

Protests erupt over lack of emergency medical care in Chicago

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The violence in Chicago, which has recently gained national attention due to a spike in homicides last year, has also prompted protests calling for the reinstatement of adult trauma care at the University of Chicago Medical Center. The center is on the city's South Side, where much of the violence is concentrated, and which currently lacks a dedicated trauma facility.

The lack of trauma care on the South Side is part of a deliberate policy stretching over several decades to dismantle all of the social gains of the working class.

Access to care for severe injuries is underreported. In 2011, a National Institute of Health study showed that just 67 percent of people living in urban areas had "easy access" to trauma care, compared with 12 percent who had difficult access. Rural areas are even worse off, with only 24 percent of people having "easy" access to trauma care, and 31 percent having difficult access. More than 38 million people in the US do not have access to trauma care within an hour's driving time.

Hospitals with Level 1 trauma centers offer 24/7 care with highly specialized staff prepared to treat the most life-threatening conditions. This requires constant staffing by the most advanced medical specialists, who require years of intensive training. Patients in need of trauma care tend to come from poorer areas and often lack health insurance. For these reasons, hospitals increasingly consider trauma centers expensive and a drain of profits.

As a result, several hospitals in Chicago—for-profit and not-for-profit—have closed their trauma centers, creating a stark inequality in access to care. There are six hospitals in Chicago's trauma care network, four in the city, and two in nearby suburbs. Five of these six are in the west, northwest, and north sides of the city, between 1 and 3 miles from all of the highest income

neighborhoods in Chicago. Ambulance trips from these neighborhoods average less than ten minutes.

The remaining hospital, Advocate Christ on the southwest side in suburban Oak Lawn, is the only remaining Level 1 trauma center in the southern region of the city. As a consequence, neighborhoods like Woodlawn, Fuller Park and Englewood, among the poorest in the city, are 9 to 10 miles from the nearest Level 1 trauma center. Ambulance times average 20 minutes or more, depending on the area, to reach the hospital.

The effect of trauma center closings was tragically demonstrated in 2010, when Damian Turner, an 18-year-old youth activist, was shot within several blocks of the University of Chicago Medical Center (UCMC). Because its trauma center is only for children 16 and under, Turner was instead taken on a 27 minute ambulance ride to Northwestern Memorial hospital, where he died of his wounds 90 minutes after the shooting.

Previously, there were two hospitals on the south side that offered Level 1 trauma services. The trauma unit at the University of Chicago Medical Center maintained an adult trauma unit for two years, but closed it in 1988. Many patients were then taken to Michael Reese Hospital, a few miles north. Reese closed its trauma center in 1990. In 2008, the owners of Reese, a for-profit hospital, closed it completely, citing financial losses.

The UCMC has for many years sought to further reduce the expenses stemming from emergency services. Under board chairman Valerie Jarrett, now special advisor to President Obama, and Vice President for Community and External Affairs Michelle Obama, the UCMC launched its Urban Health Initiative (UHI). The plan for the UHI involves turning patients away

from the UCMC emergency room and funneling them to neighborhood clinics. The UHI was criticized by the American College of Emergency Physicians and American Academy of Emergency Medicine for violating federal “patient dumping” laws designed to protect patients from such practices.

Although the Medical Center is set to open a new \$700 million expansion of the hospital early this year, it will continue to limit trauma patients to those 16 and under. The University of Chicago has an endowment of \$5.7 billion, among the highest in the nation, and its leadership includes myriad corporate CEOs and major political figures. President Obama is a former professor and purchased a home in the area for \$1.65 million in 2005.

South suburban hospitals have also closed or downgraded trauma centers. Provena St. Joseph Medical in Joliet downgraded from Level I to Level II in 2000, while St. James Hospital in Olympia Fields closed their trauma center in 2008. As a result, Advocate Christ is the only trauma center in not just the South Side of Chicago, but all of the South Suburbs. It is also the closest trauma center to heavily populated northern Indiana, where patients from cities like Gary and Hammond must be flown in.

Residents and community groups in the South Side argue that the long transit times for care put patients at risk. Health officials in Chicago state that advances in medical care, both in transit and at hospitals, show that there is no discernible difference in patient outcomes.

A soon to be released study by Dr. Marie Crandall, associate professor of surgery at Northwestern University, suggests otherwise. “Racial and Socioeconomic Disparities in Trauma Care” emphasizes the specific conditions associated with gunshot wounds that make time a crucial factor in the region. Hemorrhage is the number one cause of death from such wounds.

The prosperous University of Chicago and surrounding neighborhood of Hyde Park stand in stark contrast to the neighborhoods they border, which face high levels of unemployment and poverty. The university’s refusal to add a trauma center has sparked protest, most recently on January 27, when 50 demonstrators engaged in a sit-in inside the new hospital building during an invitation-only tour.

The university police responded by forcibly removing

protesters from the premises and arresting four participants, who were charged with misdemeanor trespassing. One was also charged with a misdemeanor for resisting arrest. In response to the rough treatment from police, 200 students and community members held a march on February 2. They called for the university to open its trauma center to all patients, and to drop the charges against those arrested.

The organization behind the protest, Southside Organizing Together for Power (STOP), with which Damian Turner’s organization was affiliated, asks for a range of reforms in the city on housing, health care, and poverty. Ultimately, their aim is to pressure the Democrats—the very party responsible for the blighted conditions on the South Side—for concessions.

However, the issue of trauma care starkly poses the need for the implementation of a rationally planned trauma care system that can cover the needs of the entire population. Such a system is incompatible with capitalism, and can only come about on the basis of a socialist program.



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