

The Institute for Social Public Health

Partnered with United Way's
75in5 project



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What is Social Public Health

It's local public health. Communities are well served when institutions bring policy into meaningful action through health-positive social norms. The SPH model is our guide to fostering community agency.

Leadership Training

Public health practicum & internship fellows learn to map social riskscales, investigate inequity-driven gaps, and create health-positive content. Fellows develop the skill of interdisciplinary communication to advance institutional change.





United Way's 75in5

What is it?

The United Way and community leaders have set a community-wide goal aiming to raise the percentage of Howard County Kindergartners' readiness levels from 45% currently to 75% in 5 years (2022).

The community has noticed that the children are not stating school ready to learn and instead lack key cognitive, social, emotional and language skills that are vital for further brain development

Who's Involved?

Uniform Assessment

1

Separate Groups

4

Community Volunteers

85

Powerful Future

1





What Was Done?

- Working with raw community data
 - Student evaluation based on 5 different domains:
 1. Approaches to learning
 2. Cognition and General Knowledge
 3. Language Development
 4. Physical Well-Being and Motor Development
 5. Social and Emotional Development
 - Manipulating, crashing, thinking, surfacing, data analysis and preparation
- Understanding ways to manipulate data in a way that is useful and applicable to the community being served
- Prewiring / Education / Training
 - “What” and “How” of the data

Learning Challenges/Takeaways



- Community received data needs to be cleaned, organized, and asked the right questions
- The data doesn't tell you the right answers on its own
- Community collected data is more time consuming and takes a closer engagement with those who collected the data to understand them
- Understand how to manipulate the data in a way that is useful and applicable to the community being served
- Qualitative data is more intuitive in today's world—their framework is more intuitive. Quantitative isn't, until you get through the cleansing process
- Expect pitfalls
- Be prepared to learn Excel
 - Working with community data ≠ working with IRB approved clinical data

What am I walking away with?

Experience

- Prewire for real-world data analysis scenario
- Training
 - Framework that can be applied toward organizing thoughts & data
- Epigenetic medicated pathway
- Ability to identify problem-barrier solution
- Ability to ask the right questions
- Comparison of data
- Cleaning the data
 - How do you group the data?
 - Teacher to student ration?
 - Are some categories of students more likely to received something that others don't?
 - Mean vs. Median
 - All the above can't be answered if questions are not asked

Thank
you

