



Boston CHNA-CHIP Collaborative

2019 Community Health Needs Assessment: Preliminary Key Findings

Boston Board of Health Meeting 5-15-2019
Margaret Reid, Boston Public Health Commission
Nancy Kasen, Beth Israel Deaconess Medical Center



Spring 2019

Boston CHNA CHIP Presentation

- CHNA Background and Data – 20 minutes
- Question and Answer – 10 minutes
- Prioritization Process – 30 minutes

Collaborative Steering Committee Members

- Nancy Kasen, *Co-Chair*, Beth Israel Deaconess Medical Center
- Carl Sciortino, *Co-Chair*, Fenway Health
- Ayesha Cammaerts, Boston Children's Hospital
- Magnolia Contreras, Dana-Farber Cancer Institute
- Denise De Las Nueces, MD, Healthcare for the Homeless
- Sherry Dong, Tufts Medical Center
- Erin Duggan, Massachusetts Eye and Ear
- Jennifer Fleming, Boston Medical Center
- Ricky Guerra, Community Representative
- Daniel Joo, Uphams Corner Health Center
- Wanda McClain, Brigham and Women's Hospital
- Mary Ellen McIntyre, Mass League of Community Health Centers
- Jeanne Pinado, Madison Park Development Corporation
- Joan Quinlan, Massachusetts General Hospital
- Margaret Reid, Boston Public Health Commission
- Sarah Jimenez, Community Labor United
- Tracy Sylven, Brigham and Women's Faulkner Hospital
- Robert Torres, Urban Edge



CHNA Methods



- **Secondary Data**
 - Review of existing social, economic, and health data from surveillance systems and other sources

- **Interviews with organizational and community leaders across sectors (n=45)**
 - Representatives from housing, transportation, faith community, education, public health, health care, organizations that work with specific populations, etc.

- **Focus groups with community members (n=13 groups)**
 - Deep-dive with community members not typically represented in these processes (e.g., LGBTQ youth, low-wage workers, family members affected by violence, specific immigrant populations, etc.
 - Conducted in English, Spanish, Haitian Creole, and Chinese

- **Community survey (n=2,404 residents)**
 - Survey disseminated online and in hard copy by large network of organizations
 - In 7 languages (English, Spanish, Portuguese, Haitian Creole, Vietnamese, Arabic, and Chinese)

**CHNA
Priority
Feedback
Meeting**



YOU'RE INVITED

WED, MAY 29, 2019

5:30-8:30 PM

HIBERIAN HALL

184 DUDLEY ST, ROXBURY

Demographics

Who lives in Boston?



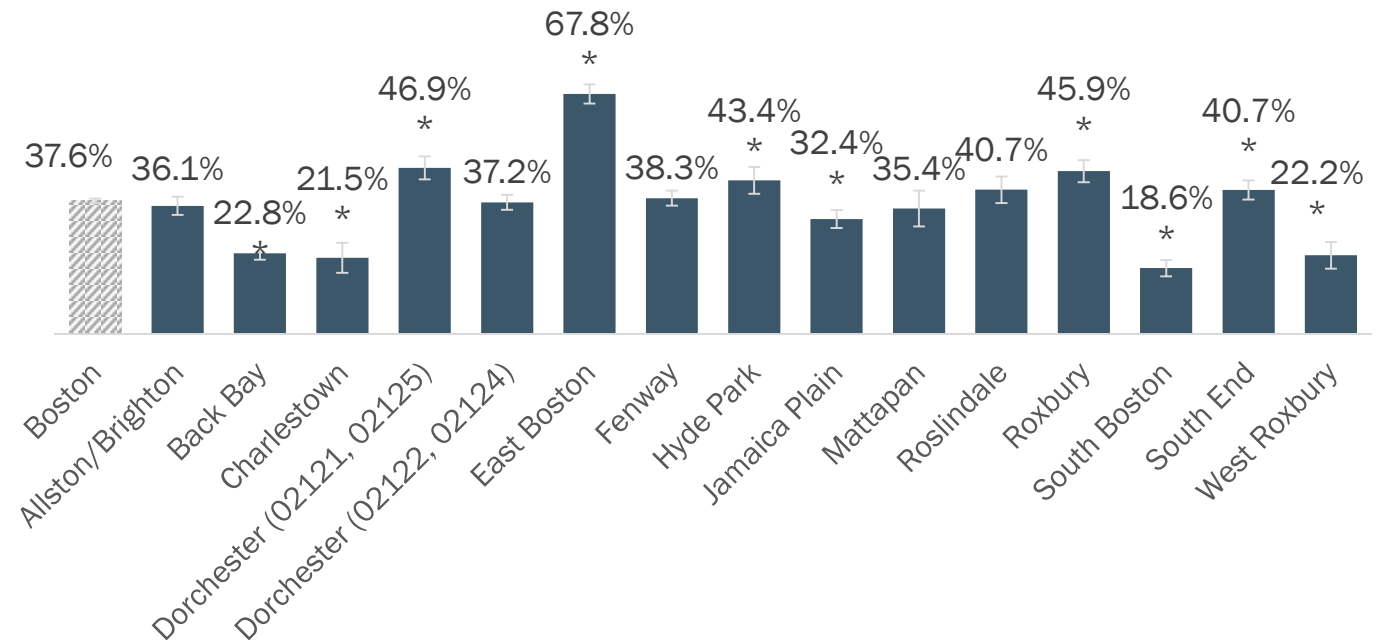


Racial and Ethnic Composition

- Boston is diverse with 23% of residents identifying as Black, 20% identifying as Latino, and nearly 10% identifying as Asian.
- One third of residents speak a language other than English at home, the most prevalent language being Spanish.

“Multiculturalism is one of Boston’s strengths; it facilitates connections and bridges gaps in an organic way.”
–Key informant interviewee

Percent Population 5 Years and Over Who Speak a Language Other Than English, by Boston and Neighborhood, 2013-2017



DATA SOURCE: U.S. Census, American Community Survey 5-Year Estimates, 2013-2017

NOTE: Neighborhoods as defined by Boston Public Health Commission; Back Bay includes Back Bay, Beacon Hill, Downtown, North End, and West End; South End includes South End and Chinatown; Asterisk denotes where the neighborhood estimate is significantly different compared to the Boston estimate ($p < 0.05$); Error bars show 95% confidence interval

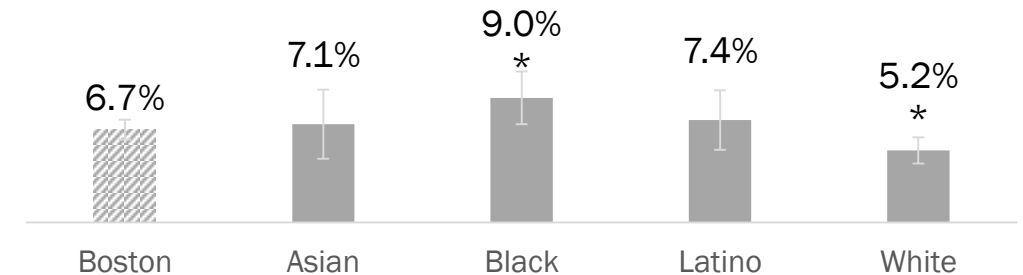


Employment and Workforce

- Low levels of unemployment (6.7% overall)
 - Unemployment significantly higher for Black residents (9%)
- Significantly higher unemployment rates in Roxbury Dorchester, Fenway, and Mattapan

“I've struggled to get a job. I have more than a decade of experience, but the minimum requirements are always a bachelor's degree, so that disqualifies you for ten jobs right off the bat.” –Focus group participant

Percent Population 16 Years and Over Unemployed, by Boston and Race/Ethnicity, 2017



DATA SOURCE: U.S. Census, American Community Survey 1-Year Estimates, 2017

NOTE: Asterisk (*) denotes race/ethnicity estimate was significantly different compared to the Boston estimate ($p < 0.05$); Error bars show 95% confidence interval

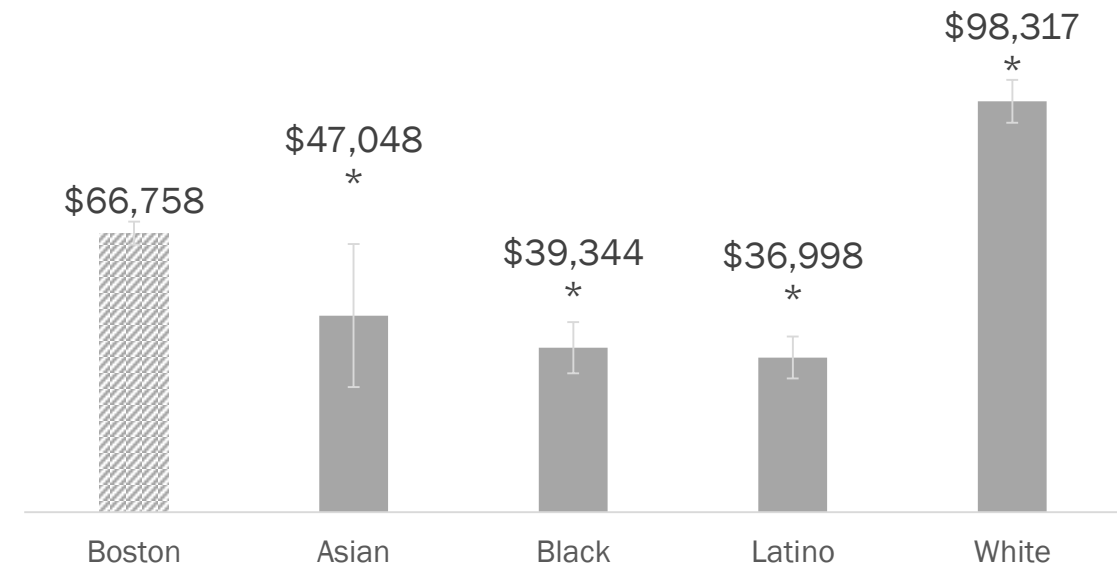


Income & Poverty

- Boston median household income: \$62,021
 - Wide range – Dorchester median income is \$27,964 and South Boston is \$170,152
- Household median income highest for White residents and lowest for Latinos

“This is at the heart of all of it: people have no time because they are working four jobs to get the same salary they used to get from one [job]. If you can’t rest, how can you be healthy? ... Some people have to work 70 hours to make ends meet.” –Key informant interviewee

Median Household Income, by Boston and Race/Ethnicity, 2017



DATA SOURCE: U.S. Census, American Community Survey 1-Year Estimates, 2017
NOTE: Asterisk (*) denotes race/ethnicity estimate was significantly different compared to the Boston estimate ($p < 0.05$); Error bars show 95% confidence interval

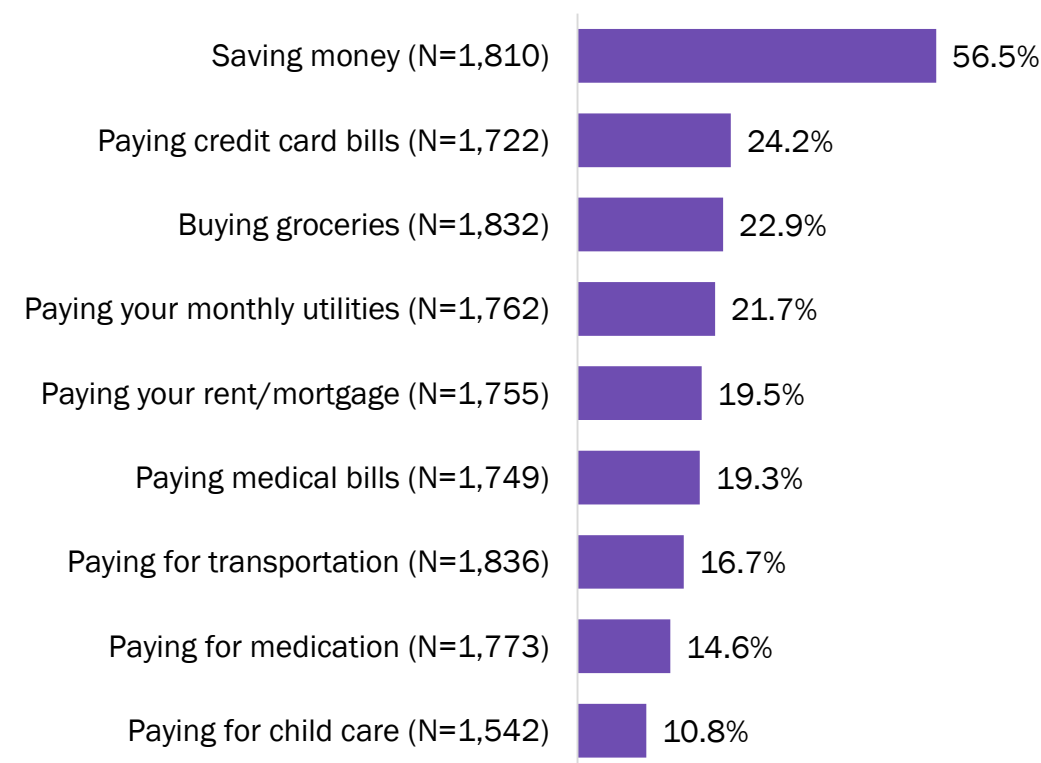
Financial Security



- Nearly 60% of CHNA survey respondents report trouble saving money
- 1 in 5 have trouble paying credit card bills, buying groceries, and paying monthly utility bills

“There are lots of financial needs here in Boston. People are working 2 or 3 jobs, and even if you live simply, your salary breaks even. There is no extra money.” –Focus group participant

Percent Boston CHNA Survey Respondents Reporting Having Trouble with Finances, by Type of Finances, 2019



DATA SOURCE: Boston CHNA Community Survey, 2019

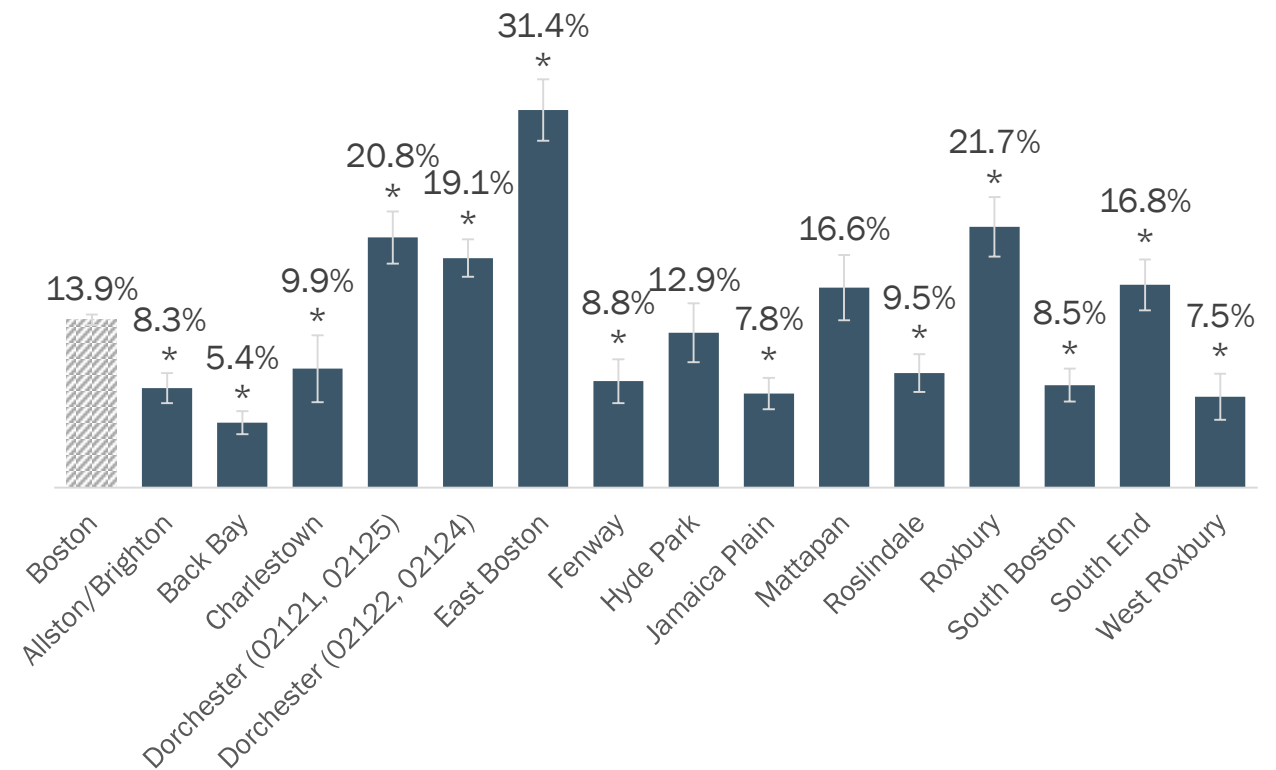
NOTES: Percentage calculations do not include respondents who selected “don’t know/prefer not to answer”

Education



- Boston is a well-educated community
 - 48% of Boston adults have a college degree or more
- East Boston, Roxbury, Dorchester, and the South End have a significantly greater proportion of residents without a high school diploma.

Percent Population 25 Years and Over with Less Than High School Diploma, by Boston and Neighborhood, 2013-2017



DATA SOURCE: U.S. Census, American Community Survey 5-Year Estimates, 2013-2017

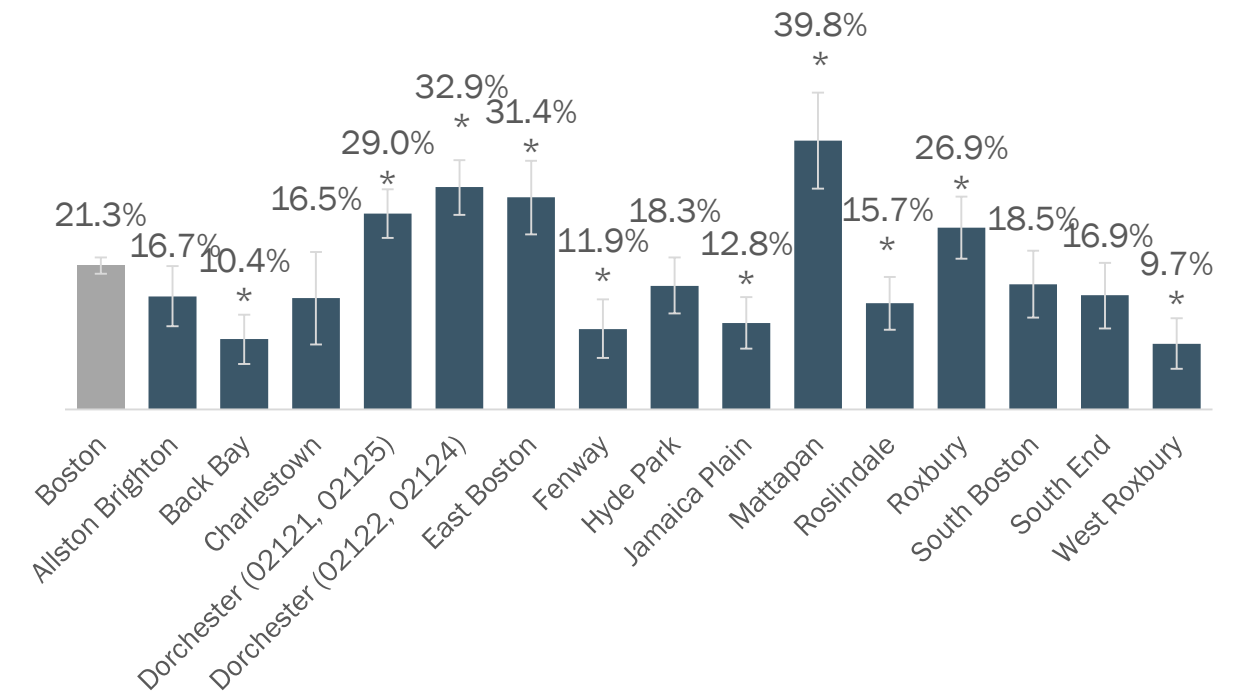
NOTE: Neighborhoods as defined by Boston Public Health Commission; Back Bay includes Back Bay, Beacon Hill, Downtown, North End, and West End; South End includes South End and Chinatown; Asterisk (*) denotes neighborhood estimate was significantly different compared to the Boston estimate ($p < 0.05$); Error bars show 95% confidence interval

Food Insecurity



- Nearly 1 in 5 residents report being food insecure.
 - Black, Latino, and foreign-born residents are far more likely to report being food insecure.
- Food insecurity varies by neighborhood.
 - Mattapan, Roxbury, Dorchester, and East Boston had a significantly higher percentage of residents than the rest of Boston.

Percent Adults Reporting Food Purchased Did Not Last and Did Not Have Money to Get More, by Boston and Neighborhood, 2013, 2015 and 2017 Combined



DATA SOURCE: Boston Public Health Commission, Boston Behavioral Risk Factor Surveillance System, 2013, 2015, and 2017 combined

DATA ANALYSIS: Boston Public Health Commission, Research and Evaluation Office

NOTE: Data show percentage of adults reporting it was sometimes or often true that the food didn't last and they did not have money to get more; Asterisk (*) denotes where neighborhood estimate was significantly different compared to the rest of Boston ($p < 0.05$); Error bars show 95% confidence interval

“I’m working three jobs and I can barely afford food; I buy whatever I need to feed my kid and that’s it.” –Focus group participant

**Social &
Physical
Environment**

***What is the community context
for Boston residents?***



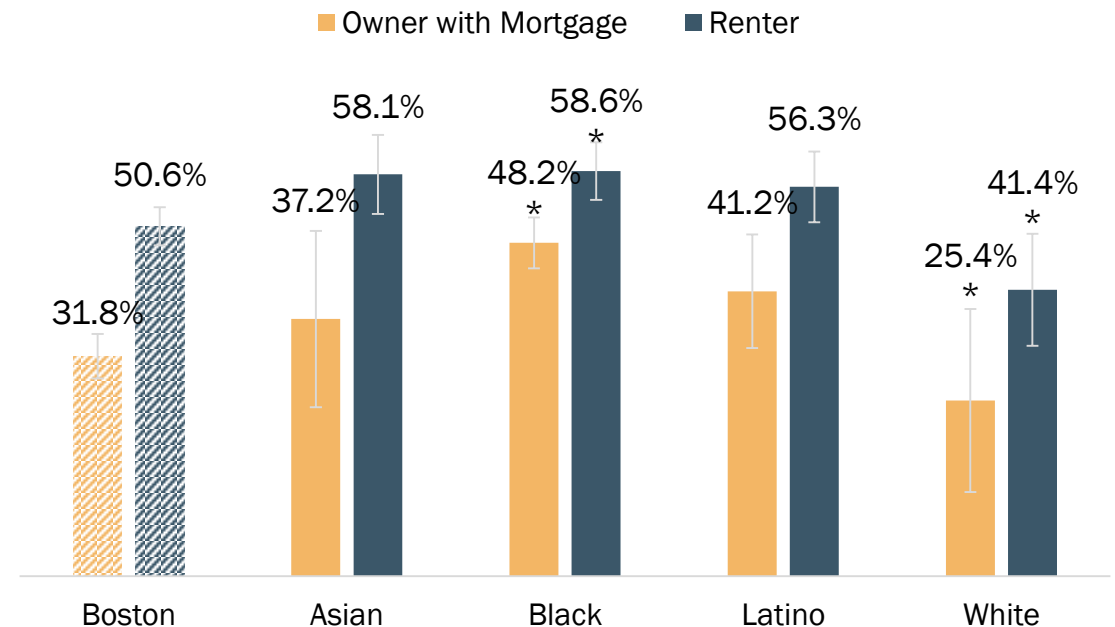
Housing



- Housing top of mind concern among nearly all CHNA participants.
 - More than half of renters are housing cost-burdened.
 - Estimated 6,188 Boston residents experienced homelessness in 2018.
- Gentrification, long wait-lists for housing assistance programs, & housing discrimination described as additional pressures.

“Rent is becoming impossible in East Boston...it’s hard to have a good quality of life here. There are all of these high rises, but we don’t get to access those nice things. People are coming here to take what we have been building for decades.” – Focus group participant

Percent Housing Units Where 30% or More of Income Spent on Monthly Housing Costs by Housing Tenure, by Boston and Race/Ethnicity, 2017



DATA SOURCE: U.S. Census, American Community Survey 1-Year Estimates, 2017

NOTE: Asterisk (*) denotes race/ethnicity estimate was significantly different compared to the Boston estimate (p < 0.05)

Transportation & Built Environment



- Barriers: Limited street parking/traffic, availability of public transportation, and cost of transportation
- Boston is a walkable city; however built environment varies across neighborhoods.
 - Overcrowding caused by new developments was a concern among focus group participants.

“They build and build until we’re stuffed in like pack rats...every little slot they’re building something; we’re literally living on top of our neighbors.” – Focus group participant

	All Respondents (N=2,012)	Chinese (N=137)	English (N=1,769)	Haitian Creole (N=55)	Portuguese (N=47)	Spanish (N=362)	Vietnamese (N=82)
Limited street parking, traffic-related noise, or traffic	23.1%	16.1%	23.2%	18.2%	19.2%	25.4%	34.2%
Availability of public transportation	19.2%	15.3%	18.6%	21.8%	21.3%	19.6%	28.1%
Cost of transportation	15.5%	7.3%	14.9%	18.2%	14.9%	23.8%	13.4%
Limited opportunities for safe bicycle riding	8.5%	1.5%	8.5%	3.6%	6.4%	7.7%	4.9%
Clear and understandable transportation signs and directions	4.0%	6.6%	3.7%	3.6%	2.1%	4.4%	9.8%
None of the above	55.8%	66.4%	56.6%	49.1%	61.7%	50.3%	42.7%

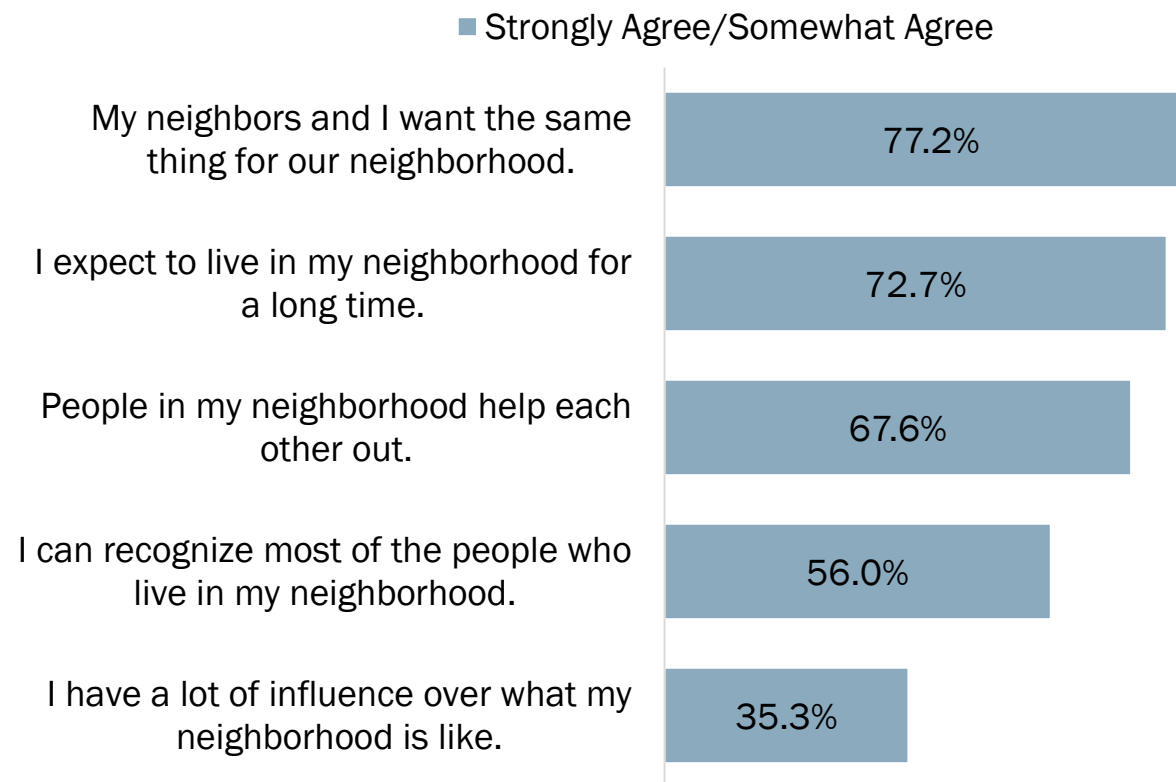
DATA SOURCE: Boston CHNA Community Survey, 2019; NOTES: Percentage calculations do not include respondents who selected “prefer not to answer/don’t know;” Respondents were allowed to select multiple response options; therefore, percentages may not sum to 100%

Social Environment



- Majority of survey respondents believed people in their neighborhoods help each other & that their neighbors want the same thing for their neighborhoods.
 - However, some focus group participants mentioned a decline in community social ties.
- Gentrification has changed the “feel” of some neighborhoods, according to focus group participants.

Boston CHNA Survey Respondents’ Reported Perceptions of Community Cohesion in Their Neighborhood, 2019



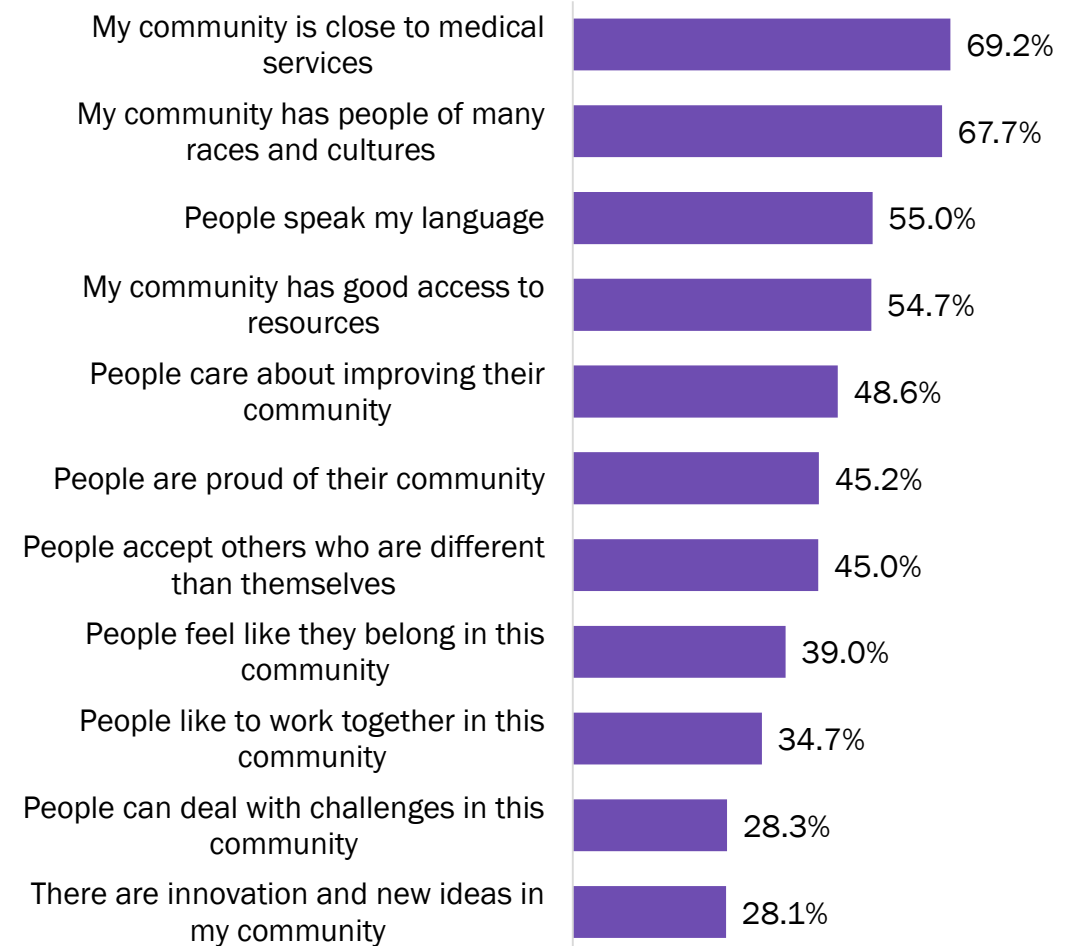
DATA SOURCE: Boston CHNA Community Survey, 2019



Identified Community Assets

- Healthcare and organizational resources identified as important community assets.
- Neighborhoods described as “tight-knit” with substantial cultural diversity and strong faith communities.
- Activism and resiliency notable characteristics of Bostonians.

Percent Boston CHNA Survey Respondents Reporting Strengths of Their Community or Neighborhood (N=2,078), 2019



DATA SOURCE: Boston CHNA Community Survey, 2019

“There’s so much that the city of Boston has to offer; it has some of the best colleges and universities, best teaching hospitals and traveling [healthcare].”
–Focus group participant

Community Health Issues

*What is the health of Boston
residents?*

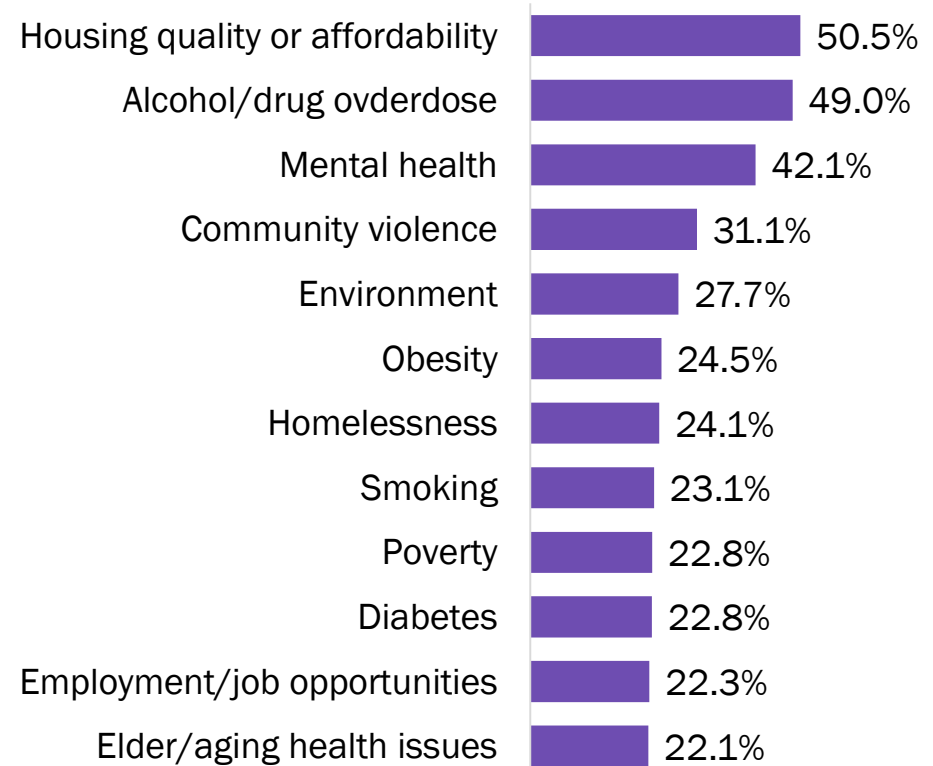




Community Perceptions of Health

- Survey respondents identified top 5 community health concerns as:
 - Housing quality or affordability
 - Alcohol and drug abuse/overdose
 - Mental health
 - Community violence
 - Environmental issues (e.g., air quality, climate change)
- Top concerns mainly similar by subgroup, some differences within the top 5 include:
 - Youth <18 years old: smoking & employment
 - Adults 65+ years old: elder/aging issues (e.g., falls, dementia)
 - Parents of children <18 years old: obesity

Percent Boston CHNA Survey Respondents Reporting Top Most Important Concerns In Their Community or Neighborhood That Affect Their Community's Health (N=2,053), 2019





Leading Causes of Death

- Cancer and heart disease - leading causes of death in Boston
 - For Black and Latino residents, diabetes was one of the top five leading causes of death.
- Accidents, which include drug overdoses, is third leading cause of death overall for Boston.
 - In 2016, unintentional opioid overdoses accounted for 55.3% of all deaths due to accidents.

Leading Causes of Mortality in Boston, by Race/Ethnicity, Age-Adjusted Rate per 100,000 Residents, 2014-2016 Combined

	Asian	Black	Latino	White
1	Cancer 127.0	Cancer 175.3	Cancer 109.4	Cancer 173.1
2	Heart Disease 64.6	Heart Disease 133.9	Heart Disease 87.8	Heart Disease 149.3
3	Cerebrovascular Diseases 21.5	Accidents 38.3	Accidents 41.6	Accidents 56.5
4	Alzheimer's Disease 18.1	Cerebrovascular Diseases 39.9	Diabetes 25.1	Chronic Lower Respiratory Diseases 32.7
5	Hypertension/ Renal Disease 16.1	Diabetes 38.6	Cerebrovascular Diseases 20.2	Cerebrovascular Diseases 26.6

DATA SOURCE: Massachusetts Department of Public Health, Massachusetts Death Files, 2014-2016 Combined
DATA ANALYSIS: Boston Public Health Commission, Research and Evaluation Office

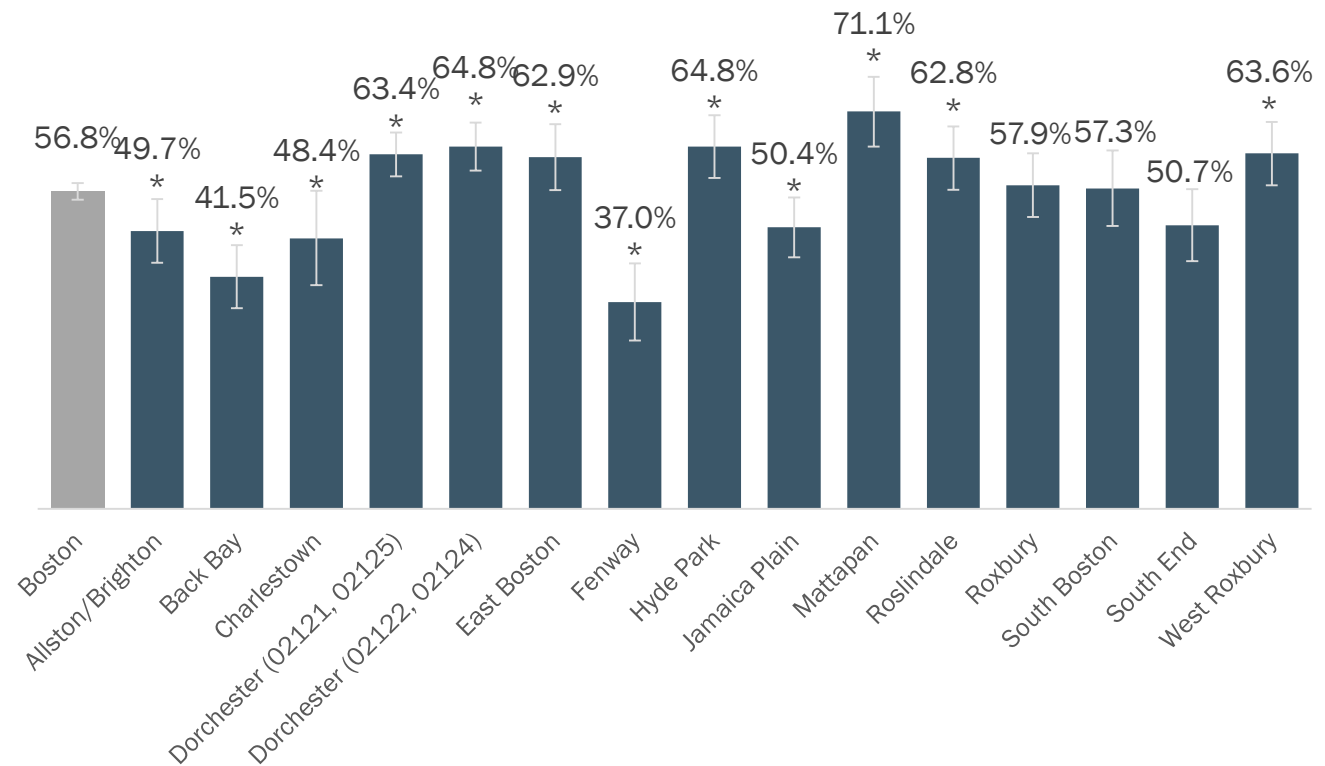


Obesity, Nutrition, and Physical Activity

- Nearly 6 in 10 Boston adults (57%) and more than 3 in 10 Boston Public high school students (33%) are considered overweight or obese.
 - Mattapan, Hyde Park, Dorchester, West Roxbury, East Boston, and Roslindale have highest rates of adult overweight/obesity
- Limited access to healthy eating options and affordable opportunities for physical activity was a common theme in discussions with residents.

“When your kid is hungry, it’s much cheaper to buy a soda and a bag of chips than buy some fruit.” –Key informant interviewee

Percent Adults Reporting Obesity or Overweight, by Boston and Neighborhood, 2013, 2015, and 2017 Combined



DATA SOURCE: Boston Public Health Commission, Boston Behavioral Risk Factor Surveillance System, 2013, 2015, and 2017 combined

DATA ANALYSIS: Boston Public Health Commission, Research and Evaluation Office

NOTE: Asterisk (*) denotes where neighborhood estimate was significantly different compared to the rest of Boston ($p < 0.05$); Error bars show 95% confidence interval

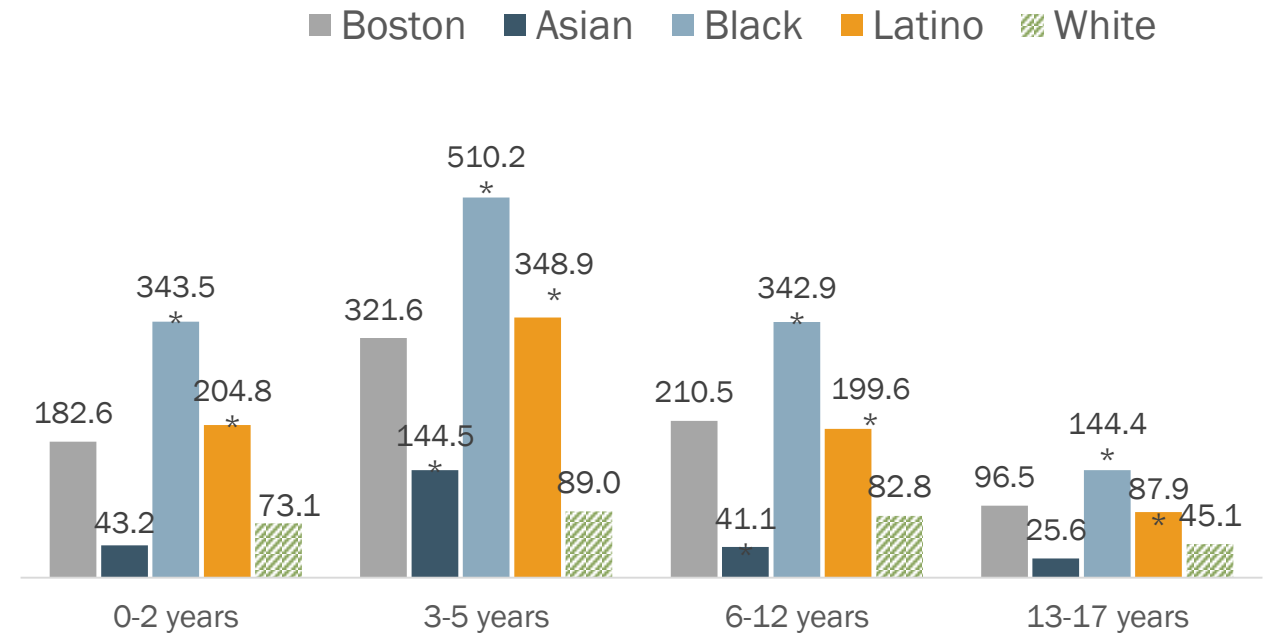


Chronic Disease

- Cancer & heart disease are leading causes of death, though were not frequently mentioned in focus groups or interviews.
- Diabetes identified in discussions as a community concern that impacts both adults and children
- Asthma among children also discussed as a concern, especially among communities of color.
 - ED visits for asthma significantly greater among Black and Latino children.

“Asthma rates are high. This is related to the prevalence of tobacco use, as well as living conditions; so many housing developments have pests like rats and cockroaches.” –Key informant interviewee

Asthma Emergency Department Visit Rate, by Boston and Race/Ethnicity by Age, Age-Specific Rate per 10,000 Residents, 2016-2017 Combined



DATA SOURCE: Massachusetts Center for Health Information and Analysis, Acute Hospital Case Mix Databases, 2016-2017 Combined

DATA ANALYSIS: Boston Public Health Commission, Research and Evaluation Office

NOTES: Sample sizes for Asian in the 0-2 years, 6-12 years, and 13-17 years are ≤ 20 and rates should be interpreted with caution; Bars with pattern indicate reference group within each age category; Asterisk (*) denotes where estimate was significantly different compared to reference group within each specific age category ($p < 0.05$)

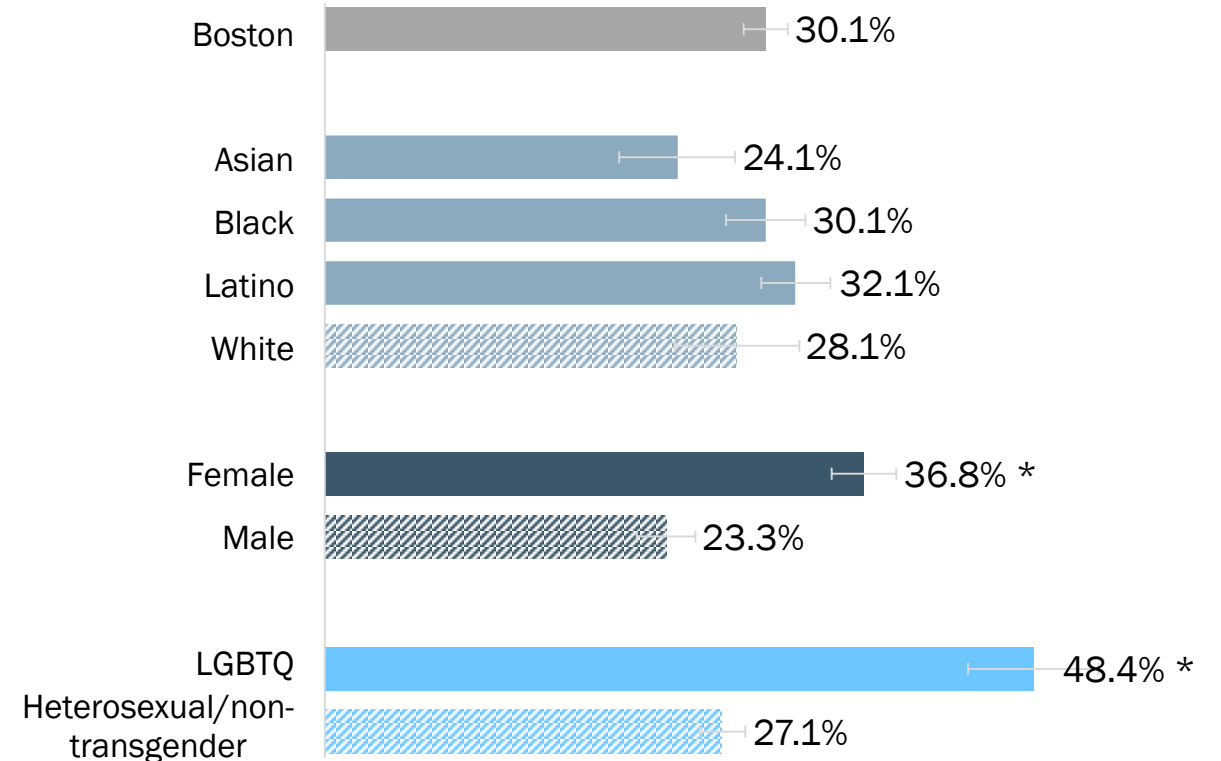


Mental Health

- Stress, anxiety, and depression were the most frequently cited challenges.
- Nearly one-third of Boston public high school students reported feeling persistent sadness and this has grown substantially over the past few years.
 - Higher among female students and students who identify as LGBTQ
- Barriers to services include stigma, available providers, and provider language/cultural competency

“Many residents are impacted by untreated mental health... communities and families that have multigenerational issues around poverty, lack of education, histories of trauma and violence...” –Key informant interviewee

Percent Boston Public High School Students Reporting Persistent Sadness, by Boston and Selected Indicators, 2013, 2015, and 2017 Combined



DATA SOURCE: Centers for Disease Control and Prevention and Boston Public Schools, Youth Risk Behavior Survey, 2013, 2015, and 2017 combined
DATA ANALYSIS: Boston Public Health Commission, Research and Evaluation Office
NOTE: Students were asked in the past 12 months if they felt sad or hopeless every day for 2 weeks or more; Bars with pattern indicate reference group for its specific category; Asterisk (*) denotes where estimate was significantly different compared to reference group within specific category ($p < 0.05$); Error bars show 95% confidence interval

Substance Use

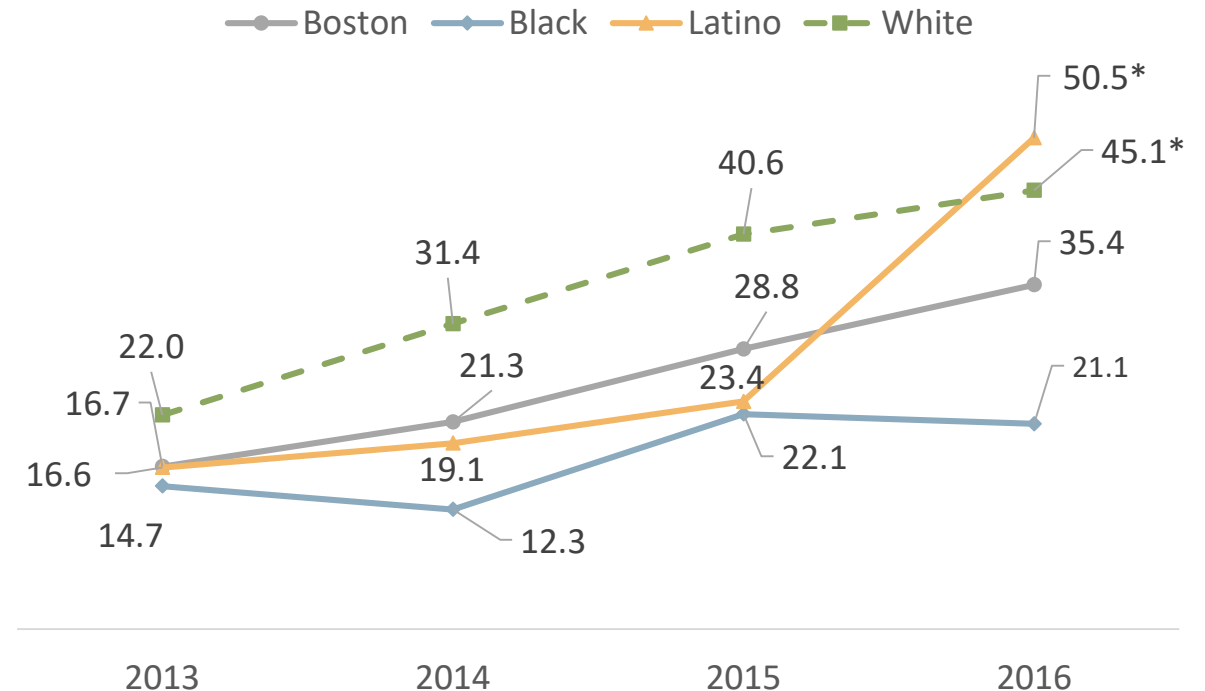


- Marijuana and opioids were considered concerns in many focus group and interview discussions.
 - Opioid overdose death rate increasing in Boston; highest among Latinos and Whites.

- Smoking and e-cigarette use among adults and youth have significantly decreased, but higher among LGBTQ youth and adults.

- Barriers to treatment cited were cost, availability, and cultural/language competency of services

Unintentional Opioid Overdose Mortality Rate, by Boston and Race/Ethnicity, Age-Adjusted Rate per 100,000 Residents 12 Years and Over, 2013-2016



DATA SOURCE: Massachusetts Department of Public Health, Boston resident deaths, 2013-2016
 DATA ANALYSIS: Boston Public Health Commission, Research and Evaluation Office
 NOTES: Sample size for Black and Latino for 2013 and 2014 are ≤ 20 and rates should be interpreted with caution; Data not shown for Asian due to insufficient sample size; Dashed line indicates reference group for statistical testing done for 2016 data; Asterisk (*) denotes where estimate was significantly different compared to reference group for 2016 data ($p < 0.05$)

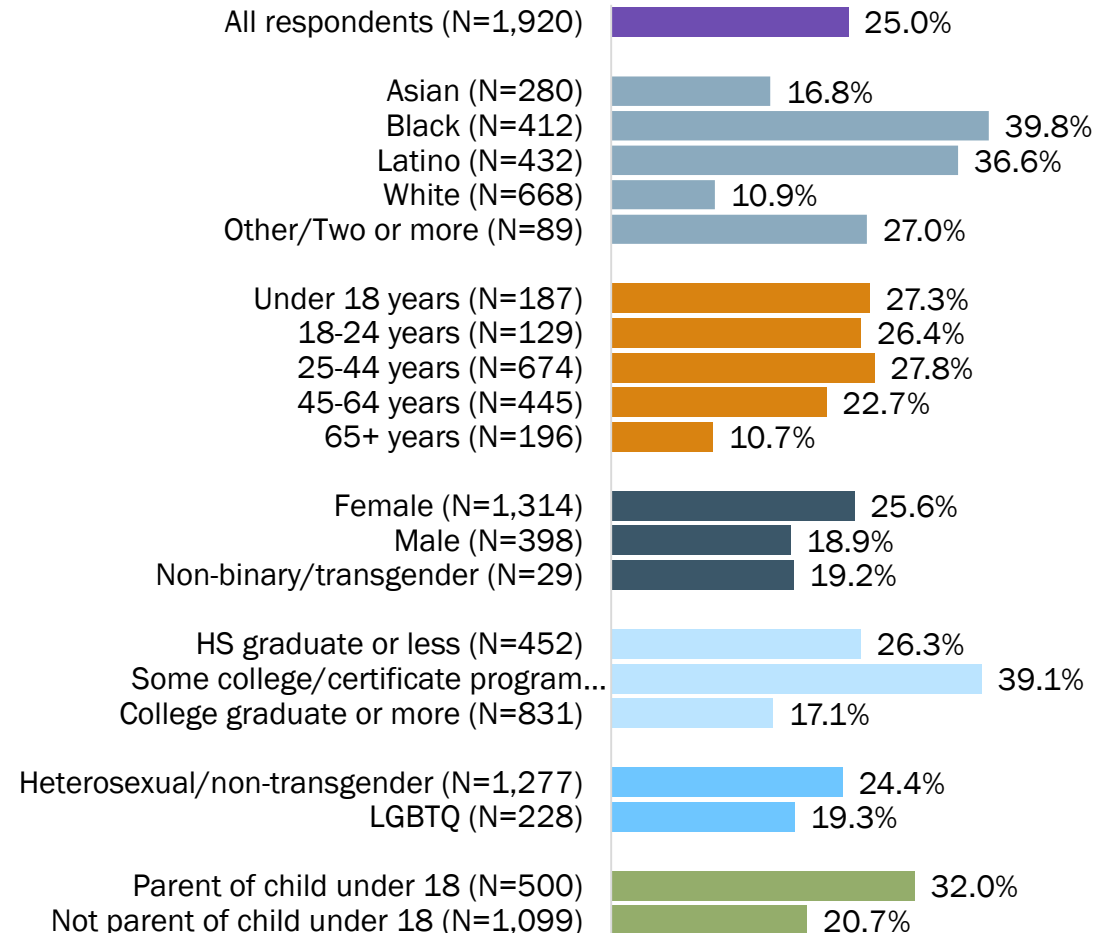
Violence & Trauma



- 1 in 4 CHNA survey respondents described their neighborhoods as unsafe or extremely unsafe
 - Responses varied by race/ethnicity, age, gender identity, educational attainment, and parent status
- Interview & focus group participants discussed trauma and more recently, fear of deportation and family separation, as growing issues of concern.

“Trauma is generational; parents and their parents before them are living in unstable housing, are being evicted...” –Key informant interviewee

Percent Boston CHNA Survey Respondents Reporting Considering Their Neighborhood Unsafe or Extremely Unsafe, by All Respondents and Selected Indicators, 2019 (n=1,920)

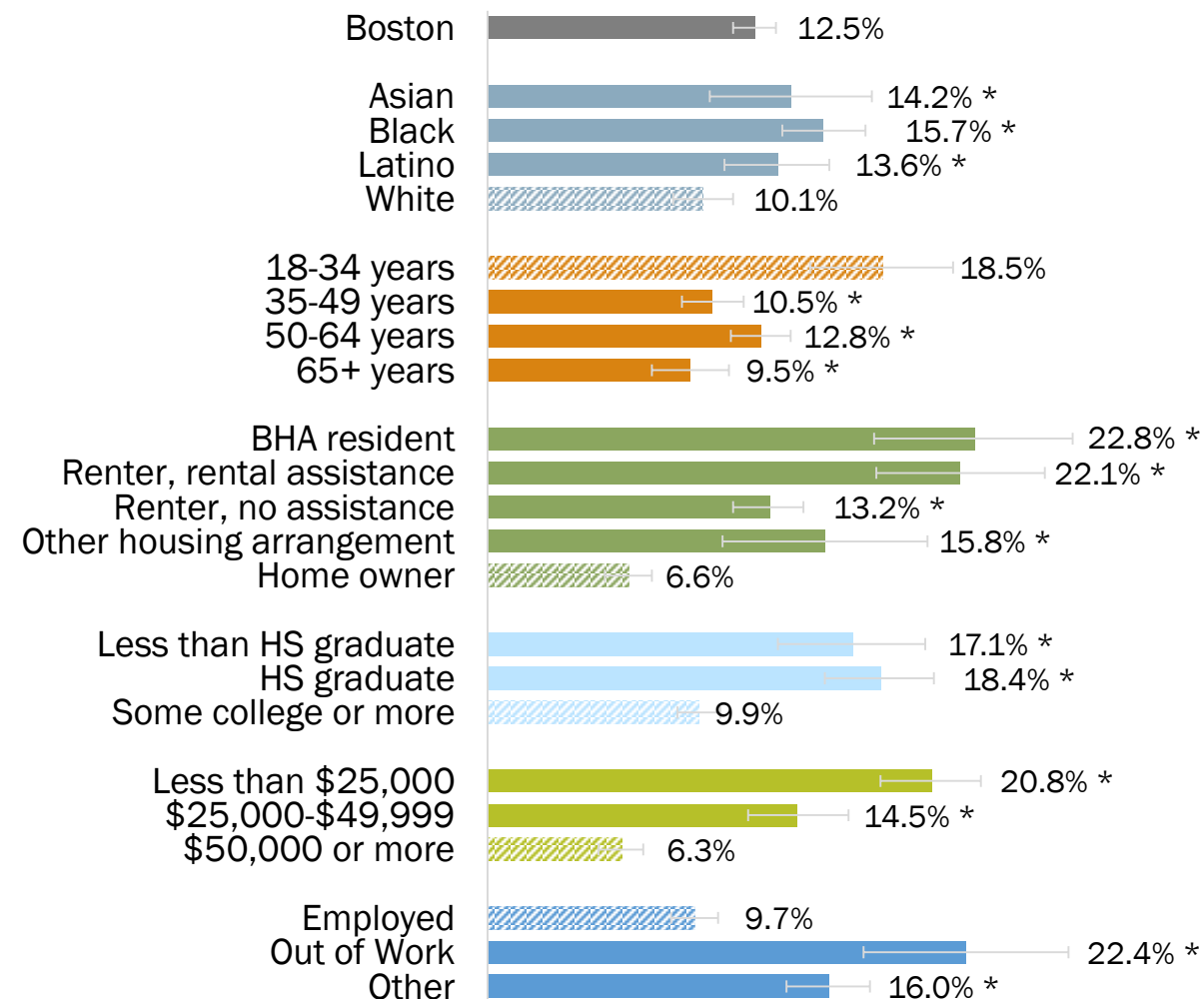


Environmental Health



- Top environmental concerns according to CHNA survey: outdoor noise pollution from vehicles outdoor air pollution, and dangerous traffic
 - In East Boston, airport noise emerged as a top concern
 - Climate change concerns such as heat related illness and warming oceans were reported
- BRFSS data show secondhand smoke exposure was significantly higher among residents of color and lower socioeconomic status.

Secondhand Smoke Exposure Amongst Boston Adults by Selected Indicators, 2013, 2015, 2017 Combined



DATA SOURCE: Boston Behavioral Risk Factor Surveillance System (2013, 2015, 2017), Boston Public Health Commission

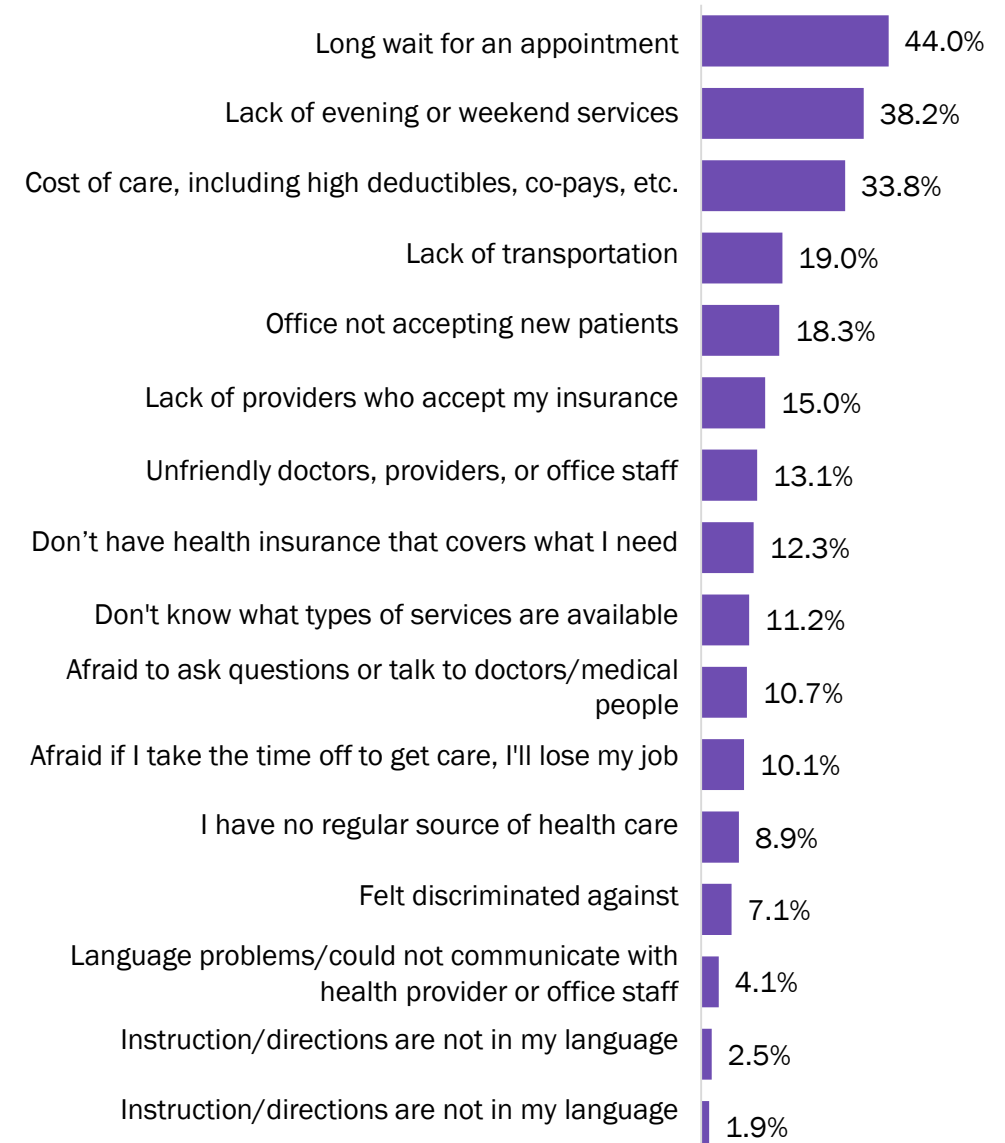
DATA ANALYSIS: Research and Evaluation Office, Boston Public Health Commission

Health Care Access & Utilization

Among CHNA survey respondents:

- What made it easier to get health care
 - Having regular source of care (63%)
 - Having insurance cover what they needed (50%)
 - Providers taking their insurance (48%)
 - Having positive interactions with providers & office staff (40%)
- What made it harder to get health care
 - Long wait for appointment (44%)
 - Lack of evening or weekend services (39%)
 - Cost (34%)
 - Lack of transportation (19%)
- Being under-insured; language and immigration status; navigation and care coordination challenges; transportation; and lack of culturally-sensitive approaches to care described as barriers in focus groups & interviews

Percent Boston CHNA Survey Respondents Reporting Factors That Made It Harder for Them to Get Health Care Services They Needed in Past Two Years (N=1,014), 2019



DATA SOURCE: Boston CHNA Community Survey, 2019



Identified Community Health Needs

Employment & income/financial insecurity

Education (e.g., quality, access, opportunities)

Food insecurity/hunger

Housing affordability & quality

Homelessness

Transportation & the built environment (e.g., sidewalks, green space, bike trails, etc.)

Obesity, healthy eating, physical activity

Asthma

Diabetes

Heart disease

Cancer

Mental health

Smoking and vaping/e-cigarettes

Substance use (e.g, opioids, alcohol, marijuana, etc.)

Community violence

Interpersonal violence (e.g., domestic violence, bullying, etc.)

Climate change and environmental concerns

Access to healthcare, childcare, and other services



Q & A

Next Steps

**Refining and Selecting Priorities
for Action**

Developing a Plan

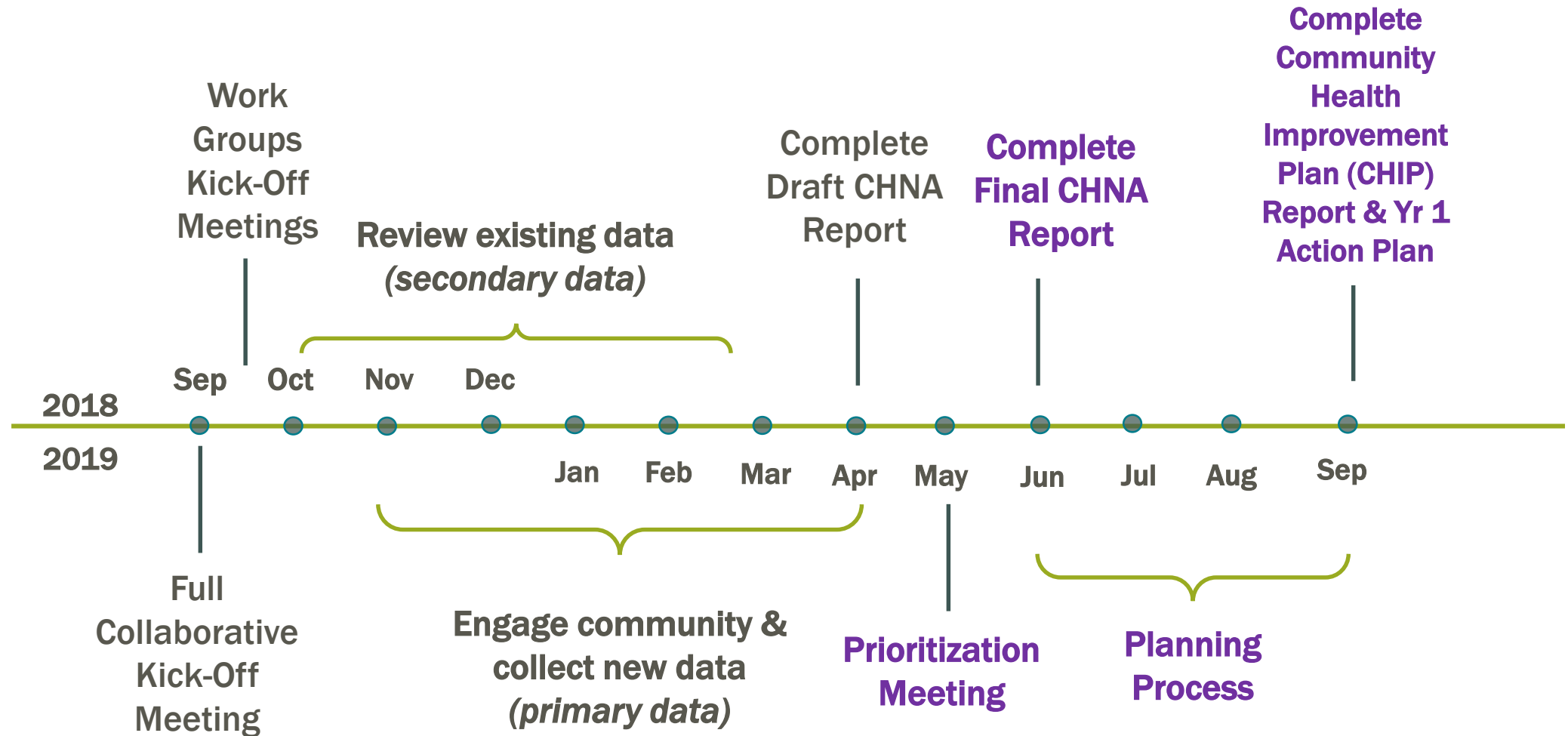




Community Health Implementation Plan (CHIP)



CHNA/CHIP 2019 Next Steps





Identified Community Health Needs

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Community violence

Interpersonal violence (e.g., domestic violence, bullying, etc.)

Climate change and environmental concerns

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Prioritization Selection Criteria

- **Burden:** How much does this issue affect health in Boston?
- **Equity:** Will addressing this issue substantially benefit those most in need?
- **Impact:** Can working on this issue achieve both short-term and long-term change?
- **Feasibility:** Is it possible to address this issue given infrastructure, capacity, and political will?
- **Collaboration:** Are there existing groups across sectors willing to work together on this issue?



Input to Inform Priority Selection

1. Let's talk about what you heard. Was there anything new or surprising to you?
2. In the next few weeks, planning efforts will begin to identify which issues should be the focus of collaborative action. Thinking about the criteria presented today, what do you see as the top 2-4 issues that should be the focus of these efforts?
3. What do you see as the most important – or innovative – actions that should be taken in each of these top 2- 4 issues?



CHNA-CHIP Next Steps

June -September 2019

- Finalize and share the needs assessment (CHNA)
- Convene & facilitate prioritization and improvement planning (CHIP) sessions
- Review and finalize planning report
- Develop year 1 action plan



Thank you!

For questions or more information, visit <http://www.bostonchna.org/> or contact: info@BostonCHNA.org