versus individual-focused
 - Current human resources/workforce
 - Prevention-oriented
 - Community values, history
 - Board of Health input

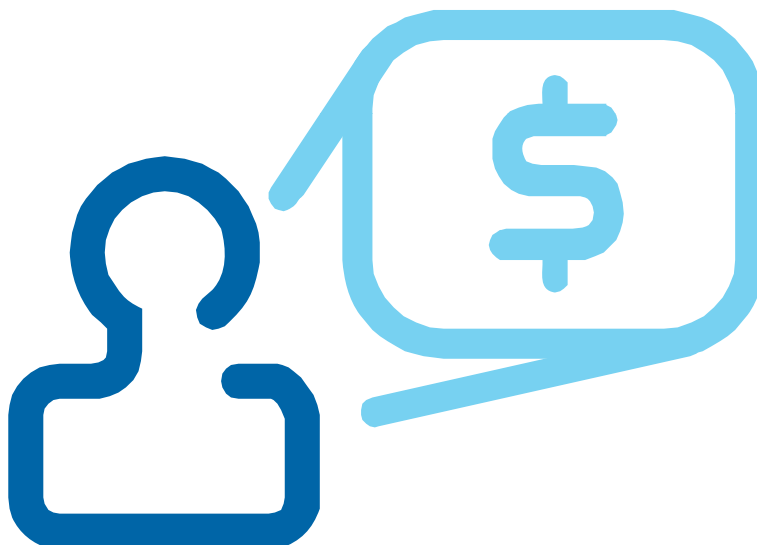


Discussion

- Gaps between practice & research
 - Differences in “relevant” data/evidence
 - Evidence-based practices not used in prioritizing
- Barriers to use of evidence
 - Language & knowledge issues
 - Realities of practice
- Inefficiencies in decision-making
 - Leaders desire knowing “best” strategies
 - Little sharing & uptake re strategies in use



Implications



- Mandated & funded PH services...should be evidence based
- (Applicable) EB practices...should be mandated & funded



Implications

Public Health
Prevent. Promote. Protect.

- Public health PBRNs
 - Research taking practice realities into account
 - A shared research trajectory for compiling, using, & translating evidence
- Professional development needs
- Make data more accessible, useful, & locally applicable
- Share common strategies & effective tools

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