

PUBLIC HEALTH *Reports*

Meet the Author Webcast

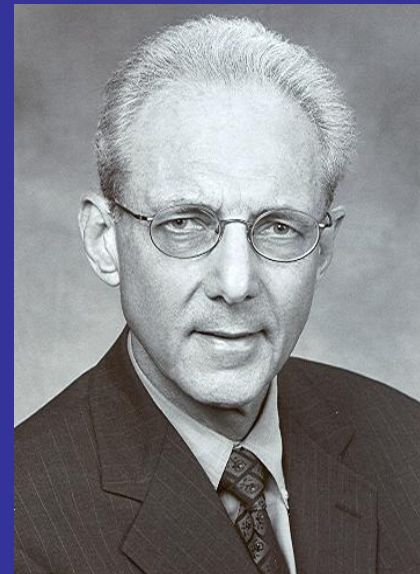
How Healthy Could a State Be?

Monday, March 22, 2010 | 1:00 PM–2:00 PM (EST)



David Kindig, MD, PhD

Emeritus Professor of Population Health Sciences
Emeritus Vice Chancellor for Health Sciences
University of Wisconsin, School of Medicine and
Public Health



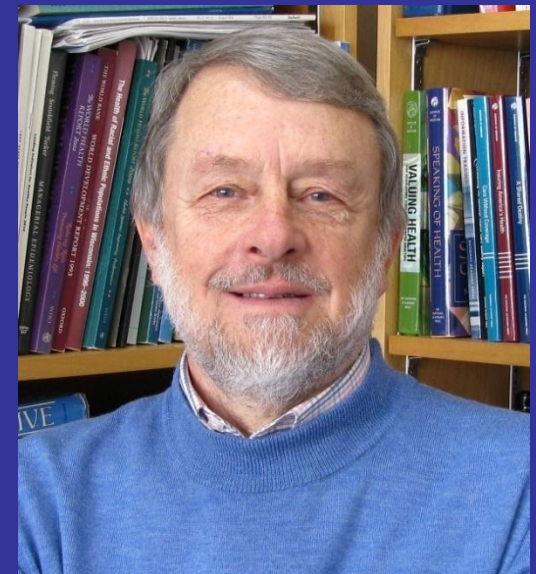
Daniel M. Fox, PhD

President Emeritus
Milbank Memorial Fund

HOW HEALTHY COULD A STATE BE?

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School of Medicine and Public Health
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So What is Population Health ?

“The health outcomes of a group of individuals, including the distribution of such outcomes within the group”

Kindig and Stoddart, AJPH, 2003



OUTCOMES

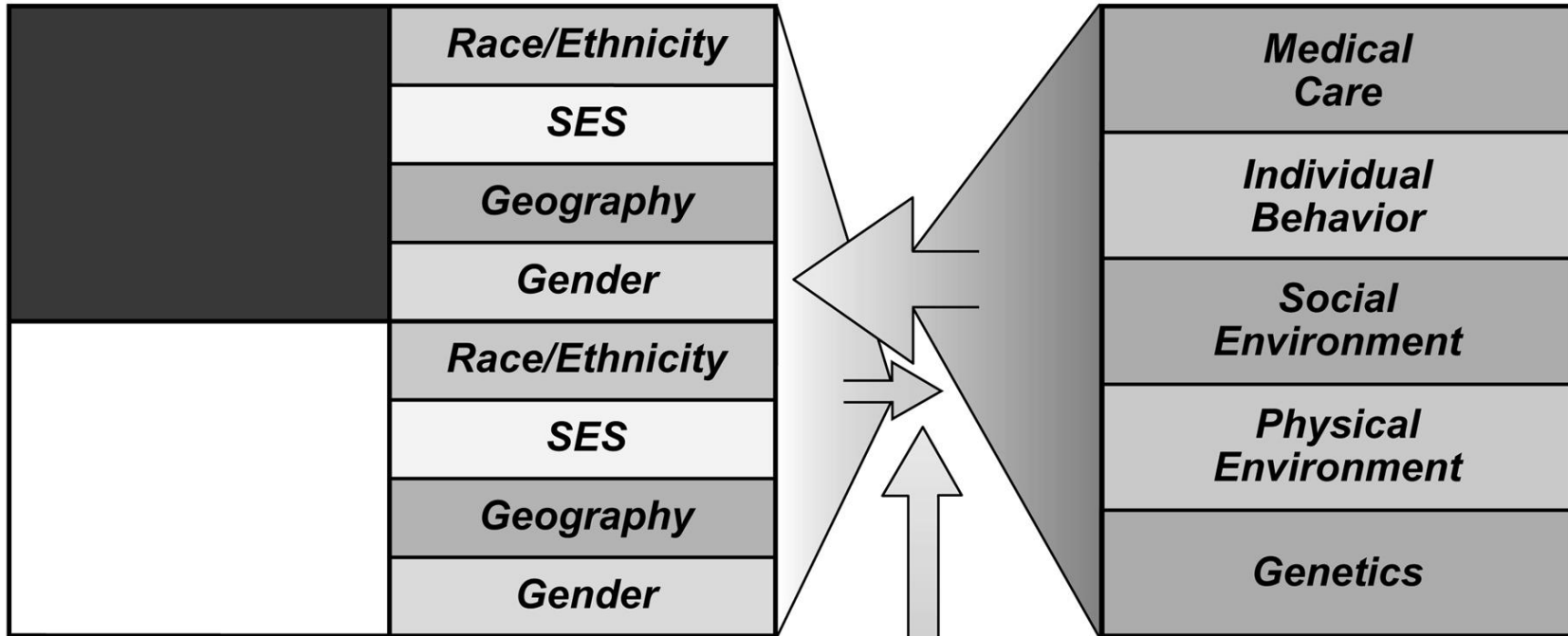
DETERMINANTS

Mean

Disparity

Mortality

**Health
Related
Quality
of Life**



**SPECIFIC
POLICIES AND
INTERVENTIONS**

“ How much, then, should go for medical care and how much for other programs affecting health, such as pollution control, fluoridation of water, accident prevention and the like.

There is no simple answer, partly because the question has rarely been explicitly asked. ”

Victor Fuchs, 1974



“Now that we are in a time when attention is turning to fundamental health outcomes, when performance and value purchasing are becoming discussed by business coalitions, when there is serious discussion of a new connection between medicine and public health, we find that our research community has not invested nearly enough in the knowledge and understanding we need to guide policy.”

David Kindig 1997

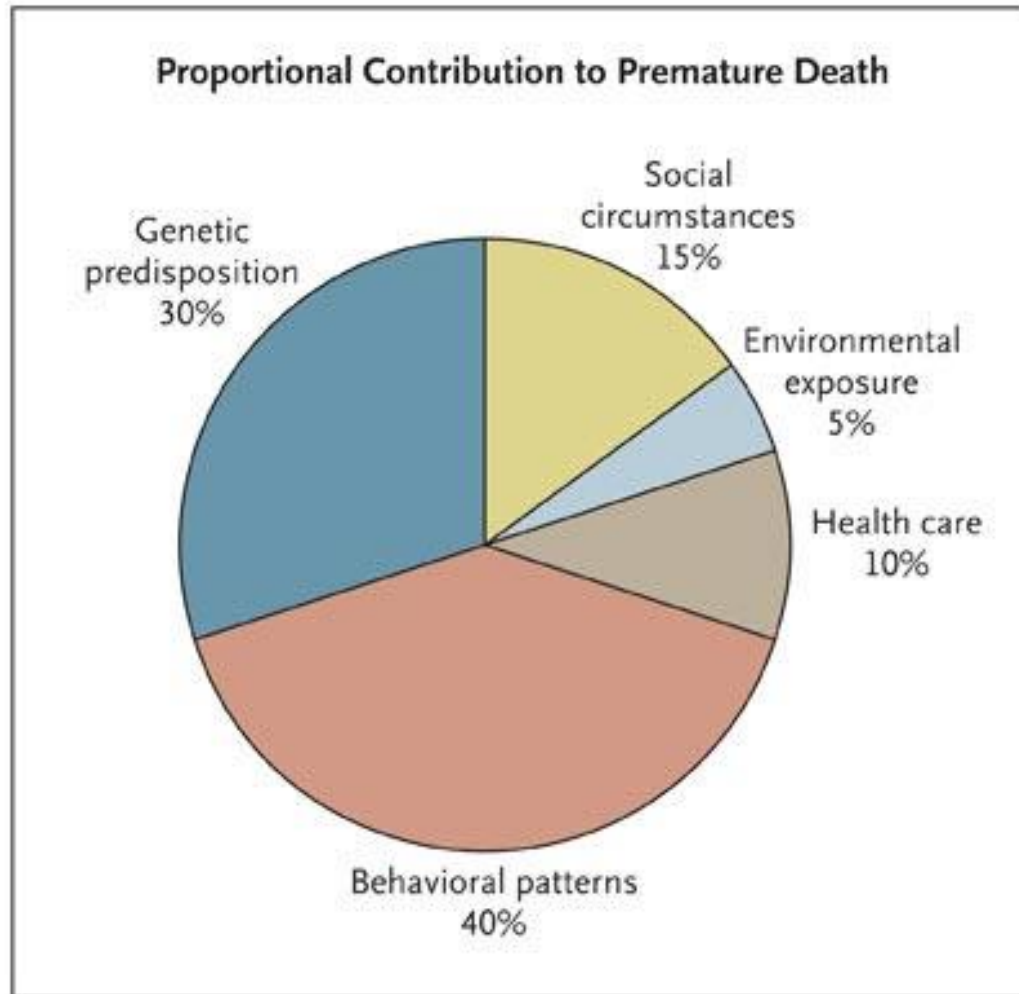


“At present we but vaguely understand the relative magnitude of the coefficients on the independent variables that would inform specific policies rather than broad directions.” Greg Stoddart 1996

“Redirecting resources means redirecting someones income...most students of population health cannot confidently answer the question Well, where would you put the money?” Evans and Stoddart, 2003



Balance of Health Determinants



“...Thus one could question a funding scheme that places so much emphasis on medical care and not on prevention”

- McGinnis 2002



America's State Health Rankings

- Clinical Care 21%
- Personal Behaviors 36%
- Public Health Policies 18%
- Community Environment 25%



ALL STATES CAN IMPROVE SINCE NO STATE IS #1 IN ALL DETERMINANTS

America's Health Rankings 2008

	Massachusetts #6	Minnesota #4	Vermont #1	Wisconsin #17
Smoking	4	5	12	24
Obesity	2	24	6	18
HS Graduation	22	6	4	2
Uninsured	1	4	10	3
Immunization	8	7	29	31

*



How Healthy Could A State Be?

“NonModifiable” Variables

- Race
- Age
- Gender
- Rural/Urban
- Immigrant

“Modifiable” Variables

- Uninsured
- Education level
- Income
- Employment
- Living Alone
- Activity level
- Smoking
- Obesity



PURPOSE OF STUDY

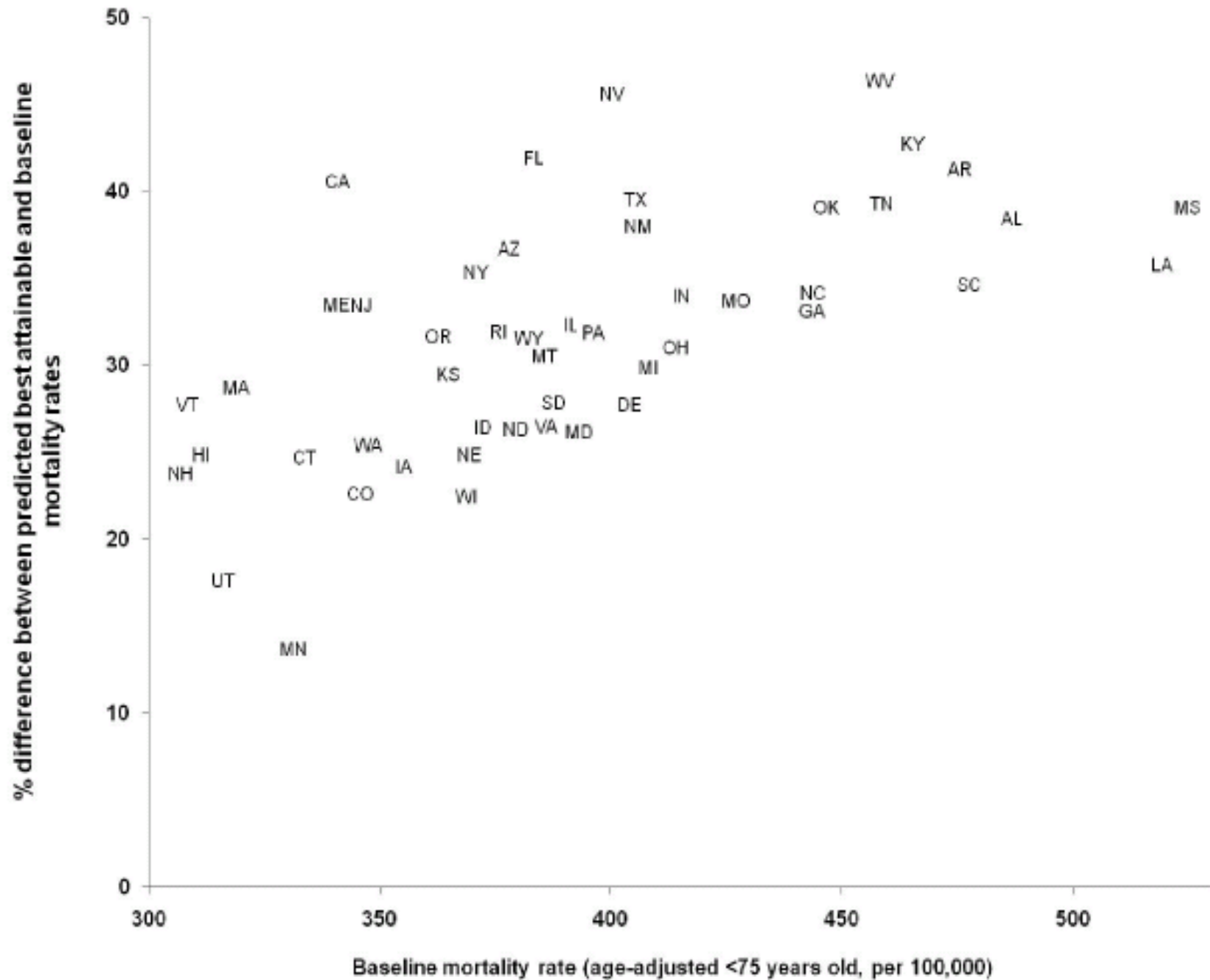
We sought to predict the lowest possible mortality rate that states might expect to achieve if they obtained the best levels of modifiable health determinants observed among all states.



Deaths/1000,000 from a 1% effect

- % Uninsured 7.8
- % Living Alone 7.2
- % High School Grad -3.9
- % College Grad -2.7
- % Unemployed 2.0
- Med Family Income -1.9
- % Smoking 1.7
- % Physical Inactivity 1.3





STATE SPECIFIC ANALYSIS

States vary in the amount of predicted mortality improvement associated with improvement in specific modifiable variables



Limitations of the Study

- Use of ecologic data/causality
- Outcomes only mortality
- Latency of independent variables
- Issues of migration



CONCLUSION

“It is not a fantasy to understand that major improvement in health outcomes can be made by combinations of interventions in multiple sectors which have already been achieved in other jurisdictions. As such relationships described here gain better causal certainty, they should be of substantial guidance to policy makers in the public and private sectors as they attempt the most cost-effective improvement for those for whom they have responsibility”.



THE POPULATION HEALTH QUESTION IS.....

“What is the optimal balance of investments (e.g., dollars, time, policies).....

in the multiple determinants of health (e.g., behavior, environment, socioeconomic status, medical care, genetics).....



THE POPULATION HEALTH QUESTION IS.....

*.....over the life course.... that
will maximize overall health
outcomes ...and minimize
health inequities at the
population level?”*

Kindig/Milbank 2007



The County Health Rankings: Mobilizing Action Toward Community Health

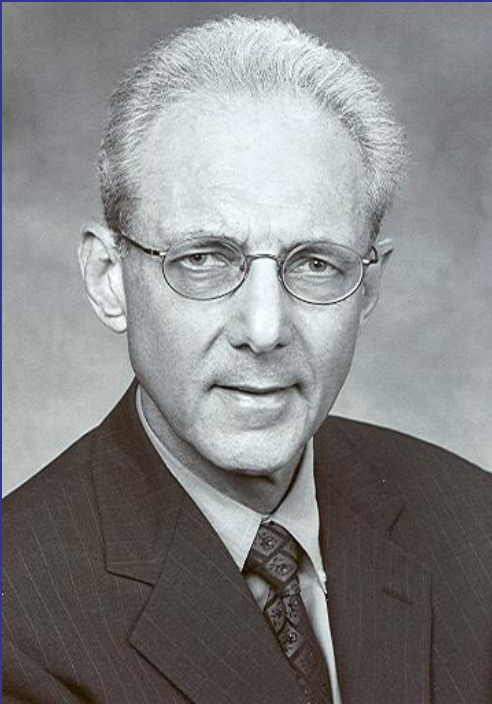
A collaboration between the Robert Wood Johnson Foundation and the University of Wisconsin





"My question is: Are we making an impact?"

The Politics of Achievable Mortality



Daniel M Fox, PhD

President Emeritus
Milbank Memorial Fund

The Epidemiology of Politics

...Measuring the burden of career risk in individuals and populations

- Morbidity
 - = When a policymaker loses or fears losing a legislative leadership position or a position in the executive branch because his/her party has lost an election
 - Mortality
 - = When a policymaker loses or fears losing a primary or general election or when s/he is unseated or fired for cause
-

Three Validated Rules By Which Policymakers Avoid Career Risk

1. Do not let voters perceive you as having failed.
 - In this example, failing to coordinate budgets and policy across agencies and sectors as a result of interest group and inter-agency politics.
 2. Distance yourself from controversies about science and/or values
 - Or that your antagonists can claim are about science and/or values
 3. Invidious comparisons among jurisdictions invariably cause problems for policymakers
 - Whether their jurisdiction rates high or low
-

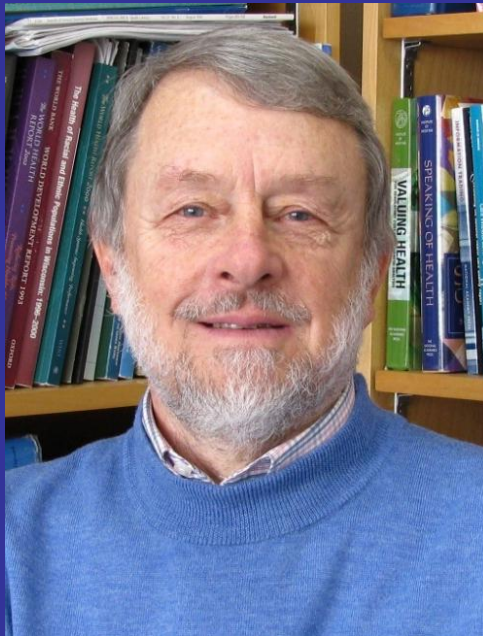
Significance of Applying the Epidemiology of Politics to the Data in Kindig et. al.

1. The odds of achieving new policy improve as a result of combining:
 - Evidence about how healthy a state could be, with
 - Evidence about the effectiveness and comparative effectiveness of interventions to address a broad array of determinants of health.
 2. New policy to improve population health becomes feasible when its proponents demonstrate how the application of scientific findings could assist policymakers in managing their career risk.
-

QUESTIONS??

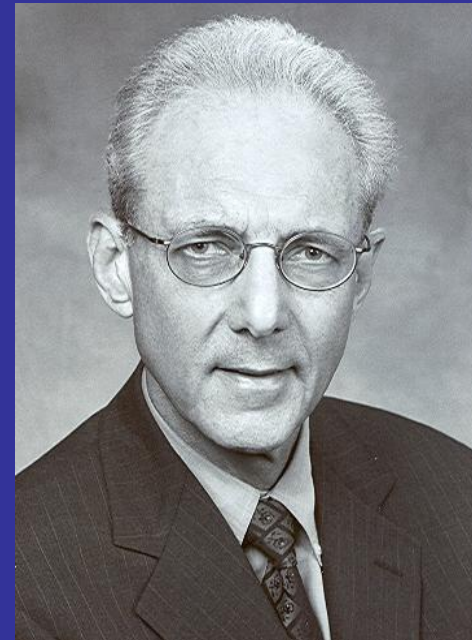
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THE NEXT

Meet the Author Webcast

Friday April 30th at 1:00 Eastern time

Surveillance of Sexually Transmitted Disease:
Challenges and Future Directions

With Authors:

Nicholas Gaffga,
Division of STD Prevention, CDC

Cornelis A. Rietmeijer
Denver Public Health Department

Webcast archives available at:

www.publichealthreports.org

VOLUME 124 SUPPLEMENT 2 • NOVEMBER/DECEMBER 2009

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