

**Mapping a Course to a  
Healthier Community for  
Women, Children and Families**



*Priorities of  
Community Stakeholders*

## The Maternal, Child and Family Health Coalition

Ten years ago the St. Louis region established an agenda to improve the well-being of children. The St. Louis Children's Agenda included priorities for improving the health of mothers, babies and families which were to: reduce infant deaths, increase access to health care, and organize a maternal, child and family health coalition.

The Maternal, Child and Family Health Coalition (MCFHC) developed as a result of the St. Louis Children's Agenda and forged partnerships with hospitals, health departments, health centers, community and social service organizations, academic institutions, churches, and parent organizations to improve the health of women, children and families in the St. Louis region.

The mission of the MCFHC is to unite and mobilize stakeholders to improve health for underserved communities by

- » identifying issues leading to poor health;
- » developing and promoting best practices to address these issues:
- » increasing coordination and communication among those who serve women and children; and
- » increasing the capacity of the community to strategically target the issues leading to poor health with quality programs and services.

## About the Mapping a Course Initiative

The MCFHC launched the Mapping a Course initiative to unite and call the community to action for healthier women, children and families. **Mapping a Course to a Healthier Community** brings together parent and provider voices to identify, prioritize, and create solutions to make our community better. The purpose of this report is to share progress toward creating a community maternal, child and family health agenda for St. Louis.

During community meetings, parents and providers described significant circumstances occurring in the community and health problems affecting women, children and families. More than 1,000 concerns and suggestions were documented and data about many maternal and child health concerns was collected. The concerns were distilled into 21 themes. Parents and providers rated each theme based on seriousness and degree of unmet need. The top rated themes were: Poverty, Access to Health Insurance, Healthy Environments, and Mental Health.

This report is the collective wisdom of over 200 parents and professionals who influence maternal and child health. They created a vision for a healthier community and identified the four priority issues that needed to be addressed to work toward achieving this vision.

## Vision for a Healthier Community

When asked to describe the characteristics of an ideal healthy community for women, children and families, participants in Mapping a Course provided dozens of comments which were summarized into the key features outlined below. By addressing the priority issues discussed in this report we will be able to move our community closer to this ideal.

- » Women's health and well-being valued
- » Prevention orientation in health care system and in personal health behaviors
- » Universal access to high quality, affordable health care
- » Safe and healthy play, work, living and learning environments
- » High quality education and early child care for all
- » Economic opportunity
- » Widespread knowledge of area resources and
- » Education on how to access health and supportive services

Photos of Mapping a Course Participants by Jill Thompson



# Priorities for Improving Maternal, Child and Family Health

## [Poverty]

1

The number one, overarching issue identified by parents and professionals as contributing to the poor health of women and children is the high rate of families with children living in poverty. Participants cited a lack of economic opportunities, lack of quality childcare, lack of quality education opportunities, inadequate housing, and lack of public transportation as key factors influencing poverty and health in St. Louis.



Photo by Carolyn Dickerson

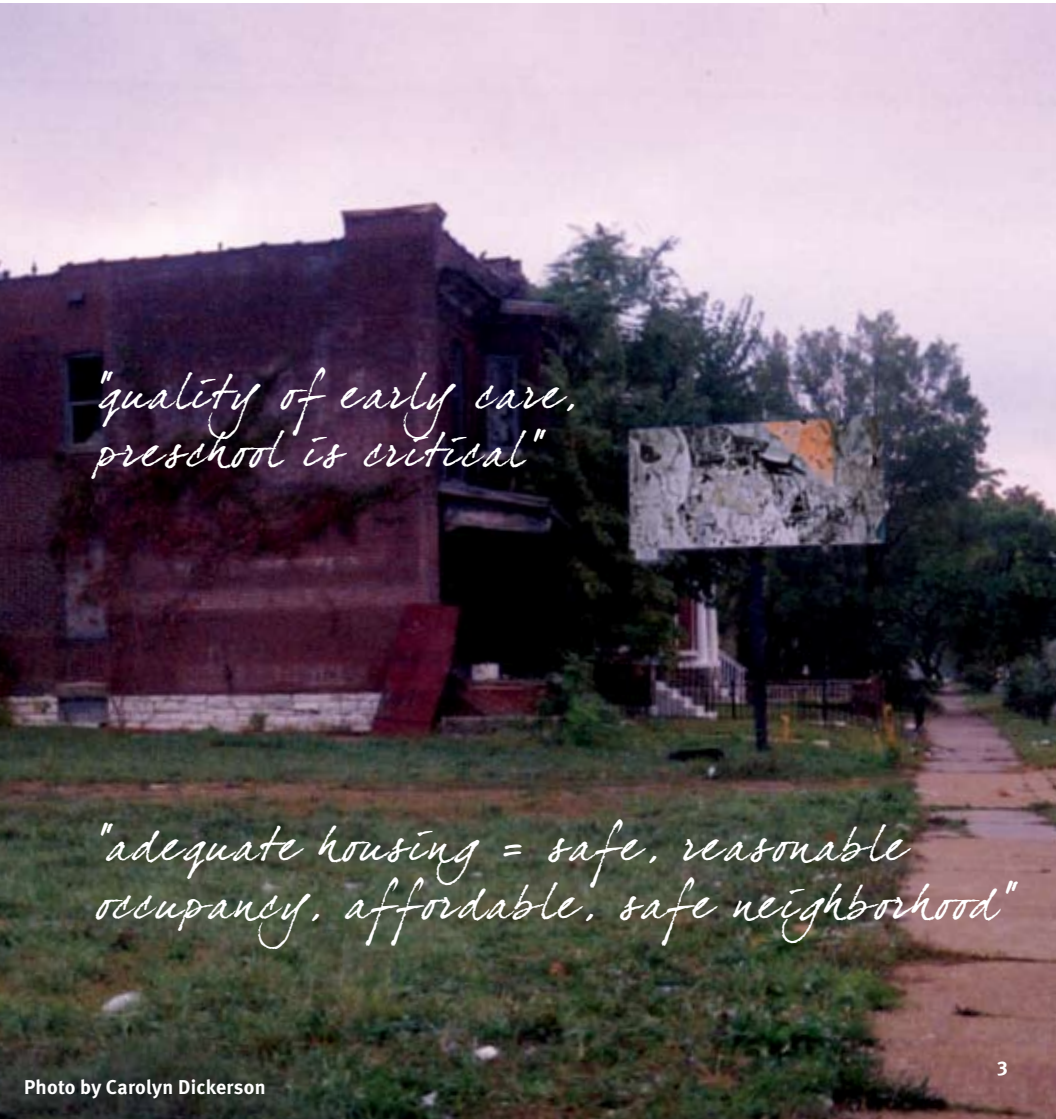
Indeed statistics support that St. Louis and Missouri have too many families living with the challenges listed above.

- » In 2006, 1 of every 2.5 children in St. Louis City lived in families with incomes below 100% of federal poverty level and 1 in every 4 lived in extreme poverty<sup>1</sup>
- » The St. Louis City median income was \$13,000 less than the state median income<sup>2</sup>
- » 7,000 people are waiting for public housing in the St. Louis area and 400,000 live in substandard or overcrowded conditions<sup>3</sup>



Poverty has been recognized since the early 1900's as a strong contributor to poor maternal and child health<sup>4,5</sup>. Current research concluded that the longer children spend in poverty, the worse their health becomes<sup>6</sup>. Another recent report cited a growing disparity in life expectancy between individuals with high and low income levels and between those with more and less education. The disparity is greater now than in 1980 and 1990<sup>7</sup>.

A family's income impacts not only their basic needs such as health care coverage and safe and permanent housing but may also impact their ability to cope with everyday life.



*"quality of early care,  
preschool is critical"*

*"adequate housing = safe, reasonable  
occupancy, affordable, safe neighborhood"*

## [Access to Health Insurance]

2

The growing rate of uninsured and underinsured was ranked as the second priority. Participants cited concerns over cuts in the Medicaid program, decreases in employer sponsored coverage, affordability of coverage and lack of coverage for specialty and mental health services.

*"copays are too high for families"*

*Health Insurance*

*"have to choose between health insurance and other necessities"*

*"losing jobs and benefits - not able to get health care, can't go to a dentist"*

- » The number of uninsured increased 14% in 2006 from 668,000 to 772,000. Much of the increase can be tied to the 2005 changes in Medicaid. 62% of adults who lost coverage became uninsured<sup>8</sup>
- » Since 2002 in St. Louis City and County there was a decrease of 18,000 individuals covered by Medicaid and 31,000 more uninsured in 2006 than in 2002<sup>9</sup>

Research indicates that health insurance coverage improves access to health care for children and adults<sup>10</sup>. Children with public health insurance have improved access to care and receive higher quality care<sup>11</sup>. The Institute of Medicine estimates that there are approximately 18,000 excess deaths among adults each year due to the lack of health insurance. Higher death rates for uninsured are the result of less preventive care and delayed seeking of health care for serious illnesses<sup>10</sup>.



## [Healthy Environments: Place Matters]

The environment was ranked as the third highest priority. Participants cited the need to improve the health of home environments and to increase safe and supportive communities. Poor quality housing, indoor and outdoor air quality, community violence, and lack of safe and beautiful surroundings were of concern to parents and professionals.

3

"people afraid to go to parks and outside their community because of drugs and violence"

"violence and drug culture - in the home and in the community"

"mice and roaches - landlords won't do anything about it"

"families can't afford safe place - landlord will kick them out if report lead"

"safety - poor response to safety issues by police (dogs in street) - lose faith in system"



*"North City needs to see there is more than boarded up buildings"*

Photos by Grant Farmer

Previous studies have shown that the health of individuals living in underprivileged neighborhoods have been compromised<sup>12</sup>. Another study showed how residential environments can influence an individual's nutritional intake and level of physical activity<sup>13</sup>. This seems to reflect some of the feedback provided by parents and providers who commented about either not having neighborhoods equipped with recreation areas or not feeling as if their neighborhoods were safe to walk for exercise or to take their children to the park.

This was also the sentiments of a Healthy Start client who took part in the program's Photo Voice Project. This participant's photo displayed a neighborhood store that later opened as a restaurant. Both businesses subsequently closed after being burglarized. She explained how the elimination of these businesses decreased the availability of food variety.

The air quality in St. Louis is a concern for citizens as well. Both St. Louis City and St. Louis County received 'F' letter grades for the incidents of high ozone days<sup>14</sup>. This is especially a concern to those who suffer from respiratory illnesses, allergies, and asthma. In 2005 St. Louis residents made more than 4,000 visits to hospital emergency departments as a result of asthma<sup>15</sup>.

- » More than 45,000 children live with asthma in the region, 3 times the national average<sup>15</sup>
- » Only 45% of St. Louis City children under age six were tested for lead when all children should be tested<sup>16</sup>
- » In 2002, homicide was the 4th leading cause of death of Blacks in St. Louis City<sup>17</sup>



## [Mental Health]

4

Mental health was ranked fourth as a key theme during the prioritization phase by both parents and providers. Participants were concerned about depression, attention deficit and hyperactivity, and high stress, a lack of mental health services, under diagnosis of mental illness, and stigmatization of mental illness. Perhaps this isn't surprising considering there are more than 100,000 residents in the St. Louis region in need of serious psychiatric services at any given time<sup>18</sup>. In 2006 there were 10,549 St. Louis City and County residents receiving mental health services from 33 available providers<sup>19</sup>. This could possibly cause mental health providers to have case loads that are excessive. Consequently this could result in more individuals needing mental health services to be turned away.



*"cuts in mental health coverage in Medicaid"*

*"stress - a number of levels - system creates stress - makes it more difficult to care for self"*

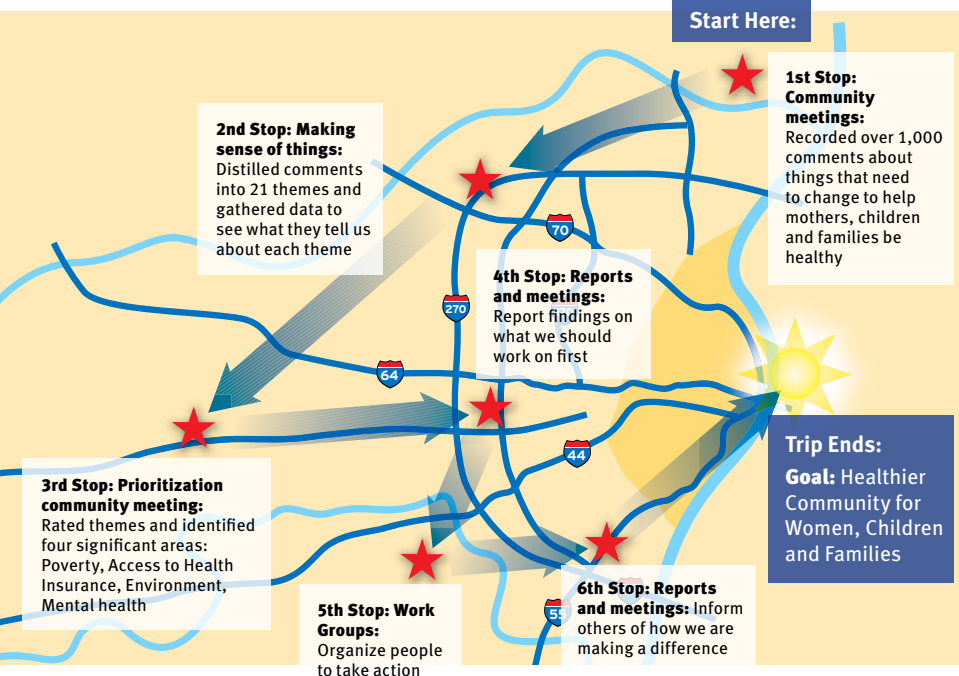
In examining how the issue of mental health more closely impacts maternal child health, it is important to note that nearly 35% of St. Louis Healthy Start Program participants were considered to be at either medium or high risk of developing depression<sup>20</sup>. Also, multiple stresses were present in 58% of the cases reviewed by the Fetal Infant Mortality Review program<sup>21</sup>. Maternal depression has been linked to negative effects on children's health during pregnancy, interference with early mother and child bonding, and with a decrease in use of preventive child health practices<sup>22</sup>.

- » 7.4% of Missouri's population is in need of serious psychiatric services<sup>22</sup>
- » On average 458 individuals were on wait lists for behavioral health services on any given day during 2005<sup>23</sup>
- » In 2005, more than 32,000 individuals visited emergency departments with primary diagnosis of substance abuse or mental health conditions<sup>23</sup>

## Next Steps

The Mapping a Course to a Healthier Community initiative will result in a community roadmap for united action and advocacy that will shape the availability of new resources and draw new attention to the needs of families. This report is the beginning of a roadmap – it presents the community’s priority issue areas to achieve the desired healthy community.

The Maternal, Child and Family Health Coalition (MCFHC) will engage key stakeholders in work groups to further study each issue and develop recommendations for strategic action. The MCFHC role will be to build widespread community support for the road map or maternal, child and family health agenda. Where it has the ability, the MCFHC will lead strategic actions. In other areas of the MCFH Agenda, the MCFHC will spur other organizations to lead strategic actions.



## Conclusion

The vision for a healthier community has been identified. The priorities requiring action have been documented. Now is the opportunity to develop strategies and secure commitments to achieve this vision. **In so doing, the health of the St. Louis community will be improved, for the health of the St. Louis community rests on the health of its women, children and families.**

If, after reading this document, you would like to be involved in the development of strategies or if you or your organization would like to make a commitment to insure the fulfillment of this vision, contact The Maternal, Child and Family Health Coalition at 314-289-5680.

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### Mapping a Course Steering Committee Members:

**Rich Patton**, Chair, Vision for Children at Risk

**Connie Brooks**, Ascension Health

**Ruth Ehresman**, Missouri Budget Project

**Barbara Kieffer**, The Boeing Company

**Michael Railey, MD**, St. Louis County Department of Health

**Brooke Sehj**, St. Louis Integrated Health Network

**Leigh Tenkku, Ph.D.**, St. Louis University School of Community and Family Medicine

### MCFHC Staff Members:

**Kendra Copanas**, Executive Director

**Rochelle Dean**, FIMR Manager

**Sandii Leland Handrick**, Healthy Start Project Director

**Amber Howlett**, Research Assistant

**Tiffany Severson**, Administrative Assistant

**Jill Thompson**, Education Manager





[www.stl-mcfhc.org](http://www.stl-mcfhc.org)

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