

**2022 Regional Community Health Needs Assessment:
Geographic Community Conversation Summary: Upper Darby and Lansdowne
[Delaware County]**

Community Assets

Resources that participants value include *“several grocery stores where you can get fresh and healthy foods”* as well as **many ethnic food markets and restaurants** offering food and cuisine from Caribbean, African, and numerous other cultures.

Several participants pointed out the **walkability of their neighborhoods and nearby green space**. *“The other thing that really keeps us healthy around here ... is the walkability. Like, we can walk. We got Naylor’s Run Park, which is about a block and a half from my house that runs all the way to Garrett [Road]. My kids walk to school, and at any given morning, ... it’s probably a thousand or two thousand children walking.”*

The area has **good public transportation, including buses and trolleys**, participants said. *“There’s bus routes that crisscross the entire community, and if you know how to use it ... it’s very convenient. Is it on time? Probably not,”* commented a participant.

One participant highlighted the area’s **public safety and emergency services**. *“Despite some recent incidents, it’s [a] fairly safe neighborhood. When you call the police, they show up. When you call fire, EMS, they will show up.”*

Another participant mentioned **convenient access to hospitals and other health services**, including Delaware County Memorial Hospital and Mercy Fitzgerald Hospital. He added: *“You have several behavioral health centers in the area—in Upper Darby alone, in the 69th Street area, there’s two within, I would say, a six-block radius.”*

Key Challenges

Given the area’s diverse population with many immigrants, participants emphasized the need for **greater cultural competency in health care and outreach to those with limited English proficiency or navigation skills to connect with health and social service resources**.

- *“Cultural competency is very important in this community of Upper Darby and Lansdowne area.”*
- Health care providers are needed *“who can understand what well-being is in the culture that they’re dealing with. ... We’re not just talking about language translation, but do they really understand what well-being means to West Africans as compared to even Somalians? Like, that’s very different. They’re not the same. So, around cultural competency and understanding sickness, health, recovery.”* For example, in South Indian culture, *“health is tied into their household. ... There will be grandma, there will be auntie ... there will be like five people coming [to a medical visit], but the office is only set up for one person at a time. That kind of cultural competency [is needed].”*

Several participants said that **diet-related chronic diseases, such as heart disease and type 2 diabetes, are common**. *“Controlling the diabetes and blood pressure and the cholesterol are things that I just keep hearing from my neighbors and seniors. Those are big ones,”* said one. Another noted that cultural food preferences contribute to the risk of obesity for some. *“Not all ‘ethnic’ food is that healthy. ... like particularly in Asian cooking, Korean cooking, like with my*

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mom, it's heavy on oils. You know, all this concept of how healthy some Asian food is, is not really accurate. A lot of frying.”

Lack of affordable dental health care is another barrier to health and wellness for many people, one participant commented. *“Dental health is a big one. A lot of Medicare doesn't cover dental health for our seniors and disabled. Even Medicaid, for adults that are on Medicaid, dental health is not covered the way it should be. And of course, dental health is tied to heart health. And overall, [for] mental health. If you ... have a bad smile, it's gonna affect your mental health as well.”*

Several participants spoke about the **rising need for mental health care during the pandemic for children and adults, as well as a shortage of behavioral health providers to meet this need.** *“More people needing mental health treatment,”* said one participant. *“They may be short staffed in service, but ... the demand is so great.”*

Social Determinants of Health

Structural racism. All participants prioritized the need to address longstanding systemic racism to improve health and social equity in the area. *“The constant disinvestment and structural racism have everything to do with long-term health. And unless that's addressed, the long-term stability or bringing up communities just won't happen,”* said one participant, who added that disinvestment in communities along racial lines has especially affected parts of Upper Darby, Drexel Hill, and Lansdowne.

Access to healthy food. *“There are some communities in Delaware County that do not have access to proper grocery stores,”* said one participant. Another pointed out that while the area has abundant food markets, many are small stores selling mostly processed foods high in salt or sugar *“and a lot of candy is all over.”* Nutrition education also is needed to help people make healthier food choices, such as adapting favorite recipes to substitute healthier ingredients and cooking methods, the same participant added.

Transportation. While public transportation in the area is good overall, getting to essential services such as grocery shopping and health care remains difficult for some. *“If you don't have a car, you're very, very limited. And we see that a lot [of] people carrying a lot of [grocery] bags, even from the Acme [supermarket] all the way across Lansdowne Avenue.”* Also, while area residents often walk to school, parks, and other nearby destinations, *“we don't have very good sidewalks or pathways,”* another participant commented.

Access to information. Several participants commented on challenges with accessing information to assist with obtaining health care and other services in the community, especially for older adults and people with limited English proficiency. *“Sometimes, people just do not know or not aware that they can apply for Medicaid or Medicare,”* said one participant. Another added that many are not aware of or able to access Pennsylvania’s online health insurance marketplace (Pennie.com) to sign up for health insurance coverage. *“Insurance is something that people tend not to think about until they need it. I think that's one of the barriers of just getting the word out that there is help paying for a health insurance.”*

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Digital divide. While many younger and tech-savvy people value the growing use of telehealth for its convenience, its use can be a barrier to care for those who lack digital capability, including many older adults. *“I actually love the telehealth. I don't have to take time off work. I can just go to an appointment and be done with it,”* said one participant. *“My [older adult] mom, on the other hand, refuses to do any telehealth appointments. Also, just lack of knowledge on how to use technology to access those telehealth [visits] has proven to be very difficult for her. ... So, I think it's proven to be good for some, very difficult for others. Again, that's the economic divide.”*

Children and Youth

A shortage of mental health providers for children and youth was a top concern for participants. Lack of physical activity and healthy social development due to excessive screen time and use of social media were other key issues.

- *“Kids don't play anymore outside like they used to because of the video games, social media, and things of that nature. I just wanted to bring that up because it's so important. ... When I was a kid, we went outside, we played—we didn't know we were exercising, running up and down the street, and in and out of each other's houses, and things of that nature. But kids don't do that now. ... The social media and the video games, that can't be good.”*
- *With virtual schooling during the pandemic, “the kids weren't in school, and not being around their peers, all of that has had some emotional effects on our children, and that's a part of staying healthy, I believe, mentally and emotionally, is interaction with your peers. But due to COVID, there's more screen time, and video games, YouTube, social media, and things of that nature.”*
- *“Access to extracurricular activities [is] very important in childhood,”* said a participant, who noted that access to youth activities is not evenly distributed in the area. *“I know over here in Drexel Hill, we have robust Little League football, soccer programs. On the Upper Darby side, it's not as robust, I've noticed.”*

The majority of participants expressed an **urgent need for more therapists to care for the growing number of young people with behavioral health issues during the pandemic.** A participant who worked until recently at an agency that places children who need behavioral health care commented that wait times for appointments are *“at the least, five months. That's to even see a therapist. You can have an intake appointment with their assessment needs, and then, after that, you're supposed to be assigned a therapist. Typically, in the past, it would take four weeks, let's say four to six weeks. In the pandemic, it's five months.”*

Another participant noted the **need for “therapists who are appropriate for the kind of culturally ethnic groups that we have”** in the area. As a father with school-age children, he added, *“the kind of stories I'm hearing from my own family and from my son's friends is that it's ... more fatigue, trauma from the shutdown. ... There's a lot of young people that are not well.”*

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Older Adults

A variety of challenges keep many older adults from accessing health care, including limited finances, language barriers, lack of knowledge or skills to navigate the health system, and lack of affordable or convenient transportation.

“Kids are resilient, so they can easily learn language, but when a person is older, it's very difficult to learn a new language,” said a participant whose family immigrated from an African nation. For people with limited English proficiency, navigating health insurance can be especially difficult: *“Upper Darby, all those places are actually filled with immigrants from different countries. It could be language barrier that cause them to not have access to medical benefits and ... fear that they might not be understood.”*

Lack of support from family or community members can be a further barrier to care, the same participant said, such as when adult children *“work a lot and they [their older adult parents] don't have somebody to assist them to go to the hospital. So, then, they are stuck at home. Even though they're sick, they don't know how to access these things ... they don't know what to do or how to do it.”*

Another common challenge is affording Medicare premiums or co-pays. *“That's the issue with my family, with the older adult, you know, older ones were like, ‘I'm not gonna pay a co-pay,’ especially if they have like, a \$25, \$35 co-pay.”* Moreover, if the appointment is a telehealth visit, the participant added, *“they feel like ‘I'm not gonna pay that and I'm not physically being seen by the doctor.’ They just won't do it.”*

Some older adults also are reluctant to accept help from others to seek or manage care, one participant said. *“There could also be an unwillingness sometimes among older adults to want to even go to the doctor or take their medication. Sometimes, they need help from their children, adult children, or you know, community members, or things of that nature, to help them stay healthy. And sometimes, in some cases, they could resist it.”*

Suggested Actions

Raise awareness of community resources by conducting outreach in places that people are most likely to frequent. While the internet is an efficient way to provide information, several participants advocated for more direct outreach into communities. *“There's definitely resources available, but people just are not aware,”* said one participant. *“We have to go where they [people] are. And we have to be realistic about where they are, depending on the community. Are they at the corner stores? You know, a lot of neighborhoods utilize the corner stores for their meals. ... Are they at the beer distributor? Let's just be honest, have an honest conversation. ... We have to go where they are, and sometimes, some in community engagement offices don't wanna go where the people are.”*

Establish “one-stop shops” for community-based health care, integrating services for physical, mental, and dental health care. One participant envisioned *“comprehensive health centers [in] communities so that everyone has access to care within a walking distance, much*

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like we want to see food resources within walking distance of everyone. Also, break down the silos between mental health, dental health, physical health. There should be more one-stop shops, so to speak, where people can go in and have their physical, mental, dental care taken care of in one facility, in a culturally competent way as well.”

Develop a stronger pipeline of mental health professionals, by implementing and incentivizing career pathway programs for more young people to enter the behavioral health field. *“Maybe behavioral health centers can go into colleges to offer signing bonuses to those – to you know, graduating students,”* suggested one participant. Another suggested job fairs at colleges to publicize employment opportunities in the behavioral health field.