14th European Public Health Conference | 11 November 2021

Scottish Burden of Disease (SBOD) study: a population health surveillance system for meaningful action

I Grant, GMA Wyper, E Fletcher, MT de Haro Moro, G McCartney, DL Stockton

Public Health Scotland

Burden of disease and knowledge transfer

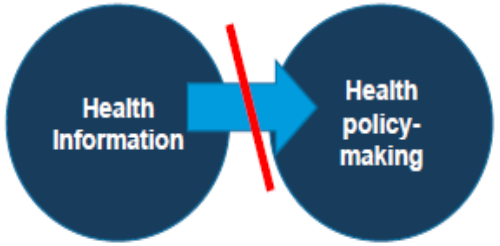
Background

The availability of health information does not inherently lead to its increased use in policy- and decision-making/ evidence informed policy-making (EIP).

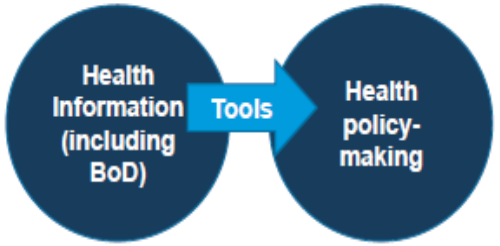
Various tools and mechanisms can help to increase the use of health information in policy development by making policy-makers appreciate, understand and incorporate health information into policy decisions.

World Health Organization Europe

The issue:



Solution:



Available tools and knowledge transfer mechanisms

- **Push** efforts: knowledge provided to users in appropriate formats
- **Facilitated Pull** efforts: enable policy makers to identify relevant information
- **Pull** efforts: draw relevant evidence into policy making
- **Linkage and exchange** efforts: aim to build relationships between health information producers and users

https://www.euro.who.int/__data/assets/pdf_file/0011/351947/HEN-synthesis-report-54.pdf

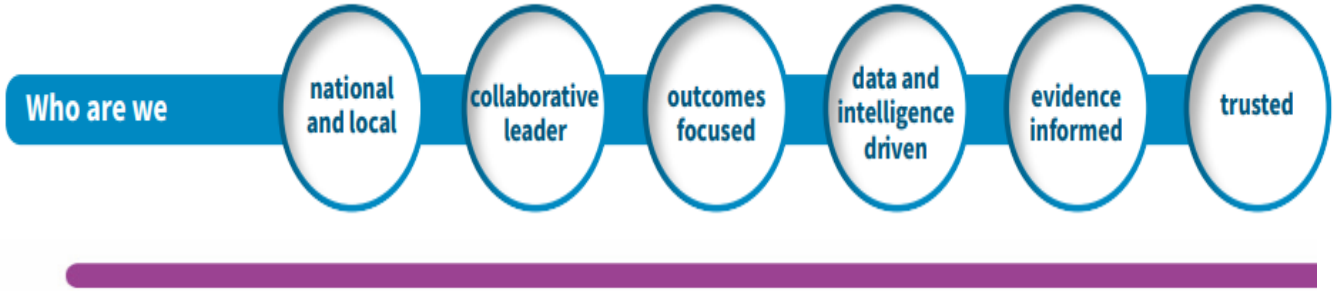
Scottish Burden of Disease Study and Public Health Scotland

Scottish Burden of Disease Study

Started 2012

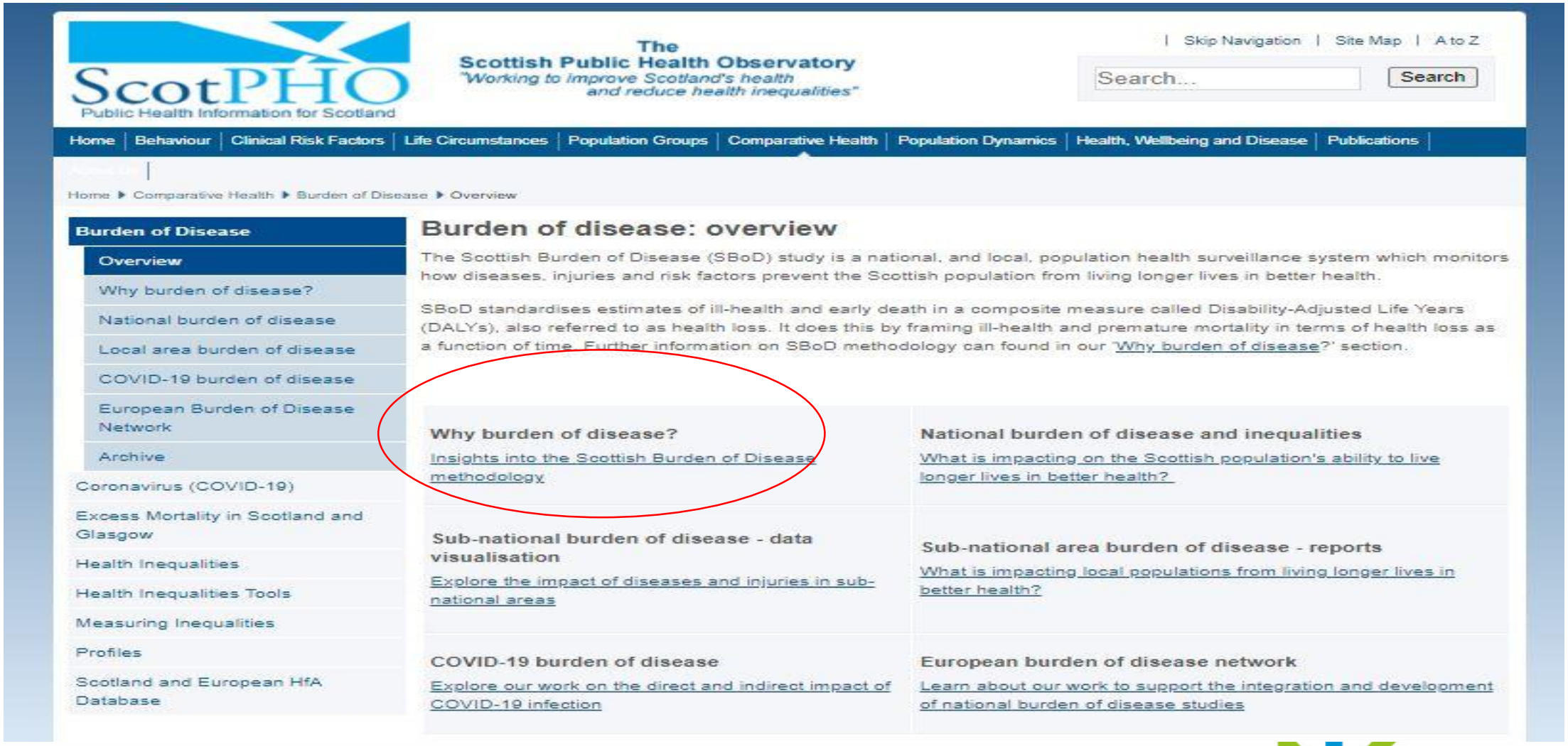
Our mission!: To monitor the population-level contribution of how health conditions (diseases, injuries, infections), and risk factors, compromise our ability to live longer lives, in better health

Public Health Scotland's mission to support long-lasting good health and wellbeing for all our communities – especially the most disadvantaged

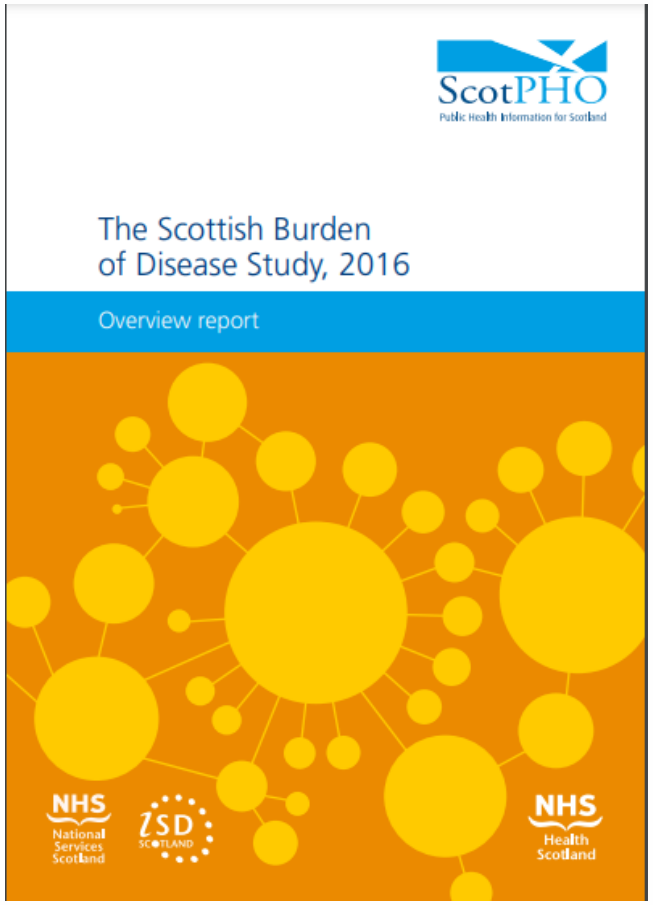


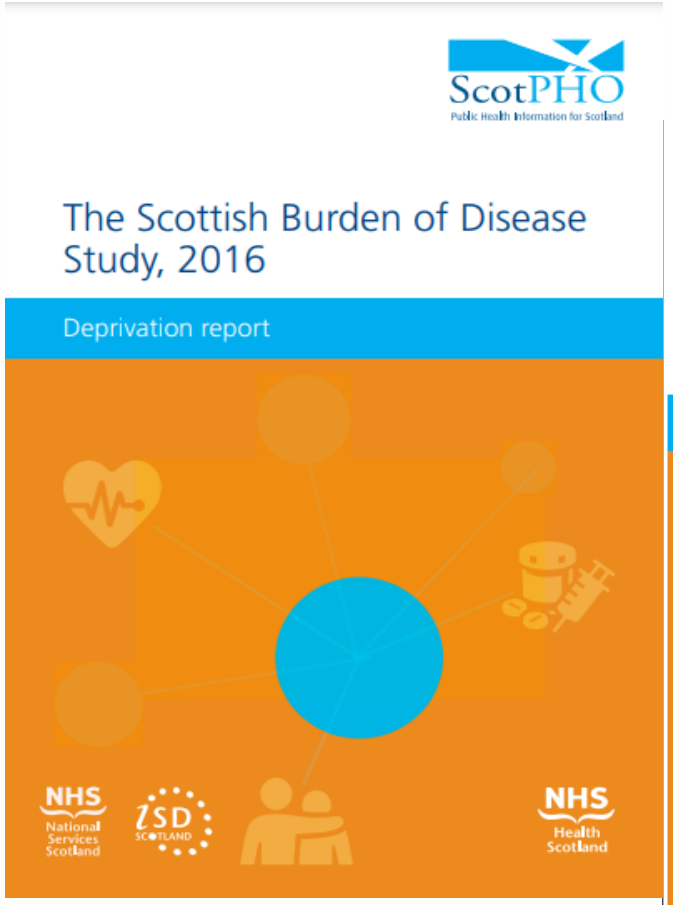
SBOD 'PUSH EFFORTS'

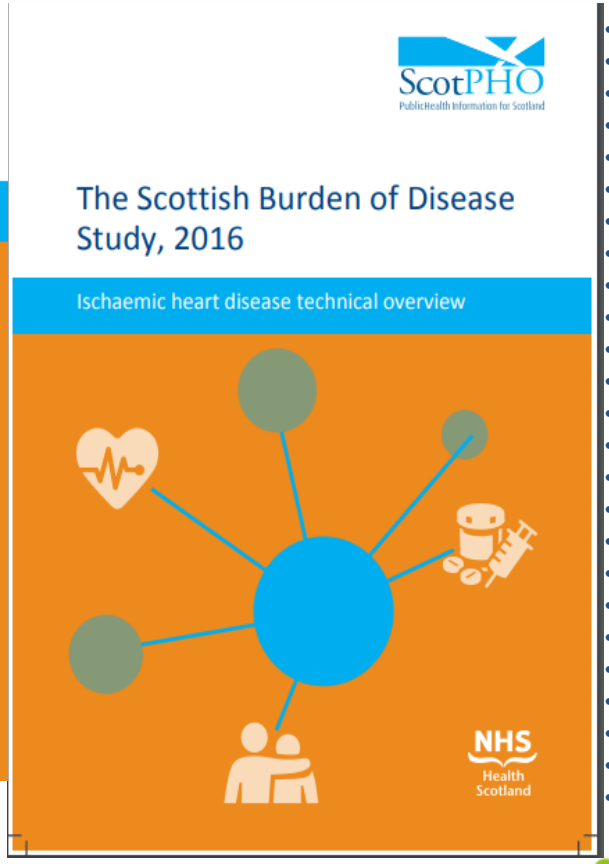
https://www.scotpho.org.uk/comparative-health/burden-of-disease/overview/



SBOD 'PUSH EFFORTS'



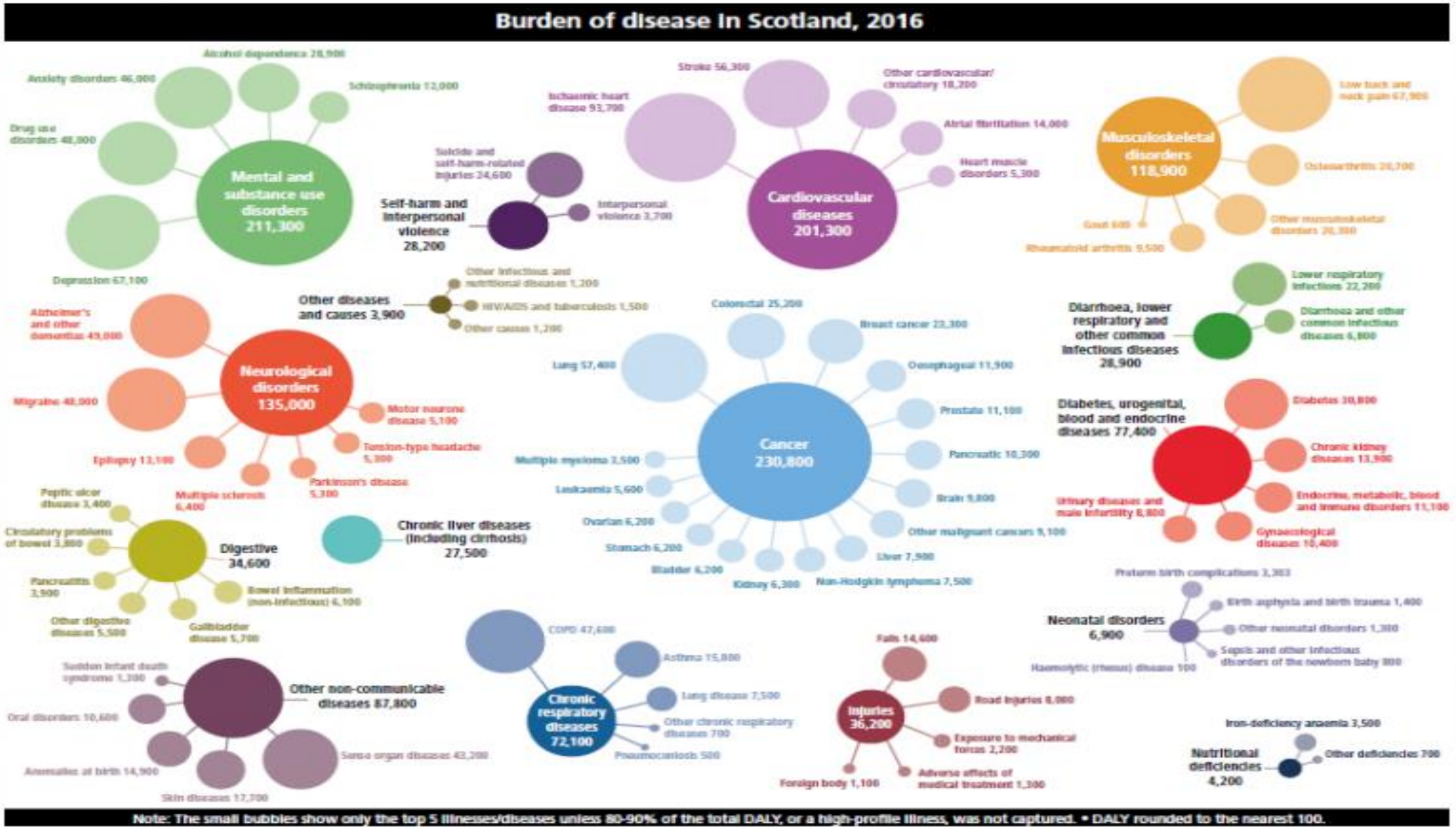




- Ischaemic heart disease
- Neck and lower back pain
- Depression
- Lung cancer
- Stroke)
- Alzheimer's and other dementias
- Migraine(
- Drug use disorders
- COPD
- Anxiety disorders
- Sense organ diseases
- Diabetes
- Alcohol dependence
- Chronic liver diseases
- Colorectal cancer
- Suicide/self-harm related injuries
- Breast cancer
- Lower respiratory infections
- Osteoarthritis
- Other musculoskeletal disorders
- Other cardiovascular/circulatory
- Skin diseases
- Asthma
- Anomalies present at birth
- Falls

https://www.scotpho.org.uk/comparative-health/burden-of-disease/overview/

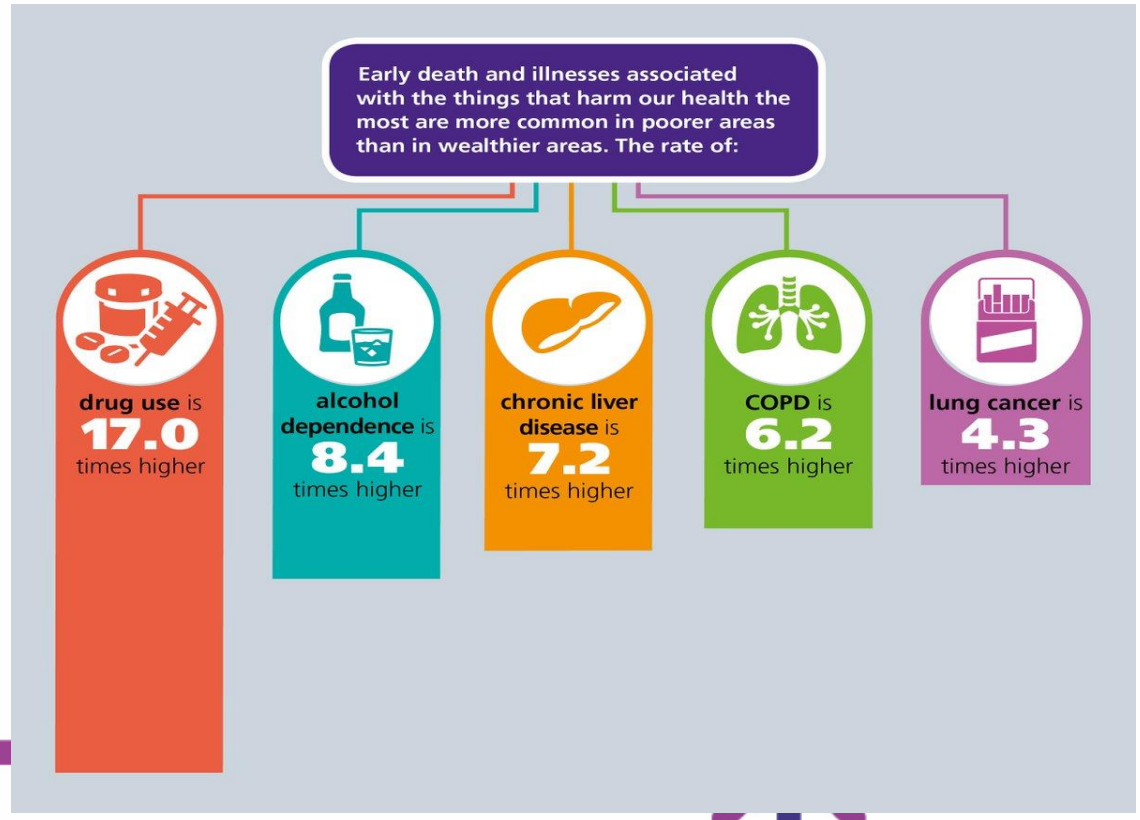
SBOD 'PUSH EFFORTS'



SBOD ‘Push efforts’: Infographics and synergies with national and local public health strategies

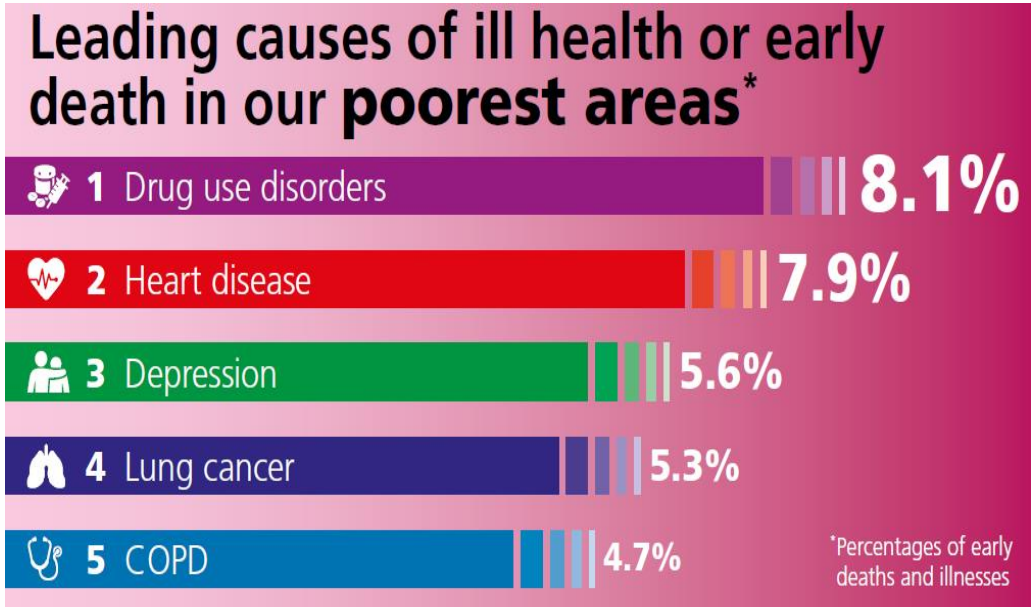
- **Burden attributable to differences in life circumstances**

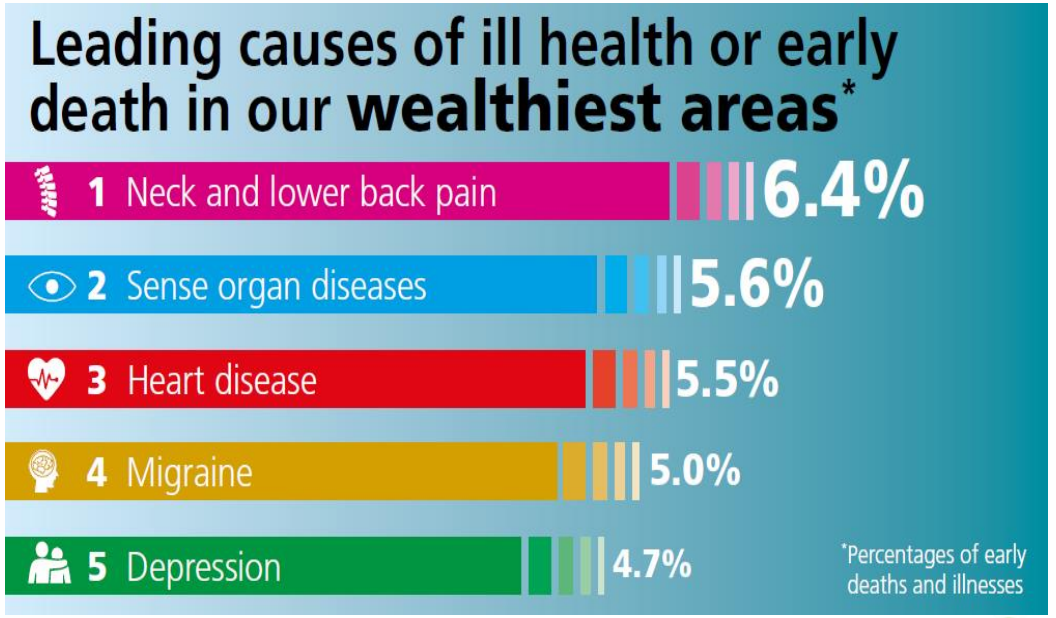
- **Just seven diseases account for over half of socio-economic inequalities in burden in Scotland**



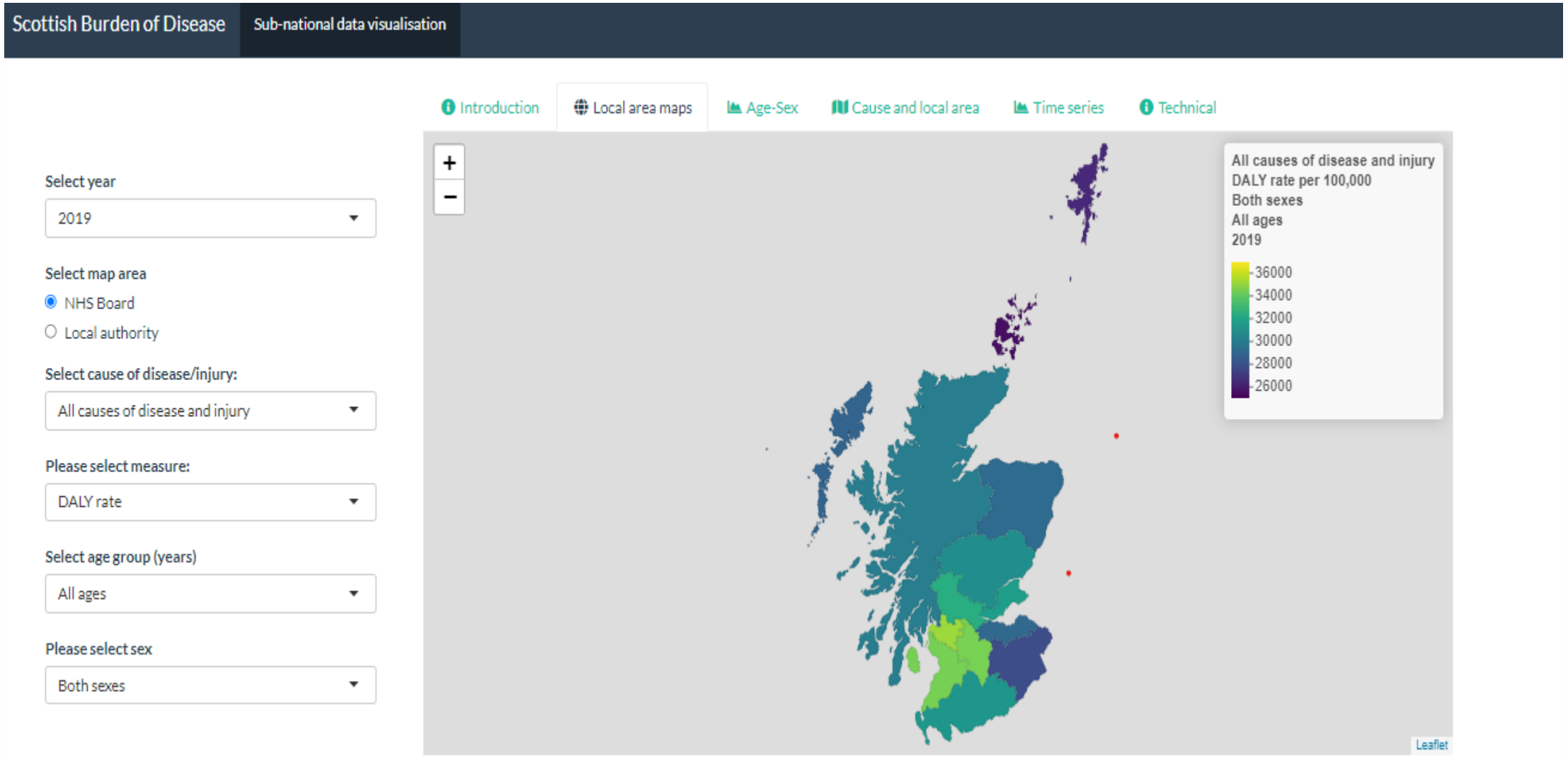
Push efforts: Infographics and synergies with national and local public health strategies

- Different areas have different priorities



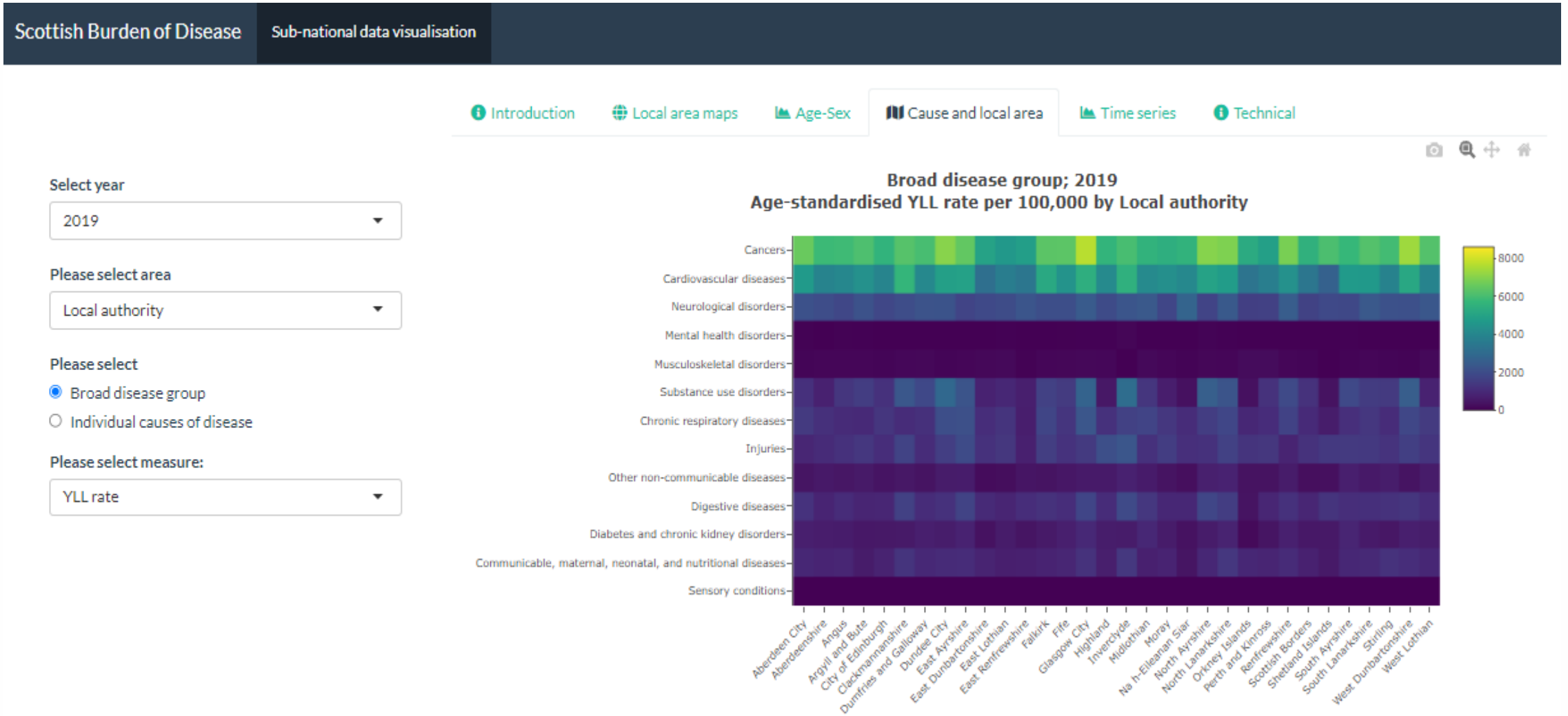


Pull efforts: Data Visualisations



https://scotland.shinyapps.io/phs-local-trends-scottish-burden-diseases/

Pull efforts: Data Visualisations

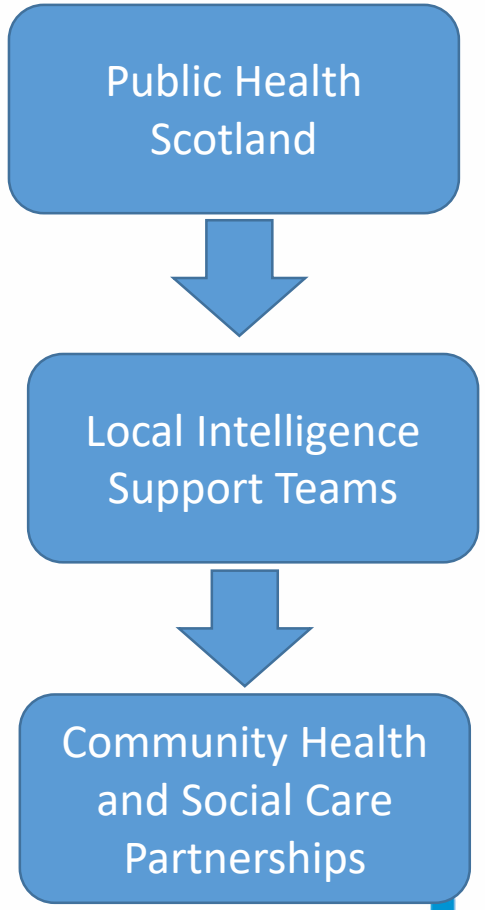


https://scotland.shinyapps.io/phs-local-trends-scottish-burden-diseases/

SBoD: integrated approaches

Organisation internal and external networks

- Working with local areas in Scotland through community health and social care partnerships to use SBOD data information to inform needs assessment, health planning and workforce decisions.



SBoD: integrated approaches - engagement with voluntary sector

Scottish Council of Voluntary Organisations
Seminar involving representatives from 20 voluntary organisations across Scotland
" It would be good to have more infographics and to make the study more accessible"

Voluntary Health Scotland
- Burden of disease blog

Targeted e.g.
- Versus Arthritis
- Bobath (Cerebral Palsy charity)

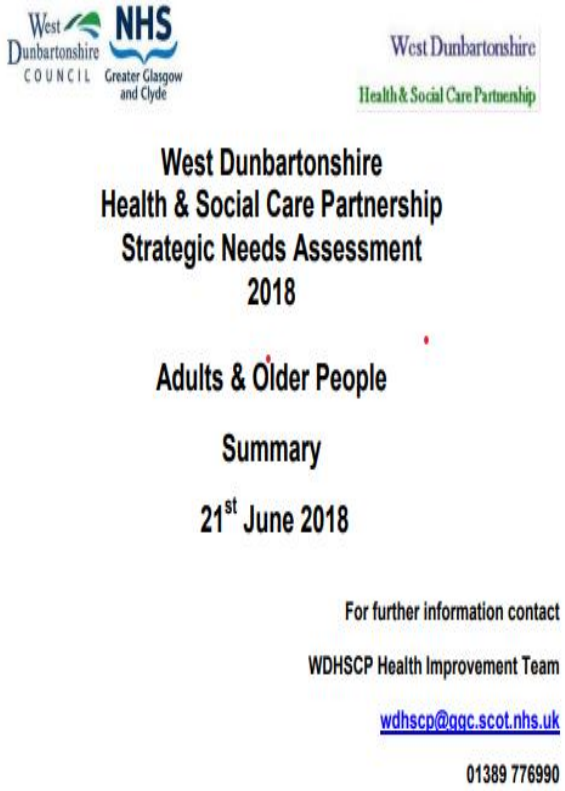
https://vhscotland.org.uk/event/vhs-annual-conference-2021/

Measuring ‘success’ of KT strategies: National

SBOD data used widely to inform and support national and local health policy and planning, for example:

- Scottish Government Public Health Priorities for Scotland
- Chief Medical Officer Annual Report for Scotland
- Audit Scotland (Scottish parliament’s watchdog for ensuring propriety and value for money in the spending of public fungs)
- Registrar General’s Annual report (to the Scottish Parliament)
- Scottish Government mental health strategy
- Scottish Government neurological conditions national action plan
- Motion in Scottish Parliament in response to SBOD findings
- Petition into full review of mental health service provision
- Drug Deaths Taskforce

Measuring ‘success’ of KT strategies: Local



West Dunbartonshire
Health & Social Care Partnership
Strategic Needs Assessment
2018

Adults & Older People

Summary

21st June 2018

For further information contact

WDHSCP Health Improvement Team

wdhscp@ggc.scot.nhs.uk

01389 776990

Inverclyde
Health and Social Care
Partnership

Strategic Needs
Assessment

Version 5.3 08/01/2019

1

- Pilot projects
  - West Dunbartonshire HSCP
  - Clyde Gateway
  - NHS Greater Glasgow & Clyde
  - NHS Lanarkshire LTC project
  - Fife ADP
- Local needs assessments
- Workforce planning

SBoD reflections on implementing BoD KT

- Be clear at outset what the aim and objectives are of your BoD study
- At outset, identify key stakeholders and involve them from outset e.g. through steering or advisory group
- Country size/'agency location is important factor in developing effective KT approaches
- It takes time to embed BoD into policy and planning thinking
  - Cultural effects model i.e. 'drip drip' effect
- Make sure you have someone in team (or access too) that is good at 'visualising' BoD data or if you have access to a Comms. or Press team, use them…
- Stay clear of BoD technical terminology to ease KT
- **Join the European Burden of Disease Network! (https://www.burden-eu.net/)**