



**National Institutes of Health**  
Office of Research on Women's Health

# *A National Perspective on Women's Health*

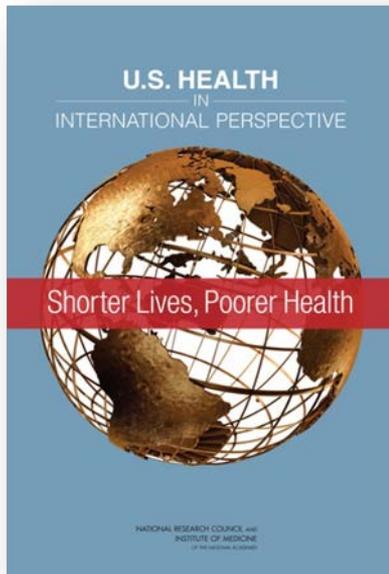
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39<sup>th</sup> Advisory Committee on Research on Women's Health  
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# Shorter Lives, Poorer Health

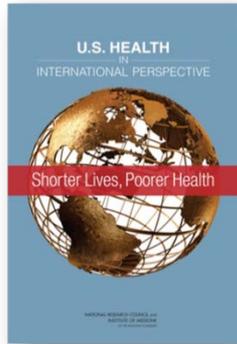


- National Institutes of Health (NIH) asked the National Research Council and the Institute of Medicine to convene a panel of experts to investigate potential reasons for the U.S. health disadvantage and to assess its larger implications.
- Original report published by the National Academies Press in 2013.
- Funded by OBBSR, NIA
- The report examines the nature and strength of the evidence on life expectancy and health in the United States, comparing U.S. data with statistics from 16 “peer” countries—other established high-income democracies such as Canada, the United Kingdom, and Japan.





# Report Findings



- The panel relied on the most current data, and it also examined historical trend data beginning in the 1970s; most statistics in the report are from the late 1990s through 2008.
- The United States, which is among the wealthiest nations in the world, is hardly the healthiest.
- Not only are their lives shorter, but Americans also have a longstanding pattern of poorer health that is strikingly consistent and pervasive over the life course -  
- at birth, during childhood and adolescence, for young and middle-aged adults, and for older adults.





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# Report Findings

The U.S. health disadvantage spans many types of illness and injury. When compared with the average of peer countries, Americans as a group fare worse in at least nine health areas:

1. infant mortality and low birth weight
2. injuries and homicides
3. adolescent pregnancy and sexually transmitted infections
4. HIV and AIDS
5. drug-related deaths
6. obesity and diabetes
7. heart disease
8. chronic lung disease
9. disability





# Staggering Statistics

The U.S. has:

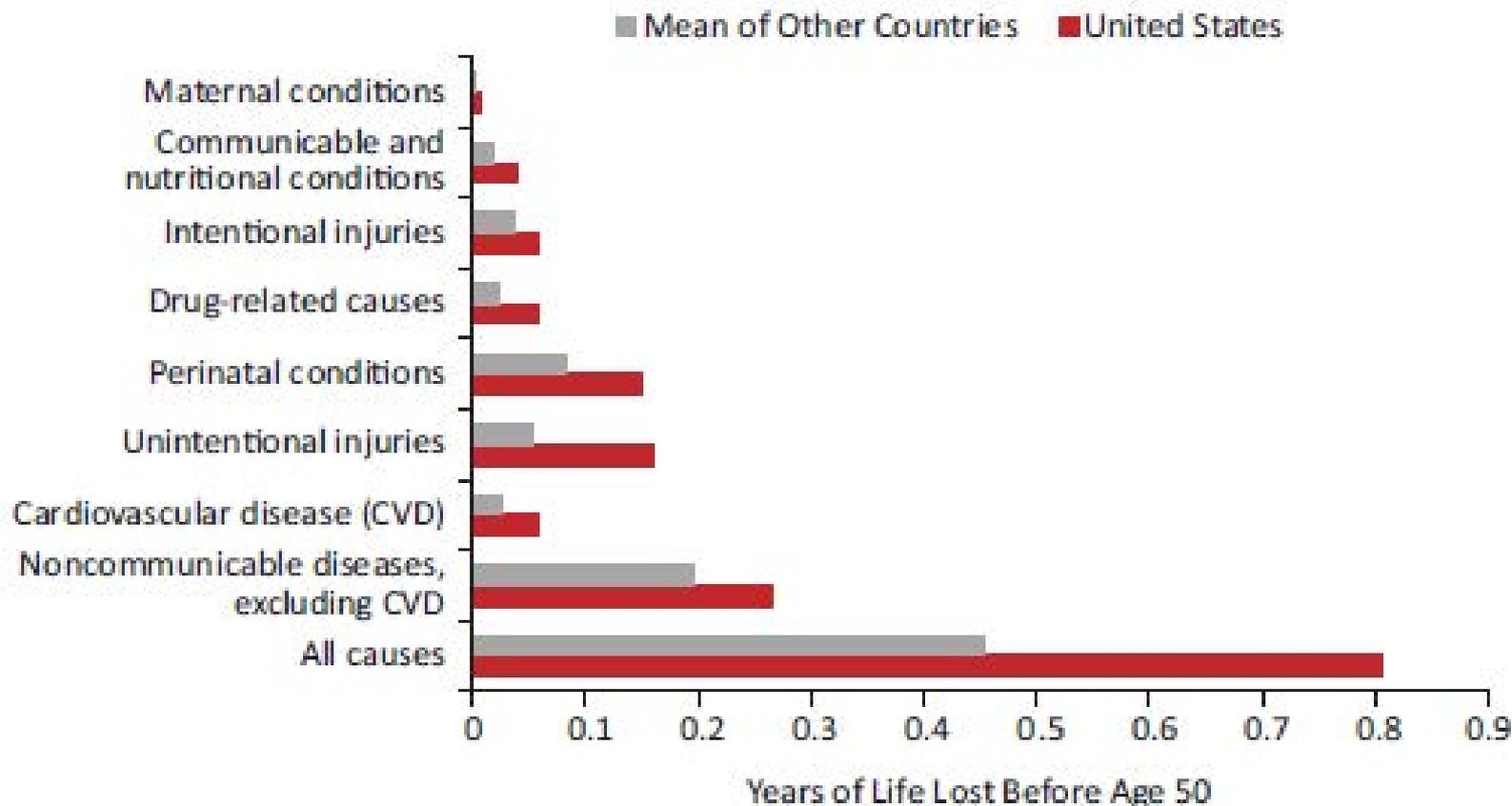
- The highest rate of death by violence
- The highest rate of death by car accident
- The highest chance that a child will die before age 5
- The second-highest rate of death by coronary heart disease
- The second-highest rate of death by lung disease
- The highest teen pregnancy rate
- The highest rate of women dying due to complications of pregnancy and childbirth





# Report: Areas of Most Concern for Women

## SHORTER LIVES





## The Bottom Line

- For many years, Americans have been dying at younger ages than people in almost all other high-income countries. This disadvantage has been getting worse for three decades, especially among women.
- It affects all ages, races, economic classes, geographic regions, education levels
- Women are disproportionately affected by noncommunicable diseases, perinatal conditions, CVD.
- The health disadvantage is pervasive-it affects all age groups up to age 75 and is observed for multiple diseases, biological and behavioral risk factors, and injuries.





# Why Are Americans So Unhealthy?

- Health systems
  - Health behaviors
  - Socioeconomic conditions
- The U.S. health disadvantage cannot be fully explained by the health disparities that exist among people who are uninsured or poor, as important as these issues are.
- Several studies are now suggesting that even advantaged Americans – those who are white, insured, college-educated, or upper income -- are in worse health than similar individuals in other countries.





## Recommendations Related to Women's Health Policy

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- **RECOMMENDATION 6**

The National Institutes of Health or another appropriate entity should commission an analytic review of the available evidence on

- (1) the effects of policies (including social, economic, educational, urban and rural development and transportation, health care financing and delivery) on the areas in which the United States has an established health disadvantage,
- (2) how these policies have varied over time across high-income countries, and
- (3) the extent to which these policy differences may explain cross-national (women's) health differences in one or more health domains.





# Next Steps for ORWH

- The Committee on Population of the National Research Council will form a steering committee to organize a meeting of experts on women's health to discuss the data on women and determine the best approach for ORWH to take in future projects to promote this information.
- The steering committee will develop plans for a 1-2 day workshop
- Workshop will include presentations, strategy/brainstorming sessions and ample discussion time.





# Sample Sessions

Expert Meeting on Women's Health in a National Perspective

Session 1: Findings of Shorter Lives, Poorer Health Regarding Women's Health

Original Panelists

Session 2: Factors Influencing Differences in Women's Health Outcomes

Access to Medical Care

Bias in Medical Care Delivery

Social and Environmental Factors

Session 3: Summary of Research on Factors Influencing Differences in Mortality

Education, Smoking, Alcohol, Obesity, Birth Outcomes, Accidents, STDs/HIV/AIDS , Heart and Lung Disease

Session 4: Trends by Geographic Area/Race/Ethnic Group

Session 5: Future Research Directions





# Focus and Outcomes

- The workshop will focus specifically on women's health and women's health research.
- Priority research questions and future endeavors
- This effort will lead to funding announcements, trans-NIH collaborations, publications.
- National Academies Press workshop summary and publication



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**NIH** National Institutes of Health  
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# The Ultra Intra-Disciplinary Approach





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## Why NIH? Why ORWH?

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- Women's Health in 2015 is very different than it used to be.
- We want to identify the gaps and design studies with a creative approach.
- We need a 360 degree view of the health of women.
- Moving beyond mortality data to understand the bigger picture.
- This is an initiative for ORWH, not simply a meeting.





“An investment in knowledge always pays the best interest.”

-Benjamin Franklin

