

Vision for a Healthier America



All Americans should have the opportunity to be as healthy as they can be. Every community should be safe from threats to its health. All individuals and families should have a high level of services that protect, promote and preserve their health, regardless of who they are or where they live.

To realize these goals, the incoming Administration and Congress should make improving health a top priority. There is nothing more valuable to the nation than the health and vitality of the American people.

There has never been a better opportunity to shift the paradigm from a system that treats people after they become sick to a true health system, focused on keeping people healthier in the first place, while also lowering healthcare costs and increasing productivity.

Experts have identified top strategies and approaches for ways the public health and

health systems can work better — which is important, but far from sufficient. Where we live, learn, work and play can have a bigger impact on health than medical care alone. Working together, the public health, healthcare and social service systems can achieve a much stronger collective impact. Moving forward, we must build partnerships and leverage assets across the health system, mental and behavioral health systems, social and public services, the private sector and communities to work together toward the common aim of a Healthier America.

The Problem and Need for Action

Communities across the country face serious, ongoing health problems — a majority of which are preventable, including by prioritizing stronger population health efforts. Some big challenges include:

- **Chronic Diseases:** Approximately half (117 million) of U.S. adults have at least one chronic health condition — ranging from cancer to diabetes to heart disease, but a majority of these could be prevented.¹ More than 85 percent of healthcare spending is for individuals with more than one chronic condition.²
- **Obesity:** More than one-third of adults and 17 percent of children are obese, putting them at increased risk for a range of health problems.³ Seventy percent of nonprofit hospitals' assessments ranked obesity as the number one health concern in their community.⁴
- **Tobacco Use:** Tobacco use remains the leading cause of preventable death each year in the United States — responsible for more than 480,000 deaths and \$170 billion in preventable healthcare costs. More than 16 million Americans are living with a tobacco-caused disease.⁵
- **Prescription Drug, Heroin and Other Substance Misuse:** Currently, around 21 million (8.1 percent of) Americans struggle with a substance use disorder.⁶ More than 2 million people have a prescription painkiller dependence, which has contributed to a related rise in heroin use — with nearly half a million Americans addicted to heroin.⁷ Prescription painkillers have resulted in more than 14,000 deaths in 2014, and deaths from heroin more than tripled from 2010 to 2014.⁸ There is a need for an integrated and balanced strategy to fight chronic pain and addiction. Substance misuse and suicides are contributing to higher death rates among middle-aged White Americans.
- **Infectious Diseases and Health Security Threats:** Millions of Americans become unnecessarily sick or die each year from infectious diseases, which cost the country more than \$120 billion each year.⁹ The ongoing HIV/AIDS epidemic; the emergence of the Zika virus, Ebola, MERS-CoV, periodic foodborne disease outbreaks and threats of bioterrorism; and the resurgence of hepatitis C, measles and whooping cough underscore the need for more constant vigilance against ongoing threats.
- **Lead and Other Environmental Threats:** The contaminated water emergency in Flint, Michigan and other locations serves as a clarion call to renew our commitment to addressing the nation's environmental health challenges. The Surgeon General has identified a series of priorities for healthier air, water, homes and neighborhoods,¹⁰ and global public health officials have stressed the need to address the health impacts of climate change and extreme weather events.
- **Injury and Violence:** One person dies from an injury or violence every three minutes in the United States, and injuries are the leading cause of death for children and for all Americans between the ages of 1 and 44.¹¹
- **Mental Health:** Mental illness affects one in five adults and is the fourth biggest driver of medical expenses and the top medical cost for children.^{12, 13, 14}
- **Adverse Childhood Experiences:** More than half of U.S. children — across the economic spectrum — experience an adverse event, such as physical or sexual abuse or substance use in the household — and half of children are in low-income families, putting them at increased risk for living in unsafe conditions and prolonged stress, often called “toxic stress,” which can contribute to a range of physical and mental health conditions.^{15, 16, 17, 18}
- **Disability:** One in five Americans has some kind of disability. The annual healthcare expenditures associated with disability are estimated at \$400 billion.

Obesity Rates in the United States



More than one-third of adults are obese



17 percent of children are obese

Prescription painkillers have resulted in more than 14,000 deaths in 2014, and deaths from heroin more than tripled from 2010 to 2014.

Mental Illness Affects One in Five Adults



Guiding Principles for Improving Health

Achieving a healthier America requires a national commitment to:

- **Prioritize Health Care vs. Sick Care:**

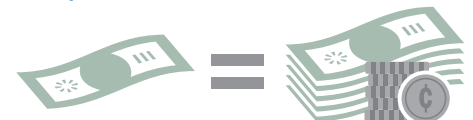
Effective, evidence-based health improvement strategies can lower healthcare costs and improve the vitality of neighborhoods — but have never been widely implemented. For instance, evidence-based community prevention programs to increase physical activity, improve nutrition and prevent smoking could save the country more than \$16 billion annually within five years — a \$5.60 return for every \$1 spent. Strategic community-clinic based programs can show strong results, such as the Diabetes Prevention Program (DPP) which has cut disease rates by more than 50 percent. The Stanford Chronic Disease Self-Management Programs saved more than \$300 per patient per year — if scaled to 10 percent of Americans with chronic diseases could yield around \$6.6 billion annually in savings.^{19, 20, 21} The shift to a value-based approach to health provides new opportunities and incentives to make staying healthy a higher priority — and to bring high-impact programs into action. A strong focus should be placed on early childhood policies and programs — which can have the highest impact for setting the course for lifelong health — as well as continued support through different life stages.

- **Better Meet Local Priorities:** Health improvement strategies must be flexible enough for local communities to be able to prioritize their shared goals — addressing prescription drug misuse to obesity to adverse childhood experiences and toxic stress — and



bring key partners and assets from the community to work together to tackle those concerns. Effectively addressing health problems requires sustained engagement — through multisector collaborations of key leaders and institutions — with healthcare providers and payers, public health, social services, private businesses, philanthropies, schools and community groups — who have a vested interest in improving the health and vitality of a community. Different sectors bring different strengths and expertise — and a diversification of resources — to help achieve a stronger collective impact. Local collaboratives should have access to and support from a network of leading local, state and national experts to identify, implement, evaluate and continuously improve efforts.

Over Five Years the Return For Every \$1 spent is \$5.60





- **Support for Health and Well-being**

Beyond the Doctor’s Office: Collective impact strategies provide increased ability to determine how to align and leverage the shared goals and resources of communities — along with federal, state and local investments — to improve health and related factors that impact health more efficiently and effectively. For instance, working together, cross-sector partnerships can better address key issues, such as affordable housing, quality education, income, transportation, the availability of affordable nutritious food, safe places to be physically active and healthy conditions in neighborhoods. There is also an increased need and opportunity to better integrate healthcare, behavioral health and public health services with other available social services.

- **A Modern Public Health System that is Prepared for Emergencies and Ongoing Priorities:**

Every community around the country should have a baseline, modern public health system capable of responding to emerging and ongoing threats — ranging from emerging infectious disease outbreaks and bioterrorism to ongoing concerns like obesity and diabetes — and that can serve as a Chief Health Strategist and advisor to the community for using the best available evidence to inform strategies and programs to achieve better health. Federal, state and local public health systems should be modernized to focus on a set of “foundational” capabilities, including the ability to quickly diagnose, detect and control epidemics, recognizing the needs of the entire population, including children, individuals with disabilities and other persons with

access and functional needs. While emergencies and new threats are inevitable, the current system does not have built-in capacity to respond to new or surge needs. Instead, arising emergencies disrupt attention and funds from ongoing pressing priorities — and create cycles of relying on a series of emergency supplemental spending bills — instead of building a stronger baseline system with increased flexibility.

- **Support Better Health in Every**

Community: Too often where people live determines how healthy they are. Disease rates and funding vary dramatically from neighborhood-to-neighborhood, zip-code-to-zip-code, city-to-city, county-to-county and state-to-state. Strategies must work to achieve health equity and improve the health of all Americans, regardless of race, ethnicity and socioeconomic status.

Sharing a Vision for a Healthier America

AcademyHealth · Academy of Nutrition and Dietetics · Advocates for Better Children's Diets · Alaska Public Health Association · Allen Temple Neighborhood Development Inc. · Allergy & Asthma Network · Alliance for the Prudent Use of Antibiotics · American Academy of Pediatrics · American Association of Colleges of Pharmacy · American Association of Occupational Health Nurses · American Cancer Society Cancer Action Network · American College of Preventive Medicine · American Council on Exercise · American Heart Association · American Lung Association · American Planning Association · American Public Health Association · American School Health Association · Antibiotic Resistance Action Center, Milken Institute School of Public Health, the George Washington University · Association of Accredited Public Health Programs (AAPHP) · Association of American Veterinary Medical Colleges · Association of Maternal & Child Health Programs · Association of Public Health Laboratories · Association of Schools and Programs of Public Health · Association of State and Territorial Health Officials · Association of State Public Health Nutritionists (ASPHN) · Asthma and Allergy Foundation of America · BCCCH- Bonner County Coalition for Health · Big Cities Health Coalition · Boston Alliance for Community Health · Boston Public Health Commission · Boulder County Public Health · Campaign for Tobacco-Free Kids · Center for Science in the Public Interest · ChangeLab Solutions · Children's Environmental Health Network · Children's Mental Health Network · Coalition for Health Funding · Community Anti-Drug Coalitions of America (CADCA) · Creatinghealthycommunities.org · Delaware Academy of Medicine / Delaware Public Health Association · Directors of Health Promotion and Education (DHPE) · Doctors for America · Dorchester County Health Department · Eat Smart Move More South Carolina · Ehrens Consulting · Emory Centers for Training and Technical Assistance · Family Resource Network · Fizika Group · FLIPANY (Florida Introduces Physical Activity and Nutrition to Youth) · Florida Public Health Association · Foundation for Healthy Generations · Fund for Public Health in New York City · Greater Philadelphia Business Coalition on Health · Green & Healthy Homes Initiative · Hawaii Public Health Association · Health Care Foundation of Greater Kansas City · Healthcare Leadership Council · Healthcare Ready · Health Care Without Harm · Health Promotion Advocates · Health Resources in Action · Healthy Homes Coalition of West Michigan · Healthy Schools Campaign · Healthy Teen Network · Hispanic Health Initiatives, Inc. · Idaho Public Health Association · Illinois Public Health Association · Illinois Public Health Institute · Indiana State Council of the Emergency Nurses Association Chapter 401 · Institute for Health and Productivity Studies · Institute of Social Medicine & Community Health · International Health, Racquet & Sportsclub Association · Iowa Public Health Association · IT'S TIME TEXAS · Jasper Newton County Public Health District · Johnson County Department of Health & Environment · Joy-Southfield Community Development Corporation · JPS Health Network · Kansas Association of Local Health Departments · Kickapoo Tribe in Kansas · Lawrence-Douglas County Health Department · LifeLong Medical Care · Logan County Health Department · Louisiana Public Health Institute · Lutheran Services in America · Madison Area Bus Advocates · Maine Public Health Association · Meade County Health Department · Mennin Consulting · Michael O. D. Brown We Love Our Sons & Daughters Foundation · Minnesota Public Health Association · MYZONE · National Alliance of State & Territorial AIDS Directors · National Association of Chronic Disease Directors · National Association of Counties · National Association of County and City Health Officials (NACCHO) · National Association of Pediatric Nurse Practitioners · National Association of School Nurses · National Athletic Trainers' Association · National Center for Weight and Wellness · National Coalition for Promoting Physical Activity · National Coalition on Health Care · National Environmental Health Association · National Forum for Heart Disease & Stroke Prevention · National Foundation for Infectious Diseases · National Health Foundation · National Housing Conference · National Indian Health Board · National Network of Public Health Institutes · National Recreation and Park Association · National WIC Association · Nemours Children's Health System · Nevada Public Health Association · New Jersey Public Health Association · NIRSA: Leaders in Collegiate Recreation · North Dakota Public Health Association · Ohio Public Health Association · Orange County Food Access Coalition · Oregon Public Health Association · Partnership for a Healthy Lincoln · Pawnee County Health Department · PinneyAssociates · Prevention Institute · Public Health Advocates · Public Health Association of New York City (PHANYC) · Public Health Foundation · Public Health Institute · Rails-to-Trails Conservancy · Regional Asthma Management and Prevention (RAMP) · Research!America · Respiratory Health Association · RiverStone Health · Safe Routes to School National Partnership · School-Based Health Alliance · SHAPE America - Society of Health and Physical Educators · Snohomish Health District · Society for Public Health Education · Society of Behavioral Medicine · Society of Infectious Diseases Pharmacists · Society of State Leaders of Health and Physical Educators · Southern California Public Health Association · Spokane Regional Health District · Stand2Learn · Stanton County Health Department · Tacoma-Pierce County Health Department · Texas Action for Healthy Kids · The Bronx Health REACH · The Food Trust · The National REACH Coalition · The Root Cause Coalition · The Society for Healthcare Epidemiology of America · Trust for America's Health · Truth Initiative · UNC Gillings School of Global Public Health · Universal Health Care Action Network of Ohio · Vermont Public Health Association · Washington State Public Health Association · Wisconsin Institute for Healthy Aging · WomenHeart: the National Coalition for Women with Heart Disease · YMCA of the USA



1730 M Street, NW, Suite 900
Washington, DC 20036
(t) 202-223-9870
(f) 202-223-9871

Endnotes

- 1 Ward BW, Schiller JS, Goodman RA. Multiple chronic conditions among US adults: a 2012 update. *Prev Chronic Dis*. 2014;11:130389. DOI:<http://dx.doi.org/10.5888/pcd11.130389>.
- 2 Gerteis J, Izrael D, Deitz Det al. *Multiple Chronic Conditions Chartbook. 2010. Medical Expenditure Panel Survey Data*. AHRQ Publications No, Q14-0038. Rockville, MD: Agency for Healthcare Research and Quality, 2014. Accessed November 18, 2014. <http://www.ahrq.gov/sites/default/files/wysiwyg/professionals/prevention-chronic-care/decision/mcc/mccchartbook.pdf> (accessed September 2016).
- 3 Ogdan CL, Carroll M, Kit BK, et al. Prevalence of Childhood and Adult Obesity in the United States, 2011-2012. *JAMA* 11(8): 806-814, 2016. <http://jama.jamanetwork.com/article.aspx?articleid=1832542> (accessed September 2016).
- 4 Health Research & Educational Trust. *Hospital-based Strategies for Creating a Culture of Health*. Chicago, IL: Health Research & Educational Trust, 2014. <http://www.hpoe.org/resources/hpoehretaha-guides/1687> (accessed September 2016).
- 5 U.S. Department of Health and Human Services. *The Health Consequences of Smoking – 50 Years of Progress: A Report of the Surgeon General*. 2014.
- 6 Mental and Substance Use Disorders. In *Substance Abuse and Mental Health Services Administration*. <http://www.samhsa.gov/disorders> (accessed September 2016).
- 7 Substance Abuse and Mental Health Services Administration, *Results from the 2012 National Survey on Drug Use and Health: Summary of National Findings*, NSDUH Series H-46, HHS Publication No. (SMA) 13-4795. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2013.
- 8 Injury Prevention & Control: Opioid Overdose. Overview of an Epidemic. In *Centers for Disease Control and Prevention*, 2016. <http://www.cdc.gov/drugoverdose/data/index.html> (accessed September 2016).
- 9 Fauci AS, Touchette NA, Folkers GK. Emerging Infectious Diseases: a 10-Year Perspective from the National Institute of Allergy and Infectious Diseases. *Emerging Infect Dis*, 11(4), 2005. http://wwwnc.cdc.gov/eid/article/11/4/04-1167_article.htm#tnF1 (accessed October 2013).
- 10 Office of the Surgeon General. *The Surgeon General's Call to Action to Promote Health Homes*. Rockville, MD: U.S. Department of Health and Human Services, 2009. <http://www.ncbi.nlm.nih.gov/books/NBK44192/> (accessed September 2016).
- 11 Injury Prevention & Control: Data & Statistics (WISARS). Key Injury and Violence Data. In *Centers for Disease Control and Prevention*, 2016. http://www.cdc.gov/injury/wisqars/overview/key_data.html (accessed September 2016).
- 12 Mental Health by the Numbers. Mental Health Facts in America. In *National Alliance on Mental Illness*, 2015. <https://www.nami.org/Learn-More/Mental-Health-By-the-Numbers#sthash.rRCIqvU.dpuf> (accessed September 2016).
- 13 Kessler, RC, Heeringa S, Lakoma MD, Petukhova M, Rupp AE, Schoenbaum M, Wang PS, Zaslavsky AM. The individual-level and societal-level effects of mental disorders on earnings in the United States: results from the National Comorbidity Survey replication. *Am J Psy* 165 (5): 703-11, 2008.
- 14 Soni A. *The Five Most Costly Children's Conditions, 2011: Estimates for U.S. Civilian Noninstitutionalized Children, Ages 0-17*. Statistical Brief #434. Rockville, MD: Agency for Healthcare, Research and Quality, 2014. http://www.meps.ahrq.gov/mepsweb/data_files/publications/st434/stat434.shtml (accessed July 2014).
- 15 Felitti VJ, et al. Relationship of Childhood Abuse and Household Dysfunction to Many of the Leading Causes of Death in Adults: The Adverse Childhood Experiences (ACE) Study. *American J of Prev Med*, 14(4): 245-258, 1998.
- 16 Injury Prevention and Control: Division of Violence Prevention. In *Centers for Disease Control and Prevention*. <http://www.cdc.gov/violenceprevention/acestudy/index.html> (accessed May 2016).
- 17 Jian Y, Ekono M, and Skinner C. *Basic Facts about Low-Income Children. Children Under 6 Years, 2014*. New York: National Center for Children in Poverty, 2016. http://www.nccp.org/publications/pub_1149.html (accessed September 2016).
- 18 Center on the Developing Child at Harvard University (2010). *The Foundations of Lifelong Health Are Built in Early Childhood*. <http://www.developingchild.harvard.edu> (accessed March 2016).
- 19 Schreiber RJ. "Prevention in the Context of Frailty: The Role of Evidence-based Programs." 2015. http://www.almageriatria.info/miami_2015/Cuarto%20dia/Profesores/september122015ppt.ppt (accessed September 2016).
- 20 The Diabetes Prevention Program Research Group. The Diabetes Prevention Program (DPP). *Diabetes Care* 25(12): 2165-2171, 2002. <http://care.diabetesjournals.org/content/25/12/2165> (accessed September 2016).
- 21 Galson SK. Self-Management Programs: One Way to Promote Healthy Aging. *Public Health Reports*. 2009;124(4):478-480. <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC2693160/> (accessed September 2016).