

APPENDIX F

FHOP Data Source Advantages and Disadvantages

The following table identifies advantages and disadvantages of state and federal data sources recommended for use in measuring selected indicators. State data sources are presented first. Federal data sources are grouped by the sponsoring agency or organization, such as the Centers for Disease Control and Prevention (CDC). The federal agency or department from which the data are disseminated and, where available, the World Wide Web page address are noted.

Data Source	Advantages	Disadvantages
State Data Sources		
Hospital Discharge	Ongoing data collection and availability Valuable for monitoring use and cost of hospital services Detailed information on diagnoses, procedures and external cause may be used to measure morbidity and injuries	Unduplicated count may be difficult to determine if data set contains no individual identifiers Not available in all states Often a two-year lag between data collection and data availability for analysis
Vital Statistics: Birth Certificate Birth/Death Cohort File	Ongoing data collection and availability Inexpensive Standardized manner of data collection Near complete coverage of vital events Many natality and mortality indicators may be derived from this source	Risk behavior, pregnancy condition and neonatal outcome data may be incomplete Availability of risk behavior, pregnancy condition and neonatal outcome data varies from state to state 1 to 2 year delay in availability of cohort file following data collection

Data Source	Advantages	Disadvantages
Vital Statistics: Fetal Deaths	Ongoing data collection and availability Inexpensive Standardized manner of data collection	Data reporting may be incomplete or inconsistent due to differences in recording therapeutic abortions
Vital Statistics: Death Certificate	Ongoing data collection and availability Inexpensive Standardized manner of data collection Near complete coverage of vital events	Cause of death may be coded inconsistently

Data Source	Advantages	Disadvantages
Federal Data Sources		
CENTERS FOR DISEASE CONTROL AND PREVENTION (CDC)		
<p>National Health and Nutrition Examination Survey (NHANES)</p> <p>Division of Health Examination Statistics National Center for Health Statistics</p> <p>http://www.cdc.gov/nchswww/nchshome.htm</p>	<p>Ongoing data collection and availability</p> <p>Rich data source for health and nutrition information for women and children</p>	<p>2 to 5 year delays in data availability</p> <p>Weighting software needed to obtain national estimates from survey data</p>
<p>National Health Interview Survey (NHIS)</p> <p>Division of Health Interview Statistics National Center for Health Statistics</p> <p>http://www.cdc.gov/nchswww/nchshome.htm</p>	<p>Ongoing data collection and availability</p> <p>Provides incidence and prevalence of health conditions information</p> <p>Contains data for health condition risk factors</p> <p>Nationwide sample</p>	<p>2 to 5 year delays in data availability</p> <p>Large sampling errors of estimates for small populations</p> <p>Weighting software needed to obtain national estimates from survey data</p>
<p>National Hospital Discharge Survey (NHDS)</p> <p>Division of Health Care Statistics National Center for Health Statistics</p> <p>http://www.cdc.gov/nchswww/nchshome.htm</p>	<p>Ongoing data collection and availability</p> <p>Rich data source for use of hospital services information</p> <p>Data available for expected payment source, length of stay, diagnoses and procedures</p> <p>Nationwide data</p>	<p>Geographic specificity limited to region of country</p> <p>Limited number of race categories</p> <p>Race missing in 20% of records</p> <p>Ethnicity not included on public use tapes</p> <p>Represents number of events, not individuals</p> <p>Delays of two years or more in data availability</p> <p>Weighting software needed to obtain national estimates from survey data</p>

Data Source	Advantages	Disadvantages
Federal Data Sources		
CENTERS FOR DISEASE CONTROL AND PREVENTION (CDC)		
<p>National Maternal and Infant Health Survey (NMIHS)</p> <p>Division of Vital Statistics National Center for Health Statistics</p> <p>http://www.cdc.gov/nchswww/nchshome.htm</p>	<p>Rich resource for data on pregnant women and infants</p> <p>Data collected on live births, fetal deaths and infant deaths</p> <p>Nationwide sample</p>	<p>Data available for 1988 cohort only</p> <p>Weighting software needed to obtain national estimates from survey data</p>
<p>National Notifiable Diseases Surveillance System (NNDSS) and Morbidity and Mortality Weekly Report (MMWR)</p> <p>Editor, MMWR Series, Mailstop C-08, Centers for Disease Control and Prevention, Atlanta, GA 30333</p> <p>http://www.cdc.gov/epo/mmwr/mmwr.html</p>	<p>Ongoing data collection and availability</p> <p>Weekly and annual reports available in Morbidity and Mortality Weekly Report (MMWR)</p> <p>Data available for conditions such as measles, mumps, pertussis, and rubella</p> <p>Nationwide data</p>	<p>Represents number of events, not individuals</p> <p>Limited race/ethnic specificity</p> <p>Reporting of sensitive diagnoses such as sexually transmitted diseases may be incomplete or inconsistent</p>

Data Source	Advantages	Disadvantages
Federal Data Sources		
CENTERS FOR DISEASE CONTROL AND PREVENTION (CDC)		
<p>National Survey of Family Growth (NSFG)</p> <p>Division of Vital Statistics National Center for Health Statistics</p> <p>http://www.cdc.gov/nchswww/nchshome.htm</p>	<p>Rich data source for contraception, family planning, prenatal care, fertility and sexually transmitted disease information</p> <p>Nationwide sample</p>	<p>Data collected in six- to eight-year cycles</p> <p>Limited race/ethnic specificity</p> <p>Sample size not adequate for reliable analysis of Asians and American Indians</p> <p>State of residence not available</p> <p>Weighting software needed to obtain national estimates from survey data</p>
<p>National Vital Statistics System</p> <p>Division of Vital Statistics National Center for Health Statistics</p> <p>http://www.cdc.gov/nchswww/nchshome.htm</p>	<p>Ongoing data collection and availability</p> <p>Standardized manner of data collection</p> <p>Near complete coverage of vital events</p> <p>Many natality and mortality indicators may be derived from this source</p>	<p>Risk behavior, pregnancy condition and neonatal outcome data may be incomplete</p> <p>Not all states report all risk behaviors</p>
<p>Pediatric Nutrition Surveillance System (PedNSS)</p> <p>Division of Reproductive Health National Center for Chronic Disease Prevention and Health Promotion</p> <p>http://www.cdc.gov/nccdphp/nccdhome.htm</p>	<p>Program-based nutrition surveillance system</p> <p>Programs include WIC, EPSDT and Head Start</p> <p>Rich data source for nutrition status of low-income infants and children</p> <p>Nationwide sample</p>	<p>Program-specific data collection methods may impair comparability of data</p> <p>Data are owned by the participating state, territory or reservation and may be released only with permission from the participants</p>

Data Source	Advantages	Disadvantages
Federal Data Sources		
CENTERS FOR DISEASE CONTROL AND PREVENTION (CDC)		
<p>Pregnancy Nutrition Surveillance System (PNSS)</p> <p>Division of Reproductive Health National Center for Chronic Disease Prevention and Health Promotion</p> <p>http://www.cdc.gov/nccdphp/nccdhome.htm</p>	<p>State-based surveillance system Data currently collected in 22 states Includes data on low-income women only Health status measures, prenatal care and risk factor data available</p>	<p>Data are not available for all states Data are collected using a convenient sample and therefore are not generalizable to the overall population Data are owned by the participating state, territory or reservation and may be released only with permission from the participants</p>
<p>Pregnancy Risk Assessment and Management System (PRAMS)</p> <p>Division of Reproductive Health National Center for Chronic Disease Prevention and Health Promotion</p> <p>http://www.cdc.gov/nccdphp/nccdhome.htm</p>	<p>Rich resource for data on pregnant women and infants Population-based surveillance system containing self-reported behavior information from mothers Uses standardized data collection methods across states for core content</p>	<p>Data collection currently limited to 14 states Self-reported data are not verified by medical record review, raising the possibility of poor data reliability and accuracy Data are state-owned Questionnaire data cannot stand alone, but must be linked with birth certificate data</p>
<p>Youth Risk Behavior Surveillance System (YRBS)</p> <p>Division of Adolescent and School Health National Center for Chronic Disease Prevention and Health Promotion</p> <p>http://www.cdc.gov/nccdphp/nccdhome.htm</p>	<p>Ongoing data collection and availability Data collected on injuries, tobacco, alcohol and other drug use, sexual activity, dietary behavior and physical inactivity Data collected using school- and household-based surveys</p>	<p>Data may not be available for all states Limited race/ethnic specificity Limited geographic specificity Self-reported data are not verified by medical record review, raising the possibility of poor data reliability and accuracy</p>

Data Source	Advantages	Disadvantages
Federal Data Sources		
DEPARTMENT OF COMMERCE		
Census of Population Bureau of the Census http://www.census.gov/	Ongoing data collection and availability Standardized data collection Data available for small areas Socioeconomic data available	Collected every ten years Does not have multiple racial coding
Current Population Survey Bureau of the Census http://www.bls.census.gov/cps/cpsmain.htm	Ongoing data collection and availability Data available for health conditions affecting women and children Nationwide sample Public use data usually available 6 to 12 months following data collection	Due to data collection methodology changes made in January, 1994, data collected before and after that date may not be comparable
NATIONAL INSTITUTES OF HEALTH		
Surveillance, Epidemiology and End Results Program (SEER) Cancer Statistics Branch National Cancer Institute http://www.nci.nih.gov/	Data collected from 11 population-based cancer registries Data for all residents diagnosed with cancer Follow-up data on previously diagnosed patients	Data available for four major urban areas, six states and Puerto Rico only

Data Source	Advantages	Disadvantages
Federal Data Sources		
NATIONAL INSTITUTES OF HEALTH		
Monitoring the Future (High School Senior Survey) http://www.nida.nih.gov/	Ongoing data collection and availability Data on drug use and related attitudes Data collected for 8th, 9th and 12th graders Self-administered questionnaire	Drop-outs and absent students are not included in the survey Often a two-year delay in reporting of results Limited race/ethnic specificity Limited geographic specificity

SUBSTANCE ABUSE AND MENTAL HEALTH SERVICES ADMINISTRATION		
National Household Surveys on Drug Abuse Office of Applied Studies http://samhsa.gov/	Ongoing data collection and availability Nationwide data for persons age 12 and over Allows reporting of substance abuse prevalence rates	Geographic location is suppressed

Resources for Data Source Evaluation

Other valuable resources to consider when evaluating data sources include:

From Data to Action (U.S. Department of Health and Human Services, Public Health Service, CDC. From Data to Action: CDC's Public Health Surveillance for Women, Infants and Children. Hyattsville, MD) This monograph gives information on public health surveillance and data programs at the CDC that are relevant to women, infant and children's health. It is organized into four major sections: the reproductive health of women, birth outcomes, child health, and adolescent health. Within each section, specific health outcomes are discussed. For each health outcome, the monograph provides information on its public health importance, a history of data collection, CDC surveillance activities, general surveillance findings, methodologic and interpretive issues, examples of using data, and future issues. An appendix includes contact persons for CDC surveillance and data programs relevant to women's and children's health.

Needs Assessment: Resource Handbook (U.S. Department of Health and Human Services, Public Health Service, Health Resources and Service Administration, Maternal and Child Health Bureau, Division of Systems, Education and Science. Hyattsville, MD. 1994). The Needs Assessment: Resource Handbook provides information on various data sources, including possible uses and additional information for specific data sources. In addition, the monograph provides an overview and brief bibliography of various primary data collection methodologies, including surveys, focus groups, nominal group technique, key informant interviews, participant observation, and community forums.

Health, United States (U.S. Department of Health and Human Services, Public Health Service, National Center for Health Statistics. Health, United States, 1995. Hyattsville, MD. 1996). This annual report provides information on the health status of the nation. It has a special section on women's health, as well as detailed tables covering the topics of health status (including fertility, natality and mortality) and health determinants, utilization of health resources, health care resources (personnel and facilities), and health care expenditures. An appendix discusses sources and limitations of data.

THE DIRECTORY OF MINORITY HEALTH AND HUMAN SERVICES DATA RESOURCES (PREPARED BY MOSHMAN ASSOCIATES, INC., BETHESDA, MD, FOR THE U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES). THE DIRECTORY WAS DEVELOPED AS A REFERENCE DOCUMENT ON MORE THAN ONE HUNDRED DATA RESOURCES WITHIN THE U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES THAT CONTAIN RACE AND ETHNICITY DATA. IT IS AN EXTREMELY USEFUL RESOURCE, DOCUMENTING DATA SOURCE STRUCTURE, DATA CONTENT, DATA LIMITATIONS, ONSET OF DATA COLLECTION, CURRENT STATUS OF DATA COLLECTION, DATA AVAILABILITY, DATA STORAGE MEDIA, AND THE NAME AND ADDRESS OF A CONTACT PERSON WHO CAN PROVIDE FURTHER INFORMATION REGARDING THE DATA SOURCE. A DESCRIPTION AND A COPY OF THE DIRECTORY ARE AVAILABLE ON THE WORLD WIDE WEB ON THE HOME PAGE OF THE U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES, OFFICE OF THE ASSISTANT SECRETARY FOR PLANNING AND EVALUATION (ASPE) AT [HTTP://WWW.OS.DHHS.GOV/PROGORG/ASPE/MINORITY/INDEX.HTML](http://www.os.dhhs.gov/progorg/aspe/minority/index.html).

