

## Key Data Elements

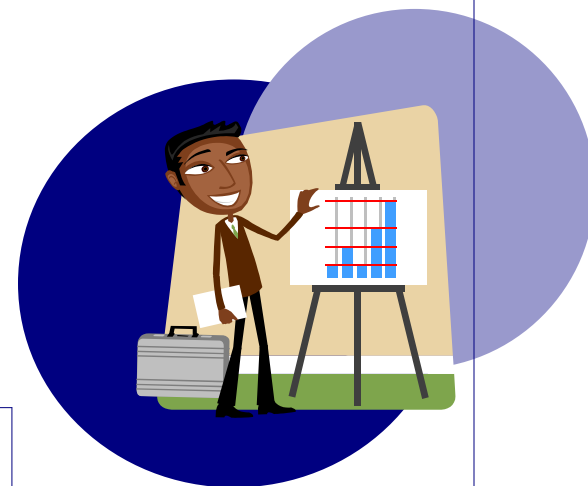
- ✓ **Source:** Where did the data come from? If you use data from a source that has a record of providing reliable data, your point will be stronger. Always include a footnote or citation to let your audience know the source.
- ✓ **Population:** Who exactly is the data talking about, and who do you want to talk about? When making comparisons, the population that you want to examine has to match up exactly with that reflected in the data, or else the comparison is not valid.
- ✓ **Size:** What is the “sample size”? In other words, is the statistic based on the responses of three people or 300 people? The larger the sample size, the more reliable the data.
- ✓ **Significance:** A significance level tells us to what degree a result is reliable. A strong significance level can add substance to data you’re using to make your point. There are different types of significance tests, so read notes for data users, if available, and familiarize yourself with the type of test being used.



*Data can be presented and compared in different ways— in essence, from different points of view.*

Type of Presentation	Pros	Cons
<b>Graphs</b>	Frame data in an easy to read, interesting fashion; give users the big picture at a glance	Difficult to capture large data sets; can get confusing if too many variables are included
<b>Data Tables</b>	Present data in orderly, easy to read manner	Not visually interesting
<b>Narrative</b>	Good for case studies; qualitative and anecdotal data; gives human face to the data	Cannot be generalized to entire population; Foundations are increasingly expecting “hard” or quantitative data, which is seen as more reliable.

## BECOMING DATA SAVVY: A QUICK REFERENCE GUIDE TO USING DATA IN YOUR PROPOSAL WRITING



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## WHERE TO LOOK FOR DATA

### Local Sources:

OCHNA, OC Health Care Agency, California Health Interview Survey, Community Surveys, Program Data



- **OCHNA**

<http://www.ochna.org>

- **OC Health Care Agency**

<http://www.oc.ca.gov/hca/index.htm>

- **Conditions of Children Reports**

<http://www.ochealthinfo.com/cscs/report/index.htm>

### State Sources:

CA Department of Finance; California Health Interview Survey (CHIS), Office of Statewide Health Planning (OSHPP)

- **California Dept. of Finance**

<http://www.dof.ca.gov>

### National Sources:

Center for Disease Control (CDC) BRFSS Survey; National Institutes of Health (NIH); Healthy People 2010; US Department of Health and Human Services

- **Center for Disease Control BRFSS**

<http://apps.nccd.cdc.gov/brfss/index.htm>

- **Census Bureau Home Page**

<http://www.census.gov>

- **National Institutes of Health**

<http://www.nih.gov>

- **National Cancer Institute**

<http://www.cancer.gov/statistics/>

- **Healthy People 2010**

<http://www.healthypeople.gov/>

## TALKING THE TALK:

### DATA VOCABULARY

**Association:** A general term for the relationship among variables.

**Chi-square** (pronounced 'kl- skwer'): A number that is a result of performing a chi-square test for statistical significance. This test evaluates whether a relationship between two variables is significant, or probable. Related to p-value.

**Confidence Interval:** A plus-or-minus figure that indicates how far in each direction a reported number would be expected to vary. The smaller the confidence interval, the more accurate the number.

**Confidence Level:** The degree to which you can be "sure" that a reported number is correct. For example, 95% confidence level means that you are 95% "sure."

**Indicator:** Statistics used to measure current conditions as well as to forecast trends.

**P-value:** (a.k.a. probability value) Tells us to what degree a result is reliable. Related to confidence level; reporting that the p-value  $\leq 0.05$  is the same as reporting a 95% confidence level. So, the smaller the p-value, the more reliable your number.

**Primary Data:** Data collected by the research specifically for the research project.

**Secondary Data:** Data that has been collected for another purpose, but may be reanalyzed in a subsequent study.

**Statistic:** A number computed from data regarding one or more variables.

**Variable:** a variable feature or factor among the population being examined

- **Dependant Variable:** A variable that may be predicted by or caused by one or more independent variables.
- **Independent Variable:** A variable that may predict or cause fluctuation in a dependant variable.

## WALKING THE WALK:

### WHAT YOU CAN DO WITH DATA

- ✓ Determine priority health issues and identify populations at highest risk for illness, disability and death.
- ✓ Develop strategic plans and target prevention programs
- ✓ Monitor the effectiveness of interventions and evaluate progress in meeting prevention goals.
- ✓ Educate the public, the health community and policy makers about disease prevention.
- ✓ Support community policies that promote health and prevent disease.



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*OCHNA serves as the primary source for data on the health needs and well-being of Orange County's 3 million residents.*

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