



**Pursuit of Global Health and Wellness:**  
**The Value Proposition of the Future**

General Session: Keynote Speaker  
Monday, June 4<sup>th</sup> 2012 9:55am – 10:30am  
Paepcke Auditorium, Walter Paepcke Memorial Building, The Aspen Institute

**Speaker:**

Dr. Richard Carmona, 17th Surgeon General, U.S. & Vice Chairman, Canyon Ranch, U.S.

Transcription:

**Taylor Gannon**, Assistant Marketing Coordinator, Global Spa & Wellness Summit

Dr. RICARD CARMONA: Good morning and, Kavita, now I have two tough acts to follow: Philippe and you. I feel like the funeral anecdote that you mentioned, Philippe. Philippe, I thank you for your insightful and provocative remarks, which provided great segue to begin my remarks here.

As you've heard, I was the 17<sup>th</sup> Surgeon General of the U.S., a position that is wonderful and, on paper, sounds pretty simple: to protect, promote and advance the health safety and security of the nation. However when you try to execute on that value proposition in a very partisan environment, it does become a battlefield. Many of the issues you think about and work with? in your field of spa, health and wellness seem very straightforward based on the science but often become some of the most divisive issues that people want to state in their career or win an election on. It's a tough position, and during my tenure I would say I aged in dog years; it is a 24/7, relentless job, and there's no place else to pass a buck. For four years, I didn't have a day off and I remember one day, I was sick, bronchitis, fever, and my wife says, "Well why don't you just stay home? You never stay home; take a day off." I said, "Who do I call? Who do I call into? What do I do – call the President and say I'm staying out today? It's just virtually impossible." The job itself was best characterized by an encounter I had with Kavita's old boss early on, as I was going to senate confirmation. As you know, the President gives you the privilege to serve, but he only nominates you. It's actually a congress, through senate confirmation, that allows you to go on if they so desire you to be the Surgeon General of the United States, or any of the other higher positions within government that require senate confirmation.

And I had gone through my nomination process, waiting for my confirmation hearing. As many of you know, everybody doesn't get a confirmation hearing; the way that the congress tells the President that they don't like the nominee is that you don't get a hearing. You wait, you die on the list. Some people get a hearing, and in some cases, wish that they hadn't because it's an embarrassing situation, but I was fortunate. After a few months of meeting with individual senators, I had my hearing. Senator Kennedy and a couple others I had met had really befriended me, and in a very nonpartisan way, reached out to me. Some of the best attributes you have to have? going to Washington, especially to be Surgeon General, is to truly believe that you can go and stamp out disease and famine petulance and make the world a better place, and you wonder why it's going to take four years. And you wonder, what am I going to do those last couple of years?

And so, that faithful day, I showed up at the senate room waiting to go out and Senator Kennedy came out to talk to me. And he shook my hand and said, "Rich, I really thank you for being willing to serve your country again," and all the usual accolades that go with the job. And I said, "Senator, I'm thrilled to have the opportunity. Thank you." He had his hand on my shoulder and he was shaking my hand with his other hand, and he was looking at me kind of like a dad who is sending off his kid to combat. He said, "I want to give you some advice." I said, "Senator, any advice you can give me today that will help me through this confirmation will be greatly appreciated." He said, "No, it's not going to help you today but this information I will tell you today will give you an idea of what you're getting into." So he spoke to me for about five minutes, and I said, "Senator, its 9 o'clock, we need to get into the hearing." He said, "I'm the ranking member, they can't start without me." And then he finally looked at me in a very caring and loving fashion and he said, "Rich, you've heard this before, but you can't possibly understand it." I said, "Well what is it Senator?" He said, "Rich, when you come to Washington, and if you want a friend, you need to bring a dog." And I said, "I understand, Senator." And he looked me in the eye and said, "Richard, you're clueless." And I was.

Several years later I was on The Hill testifying at a hearing (Surgeon Generals testify all the time on everything from A to Z; terrorism, obesity, cardiovascular disease early warning, preparedness issues, but this was a terrorism meeting and we were delayed). I happened to start talking to the Senator again and I'm four years into my position. We had a little chit-chat, shared niceties about each other. And I said, "Senator, I really want to thank you again for how kind you were when going through the process to help me understand what I was getting into." He said, "Rich, we are happy to have you back in uniform, serving your country." I said, "No, no senator. I don't mean that, I mean your advice." He said, "You mean about the dog?" and I said, "Yes." And he said, "You understand now, don't you?" I said, "Senator, I do understand, but

respectfully, I do disagree with you.” He said, “How could you disagree with me? I don’t understand.” I said, “Senator, I’ve been here three years now. I’m a smart street kid and it’s come to my attention that when you come to Washington, you need to bring at least two dogs.” And he said, “Well I don’t understand. Why is that?” I said, “Because during your tenure, at least one of those dogs will turn on you.” He gave me a hug and said, “That’s better advice than I gave you. Can I use this from now on?”

I have reviewed the conference proceedings as the years passed, and it is clear that these summits and the industry have continued to mature. World-class topics and speakers addressing all aspects of spa operations from customizing, connecting and personalizing services and experiences to creating unique environments and best business and clinical practices will be discussed in the next few days. Hence the dilemma for me and other speakers because many of you are peers, and for us to provide meaningful information that brings out a value in you, that will inspire you when you go home to imagine new horizons, is tough. You’re out there every day thinking that the reason you’re here is the reason that you are the leader there. My goal today is to help you by framing the U.S. and global health metrics, at least partially defining the increasing demand for our spa industry globally, but also fueling demand for transforming health systems in the U.S. and worldwide. I hope to be provocative enough to stimulate your collective innovation genes through epi-generic propagation that would result in all of us imagining a healthier, happier, more peaceful world that we can all create through our collective best practices in business, health and social responsibility, while creating and perpetuating successful businesses.

As the U.S. government continues to debate health care and who pays, the rest of the world also struggles with right sizing, fixing and creating delivery systems that are really sick-care systems; they truly are not health care systems. As I told you, the job of the Surgeon General is to protect, promote and advance the health safety here in the U.S. This position during my tenure, and a little before, has morphed into a global position because, as Philippe outlines, so much of what I did was interdependent with so many others around the world. So it was incumbent upon me to know every other Surgeon General around the world, every other health Administrator, every other foreign leader because everything is interconnected, as was pointed out in the diagram that Philippe showed us.

Today we live in this world of seven billion people, where two billion are living on less than a dollar a day, where thousands of children die every day from lack of nutrition, lack of sanitation and lack of hydration; a world that has an increasing carbon footprint. If you don’t think that the environment affects health, you are wrong because it’s directly involved in everything from asthma and other diseases, globally.

I want to just give you a snapshot of the Surgeon General's portfolio and how that relates to us today and what we are talking about – health and wellness, and my vision, how I imagine the spa industry can be a major player in this space. As Surgeon General of the U.S., you put together a portfolio and it has to be based on the best evidence, the best science. In my background, I've held a lot of positions throughout my life. I was a trauma surgeon for many years and **one of the things that I learned most was that I admitted patients every day into the emergency/trauma center, largely because of peoples' bad behaviors.** On a daily basis, I started to see that three or four people per day that were there didn't have to be there. Either they ate the wrong foods, they became sedentary, engaged in high-risk activities, domestic violence, drug deals, what we used to call the knife and gun club – shooting and stabbing each other. When you look at the preventable disease and economic burden, it is astounding, and that kind of drove me into public health because of the experiences I had and why it was important.

**First and foremost in my portfolio was prevention.** We live in a world today where almost half a million people per year die from tobacco related causes. It is the number one preventable cause of death in our country. Millions more suffer irritable harm from various diseases: cancers, chronic obstructive pulmonary diseases and so on. This is not only a problem in the U.S., it's actually growing off our shores in other countries—especially in the EU [European Union], in Latin America—because we've tried to restrict advertising and try to contain tobacco, but the industry has moved offshore and they are very successful in tobacco-related endeavors out there.

We have an obesity epidemic in our country. We have two out of three Americans who are overweight or obese. We have nine million children today who are overweight and obese, and the fact of the matter is **obesity is the greatest accelerator of chronic disease that the world has ever known. If you're healthy, it will make you sick. If you're sick, it will make you sicker.** Whether you're pregnant, whether you have asthma, whether you have cardiovascular disease – it will be worse. Depression, even psychological disease, is tied into obesity as well. Obesity is a national security problem. What we are dealing with today in crisis forums, whether it is economics or health issues, we've been there for a couple of decades and we've kicked the can down the road, we've just ignored it. We've lived beyond our means. We've gone into debt and passed our debt to our children and our grandchildren, and now we're paying the price as if it was done acutely, but if you look back carefully, all the signs were there for decades, in any of the spheres we've spoken about; economics, health and so on, they are all interconnected.

**As I looked at this prevention agenda, and we looked at tobacco and then obesity and we looked at the challenges, as I said, our national security problem, the only way I can get traction is within the media – health doesn't sell very well, as many of you know, for health itself.** My colleagues in the U.S. public health service, army, navy and air force that I worked with as Surgeon General of the U.S., we desperately try to move these health issues forward, but two wars are going on and you're post 9-11, and anthrax after tax, that's all the media, that's where all the money is going, so you have to be smarter. Instead of just selling "science of obesity," what we had to do is say, "Hey guys, listen, obesity is a national security problem," and people look at you in the press conference and say, "Is he smoking something?" Well, what is it that's on his mind? Well guys, the number one reason that we've failed to keep soldiers and sailors and airmen on active duty is obesity; they can't pass their PT test and they get sick and we send them home after we have spent your tax dollars to educate them. They can't perform anymore. Do you know now that the U.S. Army has a pre-boot camp for obese kids to get them in shape so they can go to basic training? That's how bad the situation is in our country. It is devastating, it's dwarfing us. Between tobacco and obesity, we are up to about half a trillion dollars per year in expenses that are totally preventable in our country. It's extraordinary.

After prevention is preparedness and the fact is, after 9-11 and the two wars, and everything we're doing, preparedness issues become very important. Having to be partially responsible for training our first responders as well as educating the public to a new world order of terrorism, weapons of mass destruction, an unhealthy society becomes a liability in preparedness. So there you connect again, health connects with preparedness; so we saw in Katrina. When Katrina hit in our most health disparate area in the U.S., we had to go down there and, in fact, create an infrastructure because police, fire and EMS records were gone, hospitals were underwater, there was no connectivity, no communication, and we had thousands and thousands of health-illiterate people who depended on others for their daily life and their medications. Instead of becoming potential assets in a rescue operation, we had to evacuate 300,000 people to three cities in Texas, where we set up stadium cities – stadium health cities – because of how bad the health status was and the low level of literacy in health.

**So preparedness becomes intersected with health every day. Prevention, preparedness, health disparities – we are a nation where we are divided by our health metrics.** Africa Americans, Hispanic Americans, Native Americans or any low social economic class, you will get less health care, lesser decisions will be made on your behalf and you will die sooner and cost society more money. And this is in the greatest, richest nation of the world. Now, when I used to argue this, and you know

you have some hard lines, “Tell those people to get a job, no more welfare.” I said, “Look, even if you’re heartless, let me make the business case for you. We’re all paying for those health disparities. Okay? So we all ought to do something. Even if you don’t care, don’t feel it’s a moral, ethical or legal operation. Do it because you don’t want to spend money. The cost has shifted for all of those populations who are underserved, who have bad diseases, who are not treated, who are one of the fifty million who are uninsured. Eventually, we all pay. So we should be smart and invest upfront in health and wellness.” Hence, the importance of my pitch to you today.

Prevention, preparedness, health disparities, health literacy is the currency we all need every day because health literacy is about understanding that those we have the privilege to serve globally all see the world through a different lens. They all understand health and wealth and dying and disability differently. Our job is to take the best science the world has ever known, translate it in a culturally competent health-literate manner, and deliver it to an end user.

To do what? Effect sustainable health change. That’s the equation - exceedingly simple. That’s what all you’re going to do in your spas, you bring people in, you want to have a wonderful experience, but you want to transform them, you want to make them healthier, you want them to come back. It’s about translating the complex stuff that we know gets more complex every day, to those people who desperately need it, especially in those health-disparate populations.

So prevention, preparedness, health disparities, health literacy – it’s a tool that we all have to become experts in. I’ve spent a lot of time in health diplomacy and global health for reasons that are a perfect segway from what Philippe said. We are all interconnected, the child with AIDS in Sub-Saharan Africa, and there are 12 million now that are orphans, are vectors for disease. Even if you don’t have the humanistic approach, if you don’t have a heart to reach out and try to do what’s better for everybody, the fact is that there is an economic argument that is to be made to distinguish disease, to help those populations that are struggling because ultimately, they are harborers of many diseases, and AIDS is a perfect example.

So health diplomacy is really important because health itself is not only a tool to be able to affect health, but think about it – if you can go into under-served communities and create health populations, what follows is economic development. What follows is a sustainable society. What follows is less opportunity for people to lash out on us through terrorism because of asymmetries. Those asymmetries we see globally: health, wealth, geology, theology and poor governments. All of them are the platform to terrorism, but we found that by soft projection of health into the disparate global communities that could be a threat to us, it does the right thing. Bringing health can

bring peace, stability and economic development. It was interesting, the opening remarks, I heard about no women in that first brochure that you mentioned. And yet when we look at all the data around the world, 80 percent of our decisions, especially in health, are made by women. It's extraordinary. And when we look at the microloans in some of these small villages in the middle of nowhere, when we look at the health challenges we face after the tsunami in Indonesia, the most powerful group that we dealt with were the women in those villages who had the potential to transform culture and have them see the Americans there really as allies and not adversaries. And we were able to change how some of those communities which harbored terrorists before saw us differently because we used health as a tool, not only for health itself, but economic development, as well as to bring peace and stability to very unstable regions.

One other thing I want to mention is I travel the world, which is really important because we want to keep our remarks globally as Surgeon General and since then, in business and the many things I do, the hats I wear, like all of you. We spend in our country almost 18 percent of our GDP on what we call health care and it's really sick care. Three quarters of that, 79 cents of every dollar we spend in this country on what we call healthcare, are spent on chronic diseases, most of which are preventable. This is a value proposition of what we do in our industry, pursuing optimal health and wellness, which we don't hear coming from the government over the battle of who pays. The fact is we are all going to pay, the cost curve is going this way and if we don't do something in the next twenty years, we will be over 20 percent of our GDP—5.5 trillion dollars—the bank is breaking now and in the next decade, it will double if we don't put our nation and the world in a different trajectory because of the disease and economic burden that is developing because of these problems.

Now in Japan, I met with the health administrators there a few years ago, and they called me in and I remember being up in the administrator's office. We were looking out the window in Tokyo and he says to me, "Surgeon General, we are having problems." And I said, "What problems is that?" He said, "Respectfully, we are Americanizing." And I said, "What do you mean?" And he said, "Well, look down the street." And it's funny, as I looked down the street I saw all our U.S. fast food restaurants out the window. And not that I'm blaming him, but he said, "Your music, clothes, your activities – everybody wants to like America and that's good, but they're also inheriting some of the bad characteristics." And they're spending half of what we spend and they're going broke now, in Japan. When I went to the UAE, one of the biggest problems they had was an obesity epidemic that's drowning them, and as I went to India, same thing. So you start to see this as really a global phenomenon. We are all interconnected and the solutions are global. As Philippe mentioned, it's not about solving it in Aspen, it's not about solving it in Tucson, Arizona, and these are

all global issues because we are all inextricably interconnected with so many other people.

So where are the thought leaders that can drive health and wellness globally? Who has the expertise and proven ability to transform alien individuals and population? Who understands that the optimal approach to health and wellness is via integrated and holistic approaches to mind, body and spirit? Where does a global infrastructure already exist to begin a global transformation to a true health care system and away from sick care system? Ladies and gentlemen, I maintain, that it is really all of you because you already have a global network within the spa industry. You all have a similar value proposition.

At this juncture, it's worthwhile stating the obvious. We have a branding issue, of course, in the spa world. For the word "spa" has morphed over generations to be used so liberally that it may be used to describe a small, boutique hotel with a Jacuzzi and an on-call masseuse to comprehensive, integrative, holistic destinations for health and wellness resorts that provide every modality from acupuncture to Zen and in between. Be that as it may, let's look what we have in common, not how we're different because we have lots in common since we are all about transformative, enlightening, provocative, delightful experiences for our guests that propel each guest towards a desired or a new-filled journey that presumptively continues as they return home, and of course, hopefully results in a return visit. That also meets our commercial needs. Competition drives excellence and breeds innovation and entrepreneurialism especially in these economically challenging times as we strive to chase and define the ever-evolving Holy Grail of added value that drives our guests to us and fuels our business. It is the IP we invent and we use that defines our brand and keeps us competitive in this increasingly tough spa market.

Four years ago, shortly after finishing my term as U.S. Surgeon General and joining my present company as the vice chairman and president of the institute, Susie and Pete were kind enough to invite me to give a keynote address at the Global Summit in New York City. At that time, I addressed my thoughts on the spa industry and how I believed it could play a critical and essential role in transforming our nation and the world to a culture of pursuing optimal health and wellness for all. And in doing so, build brand recognition, enhance our bottom line while providing innovative health solutions in a socially responsible, environmentally sustainable and sensitive way. Truly a win-win for all parties involved. I also briefed you on an innovative concept, starting an institute, a non-profit, a line with our for-profit business whose mission was and is to partner with health-thought leaders globally to deliver our company's intellectual property, to underserved health-disparate communities who often need our health and wellness services more than those who can afford to be our guest.

Since that presentation four years ago, we have developed over a dozen partnerships, reached numerous public and private communities. We've presented at public and private meetings, and had peer review publications, developed a sustainable business model and have demonstrated that we can create sustainable, behavioral change resulting in improved health via the culturally competent, health-literate translation of our IP to the neediest, health-disparate communities. Essentially, we are taking the spa to the hood.

Now in the spirit of collaboration and in the spirit of staying away from branding and names, I haven't mentioned anything specific, but I want to make sure that you know, and to Pete and Susie, I'm happy to share this information with all of you. We have a website, it's online, and our goal is to get it out to everybody, so that all of you can use that information to address these issues and your community if you are able to. So we have a proof of concept right now that seems to be working and we want to share that will all with you. Again, it is readily available online; the curriculum and everything. So if any of you are interested, I'm happy to discuss it with you later or you can get to us online, but I didn't want this to be just a hollow presentation, where you don't know where anything is.

The pursuit of optimal health and wellness is a global megatrend that cuts across all demographics. When we look at health in the U.S. over the last century, the changes are startling. At the beginning of the 20<sup>th</sup> century, the life expectancy of people was 48 years old and most people died of an infectious disease. Now we are pushing 80. At the beginning of the century, only 14 percent of homes had bathtubs, only 8 percent of homes had phones. There were 8,000 cars in total in the United States and there will only be 144 miles of paved roads in the whole United States. The maximum speed limit was ten miles an hour. The average pay range was 200 to 400 dollars per year. Only 6 percent of adults had a high school diploma. Marijuana, heroin and cocaine were over-the-counter products. Germ theory was still new and DNA, the half-a-helix, was still a half a century away. What will our comprehensive health and spa of the future look like in 50 years or more? Let's briefly look at a hypothetical.

Our hypothetical CEO is a hard-charging, stressed out, 60 year old, Fortune 100 CEO with more money than he can count and a life expectancy that is shrinking every day due to his family history, his lifestyle, his inability to change his behaviors. His primary care provider suggests a last chance, to go to a health spa in the nearest community that is aligned with his assigned medical home. The medical home is among the best accountable care organizations nationally, based on quality costs, access and best practices in sustainable health. Providers are rewarding for keeping individuals, communities and populations healthy. There are few emergencies in this community. Mr. CEO leans back in his chair and via his all-purpose glasses, telepathically accesses

his search engine on the virtual heads-up display. He contacts the spa nurse and program advising and she requests access to his personal medical records stored in the cloud-held vault. She reviews the record and requests permission to assess his vital signs. She does so via the temporal transcutaneous sensors on his all-purpose glasses and performs an EEG and EKG and total body energy vector analysis, which reveals significant asymmetries which require further evaluation and treatment. She schedules him to arrive at the spa the next day for a week stay. Mr. CEO, with the help of the program's advising nurse who is holographically present via his all-purpose heads up glasses display, schedules numerous fun and healthy activities, classes and an executive physical to be interspersed within his activities during the week. He has been sleep-deprived and psychometric testing reveals cognitive and physical performance decrement. A remote virtual, mini, functional MRI reveals circuitry overload, diminished neuroplasticity and neurotransmitter depletion – which say he must rest. A history physical examination, basic labs, bio markers, genomic profile and epi-genomic status reveal further problems – all correctable by behavioral change. Mr. CEO goes back to his room to rest after receiving a comprehensive prescription for health and wellness to include diet, activity, activity recommendations, sleep cycle and a pharm-genomic profile so he can adjust his daily medication precisely, based on his genomic profile. However his epi-genomic profile is poor due to poor eating habits, smoking, stress and sedentary behavior; thus, preventing him from expressing positively his genome. Before nodding off, he decides to have a prohibited cigarette, some candy bars he stashed away and beer. The environmental room sensors and the sensors on his glasses detect smoke. He also automatically had his snack choices scanned into his health vault when the packages were opened and the bottle cap removed. His all-purpose glasses automatically put up a holographic image of the Surgeon General stating, "These activities will be hazardous to your health." As Mr. CEO dozes off, he contacts his wife who is overseas by scrolling up her unique identifier on his eyeglasses heads-up display. She appears holographically and gives him a goodnight virtual hug and kiss – can't do much more yet, holographically. In the a.m., Mr. CEO arises, he goes to relieve himself in the waste reclamation room, used to be called a bathroom. All of his body wastes are analyzed. Hydration status, electrolytes, labs, and there is a continuous feedback to the health vault cloud where his medical record is so that his providers and all of the specialists at the spa can act accordingly based on the information that is continually generated and available through the health vault in the cloud. All of these things that almost seem "Jules Verne-like" are available today. This is science that is not been applied yet.

When Mr. CEO leaves after a week with his comprehensive and multidisciplinary prescription for health, he also chose to stay connected remotely to the virtual spa, where through his choice of, he was monitored daily and reminded of his needed daily activities, eating/sleep cycle, calorie count and automated lab results that are done

remotely, as needed, via transcutaneous sensors on his glasses. And his next visit to the spa, he is able to virtually participate in his favorite exercise classes, lectures, and even have professional consultations as needed, all done virtually, telemedicine and through his choice of PDA. And all health info is immediately downloaded into his record in the cloud.

The virtual spa concept has been an enormous success for our membership and is now in the millions of satisfied guests who belong to the virtual spa health community. In fact, the revenue from our virtual spa, from member fees and associated virtual supermarket for branded food and clothes sales, continued to dwarf the old-fashioned bricks and mortar spa. The traditional medical community, medical homes and accountable care organizations (ACOs) are immensely pleased with our participation in pursuing and being a part of the health community whose role is to pursue optimal health and wellness in all we do. And of course, our investors continue to be laded at the ROI, another win-win situation for all.

As U.S. Surgeon General, it was always clear to me that the best innovation and entrepreneurial practices emulate not from the government, but from thought leaders like you in the private sector. The greatest successes my team and I achieved on behalf of the American public, and at times, the world, were based on public/private partnerships with passionate, knowledgeable, innovative, imaginative, socially-responsible leaders like you, who are not politically incumbent and could act on market forces in a timely fashion. In all of you I see the power of possibility to transform our nation and world through your best practices at all levels of society, to engendering national and global cultural transformation from a sick care system to a health care system that embraces the pursuit of optimal health and wellness via an integrated, holistic approach emphasizing the best scientifically practices of mind, body and spirit. We can drive and shape health policy through our clinical and business best practices. I challenge you as I did four years ago, you and your individual companies in the collective industry with this growing infrastructure such as this Summit. Your business successes of collectively leveraged for maximum public good while being commercially viable and philanthropically successful have the potential to incrementally improve the health and wellness status of the nation and the globe that is in desperate need of scientifically driven, non-partisan leadership. I would encourage the spa industry to develop a global health and wellness policy platform that will allow you to speak as one and in doing so, move our nation and the world in a desirable and needed sustainable path of optimal health and wellness.

In closing, to paraphrase Winston Churchill, and I love the quote, it's longer than I'm going to say but I'll paraphrase it. He said after the Second World War, "I love Americans. They always do the right thing... eventually." And "eventually" is now

folks. We can't kick the can down the road anymore, and the spa industry, I believe, is an integral part of the solution for our nation and the world.

Thank you.

## Q&A

[Kavita Patel]

Thank you so much for that. I think you challenged us and I think a lot of folks are not only very interested in your experience from being Surgeon General, but also maybe if you can reflect a bit on this pathway that you have been embarking on with running for national office and how you might plan to operationalize. If you can just briefly touch on taking some of what you gave us for a vision and how you think that can apply into a system that a lot of folks have felt is primarily broken, that's our national and political structure.

[Dr. Carmona]

Certainly I'd like to give Kavita credit starting out, if you don't know, she has been a quiet, humble giant behind the scenes formulating health policy in a very partisan environment. So we are fortunate to have Kavita and folks like her that I had an opportunity to work with in Washington who always stayed focus on what the best interest of the person was and the population, not a party. And because of that we had some very strong bonds, because as Surgeon General, you realize you are not the doctor of Republican or the Democratic party, you have a far more important job: you're the doctor of the people of the United States and your decisions should be based on the best science that will help people make their own decisions as they move forward. So my sanity has been questioned routinely in the last couple months since doing this. It was something I had planned to do, in fact, I often said I would not go back to Washington. It's just such a contentious environment. The experience of being Surgeon General was extraordinary and I still consider it a gift. But when I got home and immersed myself in the things I used to do, wearing multiple hats, sitting on boards and traveling, I was very happy. But I wasn't very happy with the political situation in my state, Arizona, or what I saw happening in Congress; pretty much an absence in leadership, gridlock, all the things that you know, being pushed to the brink of the debt crisis, embarrassing ourselves in front of the rest of the world because we couldn't solve problems. And as its been pointed out in my presentation and Philippe's, we are all inextricably connected. The fact that our nation fails to act in a timely fashion on economic, catastrophic issues affects everybody.

A lot of our colleagues encouraged me, called me a few days into it and said, “Rich, you really should run for office.” And I said, “I am running. I’m running as far away from Washington as I can.” But after several months, the discussions, a lot of new diligence and speaking to former Presidents, majority leaders, minority leaders, people like I and Kavita that have developed a relationship is apolitical because of how we approach things, I realized that it was another opportunity to serve and that with the insight and background I have, I would be able to engender some civility in our governance at our national level, maybe return trust to the people of their governance, as you know, 90 percent of people have no confidence in their government at this point. You can’t run a democracy when people don’t trust their elected officials because of repeated re-breaches of fiduciary responsibility and other problems. So if the people give me the privilege to serve, I just look at it as going back on active duty. I’ll serve and my goal will always be to come home at the end of the term and just work hard while I’m there, and hopefully, become a positively disruptive force in that body to engender the change that is needed to serve all of you in a professional manner with integrity and dignity.

[Kavita Patel]

Thank you. So let me shift for a bit. There were several questions in the audience based on your wonderful kind of vision of the CEO and this integration, but where’s the role in that? As you were describing that and you’re talking about the advanced technology, where’s the role again for human touch and personal communication?

[Dr. Carmona]

I think the most important issue, we’re not going to lose the human touch, but we’re going to enhance the touch and some of it can be virtually. The challenge we have today is we all know, we in the professional field, know that the arguments that are there before us in our government or who pays really are almost distractions. The real issue you have to look at is what does data shows us? The data shows us that we have amounting disease and economic burden that is burying us and we have the power to change that. The challenge for us is that we have to be able to connect to each and every American because it is not about the government writing a paper or the Surgeon General giving a speech, it’s about engaging every single person in the country that they have a personal responsibility to pursue health and wellness. The government can help you, we can set up the platform, make sure you have access. We can make sure that you have the health care, but it can’t be the traditional sick care system. We have

to provide different methods, and they're being studied now in pilots, on how to incentivize providers to keep you healthy. The health system we see in the future and I know Kavita agrees with me, is that I want to maximally be able to incentivize those practitioners who keep individuals, families and communities healthy. Not to say that those who take care of disease don't get paid, but we really need to move our perversely incentivized society to one that embraces health and wellness. That's where I see that the spa organizations can really help, because the forty different countries here, this is a global issue first of all, it's not U.S., and we already have the intellectual property. You practice it everyday - health, wellness, physical activity, diet. Those are the variables that need to be applied to each and every individual in this global economy. The challenges we face as a nation don't recognize geo-political borders with obesity, cardiovascular disease, or terrorism or weapons of mass destruction.

We are trying to figure out now how do we deal with borders that they don't impede commerce but protect us, and that they don't impede health, but they do often. These are issues that have to be debated, and in my sense in a non-partisan way, and I still see that the spa industry has this wonderful organization, globally. It's growing every year, it's getting stronger. Susie and Pete have done a tremendous job in bringing together thought leaders here. Philippe has done a great job with his opening. The platform is set. I just think we need to imagine a different world that we get to drive the policy for based on our best practices, and we can do that because the government here and government elsewhere is looking for solutions for their problems. The solutions are not who pays, the solutions are what you do everyday and we have to get that to all of the people. Not only commercially – that's why I mentioned the institute, which we have been fortunate enough to be able to partner in over a dozen different communities and actually start to transform the health of the most health-disparate communities globally because we have a global project now in Lima, Peru.

[Kavita Patel]

So there are a number of comments from a lot of folks in the audience. I have had an overwhelming number around how to take this vision that you are describing as well as this notion of integrative medicine, whether you want to call it complementary, alternative, integrative medicine, holistically, and where there is some opposition from the pharmaceutical industry as well as some of the very large and well-funded financial interests across the world we're seeing. How do you resolve those issues and give advice to folks in the audience?

[Dr. Carmona]

I would say, Kavita, like we always did, we try and be non-partisan; sell to science. The fact that we moved down the road toward pursuing optimal health and wellness doesn't have to be a challenge to the pharmaceutical industry or other destine interests, hospitals. They need to evolve to the new world order themselves and we're seeing that happen already. The fact is the health care system that we've set up that is really based on a post-WW2 Hill Burton model which has mal distribution of most of our resources, including hospitals, doesn't make any sense anymore. We need to start re-creating and creating these, my colleagues call, medical homes. I tend to call them health homes because I don't want to replicate what we had, I want a center where people can be healthy. The fact is that this is all doable - we have the intellectual property, you guys do this stuff every single day and we have to remember that it is not only reaching the people that have the privilege to come to all of our places, but it's really, when we can, partnering with the community to be able to bring some of that good health to the communities and transform some of those health-disparate people. It's a brand elevator for you, it helps your government, you're solving problems with local communities and it makes you a much more viable community servant. There are lots of reasons to do it, but especially, it's the right thing to do.

[Kavita Patel]

Great, thank you. And then one final—this is very much in the spirit of Aspen, as those of you have attended events in Aspen can tell you—if you can just tell us something from something outside of our comfort areas, outside of wellness, outside of healthcare that you've seen, whether it's your experience in Peru or just experience in life that would help us understand how to do what we're struggling with every day. I often look at physics or education, areas that are completely outside of my comfort zone. Have you found such an example that you could share on a final note with others?

[Dr. Carmona]

I gave you the concept of health diplomacy. Health diplomacy is projecting the science technology health we have out. In the military, we have a concept called "force projection," so we show our strengths by putting all the battleships and troops on the grounds so it's deterrent to war – that's the theory. But soft projection is taking health and science and technology in a prospective manner to distinguish the asymmetry that I spoke about. I know that when we had the tsunami, and of course

America tends to be the world's rescuer, the world's doctor, the world's policeman, but soon as it happened, my colleagues and I were saying, "What are we going to do?" Those people are dying in Indonesia, they're underwater, it's a developing country; they're struggling. Yet we didn't have the best relations with them—it was one of the countries singled out as harboring terrorists—so we're walking a fine line, politically. This was really an emancipating moment for me because we sent our navy ships forward, our public health, our Army, Air Force, Coast Guard, Peace Corps just to do good things for people who were struggling. We stopped at the international water line and the leaders were like, "We don't trust you, we don't want you here." There was this discussion and our guys were smart. They bartered. They told them, "We're in uniforms, we don't have weapons, we have sanitary engineers who want to rebuild your communities, we want to provide you with clean water, we want to take care of the kids and the injured, we want to provide nutrition." So they were able to go on land two hours a day guarded by police and military and we had to helicopter them back to the boat, which delayed our rescue mission.

Over days and over weeks, they were there for four hours and then they were there for eight hours and then they were invited to stay in the village at night, and they learned the kids' names and they learned the families' names. Miraculously, after a few weeks, there were no more guards and they were living in the villages with the people, doing the work and when it was time for us to end the event because we were not funded for it, we were broke, we spoke to the leadership and said, "We're going to have to pull out now. I think you're relatively stable. We'll continue to try and provide assistance." And you know what the leadership said from the country? "Why are they leaving? These are good people. We'd like them to stay." So in a very short time, we delivered the heart of America; we actually changed how a foreign country saw us through using and leveraging the currency of health to engender a transformation in that community, both for us and them, and hopefully then bring peace, prosperity and economic development to follow.