

A Disparities Foresight Briefing
Health Equity: Focusing on Health in All Policies

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Larry Cohen is the founder and executive director of Prevention Institute, a non-profit national center dedicated to improving community health and well-being by taking action to build resilience and prevent problems *before* they occur. Prevention Institute moves beyond approaches that target individuals to those that create systematic, comprehensive strategies that alter the conditions that impact community health, with a particular focus on equitable health outcomes.

Mr. Cohen discussed the need to “take two steps back to the social determinants of health” in order to promote health equity. Exciting new developments such as the passage of the economic stimulus plan and renewed discussion on healthcare reform have created a unique opportunity to improve health, safety, and equity outcomes. However, conversations about reform are too focused on healthcare and the medical arena, while the greatest impact and opportunities for improving health and disparities come from investing in prevention and addressing the underlying conditions that affect our wellbeing. Studies have shown that the vast majority of the factors that influence health are related to conditions in the environment and their influence on behaviors and safety, rather than access to healthcare. The words of President Obama reflect this opportunity, “Simply put, in the absence of a radical shift towards prevention and public health, we will not be successful in containing medical costs or improving the health of the American people.”

Cohen explained that where we live, work, and play affects our health. Many people understand the link between the environment and safety in terms of toxins, pollution, air, and soil; however, the social environment also play a significant role in shaping people’s health. The way our environment is constructed, the types of services and products we have access to, and how we get around all affect our wellbeing. The environment shapes norms, which affect our behaviors, and in turn affect our health and safety (e.g. smoking regulations in the workplace). Cohen introduced a series of pictures that capture the link between health and food, transportation, violence, and physical activity. The Institute of Medicine best summarizes this point by noting that, “It is unreasonable to expect that people will change their behavior easily when so many forces in the social, cultural, and physical environment conspire against such change.”

Taking “two steps back” allows us to look at the relationship between exposures, the environment, behaviors, and health. Generally, when discussing how to address the five leading causes of death (heart disease, cancer, stroke, diabetes, and injuries and violence), most people picture pharmaceuticals and operating rooms. An examination of current healthcare spending in the U.S. reflects this same notion. Despite the fact that our environment and behavior account for 70% of the variance in health, 96 % of national health expenditures is spent on medical services, while only four percent is spent on prevention (without a focus on quality, primary

prevention). Cohen prompted the audience to step back and, as an example, focus on tobacco as the underlying cause of cancer. The strategy for combating disease then changes from providing medical services and prescriptions to combating tobacco use. Taking another step back, we must address the marketing of tobacco. Similarly, we should look at the promotion of unhealthy foods and the availability of healthy, fresh foods, to combat diabetes. People thrive when they have easy access to parks, playgrounds, and grocery stores selling nutritious food. People cannot thrive in unhealthy environments and are therefore suffering from the many diseases and injuries plaguing the United States. Disease prevention can be achieved by addressing the underlying community conditions.

There are 13 factors of community health plus 5 factors of medical services:

- Equitable Opportunity
 - Racial justice
 - Jobs & local ownership
 - Education
- Place
 - What's sold & how it's promoted
 - Look, feel & safety
 - Parks & open space
 - Getting around
 - Housing
 - Air, water, soil
 - Arts & culture
- People
 - Social networks & trust
 - Participation & willingness to act for the common good
 - Acceptable behaviors & attitudes
- Medical Services
 - Preventive services
 - Access
 - Treatment quality, disease management, in-patient services, & alternative medicine
 - Cultural competence
 - Emergency response

To address disparities and improve health, we must pay attention to policies in areas beyond healthcare and an investment in prevention must be made a priority. It is critical to improve access to and quality of treatment for illness. The Institute of Medicine's report *Unequal Treatment* describes the specific issues within the medical system that exacerbate inequities and provides many of the steps and actions needed to resolve them. However, Improving health cannot be addressed effectively disease-by-disease. In order to improve equity and community health, we must understand the relationship between health and other sectors, such as transportation, land use, agriculture, infrastructure, and economic development. The upcoming Transportation Bill, for example, could result either in more roads with increased impact on climate change and respiratory illnesses, or in an increase in walking, bicycling, public transit, and linking communities to additional jobs and recreational opportunities. In another

example, Karen Bass, at that time a community organizer and now the California Speaker of the Assembly, worked on zoning and the availability of alcohol in South Central Los Angeles. Over three years, her community organization efforts resulted in the closing of 200 liquor stores. This led to an average of a 27% reduction in crime within a four-block radius of each closed liquor store. The decrease in alcohol sales led to a decrease of injuries and violence, which is the fifth leading cause of death in the United States.

Prioritizing prevention through community wellness programs has substantial financial benefits as well. Investing in prevention saves lives, improves the health of the population, improves health equity, and saves money for government, business, healthcare, families, and individuals. According to a study done by the Prevention Institute and Urban Institute, every dollar invested in prevention would result in a one-dollar return in two years. In five years, we would see a return of \$5.60 per person for every dollar invested in community prevention.

In conclusion, Cohen presented the following recommendations to promote prevention and health equity:

1. **National Strategy** to promote health equity across racial, ethnic, and socioeconomic lines
2. **High-level leadership** at the White House and the Department level
3. **Build capacity of federal, state, and local health agencies** to lead population-based prevention and health equity work
4. Fund **community-based initiatives**
5. **Technical assistance and tools** to support community-level efforts
6. **Population-based prevention** and health equity with emphasis on **translating research into targeted, community specific strategies**

These recommendations and others for the new administration are available in the report by Prevention Institute and the Health Policy Institute of the Joint Center, available at http://preventioninstitute.org/documents/HealthEquityMemo_022609_000.pdf