

# California Health Interview Survey

Making  
California's  
Voices  
Heard on  
Health



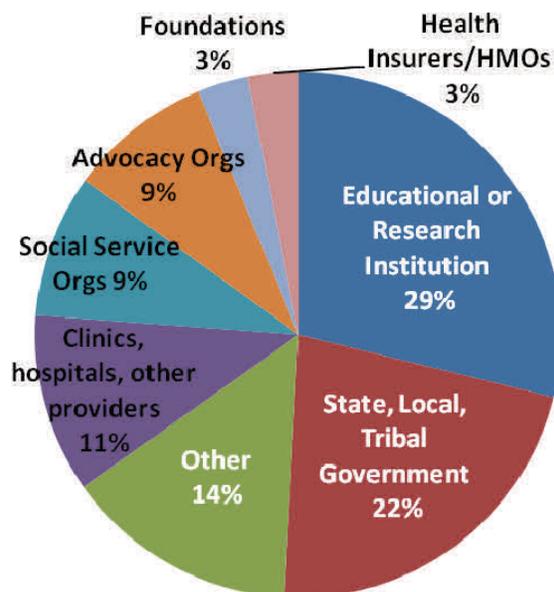
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## Who Uses CHIS?

A **new** survey of California Health Interview Survey (CHIS) users found that:

- ◆ CHIS serves a diverse audience of individuals and organizations with a broad array of health data needs — from policy analysis and development, to service and program planning, to research and more.
- ◆ Survey participants access CHIS data in multiple ways: AskCHIS (our free online query system), publications using CHIS data, Public Use Files and the CHIS Data Access Center.
- ◆ Respondents emphasized the importance of CHIS's rich, representative local data as well as data capturing California's racial, ethnic and other diversity.

Exhibit 1. – CHIS Users by Organizational Affiliation



### What is CHIS?

The California Health Interview Survey (CHIS) is the nation's largest population-based state health survey. Conducted by UCLA Center for Health Policy Research (the Center), the survey provides policy makers, researchers as well as non-specialist audiences with important and accessible information on the health and health care of California's diverse population.

### Who uses CHIS?

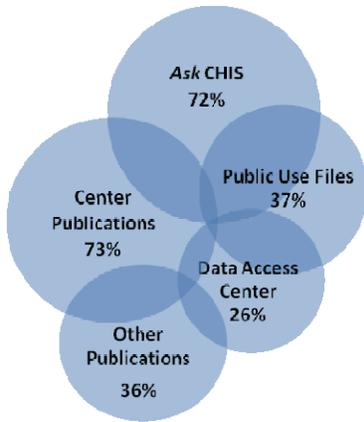
CHIS users come from a range of organizational settings (Exhibit 1): educational and research institutions (29%); state, local, and tribal governments (22%); health care providers (11%); social service organizations (9%); advocacy organizations (9%); and others.

*Continued...*

## How do users get CHIS data?

Respondents get CHIS data from Center publications (73%); AskCHIS, our free online query system (72%); Public Use Files (37%); publications of other organizations (36%); and our Data Access Center (26%, see Exhibit 2). Many users obtain CHIS data from more than one source.

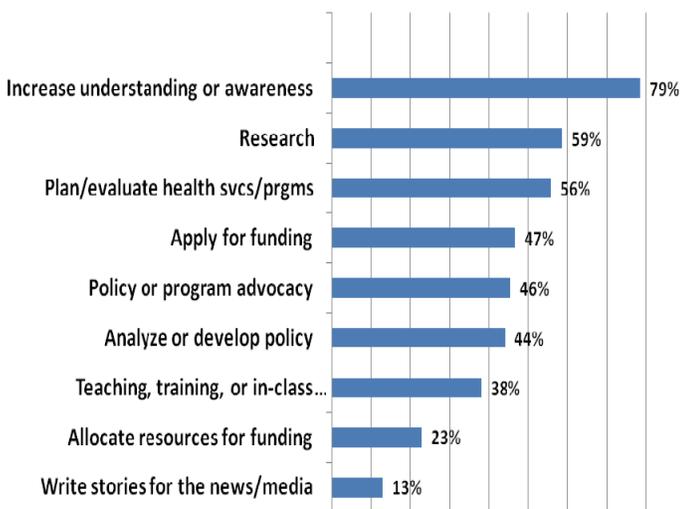
**Exhibit 2. – How CHIS Users Access Health Data**



## How do individuals use CHIS data?

Survey respondents most commonly said that they use CHIS data to “increase understanding and awareness” (79%). Fifty-nine percent said they used the data to conduct research while 56% used the data for planning, implementing, or evaluating health programs or services. Other frequently reported uses of the data include applying for funding (47%), policy or program advocacy (46%), and analyzing or developing policy (44%). Most respondents reported multiple uses.

**Exhibit 3. – How the Data Are Used**



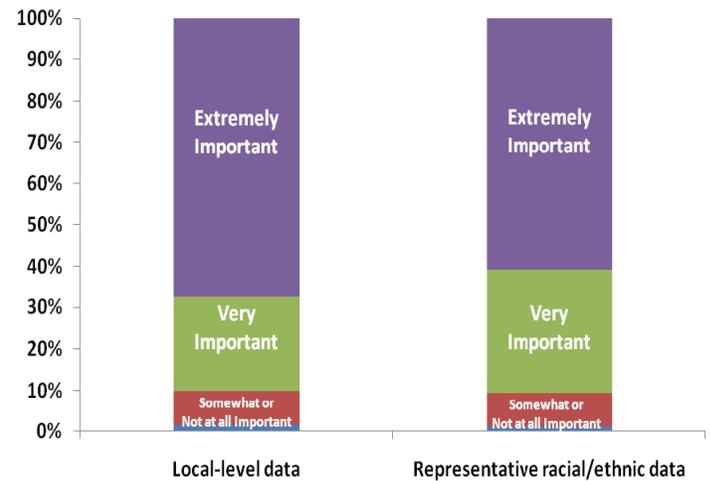
## How do organizations use CHIS data?

When asked for their primary use, foundation staff most frequently cited using CHIS data to “increase awareness and understanding” (30%). Among educational and research institutions, research was the most cited reason (47%), while both health care systems and state and local governments reported their primary use was to “plan, implement, or evaluate services and programs” (38% and 25%, respectively). Social service organizations used the data to apply for funding (42%) and advocacy organizations for policy or program advocacy (43%).

## What’s unique about CHIS?

A vast majority of CHIS users report that both the survey’s local level data (90%) and its rich and representative racial and ethnic data (91%) are important to their work. (Exhibit 4)

**Exhibit 4. – Importance of Local/Diversity Data**



## How will we use these findings?

Select health data users identified by this survey will be the focus of follow-up case studies. The overarching goal of this evaluation is to ensure that CHIS continues to meet the data needs of a wide audience of health data consumers, providing accessible and useful information to policymakers, researchers, program planners, administrators, clinicians, advocates and funders alike.

### Methodology of the CHIS “Use and Impact” Study

*The CHIS Use and Impact Study is one of the first systematic efforts to investigate how population health surveillance data influences health policy-making. From a sampling frame of 17,947 respondents, a total of 4,341 eligible respondents completed the survey. All exhibits represent the 2,143 (49.4%) who had used CHIS data in the past two years and identified CHIS as a primary data source.*