

KEY FINDINGS FROM A COUNCIL ON LINKAGES SURVEY OF PUBLIC HEALTH WORKERS

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Presenter Disclosures



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(1) The following personal financial relationships with commercial interests relevant to this presentation existed during the past 12 months:

No relationships to disclose

Welcome



- Background
- Methodology
- Results
- Policy Implications



Background

Objectives

1. Collect information from governmental public health workers on how and why they entered public health and why they remain
2. Explore using the TRAIN system as a method for accessing public health workers
 - ▣ Public Health Foundation
 - ▣ Most widely used online training system in the US for public health workers (22 states, 4 states use with all PH workers)
 - ▣ Almost $\frac{1}{2}$ million registered users of which approximately $\frac{1}{3}$ identified as governmental public health workers

Visualizing Public Health



Public Health Agencies

Individual Health Workers

Community Indicators

Health Outcomes

Who and When

- Council on Linkages Between Academia and Public Health Practice
 - ▣ 19 national public health organizations
 - ▣ Formed in 1992
 - ▣ Financial support from CDC and HRSA
- Survey conducted in spring 2010

Council on Linkages Between Academia and Public Health Practice

- To improve public health practice, education, and research by:
 - ▣ Fostering, coordinating, and monitoring links among academia and the public health and healthcare community;
 - ▣ Developing and advancing innovative strategies to build and strengthen public health infrastructure; and
 - ▣ Creating a process for continuing public health education throughout one's career.

□ 19 National Public Health Organizations:

- ▣ American College of Preventive Medicine
- ▣ American Public Health Association
- ▣ Association for Prevention Teaching and Research
- ▣ Association of Accredited Public Health Programs
- ▣ Association of Public Health Laboratories
- ▣ Association of Schools of Public Health
- ▣ Association of State and Territorial Health Officials
- ▣ Association of University Programs in Health Administration
- ▣ Centers for Disease Control and Prevention
- ▣ Community-Campus Partnerships for Health
- ▣ Health Resources and Services Administration
- ▣ National Association of County and City Health Officials
- ▣ National Association of Local Boards of Health
- ▣ National Environmental Health Association
- ▣ National Library of Medicine
- ▣ National Network of Public Health Institutes
- ▣ National Public Health Leadership Development Network
- ▣ Quad Council of Public Health Nursing Organizations
- ▣ Society for Public Health Education



Methodology

Methodology

- Population: 70,315 registered TRAIN users identified by the research team as governmental public health workers
- Power calculations: 3,000 randomly selected participants drawn to get a minimum of 400 respondents for a desired margin of error of $\pm 5\%$ generalizable to the population of 70,315
- Final sample size: 484 respondents

Census and a Sample

This presentation discusses the findings of the generalizable sample data only.

- Concurrent census of the 70,315 registered TRAIN respondents resulted in over 12,000 respondents.
- Sample data are generalizable.

Methodology

- The researchers invited via **email** the randomly selected workers to take the **online** survey.
- The selected workers received several reminder emails seeking their participation and offering incentives for participation.



Results



Results

- Location: Respondents answered from 40 of the 50 states as well as the District of Columbia. The majority of respondents were registered via the 22 states which regularly utilize the TRAIN system.
- Gender: 78% of respondents reported they are female.

Results

- Ethnicity: In terms of ethnicity, 9.9% of respondents self-identify as Hispanic, Latino or of Spanish origin.
- Position: Making up 27.7% of respondents, nurses make up the most common job role listed by respondents. This is not surprising: the 2008 NACCHO Profile of Local Health Departments found that nurses were the most common FTE (full-time equivalent) positions employed in local health departments. Ninety-four percent of local health departments employ nurses with nursing positions comprising a third of all FTEs in a local health department.

Race	N (Percentage)
American Indian or Alaska Native	12 (2.5)
Asian	13 (2.7)
Black or African American	30 (6.2)
Native Hawaiian or other Pacific Islander	1 (0.2)
White	381 (78.7)

Educational Level	Highest Level Completed When First Became a Public Health Professional	Highest Currently Completed
High School	71 (16.0)	50 (11.3)
Associate degree	84 (19.0)	81 (18.3)
Bachelors degree in public health	17 (3.8)	15 (3.4)
Other bachelors degree	155 (35.0)	142 (32.1)
Masters degree in public health	26 (5.9)	37 (8.4)
Other masters degree	65 (14.7)	81 (18.3)
Doctoral degree in public health	3 (0.7)	4 (0.9)
Other doctoral degree	7 (1.6)	13 (2.9)
Other advanced degree (e.g. MD, JD,etc.)	15 (3.4)	20 (4.5)

Work Setting	
Local (e.g. county, municipality, township)	182 (45.8)
District/region within a state	60 (15.1)
Tribal	1 (0.3)
State/territory	131 (33.0)
Multi-state	6 (1.5)
National	17 (4.3)
Population of Jurisdiction Served by Current Employer	
<25,000	42 (16.5)
25,000 to 49,999	38 (14.9)
50,000 to 99,999	45 (17.6)
100,000 to 249,999	59 (23.1)
250,000 to 499,999	31 (12.2)
500,000 to 999,999	20 (7.8)
1 million or more	20 (7.8)
Size of Respondent's Current Organization	
Not sure/Unknown	41 (10.0)
Less than 25	37 (9.0)
25 to 99	111 (27.0)
100 to 499	101 (24.6)
500 to 999	25 (6.1)
1,000 to 9,999	71 (17.3)
10,000 or more	25 (6.1)

Recruitment Factor	Mean	Median	SD
Specific Work Functions or Activities Involved in Current Position	7.04	8.00	2.66
Job Security	6.87	7.00	2.97
Competitive Benefits	6.73	7.00	3.17
Identifying with the Mission of the Organization	6.61	7.00	3.13
Personal commitment to public service	6.26	7.00	3.20
Wanted a job in the public health field	6.03	7.00	3.54
Enjoy living in the area (e.g. climate, amenities, culture)	5.99	7.00	3.62
Future Opportunities for Training/Continuing Education	5.80	6.00	3.27
Wanted to live close to family and friends	5.73	7.00	3.83
Flexibility of Work Schedule	5.52	6.00	3.49
Ability to Innovate	5.48	6.00	3.21
Future Opportunities for Promotion	4.69	5.00	3.41
Competitive Salary	4.67	5.00	3.43
Autonomy/Employee empowerment	4.33	5.00	3.47
Immediate Opportunity for Advancement/Promotion	3.67	3.00	3.31
Needed a job, but it didn't matter if it was in public health	3.60	3.00	3.66
Wanted to work with specific individual(s)	3.18	2.00	3.37
Family member/role model was/is working in public health	1.52	.00	2.81
Ability to Telecommute	1.24	.00	2.55

Retention Factor	Mean	Median	SD
Job Security	7.31	8.00	3.05
Specific Work Functions or Activities Involved in Current Position	6.80	7.00	2.89
Personal commitment to public service	6.69	8.00	3.21
Competitive Benefits	6.68	7.00	3.25
Identifying with the Mission of the Organization	6.63	7.50	3.18
Enjoy living in the area (e.g. climate, amenities, culture)	6.34	7.00	3.64
Wanted a job in the public health field	6.22	7.00	3.56
Flexibility of Work Schedule	6.19	7.00	3.46
Wanted to live close to family and friends	6.06	7.00	3.88
Future Opportunities for Training/Continuing Education	5.86	6.00	3.30
Ability to Innovate	5.66	6.00	3.35
Competitive Salary	4.95	5.00	3.43
Wanted to work with specific individual(s)	4.84	5.00	3.75
Autonomy/Employee empowerment	4.82	5.00	3.47
Future Opportunities for Promotion	4.06	4.00	3.48
Immediate Opportunity for Advancement/Promotion	3.29	2.00	3.29
Needed a job, but it didn't matter if it was in public health	3.24	2.00	3.57
Ability to Telecommute	1.70	.00	2.98
Family member/role model was/is working in public health	1.60	.00	2.89



Policy Implications

TRAIN as an Access Tool to Workers

- Limitations
- In terms of affordability and a standard means of approaching potential study participants, TRAIN may be the only viable mechanism open to researchers currently.

Policy Implications

- Recruitment, retention, and morale among public health workers linked to identification with job duties and their agencies' mission. Emphasis of this link may improve morale and efficiency.
- Benefits are important to workers who consistently rate competitive benefits above competitive salaries.

Policy Implications

- Younger workers rate career advancement opportunities and the ability to telecommute higher than their older co-workers.
- Relatively few workers have increased their levels of education since joining public health agencies, but support for educational opportunities (advancing a degree or job training) are rated relatively highly.

Next Steps

- Original Intent:

- Council on Linkages to develop evidence-based recruitment and retention strategies based on findings

- Current Reality:

- #1 retention strategy today is retaining the positions of governmental public health workers
- Council on Linkages is turning its attention to how positions can be preserved and expanded under the Affordable Care Act

Questions?



Thank you.

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