

Secretary's Advisory Committee on National Health Promotion and Disease Prevention Objectives for 2030

July 10, 2018
1:00 pm to 4:00 pm ET



Welcome

Don Wright, MD, MPH
Deputy Assistant Secretary for Health
(Disease Prevention and Health Promotion)
Director, Office of Disease Prevention and Health Promotion
U.S. Department of Health and Human Services



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Goals for the Meeting

Nico Pronk, PhD, MA, FACSM, FAWHP
Committee Co-Chair



Recommendation from the Data Subcommittee regarding Methodologies for Setting HP2030 Objective Targets

Edward J. Sondik, PhD
Data Subcommittee Chair



- **Membership:**
 - Chair: Edward Sondik, PhD
 - Jonathan Fielding, MD, MPH, MBA, MA
 - Dushanka V. Kleinman, DDS, MScD
 - Nico Pronk, PhD, MA, FACSM, FAWHP
 - Therese Richmond, PhD, CRNP, FAAN
 - Nirav Shah, MD, MPH
 - Namvar Zohoori, MD, MPH, PhD
- **Meetings addressing Target Setting:**
 - December 20, 2017
 - January 19, 2018
 - March 16, 2018
 - April 2, 2018
 - June 11, 2018
 - June 22, 2018

Develop recommendations regarding:

- **Data Considerations** (data needs, data source standards, and progress reporting)
- **Data Innovation** (changes in data sources, analysis and reporting; community data; summary measures; and the future of health data)



Target Setting for Healthy People 2030 Recommendations



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- At the Committee's May meeting the Data Subcommittee presented a summary of its consideration of Target setting Methods:
 - Background on Target Setting Methods
 - Recommendations on:
 - Methods and their priorities
 - Principles to observe in the Methods' application

Revisions to Recommendations

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- Based on the Committee's feedback, the Data subcommittee has made the following revisions:
 - I. Revised the methods' priorities;
 - II. Addressed disparities and health equity in setting targets; and
 - III. Added guidance regarding clinical targets and using expert opinion.



I. Revised the methods' priorities:

1. Modeling and/or Projection/Trend Analysis
2. Adapting recommendations from national programs, regulations, policies, and laws
3. Specific percentage point improvement
- 4. Better than the best**
5. Minimal statistical significance
6. Retention of the previous Healthy People target
7. Total coverage/elimination
8. Maintain the baseline value as the target
- 9. 10 percent improvement**



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II. Addressed disparities and health equity in setting targets recommending:

- A statement on **the extent and distribution of disparities** among categories of the population template should be appended to each objective's target. A single target may mask important health and well-being disparities.

- In consideration of achieving health equity it is also recommended that each objective be examined to see if in addition to a single overall target **multiple targets** addressing subgroups are also needed.



III. Revised principles in Recommendation 1:

- Made minor revisions to the statements of the principles.
- Added the following principle: **Targets should represent meaningful change.**



- **Recommendation 1:** The following principles should underlie a science-based approach to setting achievable targets for Healthy People 2030:
 - Objectives should be science-based.
 - Supporting material for each objective must include the methods used to identify and justify the target and suggest at least one scenario that will likely achieve the target.
 - Targets should represent meaningful change.
 - Reducing disparities and improving health equity are critical goals.

Recommendation 2: Guidance for the target setting methods

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- **Recommendation 2:** Assure that the objective's target is achievable by review of research, trend analysis, subgroup analysis and identify principal methods to achieve improvement.



Recommendation 3: Addressing disparities and health equity

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- **Recommendation 3:**

- A statement on **the extent and distribution** of disparities among categories of the population template should be appended to each objective's target.
- A single target may mask important health and well-being disparities. In consideration of achieving health equity it is recommended that each objective be examined to see if in addition to a single overall target **multiple targets** addressing subgroups are also needed.



Recommendation 4: Use of expert Opinion

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- **Recommendation 4:** Expert opinion and input from stakeholders/implementers can inform final target selection but should not be the only method used.



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Recommendation 5: Target setting methods in order of their recommended priority for use:

1. Modeling and/or Projection/Trend Analysis
2. Adapting recommendations from national programs, regulations, policies, and laws
3. Specific percentage point improvement
4. Better than the best
5. Minimal statistical significance
6. Retention of the previous Healthy People target
7. Total coverage/elimination
8. Maintain the baseline value as the target
9. 10 percent improvement



Committee Discussion

Moderated by
Edward J. Sondik, PhD
Data Subcommittee Chair



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Vote & Next Steps

Dushanka V. Kleinman, DDS, MScD
Committee Co-Chair



Overview and Purpose of the Issue-Specific Briefs developed by Subcommittees

Nico Pronk, PhD, MA, FACSM, FAWHP
Committee Co-Chair



Health and Well-Being Subcommittee: Review and Discussion of the Brief

Nico Pronk, PhD, MA, FACSM, FAWHP
Chair, Health and Well-Being Subcommittee



- Membership:
 - Chair: Nico Pronk, PhD, MA, FACSM, FAWHP
 - Tom Kottke, MD, MSPH
 - Bobby Milstein, PhD, MPH
 - Rebecca Rossom, MD, MSCR
 - Matt Stiefel, MPA, MS
- Meetings:
 - August 23, 2017
 - September 20, 2017



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- Within the Healthy People 2030 framework, health and well-being can be defined as **how people think, feel, and function – at a personal and a social level – and how they evaluate their lives as a whole.**



Committee Discussion

Moderated by
Nico Pronk, PhD, MA, FACSM, FAWHP
Chair, Health and Well-Being Subcommittee



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Vote & Next Steps

Dushanka V. Kleinman, DDS, MScD
Committee Co-Chair



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- Does the brief inform the Committee's work, support the recommendations that the Committee has provided to the HHS Secretary, *and* enjoy the support of the Committee?



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Health Literacy Subcommittee: Review and Discussion of the Brief

Dushanka V. Kleinman, DDS, MScD
Chair, Health Literacy Subcommittee



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- Membership:
 - Chair: Dushanka V. Kleinman, DDS, MScD
 - Cynthia E. Baur, PhD
 - Rima Rudd, ScD
 - Donald Rubin, PhD, MA
- Meetings:
 - September 12, 2017
 - October 24, 2017
 - January 9, 2018



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- Health literacy includes additional skills such as knowledge of health conditions and factors that promote **health and well-being**, the ability to **navigate** the health care and social service systems, and the ability to **communicate effectively** about health events and issues.
- Health literacy also depends upon the skills, preferences and expectations of those who provide health information and care.

“Health literacy occurs when a society provides accurate health information and services that people can easily find, understand, and use to inform their decisions and actions.”

- The emerging perspective in the health literacy field is that existing **systems** must change to positively contribute to and sustain health literacy in the population.
- The emphasis is on the alignment between information and services provided by society and the capacity of people.



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Committee Discussion

Moderated by
Dushanka V. Kleinman, DDS, MScD
Chair, Health Literacy Subcommittee



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Nico Pronk, PhD, MA, FACSM, FAWHP
Committee Co-Chair



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Law and Health Policy Subcommittee: Review and Discussion of the Brief

Joel Teitelbaum, JD, LLM
Chair, Law Subcommittee



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- Membership:
 - Chair: Joel Teitelbaum, JD, LLM
 - Therese Richmond, PhD, CRNP, FAAN
- Meetings:
 - October 12, 2017
 - October 31, 2017
 - December 5, 2017
 - January 3, 2018
 - January 29, 2018

A **law** is an established procedure, standard, or system of rules that must be followed by members of society

A **policy** is a decision or set of decisions oriented towards addressing a long-term purpose or problem.

- As powerful determinants of health and well-being, **law and policy** provide important tools to improve health and well-being, achieve health equity, reduce health disparities, and attain health literacy.



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Committee Discussion

Moderated by
Joel Teitelbaum, JD, LLM
Chair, Law Subcommittee



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Vote & Next Steps

Dushanka V. Kleinman, DDS, MScD
Committee Co-Chair



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Health Promotion Subcommittee: Review and Discussion of the Brief

Susan Goekler, PhD, MCHES
Chair, Health Promotion Subcommittee



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- Membership:
 - Chair: Susan Goekler, PhD, MCCHES
 - Elaine Auld, MPH, MCCHES
 - Dushanka V. Kleinman, DDS, MScD
- Meetings:
 - November 21, 2017
 - December 1, 2017
 - December 12, 2017
 - January 11, 2018
 - February 5, 2018
 - March 6, 2018
 - April 24, 2018



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Health promotion is “the process of enabling people to increase control over, and to improve, their health. It moves beyond a focus on individual behavior towards a wide range of social and environmental interventions.” (WHO)

- Health promotion interventions may target individuals or communities (e.g., worksites, schools, etc.).
- Healthy People 2030 will continue to expand the reach of health promotion; emphasis should now shift to the **social and environmental** opportunities for improving population health.



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- **Cross-cutting ideas** in the Health Promotion brief
 - *Should these be moved to the introduction to all briefs?*
 - **Urgent issues to be addressed include:**
 - **Workforce development** needs within public health
 - **Excessive health care costs** within the U.S., without a corresponding advantage in health outcomes
 - **The aging U.S. population**, and related needs in the health care workforce
 - **Advances in digital technology**

Committee Discussion

Moderated by
Susan Goekler, PhD, MCHES
Chair, Health Promotion Subcommittee



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Vote & Next Steps

Nico Pronk, PhD, MA, FACSM, FAWHP
Committee Co-Chair



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Meeting Summary: Recommendations, Action Items, and Next Steps

Dushanka V. Kleinman, DDS, MScD
Committee Co-Chair



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Meeting Adjourned



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