What Will It Really Take to Improve Population Health?

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When Dr. Farley was first invited to speak at the JCPH Forum, he was CEO of The Public Good Projects, a non-profit organization that uses advertising messages to combat the nation’s pressing social and health problems. Little did we know that Dr. Farley would become Philadelphia’s Health Commissioner in Mayor Kenney’s new administration! Though just a few months into his new role, Dr. Farley is a big “catch” for Philadelphia. He was Health Commissioner of New York City from 2009-2014, and was known for his innovative public health policies, and advocacy, including making the city’s parks and beaches smoke-free, prohibiting price discounting of cigarettes, raising the legal sales age of tobacco to 21, and capping the portion size of sugary drinks sold in restaurants at 16 ounces. Dr. Farley is author of Saving Gotham: A Billionaire Mayor, Activist Doctors, and the Fight for Eight Million Doctors.

Speaking to a packed house, Dr. Farley began his presentation by discussing the broad population health imperative – the federal government’s requirement for hospitals to “do” population health. “Despite the fact that there is no broad consensus on what population health means...and even more so I think there is not an understanding of what it will really take to improve population health,” states Farley. This presentation is based on his thought process of what is takes to improve population health. Dr. Farley defines population health as a measurable improvement in the health of the entire population.

“We’re not in very good shape,” Farley explained, as he revealed startling data on life expectancy, health care spending, and leading causes of death in the U.S, this within the context of high costs of health care spending per capita. “If we really want improvement...we have to do something fundamentally different than what we are doing now,” states Farley.

“How do we alter our trajectory?” Farley asks. He believes that we have to start by identifying our health problems. Pointing to leading causes of death, our nation clearly has huge challenges in dealing with chronic diseases (i.e. heart disease, lung disease, diabetes, etc.). Thinking through the causes of these conditions, it is important to look at factors that affect health with socioeconomic factors (or social determinants) being the most significant. Other factors include: changing the context, long-lasting protective interventions, clinical interventions, and counseling and education.

Dr. Farley has what is refers to as a “simplified” version of determinants of health which include: health care access and quality, behavioral and environmental risks, and social determinants. Unhealthy diet is a behavioral risk that is attributed to the most number of deaths in the U.S. Smoking and high blood pressure are also responsible for a high number of deaths. What this means, explains Farley, is that these deaths are also potentially preventable.

When referring to social determinants attributed to death, Dr. Farley pleaded with the audience to get a sense of the magnitude of the problem, with individual factors such as low education, low social support, racial segregation and income inequality as being the most influential. Though improving health care access and quality and reducing behavioral and environmental risks are very important, Dr. Farley’s overall belief is that the most lives can be saved by addressing social determinants.

Dr. Farley went on to discuss the difficulty in reaching large numbers of people to change behaviors. For example, in Philadelphia it is estimated that approximately 250,000 people are smokers and 375,000 people are obese. This is a challenging problem to deal with on a one-to-one level. Classic policy approaches can be very effective, especially when it comes to smoking. Examples include taxes, smoke-free air laws/policies, marketing restrictions, and minimum age of sale. Healthy eating policies include trans fat restriction, sugary drink tax, and healthier food standards for SNAP.

Farley believes mass media is the least expensive way to reach large numbers of people and he described effective ads impacting health related behaviors. Using New York City data, he explained how media messages create social change. He showed how the consumption of sugary drinks decreased after specific ad campaigns targeted this problem. Farley emphasized that many social movements in this country have involved policy change and innovative use of mass media.

“If we want to make a measurable improvement in population health, we are going to have to address the behavioral and environmental determinants, that’s where the biggest potential payoff appears to be, and then we have to address social determinants...if we want to make differences in these determinants, we have to think big,” states Farley.

A lively discussion followed, with questions regarding Dr. Farley’s past experiences in New York City and the current hot topic of Philadelphia – the sugary drink tax. Later that day, City Council preliminarily approved a 1.5-cent per ounce tax on sugar drinks and diet sodas.

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