

# Secretary's Advisory Committee on National Disease Health Promotion and Disease Prevention Objectives for 2030: Recommendations for the Healthy People 2030 Leading Health Indicators

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## **Introduction**

The Secretary's Advisory Committee on National Health Promotion and Disease Prevention Objectives for 2030 (the Committee) is a federal advisory committee composed of non-federal, independent subject matter experts. The Committee is responsible for making recommendations to the Secretary of the U.S. Department of Health and Human Services (HHS) for the development and implementation of the national health promotion and disease prevention objectives for Healthy People 2030.

After its inaugural meeting in December 2016, the Committee appointed several subcommittees, charging each with providing input on aspects of the initiative's development. These included the Approaches Subcommittee; the Subcommittee on Prioritization and Criteria for Objective Selection (Prioritization Subcommittee); the Data Subcommittee; the Subcommittee on Social Determinants of Health and Health Equity (SDOH and HE); and the Subcommittee on Stakeholder Engagement and Communication (Stakeholders Subcommittee) .

During its meeting on October 16, 2017, the Committee appointed a Subcommittee on Leading Health Indicators (LHIs) to develop recommendations on criteria for selecting LHIs. The LHI subcommittee met via teleconference from December 2017 through April 2018. The LHI Subcommittee developed recommendations that were presented the Committee. The Committee subsequently vetted the LHI Subcommittee's recommendations and developed the following recommendations regarding the LHIs and the criteria for selecting LHIs:

- LHIs for Healthy People 2030 will be drawn from Healthy People objectives to communicate the highest-priority health issues.
- The set of LHIs should contain a small number of objectives.
- Enough LHIs should be included in that set to focus attention and drive action on top health priorities.

The Committee charged the LHI Subcommittee with providing recommendations to the Secretary on issues related to:

- The definition of Leading Health Indicators (LHIs)
- The use of LHIs (past, present, future) and how LHIs can help Healthy People 2030 to achieve its mission and objectives
- The alignment of LHIs with the selection of Healthy People 2030 objectives/priority areas
- Criteria for LHI selection
- Use of the Healthy People 2030 Framework as a foundation for the criteria for selecting LHIs for the Healthy People 2030 initiative

- Consideration of the recommendations from other subcommittees as appropriate (e.g., Prioritization Subcommittee, SDOH and HE Subcommittee, Data Subcommittee, and Stakeholders Subcommittee) in recommending criteria for the selection of LHIs for Healthy People 2030

This report addresses the Committee's charge to provide guidance on how to define and select LHIs for Healthy People 2030. It presents the Committee's recommendations on the proposed definition of LHIs for Healthy People 2030 and outlines a process for identifying a set of LHIs for Healthy People 2030 by applying pre-established criteria. This report also builds upon the Committee's work to date, which includes the Healthy People 2030 Framework (Report #1) and recommendations on Developing Objectives, Setting Priorities, Identifying Data Needs, and Involving Stakeholders for Healthy People 2030 (Report #2). The final Healthy People 2030 Framework can be found in Appendix B of Report #2.

### **Definition**

LHIs are a selected set of measures of determinants and sentinel indicators of current and potential changes in population health and well-being.

***Rationale:*** As a selected group of measures, LHIs are central to Healthy People 2030. They represent key priorities that are meant to catalyze action and stimulate the commitment of resources to improve health and well-being. LHIs also serve as a bellwether (i.e., a predictor of change), providing early warning of existing and potential threats to population health and well-being. Each individual LHI provides critical data. As a group, the LHIs offer a comprehensive view of high-priority measures of health and well-being, and early signs of risk factors that impact morbidity, mortality, and well-being. LHIs serve as a sentry, standing watch over the health and well-being of the nation.

### **Criteria for Selecting a Set of LHIs**

Healthy People 2030 comprises 3 types of objectives—core, developmental, and research. The LHIs for Healthy People 2030 will be drawn from the **core** objectives because core objectives are defined as having valid, reliable, and timely data sources, as well as evidence-based interventions through which their targets can be met. The Committee proposes a set of criteria for selecting Healthy People 2030 LHIs that are informed by the Healthy People 2030 Framework, including the vision, mission, foundational principles, overarching goals, and plan of action.

All Healthy People 2030 core objectives have the attributes that are listed above. Selection criteria for LHIs include these attributes, as well as additional criteria, to inform the initial selection of potential LHIs from the core objectives. The LHI Selection criteria permit a list of potential LHIs to be curated in a more nuanced fashion. Further prioritization results in an LHI selection process that unfolds in 2 phases that are sequential but are likely to be iterative. In the 1st phase, a quantitative assessment is applied to individual measures from the pool of LHI candidate measures, drawn from the core objectives. A more qualitative assessment of possible sets of LHIs is conducted in the 2nd phase.

## **Criteria for selection of LHIs:**

### **Phase 1**

All core objectives should be assessed across the following 4 criteria:

- **Public health burden**—relative significance to the health and well-being of the nation
- **Magnitude of the health disparity** and the **degree to which health equity would be achieved** if the target were met
- The degree to which the objective is a **sentinel or bellwether**
- **Actionability** of the objective

**Rationale:** In Phase 1, 4 criteria are applied to the core objectives.

The 1st criterion, **public health burden**, is classically indicated by important metrics such as excess morbidity and mortality. Conversely, however, indicators may at first glance be viewed as having low public health burden (e.g., low levels of selected infectious diseases) due to current practice (e.g., vaccinations). For this reason, public health burden must also be assessed by whether it would be significant if current practice were not continued. Public health burden directly supports the mission of Healthy People 2030, which is to *“promote, strengthen, and evaluate the nation’s efforts to improve the health and well-being of all people.”*

The 2nd criterion focuses on the **magnitude of the health disparity and the degree to which health equity would be achieved if the LHI target were met**. It directly supports the overarching goal to *“eliminate health disparities, achieve health equity, and attain health literacy to improve the health and well-being of all.”*

The 3rd criterion emphasizes the role of LHIs in serving as a **sentinel** and **bellwether** for the state of the nation’s health and as a warning or harbinger of threats. This criterion supports the Healthy People 2030 plan of action to *“provide data that can drive targeted actions to address regions and populations with poor health or at high risk for poor health in the future.”*

**Actionability**, the final criterion, is multifaceted. It takes into account the state of available and actionable evidence, and the ability to improve health and well-being at a cost that is considered a good value. Actionability is informed by the foundational principle that *“promoting and achieving the nation’s health and well-being is a shared responsibility that is distributed across the national, state, tribal, and community levels, including the public, private, and not-for-profit sectors,”* and the plan of action to develop and make available *“affordable means of health promotion, disease prevention, and treatment.”*

**Description of Application:** Phase 1 is a focused assessment that applies a set of 4 criteria to each core objective in Healthy People 2030. A quantitative approach helps identify the initial set of potential LHI candidates. All core objectives would be assessed according to each criterion on a scale of 1 [not important] to 10 [very important]. A cumulative score would be calculated across the 4 criteria, ranging from 4 [least important] to 40 [most important]. Those core objectives with the highest ranked scores would be considered as candidates for the pool of possible LHIs for Healthy People 2030.

## **Phase 2**

The pool of possible LHIs that emerges from Phase 1 would then be subjected to an additional set of criteria before the final LHIs for Healthy People 2030 are selected. The Phase 2 criteria should be applied with the important assumption that the LHIs are to be viewed as a group. Individuals who apply these criteria to select the LHIs should assure that:

- The LHIs represent a **balanced portfolio** or cohesive set of indicators of health and well-being across the lifespan
- The LHIs are balanced between common, **upstream root causes** of poor health and well-being and measures of **high-priority health states**
- The LHIs are amenable to **policy, environmental, and systems** interventions at the local, state, tribal, and national levels
- The LHIs are **understandable** and will **resonate** with diverse stakeholders to drive action

***Rationale:*** Considerations for Phase 2 reinforce the foundational principles upon which Healthy People 2030 is based. They also reflect the Healthy People 2030 vision—*“a society in which all people can achieve their full potential for health and well-being across the lifespan”*—with the intent of attaining lives free of preventable disease, disability, injury, and premature death. Achievement of balance between upstream root causes and measures of high-priority health states in the final set of LHIs can be guided by the foundational principle that *“healthy physical, social, and economic environments strengthen the potential to achieve health and well-being.”* The final 2 criteria in Phase 2 emphasize the importance that LHIs as a set resonate with diverse stakeholders who must take action. This notion is specified in the foundational principle *“promoting and achieving the nation’s health and well-being is a shared responsibility that is distributed across the national, state, tribal, and community levels, including the public, private, and not-for-profit sectors,”* and the centrality of Healthy People 2030 as *“a component of decision-making and policy formulation across all sectors.”*

***Description of Application:*** Unlike the core objectives, the LHIs do not exist in isolation from one another. Therefore, an additional assessment of the LHIs as a group is warranted. In this 2nd phase, those who apply the additional criteria listed above would then evaluate the proposed set of LHIs as a whole. As various sets of potential LHIs are constructed during this phase, it is likely and indeed recommended that iterative movement between Phase 1 and Phase 2 take place until the final set of LHIs is selected. For example, it is possible that what emerges from the initial, Phase 1 process may not adequately balance the upstream root causes of poor health and well-being and measures of high-priority health states. It is also possible that the set would not resonate sufficiently across stakeholders to drive action.