

National Data Sources: Pros and Cons

National data systems collect many different types of information useful to prevention practitioners, including data that you may not be able to access from local or state sources. There are both advantages and disadvantages to looking at national data sources.

Advantages of using national data include the following:

- Provide essential comparison data. For example, a school district's efforts to reduce marijuana use among high school students might look like a failure if the levels of abuse did not change during the period in which the program has operated. However, if the national rate of marijuana use among high school students rose during this same period, you might conclude that the program was doing some good (as long as there were no other factors, such as changes in local policy or enforcement of current policies, that could have produced the reduction).
- Often high quality. National data systems are produced using resources a local community cannot possibly match. While data specialists may have concerns about the quality of some national sources, much of these data are better than what a community can collect without a significant expenditure of time, money, and expertise.
- Easily accessed and, in many cases, customizable. Most national data systems analyze their data and publish data reports that are available for no cost online. Others will supply raw data to users, do custom data runs, and/or make their data available in formats that allow people to generate reports tailored to their specifications.
- May include information that local agencies are unwilling to share. For example, concerns about confidentiality might prevent a hospital administrator from sharing patient intake reports. However, a federal source may contain these same data in a format that protects privacy.

Disadvantages of using national data include the following:

- May not be available for your community. Most national data systems cannot be disaggregated for specific communities. However, all national data is obtained at the local level, so in some cases you may be able to track down the local agency or organization (e.g. health department, police department, hospital) that reports their data to the national source.
- May not reflect local concerns. Communities vary in many ways, including ethnic and racial make-up, income level, culture, and available prevention resources. And some forms of substance use/abuse, such as prescription drug misuse and methamphetamine abuse, differ markedly by region. So while national data may describe what is happening in the nation, your state, or even your region overall, it may not tell the full story of your community.
- Categories may be out of sync. Existing data may not be organized in ways that are useful for you. For example, if you are interested in substance use/abuse problems among middle and high school students, national data that describe use among individuals “15–24 years of age” may be useless. Or, if your prevention program serves Southeast Asian immigrant families, national data that categorize ethnicity as “White, African American, Hispanic, Native American, and Other” will not be helpful.
- May not exist. It is possible that no one has collected the data you need. For example, many states are just beginning to collect information on substance use among older adults. Data gaps for many hard-to-reach populations, such as new immigrants, are common. And data on the use of “new” substances, such as bath salts, is frequently scarce. Many national systems collect data that can inform your prevention efforts. A lot of them are operated or funded by the federal government.

From the Prevention Solutions@EDC online course: [Go Get It! Finding Existing Data to Inform Your Prevention Efforts.](#)