

Health Insights Today

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Wellness Initiative for the Nation (WIN) Interview with Wayne Jonas, MD

The Wellness Initiative for the Nation (WIN) is a groundbreaking set of health policy proposals calling for a paradigm shift in the direction of wellness, prevention, health promotion and integrative practices. In the long run, these offer the best hope for reversing the epidemic levels of chronic disease – cancer, heart disease, diabetes, obesity, arthritis, osteoporosis and others – that are the true face of today’s health crisis.

Among WIN’s key components is the creation of a greatly expanded wellness and prevention infrastructure, training thousands of full-time, community-based “health and wellness coaches” to work full-time on “chronic disease prevention and health promotion through comprehensive lifestyle and integrated health care approaches with specific demonstrated effectiveness.” This would be combined with new certification programs for licensed health professionals “to earn specialist certification in prevention, health and wellness delivery, or attain sub-specialist status for integrated health care delivery in specific settings and populations – for example, schools, worksites, the military, health care settings, and long-term care facilities.” In addition, WIN calls for creation of “a Health Corps to provide an army of young and older people that would learn and model wellness behavior and support delivery of wellness education and training by the coaches.”

Wayne Jonas, MD, and his colleagues at the Samueli Institute deserve great credit for crafting these far-reaching proposals, which are as pragmatic as they are visionary. Formerly a career military medical officer in the U.S. Army, Dr. Jonas was director of the National Institutes of Health Office of Alternative Medicine during the mid-1990s, its years of greatest growth and transformation. Known for his strong commitment to rigorous research and to integrative medicine, he has authored over 100 publications, including the well-regarded textbook, *Essentials of Complementary and Alternative Medicine*.

Jonas is now President and CEO of the Samueli Institute and an Associate Professor in the Department of Family Medicine at the Uniformed Services University of the Health Sciences (USUHS) in Bethesda, Maryland. He has served as the director of the Medical Research Fellowship at the Walter Reed Army Institute of Research and on numerous university, government, and private foundation committees including as Chair of the Program Advisory Council for the NIH Office of Alternative Medicine and director of a World Health Organization Collaborating Center for Traditional Medicine. He was also a member of the White House Commission for Complementary and Alternative Medicine Policy.

In this interview with Dr. Daniel Redwood, Dr. Jonas speaks in reasoned tones, but with a profound sense of urgency about the need to create and implement policies that would, for the first time, bring wellness, prevention, health promotion, and integrative practices into the primary roles they must play in any sustainable health future.

What was the genesis of the Wellness Initiative for the Nation? What led you to feel it was necessary?

I’ve always felt it was necessary. We focused on health and wellness because we have been digging ourselves deeper and deeper into a dysfunctional system, and an economic impossibility, by focusing on late-stage diagnostic threshold models of disease. One of the reasons I was interested in the whole area of integrative health, traditional health practices, and complementary medicine, as well as in the mainstream of health promotion, was because they had a philosophy and an orientation that focused on what the ancient Greeks called the Hygeia model of medicine. The concept is that when you facilitate the person’s own inherent recovery processes, you’re going to get your biggest

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bang for your buck across the spectrum, whether you have a disease or not, for disease management, prevention, recovery (healing) and reintegration. It's the core of what I feel is of most value and can most contribute to health care.

At the Samueli Institute, it's why our subtitle is "Exploring the Science of Healing" and our mission is "Advancing the Science of Healing," because we want to focus on understanding those processes, applying them, and evaluating their impact in the real world. That's an interest I've had for a long time.

The genesis of the WIN program is that, about 10 months ago [March 2007], I decided that we ought to take some of the research that we've been gathering for years and begin to communicate that on a policy level, *just in case* there was ever an opportunity to re-look at health reform. My hope was there would be a chance to try to get on the radar screen a new way of approaching health and health care. One that isn't just about "increased access or better efficiency in the current system," which is the usual debate.

That showed some real foresight.

I pulled together a group of health policy people I knew that had an interest in this area, into a small working group called the SWAT group (Systems Wellness Advance Team) and we began working on what a health policy would look like, and scoured the works of a number of other efforts that are aligned with this goal. We put this together, based on an attempt to focus specifically on how you would transform a culture and an industry into one that focused on primary prevention (and especially lifestyle areas rather than only disease screenings).

Not that we're against disease screening, but that's a disease-based model and we're interested in a health-based model, and the role of integrative practices in making that happen. There are hundreds of thousands of licensed integrative practitioners in our nation who hold a philosophy that is more aligned with creating health and resilience than disease treatment, and who manage illness with that model. And so integrative health practices have an important role, but they're never on the radar screen when other policy issues are addressed, and so I thought that this initiative ought to at least get those two things onto the table this time. That was the reason for putting together this Wellness Initiative for the Nation. Then the Obama group said to have a community meeting [there were 8500-plus such meetings around the country in the last two weeks of 2008].

To what extent do you think that prevention and health promotion should be encouraged and delivered by health professionals and to what extent by others, including the new infrastructure proposed in WIN, with Health and Wellness Coaches?

I think that a large part of health promotion is figuring out how to create an optimal environment in which people can care for and manage their own health. That requires an element of trained health care professionals as part of it, but its primary focus is in education; it's a training and educational model. It isn't a model based on the diagnosis and treatment of disease. My basic feeling is that health practitioners can play a big role, but we will need to have a much more broadly focused group of individuals that support children in schools, that provide worksite health promotion for those in the labor force, that work with other groups like the military and the veterans, and work with the aging population, all of which have slightly different needs in terms of how to go about implementing health promotion and integrative health care. But at the same time there are basic, fundamental elements that cut across all of them—nutrition, exercise, social integration, and help for psychological stress.

To what extent does this need to be centrally coordinated?

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I think there needs to be guidance and coordination, in order to create a culture and an industry in these areas. We have a wonderful system that, if it is fostered through either social values or through economic incentives, enables us to do a tremendous amount. We've got incredible innovators. All you have to do is look at the amazing technologies emerging every day around diagnostic imaging, around genomics and proteomics, and around new surgical techniques. These fantastic innovations are designed to better and better diagnose and treat disease.

If we were able to guide that industry into creating practices, products and people that are focused on enhancement of health and flourishing, we would be able to get that innovative power there. And so some central guidance needs to be there. We need to think about that and not just let it go randomly. We need to be trained at it; we need to have people think about how to do that across the sectors, because creating health is not just for the health care system. It involves transportation (walking and bike paths, for example), it involves education, and it involves experiencing health and healing across multiple sectors of the society.

If someone invents a new drug or a new medical device, there are patents and ways to profit from that. But what we're putting forward here primarily has to do with a whole foods diet, regular exercise, stress management methods and social support. In the WIN program, you've proposed a goal of protecting intellectual property rights to incentivize innovation in prevention and health promotion. Do you have a sense of how that can actually play out?

I think the "how do you capture profit potential around an industry" depends upon what society decides is valuable and what we want to reward private companies for producing. That's what we do with drugs. We reward drug companies now for producing chemicals that create specific effects in the laboratory, on cells and in clinical trials. If they can be demonstrated that way, then those specific chemical configurations, and the effort put into discovering, vetting and delivering them, is rewarded.

There's no reason that you can't protect other types of things that you would like to see. We should figure out how to create a rewards system for wellness—whether it's a payment system or an intellectual property system. All an intellectual property system is, is an attempt to reward people for their innovation. It could be in any area. So I think it's possible to create a wellness industry where people profit for creating wonderful new information technologies that might deliver a wellness technology toolkit, for example. Wellness technologies could capture the evidence for what works and what doesn't work in an individual's lifestyle and behavior, and could be finely tuned and monitored, so that an individual could get real-time feedback about their own health index, for example. That way, they would know which direction are they going and what they need to do, in order to change and specifically track it in real time.

We have technologies that can do that right now, and if we were to reward companies for creating wellness technology tool kits, which was one of the recommendations in WIN, that's something that could be encouraged with intellectual property rewards for such products. Another example would be multi-component natural substances that had complex components in them, such as herbal products. If we felt they might provide safer treatments, we could set up a way of capturing and encouraging the development of such products. We could produce natural drugs, for example.

WIN describes using current Department of Defense and Veteran's Health Affairs performance and wellness initiatives to test feasibility and delivery of WIN programs. What is the current status of these initiatives in the DoD and VA and what else is currently in the works? I know you were a military physician for two decades.

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It's no secret that the current wars are producing major stresses on warriors and their families. There have been many assessments and press on the rates of posttraumatic stress disorder (PTSD), depression and suicide, and brain injury, and so there have been major stresses *not just on individuals that have PTSD but on everybody in the DoD.*

We are now recognizing that waiting for somebody to get diagnosed with PTSD – a disease-type model – and then putting them into treatment, doesn't work, for most won't come in for such treatment. Everyone deployed needs resilience skills. That requires a health model. How do you build resilience? The DoD is now making a concerted effort to figure this out and provide resilience training programs and normal-functioning training for all, especially after they come back from some of these traumatic deployments.

Are we talking about psychosocial resilience?

Yes. Physical fitness has always been part of the military. Mental resilience is now being recognized as an important factor that we've under-examined and that we need to incorporate. The DoD also gets the idea of total fitness, of health promotion and human performance. They have always had a culture and philosophy of enhancing human performance. A couple of decades ago, I was involved in helping the Army to roll out its first Health Risk Appraisals, in which they were doing screening of health issues, not just diagnostic issues. Health risk appraisals are used in worksites; the DoD is much like a very large worksite. Worksite health promotion efforts have always been something the DoD has encouraged.

The current effort in this area has a new term—*human performance enhancement* or *total performance fitness*—but it's the same idea. Basically, the question is, “How do you take all the core components that facilitate an individual's health—their nutritional, physical, psychological and social environments—and maximize those for optimal functioning, recovery and reintegration?” The term, in the psychosocial area, is called *resilience*.

We recognize that it isn't just about psychotherapy or psychological stress management. Your psychological resilience is tied to your physical fitness, your diet, the food you eat, and the social and family situation that you're in. Total performance fitness requires a holistic approach when trying to optimize resilience and function. The DoD is exploring this on a large scale. These models are the ones we should evaluate. If they're successful, they are potential models for the nation, as a whole.

One of the key markers as to whether the Obama Administration is really serious about a genuine paradigm shift and a move toward lifestyle-based prevention and health promotion, is whether they put serious money behind it. You're someone who has been responsible for the budget in a federal agency. What kind of financial commitment, and for what kinds of programs, would indicate to you that Congress and the Administration are serious? Are we talking about \$50 million or \$20 billion, and where must it go?

I can answer the question about where it must go. It should go into the kinds of policies that we tried to describe in WIN, and these are in a number of other policy papers. Look, for example, at reports from Partnership for Prevention, the Prevention Institute, and various others. Our feeling is that if the policy we've described in WIN were implemented, it would have a large multiplier effect for the economy. First, it would stimulate jobs, by training the professions and creating new jobs in the health industry. Second, it would enhance productivity, because to the extent that these systems, and education and training programs, are in place, people become more productive. And third, it would also create more jobs by stimulating an industry that then wanted to shift into wellness, developing products and services for wellness.

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So it would have a triple and maybe a quadruple multiplier effect. And it would have a long-term effect, because it would be centered around education and training, not just to create a new device that's only going to last a few years. It would be training a whole group of people who would become the entrepreneurs and innovators of the future. We selected these items in particular because they would have the greatest productivity effects and produce the greatest economic benefit and value benefit in those areas.

Imagine a world in which our culture and industry were as obsessed with delivering health promotion, disease prevention and healing practices as our current culture and industry does for disease treatment. Imagine if even 10% of our current medical industry were developing natural drugs, personal health monitoring technologies, health and wellness professionals, for the creation of optimal healing environments. With a shift of our nation's innovation and entrepreneurship to health and healing, we would become a more flourishing, more generous, more productive society. That's the goal of WIN.

Daniel Redwood, DC, the interviewer, is Editor-in-Chief of *Health Insights Today*.