



Health Policy Snapshot

Public Health and Prevention

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ISSUE BRIEF

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How does where we live, work, learn and play affect our health?

Takeaways:

- Despite spending \$2.5 trillion annually on health care, Americans aren't as healthy as they should be.
- Health disparities caused by inequalities in education, employment, socioeconomic status, housing, community resources and transportation pose significant obstacles to improving the nation's overall health.
- Targeted investments in our communities can help overcome these obstacles so that more Americans can lead healthy and productive lives.

Overview

Our health is largely influenced by the choices we make for ourselves and our families. But the conditions in the communities where Americans live, learn, work and play also play an important role in people's ability to make those healthy choices. Research shows that communities with smoke-free air laws, access to healthy foods, quality affordable housing, good schools and safe places to play are healthier than those that don't. In fact, the economic, social and physical environments that surround us can have a much greater impact on our health than how often we go to the doctor's office.

AMERICA'S HEALTH POTENTIAL

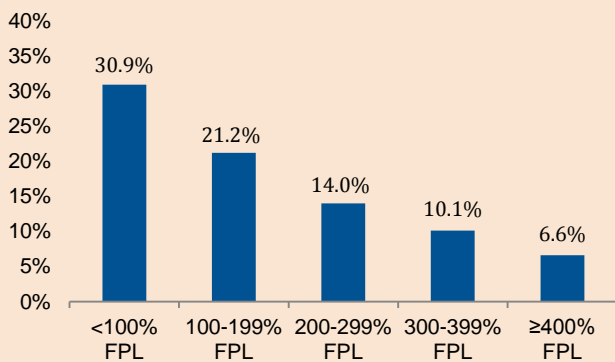
This country spends more on health care than any other nation, but ranks poorly against other industrialized countries on critical health measures. In 2009, the United States spent \$2.5 trillion on health care—more than 17 percent of its gross domestic product.¹ Still, the nation lags behind other countries such basic indicators of health as infant mortality and life expectancy. The United States spends more than twice as much per person on health as Japan, but the average American's life expectancy at birth is four years shorter.²

This disparity is due in part to more Americans having preventable chronic diseases like diabetes and heart disease, which raise health care costs and impede the nation's economic productivity. By one estimate, if all Americans who do not have a college degree had the same life expectancy and health status as college graduates, the economic benefit would amount to more than \$1 trillion each year.²

SOCIAL DETERMINANTS OF HEALTH

Many factors that influence health are outside the traditional health care setting. Accumulating evidence shows that social factors such as education, child care, income, housing and neighborhood conditions – also called social determinants – influence health. Widespread disparities in these areas leave some populations more vulnerable to poor health. For example:

Percent of Adults, Ages ≥ 25 Years, with Poor or Fair Health by Family Income, Measured by Percent of Federal Poverty Level (FPL)



Source:

<http://www.commissiononhealth.org/PDF/ObstaclesToHealth-Report.pdf>

- People living in poor or undereducated regions of the country are more prone to illness.²
- Rates of chronic illness, including diabetes and heart disease, increase with poverty.²
- African Americans and Hispanics are less likely to be vaccinated against influenza.³
- Obesity is most prevalent in the southern states, and among racial minorities and the poor.⁴

Disparities have an acute impact on children. Babies born to mothers who did not finish high school are nearly twice as likely to die before their first birthdays as babies born to college graduates.² The choices that a parent makes on a child's behalf—choices often influenced by a family's neighborhood or economic situation—will affect whether the child maintains a healthy lifestyle in adulthood.⁵

HELPING PEOPLE CHOOSE HEALTH

Social inequalities such as poverty are linked to unhealthy behaviors like smoking, poor diet and lack of exercise. But targeted investments in proven programs and policy changes can reduce these disparities and make it easier for people to make the choices that help them avoid getting sick in the first place. Thomas Frieden, head of the U.S. Centers for

Disease Control and Prevention, wants his agency to fund “interventions that change the context to make individuals’ default decisions healthy.”⁶

Evidence is mounting for the benefits of focusing on the multiple factors affecting health. The Shape-Up Somerville program in Massachusetts offered new options for physical activity and upped healthful food offerings in children's schools, homes and community areas. After one year, participating 1st- to 3rd-grade children had significantly decreased body mass indexes compared with children in similar communities elsewhere in the state.⁷ In 2002, New York City embarked on an ambitious effort to address behavioral causes of smoking. The city upped cigarette taxes, promoted smoke-free workplaces and restaurants, offered free nicotine replacement therapy and launched an aggressive anti-tobacco advertising campaign, resulting in its first drop in smoking prevalence in a decade. The declines were evident across all age and racial-ethnic groups, at every level of educational attainment, and among both U.S.-born and foreign-born residents in all five boroughs of the city.⁸

Making programs and policies like these available across the United States can enable all Americans, particularly those who face the greatest obstacles, to improve their health.

WANT TO KNOW MORE?

- [Commission to Build a Healthier America \(RWJF\)](#)
- [Healthy People 2020 Social Determinants Objective](#)

¹ https://www.cms.gov/NationalHealthExpendData/25_NHE_Fact_Sheet.asp#TopOfPage

² <http://www.commissiononhealth.org/PDF/ObstaclesToHealth-Report.pdf>

³ <http://www.cdc.gov/mmwr/pdf/other/su6001.pdf>

⁴ <http://www.rwjf.org/files/research/tfahfasinfat2011a.pdf>

⁵ http://www.commissiononhealth.org/PDF/819a3435-8bbb-4549-94db-7758248075cf/ChildrensHealth_Chartbook.pdf

⁶ <http://www.ncbi.nlm.nih.gov/pubmed/20167880>

⁷ http://www.cahpf.org/GoDocUserFiles/611.NYAM_Compendium.pdf

⁸ <http://www.ncbi.nlm.nih.gov/pubmed/15914827>