

North Texas Leaders Need to Consider Health and Safety in All Policies

By Shelli Stephens Stidham, MPA
Injury Prevention Center of Greater Dallas
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Medical care is at the center of a national debate about economics and health. However, medical care accounts for only 10 percent of the factors that contribute to health and safety, while environment and behavior shape 70 percent. Environmental conditions include community design, transportation systems, access to fresh fruits and vegetables, and safe and affordable housing. For North Texas and the nation to achieve a safe, healthy population and productive economy, it's necessary that public and private institutions beyond just those in the public health and medical arenas put health and safety at the center of decision-making. All sectors of society, including education, government, air quality, housing and transportation, should develop a "health and safety in all policies" approach.

At the forefront of virtually every national election platform are the economy and health care. Unemployment rates are examined, discussed and debated as officials ponder how to stimulate the economy. Conversations about health care are often focused on the cost of care or treatment for people who are sick or injured. Regardless of political affiliation, people agree that good health is good for business, as well as all sectors of society. Poor health diverts attention from other important issues on local, state and national levels.

Businesses thrive with healthy employees and suffer when employees or their families are unhealthy.^{1,2} Employees who are ill or injured will either take sick days, missing work altogether, or show up at work to avoid losing wages, reducing productivity.³ When a caregiver has to miss work to care for a sick family member, it also contributes to lost productivity. The largest health care costs are due to chronic illness, such as heart disease, stroke, diabetes and cancer. More than half of Americans are living with one or more serious, preventable chronic diseases, many are attributable to increased rates of obesity.^{4,5} Rising obesity rates have significant health consequences, contributing to increased rates of more than 30 serious diseases. These conditions create a major strain on the health care system. More than one-quarter of health care costs are now

related to obesity.⁶ Full-time workers in the U.S. who are overweight or obese and have other chronic health conditions miss an estimated 450 million additional days of work each year compared with healthy workers—resulting in lost productivity of more than \$153 billion annually.⁷

Obesity not only impacts health care costs but also has consequences for other industries. One study found that the U.S. airline industry consumed 350 million more gallons of fuel in 2000 at an extra cost of \$275 million annually due to an increase in the average weight of passengers from 1990 to 2000.⁸ Another study found that passenger weight gain accounted for an additional 1 billion gallons of fuel consumed by airlines per year between 1960 and 2002.⁹

Likewise, obesity has serious implications for Texas. A report by the State Comptroller found that in 2009, obesity cost Texas businesses an extra \$9.5 billion, compared with \$3.3 billion in 2005.^{10,11} In 2009, more than \$4 billion of that cost was for health care, \$5 billion was for lost productivity and absenteeism, and \$321 million was for disability. If current trends continue, the estimated the cost could reach \$32.5 billion by 2030, according to the report.¹²

While adult obesity rates have doubled nationally since 1980, from 15 to 30 percent, what may be more alarming is that childhood obesity rates have more than tripled.¹³ Texas has fared even worse—the 2007 National Survey of Children’s Health found that 20.4 percent of Texas children ages 10-17 were obese, compared with 16.4 percent for all U.S. children.¹⁴ Research shows that children who feel well and are physically active perform better academically, which can lead to greater success in college and in the job market.¹⁵

Healthy Also Means Safe

A factor that needs to be considered in discussions about health is *safety*. For our citizens to be healthy, they must be safe and protected from unintentional injuries and violence in homes, schools, workplaces, and recreational areas and on roads. Injuries and violence are significant public health and safety problems—they are the leading causes of death in Texas and the U.S. for persons ages 1–44—and extort a heavy burden on society through premature deaths and disabilities, pain and suffering, health care costs, rehabilitation costs, disruption of quality of life for families, and disruption of productivity for employers. Even so, injuries and violence are often overlooked or absent in conversations about health.^{16,17,18}

Furthermore, injuries and fear of injuries increase the rates of chronic disease and diminish the effectiveness of chronic disease prevention strategies. The Adverse Childhood Experiences (ACE) study, an ongoing collaboration between the Centers for Disease Control and Prevention and Kaiser Permanente’s Health Appraisal Clinic in San Diego, showed that short- and long-term outcomes of child abuse, neglect and exposure to other traumatic stressors can lead to a multitude of health and social problems, including increased risk for heart, lung and liver disease in adulthood as well

as unhealthy behaviors, including risky sexual behavior, smoking, illicit drug use and alcohol abuse.¹⁹ The initial phase of the ACE Study was conducted from 1995 to 1997. The study is continuing to track the more than 17,000 baseline participants.

Other linkages exist between chronic disease and injury later in life. For example, older adults with osteoporosis are more likely to break a bone after suffering even a minor fall. In 2007, hospital admissions for hip fractures numbered 281,000 among people age 65 and older.²⁰ Older adults who are hospitalized with a hip fracture are frequently discharged to a nursing home and remain there for at least a year.²¹ One out of five hip-fracture patients dies within a year of their injury.²²

For individuals and families to be safe and healthy, the focus needs to be on more than access to quality medical services and a larger public safety workforce (police, firefighter, coast guard, etc.). The focus needs to be on *quality primary prevention*. Rather than the dissemination of information in brochures and public awareness campaigns, quality primary prevention is a comprehensive, community-level approach that focuses on changing environmental conditions that contribute to diseases and injuries.²³ Improving community conditions reduces the likelihood of anyone getting sick or injured and is also critical to maintaining the health and enhancing the recuperation of those who are currently sick or injured.

Investing in prevention is the most effective way to improve health and safety. Quality primary prevention reduces health care costs and improves the productivity of the American workforce so that it can be competitive with the rest of the world.

While both medical services and law enforcement are important, they do not address the underlying cause of disease or injuries and violence. Nonmedical 20th century developments such as safer food and water, improvements in sanitation and product designs, and advances in immunizations have had the greatest impact on health and life expectancy.²⁶ Therefore, investing in prevention is the most effective way to improve health and safety. Quality primary prevention reduces health care costs and improves the productivity of the American workforce so that it can be competitive with the rest of the world.²⁷ It is important, however, to understand what does and does not constitute quality prevention. Often prevention is relegated to a message in a brochure or a few brief moments in a medical visit. Yet these approaches are not quality prevention efforts. Human behavior is complicated, and awareness of risk factors alone does not always lead to changes in behavior, particularly if there are environmental barriers in the community that make following through on healthy behaviors more challenging.^{28,29}

A Broader Focus

To achieve a healthy, thriving state and national economy, the focus must be expanded beyond one-on-one treatment approaches to include strategies and efforts that make communities healthy and safe, according to the advocacy group Healthy Eating Active Living Convergence Partnership. The partnership, formed in 2006, is a collaborative of

fundamental goal of policy and environmental change is aimed at helping reinvent communities of healthy people living in healthy places.³⁰ Larry Cohen, founder and executive director of Prevention Institute and a strategic adviser to the partnership, wrote in a March 2011 column in the *Huffington Post* that the focus on providing more efficient care in the physician's office and hospital, needs to shift to also include keeping people out of the physician's office and hospital.³¹

Research shows that modifying the community environment is more effective and long-lasting than trying to change individual behavior. These environmental modifications can result in health and safety improvements in relatively short periods of time. An example of this is the dramatic decline in motor vehicle-related deaths over the past 50 years in spite of the huge increase in the number of automobiles and automobile travel. The epidemiologic studies of William Haddon revealed that changes in vehicle and road design could reduce deaths. His studies got the attention of congressional leaders and led to meaningful legislation that forced improvements in automobile design.³² In 1966, passage of the Highway Safety Act and the National Traffic and Motor Vehicle Safety Act authorized the federal government to set and regulate standards for motor vehicles and highways, which resulted in changes in both vehicle and highway design.^{33,34} Vehicles were built with new mandatory safety features.^{35,36} Roads were improved by better marking of curves (edge and center line stripes and reflectors), use of breakaway signs and utility poles, improved illumination and addition of guardrails and barriers separating oncoming traffic lanes.^{37,38} By 1970, only four years later, motor vehicle-related death rates had already decreased.³⁹ Enactment and enforcement of laws requiring seat belt use, child safety-seat use and motorcycle helmet use, as well as laws against driving while intoxicated (DWI) and underage drinking, have led to further reductions in traffic-related deaths.^{40,41} Seat belt use increased from 58 percent in 1994 to 86 percent in 2012, while motor vehicle occupant death rates decreased from 9.41 per 100,000 population in 1994 to 3.25 in 2010.^{42,43}

For North Texas and the nation to achieve a safe, healthy and productive society, it is necessary for public and private institutions beyond just those in the public health and medical arenas to put health and safety at the center of decision-making because so many of their decisions significantly impact health.⁴⁴ This includes a range of disciplines, such as architects, city planners, transportation engineers, insurers, employers, the home loan and banking sectors, housing, public safety, public works and private businesses, and others working in partnership with communities. Businesses, including banks, grocery stores, retail stores, manufacturers, restaurants, the media and service suppliers, have a major influence on health and safety. The decisions they make—such as where to site grocery stores and what to stock on the shelves—influence health behaviors and health outcomes. For example, a marketing study conducted in 1974 by Ronald Curhan found that doubling shelf space in the produce section of grocery stores increased sales of lettuce and tomatoes by 28 percent, apples and oranges by 44 percent, and squash and eggplant by 59 percent.^{45,46}

School officials decide where to locate schools, which has an impact on whether children can walk or bicycle to school safely. Businesses, restaurants and multifamily

housing owners decide where people are allowed to smoke. Zoning commissions decide where alcohol outlets are located. Schools and businesses decide what foods and beverages are sold in vending machines. The media decide whether violent or sexual images are shown on television or in movie theaters. State and local governments decide whether residential sprinkler systems should be installed in newly constructed homes. All of these decisions affect health and safety and, consequently, have an impact on the local economy. These decisions can set expectations, provide incentives, model behavior, serve as an example for other organizations, inform related policy, build awareness and buy-in and affect norms.⁴⁷

Most North Texans, and most Americans, live in an environment that encourages obesity and its resulting conditions. To illustrate, fast-food restaurants that serve high-calorie, low-nutrition foods are easily accessible. Additionally, lack of bicycle and pedestrian paths contribute to dependence on motor vehicle travel. Yet, public health research has shown that people are more likely to exhibit healthy behaviors—eat healthier foods, increase physical activity, and quit smoking—when such choices are easier.⁴⁸ If people have safe, accessible places to walk and bicycle that connect them to frequent destinations, they will be less reliant on automobiles and be more physically active. If they have easy access to healthy, affordable food choices, they will eat healthier. If children live in safe, stable and nurturing homes that are free from violence, they are more likely to grow up to be healthy and productive citizens.⁴⁹

Programs in Action

Comprehensive, multifaceted approaches to create healthy and safe communities are already paying dividends in Texas. San Antonio has implemented an ambitious antiobesity program, funded by the Department of Health and Human Services (HHS) initiative Communities Putting Prevention to Work. The program is funding new farmers' markets around the city, public-use bicycles, and playgrounds and equipment.⁵⁰

Additionally, regional supermarket chain HEB developed and implemented a wellness program for its employees that has helped the company keep health care cost increases well below the national average. A similar wellness program developed by the city of Hurst for employees, retirees and their families reduced absenteeism among employees nearly 40 percent between 2007 and 2009.⁵¹ Texas was also one of the first states to regulate competitive foods, limiting access to unhealthy products sold on school campuses that are not part of the school meal program.⁵²

Several elementary and middle schools have also adopted Coordinated Approach To Child Health (CATCH), an evidence-based primary prevention program designed to positively impact children's health behaviors, improve the school health environment, and influence and change school health policies and practices. Key goals are to reduce or eliminate health risk factors and modify students' risk-related behaviors.⁵³ The CATCH Program in El Paso is making significant progress in preventing the onset of overweight and obesity among Hispanic children—results show a 13 percent decrease in the prevalence of obesity among El Paso fourth graders.⁵⁴ Additionally, a study in the February 2010 edition of *Obesity* that focused on Travis County (which includes Austin)

showed an 8.3 percent decrease in obesity prevalence among children enrolled in low-income minority schools one year following CATCH implementation.⁵⁵

Changes in the health care landscape have led to prevention funding, affording additional opportunities for communities. For example, in 2010, after *Bicycling* magazine named Memphis, Tenn., one of the worst cities in the U.S. for cyclists, Mayor A.C. Wharton Jr. sought to change that negative distinction. With stimulus funds and money from other sources, the city went from having a mile and a half of bike lanes in 2008 to approximately 50 miles of dedicated bike lanes and 160 miles of trails and shared roads in 2013. Memphis officials said that "... city planners are now using bike lanes as an economic development tool, setting the stage for new stores and enhanced urban vibrancy."⁵⁶ A 2011 study by the University of Massachusetts supports the economic development potential. It found that building bike lanes creates more jobs—about 11 per \$1 million spent—than any other type of road project.⁵⁷ Therefore, an initiative to modify the environment to increase walking and biking not only improves health but also benefits local businesses because more people are likely to visit the shops.

Some states, including Minnesota, have sought to modify behavior by appropriating funds for environmental changes rather than educational strategies. Minnesota's Statewide Health Improvement Program (SHIP) backs community projects to build sidewalks and bike lanes instead of funding short-term programs focused on weight loss.⁵⁸

In addition, federal funds are available through such programs as Communities Putting Prevention to Work to support communities' evidence-based prevention strategies. The HHS program is designed to reduce risk factors, prevent/delay chronic disease and promote wellness in children and adults. The initiative, launched in 2009, seeks to expand the use of evidence-based strategies and programs, mobilize local resources at the community level and strengthen the capacity of states. It focuses heavily on policy and environmental change.⁵⁹

Communities may also access federal Transportation Alternatives Program (TAP) funds to expand travel options, strengthen the local economy, improve the quality of life and protect the environment. TAP was established by Congress in 2012 and is funded through a proportional set-aside of the core Federal-Aid Highway Program. Eligible activities include pedestrian and bicycle infrastructure and safety programs, a recreational trail program and the Safe Routes to School program.⁶⁰

North Texas Efforts

The city of Dallas is creating safer and healthier neighborhoods through several programs, including the Complete Streets Initiative, launched in 2011. "Complete streets" serve the needs of all transportation users, including pedestrians, bicyclists, people with disabilities, transit riders and automobile users, via a seamless network of streets that connects schools, homes, businesses, employment centers, recreation areas and other destinations. In conjunction with the initiative, the Dallas Bike Plan was

updated in 2011 to create a bikeway system that connects all areas in Dallas and adjacent jurisdictions.

Efforts are also underway in North Texas to re-envision the region's approach to health and safety and cultivate meaningful change. In February 2012, North Texas leaders and organizations launched an initiative entitled "It Takes a Village" to enhance understanding of the value of primary prevention and how environmental and policy approaches lead to better health outcomes. The intent is to inspire long-term improvements in health, wellness and safety and promote economic development in the region by educating stakeholders about the importance of prevention through presentations and community events. The "It Takes a Village" effort—now a formal partnership—is led by the Federal Reserve Bank of Dallas, Parkland Health and Hospital System, Injury Prevention Center of Greater Dallas, Health Industry Council, Dallas/Fort Worth Hospital Foundation Council, Dallas County Health and Human Services, United Way of Metropolitan Dallas and Tarrant County Health Department.

It's Time for a 'Health and Safety in All Policies' Approach

National and international agencies and organizations, including the World Health Organization, Association of State and Territorial Health Officials, U.S. Department of Housing and Urban Development and California Health In All Policies Task Force are encouraging cross-sector leaders to work together to develop a "health in all policies" approach to address prevention of health and safety issues.⁶¹⁻⁶⁴

Health care has been evolving away from a disease-centered model and toward a patient-centered model. Likewise, all sectors of society should move beyond their "silo" thinking to consider the needs of all citizens. Texas communities have opportunities to design safe and healthy environments by encouraging government, businesses, the media and others to make responsible decisions that will influence whether all citizens have the freedom to live to their full potential. Community leaders shouldn't sacrifice long-term health and safety for short-term profits. Health and safety need to be considered in **all** policies, which will in turn provide a favorable outcome for all Texas citizens, organizations, agencies and businesses.

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