



100 Million Healthier Lives

Why focus on the well-being of people and places for everyone?



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Health Outcomes as a System Property That Begins in Childhood

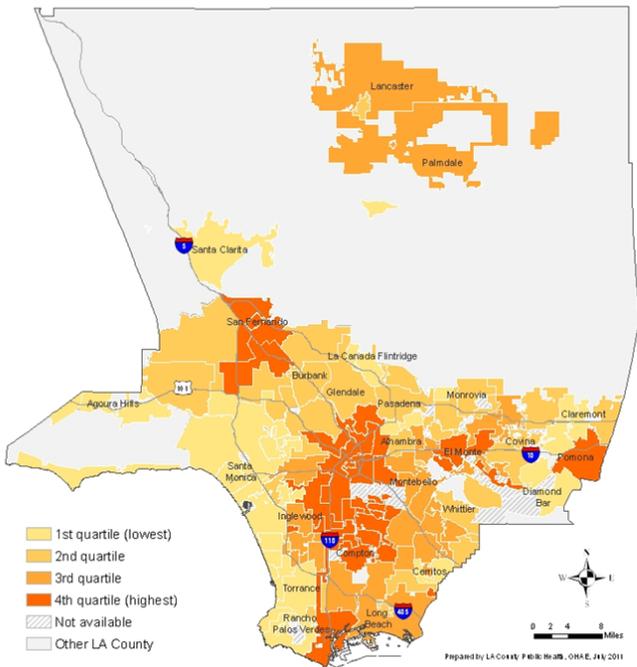


<https://wsvn.com/news/us-world/color-blind-boys-scheme-to-get-same-haircut-to-trick-teacher/>

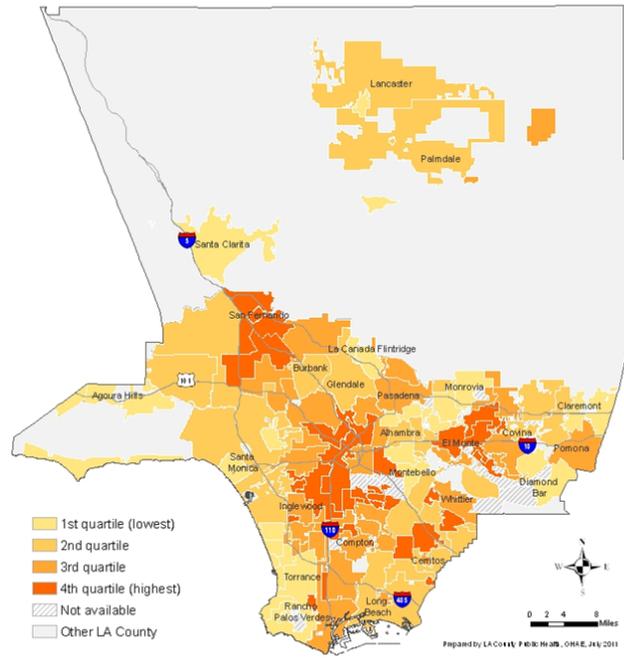
Health and Social Inequity are Interconnected 3



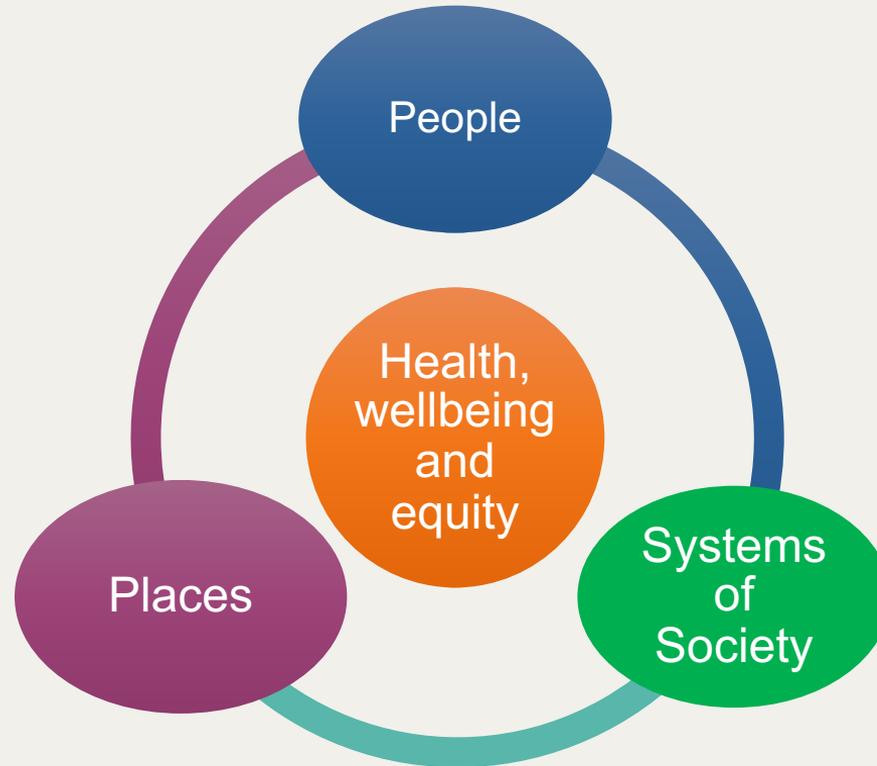
Economic Hardship Index by City/Community, Los Angeles County, 2000



Prevalence of Childhood Obesity by City/Community, Los Angeles County, 2005



Interrelationship between the health, wellbeing and equity of people, places and systems of society





Whose Lives Are Getting Better Because We're Here?



Would they agree?

If not, what will we do differently?

Who isn't thriving? What would it take for that to change?

What systems are perpetuating poor outcomes?

How can we create new solutions and better investments together?



**The Health Advocates
In-Reach and Research
Campaign (HAIR)**

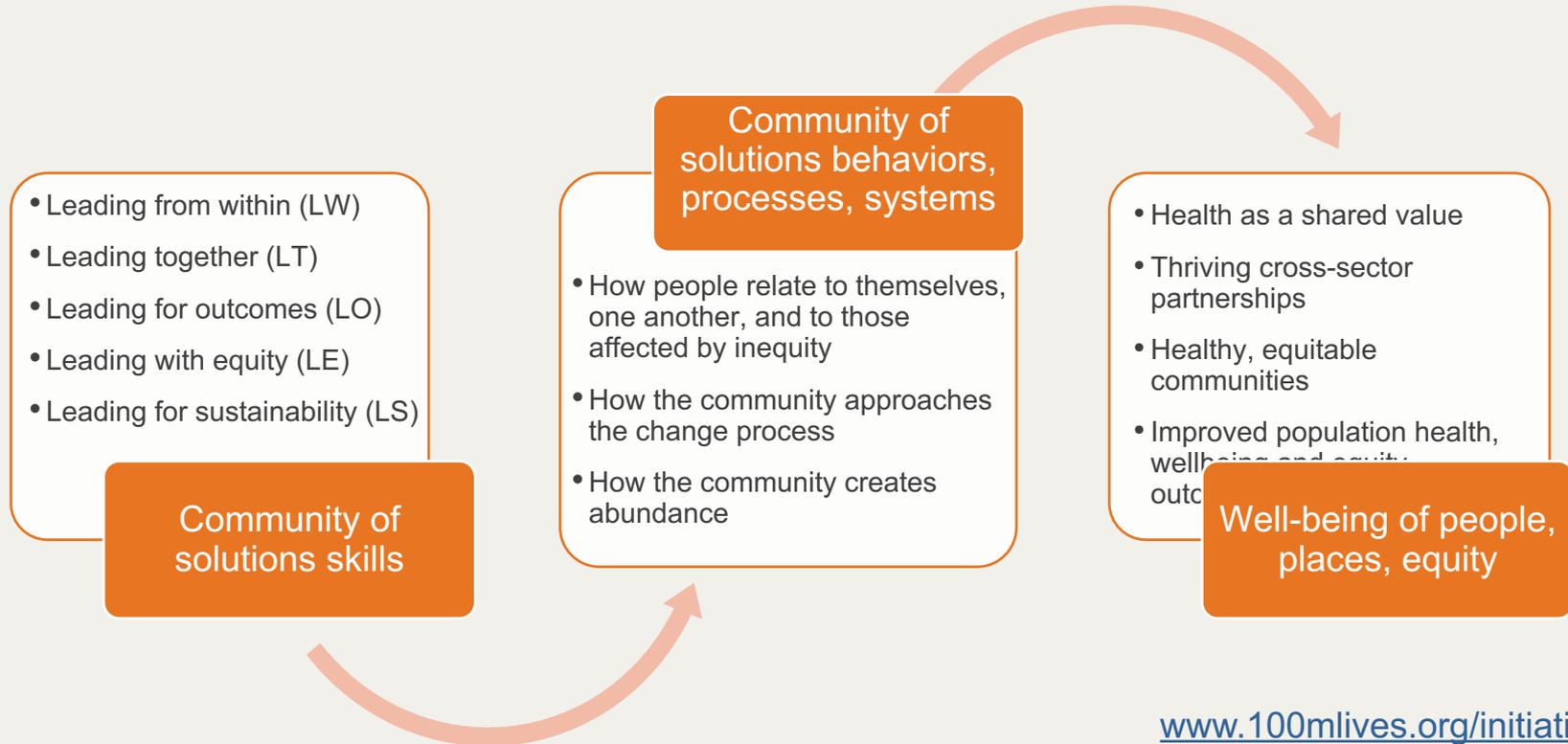


Communities of Solutions



St Niri

Community of Solutions: Creating Well-being Requires Relationships and System Change



Relationship and system change → thriving

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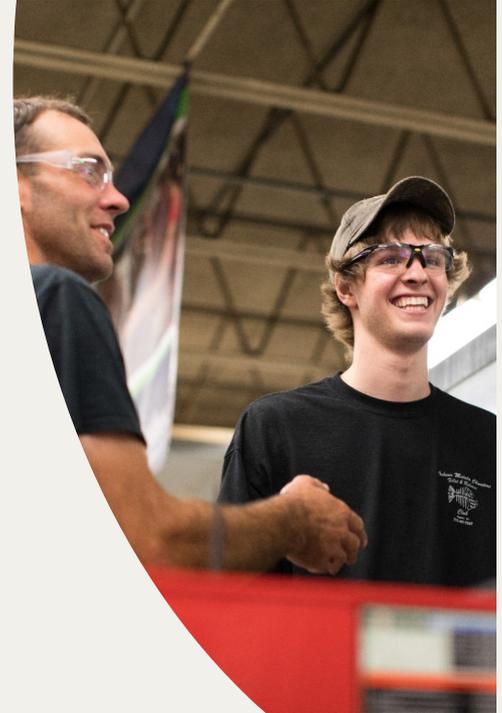
Algoma, Wisconsin: Eliminating hunger, improving employee and community well-being, building connectedness



Aim statement

(What are you trying to accomplish? By when? Who are you doing this for? Try to make this 1 sentence.)

We want to see each grocery store in Algoma donate 30% of their ugly fruits and vegetables to Algoma Elementary School by the end of May.



People's perception of their well-being



Common Measures for Adult Well-being

Best Possible



Worst Possible

1. Please imagine a ladder with steps numbered from zero at the bottom to ten at the top. The top of the ladder represents the best possible life for you and the bottom of the ladder represents the worst possible life for you.

Indicate where on the ladder you feel you personally stand right now.

0 1 2 3 4 5 6 7 8 9 10

2. On which step do you think you will stand about five years from now?

0 1 2 3 4 5 6 7 8 9 10

3. Now imagine the top of the ladder represents the best possible financial situation for you, and the bottom of the ladder represents the worst possible financial situation for you. Please indicate where on the ladder you stand right now.

0 1 2 3 4 5 6 7 8 9 10

- % people thriving
- % people struggling
- % people suffering
- % people with hope

Age
Sex
Race/Ethnicity
Education
Zip code
Veteran status

- Two simple questions
- Administered 2.7 million times, highly validated
- Relate to morbidity, mortality, cost
- Useful for risk stratification
- Work across sectors
- Help us see the whole person

Well-being in the Nation Measures



Explore data about every community in the United States.

Well-being of
People



Well-being of
Places



Equity



Well-being In the Nation (WIN) Measurement Framework (NCVHS Framework)

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1. Core measures

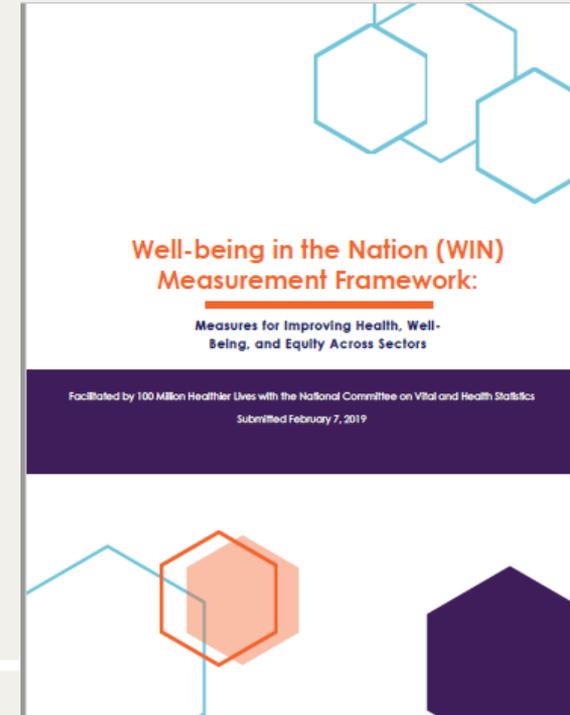
- Well-being of people
- Well-being of places
- Equity

2. Leading indicators

- 12 domains related to the drivers of the well-being of people, places, and equity (housing, transportation, meaningful work, community belonging, etc)

3. Full flexible set (developmental measures)

- 12 domains and associated subdomains



Well-being In the Nation (WIN) Core Measures

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1. Wellbeing of people

- People's perception of their well-being
- Life expectancy

2. Wellbeing of places

- Healthy communities index (USNWR/CHRR)
- Child poverty

3. Equity

- Differences in subjective well-being
- Years of potential life gained
- Income inequality, graduation rates
- Differences by demographic variables (race, place, gender, educational level, language, etc.)



Ways communities are using these measures in their work



1. Be in dialogue and mutual discovery together about what improves well-being → acting with courage together in the face of uncertainty
2. Better care for a whole-person (health care, employers, social services)
3. Better plan for and invest in creating thriving people and communities
 - a. To identify what groups aren't thriving at the level of the community, and together, plan what it would take for that to change
 - b. To risk stratify the population
 - At the unit or practice level to rapidly diagnose who needs what and plan for supports
 - At the community planning level
 - c. To make choices about where and how to invest, how to organize oneself, and what policies to change to address the structural determinants of health
 - d. To evaluate and improve initiatives to improve well-being
 - e. To monitor the well-being of a community or a group of people over time as part of community and state needs assessments

Improving Mental Health and Well-being in Delaware

Suffering/highest risk: People who are actively cycling between emergency rooms, police, corrections, homeless services and treatment services with mental health/addictions issues

Struggling: Medium/Rising Risk: youth in the foster care, juvenile incarceration and in active mental health/addictions who are about to turn 18

Thriving/everyone: The community conditions for thriving in terms of mental health and well-being of everyone (access to jobs with living wages in communities with equity gaps, trauma resilience, mental health service supports, legal supports)

PEOPLE'S PERCEPTION OF THEIR WELL-BEING

How many Delaware residents are thriving? How many are struggling or suffering?

Thriving (2017)



Struggling (2017)



Suffering (2017)



Cantril's Ladder at Present: Mean Response (2017)





Health equity

Thriving Families

Address mental, physical, social and spiritual well-being of people we serve in primary care through community church hubs.

Connect patients/clients with social needs to community resources that will positively impact their health and wellbeing

- Support, participate in, and/or invest in Pathway Hubs that coordinate provision of mental, physical, social and spiritual well-being in key geographies
- Screen patients for social needs, connect them to resources/services.

Resilient Communities

Work with organizations across sectors to address health inequities that impact those we serve

- Expand policy and advocacy efforts to address social determinants of health and improve access to such determinants (water, food, housing, employment, technology, transportation, health insurance)
- Invest in strategies to address intergenerational poverty that grows the ability of individuals to take over their own success in life
- Support strategies that create access to good jobs, support economic growth, stability, and community wealth
- Partner to create communities of solutions

WELL-BEING IN THE NATION NETWORK (WIN)



WIN NETWORK

- A partnership among organizations and regions who are striving to build a legacy of intergenerational well-being and equity.
- Focus on shifting relationships and narrative, policy and investment, measurement and improvement together.
- Creating proof points of what it looks like to weave relationships and system change together.

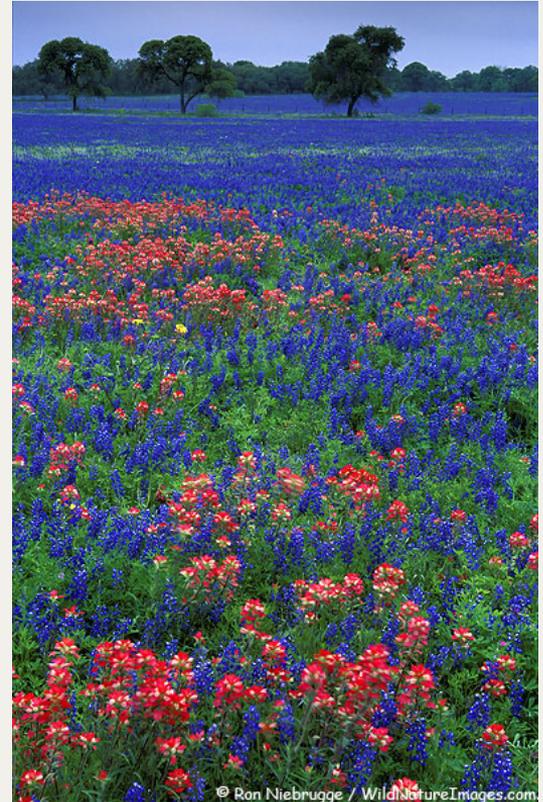




Abundance

“Abundance does not happen automatically. It is created when we have the sense to choose community, to come together to celebrate and share our common store. Whether the scarce resource is money or love or power or words, the true law of life is that we generate more of whatever seems scarce by trusting its supply and passing it around. Authentic abundance does not lie in secured stockpiles of food or cash or influence or affection but in belonging to a community where we can give those goods to others who need them—and receive them from others when we are in need.”

-Parker Palmer, “Let Your Life Speak”





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