

Committee: CSTE Executive Committee

Title: Conduct crosscutting research to build an evidence base for effective community health assessment practice

Statement of the Problem:

The Future of Public Health, the landmark 1988 Institute of Medicine (IOM) report identified assessment as one of three core public health functions that every public health agency should perform.¹ While this statement has been widely accepted in the public health community, there is little published literature on evaluations of community health assessments.² More so, cross-cutting research to build an evidence-base for the effective community health assessment practice, (or translational research as it was referred to in the Research Guide), was not included in the public comment draft of the Centers for Disease Control and Prevention (CDC) Research Guide that outlined the national research agenda for 2006 through 2015.

Statement of the desired action(s) to be taken:

The Centers for Disease Control and Prevention (CDC) can take two actions:

- (1) Incorporate evaluation of community health assessment (CHA) practice in the 2006-2015 Research Guide. In the CDC Research Guide¹, the study of community health assessment practice would fit within the scope of crosscutting research. One suggestion is to modify Chapter IXC4 subtitle to "Public Health Assessment, Planning, Evaluation and Translational Research (in italics are suggested changes), and discuss community health assessment practice in this section.
- (2) Establish a work group representing CHA practitioners from the national, state and local levels to identify an evaluation research framework. Among the questions this workgroup should study are: (a) What is the primary purpose of evaluating community health assessment practice; (b) What are factors that need to be in place to evaluate community health assessment practice consistent with standards used by the Task Force on Community Preventive Services³ in the health sector and the Campbell Collaboration⁴ in the educational, social and behavioral sectors? (c) What changes in policy will make it feasible to study CHA practice? (d) What are the priority areas (e.g. methods of data disseminations, community involvement frameworks) for studying community health assessment practice? (e) What methodologies can be used to study community health assessment practice? (f) What are the specific roles of assessment practitioners working at the federal, state and local levels in the understanding of community health assessment practice? (g) What are the technical, training and resource needs for evaluating community health assessment practice?

Public Health Impact:

Communities conduct health assessments to inform a community health improvement process.⁵ Hence, the performance of a community health assessment, and its effectiveness is measured by changes in public health planning and policy decisions, and their impact on health outcomes. Community Health Assessment (CHA) is a core public health function. A CHA is the first step in planning and policy development, or in assessing the impact of a changed policy. It occurs across all programs ranging from chronic disease, environmental health, social, educational, public health preparedness, and health care access.

A Governmental Accountability Office (GAO) Report⁶ of 29 comprehensive key indicator systems showed evidence of positive effects in four areas. The comprehensive key indicator systems enhanced collaboration to address public issues, provided tools to encourage progress, helped inform decision-making and improve research, and increased public knowledge about key economic, environmental, social and cultural issues. The GAO report acknowledges that the various community influences on decision-making, made it difficult to attribute all the positive change only to the indicator system. While the GAO report focused on larger systems, it provides lessons and directions for CHA research.

There are also a number of tools such as the National Public Health Performance Standards Survey⁷, and the Turning Point Performance Management Model⁸ that assist with measuring the performance of the public health system including assessment. A number of published studies point towards collaboration, leadership, how the CHA is developed and presented, and resources as influencing the quality and ability of communities to conduct CHAs.^{9,10,11}

How a CHA is conducted and implemented impacts policy and health status outcomes. While logic models support the use of CHA for data-based decision-making with community involvement, it would be very helpful to have concrete evidence of effectiveness. If crosscutting research into evaluation of community health is not conducted, communities will continue to use the different frameworks recommended, but not know of components with proven results or that are critical for public health action. If there are mistakes, or missed opportunities, communities may learn within program silos, rather than across fields. CHA research is basic public health science. As in any basic science, understanding how to achieve optimal effectiveness, and developing a feedback loop will have far-reaching implications on areas such as chronic disease, public health preparedness, health care access, and reducing disparities.

References:

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