

Fighting heart health inequities

Local organizations work to support underserved communities with equitable health resources



It's Saturday morning at Cambridge Health Alliance clinic in Revere. The back parking lot is bustling with people chatting and exploring the fresh produce and non-perishable items that will serve as a vital foundation for their families' meals during the next month.

Cambridge Health Alliance (CHA) Revere has partnered with The Greater Boston Food Bank (GBFB) since March 2018 with a shared goal to increase community access to fresh foods. The mobile market, supported by these organizations as well as other community partners, is free and open to all. It's held on the first Saturday of every month, and provides six to eight fresh fruits and vegetables, and since April 2020, two to four non-perishable items such as oats, rice, or canned tuna as well.

One mobile market customer said, "It's really a big blessing to be able to count on vegetables and count on produce for at least some of the meals a month."

Food insecurity and its correlation to heart disease

Heart disease is the [leading cause of death](#) over any other health condition in the United States. Heart disease describes a group of health conditions that affect the heart and blood vessels. [Coronary artery disease](#) (CAD), the most common type of heart disease, occurs when cholesterol builds up in the heart's blood vessels. Untreated, CAD [can cause](#) a heart attack, heart failure, or death.

Over the course of one year, [almost half of heart disease-related deaths](#) were linked to a poor diet. Food insecurity was a huge driver of dietary deficiencies. When it comes to the imbalance of heart disease for minority groups, with communities of color being [disproportionately impacted](#), inaccessibility to nutritious food is a major underlying issue.



"We know health inequities are happening on all levels, systemic and societal down to the individual provider level.

Part of providing good care is to have an understanding of the history of systemic racism in medicine and inequities to be able to really change the full system," says [Dr. Erica Brooks](#), a cardiologist at Cambridge Health Alliance.

Dr. Brooks explains how getting a sense of where her patients are with their health – and taking a full view of their environment, living conditions, and their diet and ability to access healthy foods are significant, and until recently, often overlooked inputs to this view on whole health.

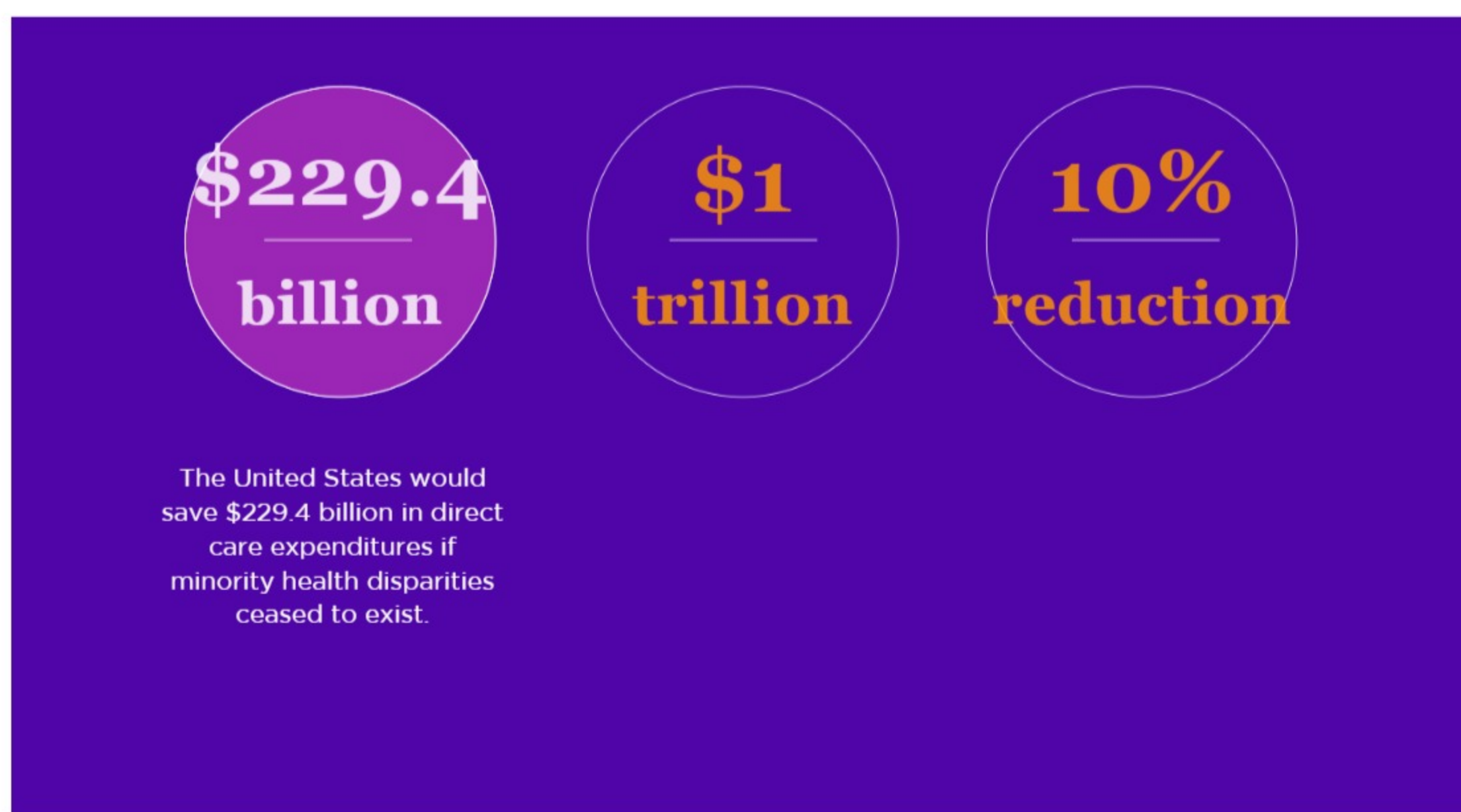
Understanding the impact of social determinants of health

[Social determinants of health](#) are non-medical factors that affect a person's wellbeing. "[These] structural factors – conditions in which people are born, live, work, and age, and the systems shaping daily life conditions – are emerging as key drivers of health," says Izzuddin Aris, PhD, assistant professor in the Department of Population Medicine at the Harvard Pilgrim Health Care Institute and Harvard Medical School.

When it comes to a patient being able to access their heart medications, housing insecurity and lack of access to healthy food can put members of underserved communities in a position where [they need to choose](#) between their medications and groceries for the month. "Whether you can control your blood pressure should not depend on whether you lost your job two months ago," Dr. Brooks adds.

"...Sometimes it's a matter of, 'Do I get my medicine? Do I get food? Do I pay rent?' So it's an extra help that you can get from anywhere is always very useful, and then it's a weight off your mind of, 'Okay, well, I don't have to worry about this, and I can deal with that'" – Mobile Market Visitor

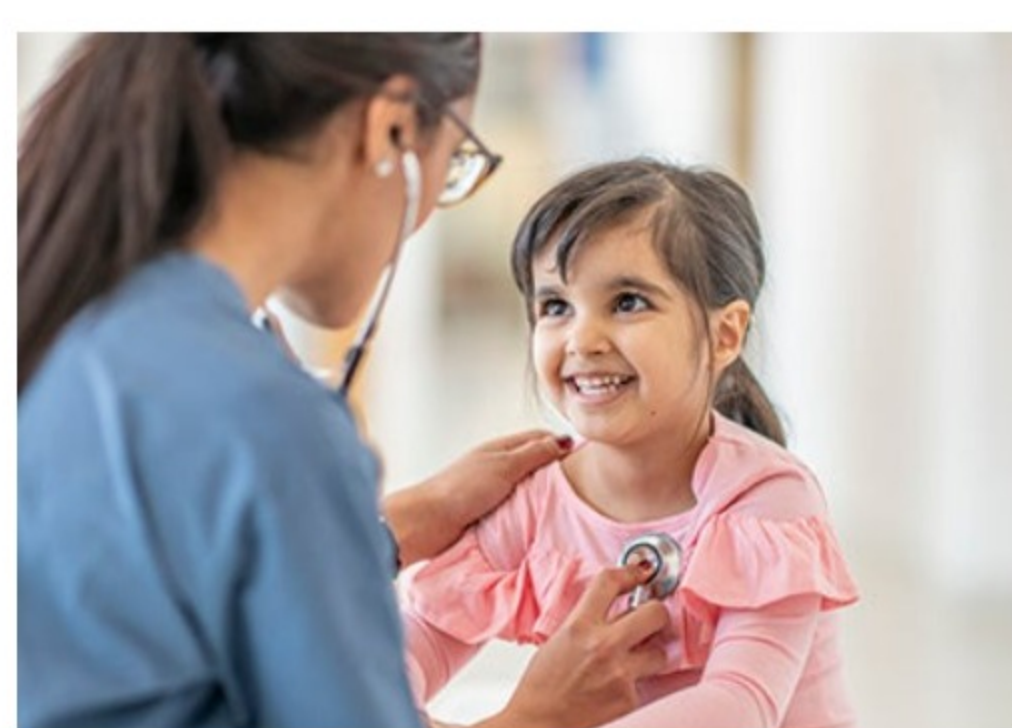
At Cambridge Health Alliance, addressing both the clinical as well as the social needs of the community are integral to improving all health – including heart health – through a lens of justice and health equity.



(Source for statistic 1, Source for statistics 2 and 3)

Establishing the foundation for future heart health in children and mothers

When thinking of heart health, we often think of adults, but some health experts estimate that 70 percent of U.S. children have poor heart health. Aris explains, "It has been hypothesized that all children are born with optimal cardiovascular health. Yet, less than one in ten pregnant women in the U.S. have optimal cardiovascular health, and poor cardiovascular health during pregnancy is linked with poor cardiometabolic health in offspring, suggesting that optimal cardiovascular health may not be universal even at birth."

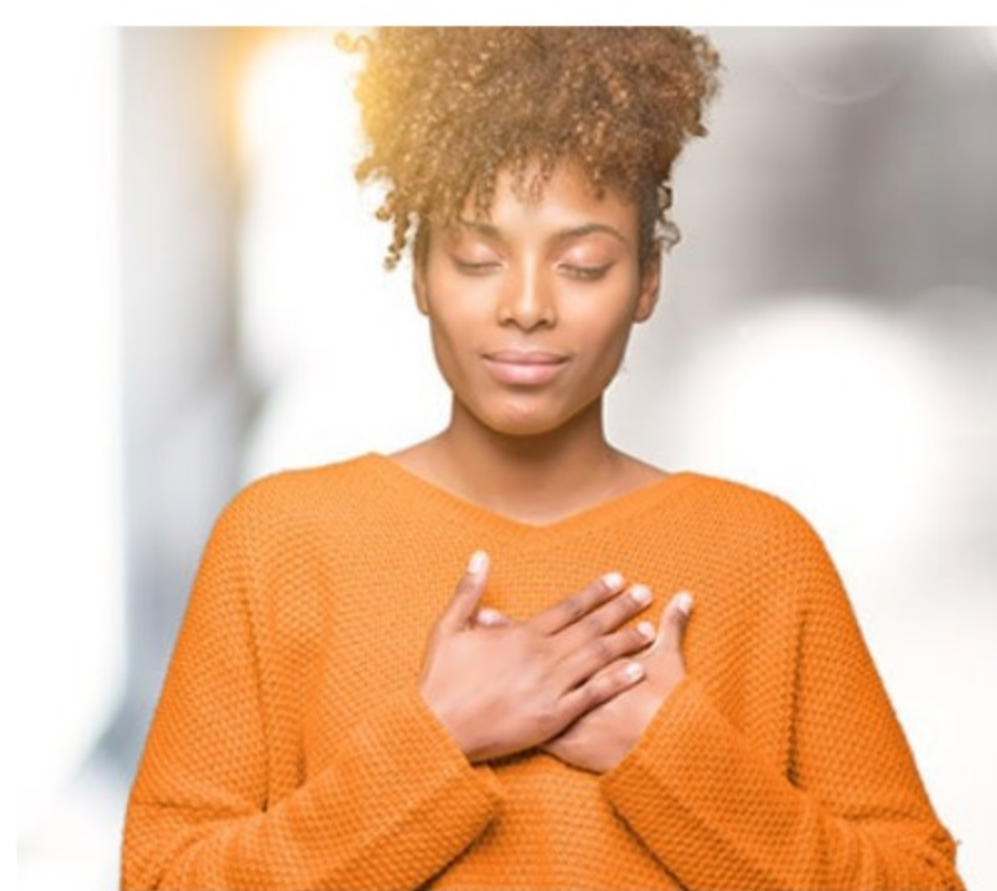


While genetics can play a role in heart health, lifestyle is widely pointed to as a driver of poor heart health in children. "Neighborhoods have emerged as highly relevant contexts because they possess both physical and social attributes, such as walkability or green space, quality of schools, transportation services, and access to healthy food choices," Aris explains.

But, in neighborhoods that lag in these attributes, cardiovascular health could prove to be a higher hurdle for juvenile residents. In [Aris's own study](#) on childhood obesity risk, he discovered how community resources can enhance health outcomes starting at a young age. Neighborhood characteristic measures such as the [Child Opportunity Index](#) could help with the efforts to break down barriers and improve access to community resources so families with young children can receive a higher level of support.

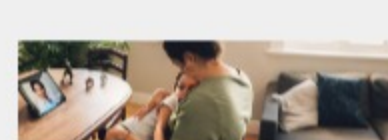
Point32Health companies Harvard Pilgrim Health Care and Tufts Health Plan have also committed to helping members and the communities they serve support equitable opportunities for heart health. Through their focus on mitigating poor nutrition – one of the leading factors of heart disease – the [Point32Health Foundation](#) focuses on addressing food insecurity in neighborhoods and communities across the region as one of their main areas of priority.

Another initiative, the [Good Measures](#) program, offers personalized, mobile text-based nutrition coaching services free-of-cost for Tufts Health Plan Medicaid-eligible members. For those looking to improve their cardiovascular health through physical fitness, the Point32Health [Living Well program](#) offers a variety of virtual fitness classes, free to everyone regardless of if you're a Harvard Pilgrim or Tufts Health Plan member. And for those who currently have a heart disease, Harvard Pilgrim and Tufts Health Plan offer support for its members through a care management program.



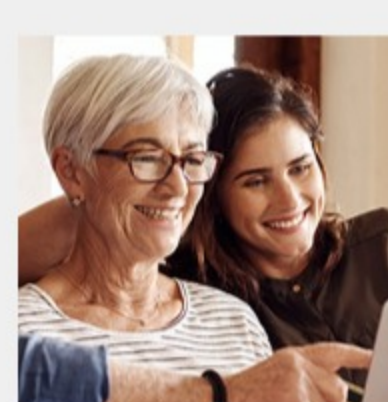
Recognizing that disparities in heart health exist and taking steps to actively address these inequities is crucial to lasting change. Removing barriers will take time, but the more local organizations that come together to find solutions, the healthier all of our communities will be.

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