



**RICHARD M. FAIRBANKS
SCHOOL OF PUBLIC HEALTH**

INDIANA UNIVERSITY
IUPUI

RWJF Product Cover Page

RWJF ID#: 71271

File Name: 71271GPmeeting_8.pdf

Presenters Name: Karen Frederickson Comer

Affiliation: IU Richard M Fairbanks School of Public Health, Regenstrief Institute,
Department of Veterans Affairs

Title: Informing Community Health Planning by Enabling Decision Makers to Identify
Health Disparities and Social Determinants with More Geographic Specificity

Organization and Meeting: American Public Health Association, 2015 Annual Meeting

Date and Location: November 3, 2015; Poster

Informing Community Health Planning by Enabling Decision Makers to Identify Health Disparities and Social Determinants with More Geographic Specificity

Karen Comer¹, Joe Gibson², Jian (Frank) Zou³, Marc Rosenman^{4,5}, and Brian Dixon^{5,6}

¹The Polis Center, Indiana University School of Liberal Arts; ²Marion County Public Health Department; ³Worcester Polytechnic Institute, Worcester, MA; ⁴Indiana University School of Medicine, Department of Pediatrics; ⁵Regenstrief Institute; ⁶Richard M. Fairbanks School of Public Health

Health departments are in need of more geographically-specific indicators for their community health improvement planning efforts. By supplying community health indicators at sub-county levels, we can improve the ability of public health professionals to identify and address local health disparities. Furthermore, by facilitating the integration of such health indicators with local indicators related to healthcare access and the socioeconomic environment, we can improve their ability to pursue multi-sector solutions to community health problems.

Through a Robert Wood Johnson Foundation grant, the Richard M. Fairbanks School of Public Health, the Polis Center, the Marion County Public Health Department, Indiana University, and the Regenstrief Institute are using electronic health records (EHRs) to develop community health measures at geographic levels smaller than county (e.g., block group, census tract, neighborhood, and school corporation). Multiple chronic disease indicators (e.g., prevalence of diabetes, prevalence of asthma, prevalence of depression) were identified by local health departments as high priority for prototype implementation. Prototype indicators have been developed and integrated with socioeconomic indicators (e.g., race/ethnicity, age, poverty, income, housing) within a web-based, exploratory spatial data analysis (ESDA) tool that allows geographic associations to be identified via interactive scatterplots and linked maps.

Health departments are assisting in the validation of the prototype health indicators and evaluation of the usefulness of the ESDA implementation for identifying health disparities and considering social determinants of health. Preliminary findings indicate that this approach is promising for the generation of more actionable information for community health planning.

Learning Objectives: By the end of the session, the participant will be able to:

- 1) Describe the benefits of using more geographically granular data for community health improvement planning.
- 2) Identify limitations in applying EHR data to measure community health.
- 3) List information requirements for identifying geographic sub-populations relevant to community health planning.