## Music

Mark Masselli: This is Conversations on healthcare. I am Mark Masselli.

Margaret Flinter: And I am Margaret Flinter.

Mark Masselli: Well Margaret we spend so much time focusing on American Healthcare and the huge transformations underway here. Sometimes we like to aim our lens globally. So much transformation is happening really around the world.

Margaret Flinter: And while the Affordable Care Act in the rise of technology and medicine is dramatically changing the landscape here the same thing is happening in China. That country is developing rapidly across the board and they have announced an initiative to overhaul their nation's healthcare system. That's going to be a massive undertaking considering the size of the population.

Mark Masselli: The current system is cobbled. Traditional Chinese medicine combined with the growing trend of modern medical training.

Margaret Flinter: Well the Chinese government has announced an initiative to modernize the nation's health infrastructure. They are planning to double of the number of the nation's doctors by 2020 and they have announced a 5 year roadmap to improving the nation's healthcare infrastructure planning to put in place the system of electronic health records, to develop a cloud based system to store all that new healthcare data and as you can imagine the world's health industry vendors are lining up for what's expected to be a trillion dollar project.

Mark Masselli: It may be of interest to see how the Chinese health reform unfolds in the coming years.

Margaret Flinter: And our guest today is one of the world's leading experts on global health. Dr. Jeffery Sachs is the Director of the Earth Institute at the Columbia University and Director of the UN's Millennium Development Goals as well as a new initiative the sustainable developmental he is a terrific thought leader in this area and we are looking forward to that conversation.

Mark Masselli: Indeed Lori Robertson now stops by as she always does on the misstatements spoken about health policy in the public domain but no matter what the topic you can hear all of our shows by going to chcradio.com

Margaret Flinter: And as always if you have comments email us at <a href="mailto:chc1.com">chc1.com</a> or find us on Facebook or Twitter because we love to hear from you. We will get to our interview with Dr. Jeffery Sachs in just a moment.

Mark Masselli: But first here is our producer Marianne O'Hare with this week's headline news.

#### Music

Marianne O'Hare: I am Marianne O'Hare with these Healthcare Headlines. coverage and hospitals the Cleveland Clinic calls the ACA a win-win noting since the passage of the Affordable Care Act and two rounds of open enrollment, the percentage of uninsured seeking care at that hospital is down significantly 40% in 2 years. Cleveland Clinic reports its charity care spending is down by about \$70 million. Hospitals officials credited the Federal Law for the improvement due to the expansion Medicaid eligibility in Ohio. The 40% drops spotlights national trend on how payments are changing for all providers since the Health Law ruled out. Another staled action in Congress means more time to guess about the future or the appeal of the SGR. The (inaudible 02:57) bipartisan dealt and the almost two decades old sustainable growth rate formula which compensates providers treating Medicare patients. The senate failed to act on the Doc Fix before the two week recess and won't be back in business till April 14th. It's expected when they return there will be more haggling over amendments to the bill before final action is taken. And if you are in hospital for any reason you are obliged to wear the dreaded hospital gown. The Cleveland Clinic and several other hospitals around the country are looking at redesigning the traditional open back flap design saying they are bad for patient moral and can be demoralizing. Cleveland Clinic has even solicited the talents of designer Diance Von Fostenburg, a designer of the iconic wrap dress. She has taken that same approach to the hospital gown. This wrap hospital gown ties in the front is made of softer fabric and comes with pockets. Early abated testing patient's uniformly love the new design. I am Marianne O'Hare with these Healthcare Headlines.

#### Music

Mark Masselli: We are speaking today with Dr. Jeffery Sachs, Director of the Earth Institute at the Columbia University. Dr. Sachs is also key advisor to UN General Secretary Ban Ki-moon on the Millennium Development Goals. It is the record of the UN sustainable development network. He is the author of several best sellers including the End of Poverty and the price of civilization. His latest book the Age of Sustainable Development has just been released and his one numerous distinctions being named twice to Time Magazine's list of hundred most influential world leaders here and he is Undergraduate Masters and PhD from Harvard. Dr. Sachs welcome to Conversations on Healthcare.

Dr. Sachs: Pleasure to be with you.

Margaret Flinter: Great. Jeff you have had an interesting perch at the intersection of global development and its impact on health and well-being and you have been a key advisor to numerous countries around the world then help pass to achieve success with the Millennium Development Goals which has a very strong focus on improving global health with a focus on eliminating preventable maternal and child mortality in tacking

malaria, HIV and AIDS so we are now at the end of that 15 year old process. Can you tell our listeners how far we have come in meeting those targets?

Dr. Sachs: It's been a 15 year period in which many diseases that are an ancient scourges like malaria have been brought partly under control in which child birth has become safer, in which the mortality rates of young children have declined pretty significantly around the world. When we have put the effort into helping disease control we have gotten good results. I would say the main message of the millennium development goal period is if you invest in health you will get better health. As a result we have tools that are quite powerful to help people have healthy or safer lives. The big problem has been that for the poor these tools have been out of reach and the purpose of the MDGs has been to bring them into reach.

Margaret Flinter: Well just you are one of the first global economist to put the data together that illustrates how this absolutely does apply to global economic development. Your early study showed that in places where scourges like AIDS and malaria were prevalent economic growth was non-existent. So tell us more about this health wealth connection.

Dr. Jeffery Sachs: Now imagine regions or countries beseech by pervasive infections whether its worm infections or repetitive bouts of malaria or HIV AIDS. Well when I was beginning my work in the number of those countries 20 or 25 years ago I was completely stunned actually coming from a rich country and with the idea that when people are sick they go to a doctor. To be in places where when people are sick they die. Often dying of causes that are treatable for under a buck for example it's shocking. I started because of that sense of bewilderment I would say 20 years ago to ask myself the question now what's the consequence of all of this and began research that you mentioned on showing just how devastating these epidemics are for economic development. Well then 50 years ago at the start of this millennium period. I was asked to chair a commission for the World Health Organization on exactly this question and we found that indeed investing in health it's obvious from the point of view of helping impoverish places, get out of the crap of poverty leading to more disease. A lot of those ideas were then incorporated in the Millennium Development Goals and in particular in the creation of new funding institutions like the global fund to fight AIDS, TB and Malaria. It's because of that putting in real resources behind good science and good technology that these diseases come under control. The truth of the matter is that deep in if the government itself is not one that to one would love there are actual ways to deliver healthcare that really worked. Polio tremendously down almost eradicated. AIDS treatment now up to some more probably around 13 or 14 million people alive today because they are systematically receiving their medicines. Malaria down by around 60% deaths so the bottom line is this stuff works. Countries get off their backs when these disease burdens come down economic growth can get started again, agricultural productivity can start to rise and this fantastic field of public health can really deliver.

Mark Masselli: Jeff and your most recent book The Age of Sustainable Development you start off by providing a framework to understand what sustainable development is and then explore how we can achieve these goals moving forward. Also it's a textbook for anyone interested in taking your massive online course but I do want to focus in on sort of the bigger context to your mission started off with former UN General Secretary Kofi Annan on the Millennium Development Goals and now with Ban Ki-moon as a Secretary General you are focusing on sustainable development goals and maybe just give this larger context of how this is working for our listeners.

Dr. Jeffery Sachs: Sustainable Development says keep your eye on three things, first the economy, second the help of the society, is society becoming more unequal? So what is called social inclusion or social capital is the second heart of sustainable development and then the third don't let the economy wreck the environment and unfortunately the world economic system over the last quarter century has been turning out so much pollution, there is so much carbon dioxide coming from burning coal, oil and gas. I think most people now really understand well we are actually changing the climate, we are changing the ocean chemistry, we are destroying the habitat of other species so sustainable developments the idea that we need a holistic approach for our world economy and that's why the UN members states a 193 governments in the world agreed 3 years ago that this coming September the world will adopt dual goals that they will call sustainable development goals or STGs to put sustainable development into the world's consciousness. I have written the book the age of sustainable development to help explain the concept and how it can actually be achieved.

Margaret Flinter: You have noted that this work that's been done over the last 15 years there really has been this remarkable progress only a very small percentage of the millions of HIV infected Africans were receiving any kind of effective medical intervention, malaria infections are on the rise, globally infant mortality was at 12.6 million per year in 1990 maybe highlight some of the interventions as you look back that brought about the results from that water shed moment when a global commitment was made to tackle these huge health challenges.

Dr. Jeffery Sachs: For me the AIDS and malaria control efforts have been remarkable to see from a position in which both diseases were running completely out of control to a situation where we are really within insight of beating both of those diseases. Malaria for me has been a vivid example of the potential triumph of public health. Back in 2000 there was almost no control effort and yet the malaria specialist that I talked to back then said of course this is a controllable disease. We have insecticide treated and we have a new first line of medicine that can actually cure it out of malaria and part of it was creating a new institution the global fund to fight AIDS, TB and malaria to help finance the battle. Part of it was to ensure that every household in Africa that needs it and can't afford it should get a mosquito so that they would have some protection hundreds of millions of nets have been distributed. Then the scientist came up with a better diagnostic for malaria. It used to be that you needed someone looking through microscope and that was a very difficult thing to organize to have a trained microscopist and have the lab equipment and the clinic might be 10 miles away and so forth and then

the clever scientist came up with a rapid diagnostic where just one drop of blood on a little strip would change color if the person is infected with malaria. Well all of a sudden you could now diagnose the disease out in the village in a poor person's farm and here are the medicines to treat you. Then came the mobile phone revolution so that you could now have an outreach worker with the backpack that have the rapid diagnostic test and the new medicines so a whole system has developed for community based malaria control. We have seen malaria deaths come down as I mentioned by around 60%, that we should have 100% but we don't have the funding and the organization in place to really drive it down to zero right now and that's why I am calling for a scaling up of our success stories. Its funding community help workers for example who can get us to the 100% cure rate.

Mark Masselli: We are speaking today with Dr. Jeffery Sachs Director of the Earth Institute at the Columbia University. Dr. Sachs is also a key advisor to UN Secretary General Ban Ki-moon on the Millennium Development Goals and he is director of the UN Sustainable Development Network as well as commissioner of ITU UNESCO's broadband commission for development and Jeff let's take a look at the proliferation of mobile technology in the developing world and it's not only become a vital tool in filling enormous gaps in the care delivery system of the developing world. It's also a vital tool in economic development as well and while we focus in on healthcare apps we kept a keen eye on the banking world in Kenya of the M-Pesa the mobile money transfer platform has been very exciting, how has mobile technology like this enhanced your work in advancing health for all?

Dr. Jeffery Sachs: For poor people isolated in rural areas no banks, no ability to find transport in an emergency the transformations that's come with the mobile phone revolution in my view has been the biggest boost of all to the economic development of the poorest parts of the world. This is really the leap frog technology. I am convinced that smart broadband is going to bring education and quality education to the poorest places in the world. Now they can have the world knowledge if we get a bit organized for them to have a screen and wireless broadband. I am convinced that it is going to transform healthcare delivery and by the way not only in poor countries but in our countries as well because now you can do regular sensing of blood pressure or some other health indicator. In poor countries where there may not be a radiologist anywhere nearby now with Telemedicine that radiologist could be half way around the world. It doesn't matter. The banking which you mentioned M-Pesa came to Kenya before it came to Manhattan. The Apple pays trying to do what Kenyans have been doing for years which is to easily use their mobile devices as a regular payment systems and for people who would never step foot in a bank and had no prospect of stepping foot in a bank they are doing normal banking and electronics payments so it's exciting and for me it really is the key for future.

Margaret Flinter: Well Jeff you are just part of an event that happened here in our home state of Connecticut and in your presentation of the global health and innovation conference at **EL** [PH] University you spoke to perhaps one of the greatest threats to the global health in the coming decades and that's climate change. Minority of political

and economic interest continue to run interference on reaching a global consensus and how best attack of the critical issue, can you outline for us the real threat to global health as created by climate change?

Dr. Jeffery Sachs: This so crucial that we take some preventative steps at this point to head off what could be real calamities. I think all of us now almost all of us except maybe for the CEO of a big oil company that the climate change is real that it is intensifying heat waves that even these awful cold spells we have had in the northeast of the United States are related to the derangement of climate coming from the greenhouse gases that are modern world economy pumps into the atmosphere at huge amounts. My god we have already raised the world's temperatures. We have already instigated more extreme hurricanes and typhoons. We are having more droughts and heat waves in many places in the world. The thing we haven't done is address this problem coherently and the reason we are the tipping point is that the public knows this is true but the propaganda in some of the corporate press like the Wall Street Journal unfortunately and the politics in Washington have a prevented action. Here you have about 70% of Americans saying we should do something but we have a Congress that is in the hands of a big oil and big coal and I think we are about to make a breakthrough. The what to do in broad terms is straightforward but not simple and that's to change the primary energy sources for the world from the coal, oil and gas to renewable energy like wind and solar power, hydro power. That's feasible. It is a charge and a responsibility over a course of two or three decades. It doesn't sit too easily with the dig oil because it means using less of what they produce. We would actually not only have a safer planet, we would have a cleaner air and a higher quality of life if we make the transition to a low carbon smart energy system but it just means that some of the old vested interest they have to get out of the way so that we can build the new economy.

Mark Masselli: We have been speaking today with Dr. Jeffery Sachs, Director of the Earth Institute at the Columbia University and a key advisor to UN Secretary General Ban Ki-moon who could also learn about his work by gong to earth.columbi.edu or to jeffsachs.org. Jeff thank you for the work you do and for joining us on Conversations on Healthcare.

Dr. Jeffery Sachs: Well really great to be with you. Thanks so much.

### Music

Mark Masselli: At Conversations on Healthcare we want our audience to be truly in the know when it comes to the facts about Healthcare Reform and Policy. Lori Robertson is an award winning Journalist and Managing Editor of FactCheck.Org a non-partisan, non-profit consumer advocate for voters that aim to reduce the level of deception in US politics. Lori what have you got for us this week?

Lori Robertson: President Obama recently said that the Affordable Care Act is reducing the overall cost of healthcare including putting "\$1800" in people's pocket but the

President's \$1800 reduction isn't a reduction in insurance premium but rather it's the difference between the cost of the average employers sponsored plan in 2014 and what the average premium would have been if based on average rate increases from 2000 through 2010. The calculations were done by Whitehouse economic advisors but even they say the Affordable Care Act isn't responsible for the full \$1800 difference. Employer's sponsored premium have been growing at low rates for the past few years and the Whitehouse Council of economic advisors look that what premium growth would have been since 2010 if the growth rates had been high as they were in the decade before. That calculation show the average family premium for employers sponsored plans would be \$1800 more than it actually is but does the ACA get credit for that? As Obama said it should it could be responsible for some of the slower growth but experts largely attributed to the sluggish economy. The Council of Economic Advisors said "a significant" fraction of the slowdown in healthcare inflation could be linked to the ACA but it didn't say how much? Also the \$1800 difference is the total premium amount that would have been paid by both employers and employee so not all of the \$1800 would amount to money in people's pocket and that's my FactCheck for this week. I am Lori Robertson, Managing Editor of factcheck.org.

Margaret Flinter: FactCheck.org is committed to factual accuracy from the country's major political players and is a project of the Anna Bird Public Policy Center at the University of Pennsylvania. If you have a fact that you would like checked Email us at CHCradio.com. We will have FactCheck.org Lori Robertson check it out for you here on Conversations on Healthcare.

## Music

Mark Masselli: Each week conversations highlight a bright idea about how to make wellness a part of our communities in everyday lives. Depression is extremely common among Ed lessons in this country but it's often hard to differentiate between typically (inaudible 23:05) and a clinical condition that requires more immediate intervention. Unfortunately, a teen's level of depression isn't realized until they take drastic action. Suicide is the third leading cause of death among 10 to 24 year olds, a population that almost ubiquitously uses texting as a form of communication.

Nancy Lublin: If you are someone who is in pain, you texted us and then the councilor on the other side is not working from a phone, they are on a screen that almost looks kind of like Facebook or Gmail.

Mark Masselli: Nancy Lublin is founder and CEO or Crisis Text Line an instant texting service designed to encourage teens in crisis to reach out for help which they receive instantly. All they have to do is text the numbers 741-741.

Nancy Lublin: When messages come in with certain keywords in them they automatically get tagged at high risk. If you are at risk for suicide you are automatically bumped up in the queue and you are like a code red.

Mark Masselli: Since she founded Crisis Text the word has spread like wild fire. They receive an average of 15,000 text per day from kids experiencing everything from typical teen dilemmas such as a fight with a boyfriend, to kids contemplating suicide, those in most danger are encouraged to take action through a series of channels. Crisis Text Line an instant age appropriate intervention available free of charge and 24x7 to give kids in crisis a life line and leave them to help they need. Now that's a bright idea.

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Margaret Flinter: This is Conversations on Healthcare. I am Margaret Flinter.

Mark Masselli: And I am Mark Masselli. Peace in Health.

Conversations on Healthcare broadcast from the campus of WESU at Wesleyan University.

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