

GEORGE WARREN
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—|| of Social Work ||—

The Health/Wealth Connection

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Washington University in St. Louis

A little girl named Jasmine...

Two Lives of Jasmine

Social determinants of health

“...the conditions in which people are born, grow, live, work and age...shaped by the distribution of money, power, and resources at global, national, and local levels.”

- World Health Organization

Two Lives of Jasmine

A simplified story of a girl told from the perspectives of two different starting points in life.

What follows is an attempt to describe how the life outcomes of a little girl we're calling "Jasmine" can be dramatically different based on the circumstances into which she is born. We have simplified the story to highlight crucial features of Jasmine's context that influence her health and well-being. At each stage in Jasmine's development, we also point to various opportunities to intervene. Obviously, there are also multiple opportunities for Jasmine to make individual choices about her life that will also impact her outcomes. The point is that those choices are shaped in important ways by both her starting point in life and the resources available to her.

1 Home and neighborhood: The home and neighborhood environments affect health and shape current and future opportunities for children.



Jasmine is born to college-educated parents, who have stable jobs and income. When she is born, they start a college savings account to prepare for her future. Jasmine grows up in a neighborhood that provides healthy food options and safe places to play.



Jasmine is born to a single mother. Her mother works two jobs but struggles to make ends meet. She wishes she could spend more time reading to and interacting with Jasmine, but her work schedule makes it difficult. Jasmine's neighborhood doesn't have many places to buy fresh and healthy foods. We could help Jasmine by making college savings accounts available for all children and investing in quality neighborhoods for all families.

2 Early childhood: High-quality early childhood programs allow children to grow and develop in a nurturing environment. This prepares them for future academic and job success and healthy adulthood.



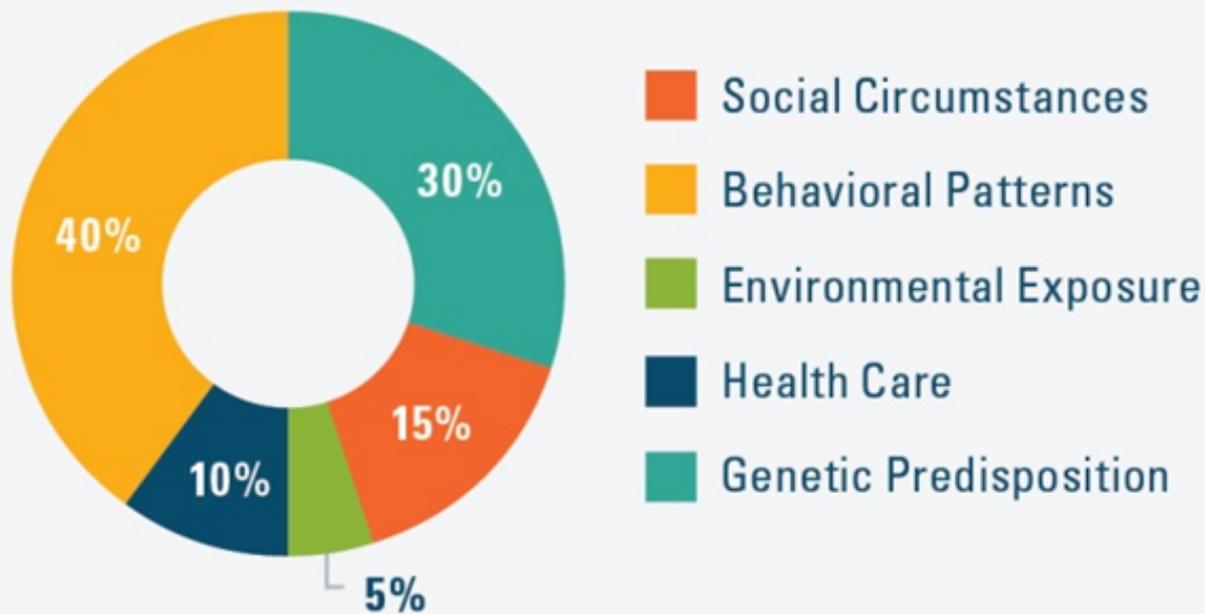
Jasmine's parents pay for her to attend a high-quality early childhood education center. She grows up in a nurturing environment, exposed to many fun learning activities and opportunities to explore her world.



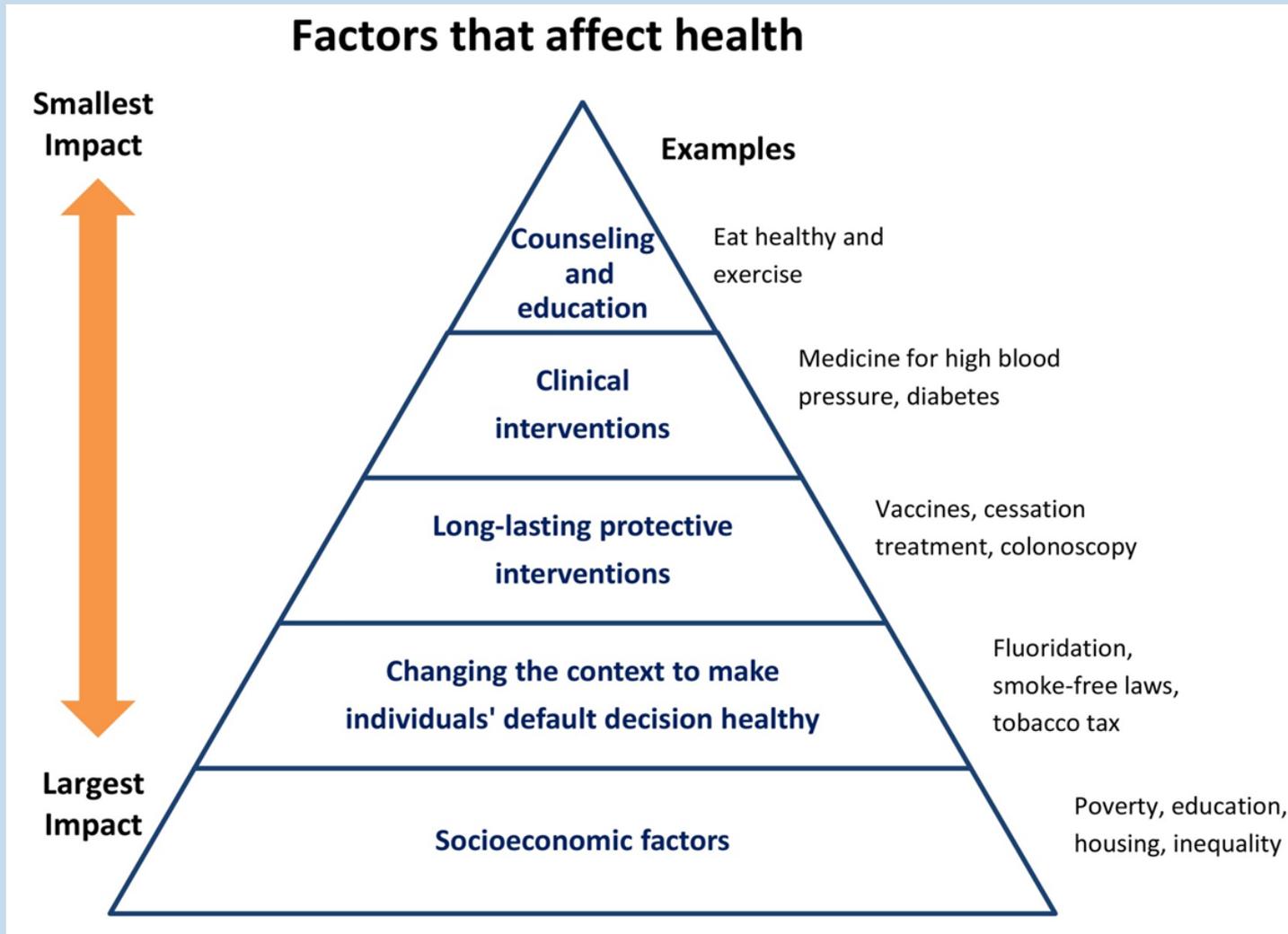
Jasmine stays with her grandmother during the day, and spends many hours inside because her family worries that it is not safe to play outside. Although her grandmother loves Jasmine very much, she also watches other grandchildren and doesn't have resources to do learning activities with Jasmine. She is also limited in what she can do by her own health problems. We could help Jasmine by investing in quality early childhood education and development for all children.

Behavior in context determines health

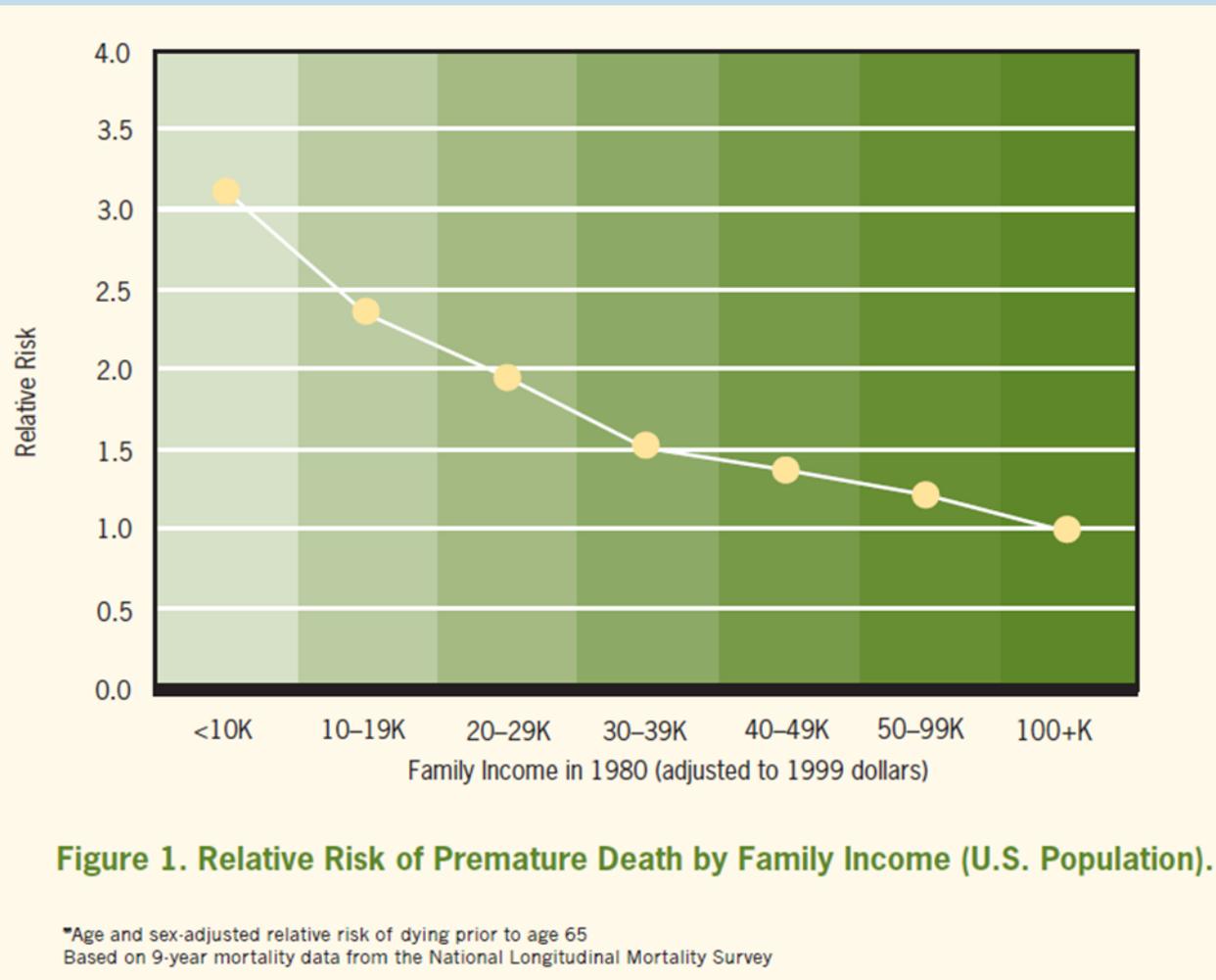
Figure 3. Factors Contributing to Premature Death



Greatest impact on population health



The challenge of the SES gradient



Health-related benefits of wealth

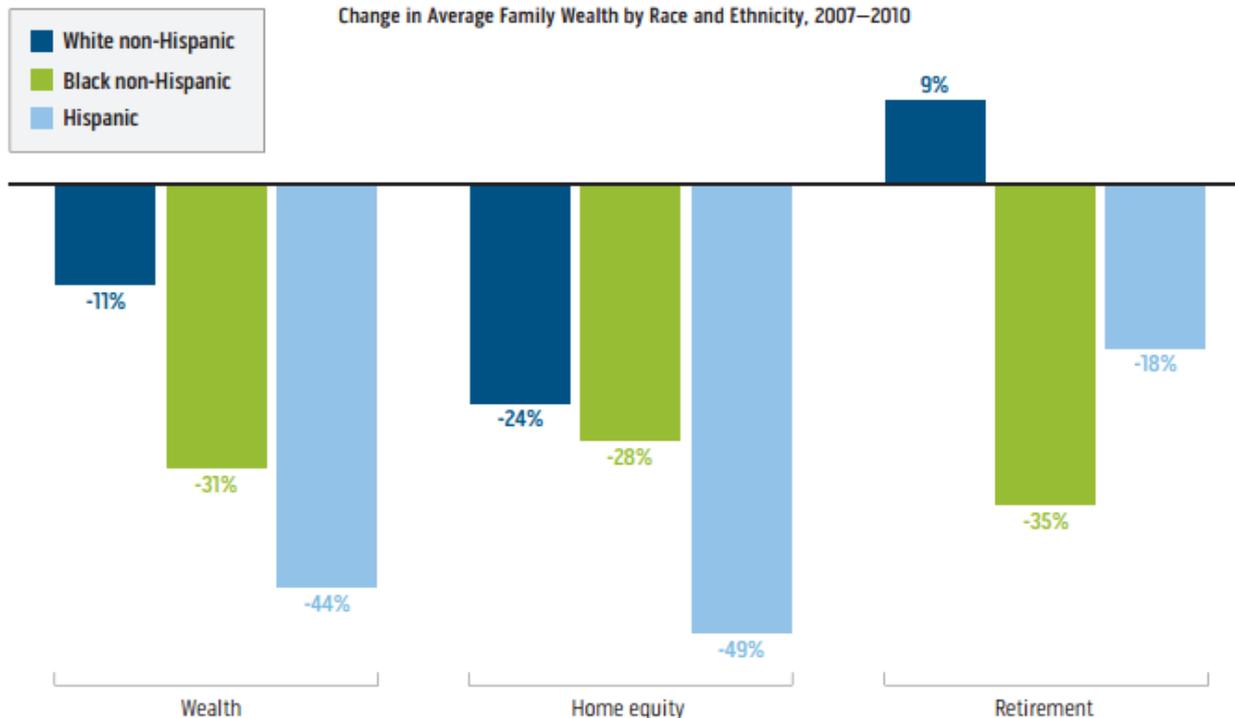
- Economic “cushion” during adverse events
- Greater likelihood of higher education
- Psychological
 - Security
 - Confidence about the future
 - Sense of control and personal efficacy
 - Increased risk aversion
 - Goal-directed behavior
- Physical
 - Less risk of premature death
 - Better health behaviors, risk profile, self-rated health

Changes in wealth and health risk factors

- After accounting for demographics and income, a one step increase in net worth between 1999 and 2009 was associated with decreased odds of:
 - **Current smoking** (OR = .88; 95% CI = .86-.90)
 - **Obesity** (OR = .92; 95% CI = .90-.94)
 - **Light-to-mod physical inactivity** (OR = .94; 95% CI = .92-.96)
 - **Problem drinking for men** (OR = .82; 95% CI = .79-.84) and **for women** (OR = .88; 95% CI = .85-.90)

Wealth loss unequal in Great Recession

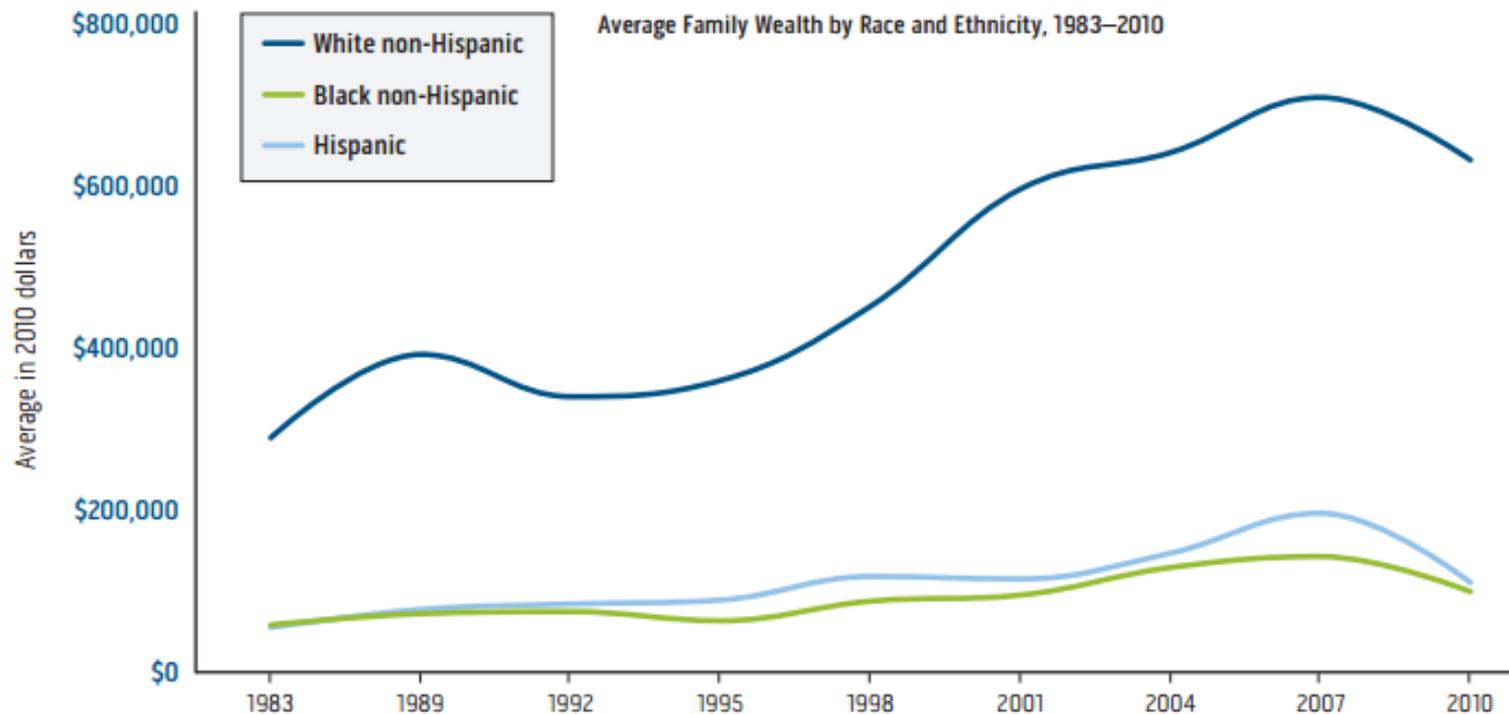
Figure 5. Hispanics Lost the Most Wealth during the Great Recession, While Blacks Fared Worse than Whites



Source: Authors' tabulations of the 2007 and 2010 Survey of Consumer Finances (SCF).
Notes: Data are weighted using SCF weights.

Persistent racial wealth gaps

Figure 3. The Racial Wealth Gap Is Not Improving



Source: Authors' tabulations of the 1983, 1989, 1992, 1995, 1998, 2001, 2004, 2007, and 2010 Survey of Consumer Finances (SCF).
Notes: All values are presented in 2010 dollars, and data are weighted using SCF weights.

For the Sake of All



Phase 1 Goals:

1. Inform public about social determinants of health and health disparities impacting African Americans in St. Louis.
2. Present regional economic and health consequences of intervening.
3. Provide evidence of impact on all members of the region.
4. Influence policy agenda on disparities by broadening conversation beyond personal responsibility and medical care.

Translating evidence into action

Translating Evidence into Population Health Improvement: Strategies and Barriers

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Keywords

dissemination and implementation, public health policy, community engagement, research translation, health-in-all policies

Abstract

Among the challenges facing research translation—the effort to move evidence into policy and practice—is that key questions chosen by investigators and funders may not always align with the information priorities of decision makers, nor are the findings always presented in a form that is useful for or relevant to the decisions at hand. This disconnect is a problem par-

Making an impact with evidence

Translating Evidence into Population Health Improvement: Strategies and Barriers

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 Center on Society and Health

Education and Health Initiative

FOR THE
SAKE
OF ALL

Improving the health and well-being
of African Americans in St. Louis

1. **Translating scientific research**
2. **Understanding the decision-making environment**
3. **Engaging stakeholders and communities**
4. **Communicating strategically**

Brief 1: Investing in opportunity

FOR THE
SAKE
OF ALL

A report on the health and well-being
of African Americans in St. Louis



How can we save lives—and save money—in St. Louis?

INVEST IN ECONOMIC AND EDUCATIONAL OPPORTUNITY

By Jason Purnell, PhD, MPH

August 2013 | Brief 1 of 5

280 DEATHS
DUE TO POVERTY

237 DEATHS
DUE TO LESS THAN HIGH
SCHOOL EDUCATION

COMBINED THE NUMBER OF DEATHS COULD FILL ABOUT

7 METROLINK CARS



THE ESTIMATED COST OF THIS LOSS OF LIFE IS APPROXIMATELY

\$3.3 BILLION

Improving educational and economic opportunity is a
POWERFUL HEALTH INTERVENTION.

Here Are The Steps
We Can Take Right Now:

- 1 Invest in quality early childhood development for all children.
- 2 Help low-to-moderate income families create economic opportunities.

Recommendations

- 1 Invest in quality early childhood development for all children.
- 2 Help low-to-moderate income families create economic opportunities.
- 3 Invest in coordinated school health programs for all students.
- 4 Invest in mental health awareness, screening, treatment, and surveillance.
- 5 Invest in quality neighborhoods for all in St. Louis.
- 6 Coordinate and expand chronic and infectious disease prevention and management.

Engage, mobilize, implement



Phase 2 Goals:

1. Continue to inform the public and policy makers.
2. Engage and mobilize community around recommendations.
3. Activate key private and public sector stakeholders for implementation.
4. Evaluate impact and determine replicability of project in other communities.



Universal CDAs for St. Louis

Child Development Accounts (CDAs) for the St. Louis Region



Based upon a growing body of research led by the [Center for Social Development](#) at Washington University in St. Louis, Child Development Accounts (CDAs) are a key part of recommendations made by *For the Sake of All*, a multi-disciplinary community education and mobilization effort focused on health and well-being in our region.

CDAs are savings or investment accounts for long-term developmental goals, including postsecondary education. Research on CDAs and child savings suggests that:

- Children with savings in their names are 3-4 times more likely to attend and graduate from college.
- Children with CDAs exhibit better social and emotional functioning as early as 4 years of age compared with children without them.
- Mothers of children with CDAs have lower levels of depressive symptoms.
- Mothers of children with CDAs are more likely to maintain or raise their educational expectations for their young children.



FOR THE
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OF ALL



Center for
Social Development

GEORGE WARREN BROWN
SCHOOL OF SOCIAL WORK

Thank you!

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Learn more about *For the Sake of All* at:

forthesakeofall.org

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