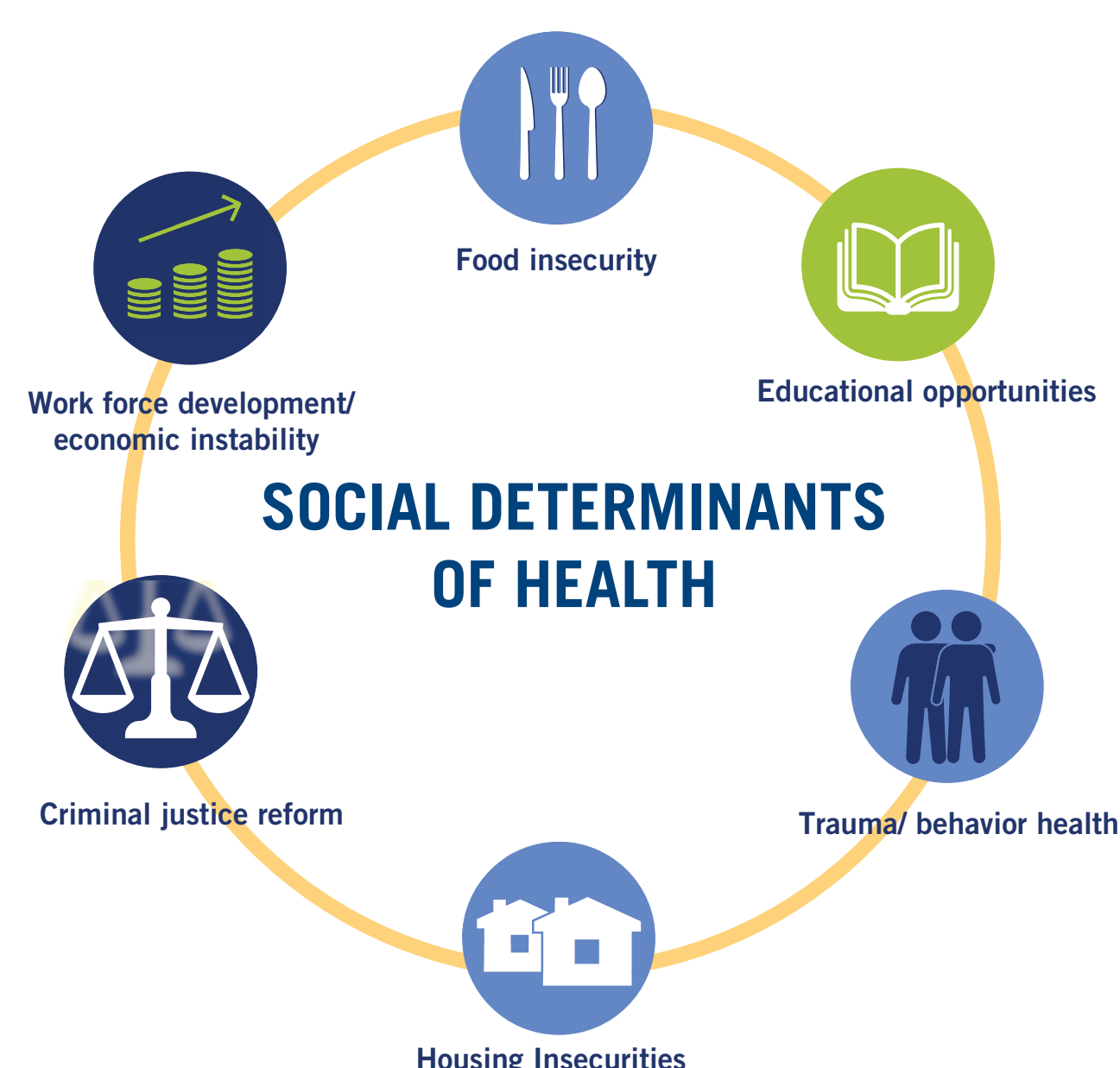# Upstream Interventions
to improve clinical outcomes and create equity

THE PROBLEM

Providers and payers are aligned more than ever to improve clinical outcomes at a lower total cost of care. I plan to **address opportunities to improve clinical outcomes and reduce the cost of care by focusing on root causes**. I will explore systemic problems and structural barriers that contribute to poverty and downstream health issues for residents of Boston and other cities. I also plan to build a base of historical information on red-lining, trauma, mass incarceration, and food and housing insecurity. I will leverage this information to form a strategic plan to **(a) understand the challenges** of social determinates of health and **(b) develop or propose** target interventions, services, and programs to obtain and sustain wellness.
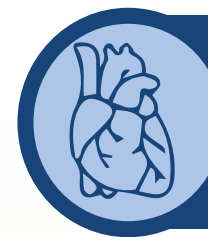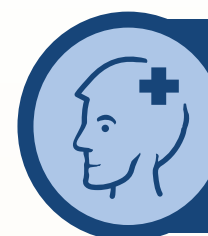

Food insecurity

Educational opportunities

Work force development/ economic instability

SOCIAL DETERMINANTS OF HEALTH

Trauma/ behavior health

Criminal justice reform

Housing Insecurities

THE BARRIERS

Mother and child

Black infant mortality is 4x that of white infants

Chronic conditions

Black community has much higher prevalence of chronic conditions: **Diabetes (~3x), Hypertension (2x)**

Behavioral health

Black residents are **1.5x more likely to suffer persistent sadness and 2x more likely to attempt suicide**
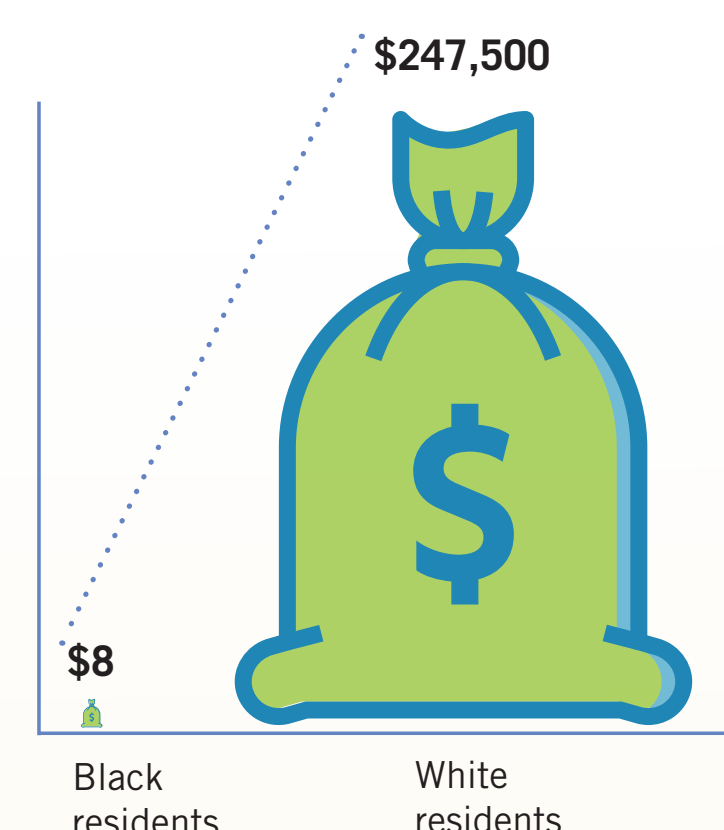
Homelessness

Black residents are **5x more likely to experience homelessness**

In Boston, African Americans have a median net worth of $8, compared to white city dwellers, who have an average net worth of $247,500

The disparaging stats were first uncovered in a 2015 report by the Federal Reserve Bank of Boston, which calculated net worth by subtracting the amount of household debt from their total assets.

$247,500

$8

Black residents

White residents

Health equity is the absence of avoidable, unfair, or remediable differences in health outcomes among groups of people

THE SOLUTION

Establish programs aimed to:
- Improve heath outcomes (clinical programs)
- Reduce number of incarcerations and reacclimate to community after incararation (community partnerships)
- Increase homeownership
- Reduce wealth gap
- Reduce education gap/increase opportunities

BOSTON MEDICAL CENTER
HEALTH*Net* PLAN