Health

What are our aspirations for an inclusive and equitable Maine?

Increase Access
• Increased access to behavioral health
• Health insurance for all
• Become telemedicine pioneers
• Access to dental care throughout lifespan
• Access to substance abuse treatment
• More access to preventative care and results from preventative care that has been implemented

Increase Awareness
• Reduced stigma toward mental health issues
• Reduced stigma toward abortion
• Build awareness of social determinants of health

Increase Equity
• No disparities between populations in terms of life expectancies
• No one not getting care because of money
• Hospital boards reflect communities

Why isn't it like that today?

Lack and Poor Allocation of Resources
• Weakened public health infrastructure
• Lack of bandwidth
• Lack of funding
• Lack of CNA’s, RN’S and primary care providers
• Lack of resources
• Healthcare workers not evenly distributed
• How healthcare services are utilized (too much spent on end of life with little benefit)
• Medical education hasn't changed and isn't improving
• Not enough resources are being allocated toward prevention and supporting healthy behaviors
• Labor shortage

Poor Access
• Size and geography of state
• Transportation
• Very rural state
• System is too complicated and hard to navigate
• Access doesn't always equal health
• Access to healthcare has become all about ideology
• Many underinsured, uninsured or don't qualify for MaineCare
**Government Failings**
- Healthcare system politics
- Government politics/Gov. LePage
- Medicaid not expanded
- Insufficient political will
- Need to get 2/3 of legislature to do anything positive
- Special interest prevents innovation in cost reduction, access and quality
- Weak public health system
- Toxic political climate
- Capitalism
- Limits in Medicaid for oral health based on age
- Medicaid expansion didn't occur in Maine
- Heavy regulation

**Systemic Failures**
- Systemic racism, sexism and patriarchy
- Embedded privilige and power
- Voice of most vulnerable not included in guiding health and healthcare
- Stigma toward certain health problems
- Rugged individualism myth
- We respond to, and economically benefit from, care delivery rather than wellness
- Everyone too busy to collaborate
- Payment system
- Profit driven system

**Other**
- Perception that hospitals are private organizations and have "closed" boards
- We don't prioritize early childhood and family supports
- Medical school costs too much
- Not a priority
- No true understanding of social determinants and health disparities
- Provider/money focused care as opposed to patient focused
- The separation of oral health and the rest of healthcare
- Lack of understanding and recognition that healthcare is a right
- Out migration
- Public consensus on priorities
- Storytelling/spin about demographics
- Lack of personal empowerment
- Turf issues
- Need more focus on trauma and informed care
- Lack of courage
What can we begin to do about it?

Add Voices
- Collective conversations
- Engage next generations
- Facilitate inclusion of voices of disenfranchised and marginalized
- Recognize issues related to social determinants
- Op-eds by doctors
- Ask people what is important to them, especially those who aren't used to being asked
- More nurses involved in decision making
- Voter access for the disenfranchized
- Vote

Amplify Voices/Change Communications
- Promote advocacy/political activism
- Directly engage media
- Writers must ask the right questions
- Local people must engage legislators
- Publicize and personalize
- Change messaging (from crisis to proactive)
- Ban pharmaceutical advertising

Work Together
- Collaborate around food insecurity
- Collaborate around exercise and fitness
- Work collaboratively

Other
- Grow community healthcare model employed by community based organizations
- Vote and lobby to expand Medicaid
- Patient centered medicine
- Invest in a robust healthcare system
- Affirm universal right to healthcare
- Infiltrate hospital boards
- "Nothing for me without me" in all our work
- Disaggregate the data (culturally competent)
- Improve access to healthy food
- Social needs of patients part of system
- Reduction of tick born disease
- State leader in health in all policies
- Be attentive to trauma informed care
- Document and respond to needs
- Implement affordable telemedicine pilots