

## Forces of Change Assessment Report

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The Forces of Change Assessment identifies trends, factors and event that are occurring or will occur that affect the community or the local public health system. During the Forces of Change Assessment, participants answered the following questions:

- *What is occurring or might occur that affects the health of our community or the local public health system?*
- *What threats or opportunities are generated by these occurrences?*

While it may not seem obvious at first, the broader environment is constantly affecting communities and the local public health system. State and federal legislation, rapid technological advances, changes in the organization of health care services, shifts in economic forces, and changing family structures and gender roles are examples of forces of change. These forces are important because they affect either directly or indirectly the health and quality of life in the community and the effectiveness of the local public health system that serves it. During this assessment, participants engaged in brainstorming sessions to identify forces, which could be:

- **Trends** are patterns over time, such as migration in and out of a community or growing disillusionment with government.
- **Factors** are discrete elements, such as community's large ethnic population, an urban setting or proximity to a major waterway.
- **Events** are one-time occurrences, such as a hospital closure, natural disaster or the passage of new legislation.

*Forces of Change* is one of four assessments completed as part of the *Community Matters 20/20: Assessment, Visioning and Planning for a Healthy Jefferson County*, a community health strategic planning process. For this assessment, a five member subcommittee<sup>1</sup> implemented the process for assessing the forces of change that are affecting or have the potential to affect the public health system or the community. Two brainstorming sessions with five separate groups were completed at different times and locations covering a vast portion of the county. Community leaders, policymakers, and long term residents were among participants that shared the experience and knowledge from their areas of expertise. This group included representatives from the fields of education, technology, faith, social service, private business and many others.

The resulting data<sup>2</sup> collected was compiled<sup>3</sup> and revealed a number of prevalent occurrences cited repeatedly and independently across separate brainstorming groups. Emergence of these themes reinforced the understanding that the forces cited are striking, tangible and recognized as real opportunities and/or threats to the public health system and Jefferson County as a whole. While the data presented in this summary were gathered directly from the brainstorming sessions, the opinions and ideas presented in this document do not necessarily represent the position of the agencies sponsoring the *Community Matters 20/20* assessment process or that of the individuals involved in its collection, analysis and/or delivery.

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<sup>1</sup> Subcommittee members and participant roster

<sup>2</sup> Discussion group notes

<sup>3</sup> Results Compilation

## Opportunities:

- **Smoking regulations and protection of clean air** in public places resulting from community mobilization and legislation are positively impacting health and health outcomes across the county.
- **The University of Alabama at Birmingham**, including its hospitals and associated specialty centers, is a driver for medical care, clinical research and health resources innovation. This community asset is pivotal to the county's public health system.
- **Faith-based organizations** provide strong social and economic support to the region and are emerging with a broader role in access to health care and medical services.
- **Local and regional philanthropic agencies** and their investments support the public health system and residents of the community in fueling new initiatives and supporting ongoing efforts.
- **Models of community organizing, self-reliance, empowerment and engagement** are emerging successfully and need to be expanded to strengthen communities.
- **The trend of urban renewal** is a strong force driving development and growth in Birmingham and surrounding communities. Building on these successes will promote further development.
- **Advances in the national and local conversation** about wellness, prevention, healthy/active lifestyles, physical activity, obesity, climate change and other issues are promoting and enhancing local efforts. Funding sources are serving to drive investments to increase equity and decrease disparities.
- **Expansion of roles and maximization of healthcare professionals** like nurse practitioners in treating and prescribing is helping increase healthcare access and service availability.

## Opportunities and threats at the same time:

- **Use and prevalence of technology** helps processes and amplifies the potential for communication but also **displaces individuals** from the workforce and impedes face-to-face contact.
- **The increase in diversity** due to demographic changes such as immigration and cross cultural interactions is an asset to the county's cultural wealth. The new demographic reality **requires increased resources**, namely, economic investments, increased workforce training and developing local capacity to fulfill the needs of diverse populations, like interpreters, translators, and bilingual staff. The increase in diversity has brought these underlying issues front and center, as evidenced by the passing and later judicial intervention resulting in the elimination of some aspects of Alabama's Immigration law (HB-56), one of the most aggressive attempts to drive immigrants out of the state in the nation.
- **Built environment growth and infrastructure development** including parks, trails, walkable communities, bike lanes, urban gardens and use of sustainable resources make our county a better place to live but **require continued investment stretching already thin budgets** and unstable revenues to maintain smart growth initiatives.
- **Medicaid expansion is needed** and is expected to translate into more widespread reach of services and programs for minorities and underserved populations suffering the burden of health disparities. The **potential increase in expenses** if Medicaid expansion happens may impact funding sources and resources available for other programs in the long run.
- Changes in the historically stigmatized **public image of mental health** and increased awareness and services are impacting health outcomes positively. Promotion and availability of mental health services are moving to the forefront but still lack momentum and broad support. Prioritization of **mental health services is still in its infancy** and demands dedication of more resources and funding to increase and expand efforts. This need for funding threatens the acknowledgment and feasibility of mental health resources expansion.

- **Struggling educational systems and poor academic outcomes** erode human capital as an asset and threaten the intellectual growth and development of our children. More investments in education, including increased funding, more teachers and equipment, etc., are needed. Pooling of these resources will build economies of scales to leverage improvements across the board. **Current efforts to create and fund improved education** such as specialized academies and charter schools, advanced achievement programs and incorporation of best practices may translate into better graduation rates and academic progress.
- **The Affordable Health Care Act is increasing access to healthcare** services and will continue to impact residents. The long term impact and potential consequences of its implementation **represent unknown factors** that many people fear could threaten their personal financial stability and the county's economic health.
- **The existing public transit infrastructure is inadequate** and requires further development and additional funding to survive. Mass Transportation improvement and **new investments** like the expansion of Birmingham-Jefferson County Transit Authority routes are paving the way for a much needed comprehensive transportation system that can improve quality of life for hundreds of thousands.

### Threats:

- **Fragmentation** within the county, including municipalities, cities, school systems, groups, communities and socio-economic classes create barriers that curtail opportunities and increase disparities. These divisions polarize issues and people and result in wasted opportunities to build on economies of scale. Matching funds from local agencies and government are shrinking, and funding sources consequentially are being lost.
- **Racial and ethnic divide** and its historical context and legacy are a source of distrust and keep people from working together. Cultural conflict continuously threatens relationships, improved living conditions, conflict resolution and healing opportunities. De-facto segregation hinders and stifles growth and development.
- **"Isms"**, the notion that some individuals or groups are better than others for a variety of reasons, including classism, racism, sexism, and ableism increase disparities and missed opportunities.
- **The current political realities of the county**, including dysfunctional politics, are counterproductive and result in poor leadership that erodes trust from constituencies. Failures in both governance and legislative action create division and stall development and growth.
- **Inadequate healthcare access and coverage**, including preventive and specialty care services, negatively impact health outcomes and increase health disparities. The closure of Cooper Green Mercy Hospital (the only County-owned and operated hospital serving the poor and uninsured), gaps in healthcare services, insufficient mental health care, inadequate HIV prevention and care and the loss of primary care physicians and clinics which are relocating to more competitive markets drive up costs, create unequal access and increase health disparities.
- Societal challenges including **generational poverty, teen pregnancy, an aging population, crime, violence and increasing incarceration rates** negatively impact families. These issues disrupt family units, threaten the well-being of residents, destabilize communities and affect the health of current and future generations.
- **Illicit drug use and substance abuse**, including prescription drugs, threatens the well-being of individuals and increases violent crime and risky behaviors. The recent wave of state marijuana legalization may create confusion about the dangers and hazards associated with substance abuse.
- **Natural disasters, climate change, man-made environmental changes and the impact of human pollution on nature** threaten the well-being of our community. Tornado outbreaks,

flooding, fires, air and land pollution in residential communities increase the risk for disease and the need for emergency preparedness which strain financial resources for normal operations.



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## Forces of Change Assessment Appendix I

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### Forces of Change Assessment Subcommittee Roster:

Nan Priest, St. Vincent's Health System,  
Tracy Hipps, Christian Service Mission  
Sara Newell, United Way of Central Alabama  
Justin Smith, Jefferson County  
Carlos J. Torres-Sánchez, Jefferson County Department of Health

### Brainstorming Participants' Affiliation Roster:

	ORGANIZATION/AFFILIATION
1	Christian Service Mission
2	Community Foundation Greater Birmingham
3	Hunter Street Baptist Church
4	Public Health Network
5	United Way of Central Alabama
6	Alabama Public Television
7	Graymont Neighborhood Association
8	United Way of Central Alabama
9	City of Birmingham
10	Christian Service Mission
11	University of Alabama at Birmingham
12	Childcare Resources
13	Christian Service Mission
14	Aids Alabama
15	Aids Alabama
16	Mofon Leeds Holistic Health Center
17	Leeds/Moody Community Pres (PCA)
18	Children's Aid
19	The Bethesda
20	University of Alabama at Birmingham
21	Urban Hope Community Church
22	Urban Hope Community Church
23	Baptist Health System
24	American Red Cross
25	St. Vincent's Health System
26	Jefferson County Department of Health
27	University of Alabama at Birmingham
29	Addiction Prevention Coalition
30	Holy Family Cristo Rey High School
31	Hoover City Schools
32	University of Alabama at Birmingham
33	Mayor's Office – Birmingham
34	Bessemer City Schools
35	Greater Shiloh Baptist Church
36	Baptist Health System
37	Birmingham Dream Center

## Forces of Change Assessment Appendix II

Below are the notes from each discussion group at each of the Brainstorming sessions. The recorded comments are listed and color coded under every question, where clear is an opportunity, green and gray is both an opportunity and a threat, and gray is a threat.

### Brainstorming Session Input Group 1:

**Question 1: What has occurred recently that may affect our local public health system or the community?**

- Walkability to downtown
- Air quality improvement
- No-smoking laws
- New medicines and treatments
- Increase in transportation
- Increase in parks and walking trails
- Revitalization of downtown
- Increase in technology
- Change of address
- Mobility/Population shift "in and out"  
(Jefferson County losing population)
- More street drugs
- Misuse of prescription drugs
- Natural disasters
- Politics
- Closing of Cooper Green Hospital
- Aging population
- Increase in poverty
- Decrease in access to healthcare
- Young parents/teen pregnancy
- Unemployment
- Crime
- Recession
- Breakdown of family structure
- Loss of business headquarters from Birmingham
- Lack of education
- Distrust of healthcare systems

**Question 2: What may occur in the future?**

- Digital, portable medical history
- Bankrupt medical system
- Changing methods of communication
- Better transportation systems
- Better educational outcomes
- Enhanced science, technology, engineering and math knowledge
- Decrease in prevalence of cancers
- Increase in autism spectrum diagnoses
- Decrease in diabetes
- Decrease in heart disease
- Eradication of tobacco use
- Improved access for the differently-able
- More cooking at home
- Fewer food deserts
- Arrival of grocery stores downtown
- More sidewalks
- Improvements in air quality
- Increased emphasis on gardens and locally produced foods
- New treatments but higher costs
- Increased access to technology
- Increase of virtual medical information and diagnosis
- Natural disasters
- Loss of more business/headquarters
- Widening of health disparities driven by socioeconomic status
- New diseases and pandemics

**Question 3: Are there any trends occurring that will have an impact? Describe the trends.**

- Reduction of obesity (at least leveling)
- More access to technology/cellular devices
- More green spaces
- "No-Smoking" ordinances
- Car pooling

- Walking school buses
- Increased survival rates (birth, trauma, age)
- Changes in family composition and definition
- More telecommuting
- More freeways
- Decrease in face- to- face personal interactions

- Increased vision problems (and other problems related to use of electronic devices)
- Movement against inoculations (vaccines)
- Reduction in social intelligence
- Increase in Vitamin D deficiency

**Question 4: What forces are occurring locally? Regionally? Nationally? Globally?**

- Migration of African Americans from north to south
- Increased integration of demographic categories
- Influence of new (often global) businesses
- Shift in population – growth of percentage of people of color
- Increased awareness of health behaviors
- Increased nutritional information on menus

- Increased mass transit
- Population growth
- Sense of national identities changing
- Increased in “mega” city growth
- Brain-drain
- Increased polarization on basis of politics, religion and other
- Increased distrust of politicians/authorities
- Widening health economic disparities

**Question 5: What characteristics of our jurisdiction or state may pose an opportunity or a threat?**

- Rich natural resources
- Room for new leaders
- Fresh water
- Business growth
- Integration of medical services and the university to address community needs
- Enhanced educational resources
- UAB system as basis for shared medical information

- Increased home schooling
- Unethical leaders
- Outdated state constitution
- High dependence on public assistance
- Climate may be a barrier to exercise
- Failing educational systems
- Environmental pollution
- Decreased fitness standards at fitness courses

**Question 6: What may occur or has occurred that may pose a barrier to achieving the shared vision?**

- Poor educational outcomes
- Disparity of access to higher education
- Legacy of segregation
- Cultural components of eating/diet/food choices
- Social life organized around eating
- Social life not organized around physical activity (except football watching)

- Fragmentation –separate cities, school systems, makes it more difficult to organize
- Disconnection between groups of all types
- Cultural “blindness”
- Lack of mass transit
- Urban sprawl
- Lack of opportunities to come together

## Brainstorming Session Input Group 2:

**Question 1: What has occurred recently that may affect our local public health system or the community?**

- Railroad Park District Development
- Broadened scope of services of clinical nurse practitioners and prescriptive authority for more classes of medications
- Expansion of healthcare services to include mental health
- Increased access to counseling
- Broader health insurance availability
- Advances in technology have caused decrease in opportunities for people
- Lack of health insurance
- Lack of employment
- Tornadoes from "April's Fury"
- Cooper Green Hospital's closing
- Lack of infrastructure
- Flooding
- Ice storm
- Insufficient elder and pediatric care
- Explosion due to gas leak
- Last doctor leaving in Leeds
- Lack of transportation to and from healthcare facilities
- Home fires
- Regional Care Organizations/State legislation (healthcare)
- No Medicaid expansion
- Schools closing
- Lack of funding for road repair
- Businesses closing
- Lack of mass transportation
- Crime (tearing down, stealing, fighting teens)
- Consolidation of hospital services, potential to close services
- Lack of spiritual health

**Question 2: What may occur in the future?**

- Churches playing a role in providing healthcare for the community
- Economic growth and community development
- Senior citizens need to learn more about technology
- Urban renewal
- Economic disparities
- Closing schools in neighborhoods
- Taking away academic and athletic talent
- Teen pregnancy
- Cultural conflicts
- Revitalization of Carraway Hospital
- Demographic shifts

**Question 3: Are there any trends occurring that will have an impact? Describe the trends.**

- Renovation of housing communities
- More trade schools
- Increase in gun control
- Shift of consciousness about health in schools
- Efforts are too localized (city governments and organizations need to be more comprehensive)
- Creation of more local education systems -the resources are spread thin
- Low health literacy
- Lack of community identity
- Law is driving health policy
- Increase in the digital divide
- Low morale
- Worsening chronic conditions

**Question 4: What forces are occurring locally? Regionally? Nationally? Globally?**

- Affordable Care Act
- Increase funding for specialty academies
- Education for young people should be increased (science and math)
- Technology innovations that can impact homes 24 hours a day



- Adequacy of income, if not minimum wage, creates a standard on poverty policy to help understand poverty
- Increase in number of doctors being trained
- Reduction in obesity and adult medication issues among children
- Use of ICD-10 coding across the globe
- Need for a health bill of rights for prevention and wellness (some people oppose without presenting an alternative)
- Gun control
- Same sex marriages
- Forcing collaboration among healthcare providers and agencies

- Lack of compassion for others
- Polarization of parties
- Global economy inducing slave labor overseas
- Increase in incarceration (for-profit prisons)
- Military power is not enough to defend the country, focus outward
- Increase of "isms" and de-facto segregation
- Ignoring communities in need
- Manipulation of countries currency, business losses

**Question 5: What characteristics of our jurisdiction or state may pose an opportunity or a threat?**

- UAB
- Creation of strategic planning
- Strong community of faith
- Potential for impact of philanthropy
- Revitalization of Pratt City Community and Village Creek after flooding
- Technology innovation and Health Information Technology development
- Jobs and growth in manufacturing jobs
- Development of trail systems and pocket parks
- Regionalism
- Urban decline/rural poverty, income divide, de-facto segregation, growth of suburbs, suburban sprawl

- No confidence in Jefferson County leadership (Bankruptcy)
- Not having autonomy
- Unable to conduct business (license plates, need to upgrade technology)
- Poor finance (Businesses Closing)
- Zoning policies (Jim Crow/Black Laws)
- Lack of funding will cause pulling together of services (fire/police)
- Low level of education is a threat to development
- Dysfunctional local governmental structure

**Question 6: What may occur or has occurred that may pose a barrier to achieving the shared vision?**

- Lack of recognition and healing from racial history and the indifference of transplants to it.
- Divide between have and have nots
- Lack of knowledge of things that will help citizens strive for more
- Lack of personal affiliation (silos)
- Racisms and other "isms".
- Wasted opportunities to build economies of scale

- Crime
- Too much taxation
- Lack of transparency
- Clanism (families, churches, social groups)
- Lack of finding what we have in common
- Selfishness (hoarding information)
- Lack of mass transportation

- Disconnect between rural and urban parts of the city
- High wage post manufacturing era jobs
- Good old boy system
- Unwillingness to deal with causes of the immigration problems, avoidance of demographic change

## Brainstorming Session Input Group 3:

**Question 1: What has occurred recently that may affect our local public health system or the community?**

- Medicaid – Need for expansion
- Revitalization of Birmingham's downtown area
- Tobacco Free Legislation
- HIV testing in Emergency rooms
- Health Insurance changes
- Passing of HB-56 (Alabama's Immigration Law)
- Closure of clinics with Affordable Care Act given as a reason
- Policy Changes for the undocumented/underserved
- Legislative non-action
- Closure of Cooper Green Mercy Hospital

**Question 2: What may occur in the future?**

- More screening for early intervention in children
- Clarity of continuity helping people to learn how to navigate the system
- College age may see more care
- Aging population resulting in changes in needs
- Fewer people will seek treatment
- Higher out of pocket cost, deterring visits
- Need more mental health/drug prevention programs
- Need for bilingual providers/staff
- Increase in number of HIV cases in the 15 to 24 age group
- Less doctors leading to concern in access to healthcare
- Migration in and out of state
- Continued high pregnancy rates

**Question 3: Are there any trends occurring that will have an impact? Describe the trends.**

- State Pre-K program is a success
- Use of alternative medicine
- Screenings and prevention service coverage under the Affordable Care Act
- Healthcare awareness due to political dialogue
- Increase in health education
- 90,000 new covered lives in Alabama Marketplace Exchange (increase in healthcare capacity)
- Impact of Information Technology (IT) on healthcare (social media)
- Faith-based support leads to need to talk about real sexual issues
- Increase in HIV and STDs and pregnancies
- Increase in Homeless Lesbian, Gay, Bisexual, Transgender populations and questioning youth
- Fostering of Homeless youth that age out (Age 21)
- Political Uncertainty
- Increase in infectious diseases

**Question 4: What forces are occurring locally? Regionally? Nationally? Globally?**

- Slow food movement/ Nutrition
- "Let's Move" initiative
- Foundation's (philanthropic) emphasis on obesity and exercise

- National conversation about “what is family”
- Economic realignment based on health trends like CVS not selling cigarettes
- Increased regulations on imports
- Medicaid expansion

- Migrant Farm Workers – Regulatory Impact
- Vaccination Trends for HPV vaccine and Anti- Vaccine trends
- Undocumented individuals without access to coverage
- Political unrest and trade agreements

**Question 5: What characteristics of our jurisdiction or state may pose an opportunity or a threat?**

- Storms leading to community reinvestment
- State Pre-K/Early intervention is a positive influence that can expand
- Sex education is limited –although the law allows it
- Philanthropic/Giving Community
- Prepare the state’s infrastructure for national disasters
- Aversion to compromise
- Municipality silos
- Immigrants will not seek/ask for help due to fear
- The poor will not seek help
- State constitution

**Question 6: What may occur or has occurred that may pose a barrier to achieving the shared vision?**

- Acceptance of diversity
- Resources like 211 from United Way and 311 for the City of Birmingham
- Immigration reform
- Government
- Lack of collaboration – continued silos
- Cooper Green Hospital patients not having the right care, at the right place and at the right time,
- Flow of money
- Fragmented system requires redesign of the system for transportation, medical homes, Navigation
- Affordable Care Act creating confusion and preventing access

## Brainstorming Session Input Group 4:

**Question 1: What has occurred recently that may affect our local public health system or the community?**

- Mandated wellness in schools
- City's IBM Innovation Grant
- Red Rock Trail System
- Faith-based groups involved in health issues
- Smoke Free policies
- Jefferson County's exiting bankruptcy
- Birmingham Department of Youth Services – comprehensive programs
- Church involvement in low income areas
- Affordable Care Act
- Legislative impact
- Increase in heroine use
- Closure of Cooper Green Hospital
- Weak economy leading to job losses
- Lack of Access to mental health
- Legalization of marijuana – public perception, availability

**Question 2: What may occur in the future?**

- Increased focus on mental health and early age intervention
- Increased access to neighborhood health services
- Social and health strategies to replace law enforcement intervention
- Increased utilization of preventive/wellness resources
- Revitalization of downtown
- Increased emphasis on physical activity/development of trails and parks
- Urban renewal – filling in doughnut holes
- Increased recognition of link between poverty and health
- Health/Social services in community centers
- Increased knowledge and ownership by citizens of community health
- Ecumenical covenant to promote justice and health
- Shortage of primary care physicians
- Increase in drug use/AIDS and limited access to treatment

**Question 3: Are there any trends occurring that will have an impact? Describe the trends.**

- Leveling of childhood obesity
- Mobile food trucks
- Frustration with Government/National and County
- Minority Children becoming majority
- Social Media Impact
- Drug distribution routes and outcomes on community
- Immigrants' inability to access care
- Long term unemployment – impact diet and access to care
- Growing gap between “techie” and technology
- Decrease in food stamp programs creates food insecurity

**Question 4: What forces are occurring locally? Regionally? Nationally? Globally?**

- Foundation's focus on outcomes
- Force of engagement to faith-based resources vs Government resources
- Increased appreciation of different cultures
- Drug policy changes
- Education shift in focus, impact globally –mentality of take test vs think
- Significant change in healthcare reimbursement
- Decreasing world economy
- Social media masks reality of social needs and conditions
- Increase in prison populations leading to demographic trends
- Losing ability for verbal communication
- Affluence counters living simply and simply living

**Question 5: What characteristics of our jurisdiction or state may pose an opportunity or a threat?**

- Coalitions leading to new work
- Diversity
- Corporate Change from ROI to ROSI
- Corporate Economic Development
- Federal Marketplace/Exchange
- State religiosity
- Revitalization of Downtown – Bridge Divide
- Redistricting
- Geographic size
- Transportation is inadequate
- Territorial non-profit organizations (17,000 registered in the state)
- Lack of access to grocery stores and health facilities
- Inequity of education with many independent systems
- Greater divide socio-economically
- Jefferson County has I-20/59 corridor used for human trafficking and drug trafficking
- Disappearance of Town Hall
- No Medicaid expansion

**Question 6: What may occur or has occurred that may pose a barrier to achieving the shared vision?**

- Socio-economic divide
- Geographic sprawl
- Competition for limited dollars
- Continued educational disparity
- Lack of experience of achieved goals
- Disconnect between resource rich strong medical hub but poor outcomes
- Food deserts and lack of access to healthy food

## Brainstorming Session Input Group 5:

**Question 1: What has occurred recently that may affect our local public health system or the community?**

- Influx of Latino and Spanish speaking populations and the lack of preparedness by the public health system (lack of interpreters and other language services)
- Trends toward wellness and health in the city (walking trails, etc.)
- Growth of international population; third fastest growing in the nation
- Dependence on food services
- Strong United Way and Community Foundation Women's Fund
- Very giving community
- Birmingham Jefferson County Transit System expanded routes to include more hospitals and clinics
- Closing of Cooper Green Mercy Hospital and urgent care model
- Jefferson County bankruptcy
- Primary care doctors maxing out, not accepting Medicaid and Medicare patients
- Health care reform, yet no Medicaid expansion
- Birmingham City School consolidation and state level changes affecting local systems
- People dying in the county
- Exacerbates racial disparities

## Question 2: What may occur in the future?

- Increase in diversity due to economic opportunities coming to the area
- Better measurement and evaluation of progress/success
- Increased technology usage, for example in education
- Policy changes in healthcare, new opportunities for public health's role
- Local policy change –focus on implementing and sustaining change in the built environment
- Businesses/employers promote health and wellness to keep cost down
- Technology will create an environment that modifies process of engagement
- Aging population
- Lack of readiness/resources to help with the aging population
- Climate change
- Lack of young people getting “why health is important?”
- Economy will get worse before it gets better (hours cut for employees)

## Question 3: Are there any trends occurring that will have an impact? Describe the trends.

- Wellness trend to get people more active
- Cultural melting within the community, and the community speaking for itself
- Tobacco free environments, changing social norms
- Growing faith leadership and the community around health
- Going back to creating a sense of community, community empowerment, “my brother’s keeper”
- Not seeing physicians, but mid-level professionals, ex. nurse practitioners, physician’s assistants
- Rise in foster care families
- Organizations are beginning to address issues besides healthcare, organizing at the community level and speaking on their own behalf
- Generational poverty is not changing
- Pull from rural to city center
- Food supply a problem with genetically modified foods
- Increase in chronic disease and disabilities
- Child obesity trends are unclear
- Increasing cost of higher education
- Increase of attention deficit diagnosis and lack of effective treatment

## Question 4: What forces are occurring locally? Regionally? Nationally? Globally?

- National public health model leading to policy changes in PRC to connect resources in the community that impact community engagement
- Increase in National funders in the South, are we positioned well?
- President’s stance on health issues has elicited conversation in every aspect
- Conversation around the US President is creating more dialogue among citizens
- Conversation has changed; for example, environmental change
- Patients’ sharing of their experiences with each other online affects the care they get locally in a positive manner
- Public and private funders looking for ways they can help without grant funds
- Conversation about obesity has increased
- Change in social network of the country
- Growing use of technology for communication

- Media providing instant information as it happens
- Legalization of marijuana
- Trickle-down effect of political conversation may affect county negatively
- Lack of funding for programs and research in the southern region
- Natural disasters - not enough disaster preparedness and response
- State's Governor does not care about poor or unhealthy people
- Difficult to get matching funds because local funds are not available

**Question 5: What characteristics of our jurisdiction or state may pose an opportunity or a threat?**

- Most philanthropic city in country
- Increase in faith- based and for- profit collaborations
- Resource clearing house
- Healthcare reform will change more
- Rural and urban understanding and partnership around health
- Lack of adequate education/educational systems locally and state-wide
- People feeling as if they cannot depend on public transit
- Trust in local and state government (lack of trust on all sides)
- Nutrition in school systems is lacking
- Lack of community investing in itself
- Lack of healthy nutrition in prison system
- Fragmented non-profit system, competing with each other and sometimes duplicating efforts
- Lack of leadership to bring groups together
- History of racism
- Not preparing for future natural disasters
- Programs not penetrating targeted communities - be intentional with public health and design measurable plans
- Increase in chronic illness and behavioral issues

**Question 6: What may occur or has occurred that may pose a barrier to achieving the shared vision?**

- Lack of educational achievement
- Food desert issues need to be addressed
- Lack of positive feedback- what's right about individuals should be celebrated
- HB 56 Legislation, immigration law, affect economy and education
- Mindset and makeup of the state government
- Lack of shared communities
- Unequal distribution of resources between urban and rural areas
- Education system segmented based on income
- Privatization of the governance of the country, capitalist forces controlling government
- History of industrial pollution





## Forces of Change Assessment Appendix III Brainstorming Sessions Results Compilation

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All forces of change, including strengths, weaknesses or both.

The recorded comments are listed and color coded where clear is an opportunity, green and gray is both an opportunity and a threat, and gray is a threat.

### Strengths:

- Air quality improvement
- “Walkability” to downtown
- No-smoking laws
- New medicines and treatments
- Increase in transportation
- Increase in Parks and walking trails
- Revitalization of downtown
- Digital, portable medical history
- Changing methods of communication
- Better transportation systems
- Better educational outcomes
- Enhanced STEM knowledge
- Decrease in prevalence of cancers
- Increase in autism spectrum diagnoses
- Decrease in diabetes
- Decrease in heart disease
- Eradication of tobacco use
- Improved access for the differently-able
- More cooking at home
- Fewer food deserts
- Arrival of grocery stores downtown
- More sidewalks
- Improvements in air quality
- Increased emphasis on gardens and locally produced foods
- Reduction of obesity (at least leveling)
- More access to technology/cellular devices
- More green spaces
- “No-Smoking” ordinances
- Car pooling
- Walking school buses
- Increased survival rates (birth, trauma, age)
- Migration of African Americans from north to south
- Increased integration of demographic categories
- Influence of new (often global) businesses
- Shift in population – growth of percentage of people of color
- Increased awareness of health behaviors
- Increased nutritional information on menus
- Increased mass transit
- Population growth
- Sense of national identities changing
- Rich natural resources
- Room for new leaders
- Fresh water
- Business growth
- Integration of medical services and the university to address community needs
- Enhanced educational resources
- UAB system as basis for shared medical information
- Railroad Park District Development
- Broadened scope of services of Clinical Nurse Practitioners and ability to prescribe of more classes of medication
- Expansion of healthcare services to include mental health
- Increased access to counseling
- Broader health insurance
- Churches playing a role in providing healthcare for the community
- Economic growth and community development
- Senior Citizens need to learn more about technology
- Urban renewal
- Renovation of housing communities
- More trade schools
- Increase in gun control
- Shift of consciousness about health in schools
- Affordable Care Act
- Increased funding for specialty academies

- Education for young people should be increased (science and math)
- Technology innovations that can impact homes 24 hours a day
- Adequacy of income, if not minimum wage, create a standard on poverty policy to help understand poverty
- Increase in number of doctors being trained
- Reduction in obesity and adult medication issues among children
- Use of ICD-10 coding across the globe
- Need for a health bill of rights for prevention and wellness (some people oppose without presenting an alternative)
- Gun control
- Same sex marriages
  - Forcing collaboration among healthcare providers and agencies UAB
- Creation of strategic planning
- Strong community of faith
- Potential for impact of philanthropy
- Revitalization of Pratt City Community and Village Creek after flooding
- Technology innovation and Health Information Technology development
- Jobs and growth in manufacturing jobs
- Development of trail systems and pocket parks
- Medicaid – Need for expansion
- Revitalization of Birmingham Downtown area
- Tobacco Free Legislation
- HIV testing in Emergency rooms
- More screening for early intervention in children
- Clarity of continuity helping people to learn how to navigate the system
- College aged persons may see more care
- State Pre-K program is a success
- Use of alternative medicine
- Screenings and prevention service coverage under the Affordable Care Act
- Healthcare awareness due to political dialogue
- Increase in health education
- Slow food movement/ nutrition
- “Let’s Move” initiative
- Foundation’s (philanthropic) emphasis on obesity and exercise
- National conversation about “what is family”
- Economic realignment based on health trends like CVS not selling cigarettes
- Increased regulations on imports
- Storms leading to community reinvestment
- State Pre-K/Early Intervention is a positive influence that can expand
- Sex education is limited –although the law allows it
- Philanthropic/Giving Community
- Prepare the state – infrastructure for National disasters
- Acceptance of diversity
- Resources like 211 from United Way and 311 for the City of Birmingham
- Mandated wellness in schools
- City’s IBM Innovation Grant
- Red Rock Trail System
- Faith-based groups involvement in health issues
- Smoke Free policies
- Jefferson County exiting bankruptcy
- Birmingham Department of Youth Services – Comprehensive programs
- Church involvement in low income areas
- Increased focus on mental health and early age intervention
- Increased access to neighborhood health services
- Social and health strategies to replace law enforcement intervention
- Increase utilization of preventive/wellness resources
- Revitalization of downtown
- Increased emphasis on physical activity/development of trails and parks

- Urban renewal – filling in doughnut holes
- Increased recognition of link between poverty and health
- Health/Social services in community centers
- Increased knowledge and ownership by residents of community health
- Ecumenical covenant to promote justice and health
- Leveling of childhood obesity
- Foundation's focus on outcomes
- Force of engagement to Faith-Based resources vs Government
- Increased appreciation of different cultures
- Coalitions leading to new work
- Diversity
- Corporate Change from ROI to ROSI
- Corporate economic development
- Federal Marketplace/Exchange
- Trends toward wellness and health in the city (walking trails, etc)
- Growth of international population; third fastest growing in the nation
- Dependence on food services
- Strong United Way, Community Foundation and Women's Fund
- Very giving community
- Birmingham Jefferson County Transit System's expanded routes to include more hospitals and clinics
- Increase in diversity due to economic opportunities coming to the area
- Better measurement and evaluation of progress/success
- Increased use of technology, for example in education
- Policy changes in healthcare, new opportunities for public health's role
- Local policy change –focus on implementing and sustaining change in the built environment
- Businesses/employers promote health and wellness to keep cost down
- Wellness trend to get people more active
- Cultural melting within the community, and the community speaking for itself
- Tobacco free environments, changing social norms
- Growing faith leadership around health
- Going back to creating a sense of community, community empowerment, "my brother's keeper"
- Not seeing physicians, but mid-level professionals, for example nurse practitioners and physician's assistants
- Rise in foster care families
- Organizations are beginning to address issues beside healthcare, organizing at community level and speaking on their own behalf
- National public health model leading to policy changes in PRC to connect resources in the community that impact community engagement
- Increase in National funders in the South, are we positioned well?
- President's stance on health issues has elicited conversation in every aspect
- Conversation around the US President is creating more dialogue among citizens
- Conversation has changed; for example, environmental change
- Patients sharing experiences with each other online affects the care patient receive locally in a positive manner
- Public and private funders looking for ways they can help without grant funds
- Conversation about obesity has increased
- Change in social network of the country
- Growing use of technology for communication
- Media providing instant information as it happens
- Most philanthropic city in the country
- Increase in faith- based and for- profit collaborations
- Resource clearing house
- Healthcare reform will change more

- Rural and urban understanding and

partnership around health

## Strengths and Weaknesses at the same time:

- Increase in technology
- Change of address
- Mobility/Population shift "in and out"
- New treatments but higher costs
- Increased access to technology
- Increase of virtual medical information and diagnosis
- Changes in family composition and definition
- More telecommuting
- Increased in "mega" city growth
- Increased home schooling advances in technology have caused
- Health insurance changes
- Aging population resulting in changes in needs
- 90,000 covered through Alabama Marketplace Exchange (increase in healthcare capacity)
- Impact of Information Technology (IT) on healthcare (social media)
- Influx of Latino and Spanish speaking populations and the lack of preparedness by the public health system (lack of interpreters and other language services)
- Medicaid Expansion
- Faith-based support leads to need to talk about real sexual issues impacting the community
- Migrant Farm Workers – Regulatory Impact
- Vaccination trends for HPV vaccine
- Immigration reform
- Affordable Care Act
- Legislative impact
- Mobile food trucks
- Frustration with Government/National and County
- Minority Children becoming majority
- Social Media impacts on drug policy changes
- Education shift in focus, impact globally –mentality of take test vs think
- Significant change in healthcare reimbursement
- State religiosity
- Revitalization of Downtown –Bridge Divide
- Tech will create an environment that pulls from public health will drive overhaul of process of engagement

## Weaknesses:

- More street drugs
- Misuse of prescription drugs
- Natural disasters
- Politics
- Closing of Cooper Green Hospital
- Aging population
- Increase in poverty
- Decrease in access to healthcare
- Young parents/teen pregnancy
- Unemployment
- Crime
- Recession
- Breakdown of family structure
- Loss of business headquarters from Birmingham
- Lack of education
- Natural disasters
- Loss of more businesses/headquarters
- Lack of educational achievement
- Lack of positive feedback - what's right about individuals should be celebrated
- Food deserts
- Widening of health disparities driven by socioeconomic status

- New diseases and pandemics
- More freeways
- Decrease in face-to-face personal interactions
- Increased vision problems (and other problems related to use of electronic devices)
- Movement against inoculations (vaccines)
- Reduction in social intelligence
- Increase in Vitamin D deficiency
- \ Ice storm
- Insufficient elder and pediatric care
- Explosion due to gas leak
- Last doctor leaving in Leeds
- Lack of transportation to and from healthcare facilities
- Home fires
- Regional Care Organizations/State legislation (healthcare)
- No Medicaid expansion
- Schools closing
- Lack of funding for road repair
- Businesses closing
- Lack of mass transportation
- Crime (tearing down, stealing, fighting teens)
- Consolidation of hospital services, potential to close services
- Lack of spiritual health
- Brain-drain
- Increased polarization on basis of politics, religion and other factors
- Increased distrust of politicians/authorities
- Widening health economic disparities
- Unethical leaders
- Outdated state constitution
- High dependence on public assistance
- Climate may be a barrier to exercise
- Failing educational systems
- Environmental pollution
- Decreased fitness standards at fitness courses
- Poor educational outcomes
- Disparity of access to higher education
- Legacy of segregation

- Cultural components of eating/diet/food choices
- Social life organized around eating
- Social life not organized around physical activity (except football watching)
- Fragmentation –separate cities and school systems makes it more difficult to organize
- Disconnection between groups of all types
- Cultural “blindness”
- Lack of Mass Transit
- Urban sprawl
- Lack of opportunities to come together
- Lack of health insurance
- Lack of employment
- Tornados from “April’s Fury”
- Cooper Green Hospital’s closing
- Lack of infrastructure
- Flooding
- Economic disparities
- Closing schools in neighborhoods
- Taking away academic and athletic talent
- Teen pregnancy
- Cultural conflicts
- Revitalization of Carraway Hospital
- Demographic shifts
- Efforts are too localized (city governments and organizations need to be more comprehensive)
- Creation of more local education systems, resources spread thin
- Low health literacy
- Lack of community identity
- Law is driving health policy
- Increase in the digital divide
- Low morale
- Worsening chronic conditions
- Lack of compassion for others
- Polarization of parties
- Global economy inducing slave labor overseas
- Increase in incarceration (for-profit prisons)
- Military power- not enough to defend the country

- focus outward
- Increase of “isms” and de-facto segregation
- Ignoring communities in need
  - Manipulation of countries currency,
  - Business losses Regionalism
  - Urban decline/rural poverty
  - Income divide
  - De-facto segregation
  - Growth of suburbs, suburban sprawl
  - No confidence in Jefferson County leadership (Bankruptcy)
  - Not having autonomy
  - Unable to conduct business (license plates -need to upgrade technology
  - Poor finance (Businesses closing)
  - Zoning policies (Jim Crow/Black Laws)
  - Lack of funding will cause pulling together of services (fire/police)
  - Low level of education is a threat to development
- Dysfunctional local government structure
- Lack of recognition and healing from racial history and indifference of transplants to it.
- Divide between the have and have nots
- Lack of knowledge of things that will help citizens strive for more
- Lack of personal affiliation (silos)
- Racisms and other “isms”
- Wasted opportunities to build economies of scale
- Crime
- Too much taxation
- Lack of transparency
- Clanism (families, churches, social groups)
- Lack of finding what we have in common
- Selfishness (hoarding information)
- Lack of mass transportation
- Disconnect between rural and urban parts of the city
- High- wage post- manufacturing era jobs
- Good old boy system

- Unwillingness to deal with causes of the immigration problems, avoidance of demographic change Passing of HB-56 (AL Immigration Law)
- Closure of clinics with Affordable Care Act given as a reason
- Policy Changes for the undocumented/underserved
- Legislative non-action
- Closure of Cooper Green Hospital
- Fewer people will seek treatment
- Higher out of pocket cost is deterring visits
- Need more mental health/drug prevention programs
- Need for bilingual providers/staff
- Increase in number of HIV cases in 15 to 24 year old age group
- Less doctors leading to concern for access to healthcare
- Migration in and out of state
- Continued high pregnancy rates
- Increase in HIV and STDs and pregnancies
- Increase in Homeless Lesbian, Gay, Bisexual, Transgender populations and questioning youth
- Fostering of Homeless youth that age out (Age 21)
- Political uncertainty
- Increase in infectious diseases
- Undocumented without access to coverage
- Political unrest and trade agreements
- Aversion to compromise
- Municipality silos
- Immigrants will not seek/ask for help due to fear
- The poor will not seek help
- State constitution and government
- Lack of collaboration – continued silos
- Cooper Green Hospital patients not having the right care, at the right place and at the right time,
- Flow of money

- Fragmented system requires redesign of the system for transportation, medical homes, Navigation
- Affordable Care Act creating confusion and preventing access
- Increase in heroine use
- Closure of Cooper Green Hospital
- Weak economy leading to job losses
- Lack of access to mental health
- Legalization of marijuana – public perception, availability
- Shortage of primary care physicians
- Increase in drug use and AIDS, limited access to treatment, drug distribution routes and the outcomes of these on the community
- Immigrants inability to access care
- Long term unemployment impact diet and access to care
- Growing gap between “techies” and technology
- Decrease in food stamp programs creates food insecurity
- Decreasing world economy
- Social media masks reality of social needs and conditions
- Increase in prison populations leading to demographic trends
- Losing ability for verbal communication
- Affluence counters living simply and simply living redistricting
- Geographic size
- Transportation is inadequate
- Territorial non-profit organizations (17,000 registered in the state)
- Lack of access to grocery stores and health facilities
- Inequity of education with many independent systems
- Greater divide socio-economically
- Jefferson County has I-20/59 corridor used for human trafficking and drug trafficking
- Disappearance of Town Hall
- No Medicaid expansion
- Socio-economic divide
- Geographic sprawl

- Competition for limited dollars
- Continued educational disparity
- Lack of experience of achieving goals
- Disconnect between having a resource rich, strong medical hub and poor health outcomes
- Food deserts and lack of access to healthy food
- Closing of Cooper Green Hospital and urgent care model
- Jefferson County’s bankruptcy
- Primary care doctors maxing out, not accepting Medicaid and Medicare patients
- Health care reform yet no Medicaid expansion
- Birmingham City School consolidation and state level changes affecting local systems
- People dying in the county
- Exacerbates racial disparities
- Aging population
- Lack of readiness/resources to help with the aging population
- Climate change
- Lack of young people getting “why health is important?”
- Economy will get worse before it gets better (hours cut for employees)
- Generational poverty is, not changing
- Pull from rural to city center
- Food supply is a problem with genetically modified foods
- Increase in chronic disease and disabilities
- Child obesity trends are unclear
- Increasing cost of higher education
- Increase of attention deficit diagnosis and inadequate treatment options
- Legalization of marijuana
- Trickle-down effect of political conversation may affect county negatively
- Lack of funding for programs and research in the Southern region
- Natural disasters, not enough disaster preparedness and response

- State's Governor does not care about the poor or unhealthy people
- Difficult to get matching funds because local funds are not available
- Lack of adequate education/educational systems locally and throughout the state
- People feeling as if they cannot depend on public transit
- Lack of trust in local and state government
- Nutrition in school systems is lacking
- Lack of the community investing in itself
- Lack of healthy nutrition in the prison system
- Fragmented non-profit systems competing with each other and sometimes duplicating efforts
- Lack of leadership to bring groups together
- History of racism

- Not preparing for future natural disasters
- Programs not penetrating targeted communities – there is a need to be intentional with public health and design measurable plans
- Increase in chronic illness and behavioral issues
- HB 56 Legislation, immigration law, affect economy and education
- Mindset and makeup of the state government
- Lack of shared communities
- Unequal distribution of resources between urban and rural areas
- Education system segmented based on income
- Privatization of the governance of the country, capitalist forces controlling government
- History of industrial pollution



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