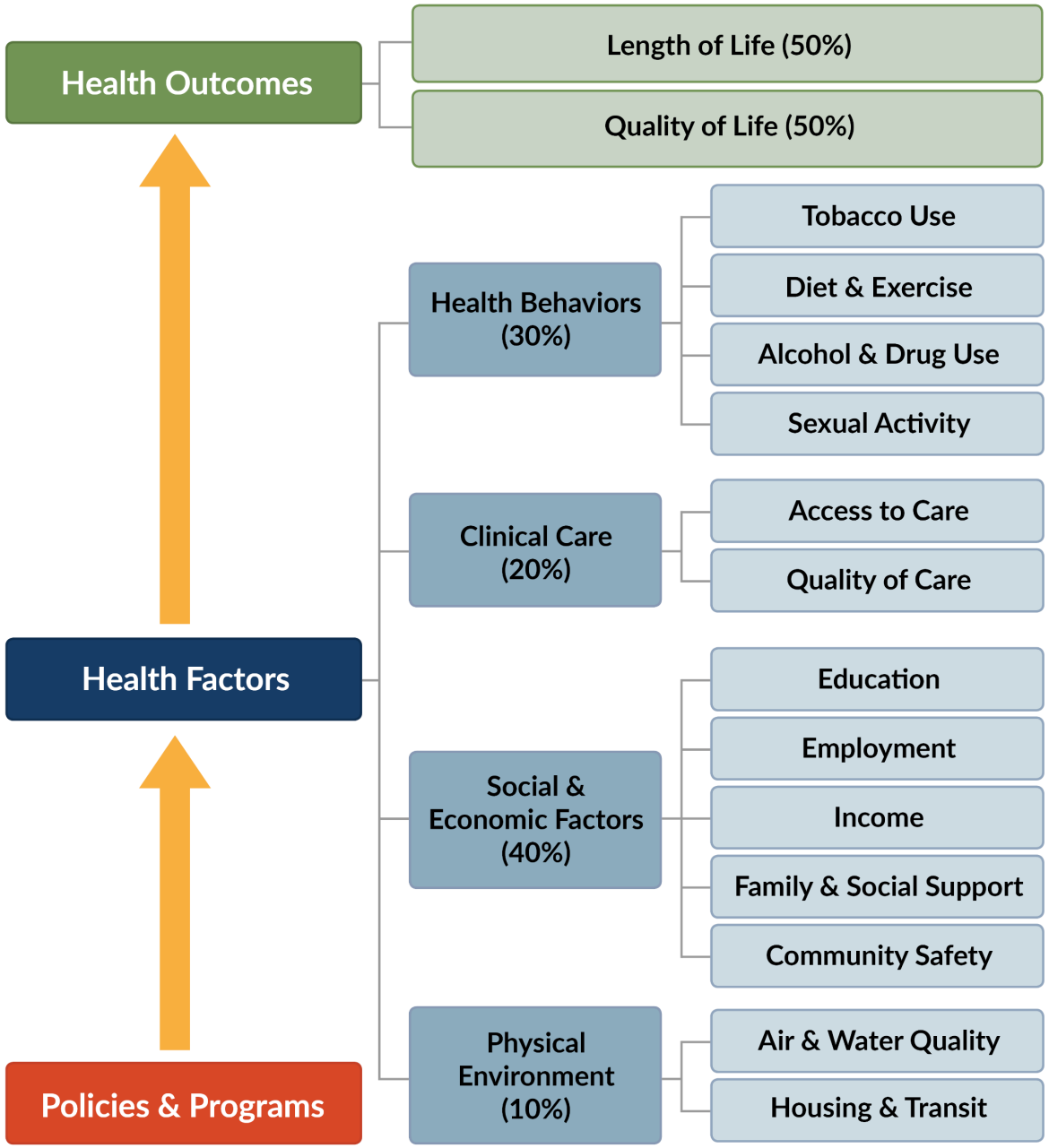
Background Slides
(for the 11am session on the 2012 and 2013 reports)

Shifting the Nation's Health Investments to Support Longer, Healthier Lives for All: A Symposium

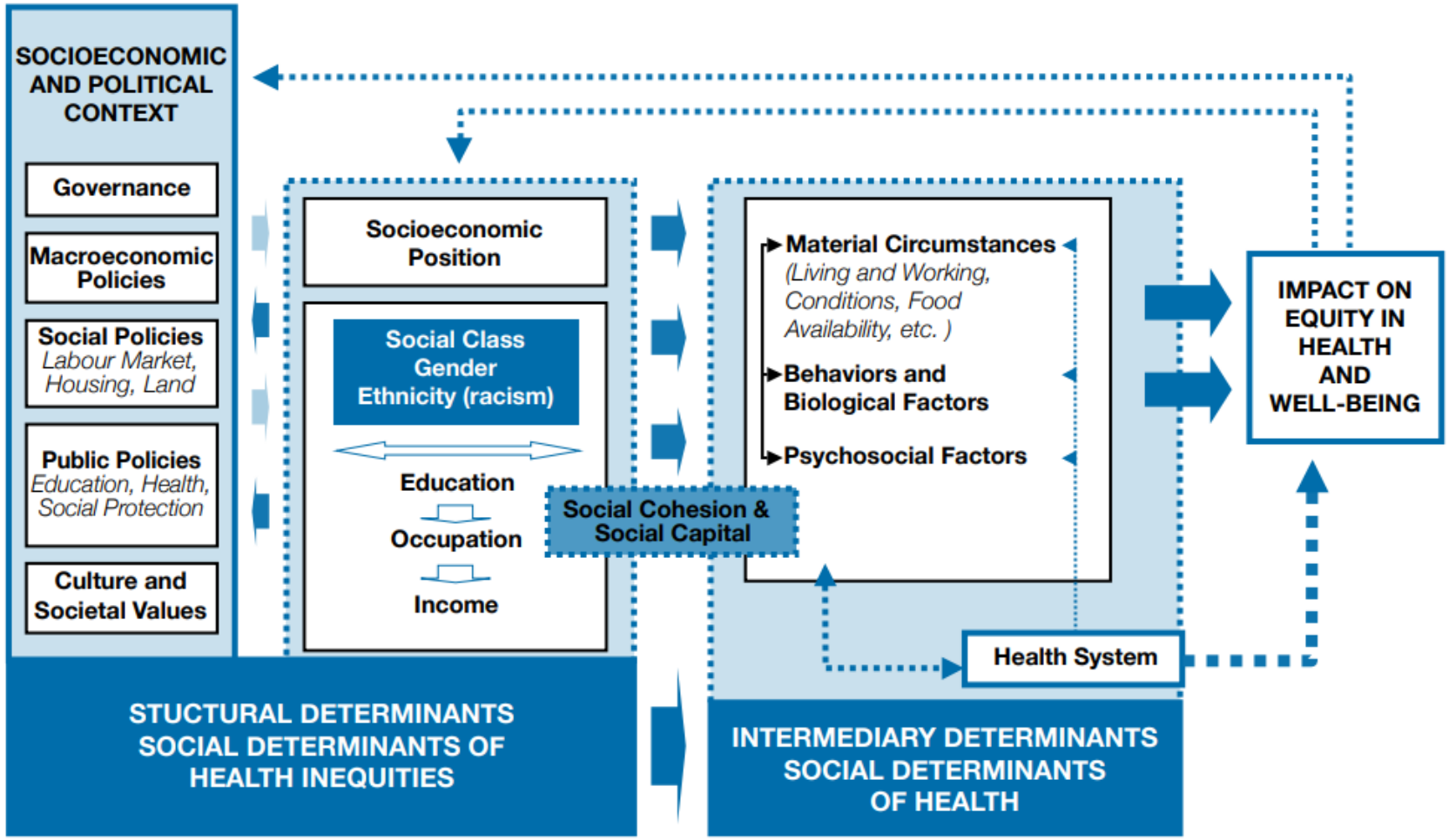


County Health Rankings model © 2014 UWPHI

Source:
County Health Rankings & Roadmaps
CHRRmodel.png (3900×4350) (countyhealthrankings.org)

Source:
WHO
[A Conceptual Framework for Action on the Social Determinants of Health (who.int)]
P. 6

Figure A. Final form of the CSDH conceptual framework



Measures of health, health spending, and social spending

Relevant to Marthe Gold remarks

Cantril's Self Anchoring Striving Scale

Please imagine a ladder with steps numbered from zero at the bottom to ten at the top.

Suppose we that the top of the ladder represents the best possible life for you and the bottom of the ladder represents the worst possible life for you.

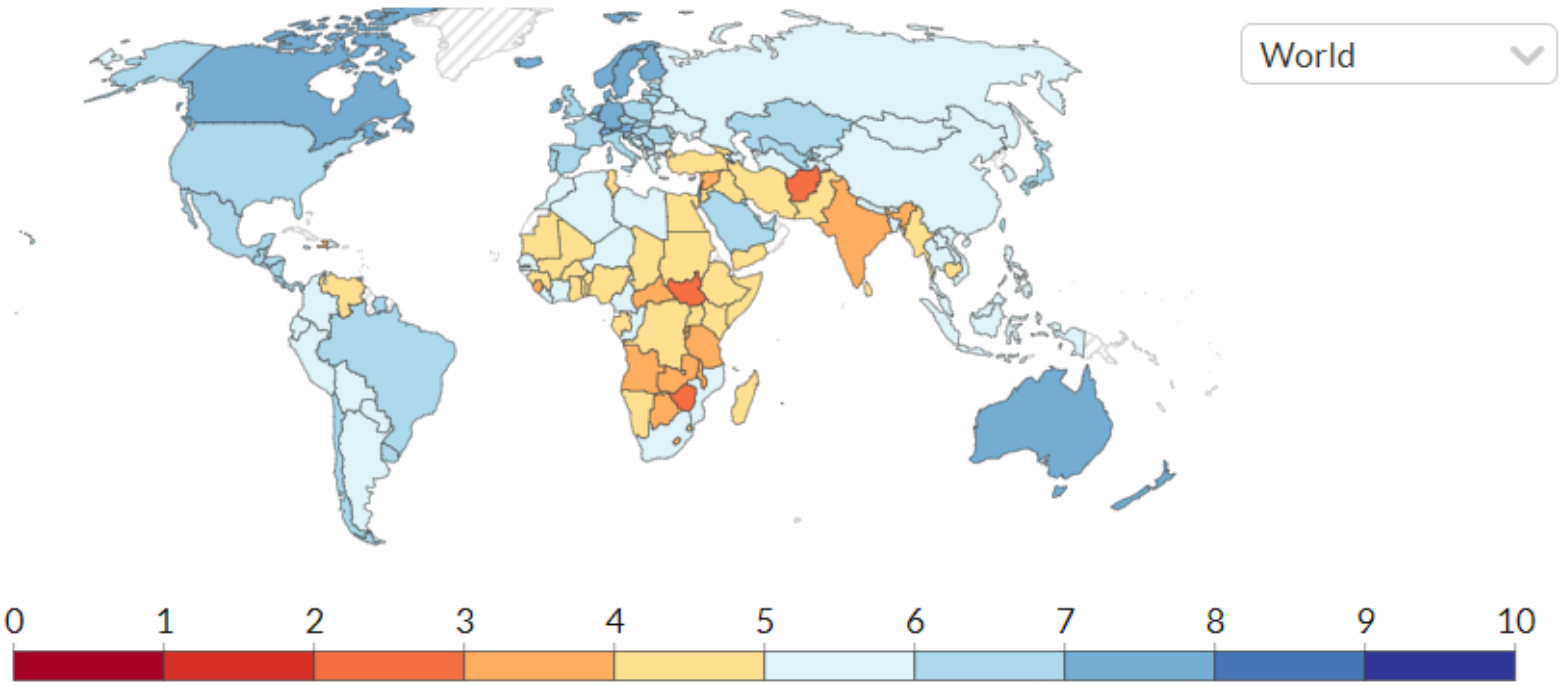
On which step of the ladder do you feel you personally stand at the present time?

- Thriving: 7-10
- Struggling: 4-6
- Suffering: 1-3

Self-reported life satisfaction, 2020

"Please imagine a ladder, with steps numbered from 0 at the bottom to 10 at the top. The top of the ladder represents the best possible life for you and the bottom of the ladder represents the worst possible life for you. On which step of the ladder would you say you personally feel you stand at this time?"

Our World in Data



Source: World Happiness Report (2022) OurWorldInData.org/happiness-and-life-satisfaction/ • CC BY
Note: The value shown in a given year is the average of that year, the previous year and the following year.

2003 2020

Source: https://ourworldindata.org/grapher/happiness-cantril-ladder

World Happiness Report 2022

https://worldhappiness.report/

Happiness, Benevolence and Trust During COVID-19 and Beyond. Helliwell JF, Wang S, Huang H, Norton M.

happiness-report.s3.amazonaws.com

Data & measures

Source: For the Public's Health: The Role of Measurement in Action and Accountability

Recommendation 2: The committee recommends that DHHS support and implement the following to integrate, align and standardized health data and health-outcome measurement at all geographic levels:

a. A core, standardized set of indicators that can be used to assess the health of communities
b. A core, standardized set of health-outcome indicators for national, state and local use
c. A summary measure of population health that can be used to estimate and track health-adjusted life expectancy for the United States.

Recommendation 3: The committee recommends that DHHS produce an annual report to inform policy-makers, all health-system sectors, and the public about important trends and disparities in social and environmental determinants that affect health

Call to set 2030 targets

Source: Institute of Medicine. 2012. *For the Public's Health: Investing in a Healthier Future.* Washington, DC: National Academies Press.

Recommendation 1: The Secretary of the Department of Health and Human Services should adopt an interim explicit life expectancy target, establish data systems for a permanent health-adjusted life expectancy target, and establish a specific per capita health expenditure target to be achieved by 2030. Reaching these targets should engage all health system stake holders in actions intended to achieve parity with averages among comparable nations on health life expectancy and per capita health expenditures.

Social Spending

- Slide: Chart entitled Social Spending and Needs in the US and 27 Comparable High-Income Countries
- from Social Spending to Improve Population Health – Does the US Spend as Wisely as Other Countries: Tikkanen RS and Eric C Schneider. N Engl J med 2020; 382:885-887

Social Spending and Needs: US and 27 Comparable High-Income Countries

Source:
Tikkanen RS, Schneider EC. Social Spending to Improve Population Health - Does the United States Spend as Wisely as Other Countries? N Engl J Med. 2020 Mar 5;382(10):885-887. doi: 10.1056/NEJMp1916585. PMID: 32130810.

Social Spending and Needs in the United States and 27 Comparable High-Income Countries*

Spending Category	2015 Average Spending Per Capita	
	United States	Comparable Countries
	$	*$ (95% CI)*
Total social spending (excluding health), including cash and in-kind benefits	9169	8402 (7084–9720)
Old age: Pensions, early retirement pensions, home help, and residential services for the elderly	6522	4268 (3676–4860)
Survivors: Pensions and funeral expenses	370	474 (316–632)
Incapacity-related: Care services, disability benefits including those from occupational injury or accident legislation, employee sickness payments, rehabilitation services	1003	1346 (1012–1681)
Family: Child allowances and credits, maternity and parental leave, early childhood education, single-parent payments	360	1107 (857–1357)
Active labor-market: Employment services, training, employment incentives, integration of the disabled, direct job creation, start-up incentives	59	264 (178–350)
Unemployment: Compensation and severance pay, early retirement for labor-market reasons	111	428 (282–573)
Housing: Housing assistance, allowances, and rent subsidies	146	163 (104–222)
Other: Various benefits to low-income households or other social services. For the United States, includes Supplemental Nutrition Assistance Program and refundable part of Earned Income Tax Credit	447	367 (249–486)

* The comparable countries are 27 OECD countries that had a GDP per capita equivalent to that of EU15 countries (≥$17,156) in 2015 (the latest year for which social spending data were available from the OECD for both public and private spending): Australia, Austria, Belgium, Canada, Czech Republic, Denmark, Estonia, Finland, France, Germany, Greece, Iceland, Ireland, Israel, Italy, Japan, Korea, Luxembourg, the Netherlands, New Zealand, Norway, Portugal, Slovenia, Spain, Sweden, Switzerland, and the United Kingdom. "The elderly" is defined as people retired from the labor market after reaching the "standard" pensionable age in a given country, as well as early-retirement pension recipients retiring before the standard pensionable age. CI denotes confidence interval. Social spending data reflect 2015 data, extracted from the OECD's 2019 Social Spending database.

Relationship between health spending and social spending in high-income countries

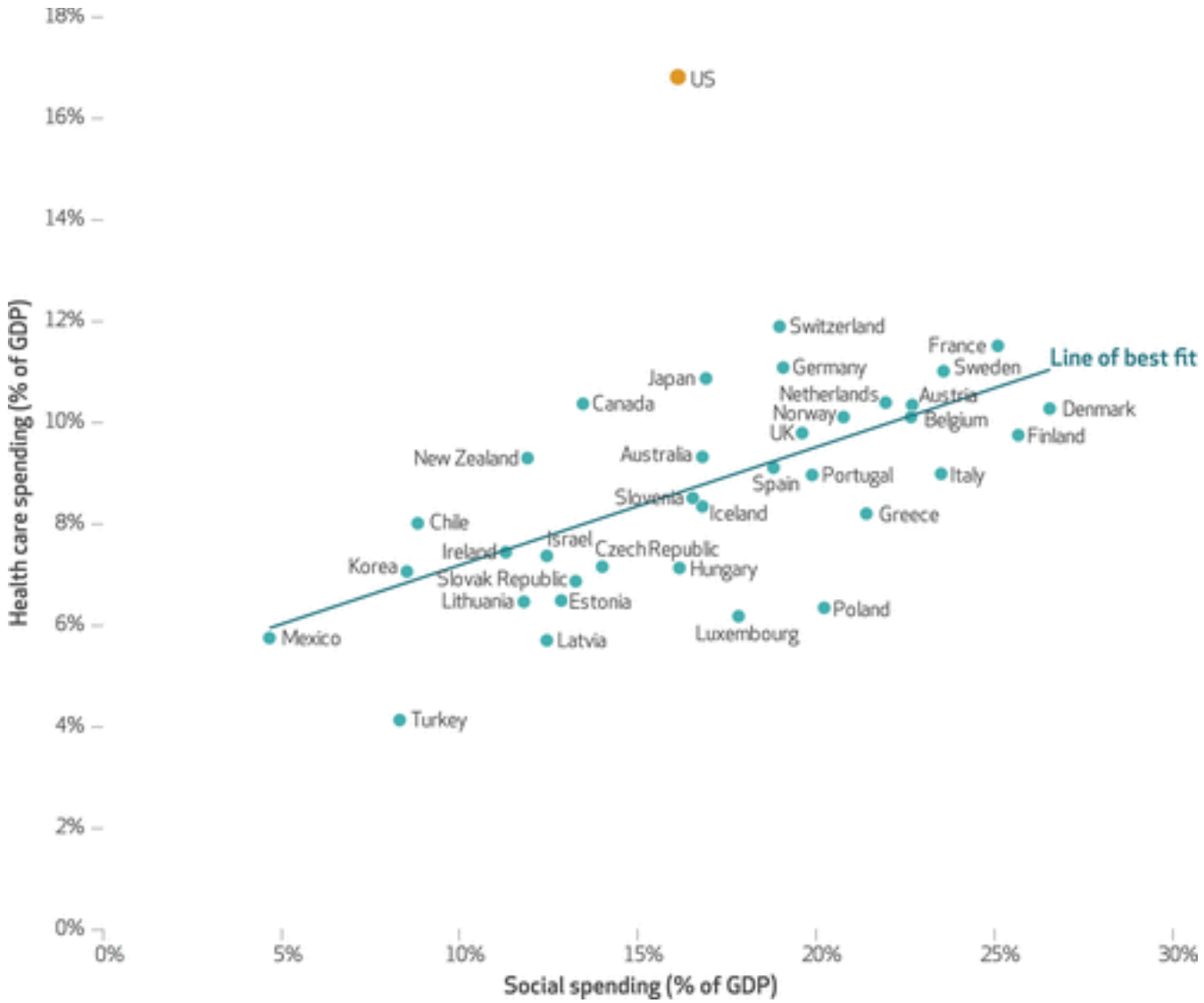
Source:

The Relationship Between Health Spending And Social Spending In High-Income Countries: How Does The US Compare?

Irene Papanicolas, Liana R. Woskie, Duncan Orlander, E. John Orav, and Ashish K. Jha

Health Affairs 2019 38:9, 1567-1575

https://www.healthaffairs.org/doi/full/10.1377/hlthaff.2018.05187



Source:

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EXHIBIT 1

Sociodemographic characteristics for selected Organization for Economic Cooperation and Development (OECD) countries

	Life expectancy (years)	Population older than age 65 (%)	GDP per capita (US $PPP)	Poverty (%)	Unemployment (%)
Australia	82.5	14.9	47,351	13.9[a]	6.2
Canada	81.9	16.1	44,509	13.7[b]	7.0
Denmark	80.8	18.5	49,071	7.1	6.3
France	82.4	18.4	40,861	6.5	10.1
Germany	80.7	20.9	47,979	10.0	4.7
Japan	83.9	26.6	40,406	16.1[c]	3.5
Netherlands	81.6	17.8	50,302	5.8	6.9
Sweden	82.3	19.5	48,437	9.3	7.6
Switzerland	83.0	17.7	63,939	8.9	4.9
UK	81.0	17.7	42,055	9.7	5.7
US	78.7	14.9	56,701	17.0[b]	5.4
OECD mean	80.4	16.7	41,259	11.3	8.1

SOURCE Authors' analysis of data from the following items: (1) For life expectancy, OECD.Stat, health status data. (2) For elderly population, OECD.Stat, demographic references data. (3) For gross domestic product (GDP), OECD.Stat, quarterly national accounts data; and Eurostat. (4) For poverty, Luxembourg Income Study; OECD.Stat, income distribution and poverty data; and Eurostat. (5) For unemployment: OECD.Stat, key short-term economic indicators. **NOTES** The data are from 2015 except where otherwise indicated. PPP is purchasing power parity. [a]2014. [b]2013. [c]2012.

- Source:

The Relationship Between Health Spending And Social Spending In High-Income Countries: How Does The US Compare?

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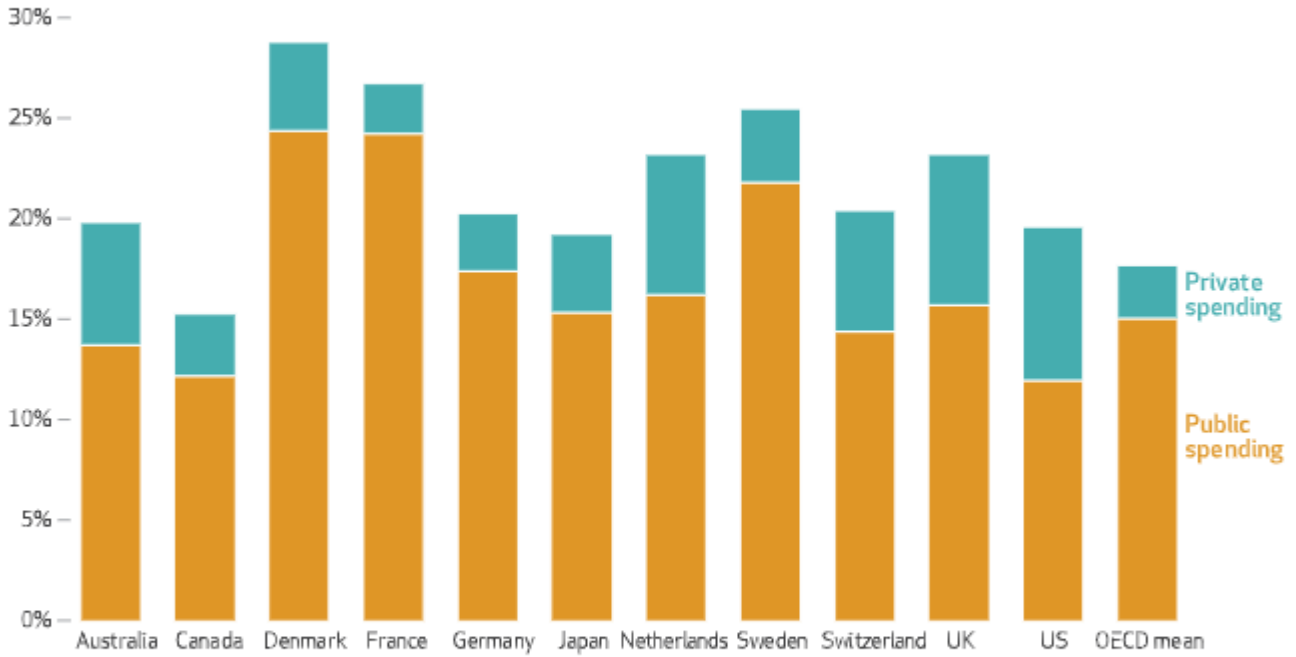
EXHIBIT 2

Percent of selected countries' gross domestic product (GDP) devoted to social spending, including education per capita, from private and public sources, 2015



SOURCE Authors' analysis of data on social spending from the Social Expenditure Database (SOCX) of the Organization for Economic Cooperation and Development (OECD) and of data on education spending from OECD.Stat, educational finance indicators data. **NOTES** Health-related social spending and spending on early childhood, or preschool, education are accounted for in social spending, and so excluded from education spending, to avoid double counting. Percentages might not sum to 100 because of rounding.

- Source:

The Relationship Between Health Spending And Social Spending In High-Income Countries: How Does The US Compare?

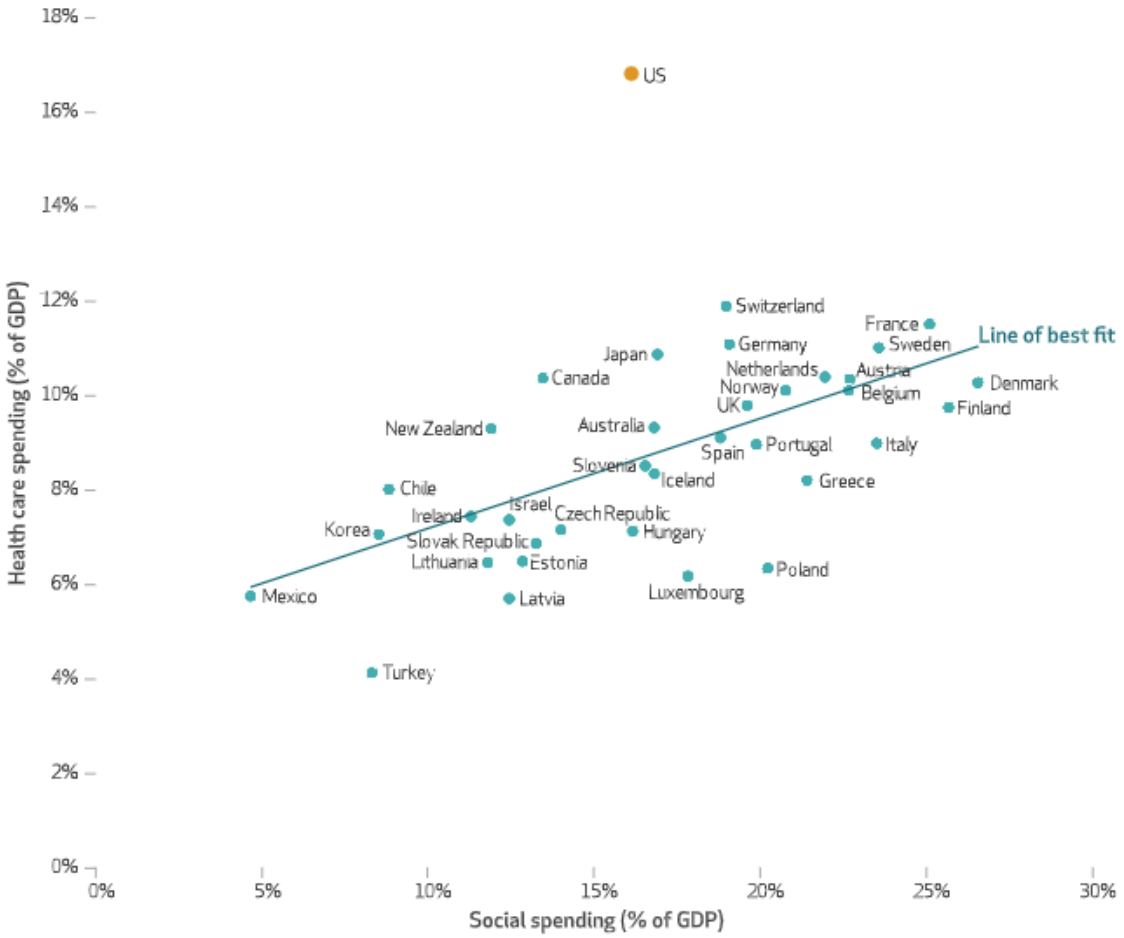
Irene Papanicolas, Liana R. Woskie, Duncan Orlander, E. John Orav, and Ashish K. Jha

Health Affairs 2019 38:9, 1567-1575

https://www.healthaffairs.org/doi/full/10.1377/hlthaff.2018.05187

EXHIBIT 3

Percent of gross domestic product (GDP) devoted to social spending and health care spending in the US and other Organization for Economic Cooperation and Development (OECD) countries



SOURCE Authors' analysis of data from the OECD's Social Expenditure Database (SOCX). **NOTES** Health-related social spending is excluded. Data are from 2015 for all countries apart from Poland. The line of best fit shows that countries that spend more on health tend to spend more on social spending (Pearson's $r = 0.54$; $p = 0.00$).

Healthy People 2030

Overarching Goals

Achieving these broad and ambitious goals requires setting, working toward, and achieving a wide variety of much more specific goals. Healthy People 2030's overarching goals are to:

- Attain healthy, thriving lives and well-being free of preventable disease, disability, injury, and premature death.
- Eliminate health disparities, achieve health equity, and attain health literacy to improve the health and well-being of all.
- Create social, physical, and economic environments that promote attaining the full potential for health and well-being for all.
- Promote healthy development, healthy behaviors, and well-being across all life stages.
- Engage leadership, key constituents, and the public across multiple sectors to take action and design policies that improve the health and well-being of all.

Healthy People 2030 Leading Health Indicators

Healthy People 2030 includes Leading Health Indicators that set targets for some broader measures of population health:

- Drug overdose deaths
- Exposure to unhealthy air
- Homicides
- Household food insecurity and hunger
- Persons with medical insurance
- Suicides
- 4th grade students reading skills
- Employment among the working-age population
- Infant and maternal mortality

NASEM report on HP2030 Leading Health Indicators

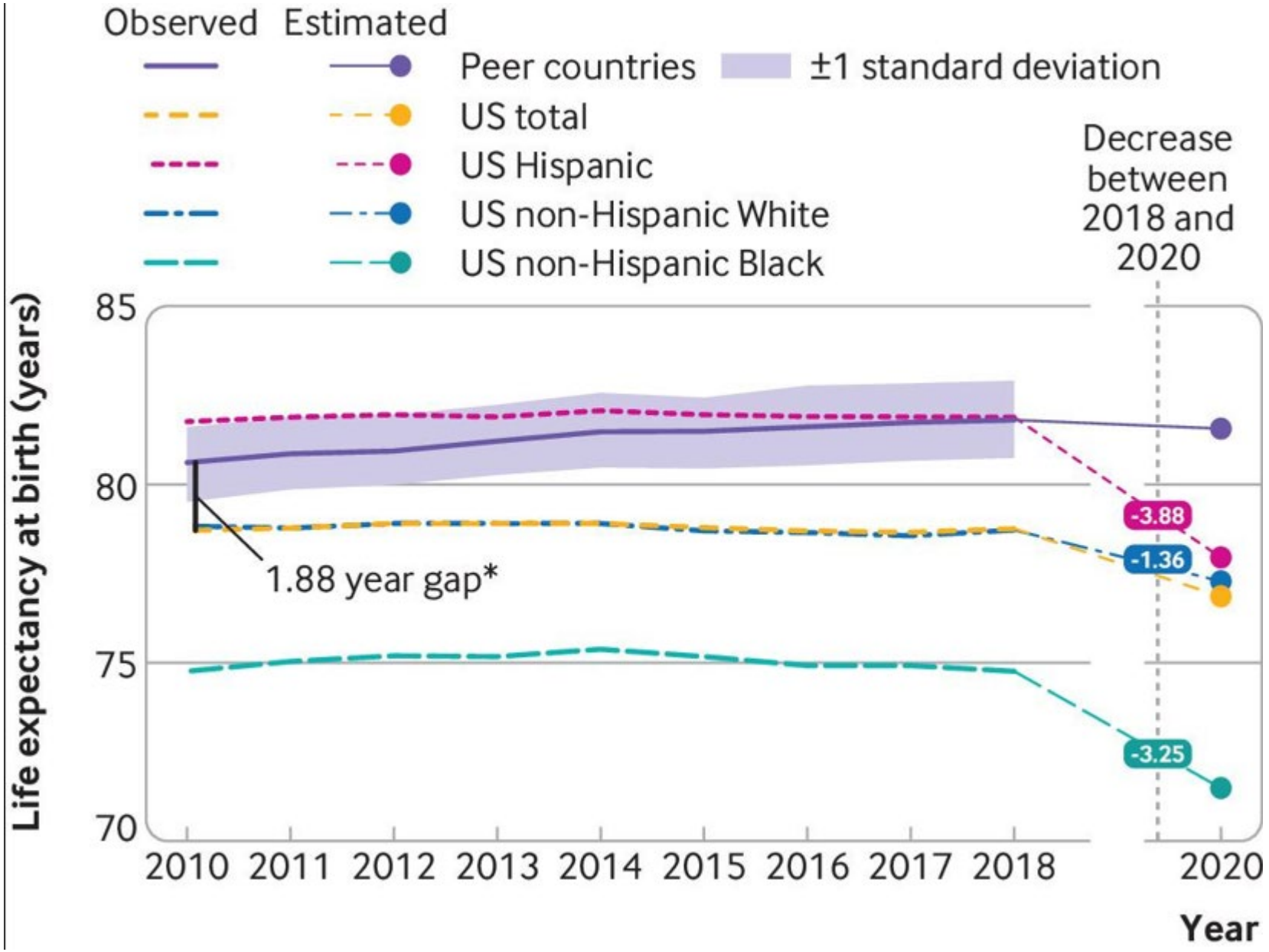
(Recommended in 2020 report)

- Life Expectancy
- Well-Being
- Adverse Childhood Experiences
- Firearm-related mortality
- Avoidable hospitalizations
- Affordable Housing
- Environmental Quality
- Civic Engagement
- Residential segregation
- Neighborhood Disinvestment
- Market basket of widely used pharmaceuticals
- Medical Administrative costs
- Public Health Spending

Slides relevant to Steve Woolf remarks – next page

Source:
Ingrahram, C. 2017, December 27. Americans are dying younger than people in other rich nations. Washington Post. https://www.washingtonpost.com/news/wonk/wp/2017/12/27/americans-are-dying-younger-than-people-in-other-rich-nations/

Source:
Woolf S H, Masters R K, Aron L Y. Effect of the covid-19 pandemic in 2020 on life expectancy across populations in the USA and other high income countries: simulations of provisional mortality data
BMJ 2021; 373 :n1343 doi:10.1136/bmj.n1343



Slides relevant to Atul Grover remarks

Comparison of international spending; Source: https://www.aamc.org/media/62046/download?attachment

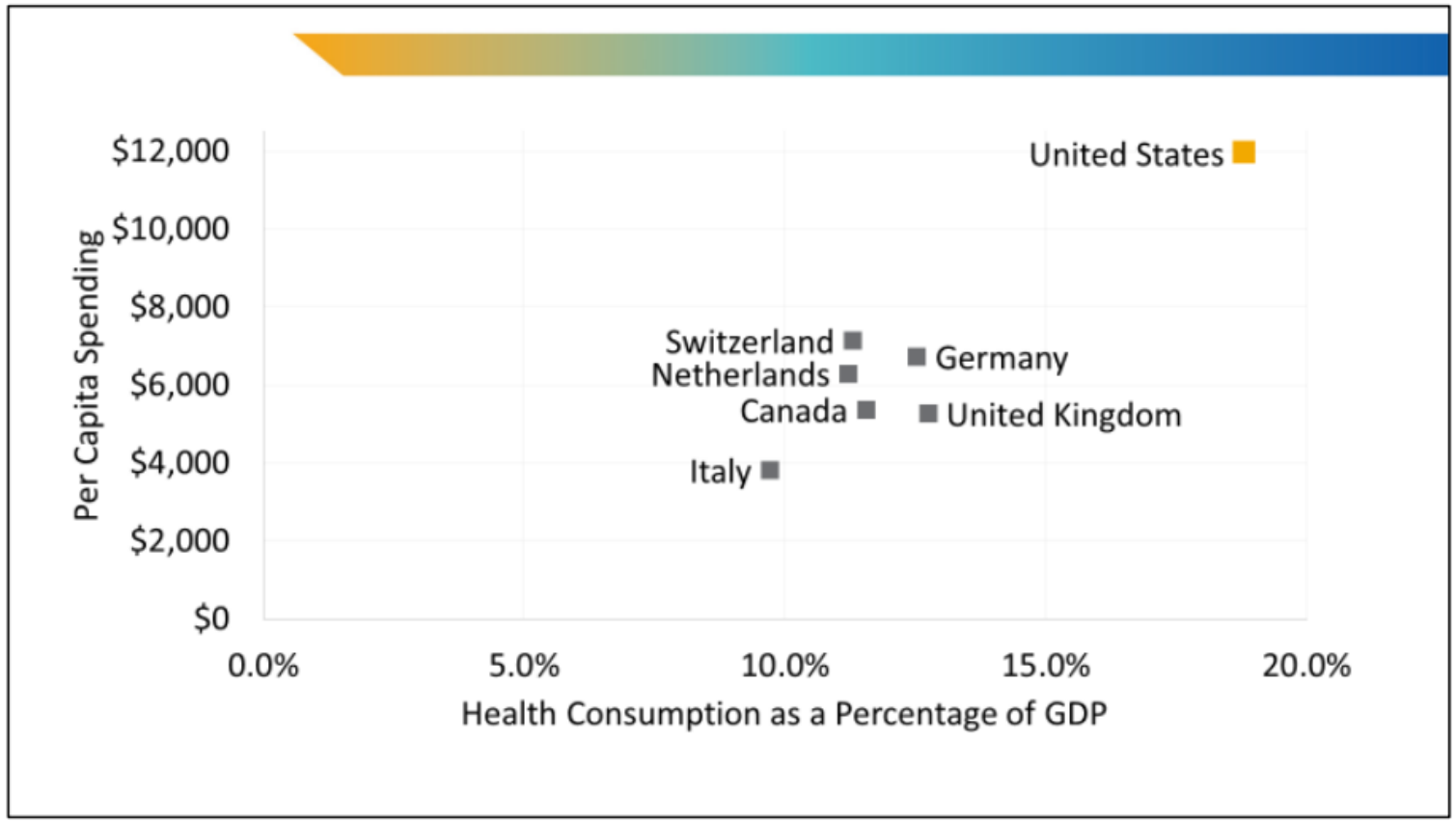


Figure 1. Health consumption spending per capita and as a percentage of gross domestic product (GDP), 2020.

Note: Data for Canada and Switzerland are as of 2019; data for others are as of 2020.

Sources: AAMC analysis of CMS National Health Expenditures data for the United States and OECD data for all other countries.

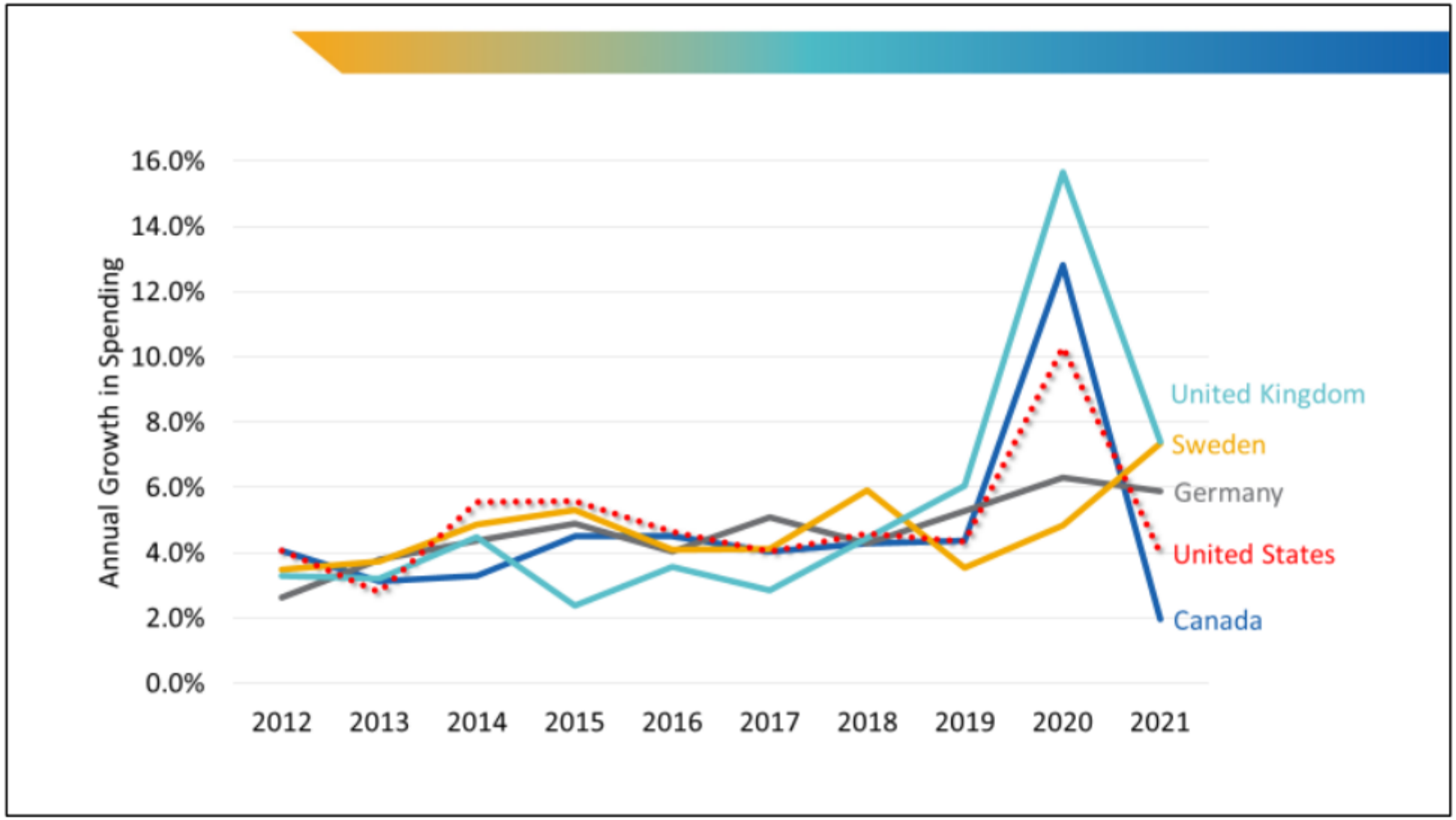


Figure 2. Annual percentage growth in health care spending by country.
Source: AAMC analysis of CMS National Health Expenditures data for the United States and OECD data for all other countries.

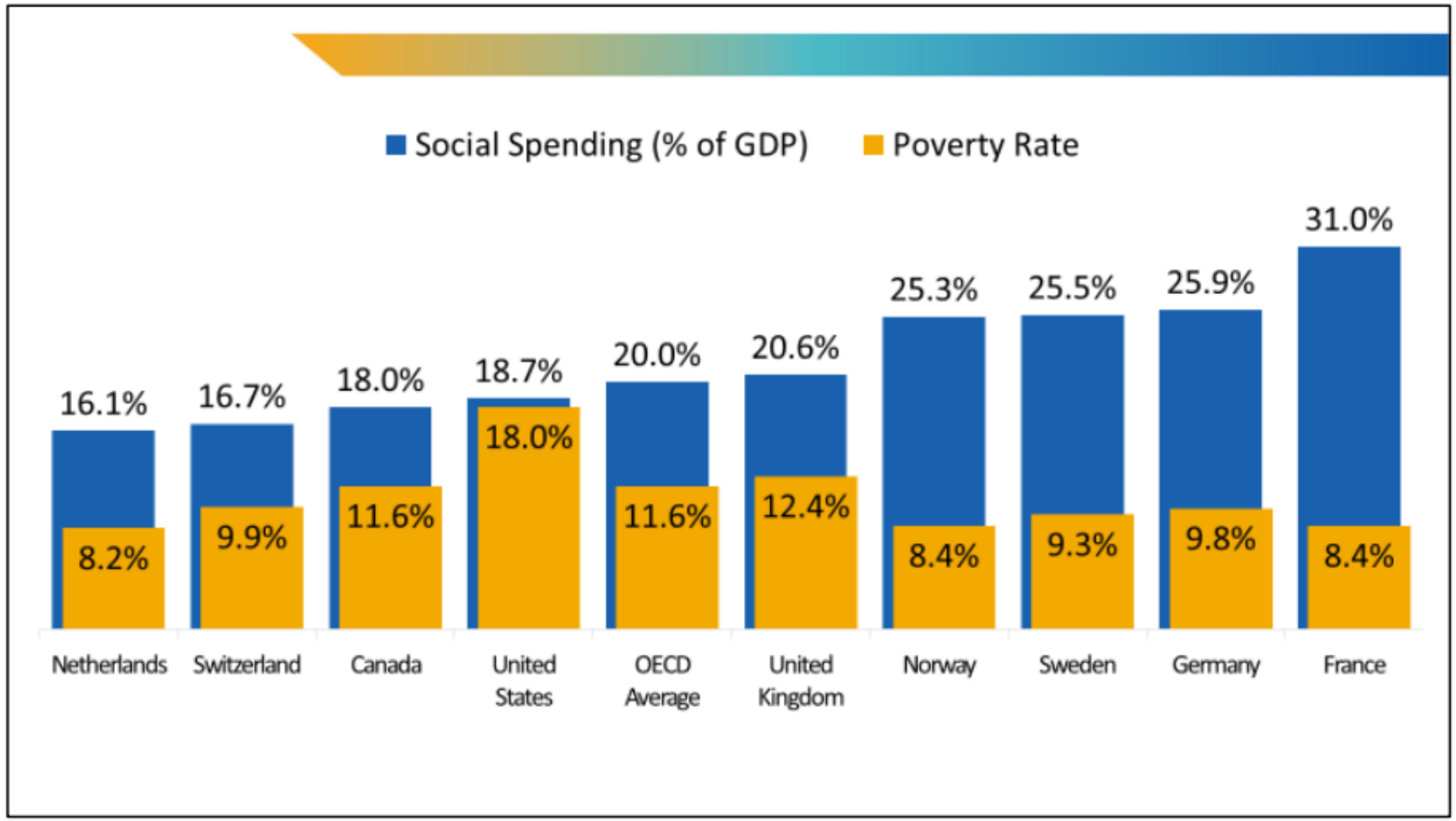
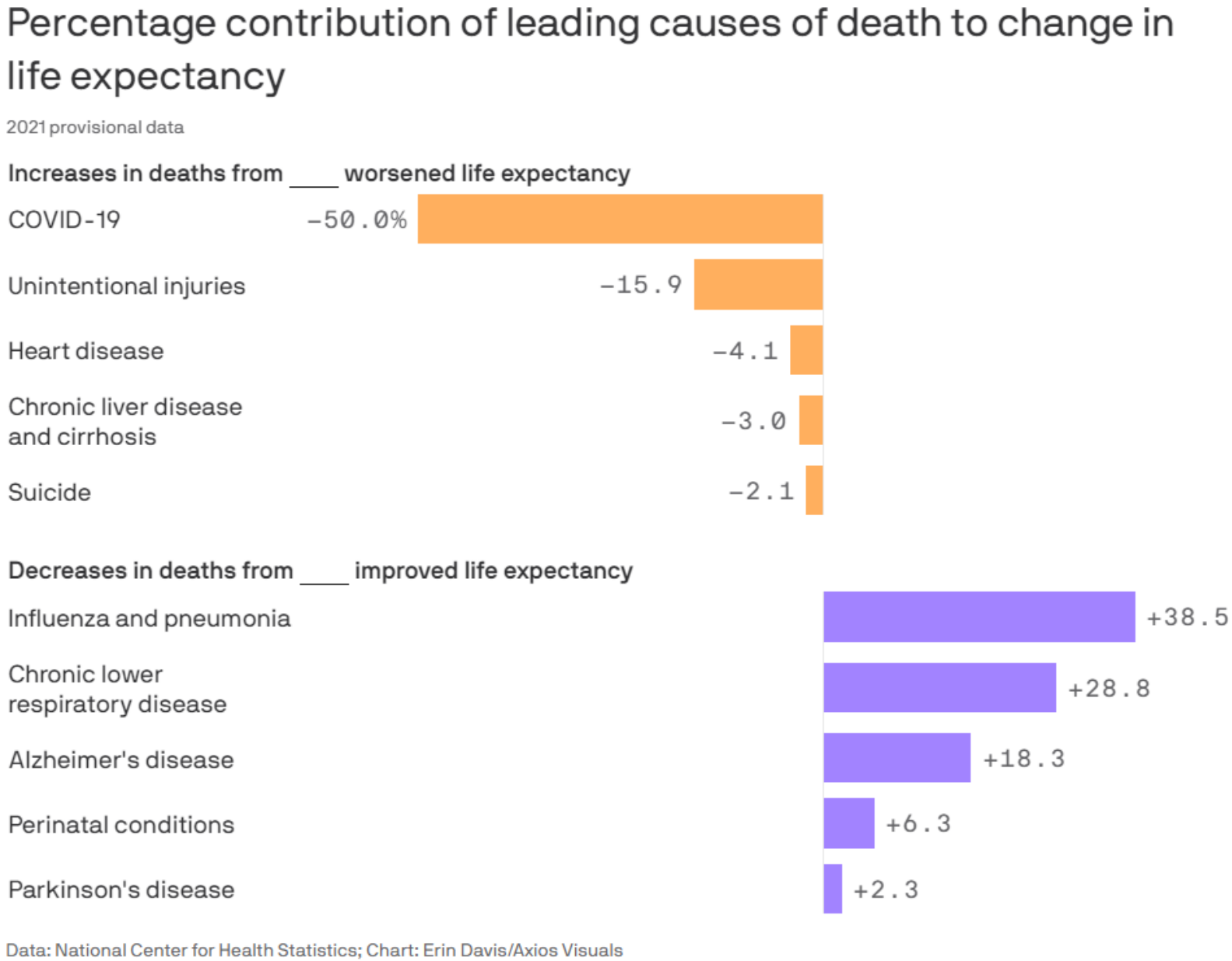


Figure 3. Public social spending as a percentage of GDP and poverty rate by country.

Note: Social spending values for Canada and Switzerland are from 2018; data for all other countries are from 2019. Poverty rate for Germany is from 2018; data for all other countries are from 2019. OECD average calculated with latest available values for OECD countries.

Source: OECD. Social spending (indicator). doi:10.1787/7497563b-en. Poverty rate (indicator). doi:10.1787/0fe1315d-en. Accessed March 25, 2022.

US life expectancy: deaths of despair, not failures of clinical care

Source: https://www.axios.com/2022/08/31/covid-us-life-expectancy