Critical Issues and Trends

Health Care, Not Sick Care

Sen. Tom Harkin

INTRODUCTION

For more than a decade, I have spoken out about the need to fundamentally reorient our approach to health care in America—to reorient it toward prevention, wellness, and self care.

Few would argue with the statement that if you get sick, the best place in the world to get the care you need is here in America. We have the best trained, highest-skilled health professionals in the world. We have cutting-edge, state-of-the-art equipment and technology. We have world-class health care facilities and research institutions.

But when it comes to helping people stay healthy and stay out of the hospital, we fall woefully short. In the U.S., we spend approximately $1.8 trillion a year on health care. Fully 75% of that total is accounted for by chronic diseases—things like heart disease, cancer, and diabetes—all of which, in large measure, are preventable. Meanwhile, only 2% of all health care spending is on prevention. What is wrong with this picture?

In the United States, we fail to make an up-front investment in prevention. So we end up spending hundreds of billions on hospitalization, treatment, and disability. This is foolish—and, clearly, it is unsustainable. Today, we do not have a health care system in America, we have a “sick care” system. And it is costing us dearly both in terms of health care costs and premature deaths.

Consider the cost of major chronic diseases—diseases that are, in large measure, preventable. The annual cost of obesity is $117 billion; cardiovascular disease, $352 billion; diabetes, $132 billion; smoking, $75 billion; mental illness, $150 billion (indeed, major depression is the leading cause of disability in the United States).

Consider the nation’s growing obesity epidemic. In 1990, not a single state had an obesity rate higher than 15%, and most states hovered somewhere between 10% and 14%.

But, by 2002, the vast majority of states had obesity rates exceeding 20%, and several states had rates exceeding 25%. Today, almost two out of three Americans are either overweight or obese.

The Centers for Disease Control and Prevention recently warned that poor nutrition and physical inactivity could soon overtake smoking as the number one cause of death in the United States. Make no mistake: this is a major public health crisis.

Mental health is another enormous challenge that we are grossly neglecting. Mental health and chronic disease are intertwined. They can trigger one another. It is about time we stop separating the mind and body when discussing health. Prevention and mental health promotion programs should be integrated into our schools, workplaces, and communities along with physical health screenings and education. Surely, at the outset of the 21st century, it is time to move beyond the lingering shame and stigma that often attend mental health.

Fully 70% of all deaths in the United States are linked to chronic conditions that are often caused by poor nutrition, physical inactivity, tobacco use, and untreated mental illness. This is unacceptable.

After many months of meetings and discussions with experts across the nation, including the Health Promotion Advocates, I recently introduced comprehensive legislation designed to transform America’s “sick care” system into a true health care system—one that emphasizes prevention and health promotion.

I am calling this bill the HeLP America Act, with HeLP as an acronym for Healthy Lifestyles and Prevention. I introduced this legislation in the U.S. Senate on June 22 and the bill number is S2558. The aim is to give individuals and communities the information and tools they need to take charge of their own health. If we are serious about getting control of health care costs and health insurance premiums, then we must give people access to preventive care. And we must give people the tools they need to stay healthy and stay out of the hospital.

This will take a sustained commitment from government, schools, communities, employers, health officials, and the tobacco and food industries. But a sustained effort can have a huge payoff—for individuals and families, for employers, for society, for government budgets, and for the economy at large.
The HeLP America Act is comprehensive legislation. It is a very complex, multifaceted bill. Let me review the principal components:

The first component addresses Healthy Kids and Schools. Prevention and the development of healthy habits and lifestyles must begin in the early years, with our children. Unfortunately, today, we are heading in exactly the wrong direction. More and more children all across America are suffering from poor nutrition, physical inactivity, mental health issues, and tobacco use.

For example, just since the 1980s, the rates of obesity have doubled in children and tripled in teens. Even more alarming is the fact that a growing number of children are experiencing what used to be primarily thought of as adult health problems. Almost two-thirds of overweight children have at least one cardiovascular disease risk factor. Recent studies of children have shown that increasing weight, greater salt consumption from fast food, and poor eating habits have contributed to the rise in blood pressure, higher cholesterol levels, and a shockingly rapid increase in adult-onset diabetes.

The HeLP America Act will more than double funding for the successful PEP program, which promotes health and physical education programs in our public schools. I find it disturbing that more than one third of youngsters in grades nine through 12 do not regularly engage in adequate physical activity. This is a shame, because studies show that regular physical activity boosts self esteem and improves health.

The HeLP America Act will also expand the Harkin Fruit and Vegetable Program to provide more free fresh fruits and vegetables in more public schools. The bill will also offer school incentive grants to create healthier environments, including goals for nutrition education and physical activity.

The HeLP America Act would also establish a grant program to provide mental health screenings and prevention programs in schools, along with training for school staff to help them recognize children exhibiting early warning signs. It will improve access to mental health services for students and their families.

The second broad component of the HeLP America Act addresses Healthy Communities and Workplaces. Studies show that, on average, every $1.00 that is invested in workplace wellness returns $3.90 in savings on health costs, absences from work, and so on. For example, the bill aims to create a healthier workforce by providing tax credits to businesses that offer comprehensive wellness programs. The bill would also address the discrepancy in the tax treatment a business faces regarding off-site fitness facilities and would allow employers to deduct the cost.

My bill also creates a grant program to encourage communities to develop localized plans to promote healthier lifestyles. And it provides new incentives for the construction of bike paths and sidewalks to encourage more physical activity, especially walking. It is shocking that, today, roughly one-quarter of walking trips take place on roads without sidewalks or shoulders. And bike lanes are available for only about five percent of bike trips.

Another component will give special attention to health promotion programs and activities for people with disabilities. The Centers for Disease Control has funded a program called Living Well with a Disability, which has actually decreased secondary conditions and led to improved health for participants. The program is an eight-session workshop that teaches individuals with disabilities how to change their nutrition and level of physical activity. The program not only increases healthy activities for people with disabilities, but has also led to a 10% decline in the cost for medical services, particularly emergency-room care and hospital stays.

The third component of the HeLP America Act addresses Responsible Marketing and Consumer Awareness. Having accurate, readily available information about the nutritional value of the foods we eat is the first step toward improving overall nutrition. Unfortunately, because of all the gimmicks and hype that marketers use to entice us to buy their products, determining the nutritional value of foods can be problematic—especially in restaurants.

The marketing of junk food—especially to kids—is out of control. It was estimated that junk food marketers, alone, spent more than $10 billion in 2002 promoting their fare. And, needless to say, they are not advertising broccoli and apples. The majority of these ads are for candy and fast food—foods that are high in sugar, salt, fat, and calories.

Children—especially those under eight years of age—do not always have the ability to distinguish fact from fiction. The number of TV ads that kids see over the course of their childhood has doubled from 20,000 to 40,000. The sad thing is that, way back in the 1970s, the Federal Trade Commission recommended banning TV advertising to kids. And what was Congress’s response? We made it even harder for the FTC to regulate advertising for children than it is to regulate advertising for adults. My bill will restore the authority of the FTC to regulate marketing to kids, and it encourages the FTC to do so.

The fourth component of the HeLP America Act addresses Reimbursements for Prevention Services. Right now, our medical system is set up to pay doctors to perform a $20,000 gastric bypass instead of offering advice on how to avoid such risky procedures. The bill will reimburse and reward physicians for practicing prevention and screenings. It will also expand Medicare coverage to pay for counseling for nutrition and physical activity, mental health screenings, and smoking-cessation programs.

Finally, the HeLP America Act will be paid for by creating a new National Health Promotion Trust Fund paid for through penalties on tobacco companies that fail to cut smoking rates among children; by ending the taxpayer subsidy of tobacco advertising; and by closing other tax loopholes.

We need a new health care paradigm in America—a prevention and health promotion paradigm. Some argue that avoiding obesity and preventable disease is strictly a matter of personal responsibility. Well, we all agree that individuals should act responsibly. I am all for personal responsibility. But I also believe in government responsibility. Government has a responsibility to ensure that people have the information, tools and incentives they need to take charge of their health. And that is what the HeLP America Act is all about.

The HeLP America Act is comprehensive. It is ambitious. And I fully expect an uphill fight in some quarters of Congress. But I am committed to doing whatever it takes—and I look forward to working with groups and individuals like the readers of this journal who understand the importance of health promotion—to pass this critically needed legislation.

It is time to heed the Golden Rule of Holes, which says: When you are in a hole, stop digging. Well, we have dug one whopper of a hole by failing to emphasize prevention and wellness. And it is time to stop digging.
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(O’Donnell, American Journal of Health Promotion, 1989, 3(3):5.)

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