

# **Chapter 2: Foundation of U.S Health Care Delivery**

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# Learning Objectives

At the end of this lecture, student should be able to:

- Name at least one definition of health, and which organization has put it forth
- Describe what “holistic medicine” is
- List at least two determinants of health
- Give an example of how American values have influenced the U.S. health care delivery system
- Describe at least one strategy used in the U.S. health care delivery system to improve health

# Introduction

- This section proposes a *holistic* approach to health care delivery that focuses on *curative medicine, health promotion, and disease prevention*.
  - The U.S. system has focused on **curative medicine**, but there are decreasing returns with health care improvement with increased health care expenditures
  - There is recognition of the benefits to society from the **promotion of health and disease prevention**.
- In this context, the issues of *equity* in the distribution of health services using the contrasting theories of *market justice and social justice* in U.S. Health Care Delivery.

# **Different Definitions of Health**

# Definitions of Health Based on Values and Beliefs

- The U.S. health care system reflects American values and beliefs
  - The system has remained mostly private – not tax-financed national health care program.
  - There are strong forces against making fundamental changes in the financing and delivery of health care.
  - It presupposes the existence of illness or disease
  - Uses clinical diagnosis and medical interventions to treat disease or its symptoms
- In the U.S., optimum health exists when
  - A person is free of symptoms and does not require medical treatment
- *What are some basic American values that underlie the values listed above?*

# Illness vs. Disease

- Illness: *person's* own perceptions and *evaluation* of how he or she feels
- Disease: determined by the *medical professional's evaluation* rather than the patient's that requires therapeutic intervention. Three classifications:
  - Acute condition: relatively severe, episodic (of short duration), and often treatable
  - Subacute condition: between acute and chronic but has some acute features
  - Chronic condition: less severe but of long and continuous duration where patient may not fully recover
- *Can you classify an "illness" you have had into one "disease" category?*

# Indicators of Health

Self-reported health status

Life expectancy

Morbidity (disease)

Mental wellbeing

Social functioning

Functional limitations

Disability

Spiritual wellbeing

# Quality of Life

- Quality of Life (QL): used in a denotative sense to capture essence of overall satisfaction with life during and following a person's encounter with the health care delivery system
  - A person's overall satisfaction with life and self-perceptions of health, especially after a medical intervention.
- QL indicator of how satisfied a person was with the experiences while receiving health care.
  - Consider comfort, respect, privacy, security, autonomy
- Goal is to have a positive effect on an individual's ability to function, meet obligations, and feel self-worth.



# Different Definitions of Health

| Type of definition                                   | Characteristics  |
|--|--|
| Medical model<br>(physical view)                     | <ul style="list-style-type: none"><li>• Defines health as the absence of illness or disease</li><li>• Focuses on diagnosis and relief of symptoms</li></ul>  |
| Medical sociologist<br>(social view)                 | <ul style="list-style-type: none"><li>• Defines health as the state of optimum capacity of an individual to perform his or her expected social roles and tasks (such as work, school, doing household chores)</li></ul>                              |
| Society for Academic<br>Emergency Medicine<br>(SAEM) | <ul style="list-style-type: none"><li>• Defines health as a “state of physical and mental well-being that facilitates the achievement of individual and societal goals”</li><li>• Emphasizes both physical and mental dimensions of health</li></ul> |

# Different Definitions of Health

| Type of definition              | Characteristics   |
|---------------------------------|---|
| World Health Organization (WHO) | <ul style="list-style-type: none"><li>• Defines health as “ a complete state of physical, mental, and social well- being, and not merely the absence of disease or infirmity”</li><li>• Referred to as the bio-psychosocial model of health</li></ul>   |
| Holistic Medicine               | <ul style="list-style-type: none"><li>• Emphasizes the well-being of every aspect of what makes a person whole and complete</li><li>• Incorporates the spiritual dimension as a fourth element in addition to</li><li>• Physical, mental, and social aspects necessary for optimal health</li></ul> |

# **Determinants of Health**

# Four Main Categories of Health Determinants

(for Individuals and Populations)

## Environment

- Physical, socioeconomic, sociopolitical, and socio-cultural dimensions

## Behavior/lifestyle

- Diet and foods play a major role in most significant health problems
- Exercise, smoking, stress-levels all affect health

## Health

- A person's genetic make-up
- Predisposes individuals to certain diseases
- Current lifestyles can impact future progeny

## Heredity

- Access to preventive and curative health care services

## Medical Care

# Examples of Health Determinants



Physical Activity



Overweight/obesity



Tobacco Use



Substance Abuse



Responsible Sexual Behavior

# Examples of Health Determinants



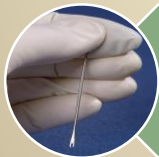
Mental Health



Injury and Violence



Environmental Quality



Immunization

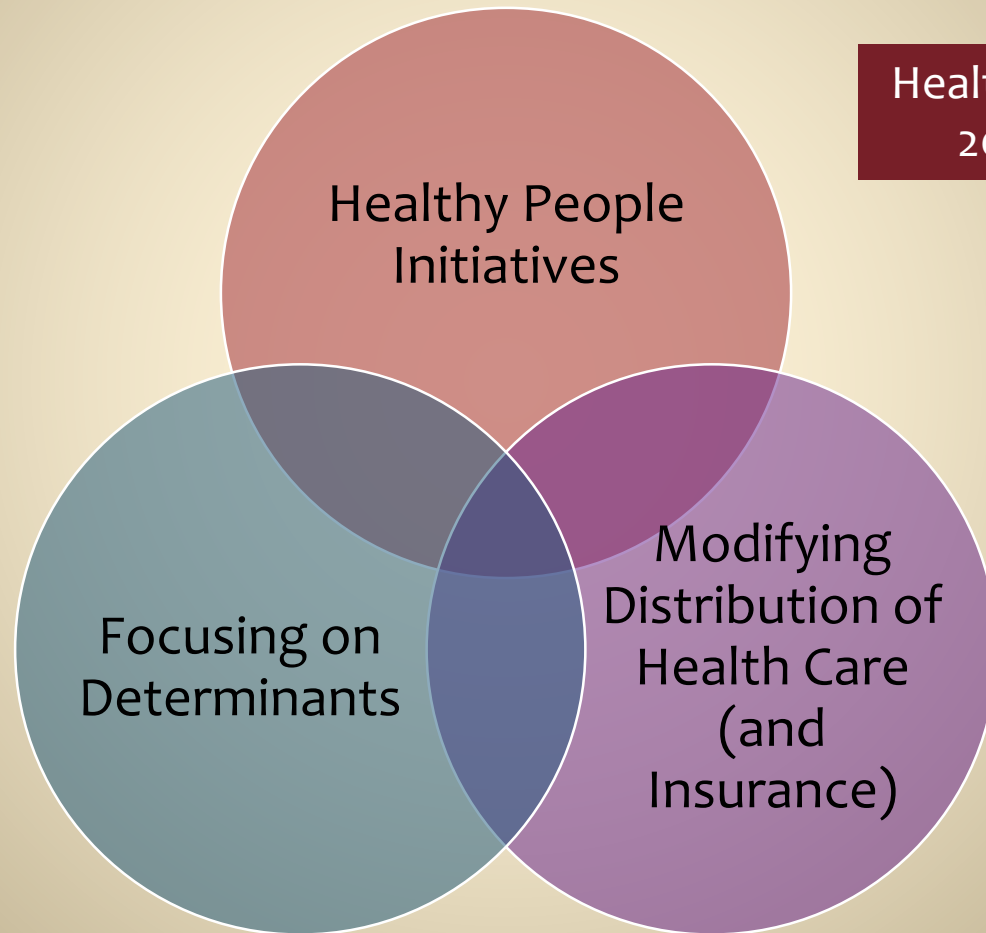


Access to Health Care

# **Strategies to Improve Health (in a Market Justice Environment)**

# Three Basic Strategies in the U.S. to Improve Health

Healthy People 2000,  
2010, and 2020





# Healthy People

- Started with Healthy People 2010, launched in 2000.
  - Now, we are on Healthy People 2020.
- Defined new partnerships between public health departments and health care delivery organizations
- Objectives were to have these organizations partner to focus on determinants of health
- *Do you remember any of the goals from Healthy People 2010?*

# Overarching Goals of Healthy People 2020

Attaining high-quality, longer lives free of preventable disease, injury and premature death



Achieving health equity, eliminating disparities, and improving the health of all groups

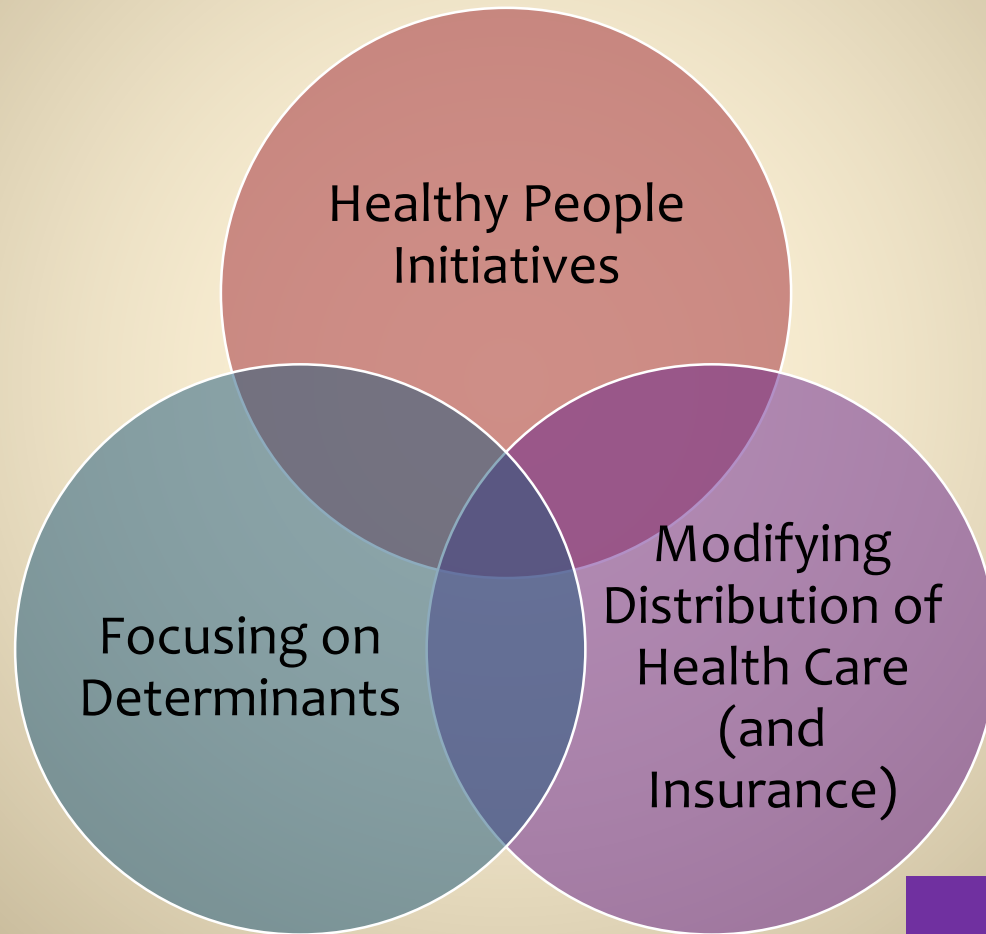


Creating social and physical environments that promote good health for all



Promoting quality of life, healthy development, and healthy behaviors across all life stages.

# Three Basic Strategies in the U.S. to Improve Health



Market vs. Social  
Justice

# Rationing in the Distribution of Health Care

- The production, distribution, and consumption of health care must be perceived as equitable.
  - No society has a perfectly equitable method to distribute limited resources.
- Any method of resource distribution leaves some inequalities, so how does one decide?
  - A theory of justice is needed to resolve the allocation of health care.
- Equitable access to health services is addressed by the theories of Market and Social justice.
  - These two contrasting theories govern the production and distribution of health care services.

# Social vs. Market Justice

## Social Justice

The equitable distribution of health care is a societal responsibility

Health care is a social good

Planned rationing (supply-side rationing)

## Market Justice

Market forces in a free economy can best achieve a fair distribution of health care

Health care is an economic good

Demand-side rationing (price rationing)

# More Comparisons

- In Social Justice, there is central control by the government, so it is easier to change the system compared to Market Justice.
  - As with any socialized scenario, the government can work to overall see that supply meets demand
  - With no central control, Market Justice cannot control production/distribution of services
- In Market Justice, your health is your fault!
  - Does not acknowledge that factors out of the individual's control may have influenced health
- In Market Justice, your physician knows best what you should do, and the market knows best what you should pay!
  - In Social Justice, the government plays a center role in determining care and payment
- Social Justice is pervaded with a concept of “collective good”, while Market Justice does not operate on that concept
  - In situations where collective health is important (e.g. both acute and chronic disease epidemics, like obesity), Market Justice fails to acknowledge this
  - In situations where individual health is important (e.g., cancer progression), Social Justice may place limits on advanced care

# Social Justice

| Characteristics  | Implications  |
|--|---|
| <ul style="list-style-type: none"><li>• Views health care as an social resource</li><li>• Requires active government involvement in health services delivery</li><li>• Assumes that the government is more efficient in allocating health resources equitably</li><li>• Medical resource allocation is determined by central planning</li><li>• Ability to pay is inconsequential for receiving medical care</li><li>• Equal access to medical services is viewed as a basic right</li></ul> | <ul style="list-style-type: none"><li>• Collective responsibility for health</li><li>• Everyone is entitled to a basic package of benefits</li><li>• Strong obligation to the collective good</li><li>• Community well-being supersedes that of the individual</li><li>• Public solutions to social problems</li><li>• Planned rationing of health care</li></ul> |

# Market Justice

| Characteristics   | Implications  |
|---|---|
| <ul style="list-style-type: none"><li>• Views health care as an economic good</li><li>• Assumes free market conditions for health services delivery</li><li>• Assumes that markets are more efficient in allocating health resources equitably</li><li>• Production and distribution of health care are determined by market-based demand</li><li>• Medical care distribution is based on people's ability to pay</li><li>• Access to medical care is viewed as an economic reward of personal effort and achievement</li></ul> | <ul style="list-style-type: none"><li>• Individual responsibility for health</li><li>• Benefits are based on individual purchasing power</li><li>• Limited obligation to collective good</li><li>• Emphasis on individual well-being</li><li>• Private solutions to social problems</li><li>• Rationing based on ability to pay</li></ul> |



# Analysis

- Are there “goods” in the U.S. that are seen in the Social Justice paradigm? What are some of these?
- In the case of a flu epidemic, do you think Market or Social Justice approaches would do a better job of containing the epidemic?
- For social problems (teen pregnancy, substance abuse), would Market or Social Justice be more likely to do a better job?
- It is clear the Market Justice rationing is worse deal for the **individual** than Social Justice rationing since there are not gradations in basic care (no Toyota vs. Cadillac)
  - However, is Market Justice rationing better for the **population**?

# Limitations of Market Justice

- Fails to rectify human concerns/social problems such as crime, illiteracy, and homelessness, which can significantly weaken the fabric of a society.

*Why?*

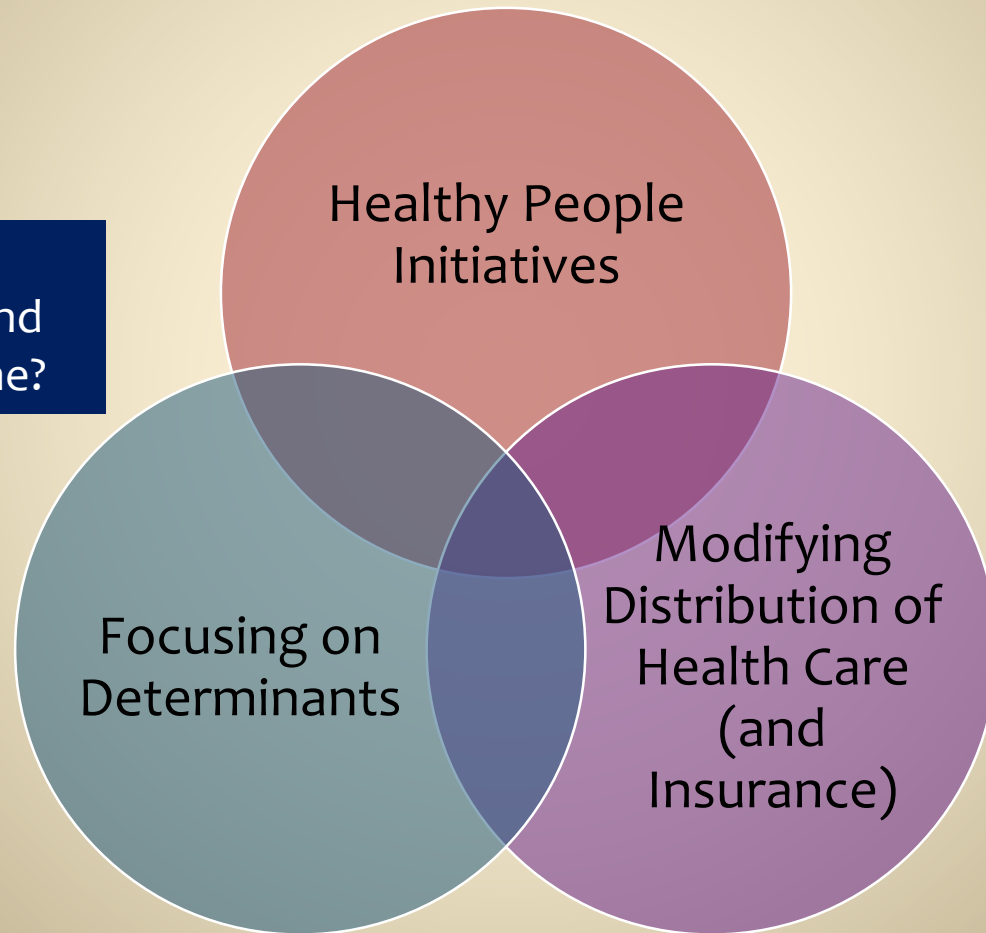
- Does not always protect the society. *Example?*
- Individual health issues can have negative consequences for society. *How?*
- Does not work well in health care delivery. *Why?*

# So what are we?

- U.S. is not a market justice system – health care does not follow free market principles.
  - Shift away from market justice in 1965 with Medicare/Medicaid
  - More shift away with Affordable Care Act
- In U.S., market and social justice complement each other
  - Private employer-based insurance driven by market justice
  - Medicare, Medicaid, worker's comp – social justice
- Public health system offers an infrastructure that can be augmented for social justice health care
  - Robert Wood Johnson's Turning Point initiative to create "third sector"

# Three Basic Strategies in the U.S. to Improve Health

Who has the  
determinants, and  
what can be done?



# Social and Medical Points of Intervention



- Influence of demographics, socioeconomic status, personal behavior, and community-level inequalities on health
- Social and income inequalities contribute to health disparities

- As patients move across the spectrum, they are likely to contend with fragmentation, poor continuity of care, insufficient care coordination for all health needs
- Disparities in quality

1. Social or medical care policy interventions
2. Community-based interventions
3. Health interventions
4. Individual interventions

# Social and Medical Points of Intervention

## Policy Interventions

- Product safety regulations, screening food and water sources, enforcing safe work environments
- 1970 Occupational Health and Safety Act

## Community-based Interventions

- Some sources of health disparities best addressed at community level
- Resources spent on community interventions can go a long way

## Health Care Interventions

- Implementing electronic medical record systems could save \$77 billion/year by improving efficiency
- Coordination of care and counseling for type 2 diabetes improves blood glucose management

## Individual-level Interventions

- Reducing smoking, increasing exercise
- Behavior science and public health together can develop behavior-changing strategies

# Strategies to Improve Health and Reduce Disparities



Nutrition programs



Work/environment safety efforts



Community-based partnerships



Culturally-appropriate care



Patient safety/medical error reduction



Prevention-oriented efforts



Coordinated care for chronically ill persons

# Conclusion

- Health determinants are multi-factorial and interact
- Currently, health care is illness-focused, but efforts to use holistic approaches are underway.
- Taking responsibility over one's own health important
  - Healthy People 2020
- U.S. health care system transitioning towards social justice
- Critical to address social and medical determinants of health



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