"TO YOUR HEALTH AND WEALTH"
SPRINTING TOWARD
THE TRIPLE AIM
Case 1

- Persons with mental health and substance use conditions die at lease 25 years earlier than other people.
- Why?
Case 2

- 616 thousand Americans die every year of a heart attack or stroke; 200 thousand of these deaths occur to persons with a behavioral health condition.
- Why?
Case 3

- Almost 50 million Americans live in poverty. The rate of mental illness in this group is 8 times that among the most wealthy.
- Why?
What is the common thread?

- All of these health dilemmas occur in a national *DISEASE CARE* system that spent $2.6 trillion in 2010. Of this amount:
  - $2.5 trillion was for *disease* treatment
  - **Next to nothing** was spent on *HEALTH CARE*: promotion, prevention, or early intervention.
Where are we headed?

- 2020: $4.6 trillion
- 2015: $3.4 trillion
- 2010: $2.6 trillion
Some observations

- Generally, the overall health status of our population is very poor.

- Generally, our disease care system is laboring to stand in place.
We need a new vision

- Don Berwick proposed a new vision:
  - Better Population Health \(\iff\) \text{TODAY’S FOCUS}
  - Better Quality Health Care
  - Reduced Costs

- We now know this as the “\text{Triple Aim}”.\text{\textsuperscript{1}}
A few more observations

- The three aims are interdependent—work on one will influence the others.
- The aims can be connected through several different pathways.
- What I will describe is simply one plausible pathway.
AIM 1: TODAY’S FOCUS

- First among equals!
- Better Population Health
Fundamental logic

- One’s **Life Chances** → One’s **Health and Illness**
- One’s Life Chances → One’s **Health Care Access**
- One’s Life Chances → One’s **Life in the Community**
Our Life Chances are determined in part by our **Social Determinants of Health**
“Social Determinants” are the cultural, social, economic, health, and environmental conditions that influence one’s life chances, including one’s future physical and behavioral health.
Examples of **Negative Social Determinants**

- Poverty
- Discrimination and Social Exclusion
- Other Adverse and Traumatic Events
- Poor Quality Education
- Lack of Access to Quality Health Care
- Little or No Access to Healthy Foods
- Abundant Access to Fructose, Fatty Foods, etc.
- Culture that Promotes Smoking, Excessive Drinking, Drug Use, Poor Eating Habits.
Examples of **Positive Social Determinants**

- Community Social Support and Inclusion
- A Nurturing and Supportive Family for Children and Adults
- Good Health Education
- Positive Role Models
- Opportunities for Engagement in the Community
- Opportunity Structures for Education, Jobs, and a Social Support Network
- Access to Quality Health Care, Disease Prevention, and Health Promotion.
Determinants for SMI and SED

- It is obvious that the vast majority of adults with serious mental illness (SMI)/serious substance use disorders (SUD) and youth with serious emotional disturbance (SED) have an over-abundance of negative social determinants and a paucity of positive social determinants.
Negative social determinants cause trauma and illness

- Negative social determinants cause trauma.
- Trauma causes mental illness and addiction.
- Factoid: 75% of mental illness is due to trauma.
Life expectancy at age 25 by education, US, 1988-98

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<th>Years of school completed:</th>
<th>Men</th>
<th>Women</th>
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<tbody>
<tr>
<td>Less than 12</td>
<td>47.9</td>
<td>50.6</td>
</tr>
<tr>
<td>12</td>
<td>50.6</td>
<td>52.2</td>
</tr>
<tr>
<td>13-15</td>
<td>54.7</td>
<td>53.4</td>
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<td>More than 15</td>
<td>56.4</td>
<td>57.4</td>
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<td></td>
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<td>58.5</td>
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Life expectancy at birth by socioeconomic deprivation, US
Creating a “culture of health”

- Implement **disease prevention** and **health promotion** early in life and continue over the life course.

- Engage in early recognition of the signs and symptoms of mental illness and substance use conditions.

- Provide training to **teachers and police**, to **family members**, and to **high school and college students** to know what to do when they encounter persons with these problems.
Tools to help

- We need appropriate social media tools to help people dialogue, connect with peers, and connect with providers.
- We need telephone apps so that these social media tools are readily available when someone has a crisis.
Management observation

- Behavioral healthcare leaders will need to adopt the practices and tools of public health to improve the social determinants of health and population health.
Three levels for action

- **INTERVENTION:** Operation of our health care system, including social media.

- **COMMUNITY:** Conditions in which people are born, grow, live, work, and age.

- **POLICY:** Structural drivers at the global, national, and state/county/local levels.
Becoming two-dimensional

- HEALTHY
  - NOT ILL
  - ILL
- NOT HEALTHY
Applied wellness model
Prevention/promotion and wellness/health

- **Personal:**
  - Health (physical, mental, social)
  - Health *Literacy*
  - Health *Activation*

- **Community:**
  - Effects on Personal Health
  - Personal Health Literacy about Community
  - Community Activation (Public and Population Health)
**Prevention/Promotion Interventions**

<table>
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<th>Very Healthy</th>
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</thead>
<tbody>
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<td><strong>YOU IN FUTURE</strong> (health)</td>
<td></td>
<td><strong>YOU SOON</strong> (wellness)</td>
</tr>
<tr>
<td>No Disease</td>
<td></td>
<td>Severe Disease</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>YOU SOON</strong> (disease prevention)</td>
<td></td>
<td><strong>YOU NOW</strong></td>
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<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Very Unhealthy</td>
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Prevention of substance use

- **INTERVENTION:** SBIRT
- **AND**
- **COMMUNITY:** Drug Free Communities; No “pill mills”
- **AND**
- **POLICY:** Policies that support healthy lives, free of inappropriate drug use
Reducing trauma

- **INTERVENTION:** Remove ACES from families and communities
- **AND**
- **COMMUNITY:** Schools that do not permit seclusion and restraint
- **AND**
- **POLICY:** Policies that promote nurturing families and that provide sanctions for physical/sexual abuse
ACES influence life chances

- Early Death
- Disease, Disability, and Social Problems
- Adoption of Health-risk Behaviors
- Social, Emotional, & Cognitive Impairment
- Adverse Childhood Experiences

Scientific Cycle
Final thoughts 1

- Clearly, Aim 1—Improving Population Health-points to a whole new way of leading for behavioral healthcare.

- Your challenge is to **plot key strategies** that will help all of us become successful in this endeavor.
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