



# UNDER ONE ROOF

**W**omen in Boston's Dorchester neighborhood will no longer have to trek to separate locations throughout the city for the social and health services they need. Caritas Christi, the health system sponsored by the Archdiocese of Boston, is offering an array of health and human services for women and children in a former hospital building, and it has invited independent providers to share the space.

The health system's goals for creating St. Mary's Women and Infants Center are twofold: to provide services for at-risk women, infants, and children and to provide them on the former hospital's site to help strengthen the neighborhood's economic viability.

In an area plagued by social problems such as homelessness, chronic poverty, alcohol and drug addiction, and physical and sexual abuse, the provision of services under one roof can help give women the coordinated support they need to overcome unlivable situations.

## ST. MARY'S INCEPTION

St. Mary's Women and Infants Center came into being in July 1993 when St. Margaret's Hospital for Women, a regional perinatal referral center with a reputation for excellence in high-risk obstetrics and neonatal intensive care, moved to St. Elizabeth's Medical Center of Boston. Both facilities belong to Caritas Christi.



*Mr. Ingala is president, Publicity, Inc., Boston.*

*Program in  
Former  
Hospital  
Pulls  
Together  
Social,  
Residential,  
and Health  
Services*

BY NICHOLAS J.  
INGALA II

Integral to that move was a commitment by the archdiocese to maintain healthcare services for at-risk women, infants, and children at the former St. Margaret's Hospital site. On the day patients were transferred to the new maternity service at St. Elizabeth's, St. Mary's Women and Infants Center opened its doors.

Gradually the center added residential capacity and program services and began coordinating health and social services with campus tenants (see **Box**). According to St. Mary's president and CEO, Joyce A. Murphy, this collaborative arrangement has resulted in synergy among providers that benefits the community's at-risk populations and preserves the economic benefits

**Summary** Poverty, drug abuse, lack of prenatal and primary care, and lack of skills to find a job or run a household dog the heels of those who live in Boston's Dorchester neighborhood. These problems prompted the Caritas Christi Health System, sponsored by the Archdiocese of Boston, to shed its acute care mentality and begin building a service mix that responds to the needs of the neighborhood beyond healthcare, including maintaining a physical presence in the neighborhood itself.

To accomplish its vision, the health system folded the services of St. Margaret's Hospital for Women into St. Elizabeth's Medical Center of Boston and turned the St. Margaret's building into a campus for interdependent services, some of which are funded by the health system and some of which are funded by government or other sources. The result is St. Mary's Women and Infants Center, which not only gives each of those agencies a presence in the neighborhood they serve, but has the more important benefit of coordinating services for people with multiple needs.



associated with the former hospital's campus (e.g., the center employs 250 people).

### A NEIGHBORHOOD OF NEEDS

St. Mary's Women and Infants Center is located in one of the poorest sections of Boston, a culturally diverse area called Jones Hill in the Dorchester neighborhood. The population is 49 percent African American, 32 percent white, 15 percent Hispanic, and 4 percent Asian.

The area has a high percentage of women of childbearing age and the highest infant mortality rate in Boston. Twenty-six percent of its population live below the poverty line, with a median income 35.5 percent below that of households statewide. Twenty-five percent are women between the ages of 15 and 44. According to Boston's Department of Health and Hospitals, in neighborhoods surrounding St. Mary's in 1992, 19 of every 1,000 African-American babies died before age one, whereas 6 of every 1,000 white babies died before age one.

### ST. MARY'S RESPONDS

St. Mary's Women and Infants Center was developed, Murphy says, as a community program, with community residents, city leaders, the archdiocese, and public and private health and social services agencies participating on various planning committees. By developing a facility that responds to changing community needs, St. Mary's is a model for how hospitals that close can maintain their healthcare presence in the community, explains Michael F. Collins, MD, president of Caritas Christi. He adds that St. Mary's also fulfills the Catholic healthcare mission of providing care from the moment of conception and attending to the marginalized in society.

St. Mary's Women and Infants Center comprises three distinct programs: St. Mary's Home, Margaret's House, and Bridge Home. St. Mary's Home and Margaret's House offer residential and healthcare services for women and their children, along with education on parenting, health and safety, home management, and family life skills. Both programs also include case coordination and referrals to outside services. Bridge Home offers short-term residential services for children in custody of the Department of Social Services. *Counseling, healthcare, recreation, and therapeutic activities* are among the services provided to children at Bridge Home.

About 120 women, infants, and children are in residence every day at the center. The average stay for families is 4 to 6 months.

Major funding comes from the Massachusetts Department of Transitional Assistance, the

Synergy  
among  
providers  
benefits the  
community's  
at-risk  
population.

Massachusetts Department of Social Services, and the U.S. Department of Housing and Urban Development. Other supporters include the Archdiocese of Boston, corporations, foundations, Catholic parishes, and individuals.

"Because our financial resources are limited," Murphy says, "we have developed a multiservice campus where tenants benefit from being located on the site, and the site benefits from tenants contributing to facility costs."

### INTERDEPENDENT TENANTS

The benefits of cooperation among tenants, according to Murphy, are illustrated by the Horizons Initiative Community Children's Center, the only child care center in Boston specifically for homeless children and their families. When a battered woman seeks shelter at St. Mary's residence, she may enroll her children in

## ST. MARY'S TENANT PARTNERS

**Boston Institute for Arts Therapy**, a mental health agency that provides art, music, and dance therapy in clinical treatment with at-risk children, teens, and adults

**Boston Public Schools**, accredited classes and individual tutorials, offered by staff from St. Mary's Alternative School and two full-time educators

**Center for Community Responsive Care**, a not-for-profit agency merging medicine and public health in response to community need through education, training, research, and services

**Cornerstone**, a 15-bed residential program for female adolescents in the care of the Department of Youth Services

**Federated Dorchester Neighborhood Houses, Inc.**, six member houses and three programs that act as community-based support agencies, serving more than 38,000 families

**HOPE New England, Inc.**, coordinated in-home healthcare (up to three years) for residents of St. Mary's after discharge to permanent community-based housing

**The Horizons Initiative and Community Children's Center**, a comprehensive child care and support program for 75 children (three months to six years) and families who are homeless

**Parker Street West**, transitional housing and services for 20 homeless women operated by the Department of Mental Health Homeless Services Unit of Metro Boston

**St. Margaret's Clinic at Jones Hill**, outpatient health services, including perinatal, gynecology, well-baby care, maternal fetal medicine, ultrasound, and mammography, operated by St. Elizabeth's Medical Center

**United Homes for Children**, specialized foster care placement for children with emotional and physical disabilities



day care. In turn, the children's center has access to meeting space, catering services, and administrative services.

Another example of collaboration, Murphy says, is St. Margaret's Clinic at Jones Hill. Operated by St. Elizabeth's Medical Center, the clinic offers St. Mary's and community residents comprehensive outpatient health services, from prenatal care and maternal/child healthcare to mammography and routine gynecological care. A social worker, a nutritionist, and several midwives work with physicians at the clinic. Additional services and physician referrals are available at St. Margaret's Center for Women and Infants at St. Elizabeth's, and the clinic arranges for free transportation to St. Elizabeth's.

Clinic nurses also provide health services to campus tenants. Clients of Cornerstones, a residential program for teenage girls funded by the Massachusetts Department of Youth Services, previously were sent to area emergency rooms for routine health concerns. Now that Cornerstones is on campus, its clients receive daily health screenings from a clinic nurse, who also deals with any health problems that arise.

"St. Mary's," Murphy observes, "has realized its vision of offering a continuum of care model and multiservice center where providers can share space and collaborate with colleagues committed to the same population and where clients can receive several services under one roof."

#### SAFETY NET

Collaboration among St. Mary's and its tenants, Murphy says, is best understood and appreciated through the stories of those who have been helped, and "there are no easy cases." "An example," she says, "is a 17-year-old pregnant teen who had been placed in Department of Youth Services custody after being convicted of assault and battery. She was referred to us by Cornerstones."

The young woman is pregnant with her first child. She came from a troubled family, with an absent father and a mother who has not seen her daughter in years and mentally abused her when she did. She was raised in her grandmother's home, where she was physically and sexually abused by an uncle who also lived there. The baby's 22-year-old father has had little contact with the woman. After the baby is born, Conroy explains, St. Mary's will arrange for child care so this young woman can continue attending high school.

In another case, a 28-year-old homeless, mentally ill woman was being cared for by Parker Street West. She was pregnant, but lacked parent-

The homeless, mentally ill woman came to live at Saint Mary's with her three-day-old baby and has adapted well to the residential program.

ing skills and was taking large doses of medication to control her mental health problem. Along with her mental illness, the woman was a drug abuser and a gambling addict. She came to live at St. Mary's with her three-day-old baby and has adapted well to the residential program.

St. Mary's helped her work through her problems. She has bonded beautifully with her baby, Murphy says, and has done a good job taking care of the baby throughout her stay. Working with her case worker from the Department of Mental Health and St. Mary's case management team, she found permanent placement in an independent living model, where several families are watched over by a Department of Mental Health staff person. She left St. Mary's with her baby and will be referred to HOPE New England for follow-up.


Domestic violence is another problem for which women are referred to St. Mary's. One pregnant woman in her early twenties, upon fleeing her home after yet another beating from her husband, reached St. Margaret's Clinic, where staff found, in addition to her injuries, that the woman had had no prenatal healthcare. The clinic's social worker referred her to St. Mary's, where she lived and received the proper healthcare, nutritional meals, and other services. While she worked on the situation with her husband, St. Mary's helped her find permanent housing.

#### "NEW LIFE STILL BECKONS"

The stories of these women show the great need for St. Mary's services, according to Murphy. The support of government, business, individuals, and the Catholic Church in Boston offers hope these services will continue.

"Today we hear a great deal about family preservation and reunification," she says. "But stresses on family life, exacerbated in recent years, are enormous, particularly for victims of domestic violence, neglect, and poverty. St. Mary's helps by intervening in the lives of young women and their families before it's too late, joining together to achieve not only a healthy pregnancy and a healthy baby, but also a healthy future."

The *Boston Globe* commented on that future in an editorial that appeared July 20, 1993, just after St. Mary's opened: "The new range of services for fragile families makes sense at a time when nearly a quarter of the nation's unmarried women become mothers. New life still beckons on Jones Hill." □

 For more information, call Maura G. Lynch, director of public relations, 617-436-8600, ext. 491.