

## **Obesity Prevention and National Health Reform: Insights and Perspectives from the Field**

**Weight of the Nation Conference  
Washington, D.C.  
July 2009**

Produced by the Alabama Department of Public Health  
Video Communications and Distance Learning Division

## **Faculty**

**Loel Solomon, PhD  
National Director  
Community Health Initiatives and  
Evaluation  
Kaiser Permanente**

## **About Kaiser Permanente**

- **Founded in 1945**
- **America's oldest and largest private, nonprofit health care organization**
- **8.6 million members**
- **Over 14,000 physicians representing all specialties and 160,000+ additional employees**
- **Operations in 9 states and Washington, DC, with 36 hospitals and 423 clinics**

## **A Heritage of Prevention**

- **Origins in construction sites: workplace safety a priority**
- **Prevention as a central tenet: "We are a health plan, not a sick plan"**
- **Early work with health assessment, preventive screenings and immunizations**



## **A Heritage of Prevention**

- **Public health roles**
- **Today: from clinical prevention to community health**
  - \_ **Raising the bar on screenings**
  - \_ **Healthy Eating/Active Living (HEAL) community health interventions**
  - \_ **Environmental, organizational and policy change**

## **Our Approach: Creating Healthy Communities for Our People**

- **Access to quality care is critical, but it is not enough**
- **Care must be safe, effective and organized around medical home**
- **Build on heritage of prevention and population health**

## Our Approach: Creating Healthy Communities for Our People

- Address social, economic and environmental determinants, and disparities
- Unite evidence-based integrated care and research, with public health and safety net partners and civic activism

## Our Approach: Creating Healthy Communities for Our People

- Build strong community partnerships, policies and practices that improve health
- Concentrate investments for scale, visibility and impact.
- Invest large-scale, long-term, in communities' health
- Evaluate, report publicly, be

## Our Clinical Priority Areas

### Clinical Area

#### Prevalence/Incidence

• Overweight and Obesity	4,400,000
• Asthma	95,000
• Cancer cases/yr	25,000 new
• Chronic Pain	250,000
• Coronary Artery Disease	165,000
• Depression	415,000
• Diabetes	450,000
• Heart Failure	80,000

## Obesity-Related Health Care Costs

### Nationally

- Health care costs 36% ↑ total cost
- Medications 77% ↑ total cost

### Kaiser Permanente Northern California

- BMI 30-34.9 24% ↑ total cost
- BMI ≥ 35 44% ↑ total cost

Health Affairs; Vol. 21: Number 2Arch Intern Med; 1998; 158: 466-472

## Our Comprehensive Approach to Obesity Prevention

- Evidence-based clinical strategies for KP members
- Healthier communities through HEAL Initiative
- A healthier workplace for KP employees



## Clinical Prevention and Treatment Strategies

- Office based strategies
  - BMI as a vital sign
  - Brief negotiation
  - Office support tools
- Internet-based programs
  - KP.org



## **Clinical Prevention and Treatment Strategies**

- Healthy Lifestyles Programs (e.g., *Balance*)
- 10,000 Steps
- Weight management classes
- Pharmacotherapy
- Surgery

## **Evidence-Based Prevention for Members**

- BMI as a vital sign
  - Successfully integrated into Kaiser Permanente's EMR system
  - Facility-level champions driving increased capture rates
- Advice and counseling

## **Evidence-Based Prevention for Members**

- Kaiser Permanente has trained more than 1,000 community-based providers in brief negotiation
- Integrated into health sector technical assistance for Healthy Eating Active Communities

## **Evidence-Based Prevention for Members**

- Internet-based programs
  - *Balance* made available to more than 50,000 members
  - Evaluations show significant impact on outcomes

## **A Healthier Workplace for Employees**

- Kaiser Permanente farmers markets
  - 30 farmers markets now in place
  - Farm box pilot programs
- Health Picks cafeteria reforms
  - Menu labeling in cafeterias
  - Healthy vending machines
  - Elimination of trans fats

## **A Healthier Workplace for Employees**

- 10,000 Steps program
- Health Risk Assessment via My Health Manager on [kp.org](http://kp.org)



### **The Impetus for Community-Based Approaches to Obesity Prevention**

- Excellent medical care alone is necessary, but insufficient
- Major drivers of the obesity epidemic are environmental:
  - A built environment and economy that promote physical inactivity

### **The Impetus for Community-Based Approaches to Obesity Prevention**

- Increased access to and marketing of cheap, calorie dense food
- Biological evolution
- Consensus: Comprehensive environmental and social changes are required to turn down the epidemic

### **The Impetus for Community-Based Approaches to Obesity Prevention**

*Our Members Can't be Healthy  
if they Live and Work  
in Unhealthy Communities*

### **We Must Address the Conditions of Health**

“It is unreasonable to expect that people will change their behavior easily when so many forces in the social, cultural, and physical environment conspire against such change.”

*-- Institute of Medicine,  
2003*

### **Kaiser Permanente's Community Health Initiatives**

- Healthy Eating Active Living (HEAL)
  - A geographic, place-based focus
  - Multi-level interventions including environmental and policy changes
  - Multi-sectoral collaboration
  - Community engagement and ownership

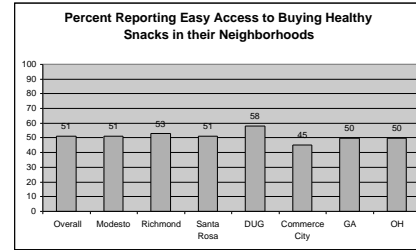
### **Kaiser Permanente's Community Health Initiatives**

- Leverage the assets and strengths of communities and our own organization
- Long-term partnerships (7-10 years)
- Evaluation and evidence-informed public health
- A focus on racial and ethnic health disparities

## Kaiser Permanente HEAL Communities

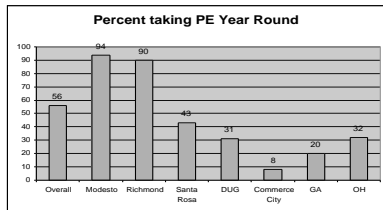


## What We Are Learning about Access to Healthy Food



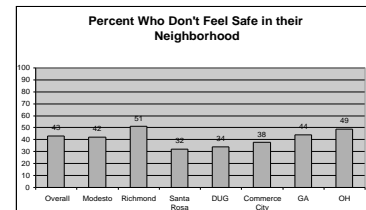
Source: Community Health Initiatives Youth Survey, 2008

## What We Are Learning about Access to Physical Activity for Youth



Source: Community Health Initiatives Youth Survey, 2008

## What We Are Learning About Other Barriers: Safety is a Big Issue for Kids



Source: Community Health Initiatives Youth Survey, 2008

### Early Successes

- Increased access to healthy food
  - More farmers markets and farms stands
  - Corner stores that now carry fresh fruit and vegetables
  - Implementation of school food standards for competitive food, vending machines

### Early Successes

- Increased access to safe physical activity
  - Safer parks with more equipment and more kids playing
  - Multiple interventions increasing community walkability and bikability, including: Complete Streets, Safe Routes to School programs, incorporation of health elements into

## Early Successes

- Other fundamental issues being addressed:
  - Violence
  - Jobs/economic development
  - Climate change

## Change Story: Corner Store Conversions



Modesto, Calif. store owner who now offers fresh produce for sale at the checkout counter.

## Implications for Health Reform

- Promote wellness and prevention by addressing the social determinants of health and by strengthening of the social, cultural, and physical environments that influence behavior

## Implications for Health Reform

- Ensure that funding for community-based prevention and public health more generally reflect the value of these strategies in alleviating disease burden and improving quality of life

## Implications for Health Reform

- Recognize and support the vital role of health care delivery systems in promoting community health, and facilitate maximum integration of public health and health care delivery systems

## We Have to Put “Health” Back in Health Reform

- Don’t stop at coverage and access
- Address disparities explicitly
- Look at the economics of prevention
- Take a multi-sectoral approach to health -- “Health in all policies”

## **For More Information**

- <http://www.kp.org/communitybenefit>
- <http://convergencepartnership.org>
- <http://www.policylink.org>
- <http://www.preventioninstitute.org>