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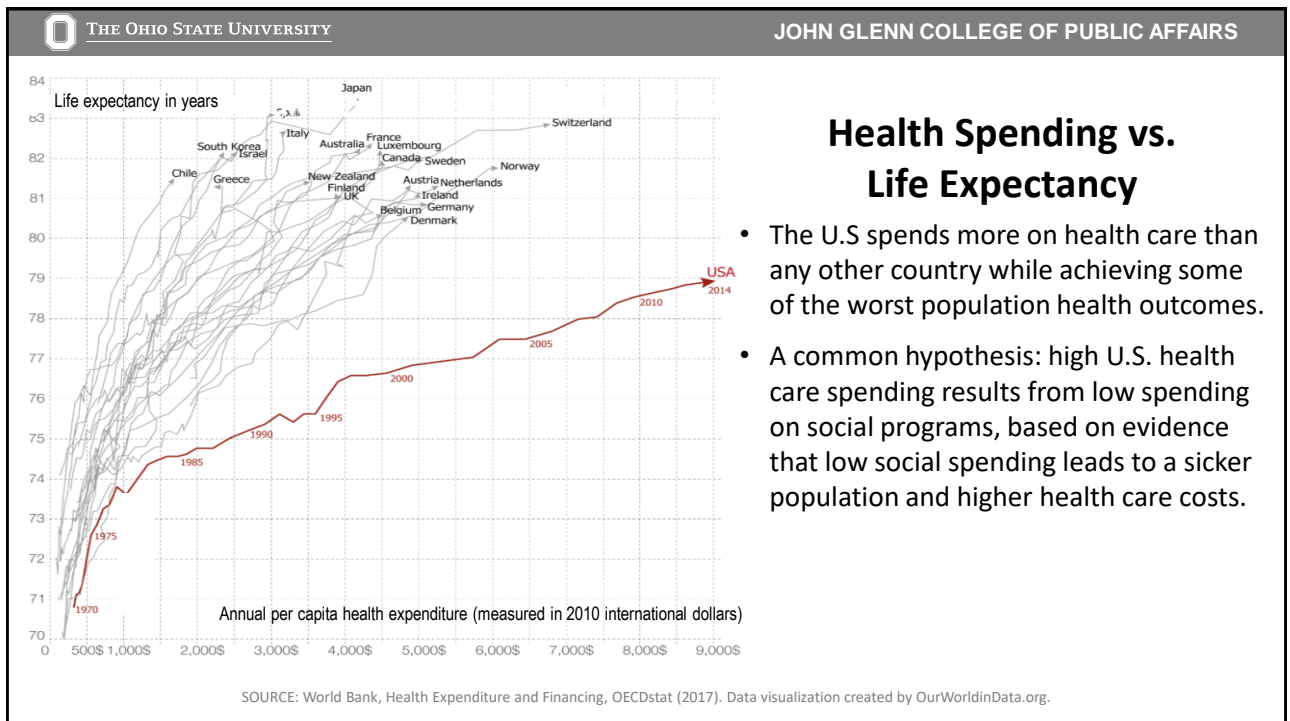
JOHN GLENN COLLEGE OF PUBLIC AFFAIRS

Upstream Priority: the role of social determinants in promoting health

Greg Moody, Executive in Residence

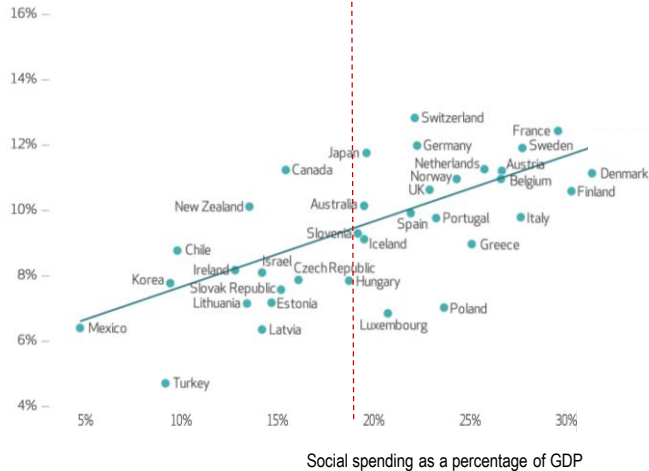
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Health care spending as a percentage of GDP



Health Spending vs. Social Spending

- U.S. social spending (19.7% of GDP) is slightly above the average for high-income countries (17.7% of GDP)
- Countries that spend more on health also tend to spend more on social spending (health spending does not appear to crowd out social spending).
- Countries with the greatest increases in health spending over time also had larger increases in social spending.

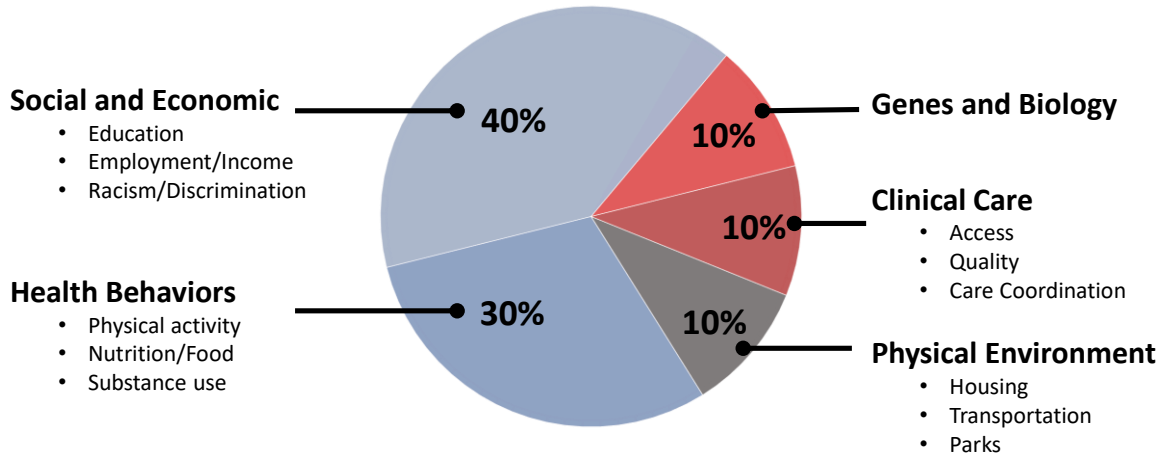
SOURCE: Papanicolas, Woskie, Orlander, Orav and Jha, *The Relationship Between Health Spending and Social Spending in High-Income Countries*, Health Affairs (August 14, 2019). Analysis of data from the OECD Social Expenditure Database (SOCX). Education spending is included; health-related social spending is excluded.



How we spend is as important as how much

- What determines health outcomes?
- How do social conditions impact health?
- Are social needs the same as social determinants?
- What social spending has the biggest impact on health?
- How can we get the most from the money we spend?

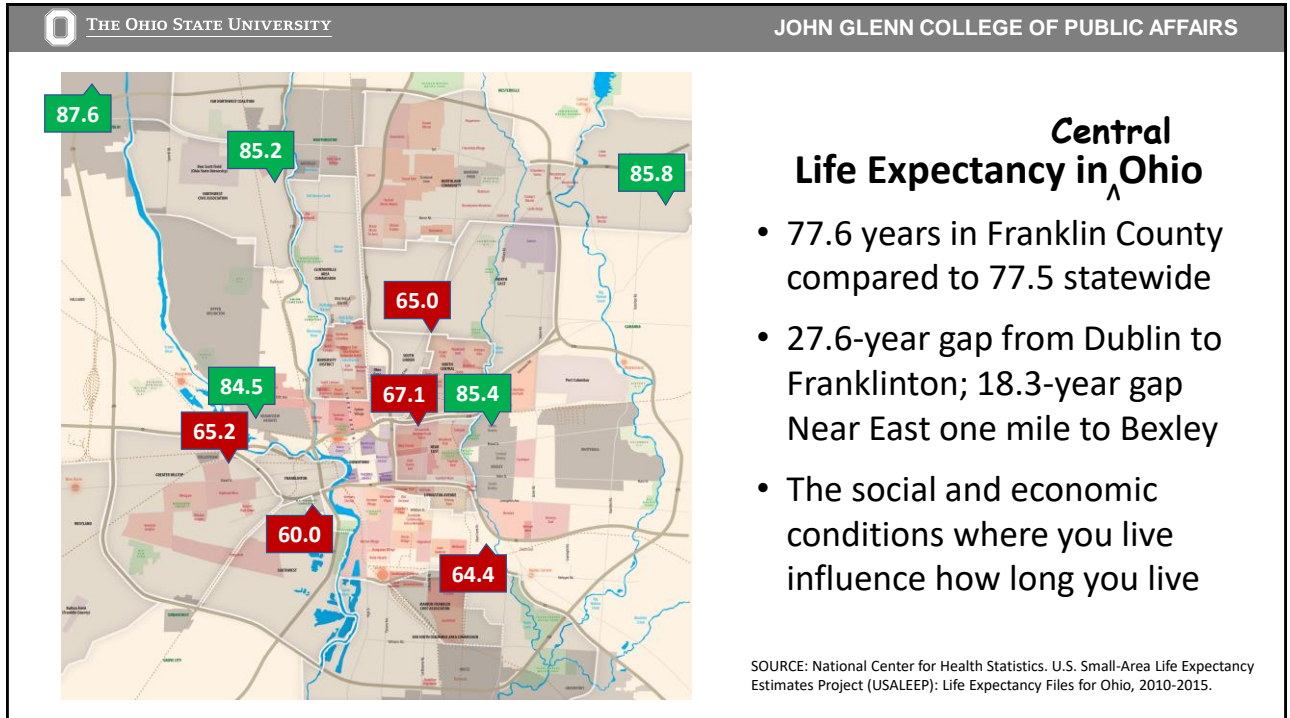
Most “health” is not determined by clinical medicine



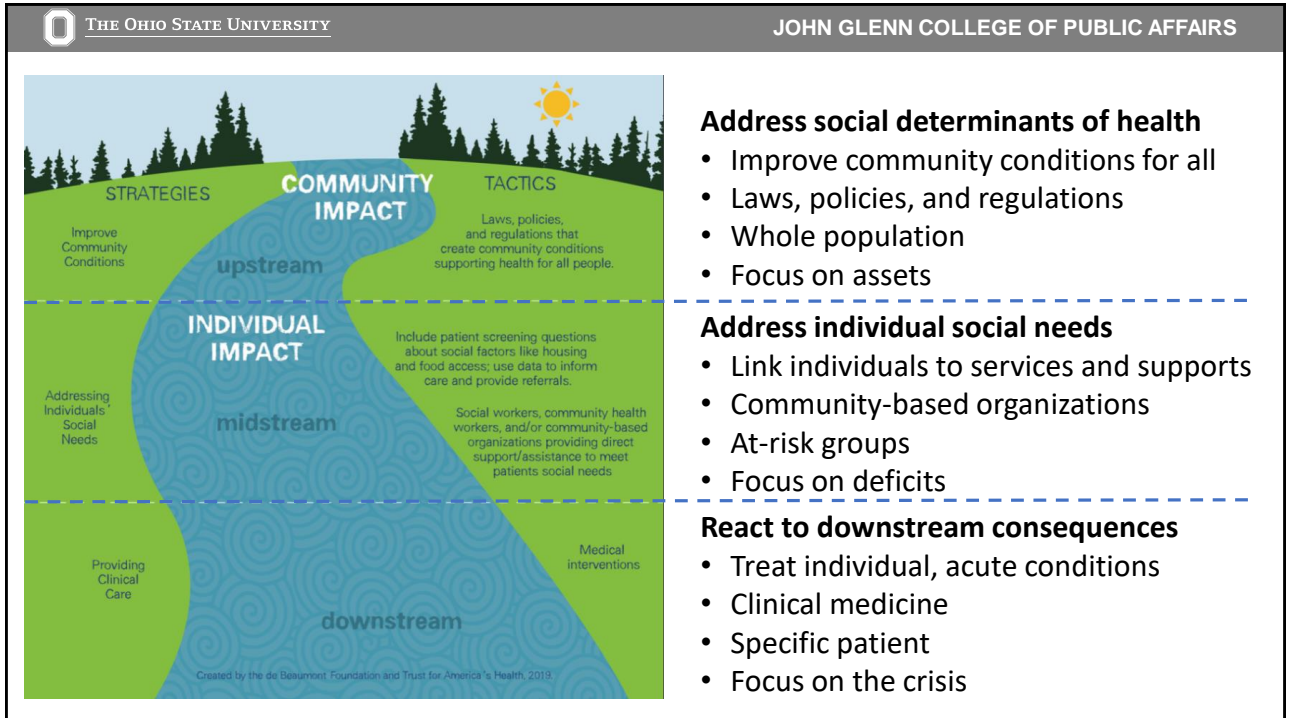
SOURCE: Determinants of Health Model based on frameworks developed by: Tarlov AR. Ann N Y Acad Sci 1999; 896: 281-93; and Kindig D, Asada Y, Booske B. JAMA 2008; 299(17): 2081-2083.

- The social determinants of health are the conditions in which people are born, grow, live, work and age.
- These circumstances are shaped by the distribution of money, power and resources at global, national and local levels.
- The social determinants of health are mostly responsible for health inequities – the unfair and avoidable differences in health status seen within and between countries.

SOURCE: World Health Organization Commission on the Social Determinants of Health (2008).



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- Social determinants of health may impact any downstream health outcome – heart disease, cancer, injury, stroke, diabetes, pneumonia, kidney disease ...
 - They drive the three lethal epidemics that reduced U.S. life expectancy three years in a row (2015-2017) – suicide, drug overdose, and alcoholism
 - Social determinants are mostly responsible for unfair differences in health status across populations – for example, disparities in infant mortality



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Downstream Consequence:

Ohio suicide deaths increased 45 percent in 10 years

- Ohio is part of a national trend – the U.S. rate is highest in 50 years
- 1,836 Ohioans committed suicide in 2018 compared to 1,268 in 2007
- Suicide rates increased 64 percent for Ohio youth aged 10-24 years and 48 percent for Ohioans aged 60 or older (2007-2018)
- Nine of Ohio's 10 counties with the highest suicide rates are in economically distressed Appalachian communities.
- Firearms accounted for half (52 percent) of Ohio's suicide fatalities.

SOURCE: Ohio Department of Health, *Suicide Demographics and Trends in Ohio* (2018).

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COMMUNITY IMPACT (upstream)

INDIVIDUAL IMPACT (midstream)

INDIVIDUAL IMPACT (downstream)

SUICIDE

- Raising the minimum wage \$1 reduces suicides 3.4-5.9 percent on average*
- School-based awareness and education

- Gun locks and safe storage
- Standardized screening and referral
- Trauma-informed health care

- Case management for individual high risk
- Crisis intervention and treatment

SOURCE: Ohio Department of Health, State Health Improvement Plan (2017-2019).
*Kaufman, Salas-Hernandez, Komro, Livingston. Effects of increased minimum wages by unemployment rate on suicide in the USA, Journal of Epidemiology and Community Health (November 2019).

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Downstream Consequence:

Ohio's drug overdose death rate is twice the national average

Year	Number of Deaths (OH)	Death Rate per 100,000 (OH)	Death Rate per 100,000 (US)
2000	~400	~5	~5
2001	~500	~7	~6
2002	~600	~8	~7
2003	~700	~9	~8
2004	~800	~10	~9
2005	~900	~11	~10
2006	~1000	~12	~11
2007	~1100	~13	~12
2008	~1200	~14	~13
2009	~1300	~15	~14
2010	~1400	~16	~15
2011	~1500	~17	~16
2012	~1600	~18	~17
2013	~1700	~19	~18
2014	~1800	~20	~19
2015	~1900	~21	~20
2016	~2000	~22	~21
2017	~2200	46.3	21.7

SOURCE: Ohio Department of Health, 2017 Ohio Drug Overdose Data (September 2018) and Kaiser Family Foundation analysis of CDC National Center for Health Statistics (January 2019).

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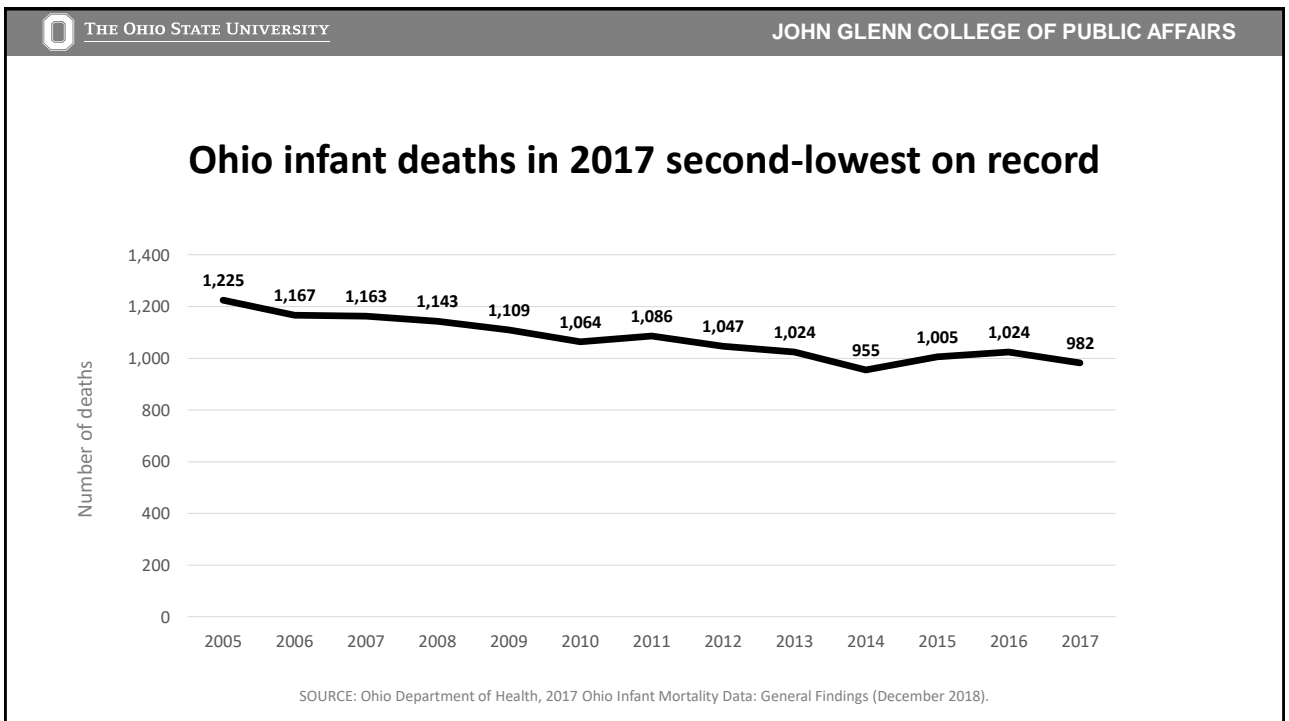
DRUG OVERDOSE DEATHS

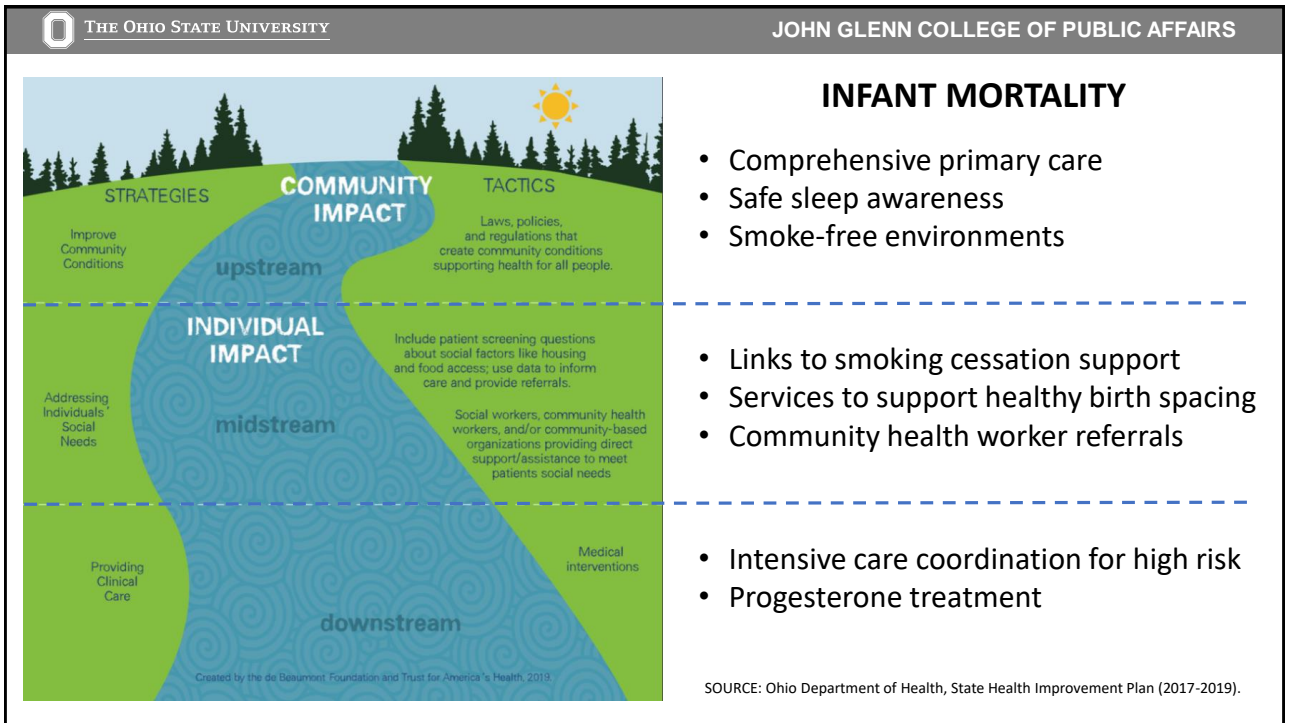
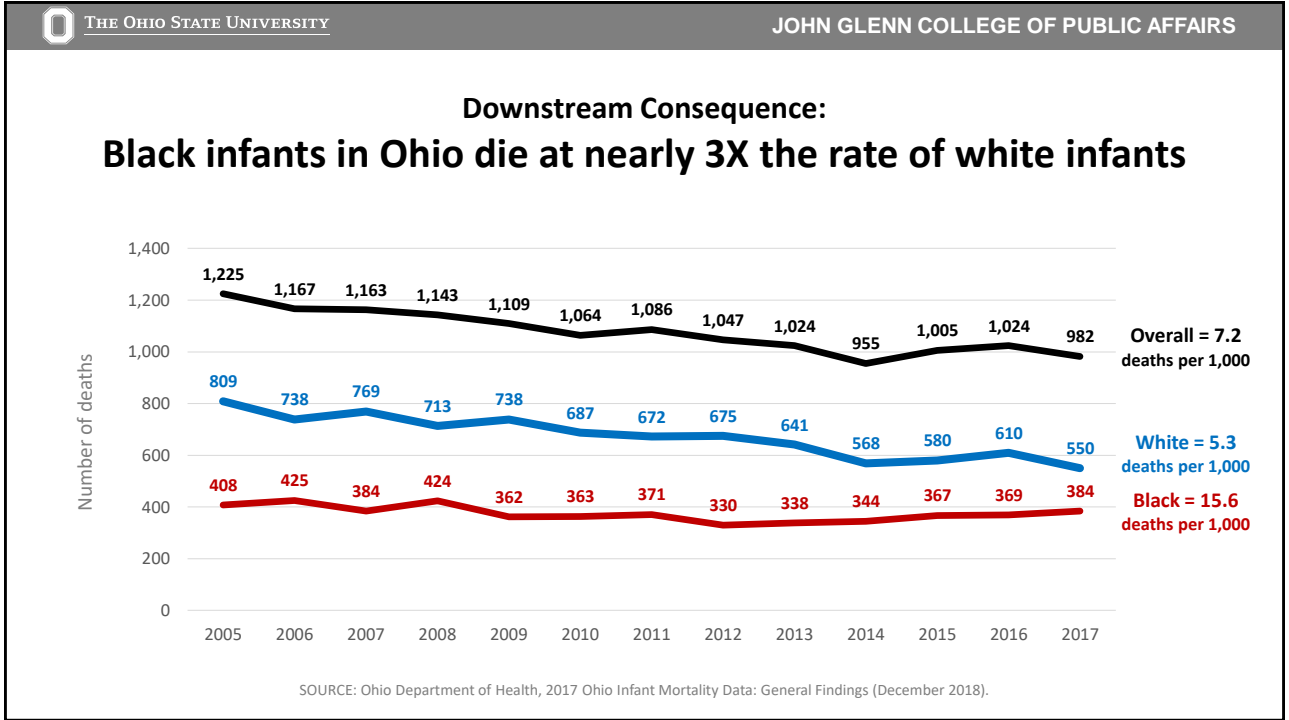
Level	Impact	Strategies	Tactics
Upstream	COMMUNITY IMPACT	Improve Community Conditions	Laws, policies, and regulations that create community conditions supporting health for all people.
Midstream	INDIVIDUAL IMPACT	Addressing Individuals' Social Needs	Include patient screening questions about social factors like housing and food access; use data to inform care and provide referrals. Social workers, community health workers, and/or community-based organizations providing direct support/assistance to meet patients' social needs.
Downstream	INDIVIDUAL IMPACT	Providing Clinical Care	Medical interventions

Created by the de Beaumont Foundation and Trust for America's Health, 2013.

- Community awareness and education
- Cut off illegal supply
- Prescriber guidelines
- Medicaid expansion coverage
- Drug courts
- Recovery housing
- Medication-Assisted Treatment (MAT)
- Access to providers
- Naloxone (Narcan) at the source

SOURCE: Ohio Department of Health, State Health Improvement Plan (2017-2019).





How we spend is as important as how much

- Set clear priorities for existing resources, surge resources to the greatest need, and tie financial incentives to social priorities
- Focus on cross-cutting outcomes and strategies – early childhood supports, school-based health, affordable housing, employment and income, comprehensive primary care
- Incorporate “health in all policies” – public health, medicine, development, education, environment, energy, human services, natural resources, recreation, public safety, corrections, taxation

Social Determinants of Health: Resources for Policymakers

- State Health Improvement Plan (SHIP)
<https://odh.ohio.gov/wps/portal/gov/odh/about-us/sha-ship/media/ohio-2017-19-state-health-improvement-plan>
- Health Policy Institute of Ohio (HPIO)
<https://www.healthpolicyohio.org/social-determinants-of-health/>
- De Beaumont Foundation
<https://www.debeaumont.org/>
- National Academy for State Health Policy (NASHP)
<https://nashp.org/toolkit-upstream-health-priorities-for-new-governors/>