

**2022 Regional Community Health Needs Assessment:
Geographic Community Conversation Summary: Northwest Philadelphia
[Philadelphia County]**

Community Assets

The built environment and access to other recreational programs were mentioned as important community assets that provide opportunities for safe physical activity.

- *“Access to parks and to other recreational programs is great ... the Wissahickon Trail and Friends of the Wissahickon. ... It’s important to have a clean space and access to those hiking trails.”*
- *“The Salvation Army Kroc Center is the bomb. ... They have everything from yoga, Zumba, biking, treadmill ... I feel great, I’m back in the game” and “They have wonderful health-focused programs for seniors.”*
- Another participant agreed but added that some centers need financial assistance: *“We have several recreation centers ... they need some support and some help, but they’re there and available.”*
- The community is seen as “walkable,” particularly the “Germantown Avenue commercial corridor.”

Access to high quality, affordable food was cited as a community asset by a participant who shared: *“We are very blessed to fight and get the Save A Lot store ... because we really needed a place to get us fresh fruit, vegetables. ... They’ve got good prices and very good products.”* However, *“supermarkets are only on Germantown Avenue and may not be accessible for those who live farther away.”*

Several participants highlighted the **availability of health care in the neighborhood, including primary care and physical therapy** (Nova Care/ Oak Street Health), **and pharmacies that provide home delivery**, such as the Healing Pharmacy.

The **availability of services and programs for older adults**, such as those provided at Center in the Park, was cited as **“an excellent contribution” to the community**. Activities include health promotion programs, social services, opportunities for socializing, and help for older adults to feel more comfortable and confident in using technology. *“A lot of different resources within the community that are addressing the aging population ... and making sure that their voices are being heard within the community.”*

Community engagement, by both informal social groups (neighborhood blocks) and formal community organizations (e.g., East Mt Airy Neighbors), **was seen as a mechanism for inclusion of the collective voice of the community in addressing issues**.

Key Challenges

Chronic medical conditions including obesity, diabetes, heart disease, kidney disease, chronic obstructive pulmonary disease (COPD), and pain management were identified as key health problems in the community. The need to raise awareness about and increase participation in healthy lifestyle classes and disease self-management programs was noted. One participant shared: *“One of the programs we were trying to run was a healthy lifestyle class. It’s*

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for people who are prediabetic, but everyone we reached was already diabetic. So diabetes is huge in the community.”

Mental health was raised as a priority concern by all participants. Mental health facilities that are high quality, affordable, and within a reasonable distance from Germantown are needed. Access issues identified included ease of appointment making, the need for accurate lists of available providers, and access to providers who are accepting new patients.

One participant stressed that **behavioral health programs for mental health and substance use need to be well-supervised and effective.** *“We also have many programs unfortunately that are not well supervised. We need ... programs that are successful, and that work, and that ensure the health of clients as well as the community. ... It doesn’t make sense to have programs that just warehouse people, as opposed to helping them. It doesn’t help to have homeless people camping out on the business corridor that can’t get help or encouragement to get help.”*

Reluctance of those with mental health issues to seek treatment was also mentioned as a challenge.

- *“There’s people that are not willing to enter these programs. There needs to be some community outreach where someone will come out and try to assist, and coach, and coax and get these folks to understand that there is help. ... I mean there’s resistance. But it has to be available and hands-on ... and the help needs to be at their location, and oftentimes that’s on the street.”*
- Another expressed concern that *“they don’t have anywhere to go, they [facilities] put them out during the day. ... They aren’t allowed to stay in these facilities in the rain, sleet, or snow--they’re out there”* and suggested that *“hospitals should provide more outreach to help them.”*

Addressing **stigma related to mental health** through media campaigns and community service announcements was suggested. *“There’s not a time if I’m watching TV or looking at a magazine that I don’t see something about breast cancer, diabetes, heart issues. So, I think people are very aware of that and that’s because there’s been a campaign. ... I love that young people are talking about their therapy, you see it on the media and I think it needs to be spread out, so it becomes the same conversation you have about diabetes we’re now having about anxiety and the issues related to other mental health issues.”*

Participants noted the need for improved access to care, particularly for working families and older adults. Possible over-utilization of emergency services was another concern.

- One participant recommended that hospitals *“invest more dollars in patient advocates to resolve some of the issues brought up tonight. Critical care centers, cancer centers have social services and patient advocates as well as resources available. We need more of that for our community so we’re not using 911 or other avenues to reach medical facilities, and more outreach into the communities that they service, and communication about the services.”*
- A participant shared concerns that 911 emergency services in her neighborhood are being over-utilized: *“It seems that in our community, at least where I am, 911 gets used as the*

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healthcare system. From the amount of fire engines and medic trucks that are constantly in and out on the street, [it seems] that people use that as a medical system, as opposed to going to a doctor or a hospital.”

- Another shared the need for increased access to urgent care centers, particularly during times convenient for working adults and families.
- Mobile health outreach units are needed to improve access to care for older adults. *“There’s an opportunity for more mobile outreach units ... to help seniors, to help people that are not available during the day.”*

Challenges with navigating the healthcare system were discussed by several participants.

- *“Navigating the health care field is not the easiest thing in general with referrals ... and making sure you know what information needs to be on the referral. You are told you need to go to this doctor but not specifically what testing, what needs to be done. Then you call and the appointment date is two months out ... and you weren’t sure that you may need x-rays before the appointment. So just making sure that providers are providing you with a clear understanding of what the next steps truly are.”*
- *“I don’t think it’s just older seniors. I find myself having to manage all of my health concerns, and I can’t get in to see my primary, I have to wait ... and sometimes when I decide which specialist I’m going to, I’m not sure if it’s the correct specialist.”*

Social Determinants of Health

Challenges related to the built environment were noted by most participants as a major concern. These challenges include walkability due to damaged sidewalks and speeding traffic, community cleanliness, and the poor condition of the *“wonderful green spaces and trees”* and the need to *“care for nature, tend it and make it grow, so that the community can grow in a healthy, positive way.”*

- In terms of **walkability and pedestrian safety**, one participant shared: *“It makes the city less walkable if people have to go around a hole in the sidewalk. So that’s one of the things that makes being healthy a little bit difficult.”* Others commented: *“We’ve had a number of people, seniors, who are not able to walk in their immediate neighborhood because of streets and the speeding traffic in our residential areas,”* and *“drivers run red lights regularly and don’t look for people.”*
- **Community cleanliness** was cited by several participants as impacting the health of the community, including trash dumping, not leashing or curbing dogs, the need for additional trash collection and more trash receptacles, and the need to engage the business community and residents in reducing trash on the sidewalks and streets. As one stated: *“Our guys are out there every single day cleaning the Avenue, [and] that trash still comes back the next day. ... You can put trash cans out there, but there’s still going to be trash on the ground. That means that people are actually throwing trash on the ground, and they don’t do that in other neighborhoods, but they do it in Germantown. So that’s a health concern, especially during the pandemic, we saw gloves, masks, everything on the ground ... that’s what I am trying to change.”*

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Safety concerns related to community violence were noted. *“There was greater violence in public spaces that used to be safe (parks, basketball courts); this past summer there was a significant decline in use of outdoor space due to fear of violence.”* Exposure to violence has had a toll on the mental health of Black boys and men: *“Black boys and men, even if they are not involved in street culture, the constant toll of knowing that you can potentially be shot or knowing family or friends who have been, dealing with policing—there are a lot of those issues that we’re ignoring.”*

Improving access to healthy, affordable food (a high priority) and reducing access to less healthy products, such as tobacco, were recommended by several participants.

- *“What is sold in corner stores, the selection could be a whole lot more improved, and less tobacco, and unhealthy products, sodas and chips, in favor of fresh fruit and vegetables, and healthier choices that will improve people’s outlook.”*
- *“We do have some very limited farmers markets. ... Having healthy fruits and vegetables readily available and affordable in our community makes a significant difference for health, and that continues to be an opportunity.”*
- Having healthier food options at restaurants was seen as an opportunity to improve health: *“Everything is fast food and greasy fried whatever ... people need healthy restaurant choices.”*

The need for increased access to information and resources was raised. A participant involved with a faith-based organization noted: *“We have close to a thousand followers and we send out information. ... Because a lot of people do not know these places and services exist in our area, and that’s one of the downfalls. Germantown is not a place that really advertises what they have and that it’s positive. ... We need other groups and all of us to join together to spread the good news, to encourage all people, all ages and color, that we do have good things in Germantown, and the only way we can keep it going is by spreading the word.”*

Children and Youth

The majority of participants discussed the need for safe places for physical activity and structured opportunities for youth during non-school hours. *“The lack of playgrounds, and the lack of recreational activities, or group sponsored activities as outlets for young children, middle-school aged children and teenagers is very seriously lacking, and I think that affects health as well as our children being able to thrive.”* Another person shared the need to **identify existing programs and promote them to the community.** **Reducing screen time** was mentioned as important in encouraging youth participation in recreational and physical activities.

The need for more volunteers to serve as mentors and role models and to supervise youth also was highlighted. *“There need to be volunteers that monitor what goes on. ... They [youth] need supervision and role models that will show them the right path to take, as opposed to all of the negative role models that are everywhere in our community and jeopardize and put them at risk.”*

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Improved coordination of mental health services for students between school guidance counselors and community mental health resources was recommended.

To increase diversity of the health-related workforce, a suggestion was made for hospitals to develop ambassador programs that engage and educate youth about health professions.

Older Adults

Managing chronic disease and pain was identified as a major concern for older adults.

- A participant who provides disease self-management programs for older adults cited the need to raise awareness about existing programs and coordinate care between hospitals, clinics, and the community: *“If they [clinic] have a patient with diabetes, they refer them to a trusted organization that has a self-management program. ... They [the organization] can follow-up with them ... it can reassure someone to stay on the right track to manage themselves.”*
- Another suggested that *“hospital social workers could work with senior centers to provide check-ins, or something that keeps the seniors on their radar screen.”*
- *“At-home services that are well organized and do not require a lot of coordination and facilitation by the senior”* were also suggested.

Transportation for older adults was discussed. One person shared that CCT services (Customized Community Transportation, which provides paratransit service) could be *“unreliable.”*

Use of technology also poses challenges for older adults. *“A lot of older adults were forced into the virtual space because of the pandemic.”* Initially, *“some people had a lot of hesitation”* but now *“in the middle of the pandemic, people are connecting with providers online, or via phone.”* Another participant added that *“hospitals have to do computer literacy for elders,”* so that they can access their online medical records. Another suggested that hospitals coordinate with and refer to community resources that provide access to technology and training, such as Center in the Park and the Salvation Army’s Kroc Center.

Other Impacts of the Pandemic

As discussed above, technology posed challenges for some older adults; however, one participant shared that utilization of telehealth during the pandemic was positive: *“People didn’t have to worry about physically going to their provider. They could just call in or do a Zoom. I think it made access a little easier, so it’s nice to continue that when applicable.”*

Participants also shared that access to COVID testing and vaccinations, particularly early in the pandemic, was lacking and people were unaware of where they could get vaccinated. They highlighted Dr. Ala Stanford’s outreach efforts, as well as availability at local pharmacies: *“It wasn’t until Dr. Stanford came into communities of color that we had access for vaccinations, and it wasn’t until our major pharmacies like CVS and Walgreens, and we have a limited number in our community, made this available.”* Another shared that the pandemic

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“opened up the void and gap in services, it made it more visible, particularly for people with chronic illness.”

Suggested Actions

Participants stressed the need to engage city council members and state representatives in efforts to improve community health. More government funding is needed and allocated appropriately. Community-led solutions are crucial. While research is important, more action is required.

To support youth, hospitals can sponsor afterschool programs, provide educational programs and outreach campaigns, and offer opportunities to learn about health professions. *“It would go a long way toward developing citizens who understand the bigger picture of health and community.”* Related suggestions:

- Increase structured, supervised activities for youth.
- Work with the community to expand programs, such as providing healthy afterschool snacks and encouraging youth to eat fresh fruits and vegetables.
- Develop ambassador programs that engage and educate youth about health professions as a means to increase diversity of the health-related workforce.

Expand access to primary care services in the community. Hospitals could invest in patient advocates based in the community and provide more services in the neighborhoods where people live and work.

Increase public awareness about community resources and services that support health. *“There are a lot of great programs and community initiatives out there, but people just don’t know about them.”*

Increase coordination between health care and community services to improve care management.

- Expand mobile health outreach into the community, especially for older adults and working families.
- Increase coordination between hospital social workers and senior centers.
- Improve coordination of mental health services for students between school guidance counselors and community mental health resources.

Increase coordination between health care and community organizations to improve access to technology for older adults and expand their activities and opportunities to socialize.

Engage the business community in improving community health:

- Expand Germantown United’s Taking Care of Business program to address community cleanliness.
- Create multilingual opportunities for neighborhood corner store owners to learn about healthier products that neighborhood residents desire.

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- Meet regularly with area businesses and through mutual understanding, work together to achieve positive impacts in the community.

Clean and green vacant lots, particularly those that are tax delinquent.