

Plymouth MVP Workshop: Public Health Poster Transcript

Climate change affects health in numerous ways. Beyond direct impacts such as heat illness, exposure to flood waters, or injury during a storm, climate change affects the social and environmental conditions that contribute to poor long-term health outcomes, such as food insecurity, poor air and water quality, and displacement. When public health and climate change are considered together, strategies to minimize and adapt to climate change also provide tremendous public health benefits while ensuring resilient and healthy communities into the future.

By evaluating climate risks through the social determinants of health, Plymouth can prioritize actions so that all residents, workers, and business owners have the opportunities for good health, minimized risk, and greater adaptive capacity in the face of our changing climate.

For example, poverty can limit access to healthy foods, safe neighborhoods, unstable housing or substandard education. By applying what we know about SDOH, we can not only improve individual and population health and greater adaptive capacity to climate change to “create social and physical environments that promote good health for all.”

Social determinants of health are defined by the conditions in the places where people live, learn, work, and play and how these conditions affect a wide range of health risks and outcomes. These include the Built and Neighborhood Environment, Education, Employment/Income, Housing, Safety and Mental Health, and Social connectedness.

Climate-Ready Healthy Plymouth I based upon the following climate and public health fundamentals.

- Humans have a right to the resources necessary for health.
- People and their physical environment are interdependent.
- Climate Change threatens the fundamentals that sustain life and health.
- Everyone, everywhere is affected.
- Health risk and impacts of climate change not equally distributed across people, communities, or nations.
- Climate change exacerbates existing health inequities.

The Beth Israel Deaconess Hospital in Plymouth’s Community Health Needs Assessment determined the following for their service area:

1. Substance abuse and mental health issues the region’s most prevalent and challenging issues having a profound impact on individuals, families, and communities. Particular concern is increasing rates of Opioid use and impacts of trauma. For example, there are 27 drug overdose deaths in Plymouth County per 100,000 resident’s deaths. The second highest in Massachusetts.
2. Access to Behavioral Health Services is extremely limited in the region. Particularly true for those with limited English, different cultural perspectives, recent immigrants, racial/ethnic

minorities, and LGBTQ. In 2018, the Town of Plymouth had 461 mental health inpatient discharge rates per 100,000 people.

3. High rates of chronic and acute physical health conditions-heart disease, hypertension, cancer, and asthma in the service area. Rates of illness and death are statistically higher than the rates for the Commonwealth. Heart disease, cancer, stroke, diabetes, and respiratory disease the leading causes of death. For example, 11% of Plymouth County residents have diabetes.
4. High rates of leading health risk factors-healthy eating, physical activity, obesity, tobacco use/vaping, alcohol use, and stress. About 9% of Plymouth County residents are food insecure. 10.6% of children in grades k-8 have asthma. And black and Latino populations have a much higher rate of asthma hospitalizations than other groups. Black people are 3x more likely to be hospitalized for asthma in MA.
5. Other public health challenges in the BID service area are navigating the medical care system and coordinating and social services. Residents in the service area did not know where to go or struggled to gain access to needed services. Those with the most challenge to navigation were older adults, low income, racial/ethnic minorities, limited-English speakers, those with chronic/complex conditions.