Investing in Health: From Workplace to Community Well-Being

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Who we are
The American Heart Association/American Stroke Association is not just a charity. We are crusaders, innovators, scientists and partners.

Our Mission
To be a relentless force for a world of longer, healthier lives.
Life is why
Keeping hearts beating is what keeps our hearts pumping.
Our levels of work

National – Dallas HQ
- Education & awareness
- Research management
- Quality & science
- Advocacy agenda
- Strategic partnerships & alliances

5 regions
- Activate advocacy
- State and affiliate education
- Quality improvement
- Regional projects

Local
- Grassroots advocacy
- Fundraising & education
- Building partnerships
- Recruiting volunteers
- Community health
International Programs

We deliver lifesaving programs in 93 countries worldwide.

Go Red For Women works in 46 countries to raise awareness for women.

Professional education, quality improvement programs and more are making a global impact!
The impact of our work

1956
AHA’s first statement of smoking and heart disease issued

1959
Cholesterol inhibitors developed

1960
First successful pacemaker surgery

1961
First successful long-term artificial heart valve

1961
CPR techniques & standards developed

1961
First successful long-term artificial heart valve

1990
Treatment for Infant Respiratory Distress Syndrome

1990
CPR techniques & standards developed

1998
American Stroke Association formed

2000
Get With The Guidelines launched

2003
Drug-coated stents approved for use

2004
Go Red For Women launched

2007
Mission: Lifeline formed

2014
AHA launched its work with precision medicine

2016
One Brave Idea launched

2017
New blood pressure guidelines released

2020
COVID-19 response efforts
The Problems
The World is Facing Today
Facts about heart disease

Heart disease is the No. 1 cause of death in the U.S. and in the world.

1 of every 3 deaths in the United States is caused by heart disease or stroke.

Every year, an estimated 785,000 Americans will have their first heart attack, and 470,000 will have another.

Heart attacks affect more people every year than the population of Dallas, Texas.

Risks

83% believe that heart attacks and strokes can be prevented, but aren’t motivated to do anything.

72% of Americans don’t consider themselves at risk for heart disease.

58% put no effort into improving their heart health.

Facts

Statistics from the American Heart Association/American Stroke Association.
American Heart Association. 4/12DS5479
Compared to data from last year, we’re seeing **50 more people** die every day from cardiovascular disease.

Compared to data from last year, we’re seeing **12 more people** die every day from stroke.

Only **1 in 4 U.S. adults** meet the physical activity guidelines.
Nearly half of U.S. adults have high blood pressure.

E-cigarette use among middle and high school students is reaching epidemic levels.

By 2035, nearly half of the U.S. population is expected to have some form of cardiovascular disease.
The long-term effects of COVID-19

While the need for medical equipment and supplies to fight COVID-19 is urgent, the effects and subsequent needs will be with us for years to come.

More people with heart disease, diabetes or hypertension are at risk.
- Fear of going out to get treatment/calling 911
- Hospitals at max treatment capacity
- Limited access to healthy food options/supplies
- Patients not able to get prescriptions

Increases in unhealthy stay-at-home habits.
- High stress/stress eating
- Eating more unhealthy meals
- Not being as physically active
- Higher BMI due to new lifestyle
- Future potential cases of obesity, high blood pressure and diabetes

Individuals with the greatest need.
- Limited income due to furloughs/layoffs
- Lack of savings to fall back on
- Families not able to rely on free school meal program
- Restricted access to public transportation to get healthy foods/supplies
The COVID-19 Domino Effect

COVID-19 has the potential to drastically change the health and well-being of people living in the U.S. for many years, unless we work together to reduce the impact.

- Patients fear getting treatment/calling 911
- Difficulty getting healthy foods, supplies and prescriptions
- High stress, unhealthy eating habits and less physical activity from being stuck at home
- High unemployment, lack of public transportation, lack of access to healthy foods

POTENTIAL FUTURE PROBLEMS:
- Higher blood pressure rates
- Increases in obesity
- Increases in heart disease, stroke and diabetes
- Fewer healthy life years and earlier deaths
Breaking Down the Barriers that Exist
WHAT MAKES UP A HEALTHY COMMUNITY?

OPPORTUNITIES TO LIVE HEALTHY

STRONG EDUCATION AND TECHNOLOGY

A HEALTHY ENVIRONMENT

A STRONG ECONOMY

A SOLID CITY INFRASTRUCTURE

AFFORDABLE AND SAFE HOUSING
How to improve a person’s healthy years

**Social Determinants of Health:** 80% - 90% of factors

- **Clinical Care 20%**
  - Access to Care
  - Quality of Care

- **Health Behaviors 30%**
  - Tobacco Use
  - Diet & Exercise
  - Alcohol & Drug Use
  - Risky Sexual Behavior

- **Physical Environment 10%**
  - Air & Water Quality
  - Housing & Transit

- **Social & Economic 40%**
  - Education
  - Employment
  - Income
  - Family & Social Support
  - Community Safety

* Figure adapted from County Health Rankings model
U.S. healthy years are affected by these trends

Trends working in our favor
• Lower smoking rates in adults
• Increased physical activity in adults
• Improved dietary habits in adults and youth
• Lower total cholesterol in adults and youth
• Improved blood sugar in adults

Trends working against us
• Increases in blood pressures
• Lower physical activity in youth
• Increases in BMI among adults and youth
• Worsening overweight/obesity in adults and youth
Social factors and location influence our health

50 million Americans have to choose between paying rent and purchasing medicine, healthy foods and medical care.

26 million Americans live without access to healthy foods.

7.3 million people who suffer from cardiovascular disease are uninsured.
EXAMPLE: ACCESS TO HEALTHY FOOD CAN IMPACT A FAMILY’S HEALTH.
AVERAGE LIFE EXPECTANCY

ST. LOUIS

18 YEAR DIFFERENCE IN LIFE EXPECTANCY
The need around social determinants

• Continue our support for affordable, accessible and quality health care.

• Keep advocating for access to healthy food for everyone in America, especially kids.

• Ensure everyone has safe places to be physically active.

• Support partners in housing, banking, education and employment.

• Invest in more research.

• Continue our community transformation work.
Individual Health Factors
- Tobacco & Nicotine Use
- Physically Inactive
- Diabetes, Obesity & Cholesterol
- Depression, suicide & substance abuse

Social Determinants of Health
- Lower income & poverty
- Education
- Unemployment
- Housing inequities
- Transportation
- Food insecurity

Barriers to Medical Care
- Rural hospitals struggle
- Hospital distance
- Lack of outpatient & post-acute care
- Health care hiring
- Uninsurance
Health equity is better

Equality

Equity
Well-being

Well-being is more than just the absence of disease. It includes:

• Being satisfied with life
• Not being overly depressed or anxious
• A feeling of fulfillment
• Being able to function well

Even before COVID-19, 4 in 10 Americans were struggling or suffering with low well-being.

Those with lower well-being are more likely to have a higher risk of cardiovascular disease or other illness.

Figure: People’s perception of their well-being, United States, 2017
Opportunities to Engage Employees & Communities
Healthy For Good

Healthy For Good inspires individuals to create lasting change in health and life, one small step at a time.

We focus on four key areas:

- EAT SMART.
- ADD COLOR.
- MOVE MORE.
- BE WELL.
Improving Health

Check. Change. Control. & Target: BP

Nearly 86 million
Americans have high blood pressure.

500,000 +
People have participated in
Check. Change. Control.
program to lower their blood pressure

Check. Change. Control.

40% of Americans have high cholesterol.

Our goal is to move
9 million
Americans to healthier cholesterol levels by 2020.

Heart-Check Mark

More than 900 products carry the Heart-Check mark
We’re working alongside the American Diabetes Association and others to combat the growing threats from diabetes and cardiovascular diseases.

30 million American adults have diabetes, including 7.2 million who are undiagnosed.

Cardiovascular disease is the leading cause of death For people living with type 2 diabetes.
Together to End Stroke

Every 40 seconds someone has a stroke.

**We Prevent Stroke:** by empowering Americans to live healthier lives.

**We Treat Stroke:** by empowering Americans to live healthier lives and protect their brains.

**We Beat Stroke:** by enhancing support for survivors, loved ones and caregivers.
### You’re the Cure - Advocacy

<table>
<thead>
<tr>
<th>Number</th>
<th>Description</th>
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<tbody>
<tr>
<td>3.8 million</td>
<td>Babies are screened for congenital heart defects.</td>
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<tr>
<td>210 million</td>
<td>Americans live in smoke-free communities.</td>
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<tr>
<td>2.5 million</td>
<td>Students are trained in CPR every year.</td>
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</table>
What can employers do?
The workplace is an ideal setting to engage adults in health and wellbeing promotion.
AHA’s CEO Roundtable

Leadership Learning Collaborative: 45 of nation’s largest employers with >11m reach
Traditional Wellness Programs

There has been a shift from “wellness” (physical and mental health) to holistic “wellbeing” (addressing the broader context)
Comprehensive Design

Percent of companies that have comprehensive wellbeing programs: Rose from 6.9% in 2004 to 17.1% in 2017.

- **Health Education**: Skill development and lifestyle behavior change along with awareness building
- **Supportive Environments**: Social and environmental policies promoting healthy behaviors
- **Wellness Screenings**: Integrating wellness into benefits, HR, and safety initiatives
- **Linkages**: Links between health promotion and related programs like EAP

Source: Results of the Workplace Health in America Survey A Linnan et al. AJHP (2019).
Life’s Simple 7® Journey to Health™

Workplace Health
We work with thousands of employers to help them improve the health of their workplace and their workforce.

An integrated solution with one-stop shopping:
✓ A simple way for employers to target and implement best-practice strategies for improved health.
✓ Easy-to-use online aggregate data reporting to see the health of your workforce.
✓ Seamless data flow from health screenings to health assessments to the Workplace Health Achievement Index.
✓ Opportunity for national recognition from the American Heart Association.
Workplace Health Achievement Index

- **Structure & Process**
  1. Leadership
  2. Organizational Policies & Environment
  3. Communications
  4. Programs
  5. Engagement
  6. Community Partnerships
  7. Reporting Outcomes

- **Performance**
  - Life’s Simple 7®
    - My Life Check®
    - AHA Health Screening Services w/ My Life Check Enhance
  - Aggregate Data Upload

"Workplace culture of health" Do we have a healthy workplace?

Do we have a healthy workforce?
Case Study

- **Business:** Insurance
- **Founded:** 1956

The Starr Group offers a comprehensive approach to supporting the health of its employees with resources, regular health events and ongoing opportunities for employees that include:

- Annual biometric testing and health risk assessments: These results determine aggregate areas of risk, which informs wellness programming.

- Health coach review and ongoing health coaching: Anyone who scores below “Good” on the annual biometric testing, or who is considered to be at a pre-disease state, is required to have individual health coaching to be eligible for a reduced medical premium.

- Lunch and Learns and challenges: Approximately 15 to 18 Lunch and Learns and six to eight challenges each year focus on providing tools and education to help minimize the primary areas of risk for the group, which include sedentary lifestyle, BMI, high cholesterol, hypertension, diabetes, breast cancer, accidents and injuries.

  - Lunch and Learn topic examples include:
    - Eat Right for Life
    - Preventable Diseases
    - Diabetes Prevention
    - Stroke Awareness
    - Healthy Cooking Demo
    - Dance Your Way to a Healthy Heart
    - Meditation Techniques
    - CPR

  - Challenge examples include:
    - Healthy Cooking Challenge
    - 12 Week Step Equivalent Challenge
    - Rest and Restore
    - Gratitude Challenge
New Approach: Shared Value

Creating Shared Value = Competitive Advantage Through Social Impact
What Affects Community Health? County Health Rankings Model

Source: County Health Rankings; https://www.countyhealthrankings.org/
Case Study: Food Insecurity

Business: Manufacturer of organic packaged foods
Founded: 1987
Sales: $200m annually
Employees: < 1,000
Community: Portland, OR
Community mission: “We believe that everyone deserves access to delicious, healthy foods”

Social Factor: Poverty and Food Insecurity

Internal Strategy:
• Created community store to provide company products at cost
• Provided all new employees with $75 food voucher to purchase food

External Strategy:
• Discover that 81% of a local elementary school were too hungry to learn
• Employees volunteer to pack food boxes to provide free meals (100k in 2017)
• Partnered with Oregon Food Bank to provide meals to food insecure families ($1m in food donated)

OREGON FOOD BANK (OFB) PRODUCT

CASES OF FOOD DONATED

2017 37,185 CASES
2016 24,948 CASES

NOURISH EVERY BODY (NEB) PROGRAM

MEAL BOXES PREPARED

2017 14,751 MEAL BOXES
2016 12,780 MEAL BOXES

2017 TOTAL MEALS DONATED (Intentional)
533,382 (OFB) + 132,729 (NEB) = 666,111 meals
Froedtert is latest health care system to target $15 minimum wage

Kaiser Permanente will donate $5.1 million to help homeless people with disabilities find stable housing in 2020

Facebook Matches Google’s $1B Housing Donation

Facebook is donating $1 billion during the coming decade for California affordable housing, on the heels of Google’s announcement earlier this year of a $1 billion housing stipend to help with the affordability crisis.

By Lisa Brown | October 24, 2019 at 04:00 AM
Determinants vs. Needs

Social Determinants of Health
• A wider set of forces, *systems and structures* that shape the conditions of daily life
• E.G. food *policy*, housing *policy*
• Society-level and community-level

Social Risk Factors
• Adverse *social conditions* associated with poor health
• E.g. food insecurity, housing instability
• Community-level

Social Needs
• *Immediate needs* based on poor health
• E.g. Lack of sufficient food, lack of stable housing
• Individual level

*Source*: Adapted from Green and Zook, Health Affairs, 2019
## Employer Programs & Approaches

<table>
<thead>
<tr>
<th>Root Cause</th>
<th>Worksite Interventions</th>
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<tbody>
<tr>
<td>1. Un(under)employment</td>
<td>Change management / downsizing policies</td>
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<tr>
<td>2. Poor built environment</td>
<td>Complete streets / food financing partnerships</td>
</tr>
<tr>
<td>3. Food insecurity</td>
<td>Subsidized healthy foods / Food Bank partnerships</td>
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<tr>
<td>4. Housing insecurity</td>
<td>Community housing initiatives</td>
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<tr>
<td>5. Adverse early life experiences</td>
<td>Stress and resiliency tools</td>
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<tr>
<td>6. Social exclusion</td>
<td>Social support programs (employee resource groups)</td>
</tr>
<tr>
<td>7. Poverty / income</td>
<td>Living wage policy / student debt relief programs</td>
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<tr>
<td>8. Poor education</td>
<td>Worksite training / career development programs</td>
</tr>
<tr>
<td>9. Discrimination</td>
<td>Diversity and inclusion</td>
</tr>
<tr>
<td>10. Gender inequality</td>
<td>Flexi-time for women and men; female leadership and mentoring programs</td>
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</table>

*Source: Adapted from Compton & Shim (2015). The Social Determinants of Mental Health.*
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<tr>
<th>Community Health - Employer Strategies and Tactics</th>
<th>Percentage</th>
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<tbody>
<tr>
<td>Social events in the community</td>
<td>75%</td>
</tr>
<tr>
<td>Mission or business objectives include references to improving community health</td>
<td>45%</td>
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<tr>
<td>Technological improvements and infrastructure development</td>
<td>43%</td>
</tr>
<tr>
<td>Health fairs for disease prevention e.g. blood pressure check ups etc.</td>
<td>39%</td>
</tr>
<tr>
<td>General education programs e.g. tutoring, college counseling</td>
<td>23%</td>
</tr>
<tr>
<td>Early childhood development programs</td>
<td>21%</td>
</tr>
<tr>
<td>Assess the impact of your health and well-being programs on community health</td>
<td>21%</td>
</tr>
<tr>
<td>Affordable housing development</td>
<td>10%</td>
</tr>
</tbody>
</table>

Sample = 1,017 national companies

Source: Kyle et al. Milbank Quarterly, 2019
Role of Employers

1. Promote leadership awareness of social needs and health equity
2. Use data to understand employee challenges and design interventions
3. Train all employees on health equity
4. Listen and learn about employee financial challenges
5. Review employee pay schedules based on work location
6. Review employee health care benefit offerings
7. Help employees become financially literate and self-sufficient
8. Promote higher education attainment and additional skill building
9. Require more of Employee Assistance Programs
10. Measure and evaluate employee health equity annually
11. Address social risks through community-based initiatives
12. Advocate for social determinants of health policies at local, state and federal level

Source: Adapted from Osmick and Wilson, *The Art of Health Promotion*, February 2020
Key Take Aways:

• The workplace is an **ideal setting for health and wellbeing promotion**
• Social risk factors create immediate social needs for employees
• Larger social determinants of health impact community health
• Employers have an opportunity to work across levels using different strategies
• Employers can address **individual social needs** through **company policies, programs, and benefits design**
• Employers can **partner with community organizations** to address social risk factors that negatively impact health and productivity
• Employers can use their influence to advocate for local, state, and federal policies to address **social determinants of health** that can promote community health and well-being
Thank you.

Questions?

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Thank you!

www.heart.org