Aligning in Crisis: Building Data-Sharing Capacity

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The triple crisis of the COVID-19 pandemic, the 2020 economic downturn, and the ongoing impact of structural racism is encouraging organizations to work across sectors to meet residents' most pressing needs. With the recent influx of federal funds from the American Rescue Plan Act (ARPA), cities, counties, and states have an unprecedented opportunity to reshape communities in ways that emphasize equity and resilience, addressing not only the effects of the pandemic, but also larger, systemic shortcomings that allow societal inequities to persist.

To fully maximize these investments, leaders from health care, public health, and social services can continue to leverage learnings from the past year to rebuild from the triple crisis; implement a comprehensive vision; and lay the foundation for an equitable, thriving, and sustainable future.

Key Lessons From Louisiana's Investments in Shared Data

Sharing pertinent data and addressing revealed disparities creates an excellent opportunity to reshape communities and drive lasting change as cities and states move out of a pandemic response phase into a rebuilding phase. Shared data was a driving force in forming Louisiana's COVID-19 Health Equity Task Force,[1] allowing the state to tackle substantial health disparities.

As Aligning Systems for Health notes,[2] data can effectively drive the work of aligning systems. Data linked to evaluation plans can implement feedback loops wherein needs, efforts, and health outcomes are tied together cyclically to assess progress toward health equity. On April 10, 2020, Gov. John Bel Edwards created the Louisiana COVID-19 Health Equity Task Force, citing that 70% of COVID-19 deaths in Louisiana were among Blacks.[3] The COVID-19 crisis demonstrated how disparities in living conditions and social opportunities negatively influence health outcomes for communities of color in Louisiana and around the nation.

The task force[4] and nine subcommittees[5] included diverse representation of community members, ensuring that community voices would be heard in every aspect of planning and engagement. The task force's organizing members understood that individuals' lives are not siloed the way data often are. A comprehensive plan to combat health disparities needs a holistic look at data from across sectors to identify systemic shortfalls that contribute to health disparities. The task force collected data from various agencies, states, and nonprofits to pinpoint data gaps; refined data

[1] Southern University System. Louisiana COVID-19 Health Equity Task Force. https://www.sus.edu/page/louisiana-covid19-health-equity-task-force

[2] Landford, D., Petiwala, A., Lander, G., Minyard, K. (2021). Aligning healthcare, public health and social services: A scoping review of the role of purpose, governance, finance and data. *Health and Social Care in the Community*, 1-15. https://doi.org/10.1111/hsc.13374

[3] Louisiana Illuminator. (2020). COVID-19 health equity task force sends recommendations to Gov. Edwards. Louisiana Illuminator. https://lailluminator.com/2020/07/08/covid-19-health-equity-task-force-sends-recommendations-to-gov-edwards/

[4] Southern University System. Louisiana COVID-19 Health Equity Task Force: Task Force Members. https://www.sus.edu/page/task-force-members

[5] Southern University System. Louisiana COVID-19 Health Equity Task Force: Task Force Subcommittees. https://www.sus.edu/page/task-force-Subcommittees

collection, better capturing disparities; and identified policy changes that supported the creation of a more equitable health system. The task force sent their recommendations for systemwide changes and platform development to the governor in July 2020 in a public report.[6]

One task force subcommittee developed and executed plans to create a Louisiana Health Equity Dashboard.[7] Unveiled in April 2021, the renamed Louisiana State Health Assessment Dashboard maps demographics and health factors statewide from nine different geographic regions. It creates a powerful opportunity to provide transparent, easily accessible, consolidated data to inform policy and practice shifts to support vulnerable populations experiencing health inequity. This data can help organizations, policymakers, and community members measure the progress of influential social and environmental factors against health outcomes.

The Louisiana Department of Health's Bureau of Planning and Performance now operates the dashboard and plans to develop it continuously. To maximize community engagement in the pursuit of health equity, the Louisiana Health Department hosts virtual regional meetings to gather feedback on participants' visions for health in Louisiana and their perspectives on the dashboard. They plan to synthesize their findings and create a four-year collaborative state health improvement plan to tackle existing inequities and improve health across the state.

Investments in shared data are critical to ensuring communities not only rebuild from the effects of the crisis but also thrive in ways that are equitable and sustainable. Those grappling with developing strategies to maximize federal recovery funds might consider how Louisiana's example emphasizes public input and equity, which are principles articulated in the federal guidance for the implementation of the fiscal recovery funds.[8]

- Public Input: Including diverse community voices in formulating strategic plans can create greater buy-in for the work and help limit unintended consequences to the plans. Additionally, dashboards create a public, user-friendly way for citizens to see and interpret data. In Louisiana, various community members participated in the task force's work and on the subcommittees. Researchers, health care professionals, faith leaders, and community-based organization representatives all worked together to address health equity and communicate their work to their communities. Once developed, the dashboard provided an opportunity for citizens, programs, and policymakers to see factors that negatively impact health and those that promote positive changes to bring about more equitable outcomes.

- Equity: By including disaggregated data, according to geography and demographics such as race and gender, dashboard users can track whether or not progress is made on closing health equity gaps and if an area is reaching universal levels of service. In Louisiana, two task force subcommittees reviewed data concerning vulnerable populations — specifically those in nursing homes and the incarcerated. They found no disaggregated data was available and recommended that data-collection procedures change to identify better existing health equity gaps.

By seeking public input and emphasizing equity while they make plans to use the federal funds available through ARPA, communities can emerge resilient from the triple crisis and create a thriving, sustainable future.

💡 Tips for Modeling Data Sharing

Lessons from the Louisiana COVID-19 Health Equity Task Force can be applied to other collaborative efforts that embed data sharing into solutions to address health disparities by:

- Including community members in the planning around data sharing.
- Making data accessible and usable for all can enhance community engagement.
- Identifying gaps in data for specific populations creates an opportunity to enhance the comprehensiveness of data collection and better identify health inequities.

[6] Louisiana COVID-19 Health Equity Task Force. (2020). Louisiana COVID-19 Health Equity Task Force: Subcommittee report. https://www.sus.edu/assets/LaCOVID/AUGUST-COVID-Task-Force-Subcommittee-Reports.pdf

[7] Louisiana COVID-19 Health Equity Task Force. (2021). Louisiana State Health Assessment. https://dashboards.mysidewalk.com/louisiana-state-health-assessment/assessing-health-equity-b2a71075c42a

[8] Department of Treasury. (2021). Coronavirus state and local fiscal recovery funds. Federal Register. 26786-26824. https://www.federalregister.gov/documents/2021/05/17/2021-10283/coronavirus-state-and-local-fiscal-recovery-funds