Joint Strategic Planning Discussion Panel 4
Health/Healthcare/Crime/Violence/Drugs/Nutrition

Family and Children First Council
and
United Way of the Greater Dayton Area

Tuesday, May 19, 2015

Sinclair Community College
Panelists:

Bryan Bucklew – Greater Dayton Area Hospital Association

Shallon Coleman – Abigail’s Journey

Jeff Cooper – Public Health Dayton & Montgomery County

Andrea Hoff – Alcohol, Drug Addiction and Mental Health Services Board of Montgomery County

Major Brian Johns – Dayton Police Department

Sheriff Phil Plummer – Montgomery County Sheriff’s Office

Sara Paton – Wright State University/Public Health Dayton & Montgomery County
Question 1

What Health/Healthcare/Crime/Violence/Drugs/Nutrition strategies have the potential to provide the greatest impact across all three focus areas (Education and Life Skills/Health and Safety/Income and Stability)?
THE SPECTRUM OF PREVENTION

Influencing Policy and Legislation
Changing Organizational Practices
Fostering Coalitions and Networks
Educating Providers
Promoting Community Education
Strengthening Individual Knowledge and Skills
Health Impact Pyramid

**Counseling and education**
- Dietary counseling
- Public education about drunk driving, physical activity, youth violence, etc.

**Clinical interventions**
- Treatment of hypertension and hyperlipidemia
- Screening for fall risk

**Long-lasting protective interventions**
- Immunizations
- Tobacco cessation services
- Dental sealants
- Grab bars and hand rails to prevent falls

**Changing the context to make individuals’ default decisions healthy**
- Clean water
- Flu vaccination
- Elimination of lead paint and asbestos exposure
- Smoke-free workplaces
- Impaired driving and helmet laws
- Built environment redesign to promote physical activity

**Socioeconomic factors**
- Poverty reduction
- Improved education
- Improved housing and sanitation

Risk and Protective Factors Exist in Multiple Contexts
(Social-Ecological Model)

**RISK:** genetic predisposition, exposure to substance prenatally

**PROTECTIVE:** positive self-image, self-control, social competence

**RISK:** parents who use or who have a mental illness, child abuse and maltreatment, inadequate supervision

**PROTECTIVE:** parental involvement

**RISK:** neighborhood poverty and violence

**PROTECTIVE:** availability of faith-based resources and after-school activities

**RISK:** norms and laws favorable to substance use, racism, lack of economic opportunity

**PROTECTIVE:** policies limiting availability of substances or anti-hate laws defending marginalized populations
Individual Factors are Often Associated with Multiple Problems
Question 1

What Health/Healthcare/Crime/Violence/Drugs/Nutrition strategies have the potential to provide the greatest impact across all three focus areas (Education and Life Skills/Health and Safety/Income and Stability)?
Social Determinants of Health

The complex, integrated, and overlapping social structures and economic systems that are responsible for most health inequities. These social structures and economic systems include the social environment, physical environment, health services, and structural and societal factors. Social determinants of health are shaped by the distribution of money, power, and resources throughout local communities, nations, and the world.
Addressing Social Determinants

When inequities are high and community assets are low, health outcomes are worst.

Substance Abuse  Smoking  HIV/AIDS  Infant Mortality  Malnutrition  Violence  Depression  Obesity  Heart Disease

When inequities are low and community assets are high, health outcomes are best.

HIV/AIDS  Infant Mortality  Heart Disease  Malnutrition

Stress  Depression  Substance Abuse  Smoking  Violence

Sense of Community  Social Networks  Social Support  Participation  Leadership  Political Influence  Organizational Networks

Quality Schools  Access to Healthy Foods  Access to Healthcare  Clean Environment  Transportation Resources

Adequate Income  Health Insurance  Quality Housing  Jobs

Adverse Living Conditions  Poverty  Segregation

Marketing for Tobacco and Alcohol  Occupational Hazards  Institutional Racism

Unemployment  Environmental Toxins  Discrimination

Fragmented Systems  Restricted Power  Disinvestment  Disconnected Members
Question 2
What are the most effective integrated prevention and treatment strategies for physical health, mental health, and substance use?

Panelists:
Bryan Bucklew – Greater Dayton Area Hospital Association
Shallon Coleman – Abigail’s Journey
Jeff Cooper – Public Health Dayton & Montgomery County
Andrea Hoff – Alcohol, Drug Addiction and Mental Health Services Board of Montgomery County
The PROBLEM

People with mental illness die earlier than the general population and have more co-occurring health conditions.

68% of adults with a mental illness have one or more chronic physical conditions.

more than 1 in 5 adults with mental illness have a co-occurring substance use disorder.
The solution lies in integrated care – the coordination of mental health, substance abuse, and primary care services. Integrated care produces the best outcomes and is the most effective approach to caring for people with complex healthcare needs.
The World Health Organization defines:

“Health as a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity.”

“There is no health without mental health.”
Screening
Brief Intervention
Referral to Treatment
Question 3
There are clearly disproportionate health outcomes in our community based on economic status or race. What are the most effective healthcare and community responses?

Panelists:
Jeff Cooper – Public Health Dayton & Montgomery County
Sara Paton – Wright State University/Public Health Dayton & Montgomery County
Bryan Bucklew – Greater Dayton Area Hospital Association
### Framework for Population Health Improvement

#### Social Inequities
- Class
- Race/ethnicity
- Immigration status
- Gender
- Sexual orientation

#### Institutional Power
- Corporations & businesses
- Government agencies
- Schools
- Laws & regulations
- Not-for-profit organizations

#### Living Conditions
- Physical environment
  - Land use
  - Transportation
  - Housing
  - Residential segregation
  - Exposure to toxins
- Social environment
  - Experience of class, racism, gender, immigration
  - Culture, incl. media
  - Violence
- Economic & Work Environment
  - Employment
  - Income
  - Retail businesses
  - Occupational hazards
- Service environment
  - Health care
  - Education
  - Social services

#### Risk Behaviors
- Smoking
- Poor nutrition
- Low physical activity
- Violence
- Alcohol & other drugs
- Sexual behavior

#### Disease & Injury
- Communicable disease
- Chronic disease
- Injury (intentional & unintentional)

#### Mortality
- Infant mortality
- Life expectancy
Alignment of Efforts and Resources

- Improved Health Outcomes
  - shared ownership
  - diverse community engagement
  - transparency
  - evidence-based best practices
  - shared metrics
  - continuous quality improvement
  - pooling and sharing of data
Life Course Perspective

Examples of community responses to disproportionate health outcomes

• Harlem’s Children’s Zone Model
  – A national model for breaking the cycle of poverty
  – Education + Family & Community + Health = Results

• Best Baby Zone
  – Zonal
  – Addresses four critical sectors – economics, education, health and community – in order to strengthen environments that support better and healthier outcomes
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Sara Paton – Wright State University/Public Health Dayton & Montgomery County
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Question 4
What are the most effective ways to integrate the criminal justice, mental health and substance use systems?

Panelists:
Shallon Coleman – Abigail’s Journey
Andrea Hoff – Alcohol, Drug Addiction and Mental Health Services Board of Montgomery County
Major Brian Johns – Dayton Police Department
Sheriff Phil Plummer – Montgomery County Sheriff’s Office
Question 5

What are the most effective community based drug prevention strategies?

Panelists:
Andrea Hoff – Alcohol, Drug Addiction and Mental Health Services Board of Montgomery County
Sheriff Phil Plummer – Montgomery County
Major Brian Johns – Dayton Police Department
Effective Community Based Prevention Strategies:
Create both individual and community level of change
PAX Classes typically show:
- 60-90 additional minutes of instruction
- 75% drop in disruptions
- 60% drop in discipline referrals
- 20-30% drop in identification for special ed.

By age 21, PAX students show:
- 50% drop in drug dependence
- 68% drop in tobacco use
- 35% drop in alcohol dependence
- 32% drop in criminal behavior
- 50% drop in suicide ideation
Question 5

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Andrea Hoff – Alcohol, Drug Addiction and Mental Health Services Board of Montgomery County
Sheriff Phil Plummer – Montgomery County
Major Brian Johns – Dayton Police Department
Question 6

If existing programs do not sufficiently address food access and nutrition in our community, what do we do about it?

Panelists:
Sara Paton – Wright State University/Public Health Dayton & Montgomery County
Food Insecurity
Montgomery County, OH

FOOD INSECURITY
A condition assessed in the Current Population Survey and represented in USDA food-security reports. It is the household-level economic and social condition of limited or uncertain access to adequate food.
Source: Feeding America ®
Food Deserts* by Census Tract and Available Food Sources
Montgomery County, 2014

* A food desert is defined as a low income census tract where a significant number of residents are more than 1 mile from the nearest supermarket.
Question 7

What is the rule or regulation you would eliminate today if you could and what simple change could it make? How would it impact any of our three focus areas (Education and Life Skills/Health and Safety/Income and Stability)?
Increase Ohio’s cigarette tax by $1.00 per pack

- 12% reduction in youth smoking rates, preventing 65,000 youths from becoming smokers
- An estimated 73,000 Ohio adults would quit smoking
- Prevent over 40,000 smoking-caused deaths
- Save Ohio $2.67 billion in future health care costs

Source: Campaign for Tobacco-Free Kids and the American Cancer Society
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What is the rule or regulation you would eliminate today if you could and what simple change could it make? How would it impact any of our three focus areas (Education and Life Skills/Health and Safety/Income and Stability)?
Where the Funding goes.....

Causes:
- Behavior patterns: 40%
- Environmental exposure: 5%
- Social circumstances: 15%
- Shortfalls in medical care: 10%
- Genetics: 30%

Expenditures:
- Prevention and public health: 5%
- Medical care: 95%
Ohio Health Spending

All health agency spending, by prevention category (State Fiscal Year 2013, $18.7 billion)

- Treatment/rehabilitation/other: 94% ($17.6 billion)
- Primary prevention: 2%
- Secondary prevention: 4%
- Total spending on prevention: 6% ($1.1 billion)

Sources: Ohio Department of Aging, Ohio Department of Developmental Disabilities, Ohio Department of Health, Ohio Department of Medicaid, Ohio Department of Mental Health and Addiction Services
Question 7

What is the rule or regulation you would eliminate today if you could and what simple change could it make? How would it impact any of our three focus areas (Education and Life Skills/Health and Safety/Income and Stability)?
Question 8

In summary, based on everything you’ve heard today, in addition to the need for more funding, what would you stop, change, or add to what we’re doing in the community today?
Age-adjusted death rate of the top 10 causes of death
Montgomery County, 2011-2012

Cause of Death: Cancer, Heart Disease, Accidents, CLRD*, Alzheimer's Disease, Stroke, Diabetes, Influenza/Pneumonia, Nephritis/Nephrotic Syndrome, Septicemia

Rate per 100,000: 188.8, 174.1, 61.1, 51.8, 38.3, 40.8, 32.4, 12.5, 12.3, 12.0

* Chronic Lower Respiratory Disease
Determinants of Health and Their Contribution to Premature Mortality

- Genetics: 30%
- Medical: 10%
- Social: 15%
- Environment: 5%
- Public Health: 60%
- Behavior: 40%
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In summary, based on everything you’ve heard today, in addition to the need for more funding, what would you stop, change, or add to what we’re doing in the community today?
Remaining Panel Discussion Schedule:

May 21  3:00 – 5:30 pm at Nat’l. Composite Ctr. Auditorium  Education/Employment/Jobs/Wages
Thank you for your participation!

The videotaped Discussion Panel sessions will be available at www.mcohoio.org/services/hspd after June 1, 2015.