Advocate Children's Hospital

2025

Advocate Children's Hospital - Oak Lawn

Community Health Needs Assessment Report

4440 W 95th St
Oak Lawn, IL 60453

Letter from Market President

October 2025

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

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

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

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

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

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

Let's move forward toward better health for all.

Together always,

Dia Nichols
President, Illinois Division, Advocate Health

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EXECUTIVE SUMMARY

Advocate Children's Hospital – Oak Lawn (ACH-OL) completed a comprehensive hospital community health needs assessment (CHNA) in 2025. For purposes of this report, the Advocate Children's Hospital – Oak Lawn "community" or primary service area (PSA) consists of 54 zip codes across Cook and Will Counties. We've collected and analyzed data accordingly, in partnership with the Alliance for Health Equity.

This report describes the assessment process and includes demographic, socioeconomic and health status data along with key findings regarding the health of residents in our PSA. The goal of this assessment is to provide a clear picture of the health status and social needs of the communities we serve and determine areas of focus for community outreach programming.

Data shows that the ACH-OL PSA population is 38.7 percent Non- Hispanic Black, 29.1 percent Non-Hispanic White, 27.1 percent Hispanic, 2.0 percent Asian or Pacific Islander, 0.1 percent are two or more races and 0.1 percent Native American. 51.8 percent are female, and 47.2 percent are male. Children ages 0-4 comprise 5.9 percent of the total population, and children ages 5-17 comprise 17.9 percent of the total population. This number is similar to the total composition of all individual counties in the PSA and the State of Illinois. The median household income for the PSA is $72,024 annually, the highest being amongst Will county.

As part of the CHNA process, ACH-OL established a Community Health Council (CHC) comprised of hospital and community stakeholders who provided insight and perspective on key issues affecting health in the PSA. CHC members reviewed data presented by the hospital's community outreach department. Under the leadership of the ACH-OL Director of Community Outreach and Population Health, the CHC worked through a prioritization process to determine the key health needs in the PSA. Data shared during the process included these issues:

Access to Care
Behavioral Health
Food Insecurity
Violence/Adverse Childhood Experiences
Dental Care
Asthma
Injury Prevention
Obesity

CHC members were guided through a voting exercise to select the top health issues, taking into consideration prevalence, incidence, and mortality. The CHC also recognized the importance of addressing root causes of health and urged the ACH-OL community outreach team to integrate social drivers (SDOH) into strategies developed to address identified needs.

After this process, the priorities chosen for the 2026-2028 implementation strategy cycle are:

- Access to Care
- Community Violence

To ensure the hospital develops an effective 2025 CHNA implementation strategy, the CHC and community outreach department will continue to collaborate to create programming to address priority health needs. Healthy People 2030 goals will serve as a critical benchmark and guide for the development of goals, objectives and metrics to track our impact and effectiveness in addressing the identified health issues.

ADVOCATE HEALTH CARE

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

ADVOCATE CHILDREN'S HOSPITAL IN OAK LAWN

Advocate Children's Hospital is one of Illinois' largest pediatric care networks, with campuses in Oak Lawn and Park Ridge. We provide comprehensive, family-centered care for children of all ages. Nationally ranked by U.S. News & World Report in pediatric cardiology and heart surgery, we recently launched a pediatric heart transplant program to bring lifesaving care closer to home for children with complex heart conditions. We're also part of the Chicagoland Children's Health Alliance, a collaborative network with University of Chicago Comer Children's Hospital and Pediatrics at Endeavor Health.

Pediatric Critical Care Center

2025 COMMUNITY HEALTH NEEDS ASSESSMENT

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

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

Community Definition

For the purposes of this assessment, the Advocate Children's Hospital – Oak Lawn "community" is defined as the Primary Service Area (PSA) which consists of 54 zip codes across Cook and Will counties. There is a total population of 1,649,920 residents in the Oak Lawn PSA (OL-PSA). Exhibit 1 illustrates the entire service area for Advocate Children's Hospital including both Park Ridge and Oak Lawn campuses showing the nine-county area from which our patients come.

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

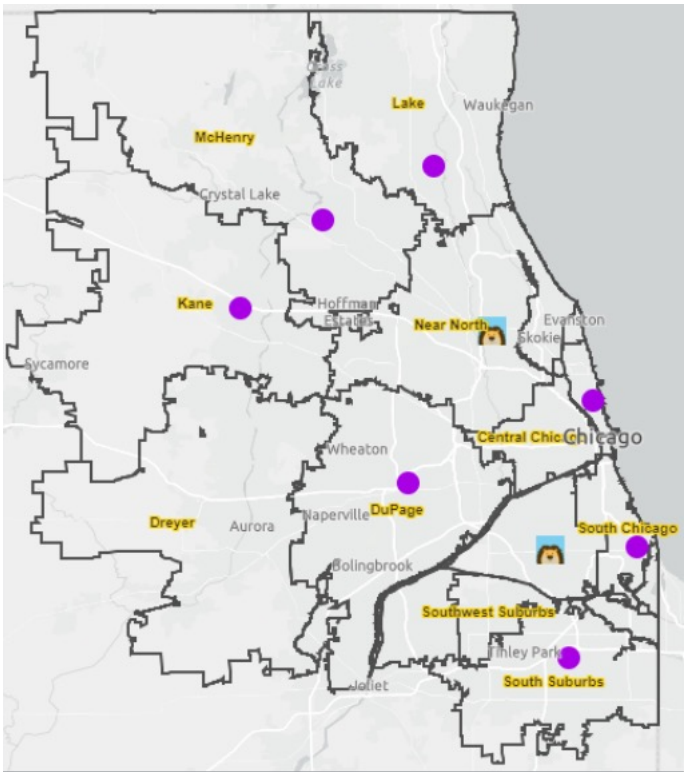


Exhibit 1:
Advocate Children's Hospital, Patient Service Area Map
Source: Advocate Health Care, Business Development Analytics, 2025

2019-2023 Data Estimates

Population

1,649,920 Within 54 zip codes

Most populous zip codes: 60629 (Chicago Lawn)
60632 (Brighton Park)
60617 (South Chicago)

Gender

48.2% Male

51.8% Female

Median Age

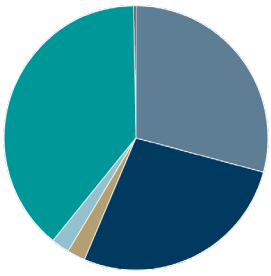
38.8 years PSA

36.3 years Male

40.7 years Females

Race/Ethnicity

Non-Hispanic White	29.9%
Hispanic or Latino	27.1%
Asian	2.0%
Two or more races	2.2%
Non-Hispanic Black	38.7%
Native American	0.1%



Households with Limited English Proficiency

5.79% OL PSA

7.16% Cook County

3.0% Will County

Education

Individuals with a high school degree

86.66% OL PSA

88.34% Cook County

91.5% Will County

90.26% Illinois

Individuals with a bachelor's degree

26.11% OL PSA

41.95% Cook County

36.46% Will County

37.19% Illinois

Unemployment Rate (2018-2022)

10.59% OL PSA

7.08% Cook County

5.01% Will County

5.96% Illinois

Household/Family in OL PSA

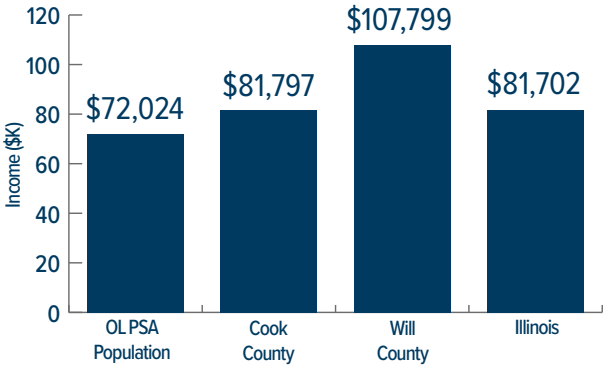
8.74% Single Parent Families

11.9% Children Living with Grandparents

Population by Age Group

Age (years)	Oak Lawn PSA	Cook County	Will County
0-4	5.9%	5.6%	5.5%
5-17	17.9%	15.8%	18.5%

Median Household Income by Geography



Population Living Below 200% of the Poverty Level

33.70% OL PSA

28.74% Cook County

17.23% Will County

26.18% Illinois

Zip codes with the Largest Population of Residents Living Below 200% of the Poverty Level:

51.60% 60472 (Robbins)

59.20% 60827 (Riverdale)

59.48% 60636 (West Englewood)

Children living Below the Poverty Level

Age (years)	Oak Lawn PSA	Cook County	Will County	Illinois
0-4	24.29%	17.91%	11.26%	16.58%
5-17	22.0%	18.01%	9.22%	14.95%

**Source: Metopio, American Community Survey (ACS), U.S. Census Bureau, 2019-2023 & 2018-2022*

Social Drivers of Health

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

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

Social Conditions at a Glance

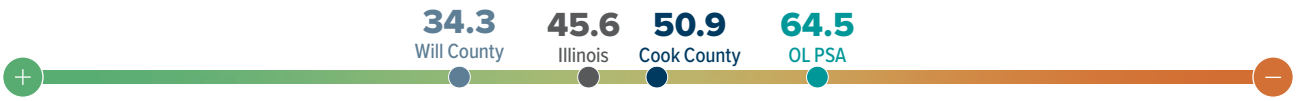
To better understand these factors and identify health inequities in a community, Advocate Health Care has partnered with Metopio, a software company that focuses on how communities are connected through people and places. Metopio's tools use data to show how different factors in each area influence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

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

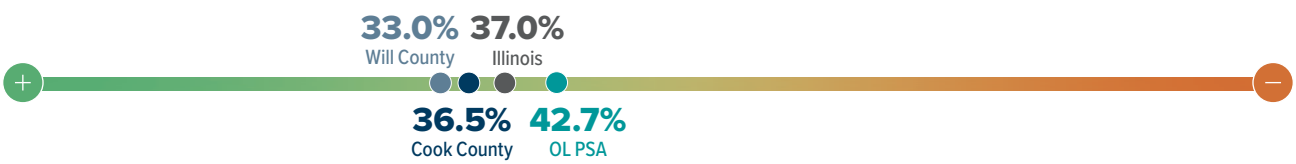
Social Vulnerability Index (SVI) – The Social Vulnerability Index (SVI) shows how vulnerable a community is based on 15 social factors like unemployment, disability, and minority status to help identify and map the communities that will most likely need support before, during, and after a hazardous event. Scores range from 0 (least vulnerable) to 100 (most vulnerable). The SVI in Oak Lawn PSA is much higher than the state averages, pointing to lack of available resources and community resilience. *(Source: Metopio, CDC, 2022)*

Childhood Opportunity Index (COI) – The COI measures how well neighborhoods support children's healthy growth. Scores range from Very Low (1–19) to Very High (80–100). Advocate Children's Hospital PSA has a COI of 33, which is the lowest COI across the state and counties, indicating even poorer opportunities for children to grow and achieve healthy development. *(Source: Metopio, Diversitydatakids.org, 2019-2023)*

Hardship Index – This index shows how much hardship a community faces. It includes things like unemployment, poverty, and crowded housing. Higher scores mean more hardship. Oak Lawn PSA has the highest hardship score among the counties and state, meaning these communities are facing higher challenges with employment, health, income, education, housing, and more. *(Source: Metopio, U.S. Census Bureau, ACS, 2018–2023)*



ALICE Threshold – ALICE stands for Asset Limited, Income Constrained, Employed. It shows the percent of working households that earn above the poverty line but still can't afford basic needs like housing, food, and child care. *(Source: Metopio, United Way, ALICE Data, 2023)*



How the CHNA Was Conducted

Purpose and Process

The purpose of the Community Health Needs Assessment (CHNA) is to identify health outcomes and disparities in the primary areas that Advocate Children's Hospital (ACH) serves. The federal government requires not-for-profit hospitals to complete a CHNA every three years which serves as a comprehensive guide to the identified health needs on which the hospital, community stakeholders, organizations and individuals can focus their efforts during this period. As ACH inpatient services are located on the Advocate Christ Medical Center campus (Oak Lawn), the ACH CHNA is included and approved as part of that facility's published report. In December 2024, Advocate Children's Hospital's Community Outreach Department convened a Community Health Council comprised of hospital and community members focused solely on children's issues. The Council's responsibility was to assess children's health care needs in our Primary Service Area (PSA) using data and discussion to determine areas of focus. Over several council meetings held from February – May 2025, the Children's Hospital presented extensive data covering demographics, economics, education, employment, Social Drivers of Health, and other health indicators for the primary service area. The data presented was collected from secondary data sources and qualitative primary data. During the priority setting meeting held in April 2025, the community health council members voted to select the highest priority needs to be addressed in the 2025 CHNA and the 2026-2027 implementation strategy.

The needs selected were Access to Care and Violence. Advocate Children's Hospital received approval for the CHNA through Advocate Christ Medical Center's Governing Council at its November 2025 meeting. The Advocate Health Board of Directors approved the Advocate Children's Hospital CHNA report on December 10, 2025.

Partnership

For Advocate Children's Hospital's 2025 CHNA, the hospital convened a Community Health Council (CHC). The council often met to discuss strengths and weaknesses in the hospital's PSA focusing on social, economic, and health issues. The CHC's responsibilities were to oversee the CHNA process, serve as subject-matter experts, suggest community collaborations for health initiatives, and select and recommend community health priorities for Advocate Children's Hospital CHNA. The affiliation and titles of the CHC are listed below. The CHC member affiliations representing at-risk populations are indicated with an asterisk.

2025 CHC Members

- Oak Lawn School District 123, Superintendent*
- Forward Momentum Chicago, Executive Director and Director of Development*
- Touch of Gift Foundation, Executive Director*
- Sunrise Gospel Ministeries, Executive Director and Community Affairs Specialist*
- What's Your Forte Foundation, Executive Director*
- Ronald McDonald House, Program Director*
- Carver Elementary School, Counselor*
- Tinley Park Public Library, Youth Services Assistant*
- Illinois Association of School Nurses, Professional Educator Licensed School Nurse*
- Advocate Children's Hospital, Community Health Coordinator
- Advocate Children's Hospital Director, Community and Health Relations

Alliance for Health Equity

The Alliance for Health Equity is a partnership between the Illinois Public Health Institute (IPHI), hospitals, health departments, and community organizations across Chicago and Cook County. This initiative is one of the largest collaborative hospital community partnerships to exist in the county, and currently has over 30 nonprofit and public hospitals, seven health departments, and over 100 representatives from community organizations on the Alliance.

Advocate Children's Hospital is a part of a coalition led by a steering committee through the Alliance for Health Equity and receives support from the Illinois Public Health Institute (IPHI). The Alliance creates and distributes health surveys throughout Chicago and Cook County and provides information on the overall concerns, strengths, and health needs of the community. Primary and secondary data gathering from the Alliance includes focus groups and hospital utilization data, which is analyzed by the IPHI.

Illinois Association of School Nurses

The Illinois Association of School Nurses (IASN) promotes wellness and educational success in school communities by supporting, developing, and advocating for professional school nurse leaders.

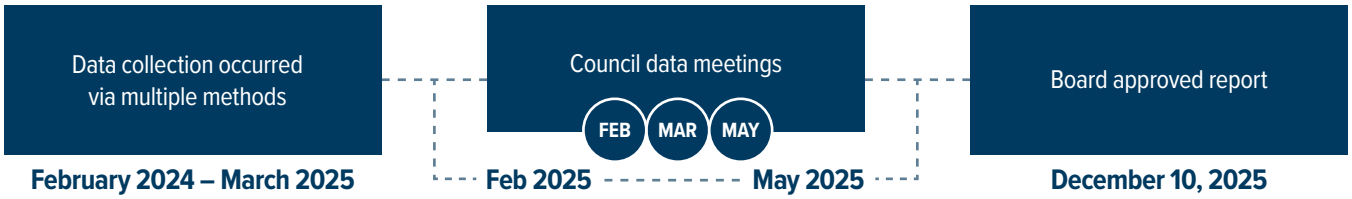
Advocate Children's Hospital has been a proud supporter and partner of IASN and leads the school nurses annual conference. This year IASN members were asked to be the respondents for the Alliance for Health Equity survey to get a comprehensive understanding of where children in our community thrive most and what disparities prohibit their futures.

Data Collection and Analysis

Advocate Children's Hospital's community outreach team presented extensive public health data to the Community Health Council over the course of three meetings from February 2025 to May 2025. While data specifically for children is more limited than for adults, the hospital collected all available published data at the county and local municipal level giving us a solid picture of the state of children's health in our service area. Hospital inpatient and Emergency Department (ED) discharge data was also provided to further demonstrate and clarify the need through utilization of actual services.

Additionally, in March 2025 as mentioned above, the Alliance for Health Equity partnered with Advocate Children's Hospital to develop a survey distributed by the Illinois Association of School Nurses to school nurses working in the service area. Thirty-one nurses responded to the survey on behalf of their school communities. Most nurses lived in the communities they worked in (63%) and had worked in their communities for more than five years (69%). Nurses that responded to the survey served diverse grade levels.

For secondary data, Advocate Health Care utilized Metopio to provide information including health and demographic indicators specific to Advocate Children's Hospital's primary service area. Where available for children, Metopio also provides county, state and zip code level data, to address social drivers of health in all the communities that the Children's Hospital serves. Data was also collected from the Cook County Department of Public Health, Alliance for Health Equity, Centers for Disease Control and Prevention, U.S Census Bureau and other data platforms.



Summary of Findings

Overall Health Status

Overall, Advocate Children's Hospital Oak Lawn PSA health outcomes are worse than the average county in the state, requiring additional support and programs to address these health outcomes.

Additionally, many disparities - or differences in outcomes - exist between groups of populations in nearly every social and health issue, especially for Black, Indigenous and People of Color (BIPOC) populations. These disparities are often caused by barriers that these communities face. Health inequities are the unfair differences in health that can be avoided, measured and are often linked to injustice (AMA, 2021).

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

Mortality - leading causes of death

- According to the Illinois Department of Public Health, the leading causes of death for children ages 1-17 include unintentional injuries, assault (homicide), malignant neoplasms (cancer), intentional self-harm (suicide) and congenital malformations.

Source: Illinois Department of Public Health, 2022

Life Expectancy

- OL PSA: 76.8 years
- Cook County: 78.5 years
- Illinois: 78.7 years

Source: Metopio, Center for Urban Population Health, 2022

Identified Significant Needs

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

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

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

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

Top Health Concerns in Patient Service Area

The following needs listed below represent the significant health needs of the community, based on the information gathered through the assessment process.

Areas of Opportunity Found Through the Assessment

- **Acccess to Care**
  - » Lack of access to Medicaid providers
  - » Lack of pediatric providers within proximity
- **Community Safety/Unintentional Inujry**
  - » Ranked as top concern among school nurses
  - » Rise in gun violence
  - » Violent crime rates
  - » Unintentional injury mortality rates (leading cause of death)
- **Behavioral Health**
  - » Ranked as top concern among school nurses
  - » Mental health ED admissions
  - » Suicide and self-harm
- **Alcohol/Substance Misuse**
  - » Ranked as top concern among school nurses
- **Access to Healthy Foods**
  - » Overweight and BMI
  - » Physical activity among high school students
- **Disease and Chronic Conditions**
  - » High diabetes rate among 5–17-year-olds
  - » Alarming asthma ED visits for both infants and juveniles
- **Maternal and Child Health**
  - » Poor access to early prenatal care
  - » Low birth weight
- **Economic and Housing Stability**
  - » Majority of children living in poverty

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

Access to Care

SIGNIFICANT NEED

Why is this important? Access to care means having the ability to obtain affordable, relevant health services and wellness programs that raise the quality of life for everyone. It includes local options for basic health care like screening and prevention services and having access to health care providers when urgent health care needs arise.

Significant Need Reasoning

Secondary data shows that Advocate Children's Hospital (ACH) Oak Lawn PSA has **higher uninsured rates than the state average, especially among children, and has fewer pediatricians and mental health providers per capita** than surrounding areas. Certain zip codes show significantly lower private insurance coverage, high reliance on public insurance, and limited Medicaid dentist participation, all of which create barriers to care.

Voted as **number one health need** by the community members and school nurses' respondents.

Key Findings

- **Uninsured** *(Metopio, U.S. Census Bureau, 2023)*
  - » ACH OL PSA children are uninsured at a rate of: 3.2% for 0-4 year-olds and 4.31% for 5-17 year-olds
    - ◊ Zip codes in the ACH Oak Lawn PSA with the highest uninsured rates with nearly 15% of the population being uninsured are Brighton Park (60632), Chicago Lawn (60629), and Englewood (60636).
  - » Cook County: 3.06% for 0-4 year-olds and 4.15% for 5-17 year-olds
  - » Will County: 1.71% for 0-4 year-olds and 4.15% for 5-17 year-olds
  - » Illinois: 2.82% for 0-4 year-olds and 3.59% for 5-17 year-olds
- **Medicaid (0-17 years)** (Metopio, U.S. Census Bureau, 2023)
  - » ACH OL PSA: 48.63%
  - » Cook County: 42.07%
  - » Will County: 26.16%
  - » Illinois: 36.36%
- **Dentists enrolled as Medicaid providers:** In the PSA there are 31.95 Medicaid dentists per 100,000 residents. *(Metopio, Illinois Department of Healthcare and Family Services, 2025)*
  - » Areas like 60411 (Chicago Heights) and 60461 (Olympia Fields) have significantly higher Medicaid dentists per capita compared to 60419 (Dolton), 60445 (Midlothian), and 60466 (Park Forest) which report no Medicaid dentists per capita.
- **Pediatricians:** 30.5 pediatricians per 100,000 residents, lower than Illinois with 45.60 providers. *(Metopio, Centers for Medicare and Medicaid Services, 2025)*

> Families struggle to find affordable insurance and often skip preventive care because of cost barriers.
>
> -Community Stakeholder

HIGHLIGHTED DISPARITIES

Children in Oak Lawn PSA have higher uninsured rates than Illinois averages

Uninsured rate by race/ethnicity

5.98% Non-Hispanic (NH) White
7.31% NH Black
13.16% Hispanic or Latino
7.13% Asian

Zip codes with high poverty (60632, 60629, 60636) show uninsured rates nearly double the state average

Access to Care

SIGNIFICANT NEED

Contributing Factors

Access to care is not equal for everyone because many people face barriers like lack of insurance, high costs, or limited coverage. Others live far from clinics or don't have reliable transportation. Long wait times, limited providers, and language challenges also make care harder to get for some people.

- Barriers & Challenges:
  - » Availability of services/providers
  - » Transportation
  - » Persons living in rural communities, with disabilities or language barriers
  - » Cost, Insurance
  - » Communication between healthcare services

Health Care Resources in the Defined Community

Name of Facility	Type	Location
Oak Street Health	Medicare Clinic	Chicago
Old Irving Park Clinic	Community Clinic	Chicago
Shriners Children's Chicago	Hospital	Chicago
Community First Medical Center	Hospital	Chicago
Maryville Children's Healthcare Center	Hospital	Chicago
Rush-Copley Medical Center	Hospital	Chicago
Ann & Robert Lurie Children's Hospital	Hospital	Chicago
UI Health System	Hospital	Central Chicagoland
Northwestern Medicine Central DuPage Hospital	Hospital	Chicagoland Area
Edward-Elmhurst Health	Hospital	Chicagoland Area
Loyola Medicine	Hospital	Chicago
Northshore Swedish Hospital	Hospital	Central Chicago
Advocate Christ Medical Center	Hospital	Oak Lawn
Advocate Trinity Hospital	Hospital	Chicago
Little Company of Mary Hospital	Hospital	Evergreen Park
Palos Community Hospital	Hospital	Palos Heights
Holy Cross Hospital	Hospital	Chicago
Cook County Health Clinics	Clinic	Chicago
Chicago Department of Public Health	Clinic	Chicago
Christian Family Health Center	Federally Qualified	Harvey

Community Safety
(Addressing Violence and Accidental Injuries)

SIGNIFICANT NEED

Why is this important? Community safety means making sure people feel safe in their neighborhoods, schools and public spaces. It includes preventing injuries, helping survivors of violence and working with first responders to improve their ability to respond to emergencies. Feeling safe supports better physical and mental health.

Significant Need Reasoning

Community safety and addressing violence was ranked as the second top social or economic issue by the School Nurses respondents.

Secondary data shows that crime rates, firearm-related deaths, and unintentional injuries vary over time in the OL PSA but overall, concerning trends exist.

Key Findings

- **Firearms** are the leading cause of death for children and adolescents aged 0–19 in the U.S.
- **Unintentional injuries** (e.g., car crashes, drowning, suffocation) remain the top cause of death for ages 0–24, with over 7,000 deaths in 2019 (20 per day). (Illinois Department of Public Health, 2022)
  - » Nearly 600 deaths due to unintentional injuries occurred among children aged 1–17 in Illinois.
  - » Cook County has the highest unintentional injury death rate: 61.0 per 100,000 residents, up from 44.9 in 2020.
- **Firearm-related emergency visits**, per 100,000 residents (ages 5–17): (Metopio, IHA COMPdata Informatics, 2024)
  - » Oak Lawn PSA: 65.7
  - » Cook County: 36.1
  - » Will County: 14.6
  - » Illinois: 24.3
- **Violent crime rates**, crimes per 100,000 residents: (Metopio, Chicago Police Department, Crime Data Portal, 2023)
  - » Oak Lawn PSA: 1,335.2
  - » Cook County: 2,293.8
  - » Will County: 982.7
  - » Illinois: 1,812.4
- **Bullying:** (Illinois Youth Survey, 2024)
  - » 19.9% of Illinois high school students were bullied at school (2019)
  - » 16.0% reported being electronically bullied
  - » Survey data show bullying rates decline as students age, but remain present across all grades.

> "I also see for the young kids in our community, there's no safe space for them to go. They're in the streets. And they're in front of their houses. There are no playgrounds. There are no parks that are clean for them to go to."
>
> "Gentrification has really hit us very hard. We don't see our neighborhood as 'it's up and rising.' Nobody knows the struggles we go through at night. You hear gunshots every week."
>
> "The other day we heard commotion, and my little cousin told me, 'Oh, I'm used to it'."
>
> Quotes from Alliance for Health Equity Cook County Focus Group

Contributing Factors

Safety is shaped by many factors, including the social, economic and environmental makeup of the community. A strong sense of connection among residents, strong support systems in place and trusting leaders and public safety workers tend to make communities safer.

- Barriers & Challenges
  - » Financial reliance
  - » Funding
  - » Awareness
  - » Stigma for accusers
  - » Lack of community engagement

HIGHLIGHTED DISPARITIES

Up to one-third of urban male youth report being the victim of violence including beaten or mugged, attacked with a knife or stabbed, or shot by another person.

Among adolescents ages 15-17, **African American youth living in high-burden urban communities (similar to some communities on the South and West sides of Chicago) are at the greatest risk for being exposed to community violence** than any other population in the United States.

Mental Health

SIGNIFICANT NEED

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

Significant Need Reasoning

53% of the school nurses' respondents voted for child and adolescent mental health being the biggest health issue in schools, while 67% of school nurses voted for schools needing more mental health care access for students.

Secondary data shows that Oak Lawn PSA residents have similar if not worse mental health outcomes compared to the neighboring counties and state.

Key Findings

- **Mental Health ED Visits**, per 100,000 residents (ages 5–17) (Metopio, IHA COMPdata informatics, 2020-2024)
  - » ACH Oak Lawn PSA: 806.4
  - » Cook & Will Counties: ~825
  - » Illinois: 1,022.7
- **Suicide & Self-Injury ED Visits**, per 100,000 residents (ages 5–17) (Metopio, IHA COMPdata informatics, 2020-2024)
  - » Oak Lawn PSA: 103.2
  - » Cook County: 108.0
  - » Will County: 128.3
  - » Illinois: 160.2 (highest)
- Youth Survey Data (Illinois Youth Survey, 2024)
  - » **Suicidal ideation** (10th & 12th grades): 9% in both Cook and Will Counties.
  - » **Hopelessness** (8th grade): 32% in Will County vs. 27% in Cook County.
- **Low pediatric mental health provider availability** contributes to long ED wait times and limited outpatient access.

Contributing Factors

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

- Barriers & Challenges:
  - » Coping skills
  - » Access/transportation to treatment
  - » Social isolation
  - » Lack of youth therapy
  - » Stigma of embarrassment
  - » Not understanding services
  - » Long waits, availability of services
  - » Lack of providers
  - » Cost of services
  - » Underlying substance use
  - » Accountability taking medication

HIGHLIGHTED DISPARITIES

LGBTQ+ students were **more than four times likely (39.9%) to consider suicide** than heterosexual students (8.9%)

It is worth noting that Asian youth had a lower ED and hospitalization rate compared to their counterparts.

26.3% of multiracial students considered suicide compared to 11.7% of their White counterparts.

Source: Cook County Youth Risk Behavioral Survey, 2024

ED visits and hospitalizations for anxiety are comparable between Hispanic/Latinx and White youth, while visits for Black youth are 20-25 percent lower.

For attention-deficit/ hyperactivity disorder (ADHD) and bipolar disorder, Black youth in Chicago had the highest rate of ED visits and hospitalization between 2019 and 2021.

Alcohol and Drug Misuse

SIGNIFICANT NEED

Why is this important? Alcohol and substance use (including tobacco, illegal mood-altering drugs and misusing prescription drugs) contribute to preventable health issues and are linked to social and economic issues. Alcohol and substance use are also closely linked to mental health challenges, including depression, anxiety, and trauma-related disorders. These conditions often co-occur, making recovery difficult without proper support.

Significant Need Reasoning

Ranked as one of the top three community concerns through surveys and stakeholder interviews.

Secondary data shows that Oak Lawn PSA has high ED and hospitalization rates but not as high as the state does for binge drinking and hospitalizations related to substance use.

Key Findings

- **Youth Risk Behavior Survey** (YRBSS), Chicago Public Schools Youth Substance Use (Chicago Public Schools, Youth Risk Behavior Survey System, 2023)
  - » 40% of high school students reported drinking alcohol.
  - » Early initiation (before age 13) of alcohol, marijuana, and vaping is common.
  - » 1% of middle school and 4% of high school students used two or more tobacco products in the past 30 days.
  - » 15% of high school students have tried two or more tobacco products at least once.

- **ED & Hospitalization Rates (per 100,000 residents, ages 5–17)** (Metopio, IHA COMPdata Informatics, 2020-2024)
  - » Alcohol-related ED visits: ACH Oak Lawn: 32.6 | Cook County: 39.6 | Illinois: 38.2
  - » Substance use ED visits: ACH Oak Lawn: 113.4 | Cook County: 132 | Will County: 102.8 | Illinois: 124.3
  - » Alcohol hospitalizations: ACH Oak Lawn: 0 | Cook County: 0.7 | Illinois 0.6
  - » Opioid-related ED visits: ACH Oak Lawn: n/a | Cook County: 5.7 | Will County: 6.7 | Illinois: 5.8

HIGHLIGHTED DISPARITIES

Race/Ethnicity: Non-Hispanic White students have the highest binge drinking rates (16.3%), while Hispanic/Latino students have the highest e-cigarette use (13.7%).

Geography: Areas lacking safe youth spaces report higher youth exposure to substance use and related arrests.

LGBTQ+ Youth: National YRBSS data show higher rates of alcohol and drug use compared to peers.

Contributing Factors

Substance use among adults in the community was seen as contributing to unsafe environments, leading to increased anxiety and trauma among youth. Additionally, treatment and support for drug and alcohol use are not easily accessible to all people, especially for populations that are experiencing low income or have limited resources within their community.

- Barriers and Challenges:
  - » Increasing drug use
  - » Treatment options
  - » Availability and cost
  - » Mental health
  - » Local drinking culture/social norms
  - » Increase of vaping
  - » OWI Laws

Illinois School Nurses Association Survey Responses

Substance use was often linked to peer pressure, stress, and lack of structured activities. Some participants mentioned increased arrests related to gun violence and substance use at their schools.

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

Children were exposed to drug use in their neighborhoods, with parents recounting experiences of finding needles and other paraphernalia in areas meant for play.

Access to Healthy Foods

SIGNIFICANT NEED

Why is this important? Having regular access to healthy food options like fresh fruits, vegetables, and meat is important for staying healthy. When people do not have regular access to healthy foods, they can develop problems like diabetes, high blood pressure, heart disease, or obesity. Reasons some people have a hard time getting food may include living far from grocery stores, lacking support from others, or not being able to afford it.

Significant Need Reasoning

School Nurses respondents listed obesity as one of the main heath concerns at their schools.

Secondary data shows that OL PSA is food insecure and neighboring counties also are facing food insecurity, displaying a need for more programming.

Key Findings

- **Food insecurity rates** (% of residents): (Metopio, Feeding America, 2022)
  - OL PSA: 14.3%, highest across the state and counties
  - Cook County: 12.1%
  - Will County: 8.8%
  - Illinois: 12.0%
- **Zip codes with the highest food insecurity rates** are South Shore (60649), Bridgeport (60609), and West Englewood (60636).
- **Children with very low access to a grocery store:** (Metopio, USDA, 2022)
  - OL PSA: 13.55%
  - Cook: 7.40%
  - Will: 44.15% (the highest)
  - Illinois: 18.9%
- **BMI for 8th, 10th, 12th graders** (Youth Survey, 2024)
  - Healthy Weight Prevalence: Cook County consistently shows a higher percentage of students in the "healthy weight" category compared to Will County across all grade levels.
  - Lower Obesity Rates: Cook County generally has lower percentages of "Obese" students compared to Will County within each corresponding grade level.

Contributing Factors

- **Economic Barriers:** High cost of healthy food and reduced financial assistance (e.g., SNAP cuts) limit access for many families.
- **Geographic Barriers:** Food deserts and limited grocery store presence, particularly in certain zip codes and in Will County, reduce availability of healthy options.
- **Transportation Barriers:** Families without reliable transportation struggle to access grocery stores offering fresh produce.
- **Social and Structural Barriers:** Systemic inequities in resource allocation, along with reliance on convenience and fast foods, contribute to disparities.
- **Protective Supports:** Community-based food programs, school meal programs, and partnerships with food pantries provide some relief, though reach and sustainability remain challenges.

HIGHLIGHTED DISPARITIES

- **Children and youth in Will County** face disproportionately high **barriers to accessing grocery stores** (44.2% with low access).
- **Racial and ethnic disparities exist in physical activity,** with Hispanic/Latino students reporting lower activity levels (15.35%) compared to their White peers (28.38%).
- **Communities in high food insecurity zip codes** (e.g., South Shore, Bridgeport, West Englewood) experience compounding risks of both **malnutrition and obesity.**

> **Statement from the Alliance for Health Equity Cook County focus group report:**
> Poor access to nutritious, affordable food was highlighted as a major issue, contributing to both malnutrition and obesity in children and youth. Focus group participants noted the impact of food deserts and reliance on unhealthy, processed foods. Reductions in programs like SNAP benefits and other financial assistance were described as exacerbating the issue.

Disease and Chronic Conditions

SIGNIFICANT NEED

Why is this important? Chronic Diseases are long-term health problems that often develop slowly from genetic, environmental, and lifestyle factors. Some common ones are heart disease, diabetes, cancer, and asthma. These diseases can make daily life harder and often need ongoing medical care. Over half of Americans have at least one chronic disease. (CDC, 2024)

Significant Need Reasoning

Community burden: Cancer, asthma, and diabetes represent high-impact conditions for children in the Advocate Children's Hospital Oak Lawn (OL) PSA.

Healthcare utilization: Elevated emergency department (ED) visits for asthma and diabetes indicate gaps in preventive and outpatient management.

Comparative trends: The OL PSA has some of the highest pediatric asthma and diabetes ED visit rates, demonstrating the urgent need for community and clinical interventions.

Summary of Health Outcomes

Emergency Department Visits Among Children*

Disease	Oak Lawn PSA		Cook County		Will County		Illinois	
age (years)	0-4	5-17	0-4	5-17	0-4	5-17	0-4	5-17
Diabetes	3.2	57.3	6.3	47.4	9.9	47.8	8.9	52.7
Asthma	656.1	558.5	569.8	479.1	289.7	263.3	409.2	349.7

**per 100,000 residents*

(Metopio, IHA COMPdata Informatics, 2024)

Key Findings

- Children and adolescents in the OL PSA have **disproportionately high rates of asthma and diabetes**, reflected in elevated ED visit rates compared to county and state averages.
- Cancer and heart disease are less frequent in youth but remain significant due to their **long-term health implications**.
- **The high volume of potentially avoidable ED visits** suggests that many chronic conditions in the OL PSA are not being adequately managed through primary or preventive care.

Contributing Factors

- **Environmental:** Air quality and housing conditions exacerbate asthma prevalence in OL PSA.
- **Healthcare access:** Insufficient preventive and specialist care contributes to reliance on ED services.
- **Socioeconomics:** Higher levels of poverty and food insecurity increase the risk for chronic conditions such as diabetes.
- **Behavioral:** Low physical activity and dietary risk factors contribute to early onset of obesity-related chronic disease.

HIGHLIGHTED DISPARITIES

- **Geographic:**
  - » OL PSA children experience the highest asthma and juvenile diabetes ED visit rates across the comparison areas.
  - » Will County demonstrates the highest pediatric cancer rate.
- **State vs. local:**
  - » Cook County juvenile heart disease mortality per 100,000 residents (1.5) is nearly twice the Illinois average (0.8).
- **Avoidable ED use:**
  - » High asthma and diabetes ED rates in the OL PSA indicate inadequate outpatient disease management compared to regional benchmarks.

Maternal and Infant Mortality

SIGNIFICANT NEED

Why is this important? In the United States, more women die from problems during pregnancy or childbirth than in other wealthy countries. Maternal health is directly tied to infant health. To lower the risk of death or illness for both mother and baby, it is important for women to get health care before and during pregnancy and avoid risky habits like smoking or drinking alcohol. Healthy moms are more likely to have healthy babies who live beyond their first birthday.

Significant Need Reasoning

Secondary data is only available for Cook and Will Counties but shows that Cook County does fare worse than Will county when it comes to early prenatal care, maternal risk factors, infant mortality, preterm births, and low birth weight.

Key Findings

- **Prenatal Care:**
  - » Will County: highest rate of early prenatal care, above state average
  - » Cook County: 75% of pregnant individuals receive early care, below state average
  - » Healthy People 2030 goal: 80.5%
- **Births with Maternal Risk Factors:**
  - » Cook & Will Counties: 22.5% of births with at least one risk (e.g., smoking, diabetes, hypertension)
  - » Illinois: 23.5%
- **Infant Mortality:**
  - » Highest among Non-Hispanic Black infants, with double the mortality rate compared to other racial/ethnic groups
- **Preterm Births (<37 weeks):**
  - » Cook County: 10.4% | Will County: 10.6% | Illinois: 10.6%
- **Very Low Birth Weight (<1,500g):**
  - » Cook County: 1.53% | Will County: 1.24% | Illinois: 1.39%
  - » Non-Hispanic Black infants: 2.95% (Cook) | 2.91% (Statewide)
  - » Hispanic/Latino infants: 1.28% statewide
- **Teen Births (births per 1,000 women, 15–19 years old):**
  - » ACH Oak Lawn PSA: Dropped from 31.35 (2007–2011) to 5.46 (2019–2023)
  - » Cook County: Dropped from 29.97 to 5.96 during same period

Sources: Metopio, National Vital Statistics System-Natality, CDC, 2024
Metopio, American Community Survey, U.S. Census Bureau, 2023

Contributing Factors

- **Access & Quality Gaps:** Early care access is lower in some areas, and even those with care may experience lower quality care.
- **Social Determinants:** Housing instability, transportation, and health literacy impact prenatal care and birth outcomes.
- **Maternal Health Risks:** Chronic illness, smoking, and stress increase complications during pregnancy.
- **Youth Risk:** Teen pregnancy has declined, but youth still need reproductive education and support to maintain the trend.

HIGHLIGHTED DISPARITIES

- Cook County, Will County, the state of Illinois all show that **Non-Hispanic Black mothers are disproportionately affected by infant mortality**, with double the number of deaths per 1,000 live births.
- Studies have shown that Non-Hispanic Black mothers who access prenatal care are more likely to experience **lower quality prenatal care and experience more complications**.
- In 2023, 1 in 9 babies (10.8% of live births) were born preterm in Illinois with **most pre-term births occurring for Black infants**.

Economic Stability/Housing Security

SIGNIFICANT NEED

Why is this important? Having a steady job with safe working conditions provides more than just a paycheck. It often comes with access to health insurance, the ability to afford childcare and education, and the funds to cover basic needs like housing and food. People with stable employment are less likely to live below the poverty line and are more likely to have better health outcomes. Affordable housing means having a safe and stable place to live that doesn't cost more than an individual or family can afford. High housing costs, frequent moves, or fear of eviction can affect mental health and even physical well-being.

Significant Need Reasoning

Secondary data places OL PSA as doing much worse than the state and its neighboring counties in terms of economics and housing security.

Key Findings

- **Homeownership:** 65.6% in ACH Oak Lawn PSA
  - » Lowest rates: South Shore (60649), Riverdale (60827), Bridgeport (60609)
- **Rent Burden** (30%+ income spent on rent)
  - » ACH Oak Lawn PSA: 49.88% (highest)
  - » Cook & Will Counties: ~45%
  - » Illinois: 43.8%
- **Households Without a Vehicle**
  - » ACH Oak Lawn PSA: 14.2%
  - » Cook County: 17.9%
  - » Illinois: 10.9%
  - » Will County: 3.76%

Source: Metopio, American Community Survey, U.S. Census Bureau, 2023

Contributing Factors

Having a job and access to a steady paycheck is connected to many benefits, as listed above. Housing is one of those benefits, which comes with its own set of struggles that the focus groups discussed.

- **Barriers & Challenges** – specific to housing:
  - » Current market
  - » Lack of available houses
  - » Impact on economic profile
  - » Cost
  - » Waitlist
  - » Lack of community support
  - » Stigma against homeless
  - » Not enough city attention

HIGHLIGHTED DISPARITIES

- **Unemployment Rate by Race/Ethnicity 2019-2023**
  - » Full population (OL PSA): 10.59%
  - » NH White: 9.07%
  - » NH Black: 13.24%
  - » Asian: 4.95%
  - » Hispanic or Latino: 8.62%
- **Children Living Below Poverty**
  - » OL PSA:
    - ◊ 0-4 years: 24.2%
    - ◊ 5-17 years: 22.0%

> Alliance for Health Equity Focus Group Response:
>
> Participants recommended the promotion of workforce development programs, job creation, and training opportunities to address unemployment and poverty, which are often linked to violence. This was often coupled with recommendations to increase access to quality education and after-school programs to keep youth engaged and reduce their involvement in risky behaviors.

PRIORITIZATION OF HEALTH-RELATED ISSUES

PRIORITY SETTING PROCESS

In May 2025, the community health council voted on significant needs based on the criteria below.

Size/seriousness of the problem

Effectiveness of available interventions

Available resources to address the health issue

Health care system adequately situated to address the health issue

Meets a defined community need as identified through data

Potential for issue to impact other health and social issues

Ability to effectively address or impact health issue through collaboration

Significant Health Needs Selected

Access to Care

Access to Care was chosen as one of the health need priorities due to the strong connection between the lack of pediatric providers available for public health insurance families and the rate of families using the emergency department for services that are typically preventable through a pediatrician's office. The CHC determined that the data demonstrating a limited number of providers accepting Medicaid and CHIP showed a definite need for the community. The council also recognized that obstacles such as transportation needs, problems with Medicaid enrollment, and limited education about appropriate care sites also reduce access to necessary care for children. Potential projects to address this need include the primary care services of our Ronald McDonald Care Mobiles, dental services offered on our new ACH dental mobile and possible expansion of our Children's Health Resource Center to provide referrals to community based social services.

Community Violence

Community violence was identified as the top health need due to its widespread, long-term impact on the safety, mental health, and well-being of children, adolescents, and families in the region. Firearm-related injuries are now the leading cause of death among youth, and local data show that Cook County and surrounding areas experience significantly higher rates of violent crime, emergency department visits for assault, and unintentional injuries than the state average. Community voices and surveys - particularly from school nurses - emphasized the daily reality of gun violence, domestic abuse, bullying, and unsafe public spaces, all of which contribute to trauma, fear, and social isolation.

HEALTH NEEDS NOT SELECTED

Mental Health

Advocate Children's Hospital provides mental health screenings through the Ronald McDonald Care Mobile and offers Mental Health First Aid training to school districts through a partnership with NAMI Chicago.

Alcohol and Drug Misuse

Alcohol and substance use are serious public health concerns that impact physical health and mental wellbeing. At ACH, addressing these issues is already part of our daily clinical services, including screening, counseling, and treatment planning. As these services are embedded in our care delivery, alcohol and substance use were not prioritized as standalone focus areas in the CHNA.

Disease and Chronic Disease

Outreach resources are currently limited to providing diabetes and asthma education and intervention. However, there are a large amount of community-based programs/assets already serving the area as well as resources available through our Children's Health Resource Centers.

Maternal and Infant Mortality

ACH addresses maternal and infant mortality through specialized programming like Perinatal Palliative Care and Illinois Perinatal Quality Collaborative. Additionally, ACH is a level IV co-perinatal center.

Economic and Housing Stability

This is a larger systemic issue that requires a community-wide, collective response. ACH Oak Lawn PSA will support efforts within the community as needed. Additionally, providers will refer to community resources for identified needs of individual patients in our healthcare facilities.

Access to Healthy Foods

Food insecurity was not selected as an area of focus; however, ACH does have emergency food processes already in place through our Ronald McDonald Care Mobiles, and inpatient and outpatient clinics to address this need. ACH does have the Healthy Active Living program for children battling excess weight to get personalized attention to achieve a healthier and happier lifestyle.

APPROVAL OF COMMUNITY HEALTH NEEDS ASSESSMENT

The 2025 CHNA was presented to the local Governing Council as well as the Advocate Health Care Board, the authorizing body of the hospital. The board approved the report on December 15, 2025.

VEHICLE FOR COMMUNITY FEEDBACK

Community Feedback

If you experience any issues with the link to our feedback form or have any other questions, please click below to send an email to us at: AHC-CHNAReportCmtyFeedback@aah.org

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

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

EVALUATION OF IMPACT FROM PREVIOUS CHNA

Access to Care

Advocate Children's continues to partner with Ronald McDonald House Charities of Chicagoland and Northwest Indiana to provide access to free school physicals and immunizations for at-risk children through the Ronald McDonald Care Mobile (Care Mobile). Advocate Children's provides immunizations, routine checkups and screenings to the most vulnerable students in the Advocate Children's Oak Lawn primary service area (PSA). The Care Mobile is staffed by an Advocate Children's care team that includes a nurse practitioner, medical assistant, health educator and a driver.

- In 2024, these mobile units saw 1,409 patients and provided nearly 3,020 immunizations and over 687 physicals. Approximately 898 were on Medicaid and 522 had no insurance.

Behavioral Health

The U.S. Department of Health and Human Services (HHS) reports significant increases in the number of children diagnosed with mental health conditions. Local data collected for the CHNA confirms this and the significant shortage of mental health resources is adding to this issue. Advocate Children's Hospital– Oak Lawn partnered with NAMI (National Alliance on Mental Illness) South Suburbs of Chicago and the Sertoma Centre to implement a series of Mental Health First Aid Trainings. The Mental Health First Aid Class teaches attendees the risk factors and warning signs for mental health and addiction concerns, strategies for how to help someone in both crisis and non-crisis situations, and where to turn for help. For program implementation, Advocate Children's Hospital– Oak Lawn connected with several elementary and middle schools in the primary service area with high identified mental health needs, and registered teachers and nurses in these schools to complete the mental health first aid training.

- In 2024, 30 staff members of Oak Lawn Hometown Elementary School District 123 received the Mental Health First Aid Training
- In August 2025, 7 nurses of South Elgin District U46 completed the training.

APPENDICES

Appendix 1: 2025 Community Health Needs Assessment Data Sources

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

Appendix 2: Community Resources Available for Significant Needs

The resources under each significant need are not a complete list. For more community resources, visit: https://advocateauroracommunity.org/

Access to Care

Organization	Website	Contact
Arab American Family Services	https://www.aafsil.org/	708-599-2237
Little Company of Mary Hospital and Health Care Centers	https://www.osfhealthcare.org/hospitals/little-company-of-mary	708-422-6200
TCA Health, INC	https://findahealthcenter.hrsa.gov/	773-995-6300
VNA Healthcare	https://vnahealth.com/	630-394-8516

Mental Health

Organization	Website	Contact
Sertoma Centre Inc	https://sertomacentre.org/idd/services/	708-371-9700
Illinois Action for Children	https://www.actforchildren.org/program-supports/consultation/early-childhood-mental-health/	312-823-1414
Pillars Community Health	https://pillarscommunityhealth.org/services/behavioral-health-and-support-services/outpatient-mental-health/	708-745-5277

Access to Healthy Foods

Organization	Website	Contact
Respond Now	https://respondnow.org/	708-755-4357
Beyond Hunger	https://www.gobeyondhunger.org/	708-386-1324
Youth HYPE Housing Program	https://northwestcompass.org/	847-392-2344
Almost Home	https://www.almosthomechicago.org/	708-789-2911
Humana Neighborhood Center Online	https://www.humananeighborhoodcenter.com/	HumanaNeighborhoodCenter@humana.com
The Actors Gymnasium	https://www.actorsgymnasium.org/	hello@actorsgymnasium.org
The Boys and Girls Club	https://www.bgca.org/	404-487-5700

Community Violence

Organization	Website	Contact
Childhood Trauma Treatment Program (CTTP)	https://www.advocatehealth.com/health-services/behavioral-health-care/childhood-trauma-treatment-program	800-216-1110
Children's Advocacy Center of North & Northwest Cook County	https://www.cachelps.org/	630-540-0549
Advocate Trauma Recovery Center	https://www.advocatehealth.com/health-services/emergency-services/advocate-trauma-recovery-center	708-346-7300

Disease and Chronic Conditions

Organization	Website	Contact
Asthma and Allergy Foundation of America	https://aafa.org/asthma/living-with-asthma/managing-asthma-and-allergies-at-school/	800-727-8462
Southside Pediatric Asthma Center	https://www.southsidekidsasthma.org/who-we-are/	sspac@uchospitals.edu
Minis Pediatric Walk-in Clinic	https://minispeds.com/services/breathing-treatments-oak-lawn/	708-424-0909

Alcohol and Drug Misuse

Organization	Website	Contact
Child & Adolescent Counseling Services	https://samaracarecounseling.org/reduced-cost-care-2/	630-357-2456
Beacon Recovery Center	https://help.beacon-recovery.com/inpatient-drug-rehab	866-805-0796
Unity Recovery	https://unityrecovery.org/digital-recovery-meetings	See website

Maternal and Infant Mortality

Organization	Website	Contact
PASS Pregnancy Care Center	https://passpregnancycarecenters.org/services/	708-614-9777
Erie Family Health Center	https://www.eriefamilyhealth.org/patient-services/reproductive-health/	312-666-3494
Access Community Health Network	https://www.achn.net/services--programs/adult-and-senior-services/obstetrics-and-midwifery/	866-267-2353

Economic and Housing Stability

Organization	Website	Contact
Covenant House	https://www.covenanthouse.org/homeless-shelters/chicago-illinois	312-759-7878
Youth & Opportunity United	https://youthopportunity.org/programs-services/out-of-school-time-program	847-866-1200
Child Care Assistance Program	https://www.dhs.state.il.us/page.aspx?item=30355	844-221-2227

Appendix 3: References

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Metopio, Centers for Disease Control, 2022
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Metopio, Feeding America, 2022
Metopio, IHA COMPdata informatics, 2020-2024
Metopio, Chicago Department of Public Health, 2023

Metopio, Illinois Department of Healthcare and Family Services, 2025
Metopio, Illinois State Cancer Registry, 2024
Metopio, National Vital Statistics System-Mortality, 2023
Metopio, United Way, ALICE Data, 2023
Metopio, USDA, 2022
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Youth Risk Behavior Survey | CDC. (n.d.) https://yrbs-explorer.services.cdc.gov/#/

Advocate Children's Hospital

Thank You

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