

ACCELERATING IMPACT THROUGH COLLABORATIVE ACTION

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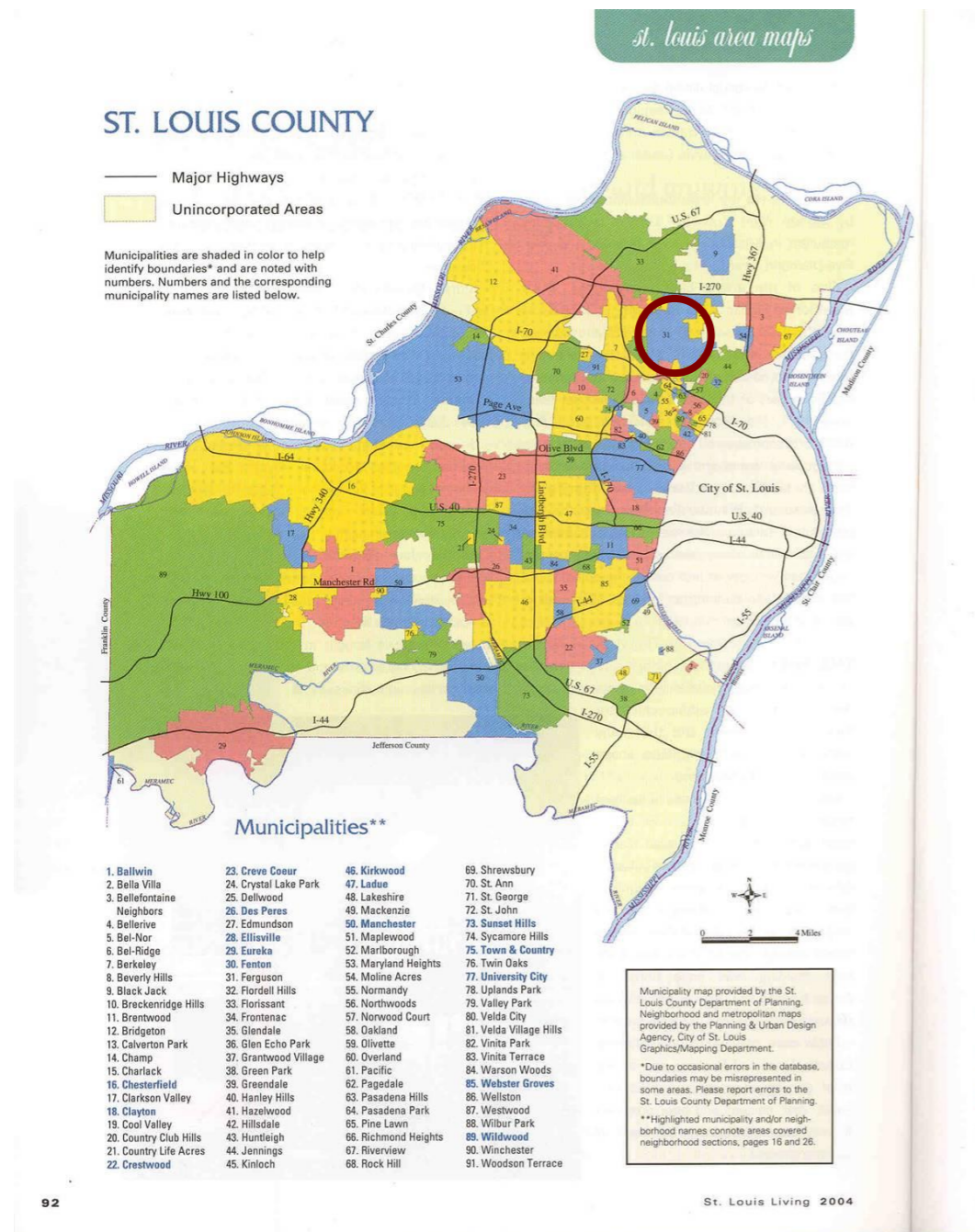
saint louis
INTEGRATED
HEALTH NETWORK

FORWARD *through*
FERGUSON



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FERGUSON IS A SYMPTOM OF FACING OUR LARGER NATIONAL REALITY



Unjust practices among many municipalities, especially the poorest:

- Racially biased enforcement of laws
- Conflicts of interest among judges, prosecutors, law enforcement
- Issuing warrants for failure to pay fines and fees (mostly for traffic violations)
- Operating courts sporadically
- *“Violat[ing] the First, Fourth and 14th Amendments of the Constitution and federal civil rights laws.”*

St. Louis County contains 90 municipalities, 81 municipal courts, & 60 municipal police departments



FORWARD *through* FERGUSON

A Path Toward Racial Equity

“Their most important work will be the changes we see in our institutions and our work places, in our communities and in our interactions with one another. Change of this magnitude is hard; but maintaining the status quo is simply not acceptable.”

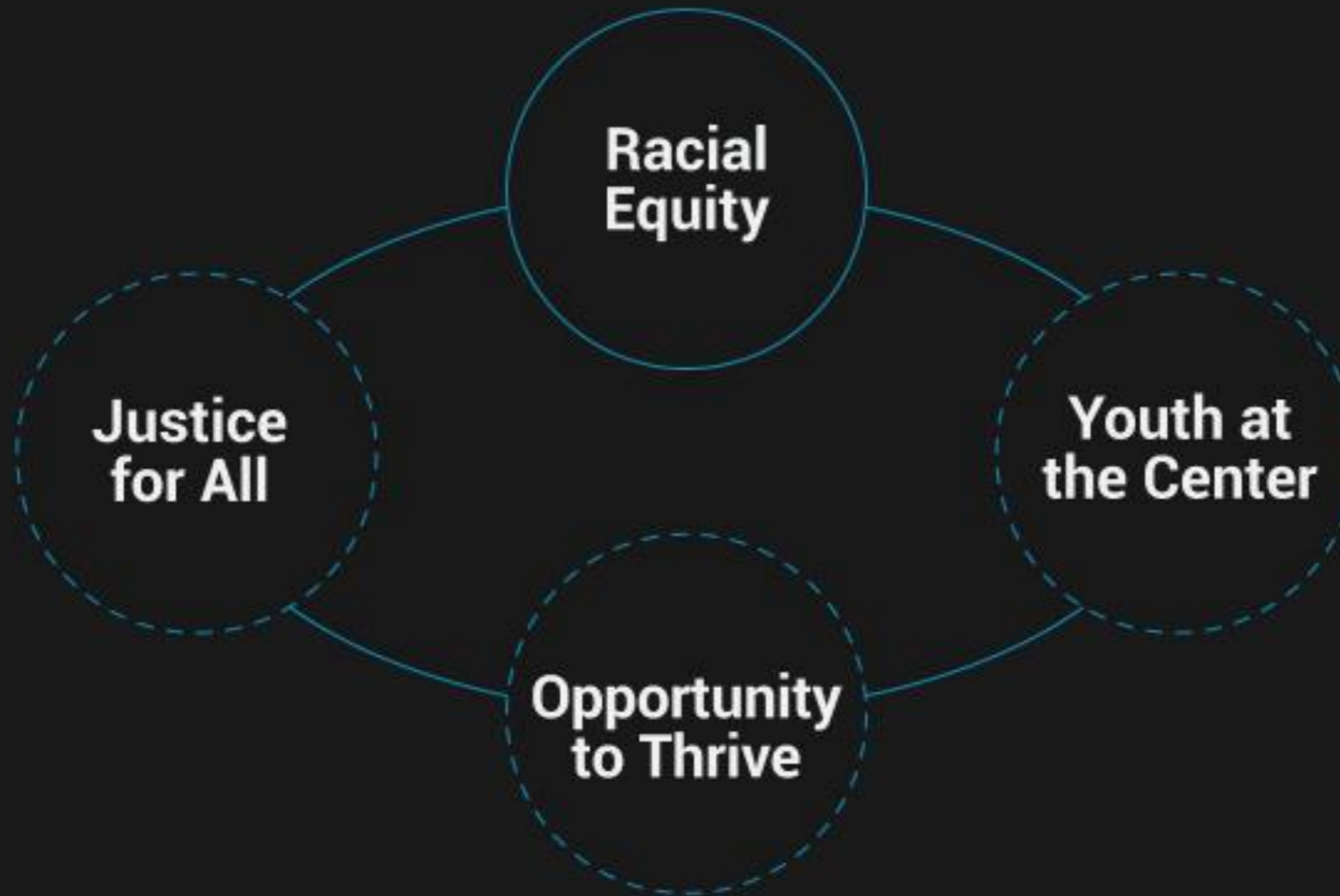
- Former Governor Jay Nixon

FERGUSON COMMISSION ANNOUNCEMENT CEREMONY



STL

AREAS OF FOCUS



LEADERSHIP PURPOSE POSITIONS YOU FOR IMPACT

“Sometimes history chooses you ...”

August 9th and Beyond...

Purpose

Call to Collaborative Action
and Leadership

Developing your leadership purpose can prepare you for this defining moment in history.

STL

DEVELOPING YOUR LEADERSHIP PURPOSE

- “The two most important days in your life are the days you are born and the day you find out why.” Mark Twain
- “Most of us go to our graves with our music still inside us, unplayed.” Oliver Wendell Holmes
- “I'm doing what I think I was put on this earth to do. And I'm really grateful to have something that I'm passionate about and that I think is profoundly important.” Marian Wright Edelman

IMPACTING HEALTH AND WELL-BEING

“I ask that our definition of health is more in this conversation than absence of physical disease. My truth is that health is well-being of mind, of body, and spirit that thrive in safe and life-affirming surroundings.”

- Attendee

FERGUSON COMMISSION INAUGURAL MEETING

STL

IMPACT OF TRAUMA AND TOXIC STRESS

- The Adverse Childhood Experiences (ACE) Study
 - **Negative experiences that happen in our childhood increase our vulnerability to spiritual impacts and physical chronic diseases and illnesses including:**
 - Hypertension
 - Diabetes
 - Chronic pulmonary lung disease
 - Tension headaches
 - Depression
 - Agitation/Anxiety
 - Unable to Sleep Peacefully
 - Suicide
- CDC estimates that the **lifetime cost of child maltreatment is \$124 billion**
- **St. Louis region lost \$13.7 billion in Gross Domestic Product (GDP)** because of its racial income gap
- Research shows **that 86% of illnesses can be attributed to our thought life** and approximately 14% to diet, genetics, and environment. Studies are now linking more chronic diseases to an epidemic of toxic emotions and behaviors in our culture.

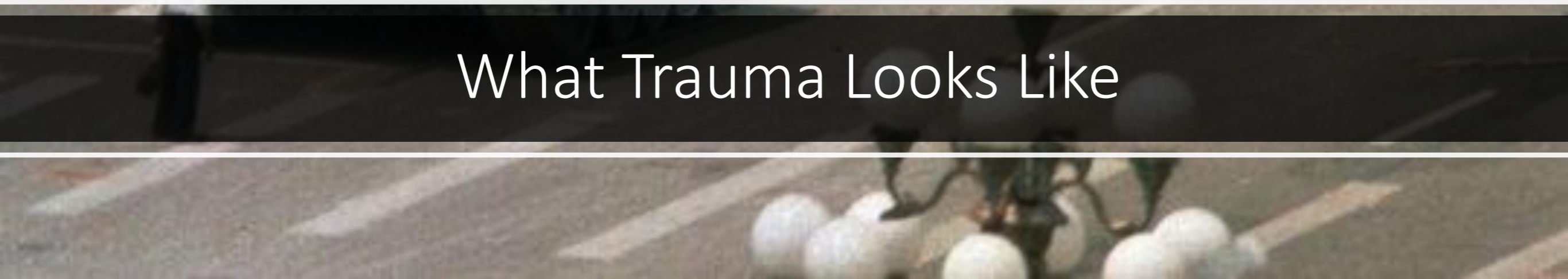
WHAT TRAUMA LOOKS LIKE

Reported by the meeting attendees

- Exposure to violence
- Increasing economic divide
- Lack of social capital or human interaction
- Anxiety and insecurity
- Mass media can exacerbate existing trauma
- Poverty
- Inability or unwillingness to lean in and discover root causes
- Not fully addressing the problems
- Everything goes back to racism
- Unemployment
- **Toxicity permeates everything – analogy to the physical body**
- If something toxic is in your community, everything else within the community is impacted because it is all connected to each other
- “Constantly being told to pull yourself up by your bootstraps”
- Other “trite” advice in response to an experience with trauma
- Being unable to appropriately help those who have experienced trauma
- **“One-size-fits-all response to trauma”**
- “People are not all the same”



What Trauma Looks Like

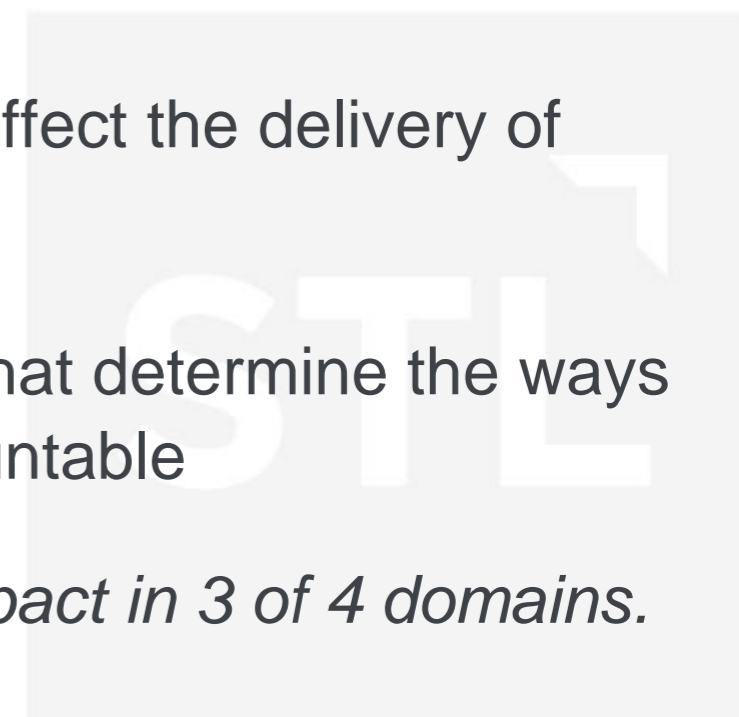


HOW WE ACCELERATE IMPACT

Our challenges are complex and are woven into the fabric of our ecosystem. To address them, the work will be shared by all and happen on many levels:

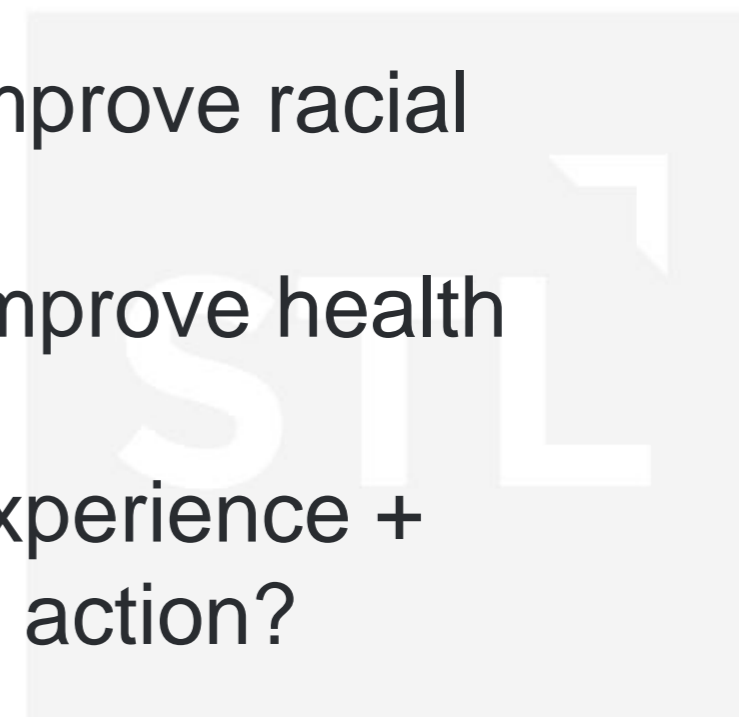
- **Policy** – legislation, ordinances, and orders guiding various settings and levels of government
- **Systems** – structures impacting advancement, promotion, and access for citizens
- **Practice** – actions, mores, and approaches that affect the delivery of services
- **Individual** – values, priorities, and assumptions that determine the ways we interact and hold one another and systems accountable

Note: Collaborative action is essential to accelerate impact in 3 of 4 domains.



LENSES

- **Place Matters** – Does this call to action make special consideration for how problems are spatially configured or concentrated? Does the implementation of this impact a specific geographic area?
- **Generational** – Does this call to action impact more than one generation?
- **Children and youth** – Are children or youth at the center of this call to action?
- **Racial Equity** – Will this call to action improve racial equity?
- **Health Equity** – Will this call to action improve health equity?
- **Research Informed** – Does data (life experience + quantitative analysis) support this call to action?

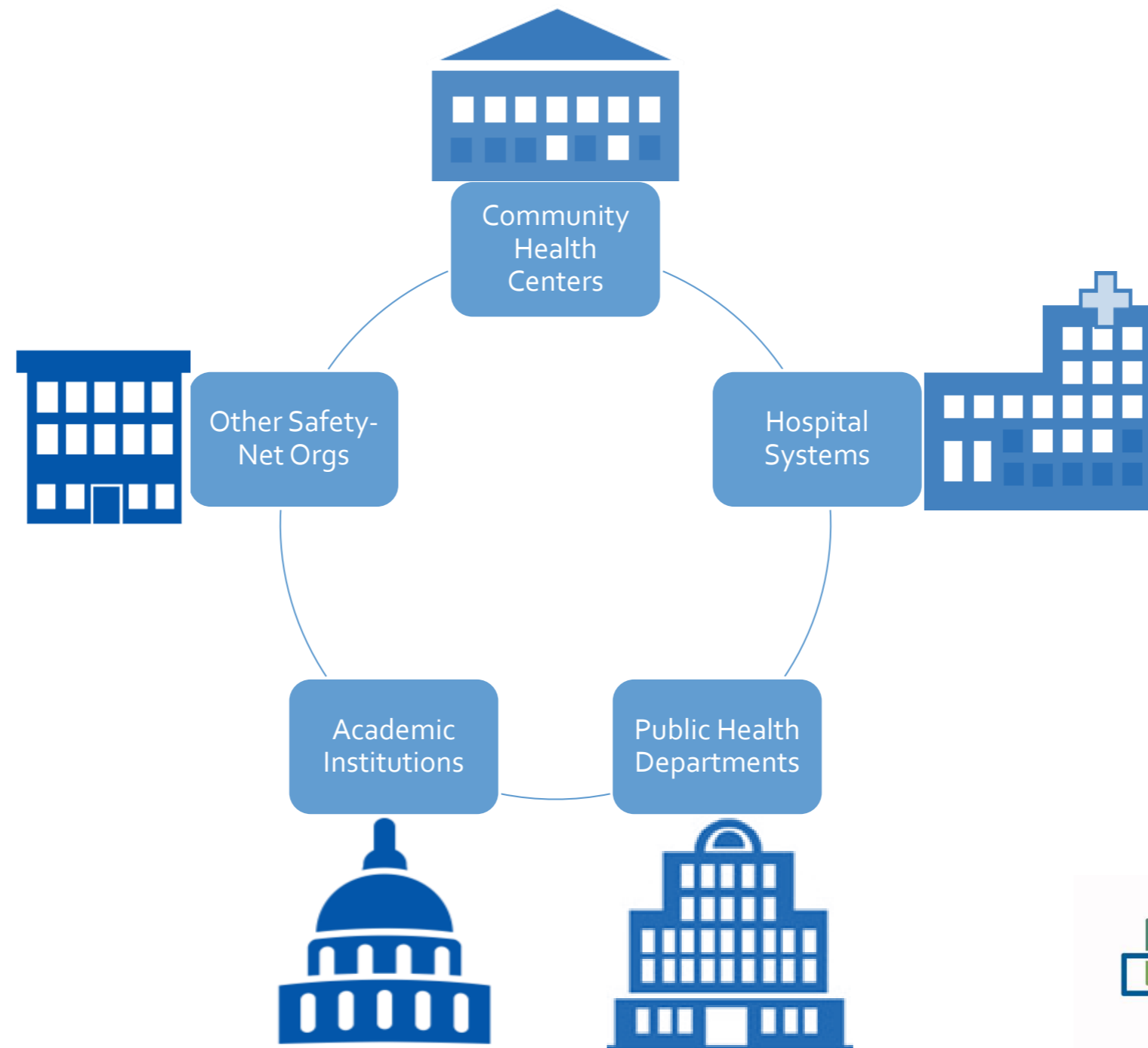


Not-so-quick-wins

Tackle complex community health issues by creating infrastructure to incubate and sustain transformation efforts.

- Creating a health intermediary membership based non-profit in 2002.
- Develop and affirm guiding principles
- Broader inclusion of collaborative partners that embrace our mission and guiding principles
- Tackle a problem to **learn while leading**

St. Louis Integrated Health Network



Together, IHN members provide more than 2 million primary and specialty care encounters each year.

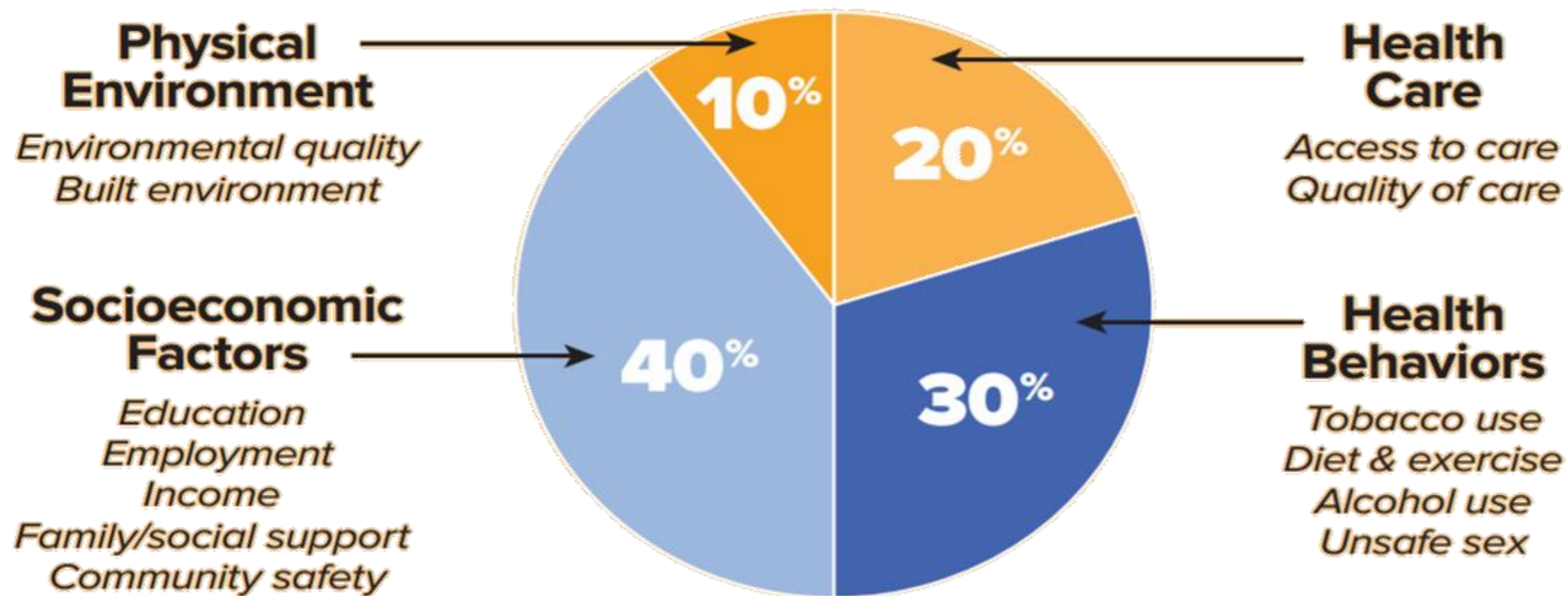
SOCIAL MESS

“A set of interrelated problems ...resistant to analysis and resolution...characterized by uncertainty, risk, complexity, systems interacting with other systems, competing points of view and values, different people knowing different parts of the problem (and possible solutions), and intra-and inter-organizational politics.”

- Robert Horn, *Strategy Kinetics*

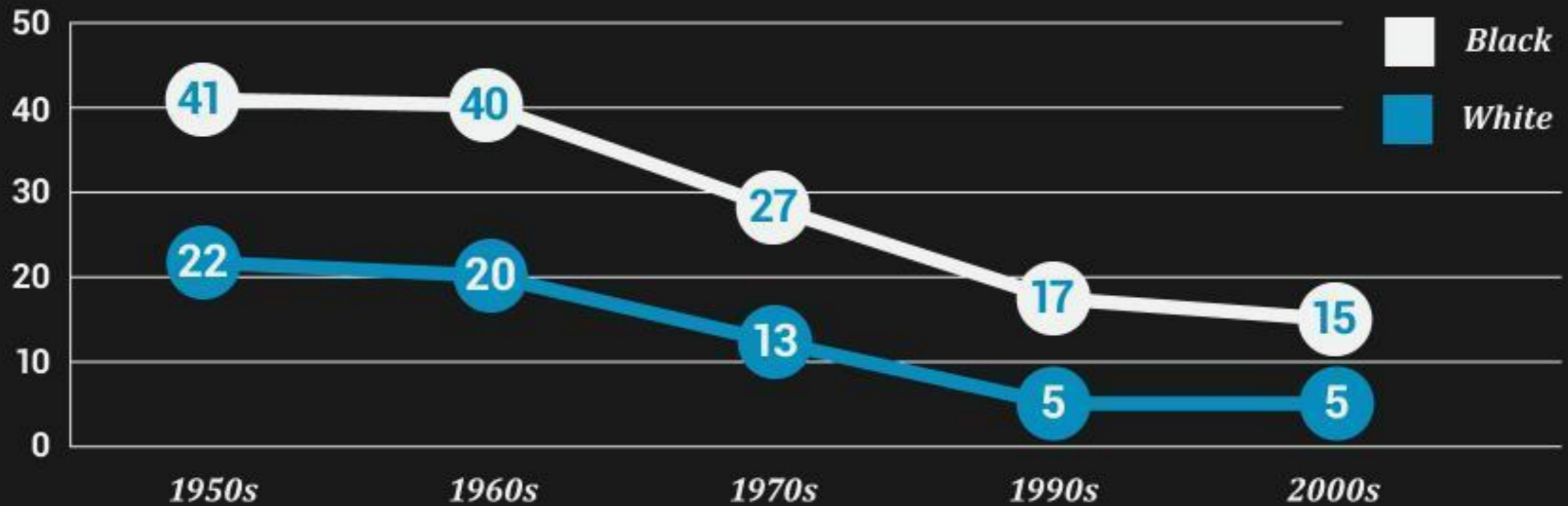
Social Determinants of Health

Population Health



Source: Analysis and adaptation from the University of Wisconsin Population Health Institute's *County Health Rankings* model ©2010, <http://www.countyhealthrankings.org/about-project/background>

DATA DISPARITY ALONG THE LIFE COURSE INFANT MORTALITY IN MISSOURI

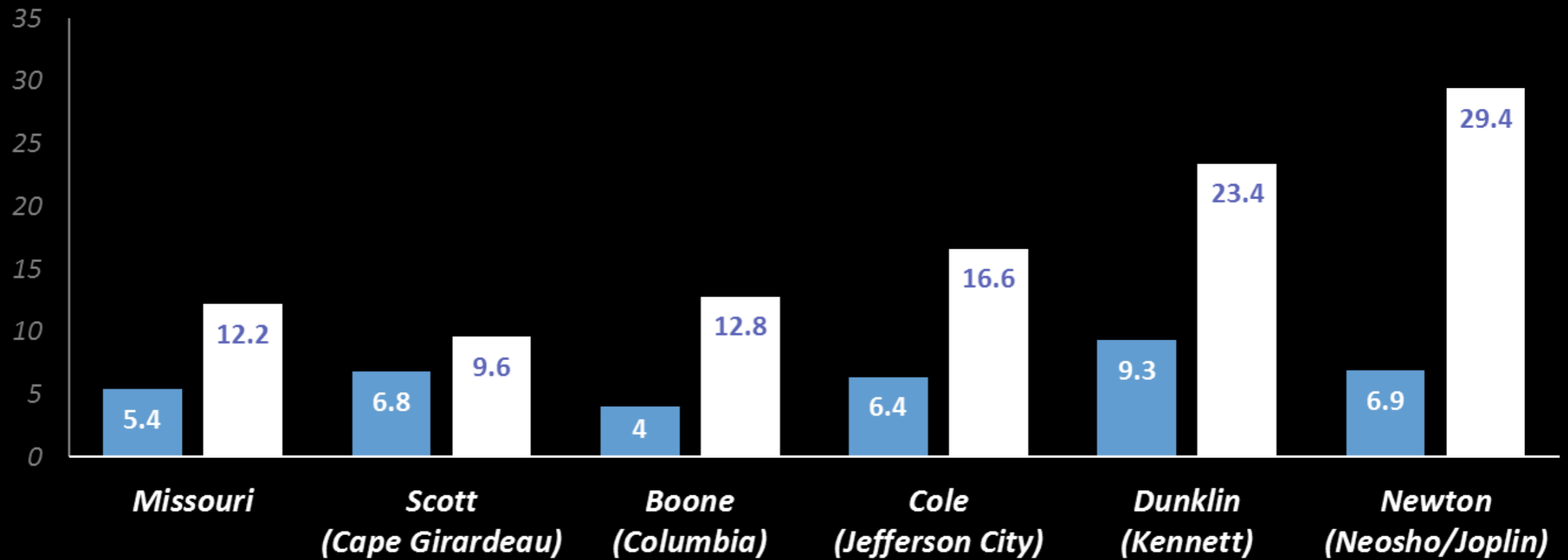


Source: For the Sake of All, 2015

DATA DISPARITY ALONG THE LIFE COURSE INFANT MORTALITY IN MISSOURI

Deaths per 1000 live births

■ White ■ Black



HEALTH ECOSYSTEM



ACHIEVING EQUITY THROUGH TARGETED UNIVERSALISM

john a. powell, Stephen Menendian & Jason Reece

- Targeting within universalism means to **identify a problem**, particularly one suffered by marginalized people, **propose a solution**, and then **broaden its scope** to cover as many people as possible
- With equity as the outcome, TU supports the unique needs of the particular with scalability reminding us that we are all part of the same social and economic fabric.

THE PROBLEM - TRANSPORTATION

- Infant Mortality rates are highly concentrated in ~ 15 zip codes (Place Based Intervention)
- The burden of infant mortality is most heavily borne by Black women
- Black women identified transportation as a major barrier affecting their ability to access care
- 50 – 67% of patients with repeat missed appointments identified transportation and primary barrier
 - Nearly 4 million delayed/missed health care appointments in the US due to transportation barriers

THE PROBLEM - TRANSPORTATION

- Research from Harvard cites commuting time has emerged as the *single strongest factor* in the odds of escaping poverty.
- The longer an average commute in a given county, the worse the chances of low-income families there moving up the ladder” (Chetty & Hendren, 2015).
- One hospital system reported ~ 18% of their ED bed capacity would be open if discharged patients had reliable transportation home
- CHC partners reported as much as 40% of staff time is spent resolving transportation issues

PROPOSED SOLUTIONS

MCO POLICY CHANGE

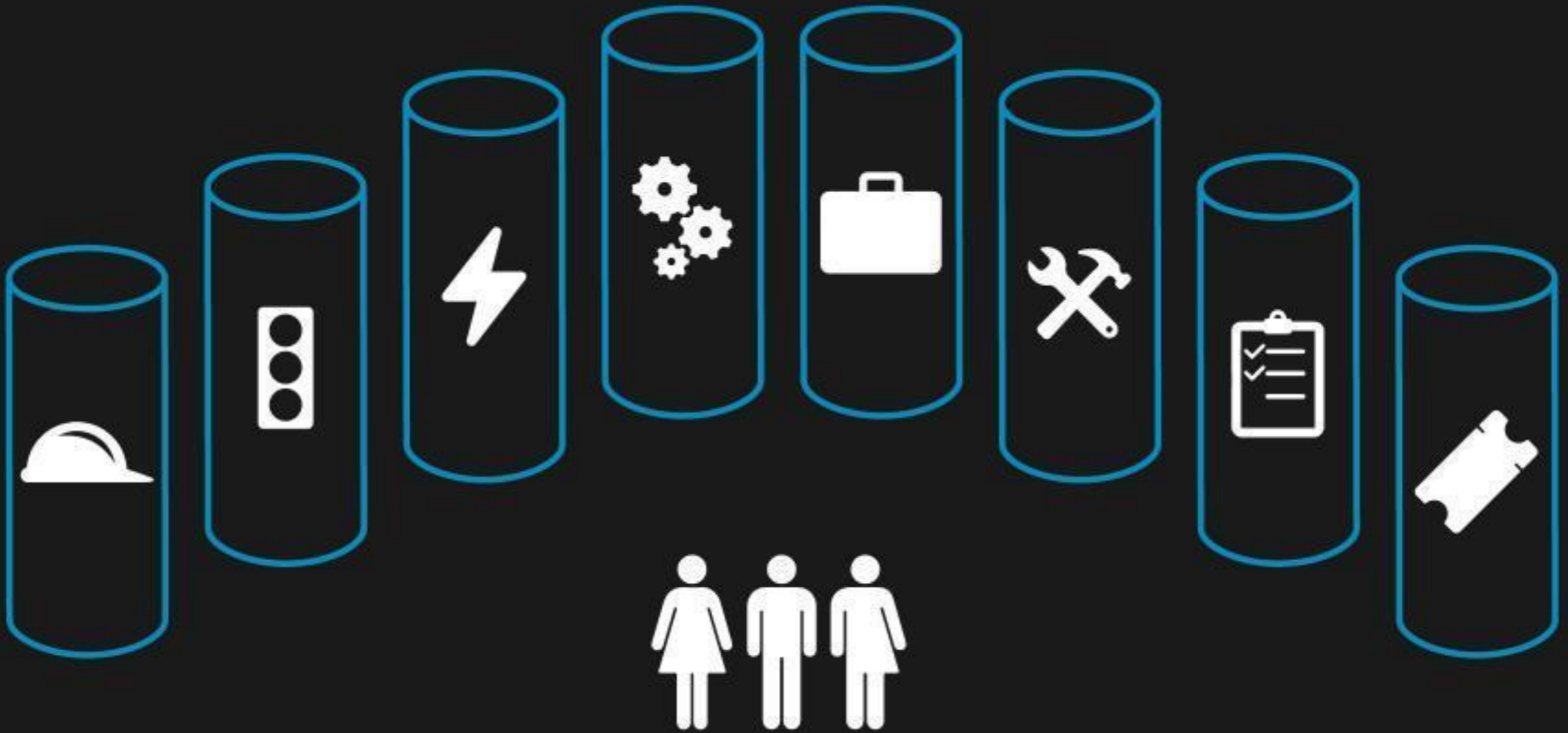
- Suspend 3 day notification to same day availability
- Expand bus exclusions
- Create one 1-800 number shared by all three MCOs
- Deepen community relationships in most affected zip codes
 - Adopt 'Riders Bill of Rights'
- Train and script call center personnel and drivers in trauma-informed principles
- Partner with LSEM's Medical Legal Partnership and CHC CHWs to capture and escalate complaints to resolve issues that have legal implications

BROADEN SCOPE IMPACTING THE LARGER ECOSYSTEM

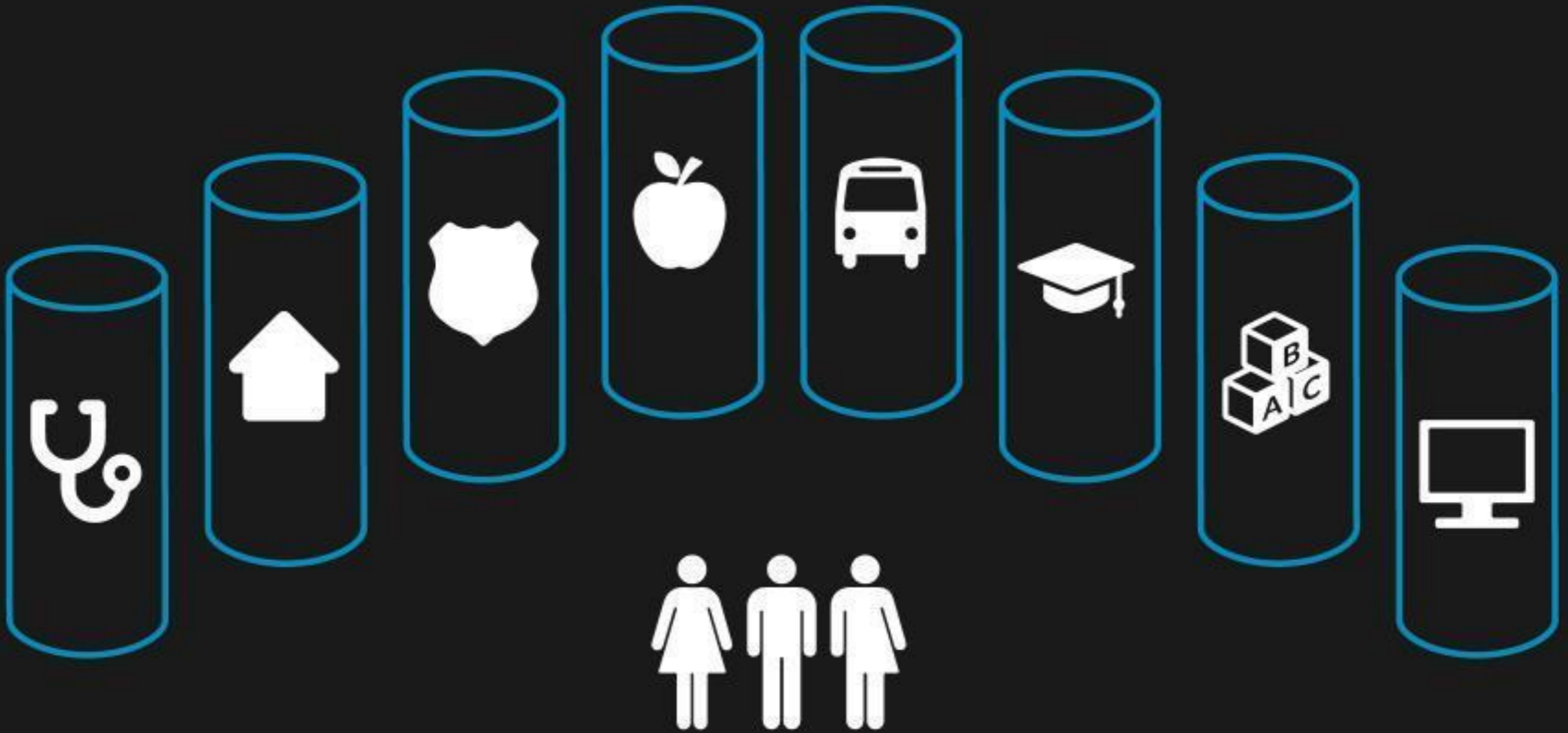
- Changes piloted in St. Louis designed to expand state-wide across all members of MCO plans
- Increases feasibility for State Medicaid Office support
- Greater accountability and urgency for change from contracted service providers
- Transportation system ripe for disruption and social innovation
- Increased confidence that we can tackle wicked problems
- Public transit system is next!

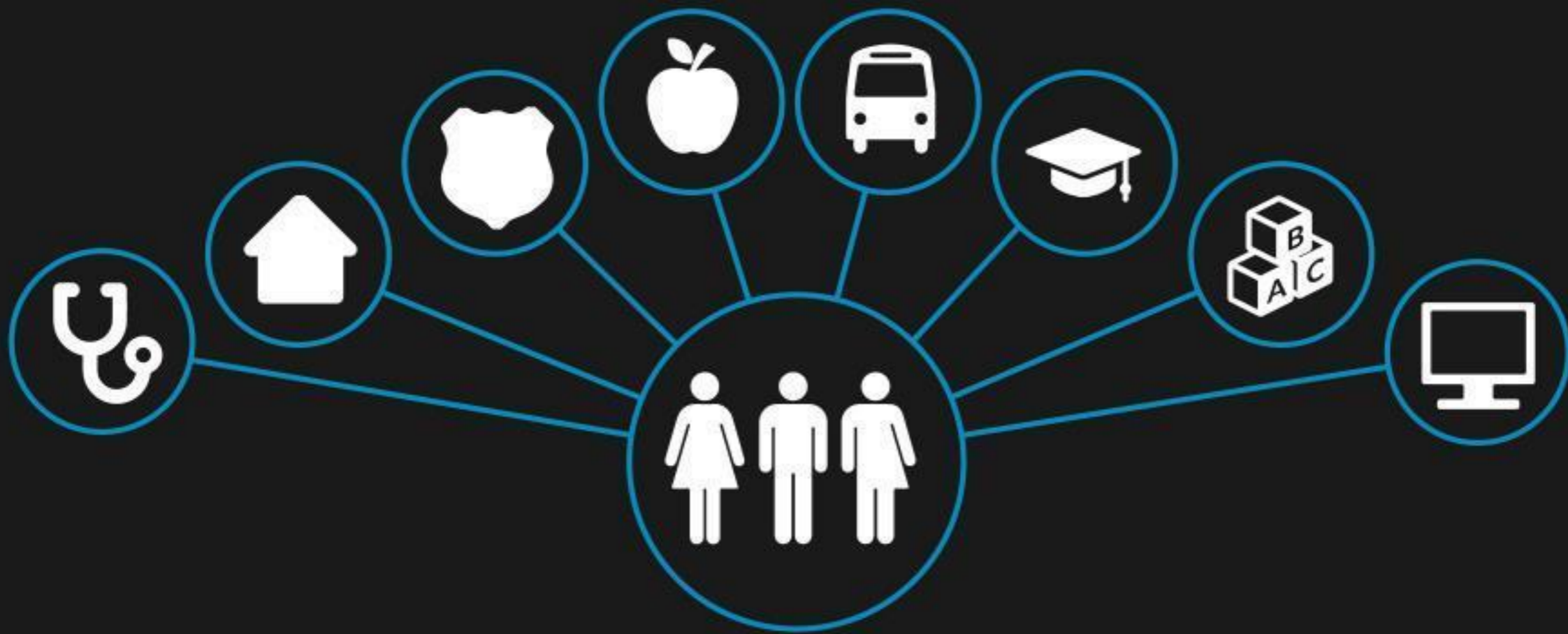
LESSONS LEARNED

- Generational problems require generational vision and resourcing
- Disaggregate Data
- Engage and act on the feedback of our patients – they are the source of truth
- Promote a civically engaged patient population
- Prioritize policy change over programmatic band aids
- Embrace utilizing a trauma-informed approach
- Apply targeted universalism to accelerate health equity
- SOLIDIFY authentic non-traditional community partnerships to sustain change and address social determinants
- Lead while learning with a sense of urgency.
- Be unflinching!



FORWARD through
FERGUSON.





*We are the ones we've
been waiting for.*