

## Public Health and Safety, Meeting #3

August 31, 2021, 6:00 PM | 2 hours

**Documented by: Benjy Sachs**

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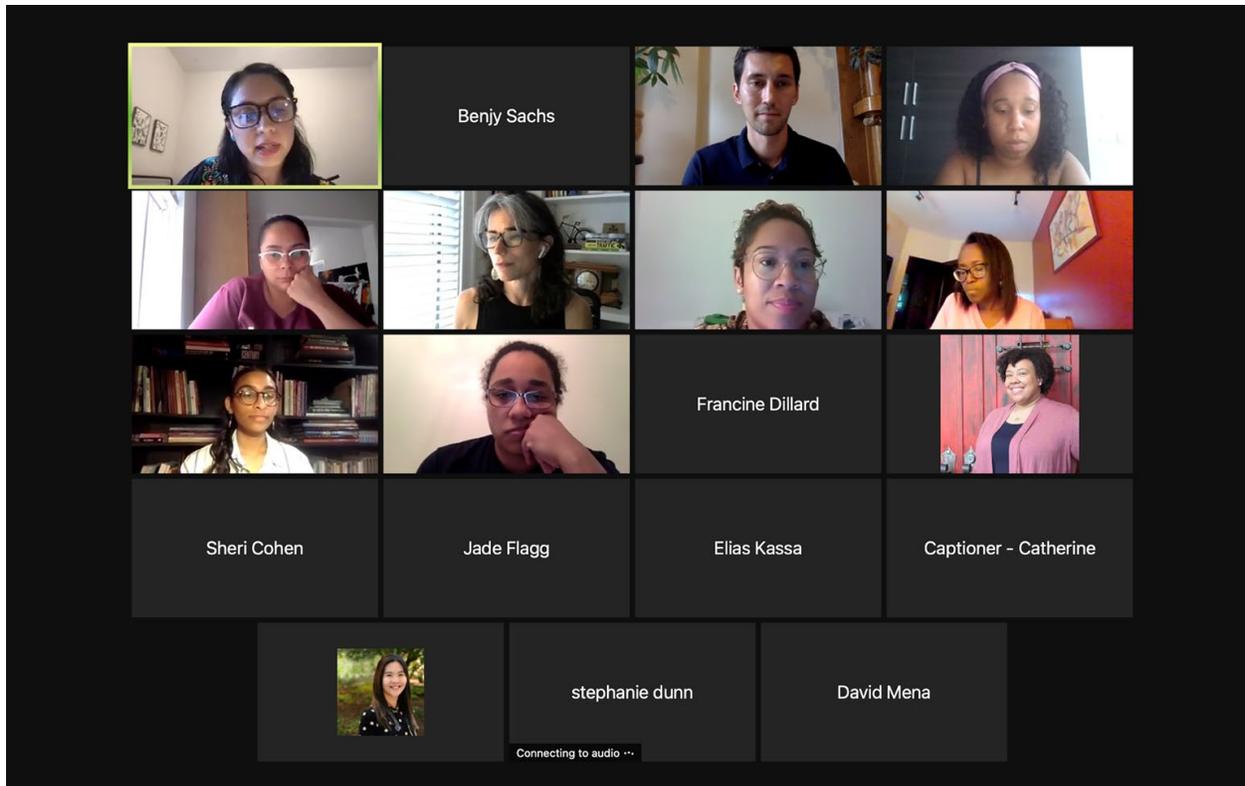
### MEETING MATERIALS

[Agenda](#)

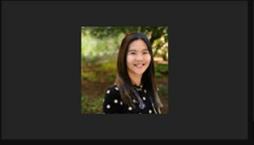
[Presentation](#)

### ATTENDEES

- Romina Castillo
- Gloria Rivera
- Brianna Lawrence
- Sophie Chishty
- Vickie Barrett
- Wesley Epplin
- Sheri Cohen
- Stephanie Liou
- Elias Kassa
- Alex Meixner
- Catherine Rajcan
- Chloe Gurin-Sands
- Darci Flynn
- David Mena
- Stephanie Dunn
- Todd Wyatt
- Francine Dillard
- Jade Flagg
- Jennifer Ligaya
- Kate McMahon
- Katelyn Johnson
- Mali Whi
- Myles Castro
- Nesha Breashears
- Kelsey Di Pirro



A Zoom meeting grid showing 13 participants and a captioner. The participants are arranged in a grid with some names obscured by black boxes. The captioner is Catherine.

	Benjy Sachs		
			
		Francine Dillard	
Sheri Cohen	Jade Flagg	Elias Kassa	Captioner - Catherine
	stephanie dunn	David Mena	

Connecting to audio ...

**MEETING GOAL**

*The main objective of this meeting is to refine the pillar's topic areas and establish guiding questions that will be used in future meetings as a framework for policy recommendations.*

**WHERE WE ARE**

Step 1

**We Are***Setting the Stage*

Step 2

**We Have and Need***Develop A Policy Toolkit*

Step 3

**We Will***Set Policy Framework***KEY TAKEAWAYS**

- 1 | Many neighborhoods in the South and West sides do not have adequate healthcare.
- 2 | Chicagoans' mental health has been strained by the pandemic, and communities are increasingly turning towards non-carceral (i.e., police and psychiatric institutions) solutions.
- 3 | Environmental factors such as green spaces, the availability of grocery stores and over-policing play profound roles in one's physical and mental health.

#### CONVERSATION HIGHLIGHTS

*“Chicago is two different cities. While the North Side is clean, safe, and full of resources, the South Side has almost nothing. It is overpoliced and lacks access to quality healthcare.”*

**Brianna Lawrence** | Beyond Schools Lab, Research Associate

*“I'd like to see us acknowledge more about what we know influences health [inequity] – including some of the other pillar areas (like housing, transportation, neighborhood development and land use, etc.) and the policies and practices that shape them – even if they don't get covered in depth in our pillar area.”*

**Kate McMahon** | Chicago Department of Public Health, Chronic Disease Prevention Director

*“The average gap between identifying a mental health issue and receiving care is 11 years. Since the pandemic started, the level of hospitalizations for mental health crises among children and adolescents has doubled.”*

**Kelsey Di Pirro** | Community Counseling Centers of Chicago (C4), Associate Director of Crisis & Youth Services

*“Most of the people I saw as a healthcare worker who wanted to be admitted to the psychiatric ward just wanted shelter. They know how to answer the questions properly to receive a diagnosis and get out of the cold.”*

**Jade Flagg** | Cook County Health, Social Worker Care Coordinator

## NOTES

**Kickoff and Introductions**

- Opening reflective prompt: “How has your neighborhood shaped your experience with public health and/or safety?”
- Brianna Lawrence says that Chicago is “two different cities.” While the North side is clean, safe, and full of resources, the South side has “nothing.” It is overpoliced and lacks access to quality healthcare. She spoke about a family member being “lost” by staff members at Roseland Hospital. Women and girls are often a target of violence as well.
- Nesha Breasheras: “I live in Greater Grand Crossing and have wonderful neighbors who look out for each other, are considerate and caring. I have witnessed and heard of a fair number of violent acts in our community. This has been disheartening and traumatic and highlighted the need for equitable resources in the public health and safety realm.”
- Jade Flagg, who is from the West side, echoes the point of lack of quality healthcare. Rather than go to Loretto Hospital, the closest to her neighborhood, her mother would drive her to Lurie’s hospital across the city to get quality care.
- Francine Dillard touches on a lack of green space in parts of the city and the tangible temperature difference as a result.

**Overview**

- Gloria Rivera shows Google Maps images over time of 11900 South Michigan Avenue in West Pullman. Right now, it’s an empty lot. She asks: “If it were up to you, how would this block look and function?” She highlights an upcoming creative workshop with Brittany Rogers (link below).
- Rivera also echoes earlier participants’ comments on the dearth of adequate healthcare in South and West side neighborhoods, as well as the lack of grocery stores. She asks why Lollapalooza, done mainly for tourists, garnered a lot of city resources, but people elsewhere in the city never get that kind of focus and attention.
- Ligaya presents 5 key issues: 1) Community police relations 2) Access to community services 3) Crime reduction and safety 4) Quality job opportunities 5) Access to healthy food, healthcare, mental health services. She reflects on conversations she has had with Chicagoans stemming from the question “Do you plan to live in this community in 20 years?”
- Wesley Epplin outlines the 3-year process of planning that We Will Chicago is engaged in. The artist-organizer engagement phase is already underway. Castillo summarizes: today we’re moving from topic areas to guiding questions.

**Review of priority topic areas slides:**

- Phase I Public Health and Safety working definition: “The Public Health and Safety pillar involves the protection and care of people and neighborhoods with public and private

resources during times of both wellbeing and crisis.”

- Gloria Rivera goes over people’s thoughts on the pillar topic areas on the Miro board. Brianna Lawrence talks about leadership accountability, healthcare, and access to healthy foods. Kate McMahon: “I’ll share from my perspective, that I’d like to see us acknowledge more about what we know influences health [inequity]— including some of the other pillar areas (like housing, transportation, neighborhood development and land use, etc.) and the policies and practices that shape them — even if they don’t get covered in depth in our pillar area.” Stephanie Liou comments that fewer than 40% of Chicago residents eligible for The Special Supplemental Nutrition Assistance Program for Women, Infants, and Children (WIC) actually receive that benefit (see link below).
- Francine Dillard asks if there are any metrics that this group is using to assess success with its recommendations. Todd Wyatt, an urban planner with the City of Chicago, says that Chicago hopes this plan will be adopted through the legislative process into the city code. They hope to have metrics to determine whether the policies put in place have achieved their desired results.
- Sheri Cohen highlights the [Healthy Chicago 2025 survey](#) that was conducted by the Chicago Department of Public Health

#### **Guiding questions development (breakout rooms)**

- My room’s members are Vickie Barrett (facilitator), Chloe Gurin-Sands, Kelsey Di Pirro, and Jade Flagg. Chloe is from the Metropolitan Planning Council, bringing a public health and environmental take on policy, focusing on land use. Kelsey is a trauma therapist representing C4, an organization that responds to most of the mental health crisis calls in parts of Chicago. Barrett works in traffic safety. Jade is a social worker volunteering with County Care.
- Barrett reviews tips for drafting guiding questions. She asks: what is the definition of public safety? Some cities across the country have been redefining what it means. She opens up to the group: what does it mean to be safe in your community? The shared experience of the pandemic has called us to notice the health inequities across different communities. Kelsey Di Pirro points out a shocking statistic: the average gap between identifying mental health issues and receiving care is 11 years. Since the pandemic started, the level of hospitalizations for mental health crises among children and adolescents has doubled. Lurie’s Children Hospital has over 300 people on their mental health waiting list. Kelsey’s organization has over 200 people waiting. The two primary options for accessing care in the United States are (1) jail and (2) involuntary psychiatric institutionalization, both carceral systems. She envisions a world in which mental healthcare can happen on your porch. She also knows that she engages with families in their worst moments. Oftentimes, Kelsey says, people will not want long-term care after she encounters them in crisis.
- Jade Flagg asks: what does mental healthcare look like? She says that most of the people she saw as a healthcare worker who wanted to be admitted to the psychiatric ward just wanted shelter. They know how to answer the questions properly to receive a diagnosis and “get out of the cold.”
- Barrett asks: what are the barriers that people face to receiving care? How can we reach people before they reach a point of crisis?

- Kelsey acknowledges the bleak reality: mental healthcare exists, but it is very hard to find and is often abusive. She asks: what is the difference between someone who gets something positive out of their healthcare experience and someone who doesn't? Healthcare is a personal and variable experience for patients, and it can be hard to find a doctor whom you trust.
- Barrett emphasizes the importance of having multiple options in care, just like she does in her traffic work. Nature, group therapy, individual therapy—people respond to different treatment types.

**Guiding questions development (back to main group)**

- Group summaries. David Mena's group talked about how we can improve mental wellness in divested communities, how to move resources from areas that are resource-rich to ones that lack resources. The police budget, for example, is larger than it needs to be.
- Nesha's group discussed food equity, asking how they can work with grocers to distribute more nutritious food options. On mental and physical health, they stress the need for early intervention, starting from babies and elementary school students, to address any health concerns. They also talked about environmental wellness: the main two issues are air pollution and a lack of green spaces. Corporations come into neighborhoods without people's consent and cause pollution.
- Kate McMahon's group conversed about how they can tackle structural questions about shifting and sharing power with a focus on community organizations.

#### RESOURCES

**Upcoming Public Health & Safety workshops**

<https://wewillchicago.com/calendar>

**Brittany Rogers organization website**

<https://www.bethechangets.org/>

**Eve Ewing Chicago out-migration**

<https://www.chicagoreporter.com/exodus-examines-rise-and-fall-of-chicagos-black-population/>

**WIC shortcomings: under half of WIC-eligible actually receive it**

<https://www.povertylaw.org/article/making-wic-work-in-illinois/>

**Healthy Chicago webpage**

[https://www.chicago.gov/city/en/depts/cdph/provdrs/healthy\\_communities/svcs/healthy-chicago-2025.html](https://www.chicago.gov/city/en/depts/cdph/provdrs/healthy_communities/svcs/healthy-chicago-2025.html)

**Chicago Health Atlas**

<https://chicagohealthatlas.org/>

#### NEXT STEPS

- Use the Zoom chat function (or email) to report out on homework from Meeting 2
- Continue to add to the Miro board to assist the research team in identifying plans
- Participants will receive an email to fill out for a mentor-mentee program