The will to act: coming home to build community again

ANNIE HALL, BOWLING ALONE, INCOME & LONGEVITY, AND RETURNING TO BIG LOVE
American HC is the best in the world.

Medicine is an art, not a science, and therefore quality and performance cannot be measured, much less systematically improved.

The key to making people healthier is to get them more access to health care. We can treat our way to health.
What people whispered in my ear here...

- The U.S. doesn’t have the best HC system in the world.—T.R. Reid
- Our system makes serious errors daily...and it doesn’t have to be that way.—Don Berwick
- More isn’t better in American HC.—Elliott Fisher
- HC should fit into people’s lives, not the other way around.—Louise Liang
- We are morally obliged to do better, and we can.—Len Nichols
Your options according to Yoda.

- Do.
- Do not.
- Try.

Source: Graphjam.com
It takes a village, but...
...it turns out, building villages is hard work
“The central idea of social capital, in my view, is that networks and the associated norms of reciprocity have value.”

Secular decline in social capital over last half of 20th century
Figure 1
Average membership rate in 32 national chapter-based voluntary associations, 1900-1997

- Mean membership rate for twentieth century
- World War I
- World War II
- Great Depression
The Association Between Income and Life Expectancy in the United States, 2001-2014

Raj Chetty, Stanford
Michael Stepner, MIT
Sarah Abraham, MIT
Shelby Lin, McKinsey
Benjamin Scuderi, Harvard
Nicholas Turner, Office of Tax Analysis
Augustin Bergeron, Harvard
David Cutler, Harvard

The opinions expressed in this paper are those of the authors alone and do not necessarily reflect the views of the Internal Revenue Service, the U.S. Treasury Department, or any other agency of the Federal Government.
Race-Adjusted Expected Age at Death vs. Household Income for Men in Selected Major Cities

Expected Age at Death for 40 Year Olds in Years

Household Income Ventile

- New York City
- San Francisco
- Dallas
- Detroit
Race-Adjusted Expected Age at Death vs. Household Income for Women in Selected Major Cities

- New York City
- San Francisco
- Dallas
- Detroit
Correlations of Expected Age at Death with Health and Social Factors
For Individuals in Bottom Quartile of Income Distribution

- Health Behaviors
  - Q1 Current Smokers
  - Q1 Obesity
  - Q1 Exercise Rate

- Health Care
  - % Uninsured
  - Medicare $ per Enrollee
  - 30-day Hospital Mortality Rate Index
  - Index for Preventive Care

- Environmental Factors
  - Income Segregation

- Inequality and Social Cohesion
  - Gini Index
  - Index for Social Capital
  - % Religious
  - % Black

- Labor Market Conditions
  - Unemployment Rate in 2000
  - % Change in Population, 1980-2000
  - % Change in Labor Force, 1980-2000

Correlation Coefficient
Correlations of Expected Age at Death with Other Factors
For Individuals in Bottom Quartile of Income Distribution
“The strong association between geographic variation in life expectancy and health behaviors suggests that policy interventions should focus on changing health behaviors among low-income individuals.”
At the end of the day, why?