

Integrating Economic and Public Health Perspectives

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Economic Vs Public Health View

- Both play an important role in policy process
- Often seemingly at loggerheads
- Interventions supported by both perspectives most likely to be effective and politically acceptable
- Without understanding the economic perspective, health and public health professionals will have limited influence

The Public Health View

- Intervene if health could be improved
- Expert opinion to evaluate desirable outcomes

Limitations of Public Health View

- No explicit role for individual preferences
- No explicit consideration of other trade-offs
- Often out-of-touch with majority opinion making industry lobbyists seem the more "reasonable" party

The Economic View

- Health only one of many competing goals
- Consumer sovereignty over outcomes
 - Central feature of the US institutional framework
- Only intervene if market failure
 - Externalities
 - > Underprovision of public goods/services
 - Information problems

Federal Agencies Must Identify Market Failures That Proposed Regulations Address

- OMB's "Regulatory Planning and Review" guidelines ask that proposed regulations
 - "... determine whether there exists a market failure that is likely to be significant."
 - "distinguish actual market failures from potential market failures that can be resolved at relatively low cost by market participants."
- No actual market failure no role for federal regulation!

Key Assumptions in Economics

- People have stable preferences
- People prefer having more to having less
- They act according to their preferences and the best information they have when they make a decision
- Observed outcomes always reflect preferences as a first order effect (selection bias in empirical analysis)

A Brief Academic Detour

- Economics concerned with efficiency
 - Technical term: Pareto optimality
- Economics only concerned with how to get to an optimal allocation given initial endowments and preferences

Two consumers split total available resources



The Endowment Allocation



The Endowment Allocation



The Endowment Allocation







Feasible Re-allocations

- All points in the box, including the boundary, represent feasible allocations of the combined endowments.
- Which allocations make both consumers better off?
- Which cannot be achieved with voluntary cooperation?







Pareto-Improvement

- An allocation of the endowment that improves the welfare of a consumer without reducing the welfare of another is a Pareto-improving allocation.
- Example: Left turn and blocked intersections
- Where are the Pareto-improving allocations?





Pareto-Improvements

- Since each consumer can refuse to trade, the only possible outcomes from exchange (I.e. voluntary cooperation) are Pareto-improving allocations.
- But which particular Pareto-improving allocation will be the outcome of trade?



Pareto-Improvements

Trade improves both A's and B's welfares. This is a Pareto-improvement over the endowment allocation. Pareto-Improvements New mutual gains-to-trade region is the set of all further Paretoimproving reallocations.

Trade improves both A's and B's welfares. This is a Pareto-improvement over the endowment allocation. **Pareto-Improvements**

Further trade cannot improve both A and B's welfares.

Better for consumer A

Better for consumer B

A is strictly better off but B is strictly worse / off

A is strictly better off but B is strictly worse / off

B is strictly better off but A is strictly worse off

Both A and B are worse off

Pareto-Optimality

A is strictly better off but B is strictly worse / off

B is strictly better off but A is strictly worse off

Both A and B are worse off

Pareto-Optimality

A is strictly better off but B is strictly worse / off

B is strictly better off but A is strictly worse off

Both A and B are worse off

The allocation is **Pareto-optimal** since the only way one consumer's welfare can be increased is to decrease the welfare of the other **CONSUMER.** RAND

Pareto-Optimality

 Where are all of the Pareto-optimal allocations of the endowment?






Fundamental Theorem of Welfare Economics

- Trading in perfectly competitive markets implements a Pareto-optimal allocation of the economy's endowment.
- And the corrolary is that if markets fail, Pareto improvements are possible

Back to where we were 10 minutes ago: The Economic View

- Consumer sovereignty over outcomes
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Internal and External Costs

Internal Costs

Born by individuals and family members themselves

External Costs

- Costs imposed on others
- Not necessarily financial (crime, drunk driving accidents)
- If costs are internal, should we be concerned?
 - Public health advocates would say yes
 - Economists might say no if there is no market failure

Externalities cause market failures

- Costs/benefits of an activity imposed on others, not necessarily financial (e.g. noise)
- Market failures that could affect physical activity
 - Social costs of driving not reflected in gas or car prices, cars make walking/biking unpleasant and dangerous
 - Social costs of sprawling environments not reflected in housing prices or the costs of such developments

Externalities: Smoking

- Smoking bans to reduce externalities
 - On nonsmokers
 - On smokers that wanted to quit or reduce smoking
- Are there parallels for diet and physical activity?

Externalities from inactivity/poor diet

- Often heard: Health care costs, lost productivity
- Red herring
 - Main burden of poor health borne by individuals themselves (internal costs), no externality
 - Only external costs from collectively financed health care, disability payment
- Not yet thought through, potentially more important:
 - Unconscious influences from other people's behavior or
 - environmental cues that raise the costs for individuals to adhere to (rational) decision

Public Goods/Services

- Nobody can be excluded from public goods/services – therefore no individual incentives to provide them
- Are neighborhoods safe and pleasant for walking/biking to school, store, work?
- Are parks in good condition and accessible?
- No good private substitutes for safety, sidewalks, public facilities

In contrast to gyms for which there is a private market

Information Problems

- If critical information is missing, low quality products dominate the market even if consumers prefer high quality products
- This type of market failure is well known to economists since Nobel Laureate George Akerlof's "lemon" paper
- When informational problems are sufficiently severe, regulation is needed for an efficiently working market.
- Reason for disclosure regulations for real estate, cars, etc.

Information and Eating Out

- Without information about nutritional content at the point of consumption, competition is on the dimensions that consumers can evaluate easily:
 - price, amount, and taste
- Information issues less obvious for physical acivity

So far

- Economics concerned with distribution of costs/benefits, important complement to public health view
- Market failures necessary to justify interventions
- Efficiency argument (Pareto optimality)
- Redistribution of initial endowments ("fairness"?) a political, not an economic question

So far

- Externalities and underprovision of public goods may be market failures that reduce physical activity below socially optimal levels
- Unclear about role of externalities in dietary patterns (environmental cues and other people's behavior)

Limitations and The Future

- Fixed preferences?
- Unconscious influences from other people's behavior
- Environmental cues that raise the costs for individuals to adhere to (rational) decision
- Need to integrate new insights from psychology and economics, current perspectives too narrow

Conclusion

- Economics and public health have different philosophical underpinnings
- They may create seemingly contradictions, but not necessarily
- Interventions may be most successful and politically sustainable when public health and economic perspectives coincide
- Often that just requires a slight reframing of the issues