A growing volume of evidence shows that one's health is influenced not only by genetics and other biological characteristics but also by a variety of social factors. Social factors include access to stable housing, employment opportunities, healthy foods, health care services, quality education, safe spaces and a number of other elements. These social determinants of health typically strongly correlate with the health status of a given community, so much so that we now believe that your zip code can be a very accurate predictor of your health.
I recently joined several esteemed colleagues on a panel titled “Your Zip Code: The Key to Health” at the South by Southwest (SXSW) Conference in Austin, Texas. We explored how the U.S. health care system can devote more attention to the underlying social determinants of health as part of the efforts to overcome the health challenges facing many Americans, particularly those in communities of color, rural areas and underserved segments of the country.

As the AHA's chief medical officer, I’m working to support AHA members in becoming leaders in this effort. But first, we want people to know that we are redefining the “H” – redefining what it means to be a hospital or health system. America’s hospitals are innovating and growing in ways most people aren’t aware of or even expect. They are building partnerships in their communities and expanding beyond the traditionally held notion that a hospital is just a place for medical care.

**Built Environment Matters**

One example of innovation in health care design is MetroHealth System in Cleveland. This past February, the health system unveiled plans for an ambitious project to build a new 270-bed hospital with more than emergency departments, clinical suites and operating rooms. The new footprint will expand green space from around 2 acres to roughly 25 acres, all completely open to the public, with walking paths, connections to new city trails, and a wellness garden. It is being dubbed a “hospital in a park” and reflects MetroHealth’s recognition that a positive physical environment can offer major benefits to the physical and mental well-being of patients, their families, staff and the community.

**Tackling Food Insecurity**

Several years ago, Toledo, Ohio, ranked 99 out of 100 communities in a Gallup Well-Being index, including being last for infant mortality and low birth-weight babies. Seventy percent of adults in the community were overweight, 36 percent of low-income families were concerned about not having enough food, and large sections of the city were found to be food deserts. ProMedica, a nonprofit health system in Northwest Ohio, recognized that to move the needle on residents' health, it had to look beyond clinical services and engage in strategies to address underlying issues like food insecurity. The health system's innovative partnership with a local philanthropist resulted in opening a full-service grocery store called Market on the Green, situated in one of the area’s food deserts. Since then, the program has added cooking and nutrition classes, health screenings, job training, career counseling and financial coaching. In addition to supporting access to healthier foods, this initiative has resulted in 17 percent of program participants seeing improved credit scores and 30 percent experiencing a boost in net income.

**Unlikely Partnerships**

In Charlotte, NC, several zip codes had a high concentration of residents with major health needs that were drivers of high-cost care. Two hospitals systems – Carolinas HealthCare System (now Atrium Health) and Novant Health – came together to work with their county health departments to try and address the growing problem. What is notable about this partnership was how unlikely it was given that these two organizations are major, longtime competitors. It materialized with the recognition that to make a difference for families in the community, the health
systems needed to study the underlying social determinants of health in the market. The health organizations worked to think outside the clinical mindset and identify the barriers to good health, and then used that information to guide the work of public outreach and community health teams.

The health systems studied American Community Survey data and found that, compared to more affluent areas of the city, six Charlotte zip codes had two to three times the rate of emergency department utilization and much higher rates of obesity and heart disease. The health systems’ partnership includes strategies to address clinical issues such as access to care and care coordination, including an eventual plan to integrate electronic health records across both systems. But it also developed a three-year plan (https://www.hhnmag.com/articles/8219-nc-providers-to-collaborate-for-underserved-communities) focusing on such factors as access to nutritious food, places to play and exercise, affordable and safe housing, and an improved educational system.

**Investing in Communities**

Since World War II, the Church Hill neighborhood of Richmond, VA, has experienced significant decline, with an exodus of residents to the suburbs, the destruction of many historic blocks, and an influx of public housing projects built without consideration of creating a positive community space. In response, Bon Secours Health System, which operates the major hospital in the area, engaged in a community visioning process (https://www.chausa.org/publications/health-progress/article/november-december-2011/bon-secours-asks-neighbors-to-help-redesign-community). Its purpose was not only to evaluate what can be done to improve people’s health but also to identify and focus on the challenges most urgent to residents in the area. The feedback and results from this process varied across different segments of the community, from identify challenges related to public safety to transportation to access to health care. But the most pressing issue, almost uniformly cited, was the need for housing security and jobs. To improve the health of this community, these challenges had to be tackled first.

Using this information, Bon Secours collaborated with an area bank and the Local Initiatives Support Corporation (LISC) to launch the Supporting East End Entrepreneurship Development (SEED) program. With the health system’s initial investment of $50,000 for three years, the project helped establish 14 new businesses, all of which are still operating today. The program focuses on creating more entrepreneurs as well as more jobs for community residents.

Housing was the other major concern in this area. Bon Secours, along with several other organizations, donated money to support the Maggie Walker Community Land Trust. This trust builds homes to sell to low-income families at subsidized prices, with the requirement that families agree to keep only a portion of profits upon sale of the home; the remaining increased equity stays with the house to keep it affordable for the next qualifying family. As part of the initiative, another community group offered homeowner training, and area realtors provided marketing and support staff. Through this effort, the hospital is helping to ensure that its patients can stay in the community and have stable housing, a core factor that has proved to affect one’s health.

These are just a few examples of how America’s hospitals and health systems are redefining the “H,” by investing, adjusting and evolving into 21st century hubs of innovation to improve the nation’s health. Redefining the “H” will be accomplished not only by improving health care delivery and using better financing models but also by building partnerships and creating sustainable, high-impact projects to address the underlying social determinants of health. Then you and your health care team, and not your zip code, will determine your health.
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