

An overview of the current challenges and opportunities for surveillance

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Conflictos de interés: Los autores declaran no tener conflictos de interés alguno.

Abstract

This keynote address opens the Joint 9th WARFS Global Conference and 12th AMNET Conference 2015. Initially a brief history of the WARFS conference, which began in 1999 in Atlanta, is given. Much ground has been covered since that initial conference. There have been many developments and expansion, but at the same time many challenges were unmet and remain as challenges to risk factor surveillance globally. Historically we have focused on the many technical challenges facing surveillance. This presentation will address the structural and theoretical challenges facing risk factor surveillance. The major challenges are: incorporating the social determinants of health perspective into risk factor surveillance; moving away from continuing to collect data on what we already know; and creating the evidence base to evaluate health policies and interventions designed to improve population health. Above all, the underlying assumption of what we do remains important: continuous data collection, analysis and use of surveillance data provides an evidence base for public health interventions.

With regard to questionnaire theories, methods and design we have generally failed to recognize the paradigm shift from disease prevention to health promotion. We stay too focused on a biomedical disease-based approach. We have failed to engage and take into our data collection questions that would go back in the causal chain of disease to the social determinants. Finally we have inadequately analyzed our data to provide evidence of public interventions at the population level.

There is hope that the current efforts by WHO, and efforts in the Americas by PAHO in particular, will catalyze the development of a broader base and use of risk factor surveillance by including new efforts to incorporate the health in all policies movement and the UN efforts on the sustainable development goals (SDGs).

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There are three key challenges for risk factor surveillance: 1. How can surveillance of the risk factor type respond to the current expectations of governments, civil society, users? 2. Maintaining systems over long periods of time; and 3. Tracking interventions on risk and building the evidence base. The special problem with evidence is not so much the evidence of what causes poor health related to NCDs, so well documented by the WHOSDOH work, but the evidence of how to change any of the many purported social determinants of health, particularly those at the distal level. We need surveillance appropriate to justify efforts to change this complexity. In short, we need to include public health interventions into the surveillance discussions.