Social Medicine: A Foundational Practice for Advancing Health Equity and Optimal Health for All

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• “There is a familiar America... It has the highest mass standard of living the world has ever known... but, there is another America... tens of millions of Americans are, at this very moment, maimed in body and spirit, existing at levels beneath those necessary for human decency... They are without adequate housing and education and medical care.”

Edward Michael Harrington
USA White and Black IMR: 1980-2011

White:
10.9

Black:
11.42

NCHS
“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.”

“What Sets the Goals of Public Health?”
Sir Geoffrey Vickers
Global Rankings of Infant Mortality Mortality

1960

1. Sweden
2. Netherlands
3. Norway
4. Czech Republic
5. Australia
6. Finland
7. Switzerland
8. Denmark
9. England, Wales
10. New Zealand
11. Belgium
12. United States
13. Scotland
14. N. Ireland
15. Canada
16. France
17. Slovakia
18. Ireland
19. Japan
20. Israel
21. Singapore
22. Germany
23. Cuba
24. Austria
25. Greece
26. Hong Kong
27. Puerto Rico
28. Spain
29. Italy
30. Bulgaria
31. Hungary
32. Poland
33. Costa Rica
34. Romania
35. Portugal
36. Chile
37. Romania
38. Colombia
39. United States
40. Portugal
41. Netherlands
42. Japan
43. Sweden
44. Poland
45. Scotland
46. New Zealand
47. Belgium
48. Denmark
49. France
50. Greece
51. Austria
52. Czech Republic
53. Hungary
54. Spain
55. Portugal
56. Romania
57. Chile
58. Costa Rica
59. Bulgaria
60. Russia

Source: Centers for Disease Control and Prevention

2015 estimate – 38th
Life Expectancy at Birth US and OECD Countries by Gender 1960-2010

Disparities Affect the Health of Everyone

Female (OECD median)

Female (U.S.)
(29 out of 34)

Male (OECD median)

Male (U.S.)
(26 out of 34)

National Center for Health Statistics, Health United States, 2009 (updated)
Life Expectancy, by race: United States, 1970 - 2010

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?

U.S. Worldview

- Decreased investment in the “commons”
- Increased polarization and decreased cooperation
- Reliance on competition
- Over investment in biomedical model

- Boot Straps Individualism
- Small Government
- Free Market Solutions
- Might makes right
- Education is for job training
- Reliance on technology
- Structural Discrimination is a thing of the Past
- Small Government
- Boot Straps Individualism
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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 US, for $1 spent on health care, about 55 cents is spent on social services
We Tried to fix it with the Triple Aim of Healthcare

- Better care for individuals
- Lower per capita costs
- Better health for populations
The Triple Aim of Healthcare has not moved us to better 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
• Makes healthcare the benevolent dictator of health
• Reinforces the narrative about what creates health
The Dominant World View Leads to the Dominant Narrative That:

• 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.
Evolving View of What Creates Health

Determinants of Health

- Genes and Biology: 10%
- Physical Environment: 10%
- Clinical Care: 10%
- Health Behaviors: 30%
- Social and Economic Factors: 40%

Necessary conditions for health (WHO)

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


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

1865 - Cholera In London

Dr. John Snow

Sir Joseph Bazalgette

Rev. Henry Whitehead

Abbey Mills Pumping Station
(the Cathedral of Sewage)

Broad Street Memorial Pump
“...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
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...

C.E.A. Winslow, Dean
Yale School of Public Health
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 - 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.
1865 – 1915 – 1965: Commonalities

• There were “givens” that had become “intolerable.”
• Changing social/political/economic environments
• Approach – focus on the conditions that create health
  • Address the socio-economic and environmental factors linked to health
  • Implement a multi-sector approach
• Engage the community
Advancing Health Equity and Optimal Health for All

Triple Aim of Health Equity

- Implement Health in All Policies
  - Implement a Health in All Policies Approach With Health Equity as the Goal

- Social Cohesion
  - Expand Our Understanding of What Creates Health

- Strengthen Community Capacity
  - Strengthen the Capacity of Communities to Create Their Own Healthy Future

- Expand Understanding of Health
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

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

Contributes to health disparities:
- Diabetes
- Cancer
- Asthma
- Obesity
- Injury

Good Health Status

Poor Health Status
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.
We Need a Broader Perspective and Broader Accountability on What Creates Health

“...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
Role of Physicians in integrating medicine and public health

• I swear by Apollo, the healer, Asclepius, Hygieia, and Panacea, and I take to witness all the gods, all the goddesses, to keep according to my ability and my judgment, the following Oath and agreement...

Original Hippocratic Oath

Asclepius and Hygieia
By Nick Legaros
Integration of Medicine and Public Health

• “Medical education does not exist to teach individuals how to make a living, but to empower them to protect the health of the public.”

• “The physicians are the natural attorneys of the poor, and the social problems should largely be solved by them.”

• Dr. Rudolf Virchow
• Father of Pathology and Social Medicine (the Pope of Medicine)
Most of the gains were due to a Health in All Policies approach with the integration of Public Health and Medical Care, focusing on a broad definition of health, with an engaged group of community leaders.

25 of the 30 years of life gained in the 20th Century resulted from public health accomplishments.
Public Policies and Community-oriented Public Health and Healthcare Essential in Advancing Health Equity and Optimal Health for All

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William Foege – CDC director 1977-1983

•“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.”
The Cost of a Long Life

1915 Welch-Rose Report
Laid foundation for Schools of Public Health

• The Welch-Rose report: (for public health), “unity is to be found in the end to be accomplished.”
C.E.A. Winslow, Dean, Yale School of Public Health

*Public Health* (1920):

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We need to take a different approach in creating health

“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