

# ROBERT WOOD JOHNSON FOUNDATION/ HARVARD SCHOOL OF PUBLIC HEALTH

## *Americans' Health Agenda*

### **Executive Summary**

In a period of national debate over government spending priorities, a new poll by the Robert Wood Johnson Foundation and the Harvard School of Public Health finds that a majority (52%) of Americans prefer a bigger government providing more services in health, rather than a smaller government providing fewer services in health (37%). In addition, six in ten believe that if U.S. spends more now on measures to improve health and prevention, the country would save money in long run.

Though they favor the provision of more health services, Americans do not rate either the nation's medical care system or the federal government's public health system very highly, nor do they see the health of Americans as having gotten better during the past five years.

The public was asked about their preference for the size of government spending on health in the future. Respondents were asked whether they preferred the smaller government with fewer services in health or a bigger government with more services in health. CBS News/*New York Times* asked a similar question this year about government services in general, not specific to health services. The CBS News/*New York Times* poll found 55% of the public preferred a smaller government with fewer services, while a third preferred a bigger government with more services. Focusing the question exclusively on health in the Robert Wood Johnson Foundation/Harvard School of Public Health poll changed the result, with 52% preferring a bigger government with more health services and 37% preferring a smaller government with fewer health services. This shows that health spending remains for many a popular area for government spending (Chart 1).

People were also asked their views about investing in health. Six in ten (60%) believed that if U.S. spends more now on measures to improve health and prevention, the country would save money in long run, while about three in ten (31%) believe the country would not save money in the long run by spending money now.

Despite high levels of national health expenditures, only a minority of the public gives high grades (A or B) to either the nation's medical care system, that is, the system where doctors, hospitals, and health insurers provide and pay for health care (41% A or B), or our federal system for protecting the public from health threats and preventing illness (33% A or B).

The poll also shows that, in spite increased investments in health, the majority of the public does not see the health of people in the U.S. as having gotten better over the past five years. Only 13% see health as having gotten better, while 45% believe it has gotten worse; 40% believe it has stayed about the same.

## **Personal Experiences That Could Affect Health**

The poll also asked about the personal problems Americans experience today that could affect their health. Americans report having experienced a number of such problems in the last year. About three in ten report having had a serious financial problem (29%), while about one in five report that they could not pay medical bills (22%), could not afford health insurance premiums (20%), lost or could not find a job (20%), or had a serious illness or injury (20%).

## **Top Health Concerns**

Respondents were asked to report in their own words what they thought were the most important problems for the nation's medical care system. Health care costs was the top medical care concern for Americans. No other issue approached this level of salience (Chart 2).

When asked about the diseases or health conditions that pose the greatest threat to the American public, the public's top concerns were chronic diseases, particularly cancer, heart disease, and obesity (Chart 3). Obesity ranked higher as a public concern than it did previously on a similar ranking in a 2009 Robert Wood Johnson Foundation/Harvard School of Public Health poll.

## **Health Priorities for the Federal Government**

Respondents in the poll were given a list of twenty current program areas for the federal government in medical care and public health. In a multi-stage process, they were asked to identify those they considered to be "one of the top priorities" for the federal government.

The public's top federal program priorities in the medical care area are improving or fixing Medicare, the government health program for people 65 and older and certain people with long-term disabilities (named by 63% as "one of the top priorities"); improving or fixing Medicaid, the government program that provides health insurance and long-term care to certain low-income adults and children (56%); providing subsidies to help the uninsured buy health insurance or get health care services (45%); increasing research to find new cures and treatments for major disease threats (43%); and ensuring the safety and effectiveness of prescription drugs (37%).

The public's top federal program priorities in public health are preparing the public for health problems or injuries resulting from terrorist attacks and from natural disasters (42% and 39%); preventing the spread of infectious diseases, including by providing vaccinations (38%); improving the health of low-income Americans (38%); detecting and preventing foodborne illnesses (36%); and preventing chronic illnesses, such as heart disease, cancer, and diabetes (35%).

## **Methodology**

This poll is part of an ongoing series of surveys developed by researchers at the Harvard Opinion Research Program (HORP) at the Harvard School of Public Health in collaboration with the Robert Wood Johnson Foundation. The research team consists of the following members at each

institution.

Harvard School of Public Health: Robert J. Blendon, Professor of Health Policy and Political Analysis and Executive Director of HORP; John M. Benson, Research Scientist and Managing Director; Kathleen J. Weldon, Research and Administrative Manager.

Robert Wood Johnson Foundation: Fred Mann, Interim Vice President, Communications; Kate Sullivan Hare, Director Policy Outreach and Public Affairs; David Colby, Vice President, Research and Evaluation; and Debra Joy Pérez, Interim Assistant Vice President, Research and Evaluation.

Interviews were conducted via telephone (including both landline and cell phone) by SSRS/ICR of Media (PA), September 19 – October 2, 2011, among a national representative sample of 1598 respondents age 18 and older. The interviews were conducted in English and Spanish. The margin of error for total respondents is +/- 2.8 percentage points at the 95% confidence level.

Possible sources of non-sampling error include non-response bias, as well as question wording and ordering effects. Non-response in telephone surveys produces some known biases in survey-derived estimates because participation tends to vary for different subgroups of the population. To compensate for these known biases and for variations in probability of selection within and across households, sample data are weighted by household size, cell phone/landline use and demographics (sex, age, race/ethnicity, education, number of adults in household and census region) to reflect the true population. Other techniques, including random-digit dialing, replicate subsamples, and systematic respondent selection within households, are used to ensure that the sample is representative.

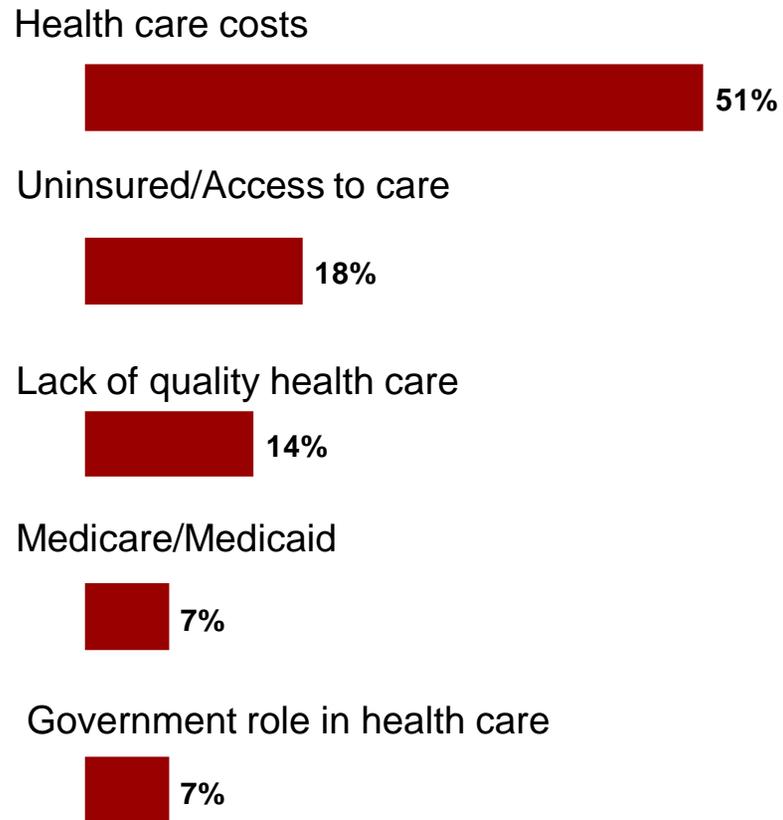
# Chart 1. Public Preference for a Smaller Government Providing Fewer Services in Health or a Bigger Government Providing More Services in Health



*CBS News/New York Times poll, April 2011*

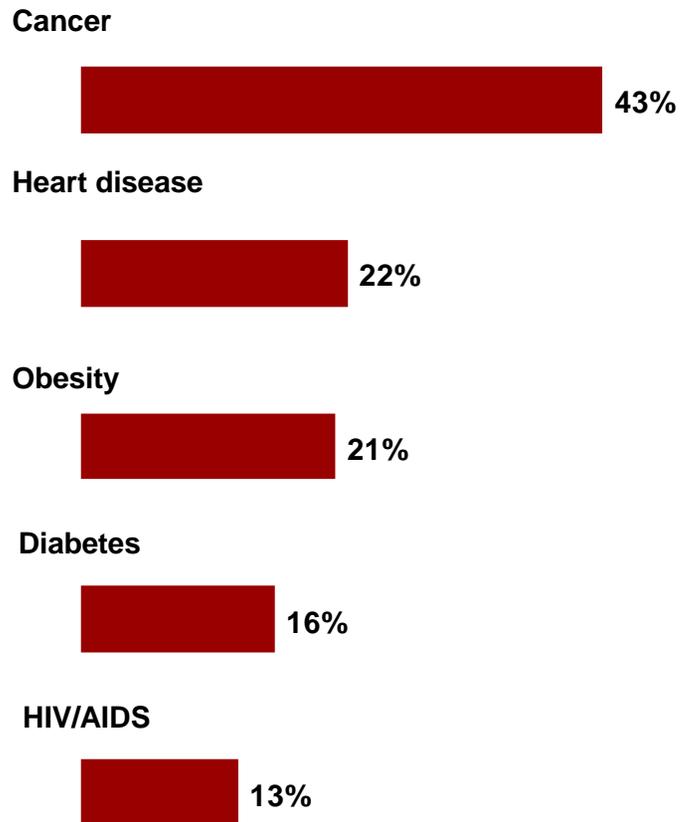


## Chart 2. Public's View of the Most Important Problem with the Nation's Medical Care System



Note: Open-ended. Each respondent was asked to give two different problems.

### Chart 3. Public's View of the Disease or Condition Which Poses the Greatest Risk to the American Public



Note: Open-ended. Each respondent was asked to give two different diseases or conditions..