

The University of New Mexico

January 6, 1992

Samuel Skinner, Chief of Staff
Office of the President
The White House
Washington, DC 20515

Dear Mr. Skinner:

Inasmuch as there is so much current interest regarding the issue of health care access and health care costs, I am taking this opportunity to offer a few comments.

"Health care" as a term is not well understood, nor does it have a common definition. The enclosed continuum from a recent report I completed under contract with the U.S. Public Health Service is commonly approved, however, by most health professionals. This continuum indicates examples of "health care" issues, and also lists examples of disease prevention and health promotion (public health) issues, and some major issues of environmental health science and protection. The term "health care" refers to those diagnostic and treatment services designed to treat or rehabilitate a patient under care. Public health is the art and science of preventing disease and injury, prolonging life, and promoting health and efficiency through organized community effort.

Basic public health initiatives have done more to enhance the status of the public's health than all the collective actions taken in the field of health care. Public health, however, lacks the glamour associated with health care and does not compete well for funding. Public health programs are woefully under funded throughout the nation. Ninety-three and six-tenths percent of all health dollars are for health care, 3.5% for research, and only 2.9% for public health. The nations health demands greater attention through public health services (Parenthetically, 6% for prevention

would provide commitment to the adage that an ounce of prevention is worth a pound of cure.) Improved public health services such as identified by the Public Health Service in the document "Healthy People 2000" are essential not only to enhance the health status of Americans, but to slow the escalating costs of health care. Opportunities relating to prevention of the 10 leading causes of death such as heart disease, cancer, accidents, hypertension, chronic obstructive pulmonary disease, influenza/ pneumonia, diabetes, cirrhosis of the liver, suicides, homicides, and congenital anomalies await the attention of public health. We must have a commitment to preventing damage to the human machine in balance with efforts to repair the human machine after it is worn or damaged.

Most of the groups concerned about escalating health care costs continue to dissect, analyze, evaluate and tinker with the health care system without understanding that the health care system is only a portion of the total health services continuum and that much of the health care cost issue is due to ignoring, the basic prevention issues addressed by environmental health, health promotion, and disease prevention.

I am concerned that the debate concerning serious health care issues has dangerously obfuscated the difference between public health and health care. We are witnessing public health budgets being subsumed by health care needs. Certainly the health care system needs attention, but not at the expense of public health.

The highly touted Canadian system may be acceptable to Canadians, but Americans would not tolerate such a system. Our citizens have probably become spoiled, but would not accept the reduction in services, delays, and priorities inherent in the Canadian system.

I want to consistently re-emphasize the need for significantly enhanced prevention (public health) services. Once the health care system is needed, the battle for wellness and longevity has frequently been lost. Admittedly, the majority of the public is, however, more enamored with repairing the human machine once it has been damaged than in preventing damage to the human machine in the first place. However, the more cost-effective, humane, and compassionate approach is to do a better job of prevention. Radical changes in the health care system will not provide a

significant blip on a state or national health status chart, while more effort in prevention will yield positive, measurable decreases in morbidity and mortality rates from the leading causes of death.

If we as a nation wish to ensure access, spend more on health care. If we wish to insure improvements in the health status of Americans and reduce health care costs, improve the public health system of this nation. The recent report of the Institute of Medicine on The Future of Public Health stated that "this nation has lost sight of its public health goals and has allowed the system of public health activities to fall into disarray."

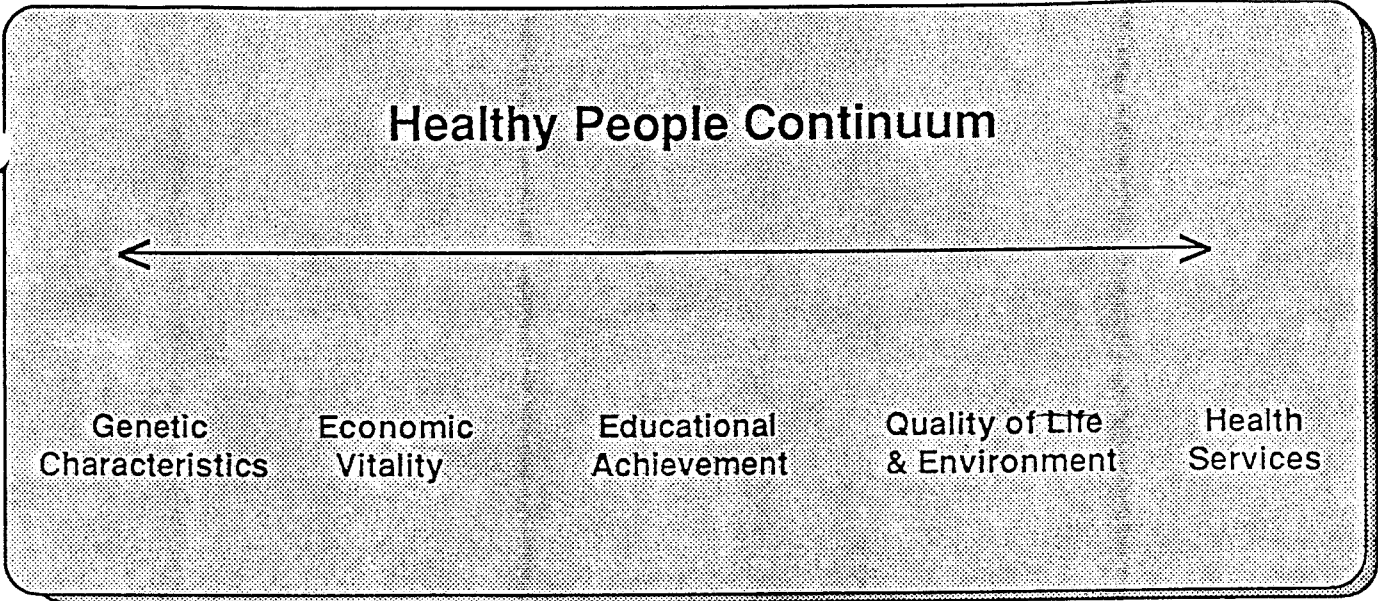
While not perfect, the document Healthy People 2000: National Health Promotion and Disease Prevention Objectives (developed by Professionals and citizens) provides a national strategy for significantly improving the health status of the nation. Funding to implement the Year 2000 objectives would be the effective method of insuring major reductions in the leading causes of death.

Most of the currently popular proposals to change our health care system are silent on the issue of prevention. Additionally, the proposals will not be politically acceptable to the powerful force of providers and insurers that shape and manage our health care system. An effective emphasis on targeted prevention measures would be acceptable and manifold more cost-effective.

Best personal regards,

Larry J. Gordon, Visiting Professor, and
Past-President American Public Health Association,

**Retired N.Mex Cabinet Secretary for Health and
Environment**



Health Services Continuum



Environmental Health Science and Protection

(issues)
 Injuries
 Clean Air
 Clean Water
 Toxic Chemicals
 Safe Food
 Radiation
 Solid Wastes
 Occupational Health
 Hazardous Wastes
 Risk Assessment
 Risk Communication
 Risk Management
 Global Degradation
 Access

Disease Prevention

(issues)
 Maternal & Infant Health
 Immunizations
 PKU Screening
 Glaucoma
 Family Planning
 Alcohol
 Substance Abuse
 Hypertension
 Diabetes
 Osteoporosis
 Cancer
 Heart Disease
 Injuries
 Homicides
 S.T.D.'s
 Access

Health Promotion

(issues)
 Stress Management
 Fitness
 Nutrition
 Lifestyle
 Violence
 Obesity
 Tobacco
 Access

Health Care

(issues)
 Diagnosis
 Case Management
 Out-Patient Services
 Clinics
 Treatment
 Surgery
 Long-Term Care
 Acute Care
 Mental Health
 Developmental Disabilities
 Cost Containment
 Health Insurance
 Access