Creating a Culture of Personal Well-being
Evidence-based Strategies that Work!

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To stay alert today, let’s give all of our speakers active applause before and after they speak.
From a Small Coal Mining Town to Buckeye Nation: My Story
What Will the Last 10 Years of YOUR Life Look Like?
Wellness

• The optimal state of living well, regardless of an individual’s spectrum of health

• Encompasses 9 dimensions: physical, intellectual, mental, emotional, social, occupational, financial, environmental and spiritual well-being
Cardiovascular Disease: Our #1 Cause of Death

Risk Factors that Can and Cannot be Changed

**Risk Factors that CAN be changed**
- High blood pressure
- High cholesterol
- Tobacco Smoke
- Overweight/Obesity
- Diabetes
- Physical Inactivity
- Unhealthy eating
- Depression
- Stress

**Risk Factors that CANNOT be changed**
- Race/ethnicity
- Older age (65 or older)
- Genes
Considering All Causes of Morbidity and Mortality, Behaviors are the #1 Killer of Americans
Current State of Health in the U.S.

- Overweight and obesity will soon surpass tobacco as the number one cause of preventable death and disease in the United States; 42% of Americans will be obese by 2030; 1 out of 3 Americans will have diabetes by 2050 —CDC

- One out of 2 Americans have a chronic disease yet 80% of chronic disease is preventable

- One out of 4 Americans have multiple chronic conditions

- Our children are now predicted to have a shorter life span than their parents
TEN MEDICAL CONDITIONS WITH THE HIGHEST ESTIMATED SPENDING

Exhibit 1

<table>
<thead>
<tr>
<th>Condition</th>
<th>Civilian noninstitutionalized</th>
<th>Institutionalized and active-duty military</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mental disorders</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Heart conditions</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Trauma</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cancer</td>
<td></td>
<td></td>
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<tr>
<td>Pulmonary conditions</td>
<td></td>
<td></td>
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<tr>
<td>Osteoarthritis</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Normal birth</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Diabetes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Kidney disease</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hypertension</td>
<td></td>
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</tr>
</tbody>
</table>

SOURCE Author’s analysis of study data. NOTES Institutionalized populations include nursing home residents, long-term patients in psychiatric hospitals, and prisoners. Trauma is fractures and wounds. Pulmonary conditions include chronic obstructive pulmonary disease, asthma, and other pulmonary diseases.

How can we protect the health of the people who protect our own?

National Academy of Medicine
Action Collaborative on Clinician Well-Being and Resilience

Learn more at nam.edu/ClinicianWellBeing

Physician rates of depression remain alarmingly high at 39% (Shanafelt, 2015)

Prevalence of emotional exhaustion among primary care nurses: 23–31% (Giannou-Lopati et al., 2016)

400 physicians commit suicide each year, a rate more than 2x that of the general population (Andrew & Brenner, 2015)

24% of ICU nurses tested positive for symptoms of post-traumatic stress disorder (Mealer et al., 2007)
The Top 10 Health Issues in Ohio

Figure 3.3. Top 10 health issues identified in local health department and hospital assessments/plans

- Obesity: 61%
- Mental health: 53%
- Access to health care/medical care: 55%
- Drug and alcohol abuse: 49%
- Maternal and infant health: 36%
- Cancer: 35%
- Cardiovascular disease: 31%
- Diabetes: 27%
- Tobacco: 20%
- Chronic disease (unspecified): 18%

N=211 local health department CHA/CHPs and hospital CHNA/ISs covering 2011-2018
Source: HPIO review of assessment and planning documents, April 2016
Where do Ohio and other states rank on population health?

Used with Permission from the Health Policy Institute of Ohio
Where does Ohio rank in Health Value?

Ohioans are living less healthy lives and we spend more on health care than people in most other states.

Used with Permission from the Health Policy Institute of Ohio
Why does Ohio rank so poorly?
Ohio performs poorly on many of the factors that impact health value.
# Ohio’s Areas of Improvement

<table>
<thead>
<tr>
<th>Metric</th>
<th>Ohio’s rank</th>
<th>Trend</th>
</tr>
</thead>
<tbody>
<tr>
<td>Uninsured adults (2014)</td>
<td>13</td>
<td>Moderately improved</td>
</tr>
<tr>
<td>Unable to see doctor due to cost (2015)</td>
<td>13</td>
<td>Greatly improved</td>
</tr>
<tr>
<td>Heart failure readmissions for Medicare beneficiaries (2014)</td>
<td>17</td>
<td>Greatly improved</td>
</tr>
<tr>
<td>Youth marijuana use (2014)</td>
<td>18</td>
<td>Greatly improved</td>
</tr>
<tr>
<td>Unemployment (2015)</td>
<td>21</td>
<td>Greatly improved</td>
</tr>
</tbody>
</table>

Used with Permission from the Health Policy Institute of Ohio
## Ohio’s Challenges

<table>
<thead>
<tr>
<th>Metric</th>
<th>Ohio’s rank</th>
<th>Trend</th>
</tr>
</thead>
<tbody>
<tr>
<td>Infant mortality (rank-2014, trend-2015)</td>
<td>39</td>
<td>Moderately worsened</td>
</tr>
<tr>
<td>Cardiovascular disease mortality (2015)</td>
<td>40</td>
<td>No change</td>
</tr>
<tr>
<td>Adult smoking (2015)</td>
<td>43</td>
<td>Moderately improved</td>
</tr>
<tr>
<td>Food insecurity (2013-2015)</td>
<td>45</td>
<td>No change</td>
</tr>
<tr>
<td>Drug overdose deaths (2015)</td>
<td>49</td>
<td>Greatly worsened</td>
</tr>
<tr>
<td>Average monthly marketplace premiums, after advanced premium tax credit (2016)</td>
<td>38 (out of 38)</td>
<td>Greatly increased</td>
</tr>
</tbody>
</table>
Every day, we make behavioral choices that influence our health and wellness outcomes
Contributors to Premature Death

- Behavioral Patterns: 40%
- Genetic Predisposition: 30%
- Environmental Exposure: 5%
- Social Circumstances: 15%
- Health Care: 10%
- Health Care: 10%

Various factors contribute to premature death, with behavioral patterns being the most significant.
What Does The Evidence Tell Us?
Stress and Depression are Prevalent

One out of 4-5 children and adults have a mental health problem yet less than 25% receive any treatment
Based on Evidence, What Do We Know??

People who have the following behaviors have 66% less diabetes, 45% less heart disease; 45% less back pain, 93% less depression, and 74% less stress

- **Physical activity** – 30 minutes 5 days per week
- **Healthy eating** – 5 fruits and vegetables per day
- **No smoking**
- **Alcohol in moderation** – 1 drink per day for women, 2 drinks per day for men

*Getting 7 hours of sleep and regularly engaging in stress reduction will result in even greater reductions in chronic disease.*
Not the Size of Alcoholic Beverages in Vegas!
Percent of adults who engage in the 5 leading health behaviors that can reduce the risk of chronic disease. Nearly 83% of health-care spending could be cut if more people employed:

- Not Smoking
- Exercising regularly
- Avoiding alcohol or drink in moderation
- Maintaining a healthy body weight
- Getting sufficient sleep

—CDC, 2016
New Year's Resolutions

for 2009

1. Lose weight again
2. Get fit next year
3. Give up alcohol
4. Stand up to boss
5. Be nicer to my wife
6. Sort out junk in shed


more drink less

and cigarettes find job
A Sustainable Culture of Wellness is a Must
Remember, *Culture Eats Strategy!*
Why Create a Culture of Health and Well-being?

• To have a Buckeye family, community and state that is healthy, happy and fully engaged
• To reduce costs that can be invested in other needed areas
• To ensure that everyone, including our children and grandchildren, can lead long high quality lives
Ohio State has become a National Leader in Health & Wellness

**Vision:** To be the healthiest university and community on the globe

- The only University in the U.S. with Silver Healthlead Accreditation for Faculty/Staff and Students
- The Health & Wellness Discovery Theme
- OSU Extension: an exemplar of community engagement in all 88 Ohio counties
The OSU Wellness TEAM
Together, Everyone Achieves More
A Comprehensive Integrated Approach to Wellness

One University Health & Wellness Council
and Sub-Councils

HR/Your Plan for Health

The OSU Health Plan

Buckeye Wellness and Buckeye Wellness Innovators

Student Life
The Ohio State University
The Social-Ecological Framework and Life-Course Perspective Guide, Evidence-based Interventions to Achieve the Vision of Ohio State as the Healthiest University on the Globe

Community & State-wide Interventions
- Community-based interventions
  - Education
  - Healthy lifestyle programs
- State-wide health & wellness policies
- Television/media
- Million Hearts initiatives

Family & Social Network Interventions
- Family programs
- Group classes
- Wellness challenges
- Amazing Race
- Hit the Road with the Buckeyes

Workplace Ecosystem and Culture
- Workplace interventions
  - Buckeye wellness
  - Wellness innovators
  - Leaders Program
  - YPAH
  - STAR Program
  - Ergonomics assessments
  - Wellness Wednesdays
  - Policies (e.g., tobacco free)
  - PR/Communications
  - YouTube Evidence-based Health
  - Massage

Individual Interventions
- PHA
- Biometric screening
- Health coaching
- Integrative Therapies
- Wellness onboarding
- Health Athlete
- Buckeye Babies
- CC/DM

Assessment, Monitoring, Evaluation and Dissemination

Outcomes
- Individual Outcomes
  - Health & Wellness outcomes
  - BMI, PHA completion, BP, Lipids, HandA1c, stress, depression, injuries, missed work days, healthy lifestyle beliefs & behaviors
  - Resilience, chronic disease
  - Quality of life
- Family Outcomes
  - PHA Completion, BMI, BP, Lipids, % engaged in wellness programs
- Workplace Outcomes
  - Healthcare utilization
  - Healthcare costs
  - Perceived Culture & Ecosystem. # of programs offered with % engagement
- Broad Outcomes
  - # of community and state-wide programs with engagement
  - # of policies
  - State health outcomes

Adaptation: Model to Achieve Healthy People 2020 overarching goals
Source: Secretary’s Advisory Committee on Health Promotion and Disease Prevention Objectives for 2020 (2008, p. 7)
In God We Trust, Everyone Else Must Bring Data to the Table!
Percentage of Low-Risk Employees According to Framingham Risk Scores

Employees with Five Health Assets
Normal BP, < 200 Cholesterol, HDL, Non-Smoker, No Prior Diabetes or Coronary Artery Disease
OSU’s Healthcare Spend and Return on Investment

- 1.4% compared to +4.3% in other organizations
- $3.65 ROI for every dollar invested
- Cumulative productivity savings: $15,424,829
What Will It Take to Build a Culture of Health and Well-being in our Community and State to Improve Our Outcomes?

• Making Health and Well-being a Shared Value and Priority
• Creating healthier equitable communities
• Strengthening integration of health services and systems
• Fostering cross-sector collaboration
Preventing Type 2 Diabetes Mellitus

Recommended Actions:

You need to:

- Mind BOTH your diet AND exercise. You do not get the same effect of preventing diabetes if you pay attention to diet or exercise only. You have to look after both diet and exercise.
  - Diet: Eat 50-65% carbohydrates, 10-15% protein, 20-30% fat, <10% saturated (animal) fat
  - Exercise: 30 minutes/day
- Manage your weight
  - Keep your body mass index (BMI) < 24, if overweight try losing 5-10% of baseline weight over 6-12 months
- Set a goal for diet and exercise

Stay Tuned for the Helene Fuld Health Trust National Institute for Evidence-based Practice’s EBP Clearinghouse Consumer Website
The 4th National Summit on Building Healthy Academic Communities

April 30/May 1, 2019 at The Ohio State University

See www.healthyacademics.org

The Inaugural National Summit on Promoting Well-being and Resilience in Healthcare Providers

September 26-28, 2018
Columbus, Ohio

Sponsored by The Ohio State University
All 7 Health Sciences Colleges and the College of Social Work
Today, Make a Commitment to Making One Healthy Behavior Change for You and Your Family’s Well-being
The Next 5-10 Years

What can we do together in the next 5-10 years if we know that we can not fail?

Let’s shoot for the moon, even if we miss, we will land amongst the stars

—Les Brown

There Is A Magic In Thinking Big!
Let’s Dream, Discover and Deliver the Healthiest Community and State in the U.S. Together

Final Motivational Words: Let’s Just “Do it!”
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