



HUMBOLDT PARK HEALTH

2022 COMMUNITY HEALTH NEEDS ASSESSMENT

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INTRODUCTION

Founded in 1894, Humboldt Park Health is deeply committed to serving the Humboldt Park Community. Humboldt Park Health and members of the Alliance for Health Equity, a collaborative of over 30 hospitals partnering with health departments and community partners, have worked together through 2021-2022 to build a comprehensive Community Health Needs Assessment (CHNA) in Chicago and Cook County. Humboldt Park Health and the Alliance for Health Equity adapted the Mobilizing for Action through Planning and Partnerships (MAPP) model for the CHNA, emphasizing the importance of community engagement, partnership development, and both primary and secondary data. The Alliance for Health Equity chose this inclusive, community-driven process to leverage and align with health department assessments and to actively engage stakeholders, including community members, in identifying and addressing strategic priorities to advance health equity. Humboldt Park Health worked with the Alliance for Health Equity and local community partners in the communities we serve to identify and prioritize health needs within our community for FY23 -25. Humboldt Park Health will continue to partner with key community partners in our service area and the Alliance for Health Equity to leverage existing resources and develop strategies that contribute to improving our communities' most pressing health needs. To access the full collaborative Community Health Needs Assessment for Chicago and Suburban Cook County, please visit <https://allhealthequity.org/projects/2022-chna-report/>

OUR HOSPITAL

Humboldt Park Health is dedicated to offering the best care for the community in a 200-bed hospital, as well as a full-service professional building, community clinics, and two mobile health units. Humboldt Park Health has an array of available medical services, including emergency, acute care, surgical, outpatient clinics, Women's Center of Excellence, GI lab and endoscopy, internal medicine, detox and substance abuse, cardiology and respiratory, imaging, behavioral medicine, Wound Healing Center, family medicine and pediatrics, physical therapy, and corporate health services.



Humboldt Park Health serves the following communities: Humboldt Park, West Town, East Garfield, West Garfield, Austin, Belmont Cragin, Hermosa, Logan Square, and Avondale. Humboldt Park Health desires to continue providing clinical programs and services to meet community health needs, while also pursuing continuous improvement in existing and future programs to improve the overall health of individuals in the communities it serves. As such, Humboldt Park Health conducts a Community Health Needs Assessment (CHNA) every three years, using primary and secondary data, to ensure community health programs and resources are focused on significant health needs as perceived by the community at large, as well as alignment with Humboldt Park Health's mission, services, and strategic priorities.

HUMBOLDT PARK HEALTH'S MISSION, VISION, AND VALUES



Humboldt Park Health is committed to advancing health equity and providing high quality and compassionate health care services by partnering with patients and their families, our employees, medical staff and the communities we serve.



Humboldt Park Health is the healthcare provider of choice for our communities and caregivers. We strive to be best in class for clinical care, service excellence and employee engagement by following our guiding principle, "**Equity Begins at Home.**"



RESPECT – HPH, its leaders, employees and medical staff demonstrates **respect** by supporting all our members of our health care team, so they can focus on our patients.

EMPATHY – HPH, its leaders, employees, and medical staff show **empathy** by acknowledging our patients, their families, and/or colleagues' pain and what they have been through.

EXCELLENCE – HPH, its leaders, employees, and medical staff believe that providing **excellence** in Quality of Care necessitates that it is free from harm, minimizes redundancy and waste, allows for timely access to needed services, follows best practices, and incorporates our patients' preferences and treatment priorities.

INTEGRITY – HPH, its leaders, employees, and medical staff exemplify **integrity** by being honest – telling the truth, being open, and not taking advantage of others.

INCLUSIVITY – HPH, its leaders, employees, and medical staff embrace **inclusivity** – These behaviors make people feel welcome. We motivate our entire workforce to achieve our goals.

EQUITY – HPH, its leaders, employees, and medical staff prioritize health equity. We develop structures and processes that support equity and take specific actions that address the social determinants of health.

HUMBOLDT PARK HEALTH'S PARTICIPATION IN THE ALLIANCE FOR HEALTH EQUITY

The Alliance for Health Equity is a partnership between the Illinois Public Health Institute (IPHI), hospitals, health departments, and community organizations across Chicago and Cook County. This initiative is one of the largest collaborative hospital-community partnerships in the country with the current involvement of over 30 nonprofit and public hospitals, six local health departments, and representatives of more than 100 community organizations serving on action teams. The Alliance for Health Equity is a collaboration of Chicago and Cook County-based hospitals that strives to promote a collective impact on health outcomes in the city of Chicago through an environment that fosters learning, sharing of resources, data and best practices. They are also the driving force to facilitate and execute the Community Health Needs Assessment (CHNA) for their hospital members.



The purpose of the Alliance for Health Equity is to improve population and community health by:

- Promoting health equity
- Supporting capacity building, shared learning, and connecting local initiatives
- Addressing social and structural determinants of health
- Developing broad city and county wide initiatives and creating systems
- Engaging community partners and working collaboratively with community leaders
- Developing data systems for population health to support shared impact measurement and community assessment
- Collaborating on population health policy and advocacy

Humboldt Park Health has been an active member of the Alliance for Health Equity since June of 2017 when the Health Impact Collaborative of Cook County and the Healthy Chicago Hospital Collaborative merged to form the Alliance for Health Equity. Several Humboldt Park Health employees participate as active, engaged members of the following committees and workgroups:

- Steering Committee
- CHNA Committee
- Mental Health and Substance Use Disorders Committee
- Social and Structural Determinants of Health Committee
 - Subcommittee: Food Security/Food Access Workgroup
 - Subcommittee: Housing and Health Workgroup

At Humboldt Park Health, our mission includes a strong commitment to improving the health of the communities we serve. In addition, the Community Relations Department at Humboldt Park Health works to establish and foster communication between the Hospital and surrounding communities. The department interfaces with a broad range of non-profit, business, and community organizations to support initiatives that improve the well-being of the community, addressing health services access food insecurity, digital equity, transportation insecurity, immigration crisis, and affordable housing issues with our community partners. Members of the community relations staff regularly attend community meetings, health fairs, and community events. As a result, they facilitate health-related programs to meet community and patient needs.

COMMUNITIES WE SERVE



Humboldt Park's community, as defined for the purposes of the Community Health Needs Assessment includes each of the residential Zip Codes that comprise the hospital's Primary Service Area (PSA). Humboldt Park Health primarily serves eight zip codes in the City of Chicago: 60612, 60622, 60618, 60624, 60639, 60642, 60647, 60651. These zip codes encompass nine community areas in Chicago—Humboldt Park, West Town, East Garfield Park, West Garfield Park, Austin, Belmont Cragin, Hermosa, Logan Square, Avondale (Figure 1).

The total population of Humboldt Park Health's service area is 486,210. In the service area, 40% of the population identifies as Hispanic/Latinx and 60% Non-Hispanic. Twenty-seven percent of the population identifies as white, 3% Asian, 28% Black/African American, 2% identifies as two or more races, and less than 1% as Native American (Figure 2). The age distribution for the service area is shown in Figure 3.

FIGURE 1.
**MAP OF HUMBOLDT PARK HEALTH'S
CHNA SERVICE AREA**

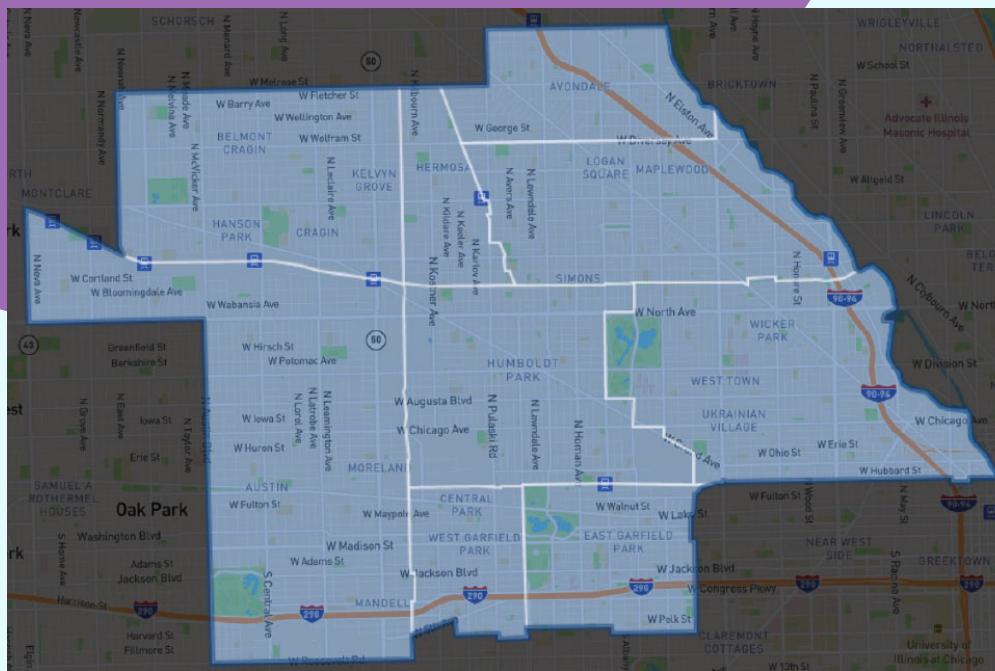
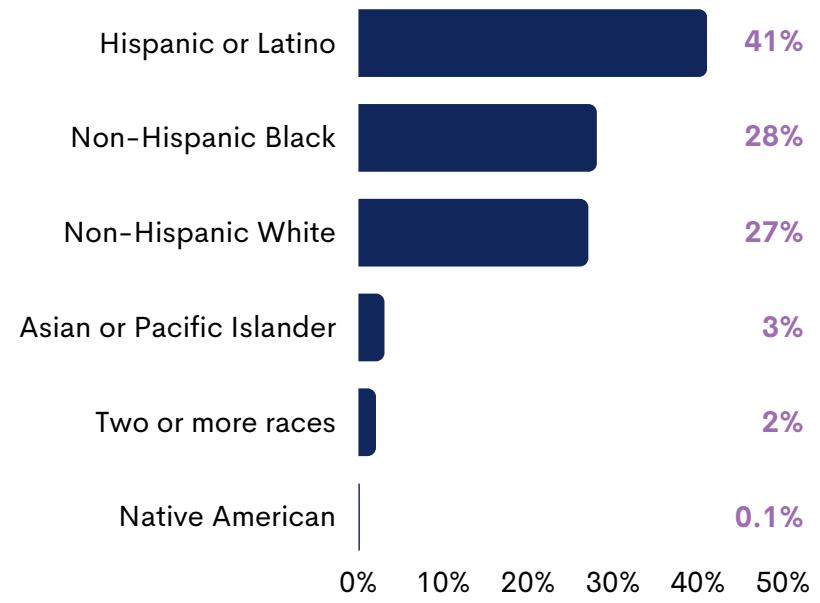
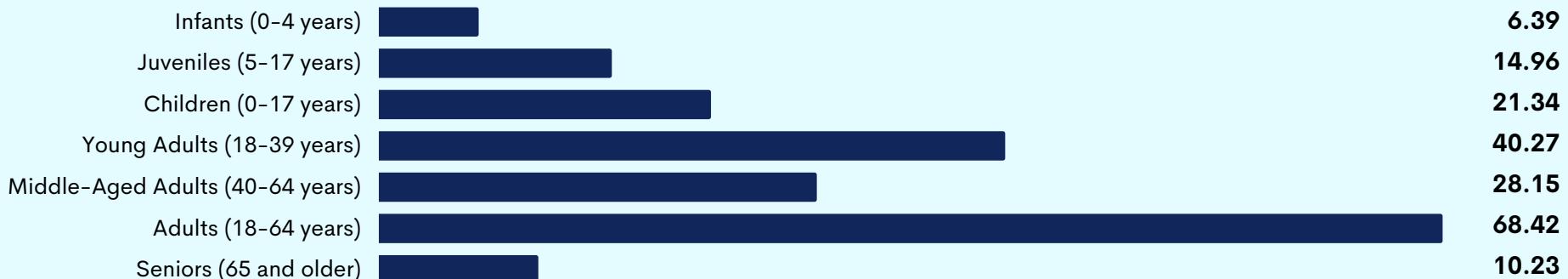


FIGURE 2.
**RACE AND ETHNICITY IN HUMBOLDT PARK'S
SERVICE AREA, 2016-2020**



**FIGURE 3.
AGE DISTRIBUTION, HUMBOLDT PARK'S SERVICE AREA, 2016-2020**



US Census, American Community Survey, 2016-2020

There is substantial variation in median income within Humboldt Park Health's service area (Figure 4). The median income in Austin (\$43,043) is nearly \$80,000 less than the median income in West Town. In addition, poverty rates are highest in East and West Garfield Park.

**FIGURE 4.
MEDIAN HOUSEHOLD INCOME IN THE LAST 12 MONTHS IN HUMBOLDT PARK'S SERVICE AREA**



US Census, American Community Survey, 2016-2020



SUMMARY OF COLLABORATIVE NEEDS ASSESSMENT RESULTS AND DATA SPECIFIC TO HUMBOLDT PARK HEALTH'S SERVICE AREA

Summary of Collaborative Health Equity Approach to CHNA

The Alliance for Health Equity's collaborative CHNA combined robust public health data, community input, existing research, existing plans, and existing assessments to document the health status of communities within Chicago and Suburban Cook County and to highlight systemic inequities that are negatively impacting health. The CHNA also provided insight into community-based assets and resources that would benefit from support and leverage during the implementation of health improvement strategies.

Humboldt Park Health partnered with the Alliance for Health Equity, other hospitals, the Chicago Department of Public Health, Cook County Department of Public Health, and community organizations to complete this collaborative CHNA between March 2021 and March 2022, during a time that communities across our county, country, and globe have been experiencing profound impacts from the COVID-19 pandemic. The **health, economic, and social impacts of the pandemic** are strongly present in what we heard from community members and healthcare and public health workers over the course of the assessment.



The 2022 Community Health Needs Assessment is the third collaborative CHNA in Cook County, Illinois. The Illinois Public Health Institute (IPHI) acts as the backbone organization for the Alliance for Health Equity. IPHI works closely with the steering committee to design the CHNA to meet regulatory requirements under the Affordable Care Act and to ensure close collaboration with the Chicago Department of Public Health (CDPH) and Cook County Department of Public Health (CCDPH) on their community health assessment and community health improvement planning processes. For this CHNA, the Alliance for Health Equity has taken a very intentional approach to build on the previous collaborative CHNA work (2016, 2019), Healthy Chicago 2025 (2020), and Suburban Cook County WePLAN (2022).



Primary and secondary data from a diverse range of sources were utilized for robust data analysis and to identify community health needs in Chicago and Suburban Cook County. IPHI worked with the CHNA committee and steering committee to design and facilitate a collaborative, community-engaged assessment. As with the 2018-2019 collaborative CHNA, this 2022 CHNA process is adapted from the Mobilizing for Action through Planning and Partnerships (MAPP) framework, a community-engaged strategic planning framework that was developed by the National Association for County and City Health Officials (NACCHO) and the Centers for Disease Control and Prevention (CDC). Both the Chicago and Cook County Departments of Public Health use the MAPP framework for community health assessment and planning. The MAPP framework promotes a system focus, emphasizing the importance of community engagement, partnership development, and the dynamic interplay of factors and forces within the public health system. AHE chose this inclusive, community-driven process to leverage and align with health department assessments and to actively engage stakeholders, including community members, in identifying and addressing strategic priorities to advance health equity.

Primary data for the CHNA was collected through three methods:

- Community input surveys
- Community resident focus groups
- Social service provider focus groups



Epidemiologists from the Cook County Department of Public Health (CCDPH) and Chicago Department of Public Health (CDPH) and Metropio are invaluable partners in identifying, compiling, and analyzing secondary data for the CHNA. IPHI and the Alliance for Health Equity steering committee worked with CDPH and CCDPH to refine a common set of indicators based on an adapted version of the County Health Rankings and Roadmaps Model. Secondary data used in the CHNA were compiled from a range of sources. Additional information can be found in Figures 6 and 7 of the Countywide CHNA report.

In alignment with the purpose, vision, and values, the Alliance for Health Equity prioritizes the engagement of community members and community-based organizations as a critical component of assessing and addressing community health needs. Community partners have been involved in the assessment and ongoing implementation process in several ways both in providing community input and in decision making processes (page 9 of Countywide CHNA Report). The community-based organizations engaged in the Alliance for Health Equity represent a broad range of sectors such as workforce development, housing and homeless services, food access and food justice, community safety, planning and community development, immigrant rights, youth development, community organizing, faith communities, mental health services, substance use services, policy and advocacy, transportation, older adult services, health care services, higher education, and many more. All community partners work with or represent communities that are disproportionately affected by health inequities such as communities of color, immigrants, youth, older adults and caregivers, LGBTQ+, individuals experiencing homelessness or housing instability, individuals living with mental illness or substance use disorders, individuals with disabilities, veterans, and unemployed youth and adults.

Overview of Data Categories

Assessment findings were organized in six areas:

- overview of health inequities
- mental health and substance use disorders
- access to quality health care and community resources
- COVID-19
- social and structural determinants of health
- chronic conditions – risk factors, prevention, and management

PRIMARY DATA: COMMUNITY INPUT SURVEY AND FOCUS GROUPS

Community input is the most important data input into the Alliance for Health Equity Community Health Needs Assessment. Particularly in the context of the current COVID-19 pandemic, first-hand information from communities most impacted by inequities is the most up-to-date data we have available about priority community health needs. The Alliance worked closely with Humboldt Park Health and other health systems to collect in-depth community data through a community input survey and focus groups. Seventeen focus groups were conducted in Humboldt Park Health's service area and 828 surveys were collected.



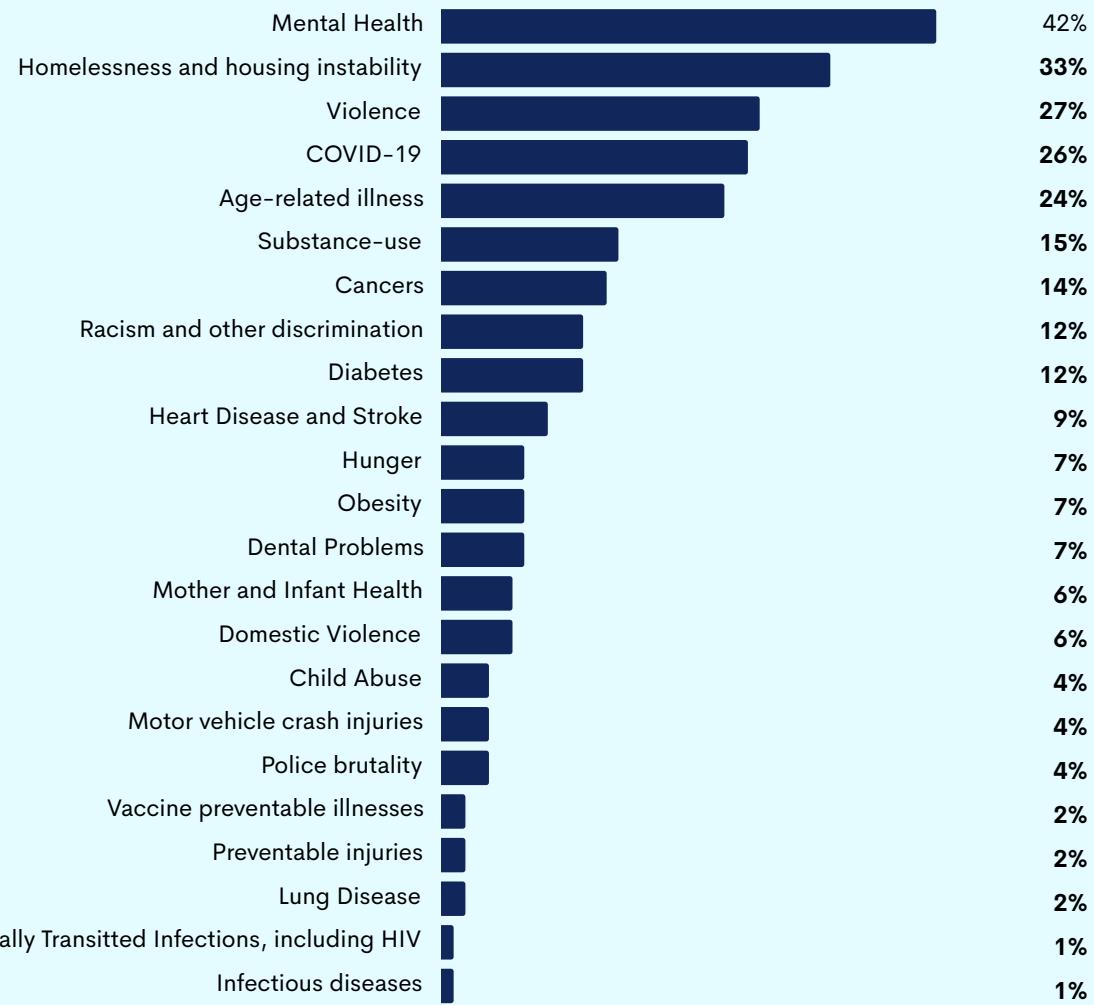
Community Input Survey

The community input survey was a qualitative tool designed to understand community health needs and assets from community members, with a focus on hearing from community members most impacted by health inequities. The community input surveys, along with focus group data, informed the priority areas and strategies for community health improvement in Chicago and suburban Cook County. Responses to key questions are included in Figures 5-7.

FIGURE 5.
COMMUNITY INPUT SURVEY
RESPONSES – MOST IMPORTANT
HEALTH NEEDS IN HUMBOLDT
PARK HEALTH'S SERVICE AREA

What are the most important health needs in your community? (n=828)	Top responses selected by 20% or more of respondents
Mental health	42%
Homelessness and housing instability	33%
Violence	27%
COVID-19	26%
Age-related illness	24%

WHAT ARE THE MOST IMPORTANT HEALTH NEEDS IN YOUR COMMUNITY? (N=828)



The supports needed to improve health needs within the service area are reflective of the top health needs identified. **As a result, access to mental health services was identified as most needed improvement followed by access to healthcare, safety and low crime, access to community services, and affordable housing.**

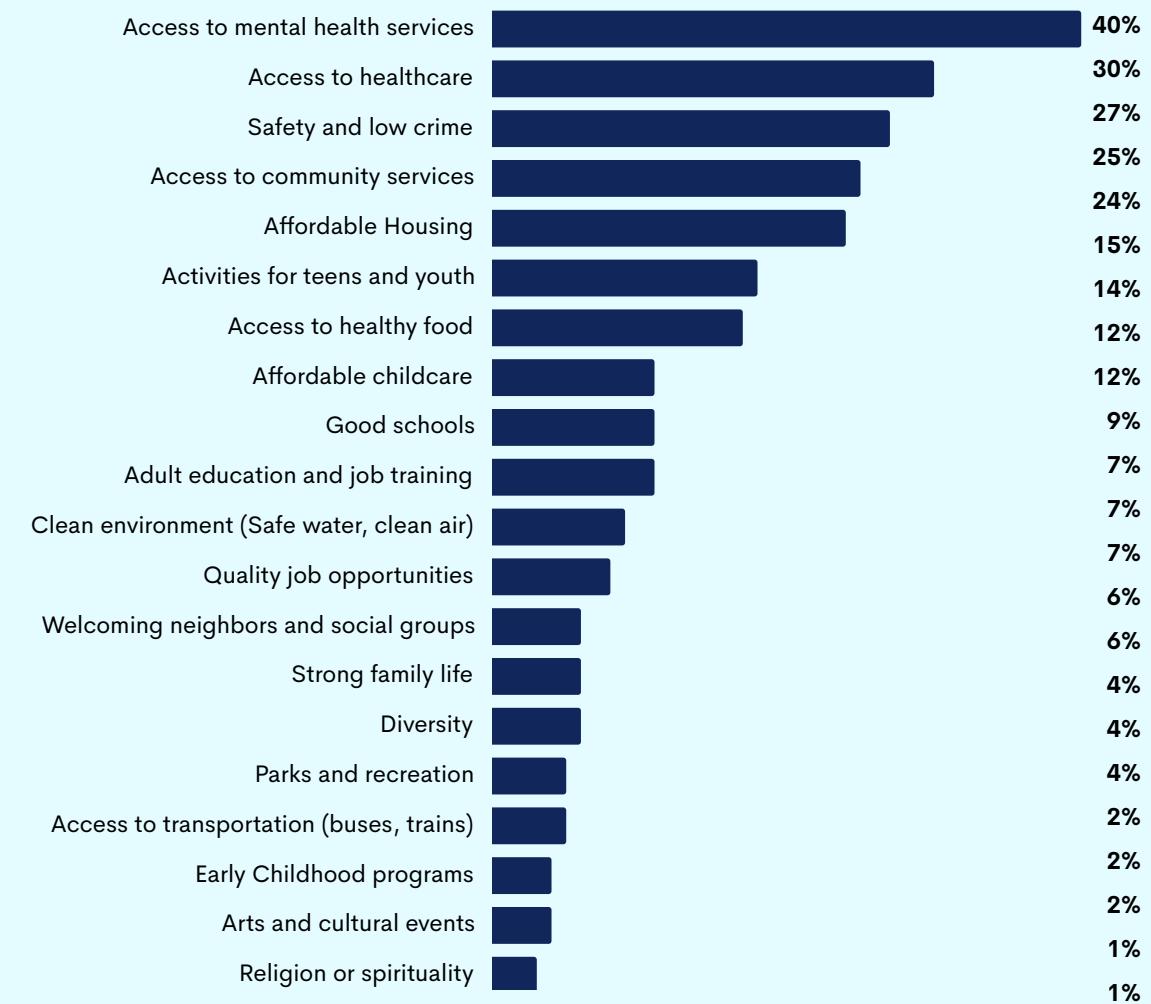
FIGURE 6.

COMMUNITY INPUT SURVEY RESPONSES – WHAT IS NEEDED TO SUPPORT IMPROVEMENTS IN HEALTH NEEDS IN HUMBOLDT PARK HEALTH'S SERVICE AREA?

What are the most important health needs in your community? (n=828)	Top responses selected by 20% or more of respondents
Access to Mental Health Services	40%
Access to health care	30%
Safety and low crime	27%
Access to community services	25%
Affordable Housing	24%

The supports needed to improve health needs within the service area are reflective of the top health needs identified. As a result, access to mental health services was identified as most needed improvement followed by access to healthcare, safety and low crime, access to community services, and affordable housing.

WHAT IS NEEDED TO SUPPORT IMPROVEMENTS IN THE HEALTH NEEDS YOU CHOSE? (N=828)



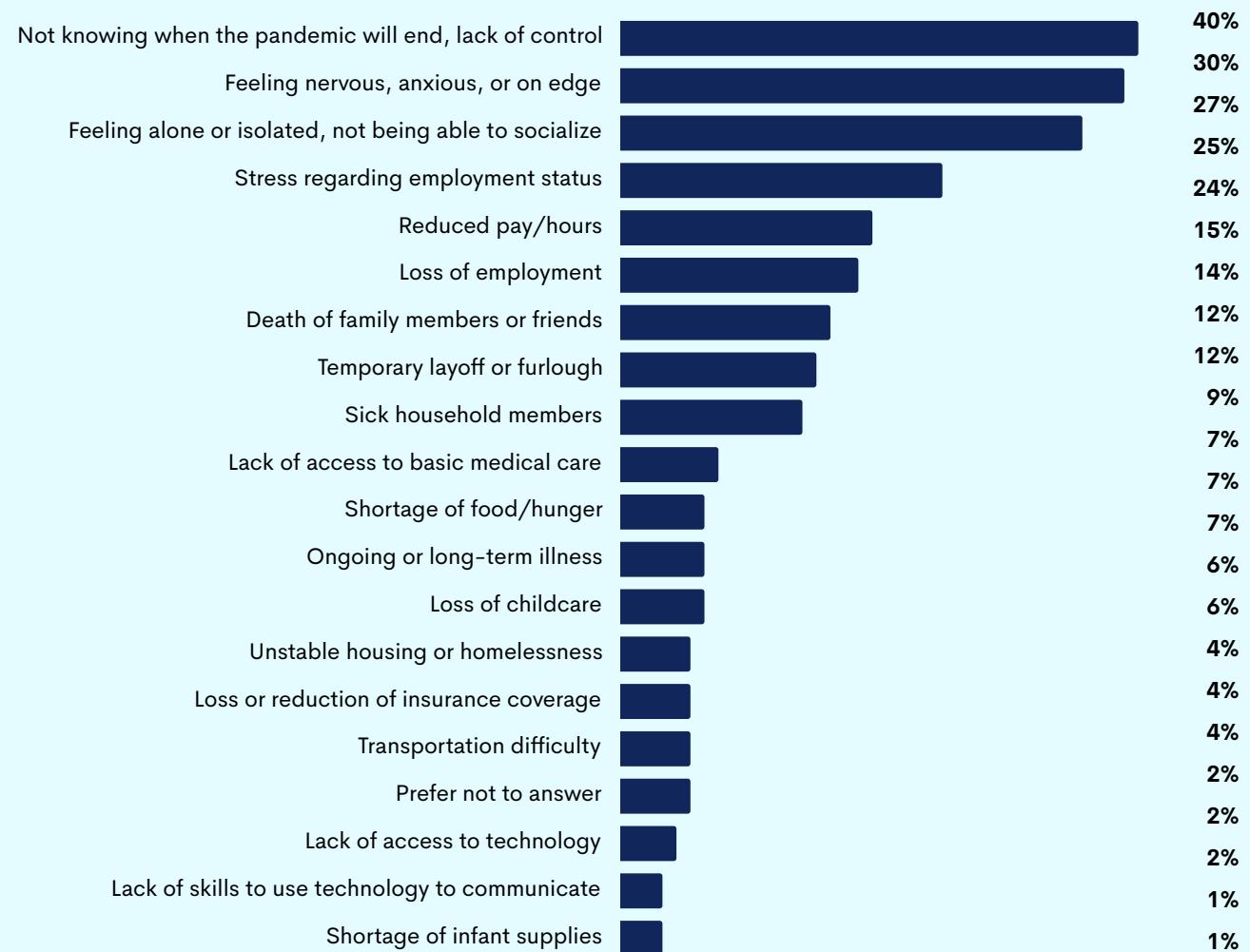
The top health needs identified in the service area are closely aligned with priority health needs identified for the county overall. However, **mental health was ranked second for the overall county and first within Humboldt Park Health's service area.**

FIGURE 7.
COMMUNITY INPUT SURVEY
RESPONSES – COVID-19 IMPACTS
IN HUMBOLDT PARK HEALTH'S
SERVICE ARA

The COVID-19 pandemic is challenging in many ways. Did anyone in your household experience any of the following due to the COVID-19 pandemic (n=828)?

	Top responses selected by 15% or more of respondents
Not knowing when the pandemic will end, lack of control	37%
Feeling Nervous, anxious, or on edge	36%
Feeling alone or isolated, not being able to socialize with other people	33%
Stress regarding employment status	23%
Reduced pay/hours	18%
Loss of employment	17%
Death of family members or friends	15%

THE COVID-19 PANDEMIC IS CHALLENGING IN MANY WAYS. DID ANYONE IN YOUR HOUSEHOLD EXPERIENCE ANY OF THE FOLLOWING DUE TO THE COVID-19 PANDEMIC? (N=828)



FOCUS GROUPS

Between August 2021 and February 2022, the Illinois Public Health Institute (IPHI) worked with Alliance for Health Equity partners to hold a total of 43 focus groups with priority populations such as veterans, individuals living with mental illness, communities of color, older adults, caregivers, teens and young adults, LGBTQ+ community members, adults and teens experiencing homelessness, families with children, faith communities, adults with disabilities, and children and adults living with chronic conditions such as diabetes and asthma. In total, 17 focus groups were held with community members and service providers within Humboldt Park Health's service area.

Community focus groups:

- Breakthrough Urban Ministries (Men's and Women's Sessions)
- By The Hand
- Community Health Workers – Rush University Medical Center (2 sessions)
- Community Health
- Garfield Park Alliance Council
- Hope Church
- Humboldt Park Health
- Immigrant and refugee service providers (county-wide)
- LGBTQIA+ community members (county-wide)
- MAAFA
- Marrilac House
- NAMI Chicago (2 Sessions – Citywide)
- Northwest Side Housing Center
- West Side Health Authority

There were five major themes identified based on the focus group input collected from across the county:

- **Behavioral health** – stigma, substance use, trauma and crisis, social determinants of health and integrated care
- **Child and adolescent health** – childcare, education, COVID-19 impacts on child and adolescent health, programs, and services
- **Healthcare** – insurance and public benefits, local access to services, LGBTQIA+ affirming care, primary care access, and culturally and linguistically appropriate care
- **Social and structural determinants of health** – income, employment, education, opportunities for youth, housing and homelessness, and food systems; and
- **Chronic conditions** – socioeconomic causes, health behaviors, access and communication, obesity, asthma, hypertension, and diabetes.

An overall description of the themes is included in Figure 8.

In addition to the five overall themes, there were four cross-cutting topics identified that are pervasive and impact health across the spectrum of concerns:

- Racism and discrimination
- COVID-19
- Safety and violence
- Community cohesion

SECONDARY DATA

The key highlights below highlight data pertaining to life expectancy, health behaviors, chronic diseases, community safety, and mental health within the Humboldt Park Health service area. This data was collected and analyzed by the Chicago Department of Public Health (CDPH) and compiled and presented by the Illinois Public Health Institute (IPHI).

HEALTH EXPECTANCY AND OVERALL HEALTH STATUS

Life Expectancy

Life expectancy is the average number of years an individual is expected to live. The overall life expectancy in Chicago is 75.4 years. As seen in Figure 9, there are disparities in life expectancy within Humboldt Park Health's service area. Life expectancy in Austin, West Garfield Park, and East Garfield Park is more than ten years less than life expectancy in West Town and Logan Square.

FIGURE 8.

**DESCRIPTION OF KEY THEMES DISCUSSED BY FOCUS GROUP
PARTICIPANTS**



HEALTH STATUS

There are significant inequities in the percentage of people reporting excellent, very good, and good overall health status in Humboldt Park's service area (Figure 10).

Austin, Belmont Cragin, and East Garfield Park have the lowest percentage of community members reporting good health.

Figure 9.

Life expectancy at birth within Humboldt Park Health's service area in years



HEALTH BEHAVIORS - KEY FINDINGS

There are five key health behaviors that are strongly correlated with chronic disease outcomes: smoking, physical activity, alcohol consumption, body weight, and sufficient daily sleep. Some communities in Chicago face significant barriers to engaging in preventative health behaviors such as access to safe exercise spaces, access to healthy affordable foods, and access to mental health and substance use disorder treatment. The status of health behaviors for communities in Humboldt Park Health's service area are presented in Figures 11-15.

FIGURE 11.

PERCENTAGE OF ADULTS THAT HAVE EASY ACCESS TO FRUITS AND VEGETABLES IN HUMBOLDT PARK HEALTH'S SERVICE AREA

Chicago Department of Public Health, Healthy Chicago Survey (2020-2021)

Easy access to fruit and vegetables	Percent
Austin	39%
Avondale	34%
Belmont Cragin	30%
East Garfield Park	28%
Hermosa	30%
Humboldt Park	19%
Logan Square	35%
West Garfield Park	40%
West Town	35%

FIGURE 12.

PERCENTAGE OF ADULT SMOKERS IN HUMOLDT PARK HEALTH'S SERVICE AREA

Chicago Department of Public Health, Healthy Chicago Survey (2020-2021)

Smoking	Percent
Austin	23%
Avondale	10%
Belmont Cragin	10%
East Garfield Park	19%
Hermosa	12%
Humboldt Park	10%
Logan Square	7%
West Garfield Park	9%
West Town	3%

CHRONIC CONDITIONS - KEY FINDINGS

A chronic condition is an ongoing physical or mental health condition that lasts a year or more, requires ongoing medical attention, and/or limits activities of daily living. Worldwide and in the United States chronic diseases are the leading cause of disability and death. Chronic conditions such as heart disease, stroke, cancer, diabetes, arthritis, asthma, mental illness, and HIV/AIDS create a significant health and economic cost for individuals and communities. Prevention and management of chronic conditions can significantly reduce the burden of these diseases on individuals and society.

Obesity and hypertension are often interconnected risk factors for cardiovascular disease, the leading cause of death in the U.S. Within Humboldt Park Health's service area, more than one third of community members are reported to be obese. Similarly, more than a quarter of adults within the service area are reported to have hypertension. There is significant variation between community areas in obesity and hypertension rates (Figures 16-17).

FIGURE 13.

PERCENTAGE OF ADULTS WHO REPORT BINGE DRINKING (MEN HAVING 5 OR MORE DRINKS ON ONE OCCASION, WOMEN HAVING 4 OR MORE DRINKS ON ONE OCCASION) IN THE PAST MONTH IN HUMBOLDT PARK HEALTH'S SERVICE AREA

Chicago Department of Public Health, Healthy Chicago Survey (2020-2021)

Binge Drinking	Percent
Austin	24%
Avondale	43%
Belmont Cragin	36%
East Garfield Park	49%
Hermosa	25%
Humboldt Park	28%
Logan Square	53%
West Garfield Park	39%
West Town	55%

FIGURE 14.

PERCENTAGE OF ADULTS WHO REPORTED A HEIGHT AND WEIGHT THAT YIELD A BODY MASS INDEX OF 30 OR GREATER IN HUMBOLDT PARK HEALTH'S SERVICE AREA

Chicago Department of Public Health, Healthy Chicago Survey (2020-2021)

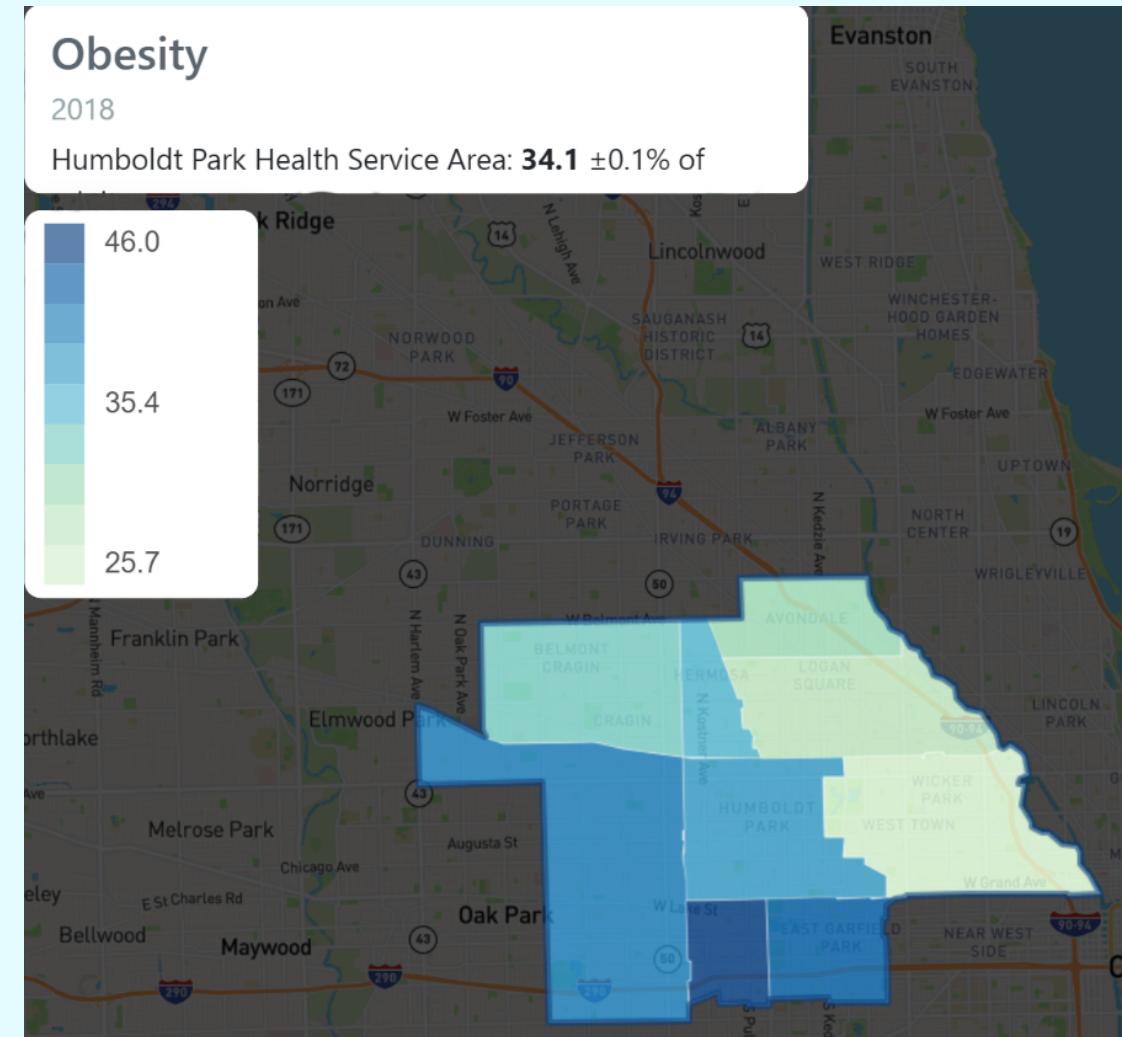
Obesity	Percent
Austin	51%
Avondale	24%
Belmont Cragin	32%
East Garfield Park	48%
Hermosa	34%
Humboldt Park	35%
Logan Square	20%
West Garfield Park	54%
West Town	18%

FIGURE 15.
PERCENT OF ADULTS WHO REPORTED THAT THEY
DID NOT PARTICIPATE IN ANY PHYSICAL
ACTIVITIES OR EXERCISE IN THE PAST MONTH IN
HUMBOLDT PARK HEALTH'S SERVICE AREA

Chicago Department of Public Health,
Healthy Chicago Survey (2020-2021)

Physical Activity	Percent
Austin	38%
Avondale	19%
Belmont Cragin	27%
East Garfield Park	44%
Hermosa	34%
Humboldt Park	25%
Logan Square	12%
West Garfield Park	41%
West Town	19%

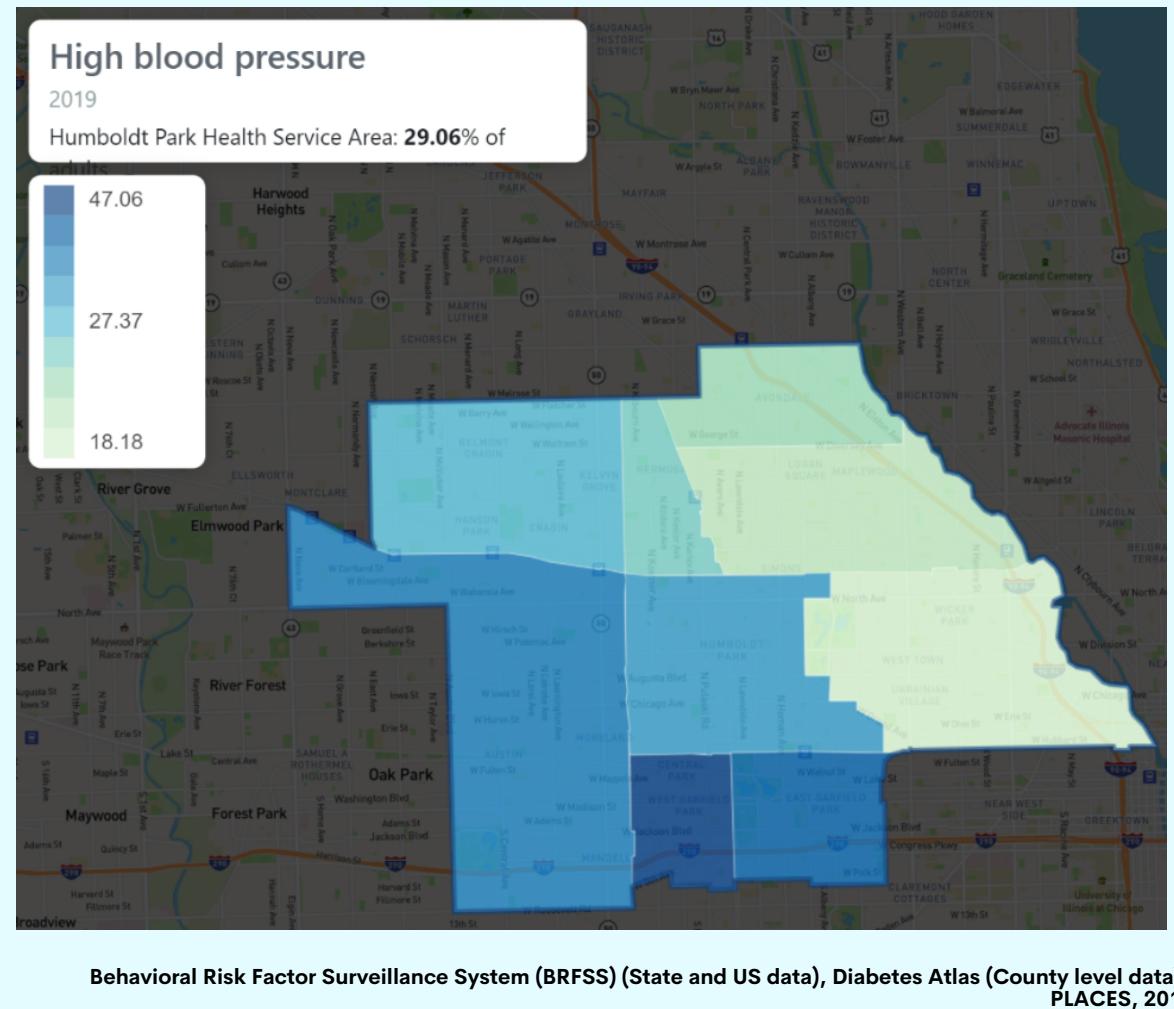
FIGURE 16.
MAP OF OBESITY RATES WITHIN HUMBOLDT PARK HEALTH'S SERVICE AREA
(PERCENTAGE)



MORTALITY

Centers for Disease Control and Prevention (2021) data indicate that heart disease, cancer, and diabetes are the leading causes of death in the U.S. and are the leading drivers of the nation's 3.8 trillion in annual healthcare costs. The geographic distribution of chronic disease mortality rates for heart disease, cancer, and diabetes are presented in Figures 18-20. Here we present mortality maps showing all communities in the City of Chicago to show the communities served by Humboldt Park Health in context with the city overall.

FIGURE 17.
MAP OF HYPERTENSION RATES WITHIN HUMBOLDT PARK HEALTH'S SERVICE AREA (PERCENTAGE)



SOCIAL AND STRUCTURAL DETERMINANTS OF HEALTH

Social determinants of health such as poverty, limited access to healthy foods, exposure to violence, limited access to healthcare, and housing conditions are both underlying root causes of chronic disease. They are barriers to the management of chronic disease.

FIGURE 18.
AGE-ADJUSTED HEART DISEASE MORTALITY RATES PER 100,000
POPULATION, CHICAGO, ILLINOIS

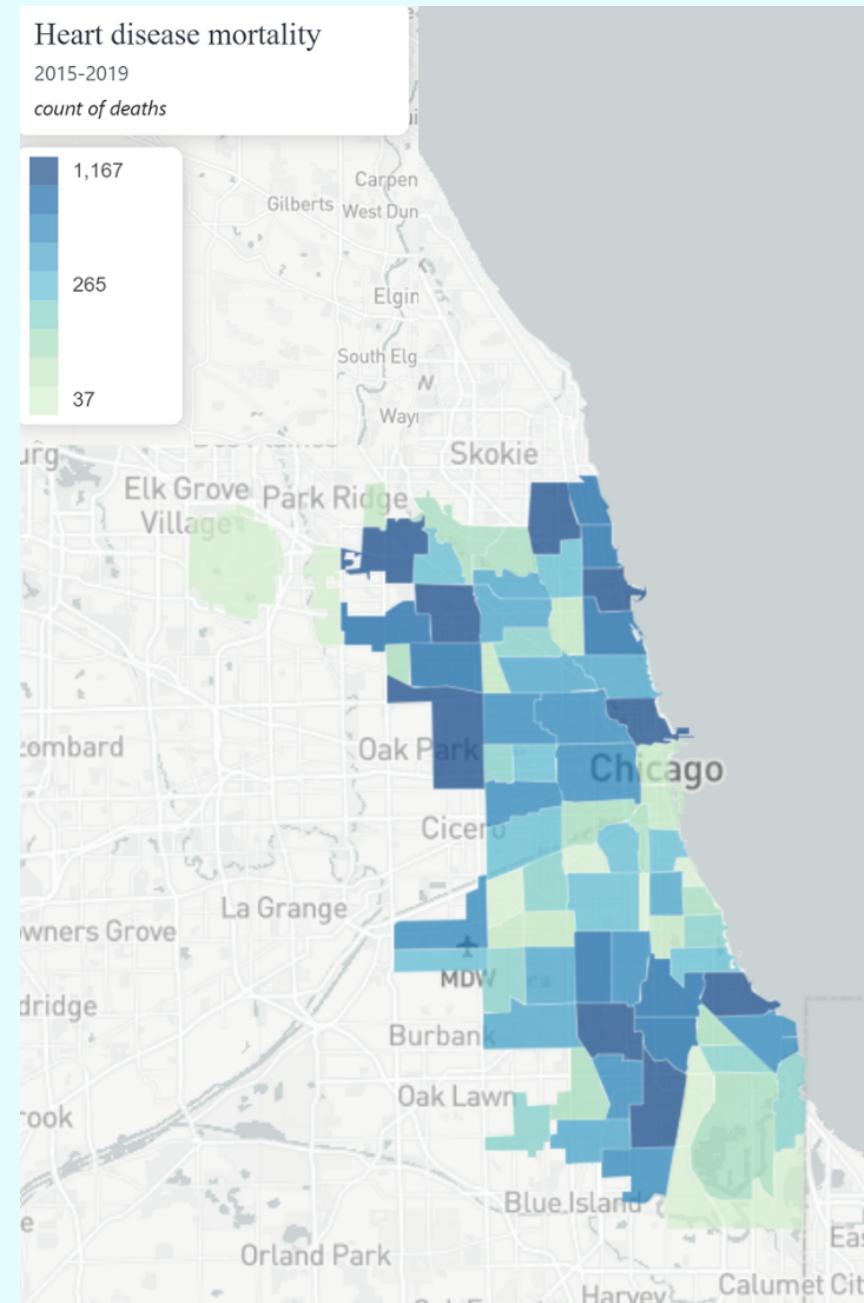
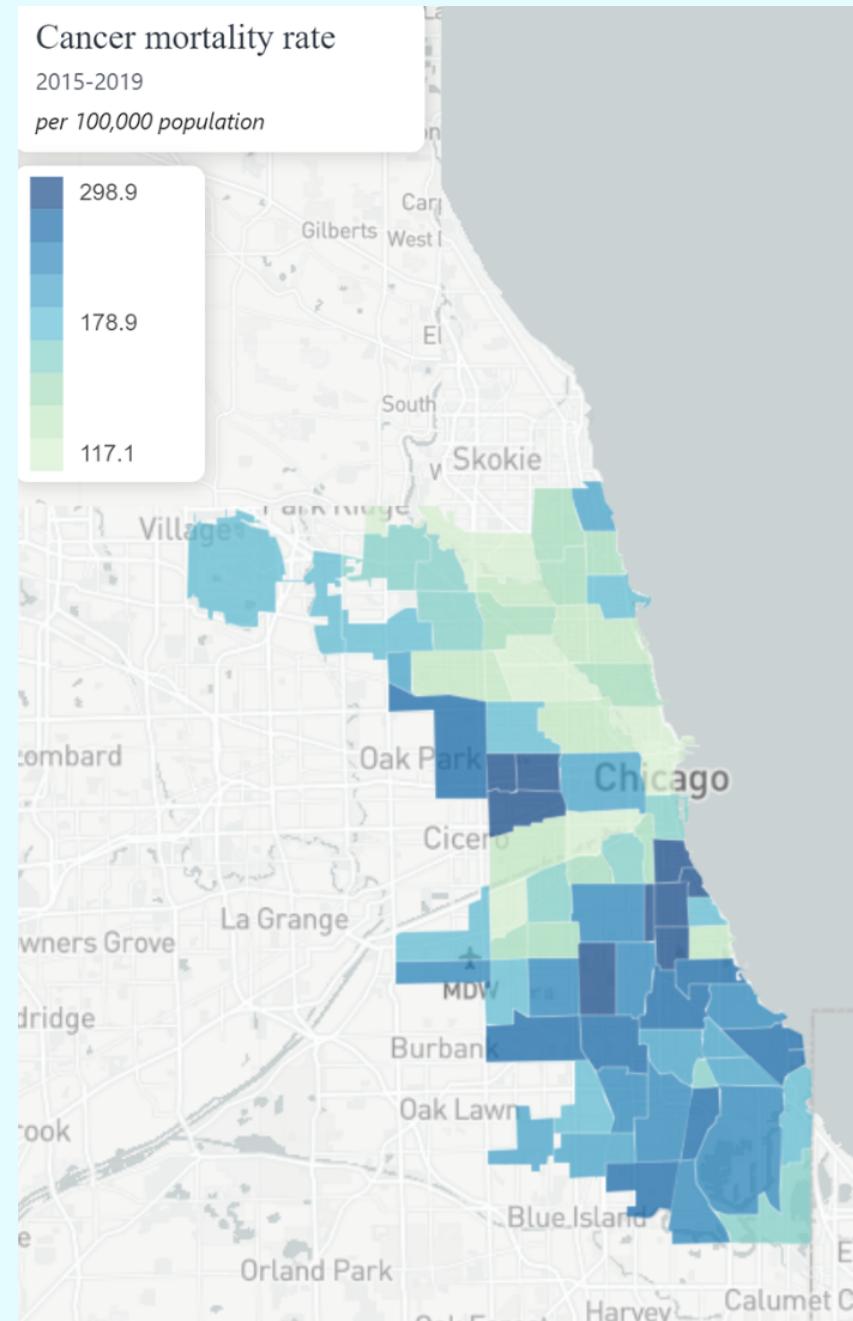
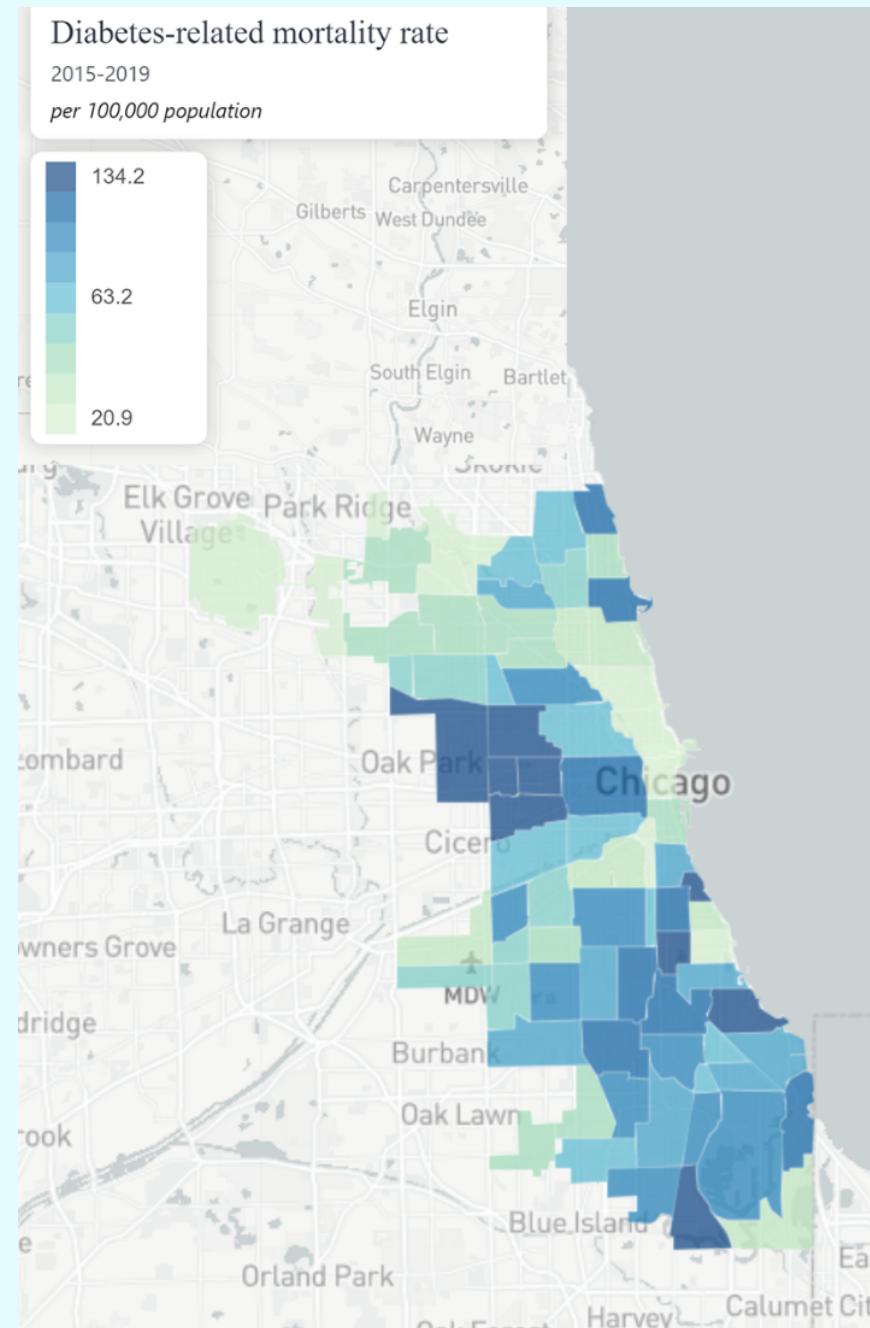


FIGURE 19.
**AGE-ADJUSTED CANCER MORTALITY RATES PER 100,000 POPULATION,
CHICAGO, ILLINOIS**



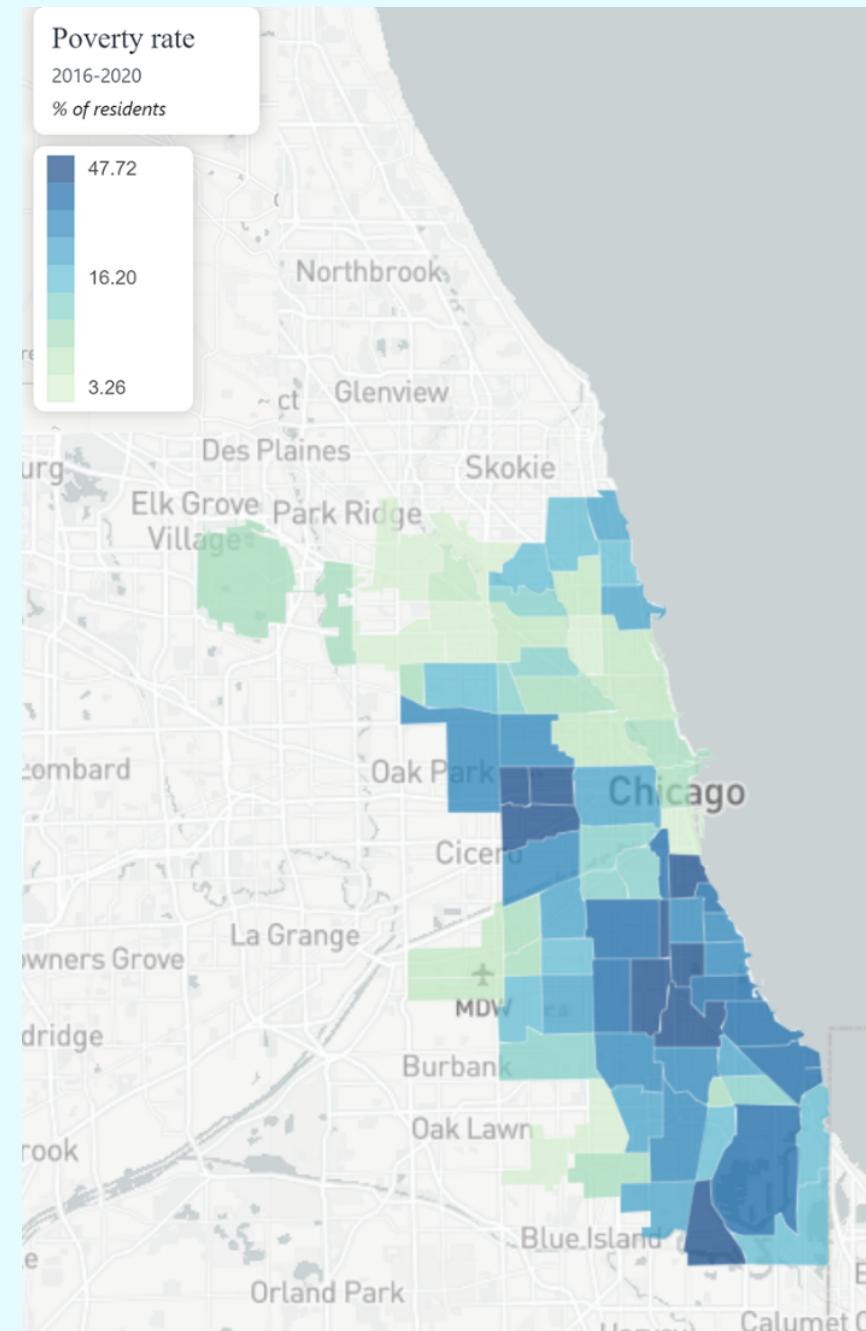
**FIGURE 20.
AGE-ADJUSTED DIABETES MORTALITY RATES PER 100,000 POPULATION,
CHICAGO, ILLINOIS**



POVERTY

Healthy People 2020 highlights that communities with high rates of poverty are at increased risk for mental illness, chronic disease, higher mortality, and lower life expectancy. Within Humboldt Park Health's service area 26% of non-Hispanic Black and 22% of Native American families live below the federal poverty level compared to 20% of Hispanic/Latino and 13% of white community members. A map of the geographic distribution of poverty within the service area is shown in Figure 21.

FIGURE 21.
**MAP OF POPULATION LIVING BELOW THE 100% FEDERAL POVERTY LEVEL,
CHICAGO, ILLINOIS**

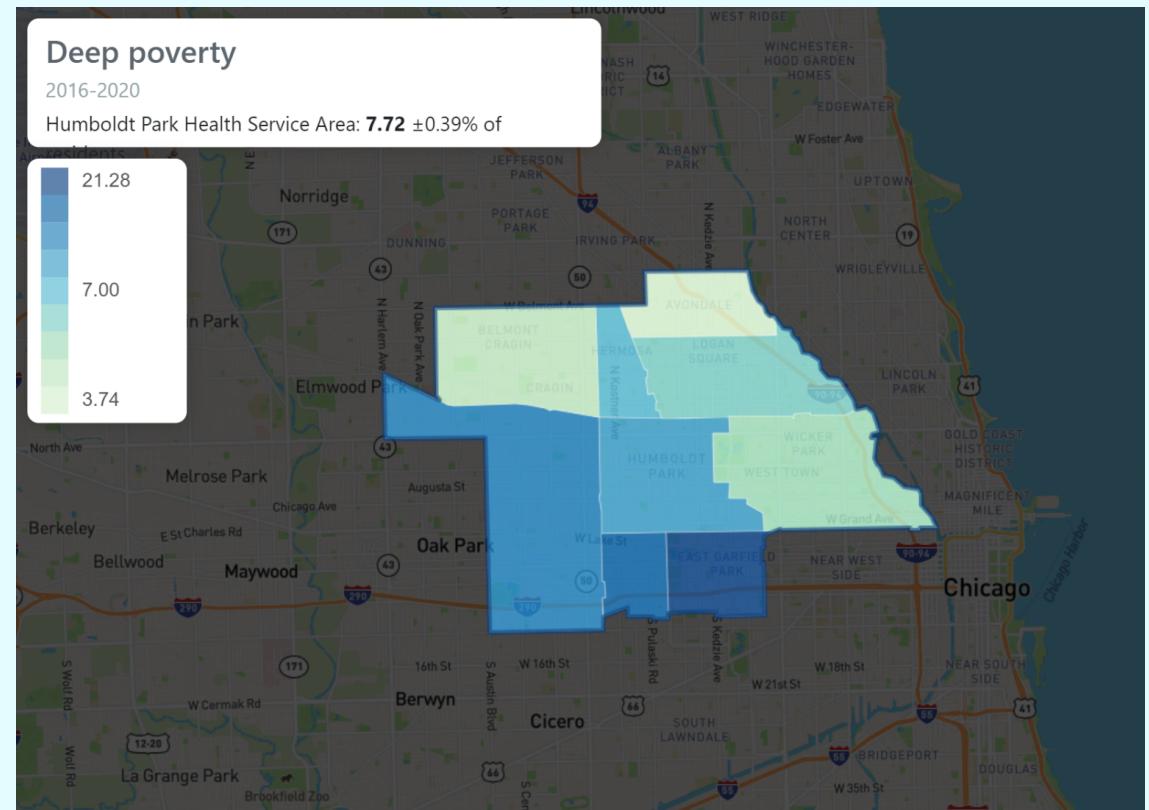


U.S. Census Bureau, American Community Survey, 2016-2020

POVERTY

East Garfield Park and West Garfield Park have the highest percentages of households living in deep poverty (below the 200% federal poverty level) compared to the 8% deep poverty rate for the service area overall (Figure 22).

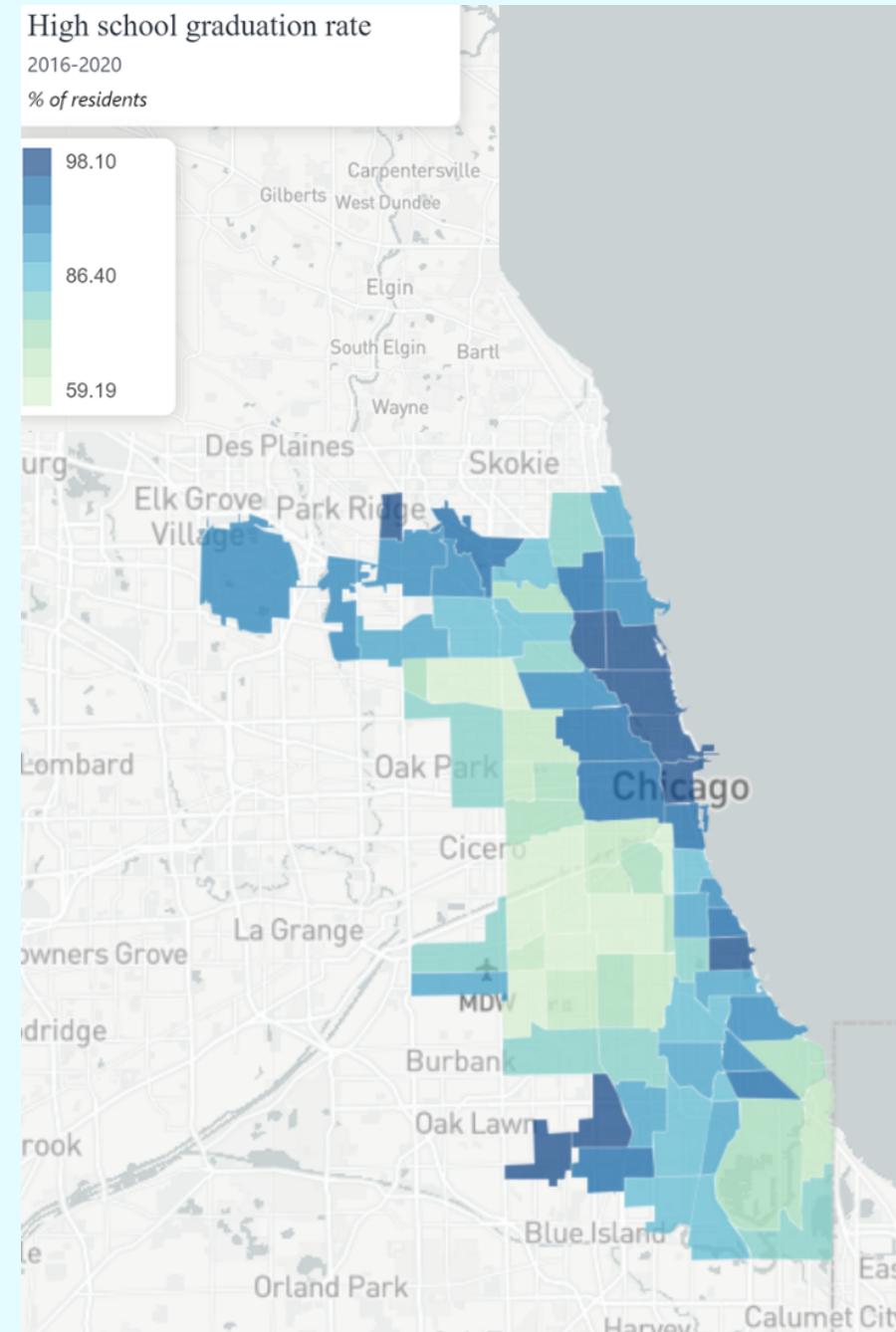
FIGURE 22.
PERCENTAGE OF POPULATION LIVING BELOW THE 200% POVERTY LEVEL IN HUMBOLDT PARK HEALTH'S SERVICE AREA



EDUCATION

Education is an important determinant of health because poverty, unemployment, and underemployment are highest among those with lower levels of educational attainment. As shown in Figure 23, the percentage of community members in Humboldt Park Health's service area who have a high school education is 82%, which is comparable to the rate for Chicago overall (86%).

FIGURE 23.
MAP OF THE PERCENTAGE OF ADULTS AGED 25 OR OLDER WITH A HIGH SCHOOL DIPLOMA OR EQUIVALENT, CHICAGO, ILLINOIS

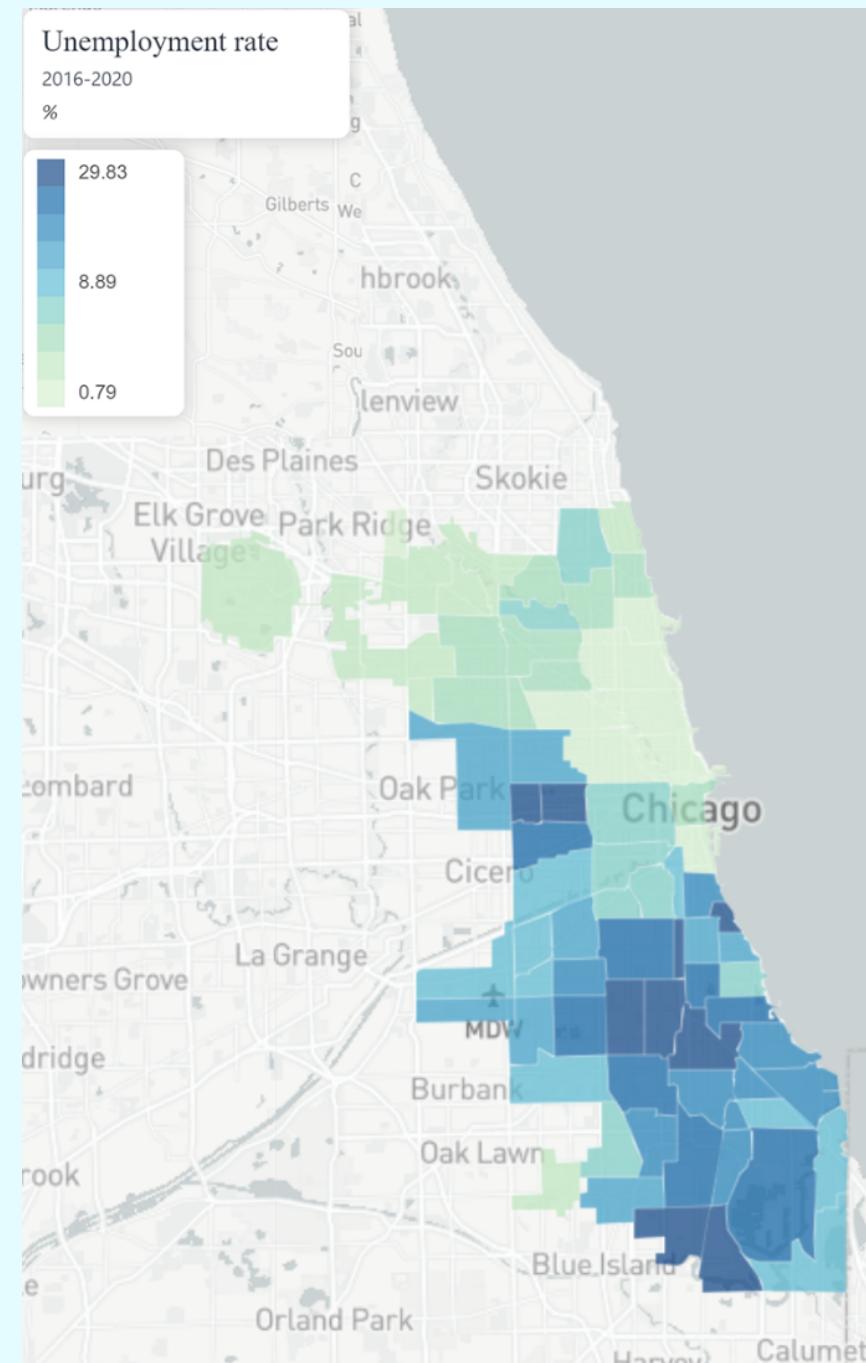


U.S. Census Bureau, American Community Survey, 2016-2020

UNEMPLOYMENT

Unemployment and underemployment can create financial instability, which influences access to health care services, insurance, healthy foods, stable quality housing, and other basic needs. The unemployment rate within Humboldt Park Health's service area (9%) is comparable to the city overall (8%). However, racial and ethnic disparities are prevalent, with non-Hispanic Blacks and Native Americans having higher than average unemployment rates within the service area. In addition to racial and ethnic differences, there are geographic inequities in unemployment as well (Figure 24).

**FIGURE 24.
MAP OF UNEMPLOYMENT RATES, CHICAGO, ILLINOIS**

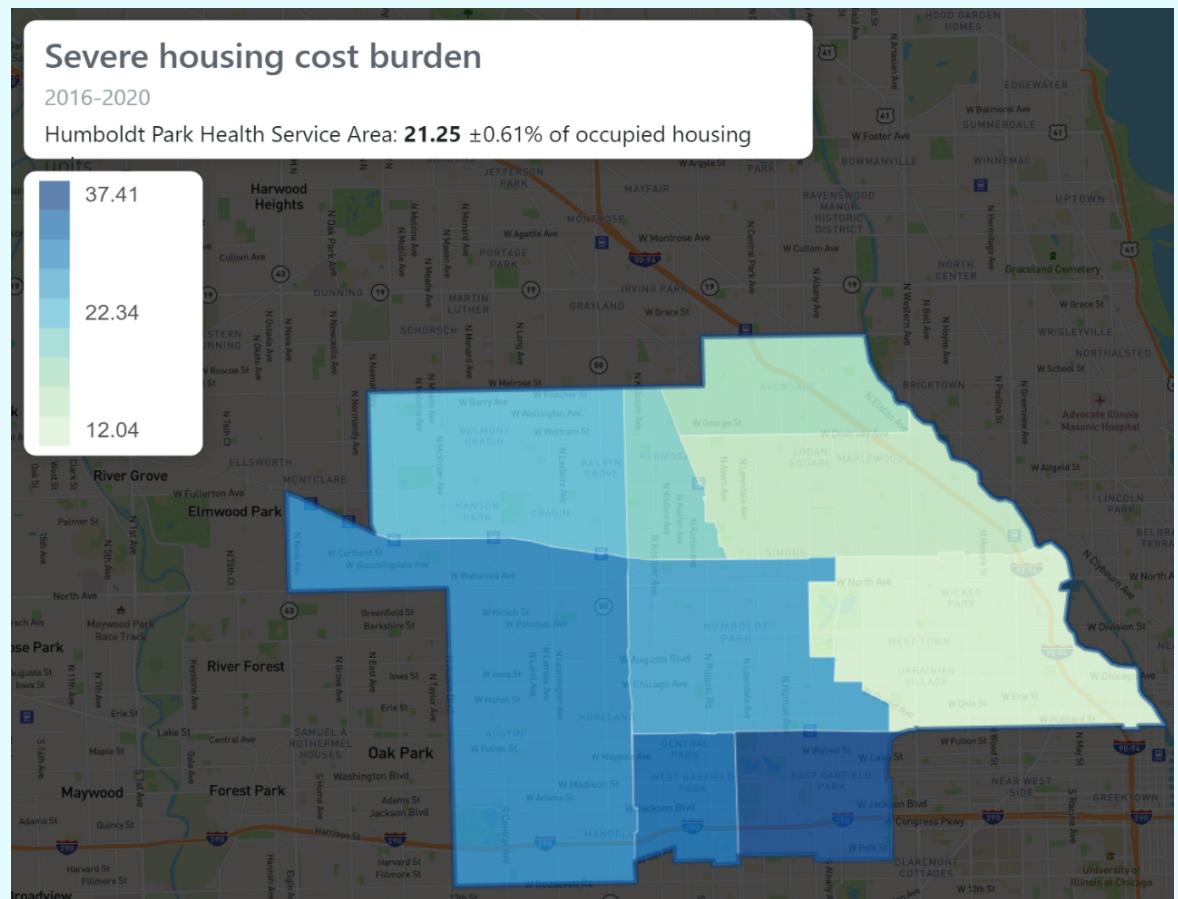


U.S. Census Bureau, American Community Survey, 2016-2020

HOUSING

Housing can serve as an opportunity for many people in this country, offering a pathway to better health, education, and businesses. However, for some people, housing (or the lack of it) provides a significant path to health inequities that have been sustained for decades due to systemic racism. Twenty-one percent of the population within Humboldt Park Health's service area is severe housing cost burdened, spending more than 50% of their income on housing costs. East Garfield Park and West Garfield Park have the highest rates of severe housing cost burdened population (Figure 25).

FIGURE 25.
**PERCENTAGE OF POPULATION EXPERIENCING SEVERE HOUSING COST
BURDEN IN HUMBOLDT PARK HEALTH'S SERVICE AREA**

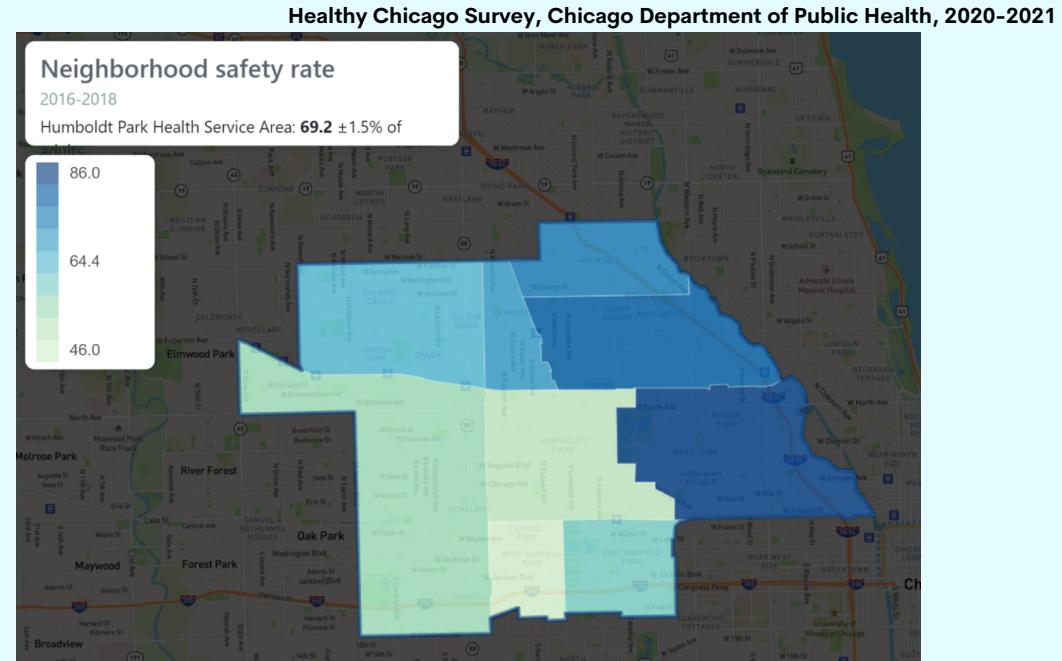


COMMUNITY SAFETY AND VIOLENCE

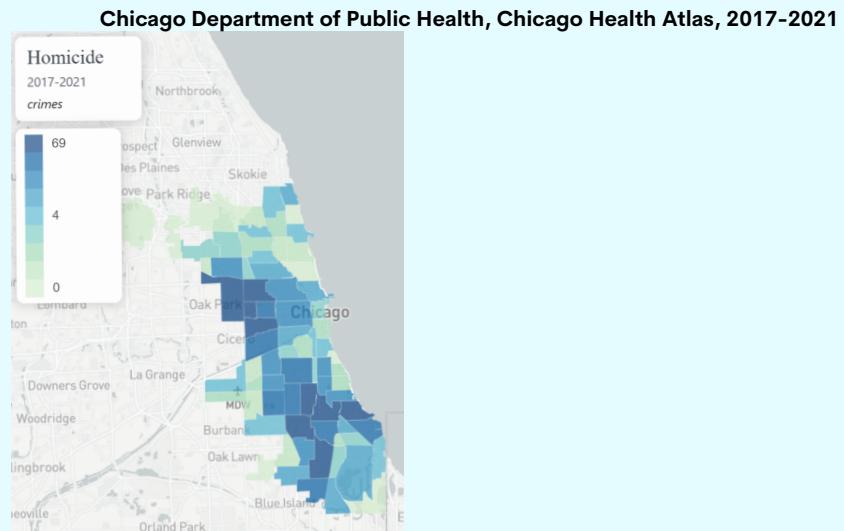
The root causes of community violence are multifaceted but include issues such as the concentration of poverty, education inequities, poor access to health services, mass incarceration, differential policing strategies, and generational trauma.

Research has established that exposure to violence has significant impacts on physical and mental well-being. In addition, exposure to violence in childhood has been linked to trauma, toxic stress, and an increased risk of poor health outcomes across the lifespan. Violence also has a negative impact on the socioeconomic conditions within communities that contribute to the widening of disparities. The percentage of adults who report that they feel safe in their neighborhood "all of the time" or "most of the time" within Humboldt Park Health's service area is 69% which is high compared to the city overall (63%) (Figure 26). However, there are geographic differences with only 46% of West Garfield Park and 49% of Humboldt Park residents reporting feeling safe (Figure 26). Five-year homicide trends vary within the service area as well (Figure 27).

**FIGURE 26.
PERCENTAGE OF ADULTS THAT REPORT FEELING SAFE IN THEIR
NEIGHBORHOOD "ALL OF THE TIME" OR "MOST OF THE TIME" IN HUMBOLDT
PARK HEALTH'S SERVICE AREA**



**FIGURE 27.
HOMICIDE, FIRST- AND SECOND-DEGREE MURDER CASES,
CHICAGO, ILLINOIS**



ACCESS TO HEALTHCARE

There are several complex factors that influence access to health care including proximity; affordability; availability, convenience, accommodation, and reliability; quality and acceptability; openness and approachability; and cultural responsiveness and appropriateness. Insurance coverage is associated with improved access to health services and better health monitoring. Within Humboldt Park Health's service area, approximately 6% of the population is uninsured with West Garfield Park having the highest percentage of uninsured population (14%) followed by Humboldt Park (11%) and Belmont Cragin (9%). Twenty-eight percent of the population in the service area has Medicaid coverage with East Garfield Park (55%) and West Garfield Park (54%) having the highest rates followed by Humboldt Park (40%), Austin (39%), Belmont Cragin (31%), and Hermosa (28%) (Figures 28-29).

FIGURE 28.
PERCENTAGE OF UNINSURED ADULTS IN HUMBOLDT PARK HEALTH'S SERVICE AREA

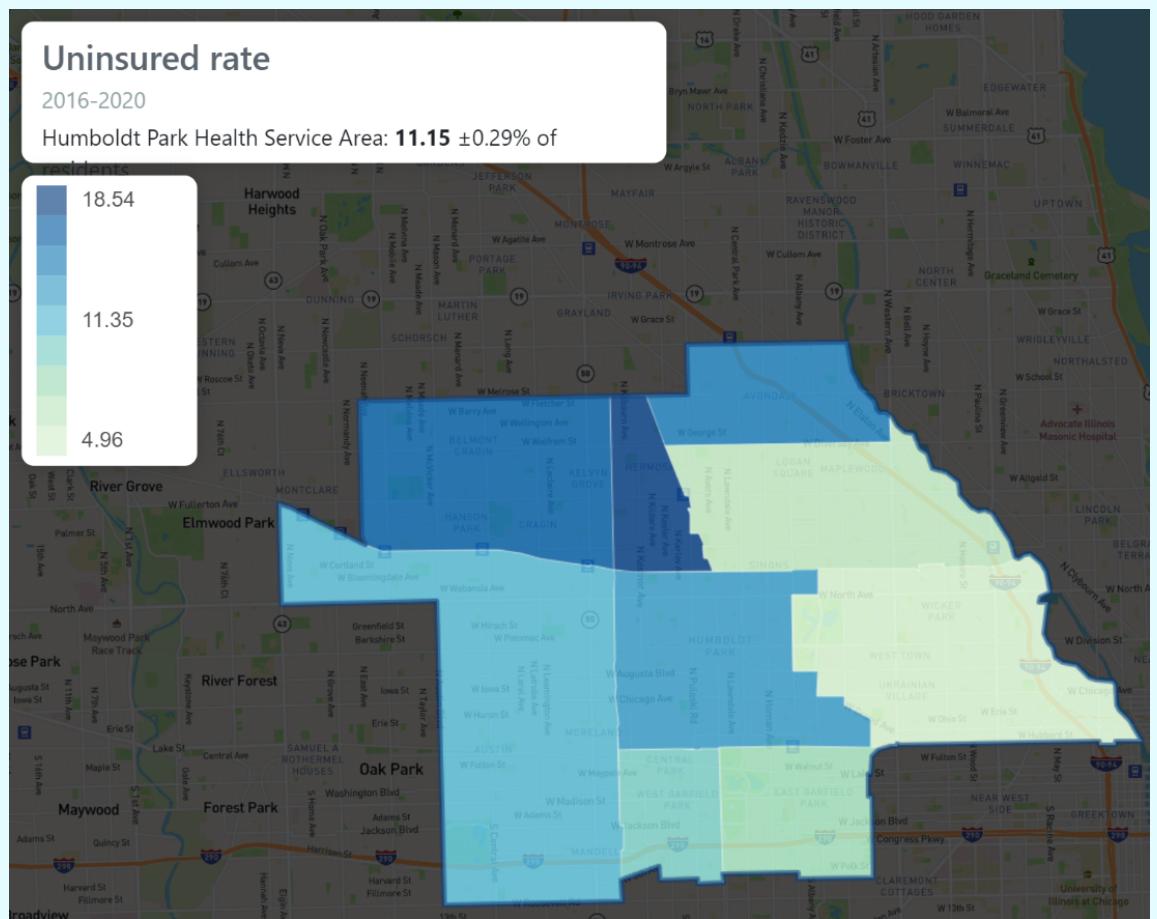
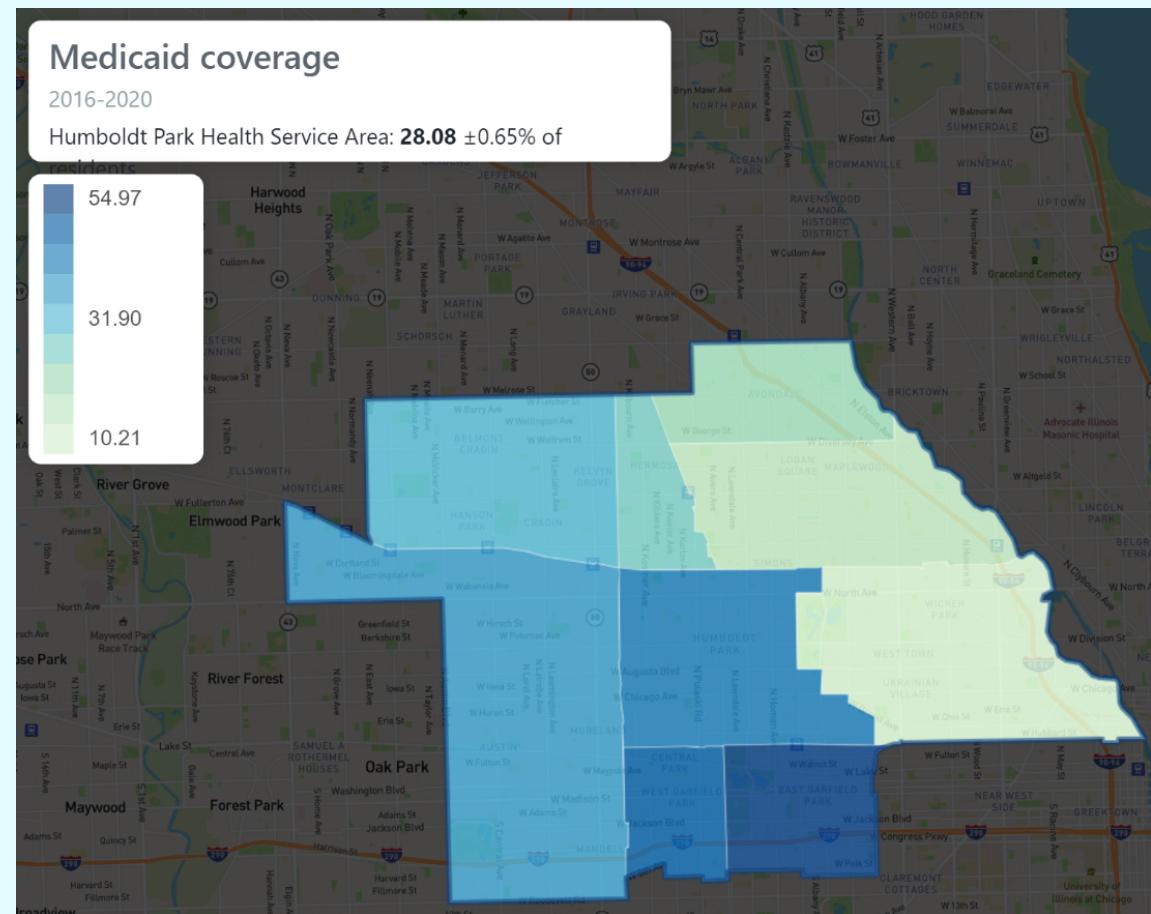


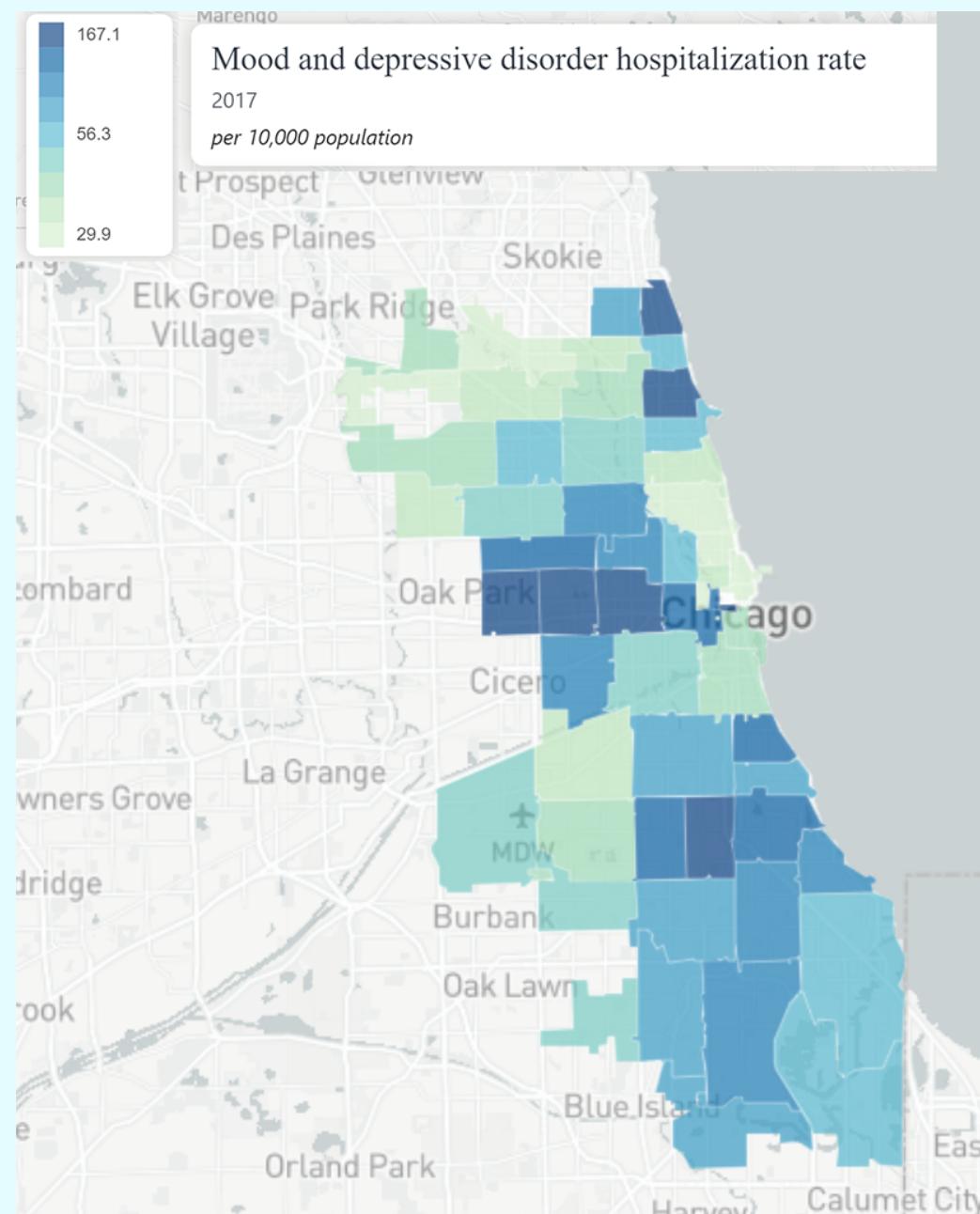
FIGURE 29.
PERCENTAGE OF POPULATION WITH MEDICAID COVERAGE IN HUMBOLDT PARK HEALTH'S SERVICE AREA



MENTAL HEALTH AND SUBSTANCE USE DISORDERS

The World Health Organization states that mental health is an integral and essential component of overall health and well-being. Mental health continues to be a top priority for communities in Chicago including those within Humboldt Park Health's service area. In 2019, 18% of the population in Humboldt Park Health's service area reported experiencing depression which is comparable to the rates for the city overall (18%). In addition, based on trends from the Healthy Chicago Survey, rates of people experiencing serious psychological distress have been increasing over time. Within the service area, the hospitalization rates for mood and depressive disorder were highest in East Garfield Park, West Garfield Park, and Humboldt Park (Figure 30).

FIGURE 30.
HOSPITALIZATION RATE PER 10,000 FOR MOOD AND DEPRESSIVE DISORDER, CHICAGO, ILLINOIS



SUBSTANCE USE DISORDERS

According to the American Psychiatric Association, a substance use disorder is a complex condition in which there is uncontrolled use of a substance despite harmful consequences, and day-to-day functioning becomes impaired. Mental Health America estimates that substance abuse affects 25 million Americans directly, and an additional 40 million Americans – such as families of drug users or those killed by intoxicated drivers – are impacted indirectly. Within Humboldt Park Health's service area, 23% of adults reported binge drinking in 2019 (Figure 31), and alcohol-related hospitalization rates are presented in Figure 32.

FIGURE 31.
PERCENTAGE OF ADULTS THAT REPORTED BINGE DRINKING IN HUMBOLDT PARK HEALTH'S SERVICE AREA

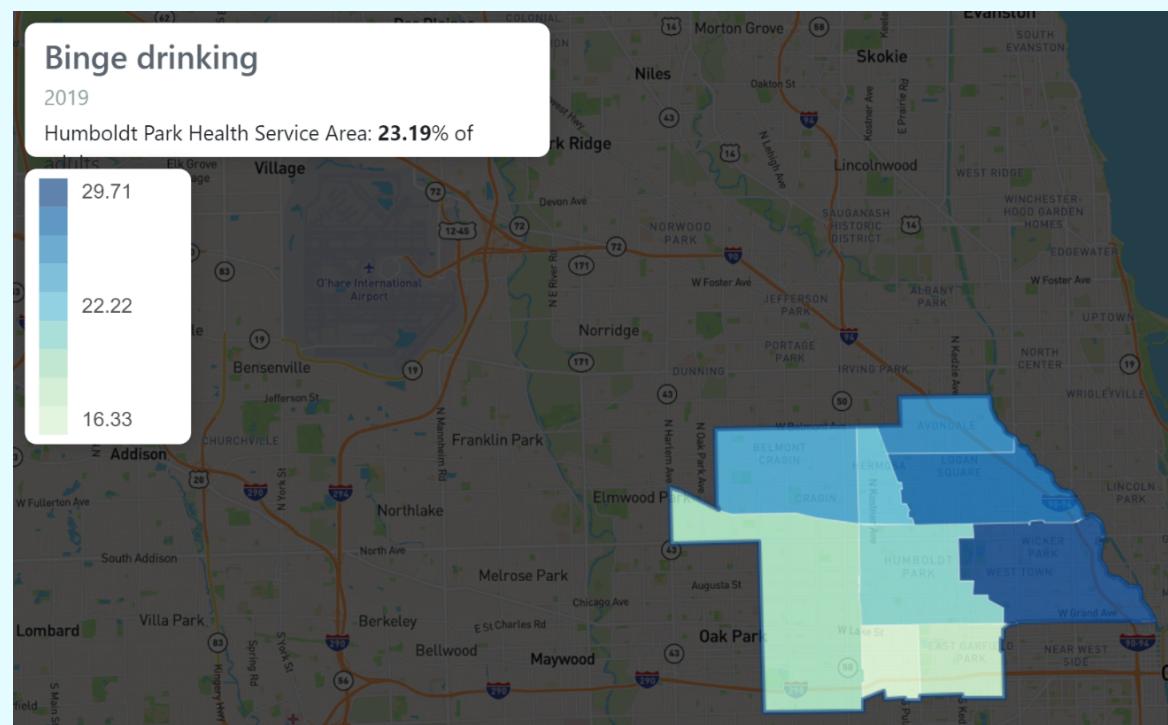
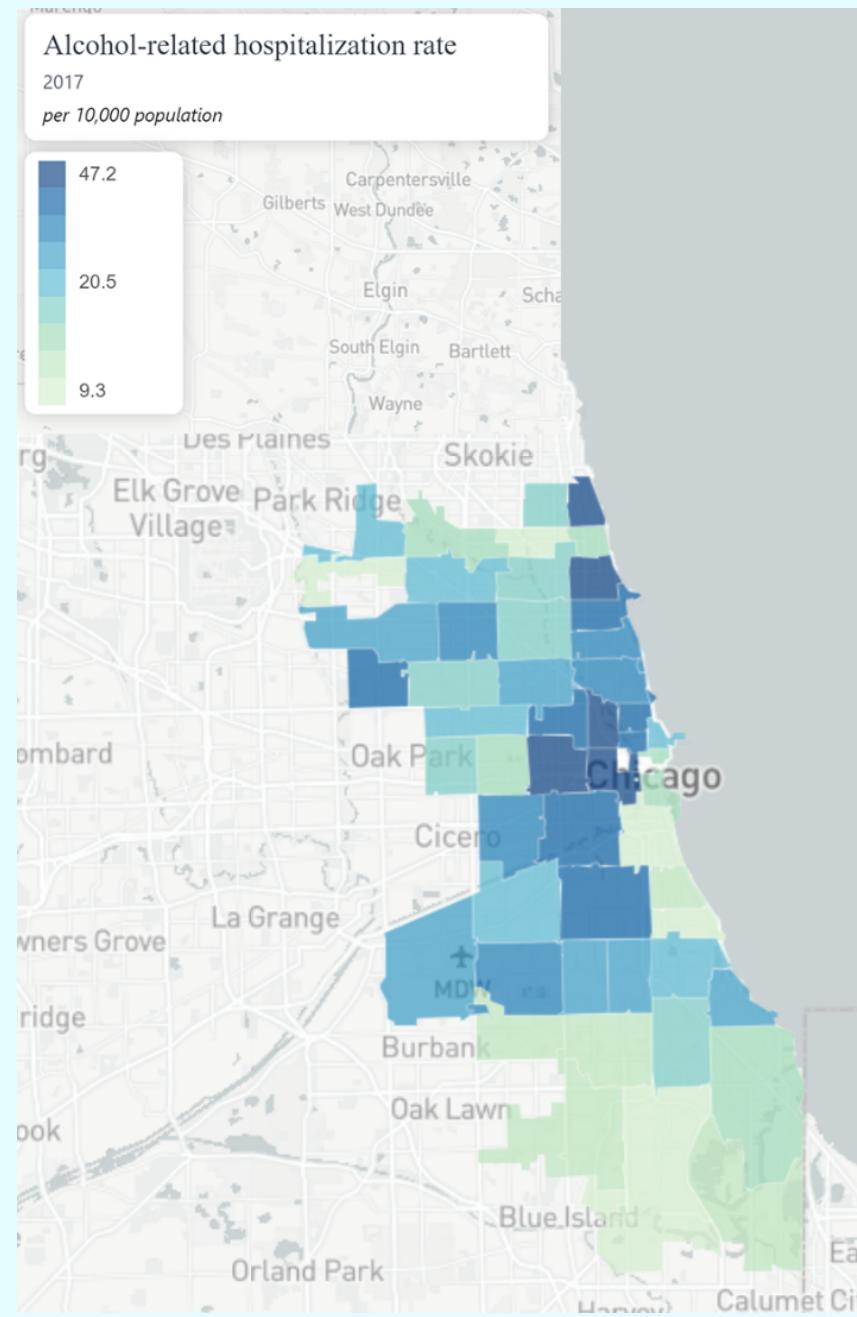
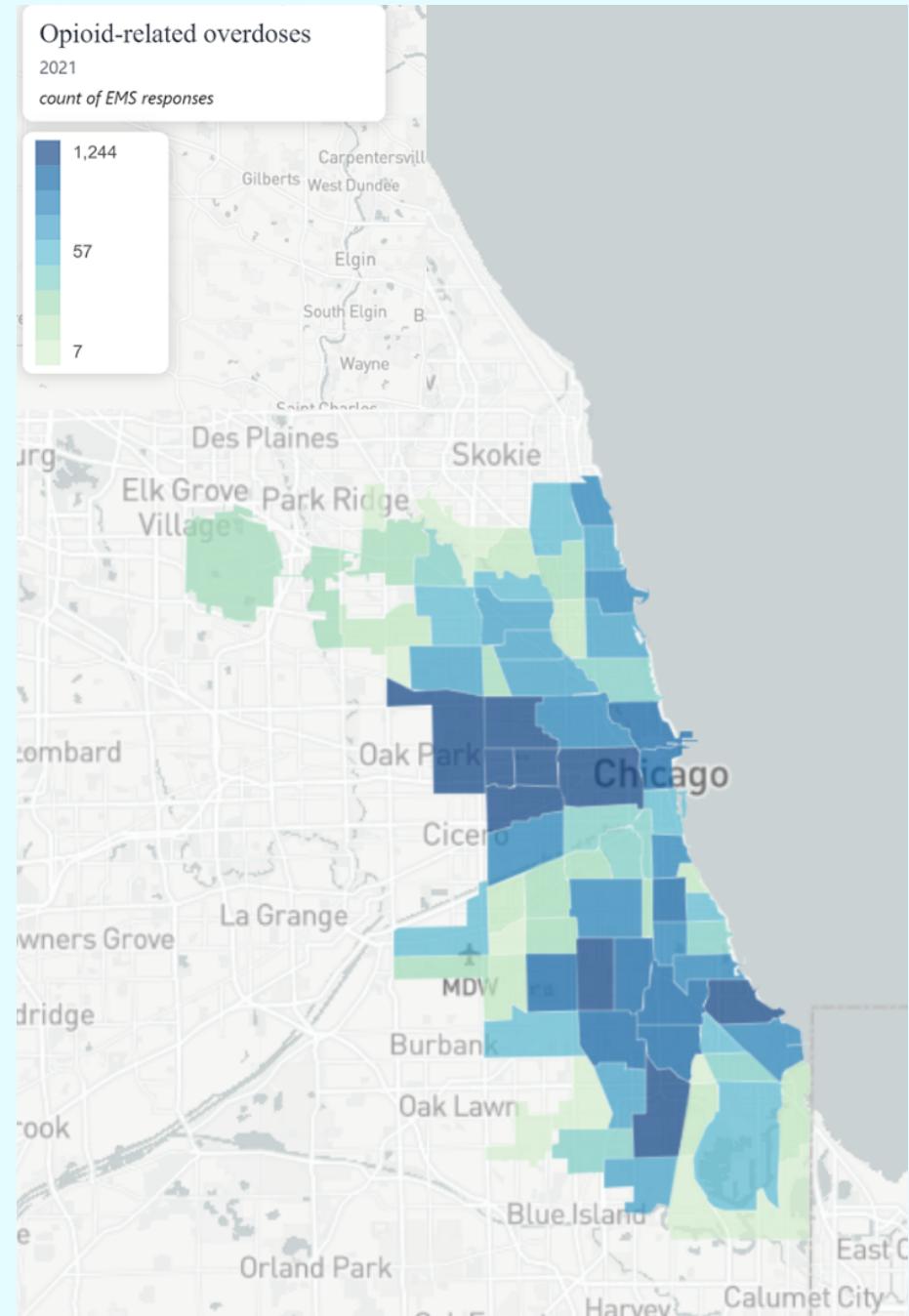


FIGURE 32.
ALCOHOL-RELATED HOSPITALIZATION RATE PER 10,000 POPULATION,
CHICAGO, ILLINOIS



Over the past several years, drug overdoses have steadily increased. In 2020 during the COVID-19 pandemic, the rates of drug overdose deaths hit a historic high in the United States. In addition, there are significant inequities in mortality with non-Hispanic Black people being hit the hardest by drug overdose deaths. Within the Humboldt Park Health's service area, Austin and West Garfield Park have the highest count of EMS calls for opioid overdoses (Figure 33).

FIGURE 33.
COUNT OF EMS RESPONSES FOR OPIOID OVERDOSES, CHICAGO, ILLINOIS



PRIORITY COMMUNITY HEALTH NEEDS

COUNTRYWIDE CHNA - SIGNIFICANT HEALTH NEEDS

Through the 2021-2022 countywide Community Health Needs Assessment (CHNA), the Alliance for Health Equity identified the following key health needs across Chicago and Cook County. (Figure 34)

- **Addressing social and structural determinants of health**

Issues involving social and structural determinants of health include: (1) addressing structural racism and advancing racial equity, (2) advocating for policies that advance equity and promote physical and mental well-being, (3) working towards conditions that support healthy eating and active living, (4) shifting power for community engagement in decision-making, (5) economic vitality and workforce development, (6) education and youth development, (7) food security and food access, (8) housing, transportation, and neighborhood environment, and (9) addressing trauma, violence and social isolation.

- **Improving access to care and community resources**

Issues involving access to care and community resources include: (1) addressing structural racism and discrimination in healthcare, (2) culturally and linguistically appropriate care, (3) data systems, (4) emergency and pandemic preparedness, (5) resources, referrals, coordination, and connection to community-based services, (6) increased timely linkage to appropriate care, including behavioral health and social services, (7) trauma-informed care, (8) workforce development and support for healthcare, behavioral health, and human services workers.

- **Addressing priority health conditions**

1. Chronic conditions;
2. COVID-19;
3. Injury, including violence-related injury;
4. Maternal and child health, including maternal and infant mortality;
5. Mental health;
6. Substance use disorders

Through addressing CHNA priorities, the Alliance for Health Equity seeks to **increase health equity, increase life expectancy, improve health, improve systems of care, and improve quality of life.**

During the Implementation Strategy planning phase of our work, Humboldt Park Health will prioritize the health needs that will be a focus of implementation work in our service area.

FIGURE 34.
ALLIANCE FOR HEALTH EQUITY - PRIORITY COMMUNITY HEALTH NEEDS FOR CHICAGO AND COOK COUNTY 2022



ADVANCING HEALTH EQUITY



THE WELLNESS CENTER



Humboldt Park Health's Community Health Needs Assessment (CHNA) is used to identify community health priorities, develop programs, and commit resources to effectively improve the health and wellness of our community members beyond the hospital walls.

The Wellness Center

When Humboldt Park Health adopted the tagline, Advancing Health Equity, as part of their rebranding in 2020, Mr. José R. Sánchez's vision for a Medical District within the heart of Humboldt Park began to take shape. At the epicenter, the community's desire for a Wellness Center started to come to fruition. 2023-2025, Humboldt Park Health broke ground on its pioneering capital project - the first of its kind 45,000-square-foot Wellness Center.

The Wellness Center will serve as a place to improve the health of Chicago's West side residents by extending the hospital's continuum of care with offerings such as swimming facilities, fitness training, exercise classes, mind-body integration, indoor running track, nutritional counseling, rehabilitation/sports medicine clinic and community gathering spaces. The Wellness Center aims to improve outcomes for chronic diseases such as obesity, heart disease, diabetes, and mental health through disease management and prevention.

The development of this facility anchors community revitalization and segways the road to wellness that HPH envisioned for our community. In collaboration with JGMA and All Masonry Construction, the facility is being constructed adjacent to the Humboldt Park Health campus at 2933 W. Division Street and will include a 6,400 sq ft pool room, sports medicine clinic, kids club, fitness area encircled by an indoor running track, a mind/body studio, group cycle room, and will community rooms and educational program rooms. The Wellness center is expected to open its doors in early 2024.

