



Clare Neary:

(silence) Hello, and welcome to today's peer sharing event. Strengthening Data Collections Effort to Respond to Emerging Prevention Priorities. My name is Clare Neary, and I'm the project coordinator for the Northeast and Caribbean Prevention Technology Transfer Center. It's so lovely to have you joining us here today. I want to ask folks as they're coming in to, in the top left chat box, you'll see a link for our virtual attendance list. So as you're coming in, even if you have registered, would you please follow that link on the left hand side, and give us your contact information.

This is so we can keep track of who is in the room, but also to make sure that you receive your certificates of attendance in a timely and correct fashion. So just click that link, and enter your information, and then come on back to us. So again, welcome to everyone. As you're coming in, if you would click on the link in the main chat, the attendance list, and then when you've had an opportunity to do that, I want to draw your attention to our questions.

So we have a poll, an entry poll. Are there any new substance misuse problems or behavior, Covid19 related or otherwise, that are emerging in your community at this time? And if yes, how are you finding out about them? So again, welcome. It's wonderful to have you all joining us here today. This is the Northeast and Caribbean Prevention Technology Transfer Center's peer sharing event, Strengthening Data Collection Efforts to Respond to Emerging Prevention Priorities.

And as you're coming in, if you would take a look at our poll. Are there any new substance misuse problems or behaviors, Covid19 related or otherwise, that are emerging at this time in your community? And if so, how are you finding out about them? (silence) Hello. So hello again, and welcome to today's peer sharing session.

Our topic is Strengthening Data Collection Efforts to Respond to Emerging Prevention Priorities. My name is Clare Neary, and I'm the project coordinator for the Northeast and Caribbean Prevention Technology Transfer Center, and today's session is a follow up to Monday's webinar on this topic, however for any of you who might be with us now that were not able to join us on Monday, I can assure you that you are still prepared to full participate in today's session.

There will be no quizzes, and really we're going to be talking about things that we as preventionists work with almost every day. So we have a few folks answering the poll. Are there any new substance misuse problems or behaviors, Covid19 related or otherwise, that are emerging in your community? So we're seeing that some folks are saying that you're seeing from news and from webinars that opioids have become a problem, and these new policies of course that are emerging because of Covid19 that people are drinking in public, that people are getting it delivered to their home.

All right. Well, thank you for participating, and as you're coming in, please do remember to click on the attendance link in the chat box. (silence) So welcome again to Strengthening Data Collection Efforts to Respond to Emerging Prevention Priorities. It's such a pleasure to welcome you here today, and I want to thank you for joining us. I'm Clare Neary, I'll be one of your facilitators for today's call, and I'm joined by my colleagues Cory Morton, Carol Oliver, and Kristen Gilmore Powell, whom I'll introduce more in just a moment.

(silence) So some technical information for today's session. This webinar is being recorded, and we will be making the recording available to all webinar participants after today's session. We'll be sharing out our contact information also at the end of the presentation, so if you have any concerns or questions after the fact, please feel free to reach out to us, and also as it is a peer sharing event, we invite you and encourage your questions throughout today's conversation, and of course you can always feel free to put questions and comments in the chat.



So a little about our presenters today. Carol Oliver is the Director for Prevention Solutions at EDC, which is a training and resource hub that is strengthening the substance misuse prevention workforce in communities across the United States. Drawing on her experience leading large scale initiatives, she heads up a multi-disciplinary team, providing award winning online courses and customized consultation focused on topics such as reducing health disparities, strategic planning, program design, sustainability, and evaluation. And my colleague, Doctor Kristen Gilmore Powell is an assistant research professor with the Rutgers University School of Social Work and the associate director of the Center for Prevention Science.

She is also the director of the Northeast and Caribbean Prevention Technology Transfer Center. Doctor Powell earned her PhD from Rutgers, the State University of New Jersey's school of social work in 2013, and she has been conducting research and evaluation on topics relevant to prevention science, environmental strategy, empowerment theory, sustainability, and health disparities for more than 12 years.

Cory Morton is an assistant professor in the department of social work at the University of New Hampshire. His research investigates the community context of substance use, whether structural features of neighborhoods such as access to substance use services, lessen related harm.

Cory's role in the PTTC is to coordinate the special focus on geospatial application, providing webinars and technical assistance, and using mapping to determine community need, or to evidence [crosstalk 00:07:47]. And I am Clare Neary. I am with the Rutgers University School of Social Work, Center for Prevention Science, and I'm currently the project coordinator for the Northeast and Caribbean Prevention Technology Transfer Center. And so now, just a little road map of the session that we'll be doing today.

We will be doing a workshop, we will be looking at data-related challenges to identify emerging prevention priorities. We'll be exploring ways to use geographic information system, or GIS, to organize data and reveal local substance use hotspots, and we'll be asking our experts, Cory Morton and Doctor Kristen Powell to address common challenges to collecting data and using GIS. And now I'm going to hand it over to my colleague Carol, who is going to be taking it from here.

Carol Oliver:

Great. Thank you. So welcome everyone. As was stated, we're going to be talking about collecting data to identify emerging prevention priorities, and I'm sure that anyone who has been experiencing life in the last several months and several weeks can see all of the data that's been collected in on the Covid epidemic, pandemic, and how important data is in reference to that, and it's a good example of decision making. Decisions being made about what's staying open, what's not, when should things be opened, and the same is really true for substance misuse prevention.

Importance of data that I'm sure all of you can attest to from the work that you do, between what is the priority problems that we should select, what's driving those particular problems, what strategies should we engaged to prevent those particular problems, and the difference between what people's perception of a problem is versus what the actual problem is. And I know that in my experience, sometimes where a community might perceptionally think their problem is may be different than what the data is saying to them.

The other thing is really that prevention is about communities solving problems. And so the other thing that I think is great about data and data collection is the involvement in community, and drawing a picture, and drawing a story about what that data means and buying in stakeholders to be able to then address that collectively in order to solve the problems at hand. So we're going to be talking



about data, but more importantly this webinar builds upon the peer sharing builds upon the webinar on Monday, and this is really about you.

What are the sort of data collection experiences you're having, and what's the information that would be most helpful? One of the things I love about the work I do is I'm both learner and teacher, and the same thing is the same for you. So there's probably a lot of great information that you all have to share with one another as well.

So, when we're talking about the needs assessment process, the first piece of course is the collection of data, and that's where we're going to be focusing today on. But it's also important to state that we have other steps as well. The analysis of the data, and then the interpretation of findings. So what does that data really tell us?

The importance of then being able to draw a picture for our key stakeholders, and then using that data to make decisions about what we want to do, and how we want to do it. And so those are really the key components, but it all really starts with the data collection process itself. So here is some common data collection challenges that sometimes can be experienced, and I'm sure that many of you have experienced these.

So one can be limited data. So whether it's a low response rate, or it may be that data has not yet been collected that is needed on a particular problem. So before vaping came up as a particular issue, there may have been surveys that didn't include vaping related questions, or there may be particular populations.

So several years ago, the 18 to 25 year old population seemed to be one that people really wanted to target and at risk, but when people went to go look at their data on that population, they didn't have as much data, and they needed to figure out ways of gathering that particular data. The other thing that can happen, and Covid is an example, is our data systems, the infrastructure that we have for looking at data and being able to have access to data, those can become overwhelmed. Also issues of data sovereignty.

So sometimes, data can get involved with silos or issues of territory, or sometimes it's around particular systems or regulations that people have in reference to accessing the data, and so part of the issue can be around how can we make it easier for us to be able to share and look at data as well. Active versus passive consent is something that comes up, especially when you're talking about school surveys.

So is this something where each parent has to actively say that their child can take the survey, or is this a survey where people can opt out? The quality of the data, and the completeness of the data, and the availability all really important.

Sometimes with data quality, one of the things that I hear from really rural populations is the fact that their numbers are so low, that sometimes the numbers are low because their populations are low, and it's difficult to then make the conclusions that they need to make in looking at. The other piece can be respondents with limited computer skills or have survey burnout. They've just answered too many surveys, or it's difficult to be able to access those populations, and then finding data on particular populations like LGBTQ, and young adults in college, which I had mentioned before.

Or actually, an interesting one too is, what we find is a population of older adults, and being able to have access to that information about older adults as well as another example of a particular population. So, what we want to discuss is with which of the challenges from the previous slide do you resonate most with. And so, I'm going to turn this back to this slide so you can take a look at them, and I think if I'm not mistaken, Clare, we're going to do this in the chat box. And so, which one of these really stands out to you, or which one of these have you really had firsthand up close, oh, there is a poll.



So sorry about that. So I'm going to ask Clare to bring up the poll. There you go. Much easier. Okay. So here you have them. So which of the challenges from previous slides resonates the most with you? And we'll see what people have been experiencing up close and personal. All right, so we've got some overwhelming of the systems, really interesting. And it looks like everything has a little bit in reference to the different kinds of things that people have been experiencing. Let's see. Looks like limited data has continued to be at the top the entire time.

Really under that neck and neck are overwhelmed systems during Covid and Respondents with limited computer skills. That's interesting. All right. And now we have up to 72.7 percent of people with limited data. So that seems like a rather large problem that people are experiencing, but it seems like everyone has some of these to some extent, some more than others. So I think we're good with the poll, thanks Clara. So, what I want to do is follow up with a question, and you can use the chat for this, which is, were there any challenges that were not listed on that, that you've experienced?

So something that we didn't happen to have brought up that you've experienced yourself with collecting data. So let's see if we've got a couple of people typing. So some individuals are apprehensive in taking surveys. Yeah, that's really true. Sufficient resources, that's a really large one because it costs a certain amount of money in order to be able to collect survey data, or in order to do good needs assessment. Don't know what to collect. I think that's excellent. So what am I collecting, and why am I collecting it? Survey return rates. Not enough surveys being brought.

Some of the data that agencies collect is not in user friendly to manipulate or tally, so you have the data, but it's hard to then take that data and go to the next phase of really analyzing the data. Interesting. Data collection at schools. I'm sure that can come with a whole host of challenges. Let's see, leadership not valuing data over the voice of department heads.

There's a certain need of buy in in order to do data collection, especially data collection in a community and illustrating the importance of data to people. I have found that one of the interesting things, and this is just from my personal experience is that when a community starts collecting data, it's amazing how involved and engaged they can become.

And what a positive experience it can be, although there is all this fear and apprehension about doing it. The skill level of the staff and no professional development offered. I think that's true, too. I think when many of us started in the fields that we're in, and we come from different things.

Some people come from education, some people come from public health, some people come from social work, some people come from completely different fields, and I don't think when we started the field we necessarily knew that the amount of data collection needs assessment, epidemiology that we were going to be learning and utilizing within the field.

And Kelly is also skill level of staff, oh okay we saw that one. All right. These are really good. Poorly designed tools and methodology. Yeah. So it really seems like there are a lot of challenges. And so luckily for us, we actually are going to, I'm going to switch it to the next up, we're actually going to now be able to workshop some of these challenges.

And so, Kristen is going to be our expert, because she is one, and what I'm going to do is ask her several questions of things that came up in the Monday call. And so, the first one which also seems to have come up in this and in our response is, how to increase response rates and participation when response rates are low? So, Kristen, how does one go about doing that? What have you seen that really works in the field?

Kristen Gilmore Powell:



Thanks Carol. Hi everyone. Kristen. Yeah, so this is a question that came up for sure on Monday, and then I'm seeing in the chat it's related to several comments today, and when we think about survey methods, it comes with a number of advantages, and some of those include the low cost, and you don't need to have training that you do when you're doing interviewing, and you can disseminate a survey to a large number of people. But we all know in research on survey methods, it does come with some disadvantages, and low response rate is one of those.

So it's really good to first of all just know that is a known disadvantage of this method, and it's good to consider ways to hopefully increase your response rate. So, just a couple pointers. First of all, keeping your questionnaire short is really important. Respondents are less likely to respond if they see that it's going to take a lot of their time. So right off the bat, trying to be really organized and really key in on what you're trying to measure in as brief way as possible. Survey research has also shown that a cash lottery greatly increases response rate.

So now I know that comes with a money issue attached to it, but if you have money to do one cash incentive, and everyone gets to be in that lottery, that really does increase the response rate, so it's definitely something to consider if you have a little bit of money to put towards one incentive.

And marketing actually matters. Some studies have actually shown that people have an egotistical perspective, and so if you market your invitation to take part in the survey by saying that these people's perspectives are very important to whatever the topic is, that has actually shown to help with response rate.

And then just thinking about your order of surveys. So again, trying to keep it short, but then also keeping some of your sensitive questions toward the end, so demographics, especially if you're asking about income. Keep those at the end. People tend to not like that up front. So those are just some pointers that can help a little bit with response rate.

Carol Oliver:

Excellent, thank you. Are there any other follow up questions to the response rate answers that Kristen gave that were so helpful? Any other follow up questions that somebody might have in reference to that? So you can think about that, give you a minute.

Kristen Gilmore Powell:

And if I can just plug, too, while you're typing about that I've [crosstalk 00:22:13]

Carol Oliver:

Yeah, please. That's great.

Kristen Gilmore Powell:

Yeah. I just want to plug that the PTTC is available to do agency intensive PA, so if your agency is in the process of developing a survey, I saw a few people saying that it's a challenge to create the actual survey, we are available for agencies to do PA. So I'm just plugging that after this session, if you're interested, certainly get in touch with us.

Carol Oliver:

That's great. And we have Kelly who's saying, "I would add that it's important to interview some from the target population and service providers to find out from them the best ways to reach them." That's really so key, and thanks so much for mentioning that. That's great.



The other thing too is for this, you can not only say questions that you have, but also ideas that you have as well. Because this is peer sharing, and it's so helpful. Sorry. Some of the data collection through surveys does not always coincide. Some of the primary data collection through surveys does not always coincide with key informant interviews, and so what do you do with the results when they don't match?

Kristen Gilmore Powell:

Yes, this is a great question, and actually I will bring in Kelly's comment too, which is so important. So, when the person asked this, I think this was on Monday, it seemed that the person is using triangulation methods, right? So this is when you're using more than one method to collect data on the same topic, and this is a way to assure that your results are valid.

So it's a way to double check that your findings represent what you are trying to measure, and also getting at Kelly's point, it's also important to triangulate through different means to make sure that you're getting diverse voices and perspectives, as Kelly mentioned looking at target populations. So, if you're finding that say you had a survey, and key informant interviews, and you're findings don't coincide, there's just a few things I wanted to say. So, one thing you might need to do is think about your samples.

So, was the survey sample and the interview sample similar, were there great differences to the sample, and could that have impacted the result. So did you randomly select people, was one of your samples possibly biased in terms of their perspective and brought different results to your findings. Some things to consider too, with interviews, were your interviewers trained to use prompting methods to elicit more details.

So if you start finding a divergent answer, you want to be able to prompt and get a little bit more information, because one thing especially with qualitative research is that if you are finding a divergent topic, that's actually a good finding, and it might actually be an emerging topic that maybe you weren't able to get at during your survey.

And so it's important to think about the fact that survey methods, or quantitative methods, elicit different types of data than qualitative. So if you're using an open ended interview style, you might just be getting a little bit deeper into the topic. So your findings might not necessarily be divergent, but you might just be finding a little bit more detail about something.

Carol Oliver:

Excellent. That's wonderful. So any follow up questions for people in reference to that particular question? Or any experience that people have that you want to share regarding that? I'll give you a minute for that. All right. While people are thinking about that, we're going to move on to the next question which is how to approach data collection that is inconsistent? So how do you remove the silos and the non-cooperation, and how do you get a commitment from others to share data consistently?

Kristen Gilmore Powell:

Yeah, thanks. So I think the context of this is really when you're thinking about administrative data. So not collecting your own data, but trying to get access to the great data that is being collected at a local, county, or state level, or jurisdiction level.

And so, of course I'm a long time cheerleader of the strategic prevention framework, but the reason why the strategic prevention framework steps are so important is because building capacity is





one of those key steps, and it's really important that you do work on that step, because that is how you'll get access to administrative data that's being collected.

So building the capacity among the stakeholders in your community is important. So for example, if you collaborate with hospitals, they might help you gain access to data on alcohol related emergency room visits. So just emphasizing building that capacity, working with stakeholders that have access to data is really important.

If you're an agency out there, and you can link up with a coalition that might have different stakeholders involved, that might help you get access, and if you have a state or a jurisdiction epidemiological outcomes work group for prevention, members on that group might also help you. So it's really just building that capacity, and partnership to help get access to these data.

Carol Oliver:

That's great.

Kristen Gilmore Powell:

And one other thing I just wanted to point out, and I think it came up in the chat that having really good talking points is also very important, so when you are going to stakeholders that have administrative data, you want to have really good talking points about why you need it. So say you have a logic model, you can literally point to your logic model.

You can say, here's the community issue that we're targeting, here's the strategy, and here's the outcome data that we need to monitor the success of this intervention. So having really good talking points to justify getting access to data is also very important.

Carol Oliver:

Great, that's wonderful. Any questions that anybody has in reference to data challenges? I'm thinking that this is something that I've seen at the federal level, the state level, the community level, so I think this is not an uncommon challenge that people have. So any other questions, or anything that people have found that really works in reference to data sharing that they have that they want to add into this? So we've got Kathy and Kelly are typing as well, and we'll wait and see what wonderful things that they have to say. (silence) All right.

Kristen Gilmore Powell:

I was just going to comment, one person talked about how data is not necessarily user-friendly to the agency, or prevention folks to use, and that is a really good point, and it is a challenge in terms of having the capacity within an agency to be able to use that data. So, again, just building on the point about building capacity, being able to have someone that maybe is a member of your coalition, or can help out in some ways to get those data in a friendlier format is really important point.

Carol Oliver:

All right, and we have Kathy is asking we are focus groups in 2000 and 2018, and then we did the Mipya data, what else is recommended to gather? Sometimes people don't store the data in usable way when there's no spreadsheets.

Kristen Gilmore Powell:



Yes. Data management is definitely a really important element to data collection, so having a consistent way to manage the data is important, and I'll just plug PA again. We've certainly helped agencies create spreadsheets to store data. And the other question about focus groups, so you may have implemented focus groups two years in a row, and I am not sure what Mipya is.

But in terms of what else is recommended, if you can do small scale community surveys to triangulate with your focus groups, if you can do some key informant interviews, that might help get to a little bit more data. And then if there's any administrative data out there that might help.

Carol Oliver:

Excellent. Very helpful. And it looks like M-I-P-Y-A, and Kathy's telling us what that is. The fair school survey is done.

Kristen Gilmore Powell:

Awesome. Okay.

Carol Oliver:

All right. So, any other words of wisdom, Kristen, that you want to add before we move on to some additional things that people can do, different methods people can do, in talking about this?

Kristen Gilmore Powell:

Just one other point, someone also brought up the (silence) important point about leadership not valuing data, and this is really important too, it's really important to get that champion that will see the importance of data, and that goes back to making sure you have really good talking points, and I just want to advocate for logic models really can help you be able to go up to leadership and show exactly what you're trying to impact in your community, and why you need the data to monitor the success of your prevention strategies.

And just lastly, before I pass it on, I just wanted to say we'll certainly be going through some of the questions that are in the chat that we didn't get to point on, and we'll be able to include some resources in the summary document that we send out. And also, feel free to reach out to us for PA.

Carol Oliver:

Excellent. Thank you. Thank you so much. That was incredibly helpful. So, we're going to move on. So after analyzing the data, and developing the needs assessment, and I think this is a nice segue is the communicate with key stakeholders and organizing the data. And I think this idea of getting champions and buy in regarding the data is so important.

So, we have a quick poll, I think this is a poll, which is what is the most creative way you share data with community stakeholders. Yes, it's a short answer poll. So does anybody have any what you've done in sharing your data with community stakeholders? Presentations. This is where people's creativity, and between abilities to both understand the data and then portray it graphically and make it meaningful to people all coming together. So newsletters, parts of social norming campaigns, letter to the editor.

Yeah, these are wonderful. Infographics, yep. Infographics, really making it so that people can see and understand the information in a graphical representation. Social media. So these are all creative ways that people are able to share data. And I think one of the things too, is having people get the information and also understand what does that information mean and why should I care about that





information is really important as well. That's wonderful. We also have brochures, one pagers, and different of those methods are probably going to work with different stakeholders.

So you probably vary the way in which you created your data based on who your stakeholder is, or based on who you are presenting it to. So that's wonderful. The type of sharing is so dependent on the audience, clinical versus community, exactly. One thing that speaks to one audience won't speak to another audience. So very true. And Kathy is typing as well.

That's great. All right. So, it looks like there's a couple more people typing, but while we wait for that, what I'm going to do, if our focus group data is about two years old, at what point does data need to be updated? That's interesting. So, before, because we're running out of time, I'm going to see Kristen, do you have the ability to answer that question really quickly?

Kristen Gilmore Powell:

Sure. It could be a longer conversation, but I would say if we're talking about emerging issues, you might want to try to do focus groups on an annual basis. A lot of times when folks are doing key informant interviews or focus groups, this is really to get at the very vocalized issues that there might not be any administrative data that can get to the root causes of what you're trying to get at, and so you may want to try to do them annually, just to make sure you're assessing any emerging needs that are coming up as you go along. So, annually or every two years would certainly be a good thing to strive for.

Carol Oliver:

Excellent. So we've got a question for Dawn, and I think what we should do is hold onto it, so we can go on to the next presenter, but perhaps we can get back to it if there's time at the end, which is, "Should there be a regimented way to capture the data should needs assessment come first?" So, I'm going to hold off on that, and we're going to move on because next I'm going to turn over the baton, and really talk about using the geospatial mapping to organize your data.

Clare Neary:

Thanks Carol, thanks Kristen. That was a great conversation. So many good ideas, and such a great discussion. We could probably do a whole session on just the questions that you, Carol, and Kristen, discussed, and maybe we'll think about that. Now, we're going to turn to another expert, Cory Morton, and we're going to be talking about using geospatial mapping to organize your data.

So I hear from a lot of you about GIS, inquiring about our course, and I know that some folks, it has such great potential, it's such an interesting tool and a valuable tool to both do your needs assessment as well as report out and [inaudible 00:38:30] your stakeholders, and so what we're going to do is we put some questions forward, but first we're going to do a poll asking all of you, have you used GIS to analyze your data, and if so, have you used it? I know that I hear from a lot of folks asking what the course is that we do, and how to be able to do use it.

So we have folks answering the poll. Some people have not yet tried it. No. Oh, so this is a great topic. This is a great topic. It's going to be pretty new. One person is saying they're just getting started, that's great. Excellent. All right. Well this is a perfect topic then for everyone. No. All right. Well, that's a great understanding of what is happening right now, and so Cory Morton is going to join us, and we brought some questions forward from the session that we did on Monday, and these are some questions that people had if they could talk to an expert such as Cory on GIS. So, Cory-

Cory Morton:



Okay.

Clare Neary:

Our first question is about analyzing the data from GIS. How do you analyze the data from GIS in a prevention setting?

Cory Morton:

Really the great thing about GIS is that it's so visual that a lot of the analysis is occurring just through you recognizing patterns on a map. So rather than running a T test or some statistical type thing, you just make the map and then those patterns are revealed in a way that's easy to understand because all the different data sources you may be looking at are all layered on top of each other.

Now, you can still use GIS and then export your data to an Excel file and use the data in that way in a more traditional way, that works as well. So it's a flexible system once you learn the system, it's very flexible, so you can make a map, and then you can get your data back.

And there's a free webinar series on how to get comfortable with freeware software programs that will teach you GIS, intro GIS. But I also offer technical assistance. So if your agency wants to integrate this somehow in your prevention work, but you don't feel that learning a new software program is going to fit, just please contact me and we can have a conversation about how we may be able to work it in.

Clare Neary:

And I have one little follow up to that, Cory.

Cory Morton:

Mm-hmm (affirmative).

Clare Neary:

One of our folks is wondering are there any places where GIS data really isn't available? We have the 50 states, and then there's also territories. Are there any places where GIS data is literally not available?

Cory Morton:

I would say it's available in most places. Now, the caveat is it available in terms of being a very organized regimented data collection? Maybe not in every locality in the states and territories, however there is a qualitative piece to GIS that you can do with environmental scanning where you can integrate photographs, or audio clips from interviews that you do with people and put those on the map so you're putting that qualitative piece in space.

So, GIS doesn't have to be just these big data sets. You can also do it on a local level, primary data collection. If you're doing key informant interviews, if you're asking people about substance use trends, just make sure that there's some follow up questions about where exactly they're seeing those trends, and maybe even what times of the day, and very specific locations within that primary data can be entered into GIS as well.

But at least the building blocks of maps, the boundaries of counties, boundaries of municipalities, those are available throughout all US states and territories, and then what you bring to those boundaries is unlimited, really.



Clare Neary:

Excellent. Thank you. So, Cory we have a couple of more questions, but it may be that there's some information that you'd like to share first?

Cory Morton:

No, we can go through the questions first, and then you-

Clare Neary:

Oh, okay, great.

Cory Morton:

[crosstalk 00:43:50] resources.

Clare Neary:

Super. Okay. Great. So another question that we had from folks on Monday was how do we get commitment from others to share their data consistently? Do you have any tips or methods for doing that?

Cory Morton:

Yeah, this definitely goes back to what Kristen was saying around capacity building and getting your coalition together, and getting a diverse array of people on your coalition to help, because a lot of times these data exist. Data that is geospatial. It may be on a website that's on a static pdf, so that's very hard for folks to work with unless you have a lot of time to transcribe line by line a table.

So building relationships and walking that fine line between being persistent and being a pest in order to try to get that data is important. That's what I've found. Especially if you're willing to share things back with people, state government partners, et cetera, they are open to sharing some of those data and making those static pictures of tables that are on a lot of state websites, letting you in behind the scenes to get the actual Excel data or spreadsheet data so you can work with it a little easier.

And there was a question in the chat as well about disaggregation. That's one big challenge for GIS is a lot of the data, especially on substance use outcomes like overdose data, alcohol involved motor vehicle accidents, et cetera, a lot of those are aggregate at the county level, and so for a county coalition, what you want to see is something at a lower level of aggregation like a municipality, or even a neighborhood level.

So that relationship building becomes really important there, because those data often do exist at a lower level of aggregation, it's just about building a two way street and building trust between your partner and yourself to share those data at a lower level of aggregation.

Clare Neary:

And for the folks on the call, I'm wondering if there are any specific examples of the kinds of resistance that you're getting from folks. Is it that the data doesn't exist, it's not available, we don't share it out? It would be interesting to understand on a more transactional level what it is that has been happening or really not happening, right? So, another question, are you ready for another question, Cory?

Cory Morton:



Yeah.

Clare Neary:

Another question is about GIS training options in general, and then free resources, and I wondered if you could talk a little bit about that.

Cory Morton:

Well, funny you ask, Clare. So I, through the PTTC, I offer a free webinar online, self-paced course that teaches you basics of a GIS software that's free. It's three parts, and as you go through the process we'll bring in data from your particular locality, we'll work together. It becomes sharing the training with the technical assistance if you get past that first training and think, "Yeah, I can work with this software fine."

And again, if you don't have the time to work that into your day to day, then just get in contact with me if you're interested, and we can talk about TA opportunities for GIS as well. And we'll share the contact information at the end of the webinar.

Clare Neary:

And also folks, I've heard from quite a few folks who were on the Monday call who reached out to me via email to ask for information on how to do the course, and that information is forthcoming.

Cory Morton:

So I see a question from Kelly about is there a way to do a survey that populates GIS mapping in real time, and there are some, but that's pretty advanced, or is there a crowdsourcing method to populating what people's needs are in a community. Kristen, I may ask you here about the app in New Jersey that does crowdsourced information gathering for substance use prevention. I think that was a project a few years back, but Kelly's question freed that in my mind for a minute.

Kristen Gilmore Powell:

Yeah, so in New Jersey, we created a mobile application called Be The One, and the idea was for we launched it among the prevention community, and youth, so for people to take pictures in their communities that they thought either discouraged or promoted in a negative way, substance misuse. And so we used the photos as data to actually show places that we could target prevention strategies.

So for us, a very common issue that people take photos of and upload is going to a department store and having drinking games right next to family bingo games. So trying to talk to those outlets, those retailers, about can we put the drinking games in a different place? It's a way for coalition and prevention folks in New Jersey to use photos as a way to think about policy change, and also use it as data to help them talk about policy change, and associated with that is we do every photo is geo coded, so it gives the town and county that the photo is taken. So, that's just an idea of something that I know of that's been done in recent times.

Cory Morton:

Right, thank you Kristen, and that's a perfect example of that qualitative GIS that you can use that's divorced from any kind of rigorous regimented data collection. So, in these next couple of slides, I just put together some data sources that have data that are very usable on GIS. The US Census if you're thinking about your local conditions, you can get data down to a block level from the census, and so you



can make maps that map out populations of interest, or areas where substance use issues may be common.

One strategy I use to get GIS data, and I've used this a lot, is public data requests, open public data. So, licensing information around where alcohol retail locations are, or tobacco slash vaping locations. I just put the request in, and then I get the address data back in seven days. Usually there's a seven day turnaround on those, and that data is generally free unless there's a big time commitment for staff. They may charge you a nominal fee under 50 bucks.

And New Jersey and New York and most states have GIS data warehouses where they have a lot of free GIS data that's ready to use, and the mapping program that we provide training on, and also other mapping programs that are available. New Jersey has an especially robust GIS warehouse with school locations, all kinds of data that are applicable to prevention work. New York has one as well, and I'm sure if you're in another state that there's a bureau of GIS somewhere in the state government that provides those data to citizens and people who are interested.

And in the chat last week, some people were asking, on Monday, were asking about web applications that do the GIS work for you, and there are a few. So this OD map program maps overdoses and related indicators. That program is okay to be used by prevention organizations, but you do have to have a law enforcement or other first responder partner to sponsor your being able to see those data, and those data are very local, disaggregated down to the point level. So if you do work with a law enforcement agency, and they work on this OD map, check with them to see if they'll sponsor you an account.

The behavioral health treatment locator, I'm sure a lot of people have seen this, but that provides maps around where substance use treatment is located. It's got information on MAT providers, and a lot of information on sub populations as well as language that is provided at the treatment center, and then a growing movement in the United States is something called Open Data Cities, where cities just share as much data as they can to be transparent, and that data is usually very disaggregated in a map point form.

In New Jersey, there are two cities, Jersey City and Newark participate, and then in New York State, Buffalo and New York City are both participants in that program where you can get real time law enforcement data and other public health data that would be very applicable to your prevention work. So if you're a coalition or a partner working in any of those four cities, that's an excellent resource if you want to integrate GIS. It's simple to use, too. And again, if your organization is thinking about integrating this type of work, just reach out to me and I can maybe find more specific things related to your area.

Clare Neary:

Cory, that was excellent. Thank you so much for all of that. I know that when I hear from people asking for access to the courts, or asking questions, they think it's harder than it probably is. They're a little daunted. So I want to encourage everyone to give it a shot, because Cory is an excellent teacher, and you probably all know your towns.

You know your towns and your communities, and probably a lot of this information will ultimately make way more sense to you than you might think. So, we are moving towards the end. If we have any other questions regarding GIS, please let us know. So we've covered a lot, and I'm going to hand the baton back over to Carol, who will finish up for us, and I want to thank everybody for being here on the Friday before Memorial Day weekend, and spending some time with us and please be in touch about any of the topics that have been discussed. Thank you.

Carol Oliver:



Wonderful, thank you. Thanks everybody. This has been very informative, and as we move forward, if you have any questions or comments, really, do not hesitate to call. One of the things about technical assistance providers, if you haven't noticed, is we love to help, and we love to answer questions. So when we get them, we get very excited about it.

So you can contact Ivy Jones Turner, who is the TTA specialist for region two of the PPTC, and there is her email, and also Cory Morton the assistant professor at University New Hampshire, so any follow up questions or things come up later, definitely feel free to follow up. Also, I think sometimes the questions that you have, other people have as well, and so taking the time to ask them, then gives a sense of who might else will have that question, and other people can get the benefit of it as well.

And so, lastly, given the fact that we're talking about data and the importance of data collection, you can imagine the importance of us collecting evaluation data. So, we would love it if you would please take the time to complete a really brief evaluation, and you'll see the link right there, and we really appreciate your feedback.

That would be amazingly helpful, and as we know the best way of enhancing and improving and understanding what's going on is to get data and to look at it, and so we appreciate you helping us collect that as well. So thanks to everyone. We really appreciate it, and thanks to the presenters.