An Outcomes-Oriented Approach to Addressing Social Problems Could Help Fix America’s Healthcare System

As the US Surgeon General highlighted last week, opioid addiction is a public health crisis destroying families and communities across the country, in blue states and red states, in cities and rural areas. Its causes are as complex as its impact is wide-ranging, solving it will require coordinated action from across the public and private sectors.

In Portland, Maine, local leaders are tackling this crisis with a collaborative effort. The Greater Portland Addiction Collaborative, catalyzed by Mercy Hospital, is bringing together healthcare providers and homeless shelter operators as well as law enforcement and the courts in an integrated, community-led initiative that will serve 1,200 people most in need of support. At the 2016 Clinton Global Initiative America meeting last week in Atlanta, Mercy Hospital launched this collaborative as a CGI America Commitment to Action.

This Collaborative represents one of many inspiring projects underway across the country that illustrate how we are beginning to rewire our approaches to solving social problems. These projects are reducing the number of youth in foster care, helping homeless people find permanent housing, helping former prisoners find and keep jobs, and helping ensure all children are ready to learn when they start school. Uniting these efforts is a fundamental recognition that solving complex problems requires us to coordinate around a clear understanding of the results we seek. And a realization that if we do this well, we will not only address these challenges, we will also substantially reduce the costs of doing so.

This may seem obvious. But most of our social spending does not actually pay for results, such as reducing opioid overdoses. Instead, funders, usually government, pay social service organizations to undertake activities, such as providing drug counseling or giving an addict a bed in a homeless shelter. These activities are...
often helpful but can’t on their own address the wider problem. When we organize instead around the desired outcome, we are forced to see how the pieces fit together and to collaborate across traditional silos of public and private sector.

At the CGI America meeting in Atlanta, I was privileged to lead discussions about how we can accelerate this shift to outcomes-oriented approaches. Participants in the Outcomes Based Financing Working Group included representatives of the country’s largest hospitals and social service agencies, state and county government leaders, and community finance leaders. The rapid shifts in our healthcare system provide a particular focus for this conversation: With Medicare and Medicaid beginning to pay for keeping groups of patients healthy rather than paying for treatments dispensed, $1.3 trillion in annual spending is at stake. The discussions promise to lead to other, similar commitments.

The discussions were as inspiring as they were wonky. These are some of the smartest people in their fields, committed to thinking about old problems in new ways. A conversation that starts by asking why America pays more for healthcare than any other nation but gets worse outcomes than most of our peers, quickly led to a plan for providing people leaving prison with housing and job prospects.

But old habits are hard to break, and the CGI America meeting highlighted what it will take to collaboratively organize around outcomes:

- Learn by doing: New ways of doing things are always held to higher levels of scrutiny than business as usual. It’s easy to get caught in an endless cycle of research and analysis to prove that collaboration is worth it or results predictable. We need to get comfortable with taking leaps and adjusting as we learn.

- Identify the win-win: Organizing around outcomes is often a much more efficient way to address a social problem in theory. But there is no natural constituency for efficiency; instead, individuals and institutions are oriented to getting the most out of the current way of working. For collaborative ideas to take off, they must benefit all the people we need to join us, in all levels of government, the private sector, and the ultimate beneficiaries of services. We must identify who could be threatened by change and figure out how to help them benefit as well.

- Build trust: Outcomes-oriented approaches often require collaboration between people unused to working together. In the Maine example, hospital workers, homeless shelter operators, drug treatment professionals, and the police have come together around common goals. We must take the time to understand the values and constraints that everyone works under, rather than allowing ourselves to fall back onto stereotypes about people and organizations we may not know well.

There is no short-cut to this work. It requires principled and effective leadership just as much as sophisticated analysis. The stakes are so high and the opportunity for improvement so clear. This galvanizing idea is already drawing support from across the political spectrum. Together, we can make tangible improvements in the lives of many people and communities.

And most exciting in this season of pessimism and political division, the CGI America conversations reinvigorated a sense of optimism and excitement about