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Georgia Southern Examines Variation in Public Health Governance

September 18, 2015



Studies of public health departments have found mixed results regarding the relevance of governance through local boards of health (LBOHs). Some studies find that LBOHs can be an important component in higher performance by local health departments. Other analyses, however, find no advantage for local health departments having or not having a LBOH. The hypothesis was that a typology of LBOHs nationwide can define different types of LBOHs based on their powers and responsibilities.

Using national profile sample data from the National Association of Local Boards of Health, LBOHs were categorized using 34 variables based on four domains of responsibilities and duties: enforcement powers, regulatory powers, human resource powers, and budgetary powers. Correlations between types of LBOHs defined by this typology were then computed, and whether they shared significant characteristics in terms of the race, ethnicity, sex, and educational demographics of their board members was determined.

ArcGIS was used to analyze the data spatially for regional and national patterns.

Different types of LBOHs may have different influences on their associated local boards of health. This study provides a typology for future research to allow analysts to distinguish different types of LBOHs nationally.

“Variations in public health governance,” was published in the Journal for the Georgia Public Health Association.

Dr. Jeff Jones, assistant professor of health policy and management (HPM) at the Jiann-Ping Hsu College of Public Health Georgia Southern University (JPHCOPH) was the lead author. Mr. Ankit Bakar, alumni of the Masters of Public Health (MPH) HPM at JPHCOPH, Mr. Patrick Chang, student of the MPH in Biostatistics at JPHCOPH, and Dr. Yelena Tarasenko, assistant professor of HPM and Epidemiology at JPHCOPH were co-authors.

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Georgia Southern Examined Rural-Urban Differences in Perceptions of Child Overweight

September 18, 2015



Children and adolescents residing in rural environments with higher prevalence of an overweight population may develop inaccurate perceptions of a healthy weight. This study examines rural-urban differences in perceptions of child overweight among overweight ($85 \leq \text{BMI percentile} < 95$) and obese children ($\text{BMI percentile} \geq 95$), their guardians and health care providers (HCPs), and children's concomitant weight control.

Rural residents comprised 18.8% of the study population; 41.8% of them were overweight and 58.2% were obese compared to 46.7% and 53.3% of urban peers, respectively. Misperceptions of children's weight status were 11.3 and 6.0 percentage points higher in rural children and their guardians, respectively. Recall of an HCP identification of child overweight was 6.3 percentage points lower among rural versus urban guardians.

Obesity prevention efforts may be fostered by improving accuracy of child overweight perceptions. This may be particularly impactful in rural settings, where weight misperceptions are high.

["Rural-Urban Differences in Perceptions of Child Overweight among Children and Adolescents, Their Guardians and Health Care Professionals in the United States,"](#) was published in *The Journal of Rural Health*.

Dr. Yelena Tarasenko, assistant professor of health policy and management and epidemiology of the Jiann-Ping Hsu College of Public Health at Georgia Southern University (JPHCOPH) was the lead author. Dr. Chen Chen, Doctor of Public Health in Public Health Leadership alumni JPHCOPH, Dr. Bryant Smalley, Rural Health Research Institute Georgia Southern University, and Dr. Jacob Warren, Center for Rural Health and Health Disparities, Mercer University School of Medicine, were co-authors.

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