

## **Project Abstract Summary**

The purpose of MA HSP is to monitor health risks and health outcomes, set public health priorities, plan public health programs, and set strategic directions for the Department. In its work, HSP takes a collaborative approach to survey development, implementation, and dissemination. We work closely with CDC personnel, the MDPH Commissioner's Office, program representatives in the MDPH internal workgroup, an external advisory committee, and interested community organizations. The importance of this collaborative effort is underscored by the fact that MDPH started the process of becoming an accredited public health department in 2014. Collaboration is a required element of the strategic plan.

The Massachusetts Health Survey Program works towards improvements on the two short- and mid-term outcomes: 1) Increased access to BRFSS data for MDPH and its partners; and 2) Increased use of BRFSS to inform state public health actions.

The Behavioral Risk Factor Surveillance System (BRFSS) is the cornerstone for the Massachusetts Department of Public Health's (MDPH) surveillance system to monitor health status and risk behaviors of Massachusetts adults. It is the longest continuous running survey administered on health behaviors in the state of Massachusetts (MA). In 1986, MA began participating in the BRFSS and created the MDPH Health Survey Program (HSP) to coordinate BRFSS administration and adhere to the requirements set forth by the Centers for Disease Control (CDC). Over the next 28 years, HSP expanded the scope of the BRFSS survey by increasing the sample size, adding optional modules and state-specific questions, developing and utilizing a complex sample design with a 3 split sample, adding cell phone mode, and over-sampling cities with diverse populations. The MA BRFSS is an important source of public health information for the overall state as well as for geographic areas within such as towns/cities, counties, and regions.

In the next 5 years, MDPH will expand the vision of the BRFSS so survey data is better integrated into program planning and performance management. Both of these goals are required for public health accreditation and can be found in the State Health Improvement Plan (SHIP). To accomplish these goals, MDPH must maintain a robust sample while increasing the percentage of cell phone surveys to 50%. This will enable MA to develop more accurate sub-state estimates of health risk behaviors and also develop innovative methods of analyzing BRFSS data in conjunction with other available health data. BRFSS is one of many data sources available on the health of MA residents; other sources include medical claims, electronic health record, death and birth data, cancer registry, as well as other survey data. Historically, these data have been used independently of one another. In the next 5 years, it is critical that health data sets developed for independent purposes be used in combination. With this broader vision of data use and access, the state can achieve its goals for planning and health improvement established in the SHIP. To improve preventable chronic diseases and conditions, the (HSP) will work collectively with all interested parties to disseminate timely, coordinated information that is available at a community and sub-population level so it can inform public health actions.