March 15, 2012

Patient-Centered Outcomes Research Institute
Public Comments
1701 Pennsylvania Ave. NW,
Suite 300
Washington, DC 20006

Re: PCORI National Priorities and Research Agenda

The Society for Public Health Education (SOPHE) supports the efforts of Patient-Centered Outcomes Research Institute to include diverse stakeholders in the development of its National Priorities and Research Agenda, and appreciates the opportunity to provide input and build upon the work in progress.

SOPHE is a 501 (c)(3) professional organization founded in 1950 to provide global leadership to the profession of health education and health promotion. SOPHE contributes to the health of all people and the elimination of health disparities through advances in health education theory and research; excellence in professional preparation and practice; and advocacy for public policies conducive to health. SOPHE is the only independent professional organization devoted exclusively to health education and health promotion. Members include behavioral scientists, faculty, practitioners, and students engaged in disease prevention and health promotion in both the public and private sectors. Collectively, SOPHE’s 4,000 national and chapter members work in universities, medical/health care settings, businesses, voluntary health agencies, international organizations, and all branches of federal/state/local government.

Our comments on the National Priorities are as follows:

1. Assessment of Prevention, Diagnosis, and Treatment Options
   Overall, SOPHE supports this research priority. However, we recommend deleting the word “alternative”, as it is unclear whether the meaning is “different options” or “alternative to traditional care” (e.g., complementary and alternative medicine [CAM]).

2. Improving Healthcare Systems
   SOPHE supports this research priority but strongly believes the definition of the health care team must include trained health educators and health education specialists. According to the U.S. Department of Labor’s Occupational Outlook Handbook, “Health educators work to encourage healthy lifestyles and wellness through educating individuals and communities about behaviors that can prevent diseases, injuries, and other health problems”. There are more than 250 colleges and universities around the nation that provide baccalaureate and advanced degrees for health education specialists. Entry- and advanced health educators can earn a credential (Certified Health Education Specialist) after qualifying and successfully completing a rigorous examination
conducted by the National Commission of Health Education Credentialing, Inc. Health Educators work in diverse settings, including in the health care system, and play an important role in the health care and public health team across the spectrum including helping consumers learn about: prevention and disease risk reduction; diagnoses and treatment options; navigating the healthcare system; and managing chronic care conditions. They also train and supervise patient navigators/lay health advisors and help patients and families connect to community resources, which are vital in preventing readmissions and cost effective use of the healthcare system. Finally, health education specialists are involved in changing policies and systems within the healthcare system for improved coordination of care and consumer health outcomes.

One of the research topics listed under this category is: “Research that compares the effectiveness on patient outcomes of a wide range of system-level strategies to incorporate new and extended roles for allied health professionals (e.g., pharmacists, nurses, physician assistants, dentists, patient navigators, volunteers, etc.) into the healthcare team.” SOPHE strongly recommends the inclusion of Health Education Specialists in this listing of health professionals. Health educators bring many complementary skills to the healthcare team (see http://www.nchec.org/credentialing/responsibilities/ ) and play a vital role in enhancing the effectiveness of patient outcomes in a variety of areas, such as health literacy and uses of health information technology for prevention and chronic care management.

3. Communication and Dissemination Research
SOPHE highly supports this research priority. Advanced-level Health Education Specialists can play a vital role in assisting with research related to the communication and dissemination of information related to the shared-decision making process between patients and providers. Health educators have professional training in assessment, planning, implementation and evaluation of health communication that is ethnically, culturally and literacy-level appropriate, as well as the latest health information technologies that can be employed (e.g. social media, communication technology/devices). Health education specialists can provide education and training to providers to hasten the diffusion of information and to close the gap between research and practice, as well as coaching in a variety of community and healthcare environments.

4. Addressing Disparities
SOPHE strongly supports this research priority and commends the PCORI’s emphasis on understanding and addressing health disparities. Given the complexity in identifying the underlying causes of health disparities and their relationships to social determinants of health, we further recommend addressing disparities as a cross-cutting priority in each of the five research areas. Health education specialists can serve as valuable content and process resources for the provision culturally-specific information as well as modifying healthcare and community policies, systems and environments that impact the overall health of the population. Emphasis should be placed on closing the gap between healthcare systems and broader environments where people live, work, and play that ultimately have a major impact on health outcomes.

5. Accelerating Patient-Centered Outcomes Research and Methodological Research
Improving the nation’s capacity to conduct patient-centered outcomes research, by building data infrastructure, improving analytic methods, and training researchers, patients and other stakeholders to participate in this research.
SOPHE supports this research priority. SOPHE also recommends the provision of training for clinicians and practitioners in patient engagement and collaborative research design (e.g., partnerships development, patient-centered program design, and stakeholder engagement) to promote the science of PCORI.

**Funding Priorities & Initial allocation**
SOPHE recommends a specific allocation of funding that focuses on prevention efforts within the approximately 40% preliminarily allocated to Priority area 1, Assessment of Prevention, Diagnosis, and Treatment Options. Consistent with our recommendation to prioritize addressing disparities across all priority areas, SOPHE also advises PCORI to strategically prioritize research within each area that is likely to contribute to the elimination of health disparities and the achievement of health equity.

Thank you for consideration of these comments on the PCORI national priorities and research agenda and we look forward to working with you. Please contact Jerrica Mathis at jmathis@sophe.org or 202-408-9804 with any additional questions.

Sincerely,

Elaine Auld, MPH, MCHES
Chief Executive Officer