



Who Uses Healthy People and How is it Used?

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History of the *Healthy People* User Study

- Three iterations of the user study: 2005, 2008, and 2015
- Purpose is to understand uses and users of the *Healthy People* initiative
- Studies build on each other and provide an opportunity to assess use over time
- Changes in methods over time
 - Paper questionnaire (2005, 2008) vs. web based survey (2015)
 - Variations in sampling frames for state, local, and tribal respondents
- All three studies included semi-structured follow up interviews with subset of respondents

History of the *Healthy People* User Study

- Data Collection Sept 2004–Nov 2004
- Create a comprehensive picture of how the HealthierUS and *Healthy People* 2010 initiatives contribute to state, local or tribal disease prevention and health promotion planning.
- Document the utilization of HealthierUS and *Healthy People* 2010
- Understand how key user groups believe the programs could be improved

2005

2008

- Data Collection Oct 2008–Mar 2009
- Build on the 2005 User Study
- Identify patterns of awareness and use of *Healthy People* 2010 among state, local, and tribal health organizations/agencies
- Inform the development of *Healthy People* 2020

- Data collection Sept 2015 – Jan 2016
- Build on 2005 and 2008 studies
- Assess awareness and use among state, local, and tribal health organizations of the initiative over time
- Assess the awareness and use of resources for implementation
- Expand the sample types to include two new stakeholder groups
- Inform the development of *Healthy People* 2030

2015

2015 User Study Sample Types

- Seven sample types:

- *Healthy People* State Coordinators (ODPHP)
- Senior Deputy Directors (ASTHO)
- Local Health Departments (NACCHO Profile)
- Tribal entities (Bureau of Indian Affairs list of Tribal Leaders)
- Tribal Area Health Boards (National Indian Health Board)
- Consortium organizations (ODPHP)
- Webinar attendees (2014 LHI, SOH, and Progress Review results)

Response Rate

Sample Type	Completes	Sample Size	Overall Percentage
State Coordinators	46	58	79.3%
Senior Deputies	42	52	80.8%
Local Health Departments	253	375	67.5%
Tribes	34	100	34.0%
Tribal Area Health Boards	7	11	63.6%
Consortium Organizations	83	250	33.2%
Webinar Attendees	108	250	43.2%
TOTAL	573	1096	52.2%

Awareness and Use of *Healthy People*

Awareness of *Healthy People*

Sample Type	2005 Study	2008 Study	2015 Study
State Coordinators	100%	100%	100%
Senior Deputies*/Chronic Disease Directors^	<i>Not surveyed</i>	100%	93%
Local Health Departments	82%	92%	89%
Tribes*/Tribal Health Organizations^	58%	71%	56%
Tribal Area Health Boards*	<i>Not surveyed</i>	<i>Not surveyed</i>	86%
Multi-Tribal Area Health Boards^	<i>Not surveyed</i>	78%	<i>Not surveyed</i>
TOTAL	83%	91%	86%

*Sampled in 2015 Study

^Sampled in 2008 Study

Use of Healthy People

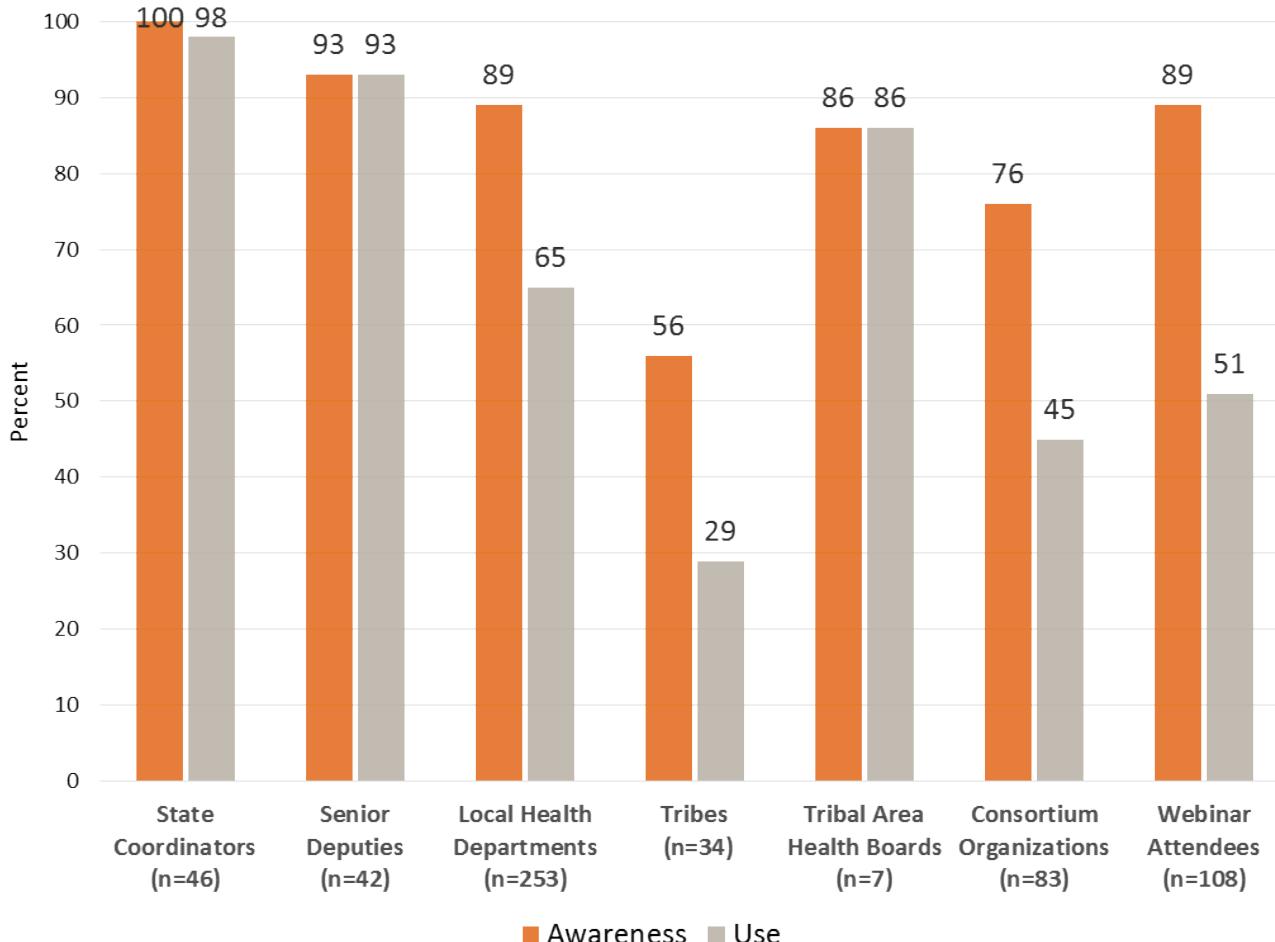
Use of Healthy People Among Those Aware of the Initiative

Sample Type	2005 Study	2008 Study	2015 Study
State Coordinators	100%	96%	98%
Senior Deputies*/Chronic Disease Directors^	<i>Not surveyed</i>	100%	100%
Local Health Departments	65%	74%	73%
Tribes*/Tribal Health Organizations^	48%	42%	53%
Tribal Area Health Boards*	<i>Not surveyed</i>	<i>Not surveyed</i>	100%
Multi-Tribal Area Health Boards^	<i>Not surveyed</i>	100%	<i>Not surveyed</i>
TOTAL	71%	77%	79%

*Sampled in 2015 Study

^Sampled in 2008 Study

Awareness and Use of *Healthy People 2020* by Sample Type



- Overall, 86% of respondents indicated they were aware of *Healthy People 2020*
- Among those who were aware, 72% use *Healthy People 2020**

*Note: This percentage is influenced by the low use among consortium organizations and webinar attendees.

How is *Healthy People 2020* used?

For research/assessment:	
As a data source	91%
To inform program planning to address health disparities	82%
For comparison with organization data (e.g. benchmarking)	80%
To develop community health improvement plans	79%
To conduct community health assessments	70%
For meeting national public health accreditation standards	51%
For collaboration/outreach or education:	
As a resource for building community partnerships for promoting health	73%
As a learning tool for staff or students	67%

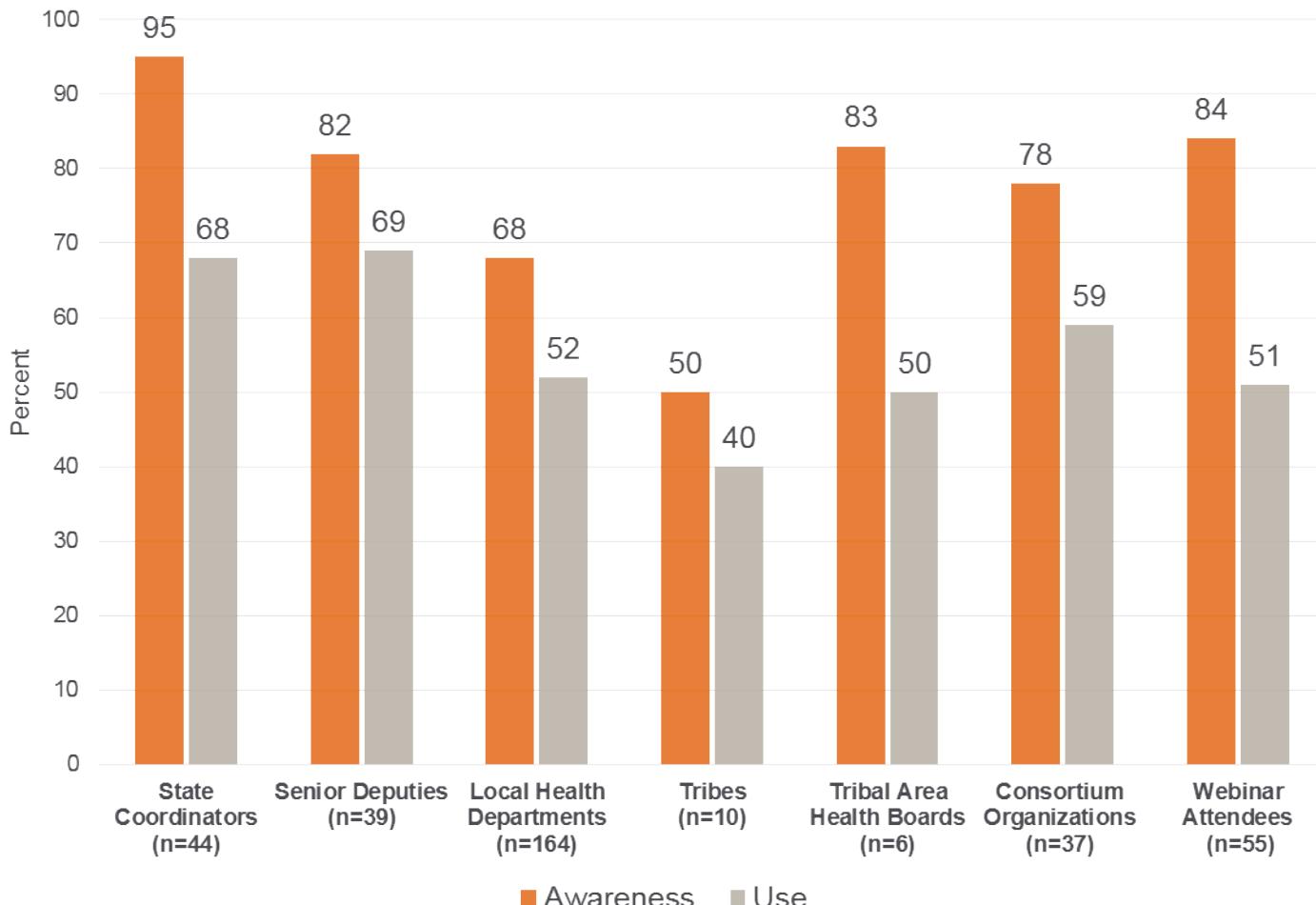
How is *Healthy People 2020* used?

For setting internal priorities:	
As a framework for planning, goal-setting or decision making	79%
To guide priorities for the organization/entity	73%
As a guide for allocating resources in the organization/entity	40%
Other uses:	
To support applications for grants or other funding	79%
To inform policy development	70%
To create or inform quality improvement activities	66%
Other, please specify	29%

How is *Healthy People 2020* used?

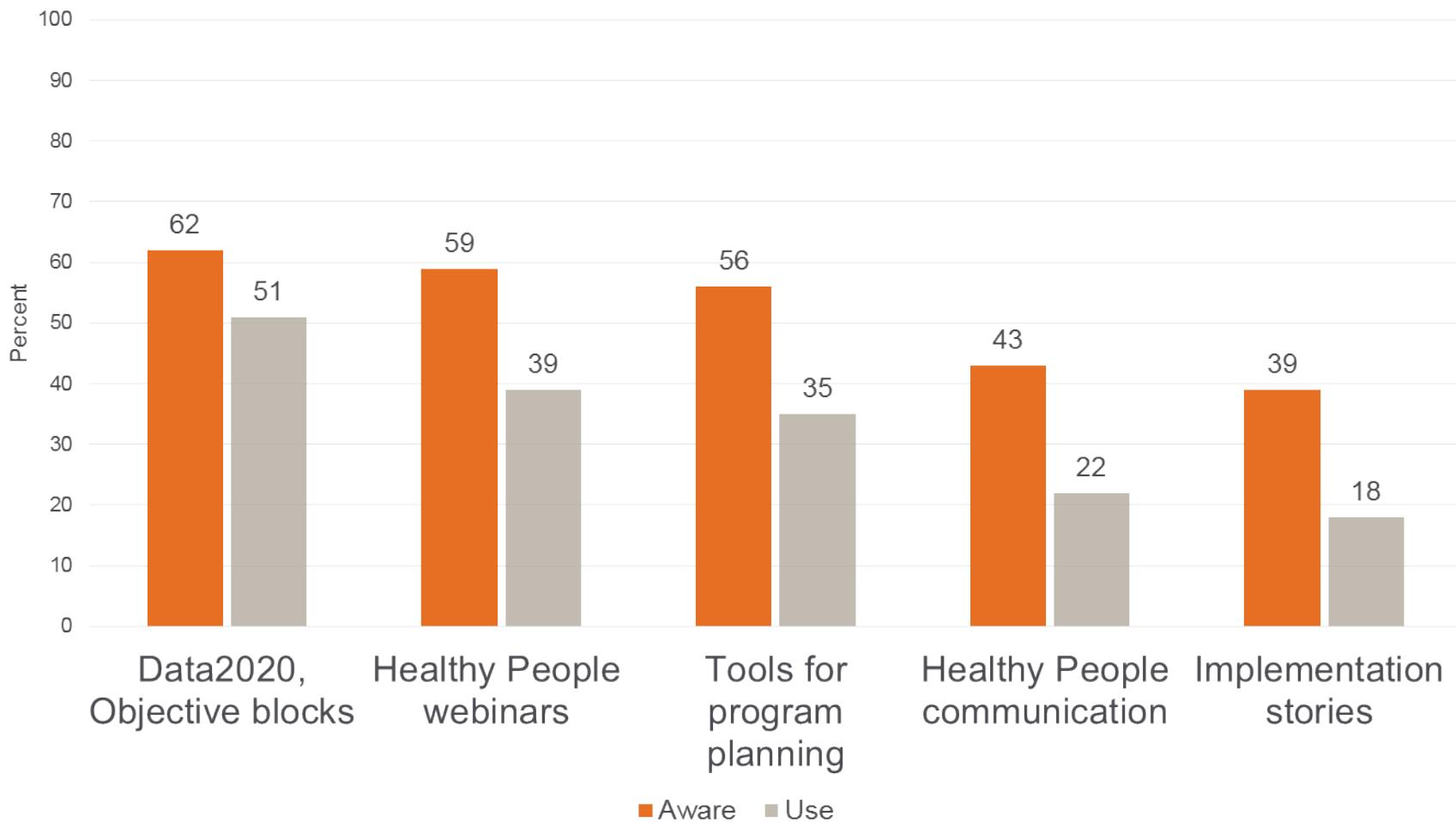
- “When we have population health indicators, the first place we go is *Healthy People 2020* to look at **benchmarks**. Essentially to inform **targets** at a population level for program work....I also use the information on the website in each of the topical areas to help steer language I am using when I talk about specific subjects.” – Local respondent
- “Our agency - pretty much everyone in our public health division uses it as a **data source**, uses it to help do any kind of **strategic planning**.” – State respondent

Leading Health Indicators



- Overall, 76% of respondents indicated they were aware of the LHIs.
- Among those who were aware, 74% indicated use.

Awareness and Overall Use of *Healthy People 2020* Tools and Activities



Barriers for Non-users of *Healthy People 2020*

Issues Related to the Organization	2005 Study	2008 Study	2015 Study
Insufficient resources (e.g., staffing, financial)	96%	86%	63%
Competing priorities	93%	67%	63%
Lack of buy-in from primary decision-makers	93%	40%	29%
Issues Related to the <i>Healthy People</i> Initiative	2005 Study	2008 Study	2015 Study
Lack of guidance on how to implement	76%	57%	49%
Too much material	63%	39%	27%
No available data to track objectives	<i>Not asked</i>	35%	36%
Too close to end of timeframe	<i>Not asked</i>	14%	<i>Not asked</i>
Too little material	12%	0%	5%
Don't agree with <i>Healthy People 2020</i> 's priorities	3%	3%	4%

Informing *Healthy People 2030*

Results from the 2015 User Study

Scope of *Healthy People 2030*

- Should the scope of issues covered in *Healthy People 2030* topic areas be:

- 48% remain the same
- 31% narrower than *Healthy People 2020*
- 14% don't know
- 7% broader than *Healthy People 2020*

“The current number of measures is overwhelming; we'd suggest narrowing them further down to those that are most important and strongly correlated with a long-term health outcome.”

Scope of *Healthy People 2030*

- “*If this is about being a repository of objectives that are important for improving health of our nation, then it should be **strategic and limited.***” – State respondent
- “**Broadness is what makes it excellent** because it shows they’re open to all things that have impact on health and well-being.” – Local Respondent

Reorganization of *Healthy People*

- Would a reorganization of health objectives be helpful for the next iteration of *Healthy People*?
 - 38% Yes
 - 26% Don't Know
 - 21% No Opinion
 - 15% No
- Which format for the global organization of *Healthy People 2030* objectives would be the most valuable?
 - 46% Risks/Determinants
 - 26% Disease Areas
 - 22% Life Stages
 - 9% Other

Topics to include in *Healthy People 2030*

Are there topic areas you believe will be important to include in *Healthy People 2030* that are not currently included in *Healthy People 2020*?

Yes	22%
No	77%
Don't Know	1%

- Selected responses for “Please Specify”:
 - Tobacco use expansion to “tobacco and nicotine use”
 - Human trafficking
 - Tribal health issues
 - Immigration health
 - Trauma
 - Food allergies and intolerance
 - Climate change
 - Gun violence
 - Chronic pain

Conclusions

- Awareness and use of the initiative remained constant since the 2008 User Study.
- The most common use of *Healthy People 2020* was as a data source.
- The Leading Health Indicators are a valuable element of *Healthy People 2020* that make navigating the content more manageable.
- Use of *Healthy People 2020* tools and activities is limited.
- Competing priorities and insufficient resources are the primary barriers and limitations for both users and non-users of *Healthy People 2020*.

Thank You!



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