U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health Translating Epidemiology into Action: Towards a Research-to-Policy Framework

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The Challenge of Translation

- Relevance of epidemiology to policy
 - Public health and clinical domains
 - Power of epidemiologic data to motivate action
 - Disconnects between epidemiology and policy
- Continuum of advocacy for an epidemiologist
- What does a policy maker looks for?
 - Short or long time from epidemiology to policy action
 - Incremental nature of policy development
- Needed framework for translation

Physical Activity & Childhood Obesity

- Defining the problem & choosing endpoints (PA, diet)
 - Obesity, energy intake, and energy expenditure
 - Ecologic context and individual action
- The role of evidence
 - Acting with limited evidence, gathering more evidence
 - Considering costs and benefits
 - "Promise Table" with cost considerations added
- Key analytic tools: systematic reviews
 - What does the evidence show?
 - What are the gaps in evidence?
 - \rightarrow Need for a broad based team

Physical Activity & Childhood Obesity Cont.

- Key considerations in dissemination of evidence
 - What policy-makers need and want
 - What information "works"?
- The need for a broadly-based team/advocates
- The role of an epidemiologist
 - Demonstrating the risks
 - Conducting surveillance
 - Adding measurement expertise to intervention/policy studies
 - Being an advocate (defined broadly)

Lowering the Blood Alcohol Concentration

- Epidemiologic data to shape the problem
 - Dose-response curves
- The power of timely evidence
 - Partnering with advocates
- The utility of expert reports
 - The need for systematic reviews and pooling
- The commitment of epidemiologists
 - Implications for career tracks
- Causal interpretation
 - Follow-up evaluation

Secondhand Smoke

- The importance of evidence on causation
 - The powerful role of critics
- When evidence does not motivate action
 - Understanding the hurdles
- The value of local data
 - Skills brought by an epidemiologist
- Policy evaluation
 - Akin to epidemiology

Compensation of Veterans for Injuries

- High-stakes decisions with multiple exposures
 - Difficulty in classifying causation
- Focus on elements of one existing process
 - Epidemiologic evidence \rightarrow IOM \rightarrow VA
- Real-world framework provides an opportunity to assess
 - Two step nature of process
 - New framework proposed to better use evidence
- Association vs. causation
 - Classification of strength of evidence
- Agencies need transparency
 - Assimilating and disseminating data

Cross-Cutting Themes Emerged

- Commonalities emerge from these case studies
 - Start with the big picture
 - Consider risks and benefits of action and inaction
- Expect some proactive and much reactive decision making
 - Have epidemiologic evidence ready when the time is ripe
- Understand the context in which policy will be made
 - Ask whether epidemiologic data can help define that context
 - There are cycles (albeit complex ones) in making policy
- Transdisciplinary teams are the "new normal"
 - The science of team science is emerging but we need more
- Be clear on the roles for epidemiologists

What Does This Imply for the Discipline?

- Where do epidemiologists fit?
 - What is the role of networks, coalitions, and professional organizations?
- What training for policy-making should epidemiologists get?
 - Can we find or develop modular teaching materials?
- Can we find new approaches for reaching policymakers with epidemiologic data?
 - Do we have the communications models to frame issues?

Case Studies

- Shawna L. Mercer, CDC
 - Alcohol Case Study: On .08% Blood Alcohol Content Laws
- Rachel Widome, CCDOR, University of Minnesota
 - Smoke-Free Environments
- Allen J. Wilcox, NIEHS
 - Veterans Compensation