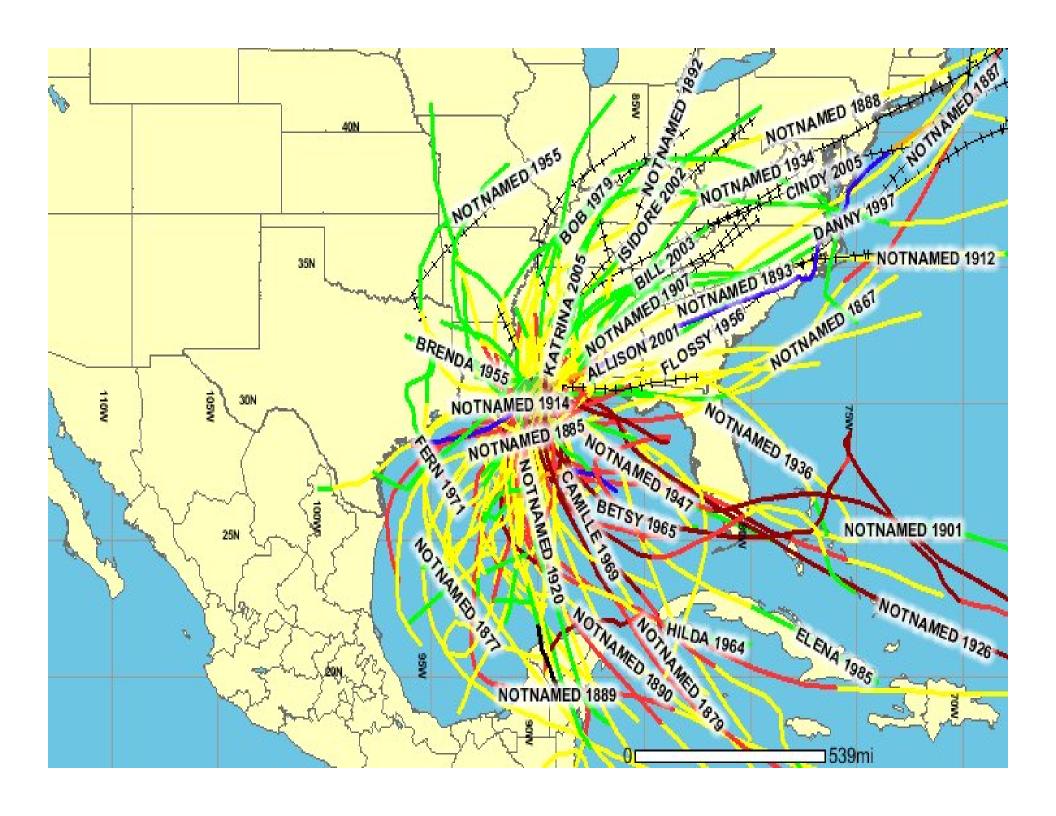
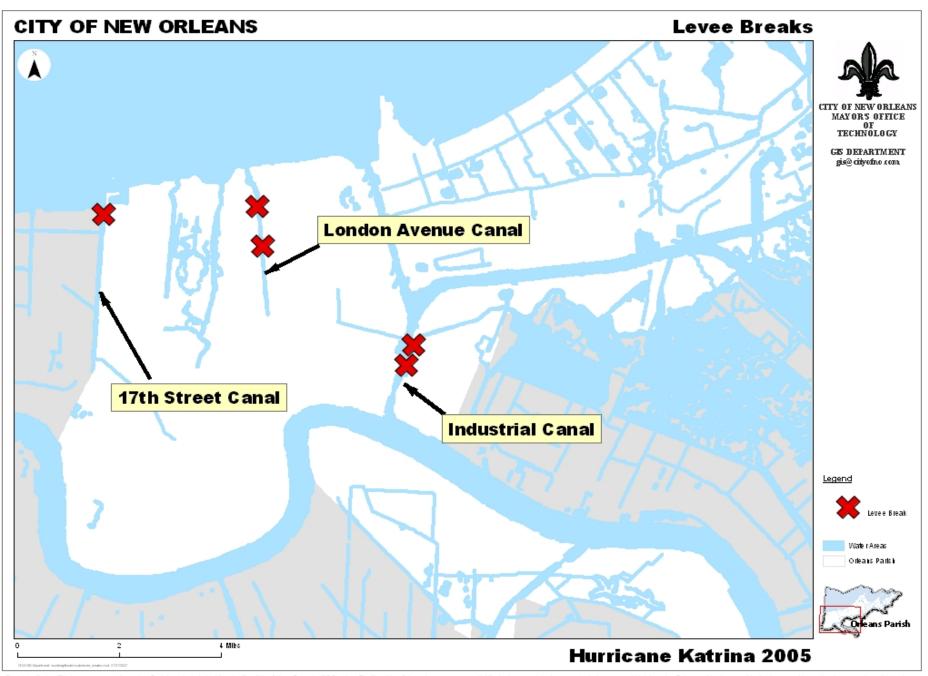


**Challenges and Opportunities** 

by
Kevin U. Stephens, Sr., MD, JD
Director
New Orleans Health Department
October 16, 2008

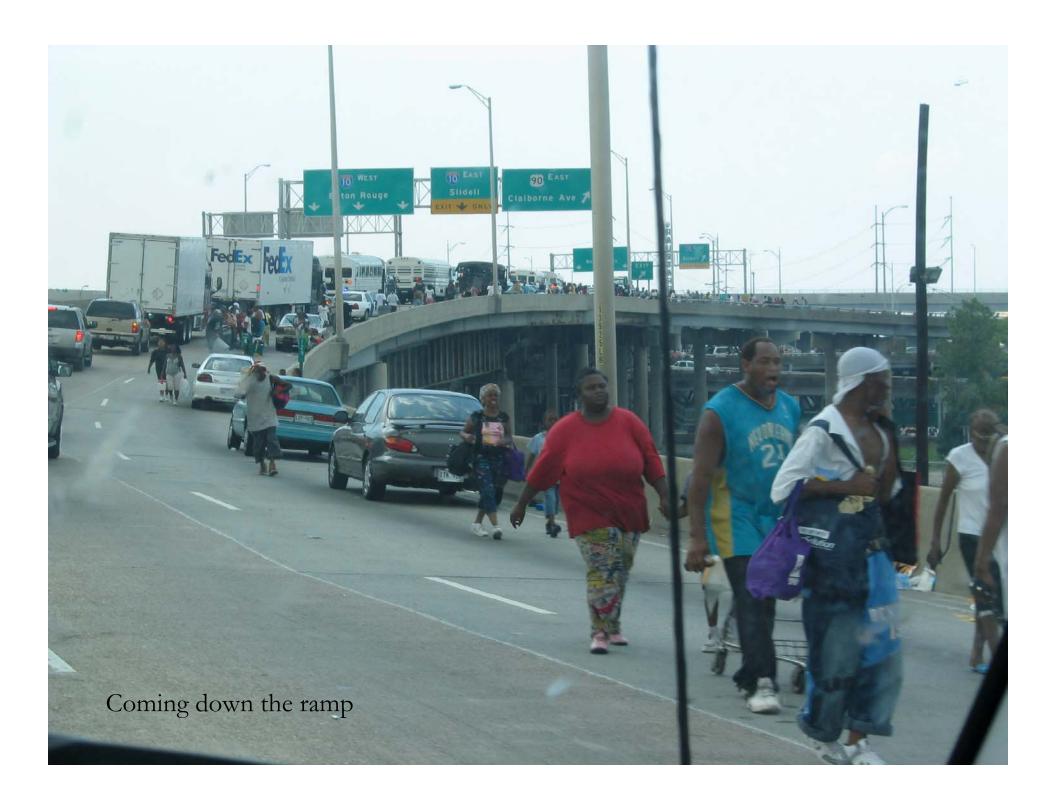












# 1. Our Health Challenges: A Legacy of Health Disparities Pre/Post Katrina



## Health Report Cards

2007

Determinants	Data	Rank
Prevalence of Obesity (Percent of Population)	27.1%	37 <sup>th</sup>
Premature Death (Years lost before age 75 per 100,000 population)	10,802	49 <sup>th</sup>
Cancer deaths (per 100,000)	221.9	48 <sup>th</sup>
Infant Mortality (Deaths per 1,000 live births)	9.9	49 <sup>th</sup>
Children in Poverty (Percent of persons under age 18)	23.8%	48 <sup>th</sup>
Occupational fatalities (deaths per 100,000 workers)	8.4	41th
Lack of health insurance (Percent without Insurance)	21.9%	48 <sup>th</sup>

Source: United Health Foundation, America's Health Ranking 2007



## 2007 Voting Patterns

- A comparison of October 2003 and 2007 voting activity generally parallels a comparison of pre- and post-Katrina population by parish.
- The New Orleans area's "share" of statewide votes cast in 2007 was 87% of its share of 2003 votes a figure that is nearly identical to its estimated population
- New Orleans lost a disproportionate share of voters

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# 2007 Voting Patterns

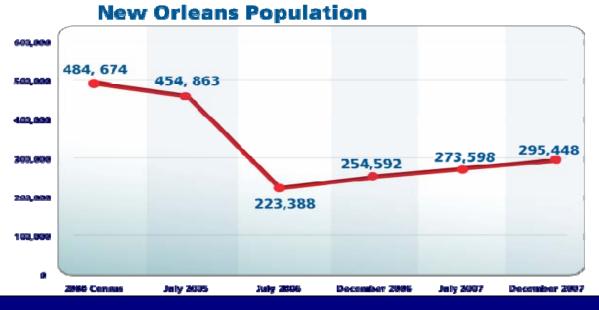
#### Metro Area\* Population and Votes Cast in Gubernatorial Primaries

	October, 2003	October, 2007	2007 as a Percentage of 2003
Metro Area Population	1,415,338	1,224,177	87%
Metro Area Votes Cast	404,082	335,717	83%
Louisiana Votes Cast	1,362,524	1,297,840	95%
Metro Area "Share" of State Votes	30%	26%	87%



# Population of New Orleans

- The repopulation of the City has progressed steadily since Hurricane Katrina.
- The rate at which residents are returning has yet to slow; redevelopment activity is progressing throughout New Orleans





# 2. Problems Exacerbated by Katrina...And Resulting Policy and Programmatic Changes

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# Hospital Beds in Orleans Parish Pre-Katrina Post- Katrina

•	MCLANO	522	• MCLANO	237
•	Touro	252	<ul><li>Touro</li></ul>	260
•	Methodist	273	<ul> <li>Methodist</li> </ul>	0
•	Memorial	360	<ul> <li>Memorial</li> </ul>	25
•	Tulane	342	<ul> <li>Tulane</li> </ul>	48
•	Bywater	136	<ul><li>Bywater</li></ul>	0
•	Children's	201	• Children's	218
•	Lindy Boggs	172	<ul> <li>Lindy Boggs</li> </ul>	0
•	Total	2,258	<ul> <li>Total</li> </ul>	788

City of New Orleans Health Department



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## Parish

Pre-Katrina		Post- Katrina		
•	MCLANO	159	• MCLANO	30
•	NOAH	30	<ul> <li>NOAH</li> </ul>	50
•	Methodist	14	<ul> <li>Methodist</li> </ul>	0
•	Depaul	74	<ul> <li>Depaul</li> </ul>	30
•	Touro	48	<ul><li>Touro</li></ul>	0
•	Bywater	20	<ul> <li>Bywater</li> </ul>	0
•	Total	345	<ul><li>Total</li></ul>	110



## Community Stigmatization

- Attention was given to the development of group or communal needs/values
- Efforts were made to get community consent, involvement, comprehension and risks/benefits from a responders effort
- Reduction of risks for community stigmatization in policies and practices.



## Comprehension and Education

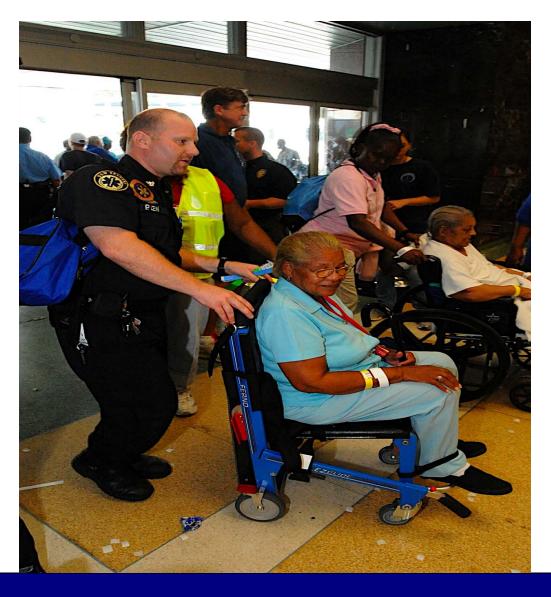
With comprehension, communities can avoid these harms:

- Findings that bring public health benefit to the community and may be used as justification for further follow-up of preparedness activities
- Avoidance of Unintended social or cultural harms (treatment of children, PTSD, violent acts, mistreatment of mental illness, overriding communal norms)
- Responders empathy should not intimidate or demoralize community members

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## Inclusion of Community

- Responders plans must include the observations, the local knowledge and resources possessed by community members
- Leads to adequate information about personal choices, lifestyle and priorities
- Leads to adequate recruitment and participation of citizens (church groups and civic organizations)

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## No Exploitation of Community

- Property and privacy rights are paramount
- Community consent (choice) procedures should be well-developed for disposition of people and property
- Leads to the preservation of the communities and property as well as protecting the wealth



#### Recommendations

- Translation and Communication of health information is essential
- It's not just about the problems centered around New Orleans, but the future of public health in our country and the care of minority populations.
- Universal access to critical medical and social information



#### Recommendations

- It is time to address the social determinants of health
- We need to listen to the practitioners and communities
- We must develop appropriate surveillance methodologies as a foundation for research, risk assessment, and prevention

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#### Recommendations

- Practice, practice and practice
- Pay attention to staff
- Have law enforcement work with you
- Be prepared



### Healthcare in New Orleans

### Specific Initiatives:

- Adding Hospital beds
- Violence reduction and prevention
- Mortality reduction
- Community Health Research



## Conclusion

The citizens who needed the greatest assistance were those who were the most fragile. The burden of health care for the minority and disadvantaged population is an issue not just for the community, but one for the nation.

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