



Leaders-to-  
Leaders  
2008

[www.cdc.gov](http://www.cdc.gov)

1 800 CDC-INFO

*Toward  
"A Healthiest  
Nation"*

Our children may have a shorter expected lifespan than we do.

TRUE

FALSE

# Which of the following is the best way to improve our nation's health?

- A: Universal access to health care
- B: Healthcare cost containment
- C: Improved quality of health care
- D: All of the above
- E: None of the above

Why isn't the United States, the country that spends the most on health, the healthiest nation?

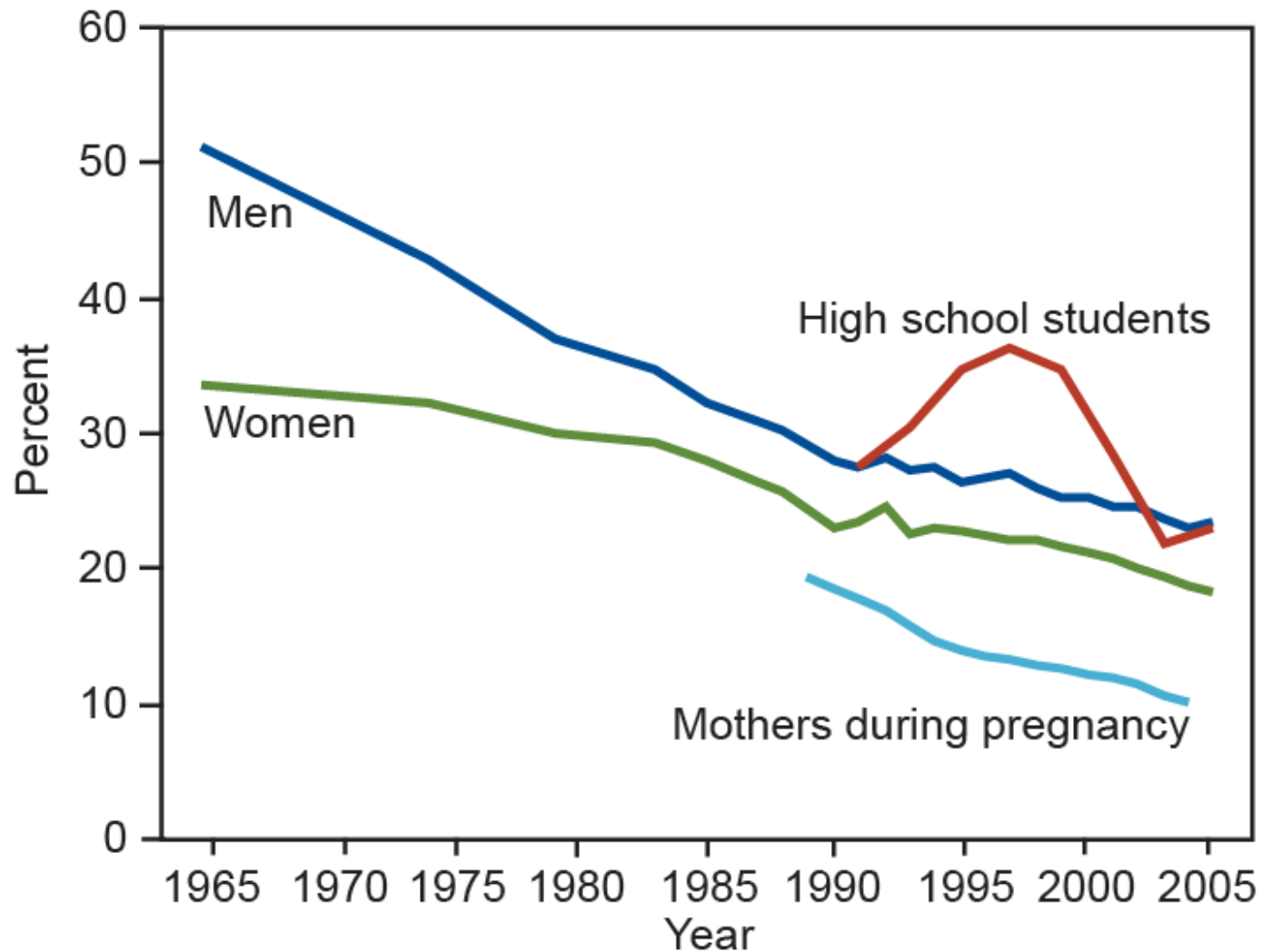
# Health, United States, 2007

With Chartbook on Trends in the Health of Americans



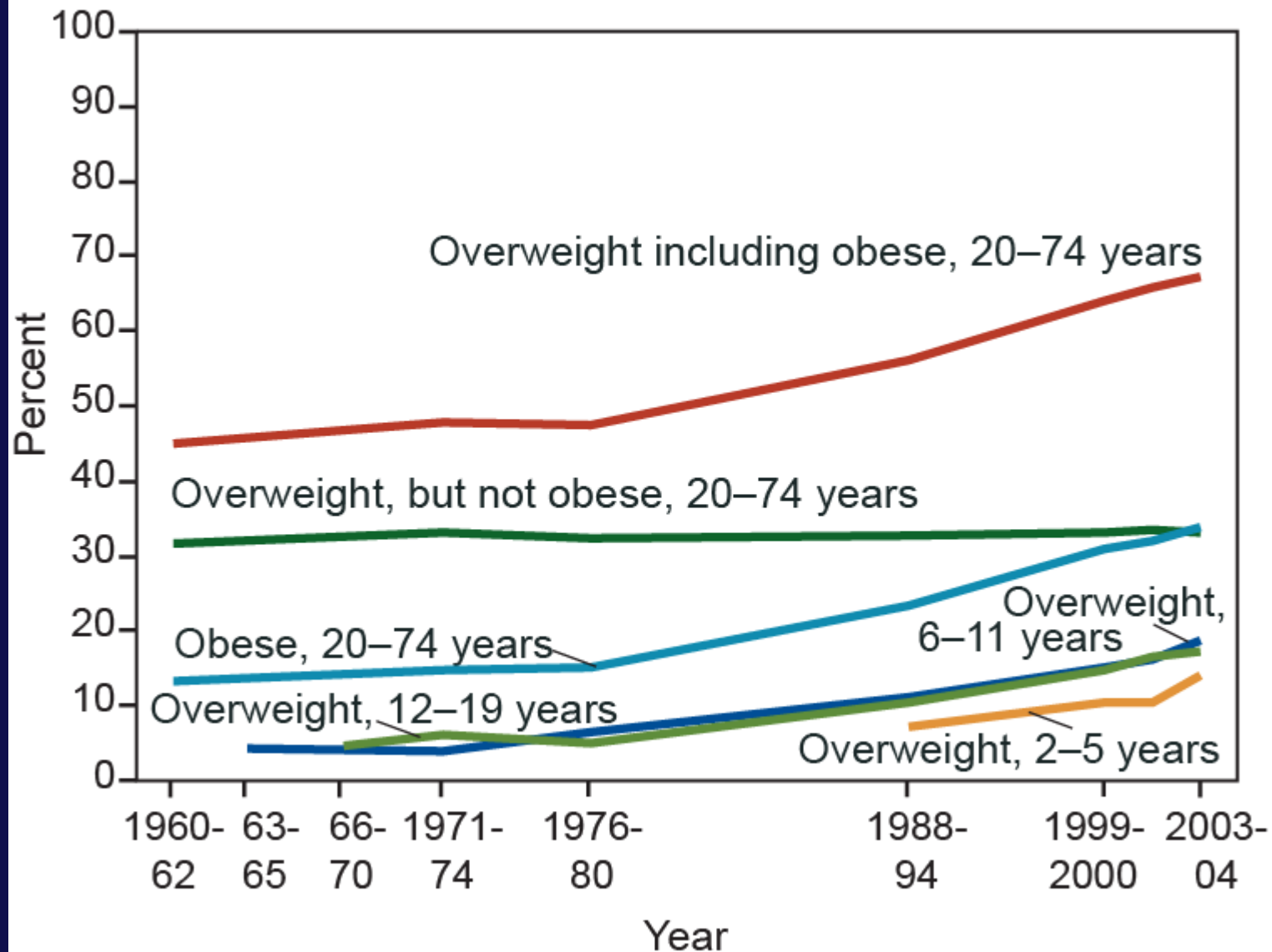
U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES  
Centers for Disease Control and Prevention  
National Center for Health Statistics

# Cigarette smoking



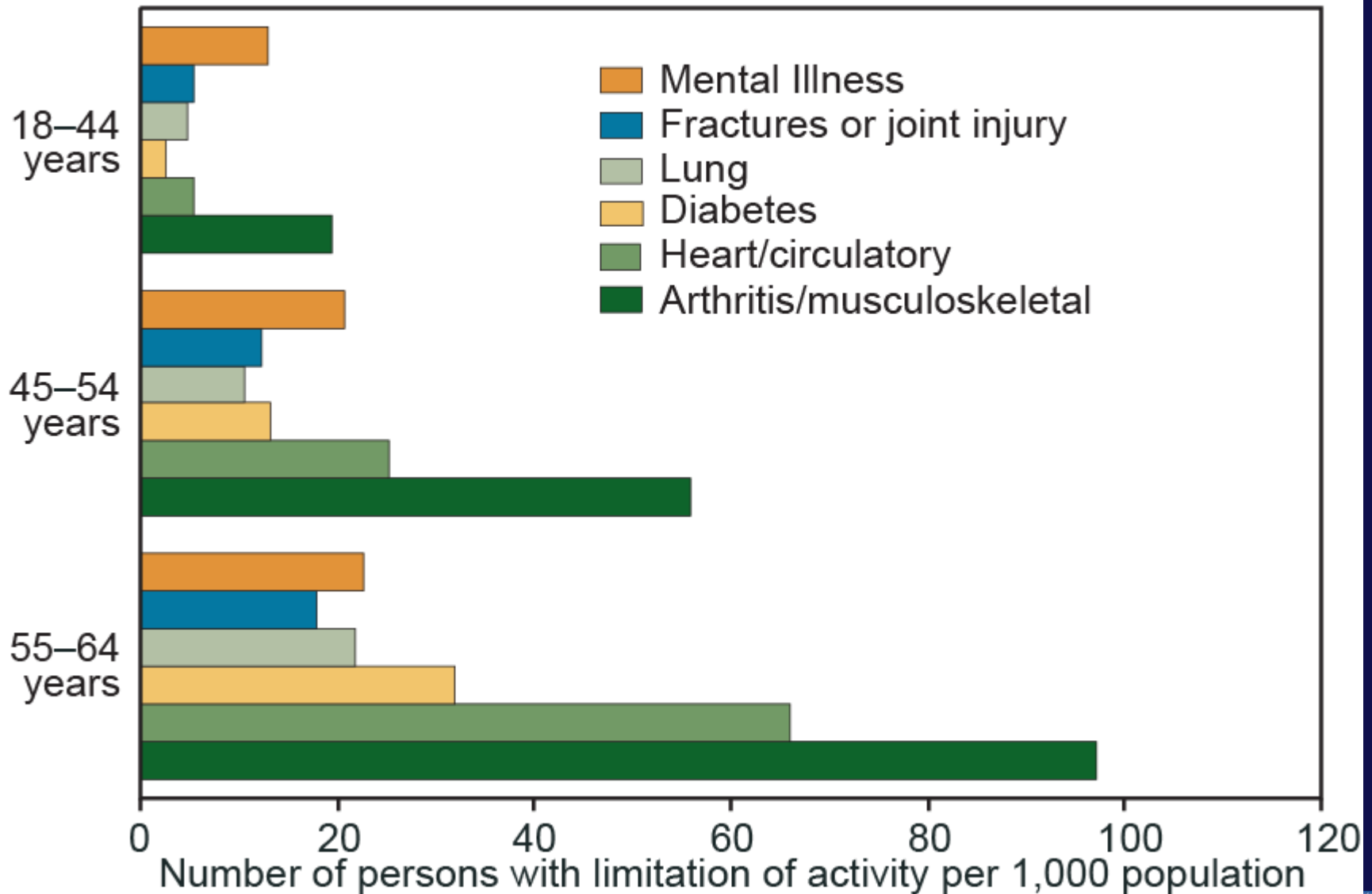
SOURCES: Centers for Disease Control and Prevention, National Center for Health Statistics, *Health, United States, 2007*, Figure 9. Data from the National Health Interview Survey, Youth Risk Behavior Survey, National Vital Statistics System.

# Overweight and obesity



SOURCES: Centers for Disease Control and Prevention, National Center for Health Statistics, *Health, United States, 2007*, Figure 13. Data from the National Health and Nutrition Examination Survey.

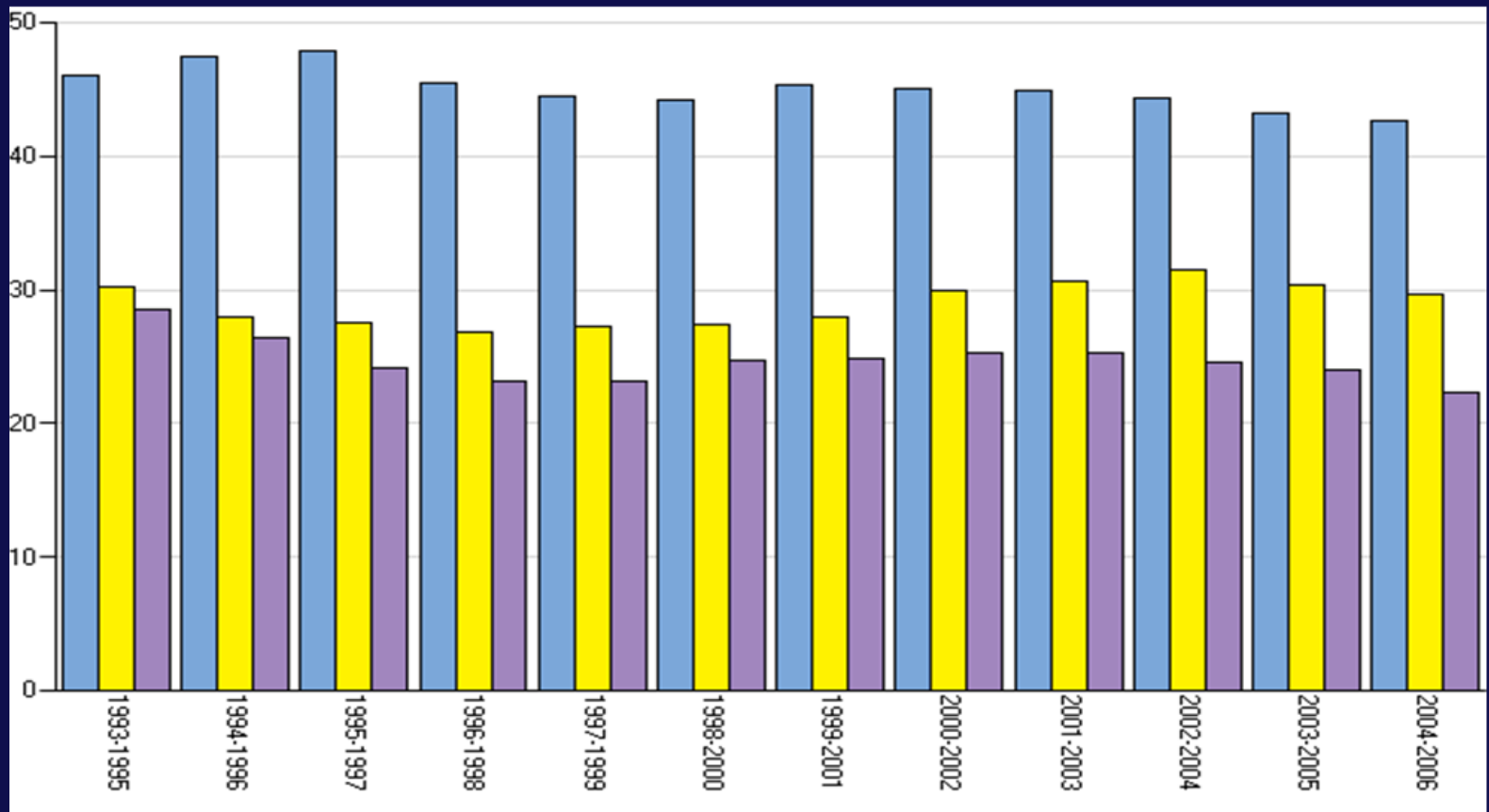
# Activity limitation among adults due to chronic conditions, 2004–05



SOURCES: Centers for Disease Control and Prevention, National Center for Health Statistics, *Health, United States, 2007*, Figure 15. Data from the National Health Interview Survey.



# Perceived Health Status: “Poor” or “Fair” (1993 – 2006)



% Rating  
Health  
“Fair”  
or “Poor”

Year

■ Mississippi (worst) ■ New York (36<sup>th</sup>) ■ Connecticut (best)

# Americans' Views on Healthcare

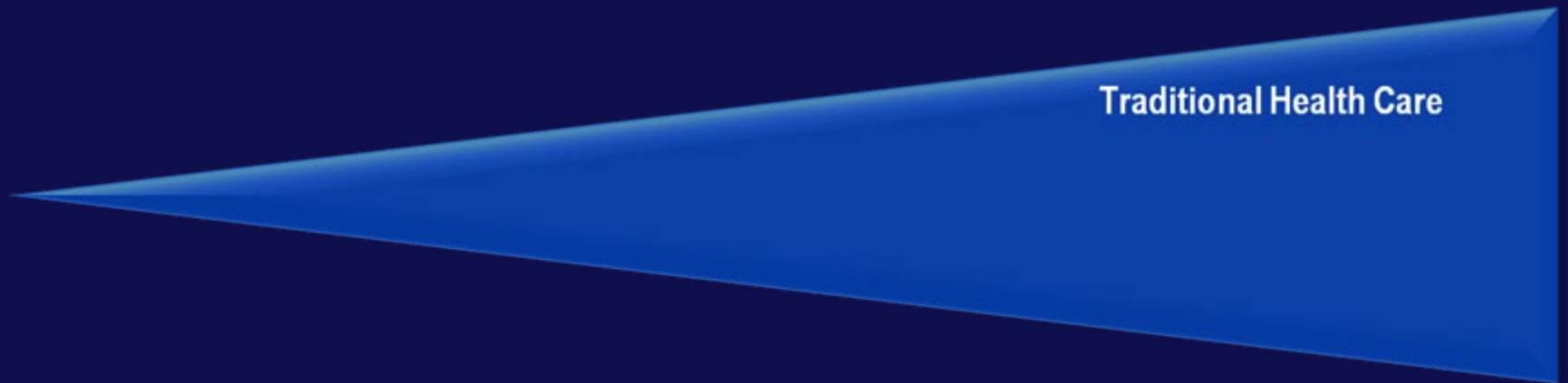
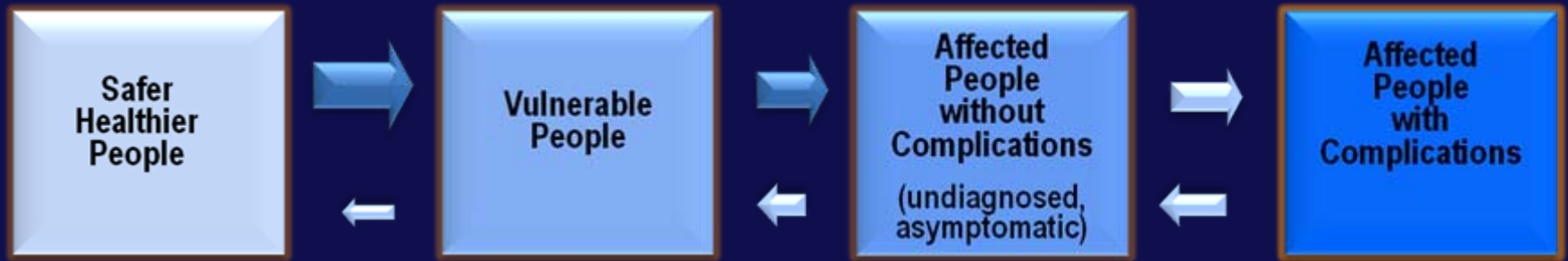
	<u>Republicans</u>	<u>Democrats</u>
Health care system satisfaction		
– Rates “fair” or “poor”	51%	79%
– Requires fundamental change or rebuilding	77%	93%
– Satisfied with cost	32%	10%
– Satisfied with quality	58%	20%
Worries		
– Will have to pay more	66%	80%
– Will lose insurance	43%	59%
– Quality will get worse	52%	68%

# Creating Transformational Change

- No viable path forward without taking into account the needs of future generations
  - Institutions (networks) matter
  - All real change is grounded in new ways of thinking and perceiving
- “The gap between the need to think and act interdependently and our abilities to do so sits at the heart of the most difficult problems we face today”

*The Necessary Revolution (Senge et al)*

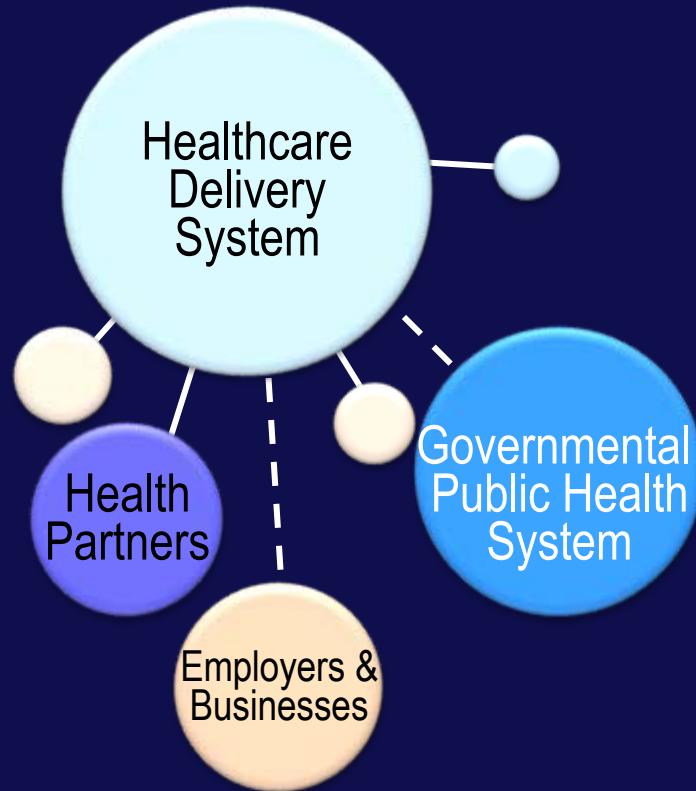
# Health Protection or Disease Care?



Traditional Health Care

*Disease Care*

# Traditional Healthcare



*Capable of miracles, but...*

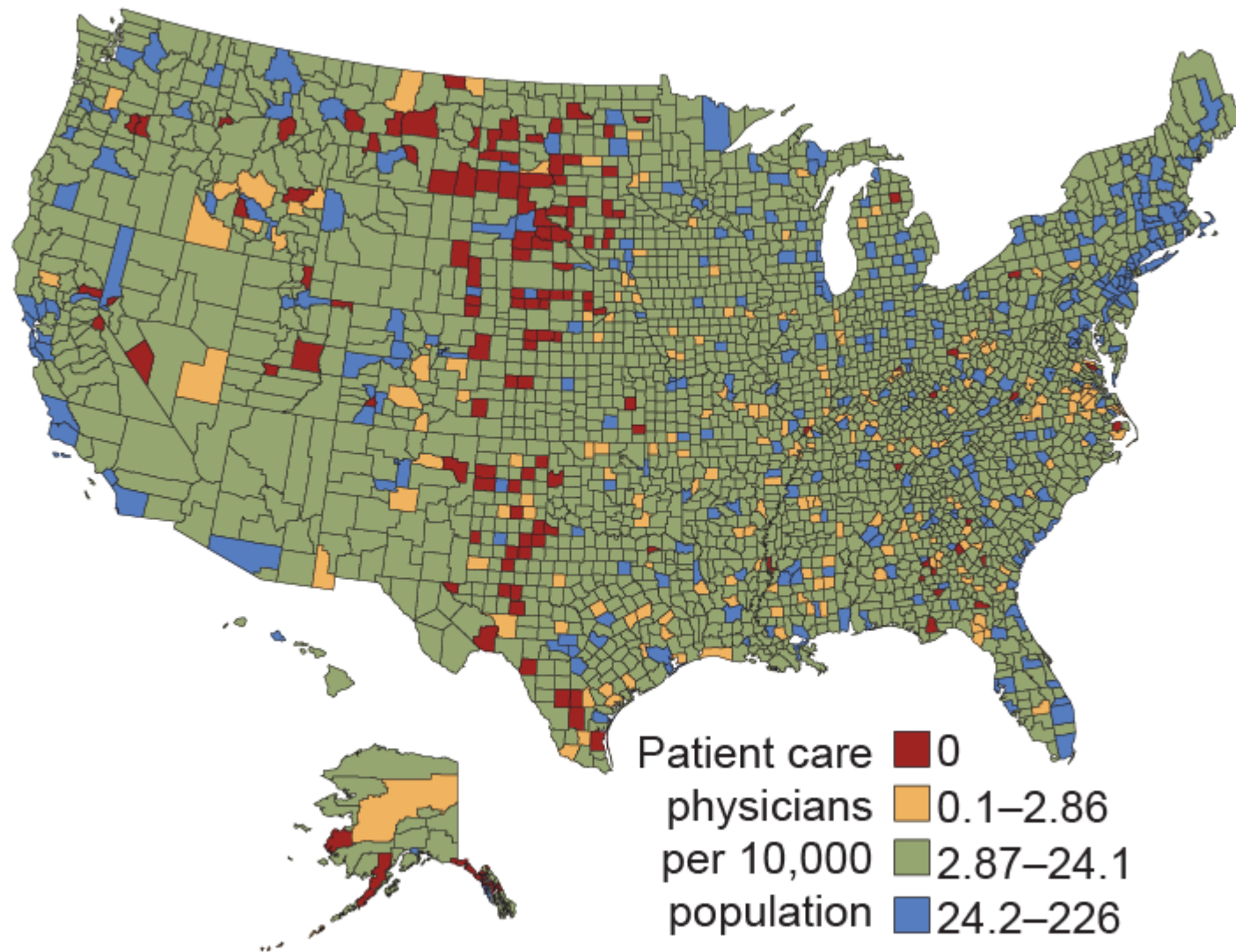
- *Emphasis*: end-of-life disease care
- *Access*: unaffordable & unavailable for many
- *Results*: variable & not transparent
- *Cost*: variable & not transparent
- *Best results*: not usually rewarded
- *Value*: consumers lack information when making choices about care

# Why isn't the United States, the country that spends the most on health, the healthiest nation?

In part, because....

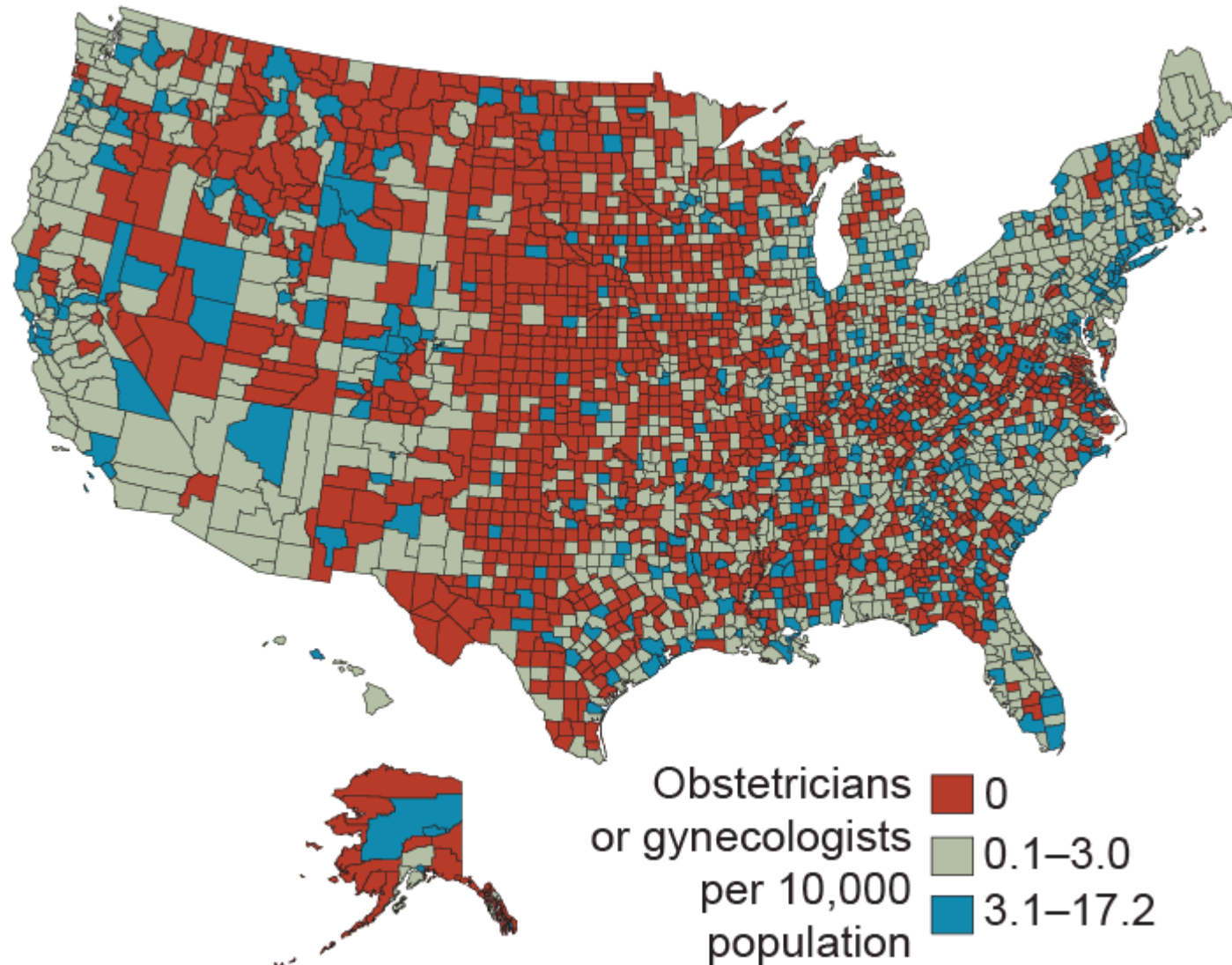
- Care is expensive – 16% of annual gross domestic product (GDP) or about \$6,700 per person in 2005
- Many lack access - 47 million Americans are uninsured
- Quality of care is not optimized— over- and under-utilization of services; medical errors; redundancies and gaps

# Patient care physicians/10,000 pop, by county: 2004



SOURCES: Centers for Disease Control and Prevention, National Center for Health Statistics, *Health, United States, 2007*, Figure 22. Data from the Area Resource File.

# Obgyns/10,000 female pop age 15+, by county: 2004



SOURCES: Centers for Disease Control and Prevention, National Center for Health Statistics, *Health, United States, 2007*, Figure 23. Data from the Area Resource File.

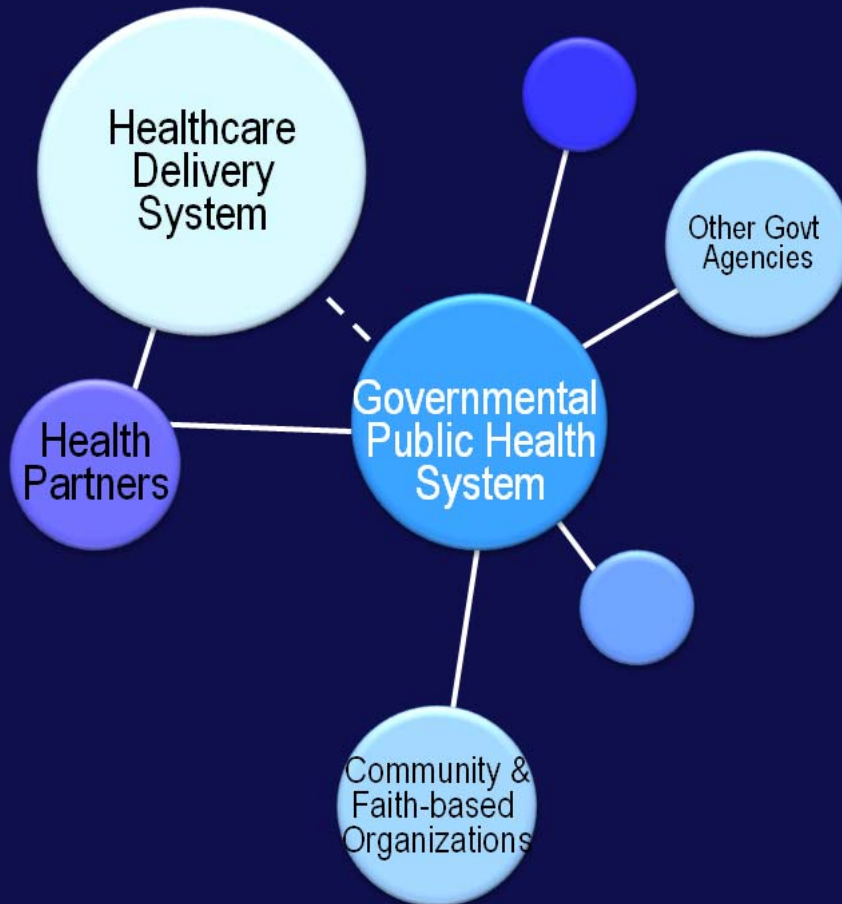


# Traditional Public Health



Public Health System

# Traditional Public Health



## Capable of miracles, but...

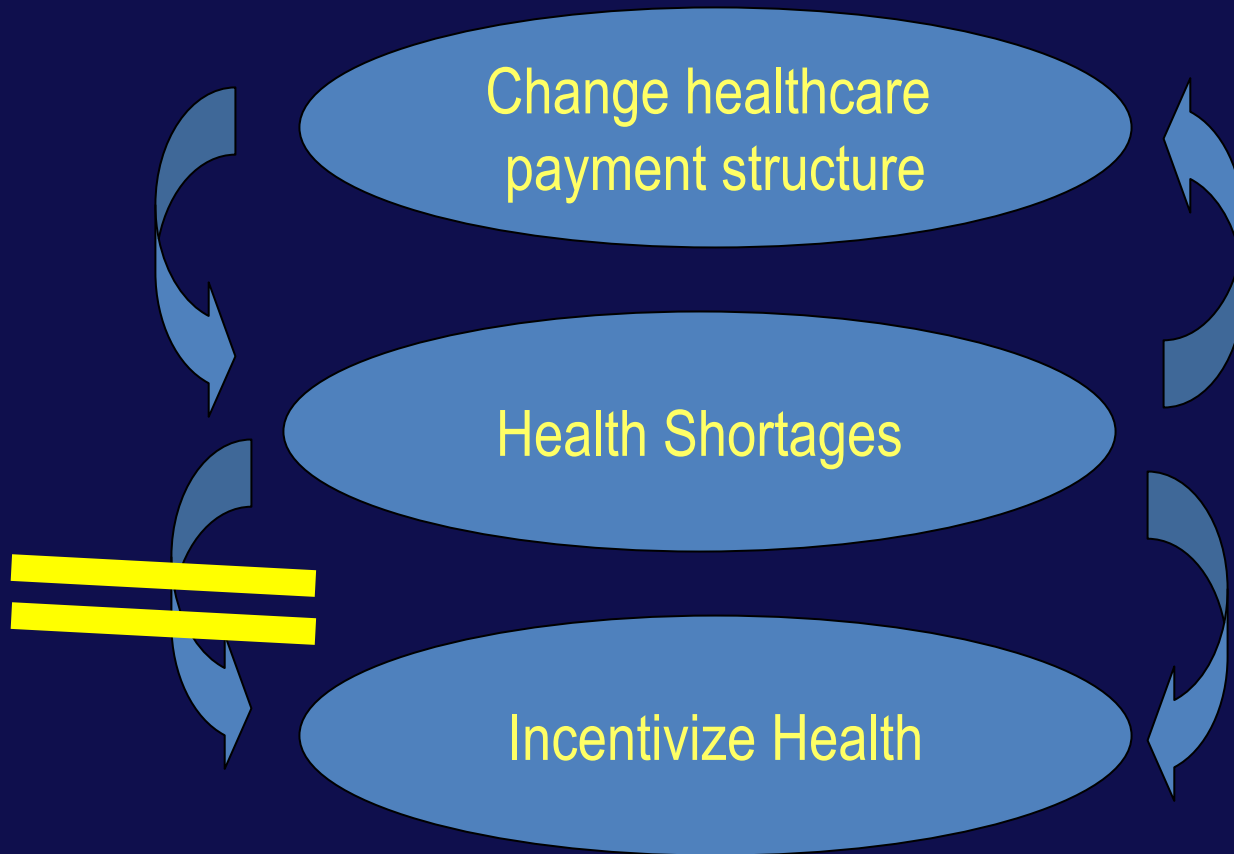
- *Capacity*: under-valued and under-resourced
- *Results*: variable & not transparent
- *Cost*: variable & not transparent
- *Best results*: not usually rewarded
- *Value*: consumers lack information when making choices about tax investments

## Why isn't the United States, the country that spends the most on health, the healthiest nation?

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- Health does not happen just in the doctor's office
- Health happens in our homes, schools, worksites, and communities
- We don't invest enough in protecting health – promoting good health, preventing disease, injury, and disability, and preparing for new health threats
- We are not getting the best VALUE for what we are spending!!

# Problem Solving versus Creating Solutions



# ***A Healthiest Nation: Health Protection...Health Equity***

*Health is valued as a personal, community, national, and international asset.*

*Health protection is understood as a strategic economic imperative for nations and businesses.*

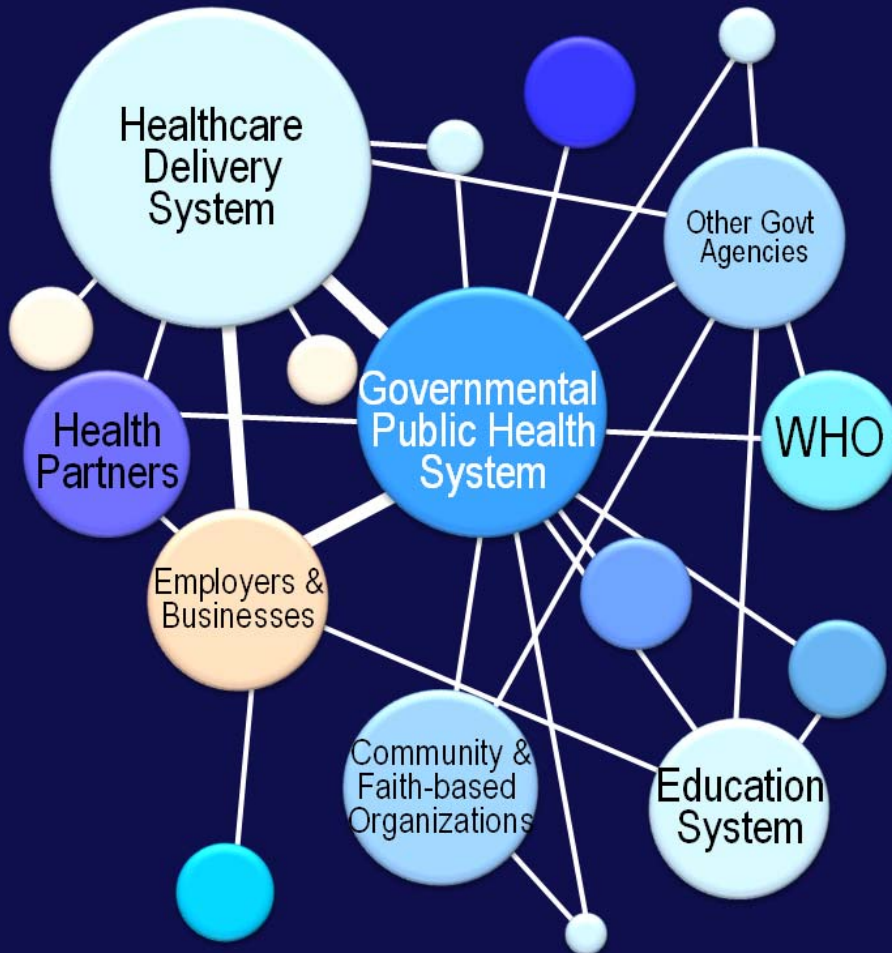
*People have the information they need to make decisions when where, and how they need it.*

*People are confident that that the health system will protect them and provide effective and affordable care when they need it.*

# A Health System for A Healthiest Nation: Health Protection for Life!



# A Value-based Health System

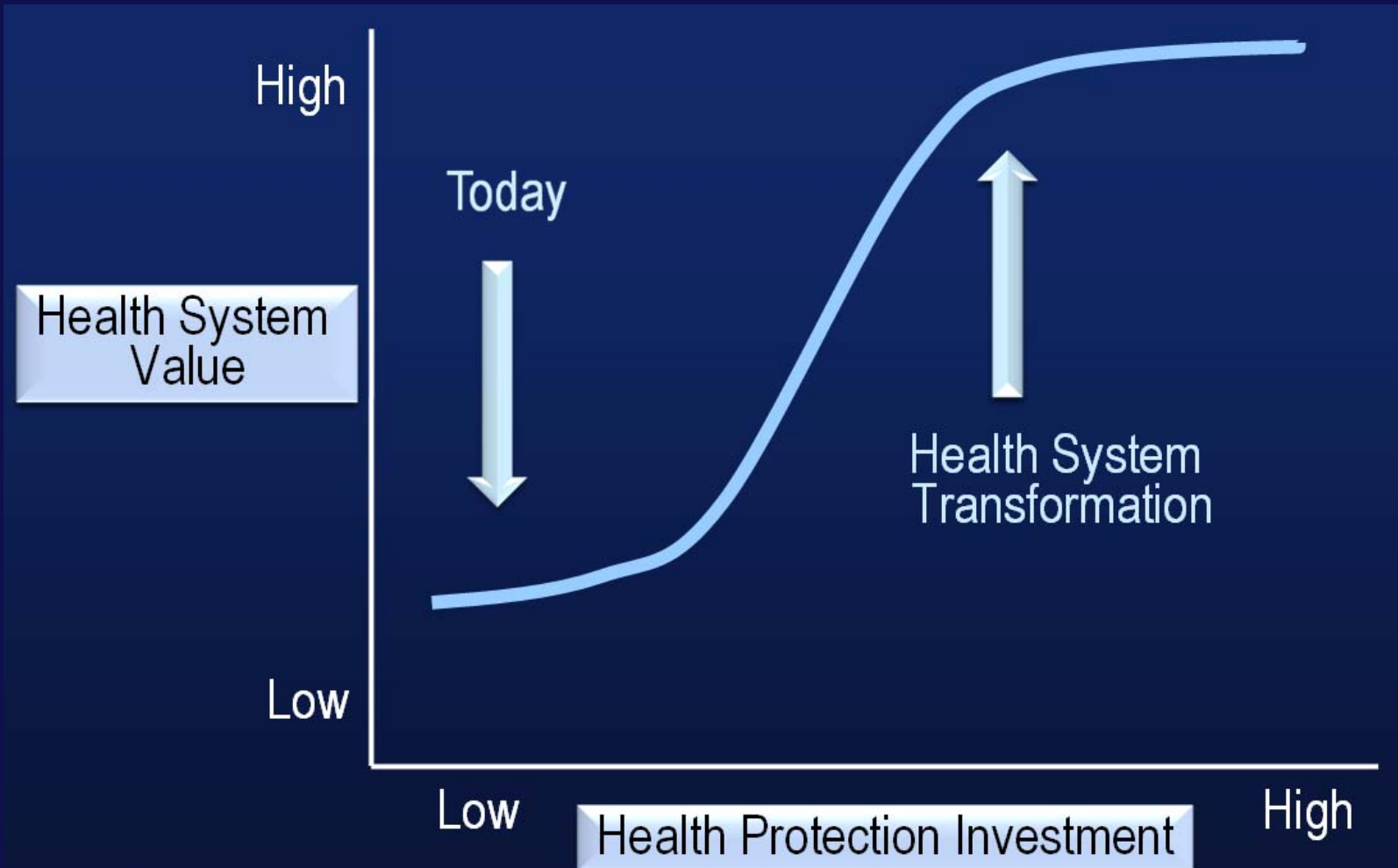


## Capable of miracles!

- *Emphasis:* health protection (health promotion, prevention, preparedness) as well as disease care
- *Access:* affordable & available for all
- *Results:* measured & transparent
- *Cost:* measured & transparent
- *Best results:* rewarded
- *Value:* equitable; transparent to consumers when making choices

Tipping Point!

# Health Protection Investments Can Create “A Healthiest Nation”!





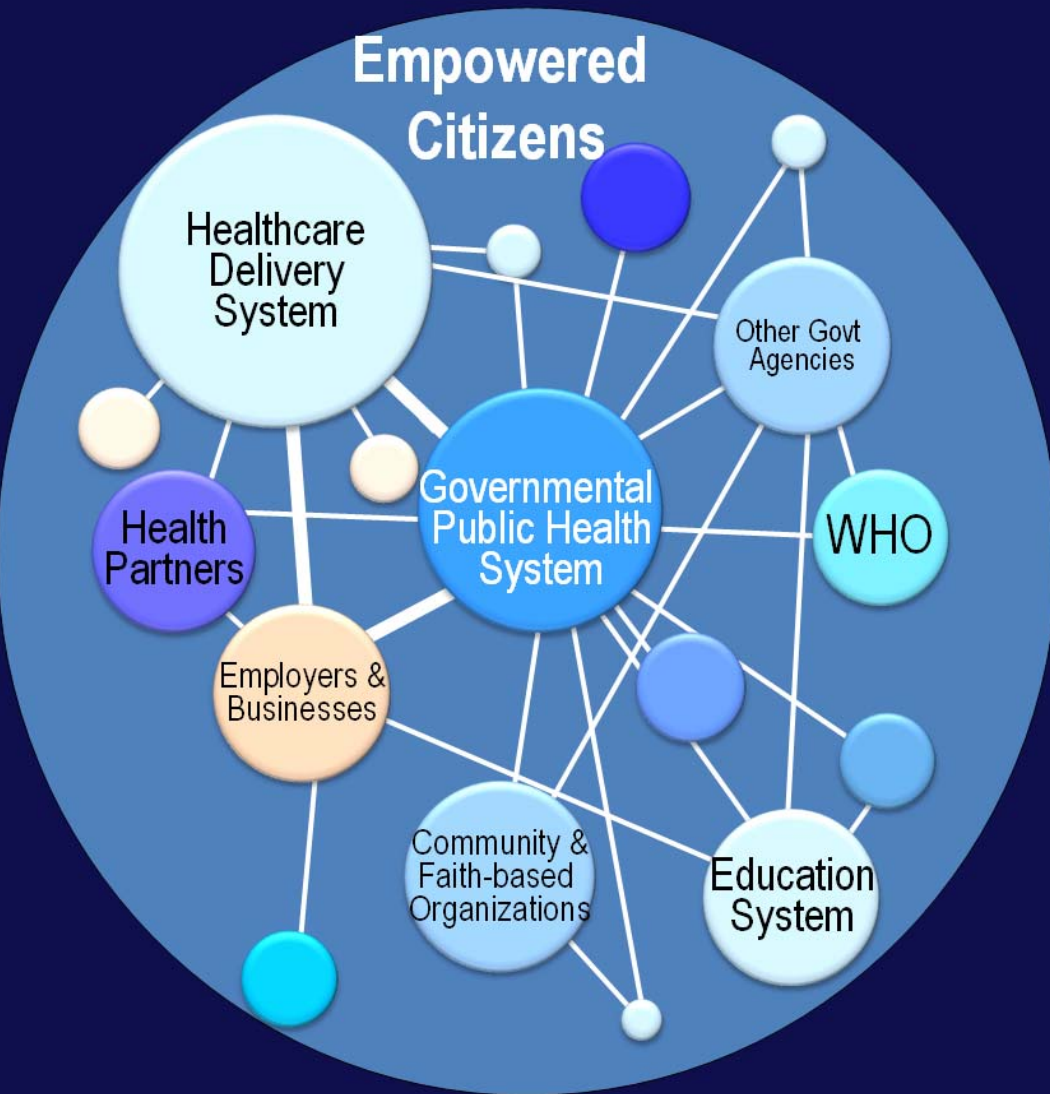
In a world shaped by organizations and networks of organizations, individuals system thinkers are of little significance.

# A Healthiest Nation

- **Expanding the Vision:** collaborate with HNA and others to create a clear and compelling vision that motivates people and organizations to support a true health system
- **Empowering Health Leaders:** convening and collaborating with current and new partners to lead and align their support
- **Energizing People:** creating excitement and relevance among people and employees
- **Enacting Health in All Policies:** creating opportunities to integrate health considerations into societal policies across sectors and at all levels
- **Executing Health Protection Goals:** achieve more health impact by focusing on the the priorities and needs CDC has identified in our Goal Action Plans and portfolio analyses
- **Evaluating Health:** Defining and measuring health and health value for individuals, families, communities, organizations, states, and nations.

# The "Healthiest Nation" Alliance

Collaborating  
Across  
Boundaries



# Union Pacific Names Chief Health and Medical Officer *John T. Kelly, M.D., Ph.D. to Lead Union Pacific's Award- Winning Health Services Department*

*Omaha, Neb., May 13, 2005* – Union Pacific today named John T. Kelly, M.D., Ph.D., vice president and chief health and medical officer. In this position, Dr. Kelly will lead Union Pacific's world-class health programs and develop strategies to protect and improve the health and wellness of all Union Pacific employees.

"Our vision is to become the 'Healthiest Company in America,'" said Barb Schaefer, senior vice president - Human Resources. "



# A Health System for A Healthiest Nation: Health Protection for Life!



**A Healthiest  
Nation**



**Health  
Protection  
Goals**



**Organizational  
Excellence  
Assessment**



**Strategic  
Imperatives**



**CDC Mission**

**CDC**

*What future we can create...*

People Value Health Protection and Achieve Health Equity

*What we expect to achieve...*

Healthy People in Every Stage of Life

Healthy People in Healthy Places

People Prepared for Emerging Health Threats

Healthy People in a Healthy World

*How we will support success...*

Excellence in Service   Excellence in Science

Excellence in Strategy and Workforce   Excellence in Systems

*How we intend to do our work...*

Health Impact   Customer Focus   Health System Leadership

Health Protection Research   Globalization   Accountability

*Why we exist...*

To create the knowledge, tools, & networks that people & communities want & need to protect their health – through health promotion, prevention of disease, injury, & disability, and preparedness.