Advancing Health Equity and Optimal Health for All

Importance/Necessity of Partnerships

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Coming Home To Wisconsin
Wisconsin tradition is to lean “forward”

Robert M. LaFollette with Samuel Gompers (head of AFL) on September 7, 1924.
Robert M. (Fighting Bob) La Follette, Sr.

“There never was a higher call to greater service than in this protracted fight for social justice.”
State Ratification of the 19th Amendment

1. Wisconsin (June 10, 1919)
2. Illinois (June 10, 1919)
3. Michigan (June 10, 1919)
4. Kansas (June 16, 1919)
5. New York (June 16, 1919)
6. Ohio (June 16, 1919)
7. Pennsylvania (June 24, 1919)

The right of citizens of the United States to vote shall not be denied or abridged by the United States or by any State on account of sex.

15. Minnesota (September 8, 1919)

Tennessee ratified it on August 18, 1920 reaching 2/3 of the states.

Became National Law August 26, 1920
19th Amendment – greatest public health achievement of the 20th century (EE perspective)


FIGURE 1. Infant mortality rate,* by year — United States, 1915–1997

*Per 100,000 live births.
Public Health is the “...protracted fight for social justice.”

• “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.”

• William Foege – CDC director, 1977-1983
Health Equity is the public manifestation of social justice

USA White and Black IMR: 1980-2011

White: 10.9
Black: 11.42
"What Sets the Goals of Public Health?"

Sir Geoffrey Vickers - 1958

“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.”
To Advance Health Equity, Public Health Needs To Change How It Does Its Work

“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
Treat Individuals In The Context Of Their Community & Change Community Conditions

Triple Aim of Healthcare

- Better care for individuals
- Lower per capita costs
- Better health for populations
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

MDH Minnesota Department of Health

astho tm
An Expanded Understanding of What Creates Health Requires Expanded Partnerships

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
- IT Connectivity
- Social justice and equity


C. E. A. Winslow - 1920

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

continued
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**.
“...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
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
Health in All Policies: Policy and System Changes Related to Social Determinants of Health Requires Multiple Partners

- Minimum Wage
- Paid Leave
- Diabetes and Income
- Incarceration and health
- Ban the Box
- Transportation Policy
- REL data
- Broadband connectivity

- E-Health Policies
- Buffer strips
- Water quality
- Marriage Equity
- Payday Lending
- Big 10/SHD initiative
Triple Aim of Health Equity Partnerships in Action
Big Ten Academic Alliance/State Health Depts

- U of Wisconsin
- U of Minnesota
- U of Iowa
- U of Nebraska
- U of Illinois
- Northwestern U
- U of Chicago
- Indiana U
- Purdue U
- Michigan State U
- U of Michigan
- Ohio State U
- Penn State U
- Rutgers U
- U of Maryland
The mission of Land Grant Universities: focus on practical academic disciplines to address issues created by changing economic conditions and social class.
“...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
Triple Aim of Health Equity: Partnerships in Action

Themes
- Capitalize on the opportunity to influence health in early childhood
- Assure that the opportunity to be healthy is available everywhere and for everyone
- Strengthen communities to create their own healthy futures

Indicators
- Prenatal care
- Breastfeeding
- Food security
- On-time high school completion
- Per capita income
- Sense of safety
- Small business development
- Home ownership
- Incarceration justice

Outcomes
- Improved lifetime health
- Reduced health disparities
- More employment success
- Healthier relationships
- Stable, more cohesive communities
- Stronger, more stable families
- Better education outcomes

Social Determinants

Vision
All people in Minnesota enjoy healthy lives and healthy communities
Triple Aim of Health Equity Partnerships in Action

Central Corridor
Transit Service
Study Area

- Study Area
- Green Line Track
- Green Line Station
Triple Aim of Health Equity Partnerships in Action

Obesity Rate Comparison - 5 State Area

Data source: CDC Behavioral Risk Factor Surveillance System
ECOS President Martha Rudolph after signing an MOA on public health and environmental collaboration with ASTHO President Edward Ehlinger and U.S. EPA Acting Deputy Administrator Stan Meiburg
The Triple Aim of Health Equity
A Manifestation of The Wisconsin Idea

•“Honest government and just economic development expand democracy and improve public well-being.” (expand understanding)

•“Involvement of specialists in law, economics, and social and natural sciences help produce the most effective government.” (HiAP)

•“Government is to serve and be controlled by the people.” (community capacity)

Robert M. La Follette, Sr.
Public Policies – Community/Public Health – Healthcare

**Essential Partners** in Advancing Health Equity & Optimal Health for All

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