

Longitudinal Analysis of Local Health Department Services: 2005 to 2008

NACCHO's National Profile of Local Health Departments (Profile) study includes a questionnaire on local health department (LHD) infrastructure and activities that is administered to every LHD in the United States. NACCHO has conducted five Profile studies between 1989 and 2008, and the Profile data can be used to examine trends in LHD practice over time. The purpose of this analysis was to examine how services offered by LHDs changed between 2005 and 2008.

To answer this question, this analysis used data from the 2005 and the 2008 Profile studies. For more information about background and methodology, please view the 2005 and 2008 National Profile of Local Health Departments main reports (www.naccho.org/profile).

This analysis included only LHDs that served the same geographic jurisdiction at the times of administration of the 2005 and 2008 Profile questionnaires. At some point between the administration of the 2005 and 2008 questionnaires, some LHDs merged together to serve a larger combined jurisdiction, and some LHDs broke off into multiple entities serving smaller jurisdictions. In addition, some LHDs in centralized states chose to report at different administrative levels in the 2005 and 2008 Profiles (e.g., they completed the 2005 Profile for county-level units but completed the 2008 Profile for multi-county districts). Consequently, LHDs in these states (i.e. Alaska, District of Colombia, and South Dakota) are omitted entirely from this analysis. This analysis also includes only LHDs that completed the questionnaires in both years. In total, 1880 LHDs were included in the analysis. The number of LHDs in this analysis represents approximately 67 percent of all LHDs in the US and approximately 81 percent of Profile respondents.

LHDs indicated on the Profile questionnaires whether they provided services either directly or by contract across 10 service categories: immunization; screening for diseases or conditions; communicable disease treatment; maternal and child health; personal health care services; population-based primary prevention; epidemiology and surveillance; regulation and inspection; environmental

health; and other miscellaneous services. Within each service category, some services did not appear on both questionnaires; therefore, this analysis focused on the 73 services that appeared on both. For each service, SPSS software was used to calculate proportions of LHDs that a) continued to provide a service; b) added a service after 2005 and provided it in 2008 c) eliminated a service after 2005 and did not provide it in 2008; and d) never provided a service in either year. This analysis did not differentiate between providing the service directly or by contract; LHDs were classified as providing a service if they checked either direct provision, provision by contract, or both on the questionnaire.

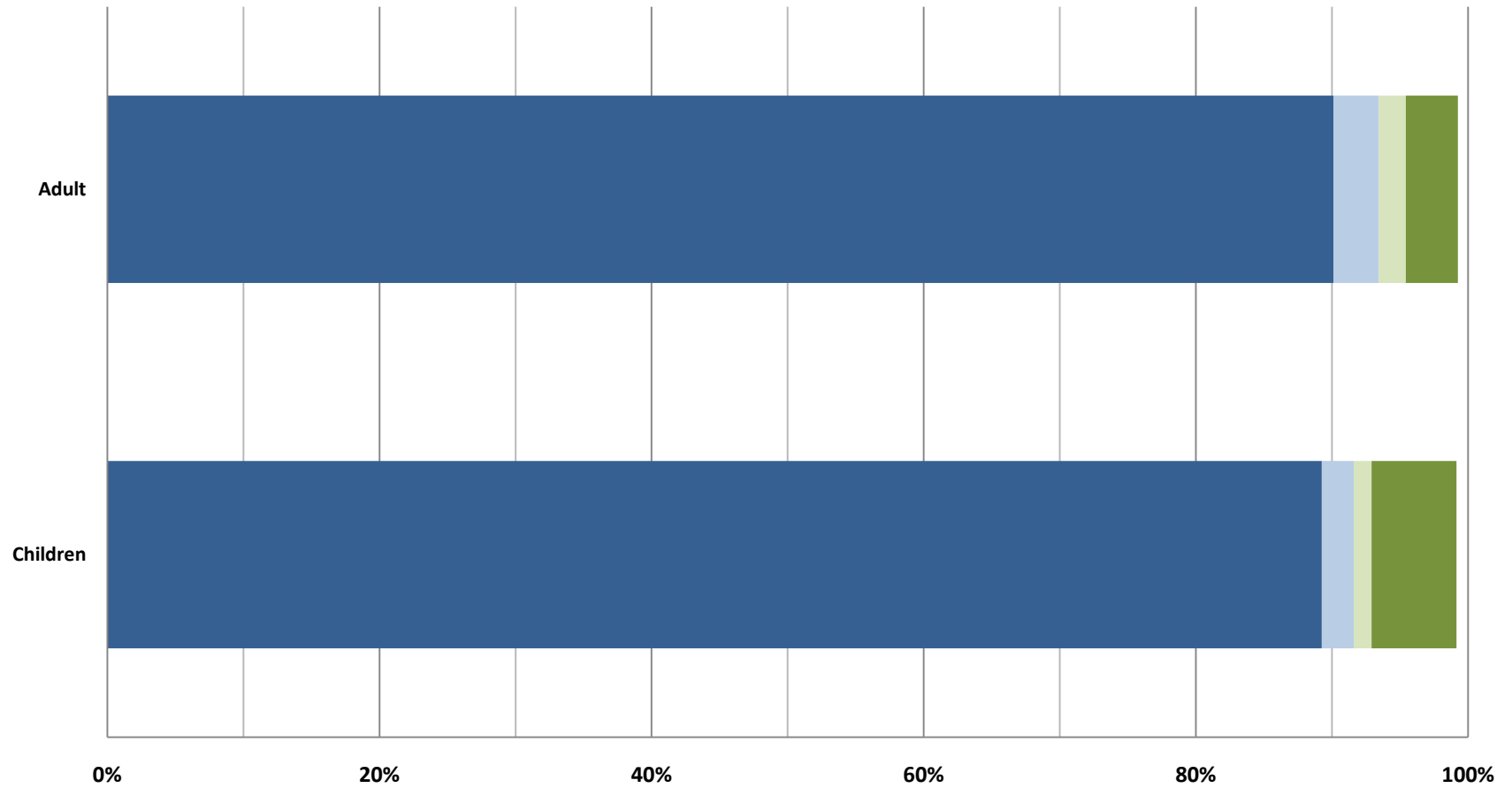
The following results are subject to some limitations: 1) respondents may have different interpretations of services listed on the Profile questionnaires (and these interpretations may differ between the two time periods); 2) data are self-reported by LHDs and were not independently verified; and 3) there may be differences between the LHDs included in the analysis and the LHDs that were excluded.

The figures included in this document present information about changes in LHD provision of services and activities in two ways. The odd numbered figures show the proportions of LHDs that a) continued to provide a service (LHD Continued); b) added a service after 2005 and provided it in 2008 (LHD Added); c) eliminated a service after 2005 and did not provide it in 2008 (LHD Eliminated); and d) never provided a service in either year (LHD Never). These figures provide complete data on changes in LHD service provision during this time period. The remaining even numbered figures provide a simplified presentation highlighting the proportions of LHDs that added or eliminated a service between 2005 and 2008. These figures give a sense of which services are more consistently provided by LHDs over time and which services are likely to change over time, based on funding, staffing, an LHD or community priorities.

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Figure 1. Distribution of LHDs Providing Immunization Services, 2005-2008



	Children	Adult
LHD Continued	89.3%	90.1%
LHD Added	2.3%	3.4%
LHD Eliminated	1.3%	2.0%
LHD Never	6.2%	3.8%

Figure 2. Percentage of LHDs Adding and Eliminating Immunization Services, 2005-2008

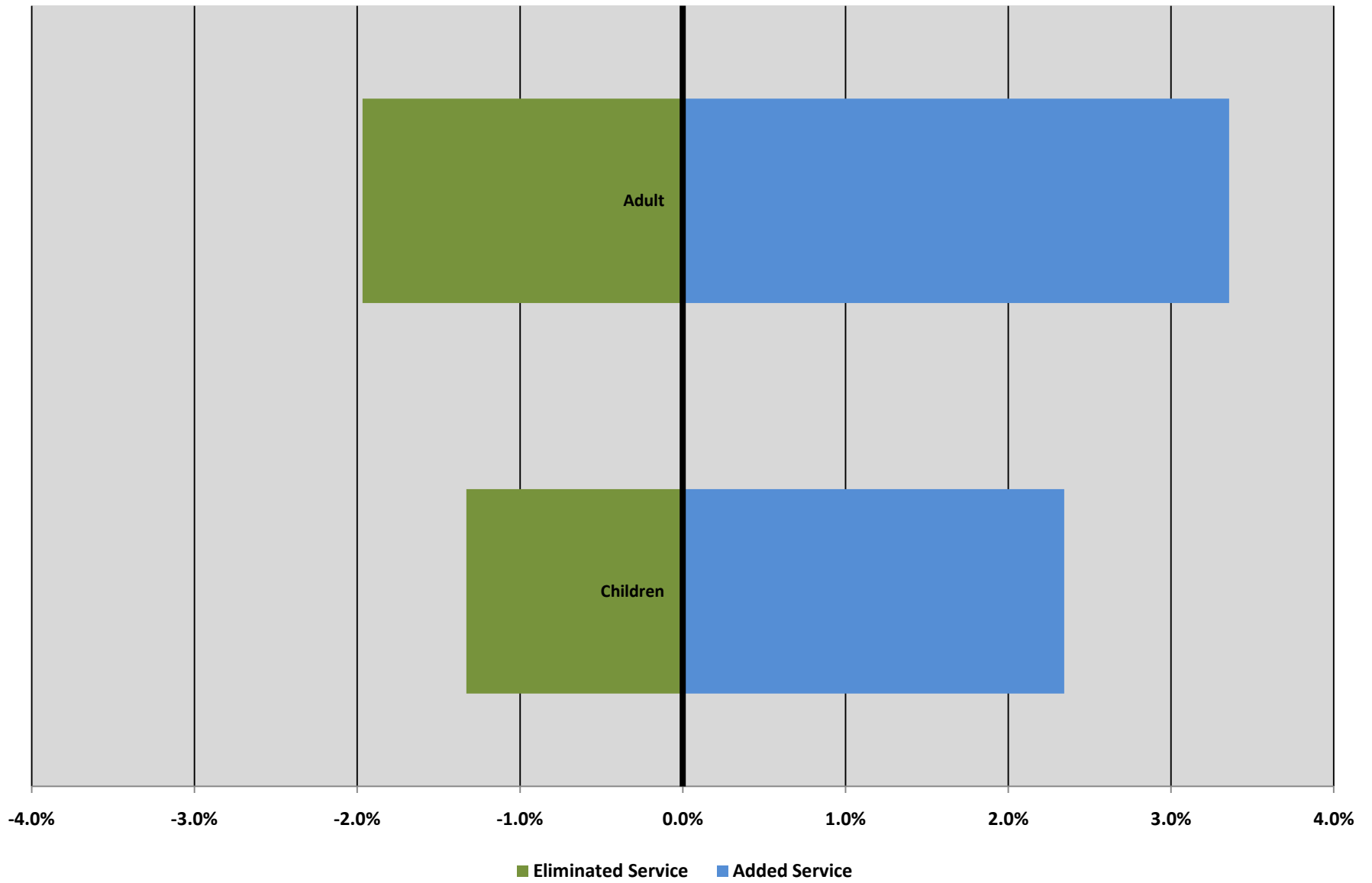
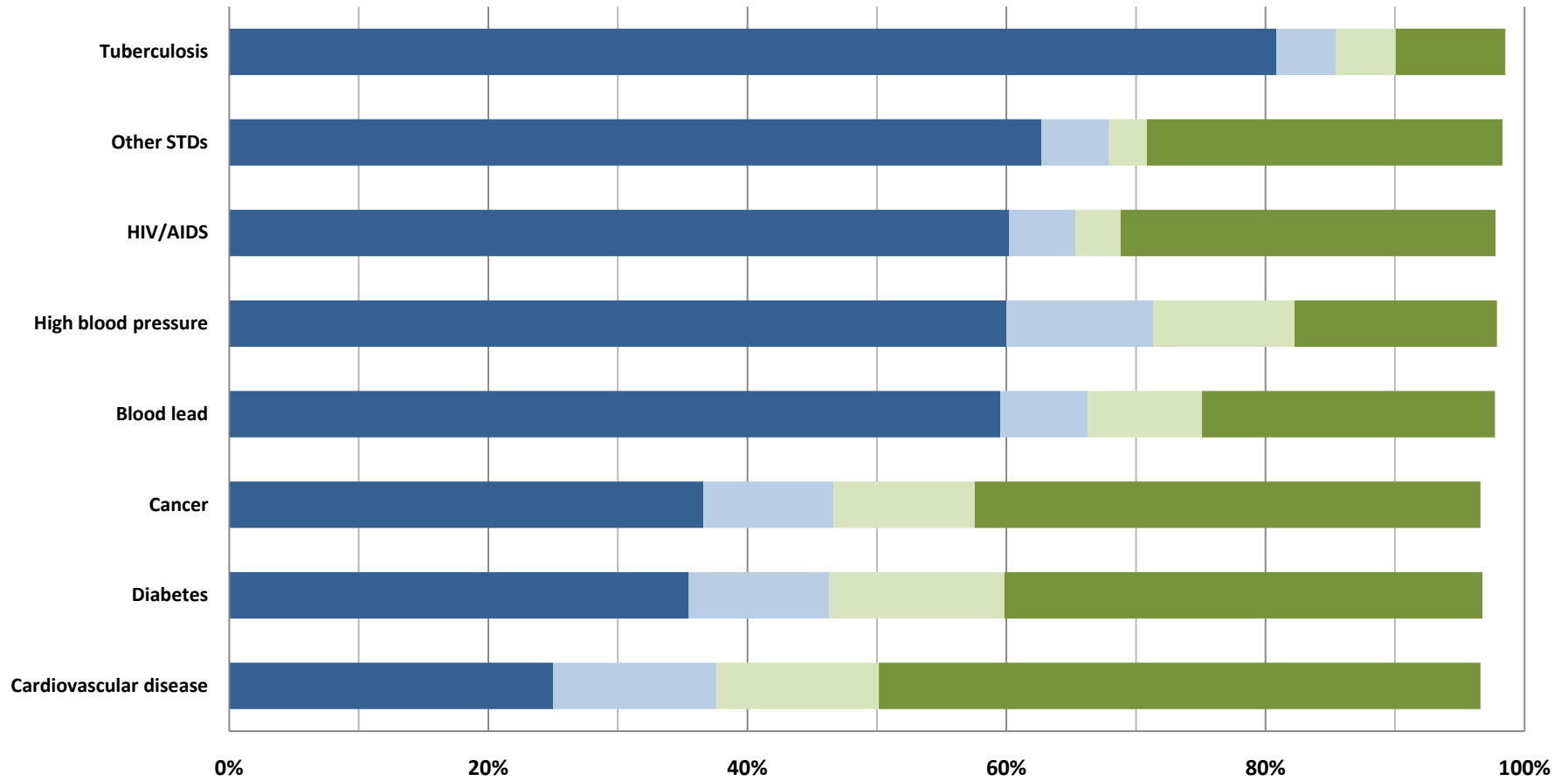


Figure 3. Distribution of LHDs Providing Screening for Diseases/Conditions, 2005-2008



	Cardiovascular disease	Diabetes	Cancer	Blood lead	High blood pressure	HIV/AIDS	Other STDs	Tuberculosis
■ LHD Continued	25.0%	35.5%	36.6%	59.5%	60.0%	60.2%	62.7%	80.9%
■ LHD Added	12.6%	10.9%	10.1%	6.8%	11.3%	5.1%	5.2%	4.6%
■ LHD Eliminated	12.6%	13.5%	10.9%	8.8%	10.9%	3.5%	2.9%	4.6%
■ LHD Never	46.4%	36.9%	39.0%	22.6%	15.6%	28.9%	27.4%	8.5%

Figure 4. Percentage of LHDs Adding and Eliminating Screenings for Diseases/Conditions, 2005-2008

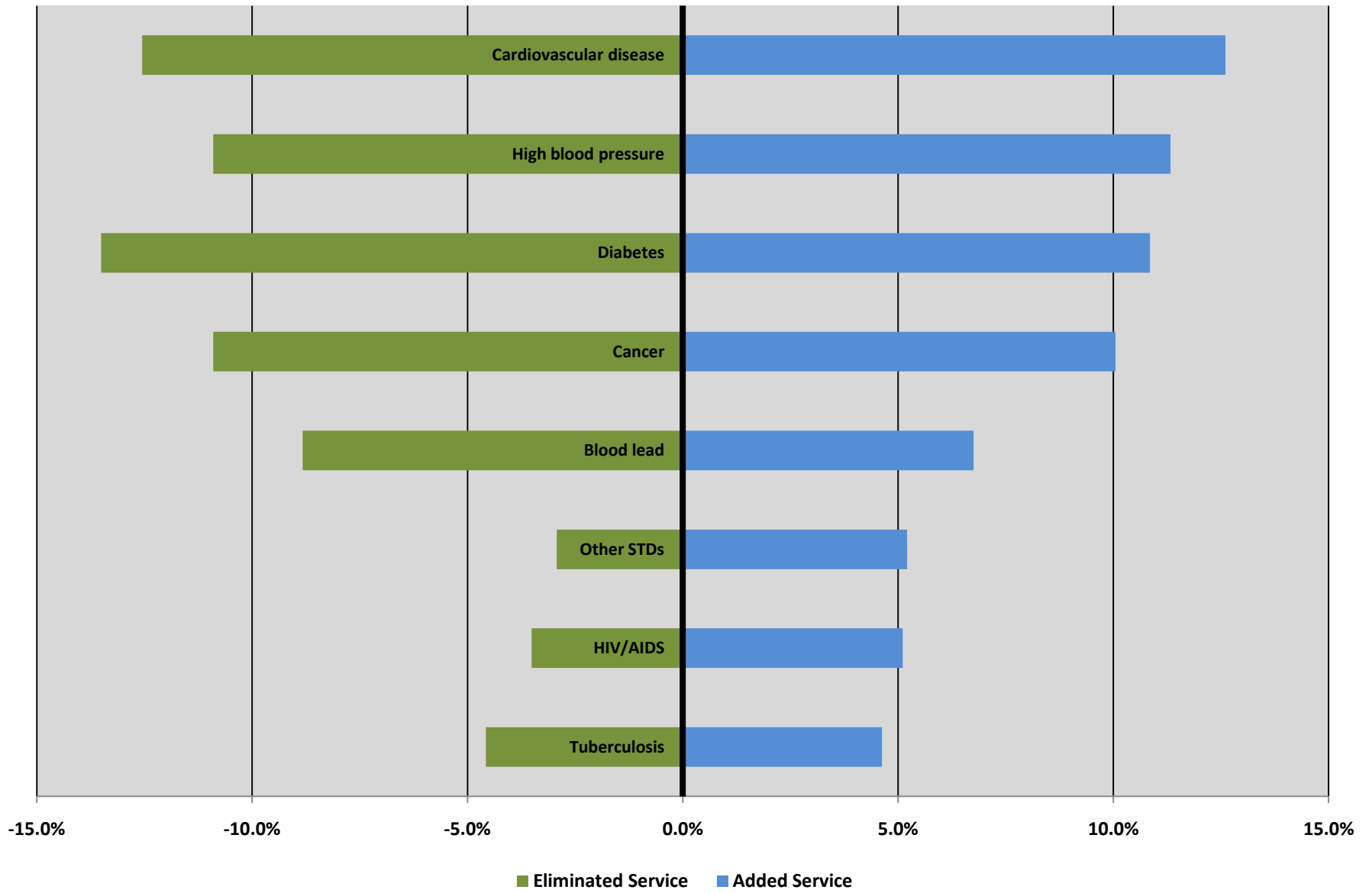
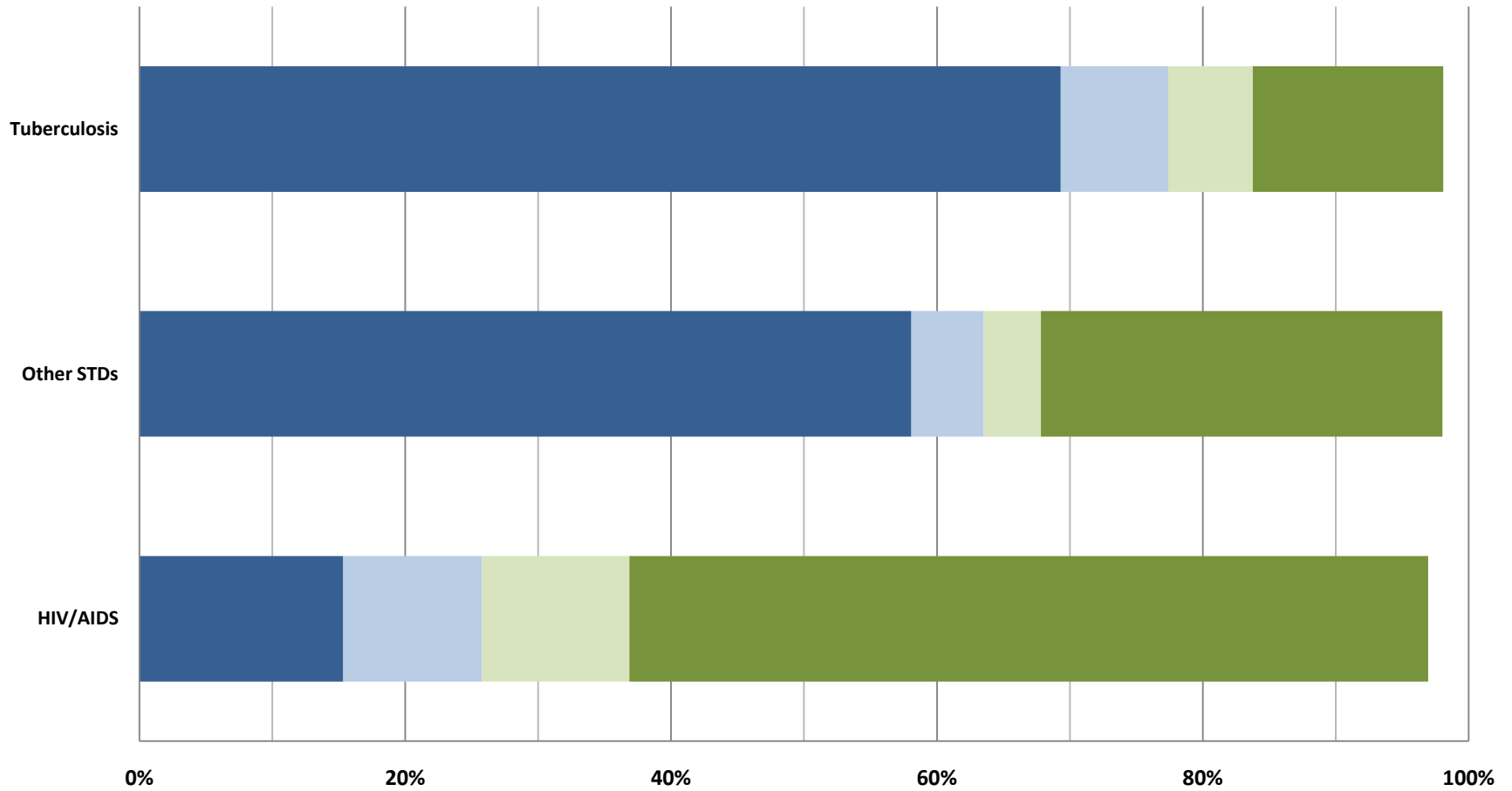


Figure 5. Distribution of LHDs Providing Treatment for Communicable Diseases, 2005-2008



	HIV/AIDS	Other STDs	Tuberculosis
■ LHD Continued	15.3%	58.1%	69.3%
■ LHD Added	10.4%	5.4%	8.1%
■ LHD Eliminated	11.1%	4.3%	6.4%
■ LHD Never	60.1%	30.2%	14.3%

Figure 6. Percentage of LHDs Adding and Eliminating Treatment for Communicable Diseases, 2005-2008

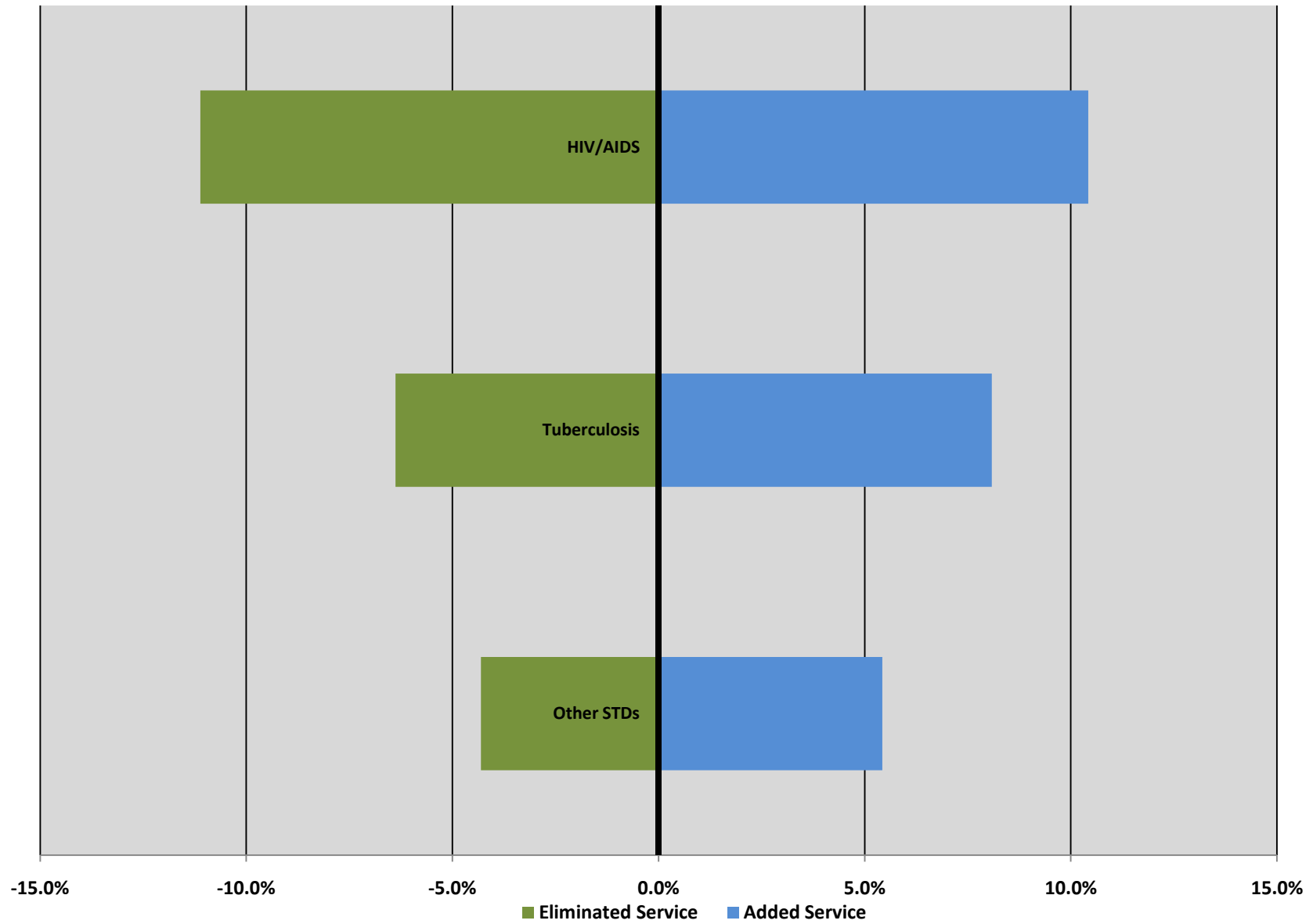
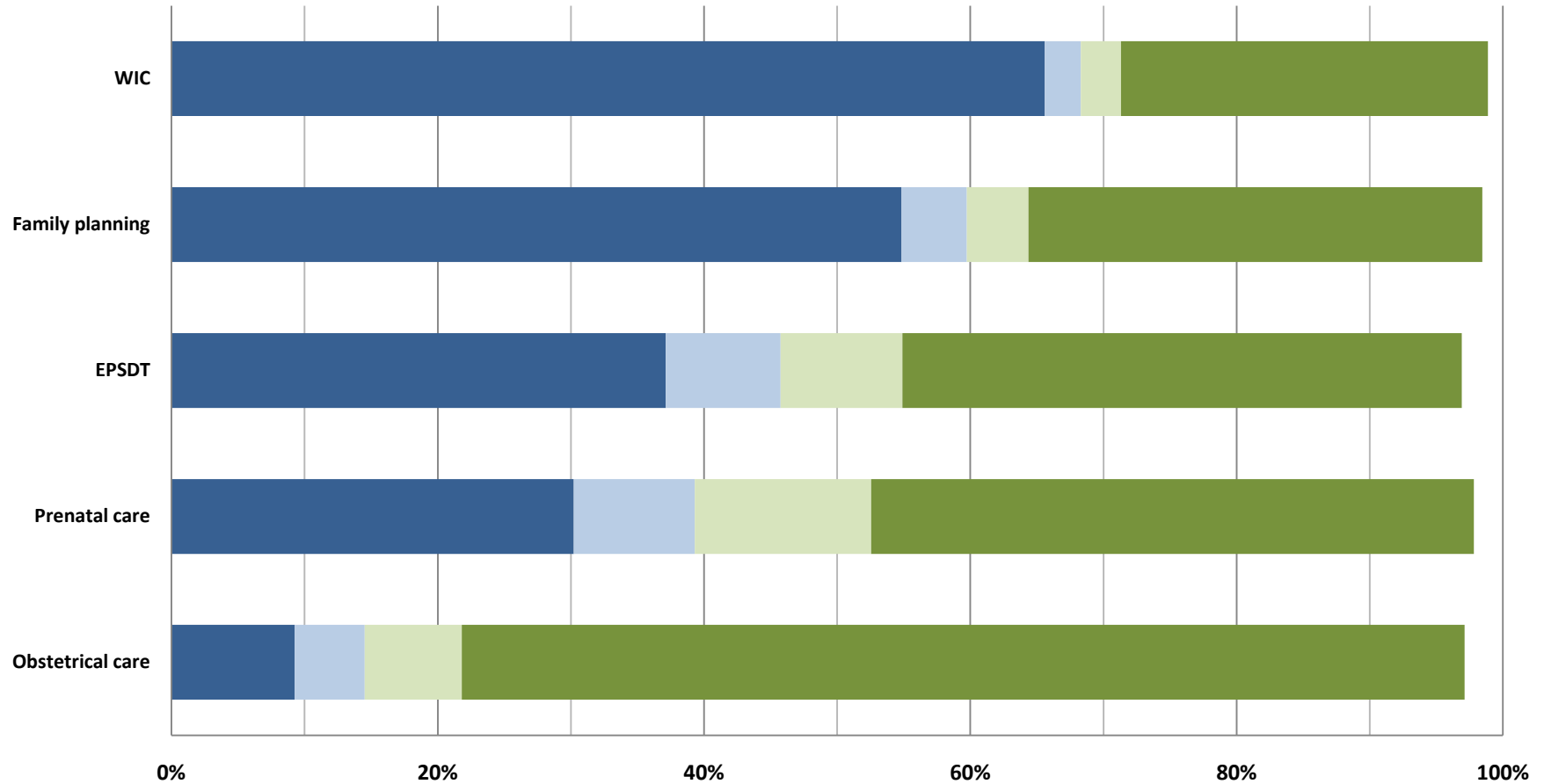


Figure 7. Distribution of LHDs Providing Maternal and Child Health Services, 2005-2008



	Obstetrical care	Prenatal care	EPSDT	Family planning	WIC
■ LHD Continued	9.3%	30.2%	37.1%	54.8%	65.6%
■ LHD Added	5.3%	9.1%	8.6%	4.9%	2.7%
■ LHD Eliminated	7.3%	13.2%	9.1%	4.6%	3.0%
■ LHD Never	75.3%	45.3%	42.0%	34.1%	27.6%

Not surveyed in 2005: MCH home visits, Well child clinic

Figure 8. Percentage of LHDs Adding and Eliminating Maternal and Child Health Services, 2005-2008

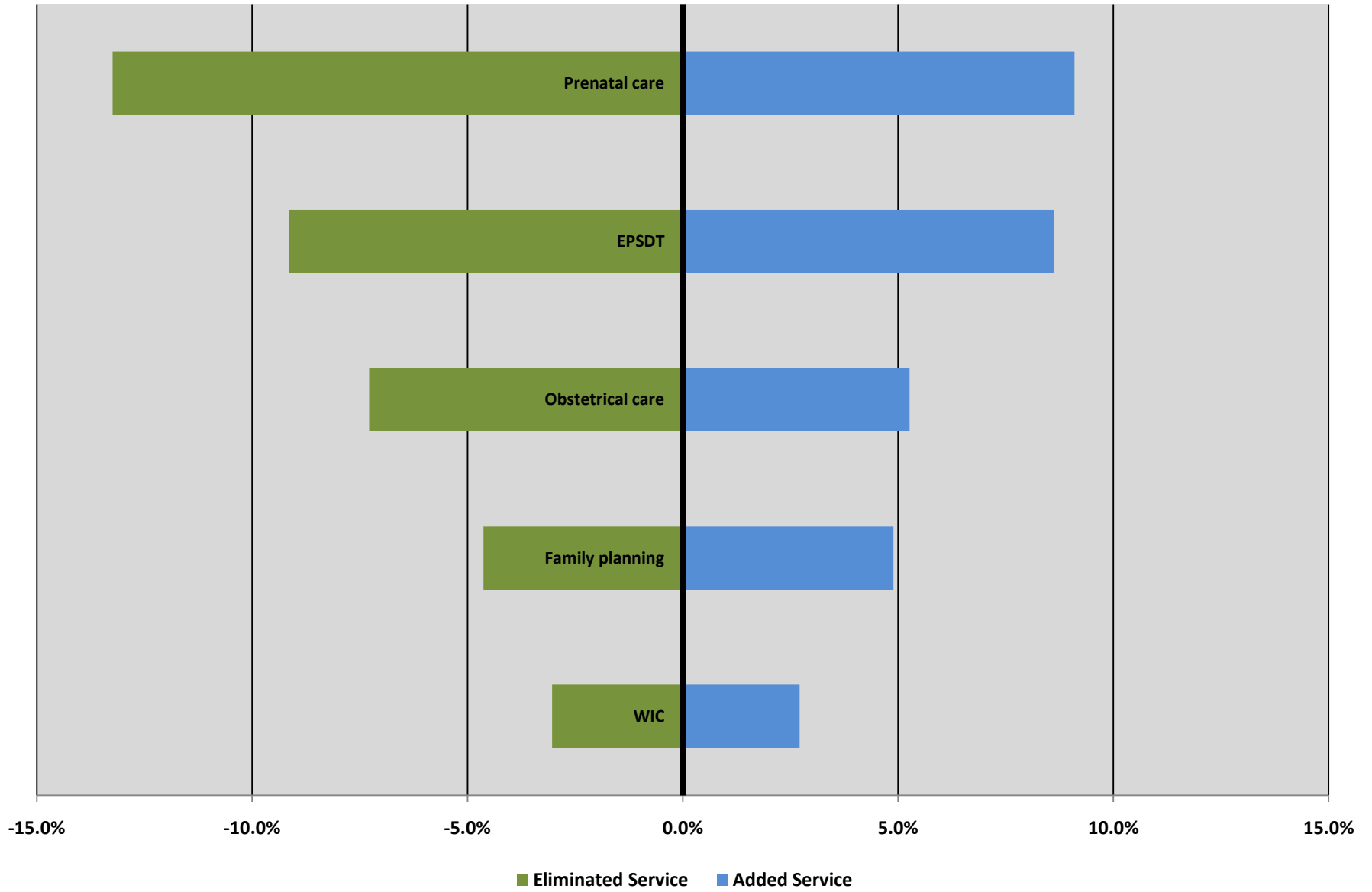
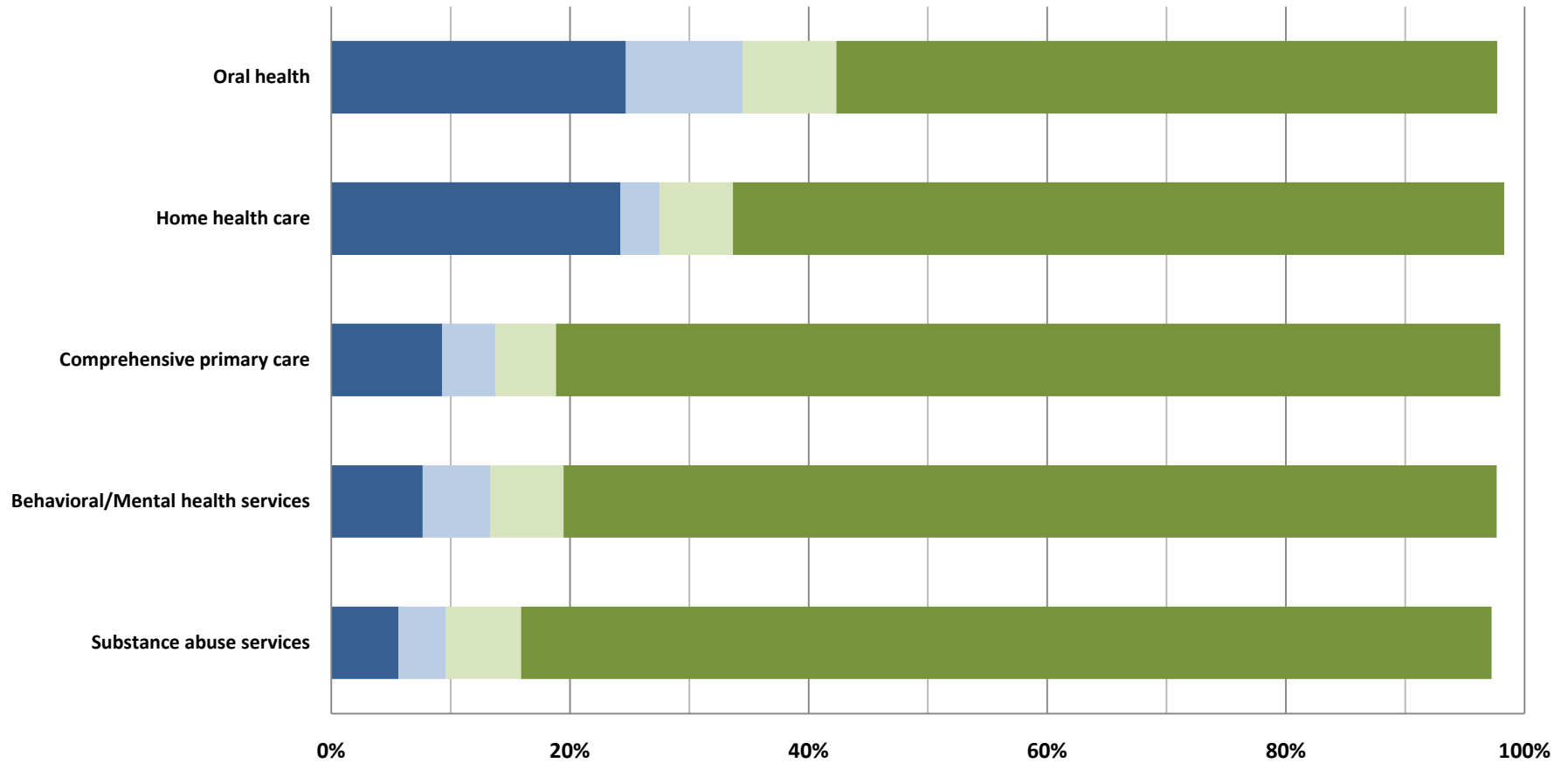


Figure 9. Distribution of LHDs Providing Other Personal Health Services, 2005-2008



	Substance abuse services	Behavioral/Mental health services	Comprehensive primary care	Home health care	Oral health
LHD Continued	5.6%	7.7%	9.3%	24.3%	24.7%
LHD Added	3.9%	5.6%	4.5%	3.2%	9.8%
LHD Eliminated	6.3%	6.2%	5.1%	6.2%	7.9%
LHD Never	81.3%	78.2%	79.1%	64.6%	55.4%

Figure 10. Percentage of LHDs Adding and Eliminating Other Personal Health Services, 2005-2008

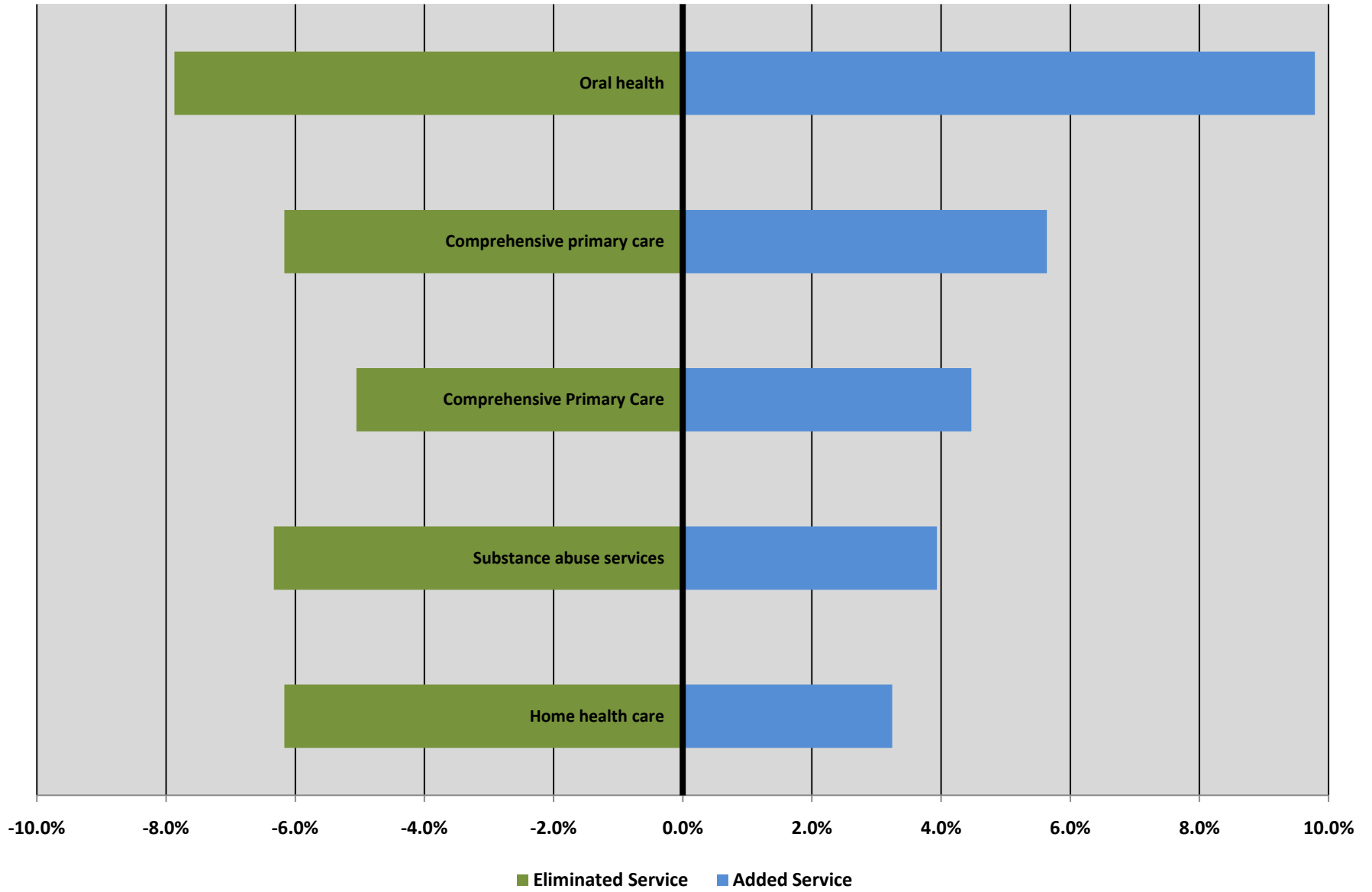
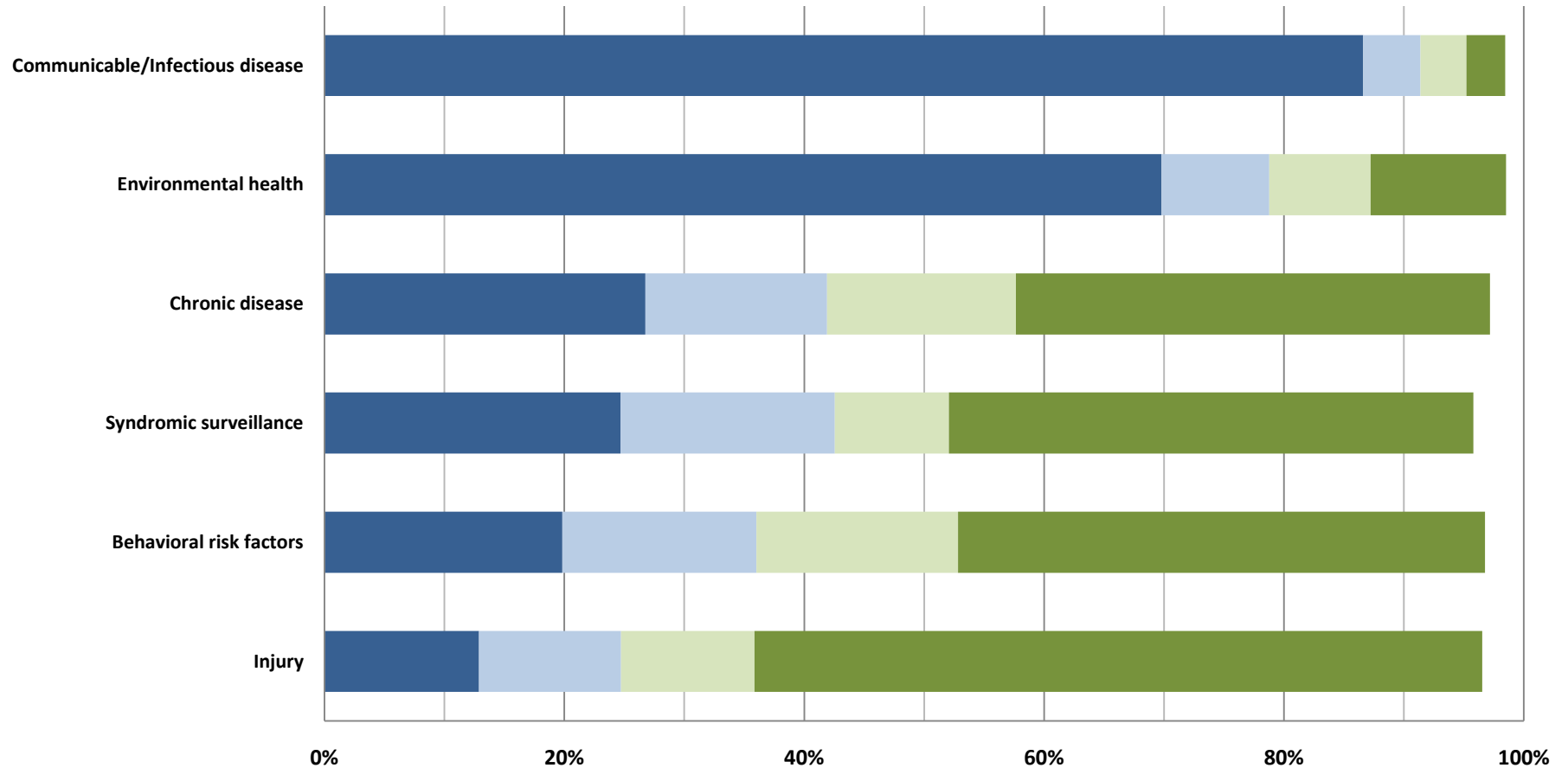


Figure 11. Distribution of LHDs Providing Epidemiology and Surveillance Services, 2005-2008



	Injury	Behavioral risk factors	Syndromic surveillance	Chronic disease	Environmental health	Communicable/Infectious disease
■ LHD Continued	12.9%	19.8%	24.7%	26.8%	69.8%	86.6%
■ LHD Added	11.9%	16.2%	17.9%	15.2%	9.0%	4.8%
■ LHD Eliminated	11.1%	16.8%	9.5%	15.7%	8.5%	3.8%
■ LHD Never	60.7%	43.9%	43.7%	39.5%	11.3%	3.2%

Not surveyed in 2005: Maternal and child health

Figure 12. Percentage of LHDs Adding and Eliminating Epidemiology and Surveillance Services, 2005-2008

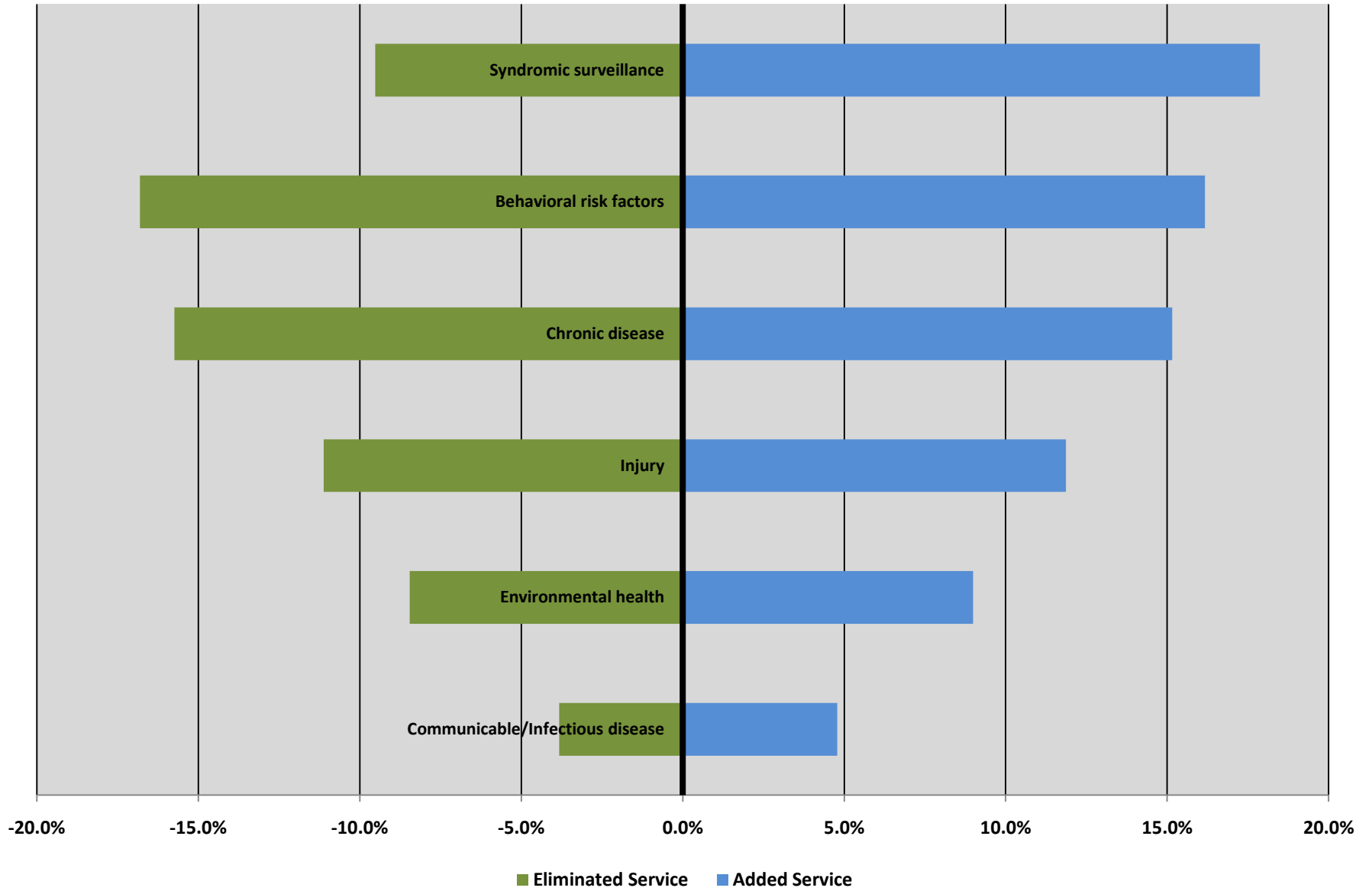
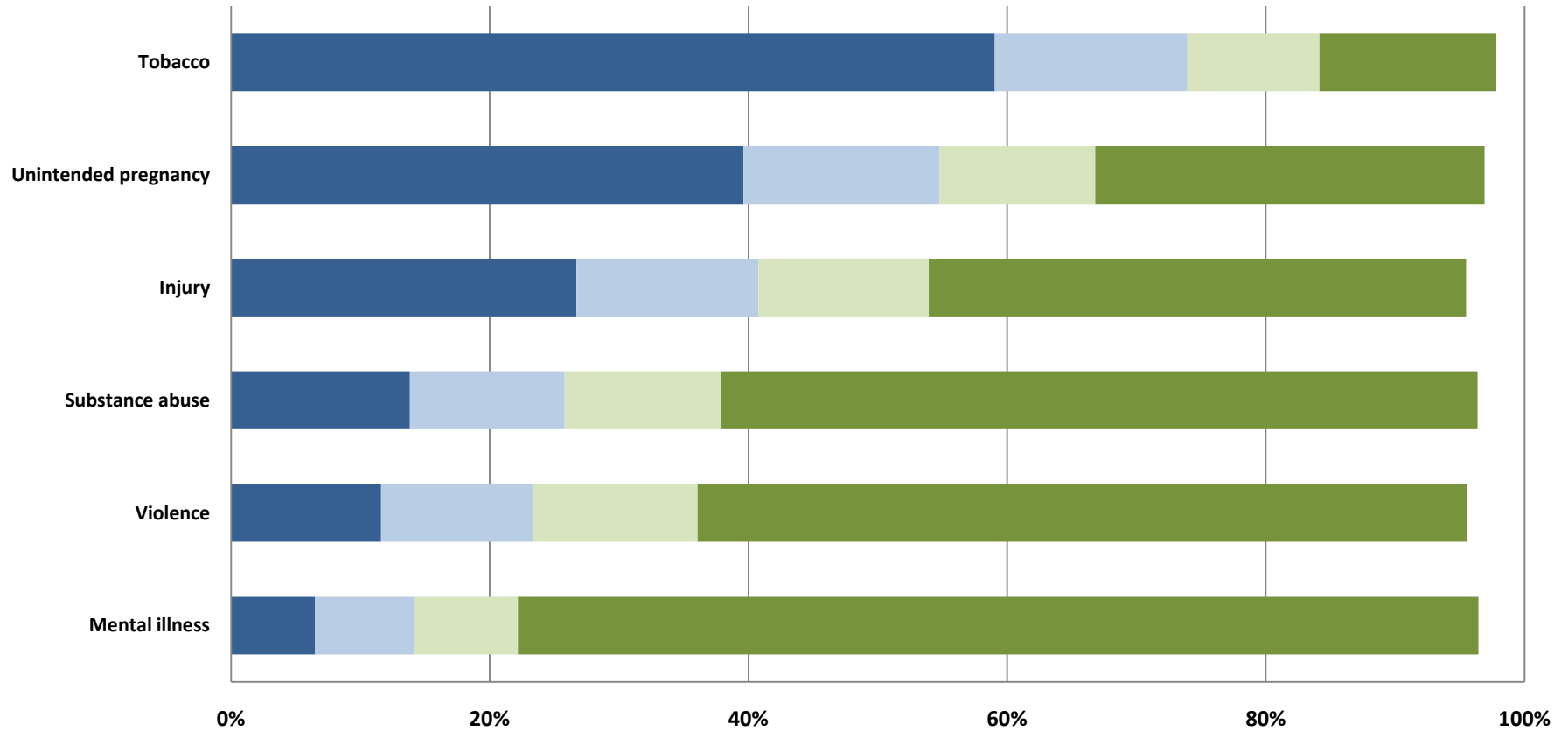


Figure 13. Distribution of LHDs Providing Population-Based Primary Prevention Programs, 2005-2008



	Mental illness	Violence	Substance abuse	Injury	Unintended pregnancy	Tobacco
■ LHD Continued	6.5%	11.6%	13.8%	26.7%	39.6%	59.0%
■ LHD Added	7.7%	11.7%	12.0%	14.1%	15.2%	14.9%
■ LHD Eliminated	8.0%	12.8%	12.1%	13.1%	12.0%	10.2%
■ LHD Never	74.3%	59.5%	58.5%	41.5%	30.1%	13.7%

*Not surveyed in 2005: Chronic disease programs, Nutrition, Physical activity
 Not surveyed in 2008: Obesity*

Figure 14. Percentage of LHDs Adding and Eliminating Population-Based Primary Prevention Programs, 2005-2008

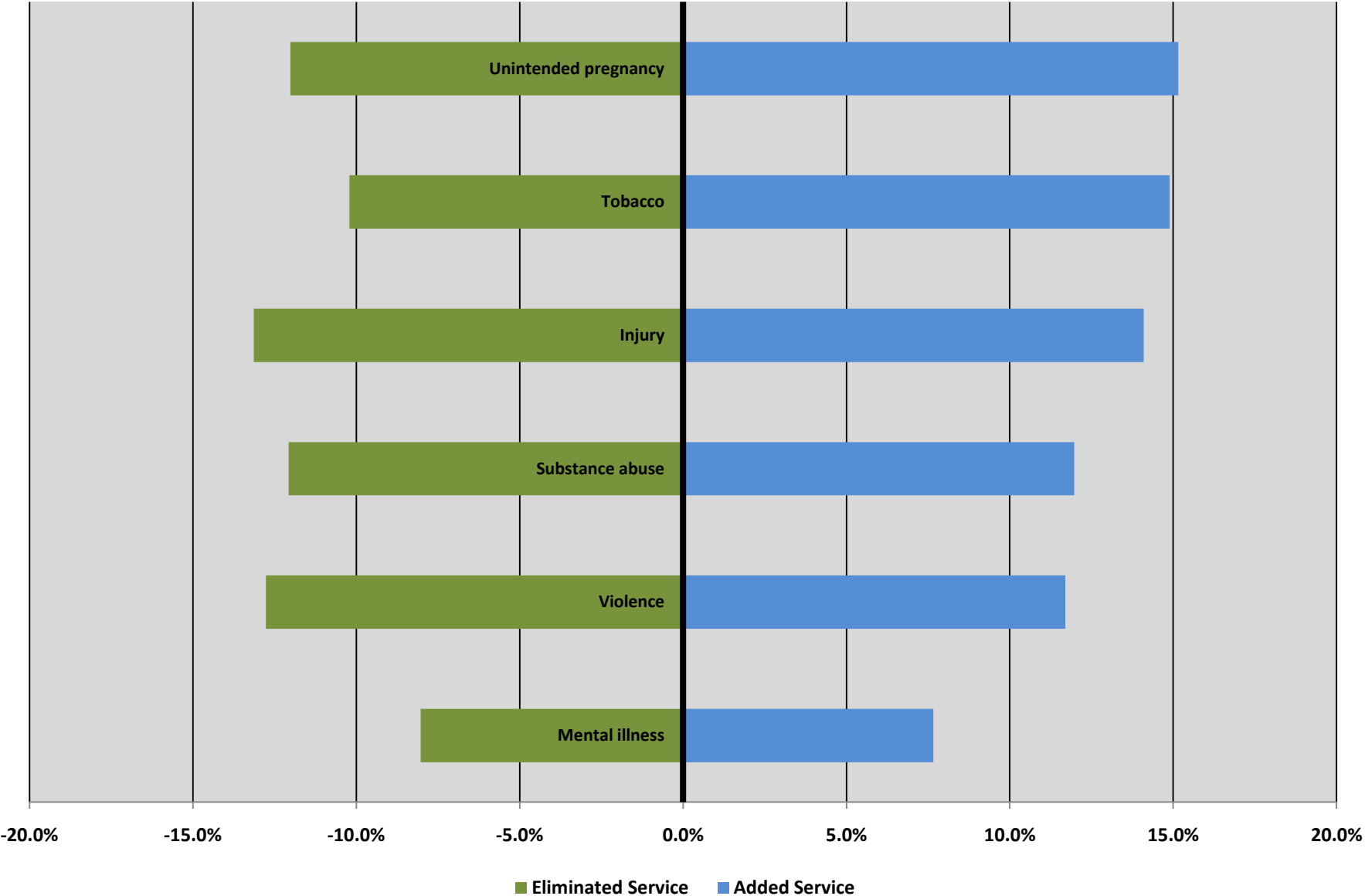
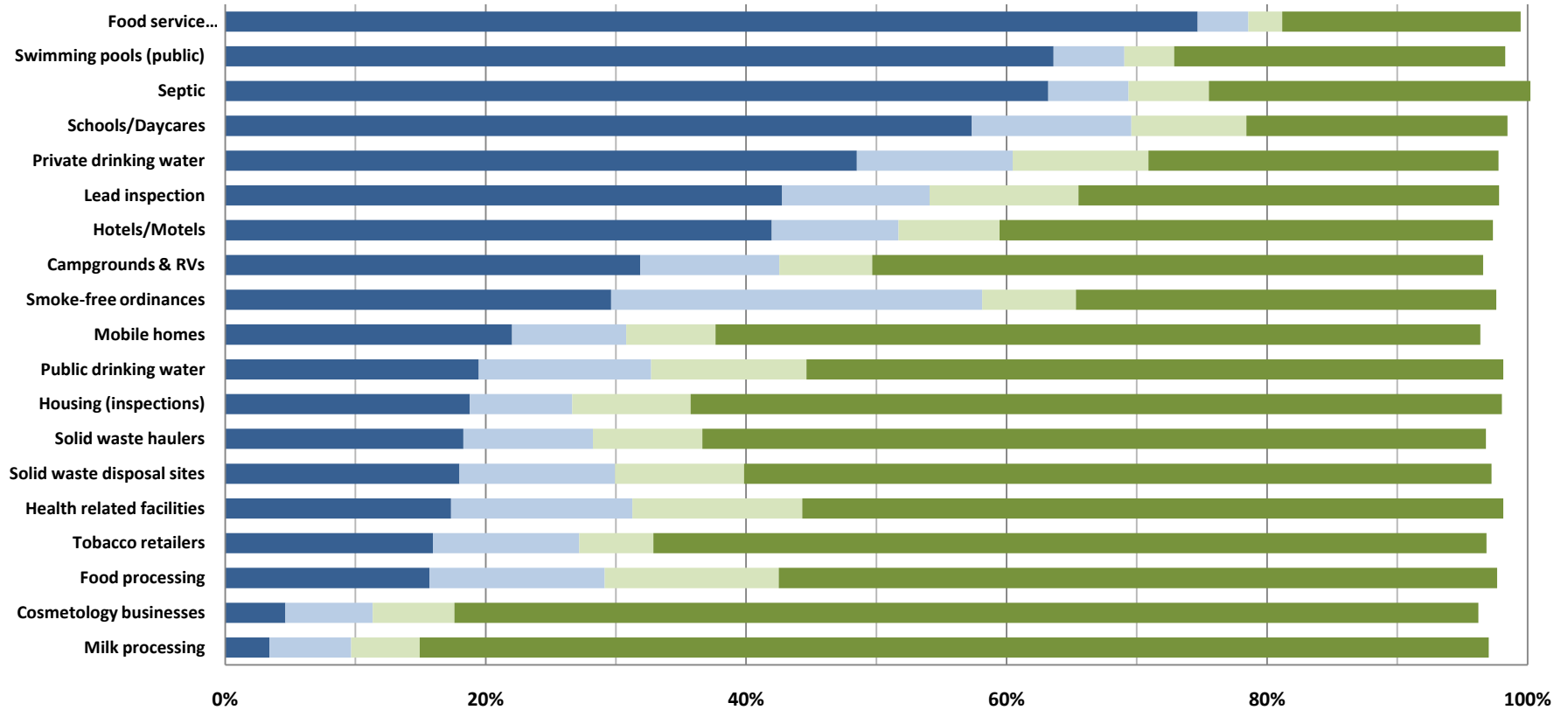


Figure 15. Distribution of LHDs Providing Regulation, Inspection, and/or Licensing Services, 2005-2008



	Milk processing	Cosmetology businesses	Food processing	Tobacco retailers	Health related facilities	Solid waste disposal sites	Solid waste haulers	Housing (inspections)	Public drinking water	Mobile homes	Smoke-free ordinances	Campgrounds & RVs	Hotels/Motels	Lead inspection	Private drinking water	Schools/Daycares	Septic	Swimming pools (public)	Food service establishments
■ LHD Continued	3.4%	4.6%	15.7%	16.0%	17.3%	18.0%	18.3%	18.8%	19.5%	22.0%	29.6%	31.9%	42.0%	42.8%	48.5%	57.3%	63.2%	63.6%	74.7%
■ LHD Added	6.3%	6.7%	13.5%	11.2%	13.9%	12.0%	9.9%	7.9%	13.2%	8.8%	28.5%	10.7%	9.7%	11.3%	12.0%	12.2%	6.2%	5.4%	3.9%
■ LHD Eliminated	5.3%	6.3%	13.4%	5.7%	13.0%	9.9%	8.4%	9.1%	11.9%	6.9%	7.2%	7.1%	7.8%	11.4%	10.4%	8.8%	6.2%	3.8%	2.6%
■ LHD Never	82.1%	78.6%	55.2%	64.0%	53.8%	57.4%	60.2%	62.3%	53.5%	58.7%	32.3%	46.9%	37.9%	32.3%	26.9%	20.1%	25.9%	25.4%	18.3%

Not surveyed in 2005: Children's camp, Body art

Compared together: Septic tank installation (2005) & Septic systems (2008)

Figure 16. Percentage of LHDs Adding and Eliminating Regulation, Inspection, and/or Licensing Services, 2005-2008

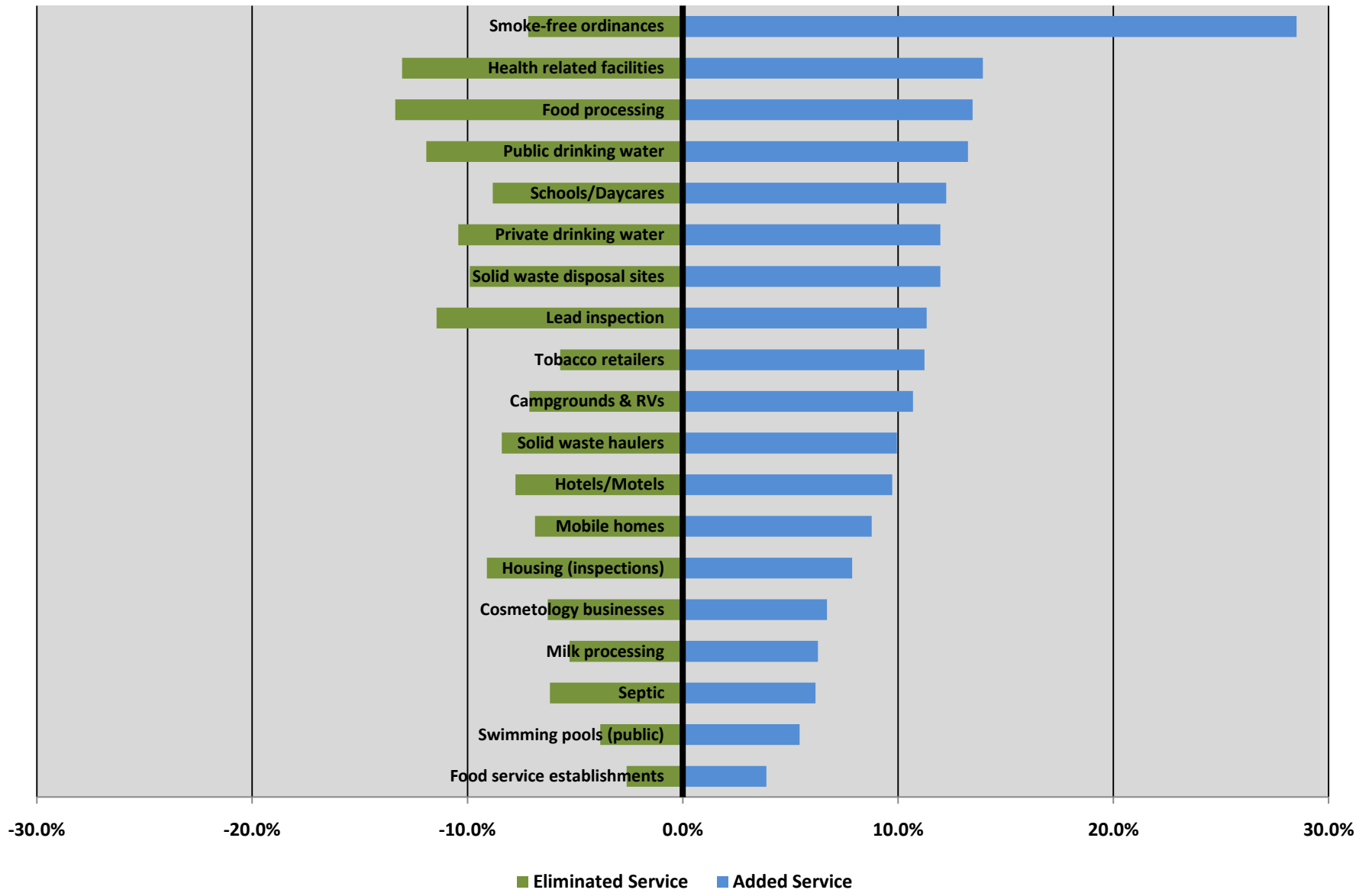
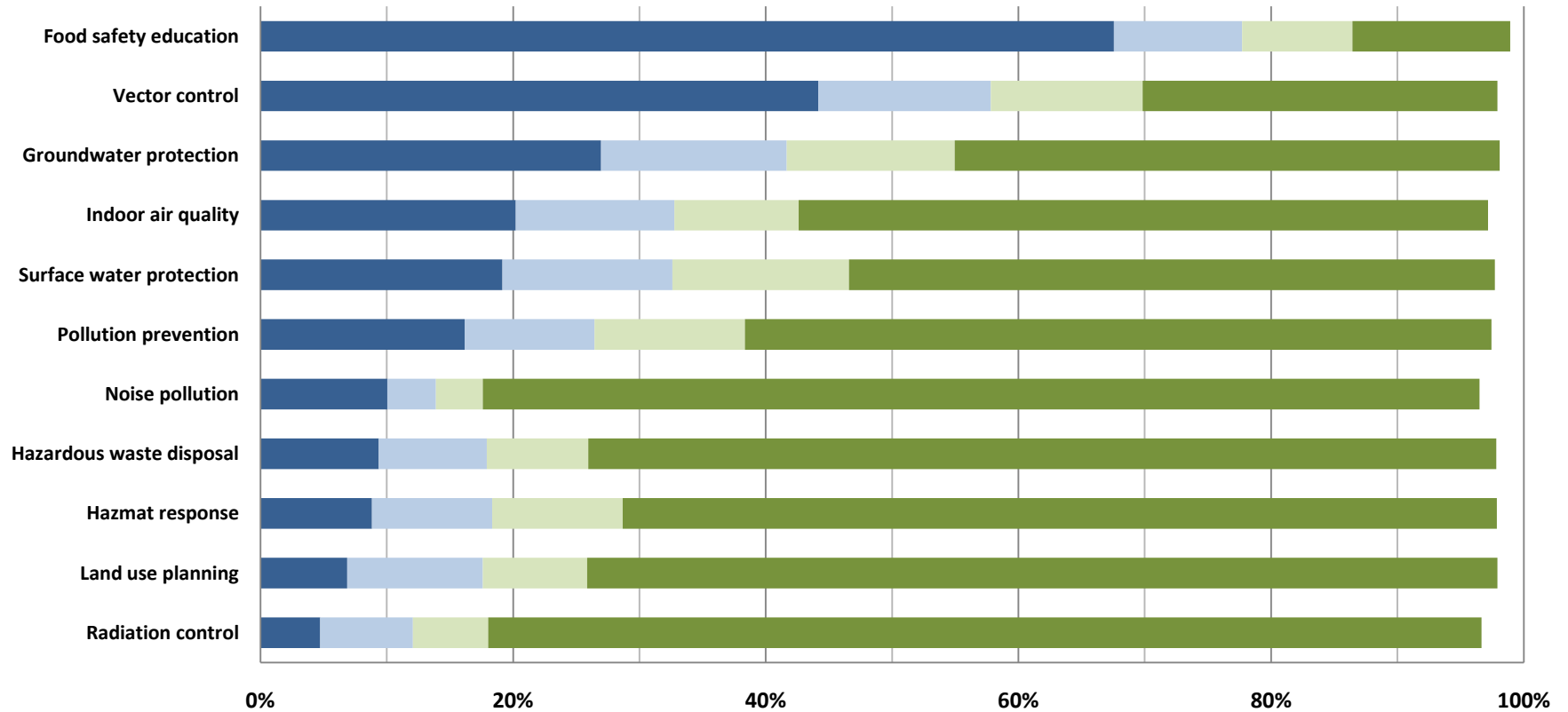


Figure 17. Distribution of LHDs Providing Other Environmental Health Services, 2005-2008



	Radiation control	Land use planning	Hazmat response	Hazardous waste disposal	Noise pollution	Pollution prevention	Surface water protection	Indoor air quality	Groundwater protection	Vector control	Food safety education
■ LHD Continued	4.7%	6.9%	8.8%	9.4%	10.1%	16.2%	19.1%	20.2%	27.0%	44.1%	67.6%
■ LHD Added	7.3%	10.7%	9.5%	8.6%	3.8%	10.3%	13.5%	12.6%	14.7%	13.7%	10.2%
■ LHDEliminated	6.0%	8.2%	10.3%	8.0%	3.7%	11.9%	14.0%	9.8%	13.3%	12.0%	8.7%
■ LHD Never	78.6%	72.1%	69.2%	71.9%	78.9%	59.1%	51.1%	54.6%	43.1%	28.1%	12.5%

Not surveyed in 2005: Air pollution, Collection of unused pharmaceuticals

Figure 18. Percentage of LHDs Adding and Eliminating Other Environmental Health Services, 2005-2008

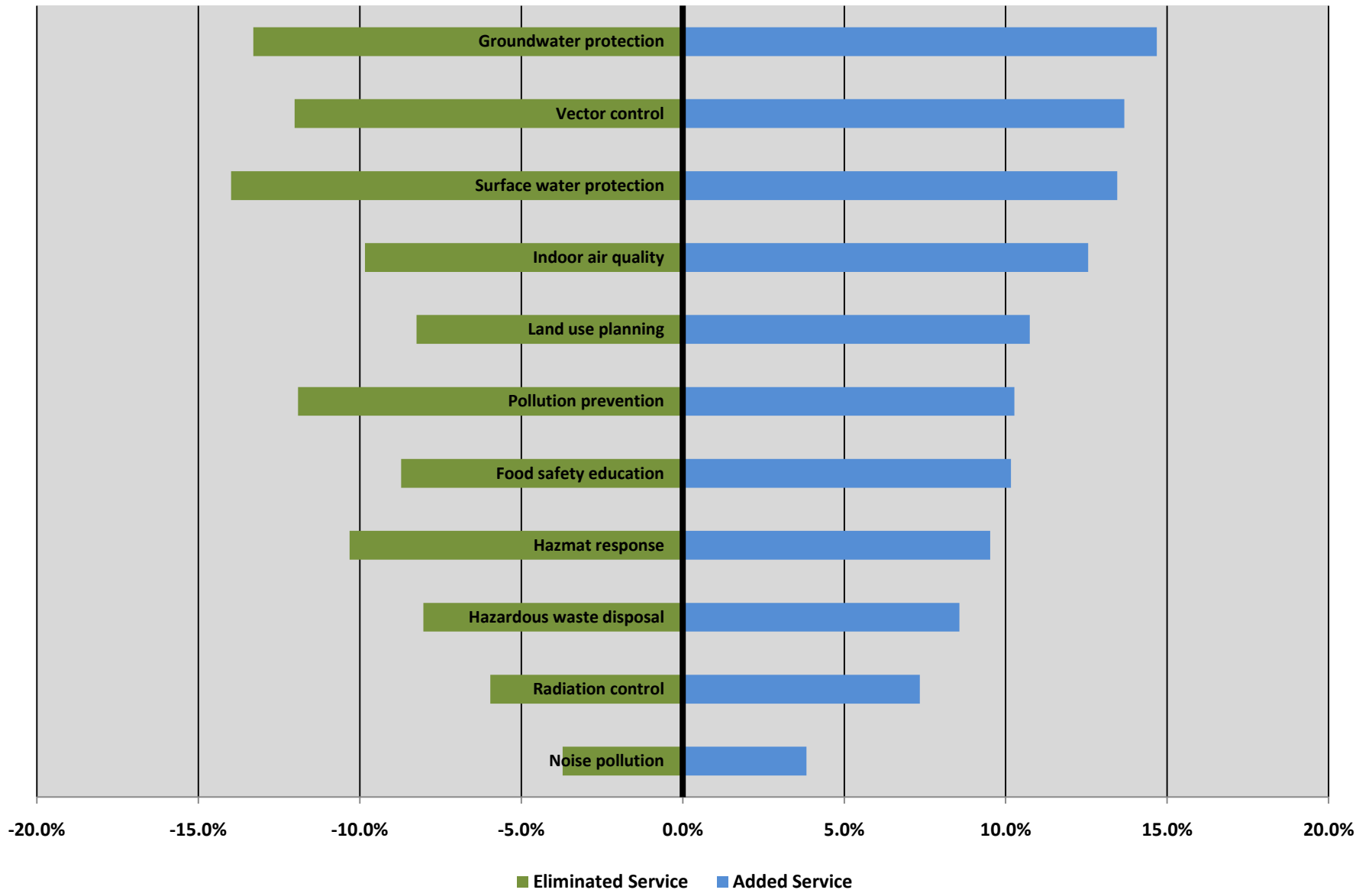
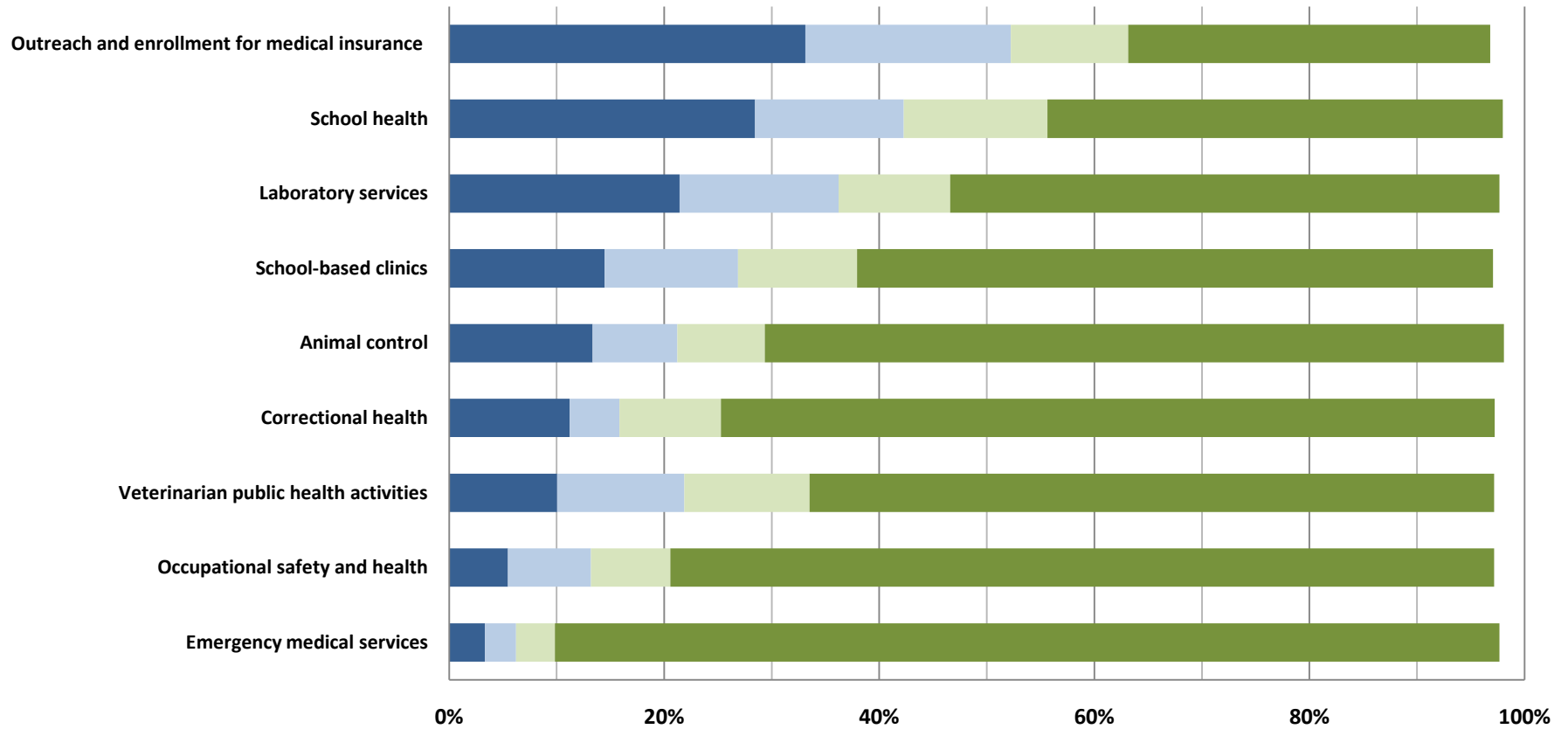


Figure 19. Distribution of LHDs Providing Miscellaneous Public Health Services, 2005-2008



	Emergency medical services	Occupational safety and health	Veterinarian public health activities	Correctional health	Animal control	School-based clinics	Laboratory services	School health	Outreach and enrollment for medical insurance
■ LHD Continued	3.4%	5.5%	10.1%	11.2%	13.4%	14.5%	21.4%	28.5%	33.1%
■ LHD Added	2.9%	7.7%	11.8%	4.6%	7.9%	12.4%	14.8%	13.8%	19.1%
■ LHD Eliminated	3.6%	7.4%	11.6%	9.4%	8.1%	11.1%	10.4%	13.4%	10.9%
■ LHD Never	87.8%	76.6%	63.7%	72.0%	68.7%	59.1%	51.1%	42.3%	33.7%

Figure 20. Percentage of LHDs Adding and Eliminating Miscellaneous Public Health Services, 2005-2008

