

## **About the Connecticut State Epidemiology and Outcomes Workgroup (SEOW)**

The State Epidemiological Outcomes Workgroup (SEOW) is a collaborative group of State agency representatives and key stakeholders committed to the identification, sharing and use of data to improve substance abuse prevention and mental health promotion, and behavioral health in general. The goals of the SEOW are:

- Increase access to data that may inform inter-agency planning and collaboration
- Increase cross-agency understanding of the strengths and limitations of available datasets
- Share state agency areas of expertise and knowledge to access, interpret and use data
- Maximize the use of data
- Promote data-driven decision-making to improve planning, evaluation and more effective and efficient targeting of prevention resources
- Explore and expand opportunities for collaboration around issues of common concern
- Contribute to development of an interactive data repository

The Department of Mental Health and Addiction Services (DMHAS) re-convened the SEOW to support the efforts of the Partnership for Success 2015 (PFS 2015) initiative, but the goal is to develop a collaborative and cooperative inter-agency initiative that will have the capacity to support multiple initiatives within and across agencies. The SEOW's mission will be to strengthen the data infrastructure and capacity of state agencies to implement data-driven strategic planning initiatives. All five steps of the SAMHSA's Strategic Prevention Framework (SPF) planning process; 1) assessment of needs, resources and readiness; 2) community mobilization and capacity building; 3) strategic planning; 4) implementation of evidence-based practices, programs and policies; and 5) monitoring and evaluation – into the statewide workgroup function and activities.

The SEOW is positioned interface with the Alcohol and Drug Policy Council (ADPC) and the PFS 2015 Advisory Committee (ADPC Prevention Subcommittee). The SEOW is staffed by the DMHAS-funded Center for Prevention Evaluation and Statistics (CPES) and chaired by Dr. Jane Ungemack of the University of Connecticut Health Center (UConn Health).

The role of the SEOW is to systematically review and analyze data related to behavioral health problems and make recommendations regarding state priorities for substance use prevention and mental health promotion and particular target groups for State prevention efforts. The SEOW is tasked with providing: 1) an assessment of the magnitude of the substance use and mental health problems; 2) an assessment of risk and protective factors associated with patterns of substance use and mental health problems; 3) an assessment of existing community assets and resources available to address these problems; 4) identification of any gaps or duplication in services; 5) an assessment of readiness to implement effective prevention EBPPPs at the state and community levels; 6) identification of high risk/high need communities or populations; and 7) specification of baseline data against which progress and outcomes of prevention and health promotion efforts could be measured. The application of the SPF steps to the SEOW process is detailed below.

### SEOW Tasks According to the Strategic Prevention Framework Steps

SPF Step	SEOW Activities
NEEDS ASSESSMENT	Determine data needs; Identify, collect and analyze data to identify problems; Interpret data findings to determine priority needs; Create state level epidemiological profiles;
CAPACITY BUILDING	Assist in the identification, collection, analysis, and interpretation of capacity data; Provide data and information to key stakeholders to mobilize and enhance state and community resources to address prevention priorities. Support local epidemiological workgroups and coalitions
PLANNING	Establish links between assessment findings and priorities for resource allocations; Identify gaps and/or duplication in State services Use data to recommend targets for State Strategic Prevention Plan (places, populations, behaviors);
IMPLEMENTATION OF EVIDENCE-BASED PRACTICES	Determine strategies that effectively address priorities in the State Strategic Prevention Plan; Play a role in establishing link among: behavioral health problems, causal factors that contribute to identified problems, and evidence-based strategies to address causal factors and problems;
MONITORING AND EVALUATION	Assist in developing data monitoring plan based on data priorities that emerge; Contribute to ongoing data collection and analysis to examine changes over time in substance and mental health-related risk factors and problems; Contribute data to the CTDC; Based on trends, recommend adjustments to prevention initiatives.

Available indicators will be assessed by the SEOW to determine their utility and quality to identify and monitor identified public health problems. A list of recommended criteria for assessing the quality of indicator data relevant to substance abuse prevention and mental health promotion is shown below.

#### Recommended Selection Criteria for Behavioral Health Indicators

Domain	Indicator	Criteria
<b>Data Quality</b>	Ability to analyze at the town level	Data are available at the town level that can be used to establish community-level needs Town-level data can be aggregated up to sub-state and state levels
	Availability over time (Reproducibility)	Data are historically available for two or more years to assess need and trends Data will continue to be routinely available through the project period to assess change
	Accessibility (Timeliness)	Multi-year data are currently available for needs assessment The lag time to obtaining the data for longitudinal analysis is reasonable to support monitoring and evaluation (i.e. 12-month lag or less)
	Capacity of subgroup analysis/application to different subgroups	Level of information for population subgroups (i.e., gender, age, race/ethnicity)
	Data completeness	Complete coverage across the state Acceptable validity/accuracy Consistently reported over time and across reporting units

Domain	Indicator	Criteria
	Clarity of relationship with behavioral health problem	Scientific evidence shows strong association (Temporality/Specificity/Strength) Relationship is well-understood by a broad spectrum of stakeholders
	Sensitivity to change in problem (Dose response)	Change/reduction in the factors contributing to the problem behavior or the problem would lead to change in the indicator rate
<b>Nature of Relationship</b>	Magnitude (Burden/breadth of problem)	A relatively large number of people are affected Health disparities are evident for certain subgroups of the population The number affected is sufficient to assess statistically significant change over time, settings and sub-groups
	Impact (Depth of problem across dimensions)	The social (i.e., health, economic, criminal justice) costs are high
	Changeability (Reversibility)	The indicator is amenable to change Evidence-based strategies are available to affect change in indicator
<b>Readiness</b>	Readiness	Broad-based consensus that the issue is important Resources are available to implement identified strategies Identified strategies are acceptable to key stakeholders Cost/benefit ratio of identified strategies is reasonable

### SEOW Assessment of Subpopulations:

One of the key responsibilities of the SEOW is to review available data on subgroup differences in substance use/mental health problems to assess and address health disparities in Connecticut. Previous experience shows that many datasets do not provide sufficient information on subgroups of the population, often those that are especially vulnerable to health disparities. With respect to investigation of health inequities, ethnic and racial group analyses for Connecticut are likely to be limited to Caucasian, African American, and Hispanic subgroups due to the small population sizes of other groups in the state. However, special studies and reports relevant to smaller population groups, such as Native Americans and Asians, will be sought to supplement the survey data.

### SEOW Summary of Responsibilities for the Next 5 years:

- 1) Guiding data acquisition and selection for the SEOW Data Portal;
- 2) Statewide substance abuse and behavioral health needs assessment, with strong emphasis on populations experiencing health disparities;
- 3) Managing and advocating for enhanced data-driven planning from the state to the local level.