Health of Boston Meetings
Each year, the Boston Public Health Commission (BPHC) holds meetings with the community to share health data from our Health of Boston report and to listen to residents’ concerns about their health. The goals of these meetings are to increase awareness of the impact of social and economic factors, particularly racism, on health; to help achieve both BPHC and community health outcome targets; and to build effective partnerships to improve health.

In December, BPHC held the fifth of our 2012 community meetings in conjunction with the Codman Square Health Council, the Codman Square Neighborhood Council (CSNC), BOLD Teens, the Boston Alliance for Community Health (BACH) and most recently the Millennium Ten Initiative and The health topics discussed were chosen by the partner organizations to address important issues in Codman Square and to further advance the Mobilizing for Action through Planning and Partnerships (MAPP) health planning process. (See Figure 1 on the right)

MAPP is a community-driven strategic planning process for improving community health. Led by public health and community leaders, working together with a diverse group of residents and other partners, this framework helps communities to prioritize health issues and identify resources to address them. The CSNC is one of ten neighborhood coalitions working with BACH on the MAPP process.

Introduction
The Codman Square “Planning for a Healthier Dorchester” meeting was held on December 5, 2012, at the Great Hall in Codman Square. Approximately 85 people attended the meeting, including residents and representatives from over 20 organizations and agencies. State Representative Russell Holmes also attended the meeting, as well as representatives from the offices of State Representative Marty Walsh and the offices of At-Large City Councilors Felix Arroyo and Ayanna Pressley, and City Councilor Charles Yancey.
CSNC’s Co-Presidents, Marie Theodat and Candice Gartley, and Reverend Bill Loesch welcomed the crowd and thanked them for coming to celebrate the positive impact they were making in Codman Square. The meeting highlighted local efforts that reflect the vision for the community to focus on– peace, substance abuse, and greater wellness–created and reinforced in previous meetings.

**Assets**

As part of the MAPP process, BACH helps participating communities create assets maps, which show the many resources located in the neighborhood. Allyson Scherb Auerbach of BACH presented the new asset mapping project and displayed the progress made so far. Scherb Auerbach identified the important role community members play in adding their knowledge of local assets to this map so that it best identifies what Codman Square offers to its residents, workers, and visitors. Scherb Auerbach encouraged the audience to identify any asset that was missing. Participants suggested that churches, libraries, Healthworks, and other local businesses be added to the map. Scherb Auerbach noted that the asset map will be an ongoing process, and that the CSNC will make additions and edits to the map with regular input from the community.

**Social Determinants of Health**

Anne McHugh, director of the Chronic Disease Prevention and Control Division at BPHC, next delved into some demographic data for Codman Square/South Dorchester1. She described the composition of the neighborhood, from ethnicity and race, educational attainment, type of household (i.e., married couple, no spouse, non-family households) and families with incomes below the federal poverty level to housing tenure (58% renter occupied versus 42% owner occupied housing). These indicators, or “social determinants of health,” provide context necessary to explain the health of Codman Square/South Dorchester.

McHugh then made the distinction between the terms “health disparities” and “health inequities.” Health disparities are the differences in the presence of

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1 Data is not available at the sub-neighborhood level; therefore data presented is for South Dorchester.
disease, health outcomes, or access to healthcare between populations. Health inequities are the differences in health indicators that are not only unnecessary and avoidable, but are also considered unfair and unjust. McHugh noted that racism is the root cause of health inequities, creating critical differences in health outcomes between groups of people. She noted that racism impacts every aspect of our lives in various ways. (See the Health Equity Framework in Appendix 2).

McHugh also introduced the Health Impact Pyramid, (see Appendix 3) which emphasizes the need to focus on the systems level, where social determinants of health reside, and where the greatest, longest-lasting positive change occurs. Recent efforts focused on policy, systems and environmental change to create environments that support healthier eating and more physical activity have focused on sugary drinks, access to garden space and access to affordable opportunities for physical activity. Together, these explanations established a solid foundation for better understanding the health outcomes data that followed.

**How Healthy is Codman Square/South Dorchester?**

McHugh then presented health data from the latest Health of Boston report (2011), showing how South Dorchester compares with Boston overall. In 2010, South Dorchester had a higher percentage of White adults who were obese (24%) compared to White adults in Boston overall (16%). Still, the percentage of Black adults who were obese in both South Dorchester (32%) and Boston overall (32%) was significantly higher than that of White and Latino adults. These outcomes are one example of health inequities talked about earlier.

Some data was only provided for Boston overall. For example, a higher percentage of Black adults in Boston reported having diabetes than White adults. Additionally, diabetes was found to be largely connected to individuals with lower educational levels and lower household income. For example, a much higher percentage of Boston residents with less than a high school education reported having diabetes (15%) compared to adults with a high school diploma (8%) or some college (5%). On a positive note, heart disease and cancer

Participants pay close attention to the health data presentation
mortality rates have both declined for Boston residents among each racial and ethnic group.

**Community Activity Updates**

**BPHC Youth Advisory Council**
The Youth Advisory Council (YAC) advocates for policies that improve the health of Boston’s young people. Members Danasia Greene and Kashuana Vilnaigre-Boyd, who are BOLD Teen representatives on the YAC, briefly summarized the issues on which the YAC is currently focusing. The selling and use of drugs and alcohol is one focus. The YAC has also identified youth joblessness as a concern, stating that opportunities should be available all year round and not just during the summer. Lastly, obesity is a serious problem that the YAC is addressing. Greene and Vilnaigre-Boyd elaborated that healthy food, like fresh fruits and vegetables, is more expensive, while fast food and junk food are really inexpensive. This situation makes the healthy choice more difficult to make.

**Boston Police Yearly Overview**
Officer Jose Ruiz announced that Area B-3 will be hosting boys’ and girls’ softball lessons on Sundays at 8am. Officer Mike Keaney shared crime updates for Area C-11, noting that serious crimes in Codman Square were down 8 percent from 2011. Robberies were also down 6 percent from 2011. However, larceny from motor vehicles was up 19 percent. Keaney credited the Safe Street Teams Program\(^2\) with making a huge difference in the quality of life and lowering crime rates in Codman Square.

**Codman Square Health Center**
Dr. Stephen Tringale of the

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\(^2\) Created in 2007, the Safe Street Team Program is a Boston Police Department initiative to reduce crime through “foster[ing] police and the community engagement on a more personal level. Officers strengthen ties within the community, address quality of life issues and deter crime. They focus on creating a clean, safe and orderly environment, increasing positive interaction with the residents, specifically local youth; and they listen to the concerns of community members while assisting with tangible solutions.” The CSNC advocated for a Safe Street Team in Codman Square to increase communication and effectiveness between both C-11 and B-3 in 2007. (http://www.cityofboston.gov/police/about/initiatives.asp)
Codman Square Health Center informed the audience that hypertension, asthma, obesity and diabetes are the most common health conditions seen at the Codman Square Health Center. Dr. Tringale discussed the trend in healthcare delivery toward Patient Centered Medical Homes, which puts patients at the center of care and surrounds them with a team of providers. This is something that the Codman Square Health Center has been focusing on for years and the result is improved care through a team approach. Dr. Tringale also shared that there have been considerable renovations to the facility, adding 26 more exam rooms and an additional 2 group rooms.

Next, Dr. Tringale elaborated that group medical visits are focused on pregnant women so that once they have their baby, women can continue to have group visits with their babies and other mothers. The focus of this care is to offer social supports and increase social capital among Codman Square residents and patients. A similar program is the Healthy Weight Initiative (also done through a doctor's visit), which focuses on reducing childhood obesity through healthy eating with children and families. The Healthy Weight Initiative is based on the understanding that the health of the individual child and his or her family are inherently connected. The health center also partners with the Codman Square Farmer’s Market to offer prescriptions for fresh fruits and vegetables which patients can redeem at the farmer’s market.

Lastly, Dr. Tringale described another program offering social support, particularly for residents 50 years of age and older – the Dynamic Neighbors in Action. This is a monthly program with groups of 8 to 10 individuals, who cook a meal together and then eat together to discuss healthy habits.

**Healthy on the Block**

Daryl Golston, a CSNC member, and Trevor Mendez, a BOLD Teen, provided a brief description of the Healthy on the Block program, explaining that it is a campaign to help and support corner stores to supply and promote healthy food choices. Javier Gutierrez of BPHC described the standards for “healthy food and beverages,” which coincide with the Boston Public School standards. They went on to explain that the goal of Healthy on the Block is to break down the perception of what a corner store is and to allow easier access to healthy food. Part of this work was determining how corner stores were displaying and promoting their food and beverage items. They collected data and found that unhealthy snacks and candy were prominently displayed in a majority of the stores.

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3 Created in 2007, the Safe Street Team Program is a Boston Police Department initiative to reduce crime through “foster[ing] police and the community engagement on a more personal level...They strengthen ties within the community, address quality of life issues and deter crime...focus on creating a clean, safe and orderly environment, increase positive interaction with the residents – specifically local youth, and they listen to the concerns of community members while assisting with tangible solutions.” The CSNC advocated for a Safe Streets Team in Codman Square to increase communication and effectiveness between both C-11 and B-3 in 2007.
BOLD Teens provided tremendous help with this effort. De'Lea O'Garro, a BOLD Teen, noted that most candy was displayed at the front of the stores. As a result, they asked store owners to put fruits and veggies out front. They also encouraged support for the Healthy on the Block Campaign by giving participating corner stores stickers and posters for their help contribution to encouraging healthy lifestyles in Codman Square. Golston emphasized the importance of letting stores know that the community notices their efforts and that they care about our health!

**Codman Square Farmer’s Market**

Annika Nielsen, the market manager in 2012, shared the successes of the Codman Square Farmer’s Market (CSFM) now in its 5th year. She explained that the focus of the CSFM is to make fresh fruits and vegetables both accessible and affordable to the residents of the community. The Bounty Bucks Program contributed to the market’s success in achieving its goal, as it allowed EBT card users to double the amount of food they can purchase using their card.

Nielson also acknowledged the collaboration with the CSHC which provides prescriptions for fresh fruits and vegetables to their patients to be redeemed at the CSFM. Nielson highlighted how a robust community effort led to the great successes at this year’s farmer’s market. She specifically acknowledged vendors like Silverbrook Farms, Codman Crafters, Iggy’s Bread, Looking Good plants, and many others. She recognized the support from BOLD Teens, UMass Extension School,4 Second Church, and Mt. Washington Bank for contributing to the success of the Codman Square Farmers’ Market. Nielson concluded by saying, “We really accomplished our goal of bringing healthy food into the neighborhood and we are looking forward to next year.”

**Millennium Ten**

Jenna Tourje of Millennium Ten shared that the Millennium Ten initiative brings together residents, organizations, leaders, and other stakeholders of the Codman Square and Four Corners neighborhoods to support resident action and leadership. Tourje announced that over 300 people came out to participate in the planning process at an event this summer. Next steps are to write and design the official plan and present it to

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4 The UMass Extension School conducted a survey and evaluation of the Codman Square Farmer’s Market. Those results will be posted soon.
the community. The goal is to implement the plan in 2013. Throughout the planning process so far, many people have shared that they want a healthy community as well as a connective community. Residents also noted that they want to see a more supportive community with more local small businesses.

**Fairmount T Commuter Line**

Rev. Loesch announced that the Fairmount MBTA line just opened on November 18. There will be 8 stations along the line over the next 2-3 years. Rev. Loesch noted an example of community voices being heard is how the BOLD Teens successfully advocated for bike racks on the Fairmount Line and recycle bins at the Talbot stop.

**Awards**

The evening ended with several awards being given to Codman Square residents.

Anita Christon received the Historic First Rider Award for being the first rider from the Talbot stop on the Fairmount Line. Christon expressed her appreciation for how the stop has already dramatically improved her daily commute to work.

Andrea Freeman and Maddie Ribble of the Massachusetts Public Health Association (MPHA)\(^5\) honored the BOLD Teens with its state-wide 2012 Public Service Award for their efforts to promote healthy eating and active living in Dorchester.

**Closing**

“Planning for a Healthier Dorchester” gave the community an opportunity to hear about all the positive activities happening in Codman Square and to take moment to celebrate those successes. Meetings like this help to encourage residents to stay active and involved, knowing they can make a difference.

\(^5\) MPHA is an independent non-profit organization, focused on advocacy, coalition building to improve public health state-wide and promote healthcare as a basic human right.
For copies of this report and the presentation from the meeting go to [http://www.bphc.org/about/policyandplanning/Pages/Home.aspx](http://www.bphc.org/about/policyandplanning/Pages/Home.aspx) or contact Aliza Wasserman at BPHC, awasserman@bphc.org or 617-534-7781. For more information or to get involved in any of the efforts described above, contact Bill Loesch at the Codman Square Neighborhood Council at bill.loesch1@gmail.com or 617-650-2049.

**Appendix 1**

**Evaluations**

- The presentation was clear and easy to follow
- I received new information at this session
- The meeting motivated me to get more involved in improving the health of Codman Square
- The health report helped me to understand the effect of racism on health
What will you remember most from this meeting?

- BOLD Teens award
- First Rider Award and Healthy on the Block
- The obesity rate
- How we lack in healthy food options (we are in Boston)
- White youth smoke at a much higher rate than youth of other races/ethnicities
- Statistics highlighting disparities not consistent with CDC Health Impact Pyramid. Most effort focused on counseling and education - very little on socio-econ. factors
- Making healthy food available in more places and cheaper
- Learned a lot of information
- It was pretty depressing that cancer is leading cause of death.
- Need of improvement in healthcare for low-income
- First Rider Award and Healthy on the Block
- All the positive contributions people make to their neighborhood

How could this meeting be improved?

- Weighted average of N. and S. Dorchester health data
- New information - more microscopic focus on Codman Square would be helpful!
- Even more teens speaking
- More advance notice (Date/Place/Time)
- More concise data presentation
- Keep the audience active
Appendix 2

Health Equity Framework

Racism

- Social Capital
- Education
- Transportation
- Employment
- Food Access
- Socioeconomic Status
- Environmental Exposure
- Health Behaviors
- Access to Health Services
- Housing
- Public Safety

Health Outcomes
Appendix 3

CDC “Health Impact Pyramid”
*Factors that Affect Health*

- **Smallest Impact**
  - Counseling & Education
  - Clinical Interventions
  - Long-lasting Protective Interventions
  - Changing the Context to make individuals’ default decisions healthy
  - Socioeconomic Factors

- **Largest Impact**

**Examples**
- Eat healthy, be physically active
- Rx for high blood pressure, high cholesterol, diabetes
- Immunizations, brief intervention, cessation
- Fluoridation, trans fat, smoke-free laws, tobacco tax
- Poverty, education, housing, inequality

(CDC)