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. More than 85 percent of healthcare spending is for individuals with more than one chronic condition.

- **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. Seventy percent of nonprofit hospitals’ assessments ranked obesity as the number one health concern in their community.

- **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.

- **Prescription Drug, Heroin and Other Substance Misuse**: Currently, around 21 million (8.1 percent of) Americans struggle with a substance use disorder. 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.

- **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. 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, 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.

- **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.

- **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.

- **Disability**: One in five Americans has some kind of disability. The annual healthcare expenditures associated with disability are estimated at $400 billion.

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


