



## Examining Data for Disparities Webinar Workbook and Notes – February 24, 2022

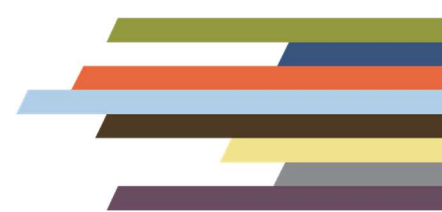
### Land Acknowledgement

The University of Wisconsin-Madison occupies ancestral Ho-Chunk land, a place their nation has called Teejop (day-JOPE) since time immemorial. In an 1832 treaty, the Ho-Chunk were forced to cede this territory. Decades of ethnic cleansing followed when both the federal and state government repeatedly, but unsuccessfully, sought to forcibly remove the Ho-Chunk from Wisconsin. This history of colonization informs our shared future of collaboration and innovation. Today, the University of Wisconsin-Madison respects the inherent sovereignty of the Ho-Chunk Nation, along with the eleven other First Nations of Wisconsin.

– [University of Wisconsin-Madison](#)

### Creating Our Intention

When you think about using data what comes to mind?	What is your biggest challenge in using data to inform your work?
How do you think data can be used to improve health equity?	What do you hope to get out of this training experience?



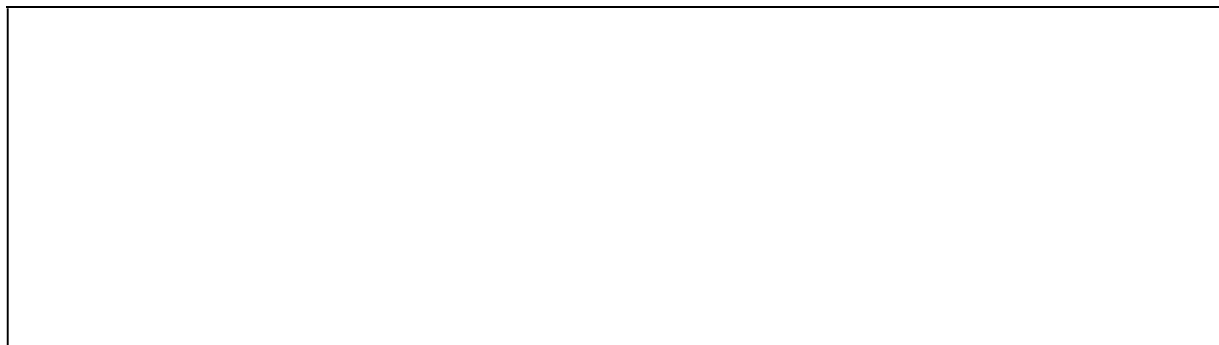
## The Power of Data



This graphic<sup>1</sup> truly sums up why equity matters in our work. So often our prevention strategies focus on the individual level with minimal consideration for the setting in which people live, work, and play. Take a moment to reflect on a thriving community environment. Think of the neighborhood, the schools, parks, grocery stores, and the physical built environment. Think of all the ways a person's health and well-being are nurtured by living in an environment with high protective factors. Now imagine the environment of those community members who are suffering from disparities and social inequalities. Can you see how different the environment looks for these two communities? If this is a foreign concept to you, just take a drive to the "other" side of town and you will immediately see the difference.

<sup>1</sup> Figured redesigned by RIZE Consultants. Adapted from Brennan Ramirez, L. K., Baker, E. A., & Metzler, M. (2008). *Promoting Health Equity - A Resource to Help Communities Address Social Determinants of Health*. U.S. Department of Health and Human Services, Centers for Disease Control and Prevention.  
<https://www.cdc.gov/nccdphp/dch/programs/healthycommunitiesprogram/tools/pdf/SDOH-workbook.pdf>

When we take a comprehensive look at community problems, we begin to gather data that shares a powerful story. Consider at what level you currently collect data: leaves, trunk, or roots?

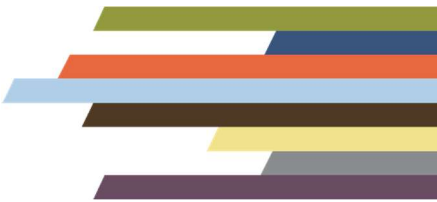


The power of data can be articulated in three ways:

- **Quantify (count) and qualify (describe) disparities** – with the right data, you can make statements about the magnitude of the problem. Additionally, you will be able to describe the impacts of these disparities on health outcomes.
- **Quantify (count) and qualify (describe) opportunities** – disparities and opportunities are two sides of the same coin. As you discover the disparity issues, you will also begin to uncover the opportunities for establishing equity and improving health outcome.
- **Fuel policy action and advocacy** – by the nature of how disparities come into existence, many communities must focus on environmental strategies as the best means of improving health outcomes. This requires us to use data to inform policy change and to support advocacy for health equity.

## The Burden of Power

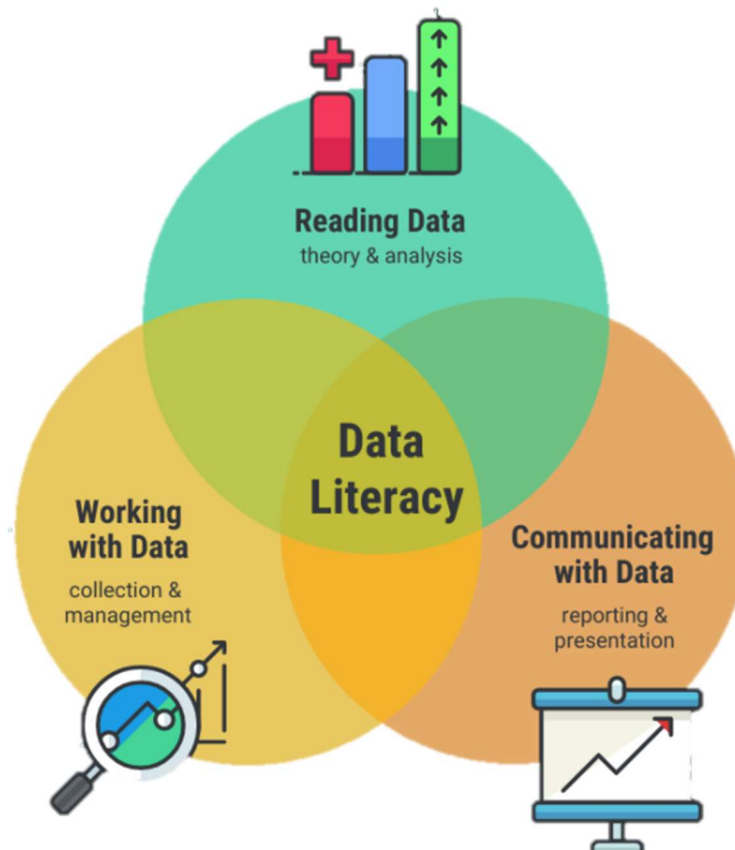
Although data can be a powerful tool of good, it can also amplify bias and perpetuate inequality when used improperly. Here are things to consider when prioritizing equity while working with data:

- **Survey tools** - What social determinants may influence someone's ability to find time and energy to respond to a survey? For whom might these questions feel loaded or stigmatizing due to the structure of our society? Are you choosing a survey tool(s) with the right literacy level?
  - **Respondents** – How do the demographics of the survey respondents compare to the demographics of the overall community? What percentage of the overall community did you survey? Is it enough data to draw any conclusions?
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- **Data Narratives** – What narrative are we spreading when we share data, especially when we share data that is misleading? Remember, disparity simply describes a particular experience, it does not characterize that group of people. When you discover a disparity, you should be asking WHY is this happening. *There is some social inequality at the root of the disparity data. That is our place of opportunity!*

## What is Data Literacy?

*Data Literacy Explained<sup>2</sup>*



<sup>2</sup> Hooper, L. (2021, November 17). *Data Literacy: 7 Things Beginners Need to Know*. Venngage. <https://venngage.com/blog/data-literacy/>

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## Reading Data

Uncertainty is inevitable when you are reading data -- remember this! You should look for the explanation from the author of the study regarding the limitations of the data and the questions that are still unanswered.

Data is like a story. You might not always know what the end result will be but by analyzing data and its patterns, we can gain insight into our past or future. Most patterns show relationships between “things” that are being counted, measured, or described. It's only through analysis that you can begin to uncover insights. When reading data, we must remember there are many “things” to uncover and you should keep digging beyond your first “aha” moment.

Check out the “5 Whys” (<https://youtu.be/N7cR2gArCFE>). It has a great explanation of continuing to dig beyond the first “aha” moment.

## Working with Data

Primary data is the data you collect. It's original data. Unless you have expertise in survey development, it is recommended that you hire an evaluator to assist with the development your data tools. Be sure to remember the social and cultural context of your community when developing survey tools. Consider the need for language, literacy, and even the delivery (verbal, electronic, pen and paper, etc.).

Secondary data is the data someone else collects. This is the category of data most often used in our work. When using secondary data, you will lean on your “reading data” skills. These skills will help you to analyze your secondary data carefully to be sure it's the right data to use in building the logic for your intervention strategy.

There are 2 main types of data:

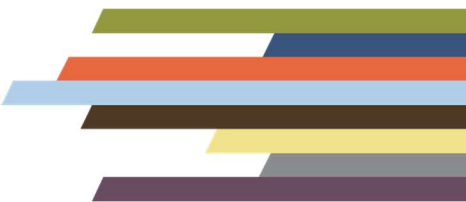
- Qualitative – which focuses on telling a rich story by describing a problem
- Quantitative – which focuses on counting a problem

You need both types of data to tell a comprehensive story.

Lastly you want to think about the type of data sources, including surveys, interviews, observations, and experiments.

## Communication with Data

Just like with reading data, uncertainty is inevitable! Data can be messy and difficult to deal with. Infographics make it seem like facts on a page rather than the chaotic world they represent (which might not even exist). We must be responsible communicators by understanding the data well and explaining what we still don't know.



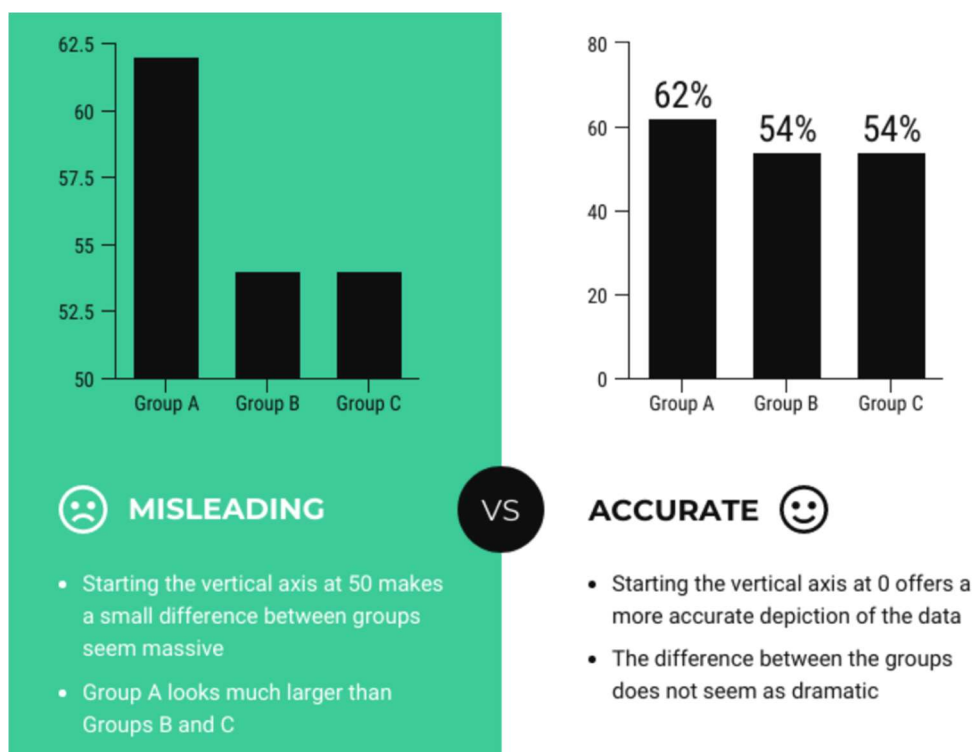
First consider, what are you hoping to share with others?<sup>3</sup>

- **Descriptions** of the data, such as frequencies or percentages
- **Distributions** of the data, such as ranges or averages
- **Comparisons** in the data, such as changes over time or correlations between variables

Your goal for WHAT you want to share will determine HOW you share that data and what data points you focus on. Just be sure to always communicate the limitations of your statements because you are a trusted resource in your community. The data you share can direct policy efforts and be the impetus for community change.

Lastly, it's important to use data visualizations responsibly. When used improperly, visualizations can communicate a misleading message and amplify bias. Below is a bar graph example that shows the same data.<sup>3</sup> The graph on the left has a baseline starting at 50, which causes the difference in the groups to appear very large. The graph on the right has a baseline of 0, and provides a more accurate visualization of the difference between the groups.

It is our responsibility to display our data accurately. Remember this skill for when you are “reading” data -- you will find this helpful to using data effectively.



<sup>3</sup> Hooper, L. (2021, November 17). *Data Literacy: 7 Things Beginners Need to Know*. Venngage. <https://venngage.com/blog/data-literacy/>



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## Equity-Focused Needs Assessment

When you start the assessment process, it is likely folks will have different opinions on what the priority substance misuse problem is.

The data you collect will help you create community consensus about substance misuse problems in the community. To find a solution, you must know why the problem exists. This means discovering the consequence and consumption patterns of the community being served:

- **Consequences** are what happens when people use substances. Alcohol, tobacco, or illicit drugs can increase the likelihood that social problems will occur as a consequence because of their impact on health and life in general. Be sure to look for any social inequality at work that places one community at higher risk for legal or social consequences of substance misuse.
- **Consumption** describes the way people use a substance. The data you collect should paint a picture about how much is being used, how often, and in what context. Be sure to look for patterns that seem to be unique for specific populations within your community.

You need to know the risk factors that increase the likelihood that substance misuse will occur, and the protective factors that reduce the likelihood of problems occurring. Identifying which risk factors are prevalent in your community can reveal possible areas of need.

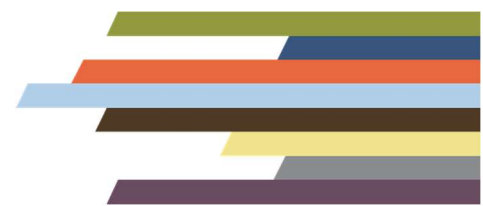
When you set out to do an equity-focused needs assessment you want consider the following questions:

- Are specific communities experiencing different consequences from substance misuse?
- Are specific communities experiencing different consumption patterns?
- What is the magnitude – vs impact – of the problems in a particular community?  
*Note: Magnitude refers to how widespread the problem is in the community. Impact refers to mortality of a problem, or how dangerous the problem is in the community.*

## Whisper Course Sign-up

Would you like to be reminded of the key concepts from this training and concrete actions you can take? Participants of this Whisper Course will receive four emails over the course of the next two weeks. Each email will contain a reminder of one concept presented during this training along with examples of concrete actions you can take to put the concepts into action.

Sign-up for the Whisper Course here: <https://tinyurl.com/PTTCwhisper4>



## To view Parts 1, 2, and 3 of the Health Equity Series

visit the Great Lakes PTTC Health Equity and Inclusion website page:

<https://pttcnetwork.org/centers/great-lakes-pttc/health-equity-and-inclusion>

## Upcoming Events

- **What Does NOT Work in Prevention**  
March 2 from 10-11:30 CT
- **Five (C's) Not D's of Data**  
March 9 from 10-11:30 CT
- **Foundations in Prevention Intensive Training Course**  
March 21, 24, 28, 31, April 4, 7, 11, & 14 from 10:00-11:30 CT
- **Taking Action on Stigma: A Training Series for Substance Misuse Prevention Professionals**  
March 30 and April 6 from 9:00-11:00 CT

To register: <https://tinyurl.com/GLPTTCevents>

