How States Can Leverage Data to Guide Health Improvement

Robust, data-informed decision-making is essential for ASTHO and other organizations to efficiently plan and deliver capacity building and technical assistance (CBTA). States regularly utilize CBTA support to inform and implement programs and policies that serve their residents and communities, making it crucial for ASTHO to meet the unique needs of state public health departments and their partners. Effective data management is key to optimizing CBTA operations; utilizing AI technology to consolidate dashboards and qualitative data tools can help gather insights from states.

To better serve the technical assistance (TA) needs of OT21-2103 state health agency recipients, ASTHO developed a qualitative data analysis process which states can use to leverage their own raw data to guide their efforts. Below ASTHO provides examples for states to better use available qualitative data to inform their programming, processes, and policies to meet the needs of their partners, communities, and residents.

Qualitative Analysis of State Workplans

At the outset of the OT21-2103 grant, ASTHO conducted an analysis of state-submitted workplans to identify recurring themes and activities aimed at addressing poor health outcomes. This analysis provided a comprehensive understanding of state-specific needs and challenges, enabling more targeted TA. Common concerns among states included health initiatives, resource allocation, and policy development.

How this translates to states:

This process offers a model for states to utilize their own raw data to guide their programmatic efforts. States can implement a similar practice to access data within their health agencies or partner with local and community-based organizations to gain valuable insights. By doing so, states can better understand the needs of residents, communities, and populations served and focus their efforts accordingly.

Creation of a Data Dashboard

ASTHO developed an online dashboard to centralize and manage state-specific data. This dashboard facilitated the storage, filtering, and analysis of information, enhancing coordination and accessibility. Collaborating programs and subject matter experts at ASTHO compared state activities, identified relevant topics, and anticipated TA needs for state health agencies implementing the OT21-2103 grant. The dashboard provided real-time data visualization and integrated seamlessly with project management tools.

How this translates to states:

States can adopt a similar approach by developing data hubs that centralize their data management efforts. A shared dashboard allows multiple departments to use the same data collaboratively, allowing for effective resource allocation and “making the case” for additional funding. If a dedicated dashboard is not feasible, a universal spreadsheet template can be developed to store data, which can later be uploaded to an online database. AI technology can be used to consolidate and summarize qualitative data from various sources to ensure that the information is streamlined and user-friendly. The integration of project management tools further streamlines collaboration and ensures data consistency across teams.

Additional Qualitative Data Collection

Qualitative feedback from activities such as conversations, workshops, and learning sessions also informed the development of TA resources and products. Interactive online platforms and whiteboards captured insights from state efforts, which subject matter experts used to refine resources, foster connections, and deliver tailored presentations. These activities ultimately shaped future events and initiatives.

How this translates to states:

States can gather qualitative feedback through community focus groups, surveys, town halls, and partnerships with community-based organizations. Capturing and storing this data in an online database or spreadsheet ensures that it is readily accessible for informing product and policies, resource allocation, programmatic initiatives, and effective communication efforts.

Learning Labs and Collaborative Opportunities

The data dashboard was instrumental in identifying states with shared priorities, enabling targeted invitations to ASTHO Learning Labs. These virtual sessions allowed states to exchange strategies and learn from one another's successes and challenges. Participants benefited from peer-to-peer learning and continued their connections and conversations beyond the labs. The dashboard also facilitated the organization of learning communities, peer-to-peer sessions, and one-on-one coaching by matching states with similar interests.

How this translates to states:

States can use dashboards as a starting point to identify areas or populations which may benefit from health improvement interventions. By storing multiple sources of qualitative data on past and present efforts, health agencies can identify areas for improvement, connect programs and beneficiaries, increase internal awareness of existing efforts, and use the information to advocate for additional resources and funding.

Internal Framework for Strategic Alignment

ASTHO developed an internal framework to align TA activities with its board-driven strategic priorities. By leveraging qualitative data, ASTHO designed TA initiatives to address key public health challenges. Focusing on community partnerships, workforce development, and policy transformation ensured that resources were allocated efficiently, maximizing the impact of TA responses.

How this translates to states:

States can utilize the available data to inform policies, programs, and align with state and health agency strategic plans. Increased access to qualitative data enhances coordination among different departments within state health agencies, fostering more opportunities for collaborative initiatives.

Impact and Outcomes

The data-driven approach significantly improved TA delivery and outcomes. Notable results included increased responsiveness to state-specific needs, strengthened collaboration through targeted Learning Labs, better alignment of TA initiatives with broader health improvement objectives across ASTHO, and improved scheduling and execution of TA events. These outcomes highlight the value of incorporating data analysis into TA planning and response to enhance precision and effectiveness.

How this translates to states:

States can replicate this data-driven approach to enhance their programmatic efforts by leveraging available data to develop policies, programs, and resources that more accurately reflect the populations they serve. States can also use data to identify areas of collective impact, advocate for additional funding, policies, and services to ensure all communities can achieve maximal health.

Future Recommendations

The success of data-driven methodologies in refining TA responses demonstrates their potential for broader application in other initiatives. Continued investment in data dashboards and AI technologies will further enhance TA planning and offer deeper insights into state needs — including partners, communities, and residents — while assuring local context is considered.

Agencies adopting similar data-driven approaches should consider the advantages of integrating data tools and AI to develop dashboards and targeted TA resources and services. Implementing a user-friendly data visualization platform for centralizing and analyzing information can inform the development of relevant products and services. Data visualization can also help report on the success of technical assistance with health improvement initiatives. Additionally, leveraging project management tools improves collaboration and progress tracking for all stakeholders.

To ensure the effectiveness of TA efforts, organizations should regularly collect qualitative feedback from stakeholders to capture emerging trends. AI can be used to analyze qualitative data, identify trends, and shape the development of TA initiatives. By embracing these recommendations, organizations can enhance their TA planning and delivery, achieving impactful outcomes for states and communities.