



VITAL CONDITIONS

Basic Needs for Health & Safety

The vital condition of Basic Needs for Health and Safety is about our most practical requirements for physical and mental survival. It is about having enough of the things we cannot live without. It is about feeling safe wherever we go; being free from addiction and toxic stress; and nurturing healthy babies. It is also about getting routine health care.

Basic Needs for Health and Safety is an indispensable vital condition because none of us can reach our full potential in the absence of several practical requirements for physical and mental survival. Each of us must have enough air, water, and nutritious food; a good balance of physical activity and sleep; and safe, satisfying sexuality, and healthy reproduction for those who bear children. We need to feel safe from violence, crime, and injury in our homes, schools, workplaces, and communities. Less visible, but just as important, is our need to be free from addiction, trauma, and toxic stress. And everyone depends on having routine health care to prevent and diagnose illness, and to care for inevitable afflictions when they arise.

Meeting many of these basic needs has a direct benefit by avoiding hunger, exhaustion, or injury. Others have less conspicuous impacts, in part, because they support our bodies' ability to withstand adversity, fight infection, maintain a healthy weight, and nurture a healthy pregnancy. If any of these basic needs are not met, the effects can be immediate, or the consequences can take decades to unfold. While children are particularly vulnerable, adults are as well. Among the forces that stand in the way of meeting these basic needs are poverty, racism, and other forms of discrimination or isolation.

Continuing influence of past legacies

The era of chronic illness, injury, and addiction: In the wake of phenomenally successful efforts to control infectious disease, a new era marked by the rise of chronic physical and mental illness, injury, and addiction has become a growing challenge in America since the mid-20th Century.

Intergenerational violence and ACEs: Abuse, violence, and traumatic stress travel from one generation to the next, in part, because those who witness or endure violence as children are more likely to perpetrate it as adults. Childhood abuse, neglect, and other traumatic stressors, termed adverse childhood experiences (ACEs), are alarmingly common across America. Higher exposure to ACEs puts individuals at higher risk for future health problems such as alcoholism, depression, drug use, intimate partner violence, and suicide attempts. The impact of ACEs is cumulative and long term: survivors often remain at higher risk for behaving violently and living shorter lives.

Racism: Racism affects health and well-being on multiple levels extending over generations. For example, the effects are evident both in who has access to healthcare services, as well as the quality of those services; it is apparent in systematic differences in public safety and unfair treatment in the justice system; and the accumulated stress of living in America's race-conscious, discriminatory culture is one of the most likely reasons why preterm birth and infant mortality are so much worse among women of color, irrespective of their wealth or other personal characteristics.

Intergenerational poverty: Persistent obstacles to economic mobility create cycles of poverty from one generation to the next. Those who bear the greatest burden are most likely to encounter multiple threats when their basic needs for health and safety are not met, especially hunger, malnutrition, substance misuse, crime, violence, air and water pollution, trauma, and more.

War on Drugs and mass incarceration: For nearly 50 years, America has waged an overt "war on drugs" characterized by a controversial and costly set of tactics intended to stop drug production, distribution, and consumption. One result has been the mass incarceration of low-level, nonviolent drug offenders - disproportionately low income and Black men. Today, the U.S. prison population remains at a worldwide high.

Current conditions

Seven of the top 10 causes of death are from chronic diseases; two of which—heart disease and cancer—together account for nearly half (46%) of all deaths.¹

Tobacco alone kills **more than 480,000** Americans each year. Even though smoking has declined in the last decade from 21% to 16%, tobacco use remains the single largest preventable cause of death and disease - followed by poor nutrition, lack of physical activity, and drinking too much alcohol.²

Tobacco, alcohol, and other drug use costs about **\$740 billion annually**.³

80% of Americans don't get the recommended amount of physical activity.⁴

42 million people lack consistent access to enough food--**13 million** of them are children.⁵

Nearly half (45%) of Americans have sleep problems that interfere with daily activities.⁶

20% of children have witnessed one family member assault another; and **37%** have been assaulted themselves in the previous year.⁷

About half (45%) of all U.S. children have experienced at least one adverse childhood experience; the lowest prevalence is among Asian children (40%) and the highest is among Black/ African American children (61%).⁸

More than twice as many Black/ African American babies die in infancy as White infants.⁹

75% of adults experienced at least one negative symptom of stress in the last month, including anxiety, anger, and fatigue.¹⁰

28.7 million Americans (or 10.6% under age 65) do not have health insurance; many more (17.3% of adults) have no usual source of care.¹¹

¹U.S. CDC; ²U.S. CDC; ³National Institute of Drug Abuse; ⁴U.S. CDC; ⁵USDA National Sleep Foundation; ⁶Child Trends; ⁷U.S. CDC; ⁸American Psychological Association; ⁹U.S. CDC

Community design: Many American communities are not designed to provide what residents need to maintain their health and well-being. Too many neighborhoods lack adequate access to healthcare services, healthy foods, active transportation, safe places to play, and other basic necessities. Conversely, junk food, alcohol, and tobacco are often placed within easy reach and cleverly advertised, even to children. Harmful community design disproportionately affects those with low incomes and people of color. Disinvestment in those places perpetuates harmful and inequitable conditions over generations.

Healthcare: The U.S. healthcare industry evolved primarily to treat acute illness and injury; it is not currently built to deliver high-quality preventive and chronic care, nor to promote health and well-being. As a result most healthcare providers have little experience in addressing the social determinants that produce equitable health and well-being across populations. Yet, it is clear that the current system is insufficient to the task given that the U.S. spends 50% more on healthcare, with lower levels of coverage and worse outcomes than other developed countries.

Health insurance: Americans rely on health insurance to afford the high cost of healthcare services. Coverage is highly variable between plans and providers, both governmental and commercial. Medicare and Medicaid (governmental programs) are instrumental in insuring older adults, people with disabilities, and low income children and adults. Most people with commercial insurance get it through their employers. The employer-based system emerged as a marketing ploy by hospitals that proliferated during World War II when employers needed to attract workers. IRS rulings in the 1940s and 1950s created massive tax benefits for employer-plans, and by the 1960s, 70% of the U.S. population was covered by a voluntary health insurance plan. Covering the entire population has been a chief policy objective for almost a century, one that remains elusive even today.

Major forces shaping current and future priorities

Aging: By 2035, adults over 65 will outnumber young people for the first time in American history. As we age, we require more healthcare: pressure to meet our impending needs for routine preventive and chronic care, as well as humane end-of-life care will profoundly challenge families, communities, and healthcare institutions.

Affordable Care Act: The Affordable Care Act (2010) sought to make health insurance more affordable to more people, expand Medicaid, and support innovations that lower the cost of care overall. Since being enacted, the ACA has helped about 20 million people get insurance. It is also an important funding stream for public health and prevention work. Despite these gains, the ACA remains a politically divisive policy and its long-term future is unknown.

Deaths of despair and the Opioid Epidemic: The United States is facing a crisis of despair: More than 1 million Americans have died in the past decade (2006 to 2015) from drug overdoses, alcohol and suicides. In 2016, U.S. life expectancy decreased for the first time in two decades, and these three intertwined crises have been major contributors. A deadly epidemic of opioid misuse is rising rapidly due in part to over-prescribing legal opioids; increasing demand, availability, and fatality of illegal opioids; and distressed economic conditions.

Justice reforms: Public attention and dialogue is increasing around racial discrimination in the justice system, due in part to highly visible incidents of police violence, the Black Lives Matter movement, as well as decriminalization of marijuana and pardoning of nonviolent drug offenses. Policing is becoming more community-centered and conscious of racial disparities. Despite progress, these changes are nascent and much more must be done to reform a system that is notorious for injustices and mass incarceration.

Gender identity and sexuality: Many Americans are thinking differently about gender identity and sexuality. Decoupling gender identity from sexuality is challenging gender norms and creating space for people to express their genders and sexualities in authentic and new ways. These shifts provoke many reactions ranging from celebration to hostility, with significant implications for many strong drivers of depression, stress, violence, substance misuse, healthcare utilization, mistreatment in the justice system, and more.

What are important priorities or ways to ensure a positive legacy?

There are infinite opportunities to make progress, across every sphere of influence.

Here are just a few that could yield great benefits:

1. Eliminate hunger and food insecurity
2. Break the cycles of intergenerational poverty, violence, and racism
3. Become a tobacco-free society that enables physical activity, healthy diet, moderate alcohol use, and nonviolent conflict
4. Transform the healthcare industry to insure everyone and deliver better routine care, with a deep understanding of people's socioeconomic circumstances and traumatic experiences
5. Embrace the art and science of placemaking to design communities that meet people's basic needs for health and safety, as well as other vital conditions
6. Resolve disputes about the war on drugs in a way that reverses mass incarceration and frees people from addiction
7. Establish place-based policy and investment agendas crafted by resident leaders and professionals from multiple sectors to shape local priorities and build the strength necessary to enact laws, regulations, and administrative policies that support health and well-being in an entire geographic area