



Center for Social Development

GEORGE WARREN BROWN
SCHOOL OF SOCIAL WORK



Washington University in St. Louis



Close the Health Gap

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Background



- Sub-Groups
 - Alcohol Group
 - Community-Based Group
 - Health Services, medical systems/practices-based group
 - Need to add: mental health/addictions/trauma
- Several Overarching Themes:
 - Social, economical, cultural, and environmental determinants of health
 - Paradigm shift in view of health-more holistic
 - Settings-Place based agenda that incorporates community vision and voice
 - Culturally-centered prevention and social innovation
 - Evidence base that provides leaders with effective, culturally-congruent and sustainable models
 - Cross-sector inter-professional collaboration in research, prevention, and intervention efforts
 - Local to global policy efforts
 - Establish social work as a “health profession”
 - Addressing population health and individual health- health equity focus, not just closing the gap



List of Key Policy Recommendations



1. Focus on Settings/Place-Based research and interventions to improve the conditions of daily life
2. Advance community empowerment and advocacy for sustainable health solutions and prevention
3. Cultivate health interventions in primary care and community-based centers and other places (e.g., faith-based, cultural centers, parks, recreation, schools)
4. Promote access to health care and insurance for all
5. Foster development of an interprofessional workforce
6. Develop global health policy agenda on reducing alcohol misuse (other addictions)



Key Policy Initiatives Next 10 Years



- Any policy recommendations must incorporate community governance and members
- Behavioral Health- needs more development in this grand challenge- mental health, addictions, trauma/violence
- Examine social work role and priority in place-based-federally qualified health centers
- Work at agency level in block grant mandates to state- SAMHSA example
- Focus on broader definition of health policies by looking at **food, air, and water** policies (e.g. Flint and DAPL- Water Resources Development Act)
- Social work should be identified as a “health profession” for all relevant federal health policy legislation (e.g., Indian Health Service)
- Strengthen research, education, and training partnerships with nursing, dentistry (oral health), public health and social work (e.g., social work/nursing joint teaming work with elders in homes)
- Expand Public Health Social Work programming
- ACA-
 - More robust implementation of the parity requirements of mental health and substance abuse treatment
 - Improve operability between VA and ACA benefits
 - Continue to grow the prevention aspects of ACA and add behavioral components of prevention and how to define this- in terms of “health” – paradigm shift
 - Closing the health gap vs. focusing on health equity- focusing on state level policies and community-centered needs –looking at state-level creative alternative models to Medicaid expansion
 - Need to focus on expanding ease of signing-up/system streamline access procedures for Medicaid expansion



Potential Stakeholders and Partners



- CSWE and NASW
- Gates Foundation
- Insurance Companies
- Community Leaders/Stakeholders
- Robert Wood Johnson
- Health Professions- Dentistry, Nursing, PH
- Military/VA
- Think Tanks around health
- Media and social media networking