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The Urban Health Penalty and Jefferson Health System's Community Health Collaboration

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The Urban Health Penalty and Jefferson Health System's Community Health Collaboration

"Of all the forms of inequality, injustice in health is the most shocking and most inhumane"

- Martin Luther King

When healthier, more affluent individuals leave a city, the remaining residents experience health problems that are interrelated to the city's physical and economic deterioration. The results are "poverty zones," characterized by proportionately higher numbers of minority groups, epicenters for economic decline, abandoned homes, low wages, single-parent households, poor public schools, job loss, violence, hopelessness, and homelessness. Major health problems arising in these "poverty zones" have been termed the "urban health penalty."

In Rediscovering Neighborhoods-Reinvestment Policy for the New Hometown,² John Kromer, Director of Housing for the City of Philadelphia, asks, "can urban neighborhoods, particularly today's ruined, post industrial ghost towns, really become new hometowns?" (p 10). What will be required to reduce this tragic health penalty, and right the inequality and injustice in health? Several organizations have suggested approaches and solutions.

In 1992, the Health of the Public Program challenged Academic Health Centers (and Health Systems) to re-examine their roles in the community by assuming institutional responsibility for maximizing the health of defined populations, within available resources.³ In 1997, the American College of Physicians called for comprehensive urban partnership initiatives to address all aspects of this "urban penalty"- social, economic, and health related - and recommended solutions be achieved through public/private collaborations, adapted to the circumstances of each community.⁴ The President of the American Association of Medical Colleges recently cited the work of the University of Rochester in its community and the Center for the Study of Rochester's Health.⁵

Through provision of funds, technical staff and service provision, The Jefferson Health System's (JHS) Department of Community Health, as part of its mission of "community stewardship" has been actively involved in two partnerships addressing the "urban health penalty" - the Haddington Community Health Project Collaborative (HCHP) in West Philadelphia, and Project H.O.M.E.'s Saint Elizabeth's/Diamond Street Philadelphia Plan Project (PPP) in Lower North Philadelphia.

The HCHP began in 1995 with four founding members, including the Lankenau Hospital and Main Line Health, and has now grown to 23 active members. HCHP's Mission is to "generate participation of residents in health promotion efforts in order to enhance environmental/community health and pride." The project has expanded to include the Youth Opportunity Initiative and the Faith Based Initiative. This latter initiative is currently involved with Georgetown University's Center for Cultural Competency in producing a monograph on the "Role of Faith Communities in Health Improvement." Most recently, with technical support form JHS, HCHP received a

grant from the Health Alliance of Pennsylvania to develop a Food Cooperative and Nutritional Education programs.

Recent evaluation of the outcomes of the HCHP work, performed by West Chester University, revealed significant improvement in multiple health parameters. In addition, the population of Haddington has increased, graffiti is less evident, parks have sprung up on abandoned lots, and the number of collaborative members continues to increase. The HCHP has attracted numerous significant grants from Regional and National agencies.

In 1995, the Philadelphia Plan, a state tax credit funding program, made possible the establishment of a ten year funding commitment from Crown Cork & Seal to support Project H.O.M.E.- sponsored revitalization activities in two Lower North Philadelphia neighborhoods where Project H.O.M.E. had already completed planning activities in close collaboration with local civic groups and block organizations. The primary focus of these activities was comprehensive neighborhood improvement and empowerment, including the refurbishing of abandoned homes, job training, after school programs, "neighborhood greening" and clean-up. A component of the Philadelphia Plan includes the provision of health care to the homebound aged, the uninsured, and to those in drug recovery programs and supportive residences. Project H.O.M.E. asked physicians from the Department of Family Medicine to assist and collaborate in this effort.

In 1998, the Independence Foundation provided Project H.O.M.E. with funds to plan, implement and evaluate a Community Health Improvement Initiative (CHII) in the Saint Elizabeth's and Diamond Street neighborhoods. Thomas Jefferson University's (TJU) Department of Family Medicine and Thomas Jefferson University Hospital's (TJUH) Department of Community Health provided staff and technical support to these efforts, and partnered with the Philadelphia Health Management Corporation (PHMC) to implement CHII. The goals of the CHII are:

- 1) To expand the partnership between healthcare providers and the community;
- 2) To improve access to health services and empower residents to take responsibility for their own health; and
- 3) To expand a nurse managed collaborative model of care.

Primary Care activities have focused on the uninsured, the homebound elderly and residents of a Drug and Alcohol Rehabilitation facility in the neighborhood. Multiple health education programs have targeted neighborhood teens. Six abandoned homes have been refurbished and sold to first time homeowners. The Judson Street Project is under construction and will be home for thirty formerly homeless women with three or more children. The CHII has linked multiple other agencies to the work of Project H.O.M.E.

In summary, healthy neighborhoods and "hometowns" can arise from the epicenters of poverty in Philadelphia. Through active participation in community-based collaboratives, the Family Medicine Department of Thomas Jefferson University and the Community Health Department of the Jefferson Health System is assisting in addressing the "urban health penalty."

Rickie Brawer, James Plumb and Lara Carson-Weinstein: The Urban Health Penalty

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