+ Advocate Health Care







2025

Advocate Trinity Hospital

Community Health Needs Assessment Report

Letter from Division President

October 2025

At Advocate Health, we are redefining care for you, for us, for all. This purpose calls us to see health not just as a service, but as a shared journey. From discovery to everyday moments, everyone plays a vital role.

Our Community Health Needs Assessments (CHNA) are more than just reports. They are roadmaps for our future, centered on strong partnerships that lead to real and lasting solutions.

Throughout the CHNA process, we strive to listen deeply, learn continuously and act boldly to address the changing needs and strengths of our communities. By working together with our community partners, engaging with our neighbors and analyzing local data, we aim to provide the best possible care that extends beyond the walls of our hospitals and clinics.

As we close another CHNA cycle, I'm inspired by the profound difference we make each day across our Illinois Division. From groundbreaking research and exceptional clinical care to meaningful patient programs and cutting-edge innovations, our work is driven by the patients, families and communities we serve. Together, we are shaping healthier futures for all.

We are deeply grateful to the many individuals and organizations who contributed to this assessment. Your perspectives and partnership are essential to improving the health and well-being of our communities, and we are proud to stand beside you in this work.

Publishing this CHNA is not the end of the conversation. It's an invitation to keep it going. We welcome your feedback, ideas and suggestions. At the end of this report, you'll find a link where you can share your thoughts on how we can strengthen community programs and strategies to better serve you and your neighbors.

Let's move forward toward better health for all.

Together always,

Dia Nichols

President, Illinois Division, Advocate Health

Table of Contents

I.	Exe	ecutive Summary	04
II.	De	scription of Advocate Health Care and Advocate Trinity Hospital	05
	A.	Advocate Health Care	.05
	B.	Advocate Trinity Hospital	.05
III.	20	25 Community Health Needs Assessment	06
	A.	Community Definition	.06
	B.	How the CHNA was Conducted	.09
	C.	Summary of CHNA Findings	.10
IV.	Pri	oritization of Health-Related Issues	21
	A.	Priority Setting Process	.21
	B.	Health Needs Selected	.21
	C.	Health Needs Not Selected	.22
V.	Ар	proval of Community Health Needs Assessment	23
VI.	Ve	hicle for Community Feedback	23
VII.	E	Evaluation of Impact from Previous CHNA	23
VIII	. <i>P</i>	Appendices	24
	Ар	pendix 1: 2025 Community Health Needs Assessment Data Sources	.24
	Ар	pendix 2: Community Resources Available for Significant Needs	.25
	Ар	pendix 3: References	25
	Ар	pendix 4: Additional Data	.26

EXECUTIVE SUMMARY

In 2025, Advocate Trinity Hospital conducted a Community Health Needs Assessment (CHNA) for its Primary Service Area (PSA), which includes six zip codes in Cook County. The CHNA analyzed demographic, socioeconomic, and health data alongside input from the Alliance for Health Equity (surveys and focus groups).

The PSA population is 361,421, comprised of 5.7% Non-Hispanic White, 11.8% Hispanic/Latino, 7.7% Asian/Pacific Islander, and 80.1% Non-Hispanic Black/African American, with a median household income of \$51,872.

The Community Health Council (CHC) - comprised of hospital leaders and community representatives - guided the process through data review, discussion, and prioritization exercises. Health issues were rated against criteria including severity, urgency, disparities, cost, preventability, and long-term impact.

Key Findings

The assessment identified six significant health needs: Diabetes, Community Safety, Mental Health, Obesity, Food Security, Substance Use. After prioritization, the three **top health priorities** chosen by the CHC for 2026–2028 were confirmed as:

- 1. Mental health
- 2. Obesity
- 3. Diabetes

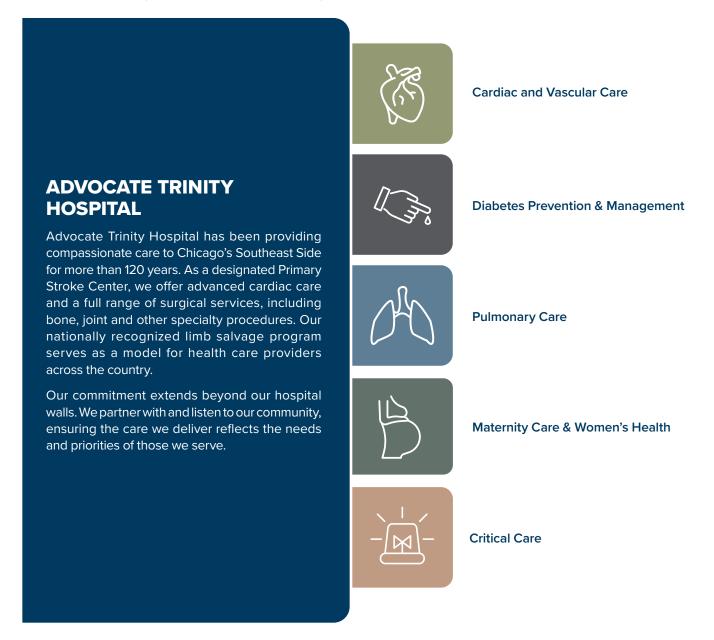
Cancer, housing, and maternal health were also noted as important concerns but were not included locally given Advocate Health's system-wide investments in these areas.

Next Steps

Advocate Trinity Hospital, in collaboration with community partners, will develop an implementation strategy aligned with these priorities. Using a collective impact model, the strategy will define goals, objectives, and measurable outcomes to monitor community impact and program effectiveness.

ADVOCATE HEALTH CARE

Advocate Health Care is the largest health system in Illinois and a national leader in clinical innovation, health outcomes, consumer experience and value-based care. One of the state's largest private employers, the system serves patients across 11 hospitals, including two children's campuses, and more than 250 sites of care. Advocate Health Care, in addition to Aurora Health Care in Wisconsin and Atrium Health in the Carolinas, Georgia and Alabama, is a part of Advocate Health, the third-largest nonprofit health system in the United States. Committed to redefining care for all, Advocate Health provides nearly \$6 billion in annual community benefits.



2025 COMMUNITY HEALTH NEEDS ASSESSMENT

A Community Health Needs Assessment (CHNA) is an analysis of the population, resources, services, health care statuses, health care outcomes, and other data within a defined community or service area that helps identify potential health issues being experienced by community members. Every nonprofit hospital is required to complete a CHNA every three years under the <u>Patient Protection and Affordable Care Act (ACA)</u>, to demonstrate that a hospital is committed to promoting health.

A CHNA report is designed to inform a wide range of groups to learn more about a community's health and most urgent needs. It is a key tool for promoting health for all, as it lifts the community voice and encourages collaboration between different groups to create focused strategies to address the health needs identified in the CHNA.

Community Definition

For the purposes of this assessment, "community" is defined as a group of people living in the same place or having a particular characteristic in common. Advocate Trinity is located on the Southeast side of Chicago. The hospital's primary service area (PSA) consists of six zip codes: 60617 (South Chicago), 60619 (Grand Crossing), 60620 (Auburn Gresham), 60628 (Roseland), 60643 (Morgan Park) and 60649 (South Shore). Exhibit 1 represents a map of Advocate Trinity's primary service area.

Understanding who lives in a community is an important part of the CHNA process. A community is more than just a place on a map - it's made up of the people who live there, their shared experiences, and their differences. These differences can include things like age, income, education, race or ethnicity, and what people know about health. Learning about these details helps us see what specific health problems people face and what support they may need.

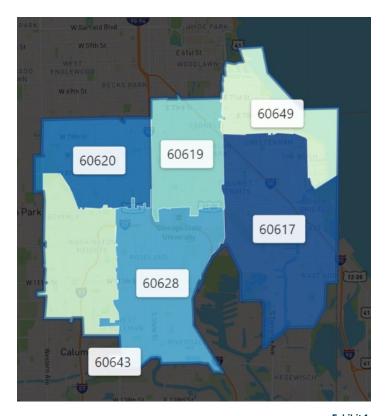


Exhibit 1: PSA Map, 2025

2019-2023 Data Estimates

Population

361,421

Decrease of 5.7% between 2010 and 2020 Census.

(Metopio, American Community Survey, 2020)

Gender

44.9% Male

55.1% Female

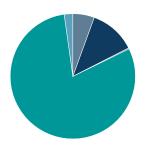
Median Age

36.7 years Males

42.6 years Females

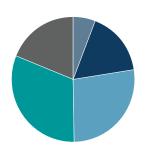
Population by Race/Ethnicity

Non-Hispanic (NH) White 5.7% **Hispanic or Latino** 11.8% 0.4% **Asian** Non-Hispanic (NH) Black 80.1%



Population by Age Group

Infants 0-4 5.9% Juveniles 5-17 16.7% Young Adults 18-39 27.2% Middle-Age 40-64 31.4% Seniors 65+ 18.8%



Spanish as Primary Language Spoken at Home

2.0%

8.44% **PSA** 28.5% 60617 **18.44%** Cook County 2.91% 60619

Household/Family

Two or More Races

Single Parent Households

12.05% PSA

14.92% 60620

7.06% 60643 **Seniors Living Alone**

36.67% PSA

31.12% Cook County

29.16% Illinois

High School Graduation

Education

87.7% PSA

88.3% Cook Co

90.3% Illinois



College Degree or Higher

25.3% PSA

42.0% Cook Co

37.2% Illinois

Children Under Age 18

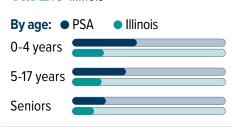
22.6% PSA

People living below the poverty level

23.1% PSA total

13.3% Cook County

11.72% Illinois



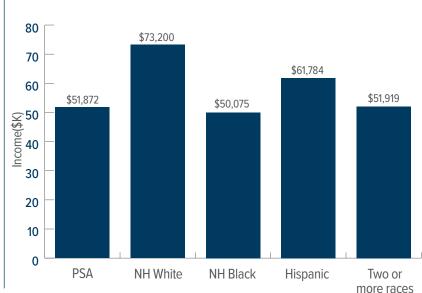
Unemployment rate of population 16+

15.08% PSA

7.08% **Cook County**

5.96% Illinois

Income by Race/Ethnicity (2019-2023)



Social Drivers of Health

Social drivers of health are the things in our everyday lives that can help us stay healthy or make it harder to be healthy. These include where we live, the food we eat, the schools we go to, the jobs our families have, and whether we can see a doctor when we need to.

Social Drivers of Health can also cause health differences between groups of people. For example, if someone lives far from a store with healthy food, it's harder for them to eat well. This can lead to health problems like heart disease or diabetes. Just telling people to eat healthy isn't enough - we need to make sure they have what they need to make healthy choices. That's why people who work in health, schools, housing, and transportation must work together to help everyone live a healthy life.

Social Conditions at a Glance

To better understand these factors and identify health inequities in a community, Advocate Health Care has partnered with Metopio, a software company that focuses on how communities are connected through people and places. Metopio's tools use data to show how different factors in each area influence health. It uses the latest data to create visual tools that focus on specific communities and hospital service areas.

The following section contains descriptions of three important indices found in Metopio. These indices combine various data points to compare areas in the community, helping to identify disparities caused by social factors that impact health. By doing this, it can better focus on health improvement efforts where they are most needed.

Social Vulnerability Index (SVI) – The Social Vulnerability Index (SVI) shows how vulnerable a community is based on 15 social factors like unemployment, disability, and minority status to help identify and map the communities that will most likely need support before, during, and after a hazardous event. Scores range from 0 (least vulnerable) to 100 (most vulnerable). (Source: Metopio, CDC, 2022).



Hardship Index – The Hardship Index is a composite score reflecting hardship in the community (higher values indicate greater hardship). It incorporates unemployment, age dependency, education, per capita income, crowded housing, and poverty into a single score that allows comparison between geographies. It is highly correlated with other measures of economic hardship, such as labor force statistics, and with poor health outcomes. (Source: Metopio, Diversitydatakids.org, 2017–2021).



Childhood Opportunity Index 3.0 – Childhood Opportunity Index 3.0 is a composite index that captures neighborhood resources and conditions that matter for children's healthy development, scored as Very Low (1-19), Low (20-39), Moderate (40-59), High (60-79), and Very High (80-100). (Source: Metopio, U.S. Census Bureau, ACS, 2018–2022).



How the CHNA Was Conducted

Purpose and Process

Every three years, Advocate Trinity Hospital conducts a Community Health Needs Assessment (CHNA). The CHNA identifies key health needs and issues within the hospital's PSA. The identified needs are shared with community-based organizations and the hospital's governing council to develop initiatives to improve the health of the community.

Partnership

Advocate Trinity is an active member of The Alliance for Health Equity. In addition to Advocate Trinity, the Alliance collaborates with hospitals and community-based organizations across Chicago and Suburban Cook County. The collaborative Community Health Needs Assessment (CHNA) was conducted January through October 2024. The Alliance conducted a series of focus groups and surveys to review and provide feedback on community health priorities.

Data Collection and Analysis



Community Surveys

The Alliance for Health Equity conducted a community input survey designed to understand community health needs and assets with a focus on hearing from community members that are most impacted by health inequities. From January to October 2024, around 200 community input surveys were collected in Trinity Hospital's service area.

Surveys were collected in both paper and online format through various channels. The Alliance leveraged community partnerships to facilitate participation by communities often underrepresented in community assessments. Surveys were collected at focus groups, clinical office visits, community events, and by contracted community partners. The online survey was provided in multiple languages and shared in email newsletters and on social media.

Focus Groups

Six focus groups were conducted within Trinity Hospital's service area or included participants living within the service area. Hosted by community partners, the focus groups included community residents and local service providers. The focus groups covered several different priority populations and topics including education, housing, social services, workforce development, food insecure individuals and families, adults with disabilities, Black/African American individuals, young people of color, and older adults.



Secondary Data

Advocate Health Care has a contract with Metopio to provide an internet-based data resource for their hospitals during the CHNA cycle. This robust platform offers curated data from public and proprietary sources for information on health behaviors and health risks, health outcomes, health care utilization, demographic, and community-level drivers of health like economic, housing, employment, and environmental conditions. Data for each indicator is presented by race, ethnicity, and gender when the data is available. All data collected through Metopio was quantitative and included data comparisons between county, the state of Illinois and United States data.

Summary of Findings

Overall Health Status

Overall, Advocate Trinity Hospital's health outcomes are slightly worse than Cook County and the State of Illinois.

Additionally, many disparities - or differences in outcomes - exist between groups of populations in nearly every social and health issue, especially for Black, Indigenous and People of Color (BIPOC) populations.

These disparities are often caused by barriers that these communities face. Health inequities are the unfair differences in health that can be avoided, measured and are often linked to injustice (AMA, 2021).

As you look at the data in the following sections, it is important to remember that these health issues are connected to many of these broader social and environmental factors.

Mortality - Leading Causes of Death

According to the Illinois Department of Health, heart disease, cancer, accidents, COVID-19 and stroke are the five leading causes of death (Source: IDPH, 2022).

Life Expectancy

The average life expectancy among residents:

Trinity PSA: 73.6 years
Cook County 78.5 years
Illinois 78.7 years

(Source: Metopio, U.S. Small-Area Life Expectancy Estimates Project (USALEEP), 2010-2015)

Identified Significant Needs

The following health needs section reviews parts of health such as health outcomes, social factors, and health behaviors.

- **Health outcomes** are the results of how healthy people are. This includes how many people in our community are affected by long-term illnesses, and the differences we see between groups of people.
- Social factors include things like income, education, jobs, and access to healthcare.
- **Health behaviors** are the choices people make, like what they eat and how much they move, and are often shaped by where people live and what is normal in their community.

Community input is important during this CHNA process, as it helps us decide which problems to focus on first. A health need is seen as important, or significant, if it's a big concern for the community, matches public health goals, and is backed up by data.

From the list of significant needs, we choose a smaller group of prioritized needs. These are the needs we will focus on first, in a very targeted way. This helps us make a plan to improve community health in the best way possible.



Areas of Opportunity Identified Through This Assessment

Diabetes

- · Diabetes Instances
- Hospitalization Rates
- Emergency Department Visits

Community Safety

- · Property Crime
- Violent Crime
- Assault by Firearm

Mental Health

- · Mental Health Treatment Facilities
- · Suicide and Self-Injury ED for Adolescents
- · Mental Health Hospitalizations

Obesity

- Obesity Rates
- Adult and Childhood obesity
- No Exercise

Food Security

Food Access

Substance Use

- Alcohol Use
- Drug Overdose
- · Opioid Use

The following pages summarize the top identified needs - also known as significant needs - from the CHNA process.

Why is this important? According to the World Health Organization (WHO) diabetes is a chronic disease that occurs either when the pancreas does not produce enough insulin or when the body cannot effectively use the insulin it produces. Uncontrolled diabetes over time leads to serious damage to many of the body's systems, especially the nerves and blood vessels. In 2022, 14% of adults aged 18 years and older were living with diabetes, an increase from 7% in 1990. More than half (59%) of adults aged 30 years and over living with diabetes were not taking medication for their diabetes in 2022 (WHO, 2025) Diabetes.

Significant Need Reasoning

In the Alliance for Health Equity (AHE) survey assessment, 21.5% of survey respondents (n=191) from the PSA recognized diabetes as the third top health concern.

Secondary data shows large disparities in outcomes for this disease in the service area, especially for Non-Hispanic Black/African American residents.

Survey respondents across the county ranked diabetes as the second biggest health issue in the community, with 22% ranking it.

Key Findings

- In the United States, an estimated 38.4 million people are living with diabetes, representing about 11.6% of the total population. Diabetes is the eighth leading cause of death nationwide and contributes to roughly \$412.9 billion in medical costs each year.
- 18.3% of adults in the Advocate Trinity PSA have been diagnosed with diabetes.
- The diabetes hospitalization rate in Advocate Trinity
 Primary Service Area is significantly higher than the rates
 in Cook County and Illinois. Long-term complications of
 diabetes, both with hospitalization and ED rates, are also
 much higher in the PSA than in the county and state.
- The rates for lower-extremity amputation with diabetes hospitalizations is significantly higher than in the county and state. This indicates a notable disparity in healthcare outcomes related to diabetes and amputation within this region.

» Trinity PSA: 85.3» Cook County: 54.4

» Illinois: 51.2

- Adults and Seniors in the PSA have higher rates of longterm complications due to diabetes, which is also higher than the state of Illinois, indicating a higher level of uncontrolled diabetes in the area.
- Young adults are seen in the emergency department and hospital at higher rates for short-term complications due to diabetes.

Contributing Factors

- AHE Focus group participants from the PSA stated that numerous factors contribute to chronic health conditions, such as diabetes. They noted that several health behaviors and social determinants are contributing to chronic diseases, and there is inadequate access to medications for residents.
- Economic instability and poverty restrict access to healthy food, medications, and diabetes management tools, contributing to poor glycemic control and higher complication rates. In our PSA, the communities experiencing greater hardship are also experiencing diabetes-related complications.
- Low education levels and health literacy affect individuals' ability to understand and manage their condition, resulting in missed screenings, improper medication use, and reduced engagement in preventive care.
- Neighborhood and environmental factors, such as lack of safe spaces for physical activity, poor housing conditions, and limited access to nutritious food exacerbate diabetes risks and outcomes, especially in underserved communities.

Diabetes continued



HIGHLIGHTED DISPARITIES

Indicator Trinity PSA Cook Co Illinois		Illinois	Insight/Disparity		
Diagnosed Diabetes (% of adults)	18.3%	10.8%	10.4%	Trinity nearly 2x higher than State rate	
ED Visits*	396.6	211.2	214.5	Highest zip codes: Race: 60628: 545.9 NH White: 629.7 60619: 419.8 NH Black: 409.1 60620: 413.8	
Hospitalizations*	387.7	202.8	178.8	Trinity 2x state average	
Long-Term Complication Hospitalizations*	206.7	130.2	112.1	Sharp increase with age (356.4 for 65+)	
Uncontrolled Diabetes Hospitalizations*	88.5	46.1	37.8	Seniors 188.3 per 100k	
Uncontrolled Diabetes ED Visits*	342.1	169.5	182.7	Race: Age: NH White: 505.9 18-39: 299.2 NH Black: 360.8 40-64: 354.6 65 and Older: 394.6	
Short-Term Complication ED Visits*	17.6	7.5	14.3	Race: NH Black: 20.2 Young adults ages 18-39 (26.0 per 100k) are most affected. Race: NH Black: 20.2 Highest zip codes: 60628: 24.2 60619: 20.5 60620: 17.8 60649: 19.0	
Short-Term Complication Hospitalizations*	181.2	74.6	71.9	Race: NH Black: 208.7 Highest zip codes: 60619: 220.5 60620: 201.8 60628: 212.2	
Lower-Extremity Amputation Hospitalizations*	85.3	54.4	51.2	Males have a much higher rate (126.2) than females (46.9)	

Sources: PLACES, CDC, 2022 Metopio, IHA COMPdata Informatics, 2020-2024

Community Safety (Property & Violent Crime)

SIGNIFICANT NEED

Why is this important? Experiencing violence, sexual assault and other forms of trauma can have harmful and lasting effects for individuals, families and communities. The impact goes beyond immediate harm and can include long-term physical impacts, mental health issues, health behavior risks, and financial costs. The chronic stress associated with feeling unsafe can cause anxiety, depression and fear of violence. It can keep people indoors, limiting access to social encounters, exercise, or even healthy foods options.

Significant Need Reasoning

Violent Crime ranked 2nd top heath condition by 27.2% of AHE focus group participants.

Property Crime ranked 5th top heath condition by 16.8% of AHE focus group participants.

In the Trinity PSA, assault by firearm has been significantly higher than both Cook County and Illinois. The rate of emergency department visits and hospitalization increased in 2016-2020 and 2020-2024. *Source: Metopio, IHA COMPdata Informatics, 2016-2024*

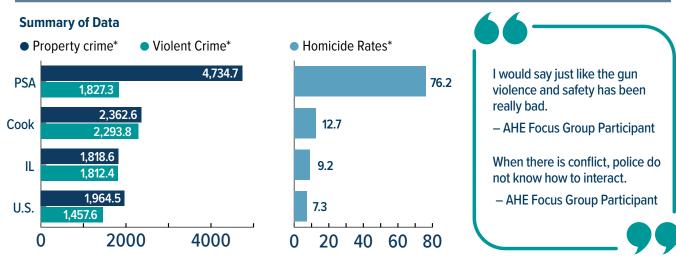
Key Findings

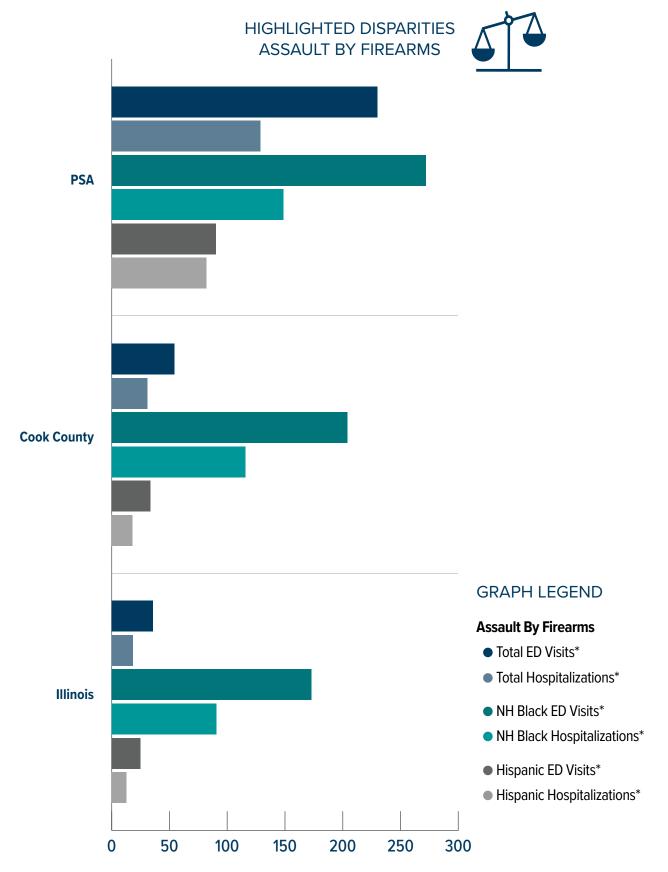
- Property crime and homicide rates are much higher in the Advocate Trinity PSA than in Cook County and Illinois.
- The hospitalization rates for assault due to firearms among Non-Hispanic Black are alarmingly higher than other race/ ethnicity groups.
- ED visits and hospitalizations due to assaults by firearms in the PSA are significantly higher than both the county and state levels.

Contributing Factors

AHE focus group participants from the Trinity service area stated that the following factors contribute to community safety, associated with property crime and violent crime:

- · Lack of economic opportunity
- Inaccessible community resources
- Lack of "outside of school" programs for youth
- · Police involvement is not helpful
- · Substance use disorders
- Lack of behavioral health treatment and need for greater mental health awareness
- Lack of conflict resolution alternatives
- Lack of infrastructure investment in roads and public safety measures
- · Lack of public transportation access





Mental Health

Why is this important? Mental health impacts our emotional, psychological, and social well-being. Mental health influences how we manage stress, build relationships, make decisions, and engage with all areas of our lives. Mental health is not just the absence of a mental health condition but also the ability to thrive. (CDC, 2025).

Significant Need Reasoning

In the Alliance for Health Equity (AHE) survey assessment, 20.9% of survey respondents (n=198) from the PSA recognized adult mental health as the 4th top health concern, and 26% of county survey respondents ranked it as the 1st top health issue.

25.4% of survey respondents highlighted that the ability to access mental health care services within a reasonable amount of time was needed for their community to be healthy.

Key Findings

- Cook County and Illinois mental health hospitalization rate has consistently declined over the years; it has increased in the Trinity PSA.
- The percent of adults that self-reported poor mental health in 2022 in the Trinity PSA was 17.75%.
 - » Highest rates of self-reported poor mental health are in 60649 (19.10%), both 60620 and 60628 are tied at 18.10% and 60617 and 60619 are tied 17.80%; all are higher than Cook County (15.3%) and Illinois (16.1%)
- The Trinity PSA's mental health ED visits and hospitalization rates are higher than the county and state levels, with young adults (18–39) and Non-Hispanic White residents having the highest rates.
- The 60628 community reports the highest rates of mental health hospitalizations (1,230.7); Non-Hispanic White residents living in the Trinity PSA have the highest hospitalization rate (4,008.9).
- Youth aged 5-17 and Non-Hispanic White residents face the highest suicide and self-injury ED visit rates; females have higher rates than males.

Contributing Factors

Many things affect a person's mental health - like genetics, stress, sleep, diet, trauma, and economic challenges. Since these factors vary for everyone, each person's experience with mental health is unique. While there are programs and services that support mental health and build resilience and recovery, not everyone has the same access to them. Other barriers include:

- Access/transportation to treatment
- · Social isolation
- Lack of youth therapy
- Stigma of embarrassment
- Not understanding services
- · Long waits, availability of services
- · Lack of providers
- · Cost of services
- · Underlying substance use
- · Accountability taking medication



Mental Health and homelessness is a huge problem

- AHE Focus Group Participant





HIGHLIGHTED DISPARITIES

	Suicide and Self-Injury ED Visits*	Suicide and Self-Injury Hospitalizations*
PSA	54.4	36.4
Cook County	45.0	34.6
Illinois	70.4	40.7
60628 Roseland	58.0	1,230.7
60617 South Chicago	53.8	464.8
60620 Auburn Gresham	58.5	820.1
60649 South Shore	62.6	933.8
NH Black	56.0	35.8
NH White	309.4	205.8
Hispanic	_	60.5
Men	44.4	34.7
Women	64.1	38.1
5-17 years	118.4	28.1
18-39 years	93.3	77.6
40-60	20.4	23.0
65 and older	_	11.3

(Sources: Metopio, IHA COMPdata, 2020–2024)

Why is this important? Being overweight or obese may seriously impact a person's health. Extra weight may lead to serious health consequences such as cardiovascular disease, type 2 diabetes, some cancers, and other chronic diseases. These conditions could reduce quality of life and shorten the individual's lifespan.

Significant Need Reasoning

In the Alliance for Health Equity (AHE) survey assessment, 16.2% of survey respondents (n=198) from the PSA recognized obesity as the 6th health concern, and 19% of county survey respondents recognized it as the 4th health concern.

Key Findings

- Across the U.S., adult obesity affects 41.9% of the population and youth obesity affects nearly 1 in 5 children. Black (49.9%) and Hispanic (45.6%) adults experience the highest rates, while Asian adults report the lowest. Among youth, American Indian/ Alaska Native (29.6%) and Black children (25.2%) are most impacted, underscoring persistent racial and ethnic disparities.
- In Cook County, 20.9% of adults reported no physical activity in the past month, with women more sedentary than men.
- Obesity rates in the Advocate Trinity PSA have steadily increased for nearly two decades. The obesity rates are significantly higher than both the state and the national average.
- The obesity rate in Advocate Trinity Primary Service Area increased from 38.77% in 2019 to 43.43% in 2022. The obesity rates in specific zip codes such as 60617, 60619, 60620, and 60628 also saw increases, with rates ranging from 41.9% to 45.7% in 2022.

Contributing Factors

- Physical activity is one of the most important ways people can improve their health, regardless of age or ability. Physical activity supports healthy aging, reduces chronic diseases, increases working efficiency, supports immune health, improves mental health, and prevents early death. There are many factors beyond age or physical ability that may impact one's ability to be active, such as the design of the neighborhood where they live.
 - » No Exercise reported rates:
 - ♦ Trinity PSA: 29.6%
 - ♦ Cook: 20.9%
 - ♦ IL: 22.1%
 - (Metopio, 2022)
 - » Walkability Index: (Values range from 1 to 20 with 20 being most walkable)
 - ♦ Trinity PSA 13.18
 - ♦ Cook: 13.61
 - ♦ IL: 10.56
- · Other barriers include:
 - » Lack of grocery stores
 - » Absence of green space for physical activity
 - » Lack of knowledge on how/where to find resources such as food pantries
 - » Limited transportation



HIGHLIGHTED DISPARITIES



Obesity Rates (2022)

PSA: 43.4%

Cook County: 32.8%

Illinois: 32.9% U.S.: 33.2%



Disparities by Community (2022)

60649: 45.7% 60619: 44.9%

60620: 44.7%

60628: 44.5%



Demographic Disparities (2024)

NH Black: 49.9% Hispanic: 45.6%



Disparities in Youth (ages 6-17)

Al/AN: 29.6% NH Black: 25.2% Hispanic: 23.7% Why is this important? Substance use - including alcohol and drug use - contributes to preventable health issues and is linked to social and economic issues. Substance misuse is also closely linked to mental health challenges, including depression, anxiety, and trauma-related disorders. These conditions often co-occur, making recovery difficult without proper support. Substance use in Advocate Trinity PSA includes controlled substances such alcohol, heroin, methadone, cocaine, hallucinogens and other substances.

Significant Need Reasoning

27.7% of AHE focus group participants ranked substance use as the 1st top health condition.

There are numerous disparities in substance use outcomes.

Over the past decade, drug-related mortality had been increasing in Chicago and Cook County, but has seen declines in recent years.

Key Findings

- Alcohol and opioid use has a disproportionate impact on White residents and younger adults. Emergency department visit rates for opioidrelated issues are highest among White and Asian individuals, as well as adults ages 40 to 64 and seniors 65 and older. Additionally, White residents experience the highest rates of emergency department visits related to alcohol use.
- While opioids impact all communities in our PSA, there are higher rates in key areas. 60628 (Roseland) and 60649 (South Shore) show the highest opioid-related ED visits and hospitalizations in the PSA.
- White residents have the highest substance use emergency department visit rates (5,057.2), followed by Asian and (3,367.7).

Contributing Factors

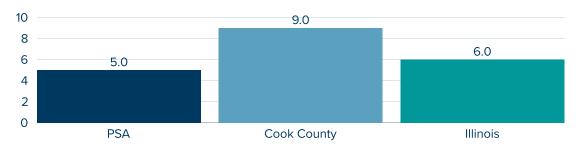
Poverty, unemployment, and underemployment create chronic stress and can make substances a coping mechanism.

Financial strain limits access to healthier coping outlets (therapy, wellness programs, safe housing).

Treatment and support for drug and alcohol use are not easily accessible to all people, especially for populations that are experiencing low income or have limited resources within their community.

Alcohol-related hospitalizations across the PSA reflect the chronic nature of substance use issues and the need for sustained public health interventions, especially in high-burden areas and among vulnerable populations.

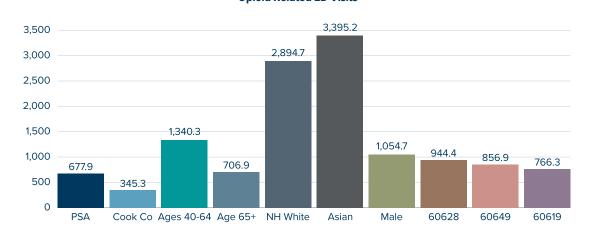
Opioid Treatment Providers



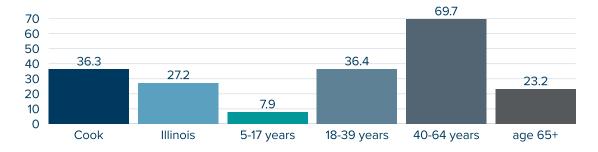
Substance Use continued



Opioid Related ED Visits*



Drug Overdose Mortality Rates*



And it's kind of been all over the news recently where a lot of people are experiencing a lot of health issues just because of substance abuse. So that's been impacting a lot of people, especially youth-wise.

– AHE Focus Group Participant

Why is this important? Having food security means having access to enough food for an active and healthy life. When people do not have regular access to healthy foods, they can develop problems like diabetes, high blood pressure, heart disease, or obesity. (Food Security in the U.S. | Economic Research Service.)

Significant Need Reasoning

In the Alliance for Health Equity (AHE) survey assessment, many communities in Cook County lack affordable access to healthy food. Focus group participants highlighted the prevalence of food deserts, stating that families often rely on processed, low-cost foods that contribute to health issues like obesity and malnutrition.

6.3% of PSA community input survey respondents identified hunger as a top health issue in their community, while 19% of county survey respondents identified resources for food including pantries, food banks, love kitchens, and SNAP programs as what their community needs to be healthy.

Key Findings

- In the PSA, 48.30% of residents face low food access, as defined by distance to a supermarket.
- A high percent of households in the Trinity PSA receive food stamps (32.19%), yet there are still 35.24% of households living in poverty that are not receiving food assistance.
- In the PSA, 17.24% of the residents are faced with food insecurity which is notably higher than the national average of 13.3%, Cook County of 12.1% and the state of Illinois 12.0%.

Contributing Factors

- High poverty rates in communities like South Shore, Grand Crossing and Roseland increase reliance on emergency food systems.
- Food insecurity is linked to higher rates of chronic disease (diabetes, hypertension, obesity).
- Transportation barriers make it harder to reach affordable and culturally appropriate grocery options ("food deserts").



HIGHLIGHTED DISPARITIES

Food Insecurity in the U.S.

National (2023): 13.5% of U.S. households (18M)

By Race/Ethnicity (2023):

Black households: 22.4% Hispanic households: 22.7% White households: 10.4%

Food Insecurity Locally

Trinity PSA: 17.2% Cook: 12.1% Illinois: 12.0%

Food Stamps (SNAP) (% of households)

Trinity PSA: 32.19% Cook: 15.21% Illinois: 13.46

Highest communities:

60649 (South Shore): 38.1% 60619 (Grand Crossing): 35.5% 60620 (Aubern Gresham): 34.2%

PRIORITIZATION OF HEALTH-RELATED ISSUES

PRIORITY SETTING PROCESS

The Community Health department of Advocate Trinity Hospital presented data that highlighted the demographics, social drivers of health (SDOH) and the prevalent health issues in the hospital's PSA to its Community Health Council from February through May 2025. In March 2025, The Alliance for Health Equity presented primary data to the council members that proved to have very similar findings to data presented during the four-month meetings. Those issues included:

- Cancer
- Cardiovascular Disease
- Demographics
- Diabetes
- Food Insecurity and Access to Healthy Foods
- · Hardship Index
- Housing

- Mental Health
- Obesity
- Respiratory Health
- Sexually Transmitted Infections
- Substance Use
- Unintentional Falls
- Social Environment
- · Maternal Fetal and Infant Care

In June 2025, a prioritization meeting was held with the council to vote on the health needs to address as part of the hospital's community health implementation strategy. Council members were presented with the top health needs from which to select the health priorities to address. Additional primary data was reviewed in this CHNA to add community safety, with a focus on violent crime.

HEALTH NEEDS SELECTED

The Community Health Council selected mental health and obesity as priority areas to focus on for the 2026-2028 implementation strategy cycle.

Mental Health

The Community Health Council selected mental health as a significant health need priority because this issue continues to have a high rate of emergency department visits and hospitalizations rates within the PSA. This need reflects the connection between substance use and the community need for local mental health services for all. The hospital will continue to investigate programs that prevent mental health emergencies and decrease ED visits and hospitalizations due to mental health issues.

Obesity

The Community Health Council selected obesity as its second priority to address based on the data reviewed for the PSA and county. Obesity prevalence has increased in the past two decades. Individuals with obesity are at higher risk for chronic health conditions such as diabetes, heart disease, cancer, and poor outcomes from COVID. Community health staff will investigate opportunities to develop strategies to address obesity in the hospital's PSA.

HEALTH NEEDS NOT SELECTED

Diabetes

Advocate Trinity Hospital addresses diabetes every day through our clinical services, including screenings, and education. The Community Health Department continues to offer Diabetes Prevention Programs to address pre-diabetes and continues to maintain hospital recognition from the CDC for participation with DPP. Participants of the program are reaching goals of five percent weight reduction, lowered A1C and achieving 150 minutes of physical activity.

Community Safety

Violent crimes have profound direct and indirect impacts on health in communities and can have broader socioeconomic effects that further impact the health of communities. Although ranked 2nd and 5th among the focus group survey conducted by The Alliance for Health Equity, the Community Health Council determined that this need is being addressed by other Advocate Health Care programs and initiatives. The Trauma Recovery Department has programs in place to help community members deal with traumas that may be associated with violent crimes in which they may be victims. Southland RISE is a collaborative uniting Advocate Health Care's Trauma Recovery Center and the Violence Recovery Program of UChicago Medicine (UCM). Inspired by U.S. Senator Dick Durbin's HEAL (Hospital Engagement, Action, Leadership) initiative, the two hospital systems work together with community violence prevention partners to improve long-term trauma recovery care and mitigate violence-related injury in the South Side of Chicago neighborhoods and surrounding area. Their work includes the Community Violence Prevention Grant program, Emergency Relief Fund for Survivors of Violence, and Community Violence Prevention and Hospital Response Cross-Profession Training.

Substance Use

Advocate Trinity is a community hospital that does not have a psychiatric unit and does not provide ongoing treatment for substance abuse. However, to meet the immediate needs of its ED patients and inpatients, and provide for continuity of care, the hospital provides referral and treatment options through Advocate Behavioral Health Services and the Family Care Network located at Advocate Christ and South Suburban hospitals.

Food Security

The Community Health Council did not select Food Security as a primary health concern, as Advocate Trinity is already dedicating significant resources to this area. The Food Farmacy program was established to support patients with chronic health conditions and individuals facing food insecurity. In collaboration with the Greater Chicago Food Depository, Top Box Foods, and Cristina Foods, the Food Farmacy continues to make considerable progress within the community.

APPROVAL OF COMMUNITY HEALTH NEEDS ASSESSMENT

Teammates from the Community Health department presented the CHNA findings to the hospital's governing council on October 21, 2025. The Advocate Health Care Board approved the report on December 10, 2025.

VEHICLE FOR COMMUNITY FEEDBACK

Community Feedback

If you have any questions or comments on the CHNA, please send an email to us at:

AHC-CHNAReportCmtyFeedback@aah.org.

This report can be viewed online at Advocate Health Care's Community Health Needs Assessment Report webpage via the following link: https://www.advocatehealth.com/hospital-chna-reports-implementation-plans-progress-reports.

A paper copy of this report may also be requested by contacting the hospital's Community Health Department.

EVALUATION OF IMPACT FROM PREVIOUS CHNA

The 2022 CHNA identified mental/behavioral health and diabetes as the primary health priorities for the hospital PSA. While 2025 is the final year for reporting progress for the 2023-2025 implementation strategy, complete outcome data is not yet available at the time of this report. However, significant community engagement and program implementation efforts have taken place.

Diabetes

Advocate Trinity maintained its recognition status as a Centers for Disease Control and Prevention (CDC) National Diabetes Prevention Program (DPP). The National Diabetes Prevention Program (DPP) is a Centers for Disease Control and Prevention program organized as a partnership of public and private organizations working to prevent or delay type 2 diabetes. In 2023, three DPP cohorts were established with 62 registered participants, and 55 qualified participants enrolled. A total of 14 participants successfully completed the year-long program on May 4, 2023. Eleven completers achieved 5% weight loss and reduced their A1C by at least 0.2 percent.

In 2024, five DPP cohorts were established with 85 registered participants and all 85 completed the program. Thirteen participants completed and achieved 5% weight loss. The participants spent an average of 144 physical activity minutes for the entire cohort. A total of 37 participants lost or maintained their weight.

Since 2022, a weekly wellness newsletter that includes fitness, healthy recipes and stress management techniques has been established to provide additional support for participants to meet their weekly average of 150 minutes of physical activity for weight loss. Over 70 participants from the DPP and Food Farmacy program have enrolled in the weekly mindfulness sessions.

Mental Health

Advocate Trinity is dedicated to improving the mental health of the community by preventing mental health issues and ensuring access to behavioral and mental health services. As part of this commitment, Trinity partnered with Advocate Faith and Health Department and NAMI Chicago to provide additional support and programming. The community can access Mental Health First Aid and behavioral health education, ensuring that they receive the necessary support and knowledge to manage their mental health.

In 2023, 58 participants completed the Mental Health First Aid Training. Other highlights included:

- Thirty-seven older adults from two senior housing centers completed a six-week Loneliness program.
- A total of 92 adults attended six Healing Toxic Relationships workshops at the Pilsen South East Wellness center.
- One hundred teens completed four sessions of the Teen Loneliness program.
- Over 280 community residents participated in the 4th district police faith-based committee prayer walk.

In 2024, 118 participants completed the Mental Health First Aid Training and 48 participants completed Youth Mental Health and First Aid Training. Other highlights included:

- Over 200 community adult residents attended three Trauma Symposiums.
- Over 200 community residents participated in the 4th district police faith-based committee prayer walk.

• Over 100 community members participated in the 4th district Patriot's Day Remembering fallen officer.

Advocate Trinity's Healthy Living Food Farmacy

The Advocate Trinity's Healthy Living Food Farmacy has continued to make huge strides in the community by helping patients with chronic health conditions and individuals that may be experiencing food insecurity. The Food Farmacy is an innovative partnership with Greater Chicago Food Depository, Top Box Foods and Cristina Foods.

- In 2023, 2,683 patient visits were served through the Healthy Living Food Farmacy.
- A total of 79,555 pounds of food was distributed to program participants.
- Live June news report coverage WBBM-TV CBS2 CHICAGO WLS-TV ABC CHICAGO.
- In 2024, 4,450 patients were served through the Healthy Living Food Farmacy.
- A total of 96,407 pounds of food was distributed to program participants.
- The Food Farmacy was featured in Advocate Charitable Foundation's GATHER Event addressing Health Equity and Food Insecurity YouTube: https://youtu.be/hyjq6CmR3GY

Appendix 1: 2025 Community Health Needs Assessment Data Sources

To view the Alliance for Health Equity CHNA report, which includes summaries of the community feedback, descriptions of the data collection methods, the members of the collaborative, and the names of organizations that provided input, along with the full survey reports, visit: https://www.allhealthequity.org/chna

Appendix 2: Community Resources Available for Significant Needs

The resources under each significant need are not a complete list. For more community resources, visit: <a href="https://example.com/https://examp

Mental Health/Substance Use

Organization	Website	Contact
Trauma Recovery	www.advocatehealth.com	708-684-4393
Sertoma Star Services	https://sertomastar.org/	708-371-9700
NAMI Chicago	www.namichicago.com	833-626-4244
Gateway Foundation	www.gatewayfoundation.org	773-207-5075
Advocate Behavioral Health Department	https://www.advocatehealth.com/health-services/behavio- ral-health-care	

Diabetes

Organization	Website	Contact
American Diabetes Association	www.diabetes.org	1-800-DIABETES
Center for Disease Control and Prevention	www.cdc.gov	
Greater Chicago Food Depository	www.chicagosfoodbank.org	773-247-3663
American Obesity Foundation	www.americanobesityfdn.org	800-684-3263

Obesity

Organization	Website	
PCC South Family Health Center	https://www.pccwellness.org/locations/pcc-south-family-health- center	
Advocate Diabetes Endocrinology	https://www.advocatehealth.com/health-services/diabetes-endocri- nology	
Illinois Alliance to Promote Opportunities for Health	https://iphionline.org/iapo/	

Community Safety

Organization	Website	Contact
Roseland Cease Fire	https://roselandceasefire.com/services	
Claretian Associates Safe Passage program	https://www.claretianassociates.org/safe-passage.html	773-734-9181
Chicago Police Department – Community Outreach	https://www.chicagopolice.org/community-policing-group/community-liaisons-outreach/	

Food Security

Organization	Website	Contact
Greater Chicago Food Depository	www.chicagosfoodbank.org	773-247-3663
Find Food Illinois	www.extension.illinois.edu/food/find-food-illinois	

Appendix 3: References

Metopio. Accessed via a contract with Advocate Aurora Health. Website is unavailable to the public. The following data sources were accessed through the portal:

American Community Survey, 2019-2023, 2020-2024

Behavioral Risk Factor Surveillance System, 2021, 2022

Buprenorphine Practitioner Locator, SAMHSA, 2024

Centers for Disease Control and Prevention, 2022

Centers for Disease Control and Prevention, WONDER, 2022

Centers for Medicare and Medicaid Services, National Provider Identifier, 2021

Diabetes Atlas, 2022

Diversitydatakids.org, 2017-2021

Feeding America, 2022

FBI Crime Data Explorer, 2017-2021

Health Resources and Services Administration, 2021

National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention, 2021

National Vital Statistics System-Mortality, 2018-2022

National Vital Statistics System-Natality, 2016-2020

PLACES, 2022

United Way ALICE Data, 2022

USDA, 2019 & 2022-2023

U.S. Opioid Dispensing Rate Maps, 2022

Other Resources:

American Diabetes Association, Statistics About Diabetes, 2023

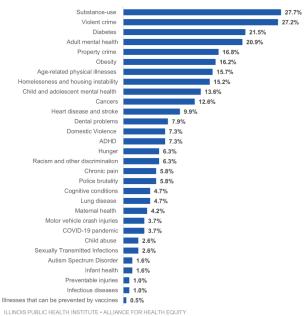
The Alliance for Health Equity, Community Health Need Assessment, 2025: https://www.allhealthequity.org/chna

CDC. Racial and Ethnic Differences in Social Determinants of Health and Health-Related Social Needs Among Adults — Behavioral Risk Factor Surveillance System, United States, 2022: https://www.cdcgov/mmwr/volumes/73/wr/mm7309a3.htm

Appendix 4: Additional Data

Alliance for Health Equity PSA Survey Analysis:

What are the biggest health issues in your community? (Choose 3) (n=191)



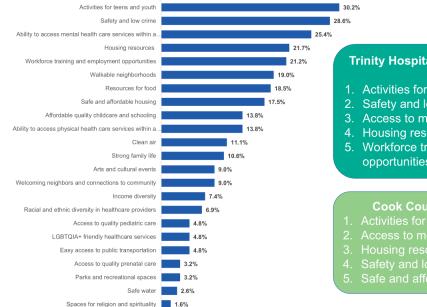
Trinity service area top health issues

- 1. Substance use
- 2. Violent crime
- Diabetes
- Adult mental health
- 5. Property crime

Cook County top health issues

What does your community need to be healthy? (Choose 3) (n=189)

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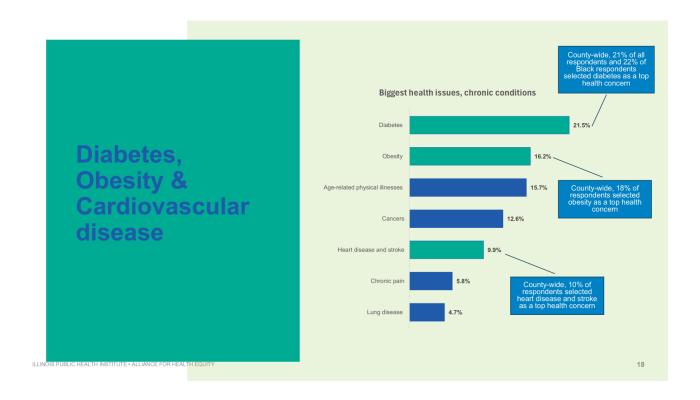


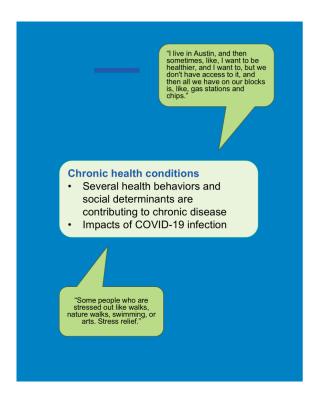
Trinity Hospital service area top health needs

- Activities for teens and youth
- 2. Safety and low crime
- 3. Access to mental healthcare services
- 4. Housing resources
- 5. Workforce training and employment opportunities

Cook County top health needs

10







Summary of Focus Group Findings

Core Themes

Chronic health conditions

- Several health behaviors and social determinants are contributing to chronic disease
 - Inadequate access to medications
- Impacts of COVID-19 infection

COVID-19

- · COVID-19 impacts:
 - Local businesses closed down
 - Health clinics that happened pre-COVID do not exist

Child and adolescent health

- Programs and services needed
 - After-school programs
 - Recreation centers
 - Health Education
- Childcare
- Education
- Youth mental health crises

"For my school specifically, substance abuse is a big thing because once in a while, almost every week, someone from school or someone gets arrested for gun violence or drug use."

Healthcare

- · Several factors influence access
 - · Ease of access to health clinics
 - Linguistically and culturally appropriate services
- · Lack of empathy among healthcare professionals
- Several additional healthcare needs discussed
 - · Behavioral health services
 - · Affordable specialty care
 - · Engagement in primary care
 - · Building trust with communities
 - Better communication about resources
 - · Transportation to appointments

"And then another thing that has affected us is whenever one of us gets sick and we have to go to the ER, there are a lot of homeless people there...have to wait long hours because there are not a lot of healthcare workers."

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15

Summary of Focus Group Findings

Core Themes

Community safety

- Several factors contribute to violence in communities
 - · Lack of economic opportunity
 - Inaccessible community resources
 - Lack of "outside of school" programs for youth
- · Police involvement is not helpful
- · Substance use disorders
- Lack of behavioral health treatment and need for greater mental health awareness
- Lack of conflict resolution alternatives
- Lack of infrastructure investment in roads and public safety measures
- Lack of public transportation access

"When there is conflict, police do not know how to interact."

Community cohesion and leadership

- Community cohesion is important for healthy communities
- Community leadership
 - Engagement of community in local government
- · Roles of communities in solutions
 - Trusted community liaisons for sharing information
- Coordination between programs and services needs improvement

"I would say just like the gun violence and safety has been really bad." "I feel like in our community, there is some similar opportunities to get the help provided for you, but not a lot of people know about this opportunity."

Community communication

- Communication about resources in ineffective
- In-person communications
 - Community events
 - Trusted messengers
 - Passing information through local organizations
 - Mail

"Services are there... but the issue is getting the word out, getting people to trust it, and increasing the amount of services that you can provide."

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16

Summary of Focus Group Findings

Core Themes

Social and structural determinants of health

- · Some of the most discussed needs included:
 - · Access to affordable housing
 - · Access to healthy foods and grocery stores
 - · Quality education
 - · Affordable childcare
 - Economic opportunity and community investment
 - · Improved infrastructure

Behavioral Health

- Wholistic integrated care
- · Substance use
- Mental health crises
- Access to treatment
- Connections between mental health and other determinants of health

"And it's kind of been all over the news recently where a lot of people are experiencing a lot of health issues just because of substance abuse. So that's been impacting a lot of people, especially youth-wise." "Mental health and homelessness is a huge problem." "Gentrification has really hit us very hard." "I grew up in Section 8 housing. So, they had a lot of opportunities for us to go do hearing tests and vision tests." "Transportation is something that has become really difficult."

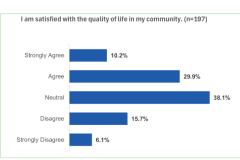
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17

Community assets

What are the best things about communities?

- · Welcoming and culturally diverse communities
- Community connections
- Safety and security
- Access to community services such as local business, restaurants, and libraries
- Accessible health services
- Walkability
- Civic engagement
- · Cultural and social events
- Outdoor spaces





Thank You