



Dying and Living in the Neighborhood: A Street-Level View of America's Healthcare Promise

Prabhjot Singh

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Even as US spending on healthcare skyrockets, impoverished Americans continue to fall ill and die of preventable conditions. Although the majority of health outcomes are shaped by non-medical factors, public and private healthcare reform efforts have largely ignored the complex local circumstances that make it difficult for struggling men, women, and children to live healthier lives. In *Dying and Living in the Neighborhood*, Dr. Prabhjot Singh argues that we must look beyond the walls of the hospital and into the neighborhoods where patients live and die to address the troubling rise in chronic disease.

Building on his training as a physician in Harlem, Dr. Singh draws from research in sociology and economics to look at how our healthcare systems are designed and how the development of technologies like the Internet enable us to rethink strategies for assembling healthier neighborhoods. In part I, Singh presents the story of Ray, a patient whose death illuminated how he had lived, his neighborhood context, and the forces that accelerated his decline. In part II, Singh introduces nationally recognized pioneers who are acting on the local level to build critical components of a neighborhood-based health system. In the process, he encounters a movement of people and organizations with similar visions of a porous, neighborhood-embedded healthcare system. Finally, in part III he explores how civic technologies may help forge a new set of relationships among healthcare, public health, and community development.

Every rising public health leader, frontline clinician, and policymaker in the country should read this book to better understand how they can contribute to a more integrated and supportive healthcare system.

Dying and Living in the Neighborhood: A Street-Level View of America's Healthcare Promise Details

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Grady says

Why our healthcare system is broken and some thought on how to mend it

New York author Prabhjot Singh, MD, PHD, is the director of the Arnhold Institute for Global Health and chairman of the Department of Health System Design & Global Health at the Mount Sinai Health System. He is also the special advisor for design and strategy for the Peterson Center on Healthcare. He is trained as both scientist and physician and was born in Harlem and continues to practice there. He brings significant depth to this surgical exploration of the American health care delivery system.

In the telling preface to this book Dr. Singh states, ‘The inspiration for this book is a patient who died under my care. He turned out to be a neighbor, as well, and I only really got to know him after he died. I refer to him as Ray. His daughter unexpectedly invited me to his funeral, where I met his friends, family, and congregation. Like Ray, many of these people were living with chronic diseases and were unwell. I was puzzled by how a place so close to nine major regional hospitals, countless clinics, a world-famous public health department, and substantial social and economic investments could be so persistently unhealthy. How being part of a great American city, awash with wealth and opportunity, can merely be a noisy backdrop of healthcare in America that was visible only from the streets he walked. My work with CHWs across Africa had prepared me to see his world of the neighborhood and my world of the hospital as interconnected, even if this connection was yet to be clearly defined. But it became obvious that if we did not build this connectivity and make it part of how we do healthcare in America, more of my neighbors would meet unnecessary early deaths. With real people in mind, the question shifts: how do we build this missing layer?’

With that poignant thought Dr Singh offers a book that shares the healthcare delivery system as it currently stands in this country – with all the wealth of the pharmacology companies, Insurance moguls, highly funded hospitals, top of the line new mechanical (read laparoscopic and robotic) replacements of physicians hands, the expensive laboratory studies and diagnostic tools, the computer medical record replacements of the eye to eye hands on doctor patient relationship – and still the streets outside the meccas are ill with uninformed poorly followed diseased patients unable to be funded or to pay the skyrocketing costs of technically advanced medicine.

His suggestions of how to incorporate our current high state of knowledge with computer communication into the neighborhoods, extending the care and treatment and information available within the halls of hospitals and clinics into the place where people live and associate – and die. This is a book that is important, easy to read, filled with not only fine ideas of centralized governance and ways to put medicine into the each of citizens – one that should be required for all physicians, hospitals, medical schools, and politicians. Excellent.

Ashley says

HIGHLY recommend for my colleagues in the health field. Administrators, nurses, doctors, finance

directors, and clinical managers will be inspired by the total population health initiatives taking place across the country to improve health outcomes in even the poorest communities. This book outlines a number of strategies and ideas for coordinating all community members and non health organizations in joining together to become a true public health system.
