Public Health in a Time of Change: Factors That Affect Health

John Auerbach
Associate Director for Policy
Acting Director, Office for State, Tribal, Local and Territorial Support
Centers for Disease Control and Prevention

Improve health security at home and around the world

Better prevent the leading causes of illness, injury, disability, and death

Strengthen public health/health care collaboration

CDC Strategic Directions

National Trends in Health System Transformation

- Increased access to health insurance
- Value-based payment model
- Innovative care models
- Demographic changes
- Evolving role of public health

Foundational Public Health Services

- Programs/Activities Specific to an HD and/or Community Needs
- Most of an HD’s Work is “Above the Line”

Public Health as Chief Health Strategist

- Less direct care—more policy
- Convoking
- Diverse sectors
- Emerging needs & populations
- Upstream focus
- Real-time and new data

Key Practices of the Chief Health Strategists of the Future

Practice #1: Adopt and adapt strategies to combat the evolving leading causes of illness, injury, and premature death
Key Practices of the Chief Health Strategists of the Future

Practice #2: Develop strategies for promoting health and well-being that work most effectively for communities of today and tomorrow.

Practice #3: Identify, analyze, and distribute information from new, big, and real-time data sources.

DASH is a national Robert Wood Johnson Foundation program.

Practice #4: Build a more integrated, effective health system through collaboration between clinical care and public health.
Key Practices of the Chief Health Strategists of the Future

Practice #5: Collaborate with a broad array of allies—including those at the neighborhood-level and the non-health sectors—to build healthier and more vital communities.

Key Practices of the Chief Health Strategists of the Future

Practice #6: Replace outdated organizational practices with state-of-the-art business, accountability, and financing systems.

Accreditation Sets Standards
Factors That Affect Health

- Socioeconomic factors
- Clinical interventions
  - Counseling & education
  - Long-lasting protective interventions
  - Changing the context
  - To make individuals' default decisions healthier

Examples
- Largest impact
  - Poverty, education, housing, inequality
- Smallest impact
  - Fluoridation, 0g trans fat, iodization, smoke-free laws
- Long-lasting protective interventions
  - Immunizations, brief intervention, cessation treatment, colonoscopy
- Clinical interventions
  - Medication for high blood pressure, high cholesterol, diabetes
  -Immunizations, brief intervention, cessation treatment, colonoscopy

The 3 Buckets of Prevention

1. Traditional Clinical Prevention
   - Increase the use of clinical preventive services
2. Innovative Clinical Prevention
   - Provide services that extend care outside the clinical setting
3. Community-Wide Prevention
   - Implement interventions that reach whole populations

Bucket 1: Traditional Clinical Approaches

Focus on Preventive Care

- Increase the use of clinical preventive services
Indicators — The Clinical Components

- **Aspirin**: People at increased risk of cardiovascular events who are taking aspirin (47%)
- **Blood pressure**: People with hypertension who have adequately controlled blood pressure (46%)
- **Cholesterol**: People with high cholesterol who are effectively managed (33%)
- **Smoking**: People trying to quit smoking who get help (23%)

**Development of 6|18 Initiative**

- Focus on 6 high-cost, high-prevalence conditions
- Review of CIO evidence-based clinical interventions
- 18 interventions identified

**Close Correlation of 6 Conditions with Key Winnable Battles for Public Health**

- Tobacco
- Healthcare-Associated Infections
- Teen Pregnancy
- Nutrition, Physical Activity, Clean and Food Safety
- Motor Vehicle Injuries
- HIV
Examples of Traditional Clinical Proposals in 6|18 Initiative

- Prescribing of medications for hypertension, tobacco use & asthma but without cost-sharing
- Increasing access to contraceptive services by unbundling LARC & eliminating pre-approval
- Provide earlier reimbursement by Medicare for fistula placement for new maintenance hemodialysis

Examples of Initiatives to Increase Use of Preventive Services

Bucket 2: Innovative Patient-Centered Care

Focus on Preventive Care
To Address Asthma:

Healthy Home Risk Reduction

Home visit by CHWs to
- Provide additional education and encouragement
- Assess risk factors in the home
- Assist in removing risk factors

To Address Hypertension:

Team Approach & At-Home Monitoring

- Team approach: Clinical agreements with pharmacists to monitor blood pressure
- Home-based approach: Blood pressure monitoring home devices; follow-up care

Bucket 3: Community-Wide Health

Focus on Preventive Care
14 Evidence-Based, Community-Wide Interventions

Address the Social Determinants of Health
- Early Childhood Education
- Clean Diesel Bus Fleets
- Public Transportation System Introduction or Expansion
- Home Improvement Loans and Grants
- Earned Income Tax Credits
- Water Fluoridation

Change the Context: Making Healthy Choice the Easy Choice
- School-Based Programs to Increase Physical Activity
- School-Based Violence Prevention
- Safe Routes to School (SRTS)
- Motorcycle Injury Prevention
- Tobacco Control Interventions
- Access to Clean Syringes
- Pricing Strategies for Alcohol Products
- Multi-Component Worksite Obesity Prevention

Description
- Early childhood education (ECE) addresses literacy, numeracy, cognitive development, socio-emotional development, and motor skills for children aged 3-4 years.
- Some programs offer recreation, meals, health care, parental supports, and social services.
- Children disadvantaged by poverty may experience an even greater benefit.

Health Impact:
- Improved cognitive and emotional development
- Healthier weight
- Reduced maltreatment
- Protective factor against onset of adult disease and disability

Economic Impact:
- ECE programs are associated with positive benefits-to-cost ratios up to $5.19:1.
Description
- Tobacco price increases
- High-impact anti-tobacco mass media campaigns
- Comprehensive smoke-free policies

Health Impact
- Reduced smoking initiation and use among adults and youths
- Increased quitting among adults/youth
- Reduced hospitalizations (asthma and heart attacks)

Economic Impact
- Smoke-free indoor policies reduce hospital admissions by 5-20%
- Mass-media campaigns have benefit-to-cost ratio up to 74:1
- Raising prices of tobacco products by 20% generates healthcare savings up to $90 per person per year

Aligned Work in All Three Buckets is Best

Easier Said Than Done
Challenges in Meeting the Needs
