



2018 Community Health Needs Assessment

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Executive Summary

The following report contains St. Bernard Hospital and Health Care Center's (STBH) 2018 Community Health Needs Assessment (CHNA). According to the Patient Protection and Affordable Care Act of 2010, non-profit hospitals in the United States are required to conduct a CHNA at least once every three years. The CHNA is used by STBH to assess the health of the community it serves. An important distinction of the CHNA is that it evaluates the wellbeing of the *entire community* served by STBH, not just that of its patients.

The data used in this report was gathered from various sources. Much of the epidemiologic data originate from sources like the American Community Survey, the Illinois Hospital Association, and the Behavioral Risk Factor Surveillance System. However, the needs of STBH's community cannot be understood by numbers alone, so this report also incorporates input from community leaders and residents. The unique and essential perspectives of community members allowed STBH to understand the day-to-day realities of the health issues identified in this report.

Based on the compiled information, STBH identified a list of 18 health needs. The list was prioritized by the STBH CHNA Advisory Committee, comprising community residents and leaders as well as STBH leadership. A summary of the top five health priorities is included here. All 18 health needs are prioritized and outlined in the **Health Needs and Priorities** section of this report.

In all of its work, STBH strives to not only understand health within the community it serves, but to work alongside residents in planning and implementing innovative strategies to improve overall wellbeing. The CHNA is an important part of this work. Without community input, pursuing real improvement in health would not be possible. Therefore, STBH acknowledges and thanks all community members who participated in the 2018 CHNA process. Without your thoughtful insights and committed time, STBH would not have been able to compile such a complete view of community health.

St. Bernard Hospital and Health Care Center Top Health Priorities in 2018



Mental Health, Behavioral
Health, & Substance Use



Diabetes



Oral Health & Dental Care



HIV & Sexually Transmitted
Infections



Preventive Care Services
& Access

Progress Since 2015

St. Bernard Hospital and Health Care Center's (STBH) 2015 CHNA highlighted a broad range of community health priorities. The current CHNA builds on the work done in 2015 by revisiting the community's health needs. With the updated 2018 CHNA, STBH examined health across zip codes within its service area to better understand geographic disparities in health, and to target existing and new health intervention efforts.

Figure 1. St. Bernard Hospital's Top Health Priorities in 2015

Access to Care	Cancer	Chronic Kidney Disease	Diabetes	Hearing & Vision Problems	Heart Disease & Stroke
HIV/AIDS	Immunization & Infectious Disease	Infant Health	Injury & Violence Prevention	Mental Health & Disorders	Nutrition, Physical Activity, & Weight
	Oral Health	Sexually Transmitted Infections	Substance Abuse	Tobacco Use	

In response to findings from 2015, STBH instituted a Community Health Improvement Plan which added, adjusted, and improved patient services and outreach in the community. STBH's primary mechanism to address the lack of services in the community was to open a new, state of the art Ambulatory Care Center (ACC). In addition to primary care and prevention services, the ACC includes the following specialty clinics: cardiology, chronic disease, diabetes care, gastroenterology, gynecology, nutrition counseling, orthopedics, rehabilitation medicine, otolaryngology, pulmonology, rheumatology/arthritis, and surgery. The ACC provides much-needed hearing and vision screening and care as well as physical and occupational therapy. STBH's Women's Wellness Center, also located within the ACC, provides obstetric and general gynecological care. In addition to services offered through the ACC, St. Bernard Hospital offers an outpatient behavioral health clinic.

STBH collaborates broadly to improve health. STBH coordinates with local dialysis centers to bring services and nephrologists in-house. STBH also developed a partnership with Rush University Medical Center to directly transfer emergency patients with stroke symptoms. STBH partners with a third party to provide substance abuse support and crisis management, and offers a voluntary inpatient detox program.

To address community violence, STBH became a founding member of Teamwork Englewood, a community organization that focuses on safety and the promotion of healthy lifestyles. STBH has also coordinated and hosted several events focused on violence prevention with the 7th District of the Chicago Police Department.

St. Bernard Hospital and Health Care Center

St. Bernard Hospital and Health Care Center (STBH) was founded in 1904 by seven sisters from the Religious Hospitallers of St. Joseph who traveled from Canada to Englewood. Since 2008, STBH has been sponsored by Catholic Health International, which sponsors nearly 40 catholic health facilities in Canada and the United States. Dedicated to serving those in need, STBH has provided health services to South Side Chicago communities for over 114 years. STBH is also committed to educating health professionals by training nurses, physicians, dentists, pharmacists, radiology technicians, and dieticians.



- **St. Bernard Hospital** is a 202-bed community safety net hospital with providers from a variety of specialties that treat a wide range of conditions. In 2016, the hospital performed over 700 deliveries and saw nearly 40,000 emergency department visits.
- **St. Bernard Hospital Dental Center** provides routine dental care to children and adults, working with medical providers and pediatric specialists as needed. It is also home to the Special Needs Clinic, which serves patients managing special physical needs, emotional insecurities, and/or mental health disorders.
- **St. Bernard Ambulatory Care Center** offers a variety of medical and social services, including primary and specialty care, testing, imaging, and rehabilitation services. It also houses 23 physician offices and a conference room available for community use.
- **St. Bernard Hospital Pediatric Mobile Health Unit** provides free services including immunization, education, lead testing, and physical exams to thousands of children at schools, daycare centers, and health fairs.

STBH's service area, located on Chicago's South Side, includes the zip codes (see **Map 1**):

- 60609 (New City)
- 60617 (South Chicago, South Deering, East Side, Calumet Heights)
- 60619 (Chatham, Burnside, Grand Crossing)
- 60620 (Auburn Gresham)
- 60621 (Englewood)
- 60628 (Roseland, Pullman)
- 60629 (West Lawn, Chicago Lawn)
- 60636 (West Englewood)
- 60637 (Woodlawn)
- 60649 (South Shore)

Mission, Vision, and Values

St. Bernard Hospital and Health Care Center (STBH) believes in the values of respect, dignity, care, and compassion for all, while caring for the sick and supporting the health of the entire community. Information on STBH's mission, vision, and values is available at the website, <https://www.stbh.org/who-we-are/mission-vision-values/>.

Mission

A Roman Catholic facility founded by the Religious Hospitallers of St. Joseph and sponsored by Catholic Health International, STBH aspires to live the healing mission of Christ within the South Side community of Chicago. The mission calls STBH employees and leadership to care for the sick and promote the health of community residents while witnessing the Christian values of respect, dignity, caring, and compassion for all persons. In all matters, STBH shows a special sensitivity to the cultures of people served and the special needs of the poor and powerless.

Vision

STBH will be recognized for its outstanding leadership and unwavering commitment in providing excellence in health care, and promoting and fostering comprehensive community wellness in the South Side community of Chicago.

Motivated by its values, the family of STBH will be sensitive and caring in reaching out to the community to facilitate the achievement of a physically, economically, and spiritually healthy environment, characterized by high-quality health services and community development.

STBH will work to:

- Ensure access to medical care that is responsive to ever-changing conditions in the community's health care needs.
- Promote wellness and prevention of illness in the community, and be known as a resource for health education.
- Serve as a catalyst for change by empowering and partnering with organizations to enhance the provision of health care and economic development of the neighborhood.



- Support and nurture all members of STBH’s hospital family — individually and collectively — so that patients are provided with quality health care.
- Further the hospital’s leadership role in advocacy for people in need with particular concern for the poor and powerless.
- Advance the development of a safe neighborhood environment and community quality of life.
- Increase affordable housing, job opportunities, and business development in the South Side community through productive collaborations.

Values

STBH employees and leadership aspire to and commit to the following core values:

Respect: We will treat each person with dignity and acknowledge their unique worth and diversity as a human being. We will be sensitive to their right to privacy and confidentiality of their personal information.

Caring: We will be sensitive and caring to the patients, the visitors, to the community we serve, and to one another in our daily activities.

Compassion: We will create a respectful, caring, and supportive environment by listening to others with empathy and sensitivity, respectful of their feelings.

Stewardship: We will utilize sound business practices and fiscal control, using resources effectively to assure the continuation of the mission.

Community Benefits

In 2017, St. Bernard Hospital and Health Care Center (STBH) provided \$3,500,189 in charity care, \$11,471,830 in subsidized health services, and \$51,737 in community benefits. In addition, STBH is committed to improving other aspects of community health. In 2003, STBH was a co-founder of Teamwork Englewood, a community development organization that led the creation and implementation of a Quality of Life Plan to improve the community’s health and wellness, economy, housing, and safety.

STBH also worked with the City of Chicago, the Illinois Housing Development Authority, and Chicago Neighborhood Initiatives, with support from the Religious Hospitallers of St. Joseph, to create Bernard Place. Bernard Place is a development of affordable homes (single family and two-flats) that were made available for purchase to first time home buyers. Thanks to this development, 77 families now own homes near St. Bernard Hospital, improving the sense of community and economic wellbeing of the neighborhood.



Methodology



Methodology

Overview

We analyzed primary and secondary data to understand the communities served by St. Bernard Hospital and Health Care Center (STBH). Collecting our own (primary) data to supplement existing data sources was important for identifying community health needs and barriers to health. Secondary data are often only available for large geographic areas like counties or states; however, examining data at this high level can hide differences that exist at the neighborhood level. Therefore, to understand the unique needs of neighborhoods served by STBH and identify areas to target for intervention, we assessed health at the zip code level.

We compiled and analyzed secondary data from local and national sources for each zip code located within STBH's service area to create the Community Data Summaries included in this report. We collected primary data by conducting Focus Groups with residents in STBH's service area. Lastly, we synthesized findings from these two activities to identify a list of health needs that were subsequently prioritized. The STBH CHNA Advisory Committee, made up of leaders and residents from STBH's service area, informed all CHNA activities.

STBH worked with the Sinai Urban Health Institute (SUHI) to develop this CHNA. SUHI is the nationally-recognized community research arm of Sinai Health System, a safety-net hospital system in Chicago. SUHI is well-known for employing community-driven processes to identify and address health needs in Chicago's most underserved communities. SUHI staff, including CHNA authors, Pamela Roesch, MPH, Charlotte Picard, MPH, Myles Castro, MPH, and Kristin Monnard, MPH, provided public health expertise in data collection, analysis, and interpretation.

CHNA Advisory Committee

To provide oversight of the CHNA process, we convened a CHNA Advisory Committee comprising ten individuals that represented a blend of internal and external stakeholders. The CHNA Advisory Committee informed the CHNA, ensuring that the assessment process reflected the values and needs of STBH and the broader community served by STBH.

The CHNA Advisory Committee's roles included: serving as hospital and community champions for the CHNA process; informing our community engagement strategy; and, reviewing and prioritizing identified health needs. Committee members included individuals from varied backgrounds, with a diverse set of knowledge regarding STBH and the broader community. The Committee met for two in-person meetings between July and October 2018. Members also supported recruitment for our Focus Groups.

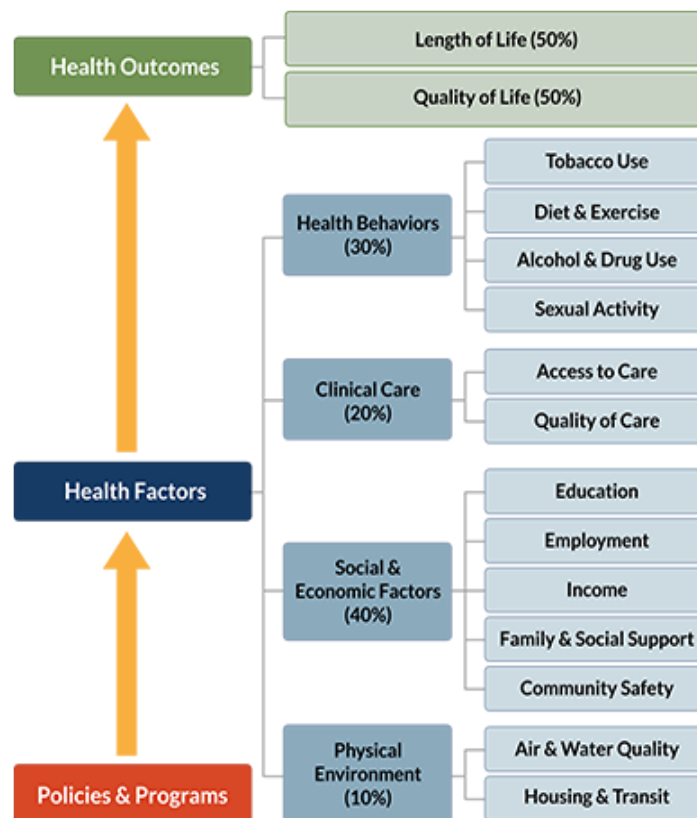
Committee members came from the following organizations: Gifts from God Ministry, Family Focus Centers, One Health Englewood, the STBH Advisory Council, and the STBH Development and Nursing Services departments. Members were community residents, including an advocate for seniors and teens.

Secondary Data Collection - Community Data Summaries

For secondary data analysis, we examined health outcomes and factors at the zip code level across STBH's primary and secondary service areas. Primary and secondary service areas were identified by STBH based on the volume of inpatient and outpatient registration records from each zip code. The detailed results for each zip code can be found in the **Community Data Summaries** section of this report. The health outcomes and factors presented in the Community Data Summaries should be reviewed both individually and together to gain a broad understanding of the factors that influence health within zip codes.

We modeled the STBH CHNA after the County Health Rankings and Roadmaps (CHRR)^a from the University of Wisconsin Population Health Institute and the Robert Wood Johnson Foundation as a comprehensive approach to examining health factors and outcomes (**Figure 2**). We used the CHRR framework to: increase awareness of the factors that influence health; demonstrate how health may vary across geographic areas; and determine the potential health needs of the population served by STBH. We used many health measures from the CHRR model in STBH's CHNA; however, we also added measures that were particularly pertinent to the communities served by STBH (see full list of measures in **Appendix Table 1**). For example, we added important urban health variables (i.e., vacant housing units, population living in a food desert, and substandard housing) and substituted chronic conditions for length of life.

Figure 2. County Health Rankings and Roadmaps Model^a



Data Sources

We leveraged various secondary data sources, including local and federal agencies. Other data sources included public and private resources that synthesize data from statewide hospital databases, national surveys, and surveillance systems such as the Behavioral Risk Factor Surveillance System. Sources used within this report include:

- Center for Applied Research and Engagement System (CARES) Engagement Network
- Centers for Disease Control and Prevention
- Chicago Department of Public Health

- Chicago Police Department
- Illinois Hospital Association COMPdata Informatics
- Policy Map
- U.S. Census Bureau American Community Survey

As there are often delays in publishing health and demographic data, secondary data in this report are for the most recent year(s) available as of July, 2018. A complete list of indicators, data sources, and years represented can be found in **Appendix Table 1**.

Data at the Zip Code Level

Depending on data availability, we collected secondary data at various geographic levels and then converted it to zip code-level estimates as necessary. Generally, data presented in this report are for zip code tabulation areas (ZCTA), which the U.S. Census Bureau creates as an approximation of United States Postal Service zip codes.^b Two measurement exceptions are: (1) preventable emergency department visits and (2) low birthweight or preterm births, which are presented at the zip code level as defined by the United States Postal Service.

If data were only available at the census tract level, we aggregated them up to the ZCTA-level. Census tract boundaries do not always align with ZCTA boundaries. Therefore, we only included census tracts with at least 50% of their landmass in the ZCTA as part of the zip code level estimates.^{c,d}

Age Adjustment

We did not statistically adjust estimates for differences in age makeup across zip codes. The primary aim of this CHNA was not to directly compare zip codes, but to determine the specific health needs and barriers within each zip code. Age adjustment creates hypothetical estimates that cannot be interpreted as the true prevalence of disease within a community. While beneficial for projects aimed at comparing geographic areas, age adjustment is less beneficial for hospital CHNAs which seek to understand the level of need within a community. For these reasons, we did not age adjust any estimates within this report.

Examining Changes over Time

We assessed statistically significant differences between the 2011 American Community Survey five-year estimates and the 2016 American Community Survey five-year estimates at the 90% confidence level using methods described by the U.S. Census Bureau.^e Some American Community Survey measurements are modified over time; for complete details, see the Census Bureau's American Community Survey website.^f

Primary Data Collection – Focus Groups

Focus Groups with community leaders and residents, as well as STBH patients and stakeholders, were held to more thoroughly flesh out health needs that may not be apparent via secondary data analysis and to contextualize our findings. Secondary data alone cannot tell the whole story of a community; the lived experience and local knowledge of community members is crucial for building a fuller understanding of health and wellbeing.

We facilitated Focus Groups in an interactive format. Conversations began with asset identification, followed by a brief preview of our secondary data analysis results. Participants discussed their reactions to the data, commenting on what surprised them, what was missing, and what else was important to understand about these health issues. Then, participants identified the most important community issues related to health, and shared lessons learned about intervention strategies that have historically worked in the community. Focus Group questions can be found in **Appendix Table 2**. A note taker recorded discussions on flip charts in real-time, and sessions were recorded. Notes and recordings were analyzed to identify themes.

We spoke with a total of 18 community stakeholders across two Focus Groups. The STBH CHNA Advisory Committee selected and recruited participants with the goal of achieving a diverse cross-section of the community, including representation of seniors, communities of color, and low-income community members. While no group this size can represent the experience or perspectives of the whole community, the participants reflected a broad array of sectors, ages, and lived experiences. In addition to residents, participants had the following affiliations:

- Chicago Department of Public Health (Yaa Simpson, Epidemiologist)
- Englewood Health and Wellness Task Force
- Federation of Block Clubs
- Greater Englewood Chamber of Commerce
- Heartland Alliance
- Heartland Alliance Health, Englewood Health Center
- Howard Brown Health Clinic
- I Grow Chicago
- Imagine Englewood If...
- Metropolitan Family Services
- STBH staff and patients
- Voices of West Englewood
- Youth of Englewood

For detailed results, see the **Focus Group Insights** section.

Health Need Identification and Prioritization

We identified health needs using results from our secondary analyses and Focus Groups. We used the following criteria to identify health needs within secondary data:

- (1) 80% or more of the zip codes in STBH's primary service area performed worse than Chicago as a whole; or,
- (2) The value of the health indicator heavily varied by zip code, suggesting geographic disparities across the STBH service area.

We then compared the identified health needs from our secondary data analysis with findings from our Focus Groups to compile the final list of health needs that was prioritized by the CHNA Advisory Committee.

To prioritize health issues, we used a combined prioritization matrix and multi-stage voting approach. We first reviewed each identified health need with the CHNA Advisory Committee. Committee members had the opportunity to ask questions, and then were given time to fill in a prioritization matrix (**Appendix Table 3**) and rate each health need based on four criteria, which were explained in detail to the group:

- Size of the problem
- Seriousness of the problem
- Changeability of the problem
- Community interest and readiness to address the problem

Once this activity was completed, we transitioned to a multi-voting activity in which each Committee member was given the opportunity to vote for their top five health needs. Total votes for each health need were tallied. After this first round, we easily identified the top five health needs, which we prioritized with Committee members in open discussion. The remaining health needs were prioritized based on number of votes.

Gaps in Data Collection and Challenges

The main challenges in secondary data collection were identifying the most recent publicly available data, locating health data at the zip code level, and finding information on sensitive topics, such as intimate partner violence. While various outreach efforts, such as email and telephone calls, were used to gather input from a broad range of community organizations and members, the primary data collected only represents the insights of our CHNA Advisory Committee and those who attended our Focus Groups. This feedback does not necessarily represent all of the varied viewpoints across the STBH service area. Despite these shortcomings, we did garner representation from a wide range of organizations and groups.

References and Notes

- a. County Health Rankings & Roadmaps Website. www.countyhealthrankings.org. Accessed June 20, 2018.
- b. Zip Code Tabulation Areas (ZCTAs). 2018. United States Census Bureau. <https://www.census.gov/geo/reference/zctas.html>. Accessed September 19, 2018.
- c. PolicyMap Census Tract to ZCTA Indicators. PolicyMap Website. www.policymap.com. Accessed June 20, 2018.
- d. Note: Small area estimates were not consistently available for two census tracts, 17031381700 and 17031835700, across all sources due to sampling size variations.
- e. U.S. Census Bureau, *Understanding and Using American Community Survey Data: What All Data Users Need to Know*, U.S. Government Printing Office, Washington, DC, 2018. https://www.census.gov/content/dam/Census/library/publications/2018/acs/acs_general_handbook_2018.pdf.
- f. American Community Survey (ACS): Comparing 2016 American Community Survey Data. 2018. United States Census Bureau. <https://www.census.gov/programs-surveys/acs/guidance/comparing-acs-data/2016.html>. Accessed September 19, 2018.

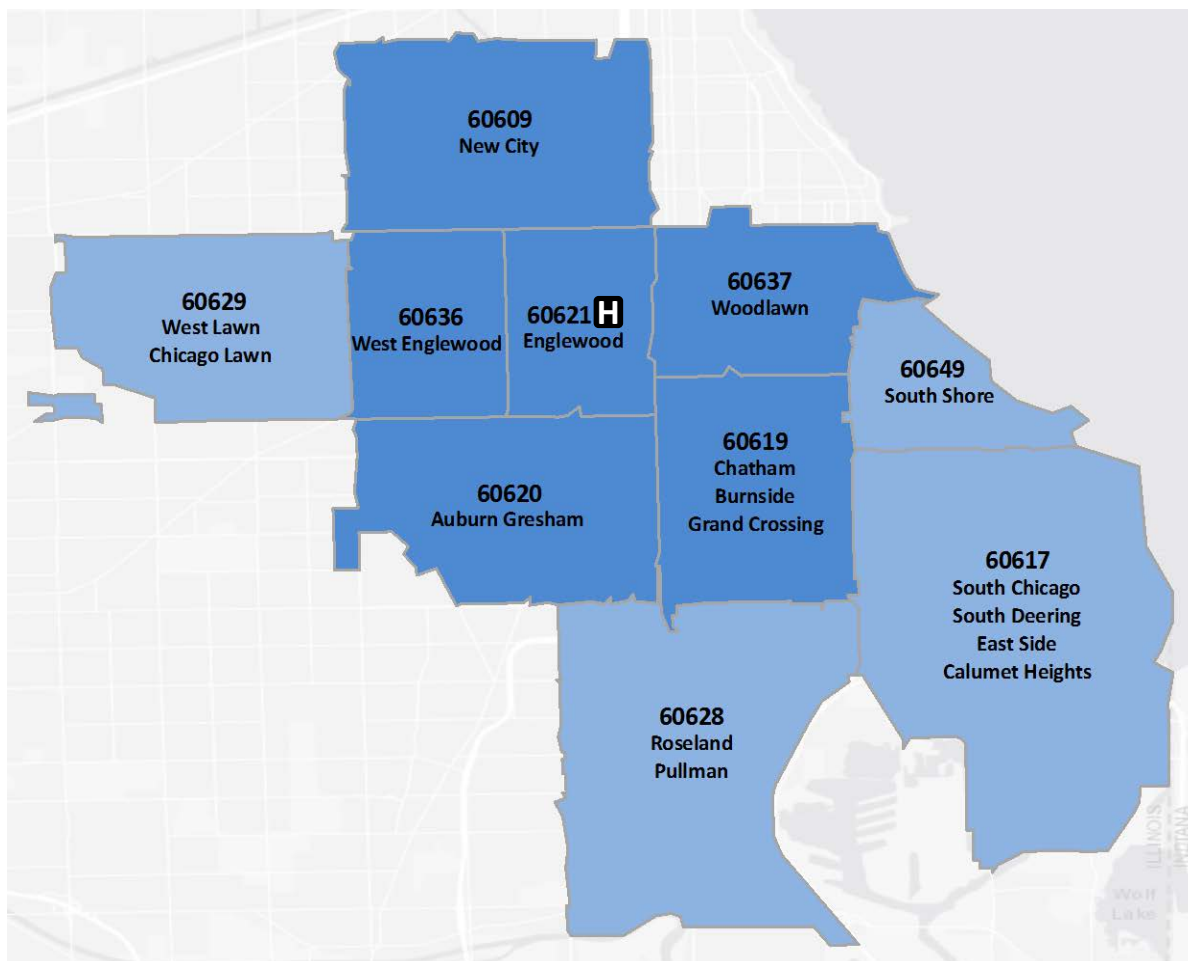


Service Areas and Demographics



Primary and Secondary Service Areas

Map 1. St. Bernard Hospital and Health Care Center's Primary and Secondary Service Areas¹



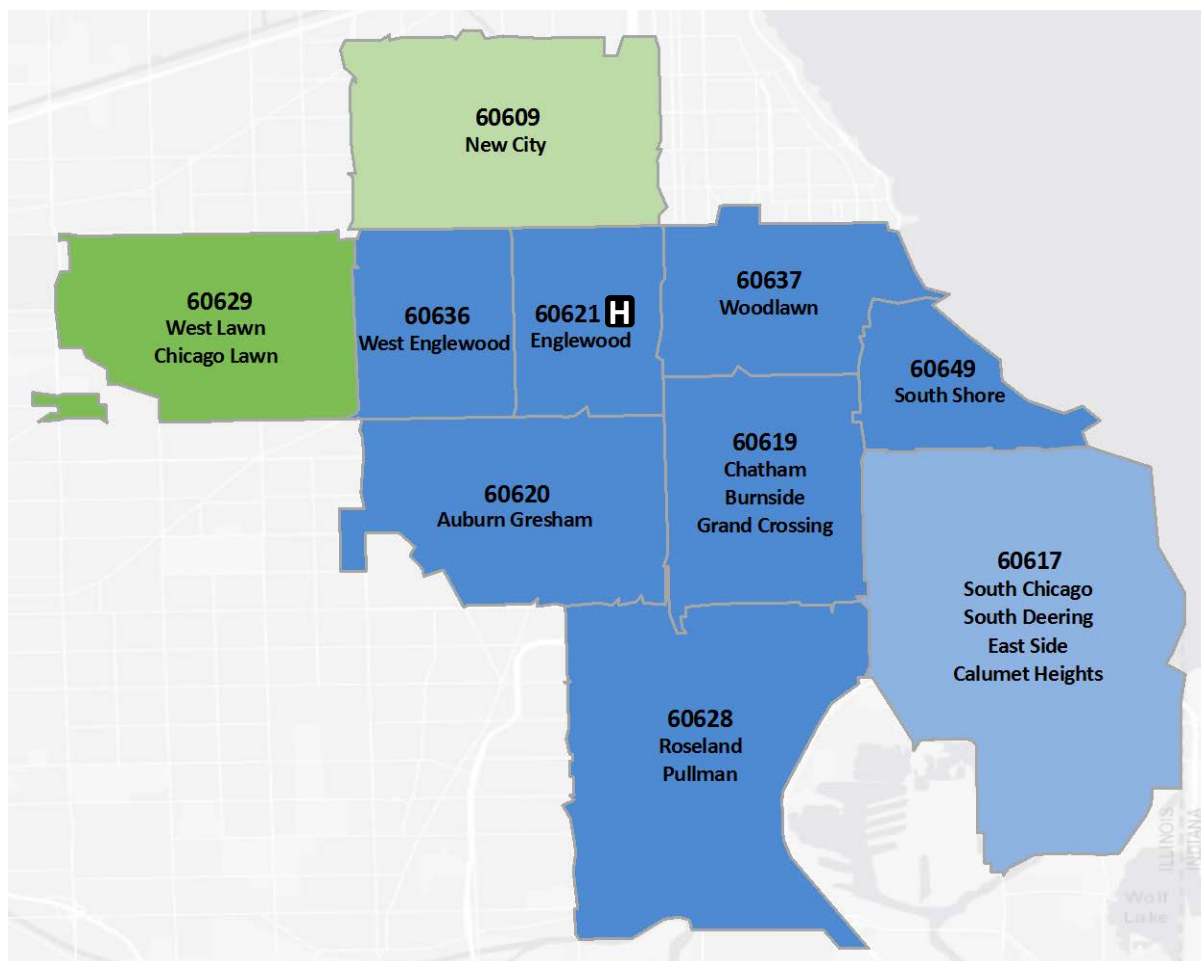
St. Bernard Hospital Service Areas

■ Primary Service Area ■ Secondary Service Area





1. All Community Areas are approximations, data are representative of the zip codes listed

Service Area Demographics

Map 2. St. Bernard Hospital's Service Area¹ Predominant Racial/Ethnic Groups, American Community Survey 2016 Five-year Estimates

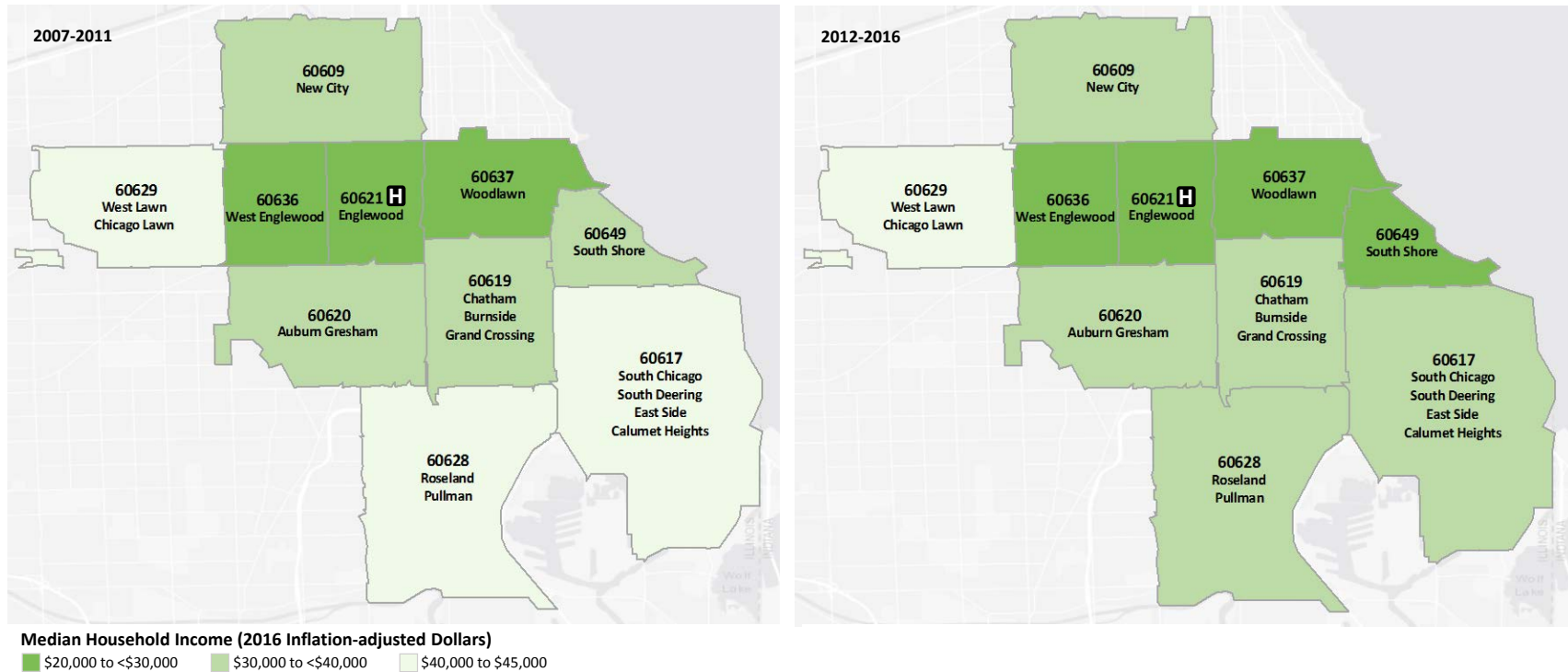


Most Common Racial/Ethnic Group and Proportion of Total Population

 Non-Hispanic Black (50% to <70%)	 Hispanic/Latino (50% to <70%)
 Non-Hispanic Black (≥70%)	 Hispanic/Latino (≥70%)

1. All Community Areas are approximations, data are representative of the zip codes listed

Map 3. Changes in Median Household Income: St. Bernard Hospital's Service Area¹, American Community Survey 2011 and 2016 Five-year Estimates



1. All Community Areas are approximations, data are representative of the zip codes listed

Table 1. Changes Over Time in the Demographic Characteristics of St. Bernard Hospital's Service Area^{1,2}

	60609 New City	60617 Multiple ³	60619 Multiple ⁴	60620 Auburn Gresham	60621 Englewood	60628 Roseland, Pullman	60629 West Lawn, Chicago Lawn	60636 West Englewood	60637 Woodlawn	60649 South Shore
General Demographics										
Total Population										
Median Age (Years)										
Race and Ethnicity										
Hispanic/Latino										
Non-Hispanic Black										
Non-Hispanic White										
Non-Hispanic Asian										
Place of Birth and Citizenship										
Foreign-born										
Population without U.S. Citizenship										
Socioeconomic Characteristics										
High School Graduates										
Median Household Income										
Unemployment Rate										
Owner-occupied Housing Units										



1. All Community Areas are approximations, data are representative of the zip codes listed
2. Changes measured between the American Community Survey 2011 and 2016 five-year estimates
3. South Chicago, South Deering, East Side, Calumet Heights
4. Chatham, Burnside, Grand Crossing



Community Data Summaries



Table 2. Top & Bottom Zip Codes by Health Indicator in St. Bernard Hospital's Service Area

	Top St. Bernard Zip Code ¹		Bottom St. Bernard Zip Code ¹	
Health Outcomes				
Chronic Conditions				
Adults with Current Asthma	60629	West Lawn, Chicago Lawn	60621	Englewood
Adults with Chronic Obstructive Pulmonary Disease	60629	West Lawn, Chicago Lawn	60621	Englewood
Adults with Diabetes	60629	West Lawn, Chicago Lawn	60621	Englewood
Adults who have had a Stroke	60629	West Lawn, Chicago Lawn	60621	Englewood
Adults with High Blood Pressure	60629	West Lawn, Chicago Lawn	60621	Englewood
Adults with Chronic Kidney Disease	60629	West Lawn, Chicago Lawn	60621	Englewood
Adults with Coronary Heart Disease	60629	West Lawn, Chicago Lawn	60621	Englewood
Adults and Children with Vision Difficulty	60629	West Lawn, Chicago Lawn	60649	South Shore
Quality of Life				
Adults with Poor or Fair Overall Health	60629	West Lawn, Chicago Lawn	60621	Englewood
Adults with Frequent Poor Physical Health Days	60637	Woodlawn	60621	Englewood
Adults with Frequent Poor Mental Health Days	60619	Multiple ⁹	60621	Englewood
Low Birthweight or Premature Births	60629	West Lawn, Chicago Lawn	60636	West Englewood
Health Factors				
Health Behaviors				
Current Adult Smokers	60617	Multiple ¹⁰	60621	Englewood
Adult Obesity	60629	West Lawn, Chicago Lawn	60621	Englewood
Adult Physical Inactivity	60637	Woodlawn	60621	Englewood
Adult Fruit/Vegetable Intake (≥5 Servings/Day)	60629	West Lawn, Chicago Lawn	60621	Englewood
Heavy Drinking among Adults	60621	Englewood	60609	New City
Binge Drinking among Adults	60621	Englewood	60629	West Lawn, Chicago Lawn
Teen Birth Rate ²	60620	Auburn Gresham	60619	Multiple ⁹
Clinical Care				
Population without Health Insurance	60637	Woodlawn	60609	New City
Adults with Personal Health Care Provider	60628	Roseland, Pullman	60609	New City
Adults with Routine Checkup in Past Year	60619	Multiple ⁹	60629	West Lawn, Chicago Lawn
Preventable Emergency Department Visits	60629	West Lawn, Chicago Lawn	60621	Englewood

Table 2. Top & Bottom Zip Codes by Health Indicator in St. Bernard Hospital's Service Area (continued)

	Top St. Bernard Zip Code ¹		Bottom St. Bernard Zip Code ¹	
Clinical Care Continued				
Behavioral Health Hospitalizations ³	60629	West Lawn, Chicago Lawn	60621	Englewood
Drug-related Hospitalizations ³	60629	West Lawn, Chicago Lawn	60636	West Englewood
Mammography Screening in Past Two Years ⁴	60619	Multiple ⁹	60609	New City
Adults with Dental Visit in Past Year	60619	Multiple ⁹	60621	Englewood
Social & Economic Factors				
High School Graduates	60649	South Shore	60629	West Lawn, Chicago Lawn
Bachelor’s Degree or Higher	60637	Woodlawn	60621	Englewood
Unemployment Rate	60629	West Lawn, Chicago Lawn	60621	Englewood
Median Household Income ⁵	60629	West Lawn, Chicago Lawn	60621	Englewood
Children in Poverty	60629	West Lawn, Chicago Lawn	60637	Woodlawn
Income Inequality ⁶	60629	West Lawn, Chicago Lawn	60637	Woodlawn
Single-parent Households	60617	Multiple ¹⁰	60621	Englewood
Seniors Living Alone	60629	West Lawn, Chicago Lawn	60619	Multiple ⁹
Violent Crime Rate ³	60629	West Lawn, Chicago Lawn	60621	Englewood
Physical Environment				
Days with Poor Air Quality ⁷	60628	Roseland, Pullman	60629	West Lawn, Chicago Lawn
Occupied Housing Units Built Before 1940 ⁸	60629	West Lawn, Chicago Lawn	60609	New City
Substandard Occupied Housing	60617	Multiple ¹⁰	60621	Englewood
Vacant Housing Units	60629	West Lawn, Chicago Lawn	60621	Englewood
Commute to work over an hour	60609	New City	60649	South Shore
Population Living in Food Desert	Multiple ¹¹	Multiple ¹¹	60649	South Shore

1. All Community Areas are approximations, data are representative of the zip codes listed; bottom and top zip codes were selected based on measurements estimated to one decimal point - for readability, indicators are rounded to the whole number

2. Per 1,000 females aged 15-19 years

3. Per 10,000 total population

4. Among females aged 50-74 years

5. 2016 inflation-adjusted dollars

6. Gini Index: value of zero indicates perfect equality of income and value of one indicates perfect inequality

7. The number of days in 2012 with particulate matter 2.5 levels above the National Ambient Air Quality Standard of 35 µg/m³

8. Occupied housing units built before 1940 indirectly assesses contact with lead because about 68% of these homes have lead hazards

9. Chatham, Burnside, Grand Crossing

10. South Chicago, South Deering, East Side, Calumet Heights

11. 60609 (New City), 60619 (Chatham, Burnside, Grand Crossing), 60621 (Englewood), 60629 (West Lawn, Chicago Lawn), 60636 (West Englewood)

Primary Service Area

Zip Code: 60609

New City

Demographic Characteristics, Zip Code: 60609			
	2007-2011 ¹	2012-2016 ²	City of Chicago ²
General Demographics			
Total Population	62,671	62,250	2,714,017
Male Population	50%	49%	49%
Median Age (Years)	29	32	34
Population Aged <18 Years (Children)	32%	28%	22%
Population Aged ≥65 Years (Seniors)	7%	9%	11%
Race and Ethnicity³			
Hispanic/Latino	49%	55%	29%
Non-Hispanic Black	29%	24%	31%
Non-Hispanic White	17%	15%	32%
Non-Hispanic Asian	4%	6%	6%
Place of Birth and Citizenship			
Foreign-born	26%	28%	21%
Population without U.S. Citizenship	19%	19%	12%
Socioeconomic Characteristics			
High School Graduates	64%	71%	83%
Median Household Income ⁴	\$37,047	\$32,721	\$50,434
Unemployment Rate	19%	19%	11%
Owner-occupied Housing Units ⁵	44%	40%	44%

1. American Community Survey, 2011 5-year estimates

2. American Community Survey, 2016 5-year estimates

3. Not all racial/ethnic groups reported; percentages may not add to 100%

4. 2016 inflation-adjusted dollars

5. Among occupied housing units

	Zip Code 60609	Top St. Bernard Zip Code	Bottom St. Bernard Zip Code	City of Chicago
Health Outcomes				
Chronic Conditions				
Adults with Current Asthma	10%	10%	13%	9%
Adults with Chronic Obstructive Pulmonary Disease	7%	6%	10%	6%
Adults with Diabetes	14%	13%	20%	11%
Adults who have had a Stroke	4%	3%	7%	3%
Adults with High Blood Pressure	33%	31%	49%	32%
Adults with Chronic Kidney Disease	3%	3%	5%	3%
Adults with Coronary Heart Disease	6%	6%	9%	6%
Adults and Children with Vision Difficulty	2%	2%	4%	2%
Quality of Life				
Adults with Poor or Fair Overall Health	23%	21%	31%	20%
Adults with Frequent Poor Physical Health Days	16%	15%	20%	12%
Adults with Frequent Poor Mental Health Days	16%	13%	18%	12%
Low Birthweight or Premature Births	10%	8%	14%	9%
Health Factors				
Health Behaviors				
Current Adult Smokers	24%	20%	30%	19%
Adult Obesity	39%	38%	48%	34%
Adult Physical Inactivity	36%	31%	40%	28%
Adult Fruit/Vegetable Intake (≥5 Servings/Day)	15%	16%	14%	15%
Heavy Drinking among Adults	5%	4%	5%	6%
Binge Drinking among Adults	20%	14%	21%	22%
Teen Birth Rate ¹	16.7	5.7	62.1	22.9
Clinical Care				
Population without Health Insurance	21%	11%	21%	15%
Adults with Personal Health Care Provider	72%	81%	72%	76%

	Zip Code 60609	Top St. Bernard Zip Code	Bottom St. Bernard Zip Code	City of Chicago
Clinical Care Continued				
Adults with Routine Checkup in Past Year	65%	78%	65%	68%
Preventable Emergency Department Visits	7%	6%	9%	7%
Behavioral Health Hospitalizations ²	174.6	122.4	368.1	175.3
Drug-related Hospitalizations ²	41.6	21.4	97.3	37.0
Mammography Screening in Past Two Years ³	70%	78%	70%	75%
Adults with Dental Visit in Past Year	42%	50%	34%	56%
Social & Economic Factors				
High School Graduates	71%	88%	68%	83%
Bachelor's Degree or Higher	12%	33%	8%	37%
Unemployment Rate	19%	17%	33%	11%
Median Household Income ⁴	\$32,721	\$41,471	\$20,150	\$50,434
Children in Poverty	45%	31%	56%	32%
Income Inequality ⁵	0.46	0.43	0.61	0.53
Single-parent Households	16%	16%	24%	10%
Seniors Living Alone	10%	8%	15%	10%
Violent Crime Rate ²	452.4	258.3	1068.8	317.0
Physical Environment				
Days with Poor Air Quality ⁶	2.5	2.0	3.4	3.2
Occupied Housing Units Built Before 1940 ⁷	52%	27%	52%	43%
Substandard Occupied Housing	50%	45%	59%	43%
Vacant Housing Units	19%	11%	33%	13%
Commute to Work Over an Hour	13%	13%	28%	16%
Population Living in Food Desert	0%	0%	8%	1%

1. Per 1,000 females aged 15-19 years

2. Per 10,000 total population

3. Among females aged 50-74 years

4. 2016 inflation-adjusted dollars

5. Gini Index: value of zero indicates perfect equality of income and value of one indicates perfect inequality

6. The number of days in 2012 with particulate matter 2.5 levels above the National Ambient Air Quality Standard of 35 µg/m³

7. Occupied housing units built before 1940 indirectly assesses contact with lead because about 68% of these homes have lead hazards. According to the Illinois Department of Public Health, all Chicago zip codes are considered high risk for young child lead exposure (ages 0 through 6 years) (Illinois Lead Program, 2016 Annual Surveillance Report)

Secondary Service Area

Zip Code: 60617

South Chicago, South Deering, East Side, Calumet Heights

Demographic Characteristics, Zip Code: 60617

	2007-2011 ¹	2012-2016 ²	City of Chicago ²
General Demographics			
Total Population	88,799	80,002	2,714,017
Male Population	46%	46%	49%
Median Age (Years)	35	38	34
Population Aged <18 Years (Children)	29%	26%	22%
Population Aged ≥65 Years (Seniors)	13%	15%	11%
Race and Ethnicity³			
Hispanic/Latino	38%	36%	29%
Non-Hispanic Black	54%	56%	31%
Non-Hispanic White	8%	7%	32%
Non-Hispanic Asian	0%	0%	6%
Place of Birth and Citizenship			
Foreign-born	18%	15%	21%
Population without U.S. Citizenship	11%	8%	12%
Socioeconomic Characteristics			
High School Graduates	76%	79%	83%
Median Household Income ⁴	\$41,432	\$37,254	\$50,434
Unemployment Rate	16%	20%	11%
Owner-occupied Housing Units ⁵	60%	58%	44%

1. American Community Survey, 2011 5-year estimates

2. American Community Survey, 2016 5-year estimates

3. Not all racial/ethnic groups reported; percentages may not add to 100%

4. 2016 inflation-adjusted dollars

5. Among occupied housing units

	Zip Code 60617	Top St. Bernard Zip Code	Bottom St. Bernard Zip Code	City of Chicago
Health Outcomes				
Chronic Conditions				
Adults with Current Asthma	10%	10%	13%	9%
Adults with Chronic Obstructive Pulmonary Disease	7%	6%	10%	6%
Adults with Diabetes	16%	13%	20%	11%
Adults who have had a Stroke	5%	3%	7%	3%
Adults with High Blood Pressure	41%	31%	49%	32%
Adults with Chronic Kidney Disease	4%	3%	5%	3%
Adults with Coronary Heart Disease	8%	6%	9%	6%
Adults and Children with Vision Difficulty	3%	2%	4%	2%
Quality of Life				
Adults with Poor or Fair Overall Health	25%	21%	31%	20%
Adults with Frequent Poor Physical Health Days	15%	15%	20%	12%
Adults with Frequent Poor Mental Health Days	13%	13%	18%	12%
Low Birthweight or Premature Births	10%	8%	14%	9%
Health Factors				
Health Behaviors				
Current Adult Smokers	20%	20%	30%	19%
Adult Obesity	40%	38%	48%	34%
Adult Physical Inactivity	34%	31%	40%	28%
Adult Fruit/Vegetable Intake (≥5 Servings/Day)	15%	16%	14%	15%
Heavy Drinking among Adults	5%	4%	5%	6%
Binge Drinking among Adults	17%	14%	21%	22%
Teen Birth Rate ¹	32.6	5.7	62.1	22.9
Clinical Care				
Population without Health Insurance	14%	11%	21%	15%
Adults with Personal Health Care Provider	78%	81%	72%	76%

	Zip Code 60617	Top St. Bernard Zip Code	Bottom St. Bernard Zip Code	City of Chicago
Clinical Care Continued				
Adults with Routine Checkup in Past Year	72%	78%	65%	68%
Preventable Emergency Department Visits	8%	6%	9%	7%
Behavioral Health Hospitalizations ²	155.8	122.4	368.1	175.3
Drug-related Hospitalizations ²	39.3	21.4	97.3	37.0
Mammography Screening in Past Two Years ³	75%	78%	70%	75%
Adults with Dental Visit in Past Year	48%	50%	34%	56%
Social & Economic Factors				
High School Graduates	79%	88%	68%	83%
Bachelor's Degree or Higher	16%	33%	8%	37%
Unemployment Rate	20%	17%	33%	11%
Median Household Income ⁴	\$37,254	\$41,471	\$20,150	\$50,434
Children in Poverty	38%	31%	56%	32%
Income Inequality ⁵	0.45	0.43	0.61	0.53
Single-parent Households	16%	16%	24%	10%
Seniors Living Alone	13%	8%	15%	10%
Violent Crime Rate ²	466.1	258.3	1068.8	317.0
Physical Environment				
Days with Poor Air Quality ⁶	2.7	2.0	3.4	3.2
Occupied Housing Units Built Before 1940 ⁷	36%	27%	52%	43%
Substandard Occupied Housing	45%	45%	59%	43%
Vacant Housing Units	18%	11%	33%	13%
Commute to Work Over an Hour	25%	13%	28%	16%
Population Living in Food Desert	4%	0%	8%	1%

1. Per 1,000 females aged 15-19 years

2. Per 10,000 total population

3. Among females aged 50-74 years

4. 2016 inflation-adjusted dollars

5. Gini Index: value of zero indicates perfect equality of income and value of one indicates perfect inequality

6. The number of days in 2012 with particulate matter 2.5 levels above the National Ambient Air Quality Standard of 35 µg/m³

7. Occupied housing units built before 1940 indirectly assesses contact with lead because about 68% of these homes have lead hazards. According to the Illinois Department of Public Health, all Chicago zip codes are considered high risk for young child lead exposure (ages 0 through 6 years) (Illinois Lead Program, 2016 Annual Surveillance Report)

Primary Service Area

Zip Code: 60619

Chatham, Burnside, Grand Crossing

Demographic Characteristics, Zip Code: 60619			
	2007-2011 ¹	2012-2016 ²	City of Chicago ²
General Demographics			
Total Population	67,701	62,822	2,714,017
Male Population	44%	44%	49%
Median Age (Years)	40	39	34
Population Aged <18 Years (Children)	25%	23%	22%
Population Aged ≥65 Years (Seniors)	16%	16%	11%
Race and Ethnicity³			
Hispanic/Latino	1%	1%	29%
Non-Hispanic Black	97%	96%	31%
Non-Hispanic White	1%	1%	32%
Non-Hispanic Asian	0%	0%	6%
Place of Birth and Citizenship			
Foreign-born	1%	2%	21%
Population without U.S. Citizenship	0%	1%	12%
Socioeconomic Characteristics			
High School Graduates	86%	88%	83%
Median Household Income ⁴	\$39,130	\$32,024	\$50,434
Unemployment Rate	20%	21%	11%
Owner-occupied Housing Units ⁵	45%	41%	44%

1. American Community Survey, 2011 5-year estimates

2. American Community Survey, 2016 5-year estimates

3. Not all racial/ethnic groups reported; percentages may not add to 100%

4. 2016 inflation-adjusted dollars

5. Among occupied housing units

	Zip Code 60619	Top St. Bernard Zip Code	Bottom St. Bernard Zip Code	City of Chicago
Health Outcomes				
Chronic Conditions				
Adults with Current Asthma	12%	10%	13%	9%
Adults with Chronic Obstructive Pulmonary Disease	7%	6%	10%	6%
Adults with Diabetes	18%	13%	20%	11%
Adults who have had a Stroke	6%	3%	7%	3%
Adults with High Blood Pressure	48%	31%	49%	32%
Adults with Chronic Kidney Disease	4%	3%	5%	3%
Adults with Coronary Heart Disease	8%	6%	9%	6%
Adults and Children with Vision Difficulty	3%	2%	4%	2%
Quality of Life				
Adults with Poor or Fair Overall Health	27%	21%	31%	20%
Adults with Frequent Poor Physical Health Days	15%	15%	20%	12%
Adults with Frequent Poor Mental Health Days	13%	13%	18%	12%
Low Birthweight or Premature Births	10%	8%	14%	9%
Health Factors				
Health Behaviors				
Current Adult Smokers	21%	20%	30%	19%
Adult Obesity	43%	38%	48%	34%
Adult Physical Inactivity	33%	31%	40%	28%
Adult Fruit/Vegetable Intake (≥5 Servings/Day)	14%	16%	14%	15%
Heavy Drinking among Adults	4%	4%	5%	6%
Binge Drinking among Adults	15%	14%	21%	22%
Teen Birth Rate ¹	62.1	5.7	62.1	22.9
Clinical Care				
Population without Health Insurance	14%	11%	21%	15%
Adults with Personal Health Care Provider	80%	81%	72%	76%

	Zip Code 60619	Top St. Bernard Zip Code	Bottom St. Bernard Zip Code	City of Chicago
Clinical Care Continued				
Adults with Routine Checkup in Past Year	78%	78%	65%	68%
Preventable Emergency Department Visits	8%	6%	9%	7%
Behavioral Health Hospitalizations ²	230.6	122.4	368.1	175.3
Drug-related Hospitalizations ²	79.0	21.4	97.3	37.0
Mammography Screening in Past Two Years ³	78%	78%	70%	75%
Adults with Dental Visit in Past Year	50%	50%	34%	56%
Social & Economic Factors				
High School Graduates	88%	88%	68%	83%
Bachelor's Degree or Higher	22%	33%	8%	37%
Unemployment Rate	21%	17%	33%	11%
Median Household Income ⁴	\$32,024	\$41,471	\$20,150	\$50,434
Children in Poverty	40%	31%	56%	32%
Income Inequality ⁵	0.48	0.43	0.61	0.53
Single-parent Households	16%	16%	24%	10%
Seniors Living Alone	15%	8%	15%	10%
Violent Crime Rate ²	624.3	258.3	1068.8	317.0
Physical Environment				
Days with Poor Air Quality ⁶	2.5	2.0	3.4	3.2
Occupied Housing Units Built Before 1940 ⁷	44%	27%	52%	43%
Substandard Occupied Housing	51%	45%	59%	43%
Vacant Housing Units	20%	11%	33%	13%
Commute to Work Over an Hour	25%	13%	28%	16%
Population Living in Food Desert	0%	0%	8%	1%

1. Per 1,000 females aged 15-19 years

2. Per 10,000 total population

3. Among females aged 50-74 years

4. 2016 inflation-adjusted dollars

5. Gini Index: value of zero indicates perfect equality of income and value of one indicates perfect inequality

6. The number of days in 2012 with particulate matter 2.5 levels above the National Ambient Air Quality Standard of 35 µg/m³

7. Occupied housing units built before 1940 indirectly assesses contact with lead because about 68% of these homes have lead hazards. According to the Illinois Department of Public Health, all Chicago zip codes are considered high risk for young child lead exposure (ages 0 through 6 years) (Illinois Lead Program, 2016 Annual Surveillance Report)

Primary Service Area

Zip Code: 60620

Auburn Gresham

Demographic Characteristics, Zip Code: 60620			
	2007-2011 ¹	2012-2016 ²	City of Chicago ²
General Demographics			
Total Population	77,452	69,299	2,714,017
Male Population	44%	45%	49%
Median Age (Years)	37	40	34
Population Aged <18 Years (Children)	28%	22%	22%
Population Aged ≥65 Years (Seniors)	15%	17%	11%
Race and Ethnicity³			
Hispanic/Latino	1%	1%	29%
Non-Hispanic Black	98%	96%	31%
Non-Hispanic White	1%	1%	32%
Non-Hispanic Asian	0%	0%	6%
Place of Birth and Citizenship			
Foreign-born	1%	1%	21%
Population without U.S. Citizenship	1%	1%	12%
Socioeconomic Characteristics			
High School Graduates	82%	85%	83%
Median Household Income ⁴	\$37,544	\$32,401	\$50,434
Unemployment Rate	25%	22%	11%
Owner-occupied Housing Units ⁵	49%	46%	44%

1. American Community Survey, 2011 5-year estimates

2. American Community Survey, 2016 5-year estimates

3. Not all racial/ethnic groups reported; percentages may not add to 100%

4. 2016 inflation-adjusted dollars

5. Among occupied housing units

	Zip Code 60620	Top St. Bernard Zip Code	Bottom St. Bernard Zip Code	City of Chicago
Health Outcomes				
Chronic Conditions				
Adults with Current Asthma	12%	10%	13%	9%
Adults with Chronic Obstructive Pulmonary Disease	8%	6%	10%	6%
Adults with Diabetes	19%	13%	20%	11%
Adults who have had a Stroke	6%	3%	7%	3%
Adults with High Blood Pressure	48%	31%	49%	32%
Adults with Chronic Kidney Disease	4%	3%	5%	3%
Adults with Coronary Heart Disease	8%	6%	9%	6%
Adults and Children with Vision Difficulty	3%	2%	4%	2%
Quality of Life				
Adults with Poor or Fair Overall Health	26%	21%	31%	20%
Adults with Frequent Poor Physical Health Days	16%	15%	20%	12%
Adults with Frequent Poor Mental Health Days	14%	13%	18%	12%
Low Birthweight or Premature Births	12%	8%	14%	9%
Health Factors				
Health Behaviors				
Current Adult Smokers	23%	20%	30%	19%
Adult Obesity	44%	38%	48%	34%
Adult Physical Inactivity	34%	31%	40%	28%
Adult Fruit/Vegetable Intake (≥5 Servings/Day)	14%	16%	14%	15%
Heavy Drinking among Adults	4%	4%	5%	6%
Binge Drinking among Adults	15%	14%	21%	22%
Teen Birth Rate ¹	5.7	5.7	62.1	22.9
Clinical Care				
Population without Health Insurance	15%	11%	21%	15%
Adults with Personal Health Care Provider	79%	81%	72%	76%

	Zip Code 60620	Top St. Bernard Zip Code	Bottom St. Bernard Zip Code	City of Chicago
Clinical Care Continued				
Adults with Routine Checkup in Past Year	77%	78%	65%	68%
Preventable Emergency Department Visits	7%	6%	9%	7%
Behavioral Health Hospitalizations ²	206.9	122.4	368.1	175.3
Drug-related Hospitalizations ²	46.8	21.4	97.3	37.0
Mammography Screening in Past Two Years ³	77%	78%	70%	75%
Adults with Dental Visit in Past Year	46%	50%	34%	56%
Social & Economic Factors				
High School Graduates	85%	88%	68%	83%
Bachelor's Degree or Higher	17%	33%	8%	37%
Unemployment Rate	22%	17%	33%	11%
Median Household Income ⁴	\$32,401	\$41,471	\$20,150	\$50,434
Children in Poverty	42%	31%	56%	32%
Income Inequality ⁵	0.47	0.43	0.61	0.53
Single-parent Households	16%	16%	24%	10%
Seniors Living Alone	12%	8%	15%	10%
Violent Crime Rate ²	639.9	258.3	1068.8	317.0
Physical Environment				
Days with Poor Air Quality ⁶	2.7	2.0	3.4	3.2
Occupied Housing Units Built Before 1940 ⁷	38%	27%	52%	43%
Substandard Occupied Housing	49%	45%	59%	43%
Vacant Housing Units	15%	11%	33%	13%
Commute to Work Over an Hour	25%	13%	28%	16%
Population Living in Food Desert	1%	0%	8%	1%

1. Per 1,000 females aged 15-19 years

2. Per 10,000 total population

3. Among females aged 50-74 years

4. 2016 inflation-adjusted dollars

5. Gini Index: value of zero indicates perfect equality of income and value of one indicates perfect inequality

6. The number of days in 2012 with particulate matter 2.5 levels above the National Ambient Air Quality Standard of 35 µg/m³

7. Occupied housing units built before 1940 indirectly assesses contact with lead because about 68% of these homes have lead hazards. According to the Illinois Department of Public Health, all Chicago zip codes are considered high risk for young child lead exposure (ages 0 through 6 years) (Illinois Lead Program, 2016 Annual Surveillance Report)

Primary Service Area

Zip Code: 60621

Englewood

Demographic Characteristics, Zip Code: 60621			
	2007-2011 ¹	2012-2016 ²	City of Chicago ²
General Demographics			
Total Population	35,837	31,383	2,714,017
Male Population	45%	45%	49%
Median Age (Years)	33	31	34
Population Aged <18 Years (Children)	30%	28%	22%
Population Aged ≥65 Years (Seniors)	13%	12%	11%
Race and Ethnicity³			
Hispanic/Latino	1%	3%	29%
Non-Hispanic Black	98%	95%	31%
Non-Hispanic White	1%	1%	32%
Non-Hispanic Asian	0%	0%	6%
Place of Birth and Citizenship			
Foreign-born	1%	2%	21%
Population without U.S. Citizenship	0%	1%	12%
Socioeconomic Characteristics			
High School Graduates	73%	77%	83%
Median Household Income ⁴	\$21,009	\$20,150	\$50,434
Unemployment Rate	24%	33%	11%
Owner-occupied Housing Units ⁵	31%	25%	44%

1. American Community Survey, 2011 5-year estimates

2. American Community Survey, 2016 5-year estimates

3. Not all racial/ethnic groups reported; percentages may not add to 100%

4. 2016 inflation-adjusted dollars

5. Among occupied housing units

	Zip Code 60621	Top St. Bernard Zip Code	Bottom St. Bernard Zip Code	City of Chicago
Health Outcomes				
Chronic Conditions				
Adults with Current Asthma	13%	10%	13%	9%
Adults with Chronic Obstructive Pulmonary Disease	10%	6%	10%	6%
Adults with Diabetes	20%	13%	20%	11%
Adults who have had a Stroke	7%	3%	7%	3%
Adults with High Blood Pressure	49%	31%	49%	32%
Adults with Chronic Kidney Disease	5%	3%	5%	3%
Adults with Coronary Heart Disease	9%	6%	9%	6%
Adults and Children with Vision Difficulty	4%	2%	4%	2%
Quality of Life				
Adults with Poor or Fair Overall Health	31%	21%	31%	20%
Adults with Frequent Poor Physical Health Days	20%	15%	20%	12%
Adults with Frequent Poor Mental Health Days	18%	13%	18%	12%
Low Birthweight or Premature Births	12%	8%	14%	9%
Health Factors				
Health Behaviors				
Current Adult Smokers	30%	20%	30%	19%
Adult Obesity	48%	38%	48%	34%
Adult Physical Inactivity	40%	31%	40%	28%
Adult Fruit/Vegetable Intake (≥5 Servings/Day)	14%	16%	14%	15%
Heavy Drinking among Adults	4%	4%	5%	6%
Binge Drinking among Adults	14%	14%	21%	22%
Teen Birth Rate ¹	42.9	5.7	62.1	22.9
Clinical Care				
Population without Health Insurance	16%	11%	21%	15%
Adults with Personal Health Care Provider	76%	81%	72%	76%

	Zip Code 60621	Top St. Bernard Zip Code	Bottom St. Bernard Zip Code	City of Chicago
Clinical Care Continued				
Adults with Routine Checkup in Past Year	75%	78%	65%	68%
Preventable Emergency Department Visits	9%	6%	9%	7%
Behavioral Health Hospitalizations ²	368.1	122.4	368.1	175.3
Drug-related Hospitalizations ²	91.6	21.4	97.3	37.0
Mammography Screening in Past Two Years ³	72%	78%	70%	75%
Adults with Dental Visit in Past Year	34%	50%	34%	56%
Social & Economic Factors				
High School Graduates	77%	88%	68%	83%
Bachelor's Degree or Higher	8%	33%	8%	37%
Unemployment Rate	33%	17%	33%	11%
Median Household Income ⁴	\$20,150	\$41,471	\$20,150	\$50,434
Children in Poverty	55%	31%	56%	32%
Income Inequality ⁵	0.52	0.43	0.61	0.53
Single-parent Households	24%	16%	24%	10%
Seniors Living Alone	14%	8%	15%	10%
Violent Crime Rate ²	1068.8	258.3	1068.8	317.0
Physical Environment				
Days with Poor Air Quality ⁶	2.7	2.0	3.4	3.2
Occupied Housing Units Built Before 1940 ⁷	46%	27%	52%	43%
Substandard Occupied Housing	59%	45%	59%	43%
Vacant Housing Units	33%	11%	33%	13%
Commute to Work Over an Hour	26%	13%	28%	16%
Population Living in Food Desert	0%	0%	8%	1%

1. Per 1,000 females aged 15-19 years

2. Per 10,000 total population

3. Among females aged 50-74 years

4. 2016 inflation-adjusted dollars

5. Gini Index: value of zero indicates perfect equality of income and value of one indicates perfect inequality

6. The number of days in 2012 with particulate matter 2.5 levels above the National Ambient Air Quality Standard of 35 µg/m³

7. Occupied housing units built before 1940 indirectly assesses contact with lead because about 68% of these homes have lead hazards. According to the Illinois Department of Public Health, all Chicago zip codes are considered high risk for young child lead exposure (ages 0 through 6 years) (Illinois Lead Program, 2016 Annual Surveillance Report)

Secondary Service Area

Zip Code: 60628

Roseland, Pullman

Demographic Characteristics, Zip Code: 60628			
	2007-2011 ¹	2012-2016 ²	City of Chicago ²
General Demographics			
Total Population	76,929	68,077	2,714,017
Male Population	45%	44%	49%
Median Age (Years)	36	38	34
Population Aged <18 Years (Children)	28%	24%	22%
Population Aged ≥65 Years (Seniors)	15%	17%	11%
Race and Ethnicity³			
Hispanic/Latino	3%	3%	29%
Non-Hispanic Black	94%	94%	31%
Non-Hispanic White	2%	2%	32%
Non-Hispanic Asian	0%	0%	6%
Place of Birth and Citizenship			
Foreign-born	2%	3%	21%
Population without U.S. Citizenship	1%	1%	12%
Socioeconomic Characteristics			
High School Graduates	81%	85%	83%
Median Household Income ⁴	\$42,939	\$35,654	\$50,434
Unemployment Rate	18%	26%	11%
Owner-occupied Housing Units ⁵	59%	56%	44%

1. American Community Survey, 2011 5-year estimates

2. American Community Survey, 2016 5-year estimates

3. Not all racial/ethnic groups reported; percentages may not add to 100%

4. 2016 inflation-adjusted dollars

5. Among occupied housing units

	Zip Code 60628	Top St. Bernard Zip Code	Bottom St. Bernard Zip Code	City of Chicago
Health Outcomes				
Chronic Conditions				
Adults with Current Asthma	12%	10%	13%	9%
Adults with Chronic Obstructive Pulmonary Disease	8%	6%	10%	6%
Adults with Diabetes	18%	13%	20%	11%
Adults who have had a Stroke	6%	3%	7%	3%
Adults with High Blood Pressure	47%	31%	49%	32%
Adults with Chronic Kidney Disease	4%	3%	5%	3%
Adults with Coronary Heart Disease	8%	6%	9%	6%
Adults and Children with Vision Difficulty	3%	2%	4%	2%
Quality of Life				
Adults with Poor or Fair Overall Health	26%	21%	31%	20%
Adults with Frequent Poor Physical Health Days	16%	15%	20%	12%
Adults with Frequent Poor Mental Health Days	14%	13%	18%	12%
Low Birthweight or Premature Births	12%	8%	14%	9%
Health Factors				
Health Behaviors				
Current Adult Smokers	23%	20%	30%	19%
Adult Obesity	44%	38%	48%	34%
Adult Physical Inactivity	34%	31%	40%	28%
Adult Fruit/Vegetable Intake (≥5 Servings/Day)	14%	16%	14%	15%
Heavy Drinking among Adults	4%	4%	5%	6%
Binge Drinking among Adults	15%	14%	21%	22%
Teen Birth Rate ¹	38.7	5.7	62.1	22.9
Clinical Care				
Population without Health Insurance	14%	11%	21%	15%
Adults with Personal Health Care Provider	81%	81%	72%	76%

	Zip Code 60628	Top St. Bernard Zip Code	Bottom St. Bernard Zip Code	City of Chicago
Clinical Care Continued				
Adults with Routine Checkup in Past Year	77%	78%	65%	68%
Preventable Emergency Department Visits	7%	6%	9%	7%
Behavioral Health Hospitalizations ²	184.5	122.4	368.1	175.3
Drug-related Hospitalizations ²	46.4	21.4	97.3	37.0
Mammography Screening in Past Two Years ³	77%	78%	70%	75%
Adults with Dental Visit in Past Year	46%	50%	34%	56%
Social & Economic Factors				
High School Graduates	85%	88%	68%	83%
Bachelor's Degree or Higher	19%	33%	8%	37%
Unemployment Rate	26%	17%	33%	11%
Median Household Income ⁴	\$35,654	\$41,471	\$20,150	\$50,434
Children in Poverty	48%	31%	56%	32%
Income Inequality ⁵	0.49	0.43	0.61	0.53
Single-parent Households	17%	16%	24%	10%
Seniors Living Alone	12%	8%	15%	10%
Violent Crime Rate ²	606.5	258.3	1068.8	317.0
Physical Environment				
Days with Poor Air Quality ⁶	2.0	2.0	3.4	3.2
Occupied Housing Units Built Before 1940 ⁷	37%	27%	52%	43%
Substandard Occupied Housing	47%	45%	59%	43%
Vacant Housing Units	18%	11%	33%	13%
Commute to Work Over an Hour	28%	13%	28%	16%
Population Living in Food Desert	7%	0%	8%	1%

1. Per 1,000 females aged 15-19 years

2. Per 10,000 total population

3. Among females aged 50-74 years

4. 2016 inflation-adjusted dollars

5. Gini Index: value of zero indicates perfect equality of income and value of one indicates perfect inequality

6. The number of days in 2012 with particulate matter 2.5 levels above the National Ambient Air Quality Standard of 35 µg/m³

7. Occupied housing units built before 1940 indirectly assesses contact with lead because about 68% of these homes have lead hazards. According to the Illinois Department of Public Health, all Chicago zip codes are considered high risk for young child lead exposure (ages 0 through 6 years) (Illinois Lead Program, 2016 Annual Surveillance Report)

Secondary Service Area

Zip Code: 60629

West Lawn, Chicago Lawn

Demographic Characteristics, Zip Code: 60629			
	2007-2011 ¹	2012-2016 ²	City of Chicago ²
General Demographics			
Total Population	112,376	115,104	2,714,017
Male Population	49%	49%	49%
Median Age (Years)	29	30	34
Population Aged <18 Years (Children)	33%	31%	22%
Population Aged ≥65 Years (Seniors)	7%	8%	11%
Race and Ethnicity³			
Hispanic/Latino	64%	70%	29%
Non-Hispanic Black	25%	20%	31%
Non-Hispanic White	10%	8%	32%
Non-Hispanic Asian	1%	0%	6%
Place of Birth and Citizenship			
Foreign-born	32%	32%	21%
Population without U.S. Citizenship	23%	21%	12%
Socioeconomic Characteristics			
High School Graduates	64%	68%	83%
Median Household Income ⁴	\$44,327	\$41,471	\$50,434
Unemployment Rate	13%	17%	11%
Owner-occupied Housing Units ⁵	60%	57%	44%

1. American Community Survey, 2011 5-year estimates

2. American Community Survey, 2016 5-year estimates

3. Not all racial/ethnic groups reported; percentages may not add to 100%

4. 2016 inflation-adjusted dollars

5. Among occupied housing units

	Zip Code 60629	Top St. Bernard Zip Code	Bottom St. Bernard Zip Code	City of Chicago
Health Outcomes				
Chronic Conditions				
Adults with Current Asthma	10%	10%	13%	9%
Adults with Chronic Obstructive Pulmonary Disease	6%	6%	10%	6%
Adults with Diabetes	13%	13%	20%	11%
Adults who have had a Stroke	3%	3%	7%	3%
Adults with High Blood Pressure	31%	31%	49%	32%
Adults with Chronic Kidney Disease	3%	3%	5%	3%
Adults with Coronary Heart Disease	6%	6%	9%	6%
Adults and Children with Vision Difficulty	2%	2%	4%	2%
Quality of Life				
Adults with Poor or Fair Overall Health	21%	21%	31%	20%
Adults with Frequent Poor Physical Health Days	15%	15%	20%	12%
Adults with Frequent Poor Mental Health Days	15%	13%	18%	12%
Low Birthweight or Premature Births	8%	8%	14%	9%
Health Factors				
Health Behaviors				
Current Adult Smokers	21%	20%	30%	19%
Adult Obesity	38%	38%	48%	34%
Adult Physical Inactivity	34%	31%	40%	28%
Adult Fruit/Vegetable Intake (≥5 Servings/Day)	16%	16%	14%	15%
Heavy Drinking among Adults	5%	4%	5%	6%
Binge Drinking among Adults	21%	14%	21%	22%
Teen Birth Rate ¹	23.3	5.7	62.1	22.9
Clinical Care				
Population without Health Insurance	20%	11%	21%	15%
Adults with Personal Health Care Provider	73%	81%	72%	76%

	Zip Code 60629	Top St. Bernard Zip Code	Bottom St. Bernard Zip Code	City of Chicago
Clinical Care Continued				
Adults with Routine Checkup in Past Year	65%	78%	65%	68%
Preventable Emergency Department Visits	6%	6%	9%	7%
Behavioral Health Hospitalizations ²	122.4	122.4	368.1	175.3
Drug-related Hospitalizations ²	21.4	21.4	97.3	37.0
Mammography Screening in Past Two Years ³	72%	78%	70%	75%
Adults with Dental Visit in Past Year	46%	50%	34%	56%
Social & Economic Factors				
High School Graduates	68%	88%	68%	83%
Bachelor's Degree or Higher	9%	33%	8%	37%
Unemployment Rate	17%	17%	33%	11%
Median Household Income ⁴	\$41,471	\$41,471	\$20,150	\$50,434
Children in Poverty	31%	31%	56%	32%
Income Inequality ⁵	0.43	0.43	0.61	0.53
Single-parent Households	16%	16%	24%	10%
Seniors Living Alone	8%	8%	15%	10%
Violent Crime Rate ²	258.3	258.3	1068.8	317.0
Physical Environment				
Days with Poor Air Quality ⁶	3.4	2.0	3.4	3.2
Occupied Housing Units Built Before 1940 ⁷	27%	27%	52%	43%
Substandard Occupied Housing	51%	45%	59%	43%
Vacant Housing Units	11%	11%	33%	13%
Commute to Work Over an Hour	19%	13%	28%	16%
Population Living in Food Desert	0%	0%	8%	1%

1. Per 1,000 females aged 15-19 years

2. Per 10,000 total population

3. Among females aged 50-74 years

4. 2016 inflation-adjusted dollars

5. Gini Index: value of zero indicates perfect equality of income and value of one indicates perfect inequality

6. The number of days in 2012 with particulate matter 2.5 levels above the National Ambient Air Quality Standard of 35 µg/m³

7. Occupied housing units built before 1940 indirectly assesses contact with lead because about 68% of these homes have lead hazards. According to the Illinois Department of Public Health, all Chicago zip codes are considered high risk for young child lead exposure (ages 0 through 6 years) (Illinois Lead Program, 2016 Annual Surveillance Report)

Primary Service Area

Zip Code: 60636

West Englewood

Demographic Characteristics, Zip Code: 60636			
	2007-2011 ¹	2012-2016 ²	City of Chicago ²
General Demographics			
Total Population	41,973	35,779	2,714,017
Male Population	47%	47%	49%
Median Age (Years)	31	35	34
Population Aged <18 Years (Children)	30%	25%	22%
Population Aged ≥65 Years (Seniors)	11%	15%	11%
Race and Ethnicity³			
Hispanic/Latino	2%	6%	29%
Non-Hispanic Black	95%	91%	31%
Non-Hispanic White	1%	1%	32%
Non-Hispanic Asian	0%	0%	6%
Place of Birth and Citizenship			
Foreign-born	2%	3%	21%
Population without U.S. Citizenship	1%	2%	12%
Socioeconomic Characteristics			
High School Graduates	73%	78%	83%
Median Household Income ⁴	\$28,405	\$27,475	\$50,434
Unemployment Rate	35%	32%	11%
Owner-occupied Housing Units ⁵	48%	48%	44%

1. American Community Survey, 2011 5-year estimates

2. American Community Survey, 2016 5-year estimates

3. Not all racial/ethnic groups reported; percentages may not add to 100%

4. 2016 inflation-adjusted dollars

5. Among occupied housing units

	Zip Code 60636	Top St. Bernard Zip Code	Bottom St. Bernard Zip Code	City of Chicago
Health Outcomes				
Chronic Conditions				
Adults with Current Asthma	13%	10%	13%	9%
Adults with Chronic Obstructive Pulmonary Disease	9%	6%	10%	6%
Adults with Diabetes	20%	13%	20%	11%
Adults who have had a Stroke	7%	3%	7%	3%
Adults with High Blood Pressure	48%	31%	49%	32%
Adults with Chronic Kidney Disease	4%	3%	5%	3%
Adults with Coronary Heart Disease	9%	6%	9%	6%
Adults and Children with Vision Difficulty	3%	2%	4%	2%
Quality of Life				
Adults with Poor or Fair Overall Health	28%	21%	31%	20%
Adults with Frequent Poor Physical Health Days	19%	15%	20%	12%
Adults with Frequent Poor Mental Health Days	17%	13%	18%	12%
Low Birthweight or Premature Births	14%	8%	14%	9%
Health Factors				
Health Behaviors				
Current Adult Smokers	28%	20%	30%	19%
Adult Obesity	46%	38%	48%	34%
Adult Physical Inactivity	38%	31%	40%	28%
Adult Fruit/Vegetable Intake (≥5 Servings/Day)	14%	16%	14%	15%
Heavy Drinking among Adults	4%	4%	5%	6%
Binge Drinking among Adults	15%	14%	21%	22%
Teen Birth Rate ¹	13.8	5.7	62.1	22.9
Clinical Care				
Population without Health Insurance	19%	11%	21%	15%
Adults with Personal Health Care Provider	78%	81%	72%	76%

	Zip Code 60636	Top St. Bernard Zip Code	Bottom St. Bernard Zip Code	City of Chicago
Clinical Care Continued				
Adults with Routine Checkup in Past Year	75%	78%	65%	68%
Preventable Emergency Department Visits	8%	6%	9%	7%
Behavioral Health Hospitalizations ²	326.5	122.4	368.1	175.3
Drug-related Hospitalizations ²	97.3	21.4	97.3	37.0
Mammography Screening in Past Two Years ³	73%	78%	70%	75%
Adults with Dental Visit in Past Year	37%	50%	34%	56%
Social & Economic Factors				
High School Graduates	78%	88%	68%	83%
Bachelor's Degree or Higher	9%	33%	8%	37%
Unemployment Rate	32%	17%	33%	11%
Median Household Income ⁴	\$27,475	\$41,471	\$20,150	\$50,434
Children in Poverty	50%	31%	56%	32%
Income Inequality ⁵	0.49	0.43	0.61	0.53
Single-parent Households	19%	16%	24%	10%
Seniors Living Alone	15%	8%	15%	10%
Violent Crime Rate ²	904.4	258.3	1068.8	317.0
Physical Environment				
Days with Poor Air Quality ⁶	2.3	2.0	3.4	3.2
Occupied Housing Units Built Before 1940 ⁷	49%	27%	52%	43%
Substandard Occupied Housing	50%	45%	59%	43%
Vacant Housing Units	24%	11%	33%	13%
Commute to Work Over an Hour	25%	13%	28%	16%
Population Living in Food Desert	0%	0%	8%	1%

1. Per 1,000 females aged 15-19 years

2. Per 10,000 total population

3. Among females aged 50-74 years

4. 2016 inflation-adjusted dollars

5. Gini Index: value of zero indicates perfect equality of income and value of one indicates perfect inequality

6. The number of days in 2012 with particulate matter 2.5 levels above the National Ambient Air Quality Standard of 35 µg/m³

7. Occupied housing units built before 1940 indirectly assesses contact with lead because about 68% of these homes have lead hazards. According to the Illinois Department of Public Health, all Chicago zip codes are considered high risk for young child lead exposure (ages 0 through 6 years) (Illinois Lead Program, 2016 Annual Surveillance Report)

Primary Service Area

Zip Code: 60637

Woodlawn

Demographic Characteristics, Zip Code: 60637			
	2007-2011 ¹	2012-2016 ²	City of Chicago ²
General Demographics			
Total Population	47,636	49,158	2,714,017
Male Population	44%	44%	49%
Median Age (Years)	31	30	34
Population Aged <18 Years (Children)	27%	26%	22%
Population Aged ≥65 Years (Seniors)	12%	11%	11%
Race and Ethnicity³			
Hispanic/Latino	2%	3%	29%
Non-Hispanic Black	78%	77%	31%
Non-Hispanic White	16%	14%	32%
Non-Hispanic Asian	4%	4%	6%
Place of Birth and Citizenship			
Foreign-born	7%	7%	21%
Population without U.S. Citizenship	4%	4%	12%
Socioeconomic Characteristics			
High School Graduates	83%	86%	83%
Median Household Income ⁴	\$29,952	\$27,091	\$50,434
Unemployment Rate	21%	18%	11%
Owner-occupied Housing Units ⁵	27%	26%	44%

1. American Community Survey, 2011 5-year estimates

2. American Community Survey, 2016 5-year estimates

3. Not all racial/ethnic groups reported; percentages may not add to 100%

4. 2016 inflation-adjusted dollars

5. Among occupied housing units

	Zip Code 60637	Top St. Bernard Zip Code	Bottom St. Bernard Zip Code	City of Chicago
Health Outcomes				
Chronic Conditions				
Adults with Current Asthma	12%	10%	13%	9%
Adults with Chronic Obstructive Pulmonary Disease	7%	6%	10%	6%
Adults with Diabetes	15%	13%	20%	11%
Adults who have had a Stroke	5%	3%	7%	3%
Adults with High Blood Pressure	39%	31%	49%	32%
Adults with Chronic Kidney Disease	4%	3%	5%	3%
Adults with Coronary Heart Disease	7%	6%	9%	6%
Adults and Children with Vision Difficulty	3%	2%	4%	2%
Quality of Life				
Adults with Poor or Fair Overall Health	25%	21%	31%	20%
Adults with Frequent Poor Physical Health Days	15%	15%	20%	12%
Adults with Frequent Poor Mental Health Days	14%	13%	18%	12%
Low Birthweight or Premature Births	13%	8%	14%	9%
Health Factors				
Health Behaviors				
Current Adult Smokers	23%	20%	30%	19%
Adult Obesity	40%	38%	48%	34%
Adult Physical Inactivity	31%	31%	40%	28%
Adult Fruit/Vegetable Intake (≥5 Servings/Day)	15%	16%	14%	15%
Heavy Drinking among Adults	5%	4%	5%	6%
Binge Drinking among Adults	18%	14%	21%	22%
Teen Birth Rate ¹	31.9	5.7	62.1	22.9
Clinical Care				
Population without Health Insurance	11%	11%	21%	15%
Adults with Personal Health Care Provider	76%	81%	72%	76%

	Zip Code 60637	Top St. Bernard Zip Code	Bottom St. Bernard Zip Code	City of Chicago
Clinical Care Continued				
Adults with Routine Checkup in Past Year	73%	78%	65%	68%
Preventable Emergency Department Visits	8%	6%	9%	7%
Behavioral Health Hospitalizations ²	275.3	122.4	368.1	175.3
Drug-related Hospitalizations ²	87.7	21.4	97.3	37.0
Mammography Screening in Past Two Years ³	76%	78%	70%	75%
Adults with Dental Visit in Past Year	49%	50%	34%	56%
Social & Economic Factors				
High School Graduates	86%	88%	68%	83%
Bachelor's Degree or Higher	33%	33%	8%	37%
Unemployment Rate	18%	17%	33%	11%
Median Household Income ⁴	\$27,091	\$41,471	\$20,150	\$50,434
Children in Poverty	56%	31%	56%	32%
Income Inequality ⁵	0.61	0.43	0.61	0.53
Single-parent Households	19%	16%	24%	10%
Seniors Living Alone	13%	8%	15%	10%
Violent Crime Rate ²	652.7	258.3	1068.8	317.0
Physical Environment				
Days with Poor Air Quality ⁶	2.7	2.0	3.4	3.2
Occupied Housing Units Built Before 1940 ⁷	44%	27%	52%	43%
Substandard Occupied Housing	50%	45%	59%	43%
Vacant Housing Units	23%	11%	33%	13%
Commute to Work Over an Hour	17%	13%	28%	16%
Population Living in Food Desert	1%	0%	8%	1%

1. Per 1,000 females aged 15-19 years

2. Per 10,000 total population

3. Among females aged 50-74 years

4. 2016 inflation-adjusted dollars

5. Gini Index: value of zero indicates perfect equality of income and value of one indicates perfect inequality

6. The number of days in 2012 with particulate matter 2.5 levels above the National Ambient Air Quality Standard of 35 µg/m³

7. Occupied housing units built before 1940 indirectly assesses contact with lead because about 68% of these homes have lead hazards. According to the Illinois Department of Public Health, all Chicago zip codes are considered high risk for young child lead exposure (ages 0 through 6 years) (Illinois Lead Program, 2016 Annual Surveillance Report)

Secondary Service Area

Zip Code: 60649

South Shore

Demographic Characteristics, Zip Code: 60649			
	2007-2011 ¹	2012-2016 ²	City of Chicago ²
General Demographics			
Total Population	44,884	45,218	2,714,017
Male Population	44%	42%	49%
Median Age (Years)	38	38	34
Population Aged <18 Years (Children)	23%	23%	22%
Population Aged ≥65 Years (Seniors)	12%	14%	11%
Race and Ethnicity³			
Hispanic/Latino	2%	2%	29%
Non-Hispanic Black	94%	93%	31%
Non-Hispanic White	2%	3%	32%
Non-Hispanic Asian	0%	1%	6%
Place of Birth and Citizenship			
Foreign-born	3%	3%	21%
Population without U.S. Citizenship	2%	2%	12%
Socioeconomic Characteristics			
High School Graduates	85%	88%	83%
Median Household Income ⁴	\$31,413	\$26,246	\$50,434
Unemployment Rate	17%	20%	11%
Owner-occupied Housing Units ⁵	24%	22%	44%

1. American Community Survey, 2011 5-year estimates

2. American Community Survey, 2016 5-year estimates

3. Not all racial/ethnic groups reported; percentages may not add to 100%

4. 2016 inflation-adjusted dollars

5. Among occupied housing units

	Zip Code 60649	Top St. Bernard Zip Code	Bottom St. Bernard Zip Code	City of Chicago
Health Outcomes				
Chronic Conditions				
Adults with Current Asthma	12%	10%	13%	9%
Adults with Chronic Obstructive Pulmonary Disease	8%	6%	10%	6%
Adults with Diabetes	18%	13%	20%	11%
Adults who have had a Stroke	6%	3%	7%	3%
Adults with High Blood Pressure	46%	31%	49%	32%
Adults with Chronic Kidney Disease	4%	3%	5%	3%
Adults with Coronary Heart Disease	8%	6%	9%	6%
Adults and Children with Vision Difficulty	4%	2%	4%	2%
Quality of Life				
Adults with Poor or Fair Overall Health	27%	21%	31%	20%
Adults with Frequent Poor Physical Health Days	16%	15%	20%	12%
Adults with Frequent Poor Mental Health Days	14%	13%	18%	12%
Low Birthweight or Premature Births	11%	8%	14%	9%
Health Factors				
Health Behaviors				
Current Adult Smokers	23%	20%	30%	19%
Adult Obesity	44%	38%	48%	34%
Adult Physical Inactivity	33%	31%	40%	28%
Adult Fruit/Vegetable Intake (≥5 Servings/Day)	15%	16%	14%	15%
Heavy Drinking among Adults	4%	4%	5%	6%
Binge Drinking among Adults	16%	14%	21%	22%
Teen Birth Rate ¹	38.4	5.7	62.1	22.9
Clinical Care				
Population without Health Insurance	14%	11%	21%	15%
Adults with Personal Health Care Provider	78%	81%	72%	76%

	Zip Code 60649	Top St. Bernard Zip Code	Bottom St. Bernard Zip Code	City of Chicago
Clinical Care Continued				
Adults with Routine Checkup in Past Year	76%	78%	65%	68%
Preventable Emergency Department Visits	8%	6%	9%	7%
Behavioral Health Hospitalizations ²	298.0	122.4	368.1	175.3
Drug-related Hospitalizations ²	89.6	21.4	97.3	37.0
Mammography Screening in Past Two Years ³	77%	78%	70%	75%
Adults with Dental Visit in Past Year	47%	50%	34%	56%
Social & Economic Factors				
High School Graduates	88%	88%	68%	83%
Bachelor's Degree or Higher	25%	33%	8%	37%
Unemployment Rate	20%	17%	33%	11%
Median Household Income ⁴	\$26,246	\$41,471	\$20,150	\$50,434
Children in Poverty	47%	31%	56%	32%
Income Inequality ⁵	0.55	0.43	0.61	0.53
Single-parent Households	16%	16%	24%	10%
Seniors Living Alone	14%	8%	15%	10%
Violent Crime Rate ²	671.7	258.3	1068.8	317.0
Physical Environment				
Days with Poor Air Quality ⁶	2.3	2.0	3.4	3.2
Occupied Housing Units Built Before 1940 ⁷	42%	27%	52%	43%
Substandard Occupied Housing	55%	45%	59%	43%
Vacant Housing Units	21%	11%	33%	13%
Commute to Work Over an Hour	28%	13%	28%	16%
Population Living in Food Desert	8%	0%	8%	1%

1. Per 1,000 females aged 15-19 years

2. Per 10,000 total population

3. Among females aged 50-74 years

4. 2016 inflation-adjusted dollars

5. Gini Index: value of zero indicates perfect equality of income and value of one indicates perfect inequality

6. The number of days in 2012 with particulate matter 2.5 levels above the National Ambient Air Quality Standard of 35 µg/m³

7. Occupied housing units built before 1940 indirectly assesses contact with lead because about 68% of these homes have lead hazards. According to the Illinois Department of Public Health, all Chicago zip codes are considered high risk for young child lead exposure (ages 0 through 6 years) (Illinois Lead Program, 2016 Annual Surveillance Report)



Focus Group Insights



Focus Group Insights

Summary

Two Focus Groups were conducted to help St. Bernard Hospital and Health Care Center (STBH) contextualize secondary data findings and to secure community input on local assets and needs. Across these conversations, several overarching themes emerged:

- Social determinants of health, particularly poverty and inadequate insurance coverage, are the primary drivers of low health care utilization and poor health outcomes in the STBH service area.
- Residents of the STBH service area have a high level of unmet need for specialty care services that are not typically well-covered by health insurance, such as vision, dental, and behavioral health care.
- Advancing health literacy and educating residents on how to navigate the increasingly complex health care system is a key strategy for improving health outcomes.
- The persistent negative image of the Greater Englewood area perpetuated by media coverage has a substantial impact on quality of life for community members, eroding community trust and undermining the many positive activities and initiatives occurring throughout the area.
- Collaboration and partnership among community organizations, health care providers, and residents is critical for improving health and quality of life throughout the STBH service area.

Assets

Focus Group participants first identified community assets. Information about local strengths and resources can be found in the **Community Assets** section of this report.

Data Reactions

Focus Group participants shared the following insights after listening to a brief overview of the secondary data gathered for the CHNA.

Income as a Predictor of Poor Health

After reviewing maps of income distribution and disease burden across STBH's service area, participants noted that geographic areas with the greatest economic disadvantage also often had the greatest burden of disease.

Participants articulated the impact of poverty on health in terms of the difficult choices low-income families are forced to make. When resources are limited, it becomes very hard to prioritize health. As one participant explained,

"If I don't have money for a co-payment, and I had to choose between going with the co-payment or buying my kids' school supplies for school...then I'm not going to the doctor."

Dietary choices were also frequently referenced as a challenge for low-income residents. One participant described the dilemma by saying,

"When you see the kids in the morning going to school and eating chips, those chips were bought in bulk, and they're a quarter versus the cherries at \$3.99. So what is a parent going to choose? They're going to choose the thing they can get enough of that will stretch until they can get the next several dollars."

Specialty Health Care Services

Participants noted the high need for specialty services like oral health and vision care across the STBH service area. These services are often not covered through medical insurance, particularly among publicly insured populations. Because a high proportion of people in the STBH service area are publicly insured, it is difficult to attract specialty providers to serve the population. As stated by a participant,

"A lot of [specialists] don't want to set up offices in our communities...All of those specialties, they don't want to set up because we don't have the income or we don't have the kind of insurance where they get high reimbursement."

Although STBH provides specialty health care services, such as vision and dental care, many residents were unaware of these services.

Behavioral Health Hospitalizations

Participants were not surprised by the high need for mental health care in the STBH service area, but some were surprised to see higher behavioral health hospitalization rates in their community than the city as a whole, given the level of stigma ascribed to mental health issues in the community. Participants cautioned that hospitalization data tells an incomplete story of mental health care needs, as many people do not seek mental health care services due to fear, lack of access, or lack of understanding of mental health. One participant stated,

"These numbers are missing some of those people that have these issues, but can't show up at the emergency room or primary care provider to get it checked and diagnosed."

While behavioral health hospitalization rates in the community were higher than participants expected, they still emphasized the level of unmet need in the community. As one participant shared,

"[Many of the] mental health clinics have closed. And now it's such an upswing in people who are doing more drugs and...under a whole lot of stress, losing their jobs or whatever... Where do you go to get these people help?"

Teen Births

While the populations living in the neighboring zip codes of 60636 (West Englewood) and 60621 (Englewood) are demographically very similar, participants were surprised to see that the teen

birth rate in Englewood is three times higher than in West Englewood. They speculated about whether the presence of a Planned Parenthood clinic in West Englewood accounted for the community's lower rate of teen births, and asked themselves what other reproductive health resources might be more accessible in the West Englewood community that could explain this difference.

Priorities

When asked about what they perceive to be the most important priorities for improving health and quality of life in their community, participants identified the following.

Improving Accessibility of Local Health Care Resources

While health care institutions were identified as a key asset, participants noted a need to improve accessibility and utilization of local health care providers. Working to advocate for affordable care and for better coverage of prescription medications will be key to achieving better health outcomes for residents.

Health Literacy

Another aspect of accessibility was the need to improve health literacy, or “the degree to which an individual has the capacity to obtain, communicate, process, and understand basic health information and services to make appropriate health decisions,”^a and to educate the community about the importance of prevention and early intervention. Participants noted that many residents wait too long to go to the doctor because they want to avoid hearing bad news, saying,

“They don’t really want to know there’s a problem. As long as they don’t know there’s a problem, it doesn’t exist.”

Participants noted that because this fear often leads to delayed detection and treatment, it can be a self-fulfilling prophecy, reinforcing one’s belief that they shouldn’t seek care. One participant said,

“They wait until the last minute, and when they wait until the last minute, it’s too late.”

Efforts to improve health literacy among community members could build on STBH’s existing work, which is educating patients on how to access the appropriate level of care at the right time. Ensuring access to quality primary and preventive care was a key motivation for the construction of STBH’s new Ambulatory Care Center.

Distrust of the Health Care System

Distrust of the health care system was another critical component of accessibility. Participants acknowledged a historic distrust of the overall health care system, as well as stigmatization of local health care providers, which prevents community members from seeking care.

One of the drivers of this mistrust, in participants’ minds, is the complexity and restrictiveness of the health care insurance system, particularly for Medicaid users. Bureaucratic inefficiencies and

coverage limitations make it difficult for patients to access the services they need. Participants explained that,

“We have a system that doesn’t treat patients like people...they become just numbers on a policy or numbers on a list, and they don’t get treated like people.”

Another aspect of this mistrust is grounded in community members’ fear that the health care system can diagnose their problems but not treat them, due to cost and insurance restrictions. As discussed above, these feelings can lead to patients delaying care until a disease is advanced, making it difficult and costly to treat.

Cultivating approachable, welcoming, and culturally competent health care environments can help build community trust in the local health care system. Providing health care navigation services that support people in using their insurance and accessing care can also help to improve patient health care experiences. However, participants acknowledged that the health care system is not always patient-centered. Advocacy at the state and federal levels is needed to make care more accessible, affordable, and user-friendly, particularly for the publicly insured.

Enhancing Greater Englewood’s Physical Environment

Further development of the community’s physical environment was a priority for improving quality of life. Creating safe recreational spaces, constructing quality housing, and building opportunities to facilitate home ownership in the community were identified as key strategies.

Addressing the Social Determinants of Health

Participants acknowledged poverty as the primary driver of health inequities in the community, and underscored the importance of improving access to quality education and employment in order to build economic wellbeing among community residents.

Improving the Community’s Image

A recurring theme was the impact of the local media’s negative portrayal of the community. Participants reported that media coverage regularly associates the community with violence. They further noted that the media often inaccurately attributes criminal activity to the residents of their community. Participants reported that the constant media portrayal of a dangerous and violent neighborhood erodes trust among residents and detracts attention from the many positive things taking place in the community. As one participant explained,

“You’re scared to walk through the neighborhood every time you hear something going on in the T.V., radio, newspapers. It’s something bad, bad, bad. But there are a lot of very good things happening in Englewood.”

To combat the perpetuation of this negative portrayal, participants stressed the need for community-driven messaging efforts that advertise all of the great work Englewood residents are engaged in to strengthen their community.

Strengthening Local Collaboration and Resource-Sharing

Participants noted that though there are many community organizations doing good work and many existing partnerships among them, community improvement efforts could be strengthened by increased partnership, communication, and resource sharing among local organizations. As stated by one participant,

"You're doing that, we're doing that, [other organizations are] probably doing that. Why don't we just work together?"

What Works

We asked participants to share information about the type of community health improvement efforts that have historically worked for the area.

Partnership and Collaboration

Participants cited organizational collaboration as critical to the success of community health improvement efforts. Participants noted that many organizations have deep partnerships with one another, as well as with local government agencies, such as the Chicago Department of Public Health, but emphasized that organizations should work to foster further collaboration and partnership.

Community Outreach

Participants underscored the need for continued outreach to the community's most vulnerable residents who struggle with social isolation. Speaking of this population, a participant described,

"They don't have the support system a lot of communities have, so they have to deal with so much more. It's hard for them to deal with some the very basic things we sort of take for granted, like going to a doctor for a checkup."

Participants highlighted the success of mobile street outreach to target socially isolated populations. A participant from a service agency explained that this is a particularly important strategy to reach seniors who are afraid to leave their homes due to neighborhood violence.

Focus on Community Assets

Participants underscored the importance of reframing community conversations to be asset-based, rather than deficit-focused. While important for every community, an emphasis on assets is particularly important for this area, which is actively working to combat the negative image often portrayed by local media of the community as a violent or dangerous place. By publicizing the community's strength, resilience, and resourcefulness, community leaders can challenge these negative perceptions in and outside of the community and promote positive growth.

References

- a. Health Literacy. Centers for Disease Control and Prevention Website.
<https://www.cdc.gov/healthliteracy/learn/index.html>. Accessed October 31, 2018.



Community Assets



Community Assets

We gathered information regarding community assets from Focus Group participants, CHNA Advisory Committee members, and through an environmental scan.

Community Residents

"Just because you live in Englewood, doesn't mean that you have to be part of the negativity that's going around"

The most frequently cited asset by Focus Group participants was the community members themselves. Participants praised local residents for their resilience, determination, and commitment to improving their community. Participants reported that local residents are civically engaged, collaborative, and united around working to create a safer neighborhood and better opportunities for youth.

Historic Housing and Open Space

Focus Group participants took pride in the area's turn-of-the-century bungalows and stately historic mansions, and the amount of open green space available for urban farming.

Local Gathering Spaces

Participants underscored the importance of community gathering spaces for creating a safe, connected, and culturally vibrant atmosphere. Local cafes and restaurants like Kusanya Café, Sikia, and Starbucks provide places where community members can meet. Perry Avenue Community Farm was also identified as a community-centric environment where people can gather and volunteer alongside their neighbors. Nonprofit community organizations like Peace House, Imagine Englewood If..., and Metropolitan Family Services also promote community connection by providing spaces and opportunities for residents to gather and work together.

Community Health Care Facilities

"We have a dental center where we take care of special needs children."

"Our programs cover uninsured, even copays that are just ridiculous."

"We have food pantries, medication, payment programs, mental health therapy, triage on site, dental, shower, and laundry. That's a resource that we've started catering to the homeless population."

Participants noted the presence of community-centered health care providers who are dedicated to serving the needs of the most vulnerable residents. Federally Qualified Health Centers like Heartland Alliance Health Center provide care to people regardless of insurance status, and Oak Street Health specializes in providing quality primary care to area seniors.

Participants perceived STBH to be a great asset to the community, offering not only quality health care like women's health care, mental health services, and dental care, but also serving a wide variety of social needs for the community. In particular, participants highlighted the bus passes and food and housing services offered by STBH. A STBH initiative to create new housing in the neighborhood has built pathways to homeownership and brought more stability and local investment to the area. STBH has also partnered with Neighborhood Housing Services to encourage home ownership and host first time home buyer classes. STBH's new Ambulatory Care Center, which opened in 2016, links residents to quality preventive and specialty care.

Hospitals

Advocate Trinity Hospital
Holy Cross Hospital
Jackson Park Hospital
La Rabida Children's Hospital
Roseland Community Hospital
Saint Bernard Hospital
South Shore Hospital
The University of Chicago Medical Center

Heartland Alliance Health Englewood Health Center
Howard Brown Health 63rd Street
IHC New City Clinic
Mile Square Health Center Back of the Yards
Mile Square Health Center South Shore
Oak Street Health Clinic
Roseland Christian Health Ministries
TCA Health Chatham

Mental Health Treatment Facilities

Auburn Gresham VA CBOC
Ada S. McKinley Community Services, Inc.
Englewood Mental Health Center
Sonia Shankman Orthogenic School
South Shore Wellness Program
Jackson Park Hospital/Medical Center
Saint Bernard Hospital
South Shore Hospital
Thresholds

Drug and Alcohol Treatment Facilities

Aunt Martha's Roseland Community Health Center
Aunt Martha's Southeast Chicago Community Health Center
Bridging the Tys to Jordan
Chicago Treatment and Counseling Center
Drexel Counseling Services Inc.
DUI Alternatives Treatment Center Inc.
Eva Mae Recovery Hope Inc.
Fola Community Action Services Inc.
Healthcare Alternative Systems
Henrys Sober Living House
Human Resources Development Institute
Kirby Rehabilitation
Living Trees Center Inc.
NuWay Community Services Inc.
Renewed Hope Community Services
Rosemoor Assessment
Saint Bernard Hospital
South Shore Hospital
Southwood Interventions

Federally Qualified Health Centers

ACCESS at Gary Comer Youth Center
ACCESS at Holy Cross
ACCESS Auburn Gresham Family Health Center
Ashland Family Health Center
Auburn Gresham Health and Wellness Center
Aunt Martha's Roseland Community Health Center
Aunt Martha's Southeast Chicago Community Health Center
Beloved Community Family Wellness Center
Brandon Family Health Center
Chicago Family Health Center
Esperanza Health Center at Marquette
Friend Family Health Center
Grand Boulevard Plaza Family Health Center

Community Based Organizations

ABJ Community Services Inc.
Action Coalition of Englewood
Ada S. McKinley Community Services, Inc.
Brave Space Alliance

Centro Comunitario Juan Diego
Chicago ECO House
Children's Home & Aid
Family Focus
Family Rescue
Featherfist
Firman Community Services
Gary Comer Youth Center
Grant a Wish Inc.
Greater Englewood Chamber of Commerce
Growing Home
Hope Organization
I Grow Chicago
Imagine Englewood If...
Inner-City Muslim Action Network (IMAN)
Kennedy-King College (City Colleges of Chicago)
Lakeside Community Committee
Le Penseur Youth Services Inc.
Metropolitan Family Services
One Health Englewood
Outreach Chicago
Planned Parenthood
Plant Chicago

Resident Association of Greater Englewood
(RAGE)
South Central Community Services Inc.
Spanish Coalition for Housing
Sustainable Englewood
Tasc Inc.
Teamwork Englewood
The Back of the Yards Neighborhood Council
The Catholic Charities
The Salvation Army Adele and Robert Stern Red
Shield Center
Thresholds
True to Life Foundation
UIC Community Outreach Intervention Projects
Union League Boys & Girls Clubs - Englewood
Club
Upworld Inc.
Urban Youth Outreach
Voices of West Englewood
WIC Food Center
YMCA
Youth of Englewood



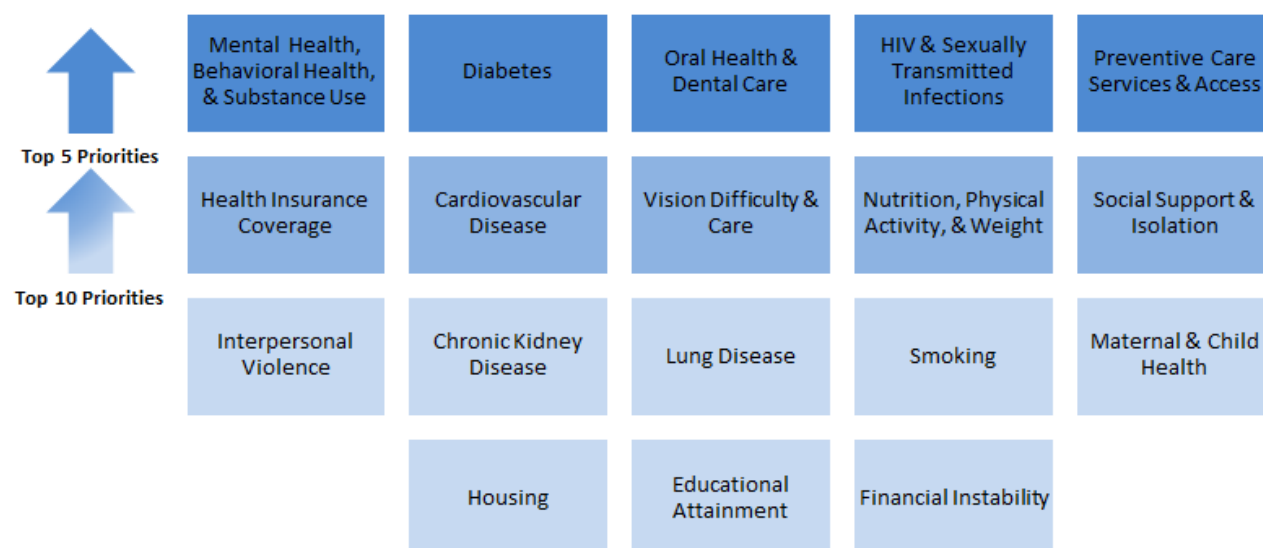
Health Needs and Priorities



Health Needs and Priorities

Health needs were determined based on secondary and primary data analyses (see **Community Data Summaries** and **Focus Group Insights**). The process for identifying needs is outlined in the **Methodology** section. Once the initial list of health needs was compiled, the Community Health Needs Assessment (CHNA) Advisory Committee prioritized them from highest to lowest based on criteria previously described (see **Methodology**). St. Bernard Hospital and Health Care Center (STBH) health needs are listed below in priority order.

Figure 3. St. Bernard Hospital’s 2018 Prioritized List of Community Health Needs



The following provides a summary snapshot of each health need across STBH’s service area. For detailed zip code-level information, refer to the **Community Data Summaries** section.

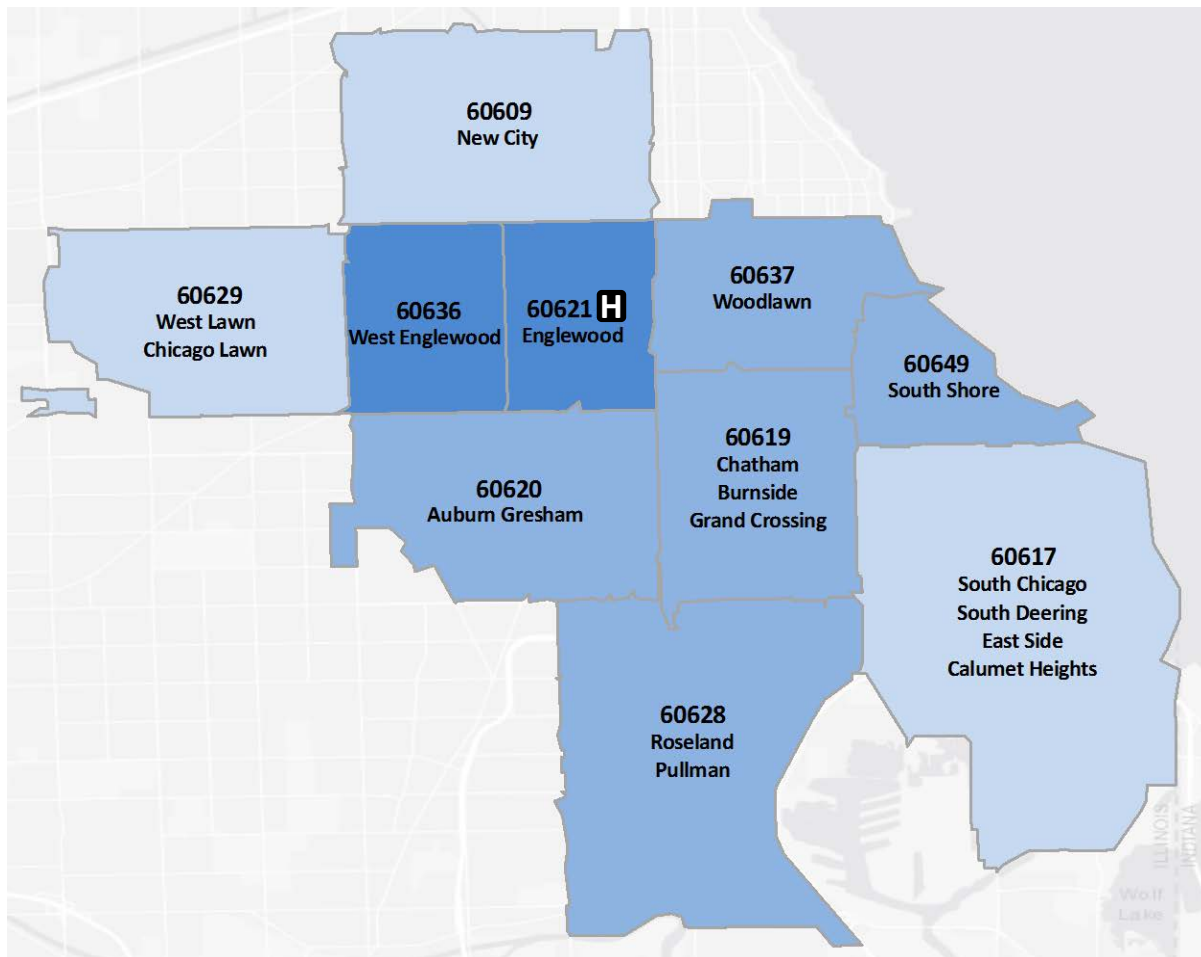
Mental Health, Behavioral Health, and Substance Use

All STBH zip codes had poorer mental health than Chicago as a whole (as measured by the percent of adults with frequent poor mental health days). Nine STBH zip codes performed worse than Chicago in drug-related hospitalizations and seven performed worse than Chicago in behavioral health hospitalizations. There were also noticeable differences across zip codes in behavioral health hospitalization rates (see **Map 4**).

- Prevalence of adults with frequently poor mental health (14 or more poor mental health days in the past month) ranged from 13% in 60619 (Chatham, Burnside, Grand Crossing) to 18% in 60621 (Englewood), versus 12% in Chicago overall.
- Drug-related hospitalization rates ranged from 21 per 10,000 total population in 60629 (West Lawn, Chicago Lawn) to 97 per 10,000 in 60636 (West Englewood), versus 37 per 10,000 in Chicago.

Focus Group participants also stressed the need for increased mental health care access and education in STBH's service area.

Map 4. Behavioral Health Hospitalization Rates in St. Bernard Hospital's Service Area^{1,2}



Behavioral Health Hospitalization Rate per 10,000 Total Population

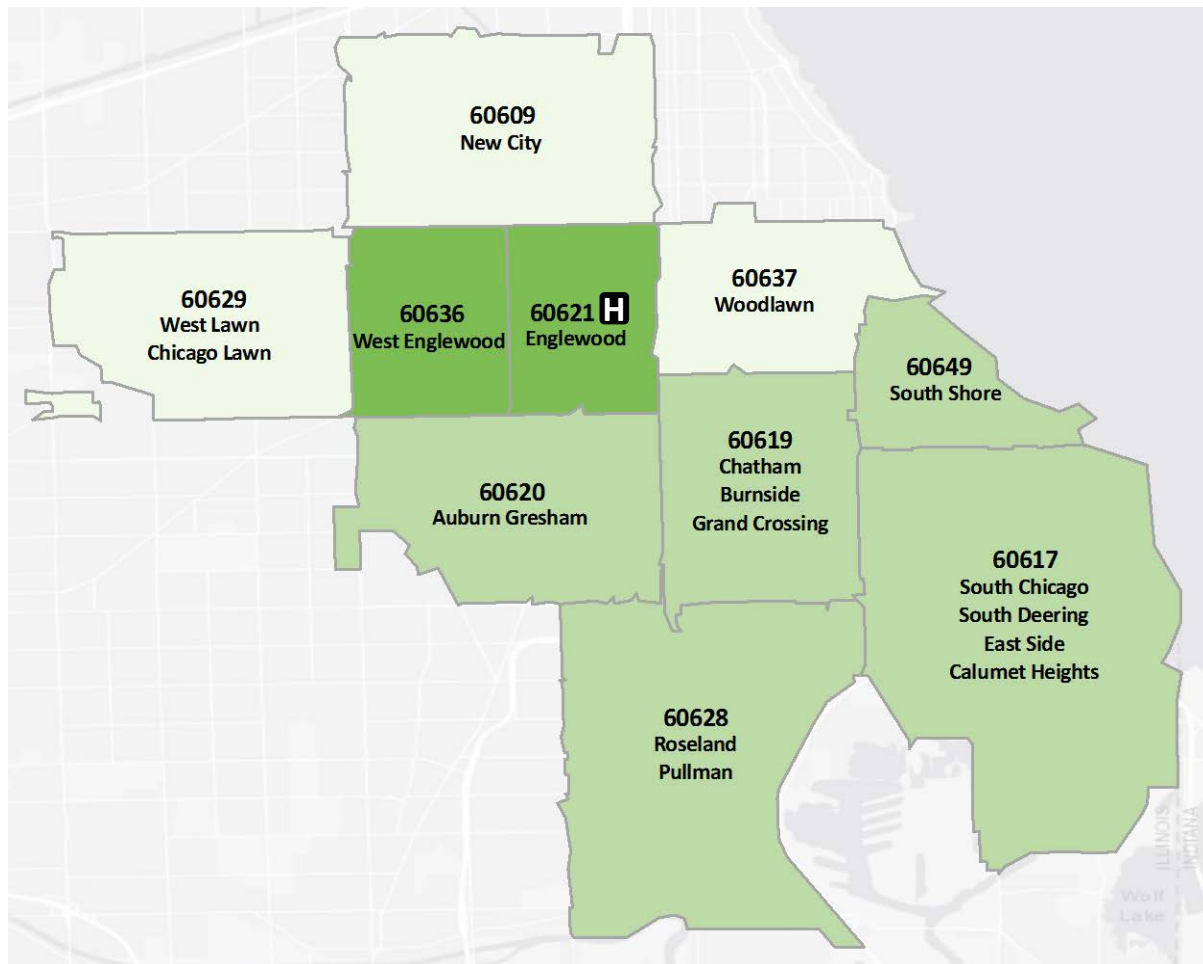
100 to <175 175 to <300 300 to 400

1. All Community Areas are approximations, data are representative of the zip codes listed
2. City of Chicago rate: 175 per 10,000 total population

Diabetes

All STBH zip codes had higher rates of diabetes among adults than Chicago as a whole (Chicago: 11%). See **Map 5** for details. Diabetes was also discussed as a health need during Focus Groups and was an area of opportunity in STBH's 2015 CHNA.

Map 5. Prevalence of Diabetes among Adults in St. Bernard Hospital's Service Area^{1,2}



Diabetes Prevalence in Adults

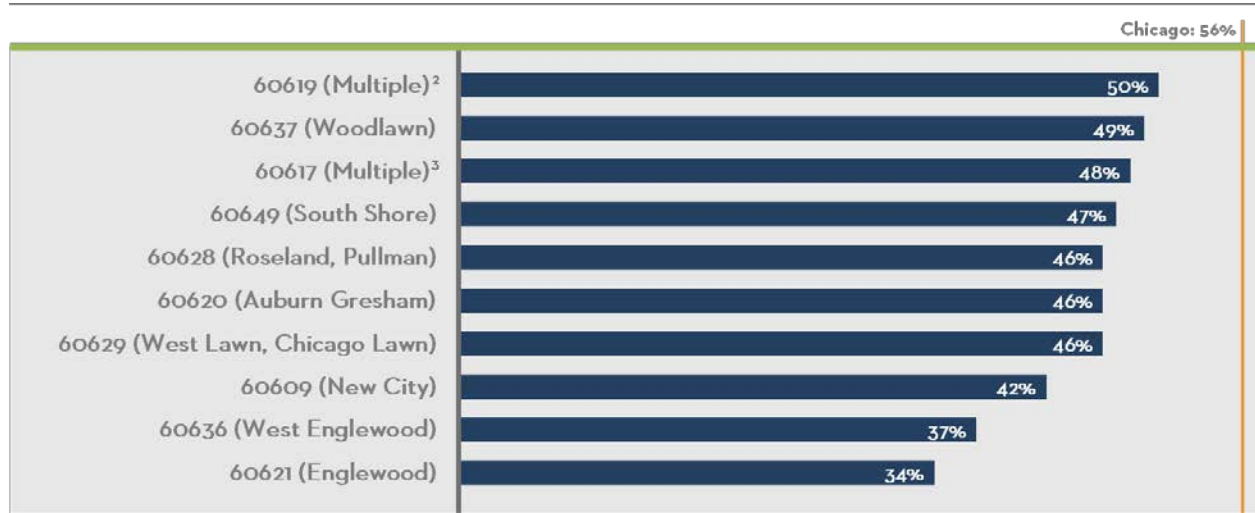
12% to <15% 15% to <19% 19% to 21%

1. All Community Areas are approximations, data are representative of the zip codes listed
2. City of Chicago rate: 11%

Oral Health and Dental Care

All of STBH's zip codes performed worse than Chicago in dental visits over the past year. See **Figure 4** for details. Focus Group participants highlighted the need for increased access to affordable specialty health care services, such as oral health care. Furthermore, STBH's 2015 CHNA identified regular dental care as an area of opportunity.

Figure 4. Adults with a Dental Visit in the Past Year in St. Bernard Hospital's Service Area¹



1. All Community Areas are approximations, data are representative of the zip codes listed

2. Chatham, Burnside, Grand Crossing

3. South Chicago, South Deering, East Side, Calumet Heights

HIV and Sexually Transmitted Infections

Data on HIV and sexually transmitted infections (STIs) were collected in response to Focus Group feedback and because both were indicated as areas of need in the 2015 CHNA. Data on HIV and STIs were not available at the zip code level, so they were accessed for Community Areas in STBH's service area (17 in total). Ten Community Areas had higher rates of new chlamydia and gonorrhea cases in 2015, nine had higher rates of new HIV cases in 2016, and six had higher prevalence rates of HIV than Chicago as a whole in 2016. Noticeable disparities also existed across STBH's service area. For details by Community Area, see **Appendix Tables 4 and 5**.

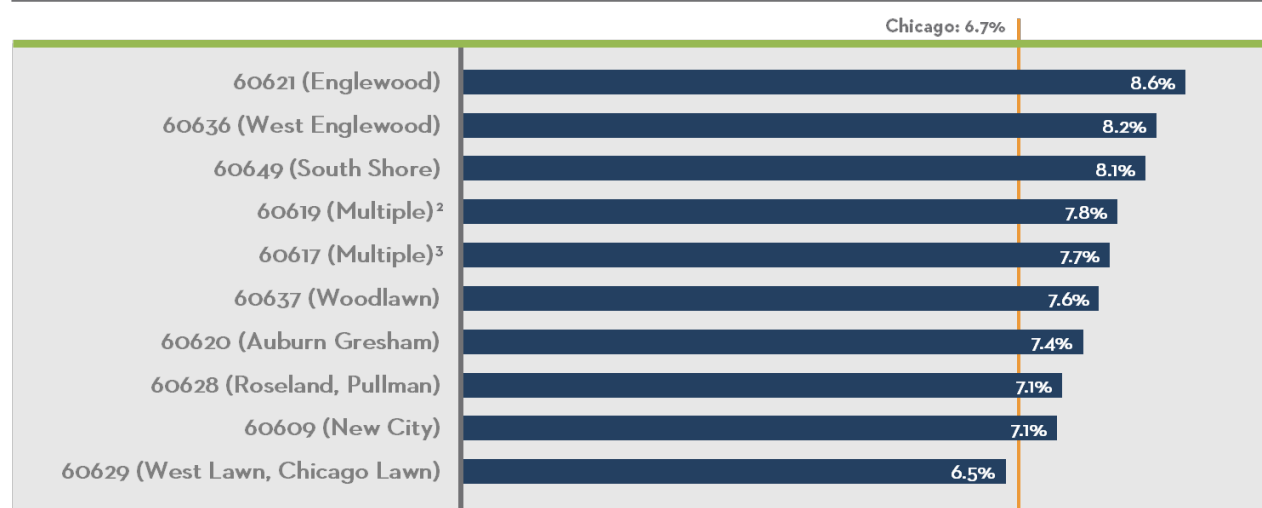
- Chlamydia incidence (new cases) ranged from 456 per 100,000 total population in East Side (part of 60617) to 2,179 per 100,000 in Englewood (60621), versus 1,077 per 100,000 in Chicago (2015).^a
- Gonorrhea incidence (new cases) ranged from 48 per 100,000 total population in West Lawn (part of 60629) to 930 per 100,000 in Englewood (60621), versus 326 per 100,000 in Chicago (2015).^b
- Syphilis incidence (new cases) ranged from 0 per 100,000 total population in Burnside (part of 60619) and East Side (part of 60617) to 68 per 100,000 in West Englewood (60636), versus 28 per 100,000 in Chicago (2015).^c
- HIV incidence (new cases) ranged from 16 per 100,000 total population in New City (60609) to 55 per 100,000 in Woodlawn (60637), versus 31 per 100,000 in Chicago (2016).^d
- HIV prevalence (existing cases) ranged from 130 per 100,000 total population in East Side (part of 60617) to 1,271 per 100,000 in South Shore (60649), versus 903 per 100,000 in Chicago.^e

Focus Group participants expressed a need to focus efforts on reducing the incidence of HIV and STIs. STBH's 2015 CHNA also identified HIV, gonorrhea, and chlamydia as health needs.

Preventive Care Services and Access

Preventable emergency department (ED) visits are ED visits that were required based on the emergent nature of the condition, but were potentially preventable if timely and effective ambulatory care had been received (e.g., asthma flare-ups, diabetes, congestive heart failure). Nine of ten STBH zip codes performed worse on this indicator than Chicago as a whole. See **Figure 5** for additional details.

Figure 5. Preventable Emergency Department Visits in St. Bernard Hospital's Service Area¹



1. All Community Areas are approximations, data are representative of the zip codes listed

2. Chatham, Burnside, Grand Crossing

3. South Chicago, South Deering, East Side, Calumet Heights

Focus Group participants also expressed the need to improve health literacy and accessibility and utilization of local health care providers for preventive services. They discussed that many community members have a deep-seated mistrust of the medical system due to historic mistreatment of people of color. While STBH regularly works to address these perceptions, many Focus Group participants still stressed that it is difficult for community members to even step foot in a medical setting. Improvements across these various issues can remove barriers to getting preventive care and reduce preventable ED visits across STBH's service area.

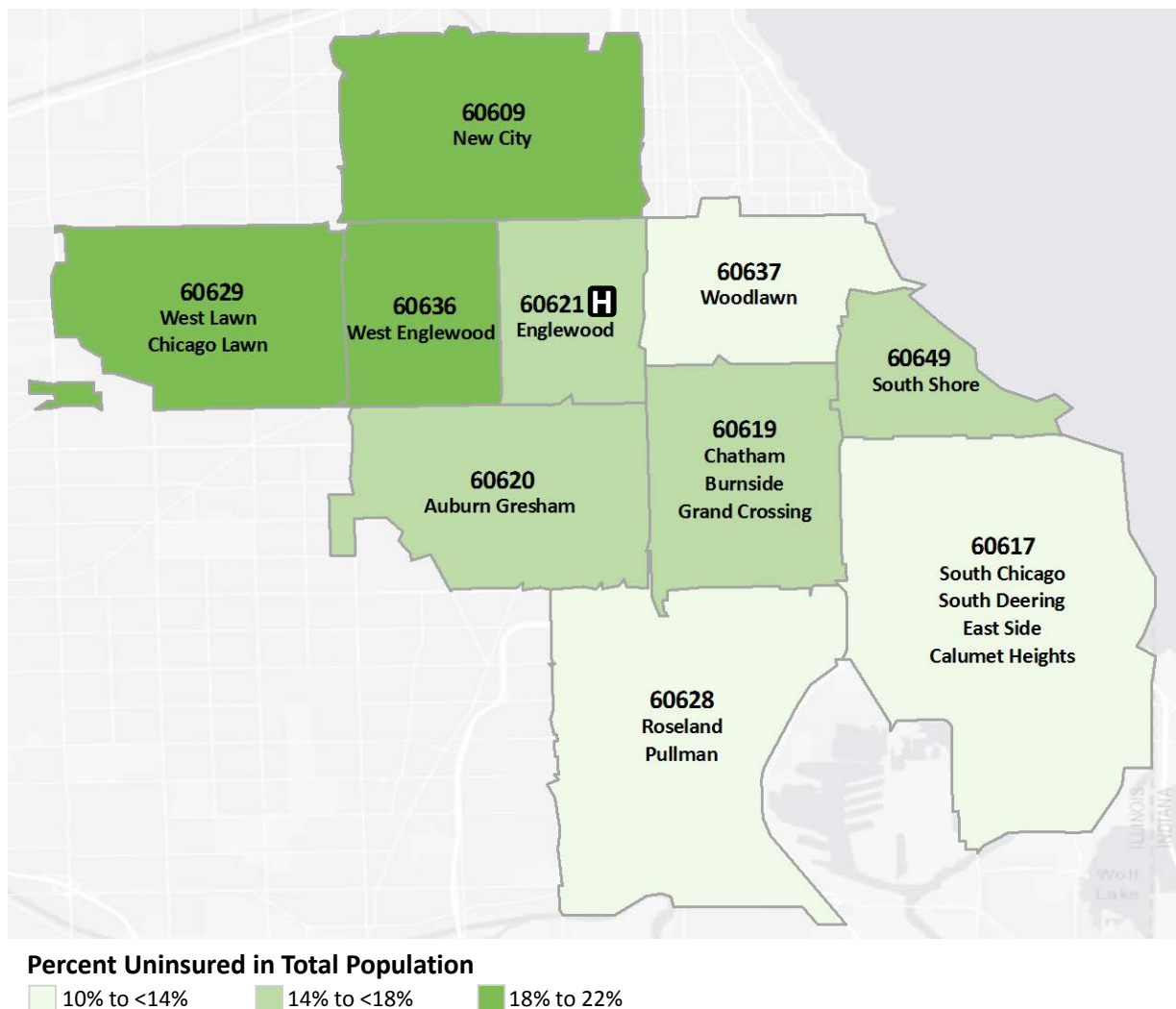
During prioritization of this health need, CHNA Advisory Committee members highlighted avenues for addressing gaps in preventive care, including: patient advocacy and navigation programming to help patients through the insurance and health care systems, workshops and educational programming to promote wellness and disease management, and enhanced marketing of existing STBH services to community members to increase awareness.

Access to health care services, which included barriers to accessing care and emergency room utilization, was also a need in the 2015 STBH CHNA.

Health Insurance Coverage

Half of STBH's zip codes had higher rates of uninsured individuals than Chicago as a whole; however, noticeable disparities existed across STBH's service area (see **Map 6**). Focus Group participants also expressed the necessity of health insurance to obtain essential health care services.

Map 6. Percent of Total Population that is Uninsured in St. Bernard Hospital's Service Area^{1,2}



1. All Community Areas are approximations, data are representative of the zip codes listed
2. City of Chicago rate: 15%

Cardiovascular Disease

Prevalence of coronary heart disease (CHD) was higher in all STBH zip codes than in Chicago, and nine out of ten STBH zip codes performed worse for high blood pressure and stroke than Chicago. Heart disease and stroke were also areas of opportunity in STBH's 2015 CHNA.

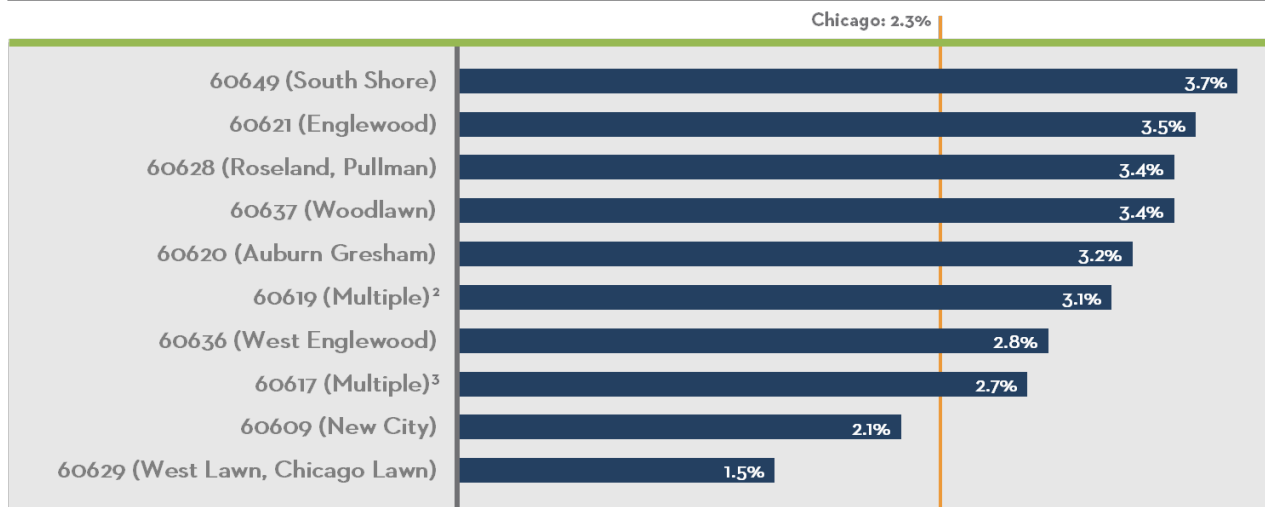
- Prevalence of adult CHD ranged from 6% in 60629 (West Lawn, Chicago Lawn) to 9% in 60621 (Englewood), versus 6% in Chicago.

- Prevalence of high blood pressure among adults ranged from 31% in 60629 (West Lawn, Chicago Lawn) to 49% in 60621 (Englewood), versus 32% in Chicago.
- The percent of adults who had suffered a stroke ranged from 3% in 60629 (West Lawn, Chicago Lawn) to 7% in 60621 (Englewood), versus 3% in Chicago.

Vision Difficulty and Care

The prevalence of vision difficulty (adults and children) was higher in eight of STBH's ten zip codes than in Chicago. For details, see **Figure 6**. Focus Group participants discussed the need for affordable specialty health care services, such as vision care, throughout STBH's service area. Furthermore, vision problems, including blindness, was an area of opportunity identified in STBH's 2015 CHNA.

Figure 6. Adults and Children with Vision Difficulty in St. Bernard Hospital's Service Area¹



1. All Community Areas are approximations, data are representative of the zip codes listed

2. Chatham, Burnside, Grand Crossing

3. South Chicago, South Deering, East Side, Calumet Heights

Nutrition, Physical Activity, and Weight

All STBH zip codes had higher rates of adult obesity and lower rates of adult physical activity than Chicago as a whole. In addition, nine STBH zip codes had lower rates of adult fruit/vegetable consumption than Chicago.

- Prevalence of adult obesity ranged from 38% in 60629 (West Lawn, Chicago Lawn) to 48% in 60621 (Englewood), versus 34% in Chicago.
- Prevalence of adults who are not physically active ranged from 31% in 60637 (Woodlawn) to 40% in 60621 (Englewood), versus 28% in Chicago.
- The percent of adults eating five or more servings of fruit and/or vegetables per day ranged from 14% in 60621 (Englewood) and 60636 (West Englewood) to 16% in 60629 (West Lawn, Chicago Lawn), versus 15% in Chicago.

In addition, five STBH zip codes had portions of their population living in food deserts (defined as living more than 0.5 miles from the nearest supermarket, supercenter, or large grocery store). Eight percent of residents in 60649 (South Shore) live in a food desert, as do 7% of 60628 (Roseland, Pullman), and 4% of 60617 (South Chicago, South Deering, East Side, Calumet Heights) residents. Access to healthy foods and education related to healthy eating were discussed in Focus Groups, and nutrition, physical activity, and weight were identified as an area of need in STBH's 2015 CHNA.

Social Support and Isolation

Focus Group attendees discussed challenges with engaging seniors, families, and people with special health care needs in preventive health care. Of particular note, many discussed social isolation and the need for innovative mechanisms to reach high-need populations. Within secondary data analysis, nine out of ten STBH zip codes had higher rates of seniors living alone than Chicago, and the percent of single-parent households was higher in all STBH zip codes than Chicago. These findings, combined with Focus Group insights, suggest that new approaches are needed to provide support to single-person and single-parent households in STBH's service area.

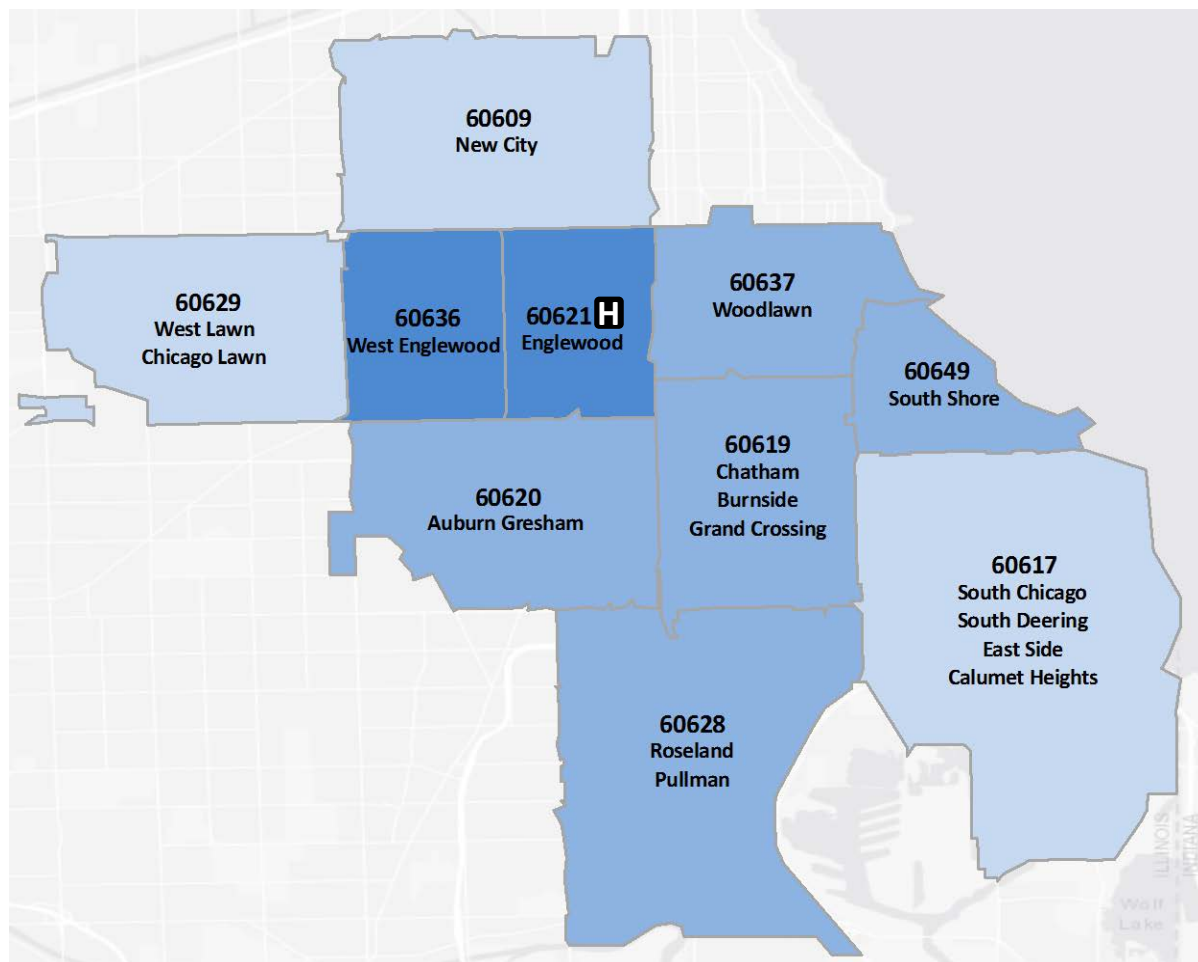
- The percent of seniors aged 65 years or older living alone ranged from 8% in 60629 (West Lawn, Chicago Lawn) to 15% in 60619 (Chatham, Burnside, Grand Crossing), versus 10% in Chicago.
- The percent of single-parent households ranged from 16% to 24% across STBH zip codes, versus 10% in Chicago.

Interpersonal Violence

Community violence, as measured by the violent crime rate, was higher across nine STBH zip codes than Chicago as a whole. The violent crime rate includes incidents such as assault, battery, homicide, criminal sexual assault, offenses involving children, and robbery that were reported to and recorded by the Chicago Police Department (see **Map 7**).

In addition, community members and STBH staff highlighted that intimate partner violence and domestic violence place an undue burden on many in the STBH service area; however, estimates of these types of violence are often difficult to gather. A recent survey in the communities of West Englewood and Chicago Lawn (two communities within STBH zip codes 60636 and 60629) found that 36% and 23% of adult women in these communities, respectively, had ever experienced intimate partner violence and one in two adult residents in both communities had ever witnessed domestic violence.^f Violent crime was also identified as an area of opportunity in STBH's 2015 CHNA.

Map 7. Violent Crime Rate in St. Bernard Hospital's Service Area



Violent Crime Rate per 10,000 Total Population

250 to <500 500 to <700 700 to 1,100

1. All Community Areas are approximations, data are representative of the zip codes listed
2. City of Chicago rate: 317 per 10,000 total population

Chronic Kidney Disease

The prevalence of chronic kidney disease among adults was higher in all STBH zip codes than in Chicago as a whole (Chicago: 3%). The prevalence was highest in 60621 (Englewood) at 5%. Kidney disease was also an area of opportunity in STBH's 2015 CHNA.

Lung Disease

Lung disease, as measured by prevalence of current asthma and chronic obstructive pulmonary disease (COPD) among adults, was higher in every STBH zip code than in Chicago as a whole.

- Prevalence of current adult asthma ranged from 10% in 60629 (West Lawn, Chicago Lawn) to 13% in 60621 (Englewood), versus 9% in Chicago.
- Prevalence of COPD in adults ranged from 6% in 60629 (West Lawn, Chicago Lawn) to 10% in 60621 (Englewood), versus 6% in Chicago.

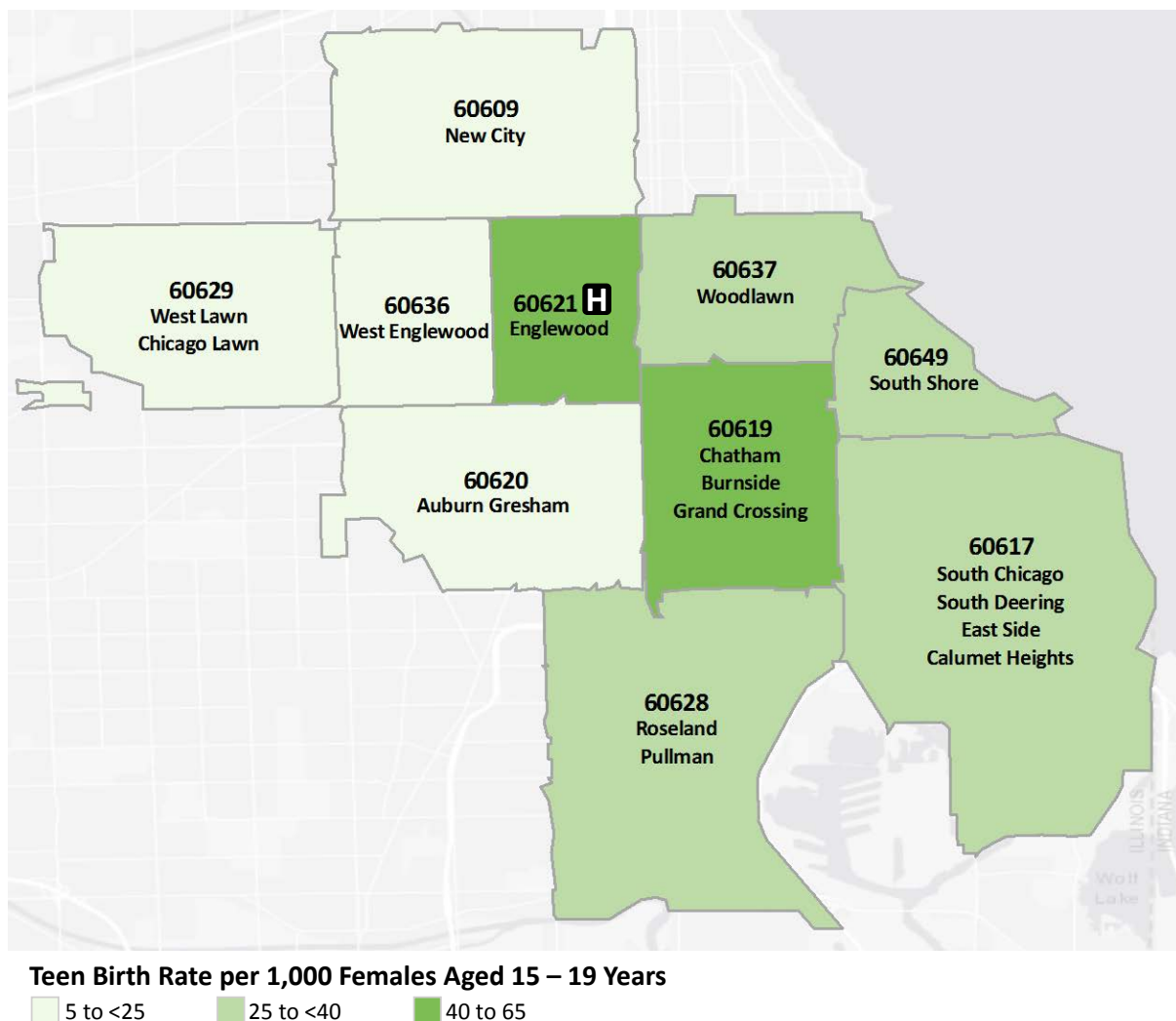
Smoking

All STBH zip codes had higher rates of current adult smoking than Chicago as a whole. Rates ranged from 20% in 60617 (South Chicago, South Deering, East Side, Calumet Heights) to 30% in 60621 (Englewood), versus 19% in Chicago. Tobacco use was a priority in STBH's 2015 CHNA.

Maternal and Child Health

The teen birth rate was higher in seven of STBH's ten zip codes than the Chicago-wide rate. See **Map 8** for details. In addition, nine STBH zip codes performed worse than Chicago in the percent of low birthweight or premature infants, and the entire city of Chicago has been identified by the Illinois Department of Public Health as high-risk for pediatric lead poisoning.

Map 8. Teen Birth Rate in St. Bernard Hospital's Service Area^{1,2}



- The percent of low birthweight and/or premature births ranged from 8% in 60629 (West Lawn, Chicago Lawn) to 14% in 60636 (West Englewood), versus 9% in Chicago.
- The percent of occupied housing units built before 1940 ranged from 27% in 60629 (West Lawn, Chicago Lawn) to 52% in 60609 (New City), versus 43% in Chicago. This indirectly assesses lead exposure, particularly among expectant mothers and young children, because about 68% of these homes have lead hazards.

Focus Group participants discussed the need for increased reproductive health resources, and infant health and family planning were priorities in STBH's 2015 CHNA.

Housing

Across all STBH zip codes, the rate of substandard housing exceeded the rate in Chicago. Substandard housing includes owner- and renter-occupied housing units which: lack complete plumbing and/or kitchen facilities; include more than one occupant per room; and/or, have a monthly owner cost or rent that is more than 30% of the household's monthly income. In addition, nine STBH zip codes had higher rates of vacant housing units than Chicago. For details on median housing unit age by zip code, see **Appendix Table 6**.

- The percent of substandard housing units (out of all occupied housing units) ranged from 45% in 60617 (South Chicago, South Deering, East Side, Calumet Heights) to 59% in 60621 (Englewood), versus 43% in Chicago.
- The percent of vacant housing units ranged from 11% in 60629 (West Lawn, Chicago Lawn) to 33% in 60621 (Englewood), versus 13% in Chicago.

Focus Group participants stressed the need to develop the community's physical environment by constructing quality housing and creating opportunities for home ownership.

Educational Attainment

All STBH zip codes had lower rates of adults with a bachelor's degree or higher than Chicago as a whole, and five zip codes had lower rates of high school graduation than Chicago. For an overarching view of educational attainment by zip code, see **Appendix Table 7**.

- The percent of adults aged 25 years or older who were high school graduates ranged from 68% in 60629 (West Lawn, Chicago Lawn) to 88% in 60649 (South Shore), versus 83% in Chicago.
- The percent of adults aged 25 years or older with a bachelor's degree or higher ranged from 8% in 60621 (Englewood) to 33% in 60637 (Woodlawn), versus 37% in Chicago.

Focus Group participants voiced the need for quality education to improve the economic wellbeing and health of community residents.

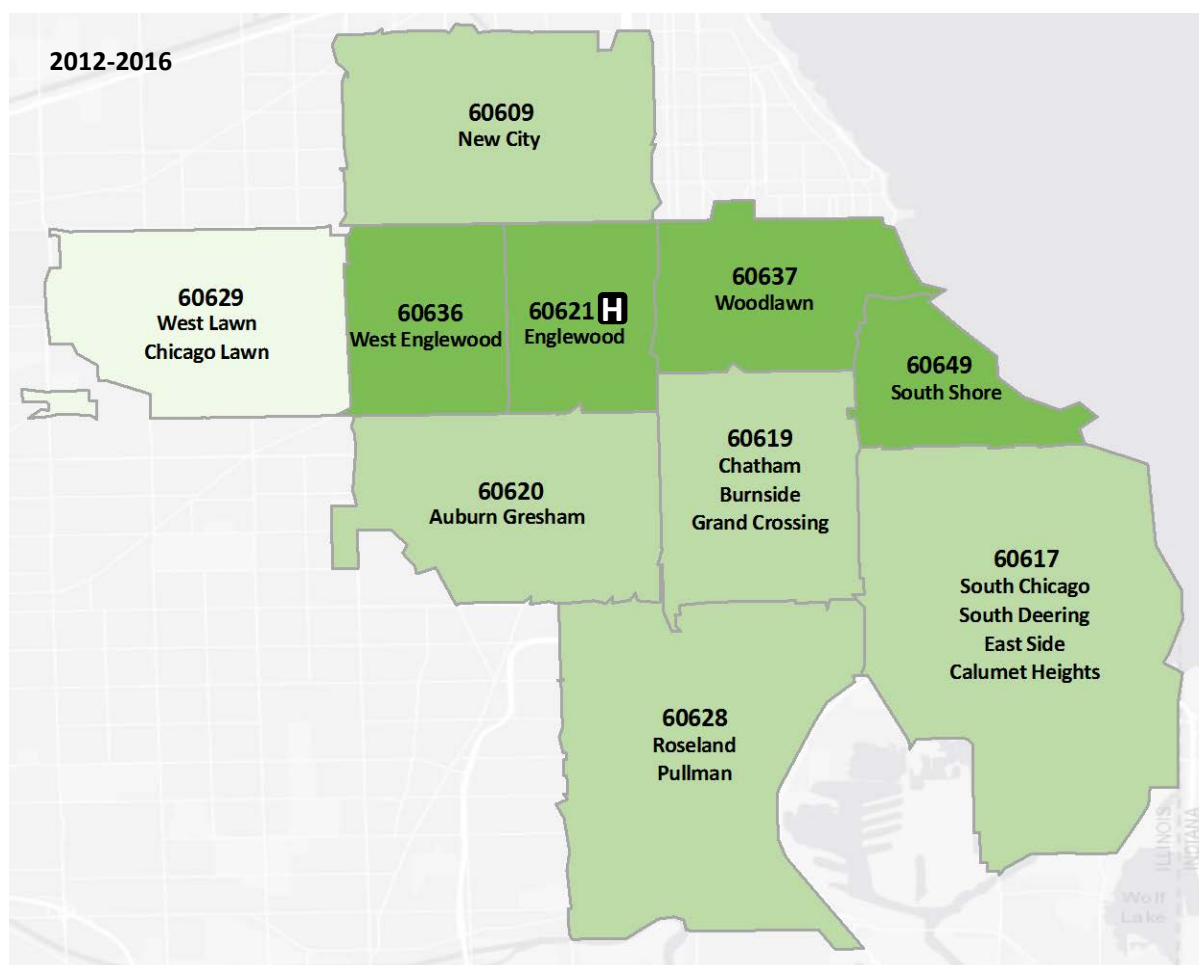
Financial Instability

All of STBH's zip codes performed worse than Chicago in unemployment and median household income (see **Map 9** for detailed income information). In addition, in nine STBH zip codes, the prevalence of children living in poverty was higher than the Chicago-wide prevalence.

- Unemployment ranged from 17% in 60629 (West Lawn, Chicago Lawn) to 33% in 60621 (Englewood), versus 11% in Chicago.
- The percent of children living in poverty ranged from 31% in 60629 (West Lawn and Chicago Lawn) to 56% in 60637 (Woodlawn), versus 32% in Chicago.

Focus Group participants highlighted need for improved financial stability, particularly due to the fact that those living in economically disadvantaged areas oftentimes have the greatest disease burden.

Map 9. Median Household Income in St. Bernard Hospital's Service Area^{1,2}



Median Household Income (2016 Inflation-adjusted Dollars)

■ \$20,000 to <\$30,000 ■ \$30,000 to <\$40,000 ■ \$40,000 to \$45,000

1. All Community Areas are approximations, data are representative of the zip codes listed
2. City of Chicago: \$50,434

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- d. HIV Incidence (2016). Chicago Health Atlas Website. <https://www.chicagohealthatlas.org/indicators/hiv-incidence>. Accessed October 1, 2018.
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- f. Hirschtick JL, Benjamins MR, Homan S. Community Health Counts: Sinai Community Health Survey 2.0. Sinai Urban Health Institute, Sinai Health System. Chicago, IL. March 2017.



Appendix



Appendix Table 1. St. Bernard Hospital CHNA Indicators and Data Sources

Indicator	Description	Source	Year(s)¹
Demographic Characteristics			
Total Population	Estimated total number of people living within the defined geographic area	American Community Survey	2007-2011, 2012-2016
Male Population	Estimated percent of males living within the defined geographic area	American Community Survey	2007-2011, 2012-2016
Median Age (Years)	Estimated median age, in years, of the total population	American Community Survey	2007-2011, 2012-2016
Population Aged <18 Years (Children)	Estimated percent of the population aged under 18 years	American Community Survey	2007-2011, 2012-2016
Population Aged ≥65 Years (Seniors)	Estimated percent of the population aged 65 years and over	American Community Survey	2007-2011, 2012-2016
Hispanic/Latino	Estimated percent of the population that self-identifies as Hispanic or Latino (includes all races)	American Community Survey	2007-2011, 2012-2016
Non-Hispanic Black	Estimated percent of the population that self-identifies as Black and <u>not</u> as Hispanic or Latino (only includes population reporting a single race)	American Community Survey	2007-2011, 2012-2016
Non-Hispanic White	Estimated percent of the population that self-identifies as White and <u>not</u> as Hispanic or Latino (only includes population reporting a single race)	American Community Survey	2007-2011, 2012-2016
Non-Hispanic Asian	Estimated percent of the population that self-identifies as Asian and <u>not</u> as Hispanic or Latino (only includes population reporting a single race)	American Community Survey	2007-2011, 2012-2016
Foreign-born	Estimated percent of the population who were not U.S. citizens at birth, including those who became U.S. citizens through naturalization	American Community Survey	2007-2011, 2012-2016
Population without U.S. Citizenship	Estimated percent of the population who are not current U.S. citizens	American Community Survey	2007-2011, 2012-2016
High School Graduates	Estimated percent of the population aged 25 years and over that have graduated from high school or a high school equivalent	American Community Survey	2007-2011, 2012-2016
Median Household Income	Estimated yearly median income per household (2016 inflation-adjusted dollars)	American Community Survey	2007-2011, 2012-2016
Unemployment Rate	Estimated percent of the population aged 16 years and over that are in the civilian labor force and are unemployed	American Community Survey	2007-2011, 2012-2016
Owner-occupied Housing Units	Estimated percent of all occupied housing units where the owner or co-owner lives in the housing unit	American Community Survey	2007-2011, 2012-2016

Indicator	Description	Source	Year(s) ¹
Health Outcomes – Chronic Conditions			
Adults with Current Asthma	Estimated percent of adults (≥18 years) who reported that a doctor, nurse, or other health professional has told them that they have asthma, and who reported that they still have asthma	500 Cities	2015
Adults with Chronic Obstructive Pulmonary Disease	Estimated percent of adults (≥18 years) who reported that a doctor, nurse, or other health professional has told them that they had COPD, emphysema, or chronic bronchitis	500 Cities	2015
Adults with Diabetes	Estimated percent of adults (≥18 years) who reported that a doctor, nurse, or other health professional has told them that they have diabetes (does not include diabetes during pregnancy)	500 Cities	2015
Adults who have had a Stroke	Estimated percent of adults (≥18 years) who reported that a doctor, nurse, or other health professional has told them that they have had a stroke	500 Cities	2015
Adults with High Blood Pressure	Estimated percent of adults (≥18 years) who reported that a doctor, nurse, or other health professional has told them that they have high blood pressure (hypertension)	500 Cities	2015
Adults with Chronic Kidney Disease	Estimated percent of adults (≥18 years) who reported that a doctor, nurse, or other health professional has told them that they have kidney disease	500 Cities	2015
Adults with Coronary Heart Disease	Estimated percent of adults (≥18 years) who reported that a doctor, nurse, or other health professional has told them that they had angina or coronary heart disease	500 Cities	2015
Adults and Children with Vision Difficulty	Estimated percent of the total population who are blind or have serious difficulty seeing even when wearing glasses	American Community Survey	2012-2016
Health Outcomes – Quality of Life			
Adults with Poor or Fair Overall Health	Estimated percent of adults (≥18 years) who reported that their overall health was fair or poor in the past 30 days	Policy Map	2013
Adults with Frequent Poor Physical Health Days	Estimated percent of adults (≥18 years) who reported that they had poor physical health for 14 or more days out of the past 30 days	500 Cities	2015
Adults with Frequent Poor Mental Health Days	Estimated percent of adults (≥18 years) who reported that they had poor mental health for 14 or more days out of the past 30 days	500 Cities	2015
Low Birthweight or Premature Births	Percent of low birthweight and/or preterm births (Diagnosis-Related Group codes: 790-792) out of all live births in hospitals (Medical Diagnostic Category: 15) (Note: measured from 04/01/2015 through 03/31/2017)	COMPdata Informatics	2015-2017
Health Factors – Health Behaviors			
Current Adult Smokers	Estimated percent of adults (≥18 years) who reported that they smoked ≥100 cigarettes in their lifetime and that they currently smoke every day or some days	500 Cities	2015
Adult Obesity	Estimated percent of adults (≥18 years) who are obese based on self-reported weight/height (a body mass index of 30 or greater)	500 Cities	2015
Adult Physical Inactivity	Estimated percent of adults (≥18 years) who reported that they did <u>not</u> participate in any physical activities or exercises such as running, calisthenics, golf, gardening, or walking for exercise outside of their job in the 30 days	500 Cities	2015

Indicator	Description	Source	Year(s) ¹
Adult Fruit/Vegetable Intake (≥5 Servings/Day)	Estimated percent of adults (≥18 years) who reported that they eat five or more servings of fruit and/or vegetables per day on average (includes 100% pure fruit juices)	Policy Map	2013
Heavy Drinking among Adults	Estimated percent of adults (≥18 years) who reported that they had more than two drinks (for men) or more than one drink (for women) per day on average in the past 30 days	Policy Map	2013
Binge Drinking among Adults	Estimated percent of adults (≥18 years) who reported one or more episodes of binge drinking in the past 30 days (defined as having five or more drinks for men or four or more drinks for women on one occasion)	500 Cities	2015
Teen Birth Rate	Number of females aged 15-19 years with births in the past year per 1,000 females aged 15-19 years	American Community Survey	2012-2016
Health Factors – Clinical Care			
Population without Health Insurance	Estimated percent of the civilian noninstitutionalized population (adults and children) without health insurance coverage	American Community Survey	2012-2016
Adults with Personal Health Care Provider	Estimated percent of adults (≥18 years) who reported that they have a personal doctor or health care provider	Policy Map	2013
Adults with Routine Checkup in Past Year	Estimated percent of adults (≥18 years) who reported that they have visited a doctor for a routine checkup in the past year	500 Cities	2015
Preventable Emergency Department Visits	Percent of emergency department visits that were required based on emergent nature of the condition but potentially preventable if timely and effective ambulatory care had been received previously (e.g., asthma flare-ups, diabetes, congestive heart failure) (for full definition: https://wagner.nyu.edu/faculty/billings/nyued-background)	COMPdata Informatics	2015-2016
Behavioral Health Hospitalizations	Number of inpatient hospitalization discharges, excluding discharges to Veterans Administration hospitals, with a primary diagnosis relating to a substance use disorder or a mental disorder per 10,000 total population	Chicago Health Atlas	2016
Drug-related Hospitalizations	Number of inpatient hospitalization discharges, excluding discharges to Veterans Administration hospitals, with a diagnosis relating to drug abuse, adverse drug reactions, or other drug-related consequences per 10,000 total population	Chicago Health Atlas	2016
Mammography Screening in Past Two Years	Estimated percent of women aged 50-74 years who reported that they received a mammogram in the past two years	500 Cities	2014
Adults with Dental Visit in Past Year	Estimated percent of adults (≥18 years) who reported that they went to the dentist or a dental clinic in the past year	500 Cities	2014
Health Factors – Social & Economic Factors			
Bachelor's Degree or Higher	Estimated percent of the population aged 25 years and over that have a bachelor's degree or higher	American Community Survey	2012-2016
Children in Poverty	Estimated percent of children under 18 years of age that lived in households below the federal poverty level over the past year	American Community Survey	2012-2016

Indicator	Description	Source	Year(s) ¹
Income Inequality	Estimated inequality of household income according to the Gini Index, which measures income distribution among residents of a specified geography. A value of zero indicates perfect equality of income (all households having equal income) and a value of one indicates perfect inequality (one household having all of the income)	American Community Survey	2012-2016
Single-parent Households	Estimated percent of total households with a male householder (no wife present) or a female householder (no husband present) with their own children under 18 years of age	American Community Survey	2012-2016
Seniors Living Alone	Estimated percent of total households where the householder is aged 65 years or older and lives alone	American Community Survey	2012-2016
Violent Crime Rate	Average number of reported violent crime incidents, including assault, battery, homicide, criminal sexual assault, offenses involving children, and robbery, per 10,000 population per year	Chicago Data Portal	2012-2016
Health Factors – Physical Environment			
Days with Poor Air Quality	Estimated number of days per year with particulate matter at 2.5 levels above the National Ambient Air Quality Standard (35 micrograms per cubic meter)	CARES Engagement Network	2012
Occupied Housing Units Built Before 1940	Estimated percent of total occupied housing units that were built before 1940	American Community Survey	2012-2016
Substandard Occupied Housing	Estimated percent of all occupied housing units (owner- and renter-occupied) with one or more of the following conditions: 1) lacks complete plumbing facilities; 2) lacks complete kitchen facilities; 3) 1.01 or more occupants per room; 4) selected monthly owner costs as a percentage of household income is greater than 30%; and/or 5) gross rent as a percentage of household income is greater than 30%	CARES Engagement Network	2012-2016
Vacant Housing Units	Estimated percent of total housing units that are vacant	American Community Survey	2012-2016
Commute to Work Over an Hour	Estimated percent of workers aged 16 years or older who did not work at home and who had a commute to work of more than one hour (one direction)	American Community Survey	2012-2016
Population Living in Food Desert	Estimated percent of the population living in an area designated as a food desert (defined as living more than ½ mile from the nearest supermarket, supercenter, or large grocery store)	CARES Engagement Network	2015

1. Indicators were gathered in July of 2018; the most recent data available from each source were used in this assessment

Appendix Table 2. St. Bernard Hospital CHNA Focus Group Questions

Focus Group Questions
Community Assets
What is a hidden gem or asset in this community that you think everyone in the community should know about?
Data Reactions
What data surprised you? Why?
What data doesn't seem right?
What is missing?
What is important to understand about what's happening in the community that you wouldn't know from just looking at the numbers?
Community Priorities
Of all the issues we've discussed, what do you feel is the most important to the overall community?
What Works for the Community
Looking at the list of the community priorities identified and thinking about how St. Bernard can help, what priorities seem most actionable?
What types of initiatives and programs have historically worked in this community? What has historically not worked?

Appendix Table 3. St. Bernard Hospital CHNA Prioritization Matrix

Main Criteria:	How much of the community is affected by this problem?	What is the severity of this problem?	How difficult would it be for St. Bernard (STBH) to change the problem?	Does the community have an interest in addressing this issue and is it ready to do so?	TOTAL SCORE
Scoring Guidelines:	1=Small proportion 2=Middle proportion 3=High proportion (most/all)	1=Low, does <u>not</u> pose major threat to quality/length of life 2=Medium, impacts quality of life/may shorten length of life 3= High, major impact to quality/length of life	1=Hard, mostly beyond STBH's scope of impact 2=Moderate, STBH can address in collaboration with others 3=Easy, clinical care issue which STBH can address with programs	1=Not at all interested <u>or</u> not at all ready 2=Somewhat interested <u>and</u> somewhat ready 3= Extremely interested <u>and</u> very ready	Add up individual column scores
Health Outcomes					
Diabetes					
Chronic Kidney Disease					
Lung Disease					
Cardiovascular Disease					
Mental Health, Behavioral Health, and Substance Use					
Maternal and Child Health					
HIV and Sexually Transmitted Infections					
Vision Difficulty and Care					
Oral Health and Dental Care					
Clinical and Behavioral Factors					
Preventive Care Services and Access					
Health Insurance Coverage					

Main Criteria:	How much of the community is affected by this problem?	What is the severity of this problem?	How difficult would it be for St. Bernard (STBH) to change the problem?	Does the community have an interest in addressing this issue and is it ready to do so?	TOTAL SCORE
Scoring Guidelines:	1=Small proportion 2=Middle proportion 3=High proportion (most/all)	1=Low, does <u>not</u> pose major threat to quality/length of life 2=Medium, impacts quality of life/may shorten length of life 3= High, major impact to quality/length of life	1=Hard, mostly beyond STBH's scope of impact 2=Moderate, STBH can address in collaboration with others 3=Easy, clinical care issue which STBH can address with programs	1=Not at all interested <u>or</u> not at all ready 2=Somewhat interested <u>and</u> somewhat ready 3= Extremely interested <u>and</u> very ready	Add up individual column scores
Clinical and Behavioral Factors Continued					
Smoking					
Nutrition, Physical Activity, and Weight					
Socioeconomic Factors					
Educational Attainment					
Financial Instability					
Interpersonal Violence					
Social Support and Isolation					
Housing					

Appendix Table 4. Summary of HIV and Sexually Transmitted Infections by Community Area within St. Bernard Hospital's Service Area¹

Community Area	HIV Prevalence²	HIV Incidence²	Chlamydia²	Gonorrhea²	Primary and Secondary Syphilis²
Auburn Gresham	759.1	47.2	1,663.8	529.3	39.0
Burnside	891.6	-	1,303.2	480.1	0.0
Calumet Heights	586.4	-	1,281.5	427.2	-
Chatham	1,047.4	38.7	1,646.9	538.2	32.2
Chicago Lawn	505.1	18	1,461.5	413.5	32.4
East Side	130.2	-	455.7	73.8	0.0
Englewood	906.9	45.7	2,179.2	929.7	62.0
Grand Crossing	1,098.1	52.1	2,168.6	825.1	36.8
New City	437.2	15.8	1,304.7	277.2	13.5
Pullman	682.6	-	1,187.7	464.2	-
Roseland	620.8	44.8	1,571.1	632.0	22.4
South Chicago	932.8	38.5	1,496.9	419.9	-
South Deering	569.2	-	1,045.7	317.7	-
South Shore	1,270.9	38.5	1,724.0	592.8	52.2
West Englewood	799.9	36.6	2,095.5	805.5	67.6
West Lawn	167.9	-	644.6	48.0	-
Woodlawn	1,120.5	54.8	1,816.6	511.9	42.3
Chicago	902.8	31.1	1,076.5	325.9	28.1

1. Some data not shown due to small sample size resulting in unreliable estimates

2. Per 100,000 population

Reference: Chicago Health Atlas Website. <https://www.chicagohealthatlas.org/indicators/>. Accessed October 26, 2018.

Appendix Table 5. HIV Prevalence and Incidence in Greater Englewood¹

Community Area	Measure	Gender		Race and Ethnicity		Age			
		Male	Female	Black	Hispanic/Latino	13 to 24	25 to 44	45 to 59	60+
West Englewood	Prevalence ²	2,268	906	1,453	2,452	515	2,111	2,301	1,122
	New Cases ³	73	28	90	-	37	47	13	-
Englewood	Prevalence ²	2,753	765	1,572	-	402	2,445	2,355	1,266
	New Cases ³	71	24	89	-	26	45	20	-

1. Some data not shown due to small sample size resulting in unreliable estimates

2. Per 100,000 people within the indicated subgroup (2016)

3. Number of new cases (2012-2016)

Reference: HIV. AIDSvu Website. <https://map.aidsvu.org/map?cityname=chicago>. Accessed October 26, 2018.

Appendix Table 6. Median Housing Age Across St. Bernard Hospital's Service Area^{1,2}

Zip Code	Median Housing Age – Year Built
60609 (New City)	1939
60617 (Multiple) ³	1944
60619 (Multiple) ⁴	1942
60620 (Auburn Gresham)	1947
60621 (Englewood)	1939
60628 (Roseland, Pullman)	1948
60629 (West Lawn, Chicago Lawn)	1953
60636 (West Englewood)	1939
60637 (Woodlawn)	1947
60649 (South Shore)	1944
Chicago	1947

1. U.S. Census Bureau identified an error in *year structure built* for all products since 2008; the impact to estimates was minimal, but complete details of the error can be found at <https://www.census.gov/programs-surveys/acs/technical-documentation/errata/110.html>

2. All Community Areas are approximations, data are representative of the zip codes listed

3. South Chicago, South Deering, East Side, Calumet Heights

4. Chatham, Burnside, Grand Crossing

Reference: Median Year Structure Built. American Fact Finder Website.

<https://factfinder.census.gov/>. Accessed October 26, 2018.

Appendix Table 7. Summary of Educational Attainment by Zip Code within St. Bernard Hospital's Service Area¹

Zip Code	High School Diploma or Higher ^{2,3}	Associate's Degree Only ²	Bachelor's Degree or Higher ²
60609 (New City)	71%	5%	12%
60617 (Multiple) ⁴	79%	7%	16%
60619 (Multiple) ⁵	88%	9%	22%
60620 (Auburn Gresham)	85%	8%	17%
60621 (Englewood)	77%	8%	8%
60628 (Roseland, Pullman)	85%	8%	19%
60629 (West Lawn, Chicago Lawn)	68%	6%	9%
60636 (West Englewood)	78%	5%	9%
60637 (Woodlawn)	86%	6%	33%
60649 (South Shore)	88%	9%	25%
Chicago	83%	6%	37%

1. All Community Areas are approximations, data are representative of the zip codes listed

2. Population aged 25 years and over

3. Includes those with associate's and bachelor's degrees

4. South Chicago, South Deering, East Side, Calumet Heights

5. Chatham, Burnside, Grand Crossing

Reference: Educational Attainment. American Fact Finder Website. <https://factfinder.census.gov/>. Accessed October 26, 2018.



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