

# Clinical Prevention and Population Health in Health Professions Education: Healthy People 2020 Outcomes



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## Abstract

The Healthy People Curriculum Task Force (HPCTF) was established in 2002 by the Association for Prevention Teaching and Research (APTR) to encourage the implementation of Healthy People 2010 Objective 1.7: "To increase the proportion of schools of medicine, schools of nursing and health professional training schools whose basic curriculum for healthcare providers includes the core competencies in health promotion and disease prevention."

## HPCTF Members

- American Association of Colleges of Nursing (AACN)
- American Association of Colleges of Osteopathic Medicine (AACOM)
- American Association of Colleges of Pharmacy (AAPC)
- American Dental Education Association (ADEA)
- Association of American Medical Colleges (AAMC)
- Association of Schools Advancing Health Professions (ASAHP)
- National Organization of Nurse Practitioner Faculties (NONPF)
- Physician Assistant Education Association (PAEA)

Seven HPCTF Members collected information from member institutions to track the integration of clinical prevention and population health content in their curricula, as measured by Healthy People 2020 objectives. Results reveal trends toward the universal inclusion of some topic areas in clinical prevention and population health, but a continuing need to facilitate the addition of other topic areas, such as environmental health, public health systems, and global health.

## Methods

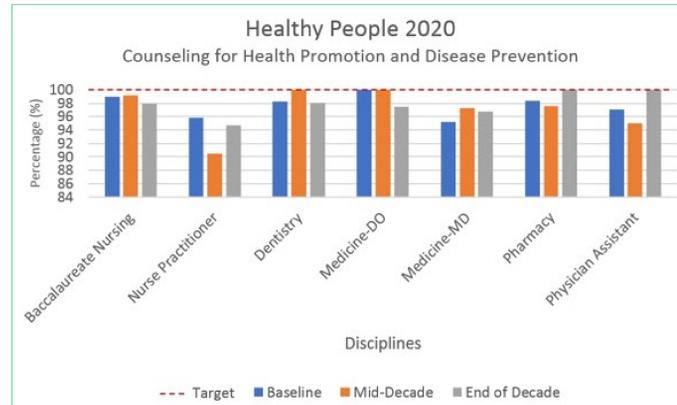
For Healthy People 2020 the HPCTF tracked sentinel content areas from the *Clinical Prevention and Population Health Curriculum Framework*. The six selected topics reflect the breadth of the Framework and include topics that traditionally have been omitted in health professions education: counseling for health promotion and disease prevention (HP/DP); cultural diversity; environmental health; evaluation of health sciences literature (EHSL); global health; and public health systems. These topics represent all four components of the *Curriculum Framework* and include the two topics that had been tracked for Healthy People 2010 (HP/DP and cultural diversity). A 10% improvement from the baseline at the beginning of the decade defined the 2020 goal.

The curriculum tracking objective was moved from the HP2010 "Access to Quality Health Services" topic area to "Educational and Community-Based Programs" in HP2020.

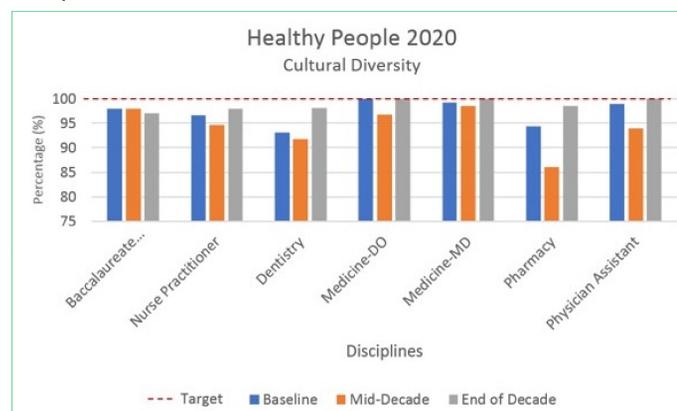
ECBP 12-18 read:

**"Increase the inclusion of core clinical prevention and population health content in health professions training."**

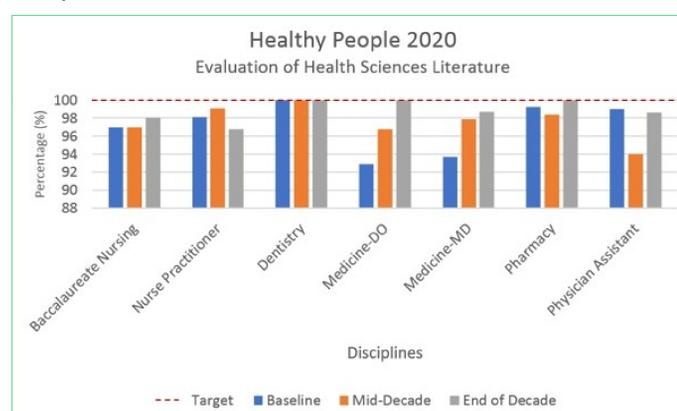
Graph 1



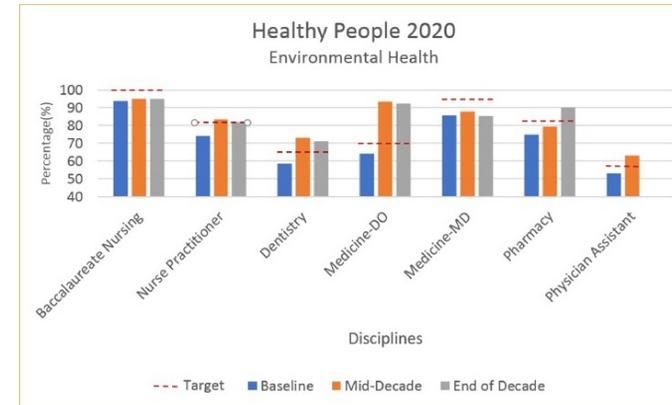
Graph 2



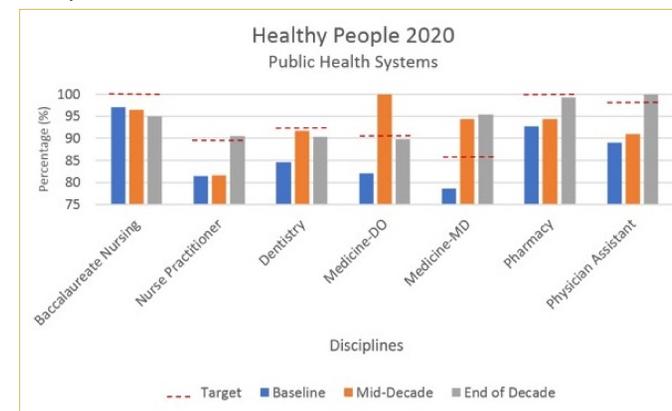
Graph 3



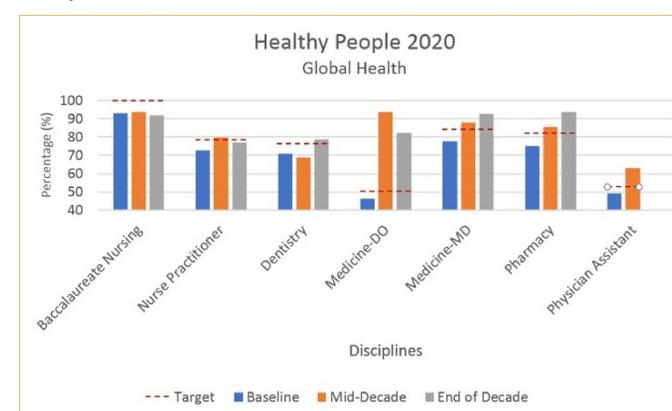
Graph 4



Graph 5



Graph 6



## Results

The baseline measures, ranging from 46% to 100%, reflect the proportion of schools or programs that included the topic in required curricula at the beginning of the decade. At least 93% of schools required studies in the EHSL, HP/DP, and Cultural Diversity. Public Health Systems, Environmental Health, and Global Health were the least likely topics to be included in required curricula across health professions, although impressive gains were made.

The end of-decade data for Healthy People 2020 show:

- Of 42 measures (6 topic areas across 7 professions), 21 achieved their Healthy People 2020 goal, 10 showed movement toward achieving the goal, and 11 showed movement away from target.
- Achieving a 100% target was challenging in Healthy People 2020, as it was for Healthy People 2010.
- Counseling for HP/DP, Cultural Diversity, and EHSL are consistently represented in health professions education (at least 95% of programs reporting inclusion in their curricula).
- Counseling for HP/DP has been well-represented in curricula but is now facing a downward slide away from the targets.
- Environmental Health, Global Health, and Public Health Systems had variable inclusion in health professions curricula by profession and require consistent promotion.
- Curricular adoption is dynamic, with rates rising and falling.
- Data could inform faculty and other stakeholders regarding priorities in clinical prevention and population health curricula within their profession.

## Study Limitations

- Survey instruments are not identical across professions, and all data are based on self-report.
- Response rates vary for the instruments. Medicine-MD's data source has a 100% response rate because completion is a requirement for accreditation. The response rates for the other instruments ranged from 70% to 100%.
- Because of variation in denominators over the decade, some changes may represent one school or program's change in response, which may not represent a trend.
- Comparisons across professions are discouraged because of the use of different surveys and different response rates.

## Healthy People 2030 Preview

For the next decade, DO- and MD- granting medical schools will combine data, as will nursing and advanced practice nursing. EHSL will no longer be measured in Healthy People 2030 and will be replaced by Social Determinants of Health. Anticipated Objectives:

- 1-4. Increase the inclusion of core clinical prevention and population health content in (insert 4 disciplines) schools.
2. Increase the proportion of academic institutions with health professions education programs whose prevention and population health curricula include interprofessional training.

TeachPopulationHealth.org

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