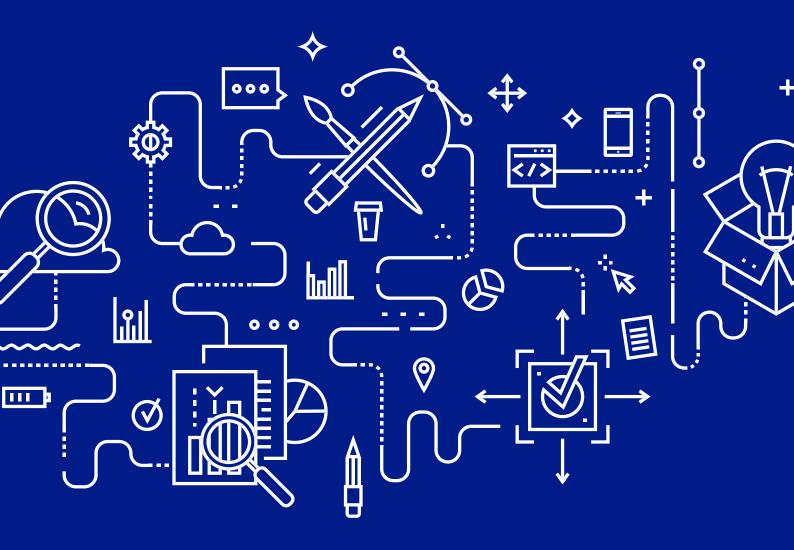
Communicating with Data:

A Guide to Writing Public Health Data Reports









Well-written, accurate and accessible reports are critical tools for communicating public health data and for advancing policies that are responsive to the issues data reveal. All public health agencies should produce data reports and tailor them to a variety of audiences. This document provides guidance on writing data reports, suggestions on how and when to produce specific kinds of reports, and ideas to help organizations assess their report-writing needs. The document should be useful to surveillance and epidemiology staff who wish to communicate data to external audiences, and also to communications staff who wish to incorporate data into ministry or health department communications products or websites.

This Guide Covers the Following Topics:

Introduction to Public Health Reports	1
The Value of Public Health Reports	2
Kinds of Reports	3
Principles of Effective Report Writing	4
Good Graphics	8
Common Graphics	9
Disseminating Reports	14
Guidance for Writing Specific Types of Reports	15
Annual Health Reports	16
Brief Topical Reports	17
Community Health Profiles	18
Special Population Profiles	19
Report Writing as an Agency Function	20
Help To Get Started	22
Checklists/Job Aids	23

This guide was developed by Vital Strategies under the Bloomberg Philanthropies Data for Health Initiative. Written by Laura Cobb, Cynthia R. Driver and Lara Tabac. Designed by Johnny Hsu.

Introduction

Public health reports are official documents produced by Ministries of Health or other relevant agencies that communicate health information. These documents can be produced in different formats depending on their purpose and on the intended audience. Public health reports may be used to: inform readers about particular public health issues, describe the health status of particular populations and convey policy recommendations linked to data.

The Value of Public Health Reports

There are many important reasons to prepare public health reports. Perhaps the most basic is the value of sharing information about the health status of a country or a community with a variety of audiences.

Reports foster communication between government agencies outside of the health sector because they are useful sources of information when making recommendations and proposals about resource allocation, priorities, program design and policy development. They can also benefit non-governmental stakeholders seeking specific information on a sub-group or health issue.

Health reports can communicate gaps in current health strategies, describe progress towards health goals (for example, national health indicators and the Sustainable Development Goals) and illustrate where increased resources need to be mobilized.

They are also vital tools for managing an agency's health messaging; in their absence, inaccurate information tends to fill the void.

Finally, they offer accountability for data "producers" to analyze and interpret data in a timely and rigorous way. When a report is the end result, publication deadlines create an internal mechanism for monitoring efficient data-handling within an organization.

Kinds of Reports

There are many different kinds of reports, each with its own specific characteristics. One of the most important distinctions is whether a report is long or short.

Long Reports

Long reports are compendia of large amounts of health data and are typically more than 20 pages. Rather than focus on a specific topic or audience, these reports try to cover as many health topics as possible. The goal is often to present a wide range of health information from a specific year (annual health reports) or data source (survey or vital statistics reports) or on a wide population (country). The best long reports start out with executive summaries that highlight key messages that readers might otherwise miss if scanning through the whole document. Information should be presented clearly, but scientific language is acceptable. Judiciously chosen graphs or tables should accompany the text.

Long reports are generally intended for an audience of health stakeholders rather than the general public. Media might be interested as well, because of the range of data presented.

Due to their length and density, long reports should be disseminated digitally, in a format that allows for navigation and exploration and makes the information widely available without incurring large printing costs.

A small number of printed copies can be valuable for those without access to the Internet or to share with the media.

Short Reports

Short reports are under 10 pages and focus on a specific topic (generally a disease or risk factor), sub-group, or geographic area. They are highly focused, often accompanied by policy recommendations and provide readers with just a few clear take-away messages.

Because short reports are specific to a topic, area, or population, they can attract a range of audiences, including civil society representatives and the media. They should be easy to read and understand, jargonfree, and supported by eye-catching graphics that clarify complicated information. They require concise and engaging language that is accessible to many different kinds of readers.

Short reports should be made available online but can also be printed and distributed to relevant stakeholders who can distribute them to people without Internet access.

Examples of short reports include brief topical reports, community health profiles (organized by geography), and special population reports (organized by vulnerable populations, race/ethnicity, gender, etc.).

Principles of Effective Report Writing

A good report tells a clear and attention-grabbing story that draws readers in. The story could be about the health status of a particular community or sub-group or it could be more expansive and cover the health status of an entire country. Either way, there should be a clear beginning, middle and end, with each section helping make an argument about why the topic matters and merits attention.

A well-written report has a purpose, a clearly identified audience, and a simple message, including key take-away points. It should be evident from the beginning *why* the report was written, to *whom* it is addressed and *what* it is aiming to communicate.

The purpose should not simply be to transmit information, but rather to enable or stimulate action: to adopt a policy, establish a priority, allocate or request resources, change behavior, advocate a position, etc.

Reports should address a particular target audience or more than one: perhaps the scientific community, health professionals, government officials, civil society stakeholders or the public. This Guide focuses on reports that are **not** intended for scientific audiences. As such, they should be written in simple language, with frequent use of data visualizations for quick and easy interpretation.

Audience

In order for your audience to understand, use, and benefit from your report, you need to be aware of who they are, what they need, and the best way to present information so that that is relatable.

To help define the identity and needs of your audience, answer the following questions:

Who are they? Why do they care about the topic? What is their background? What is their level of education? What might they know/not know about the topic? What do they **need** to know? What do you want them to do with the information in the report?

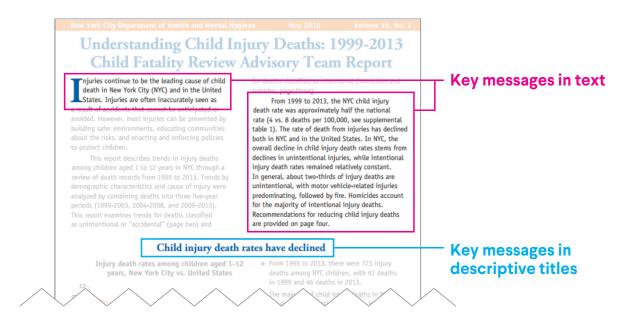
Key messages

Key messages are the arguments or information you most want your readers to take away from your report; they are what your audience needs to grasp in order to transform your ideas into action. They are memorable and resonate personally with your audience. Key messages convey a sense of urgency and ideally spur your reader to want to read the entire report. As such, they should be highlighted prominently at the start of the report for quick reference. Key messages must be supported throughout the body of the report with text and graphics.

In order to develop your key messages, determine on a general level what you are trying to say to your audience, then focus your ideas and articulate them in the simplest and clearest language.

Structure of Reports

In a short report, key messages may be presented in the form of bullets; in a longer report, they may be contained in an executive summary lasting a few pages.



Public health reports tell a story and are written to provide information and persuade stakeholders to pursue a course of action. There is not a single preferred structure or sequences of sections, as there is in a scientific paper. Nevertheless, all reports should have a clear, logical flow, and should include an introduction, explanation of methods, discussion of results, and conclusions. Key messages should be reiterated throughout the text.

Depending on the purpose and audience of a data report, it should also offer specific recommendations for action as a concluding section.

Data quality

Data presented in health reports should be of high quality: complete, timely, accurate and reliable. Internal organizational standards about data quality should be established and met before any data are published. The authors need to feel confident that the information presented is the best available, with any limitations clearly noted. Areas that may be of concern include:

- + Representativeness of data
- + Completeness of reporting (vital statistics data, health services data)
- + Reliability of estimates (can be measured by the relative standard error)

Writing Guidance

USE OF LANGUAGE AND WORD CHOICE

Write your public health reports in everyday language. Use concrete, specific, and precise words that do not overcomplicate your message. Use as few words as possible.

- *** Too complicated:** The future plans of the agency involve launching a project on tobacco control at a cost of \$10M in the month of October.
- × Just right: The agency will launch a \$10M tobacco control project in October.
- * **Too complicated:** The health care provider conducted interviews to collect data to ascertain potential cause of mortality.
- * Just right: The doctor asked questions to figure out cause of death.

AVOID JARGON, ABBREVIATIONS AND OTHER LANGUAGE ONLY KNOWN TO PEOPLE WITHIN

A SPECIALIZED FIELD

Jargon is insider language that is not generally understood by the wider public and should therefore not be included in public health reports meant for multiple audiences.

- * Jargon: As a consequence of rising rates of HIV among MSM, CSW and IDUs, rates of XDR TB have also risen in high-risk populations.
- * **No jargon:** Increasing tuberculosis rates among men who have sex with men, sex workers and injection drug users have been driven by rising rates of HIV.
- × Jargon: One of the changes from MDGs to SDGs is to include global targets for NCDs.
- * **No jargon:** The new Sustainable Development Goals aim to reduce non communicable diseases.

WRITE FOR A LAY AUDIENCE

- * Scientific: Suicide increased 9.65% among adolescents between 2005 and 2015 (p<0.05), with 4.6 deaths per 100,000 in 2015 in the township.
- * Lay: There were 600 suicides in the township in 2015, a 10% increase over 2005.
- Scientific: We conducted a longitudinal analysis of 900 men and found that the odds of myocardial infarction (MI) were 3.45 times greater in smokers than in non-smokers.
- * Lay: Men who smoke are more than three times more likely to have a heart attack than men who don't.

Analyses

Reports should include data analyses that are the best suited to the type of information and the key messages that are being presented. One way to figure out what kind of analysis is appropriate is to consider the type of story that you want to tell. This data story needs to communicate the importance and relevance of the data you are sharing. You can use data to tell the following basic story types:

- + Description: What is the situation now?
- + Description with comparison: What is the situation now and how do we compare to other groups?
- + Change over time: How does this year compare to last year?
- + Explanation: How did we get here?
- + Prediction: Where are we going from here?

Consider the following guidelines for producing the data that go into the report:

- + Check and double-check that all analyses are correct, preferably by having multiple analysts conduct the same analysis.
- + Conduct statistical tests of all epidemiologic analyses and establish a standard for the level of significance that justifies highlighting a finding in the report (e.g., only highlight findings that are significant at p<0.05). Significance testing results do not need to be indicated in the actual report.

Good Graphics

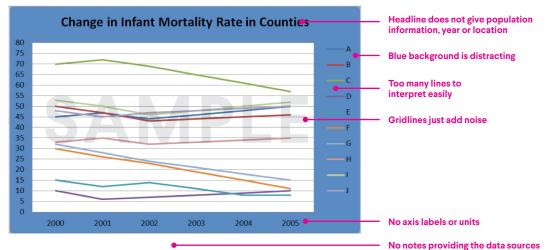
Graphics add a clarifying dimension to data-heavy reports. The right graphics "tell a story" in a visual manner that is easy to understand.

The best graphics are simple and yet elegant and show proportions, comparisons, trends or geographical information. Graphics can illustrate the purpose of a report and clarify certain messages.

Graphics must be easy to understand without an explanation from the supporting text, which readers often skip.

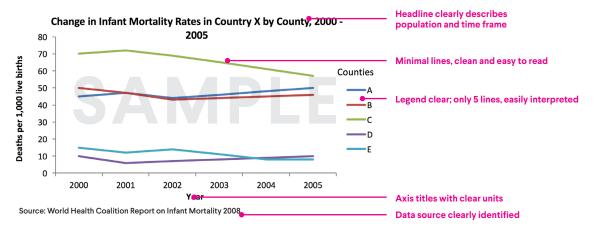
Units of measurement must be clear at a glance, as should the population, data source and dates of data collection. The font should be large enough for easy reading.

The title of the graphic can be either "technical" (a simple description of the data, with year, location, etc.) or a "headline," an interpretive statement about the meaning of the data. Headlines are best in reports for lay audiences.



Example of bad graphic

Example of good graphic



Common Graphics

Graphics are generally either graphs, charts, infographics or maps. The choice of what type to use will depend on both the message you are trying to convey and your design budget.

Commonly Used Graphs and Charts

Considerations:

- + Can be created in Microsoft Excel, with adjustments to make them visually compelling
- + Do not require specialized skills
- + Format easy to understand
- + Not as visually compelling as maps or infographics

Bar/Column Chart

Communication purpose:

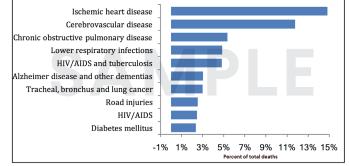
- + Comparison across populations (e.g. men v. women)
- + Comparisons across and within populations

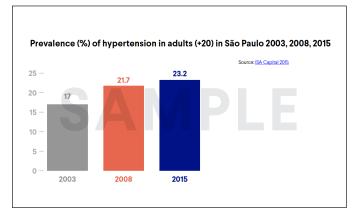
(e.g. comparing men v. women, but also showing multiple age groups of each)

Design tips

- Total number of bars should be no more than 12 or the chart will be hard to interpret
- + Bars (horizontal display) are better than columns (vertical display) when you have one series of data with numerous points in the series
- + Columns are better than bars when you have more than one series of data points
- + If you have many groups to compare, try organizing them from greatest to least

Global top ten causes of death, 2013





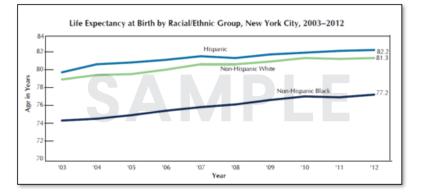
Line Graph

Communication purpose:

- + Trends over time in a single group
- + Comparisons of trends over time across groups

Design tips

- + Comparing more than four groups makes the graph very difficult to read
- + If data intervals are unequal, the spacing on the figure should reflect this



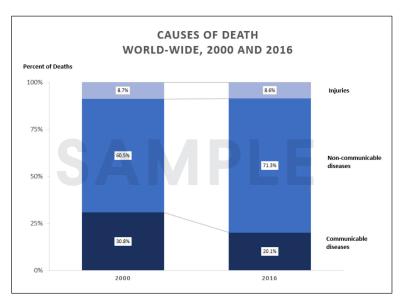
Stacked Column or Bar

Communication purpose:

- + Showing the composition or break down of a population of interest, i.e. percentages of a whole
- + Comparing composition across populations or time

Design tips:

- + When bars total 100%, differences in composition are emphasized
- When bars total the number of cases, both differences in composition and differences in rates are emphasized
- If using stacked columns, compare no more than two populations or time periods
- Stacked columns can show the same kind of data as pie charts but are preferred because it is easier to visually estimate a proportion of a column or bar than a pie slice—and easier to compare bars than slices



Maps

Maps are particularly useful when you want to highlight location data. They are very effective at showing the geographic distribution of disease.

Pros:

- + Visually appealing way of representing spatial data
- + Geographic differences are easy to grasp

Cons:

- + Maps can be manipulated easily to show only the information the author wants
- + Require specialized software and data (shapefiles)
- + Can lose precision when fitting data onto a map

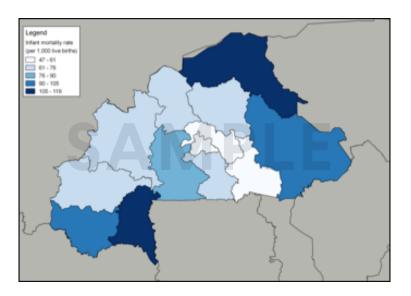
Choropleth map

Communication purpose:

 Visualizing disease prevalence or other standardized rates and how they compare across administrative areas (region, country, province, district, etc.).

Design tips:

- There should be no more than 3-6 categories or ranks
- + Colors should be arranged in an order that indicates decreasing or increasing values
- A common choice is darker colors for higher values and lighter colors for smaller values
- + Include legend to assign meaning to the colors
- There should be enough contrast between colors to be clearly differentiated



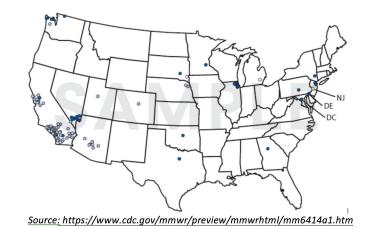
Dot map

Communication purpose:

+ Visualizing the location of cases on a map.

Design tips:

- + Useful for raw data
- Dots can represent a single case (one to one) or multiple cases (one to many – less common)





Infographics

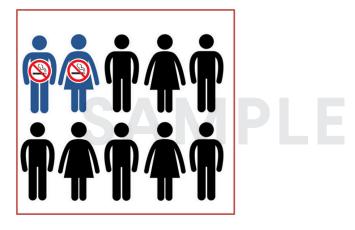
Infographics visually represent information in a style that is generally outside the scope of programs like Microsoft Excel. Some infographics illustrate very simple pieces of information while others try to convey much more complicated messages with clever artistic rendering.

Pros:

- + Can be more visually appealing than traditional charts
- + Eye catching
- + Can incorporate a wider range of information than standard graphs

Cons:

- + Require special software or design skills to create
- + Can become overly designed and complicate the message



Top causes of death and rates (per 100,000 population)

Kingsbridge Heights and Bedford			New York City	
CAUSE: NUMBER OF DEATHS	DEATH RATE	RANK	DEATH RATE	
Heart disease: 1,229	232.1	1	202.6	
Cancer: 784	143.5	2	156.7	
Lower respiratory diseases: 167	31.7	5	19.8	
Flu/pneumonia: 159	30.1	3	27.4	
Diabetes mellitus: 148	27.3	4	20.6	
Stroke: 132	24.3	6	18.8	
HIV: 98	14.0	10	8.4	
Drug-related: 88	12.7	9	8.6	
Accidents (excluding drug poisoning): 86	14.0	0	11.8	
Hypertension: 75	14.5	8	11.4	
	CAUSE: NUMBER OF DEATHS Heart disease: 1,229 Cancer: 784 Lower respiratory diseases: 167 Flu/pneumonia: 159 Diabetes mellitus: 148 Stroke: 132 HIV: 98 Drug-related: 88 Accidents (excluding drug poisoning): 86	CAUSE: NUMBER OF DEATHSDEATH RATEHeart disease: 1,229232.1Cancer: 784143.5Lower respiratory diseases: 16731.7Flu/pneumonia: 15930.1Diabetes mellitus: 14827.3Stroke: 13224.3HIV: 9814.0Drug-related: 8812.7Accidents (excluding drug poisoning): 8614.0	CAUSE: NUMBER OF DEATHSDEATH RATERANKHeart disease: 1,229232.11Cancer: 784143.52Lower respiratory diseases: 16731.75Flu/pneumonia: 15930.13Diabetes mellitus: 14827.34Stroke: 13224.36HIV: 9814.010Drug-related: 8812.79Accidents (excluding drug poisoning): 8614.07	

Source: https://www1.nyc.gov/assets/doh/downloads/pdf/data/2015chp-bx7.pdf

Graphics Summary Chart

Type of Graphs/Chart	Best Uses			
Bar/Column Chart	 Comparisons across populations Comparisons across and within populations 			
Line Graph	 Trends over time in a single group Comparisons of trends over time across groups 			
Stacked Column or Bar	 Showing the composition or breakdown of a population of interest: percentages of a whole Comparing composition across populations or time 			
Choropleth Map	 Visualize disease prevalence or other standardized rates and how they compare across administrative areas (region, country, province, district, etc.) 			
Dot Map	+ Visualize the location of cases on a map			
Infographics	 Present more information than is captured in traditional graphs/charts/maps Illustrate strong visuals Grab audience's attention 			

Disseminating Reports

The value of a report cannot be achieved until it is disseminated to the appropriate audiences. The dissemination plan is determined by the kind of report published and the best methods for reaching its intended readers.

First, determine how and where the report will be published, what the appropriate communication channels are for creating awareness of the subject, the party responsible for dissemination, and how exactly it might reach its audience. For example, the report can be published online only or both online and in print. Reports that are disseminated online can be created in PDF format, with hyperlinks in the table of contents. Or they can be web pages, whether static or with some level of interactivity. The choice of publication type depends on your audience (do they have access to the Internet?), your budget (printing and interactive web pages can be expensive), and the length of the report.

Common strategies for making people aware of a new report include e-mail blasts to mailing lists, social media, press releases and dissemination meetings.

Name of Publication	Length	Target Audience/ Stakeholders	Objective of Communication	Format	Dissemination Methods
Health Status of Migrant Workers in City Y	Migrant orkers in	Ministry of Migrant Affairs, Ministry of Health, NGOs working with immigrant populations	Motivate resource allocation, inform on critical health issue	Online/Print	Email to appropriate ministry staff and relevant NGOs; publish on agency website; send to journalists with accompanying statement from ministry; distribute
					hard copies in migrant health posts
Annual Health Report – Country Z	200 pages	Relevant ministries, Selected donors	Share data for future analysis	Online	Email blast to all relevant recipients
Health Alert – Spread of Zika	1 page/front and back	General public	Communicate health information	Online/print	Send to journalists

Sample Dissemination Plan

Guidance for Writing Specific Types of Reports

 \rightarrow

Annual Health Reports Brief Topical Reports Community Health Profiles Special Population Profiles

Annual Health Reports

What:

An Annual Report is a compendium of the most important national health statistics collected in a given year.

Purpose:

Evaluate progress towards strategic plan goals

Provide a picture of leading causes of illness and deaths in the population during a given year

Data sources:

Data sources should include the full range of information available for the year. An ideal annual report will incorporate health services data, survey data, vital statistics data, and then triangulate these data sources to get the best possible estimates.

Key information to include:

Analysis of key indicators, including:

- + Comparisons by age, sex and other key social, economic, and geographic groups
- + Trends over time
- + Geographic patterns
- + Information on limitations of the data

Steps for Creating an Annual Report:

- 1. Identify target audience and purpose of report
- 2. Define key indicators
- 3. Define main analyses to conduct for each indicator
- 4. Perform analyses and assess findings
- 5. Review findings as they relate to strategic goals
- 6. Decide which findings should be included
- 7. Decide which findings require a chart, table, map or simply text
- 8. Outline report
- 9. Write report
- 10. Revise and edit report
- 11. Determine dissemination strategy
- 12. Finalize and publish in print and on the web
- 13. Disseminate to intended audience

SAMPLE OUTLINE

Introduction

- + Forward, acknowledgments
- + Table of contents
- + Executive summary

Body

- Introduction/methods (including limitations)
- + Results

Conclusions

- + Main conclusions
- + Progress towards strategic goals
- + Recommendations

Appendices

+ References

- + More detailed tables
- + Additional methods and definitions

EXAMPLES

Ontario, Canada's 2011 Annual Report:

http://www.health.gov.on.ca/en/common/ ministry/publications/reports/cmoh_13/ cmoh_13.pdf

Quebec, Canada's 2016 Annual Report:

http://publications.msss.gouv.qc.ca/msss/ fichiers/2016/16-228-01.pdf

Colombia's 2014 Annual Report (note the use of graphics):

https://www.minsalud.gov.co/sites/rid/Lists/ BibliotecaDigital/RIDE/VS/ED/PSP/ASIS%20 24022014.pdf

Brief Topical Reports

What: A Brief Topical Report is an in-depth look at one health issue. It should be no more than four pages long. Ideally, such reports form a series, with a regular publication schedule and consistent format.

Purpose: Highlight a specific topic

Data sources: The data sources will depend on what information is available on the topic. An ideal report would draw information from multiple sources to tell a nuanced story. Certain topics, such as risk behavior (smoking, nutrition, etc.), often draw data most easily from surveys. When focused on a disease, these reports may rely more on health services data and/or vital statistics data to show both the services provided to those with the disease and mortality due to the disease.

Key information to include:

- + Context and history of the problem
- + Key messages that you want to get across
- + Results from analyses that look at
 - + Trends over time
 - + Disparities across sub-groups
 - + Prevalence of key risk factors
 - + Consequences of the problem
 - Analyses that look at key components of the health problem (ie. if topic is injuries, looking at intentional v. unintentional)
- + Recommendations

STEPS TO WRITING BRIEF TOPICAL REPORTS

For the series as a whole:

- + Identify topics
- + Determine a regular schedule of topics that require a series of reports.
- + Consider target audience for the series of reports.
- + Develop a template for the series of reports.
- + Develop a dissemination strategy.

SAMPLE OUTLINE

Brief Introduction to the issue (1/4 page max)

- + Why should the audience care?
- + Is there a specific history it needs to know?

Body (approximately 2 pages)

- + Key messages, explanatory text, graphics
- Approximately 2 graphics per page, with text and key messages in titles

Recommendations (1/2 page)

+ What needs to be done? By whom?

Data sources, references, citation, web address: 1/3 page

EXAMPLES

http://www1.nyc.gov/assets/doh/ downloads/pdf/survey/survey-2012studentobesity.pdf

https://www.cdc.gov/vitalsigns/ painkilleroverdoses/

Here is a link to a topical report that is a bit longer:

http://www.aihw.gov.au/WorkArea/ DownloadAsset.aspx?id=60129553222

For each individual report:

- + Consider the specific audience.
- + Consider appropriate topics.
 - + Disease or risk factor is increasing and the public needs to be aware.
 - + Disease or risk factor has been decreasing due to interventions that should be highlighted.
 - + Are there special events (such as World AIDS Day) to help highlight the topic?
- Conduct a brief review of the literature to describe the size, cause and consequence of the problem; this will help guide the introduction and which analyses to perform.
- Review available data sources to understand what information you may have access to.
- + Based on literature review and available data, decide on the most important issues to cover and define a preliminary set of analyses to run.
- + Determine main message and overall story that emerges from data.
- + Conduct a range of data analyses.
- + Determine important results.
- + Prioritize messages and make relevant figures and maps.
- + Succinctly write up text with accompanying graphics.
- + Revise and edit.
- + Finalize and publish on the web.
- + Adjust dissemination strategy if the audience for the specific report differs from the series as a whole.

Community/Geographic Health Profiles

What: A Community or Geographic Health Profile is a comprehensive examination of the health of a neighborhood or community. These can be written about a single community or, more commonly, as part of a series of reports covering all communities in a given area (e.g. all neighborhoods in a city or all districts in a country). Graphically and visually rich, these are generally 15-20 pages long and written for a lay audience.

Purpose: Community Health Profiles may go beyond traditional measures of health status to a broader definition including housing quality, environmental conditions, sanitation and access to food and clean water. These reports provide valuable information on significant health issues and can serve as a resource for improving health community by community.

Data Sources: Any health and non-health data available at the community level. This could include health services data, vital statistics, social services data, infrastructure information and community level health survey data if available.

Key Information to Include:

- + How the community of interest compares to other communities
- + How it has changed over time

SAMPLE OUTLINE

- + Introduction
- + Neighborhood Conditions
- + Social and Economic Conditions
- + Health Status Report
- + Health Care
- + Health Outcomes
- + Conclusions and Recommendations

EXAMPLES

http://fingertipsreports.phe.org.uk/healthprofiles/2016/e09000002.pdf

https://www1.nyc.gov/site/doh/data/datapublications/profiles.page

STEPS FOR WRITING COMMUNITY HEALTH REPORTS

For the series as a whole:

- + Develop a template that can be adapted for each community.
- + Define key indicators.
- + Determine your graphics; maps are a great way to show differences between communities.
- + Use indicators to define the analyses needed.
- + Develop a dissemination strategy.

For each individual report:

- + Determine the community's most important health issues (based on data analysis, community concerns, previous reports, etc.).
- + Succinctly write up text with accompanying graphics.
- + Revise and edit.
- + Finalize and publish on the web and in hard copy.
- + Adjust general dissemination strategy for each community.

Special Population Profiles

What: Special Population Profiles provide information on health characteristics in a particular sub-population. Populations can be defined by demographic or health characteristics:

- + Socio-economic status (e.g. poorest 25%)
- + Ethnicity
- + Age (e.g. elderly, children under 5)
- + Gender
- + Occupation
- + People with disabilities

Purpose: A good advocacy tool for highlighting special risks and the need for increased resources. Brings attention to communities that are hidden or that face different or disproportionate health challenges compared to the population as a whole.

Data Sources: Data requirements are driven by the population of interest and will likely differ widely across populations.

Key Info to Include:

- + General health statistics of interest, including life-expectancy, leading causes of death, etc.
- + Demographic information about the population (e.g. what percent of the elderly under the poverty line)
- + Indicators of specific interest to that population. For example:
 - Reports on sub-populations such as injection drug users might focus on HIV, Hepatitis C, access to specialized services or other treatment and to safe injection sites/needle exchange.
 - + Reports on the elderly might focus on falls, multi-pharmacy, social support and isolation, etc.

SAMPLE OUTLINE

- + Rationale
- + Results
- + Conclusion/Recommendations
- + Appendix (methods and references)

EXAMPLES

A special population report about New York City homelessness that draws from multiple data sources:

https://www1.nyc.gov/assets/doh/ downloads/pdf/epi/epi-homeless-200512. pdf

This one is geared to a more technical audience:

http://www.ci.org.za/depts/ci/pubs/ pdf/general/gauge2009-10/sa_child_ gauge09-10_status_child_health.pdf

This report covers multiple countries. The more creative design is intended to appeal to lay audiences:

http://www.unaids.org/sites/default/files/ media_asset/05_Peoplewhoinjectdrugs.pdf

STEPS FOR WRITING SPECIAL POPULATION PROFILES

- + Based on a review of literature, determine rationale for focusing on this population, including key health issues impacting it.
- + Based on key health issues, determine indicators and analyses specific to the population.
- + Determine general health indicators to present.
- + Determine best graphics to illustrate findings.
- + Succinctly write up text with accompanying graphics.
- + Revise and edit.
- + Finalize and publish on the web.
- + Develop dissemination strategy that reaches key stakeholders.

Institutionalizing Report Writing

Producing and sustaining a series of public health reports takes planning and a collaborative effort among multiple staff.

+ Assign responsibility to a central team for managing the production of the report series. This team is not responsible for authoring the reports. Rather, their responsibilities should include:

- + Establishing the report format
- + Interacting with the authors of each report, assisting with report conceptualization, and editing the reports
- + Overseeing the graphic design process
- + Ensuring a good dissemination plan for each report

+ Develop a report schedule that identifies the topics and authors of each report

- + Establish analytic standards and guidelines for the data that will be presented in reports
 - + Do comparisons need to be statistically significant in order to make a declarative statement that something has increased or decreased, or is greater in one group than another?
 - + Is there a certain level of completeness or quality that is required in order for data to be published?
 - + Determine annual dissemination calendar and responsibilities
 - + How will each report be published and disseminated?
 - + Are there any national or international celebrations (World AIDS Day, International Women's Day, International Day of the Child, etc.) that would contribute to publicizing certain reports?

Report Dos and Don'ts

DO:

- + Define your audience.
- + Stick to a clear and concise message.
- + Tell a story.
- + Use simple and plain language.
- + Conduct appropriate analyses.
- + Select appropriate graphics.
- + Highlight key messages and conclusion.
- + Edit, edit, edit and then edit some more.

DON'T:

- + Attempt to address several different audiences.
- + Jumble your message.
- + Cram extra and unhelpful information into the report.
- + Fill every inch of a page.
- + Leave your readers to draw their own conclusions.
- + Add extra graphics that don't clarify the message.

Getting Started

Report Preparation

- 1. Identify your objectives
- 2. Identify your audience
- 3. Identify your report type
- 4. Identify your collaborators
- 5. Assign roles (analysis, interpretation, write-up, recommendations, etc.)

Planning Your Report

- 1. Determine template: Does it exist or will you have to develop a new one?
- 2. What are the key indicators or pieces of information that will be shared in the report?
- 3. What are the key messages to be extracted from the report?
- 4. Determine visualizations
- 5. Prepare data and write
- 6. Double-check all analyses
- 7. Revisit report topic: Does data support original content of report?
- a. Have key messages shifted?
- b. Distill key messages down to the simplest and clearest language
- c. Select visuals that support key messages
- 8. Write your report
- 9. Add graphics
- 10. Edit
- 11. Disseminate

Graphics Check List

- _____ Is the graphic necessary? Does it correspond to a key message of the report?
- ____ Is the graphic easy to understand?
- _____ Is the text large enough to be easily read, i.e. is the font size large enough to be easily read?
- _____ Is the graph clearly labeled—by axes, units of measure and legends if necessary?
- Have all unnecessary gridlines, boxes and numbers been deleted?
- ____ Would people unfamiliar with the report's text be able to interpret the graphic?
- _____ Is the data accurately reflected by the graphic?
- _____ Is the graphic positioned near the text that it highlights?
- ____ Can the graphic be understood without any accompanying text?
- _____ Is the take-away message of the graphic clearly stated, for example in the title?
- _____ Is information such as population and data source clearly indicated in or near the graphic?

Public Health Report Writing Checklist:

- ____ Does the report present the information it claims to present?
- ____ Does it respond to the information needs of the intended audience?
- _____ Is the material presented in a way that tells a logical story?
- ____ Are the key messages clear and concise?
- ____ Is material summarized in a conclusion?
- ____ Are recommendations for action included?
- ____ Have the data been double-checked for accuracy?
- ____ Are graphs and tables labeled and clear?
- _____ Are data in graphs also explained and analyzed?
- ____ Does the conclusion relate to the information presented?
- ____ Has all irrelevant information been removed?
- _____ Is the report jargon-free and written in simple language?
- ____ Is all borrowed information cited and acknowledged?
- ____ Has the report been thoroughly edited and proofread?