

Remarks by Senator Tom Harkin  
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\*\*\*As Prepared for Delivery\*\*\*

“Let me start by providing some context.

“It took me just a couple hours to travel from Washington to Cambridge. But, in truth, it took me more than a couple *decades* to arrive at this lectern, being honored for my work as an advocate of wellness and prevention.

“Back in 1991 and ’92, I ran for President of the United States. During that campaign, one of my signature issues was the need to transform America’s *sick* care system into a genuine *health* care system – one focused on encouraging wellness and preventing disease.

“I went around the country offering an analogy: What would you think if I bought an expensive new car, drove it off the lot, and never maintained it – never checked the oil, never had it tuned up? If I just drove it until the engine seized up, then spend a fortune to install a new engine? You’d think I was foolish and irresponsible.

“And then I drew the obvious parallel to our health system. Like that guy who refuses to maintain his car, America spends colossal sums patching and fixing people who get sick or disabled. But we spend peanuts on prevention. And this ends up costing our health care system hundreds of billions of dollars annually.

“Looking back to the 1980s and 1990s, you might say that those were my wilderness years. Some of my political friends wondered: Why does Harkin have this obsession with wellness and prevention?

“But I persisted. And as I rose in seniority in the Senate, I was able to make headway, if not headlines.

“Sometimes, the changes were relatively modest, such as in 1992, which I passed a measure changing the name of the Centers for Disease Control to the Centers for Disease Control and *Prevention*, emphasizing CDC’s responsibility for addressing illness and disability *before* they occur.

“Other times, the changes were more substantial, such as when – as chair of the Appropriations subcommittee for health – I was able to *double* funding for the National Institutes of Health over a five-year period. Or, last year in the economic recovery act, when I was able to secure a one-time injection of \$10 billion for NIH.

“And let me cite one more example of incremental but important progress: In my previous role as chairman of the Senate Committee on Agriculture, Nutrition, and Forestry, I oversaw passage of a series of farm bills. And in the 2002 farm bill, I was able to initiate the Fresh Fruit and Vegetable Program.

“I started this program with just a hunch. I didn’t believe the prevailing wisdom – that kids won’t eat high-quality fresh fruits and vegetables, even if they are readily available. I’ve always believed that one of the reasons kids don’t eat fresh fruits and vegetables is because they don’t have the *opportunity* to do so. I figured, let’s give them an opportunity and see what happens.

“So we began by providing fresh fruits and vegetables to a little over 100 schools in four states and one Indian reservation. And you know what? My hunch turned out to be correct. The kids, teachers, principals, and parents loved the program. And, before long, other states were clamoring to be included in the program, too.

“In 2007, after a hiatus when the Republicans controlled the Senate, I got the chairmanship back, just in time for

the next farm bill. And, in that bill, the 2008 farm bill, I was able to dramatically expand the Fresh Fruit and Vegetable Program, authorizing \$1 billion over 10 years to reach as many as three million low-income children nationwide. And I'm not stopping there. My goal is to make this program available to *every* elementary school in America!

"To me, the case for wellness and prevention has always been obvious – not just in terms of preventing human suffering, but strictly as a dollar-and-cents proposition.

"Over the years, I read study after study concluding that so much of the heart disease in this country – our No. 1 killer – could be prevented by relatively simple changes in lifestyle, as can some cancers.

"Likewise, I studied the consequences of the obesity epidemic, which has contributed to an explosion of chronic diseases including diabetes, coronary heart disease, hypertension, fatty liver disease, and arthritis.

"You folks are all too aware of the shocking and depressing statistics. For instance, in 1958, 1.6 million Americans were living with diagnosed diabetes. By 2008, that had risen to nearly 18 million Americans – an increase of more than 1,000 percent.

"Diabetes, heart disease, cancer – these things are a personal tragedy for each and every person afflicted by them. In addition, they are a financial catastrophe for government, corporate, and family budgets. And what makes this all the more tragic is that so much of this devastation is *unnecessary*. It could be avoided if we had a genuine *health* system – one that emphasizes wellness and prevention.

"OK, so why don't we take the advice of the Nike advertisements? Why don't we just *do it*?

"Well, we don't "just do it" because the medical-industrial complex in the United States has a very highly developed immune system. And it sends out very potent antibodies to thwart me, you, and anyone else who wants to tamper with the "stagnant quo," as I call it.

"What gets reimbursed by Medicare and insurance companies gets practiced. What gets reimbursed the most gets practiced the most. And what gets practiced the most gets taught in our medical schools and thereby perpetuated.

"What's more, there are entrenched forces and vested interests that are prepared to defend the conventional, reactive allopathic medicine monopoly with all their power.

"So what we end up with in America, as I said, is not a health care system but a sick care system. If you're sick, you get care, whether through insurance, Medicare, Medicaid, S-CHIP, community health centers, emergency rooms, or charity.

"The problem is that this is a reactive "disease management" system. It waits until people develop serious illnesses and chronic conditions, and then spends literally trillions of dollars for surgery, pills, hospitalization, and disability.

"We end up with the absurdity of insurance companies paying \$30,000 or more to amputate a diabetic foot, but refusing to reimburse several hundred dollars for nutrition counseling, which might prevent a person from getting diabetes in the first place.

"Multiply this absurdity by hundreds of millions of others each year, and you understand why the United States spends twice as much per capita on health care as European countries, but Americans are twice as sick with chronic disease.

“Now, believe it or not, I did not come here, this afternoon, to depress you. This story actually has a happy ending. Let me rephrase that: The story does not yet have an ending. But we are making some truly promising progress.

“For starters, you and I are no longer lonely voices in the wilderness. When the First Lady of the United States makes fighting childhood obesity her No.1 issue, well, how shall I put it: That’s change you can believe in. Our time has finally come!

“But nothing can match the breadth and ambition of the health reform law that President Obama signed into law on March 23. Amidst the ridiculous hubbub about “death panels” and “socialism” and so on, the press largely failed to focus on a truly transformational section of this bill: Its array of provisions promoting wellness, disease prevention, and public health.

“Early last year, Senator Kennedy, as chairman of the Health, Education, Labor and Pensions Committee, began the push for comprehensive health reform. Knowing my long-standing advocacy in this area, Ted asked me to draft the section of the bill focusing on wellness, prevention, and public health.

“Well, that was like giving a kid the keys to a candy store. And I laid down a marker at the outset: It is not enough to talk about how to extend insurance coverage and how to pay for health care – as important as those things are. It makes no sense just to figure out a better way to pay the bills for a system that is dysfunctional, wasteful, and ineffective. We have to change the health care system itself, beginning with a sharp new emphasis on prevention and public health.

“That is exactly what we have achieved in the Patient Protection and Affordable Care Act. This new law, I believe, will jumpstart America’s transformation into a genuine wellness society. Let me mention some of the major elements:

“The law creates a Federal-level Prevention and Public Health Council, which will improve coordination among federal agencies in incorporating wellness into national policy, and will develop a national prevention and public health strategy.

“The law creates a \$15 billion Prevention and Public Health Investment Fund over 10 years. Typically, as you know, public health initiatives are subject to unpredictable and unstable funding. This new fund will provide an expanded and *sustained* national investment in public health activities in communities across America. Communities will tailor programs to meet health challenges unique to their area. They can get creative; find out what works; and make a big difference.

“At the clinical level, the law requires reimbursement for proven, cost-effective preventive services such as cancer screenings, nutrition counseling, and smoking-cessation programs.

“For essential screenings and annual physicals, the law eliminates the co-pays and deductibles that currently discourage many people from doing the right things to stay healthy.

“It ensures that seniors have access to free annual wellness visits and personalized prevention plans under Medicare.

“It gives states incentives to improve coverage of and access to recommended preventive services and immunizations under Medicaid. At a minimum, States must provide Medicaid coverage for comprehensive tobacco-cessation services for pregnant women.

“The new law encourages companies to set up workplace wellness programs. For example, it authorizes funding for grants to small businesses for this purpose.

“More generally, the law aims to give Americans the tools and information they need to take charge of their own health. For example, it requires large chain restaurants to post basic calorie information right on the menu, so consumers can make healthy choices. In effect, it takes Massachusetts’ new menu-labeling law, and extends it to the entire country. In addition, for customers who need more detailed information on things like sodium and sugar, restaurants must have that available on request, as well.

“By the way, I should also mention that the health reform law includes an additional \$11 billion for community health centers over five years, beginning in FY 2011. This will allow new and expanded community health centers to serve nearly 20 million new patients. And, as you folks know, community health centers do a great job with wellness and prevention.

“Make no mistake, the new health reform law doesn’t just tinker around the edges; it begins to change the paradigm.

“As President Obama has stressed repeatedly, successful prevention and public health is the key to slowing the growth of health care costs. I am thrilled to see that these things are at the very heart of this historic new law.

“However, I want to emphasize that the Patient Protection and Affordable Care Act is not the end of health reform; it is the beginning. We have a huge unfinished agenda in front of us.

“After the Senate finishes the Wall Street reform bill, probably this week, I will bring major legislation to the floor to reform and revamp America’s food safety system.

“And, as a senior member of the Agriculture Committee, I am continuing to push for a strong reauthorization of the child nutrition law.

“On that score, I applaud First Lady Michelle Obama, and I am delighted to have her as a partner in the fight against childhood obesity.

“I have never forgotten something that Dr. Andrew Weil said at a HELP Committee hearing several years ago. He said, “The default status of the human body is to be healthy.” In other words, our bodies want to stay healthy. And our bodies have tremendous powers of healing.

“The problem, as I see it, is that the default status of our society and culture is to *sabotage* our natural health. For example, look at the multi-front assault on our children’s health.

“We are building subdivisions without sidewalks for walking . . . and schools without playgrounds. We have all but eliminated recess and health education.

“Some time back, the superintendent of schools in Atlanta explained his policy of building new elementary schools *without playgrounds*. He told The New York Times: ‘We are intent on improving academic performance. You don’t do that by having kids hanging on the monkey bars.’”

“Meanwhile, our public schools have been inundated by vending machines selling sugary sodas, candy, and junk food. Think about a child purchasing a 20-ounce Coca-Cola during the school day. That’s equivalent to 15 teaspoons of sugar! Would any parents in their right mind send their child to school with a snack of 15 teaspoons of sugar?

“At the same time, our children are targeted by a relentless barrage of advertisements for junk food. Not many Americans are aware of this, but the Federal Trade Commission has more authority to regulate advertising aimed at adults than advertising aimed at children. In fact, in 1981, Congress expressly took away the FTC’s authority to regulate junk food advertising targeting children.

“Believe me, it is not a coincidence that, since 1981, we have had an explosion of junk food advertising, a surge of junk food vending machines in schools, and a surge in childhood obesity and overweight.

“We allow all of these things that undermine our children’s natural default status to be healthy. And then, like clueless dodos, we claim to be *shocked* that America has an epidemic of childhood diabetes and early signs in many young people of coronary artery disease!

“We can do better. Currently, there is a giant loophole in the child nutrition law that says: the U.S. Department of Agriculture can set standards for foods sold in the lunchroom, but *cannot* set standards for foods sold elsewhere on campus, including right outside the cafeteria. That’s a loophole you can drive a Pepsi delivery truck through.

“By all means, we must make changes so that the billions that USDA spends each year on meals provided through the National School Lunch and Breakfast Programs pays for a more nutritious mix of foods. But it makes no sense to do this, and then have it sabotaged by the pervasive sale of junk food and sugary sodas elsewhere on campus.

“For 15 years, I have been seeking to establish national school nutrition standards for *all* foods sold in schools, including vending machines, snack bars, and school stores. And I am happy to say that, today, success is within our reach. The child nutrition reauthorization bill passed by the Senate Agriculture Committee in March includes my legislation.

“Schools should be a sanctuary, not just another marketplace hawking junk food and sugary sodas. In fact, if I had my druthers, I would ban *all* commercial advertising within our public schools. Instead of selling out to the commercial culture, schools should be modeling an alternative culture that puts children and their wellbeing as the highest priority and the highest value.

“Now, I could go on. But I want to leave some time for questions and dialogue. These remarks are billed as a lecture. You know, I always had a special place in my heart for professors who let class out early.

“And I’m reminded of an old story about Hubert Humphrey, who was famous for his humaneness – and also his long-windedness. One time, he was asked to make brief remarks to a group of farmers. He spoke for five minutes. Then he went on for 10 minutes, 20 minutes, 30 minutes. Finally, after 45 minutes he stopped. He apologized for speaking so long. But, as Hubert put it: “The longer I talked, the more I liked what I was hearing!”

“So again, friends, thank you for honoring me with the Healthy Cup Award. And thank you for the tremendous work you are doing here at the School of Public Health to advance the wellness of the American people. Keep up the great work!”

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