

Using History, Data, & Hope to Rebuild New “Walls and Gateways” in North St. Louis

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The walls are torn down and the gates are destroyed.
Nehemiah 2:17

Five Key Presentation Points

- The North St. Louis Time Series
- St. Louis City Health Department Drills Data Down to Zip Codes
- Residents Speak: Well-Being is a Luxury
- The 2008 Study: From Fragmentation to Collaboration
- Rebuilding “Walls and Gateways” from Data: Strategic Health Plan



Homer G. Phillips Era (1937-1970)

North St. Louis Time Series

- ◆ St. Louis sustained the largest and the most prosperous black community in the state of Missouri at the beginning of this era.
- ◆ St. Louis was a city that enjoyed a reputation as a vital center in the U.S. for Afro-American life and culture.
- ◆ Charles Sumner High School was a highly successful education center and the first black secondary school west of the Mississippi River.



Homer G. Phillips, 1939

Homer G. Phillips Era (1937-1979)

North St. Louis Time Series

- ◆ Funded by a bond issue, Homer G. was the city's only hospital for African-Americans from 1937 until 1955 when city hospitals were desegregated.
- ◆ Served the black community of St. Louis until its closure in 1979.
- ◆ While in operation, it was one of the few hospitals in the United States where Black Americans could train as doctors and nurses.
- ◆ By 1961, Homer G. Phillips Hospital had trained the largest number of Black doctors and nurses in the world.



Homer G. Phillips, 1975

“There are walls of hope and culture and a gateway to health and wealth.”

Black Flight Years: 1970– 1990

North St. Louis Time Series

- ◆ Shift of middle class Blacks to the suburbs immediately west and north of North St. Louis.
- ◆ Early years of residential change accelerated in the late 1960s after passage of civil rights legislation ended segregation.
- ◆ City Blacks seek a chance to own affordable homes in safe neighborhoods; quality education; and access to services.



Cracks in the wall begin as wealth leaves the community.”

Despair, Decline, & Hope: 1990-Present

North St. Louis Time Series

- ◆ A massive loss of population and resources.
- ◆ Low to no access to economic opportunities and support services.
- ◆ Efforts are made to integrate community based health services, but the need and level of morbidity outstrip the service capacity and supply.
- ◆ Residents express a love for North St. Louis, still have hope and await leadership on solutions.



“The economic walls fall down and the gateways to hope are locked.”

SOCIOECONOMIC PREGNANCY

St. Louis Health Department Drills Down To Zip Code Level Data (2009)

Third World Indicators

| Indicator | 63106 | 63107 | 63112 | 63113 | 63115 | 63120 | 62147 | City | US Blacks |
|---------------------------------|-------|-------|-------|-------|-------|-------|-------|-------|-----------|
| HS Grad | 58.1% | 58.5% | 72.6% | 61% | 66.4% | 59.5% | 74% | 71.6% | 84% |
| Below Poverty | 46.3% | 34.4% | 29.1% | 27% | 23% | 31.8% | 16.2% | 20.1% | 25.0% |
| Teen Births | 5.6% | 11% | 7.6% | 12.1% | 7.8% | 6.9% | 8.6% | 5.5% | 6.4% |
| No 1 st Tri prenatal | 27% | 42.2% | 21.1% | 36.9% | 34.8% | 34.6% | 31.4% | 21.3% | 21.4% |

High School Graduation rates in **all** North St. Louis Zip Codes are worse than rates for U.S. Blacks.

5/7 North St. Louis Zip Codes have poverty levels higher than those for U.S. Blacks.

6/7 North St. Louis Zip Codes have teen pregnancy rates higher than those for U.S. Blacks.

6/7 North St. Louis Zip Codes have a greater percentage of females who receive no 1st Trimester Prenatal Care than U.S. Black F

DEATH

St. Louis Health Department Drills Down To Zip Code Level (2009)

More Deadly Third World Numbers

| Indicator | 63106 | 63107 | 63112 | 63113 | 63115 | 63120 | 62147 | City | US Blacks |
|------------------------------------|--------|--------|-------|--------|--------|--------|-------|-------|-----------|
| Life Expectancy | 69.2 | 70.5 | 74.1 | 69.8 | 71.7 | 70.2 | 74.9 | 74.9 | 74.3 |
| Overall Mortality (Per 100,000) | 1266.4 | 1133.1 | 965.8 | 1265.3 | 1038.4 | 1047.5 | 919.6 | 966.6 | 727.4 |
| Heart Disease (Per 100,000) | 308.8 | 267.1 | 262.3 | 354.9 | 274 | 266.8 | 267.8 | 269.3 | 251.9 |
| Homicide (Per 100,000) | 61 | 77.8 | 33.1 | 75.4 | 93.8 | 77.1 | 46.9 | 32.3 | 20.86 |

The Life Expectancy in 6/7 of the North St. Louis Zip Codes is worse than that for U.S. Blacks.

The overall mortality rates for all North St. Louis Zip Codes are exceedingly worse than the rate for U.S. Blacks.

The heart disease mortality rates for all North St. Louis Zip Codes are far worse than the rate for U.S. Blacks.

The homicide mortality rates for all North St. Louis Zip Codes are dramatically worse than the rate for U.S. Blacks.

Attention and Revelation: 2008 North St. Louis Health Care Access Study

- In 2008, a broad based task force including representatives from the regional health care safety net and local lawmakers convened to examine the issue of access to health services in North St. Louis.
- The study was facilitated by the African American Aldermanic Caucus and funded by BJC Health Care.
- The task force met monthly from July–December 2008 under the guidance of Research and Evaluation Solutions, Inc. (REESSI).
- The primary aim was to understand the complexity and context of issues facing residents and service providers in North St. Louis.
- **106 residents participated in 10 focus groups and their feedback provided meaning and personal context to the**

Wealth and
Resources Don't
Exist in North St.
Louis.

RESIDENTS SPEAK: WELL-BEING IS A LUXURY

The North St. Louis community overall is economically depressed, depleted of job and economic opportunities and most of the residents feel frustrated with the struggle to meet basic needs. Most don't have insurance and consider health care a luxury:

—We're trying to pay rent, we trying to eat, we trying to keep the lights on, we trying to get gas in our car, we trying to get...just the basic necessities...the healthcare ...that will come.

—That's the reason healthcare appears to be a luxury is because it's allocated based on money... money has left our community.



They resent having to leave their community for quality services.

RESIDENTS SPEAK: WELL-BEING IS A LUXURY

Older residents recalled the days when North St. Louis was a thriving community with multiple hospitals, doctors' offices and businesses and now they believe there is very little left that exhibits high quality. Many resent that they have to go outside the community:

–What's interesting to me is that I really -have to travel outside the city of St. Louis in order to, to receive medical care or to visit a doctor. And we don't have very many doctors within North St. Louis and I doubt if we have any that are north of Delmar.

–There's nothing in North St. Louis that's high quality that we have. Bottom line, don't ask where is this, where is that, we have nothing. We don't have a good medical center in North St. Louis.

2008 Health Care Access Study Focus Groups
Carter and Jackson, 2008



We now live in an environment that is bad.

RESIDENTS SPEAK: WELL-BEING IS A LUXURY

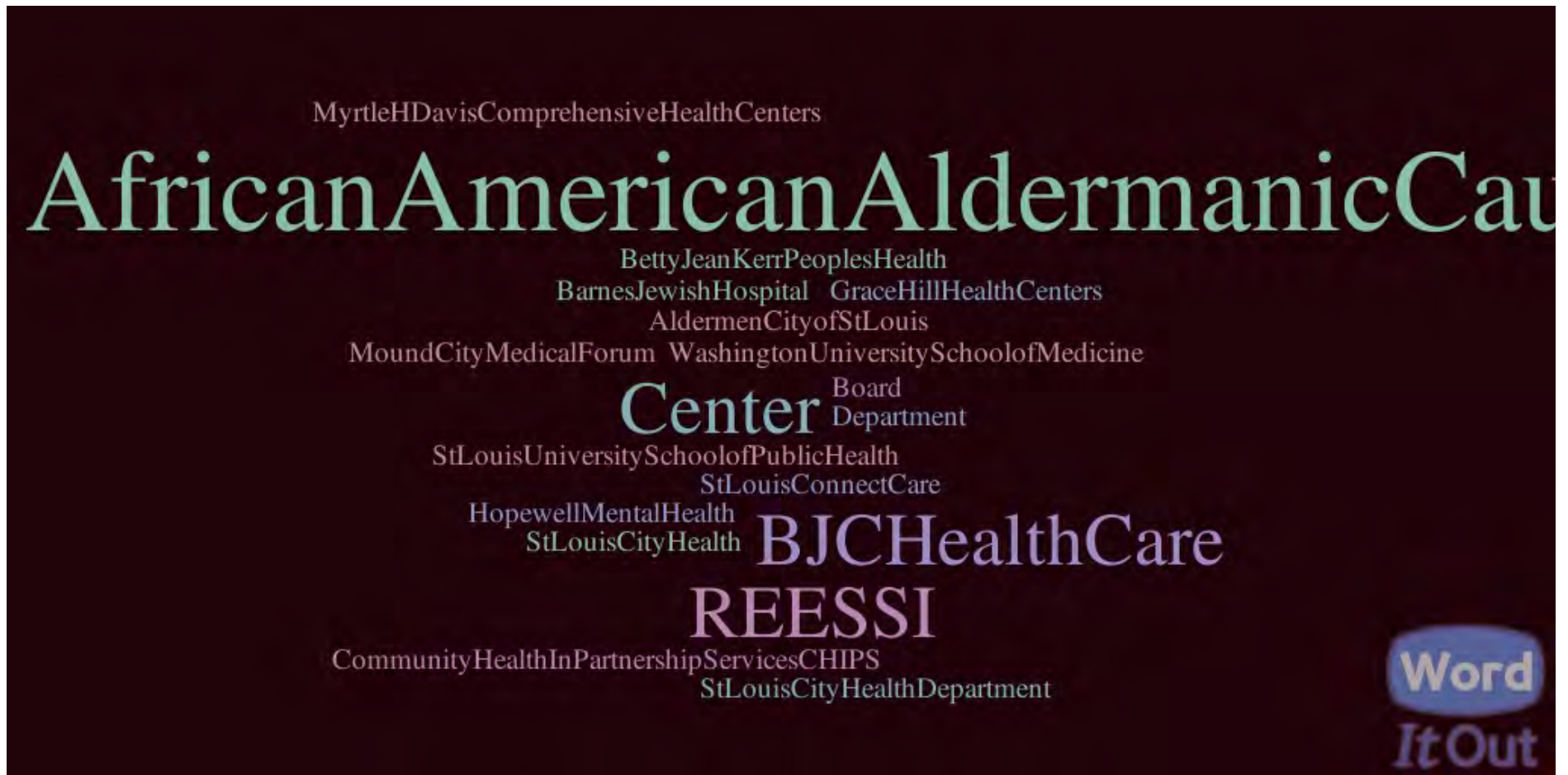
An overwhelming number of focus group participants spoke about their love of North St. Louis, the closeness of their neighbors and families, but they fear the crime and most say the environment is bad.

I too love living in North St. Louis but living in North St. Louis says caution to me. You know, I cannot go in my house without locking my door.

One of the big issues we see of course is the black on black crime. It is very unsafe on many occasions just to travel through some neighborhoods.



2008 STUDY: FROM FRAGMENTATION TO COLLABORATION



Leaders of 16 Stakeholder Organizations Participated in the 2008 Study Task Force.

2008 STUDY: FROM FRAGMENTATION TO COLLABORATION

- The 2008 Study Group participated in a full-day structured “Solutions Session” that focused on direct responses to the data supported issues.
- The session yielded recommendations in five specific areas.

2008 STUDY: FROM FRAGMENTATION TO COLLABORATION

- STUDY RECOMMENDATION AREAS:
 - More integrated and collaborative health services delivery efforts in North St. Louis are necessary.
 - Strategies to educate the stakeholders and the community about the care model in the St. Louis region are required. The self-efficacy of residents must be increased.
 - Additional capitalization and funding are required to improve access to care in North St. Louis.

2008 STUDY: FROM FRAGMENTATION TO COLLABORATION

- STUDY RECOMMENDATION AREAS:
 - More accountability for serving the community and achieving desired outcomes is needed.
 - **A comprehensive strategic healthcare plan for North St. Louis is needed.**

Healthy North St. Louis Collaborative

A project of the
African American
Aldermanic Foundation, Inc.

REBUILDING “WALLS & GATEWAYS” FROM DATA: STRATEGIC HEALTH PLAN

◆ Comprised of residents, faith-based organizations, representatives from the Integrated Health Network, CHIPS-a free clinic, the city health department, two medical schools, and BJC.

◆ The goal is to develop and oversee the implementation of a comprehensive strategic plan to improve the health and quality of life in North St. Louis.

◆ Follow-up to the North St. Louis Health Care Access Study (2008).

◆ 25-30 representatives met for six months under the guidance and facilitation of REESSI and constructed a comprehensive strategic health plan guided by the data.

Planning efforts were funded by BJC Health Care



FIVE PRIORITY GOALS EMERGED

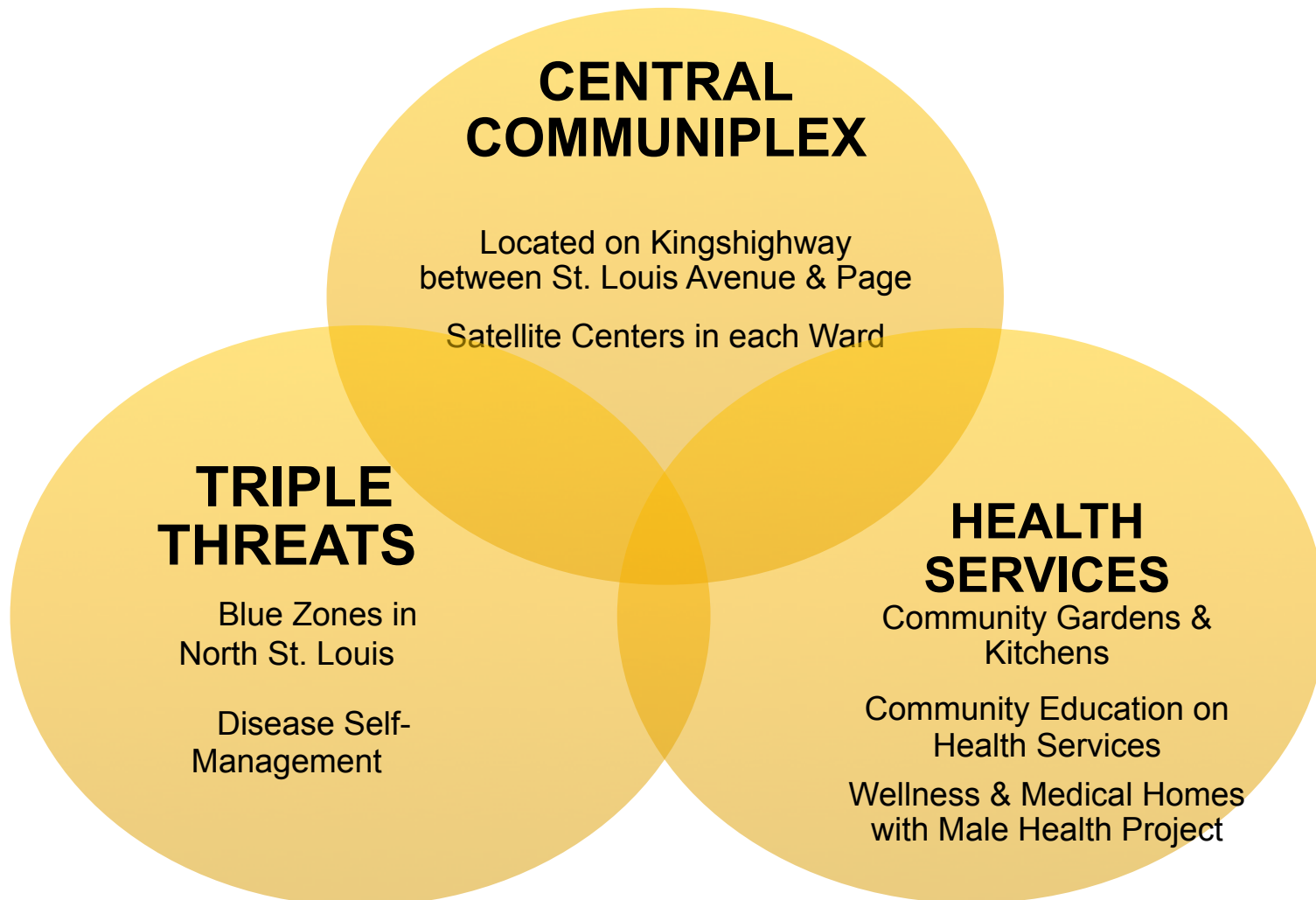
REBUILDING “WALLS & GATEWAYS” FROM DATA: STRATEGIC HEALTH PLAN



- To provide a central complex in North St. Louis with satellite sites in each ward to house services and activities that support individual, family, and neighborhood well-being.
- To improve access to appropriate health services for the residents of North St. Louis.
- To provide a supportive environment and structured activities for residents in North St. Louis to decrease the burden of three major chronic diseases- diabetes, heart disease, and cancer (Triple Threats).
- To provide pregnant African American teenage females in North St. Louis with proper health support, education and social support in order to reduce the infant mortality rate.
- To create a healthy, thriving community where youth are educated, skilled, productive, non-violent, and interested in the community.

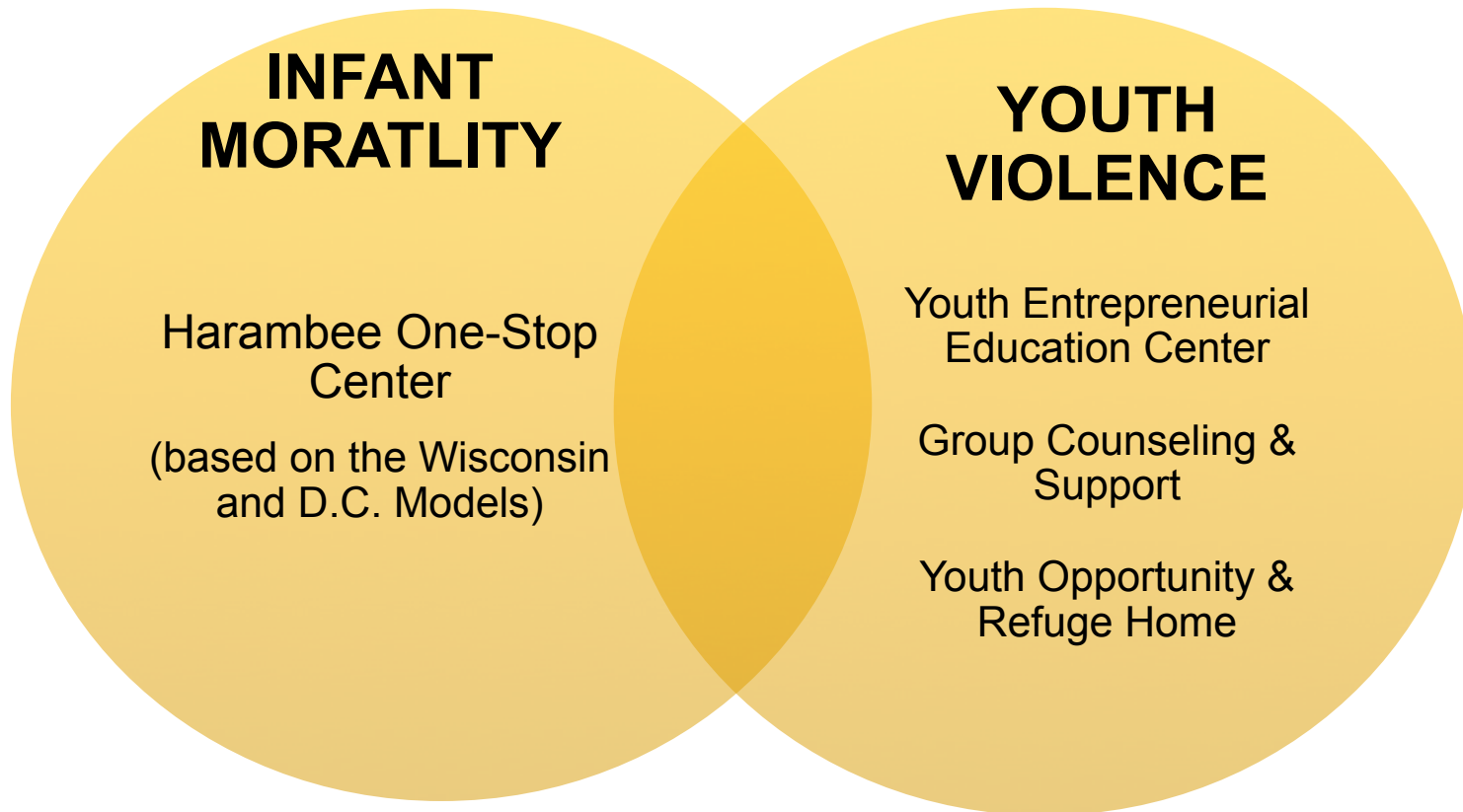
SNAPSHOT OF THE *PROPOSED* STRATEGIES

REBUILDING “WALLS & GATEWAYS” FROM DATA: STRATEGIC HEALTH PLAN



**SNAPSHOT OF THE
PROPOSED
STRATEGIES**

**REBUILDING “WALLS & GATEWAYS”
FROM DATA: STRATEGIC HEALTH PLAN**



**Let us rebuild the walls...and end this disgrace.
Nehemiah 2:17**