Overview

- Two-year grant from the Connecticut Health Foundation.
- To improve the statewide infrastructure for documenting, reporting, and addressing health disparities in Connecticut.

Objective 1

Evaluate Data Collection

- Survey of DPH Databases
  - Evaluate the collection of racial, ethnic and other relevant sociodemographic information across all Department of Public Health databases, and make recommendations for the improvement of data collection
Database Survey
Participants

- 37 databases
- 70% mandated
- Focus areas
  - Cancer
  - Chronic diseases
  - Environmental health
  - Family health
  - HIV/AIDS
  - Injury prevention
  - Infectious diseases
  - Occupational health
  - Regulatory activities
  - Survey research
  - Tobacco Control
  - Vital statistics

The Flow of Data

COLLECT -> RECORD -> ANALYZE -> REPORT

- Data Collection Forms
- Electronic data
- SMP Database
- Quantitative & Qualitative Analysis
- Quality Assurance
- Federal Data System
- Publications
- Presentations

Federal Standards - OMB 15

- Published in Federal Register – 1997
- Effective date - 2000 decennial census
- Provides a common language for uniformity and comparability of racial/ethnic data
- Used in the 2000 Census, household surveys, administrative forms, and research

OMB Directive No. 15

Key points:

- Designed to reflect the increasing diversity of the U.S. population.

- Racial and ethnic categories represent a social-political construct, and are not scientifically based.

Key considerations:

- Categories set forth a minimum standard.
- Respondent self-identification is ideal.
- No criteria used to determine any person’s race or ethnicity.
OMB Directive No. 15 - Race

- Five Racial Groups
  - American Indian or Alaska Native
  - Asian
  - Black or African American
  - Native Hawaiian or Other Pacific Islander
  - White
- Includes a Multiple Race Option

OMB Directive No. 15 - Ethnicity

- Hispanic or Latino origin
- Not of Hispanic or Latino origin

Findings

Race

DPH Survey Item #11
Does your database include information on racial categories?

Yes 37 (100%)

Findings

1997 OMB Race Categories Collected

- AIAN
- Asian
- BAA
- NHOPI
- White

Findings

Multiple Racial Category Selection

DPH Survey Item #13
Do you allow an individual to report more than one race?

Yes 19 (51.4%)
No 18 (48.6%)
Findings
*Multiple Racial Category Selection*

DPH Survey Item #13a.
Are all the categories reported recorded in your database?

- Yes 11 (57.9%)
- No 8 (42.1%)

Findings
*Ethnicity*

DPH Survey Item #14
Is an Hispanic/Latino ethnicity category included as a separate field in this database?

- Yes 32 (86.5%)
- No 5 (13.5%)

Findings
*1997 OMB Ethnicity Categories*

- 8 (21.6%) met the standards
  - Use of “Hispanic” as a racial category
  - “Not Hispanic or Latino” infrequently used

Findings
*Report of Race/Ethnicity*

DPH Survey Item #19
Is your race/ethnicity data self-reported and/or observer reported?

<table>
<thead>
<tr>
<th>Type</th>
<th>Yes</th>
<th>No</th>
<th>Unk</th>
</tr>
</thead>
<tbody>
<tr>
<td>Self</td>
<td>78.4%</td>
<td>13.5%</td>
<td>8.1%</td>
</tr>
<tr>
<td>Observer</td>
<td>40.5%</td>
<td>40.5%</td>
<td>18.9%</td>
</tr>
<tr>
<td>Both</td>
<td>27.0%</td>
<td>-</td>
<td>-</td>
</tr>
</tbody>
</table>

Findings
*Comparison with 1997 OMB*

- Categories for race
- Records multiple races
- Categories for ethnicity
- Self report

16.2% of surveyed databases met or exceeded the current federal standards

Findings
*Additional Sociodemographic Variables*

- Age
- Gender
- Health insurance status
- Socioeconomic position (SEP)
- Acculturation and language
- Geography of residence
Findings
Selected Barriers to Change

- Incomplete knowledge of OMB standards
- Incomplete data reporting
  - “The biggest barrier is that the people who fill out the report forms do not fill out the sections on race and ethnicity.”

Findings
Selected Barriers to Change

- Reluctance to overburden data collectors
  - “The completeness of reporting may decrease if the data collection becomes more complicated.”
- Difficult to change data collection forms and standards used by reporters
  - Health data reporters have their own systems and forms specific to their business needs

Recommendations
Enhance Data Collection and Reporting

- Data standards
  - Minimum
  - Ideal
- Policy
- Geocoding

Recommendations
Increase Knowledge of Data Users and Reporters

- DPH staff
- Reporters of health information
Data Collection Policy

<table>
<thead>
<tr>
<th>Minimum Standard</th>
<th>Ideal Standard</th>
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</thead>
<tbody>
<tr>
<td>Age</td>
<td>Age</td>
</tr>
<tr>
<td>Gender</td>
<td>Gender</td>
</tr>
<tr>
<td>Ethnicity</td>
<td>Ethnicity &amp; expanded ethnicity</td>
</tr>
<tr>
<td>Race</td>
<td>Race</td>
</tr>
<tr>
<td>Geography of residence</td>
<td>Geography of residence</td>
</tr>
<tr>
<td>Language</td>
<td>Language</td>
</tr>
<tr>
<td>Acculturation</td>
<td>Acculturation</td>
</tr>
<tr>
<td>Socioeconomic position</td>
<td>Socioeconomic position</td>
</tr>
<tr>
<td>Other sociodemographic data of interest</td>
<td>Other sociodemographic data of interest</td>
</tr>
</tbody>
</table>

Objective 2
Coordinate Planning

- Coordinate agency planning objectives related to the elimination of health disparities among racial/ethnic subpopulations
  - Consistent with Healthy People 2010 Objectives

Objective 3
State Health Disparities Report

- Publish a comprehensive Connecticut health disparities surveillance report

Objective 2

- Ideal standard
  - Self report
  - All elements of minimum standard
    - Suggestion: Expanded Spanish origin
    - Suggestion: “Asian” subcategories
  - Ancestry
  - Geography of residence
  - Language
  - Acculturation
  - Socioeconomic position
  - Other sociodemographic variables

Healthy People 2010 Inventory (2007)

- 15 DPH Branches and Offices
- One-third of HP 2010 Objectives are tracked by DPH programs.

Recommendation: Focus on local-level data

- Town- and health district-level mortality tables available
- Fall, 2008
Objective 3
State Health Disparities Report

- Leading health indicators
  - Access
  - Acute and chronic conditions
  - Risk factors
  - Incidence
  - Prevalence
  - Morbidity
  - Mortality
- Social and economic indicators
- December 2008
- Issue Briefs

Defining Health Disparities

- ...Refer to differences ...that exist among specific population groups in CT.
- ...may be based on race, ethnicity, age, gender, socioeconomic position, immigrant status, sexual minority status, language, disability, homelessness, and geographic area of residence.

Objective 4
Statewide Network

- Provide leadership in the development of a statewide network of researchers and policy analysts focused on the measurement of health disparities in Connecticut.

Objectives
State Health Disparities Report

- Issue Briefs
  - Defining Health Disparities (2007)
  - Race and Ethnicity Matters (2007)

Defining Health Disparities

- ...health disparities refer to those avoidable differences in health that result from cumulative social disadvantages.

Objectives
Network

- Academic Advisory Group
  - University of Connecticut
    - Marysol Asencio, DrPH
    - Rafael Perez-Escamilla, PhD
    - Bandana Purkayastha, PhD
    - Eileen Storey, MD, MPH
    - Ronald L. Taylor, PhD
    - Alexander Vias, PhD
    - Lisa Werkmeister Rosas, PhD, LICSW
  - Southern Connecticut State University
    - Jean Bremo Bontempi, PhD
    - Shirley A. Jackson, PhD
  - Yale University
    - Beth Jones, PhD
Objectives
Network

- Collaborations
  - Center for Eliminating Health Disparities Among Latinos (CEHDL)
  - Quinnipiac University Physician’s Assistant Program
  - SCSU Department of Public Health
  - UConn Geography Department
  - UConn Graduate Program in Public Health
  - UConn Office of Multicultural and International Affairs
  - UConn School of Social Work

- Conversations with local health
- Inter-agency dialogues (e.g., DMHAS, SDE, CHA)
- Intra-agency dialogues
  - Office of Multicultural Health
  - Public Health Initiatives Branch
  - AIDS/Chronic Diseases
  - Disparities Action Working Group
  - Health Education, Management and Surveillance
  - Virtual Affinity Group (HD VAG)
  - Monthly e-newsletter (about 70 subscribers)

1st State Agency Meeting

Panelists

Upcoming State Agency Meetings

- September 19, 2008 – Monitoring Health Disparities: Creating Data Policies that Work
- November 2008 – Findings from the UConn – DPH Geocoding Collaborative

UConn-DPH Geocoding Collaborative
CT Health Disparities Webpage

- [www.ct.gov/dph](http://www.ct.gov/dph)

- “Statistics and Research”

- “Health Disparities”