

## Healthy People 2010 Operational Definition

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**23-14. Increase the proportion of Tribal, State, and local public health agencies that provide or assure comprehensive epidemiology services to support the essential public health services.**

**23-14a. State epidemiologists with formal training in epidemiology.**

<b>National Data Source</b>	Epidemiology Capacity Assessment, Council of State and Territorial Epidemiologists (CSTE).
<b>State Data Source</b>	Epidemiology Capacity Assessment, Council of State and Territorial Epidemiologists (CSTE).
<b>Healthy People 2000 Objective</b>	Not applicable
<b>Changes since the 2000 Publication</b>	New subobjective (see Comments).
<b>Measure</b>	Percent.
<b>Baseline (Year)</b>	58 (2001)
<b>Target</b>	80
<b>Target-Setting Method</b>	Expert opinion.  For a discussion of target-setting methods, see Part A, section 4.
<b>Numerator</b>	Number of State epidemiologists that have received formal training.
<b>Denominator</b>	Number of State epidemiologists.
<b>Population Targeted</b>	State Health Department Epidemiologists.
<b>Questions Used to Obtain the National Baseline Data</b>	From the 2001 Epidemiology Capacity Assessment:  ➤ <i>How many of the State Health Department epidemiologists currently employed have formal academic training in epidemiology?</i> a) <i>PhD, DrPh, other doctoral degree in Epidemiology</i> b) <i>Professional background (e.g. MD, DO, DVM, DDS, etc) with a dual degree in Epidemiology</i>

- c) MPH, MSPH, other master degree in Epidemiology
- d) BA, BS, other bachelor degree in Epidemiology
- e) Completed formal training program in Epidemiology (e.g. EIS)
- f) Completed some coursework in Epidemiology
- g) Received on the job training in Epidemiology
- h) No formal training in Epidemiology

**Expected Periodicity** Annual.

**Comments** Formal training included either academic coursework or other training in epidemiology (e.g., the EIS program).

Objective 23-14 moved from developmental to measurable during the Healthy People 2010 Midcourse Review. Four subobjectives were created, of which this is the only measurable subobjective. The remaining subobjectives address comprehensive epidemiology services provided by Tribal, State, and local public health agencies.

See Appendix A for focus area contact information.