

Advancing Health Equity and Optimal Health for All

Edward P. Ehlinger, MD, MSPH

Commissioner, Minnesota Department of Health

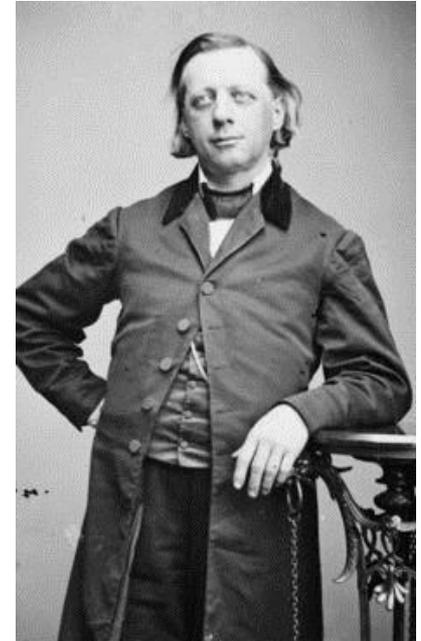
President, Association of State and Territorial Health Officials (ASTHO)

June 24, 2016

Henry Ward Beecher

Born on June 24, 1813

- Clergyman, abolitionist, and famed orator of anti-slavery and woman suffrage
- *“The difference between perseverance and obstinacy is that one often comes from a strong will, and the other from a strong won't.”*

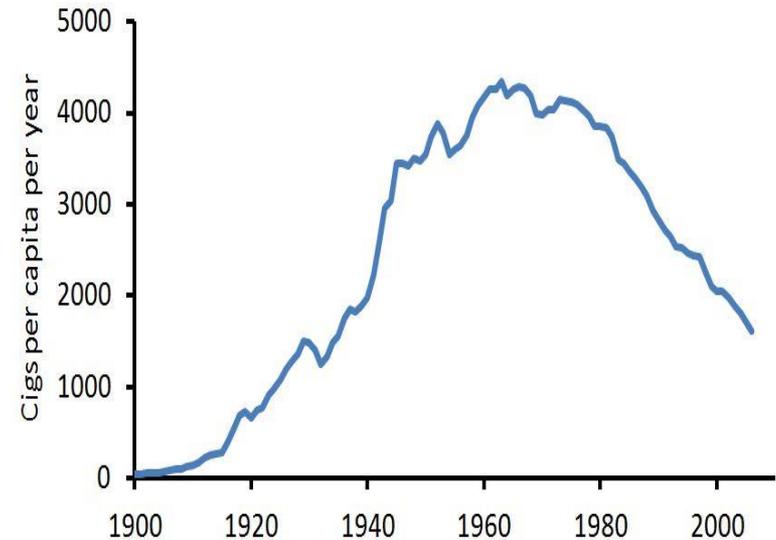


June 24, 1964

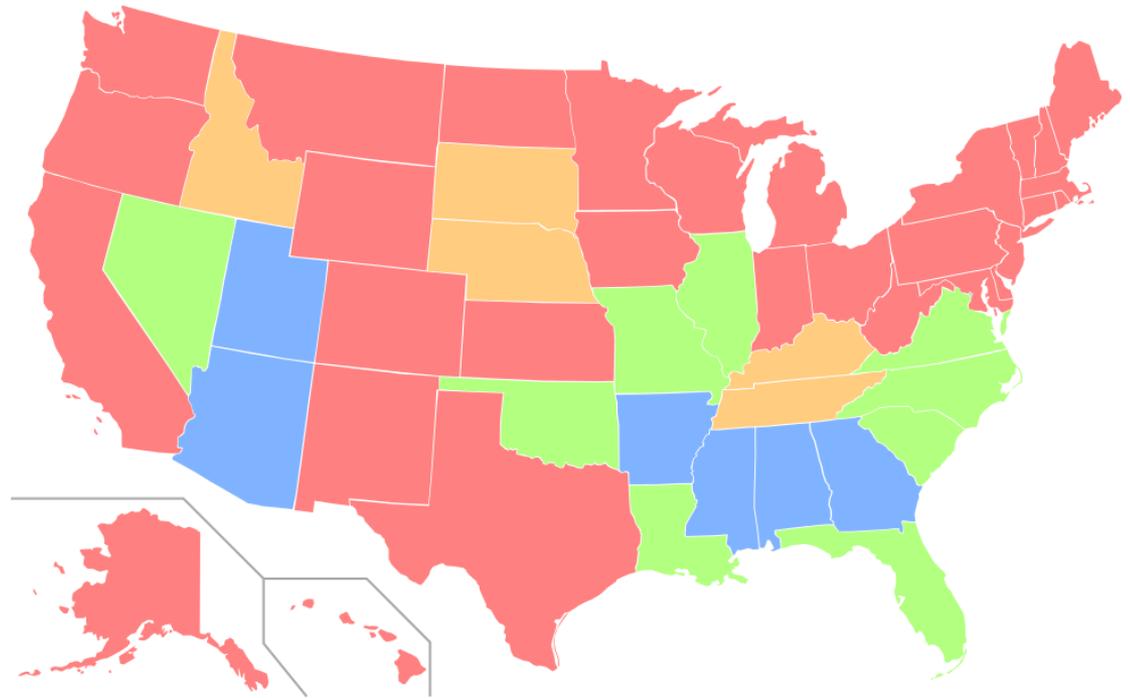
Perseverance and Obstinance

- The Federal Trade Commission announced that starting in 1965, cigarette manufactures would be required to include warnings on their packaging about the harmful effects of smoking.

US Cigarette Consumption, 1900-2006



June 24, 1982 - Perseverance and Obstinacy Equal Rights Amendment goes down to defeat



■ Ratified ■ Ratified, then rescinded ■ Not ratified, but approved by *one* chamber of the state legislature ■ Not ratified

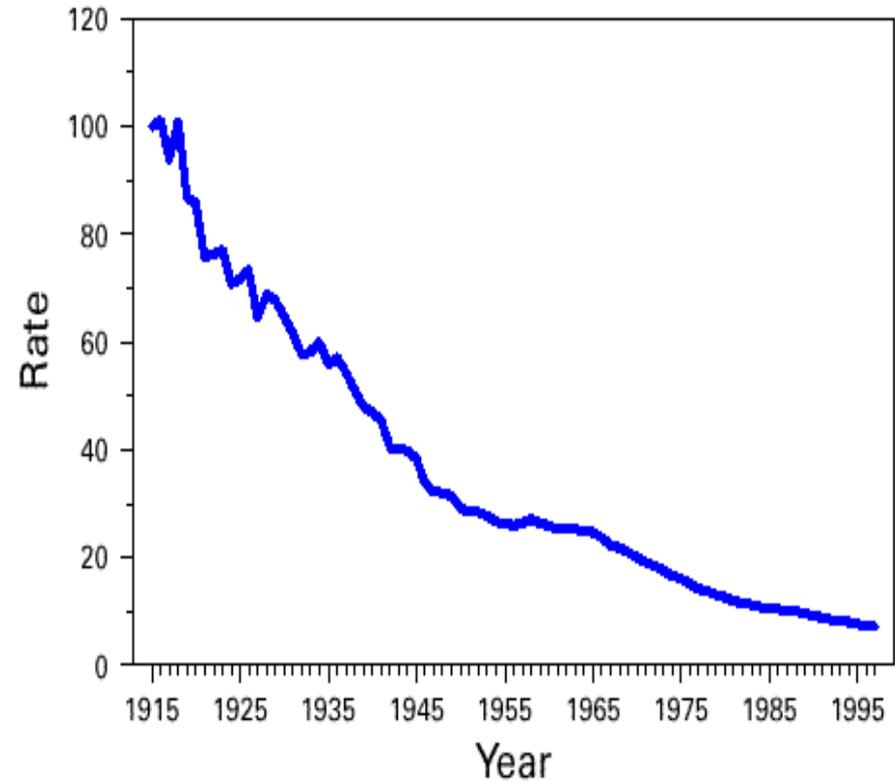
Colorado was the 13th state to ratify the ERA (April 21, 1972)

June 24, 1919 - Perseverance and Obstnacy

Pennsylvania ratifies the 19th Amendment

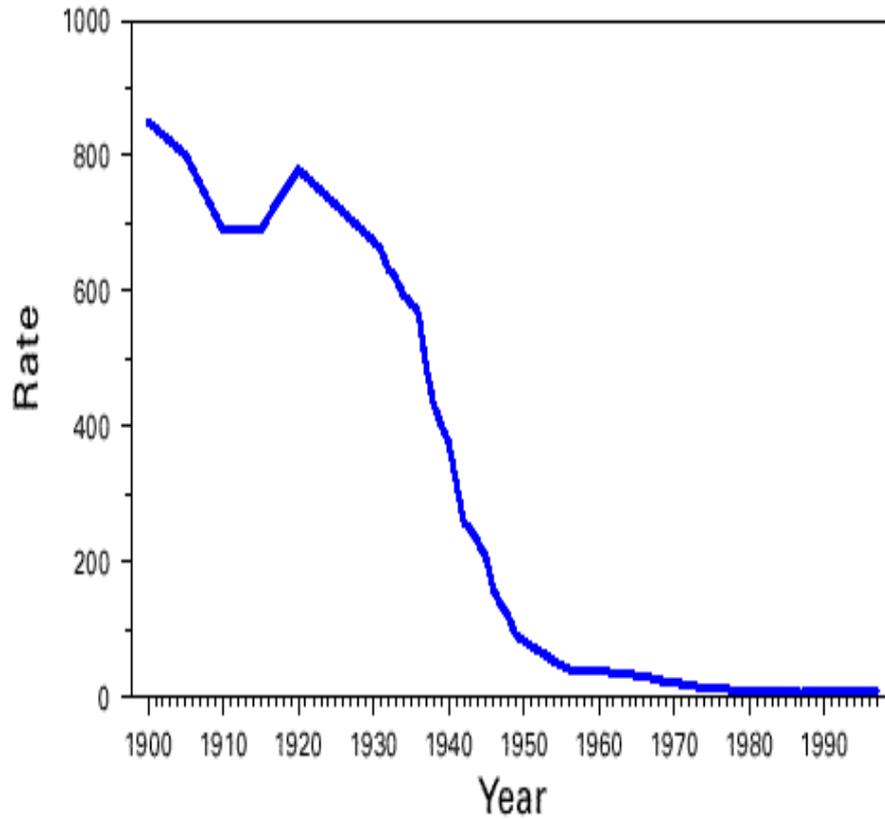
- 1. Wisconsin (June 10, 1919)
 - 2. Illinois (June 10, 1919, reaffirmed on June 17, 1919)
 - 3. Michigan (June 10, 1919)
 - 4. Kansas (June 16, 1919)
 - 5. New York (June 16, 1919)
 - 6. Ohio (June 16, 1919)
 - **7. Pennsylvania (June 24, 1919)**
 - 15. Minnesota (September 8, 1919)
 - **22. Colorado (December 15, 1919)**
 - Tennessee ratified it on August 18, 1920 reaching 2/3 of the states.
 - **Became National Law August 26, 1920**
- The right of citizens of the United States to vote shall not be denied or abridged by the United States or by any State on account of sex.

FIGURE 1. Infant mortality rate,* by year — United States, 1915–1997



*Per 1000 live births.

FIGURE 2. Maternal mortality rate,* by year — United States, 1900–1997

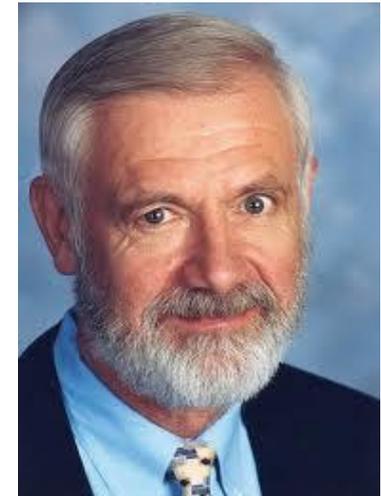


*Per 100,000 live births.

19th Amendment – greatest public health achievement of the 20th century (EE perspective)

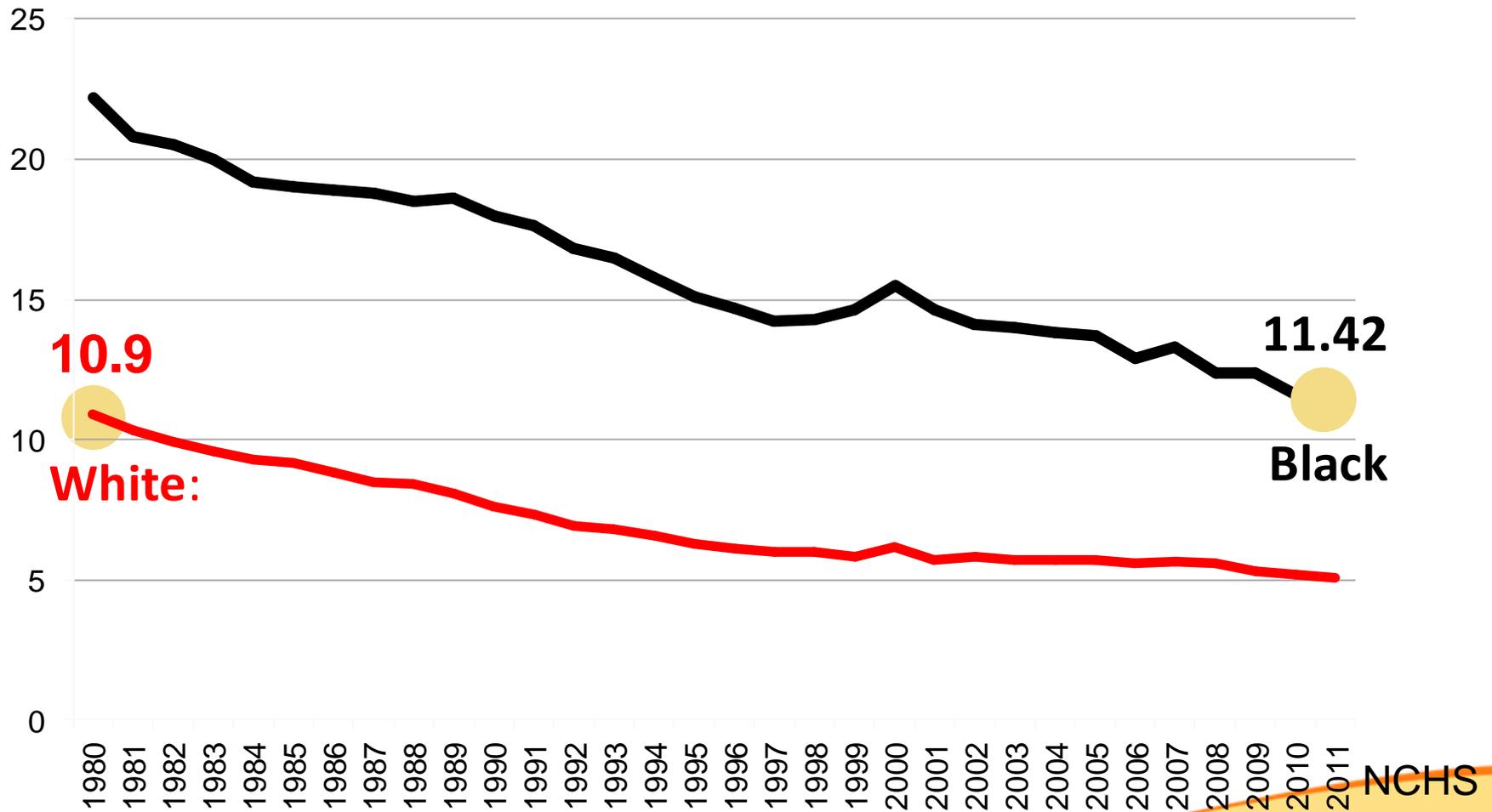
- *“The philosophy behind science is to discover truth.*
- *The philosophy behind medicine is to use that truth for the benefit of your patient.*
- *The philosophy behind public health is social justice.”*

• *William Foege – CDC director, 1977-1983*

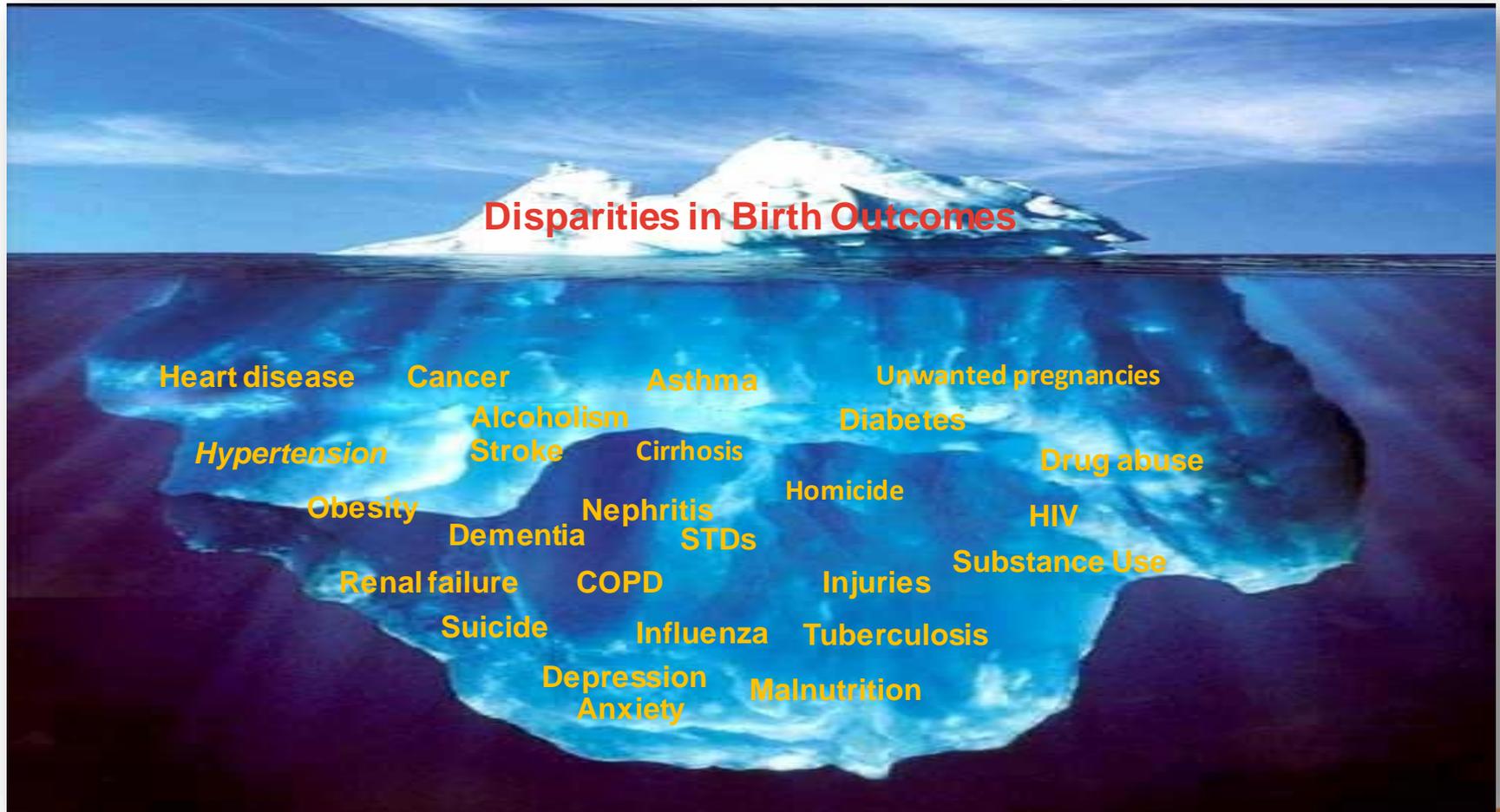


Health Equity is the public manifestation of social justice

USA White and Black IMR: 1980-2011



Disparities in Birth Outcomes are the tip of the health disparities iceberg



Disparities in health are the tip of the societal disparities iceberg



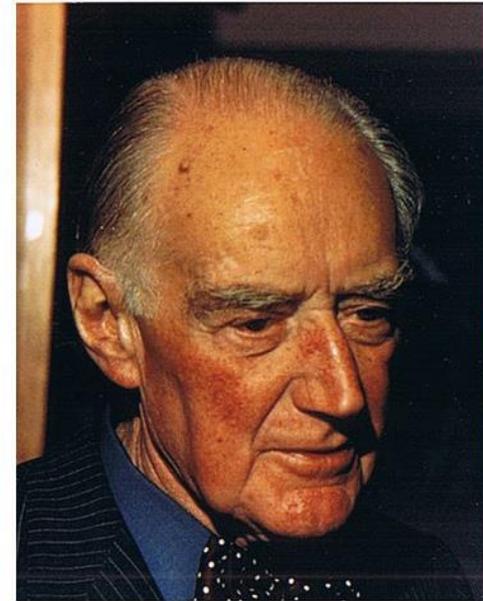
Advancing Health Equity

*The opportunity to be healthy is
not equally available
everywhere or for everyone.*

"What Sets the Goals of Public Health?"

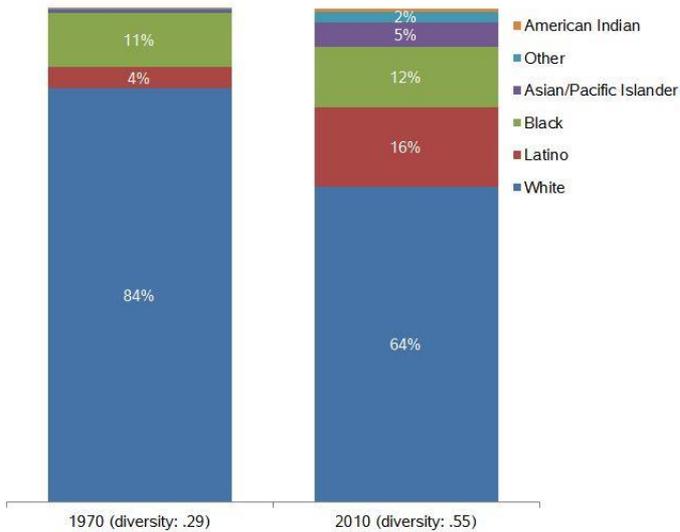
Sir Geoffrey Vickers - 1958

"The landmarks of political, economic and social history are the moments when some condition passed from the category of the given into the category of the intolerable. I believe that the history of public health might well be written as a record of successive re-definings of the unacceptable."



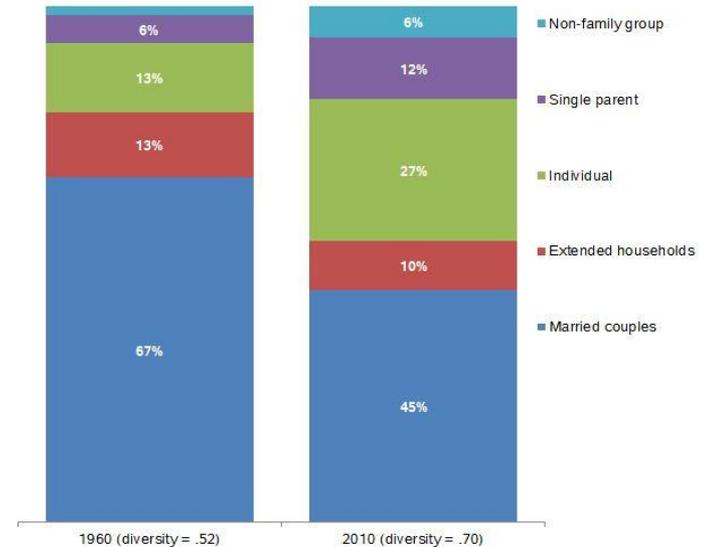
Why Should People Be Concerned About Equity?

Race-ethnic identity, U.S. 1970-2010

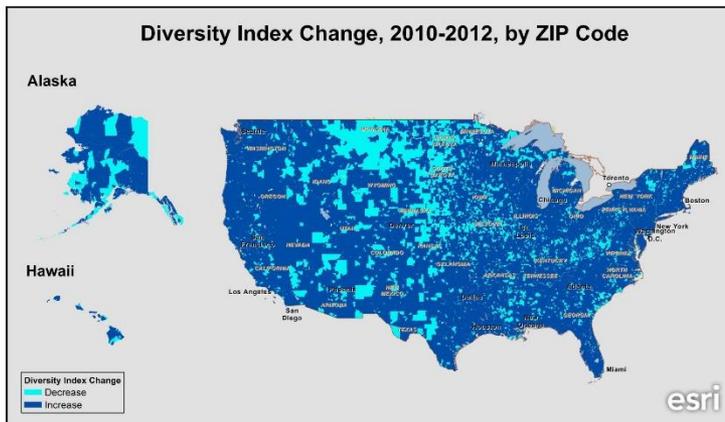


Source: U.S. Census Bureau

Household types, U.S. 1960-2010



Source: My analysis of US Census data.

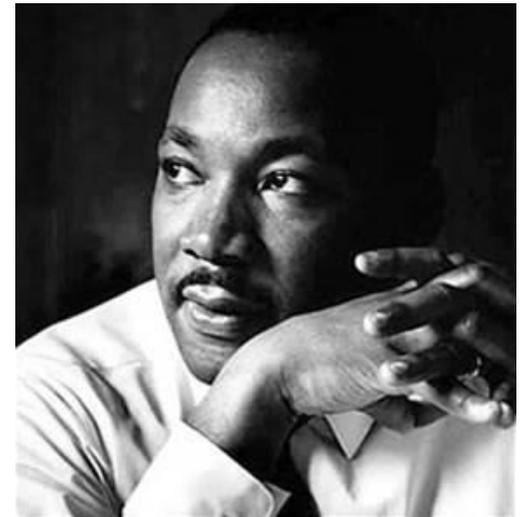


It's a math problem

It's a social justice problem...

Social Justice is a public health issue

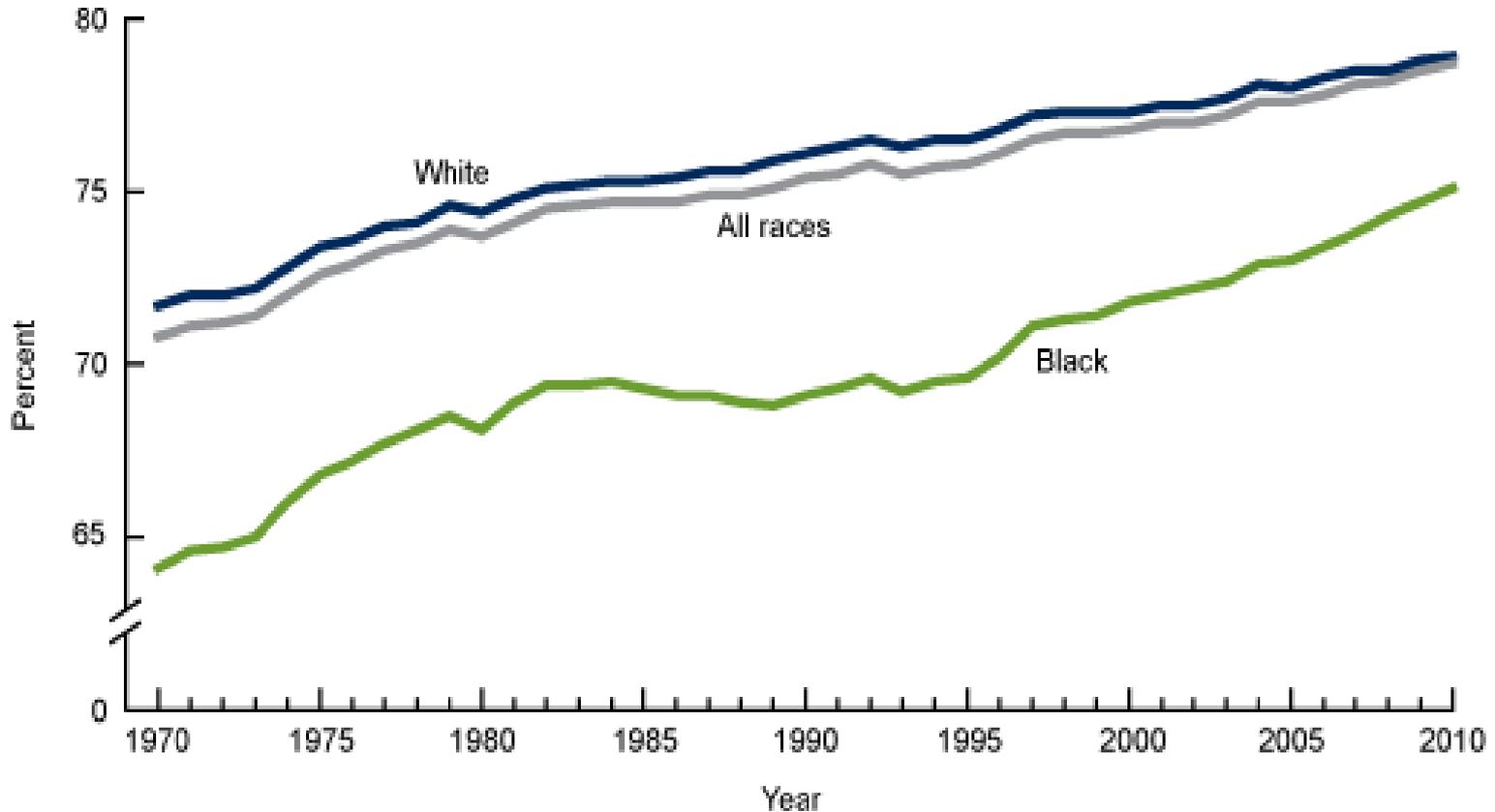
“Injustice anywhere is a threat to justice everywhere. We are caught in an inescapable network of mutuality, tied in a single garment of destiny. Whatever affects one directly, affects all indirectly.”



MLK, Jr, Letter from Birmingham Jail, April 16, 1963

“Injustice anywhere...

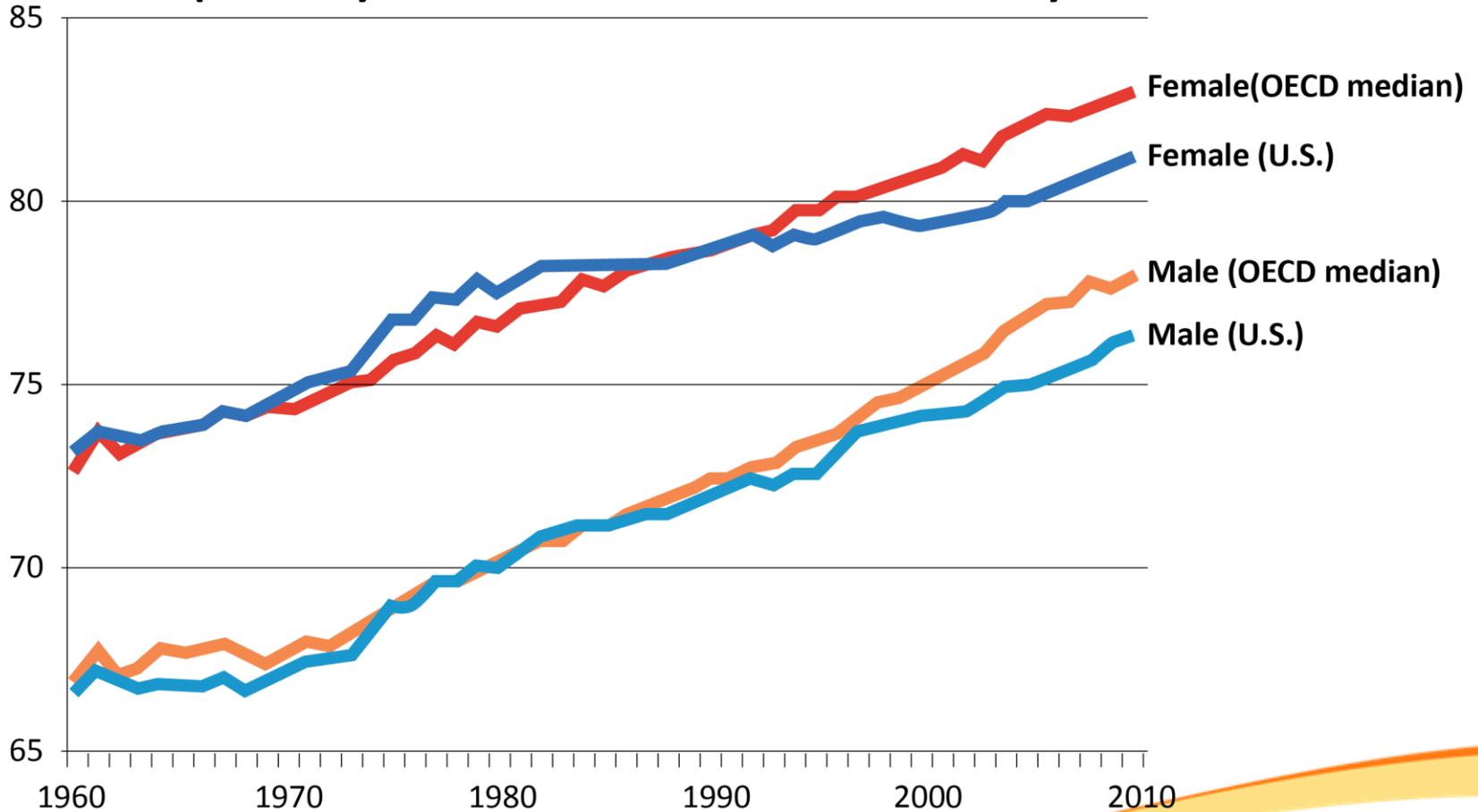
Life Expectancy, by race: United States, 1970 - 2010



SOURCE: CDC/NCHS, National Vital Statistics System, Mortality.

...is a threat to justice everywhere."

Life Expectancy at Birth US and OECD Countries by Gender 1960-2010



“Injustice anywhere...

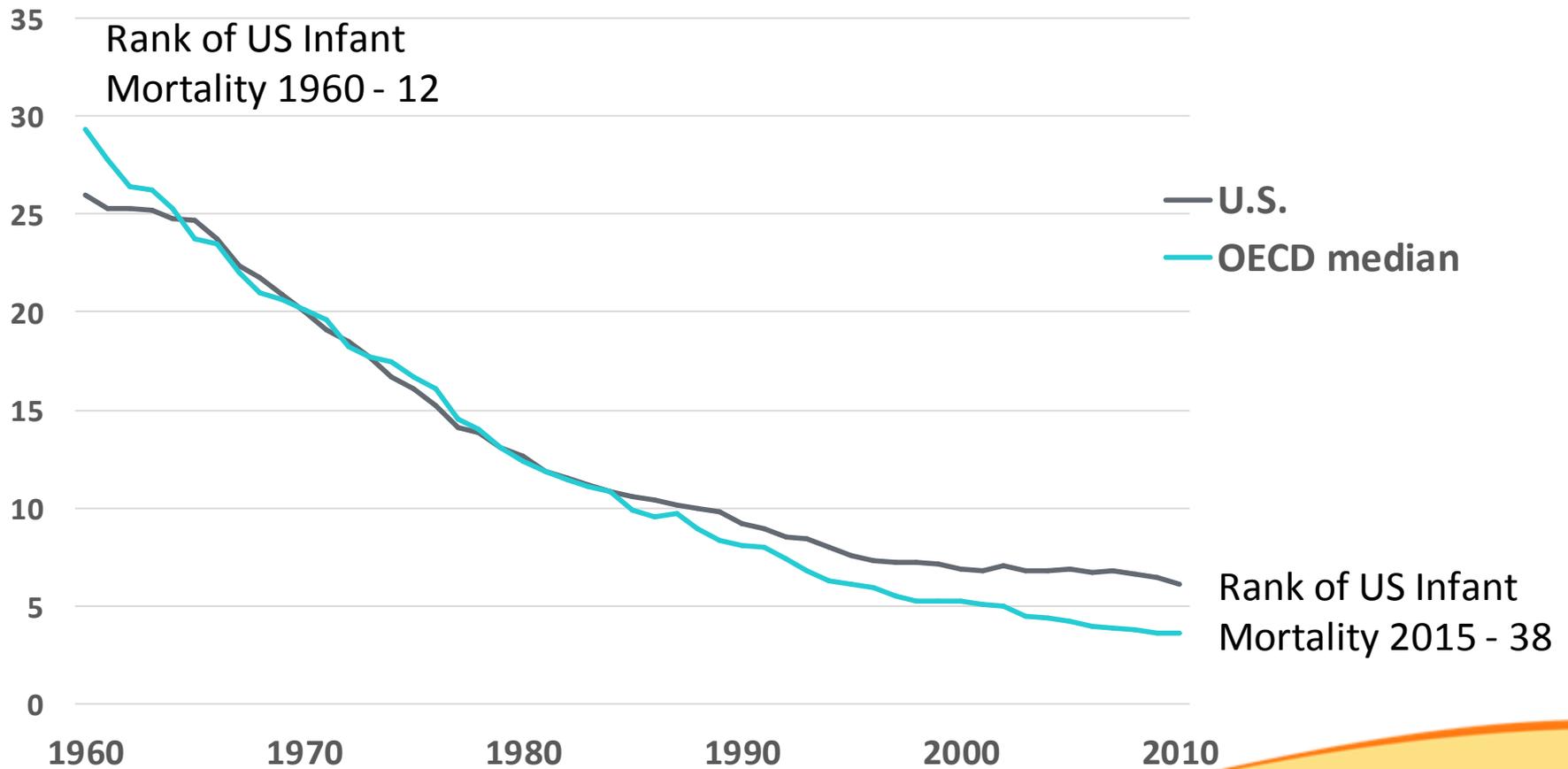
Black/White Disparity in Infant Mortality Rates, US, 1935-2007



National Center for Health Statistics, Health United States, 2009 (updated)

...is a threat to justice everywhere.”

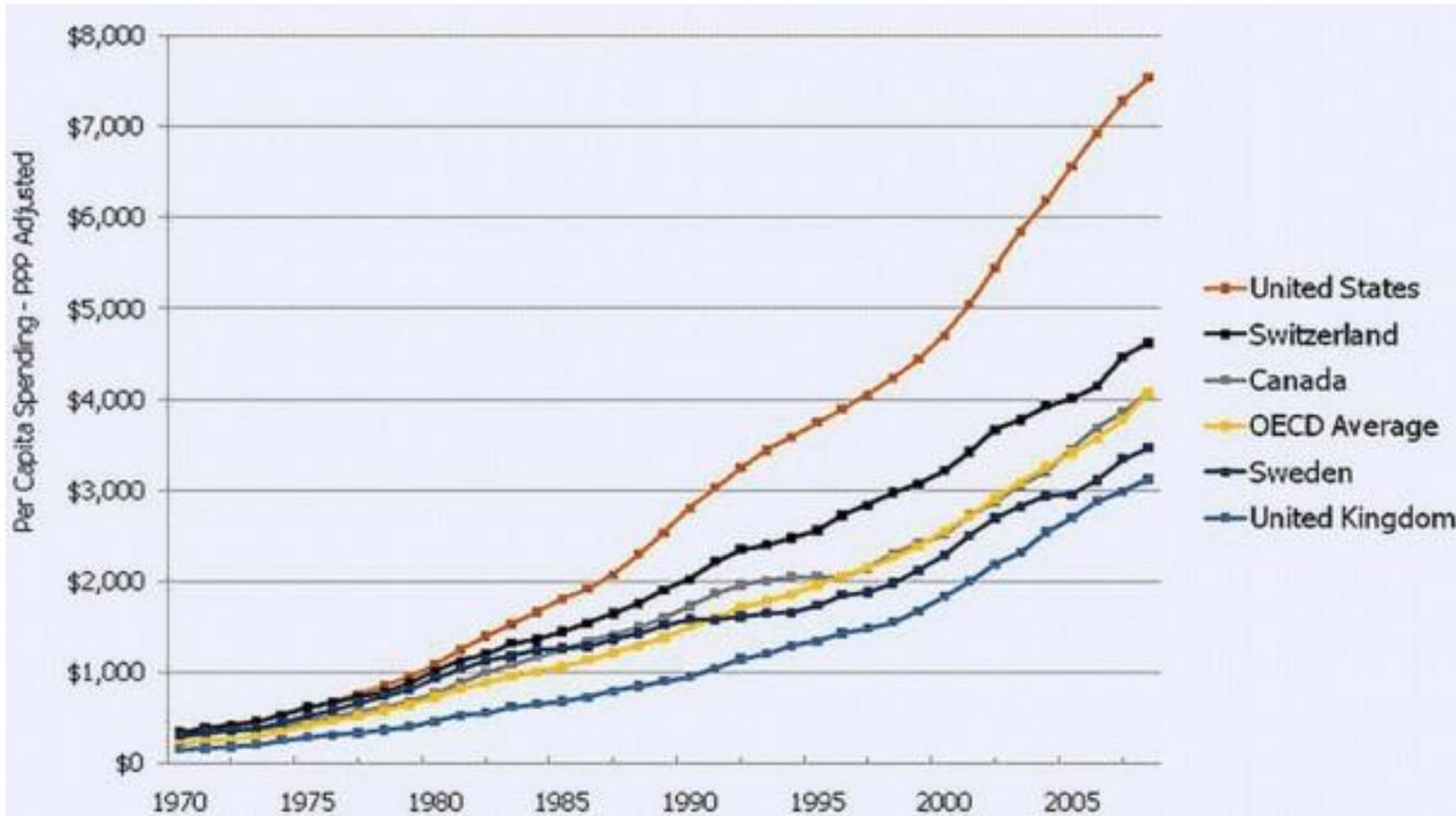
Infant Mortality Rates U.S. and OECD Countries 1960-2010



Source: <http://stats.oecd.org>, accessed 6-10-16

Average Health Care Spending per Capita, 1970-2009

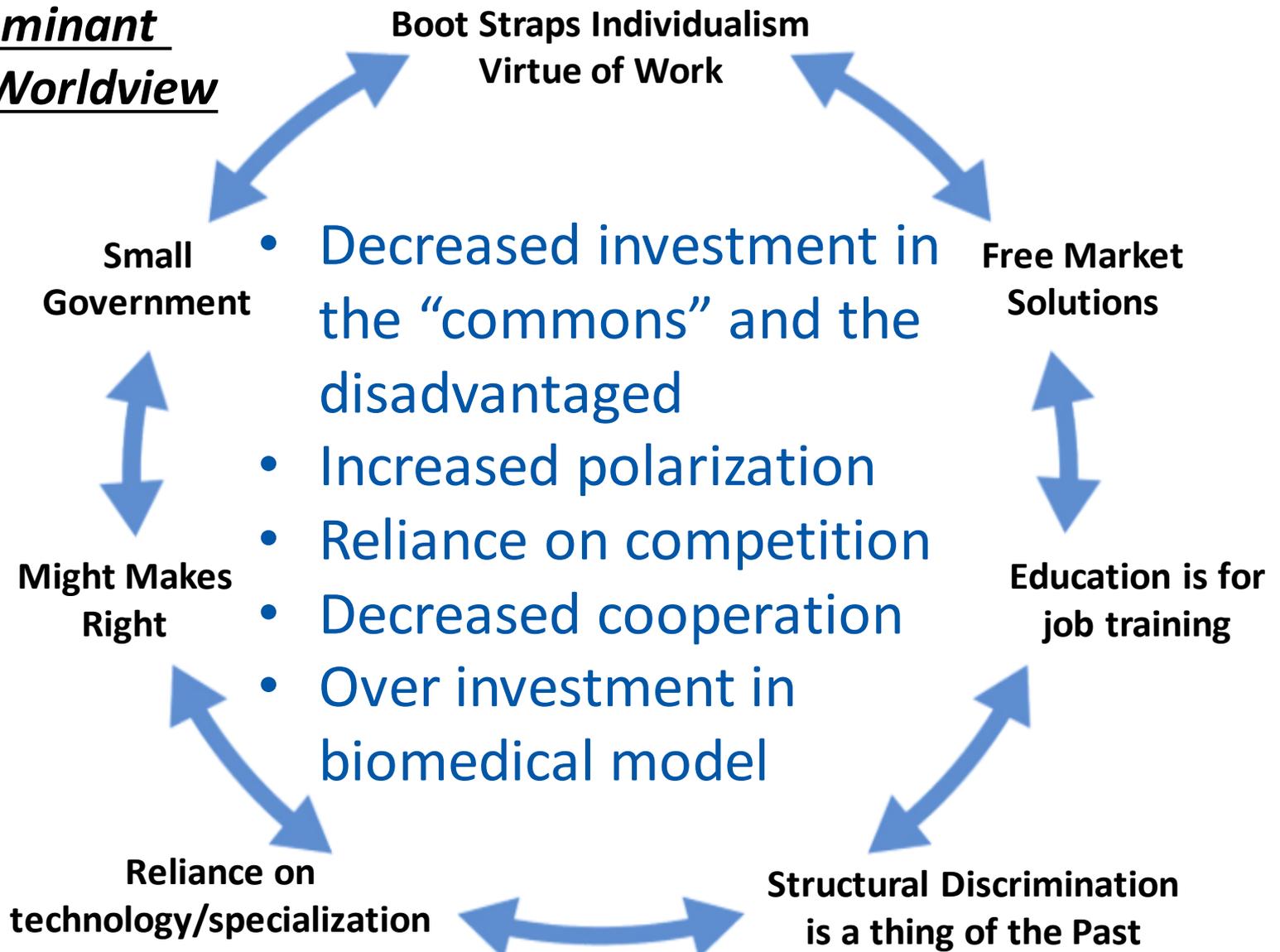
(Adjusted for differences in cost of living)



Source: OECD Health Data 2011 (June 2011)

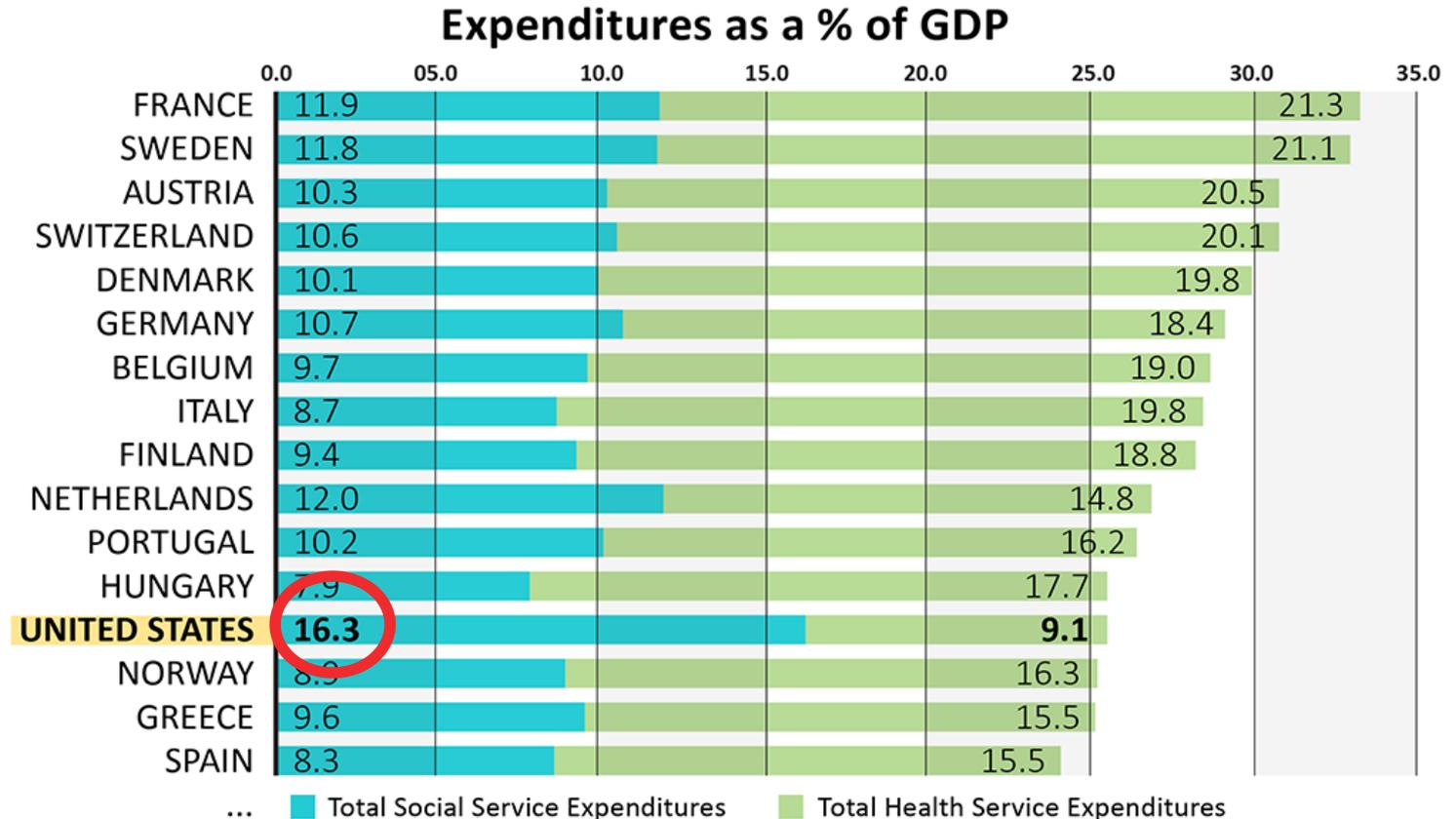
How did this happen?

Predominant U. S. Worldview



Re-defining the Unacceptable

Total Investment in Health and Human Services



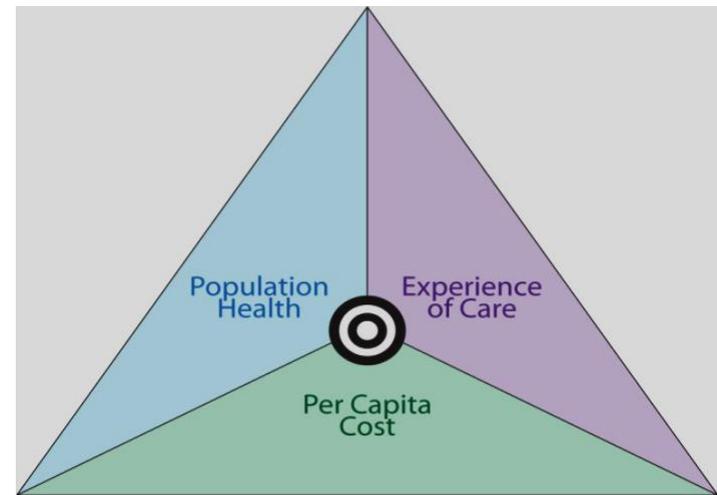
In OECD, for every \$1 spent on health care, about \$2 is spent on social services.

In the U.S., for every \$1 spent on health care, about 55 cents is spent on social services.

Triple Aim of Healthcare



- Better care for individuals
- Lower per capita costs
- Better health for populations



By itself, the Triple Aim of Healthcare has not moved us to health or health equity

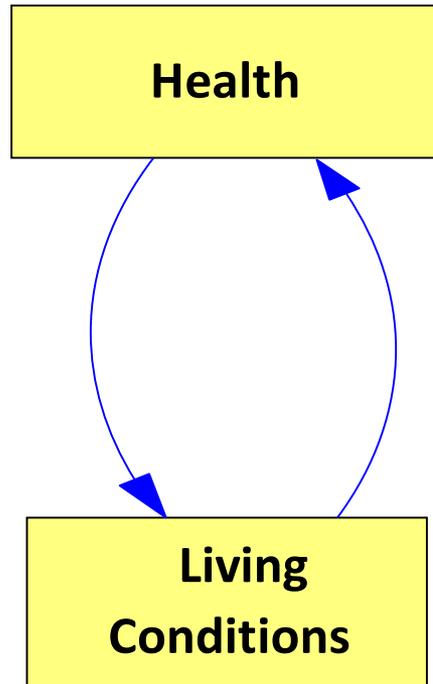
- Individual health model – not a community health model
- What's good for healthcare may not be what's best for communities or advancing health equity
- Healthcare reinforces the narrative about what creates health
- Healthcare has become the benevolent dictator of health

Public Health needs to focus on living conditions

“Public health is what we, as a society, do collectively to assure the conditions in which (all) people can be healthy.”

*The Future of Public Health
Institute of Medicine, 1988*

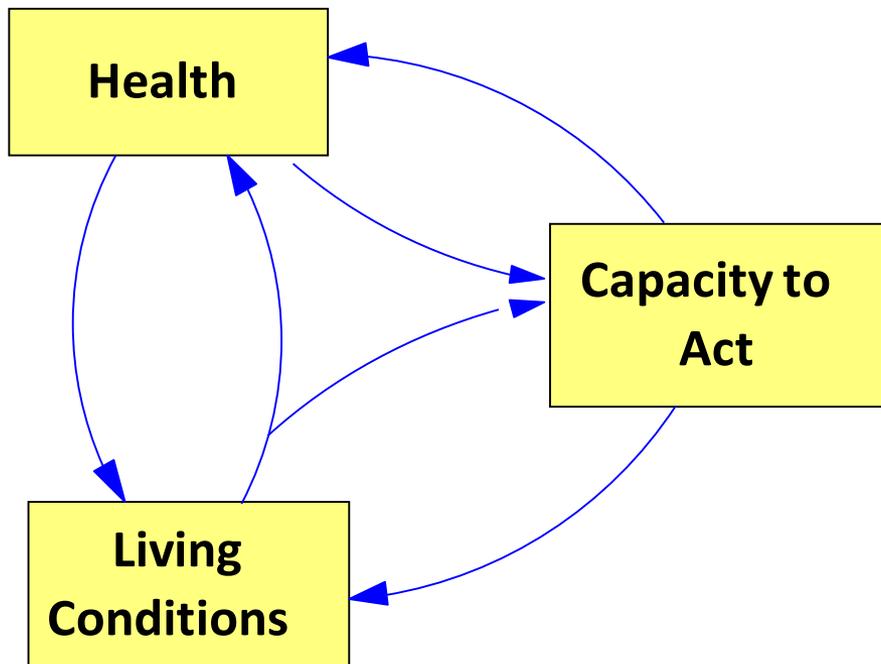
Living Conditions Impact Health



Social Determinants of Health

The conditions and circumstances in which people are born, grow, live, work, and age. These circumstances are shaped by a set of forces beyond the control of the individual: economics and the distribution of money, power, social policies, and politics at the global, national, state, and local levels.

Changing the Conditions that Affect Health Requires the Capacity to Act



Some populations have a more difficult time than others in impacting living conditions

Public health has few skills in fostering the capacity to act

Structure work to achieve our overall aim: Create/Strengthen “Capacity to Act”

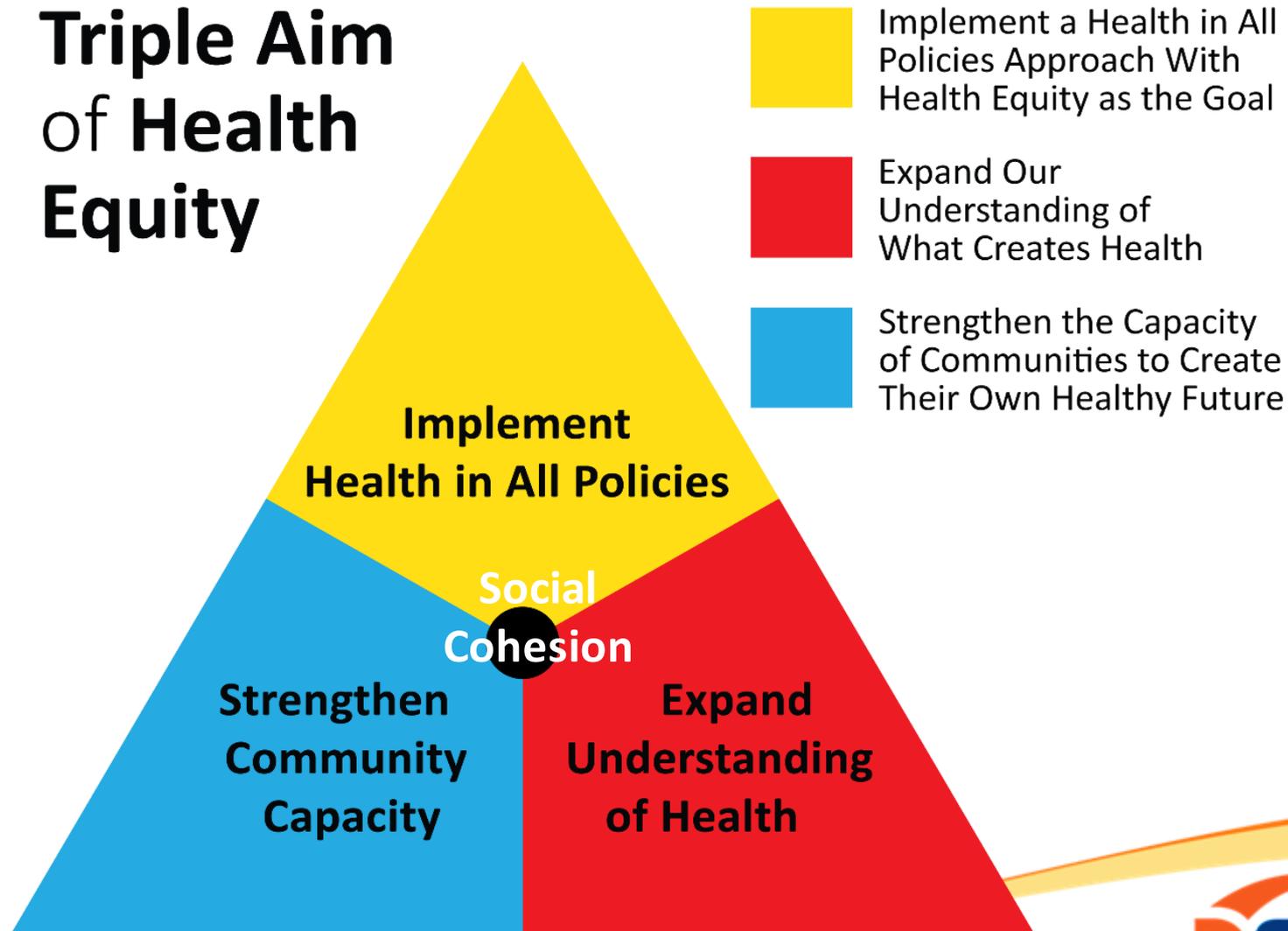
Organize the:



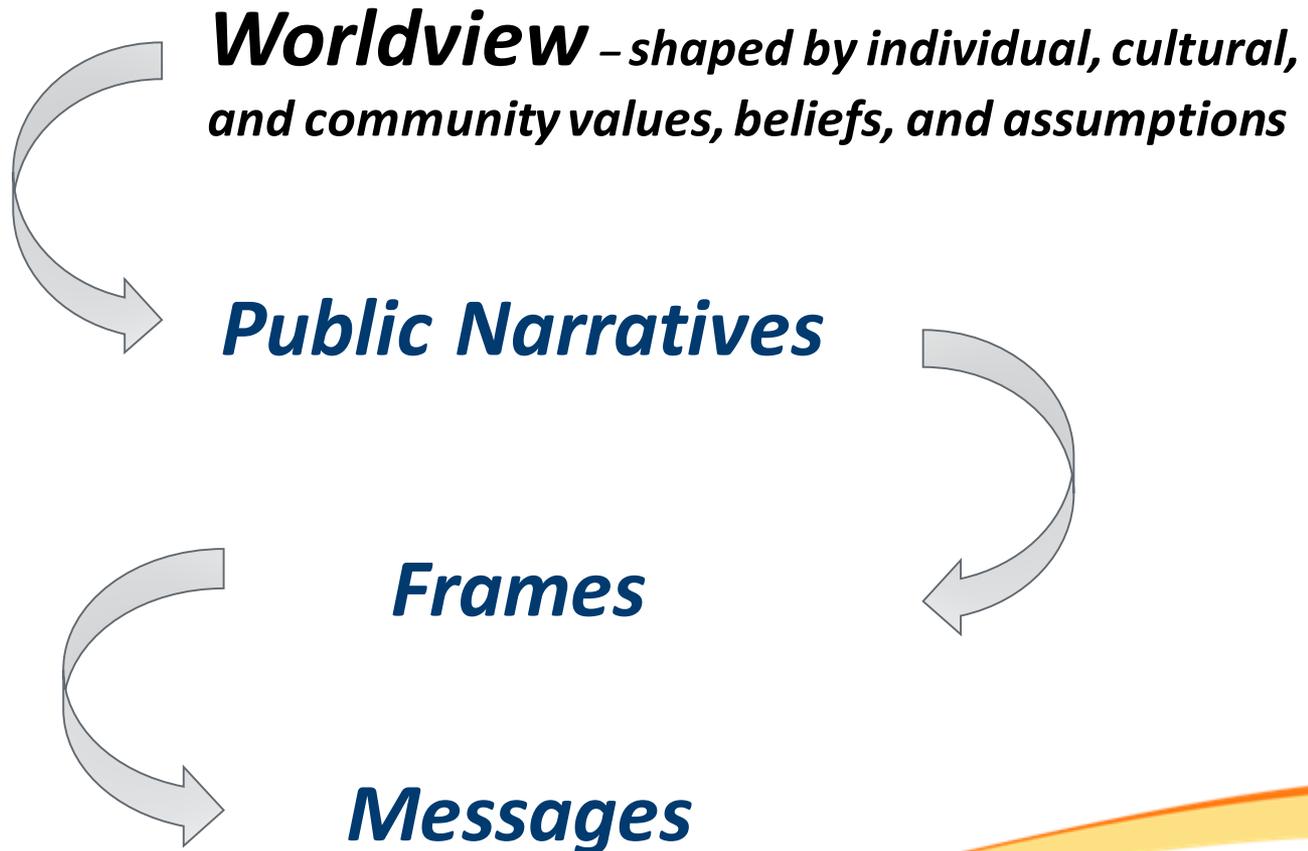
- **Narrative:** Align the narrative to build public understanding and public will.
 - **Resources:** Identify/shift the resources-infrastructure-the way systems and processes are structured.
- **People:** Directly impact decision makers, develop relationships, align interests.

Advancing Health Equity and Optimal Health for All

Triple Aim of Health Equity



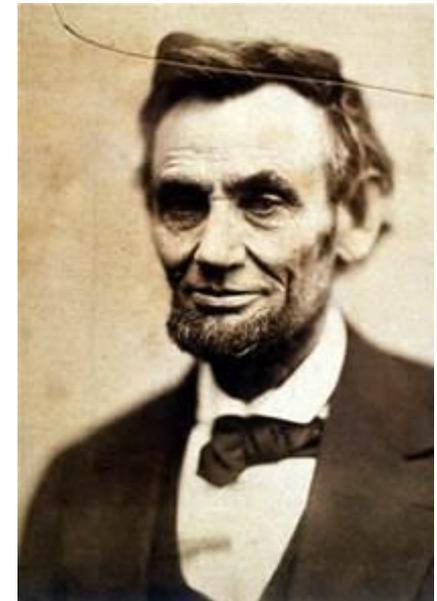
Expand our understanding about what creates health Impact of Worldview on Communities and Health



The Predominant Worldview (public sentiment) Impacts Decisions

“Public sentiment is everything. With public sentiment, nothing can fail; without it nothing can succeed...[public sentiment] makes statutes and decisions possible or impossible to be executed.”

Abraham Lincoln

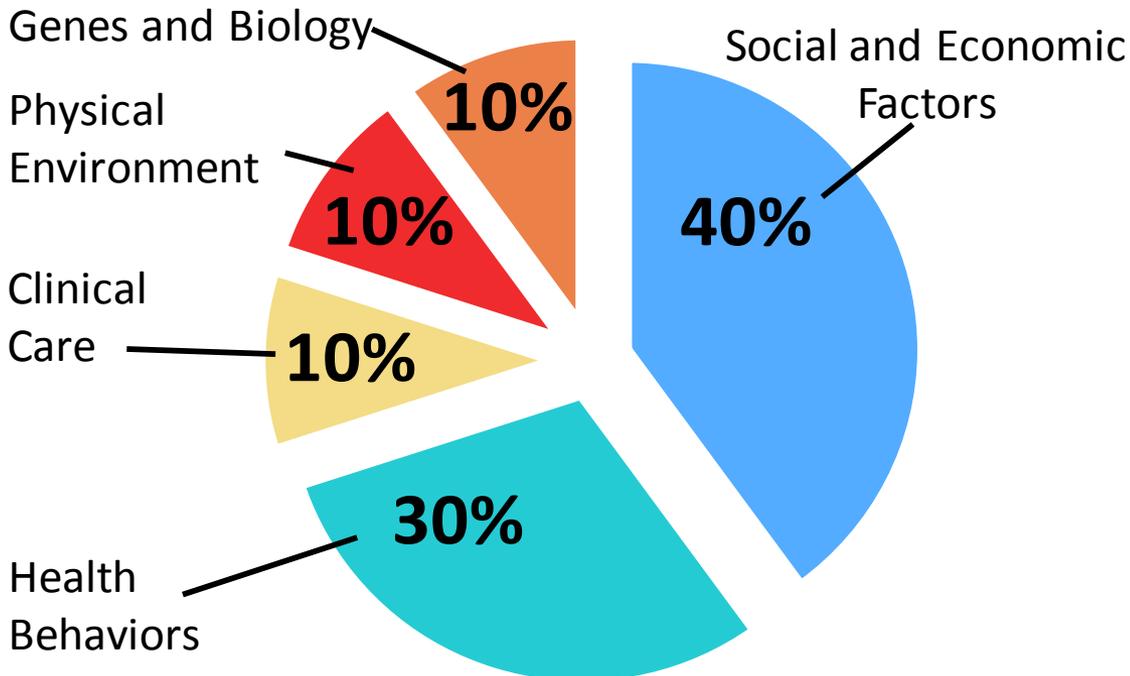


Expand the Understanding About What Creates Health The Dominant Narrative is:

- People would be healthy if they worked hard; made good choices about diet, physical activity, and substance use; and had good medical care.
- Health is the responsibility of individuals until they get sick, then it becomes the responsibility of the healthcare system.

Expand the Understanding of What Creates Health

Determinants of Health



Necessary conditions for health (WHO)

- Peace
- Shelter
- Education
- Food
- Income
- Stable eco-system
- Sustainable resources
- Mobility
- Health Care
- Social justice and equity

Determinants of Health Model based on frameworks developed by: Tarlov AR. *Ann NY Acad Sci* 1999; 896: 281-93; and Kindig D, Asada Y, Booske B. *JAMA* 2008; 299(17): 2081-2083.

World Health Organization. Ottawa charter for health promotion. International Conference on Health Promotion: The Move Towards a New Public Health, November 17-21, 1986 Ottawa, Ontario, Canada, 1986. Accessed July 12, 2002 at <http://www.who.int/hpr/archive/docs/ottawa.html>.

Communities of Opportunity

- Social/economic inclusion
- Thriving small businesses and entrepreneurs
- Financial institutions
- Good transportation options and infrastructure
- Home ownership
- Better performing schools
- Sufficient healthy housing
- Grocery stores
- IT connectivity
- Strong local governance
- Parks & trails

Good Health Status

Poor Health Status

Contributes to health disparities:

- Diabetes
- Cancer
- Asthma
- Obesity
- Injury

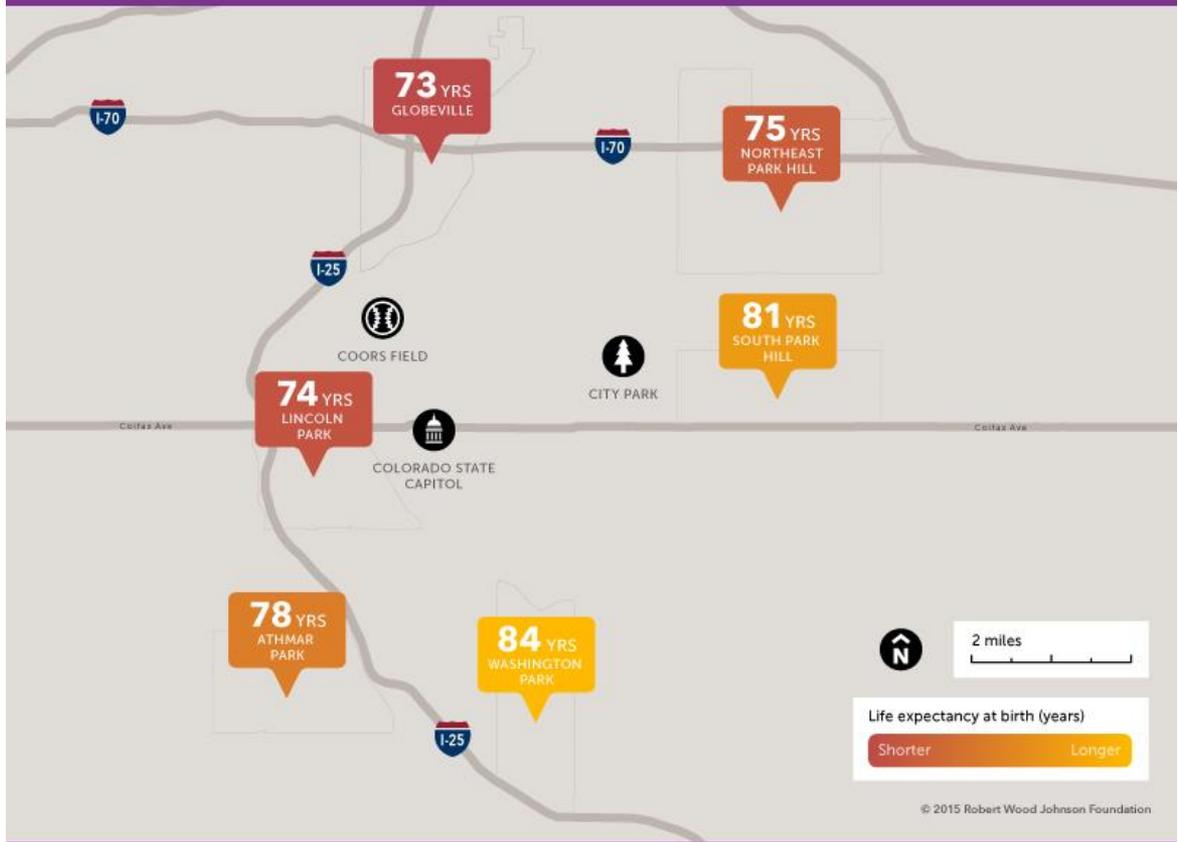
Low-Opportunity Communities

- Social/economic exclusion
- Few small businesses
- Payday lenders
- Few transportation options
- Rental housing/foreclosure
- Poor performing schools
- Poor and limited housing stock
- Increased pollution and contaminated drinking water
- Fast food restaurants
- Limited IT connections
- Weak local governance
- Unsafe/limited parks

DENVER, COLORADO

Short Distances to Large Gaps in Health

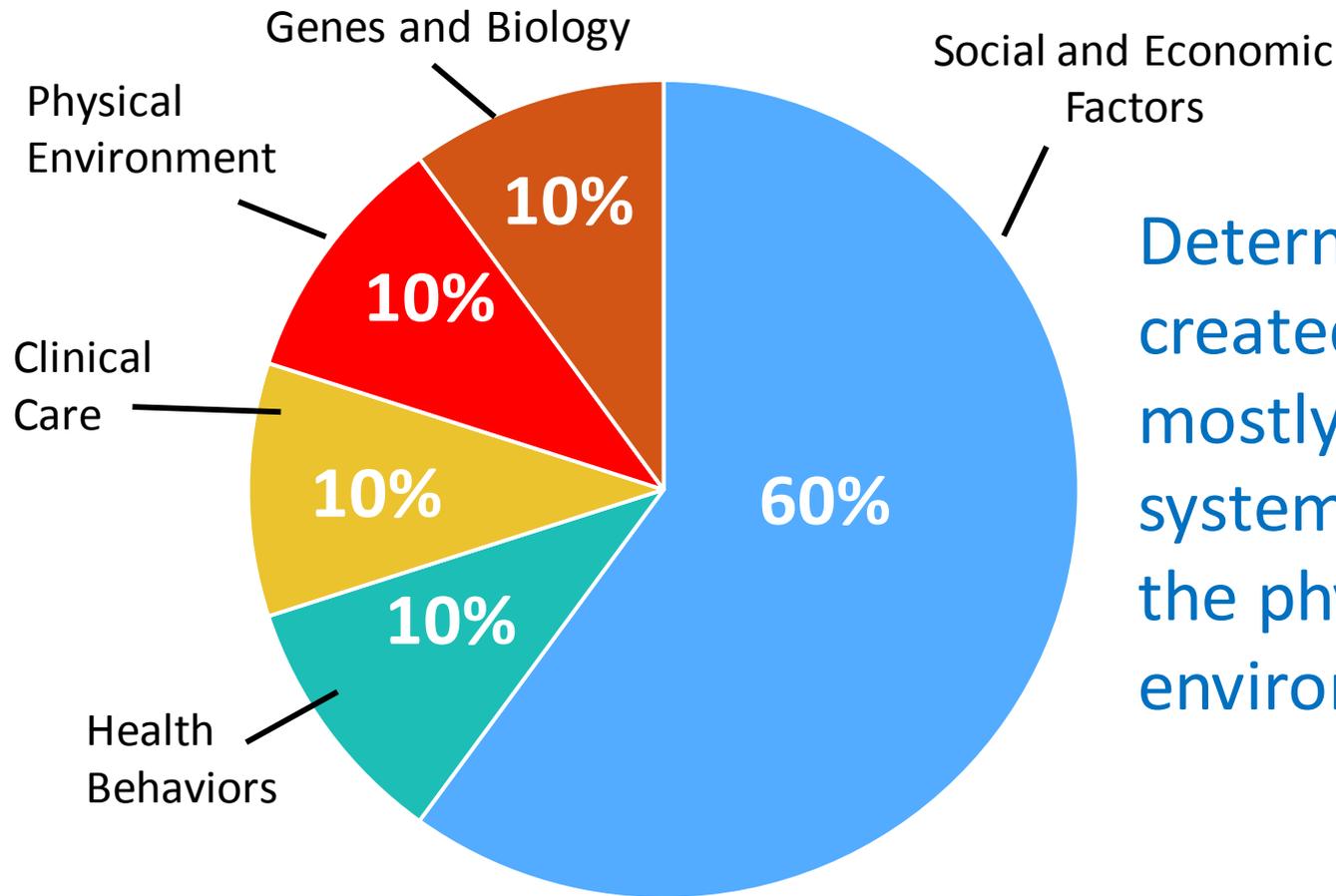
Follow the discussion
[#CloseHealthGaps](#)



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Expand the Understanding of What Creates Health

Ehlinger's beliefs about the contributions to health determinants

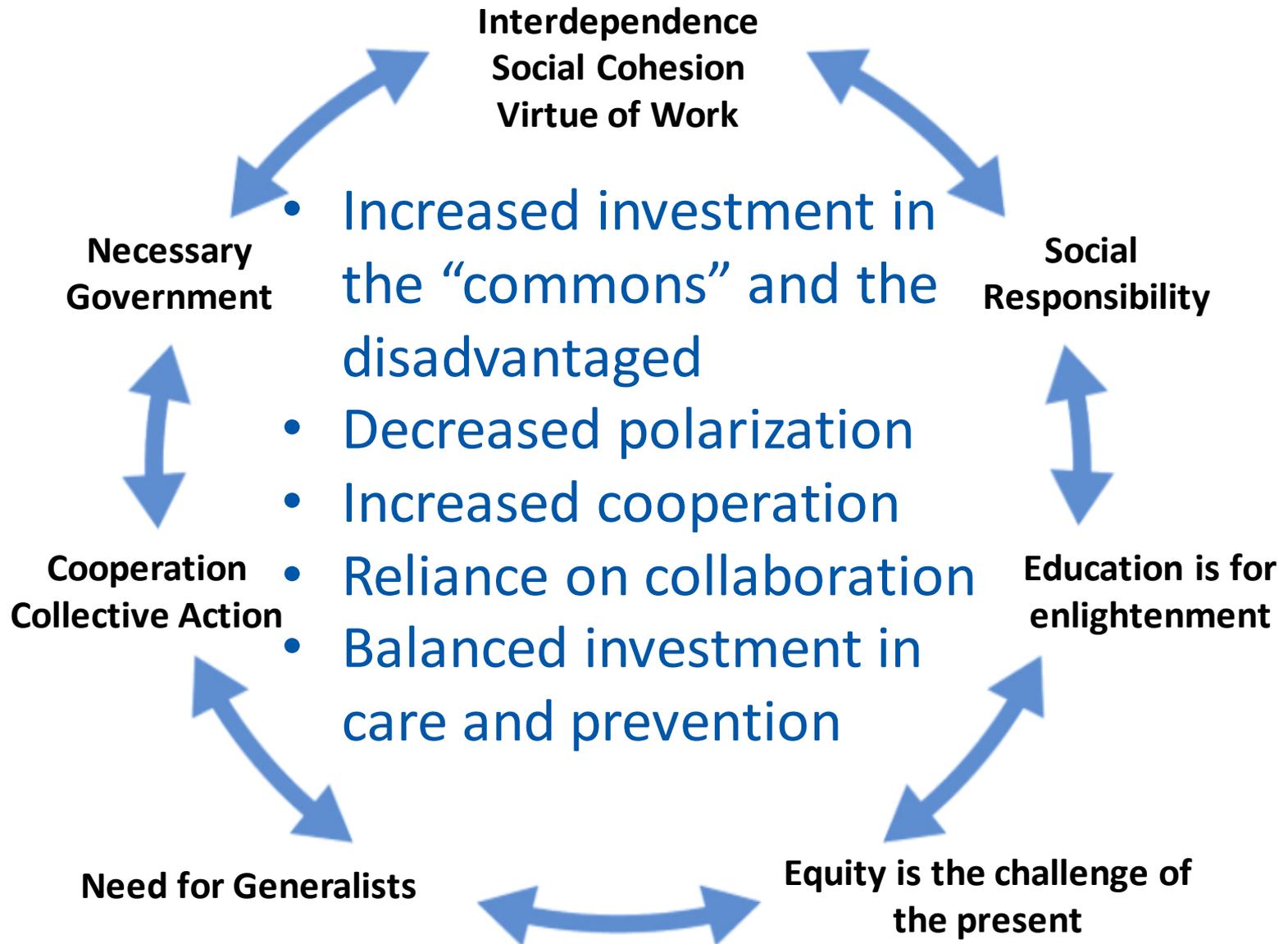


Determinants are created & enhanced mostly by policies and systems that impact the physical and social environment

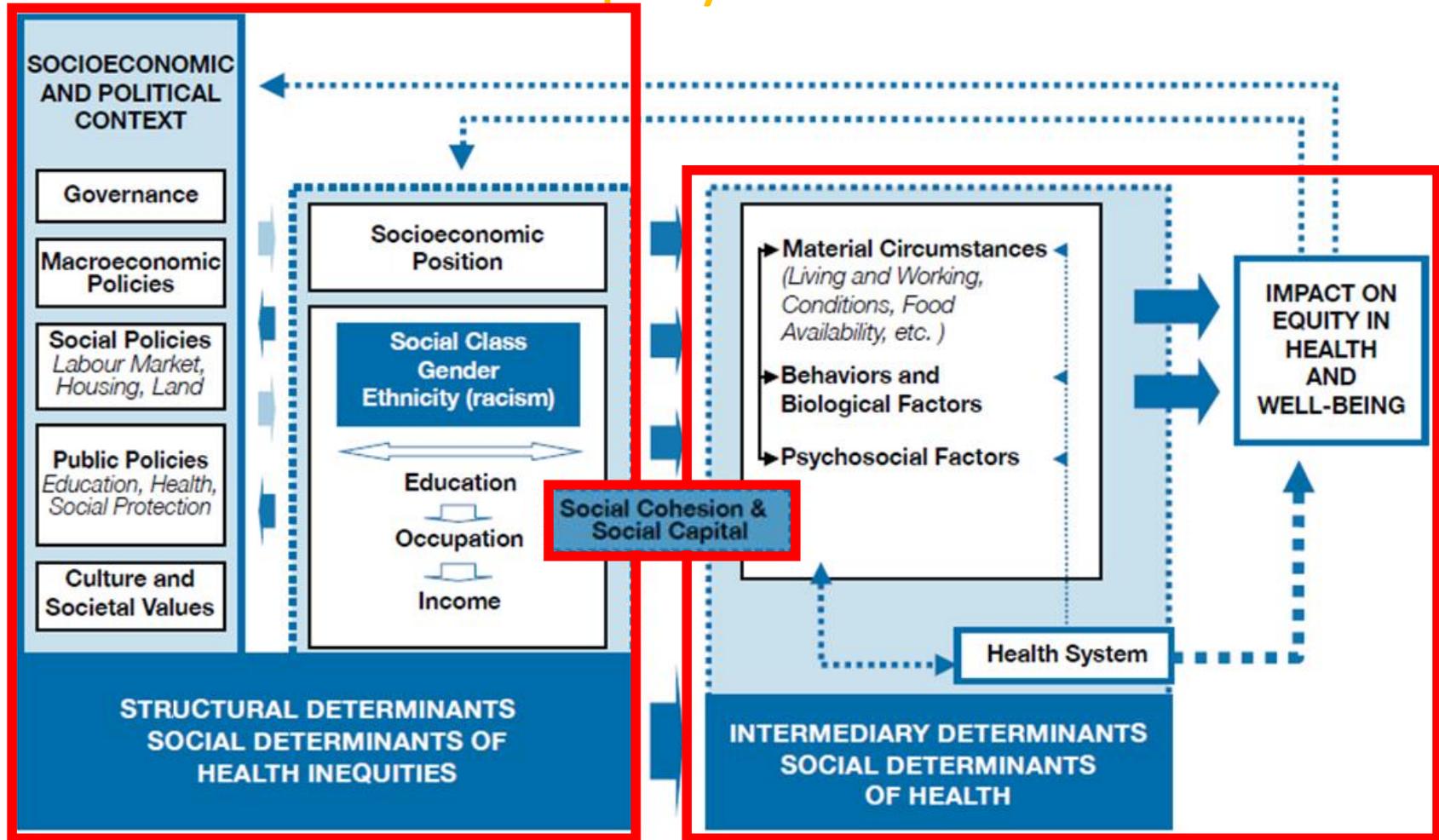
And The Real Narrative of What Creates Health Inequities?

- Disparities are not just because of lack of access to health care or to poor individual choices.
- **Disparities are mostly the result of policy decisions that systematically disadvantage some populations over others.**
 - Especially, populations of color and American Indians, GLBT, immigrants, and refugees
 - Structural Racism

Alternative Worldview for what creates health



Implement Health in All Policies Approach with Health Equity as a Goal

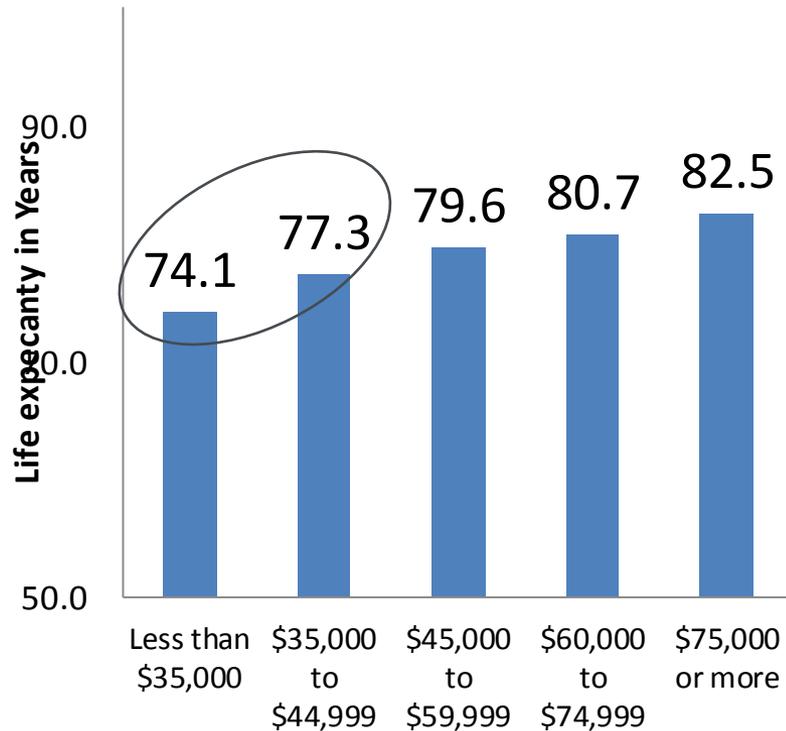


Commission on Social Determinants of Health. (2010). *A conceptual framework for action on the social determinants of health*. Geneva: World Health Organization.

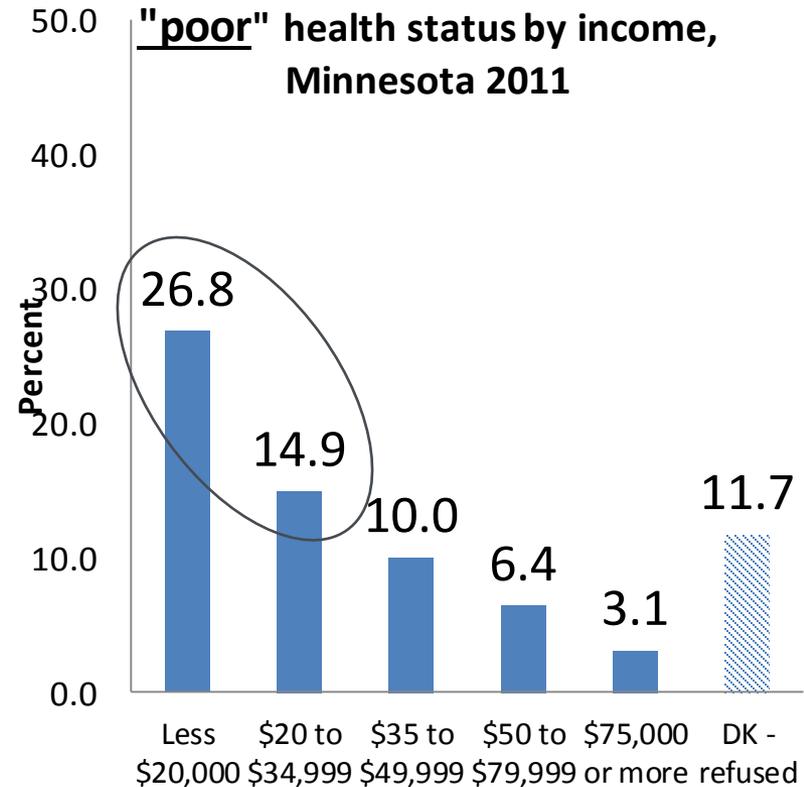
Policy and System Changes Related to Social Determinants of Health (selected)

- Minimum Wage
- Paid Leave
- Diabetes and Income
- Incarceration and health
- Ban the Box
- Transportation Policy
- REL data
- Broadband connectivity
- E-Health Policies
- Buffer strips – Ag policy
- Water quality
- Marriage Equity
- Payday Lending
- Big 10/SHD initiative

Life expectancy by median household income group of ZIP codes, Twin Cities 1998-2002



Adults 18-64 reporting "fair" or "poor" health status by income, Minnesota 2011

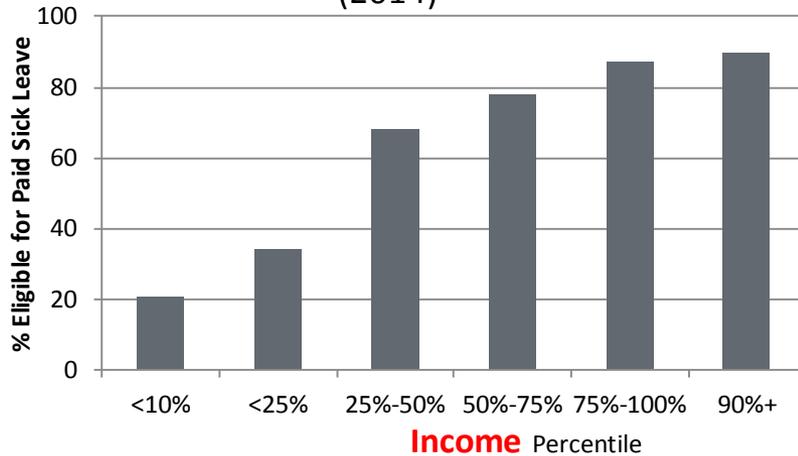


Source: The unequal distribution of health in the Twin Cities, Wilder Research www.wilderresearch.org
 Analyses were conducted by Wilder Research using 1998-2002 mortality data from the Minnesota Department of Health and data from the U.S. Census Bureau (population, median household income, and poverty rate by ZIP code)

Source: 2011 Behavioral Risk Factor Surveillance System

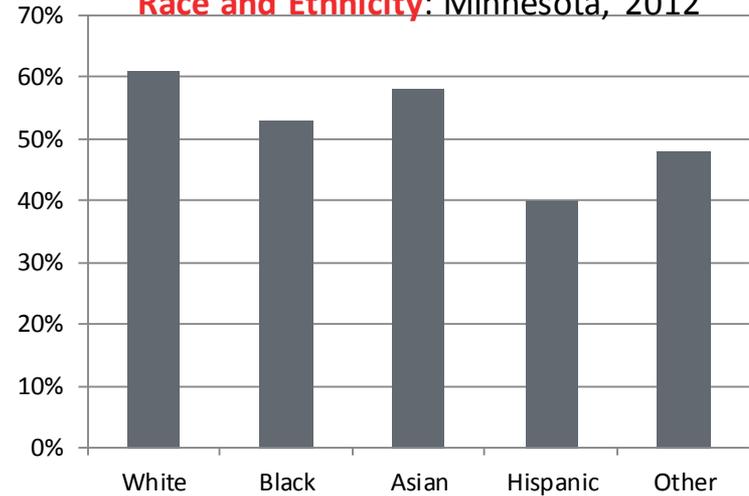
Disparities in Access to Paid Sick Leave

Access to Paid Sick Leave by Income - Rates for All Civilian Employees, U.S. (2014)



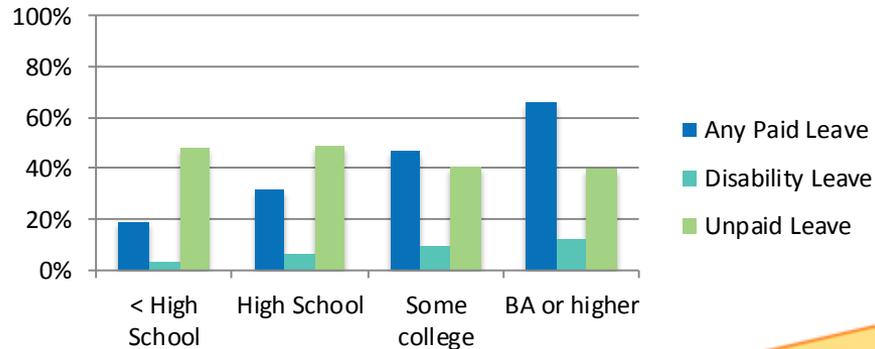
Source: U.S. Bureau of Labor Statistics

Access to Paid Sick Leave by Race and Ethnicity: Minnesota, 2012



Source: Institute of Women's Policy Research

Mothers' Access to Paid Leave by Education : U.S. 2006-2008

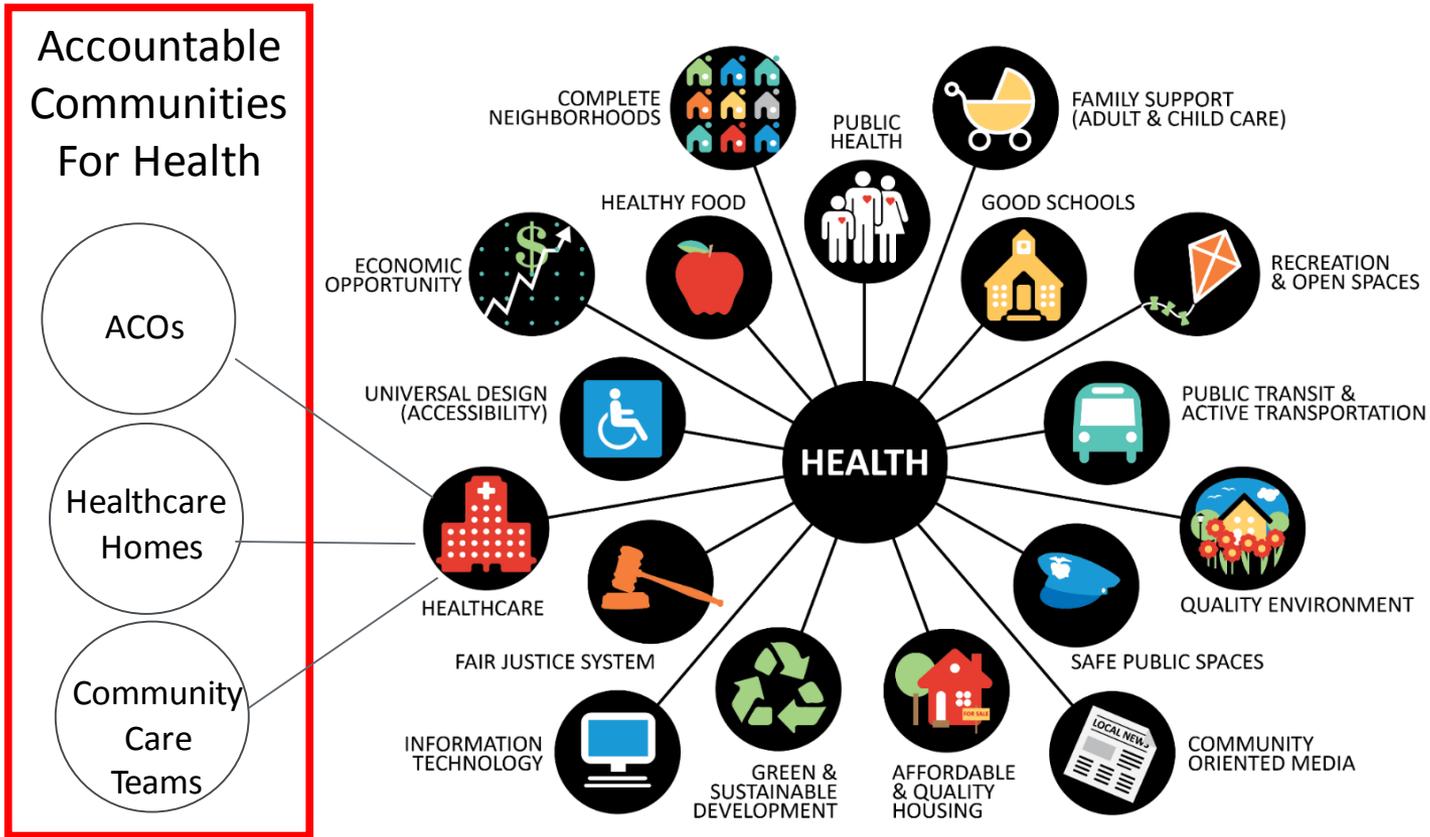


Source: U.S. Census

Strengthen the Capacity of Communities to Create Their Own Healthy Future



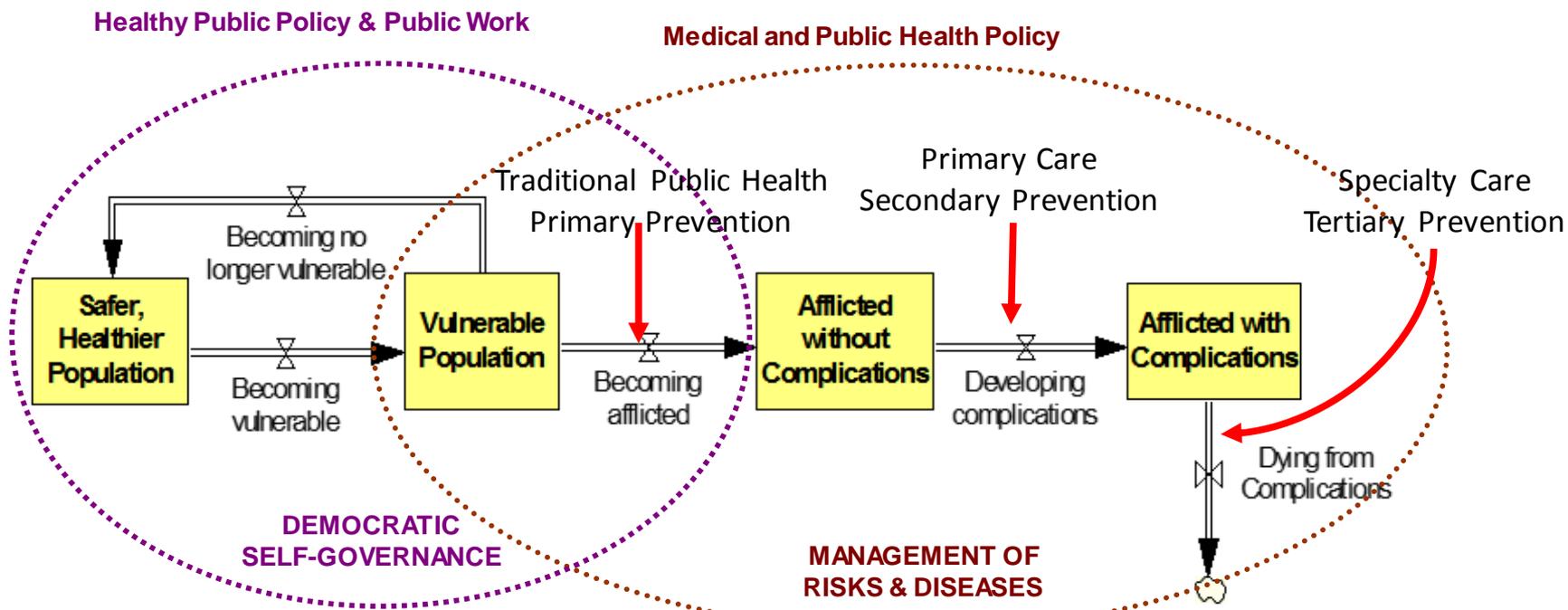
Health is Community



“...the community in the fullest sense is the smallest unit of health...to speak of the health of an isolated individual is a contradiction in terms.”

Wendell Berry in Health is Membership

Strengthen the Capacity of Communities to Create Their Own Healthy Future



World of Transforming...

- Deprivation
- Dependency
- Violence
- Disconnection
- Environmental decay
- Stress
- Insecurity
- Etc...

By Strengthening...

- Democracy
- Mutual accountability
- Leaders and institutions
- Plurality
- Freedom
- Foresight and precaution
- The meaning of work
- Etc...

World of Providing...

- Health education
- Screening tests
- Disease management
- Pharmaceuticals
- Clinical services
- Physical and financial access
- Etc...

John Ciardi

born on June 24, 1916

- English dramatist, actor, author. He was an award-winning writer best known for the English translation of Dante's "Inferno."
- *"A good question is never answered. It is not a bolt to be tightened into place but a seed to be planted and to bear more seed toward the hope of greening the landscape of idea."*



Asking the Right Questions Can Advance Health Equity

Expand Understanding

- *What values underlie decision-making process?*
- *What is assumed to be true about the world and the role of the institution in the world?*

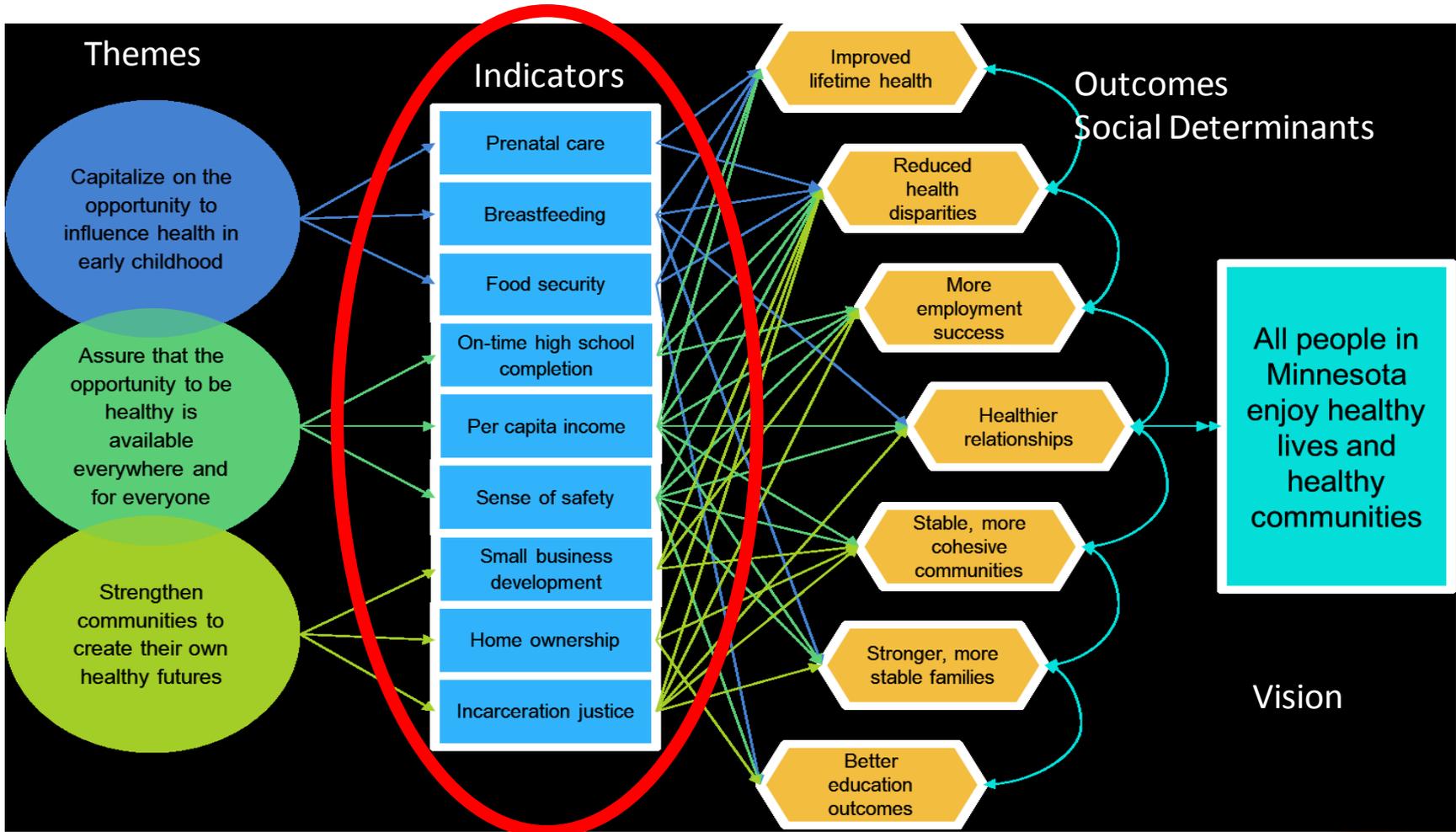
Health in All Policies

- *What are the health and equity implications of the policy/program?*
- *Who is benefiting and who is left out?*

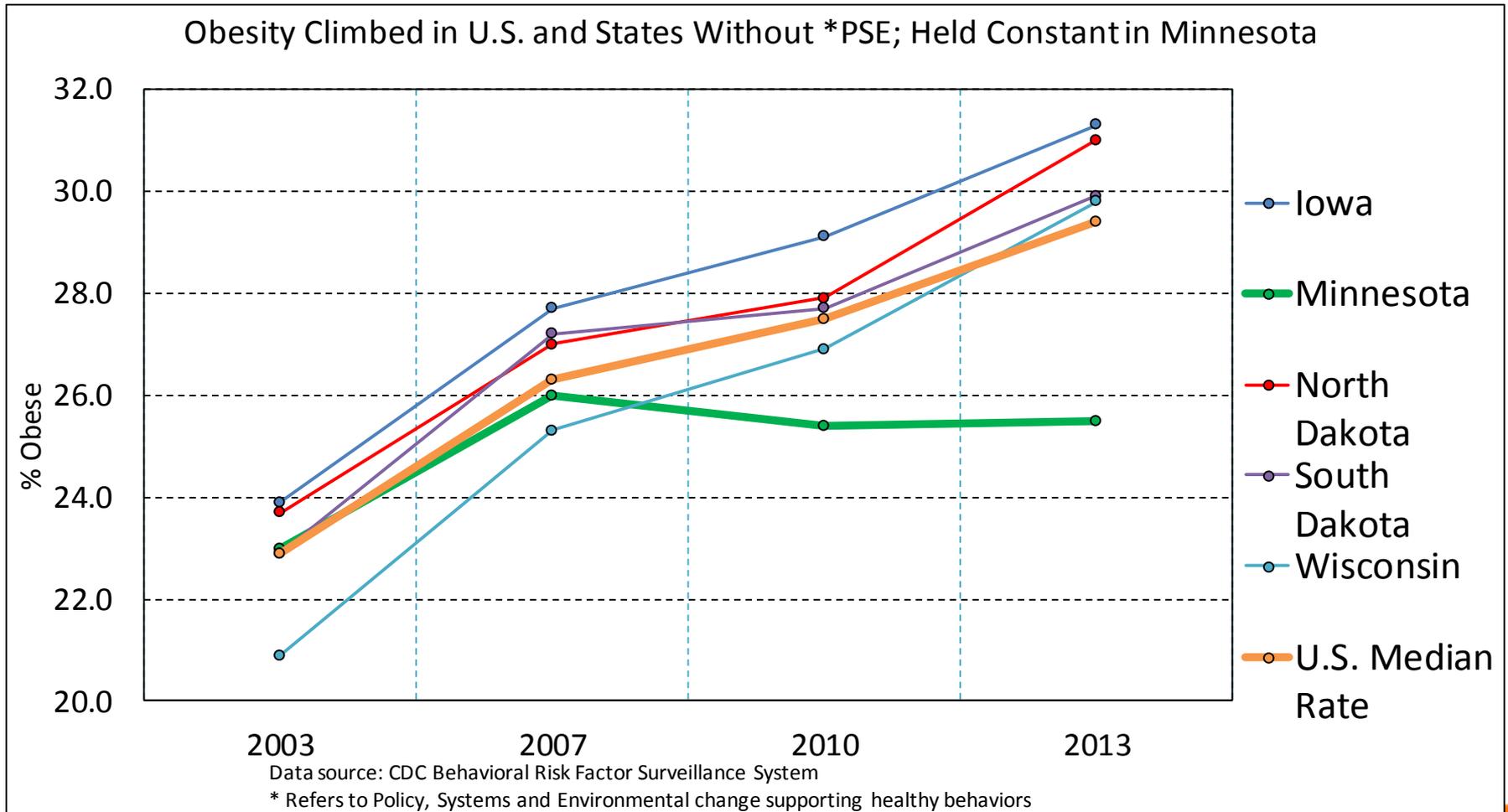
Support Community Capacity

- *Who is at the decision-making table, and who is not?*
- *Who is being held accountable and to whom?*

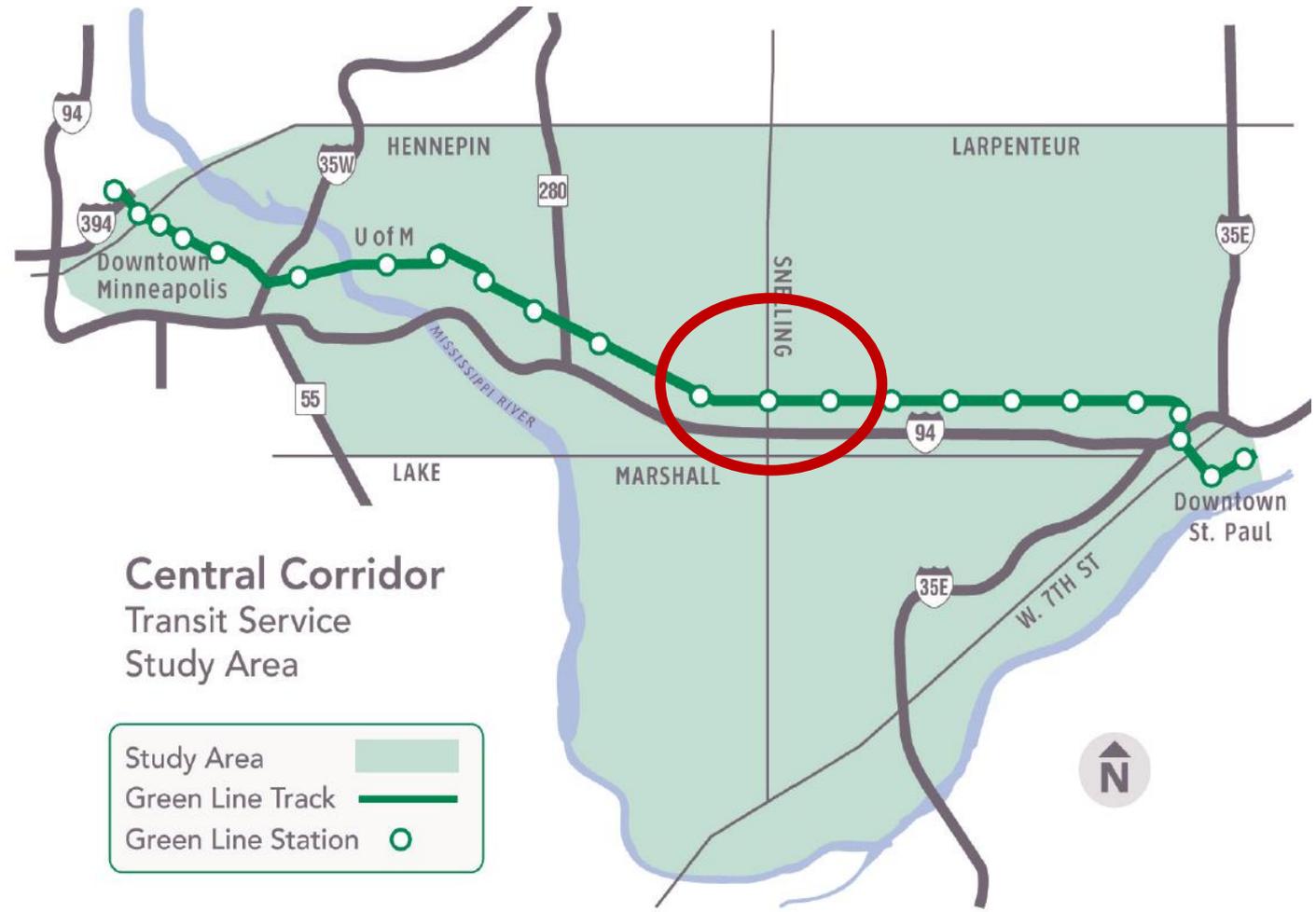
Triple Aim of Health Equity in Action



Triple Aim of Health Equity in Action



Triple Aim of Health Equity in Action



Triple Aim of Health Equity in Action



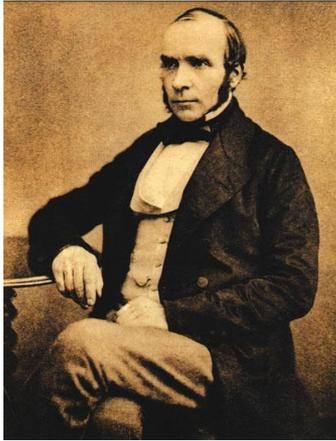
ECOS President Martha Rudolph after signing an MOA on public health and environmental collaboration with ASTHO President Edward Ehlinger and U.S. EPA Acting Deputy Administrator Stan Meiburg

Asking the Right Questions Is a Path to Action for Change

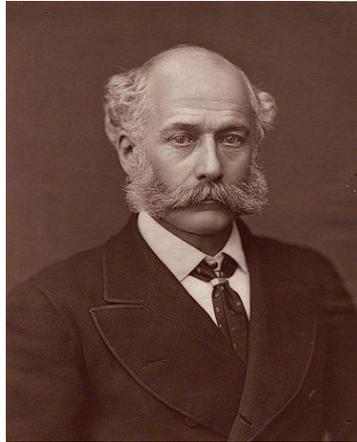
- *What would it look like if equity was the starting point for decision-making?*
- *Our work would be different.*
- *But it would be going back to our roots*

We need to learn from history and take a different approach to creating health

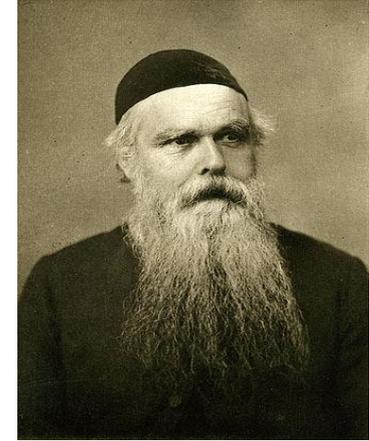
1864 - 1875 - Cholera In London



Dr. John Snow



Sir Joseph Bazalgette



Rev. Henry Whitehead

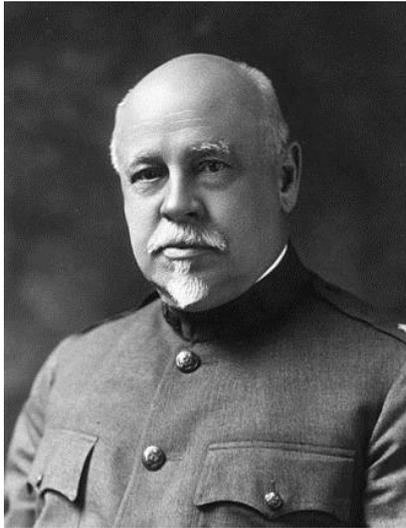


Broad Street Memorial Pump



**Abbey Mills Pumping Station
(the Cathedral of Sewage)
Board of Guardians**

1915 Welch-Rose Report: Laid foundation for Schools of Public Health
1916: Johns Hopkins School of Hygiene and Public Health Established



William Henry Welch



Wickliff Rose

- The Welch-Rose report: (for public health), “unity is to be found in the end to be accomplished.”

*“...the physician’s function is fast becoming **social and preventive**, rather than individual and curative...(do) not to forget that directly or indirectly, **disease has been found to depend largely on unpropitious environment...a bad water supply, defective drainage, impure food, unfavorable occupational surroundings...(these) are matters for ‘social regulation,’ and doctors have the duty to promote social conditions that conduce to physical well-being.***”

Abraham Flexner
1910 Flexner Report

C. E. A. Winslow - 1920



C.E.A. Winslow, Dean
Yale School of Public Health

Public health is the science
and art of :

1. Preventing disease.
2. Prolonging life, and
3. Promoting health and
efficiency through
**organized community
effort** for...

continued

Winslow – definition of public health continued

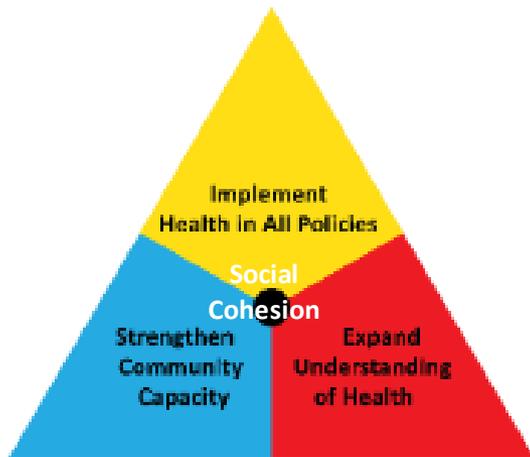
- a. the **sanitation** of the environment
- b. the control of **communicable infections**
- c. the **education** of the individual in personal hygiene
- d. the **organization** of medical and nursing services for the early diagnosis and preventive treatment of disease, and
- e. the development of the **social machinery** to insure everyone a **standard of living** adequate for the maintenance of health, so **organizing these benefits** as to enable **every citizen to realize his birthright of health and longevity.**

1965-1967 - 89th Congress

- Head Start
- Medicare and Medicaid
- Neighborhood health centers
- Food stamps
- The Voting Rights Act
- Job Corps
- VISTA
- Peace Corps
- School lunch program
- Older Americans Act
- Elementary & Higher Education Act
- Housing & Urban Development Act
- Vocational Rehabilitation Act
- The Freedom of Information Act
- Cigarette labeling and advertising act
- Public Works and Economic Development Act
- National Foundation on the Arts and the Humanities Act
- Immigration and Nationality Act
- Motor Vehicle Air Pollution Control Act,
- Highway Beautification Act,
- National Traffic and Motor Vehicle Safety Act
- National Historic Preservation Act,
- National Wildlife Refuge System Act,
- Department of Transportation Act,
- Etc.

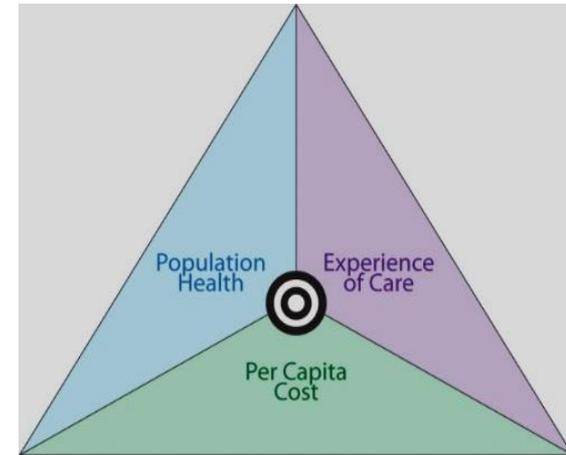
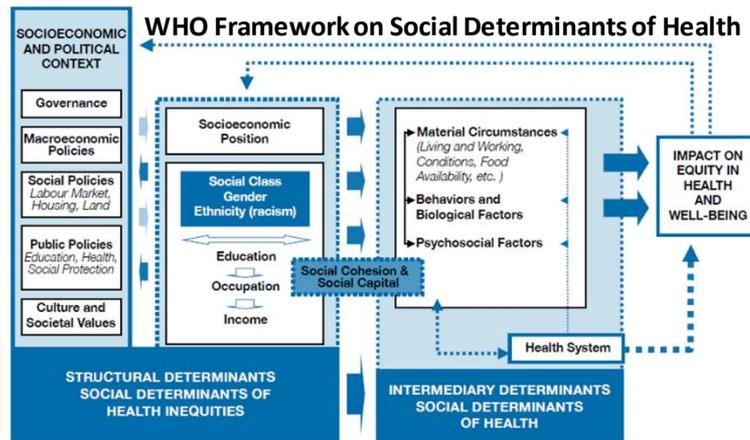
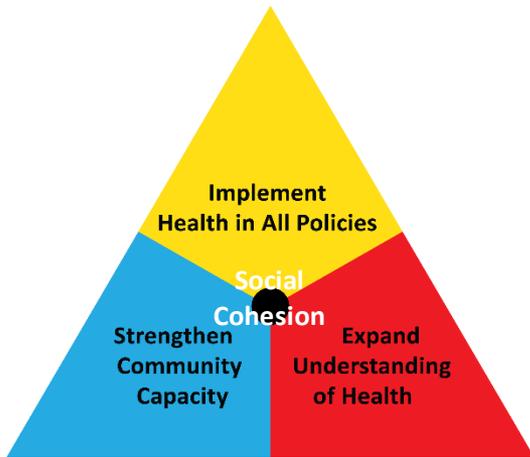
Our work would be different

Our Work Would be to Advance Health Equity and Optimal Health for All By:



- Expanding the understanding of what creates health:
 - use data, reports, convening to change the narrative
- Strengthening the capacity of communities to create their own healthy futures.
 - Use public health tools: partnerships, engagement, convening ability, data, reports, education, policy, resources, legislation, “bully pulpit” to organize the people to create change
- Implementing a “health in all policies” approach with health equity as the goal
 - in program and policymaking to garner and reinvest resources

Public Policies – Community/Public Health – Healthcare Essential in Advancing Health Equity and Optimal Health for All



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