

Principles of Health Care Reform

An official statement from the Global Alliance for Behavioral Health and Social Justice

The Global Alliance emphasizes effective strategies for (a) the promotion of health and well-being, (b) the prevention of behavioral disorders and behavioral health concerns, and (c) intervention and treatment. We embed our work in principles of human rights and social justice. In keeping with our priorities and our approach, we believe that health care is a basic right and that any efforts to reform health care should reflect the following key principles:



1. **High-quality, universal, comprehensive care that is timely, affordable, and accessible.** Individuals and families should have access to high-quality, comprehensive services – including parity for mental health and substance use challenges – when they need them and without discrimination (e.g., individuals with pre-existing conditions; low-income women; elderly individuals).
2. **Focus on population health, emphasizing prevention in clinical and community settings and promotion of health equity.** Everyone should have the opportunity to attain their highest level of health. Preventive services can help all people live longer, avoid illness and disability, and be healthier and more productive. Health care that is integrated within the community and social services also positively affects health status.
3. **Engagement of individuals and families in a manner that respects their dignity and rights.** Individuals and families have a right to considerate, respectful care at all times, in all situations, and with awareness of each individual's dignity and worth. The health care system should be easily navigable and should engage individuals and families so that they can participate actively in their own care.
4. **Care that is efficient and straightforward.** The health care system should reduce duplication of effort and eliminate unnecessary services and diagnostics. It should not place financial, administrative, or logistical burdens on individuals and families. For example, a single payer system would facilitate holistic care, reduce administrative costs, and support continuity of care and preventive interventions.
5. **Preservice training and continuing education that supports the development and sustainability of a diverse, multidisciplinary health care workforce.** The education and professional development of all providers need reform so that primary care and efforts within our public sector systems are emphasized, along with holistic care for physical, mental, behavioral, developmental, and substance use disorders. Access to appropriate health care services for all will not be possible unless the nation expands its health professional workforce and addresses geographic disparities. Moreover, this workforce should reflect the nation's diversity and support continued improvement in health status across diverse groups and communities.

The Global Alliance believes that ensuring access to high-quality, appropriate, and affordable individual- and family-centered health care is, and should continue to be, the focal point of all health care reform efforts. Providing coverage for everyone benefits public health more broadly and, ultimately, reduces taxpayer burden. Supporting preventive care and addressing health conditions at their onset is more humane and less expensive, particularly in view of the human and financial costs of treating late-stage disease.



Additional Resources	Relevant Articles in the <i>American Journal of Orthopsychiatry</i>
<p>American Public Health Association, Health Reform: https://www.apha.org/topics-and-issues/health-reform</p> <p>Coalition for Whole Health: http://www.coalitionforwholehealth.org</p> <p>Families USA: http://familiesusa.org</p> <p>Health Affairs: http://healthaffairs.org</p> <p>Kaiser Family Foundation: http://kff.org</p> <p>National Coalition for Behavioral Health: https://www.thenationalcouncil.org</p> <p>National Conference of State Legislatures: http://www.ncsl.org/research/health.aspx</p> <p>The Commonwealth Fund: http://www.commonwealthfund.org</p>	<p>Evans, M. E., Bruns, E. J., Armstrong, M. I., Hodges, S., & Hernandez, M. (2016). New frontiers in building mental, emotional and behavioral health in children and youth. http://dx.doi.org/10.1037/ort0000154 [open access]</p> <p>Morris, J. A. (2016). Can behavioral health drive its own reformation? The challenges of shifting direction. http://dx.doi.org/10.1037/ort0000067</p> <p>Kimbrough-Melton, R. J. (2013). Health for all: The promise of the affordable health care act for racially and ethnically diverse populations. http://dx.doi.org/10.1111/ajop.12042</p> <p>Shern, D. L., Blanch, A. K., & Steverman, S. M. (2016). Toxic stress, behavioral health, and the next major era in public health. http://dx.doi.org/10.1037/ort0000120</p>