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Excess body weight has been reported to be associated with excessive school absenteeism (ESA), but less is known about the association with perceived body weight. The study objective was to assess the relative influence of perceived and measured weight status on school attendance.

We used the data from 3113 adolescents age 12–19 years who were interviewed as a part of the National Health and Nutrition Examination Surveys (NHANES), 2003–2008. Body weight and height were measured during the physical examination, while self-perceived body weight and the number of school days missed was assessed. Missing one or more days per school month (nine days per school year) was defined as, and indicative of, experiencing Excessive School Absenteeism (ESA).

ESA was reported from 12.31 (SE = 0.89) % of adolescents. The highest prevalence occurred among healthy weight adolescents who erroneously self-perceived as overweight [21.6 (4.77) %], two times higher than adolescents with obesity who self-perceived as “just right weight” [10.3 (2.87) %]. The adjusted prevalence ratio (PR) of ESA for healthy weight adolescents who erroneously self-perceived as “overweight” was 1.91 (95%CI = 1.10–3.32) compared to healthy weight peers who correctly self-perceived as “just right” (reference group). The PRs were 0.99 (0.48–2.06) and 1.41 (0.86–2.32) respectively for adolescents with obesity who believed that their body weight was “just right” or “overweight”. No significant differences were observed between boys and girls, young (12–15 years) and older adolescents (16–19 years).

In Conclusion, perceived overweight rather than actual overweight is significantly associated ESA among adolescents.

"Perceived not actual overweight is associated with excessive school absenteeism among U.S. adolescents," was published in Obesity Research & Clinical Practice.

Dr. Andrew Hansen, Assistant Professor of Community Health and Behavior Education, Ms. Ashley Hill, alumni, and Dr. Jian Zhang, Associate Professor of Epidemiology at the Jiann-Ping Hsu College of Public Health Georgia Southern University were co-authors in this study. Dr. Dustin Duncan, Assistant Professor in the department of population health at the NYU School of Medicine was the lead author.
Georgia Southern Examines Information Systems

November 29, 2016

Informatics capacity building is resource and personnel intensive. Many local health departments (LHDs) face tradeoffs between using their resources to carry out existing mandates and using resources to build their capacity, for example, through informatics, to deliver essential services in a more effective and efficient manner.

The purpose of this case study is to describe how a mid-sized LHD built and used information systems to support its strategic objectives, clinical services, and surveillance.

The mid-sized LHD described here was chosen for its “best practices” in informatics capacity building and use by NACCHO’s study advisory committee. To conduct the case study, authors reviewed departmental documents and conducted semistructured interviews with key informants in the agency. Interviews were recorded, transcribed, thematically coded, and analyzed.

Findings from the case study suggest that including capacity building in informatics as a strategic priority is one of the most effective ways to ensure that informatics are assessed, updated, and included in resource decisions. Leadership at all levels is critical to the successful implementation of informatics as is proactive partnership with community partners who have overlapping goals. The efficiency and effectiveness of LHDs rely on informatics capacity, especially when resources are challenged.

The study titled “Using Information Systems to Improve a Mid-Sized Local Health Department’s Effectiveness in a Time of Rapid Change,” was published in the Journal of Public Health Management and Practice.

Dr. Gulzar Shah, Associate Dean for Research at Jiann-Ping Hsu College of Public Health at Georgia Southern University was the co-author.
Georgia Southern Examines Electronic Health Records and Meaningful Use in LHDs

November 29, 2016

Electronic health records (EHRs) are evolving the scope of operations, practices, and outcomes of population health in the United States. Local health departments (LHDs) need adequate health informatics capacities to handle the quantity and quality of population health data.

The purpose of this study was to gain an updated view using the most recent data to identify the primary storage of clinical data, status of data for meaningful use, and characteristics associated with the implementation of EHRs in LHDs.

Data were drawn from the 2015 Informatics Capacity and Needs Assessment Survey, which used a stratified random sampling design of LHD populations. Oversampling of larger LHDs was conducted and sampling weights were applied. Data were analyzed using descriptive statistics and logistic regression in SPSS.

Forty-two percent of LHDs indicated the use of an EHR system compared with 58% that use a non-EHR system for the storage of primary health data. Seventy-one percent of LHDs had reviewed some or all of the current systems to determine whether they needed to be improved or replaced, whereas only 6% formally conducted a readiness assessment for health information exchange. Twenty-seven percent of the LHDs had conducted informatics training within the past 12 months. LHD characteristics statistically associated with having an EHR system were having state or centralized governance, not having created a strategic plan related to informatics within the past 2 years throughout LHDs, provided informatics training in the past 12 months, and various levels of control over decisions regarding hardware allocation or acquisition, software selection, software support, and information technology budget allocation.

In conclusion, a focus on EHR implementation in public health is pertinent to examining the impact of public health programming and interventions for the positive change in population health.

“A focus on EHR implementation in public health is pertinent to examining the impact of public health programming and interventions for the positive change in population health,” was published in the Journal of Public Health Management and Practice.

Dr. Karmen S. Williams, recent DrPH of Public Health Leadership alumni was the lead author and Dr. Gulzar Shah, Associate Dean for Research at Jiann-Ping Hsu College of Public Health at Georgia Southern University was the co-author.
Georgia Southern Students Inducted into Omicron Delta Kappa National Leadership Honor Society

November 29, 2016

The students listed below from the Jiann-Ping Hsu College of Public Health were recently inducted into Omicron Delta Kappa National Leadership Honor Society. Omicron Delta Kappa National Leadership Honor Society was founded on December 3, 1914 at the Washington and Lee University in Lexington, Virginia by 15 students and faculty leaders. It was the first college honor society of national scope to recognize and honor meritorious leadership and service in extracurricular activities and to encourage development of general campus citizenship.

Linda Baffoe (DrPH Community Health Behavior and Education)
Abraham Deng (DrPH Epidemiology)
Felicia Yeboah (DrPH Epidemiology)
Sewuese Akuse (MPH Epidemiology)
Chimuanya Okoli (MPH Epidemiology)
Eniola Olatunji (MPH Health Policy and Management)

Currently, ODK has 292 active circles across colleges and universities within USA. In last 100 years, ODK has initiated more than 300,000 members. The membership is awarded to undergraduate junior and senior students, graduate students, faculty, staff and alumni and honorary memberships (honoris causa) are offered to qualifying members who achieve professional distinction or render outstanding service through leadership.

The basic unit of ODK is the collegiate Circle. The Georgia Southern Circle of ODK was established in the year 1999. The students who are among top 35% of the class (based on the cumulative GPA) are invited to apply for membership via email, the applications are evaluated on the basis of the 5 phases of campus life which include scholarship, athletics, campus or community service, social and religious activities, campus government, journalism, speech and mass media, and creative and performing arts. Students who qualify for membership are officially invited (via email) to join ODK. The membership in ODK is a mark of highest distinction and honor.

The Georgia Southern Circle initiates new members in Fall only. The induction ceremony for this year took place on November 13, 2016. For more information, please see the ODK website: http://odk.org/
The 2015 Informatics Needs and Capacity of Local Health Departments (LHDs) survey is the most recent comprehensive source of quantitative data on LHD informatics. Conducted by the National Association of County & City Health Officials (NACCHO), this is the third nationally representative quantitative study of LHD informatics since 2009. The previous 2 comprehensive quantitative assessments were conducted by NACCHO in 2009-2010 and 2011. Given that public health informatics is rapidly evolving, the 2015 Informatics survey is a much-needed country-wide assessment of the current informatics needs and capacities of LHDs.

The 2015 Informatics capacity and Needs Assessment Survey was conducted by Dr. Gulzar Shah, Associate Dean for Research at the Jiann-Ping Hsu College of Public Health, on behalf of the National Association of County and City Health Officials (NACCHO). This article outlines detailed methodology used in the 2015 informatics survey, including instrument development, pretesting, sampling design and sample size, survey administration, and sampling weights. A 9-member advisory committee representing federal, state, and local health agency representatives guided the design and implementation of this study.

The survey instrument was organized into 6 topic areas: demographics, physical infrastructure, skills and capacity available, public health workforce development needs, electronic health records, and health information exchange. The instrument was pretested with a sample of 20 LHDs and subsequently pilot-tested with 30 LHDs. The survey was administered via the Qualtrics survey software to the sample of 650 LHDs, selected using stratified random sampling. The survey was fielded for approximately 8 weeks and 324 usable responses were received, constituting a response rate of 50%. Statistical weights were developed to account for 3 factors: (a) disproportionate response rate by population size (using 7 population strata), (b) oversampling of LHDs with larger population sizes, and (c) sampling rather than a census approach.


Dr. Gulzar Shah, Associate Dean for Research at Jiann-Ping Hsu College of Public Health at Georgia Southern University was the sole author.