

Upstream Medicine

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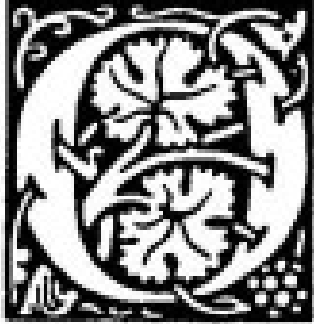
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Objectives

- Define “Upstream Medicine” and discuss why this concept is important
- Describe a multidisciplinary approach to addressing social barriers to health
- Discuss the concept of wellness and how it can be addressed in a primary care office

nce
upon
a
time...



Perilous Waters

These everyday forces flow together to shape our health

Unequal power
Gross inequity in power and opportunity disrupts both mental and physical health.



Low income
Wealthier people tend to be healthier, no matter their race.



Poor education
The lower your education level, the less healthy you're likely to be.



Social isolation
A lack of social support can lead to depression and even heart disease.



Pollution
Industrial toxins and car exhaust fuel asthma and cancer.



Sprawl
As suburbs spread and commutes lengthen, people walk less and sit more.



Cars as kings
Streets designed mainly for car traffic discourage walking and biking.



Unhealthy houses
Mold, pests, and unsafe conditions foster asthma, allergies, and injuries.



Food options
What's available and affordable naturally influences what we eat.



Health care access
If you're uninsured or have few clinics nearby, you're less likely to see a doctor.

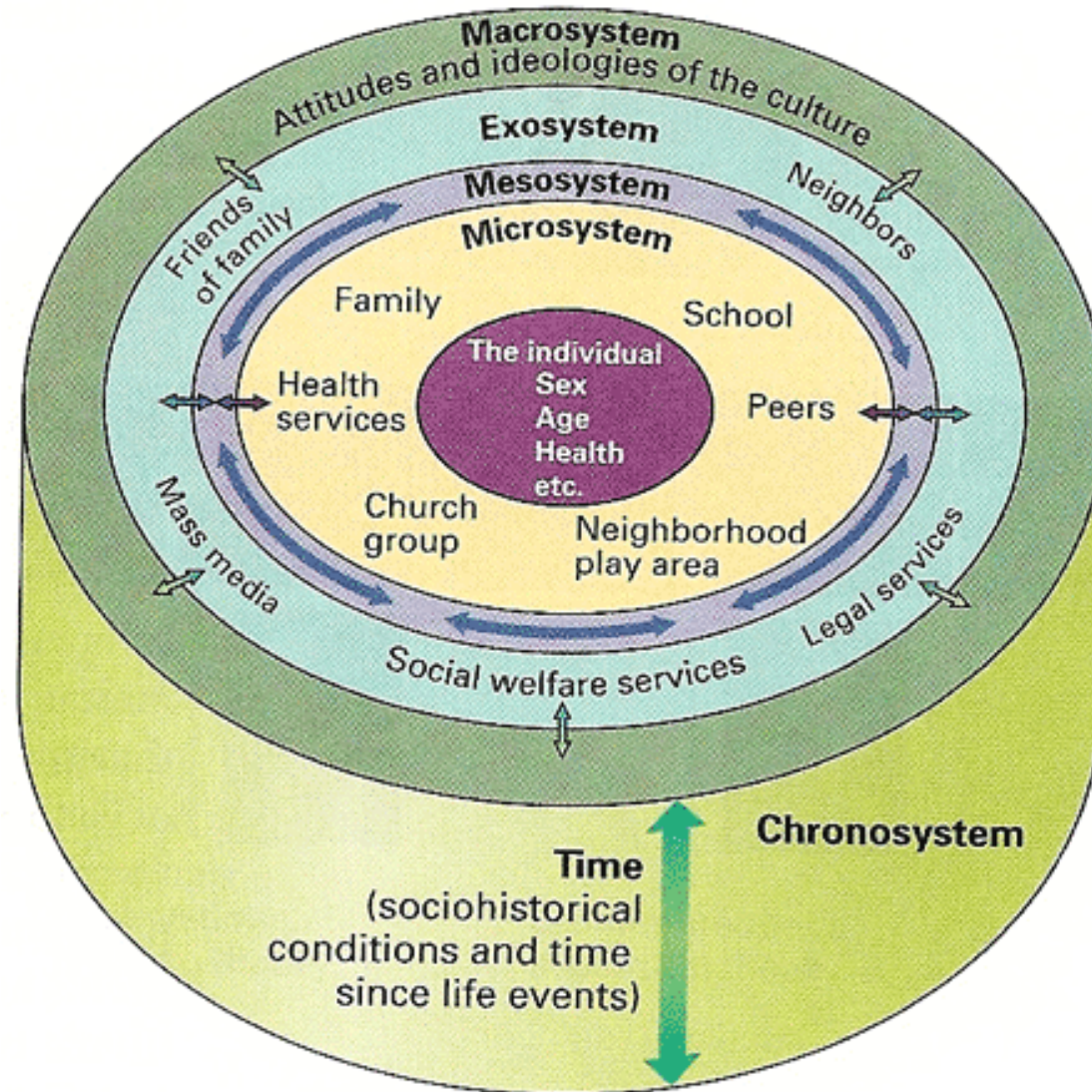


Unsafe streets
Violence keeps people indoors and produces injuries, trauma, and chronic stress.



Find more detailed information on these and other health factors in the resources chapter and at upstreamists.org.

Bronfenbrenner's Ecological Systems Theory 1979



PREVENTION Caplan, 1964

- **Primary**
- **Secondary**
- **Tertiary**

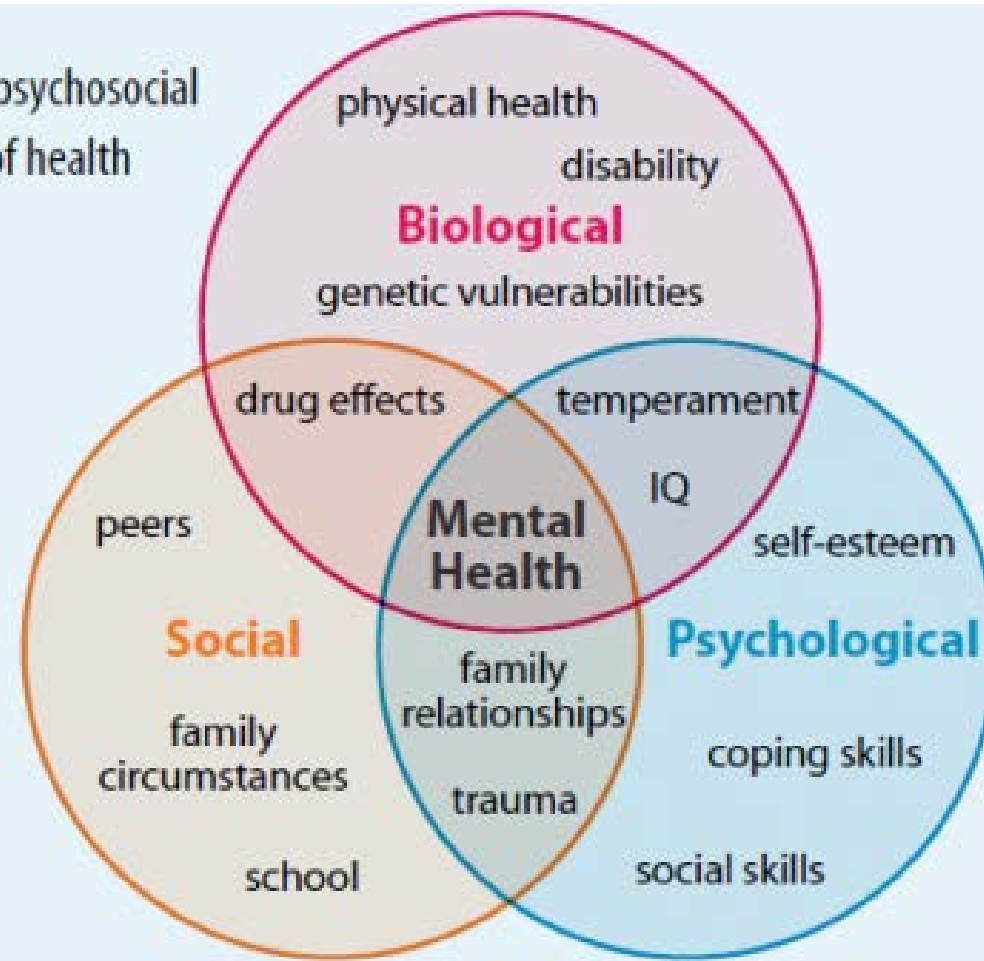
Prevention – Ramano & Hage, 2000

1. Stops (prevents) a problem behavior from ever occurring.
2. Delays the onset of a problem behavior.
3. Reduces the impact of an existing problem behavior.
4. Strengthens knowledge, attitudes, and behaviors that promote emotional and physical well-being.
5. Supports institutional, community, and government policies that promote physical and emotional well-being.

The Problem

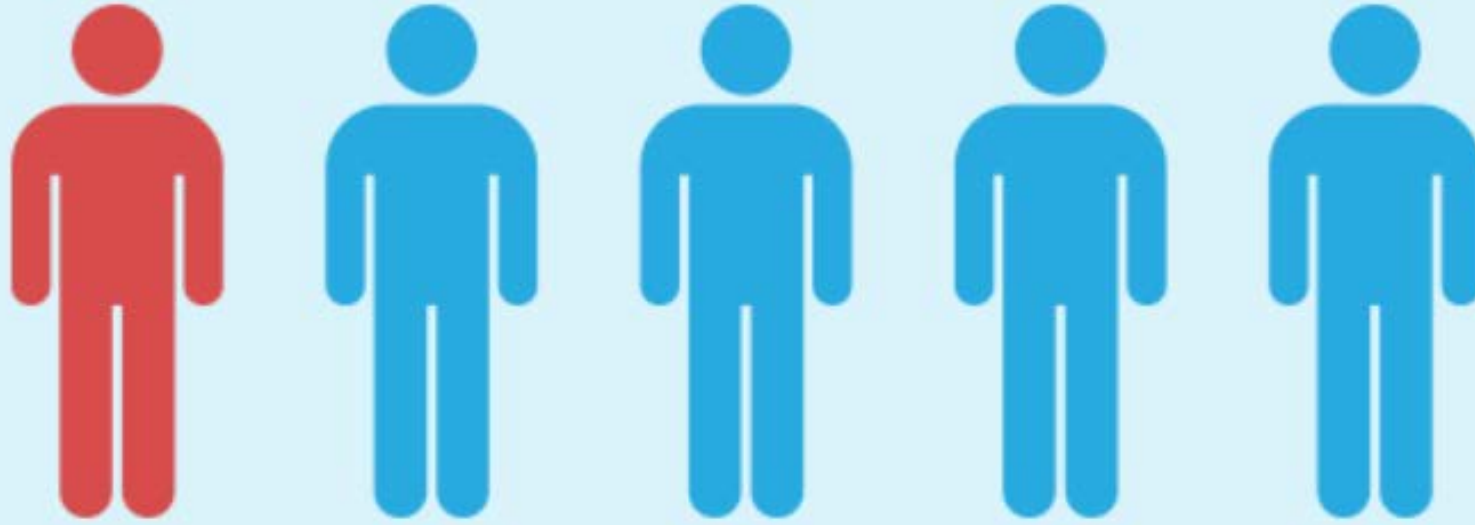
- Poverty is the single largest determinant of health
- Some Americans will die 20 years earlier than others who live just a few miles away because of differences in education, income, race, ethnicity and where and how they live.
- Your zip code may be a bigger determinant of your health than your genetic code!

The biopsychosocial
model of health



Mental Health & Primary Care are Inseparable

- 43-60% of all MH care is provided by PCP.
- Up to 30% of primary care Pts have a mental disorder.
- Identification & Treatment is poor
- Pharmacology is the most common treatment.
- The provision of primary care and MH Tx is mostly segregated.



1 in 5 feel confident in their capacity to meet their patients' social needs...

Robert Wood Johnson Foundation

85 % believe that unmet social needs... like access to nutritious food, reliable transportation and adequate housing—are leading directly to worse health for all Americans.

So
What?



The problem in New Mexico

- New Mexico ranks 33rd in overall health status among U.S. states
- Health indicators demonstrate significant health disparities related to social determinants of health
- Need for better training of medical residents to address social determinants of health in primary care setting

What we know

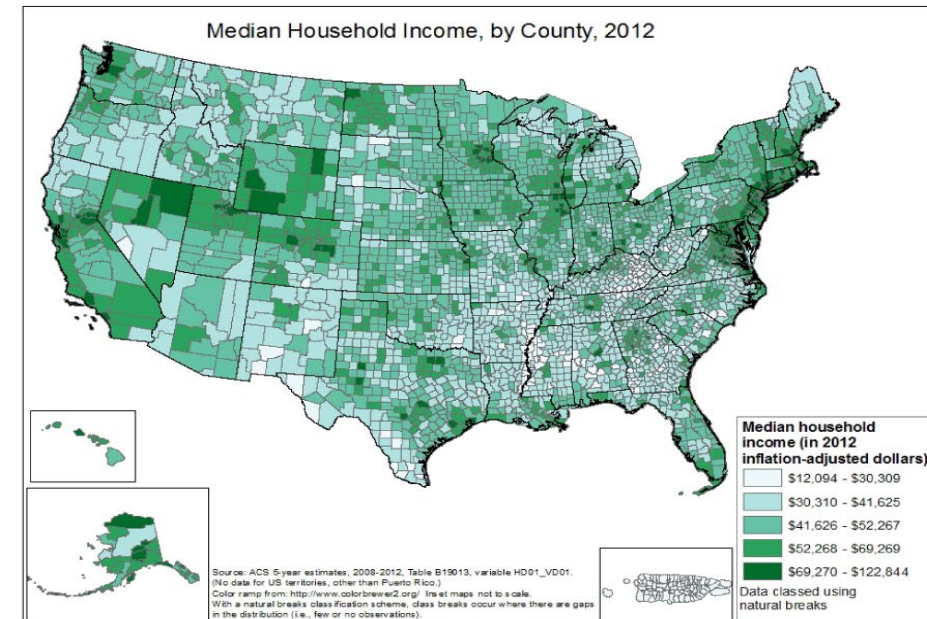
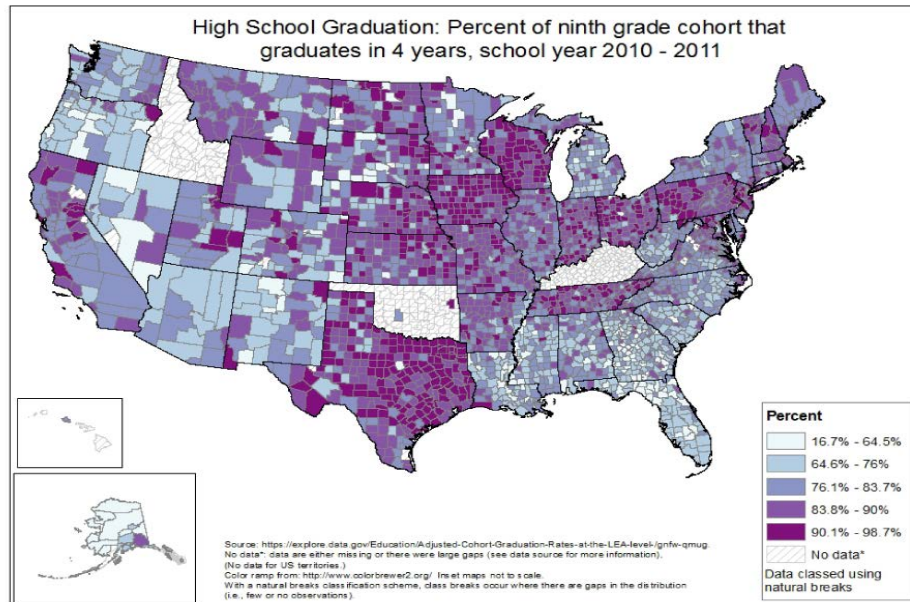
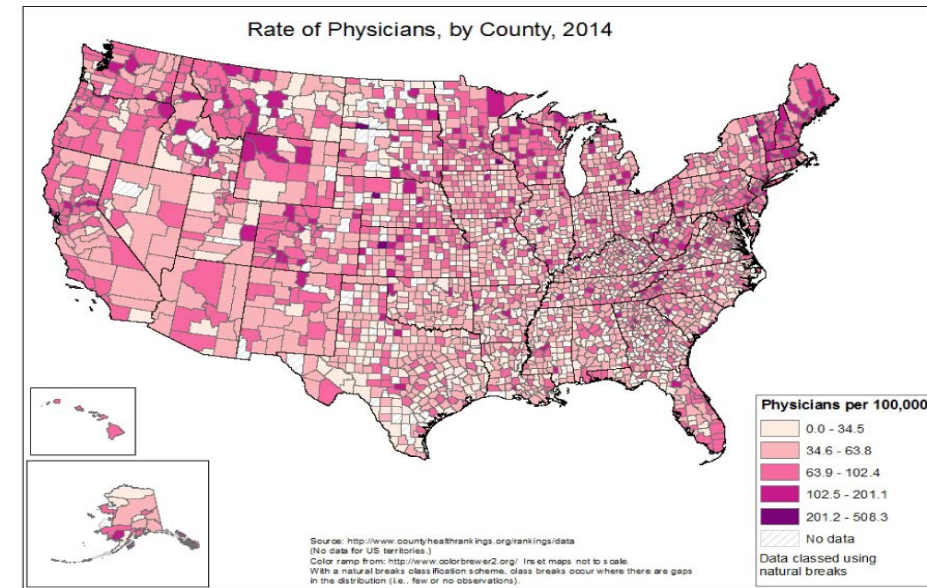
- Life expectancy for Latinos
 - US: 82.8
 - NM: 78.8
- Teen death rate (per 100,000 residents)
 - US: 49
 - NM: 62

What we know

- Diabetes death rate (per 100,000 residents)
 - US: 21.2
 - NM: 27.6
- Percent of Native Americans with overweight/obesity
 - US: 68.1%
 - NM: 77.5%

Basic conditions necessary for health include:

- access to and quality of health care
- education
- income
- the environment
- employment
- housing
- safety



Project Activities

1. Develop integrated multidisciplinary team
2. Develop a social and behavioral determinants of health screening tool
3. Develop social/behavioral determinants of health curriculum in family medicine residency in line with Beyond Flexner developments
4. <https://drive.google.com/file/d/0B5Pbu2Ze2t4kSkduFtNG94b0U/view?usp=sharing>



Project Activities

4. Develop operating procedures to utilize the screening tool to identify the upstream health needs of patients
5. Train NMSU undergraduate and graduate students to work in multidisciplinary teams to address health disparities

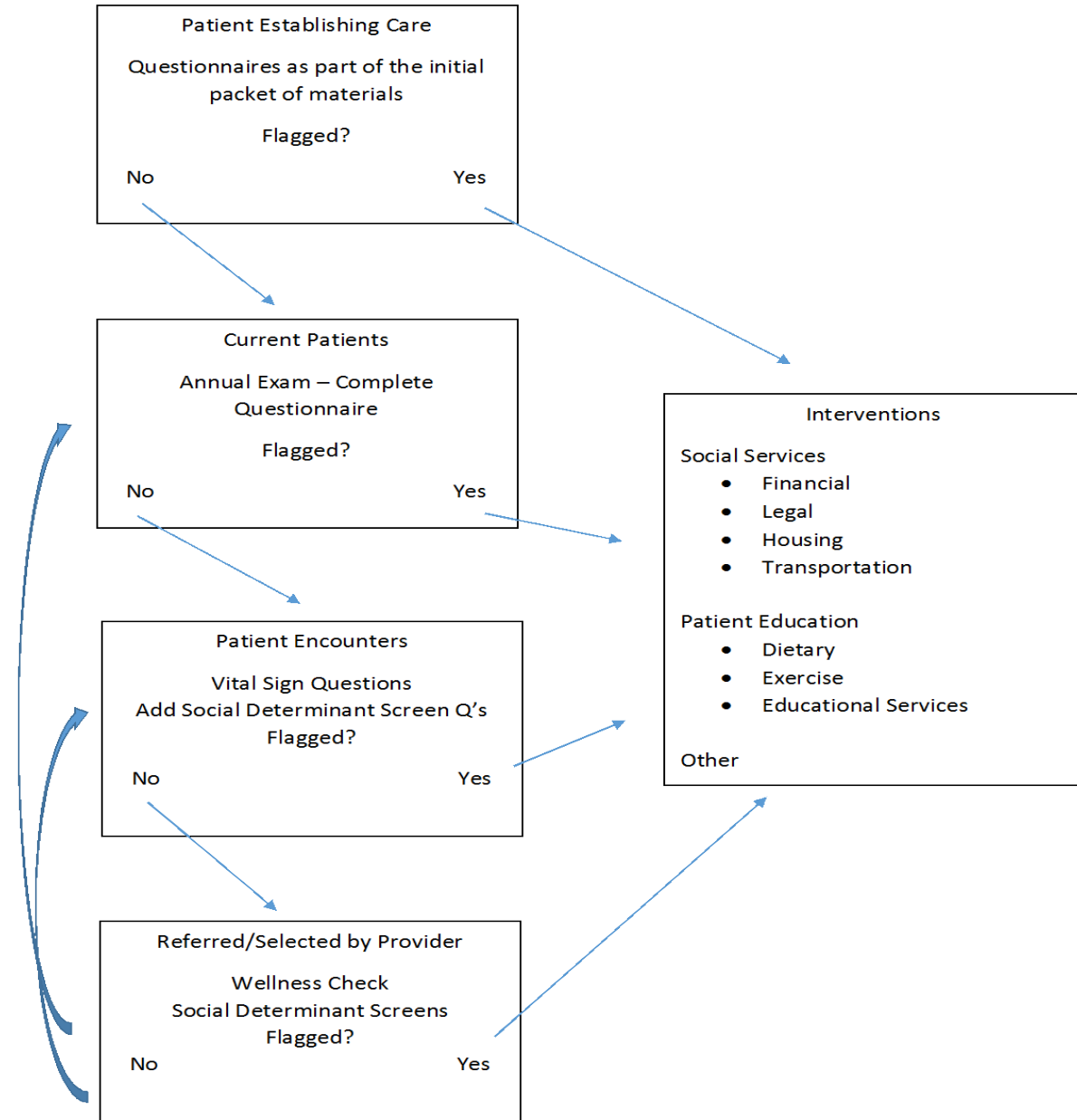
Social/behavioral health surveillance system

- Conducted literature review of social/behavioral determinants of health
- Surveyed rapid assessment instruments used in other medical facilities across the country
- Conducted power analyses to sample current patient population

Social/behavioral health surveillance system

- I was able to follow the treatment plan my provider and I agreed on at my last appointment.
- I take all of my medications the way I am told to take them.
- I need to increase my exercise.
- I need to change my eating habits.
- I use illegal drugs (or drugs prescribed for others) so I need to cut down or stop.
- **In the past 30 days, I had to cut the size of my meals or skip meals because there wasn't enough money or food.**
- **There is someone in my life I'm afraid of or who hurts me.**
- **I'm having trouble paying for gas or electricity bills.**
- **There are legal issues that I am having trouble addressing.**
- I want to talk with someone today about the change I need to make.

Decision Tree



Well-Being Check-Ups: Beyond Depression Screening

**The part can never be well
unless the whole is well.**

-Plato, 400 BC

World Health Organization, 1946

Health is “a state of complete physical, mental, and social well-being, and not merely the absence of disease or infirmity.”

MENTAL CHECK-UPS AHEAD

Day Seen When Tests Will Be as
Common as Physical Exams

NEW BRUNSWICK, N. J., May 9—Dr. Nelson G. Hanawalt, associate professor of psychology at the New Jersey College for Women of Rutgers University, said this week that "some day soon people will submit to psychological check-ups just as naturally as they go for physical examinations." He said he based his belief on the "increased awareness of people of mental health problems."

Preventive mental hygiene, he said, "is almost as important as the cure of mental disorders." He blamed the stresses and strains of modern living for the fact that mental health problems have become more and more common. Dr. Hanawalt placed some of the responsibility for the situation on "the breakdown of family and community units."

Dr. Hanawalt is a former president of the New Jersey Psychological Association.

1957

Macleod, A. W., Silverman, B. and Poland, Phyllis. (1957). The well-Being Clinic: A study of the effectiveness of an attempt to provide routine mental health check-ups for community groups. *The American Journal of Psychiatry*, 113, pp. 795-800.

A Well-Being Clinic has been in operation for the past 2 years at McGill University. This preliminary report furnishes details about its development and its manner of operation and summarizes results to date and discusses basic assumptions underlying its conception. (PsycINFO Database Record).

DEFINING WELL-BEING

- Flourishing, Self-Actualization, Subjective Well-Being, Wellness, Quality of Life, Happiness, and Life Satisfaction are often used interchangeably.
- WB – Life Satisfaction, Emotional Vitality, & Optimism.
- Wellness refers to diverse and interconnected dimensions of physical, mental, and social well-being that extend beyond the traditional definition of health. It includes choices and activities aimed at achieving physical vitality, mental alacrity, social satisfaction, a sense of accomplishment, and personal fulfillment, (Huseyin & Ioannidis, 2015) .

PERMA – Seligman, 2011

Positive Emotions

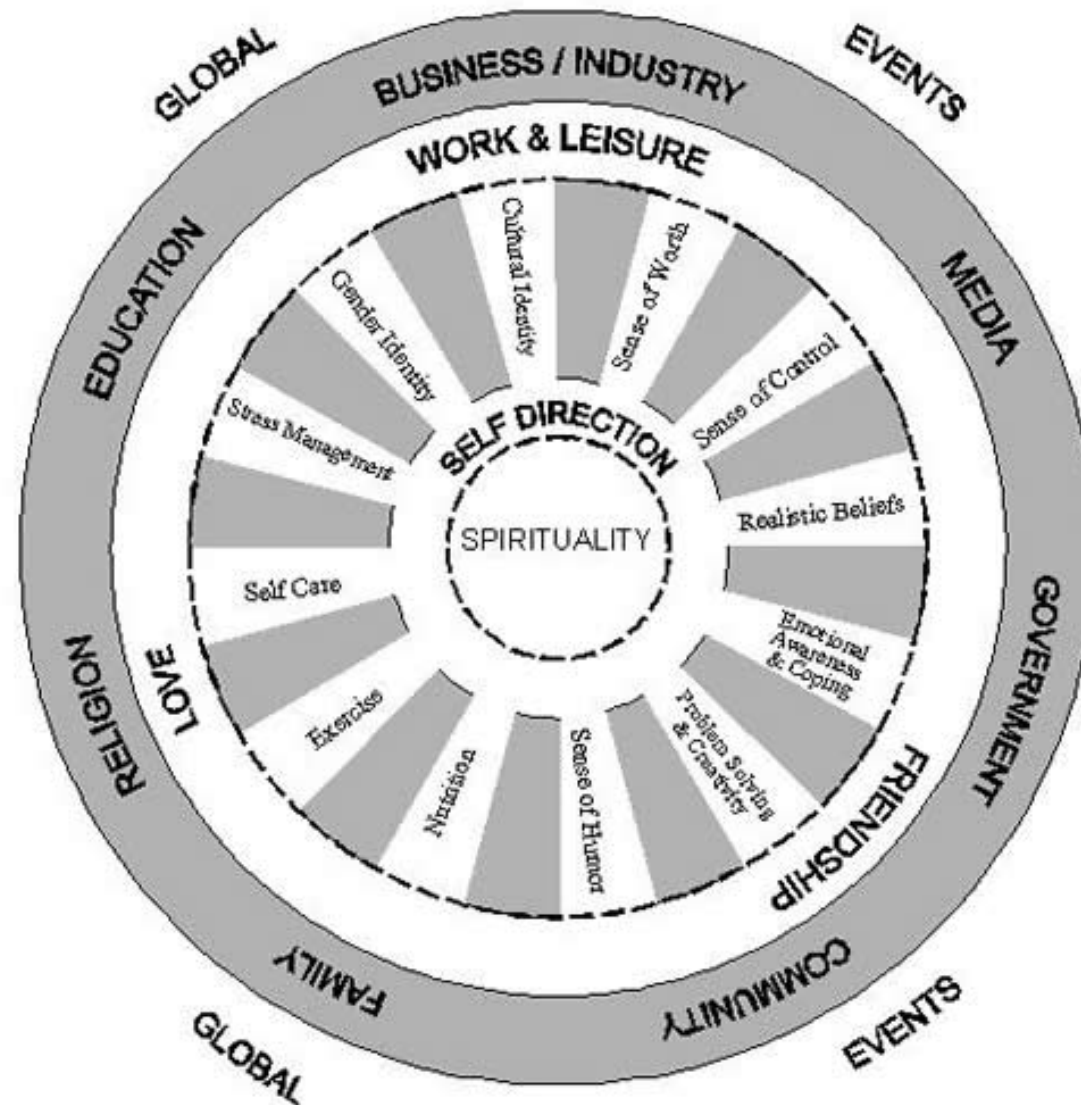
Engagement

Relationships

Meaning

Accomplishment

The Wheel of Wellness – Myers et al.







SEVEN REASONS TO INVEST IN WELL-BEING

1. Well-Being is a Natural Motivator
2. Well-Being Improves Physical Health and Longevity
3. Well-Being is Good for the Economy
4. Well-Being Promotes Positive Relationships
5. Well-Being Can Be Enhanced in Relatively Easy and Inexpensive Ways
6. Improving Well-Being May Catalyze the Success of Other Interventions
7. Well-Being Interventions May Elicit a Population-Level Shift in Mental Health.

Perception of QUALITY OF LIFE

- Health
- Self-Esteem
- Goals and Values
- Money
- Work
- Play
- Learning
- Creativity
- Helping
- Love
- Friends
- Children
- Relatives
- Home
- Neighborhood
- Community

PROCEDURE

1. Patient completes intake paperwork and questionnaires.
2. Examination by Physician and Behavioral Health Provider.
3. Physician and Behavioral Health Provider consult with one another on the patient's strengths, needs, and recommendations.
4. The two health providers provide the patient feedback.

TOOLS

Psychological Symptoms

CHILDREN

- [Achenbach](#)
- Connors

ADULT

- [Brief Symptom Inventory](#)
Published by Pearson. \$5 per assessment

Well-Being

CHILDREN

- Check on parent wellness
- [Behavioral and Emotional Rating Scale](#)
- Ages 5-18, admin time 10 min, \$198 for 25 admins

ADULT

- Wellness Evaluation of Lifestyles
- [Quality of Life Inventory](#)
Age 17 and up, 5 min to admin, \$120 for 50

WBCU Protocols

Children Ages 0 – 1.5

- Observation of interaction.
- **Quality of Life Inventory** for caregiver(s)
- Consider the Coparenting Relationship Scale
- Use **BSI** with primary caregiver(s) if indicated.

Children Ages 1.5 – 5

- [Achenbach Pre-school 1.5 – 5](#)
- Parenting Scale (ages 1.5-5)

Consider

- Alabama Parenting Questionnaire (ages 3-18).
- Quality of Life Inventory for caregiver(s)
- The Coparenting Relationship Scale
- BSI with primary caregiver(s) if indicated

Children Ages 6 – 12

- [Connors CBRs](#)
 - o Ages 6 – 18
- [BERS](#)
 - o Ages 5-18, admin time 10 min.

Consider

- Alabama Parenting Questionnaire (ages 3-18).
- Quality of Life Inventory for caregiver(s)
- The Coparenting Relationship Scale
- BSI with primary caregiver(s) if indicated

Youth Ages 13 - 19

- [The BSI](#)
 - o Ages 13 and older, \$5.50 per admin.,
- BERS
- Ages 5-18, admin time 10 min, \$198 for 25 admins.

Consider

- Alabama Parenting Questionnaire (ages 3-18).
- Quality of Life Inventory for caregiver(s)
- The Coparenting Relationship Scale
- BSI with primary caregiver(s) if indicated

Adults 19 and up

- BSI
- [Quality of Life Inventory \(QOLI\)](#) - Age 17 and up, 5 min to admin, \$120 for 50.

BILLING

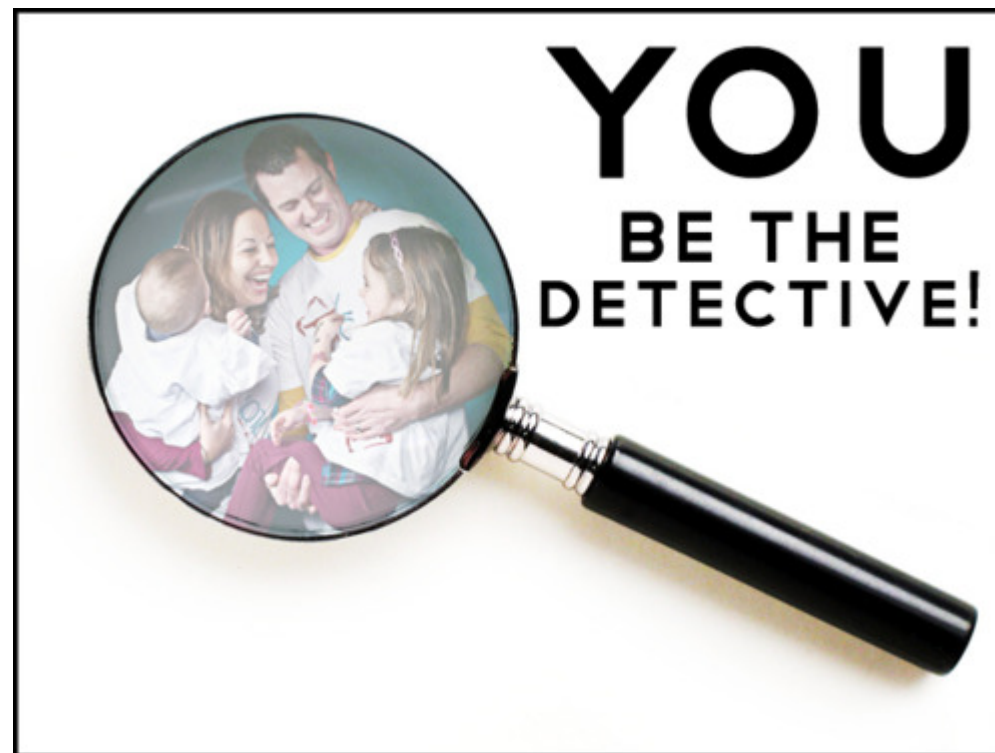
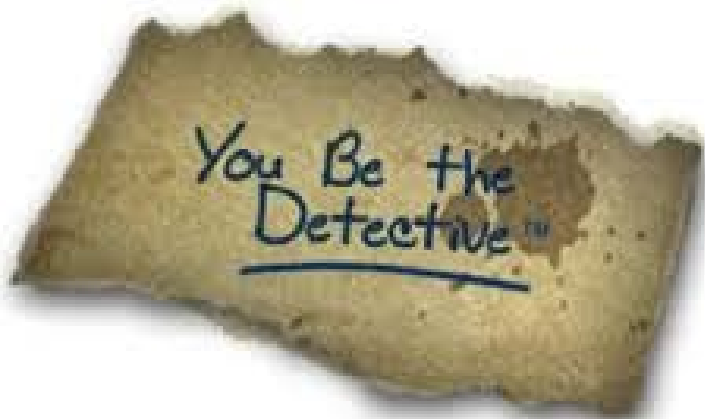
- 96127 Brief emotional/behavioral assessment - \$5.37
- 96110 Developmental screening - \$8.96
- 96111 Developmental testing - \$130.77
- 96101 Psych Testing - Molina Healthcare - \$174.60
NM Centennial Care - \$87.94
- 90791 PSYCH Diagnostic Interview - \$144.07

Medicare Annual Wellness Visit Fee Schedule

G0202	\$162.34
G0438	\$166.95
G0439	\$112.81
99203	\$105.45
99204	\$161.63
99213	\$70.87

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Conclusions

- Upstream Medicine refers to a complete view of prevention
- A multidisciplinary team that includes the social sciences can be used to address social barriers to health
- A holistic approach to wellness can be integrated into a primary care office as an important component of prevention