

Erie Family Health Centers Needs Assessment June 2025

Prepared by: Leading Healthy Futures

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I. Executive Summary

This needs assessment, prepared for Erie Family Health Centers (Erie) by Leading Healthy Futures (LHF), offers a comprehensive, mixed-methods analysis of the Erie service area and the socioeconomic and health needs of its many served communities.

Erie is a leading regional healthcare resource providing holistic, integrated care for every family member — from infancy through adulthood. Erie serves more than 95,000 patients annually across 12 sites, spanning Chicago's west side to Waukegan, Illinois, and is recognized for delivering quality clinical care ranked in the top 10% nationwide.

Erie's service area encompasses 84 zip codes across two distinct geographic areas of northern Illinois: 76 zip codes in the city of Chicago and suburban Cook County, and 8 zip codes in Northern Lake County. The service area is home to 3.7 million residents, including significant populations experiencing socioeconomic hardship and unique health challenges shaped by social determinants of health.

Erie's service area is home to a highly varied population, with 20% of residents identifying as Black/African American, 32% as Latino, 37% as White, and 8% as Asian. Nearly a quarter of residents are foreign-born, and 41% speak a language other than English at home. The service area experiences significant economic disparities: 31% of individuals are considered low-income, and 15% live in poverty. Housing cost burden is a major issue, with nearly 28% of homeowners and over 45% of renters spending more than 30% of their income on housing. Rising food insecurity, persistent transportation barriers, and education and employment gaps, and community violence further compound these challenges.

Health disparities in the service area are profound, with elevated rates of chronic disease, mental health challenges, and maternal and child health issues, particularly in Chicago West, Chicago South, and Northern Lake County. Diabetes, hypertension, obesity, and asthma are more prevalent in the service area than statewide or nationally, and cancer screening rates are below state and national averages. Behavioral health needs are pronounced, with elevated rates of poor mental health among youth and adults, and high rates of drug overdose mortality in some areas.



Figure 1: Erie's Health Center Program quality badges, 2024

Access to care for these conditions is further hindered by high rates of uninsurance, healthcare workforce shortages, and geographic barriers. Nearly all service area zip codes are designated as Medically Underserved Areas or Health Professional Shortage Areas, and more than 500,000 low-income service residents are unserved by any health center. Despite progress in insurance coverage over the past decade, 10% of residents remain uninsured, and many face barriers to accessing affordable and linguistically appropriate care. Future threats to insurance access and other policy changes loom.

Erie remains a vital resource in addressing these health needs and their root causes. This assessment and the community feedback it obtained point to several recommendations for future areas of focus, including:

- Continue to hire bilingual staff where needed, considering the specific language needs of the community near each site location and the constraints of the labor market, and address other concerns of immigrant populations
- Expand community outreach and awareness, especially as new sites open, capacity changes, and/or coverage landscape changes
- Expand access to care through initiatives that increase appointment availability and make it easier to schedule appointments
- Continue to provide health education around chronic diseases and preventive care, as resources allow
- Continue to focus on social determinants such as food insecurity, housing, and transportation, as resources allow
- Convene and coordinate with partners to address systemic challenges and shortages
- Ensure the successful opening of a new site in West Garfield Park, located in one of the regions and zip codes this report identifies as having some of the highest health needs
- Consider future geographic expansion into other regions in the service area with high, unmet health needs

With continued focus in these areas, Erie will be able to help advance its vision of *all* people living their healthiest lives.

II. Introduction

A. Organizational Background

Erie Family Health Centers (Erie) is a federally gualified health center (FQHC) and regional healthcare resource. Beginning in 1957 as part of Neighborhood Erie House expanding over the decades into a fullservice community health center, Erie now delivers holistic care to help every member of the family stay healthy and active from infancy through adulthood in accordance with its mission, vision, and values (see adjacent figure).

Today, Erie serves more than 95,000 patients across 12 health center sites. These sites span the west side of Chicago to Waukegan, Illinois, and include four large primary care centers that offer integrated medical and dental health services, three additional large primary care centers, the region's oldest and largest comprehensive teen and young adult health center, and five school-based health centers (see map on the following page).



Figure 2: Erie's mission, vision, and values.

Erie provides medical, dental, and behavioral healthcare that is ranked in the top 10% nationwide for clinical quality. Erie is also a leader in maternal child healthcare, with a delivery volume that places it amongst the top 5 of more than 1,400 community health centers nationwide, and #1 for newborn delivery volume among community health centers in Illinois. It also received back-to-back 2024 and 2025 USA Today Top Workplaces Awards and Top Workplaces Purpose and Values Awards, as well as the 2024 Healthcare Industry Award.

B. Purpose of This Report

To better understand the health needs in its community, as well as fulfill the Health Center Program needs assessment requirement, Erie completed this community needs assessment in June 2025. Completed by Leading Healthy Futures (LHF), this report provides a systematic, data-driven approach to determining the health status, behaviors, and needs of residents across Erie's service area.

This report may be used for a variety of purposes to inform and improve service delivery. For example, information on patient population demographic shifts and geographic location can guide Erie's organization-wide goals for the number of patients seen and expectations for quality indicators. Such information can also influence the staffing approach for all service lines and the partnerships that are developed. Needs assessments such as this can also be a critical piece of Erie's strategic planning process in the future, informing prioritization of initiatives and overall future direction.



Figure 3: Erie's site locations, 2025, including primary care centers, school-based health centers, teen and young adult center, and hospital partners. Please note that Erie Division Street Health Center (#1 on the map) and Erie Teen Center (#13 on the map) operate as separate sites but are located at the same building and recognized as one site on Form 5B.

C. Methods

This needs assessment incorporates both quantitative and qualitative data. Quantitative data was collected using the most recently available data sets as of April 2025 from the American Community Survey (ACS), GeoCare Navigator, CDC Wonder, Behavioral Risk Factor Surveillance System (BRFSS), Youth Risk Behavioral Survey (YRBS), National Survey of Children's Health, Chicago Department of Public Health's (CDPH) Chicago Health Atlas, Cook County Department of Public Health's (CCDPH) Cook County Health Atlas, City Health Dashboard, CDC PLACES, AIDSvu, and other publicly available online sources.

At times, the best available data may be only available at the city, county, or state levels rather than zip code level. In these cases, a methodology recommended by HRSA is used to estimate the percent of a population with a certain disease or condition in each zip code. This methodology allows health data only available at the state or county level, for example, to be reliably extrapolated down to a smaller geography, such as zip code. Data are compared to benchmarks such as national or state averages. Data is also shown by the official Chicago community area if that is the most current and relevant data available, such as from CDPH. These do not line up with zip code boundaries but are commonly used across Chicago agencies.

Qualitative data was gathered through 3 methodologies. First, a community survey for patients and local community residents was conducted in May and June 2025. This survey was available in both English and Spanish and could be completed online. It was distributed via partner organizations, Erie's social media, Erie TV in waiting rooms, and directly through the patient portal to patients with recent visits. In total, 85 responses (66 complete responses) were received to the survey. Of these, 81 responses (95%) came from residents of the service area, representing 38 of the 84 zip codes in the service area and all six geographic regions of the service area.

It should be noted that the survey was a self-reported survey conducted by a self-selected convenience sample of individuals connected to or coming into contact with Erie, not a controlled random sample of the service area population. As such, it is important to note that convenience samples are vulnerable to hidden and systemic biases, where the sample results may differ from the results that would be derived from the entire population. It is, therefore, unknown how responses in this convenience sample survey might compare to the whole service area population. Survey findings in this report are rounded to the nearest whole number so as not to convey a greater level of precision than was obtained. Despite such limitations, the survey responses provide valuable insight into community members' perspectives and perceived needs.

The 2nd methodology was subject matter expert interviews, which were conducted by LHF during May 2025. A total of 7 individuals were interviewed, including staff and leadership from community-based nonprofits across 5 different communities as well as an elected official representing portions of the service area. The interviews provided insight and recommendations for Erie through these lenses. In total, 6 total phone interviews were conducted with 7 experts.

Finally, 2 focus groups were held virtually in May and June 2025 to provide additional insight into community needs from the perspective of patients and residents. The 1st was held with patient members of the Erie Board of Directors, and the 2nd was held with patient-facing staff members such as case managers and patient benefits specialists. Both were facilitated by LHF.

Please note that while this report predominantly uses the term "Latino," to align with the terminology most commonly used by the community, the terms "Hispanic/Latino" or "Hispanic" may be used where that is the terminology used by the data source. Most graphs that use American Community Survey data use the term "Hispanic" or "Hispanic/Latino" to remain consistent with the terminology used by the US Census Bureau. This report also uses the terms "Black" and "Black/African American" interchangeably.

D. Service Area Definition

The overall Erie Family Health Center (Erie) service area encompasses 84 zip codes in 2 distinct geographic areas of northern Illinois. The 1st is the Cook County area, which entails 76 total zip codes within the city of Chicago and suburban Cook County. The 2nd part of the service area is Northern Lake County, which entails 8 zip codes. Please note that this report may use the terms zip code and ZCTA, a statistical entity developed by the US Census Bureau for tabulating summary statistics, interchangeably.

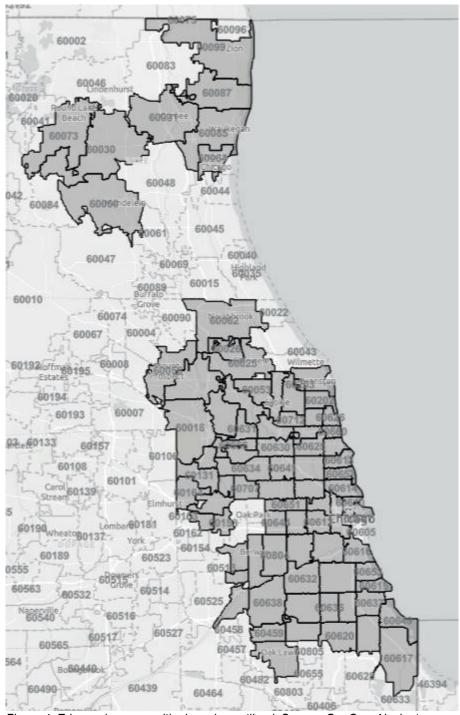


Figure 4: Erie service area, with zip codes outlined. Source: GeoCare Navigator.

The 84 zip codes in the service area were determined based on a combination of criteria that align with Health Center Program requirements and Erie's overall strategy, including:

- Zip codes that together represent where more than 90% of all Erie patients reside (exceeding HRSA's requirement for zip codes in which 75% of patients reside)
- Zip codes in which an Erie clinic is located
- Zip codes listed on *Form 5B: Service Sites* for an Erie clinic site, indicating it is a zip code served by that site (Please note that a few zip codes listed on *Form B* were not included in the analysis because they are not in the top 90% for patients and/or are non-contiguous with the rest of the service area and/or from which Erie served fewer than 200 patients.)

Given the large geographic service area and the fact that there are meaningful differences in demographics and community needs across the service area, 6 different regions have been defined for descriptive purposes in this report — 5 in the Cook County area and 1 that comprises the Northern Lake County area. Regions were defined based on a combination of municipal, county, or other established boundaries as well as normal community and residential patterns. This division allows Erie to understand and respond to the variety of unique needs across a very broad overall area. These regions are outlined on the maps and table that follow.

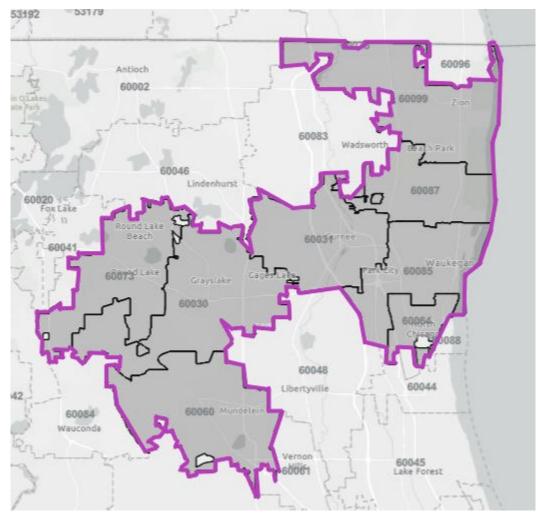


Figure 5: Erie service area - Northern Lake County region

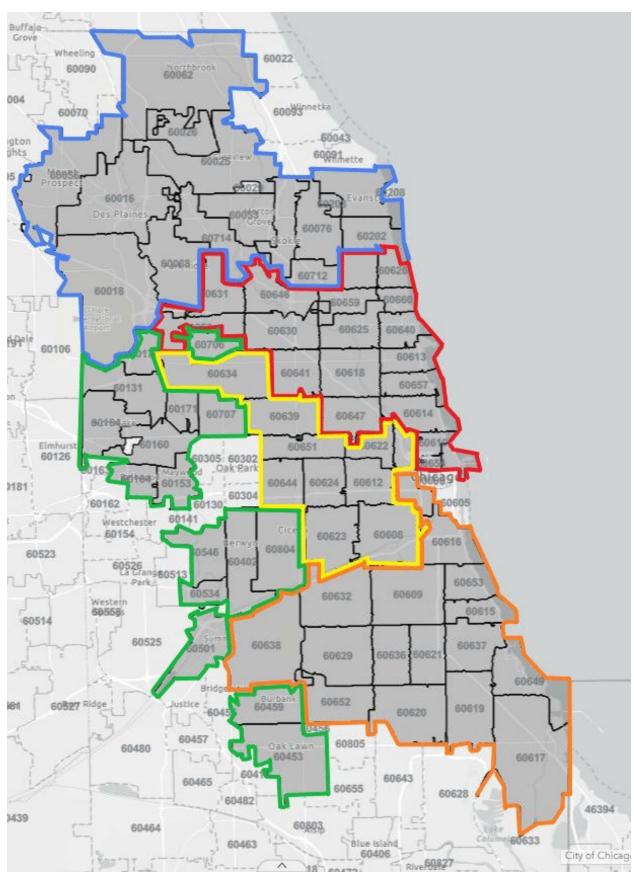


Figure 6: Erie service area – Cook County area with regions outlined

Region	Zip Codes	Primary Chicago Community Areas or Suburban Municipalities	% Erie Patients (2024)	
Northern Lake County	60030, 60031, 60060, 60064, 60073, 60085, 60087, 60099	Grayslake, Gurnee, Mundelein, North Chicago, Round Lake, Waukegan, Zion	12%	
Northern Cook Suburbs	60016, 60018, 60025, 60026, 60053, 60056, 60062, 60068, 60076, 60077, 60201, 60202, 60203, 60712, 60714	Des Plaines, Glenview, Morton Grove, Mount Prospect, Northbrook, Park Ridge, Skokie, Evanston, Lincolnwood, Niles	9%	
Chicago North	60610, 60611, 60613, 60614, 60618, 60625, 60626, 60630, 60631, 60640, 60641, 60645, 60646, 60647, 60654, 60656, 60657, 60659, 60660	Near North Side, West Town, Loop, Uptown, Lake View, North Center, Lincoln Park, Logan Square, Avondale, Irving Park, Albany Park, Rogers Park, Jefferson Park, Portage Park, Forest Glen, Edison Park, Norwood Park, O'Hare, Edgewater, Hermosa, Belmont Cragin, West Ridge, Humboldt Park	32%	
Chicago West	60608, 60612, 60622, 60623, 60624, 60634, 60639, 60642, 60644, 60651	Lower West Side, Bridgeport, McKinley Park, Near West Side, South Lawndale, North Lawndale, Armour Square, East Garfield Park, Humboldt Park, West Town, Logan Square, West Garfield Park, Dunning, Montclare, Portage Park, Belmont Cragin, O'Hare, Hermosa, Austin, Avondale, Near North Side	25%	
Chicago South	60607, 60609, 60615, 60616, 60617, 60619, 60620, 60621, 60629, 60632, 60636, 60637, 60638, 60649, 60652, 60653	Near West Side, Loop, New City, Fuller Park, McKinley Park, Bridgeport, Armour Square, Gage Park, Douglas, Brighton Park, Kenwood, Hyde Park, Grand Boulevard, Washington Park, Near South Side, Lower West Side, East Side, Calumet Heights, South Chicago, South Deering, Avalon Park, Hegewisch, Pullman, Burnside, Chatham, Greater Grand Crossing, Southshore, Roseland, Auburn Gresham, Washington Heights, Ashburn, Englewood, Chicago Lawn, West Lawn, Clearing, Garfield Ridge, Archer Heights, West Elsdon, South Lawndale, West Englewood, Woodlawn, Oakland, Kenwood	9%	
West/Southwest Cook Suburbs	60104, 60131, 60153, 60160, 60164, 60171, 60176, 60402, 60453, 60459, 60501, 60534, 60546, 60706, 60707, 60804	Bellwood, Franklin Park, Maywood, Melrose Park, Northlake, River Grove, Schiller Park, Berwyn, Oak Lawn, Burbank, Summit Argo, Lyons, Riverside, Harwood Heights, Elmwood Park, Cicero	6%	
Total percent patients from within service area				

Figure 7: Erie service area regions with zip codes, primary Chicago community areas or suburban municipalities, and percent of Erie 2024 patients. See figures 3 and 4 for maps of the regions outlined in corresponding colors.

To better illustrate Erie's reach and volume of patients served, the map below shows Erie's unduplicated 2024 patients by zip code across the service area, with darker zip codes having higher patient volume. The teal dots indicate Erie site locations.

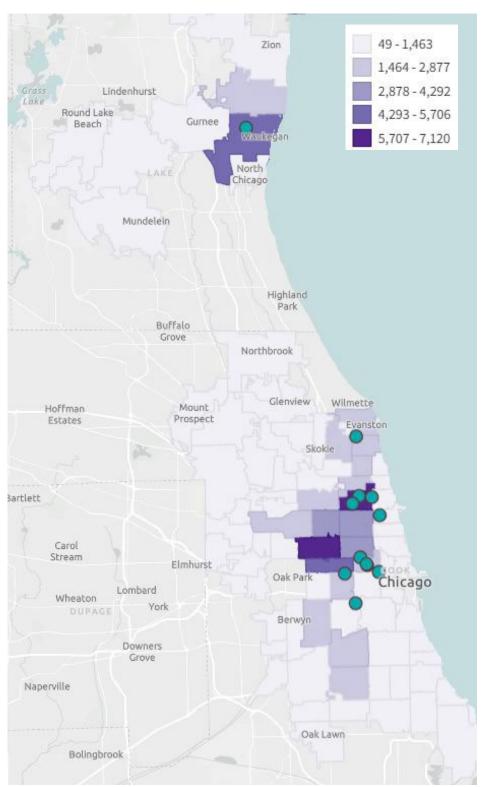


Figure 8: Erie unduplicated patients by service area zip code, 2024, with site locations noted. Please note that Erie's forthcoming 2026 site at the Sankofa Village Wellness Center in 60624 is not shown. Source: UDS 2024. Map produced with SparkMap.

The maps below show changes in Erie's patients by zip code over the past decade (2014 versus 2024). During that time, Erie's overall number of patients from these zip codes grew substantially from 59,659 to 88,919. Each of the five colors represents an equal sized interval of unduplicated Erie patients for that year.

As can be seen, a few zip codes in Erie's service area have remained consistently at the top for patient volume, such as 60639 (Belmont Cragin/Hermosa) in Chicago West and 60625 (Albany Park/Lincoln Square) in Chicago North. However, there have been several substantial shifts, generally away from the city center and towards either the west, south, or north. There have been some shifts west; for example, 60618 and 60647, which were in the 2nd highest grouping for patient volume in 2014, are now in the 3rd grouping, while zip codes to the west and northwest stay steady or grow. There has also been growth to the south, with zip codes like 60804 (Cicero) and 60624 (West Garfield Park, where Erie's new Sankofa Village site will be located) increasing over the past 10 years. There has also been growth to the north into 60659 and 60645 (West Ridge), 60202 and 60201 (Evanston), and 60076 (Skokie), served by Erie Evanston/Skokie Health Center, which opened in 2013.

Most notably, there has been extremely substantial growth in Northern Lake County, around Waukegan, where the Erie HealthReach Waukegan Health Center site opened in 2014 in an area previously far from any Erie site.

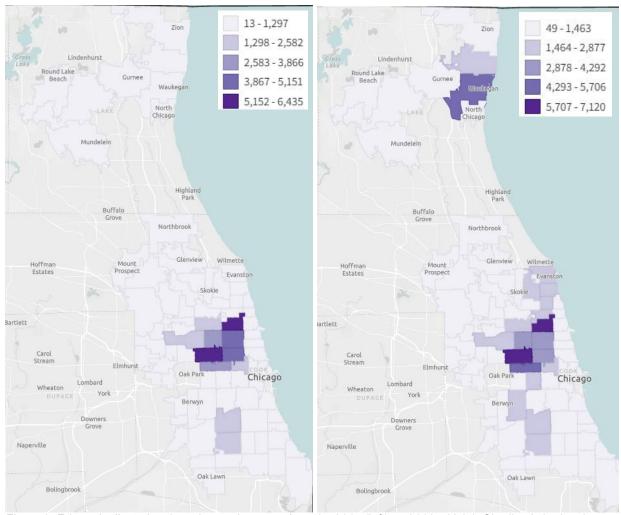


Figure 9: Erie unduplicated patients by service area zip code, 2014 (left) and 2024 (right). Shading is broken into even intervals for each year, with each bracket being a range of 1,284 patients in 2014 and a range of 1,414 patients in 2024 due to the higher overall patient volume. Source: UDS. Map produced with SparkMap.

E. How to Read This Report

This report begins with an examination of Erie's service area population, including population characteristics, demographics, and socioeconomic information for the service area at large, and then for the 6 distinct regions within the service area. Except where otherwise noted, data in this section is from the ACS 2019–2023 five-year estimates.

This section is organized around the 5 key areas of social determinants of health (SDOH) developed by Healthy People 2030:

- 1. Social and Community Context
- 2. Economic Stability
- 3. Education Access and Quality
- 4. Neighborhood and Built Environment
- 5. Healthcare Access and Quality

Social Determinants of Health



Figure 10: Five key areas of social determinants of health per Healthy People 2030

The report next describes morbidity, mortality, and other health outcomes in the service area, including for diabetes, cardiovascular disease, cancer, prenatal and perinatal health, behavioral health, and other health indicators, with comparisons to national and state averages. The report also considers community factors such as Medically Underserved Areas, Health Professional Shortage Areas, and other unique community factors affecting the service area.

All components required in the Health Center Program Compliance Manual Chapter 3: Needs Assessment are present in this report. The crosswalk in the table below identifies where each item can be found within this report.

Items needed to demons	strate compliance	Primary section in this report	Page
Factors associated with	Geography	III.E. Neighborhood/Built Environment	40
access to care and	Transportation	III.E. Neighborhood/Built Environment	40
healthcare utilization	Occupation	III.C. Economic Stability	27
	Transience	III.E. Neighborhood/Built Environment	45
	Unemployment	III.C. Economic Stability	33
	Income Level	III.C. Economic Stability	27
	Educational attainment	III.D. Educational Access and Quality	37
Significant causes of	Diabetes, cardiovascular	IV. <u>Health Outcomes</u>	58
morbidity, mortality, and	disease, cancer, low birth		
any health disparities	weight, behavioral health		
Other unique health	Social factors	III.B. Social and Community Context	15
needs or characteristics	Physical environment	III.E. Neighborhood/Built Environment	46
that impact health status	Cultural/ethnic factors	III.B. Social and Community Context	15
or access to/utilization of	Language needs	III.B. Social and Community Context	24
primary care	Housing status	III.E. Neighborhood/Built Environment	41

Figure 11: Crosswalk of Health Center Program compliance requirements, per Chapter 3: Needs Assessment, and locations in this report.

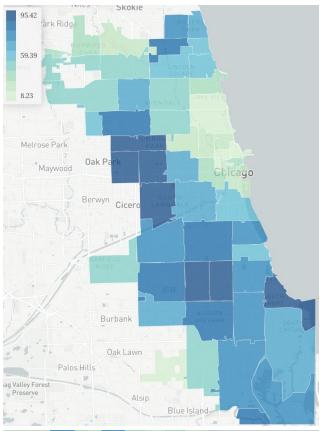
III. Service Area Population

A. Overall Context

The Erie service area is home to 3,749,920 total residents — 3,432,264 in the Cook County area and 317,656 in the Northern Lake County area. Service area communities are demographically mixed and include populations that experience socioeconomic hardship and face unique health challenges centered around social determinants of health.

As can be seen on the adjacent maps of Chicago and suburban Cook County, many of the communities in the service area score high on the social vulnerability index (SVI), a composite score used by the Chicago Department of Public Health (CDPH) and the Cook County Department of Public Health (CCDPH) to holistically describe communities with high degrees of need. The SVI combines indicators of socioeconomic vulnerability, household composition and disability, minority status and language, and housing type and transportation.

This section discusses some of these indicators and other service area needs and characteristics in greater detail, structured around the SDOH. As previously noted, the SDOH areas identified by Health People 2030 are: social and community context, economic stability, education access and quality, neighborhood and built environment, and healthcare access and quality. Using this as a lens to describe the service area population, this section looks at various quantitative data related to SDOH, including distinctions by the service area's 6 regions. Graphs in the following sections provide information on the service area, as well as comparisons to the relevant counties and Illinois as a whole. Qualitative findings from the interviews, focus group, and self-report survey are included as relevant to share additional community perspectives and insight, but it should be noted that these are not necessarily representative of the whole service area population.



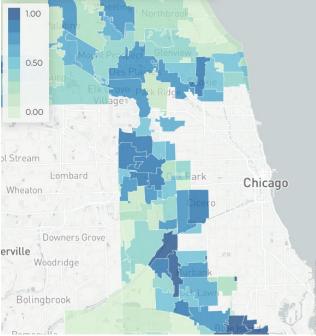


Figure 12: Social vulnerability index (SVI) in the city of Chicago (top map) and portions of suburban Cook County (bottom map). Darker blue indicates higher social vulnerability. Sources: Chicago Health Atlas, Cook County Health Atlas.

B. Social and Community Context

Race/Ethnicity

Racial and ethnic composition varies throughout the Erie service area. Overall, 20% of the population identifies as Black/African American, and another 32% identifies as Hispanic/Latino. The White non-Hispanic population accounts for 37% of the overall service area, followed by Asian non-Hispanic and all other races (non-Hispanic) at 8% and 3% respectively.

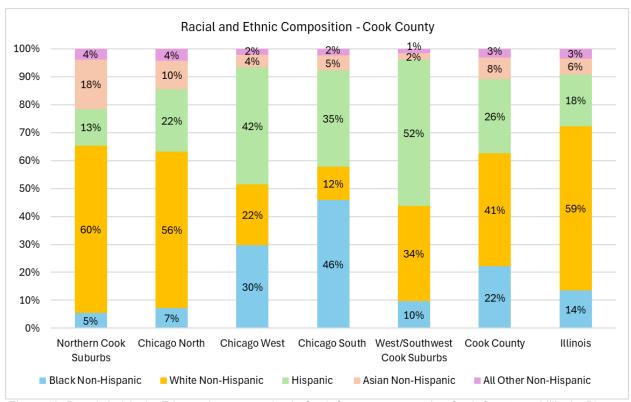


Figure 13: Race/ethnicity by Erie service area region in Cook County, compared to Cook County and Illinois. Please note the terms Hispanic and non-Hispanic are used here as this is the terminology used by the US Census Bureau.

Although the overall service area population is fairly evenly distributed among the major racial and ethnic groups, there is considerable variability in the distribution of different racial and ethnic populations across the 6 service area regions, consistent with Chicago's segregation at the neighborhood and community level.

As seen in the graph above, which shows the racial and ethnic composition of the service area's 5 Cook County regions, the highest proportion of Latino community members is in the West/Southwest Cook suburbs, where 52% of all residents identify as Latino, compared to just 26% across Cook County and 18% in the state of Illinois. Other areas with substantial proportions of Latino residents include Chicago West (42%) and Chicago South (35%).

The highest concentrations of Black non-Hispanic populations reside in the Chicago South (46%) and the Chicago West (30%) regions, both of which exceed Cook County (22%) and Illinois (14%).

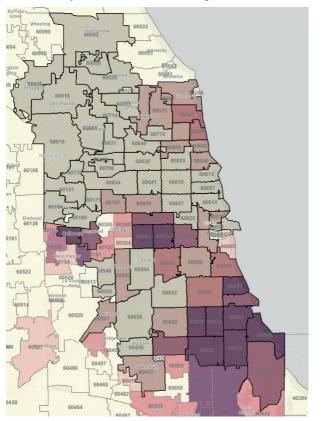
Only 2 regions are majority White non-Hispanic, Northern Cook Suburbs (60%) and Chicago North (56%). These regions have similar proportions of White residents to Illinois as a whole (59%). Still, each have meaningful proportions of Black, Hispanic/Latino, Asian, and other racial/ethnic groups as well. In fact, these regions have the highest proportions of Asian residents among Erie's regions, at 18% and 10% respectively. This well-exceeds Cook County (8%) and Illinois (6%) as well as the other regions (2%-5%).

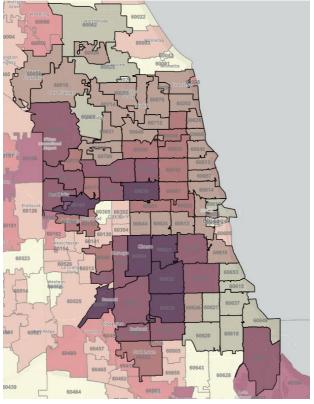
The maps on this page illustrate Cook County's racial and ethnic segregation visually. As shown by the dark purple zip codes, the highest concentrations of Latino populations (top right map) are

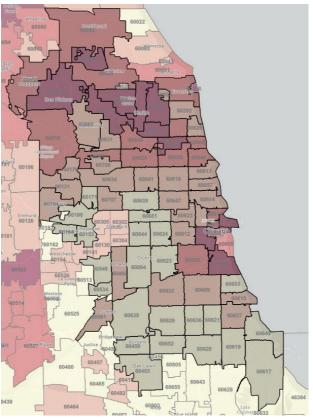
on the West and Southwest sides of the city as well as West and Southwest suburbs, while the highest concentrations of Black populations (bottom left map) are most visible on the South and West sides of the city. Asian populations (bottom right map) are most concentrated in North side of the city, Northern suburbs, and pockets in the Near South areas that are home to Chinatown.

Subject matter experts interviewed also noted that some historic racial/ethnic clusters have shifted over time, such as the dramatic drop in Puerto Rican residents on Chicago's West Side over the past several decades. This can be seen in recent years; for example, in 60647 in Erie's Chicago West region, the Latino population has dropped from 52% in the 2007-2011 period to 37% in the 2019-2023 period.

Figure 14: Concentrations of Latino (top right), Black (bottom left), and Asian (bottom right) residents by zip code in the Cook County, with Erie's service area zip codes outlined. Darker purple indicates higher populations of individuals identifying with that race/ethnicity. Source: GeoCare Navigator







The Northern Lake County region of Erie's service area is roughly split between Hispanic/Latino (41%) and White non-Hispanic (38%) residents, with a substantial Black population as well (11%). This is far more Latino and Black than either Lake County or Illinois as a whole.

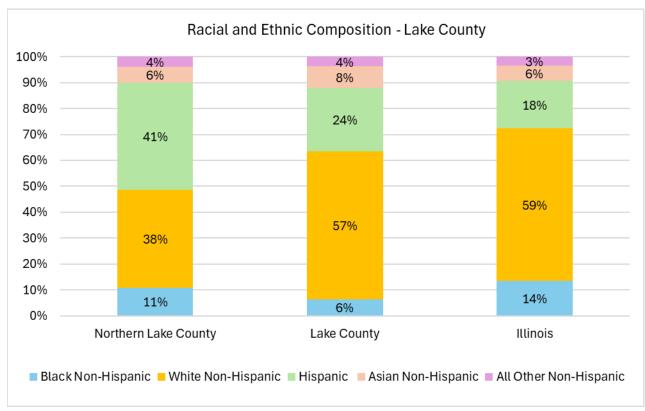


Figure 15: Race/ethnicity in Erie's Northern Lake County region, compared to Lake County and Illinois. Please note the terms Hispanic and non-Hispanic are used here as this is the terminology used by the US Census Bureau.

The maps below show the racial and ethnic makeup of Lake County by zip code, with the darker purple showing the much higher concentrations of Latino populations (left map) throughout most of Northern Lake County, especially Waukegan, Zion, North Chicago, and Round Lake. Zion and North Chicago also have modest concentrations of Black populations (center map) and Gurnee and Mundelein have some concentrations of Asian populations (right map).

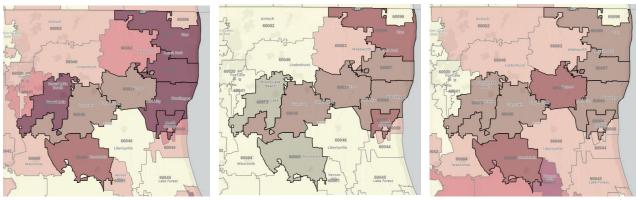


Figure 16: Concentrations of Latino (left), Black (center), and Asian (right) residents by zip code in Northern Lake County, with Erie's service area zip codes outlined. Darker purple indicates higher populations of individuals identifying with that race/ethnicity. Source: GeoCare Navigator

Age

People ages 18 to 64 years comprise the largest share of the service area population (65%), followed by people aged 0 to 17 years (21%) and persons age 65 years and up (14%). This is relatively similar in all six service area regions, both comparison counties, and the state of Illinois.

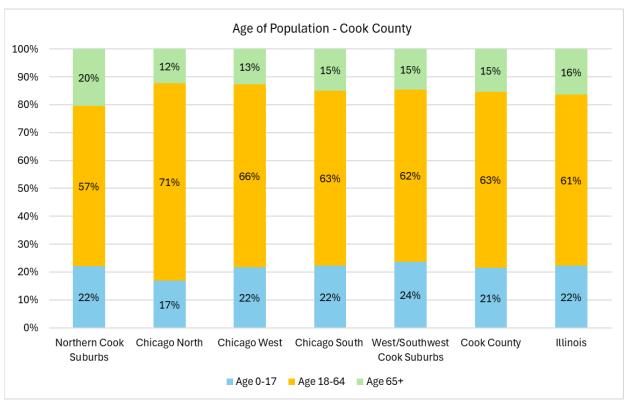


Figure 17: Age by Erie service area region in Cook County, compared to Cook County and Illinois.

The Northern Cook Suburbs region has by far the largest proportion of older adults (20%) and the smallest proportion of working age adults (57%). There are 10 zip codes in the region that have more than 20% of their population over age 65. In 60712 (Lincolnwood), for example, 27% of residents are age 65 and older.

In contrast, Chicago North has a higher percent of their populations who are working age adults (71%) and the smallest percent who are over 65 (12%). The

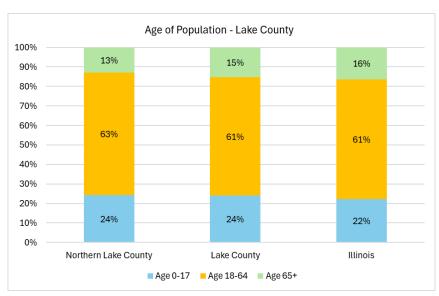


Figure 18: Age in Erie's Northern Lake County region, compared to Lake County and Illinois.

2 regions with the highest proportions of children age 17 and under are West/Southwest Cook Suburbs (24%) and Northern Lake County (24%).

Sex

Erie's service area regions are generally consistent with population norms for sex distribution, with the population evenly or nearly evenly divided between males and females. All but 1 region shows either a 50-50 male-female distribution or a 49-51 male-female distribution, as do Cook County, Lake County, and Illinois.

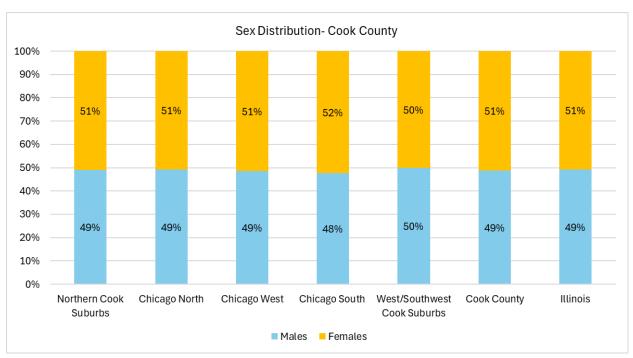


Figure 19: Sex distribution by Erie service area region in Cook County, compared to Cook County and Illinois

Only the Chicago South region is slightly less balanced, with males 48% representing of the total population. This imbalance in the Chicago South region suggests that males leave the area's population at a rate that outpaces females leaving the population. This may be through earlier death among males due to fatal violence or adverse health conditions. greater incarceration rates among males, or higher rates of relocation for employment. Indeed, a 2019 article from the Illinois Criminal Justice Information Authority (ICJIA) underscores how high rates of male incarceration — especially among Black males — remove significant numbers of men from the community, directly contributing to this gender imbalance and exacerbating social challenges on Chicago's South Side. 1

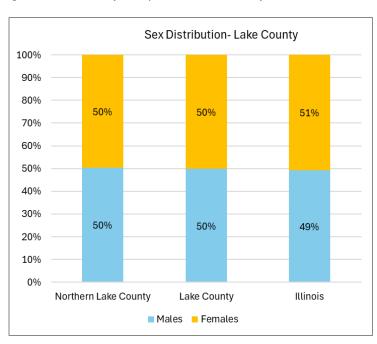


Figure 20: Sex distribution in Erie's Northern Lake County region, compared to Lake County and Illinois.

Immigration Status

The proportion of foreign-born individuals in the entire service area is 24%, more than in Cook County (21%), Lake County (19%), or Illinois (14%). However, there is meaningful variation across the different regions of the service area.

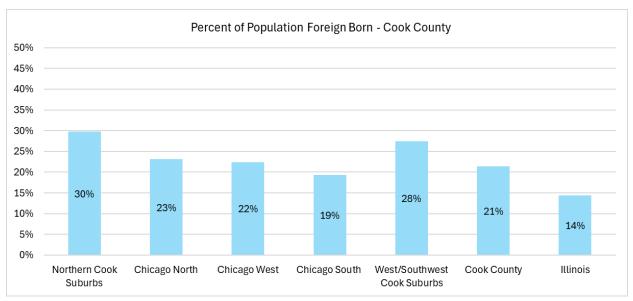


Figure 21: Foreign-born population by Erie service area region in Cook County, compared to Cook County and Illinois.

In the Cook County portion of the service area, 2 regions, Northern Cook Suburbs and West/Southwest Cook Suburbs, each have nearly one-third of their population (30% and 28% respectively) that was born outside the United States. West/Southwest Cook Suburbs is also the region with the highest proportion of the population that is Latino, while Northern Cook Suburbs has the highest proportion that is Asian, demonstrating the wide range of cultures found among the foreign-born residents of the service area.

There are 3 regions that have nearly one-quarter of their population that are born outside the United States: Chicago North (23%), Chicago West (22%), and Northern Lake County (19%), still exceeding the state and county proportions.

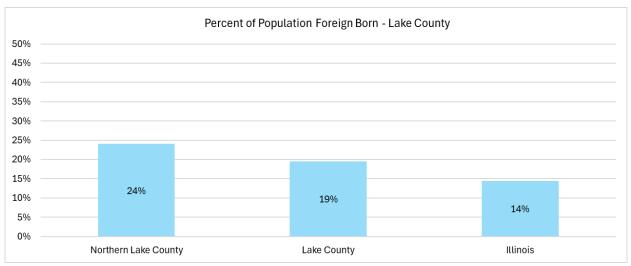


Figure 22: Foreign-born population in Erie's Northern Lake County region, compared to Lake County and Illinois.

In contrast, the Chicago South region is home to the lowest percent of foreign-born individuals (19%). This is also the region where a plurality of residents are Black, which in Chicago means they are predominantly US-born.

At the zip code level, several have particularly high proportions of foreign-born residents. In the Northern Cook Suburbs, zip codes 60714 (Niles) and 60077 (Skokie), each have 43% of their overall populations who were born outside the US, and 1 zip code in Chicago North, 60659 (West Ridge), has 42% of their population that is foreign-born. Interestingly, although Chicago South has the lowest overall proportion of foreign-born residents, 1 zip code in the region, 60632 (Archer Heights/Brighton Park), has 1 of the highest overall rates of foreign-born residents, at 43%.

The foreign-born population has been relatively stable in the service area over the 5-year interval between the 2014-2018 estimates and the 2019-2023 estimates. As shown on the table below, the proportion of the population that is foreign-born has increased slightly in the Northern Lake County and Chicago South regions, while it has decreased slightly in Chicago North. However, the overall service area effect has been relatively stable, as of the 2019-2023 ACS data.

Region	2014-2018		2019-2023		Change	
	# foreign- born	% of region foreign-born	# foreign- born	% of region- foreign born	# foreign- born	% of region foreign-born
Northern Cook Suburbs	146,163	30%	146,808	30%	645	0%
Chicago North	245,618	24%	234,153	23%	(11,465)	-1%
Chicago West	127,475	22%	128,928	22%	1,453	0%
Chicago South	161,960	18%	171,134	19%	9,174	1%
West/Southwest Cook Suburbs	128,361	28%	127,515	28%	(846)	0%
Northern Lake County	73,560	23%	76,235	24%	2,675	1%
Total Service Area	883,137	24%	884,773	24%	1,636	0%

Figure 23: Foreign-born population by Erie service area region 2014-2018 compared to 2019-2023.

Importantly, that data does not fully reflect a substantial wave of asylum-seeking migrants from Central and South America that arrived in Chicago between 2022 and 2024. Beginning in August 2022, when the 1st bus of such migrants was sent to Illinois by Texas Governor Greg Abbott, the city of Chicago welcomed more than 51,000 new arrivals from the southern border, setting up temporary congregate shelters, landing zones, and case management services. Meeting the food, housing, healthcare, and other basic needs of the influx of asylum-seekers was a major ongoing challenge for the Erie service area in recent years.

Immigrant community members face a variety of unique challenges. Only refugees, asylees, and some specific other groups, such as Victims or Trafficking, Torture, or other Serious Crimes (VTTC), are currently eligible for government funded insurance programs or other benefits. With the exception of undocumented children and pregnant women, undocumented immigrants do not qualify for programs like Medicaid or Affordable Care Act (ACA) marketplace subsidies, posing challenges to their ability to access coverage. Illinois has tried to close this gap, including by covering children and pregnant women regardless of immigration status. More recently, Illinois has established programs for undocumented immigrant adults who would be eligible for such programs based on income if not for their immigration status (see section on insurance). However, two programs the state established, Health Benefits for Immigrant Adults (HBIA) for ages 42-64 and Health Benefits for Immigrant Seniors (HBIS) for age 65 and older, have exceeded their allocated funds, so the state is eliminating HBIA starting July 2025.³

Fear and distrust can impact use of benefits to which immigrant community members are entitled. A majority of focus group conversations and subject matter expert interviews (6/8 conversations) highlighted how undocumented individuals often avoid seeking medical care for fear of being subject to arrest, detention, or even deportation. In the early months of 2025, this fear has increased, with even immigrants in mixed-status households, with legal status, and even those who have become US citizens fearing encountering Immigration and Customs Enforcement (ICE) agents at points of care. Several subject matter experts noted that they have seen a decrease in attendance at programs and fewer successful warm handoffs between points of care as immigrant community members avoid care due to fear. One organization stressed that just asking for people's immigration status at all can cause fear and increase the likelihood that they leave rather than continue with care.

This is supported by responses to the community survey where 21% of respondents (14/68) selected fears about law enforcement, like immigration (ICE) as one of their top three things that prevents people in the community from seeing a healthcare provider. Other things preventing people from seeing providers that may disproportionately impact immigrant residents include lack of trust (15% or 10/68) and religious or cultural differences (3% or 2/68). For things that prevent people from seeing a mental health provider, 19% (13/68) selected lack of trust, 13% (9/68) selected religious or cultural differences, 9% (6/68) selected fear in general, and 6% (4/68) selected fears about law enforcement, like immigration (ICE). Language was also a commonly selected barrier (see section below).

Countries of Origin

Across the entire Erie service area, the top 10 most common countries of origin for foreign-born residents include Mexico, Poland, China, Costa Rica, India, Nigeria, Philippines, Chile, Thailand, and Pakistan. As shown in the table below, Mexico is by far the most common, with almost 40% of all foreign-born residents of the service area hailing from Mexico.

Rank	Country	Percentage
1	Mexico	39.72%
2	Poland	9.45%
3	China, excluding Hong Kong and Taiwan	9.19%
4	Costa Rica	6.97%
5	India	6.94%
6	Nigeria	5.46%
7	Philippines	5.39%
8	Chile	4.73%
9	Thailand	4.44%
10	Pakistan	4.38%

Figure 24: Predominant country of birth among the foreign-born population. Source: SparkMap, based on data from American Community Survey 2019-2023 5-year estimates.

Mexico is also the top country of origin in all but 1 individual region of the service area (in the Northern Cook Suburbs, Poland is the top country). The table below shows the other countries of origin that are in the top 10 for 1 or more regions of the service area, with those appearing only in the top 10 for that region (neither other regions nor the whole service area) are in italics.

Northern Cook Suburbs	Chicago North	Chicago West	Chicago South	West/Southwest Cook Suburbs	Northern Lake County
Poland	Mexico	Mexico	Mexico	Mexico	Mexico
India	Poland	China	China	Poland	India
Mexico	Philippines	Poland	Pakistan	Chile	Honduras
Philippines	France	Malaysia	Nigeria	Algeria	Philippines
China	India	France	Italy	Ukraine	Poland
Costa Rica	Nigeria	Korea	India	Asia, n.e.c.	Grenada
Korea	China	Guatemala	Belize	Belize	Dominican Republic
Pakistan	Thailand	Ukraine	Poland	Bahamas	Belize
Iraq	Haiti	Czechoslovakia	Jamaica	Albania	China
Ghana	Nepal	Syria	Kenya	Ireland	El Salvador

Figure 25: Predominant country of birth among the foreign-born population by region of Erie's service area. Please note that China excludes Hong Kong and Taiwan; Czechoslovakia includes both the Czech Republic and Slovakia; and Asia n.e.c. stands for not elsewhere classified. Source: SparkMap, based on data from American Community Survey 2019-2023 5-year estimates

Notably, as this data is from the 2019-2023 5-year estimates, it does not fully reflect the large wave of new arrivals to Chicago that have disproportionately come from Venezuela. Of the approximately 51,000 new arrivals to Chicago during 2022 through 2024, it is estimated that approximately 30,000 are from Venezuela. Many of these individuals have had Temporary Protected Status (TPS) that allow them to live and work in the US, but this status is not guaranteed in the future.

Language Spoken at Home

The overall percentage of the service area population that speaks a language other than English at home is 41%, higher than the city of Chicago (36%), Cook County (35%), Lake County (31%), or Illinois (24%).

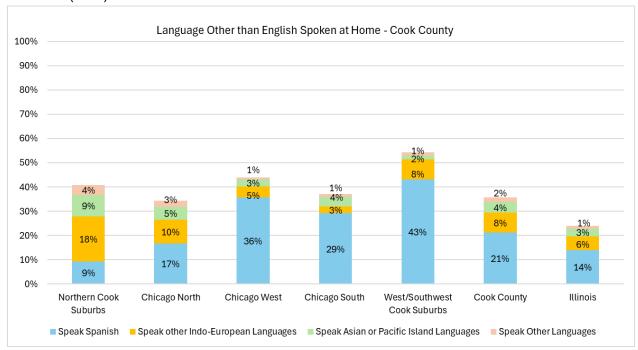


Figure 26: Language spoken at home by people over age 5 by Erie service area region in Cook County, compared to Cook County and Illinois.

One region, West/Southwest Cook Suburbs, has more than half its population (54%) that speaks a language other than English at home. This includes the 43% who speak Spanish, 8% who speak other Indo-European languages, 2% who speak Asian or Pacific Island languages, and 1% who speak other languages. This is the same region with the largest proportion of Latino residents and the 2nd largest proportion of foreign-born residents. Several zip codes within the West/Southwest Cook Suburbs have particularly high levels of languages spoken besides English, including, 60459 (Burbank, at 60%), 60706 (Harwood Heights/Norridge, at 61%),60131 (Franklin Park, at 62%), 60501 (Summit Argo, at 70%), 60160 (Melrose Park, at 73%), and 60804 (Cicero, at 82%). 60706 is particularly notable as only 10% of the population speaks Spanish at home, meaning that the other 51% speak a language that is neither English nor Spanish at home.

Three other regions in the Cook County part of Erie's service area have a higher proportion of their population speaking a non-English language at home than the county as a whole. In Chicago West, 44% of residents speak a non-English language at home and 36% of them specifically speak Spanish at home, exceeding the 21% of Cook County that speaks Spanish at home. In Chicago South, 37% of residents speak a non-English language at home and 29% specifically speak Spanish at home. Several specific zip codes in these regions have more than 60% of their population that speak Spanish at home, including 60629 (66%) and 60632 (73%) in Chicago South and 60639 (66%) and 60623 (62%) in Chicago West. There are also pockets where other languages predominate; for example, in 60616 in Chicago South, where Chicago's Chinatown is located, 30% of residents speak an Asian or Pacific Island Language at home.

The Northern Cook Suburbs region also has a higher percent of residents speaking a non-English language at home (41%) compared to Cook County, but the languages spoken differ. Only 9% of

residents speak Spanish at home, while 18% speak other Indo-European languages such as Russian, Polish, German, French, and Urdu; 9% speak Asian or Pacific Island languages such as Korean, Tagalog, Chinese, and Vietnamese; and 4% speak other languages such as Arabic. Two zip codes in the Northern Cook Suburbs have 61% of their population that speak a non-English language at home: 60018 (Des Plaines) and 60714 (Niles). In Niles, only 11% of this group speak Spanish at home, while the other 50% speak Indo-European languages (30%), Asian languages (13%), and other languages (8%).

Chicago North is the only region of the service area where fewer people speak non-English languages at home compared to Cook County. However, this is still roughly one-third of the population (34%) and greatly exceeds the state of Illinois (24%). Individual zip codes often have even higher rates, such as 60641 (53%), 60656 (54%), and 60659 (63%). Like the Northern Cook Suburbs, Chicago North has a higher rate of residents speaking other Indo-European languages (10%), Asian or Pacific Island languages (5%), and other languages (3%) at home compared with the county, state, or other regions.

In the Northern Lake County region of the service area, 43% of residents speak a non-English language at home, specifically Spanish in the case of 34% of residents. This greatly exceed Lake County, where only 31% of residents speak a non-English language at home and only 19% speak Spanish at home.

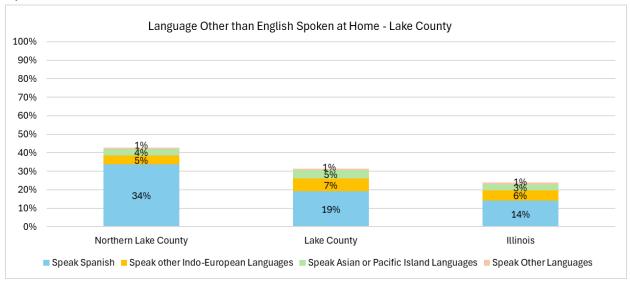


Figure 27: Language spoken at home by people over age 5 in Erie's Northern Lake County region, compared to Lake County and Illinois.

The most common languages and language groups spoken at home across the entire Erie service area (listed in the table below) include Spanish; Russian, Polish, or other Slavic languages such as Ukrainian; other Indo-European languages like Urdu; Chinese; Tagalog; other Asian and Pacific Island languages; Arabic, French, Haitian, or Cajun; Korean; Vietnamese; and German. Spanish remains the most common in each region and in the service area overall, with more than 26% of all people who do not speak English at home speaking Spanish.

It should be noted that across all 6 regions, the proportion of residents speaking another language at home (34%-54%, depending on the region) substantially exceeds the proportion of residents who are foreign-born (19%-30%). This demonstrates the importance of linguistically appropriate services for US-born patients as well as foreign-born patients.

Language	Population	Percent
Spanish	912,154	26.11%
Russian, Polish, or other Slavic languages	134,239	3.84%
Other Indo-European languages	107,556	3.08%
Chinese (incl. Mandarin, Cantonese)	55,260	1.58%
Tagalog (incl. Filipino)	39,167	1.12%
Other and unspecified languages	38,331	1.10%
Other Asian and Pacific Island languages	37,377	1.07%
Arabic	23,961	0.69%
French, Haitian, or Cajun	17,741	0.51%
Korean	16,761	0.48%
Vietnamese	11,095	0.32%
German or other West Germanic languages	10,595	0.30%

Figure 28: Language spoken at home among those who do not speak English at home. Source: SparkMap, based on data from American Community Survey 2019-2023 5-year estimates.

Responses to the patient and community survey corroborate the importance of language access for Erie patients and community members. More than one-third of survey respondents (35% or 29/84) said they are most comfortable speaking a language other than English, predominantly Spanish, and 17 respondents (20%) took the survey in Spanish. When asked what keeps people in the community from seeing a healthcare provider, 6% selected language differences (4/68); this was twice as high when asked what keeps people in the community from seeking mental health care (12% or 8/68). Similarly, when asked what types of health or social services the community needs more of, 12% (8/68) said services in other languages, with the suggested languages including Spanish, Arabic, and Ukrainian.

Language barriers also emerged as an access to care issue in the subject matter expert interviews and focus groups. In half of the conversations held (4/8), participants brought up language and communications barriers, the lack of language lines at many points of care, and the shortage of bilingual professionals as challenges in the community that deter people from care. It was noted that it can be less intimidating to go to a facility where staff speak your language.

Open ended feedback from the survey suggests that Erie may already be doing well at having staff speak the community's languages. When given the opportunity to share something that Erie does well to meet the needs of the community, 2 comments noted "the staff speaks my language" and "there are staff who speak Spanish." Two subject matter experts suggested that language and cultural competency were a part of why Erie may be less intimidating and more accessible than some other health facilities, but also emphasized the continued need to have more bilingual professionals.

C. Economic Stability

Poverty and Income Distribution

Of all individuals residing in the service area, 31%, or 1,154,246 individuals, are considered low-income (living below 200% of FPL). This is higher than in Cook County (29%), Lake County (19%), or Illinois (26%). Individuals in the service area who are living in poverty (below 100% of FPL) make up 15% of the total service area population, also higher than in Cook County (13%), Lake County (8%), or Illinois (12%).

As shown on the graph and maps that follow, the service area is a mixed-income region, with pockets of considerable poverty intermixed with middle-income and gentrifying communities. Two regions, Chicago West and Chicago South, have substantially larger concentrations of residents who are low-income or in poverty. More than 40% of residents of each region live under 200% of FPL (compared to 29% in Cook Country as a whole) and more than 20% of residents of each region are in poverty compared to 13% in Cook County as a whole). Furthermore, in 5 Chicago South zip codes (60615, 60621, 60636, 60637, 60653), roughly 15% of residents live in extreme poverty, below 50% of FPL. The only zip code exceeding that level of extreme poverty is 60624 in Chicago West, at 19% of all residents living in extreme poverty. This is the zip code where Erie's new Sankofa Village site is scheduled to open in 2026.

Two other regions have relatively similar income distribution and poverty rates to Cook County and Illinois. In the West/Southwest Cook Suburbs, 30% of residents are low-income, comparable to Cook County's 29%, though only 10% are living in poverty compared to 13% in Cook County. In Chicago North, the proportion of residents in poverty, at 12%, is similar to Cook County's 13% and Illinois' 12%, though the proportion of residents who are low-income, at 25%, is slightly lower than Cook County and more comparable to Illinois (26%).

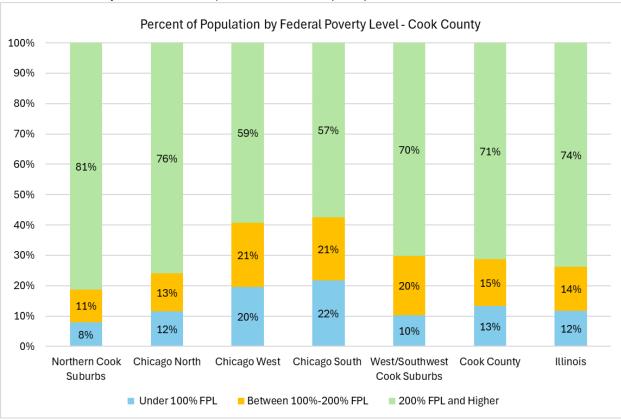


Figure 29: Percent population by Federal Poverty Level by Erie service area region in Cook County, compared to Cook County and Illinois.

The Northern Cook Suburbs region, on the other hand, has less economic hardship than either Cook County or Illinois. Only 8% of residents are living in poverty, and only 19% are considered low-income. However, it should be noted this is still a substantial number of individuals, with 38,382 individuals under 100% FPL and another 51,484 individuals between 100% and 200% FPL residing in this region alone.

The Northern Lake County region of the service area has higher economic hardship compared to Lake County as a whole, with 28% of the population that is low-income in the region compared to 19% in Lake County overall, and 12% that is living in poverty in the region compared to only 8% in Lake County overall. Although this is substantially worse than Lake County, a county known for pockets of affluence, it is fairly comparable to the state of Illinois and on par with or better than several of the Cook County area regions.

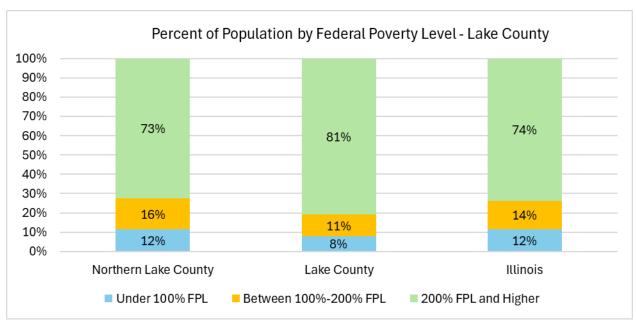


Figure 30: Percent population by Federal Poverty Level in Erie's Northern Lake County region, compared to Lake County and Illinois.

Among interview and focus group conversations, economic fragility was a common theme. The rising costs of everything — from copays and prescription medications, to basic needs, food, and utilities, to childcare — came up in 4 of the 8 conversations. Several focus group participants highlighted how people have limited resources to pay for rent, heat, and food, and so paying for healthcare may rank lower on their priority list. Others shared stories of people being cut off from their Social Security checks or fearing this happening to them, and the destabilizing nature of such a situation for people dealing with economic hardship and fragility.

Population in Poverty by Zip Code

The map below illustrates poverty at the zip code level. Of the service area's 76 Chicago area zip codes, 7 zip codes have 30% or more of residents living in poverty (at or below 100% FPL) and another 13 of these have between 17.3% and 30% of their populations living in poverty.

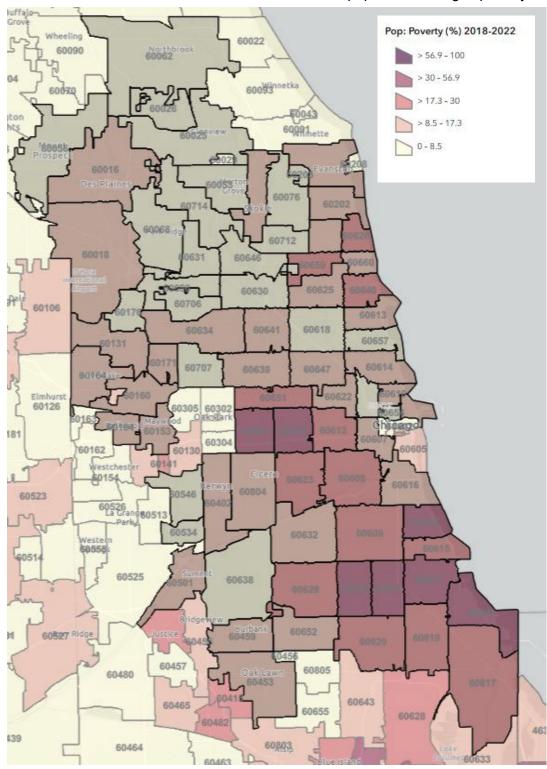


Figure 31: Population living in poverty by zip code - Cook County area, with Erie zip codes outlined. Darker red/purple represents a higher concentration of residents in poverty. Source: GeoCare Navigator

There are also pockets of poverty in Lake County. Among the 8 zip codes in Erie's Northern Lake County region of the service area, one (60064 or North Chicago) has nearly 25% of its population living in poverty and 4 others have between 8.5% and 17.3% of their populations living in poverty.

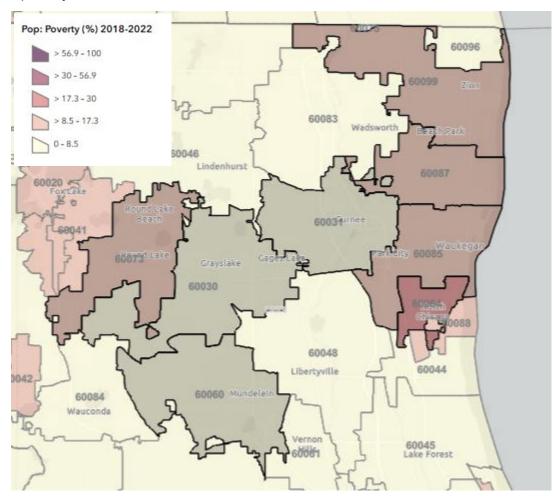


Figure 32: Population living in poverty by zip code – Lake County area, with Erie zip codes outlined. Darker red/purple represents a higher concentration of residents in poverty. Source: GeoCare Navigator

Low-Income Population by Zip Code

In the Cook County portion of the service area, 11 of 76 zip codes have 45.9% or more of their population who are considered low-income (living below 200% FPL). Another 21 zip codes have between 31.4% and 45.9% of their population who are considered low-income.

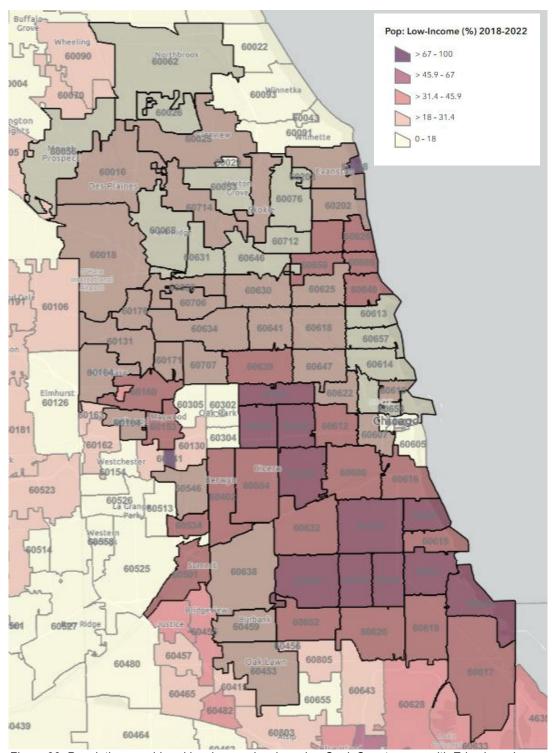


Figure 33: Population considered low-income by zip code - Cook County area, with Erie zip codes outlined. Darker red/purple represents a higher concentration of residents who are considered low-income. Source: GeoCare Navigator

Several zip codes in Lake County have large proportions of low-income residents. One service area zip code (60064, or North Chicago) has 50% of its population considered low-income (below 200% FPL) and 3 others have between 31.4% and 45.9% who are considered low-income.

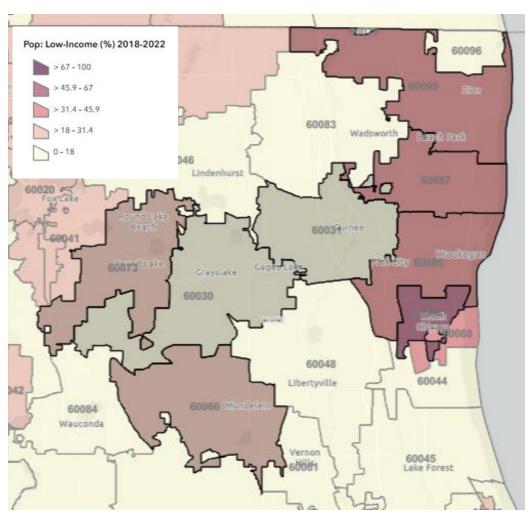
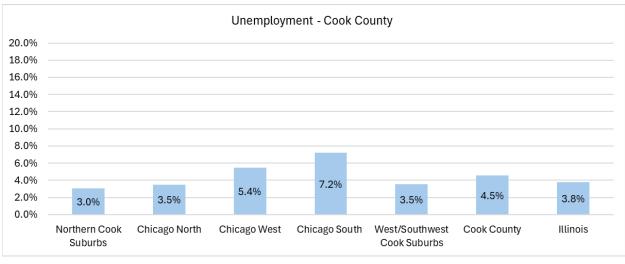


Figure 34: Population considered low-income by zip code – Lake County area, with Erie zip codes outlined. Darker red/purple represents a higher concentration of residents considered low-income. Source: GeoCare Navigator

Unemployment

According to the City Health Dashboard, as of June 2024, 7.1% of Chicago's labor force is unemployed. This compares unfavorably to other cities; among all City Health Dashboard cities across the country, an average of 4.4% of the labor force is unemployed. Other Dashboard cities in the service area have unemployment rates comparable or better than Chicago, but still worse than the national average, including Berwyn (7.1%), Oak Lawn (6.5%), Cicero (6.4%), Waukegan (6.4%), Skokie (5.8%), Evanston (5.7%), Des Plaines (5.4%), and Mount Prospect (5.3%).

Unemployment rates vary substantially within the Erie service area. The graphs below show the total unemployed population over age 16 years by region, including those not in the labor force, which ranges from 3% to more than 7% depending on the region. It should be noted that this data is from the 2019–2023 ACS 5-year estimates and therefore includes 2 years (2020 and 2021) during the COVID-19 pandemic, which caused a dramatic increase in unemployment.



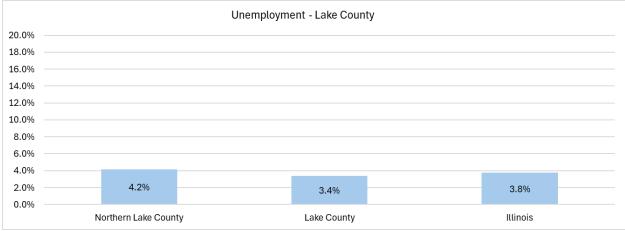


Figure 35: Percent population by Federal Poverty Level by Erie service area region in Cook County, compared to Cook County and Illinois (top) and in Erie's Northern Lake County region, compared to Lake County and Illinois. Please note data is from 2019-2023 ACS 5-year estimates and therefore includes the years 2020 and 2021, when the COVID-19 pandemic dramatically increased unemployment.

It is important to note that the City Health Dashboard data is just of the labor force, meaning those who are either working or actively looking for work, while the unemployment numbers in the previous charts also consider those who are not in the labor force. Individuals who are not in the labor force include students, stay-at-home parents or other unpaid caregivers, retired individuals, discouraged workers not looking for work, seasonal workers not looking for offseason work, those who cannot work due to disability or illness, and those who are incarcerated.

There are also notable differences across communities in terms of the size and composition of the labor force. For example, in Chicago West and Chicago South, more than 10% of young people aged 16-19 are neither enrolled in school nor working, while only between 3% and 7% of other regions' youth are neither in school nor working.⁶

Among community survey respondents, nearly two-thirds (64%, or 48/75) reported being employed full-time, while 15% (11/75) have part-time or temporary work and 1% (1/75) have their own company. Another 11% (8/75) reported not seeking work due to being a student, retired, disabled, or an unpaid primary caregiver. However, another 9% (7/75) reported being unemployed and seeking work. When asked for the top 3 health or social services that the community needs more of, 16% of respondents (11/68) included employment services in their top 3.

Food Insecurity and Basic Needs

Food insecurity is one of the most critical basic needs challenges in the service area. According to the 2024 Greater Chicagoland Hunger Report, 35% of households in their Chicago, Northern Illinois, and Northwest Indiana catchment area cannot afford the basic cost of living in their county. There were 57% more household visits to local food pantries and free grocery programs in FY24 compared to in FY20, and 21% of households with children in the Chicago Metro area were food insecure during the 2nd quarter of 2024 — similar to levels during the early months of the COVID-19 pandemic.⁷

Across the service area, food access and insecurity varies by region. As shown on the table on the following page, 4 regions exceed the state or nation for proportion of households receiving Supplemental Nutrition Assistance Program (SNAP) benefits, formerly known as food stamps. Roughly 1 in 4 Chicago West and Chicago South households receive SNAP benefits (24.6% and 28.1%, respectively), and roughly 1 in 7 West/Southwest Cook Suburbs and Northern Lake County households receive SNAP benefits (14.9% and 14.4%, respectively).

These areas with a high concentration of SNAP recipients can be seen on the adjacent maps, where the darkest red census tracts are those with the highest proportion of households receiving SNAP benefits.

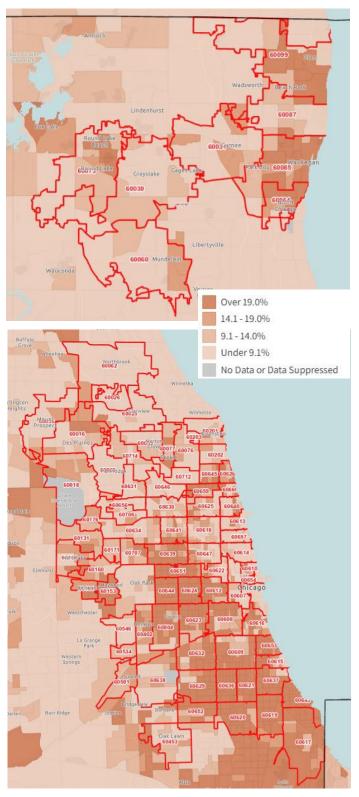


Figure 36: Percent of households receiving SNAP benefits by census tract, in Lake County (top) and Cook County (bottom), with Erie zip codes outlined. Source: ACS 2019-2023 5-year estimates viaSparkMap.

For other food access measures, neither Chicago West, Chicago South, nor Chicago North fare particularly poorly, though many data measures may not effectively capture food access in dense urban areas. These measures highlight some of the geographic food access barriers that instead exist in the suburbs. For example, among Cook County regions, the Northern Cook Suburbs and West/Southwest Cook Suburbs have the 2 highest rates of fast-food restaurants per 100,000 population and highest percentage of census tracts that are food deserts. They also have higher rates of low food access, defined as living more than 1 mile (urban) or 10 miles (rural) from the nearest supermarket, supercenter, or large grocery store. Please note that part of this may be due to the high population density of the Chicago regions of the service area. For example, Chicago West has numerous fast-food restaurants, but due to the very high population density, these are a lower rate per 100,000 than in some of the suburban areas.

					West/			
	Northern				Southwest	Northern		
	Cook	Chicago	Chicago	Chicago	Cook	Lake		
	Suburbs	North	West	South	Suburbs	County	Illinois	US
Households receiving SNAP	7.8%	9.4%	24.6%	28.1%	14.9%	14.4%	13.5%	11.8%
Fast food restaurants	98.8	82.0	69.8	77.5	87.5	81.4	82.8	80.0
Food desert census tracts	19.0%	0.0%	0.0%	4.1%	16.8%	52.3%	10.7%	14.5%
Low food access	6.4%	0.0%	0.0%	1.9%	6.4%	30.6%	20.2%	22.2%

Figure 37: Select food access indicators by Erie service area region compared to Illinois and US. Source: USDA 2019, US Census Bureau 2022, and ACS 2019-2023 via SparkMap

The Northern Lake County region faces the most significant food access challenges. More than half the census tracts in the region (52.3%) are considered food deserts, and more than 30% of residents have low food access, well above the 20.2% in Illinois and 22.2% nationally.

In Erie's patient and community survey, affording food and other basic needs was a challenge for many respondents. When asked if, in the last year, they or a household member were unable to get or afford something when it was really needed, 17% (13/77) said they were unable to access food and 19% (15/77) said they were unable to access utilities. Other basic needs that survey respondents were unable to access included internet (10% or 8/77), clothing (9% or 7/77), and phone (8% or 6/77).

Food insecurity and access also was discussed in more than half (5/8) of the focus group and interview conversations. Experts noted that there are not sufficient healthy food options in many communities, with mostly fast food, convenience stores, or other places that characterize "food swamps," where food access exists but healthy options do not. One interview subject shared that there are no sit-down restaurants of any kind in his community of Garfield Park, in Chicago West. This reinforces that many communities in Chicago West are not necessarily considered "low food access" or "food deserts" by some of the metrics above, but they still have poor access to nutritious food. Several other experts desired more access to food pantries, community diners, and funding for food distribution to combat rising food insecurity.

D. Education Access and Quality

Education Access and Quality

The service area has slightly lower rates of educational attainment than Cook County or Lake County. Nearly 14% of all individuals age 25 years and older in the service area have not completed high school, compared to Cook County, where 12% of adults lack a high school diploma or Lake County, where 10% lack a high school diploma. On the other end of the spectrum, while 42% of Cook County and 47% of Lake County residents have a bachelor's degree or higher, only 41% of service area residents have this level of education.

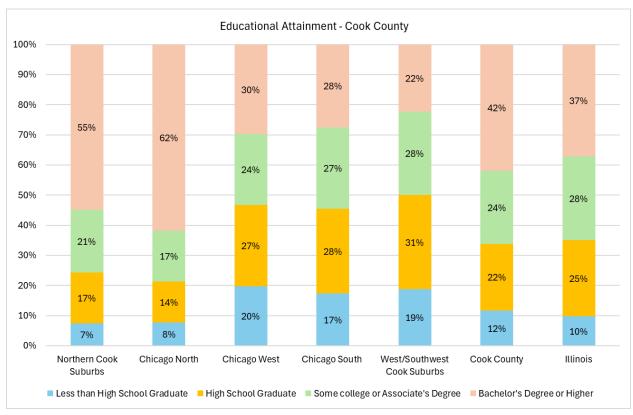


Figure 38: Educational attainment of individuals age 25 and older by Erie service area region in Cook County, compared to Cook County and Illinois.

Substantial variation and disparities can be seen across regions of the service area. Three regions have much lower educational attainment than Cook County: Chicago West, Chicago South, and West/Southwest Cook Suburbs. In these regions, between 17% and 20% of residents lack a high school diploma, much more than the 12% in Cook County and 10% in Illinois. Another 27% to 31% of residents of these regions have a high school diploma, but no further education, above the 22% in Cook County and 25% in Illinois with this level of education. Only 22% to 30% of residents of these three regions have at least a bachelor's degree, well below the 42% in Cook County and 37% in Illinois.

Several individual zip codes in these regions have particularly alarming educational attainment numbers. Rates of individuals without a high school education are as high as 32% in 60804 (Cicero, in West/Southwest Cook Suburbs) and 31% in 60501 (Summit Argo, in West/Southwest Cook Suburbs), 60639 (Belmont Cragin/Hermosa, in Chicago West), 60623 (North and South Lawndale, in Chicago West), and 60632 (Archer Heights/Brighton Park, in Chicago South). Rates of bachelor's degrees or higher are as low as 11% in 60804 (Cicero, in West/Southwest Cook Suburbs), 60644 (Austin, in Chicago West), and 60636 (West Englewood, in Chicago South).

Two other regions have extremely high educational attainment. In the Northern Cook Suburbs, 55% of the population over age 25 has a bachelor's degree or higher, much more than the 42% in the county or 37% in the state. Chicago North has an even more educated population, with 62% of residents having at least a bachelor's degree. These regions also have much smaller proportions of their residents with only a high school diploma or with less than a high school diploma.

In the Northern Lake County region, educational attainment is lower than Lake County as a whole. Only 31% of residents have a bachelor's degree or higher, compared to 47% in the county overall, and 16% have less than a high school diploma, approaching double that of that county (8%). Northern Lake County's educational rates are more comparable to those in Chicago West, Chicago South, and West/Southwest Cook Suburbs, pointing to the considerable educational needs even outside of Cook County.

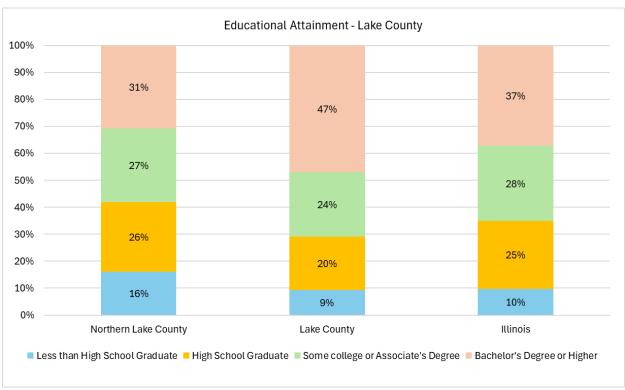


Figure 39: Educational attainment of individuals age 25 years and older in Erie's Northern Lake County region, compared to Lake County and Illinois.

Respondents to the community survey had a slightly higher educational attainment to the overall communities. More than half (53% or 40/75) have a bachelor's degree or higher, compared to 41% in the service area. Only 5% of respondents (4/75) reported having less than a high school diploma, below the 14% of the full service area. Another 16% (12/75) had a high school diploma or GED but no more, slightly below the 23% in the service area. Though not about formal general education, health education was important to survey respondents, with 23% (16/75) selecting health education as one of the top 3 health or social services that the community needs more of. Other assessments in the area have prioritized education and health education; for example, CCDPH's WePlan 2025: Community Health Assessment & Community Health Improvement Plan for Suburban Cook County, Illinois included in its 3 priorities "advance inclusive and healthy education and economic opportunities for all."

E. Neighborhood and Built Environment

Transportation

The Chicago Transit Authority (CTA) public transit system, Metra commuter rail system, and several major expressways are all important transportation assets in the service area. Despite this infrastructure, transportation remains a persistent barrier for some populations. Low-income residents often cannot afford the high costs of car ownership, and seniors are often unable to drive or do not feel safe doing so at night. Immigrant families may have their ability to travel limited by language barrier, acculturation issues, or fear of being pulled over by police. Community violence can further make travel challenging.

As seen on the adjacent maps, public transit is not always a viable alternative to driving. These maps show the distance to the nearest transit stop by census block group. Most census block groups in the Northern Lake County portion of the service area (top map) are more than one-quarter, one-half, or three-quarters of a mile from a transit stop.

Transit access is much better in Cook County. However, while most census block groups in the Chicago North, Chicago West, and even Chicago South regions are within one-quarter of a mile of a transit stop, some pockets in the West/Southwest Cook Suburbs and Northern Cook Suburbs exceed half or even three-quarters of a mile from a transit stop.

Interview subjects and focus group participants also saw transportation as both an asset and a barrier. Some highlighted parts of the service area that are transit rich, such as the Chicago West region, but also noted that challenges still remain in getting to locations that are not on subway lines or major bus lines. Four conversations brought up transportation as a barrier to accessing major healthcare, particularly in Lake County. Similarly, nearly one-quarter of survey respondents (22% or 15/68) selected lack of transportation as one of the top 3 things that keep people from seeing a healthcare provider, and 12% (8/68) selected it

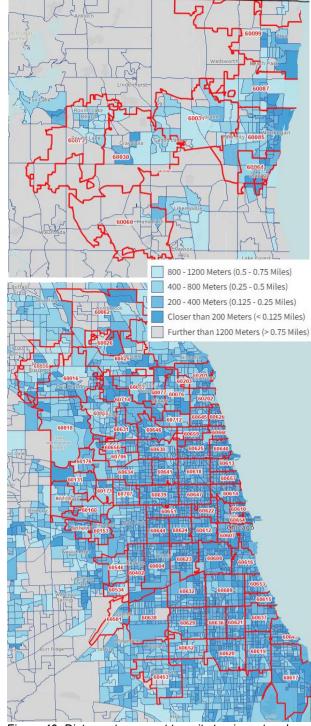


Figure 40: Distance to nearest transit stop in meters by census block group, 2021, in Lake County (top) and Cook County (bottom), with Erie zip codes outlined. Source: EPA via SparkMap.

as 1 of the top 3 things keeping people from mental health care. Additionally, 13% of respondents (10/77) said that in the last year they were unable to get transportation when it was needed.

Housing Cost Burden

Housing burden, instability, and homelessness are significant problems within the service area. Nearly 28% of all service area homeowners and more than 45% of all service area renters are considered housing cost-burdened, spending more than 30% of their income on housing. This is on par with Cook County, where 27% of homeowners and 45% of renters are cost-burdened, and also on par with Lake County for renters, of whom 45% are cost-burdened, though only 22% of Lake County homeowners are cost-burdened.

Three service area regions (Chicago West, Chicago South, and West/Southwest Cook Suburbs) exceed Cook County for housing cost-burdened homeowners, with between 29% and 32% of all homeowners being cost-burdened. The other 2 regions, Northern Cook Suburbs and Chicago North, still have cost-burdened homeowner rates that approach that of Cook County and that well-exceed Illinois. At the individual zip code level, several zip codes have a full 40% of all homeowners who are housing burdened, specifically 60621 and 60636 (Englewood and West Englewood) in Chicago South, and 60644 (Austin) in Chicago West.

For renters, housing burden rates are even higher. Only Chicago North, at 40%, is below the county or state average for housing cost-burden among renters. The other 4 regions all have higher proportions of housing burdened renters than either the county or state. In Chicago South, a majority (51%) of all renters are housing cost-burdened, spending more than 30% of their income on housing. Several individual zip codes have more than 60% of their renters who are cost-burdened, including 60636 (West Englewood in Chicago South, at 61%), 60624 (Garfield Park, in Chicago West at 61%), 60104 (Bellwood, in West/Southwest Cook Suburbs at 61%), and 60652 (Ashburn in Chicago South, at 65%).

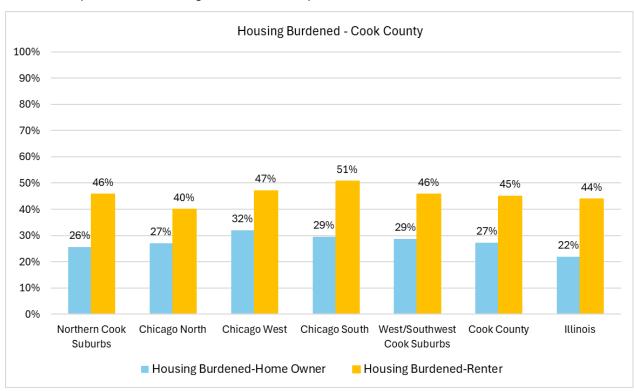


Figure 41: Housing cost-burden for home owners and renters by Erie service area region in Cook County, compared to Cook County and Illinois.

Housing cost-burden in Erie's Northern Lake County region is comparable to that of both Lake County as a whole and the state of Illinois. Individual zip codes, however, may exceed this; for example, 60099 (Zion) has more than half its renters (51%) that are housing cost-burdened.

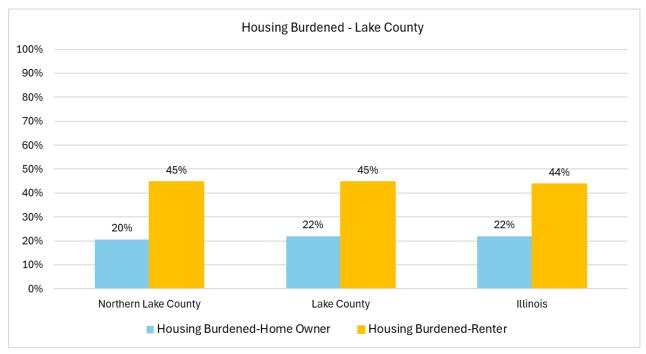


Figure 42: Housing cost-burden for home owners and renters in Erie's Northern Lake County region, compared to Lake County and Illinois.

Housing and housing costs were among the top challenges noted in focus groups and interviews, with half of all conversations (4/8) highlighting housing. Several discussed the lasting impact of the Great Recession in 2008-2009, when a large amount of the housing stock was demolished in many communities. A few noted that there has been more investment in previously disinvested Chicago communities. That has increased people's property values, which can be a good thing for homeowners. However, others expressed concerns regarding rising home prices on displacement and ongoing gentrification. They worried whether seniors and low-income homeowners would be able to keep their homes.

Among survey respondents, more than 97% of those responding said they currently had housing (60% or 43/72 owning and 38% or 27/72 renting), and only 2 respondents said they did not have stable housing. Despite this, housing stability is a huge concern: 50% of respondents (36/72) reported that in the past 5 years, they worried about paying their housing costs, eviction, or foreclosure.

Housing affordability also has been a priority in a number of community health improvement plans across the service area. The Village of Skokie's 2022-2027 Skokie Community Health Improvement Plan included among its 3 priorities "affordable housing." Housing was also the top priority for the North Lawndale community on Chicago's West Side, where nearly 25% of respondents to a survey conducted by Sinai Community Institute prioritized housing instability as 1 of their top 3 community health needs. 10

Crowded Housing

Some communities have larger average household sizes than others. This can be a risk factor for crowded housing, defined by the US Census Bureau as occupied housing units with more than 1 person per each room in the house (e.g., 3 occupants in a 1-bedroom apartment). As illustrated in the graphs below, all 6 service area communities have a higher percentage of crowded housing units than Cook County (2.5%) or Lake County (2.7%). Four regions have more than 3.5% of their occupied housing units considered to be crowded housing: Chicago South (3.8%), Northern Lake County (4.1%), West/Southwest Cook Suburbs (4.5%), and Chicago West (4.8%).



Figure 43: Percent of occupied housing units considered to be crowded housing by Erie service area region in Cook County, compared to Cook County and Illinois (top) and in Erie's Northern Lake County region, compared to Lake County and Illinois.

Safe, Lead-Free Housing

Access to housing that is free of lead or other toxins is another challenge in the service area. According to the City Health Dashboard, 45.3% of Chicago's housing in 2022 had potential elevated lead risk. This is nearly twice the level across all Dashboard cities, where the average was 25%. Other service area municipalities have rates of housing with potential lead risk that exceed Chicago's, including Evanston (46.6%), Berwyn (61.9%), and Cicero (63%). Even the municipalities with lower rates of housing with lead risk than Chicago are still elevated compared to other Dashboard cities around the country, including Skokie (36.8%), Waukegan (31.9%), Des Plaines (28.2%), Oak Lawn (26.4%), and Mount Prospect (25.1%).

The adjacent census tract—level map shows where there are higher rates of housing with elevated lead risk. As can be seen, many of these darker blue areas are on the west and northwest sides of the city, in communities served by Erie.

The issue of access to safe housing was also brought up in qualitative conversations. One interview subject noted that many houses in Chicago beautiful from outside but are starting to fall apart on the inside, and that lead in housing can be an overlooked risk. Not only is this a risk for the children and pregnant people who live in these homes, but it can put construction workers and others at occupational risk of lead exposure if they work in these homes.

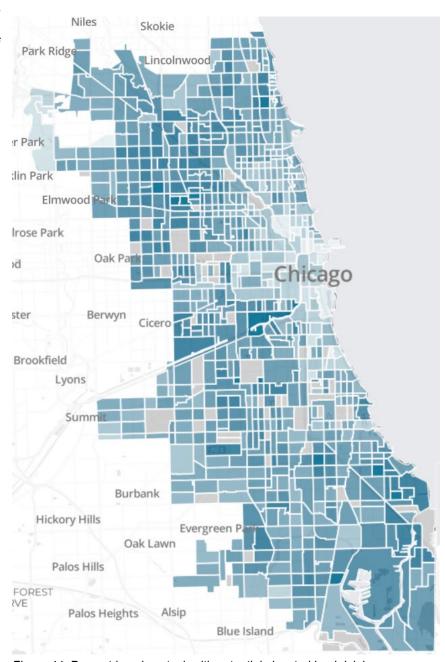


Figure 44: Percent housing stock with potential elevated lead risk by census tract, 2022. Darker blue indicates a higher proportion of homes at potential elevated lead risk. Source: City Health Dashboard

Homelessness and Transience

Homelessness and transience are persistent challenges in the service area. According to a 2024 report by the Chicago Coalition for the Homeless, there were approximately 76,375 people experiencing homelessness of different types in Chicago in 2022. The report defines homelessness broadly as "a situation where a person does not have a fixed, regular, and adequate nighttime residence" with some critical caveats. Specifically, "doubling-up," or temporarily staying at another person's residence, is not always counted in homelessness data but is the most common way that people in Chicago experience homelessness. Per the report, 31,333 Chicagoans experienced street or shelter homelessness in 2022 and 45,042 experienced homelessness by doubling up. Another 5,501 new Chicagoans were seeking asylum and residing in temporary shelters. ¹¹

For an estimate of people experiencing homelessness on a given day, the City of Chicago 2024 Homeless Point-in-Time (PIT) Count estimated a total of 18,836 people experiencing homelessness on a given day. The 2024 count identified 17,202 individuals residing in emergency shelters, transitional housing programs, and Safe Havens, including 3,523 non-New Arrivals and 13,679 New Arrivals, as well as 1,634 people experiencing street or unsheltered homelessness. This is a huge increase from previous years (6,139 total homeless in the 2023 PIT Count), primarily due to New Arrivals from the southern border. However, non-New Arrivals, both sheltered and unsheltered, also grew substantially in 2024 as pandemic supports have expired. ¹²

PIT COUNT: TOTAL ESTIMATE OF PEOPLE COUNTED, 2015-2024

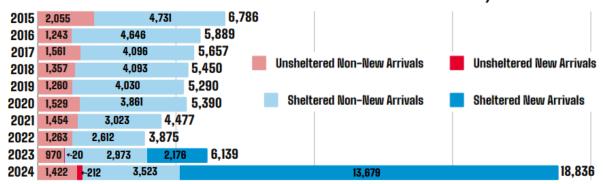


Figure 45: City of Chicago Point-in-Time (PIT) Count estimates over 10 years, 2015-2024, showing substantial increase in homelessness, especially from New Arrivals. Source: City of Chicago DFSS 2024 Snapshot of Homelessness accessed at https://www.chicago.gov/city/en/depts/fss/provdrs/emerg/svcs/PITcount.html

In suburban Cook County, 1,188 individuals were identified as experiencing homelessness in the 2024 PIT Count, slightly above the 1,056 identified in 2023 and 1,096 identified in 2022. In the Waukegan/North Chicago, Lake County PIT Count, 705 individuals were identified as experiencing homelessness, up substantially from 467 in 2023 and 431 in 2022. ¹³

Physical Environment

The physical environment is considered one of the determinants of health, including safe water and clean air, healthy workplaces, and safe houses, communities, and roads. ¹⁴ Some elements of the physical environment, such as parks and green spaces, can have protective effects on health while others, such as environmental toxins and pollutants, can have harmful effects.

In the Erie service area, several indicators around environmental hazards are elevated. All regions have higher air toxics cancer risk compared to the state or nation, which is the estimated lifetime inhalation cancer risk from carcinogens in the ambient outdoor air (in persons per million lifetime). Similarly, most of the regions have an elevated respiratory hazard index, which shows the potential for noncancer adverse health effects; although values below 1.0 indicate adverse health effects are unlikely and all regions are below this threshold, all Cook County regions exceed Illinois and the US. In addition, there are more hazardous waste management facilities within 10 kilometers in all 5 Cook County regions compared to the state or nation.

					West/			
	Northern				Southwest	Northern		
	Cook	Chicago	Chicago	Chicago	Cook	Lake		
	Suburbs	North	West	South	Suburbs	County	Illinois	US
Air Toxics Cancer Risk	32.2	31.9	32.1	33.3	35.0	36.5	28.5	28.8
Air & Water Quality - Respiratory								
Hazard Index	0.3	0.4	0.4	0.4	0.4	0.2	0.3	0.3
Environmental Justice - Hazardous								
Waste Proximity	6.6	5.6	8.9	5.9	9.6	2.3	3.6	3.5

Figure 46: Select environmental indicators by Erie service area region compared to Illinois and US. Please note that while the Respiratory Hazard Risk exceeds the state and nation in all regions, only values above 1.0 are considered likely to cause adverse health effects. Source: EPA 2022 via SparkMap

According to the Chicago Health Atlas, many census tracts within the city of Chicago portion of the service area score extremely high on the Chicago Environmental Justice Index, a composite score of cumulative impacts reflecting communities most burdened by pollution and most vulnerable to its effects. As can be seen on the adjacent map, many communities in Chicago West and Chicago South are highly burdened by pollution, shown in darker blue.

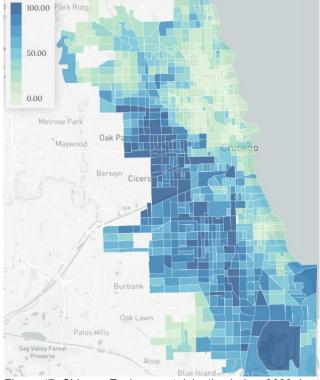


Figure 47: Chicago Environmental Justice Index, 2023, by census tract in Chicago. Darker blue indicates higher pollution burden. Source: Chicago Health Atlas.

Violence

Per the Chicago Health Atlas, many community areas in the Chicago West and Chicago South regions of the Erie service area have homicide rates of 4-5 times the overall citywide homicide rate of 21.4 per 100,000. As shown on the community area-level map below on the left, these community areas, indicated in the darkest blue, include Englewood (105.5), Greater Grand Crossing (90.1), West Garfield Park (87.6), West Englewood (85.4), North Lawndale (83.5) Roseland (82.4), and Auburn Gresham (79.6). Firearm-related homicides specifically are elevated in these same areas.

As shown on the community area-level map to the right, violent crime, which is inclusive of homicide as well as nonfatal criminal sexual assault, robbery, aggravated assault, and aggravated battery, is also elevated in many Erie communities in Chicago. This includes some of the same community areas as homicides, such as North Lawndale, Englewood, Greater Grand Crossing, and Auburn Gresham, as well as other communities in Erie's service area including Austin, Near West Side, South Lawndale, Humboldt Park, West Town, and Near North Side.

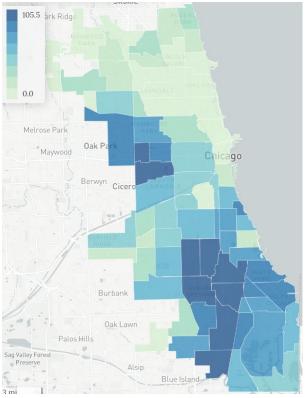


Figure 48: Age-adjusted rate of people who died due to homicide per 100,000 by Chicago community area, 2019-2023. Darker blue indicates higher homicide rate. Source: Chicago Health Atlas

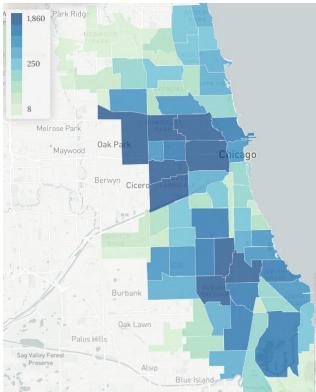


Figure 49: Number of violent crimes, including homicide, criminal sexual assault, robbery, aggravated assault, and aggravated battery by Chicago community area, 2024. Darker blue indicates higher number of crimes. Source: Chicago Health Atlas

Community violence can affect residents' sense of safety. The map on the top right shows the Chicago community areas that have the highest (blue) and lowest (light green) perceived neighborhood safety, meaning adults who report feeling safe in their neighborhood "all of the time" or "most of the time," per CDPH's 2023-2024 Health Chicago Survey. 15 These communities are nearly the inverse of the homicide and other violent crime maps, with much higher neighborhood safety in the Chicago North region and much lower in Chicago South and Chicago West. Likewise, the map on the bottom right shows the percent of suburban Cook County adults who feel safe in their neighborhood all or most of the time, with higher rates in many municipalities in Northern Cook Suburbs and slightly lower rates in some municipalities in the West/Southwest Cook Suburbs.

Violence and safety were concerns among participants in Erie's community survey. While most respondents (75%, or 57/76) said that they feel safe in their neighborhood and where they live, 11% (8/76) expressed that they do not feel safe in their neighborhood and where they live and 14% (11/76) were unsure. Additionally, 11% of respondents (8/75) said that in the past year they felt unsafe at home, such as being afraid of their partner or ex-partner. Furthermore, 13% of respondents (9/68) said that accident or injury was among the top 2 reasons people in the community see a provider, and 1% (1/68) said domestic violence was a top reason. When asked about health or social services the community needs more of, emergency shelter for survivors of domestic violence was in the top 3 for 6% of respondents (4/68).

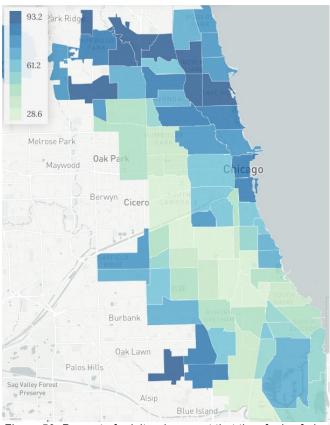


Figure 50: Percent of adults who report that they feel safe in their neighborhood all or most of the time, 2023-2024. Darker blue indicates higher perceived neighborhood safety while yellow indicates lowest perceived safety. Source: Chicago Health Atlas

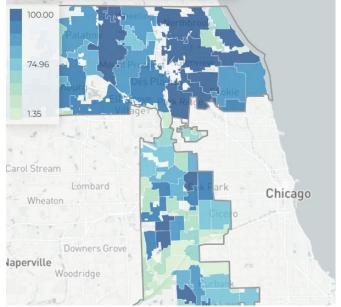


Figure 51: Percent of adults who report that they feel safe in their neighborhood all or most of the time, 2023. Darker blue indicates higher perceived neighborhood safety while yellow indicates lowest perceived safety. Source: Cook County Health Atlas

F. Health and Healthcare

Insurance Status

Despite expanded access to care due to the Affordable Care Act (ACA), insurance coverage remains a critical access barrier for much of the service area population. A full 10% of service area residents, or 373,037 individuals, remain uninsured as of 2022. By comparison, less than 9% of all Cook County residents, less than 7% of all Lake County residents, and exactly 7% of Illinois residents lack insurance.

Compared to Cook County, three regions have substantially higher rates of both uninsurance and needs-based public insurance like Medicaid or the Children's Health Insurance Program (CHIP): Chicago West, Chicago South, and West/Southwest Cook Suburbs. In these regions, between 11% and 12% of residents are uninsured and another 22% to 29% have Medicaid or other public insurance. As few as 59% of residents (in Chicago West) have private insurance or Medicare, compared to 72% in Cook County and 75% in Illinois.

Several individual zip codes in these regions have extremely high rates of uninsured residents, as high as 16% in 60131 and 60160 (West/Southwest Cook Suburbs), 17% in 60639 and 60651 (Chicago West), and even 18% in 606501 and 60804 (West/Southwest Cook Suburbs) and 60623 (Chicago West). Other zip codes have very high rates of Medicaid enrolled residents, with 44% of residents of 60621 (Chicago South) and 60624 (Chicago West) enrolled in Medicaid, and 45% of residents of 60644 (Chicago West). This reflects differences in eligibility for insurance products in these different zip codes based largely on immigration status.

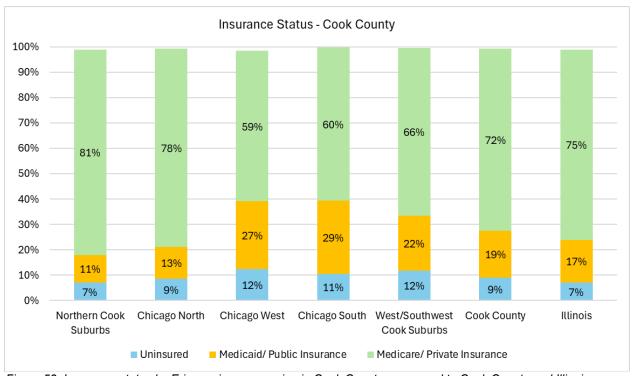


Figure 52: Insurance status by Erie service area region in Cook County, compared to Cook County and Illinois.

Two other Cook County regions show the opposite pattern. Chicago North is slightly better insured than Cook County, with a comparable number of uninsured residents, a slightly lower proportion of publicly insured residents, and a slightly higher proportion of privately insured residents. Northern Cook Suburbs has an even more well-insured population, with only 7% uninsured, 11% publicly insured, and 81% with Medicare or private insurance. Still, individual zip codes within

each region can have as much as 15% of their populations without insurance (60625 and 60641 in Chicago North and 60018 in Northern Cook Suburbs) and 31% of their population with Medicaid (60659 in Chicago North).

In the Northern Lake County region, 11% of individuals lack insurance and 19% are publicly insured, well above the rates for Lake County or Illinois. In 2 zip codes, 60064 (North Chicago) and 60085 (Waukegan), 18% of the population is uninsured.

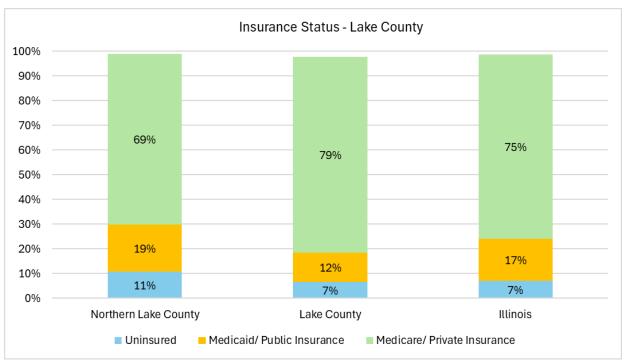


Figure 53: Insurance status in Erie's Northern Lake County region, compared to Lake County and Illinois.

Respondents to the community survey reflect this overall mix of coverage types. While the most common form of insurance among survey respondents was private employer-sponsored insurance (40% or 33/82), respondents also had private insurance through the ACA (2% or 2/82), Medicaid (18% or 15/82), Medicare (6% or 5/82), and HBIA/HBIS (1% or 1/82). Some respondents were uninsured and either pay on a sliding-fee scale at a health center (11% or 9/82) or full cost out of pocket (5% or 4/82).

In the past year, 29% of respondents (22/77) have had difficulty affording healthcare and 18% (14/77) have had difficulty affording medicine. These proportions are similar even among insured respondents. When asked about the problems they experience with their insurance, 31% of survey respondents (18/59) said it is confusing or hard to understand how to use their insurance; 26% (15/59) said monthly payments or bills from visits are too expensive; and 22% (13/59) said they can't see or afford specialists they want to see. In addition, 17% (10/59) said their plan doesn't cover the services they need (such as dental or mental health care); 14% (8/59) said medications they need are not covered or are too expensive; and 8% (5/59) said they can't see primary care providers they want to see.

The high cost of care, even if a person has insurance, is also a major concern for community members. When asked what keeps people in the community from seeing a healthcare provider, by far the top 2 selections were it's too expensive (72% or 49/68) and lack of health insurance (66% or 45/68). Costs and lack of insurance were also the top 2 things keeping people from seeking mental health care (46% or 31/68 apiece).

Insurance Policy Trends and Issues

Since 2013, Illinois has seen a large influx in individuals newly enrolled in insurance because of the ACA, both through the Marketplace and through expanded Medicaid enrollment. As of January 2025, Illinois has enrolled 3,191,264 individuals in Medicaid and CHIP, a net increase of 21.5% (564,321 individuals) since October 2013. ¹⁶

To further expand access and reduce the number of Illinoisans without insurance, in December 2020, Illinois launched a new health insurance benefits program — the 1st of its kind in the nation — to provide Medicaid-like coverage to low-income immigrant seniors age 65 and older who are undocumented or have been legal permanent residents for fewer than 5 years. ¹⁷ The HBIS initiative was successful enough that in 2021, the companion program, HBIA was added and eventually expanded to cover immigrant adults as young as age 42. However, in the State of Illinois' Fiscal Year 2026, the HBIA program was cut due to its high costs. This leaves immigrant adults previously served by the program between ages 42 and 64 without access to such coverage as of July 1, 2025. ¹⁸ Although some might be able to access employer-sponsored coverage, most people previously covered by the program will now be uninsured.

Some Illinois residents also have lost Medicaid coverage in recent years after the end of the continuous coverage requirement that had been in place during the COVID-19 Public Health Emergency. As of April 2023, Medicaid enrollees have needed to go through their state's redetermination process or face coverage termination, resulting in many individuals losing their Medicaid coverage. According to the KFF Medicaid Enrollment and Unwinding Tracker, as of January 2025, Illinois has 17% fewer Medicaid enrollees than in March 2023, though still more than pre-pandemic. 19

Additionally, other Illinois residents are currently at risk of losing their coverage. Illinois is one of the 9 states that has a Medicaid expansion trigger law, which would automatically end the state's ACA Medicaid expansion if Congress were to reduce the extra federal funding for this expanded group (the federal government currently covers 90% of the costs for the expanded group). In Illinois, this would amount to 900,000 residents at risk of losing their Medicaid coverage. ²⁰

Nearly all subject matter expert interviews and focus group conversations brought up the important of insurance coverage and raised grave concerns over the prospect of the community losing access to coverage. On the positive side, 2 conversations highlighted that more people have coverage today than a decade ago thanks to the ACA and programs such as HBIA and HBIS, and these experts shared how much people in their communities have valued that coverage and the access it provided. Three conversations also noted that Medicaid care coordination and insurance navigation support in the community has been strong and is an asset that organizations like Erie contribute to. Still, the most frequently mentioned concern in conversations (7/8) was the threat to insurance stability. Participants mentioned both cuts that are already happening, such as the end of HBIA and people who have lost coverage due to Medicaid redetermination, as well as cuts that may occur in the future, such as the threats to Medicaid in the federal budget reconciliation bill. Loss of coverage for immigrants is a particularly big program, with half (4/8) of conversations highlighting the imminent end of HBIA and several respondents expressing concern about the safety net's ability to absorb these individuals into their care and the possible increase in emergency department visits when people lose insurance. One expert also mentioned the challenge that providers face in communicating the situation appropriately to patients and making sure they are aware of instability or limitations in who the health center may take in the future without causing the patient to forego care entirely if they believe their medical home is closing or will no longer accept them.

Medically Underserved Areas and Medically Underserved Populations

Medically Underserved Areas (MUAs) and Medically Underserved Populations (MUPs) identify geographic locations or specific populations with a lack of access to primary care. Nearly all of Erie's Cook County zip codes are covered by 1 or more MUA/MUP designations. A few corners of the Northern Cook Suburbs and West/Southwest Cook Suburbs lack such a designation.

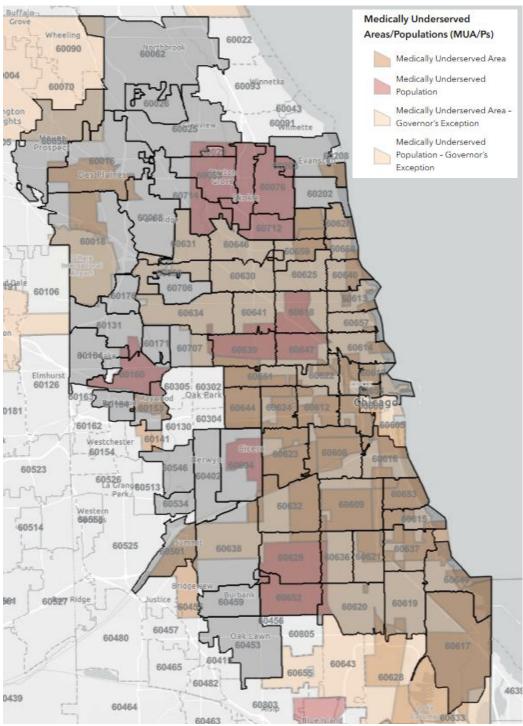


Figure 54: Medically Unserved Areas (MUAs) and Populations (MUPs) in the Cook County portion of the Erie service area. Source: GeoCare Navigator.

Although most of the Northern Lake County region is not designated as an MUA or MUP, Waukegan (60085), where Erie's clinic site is located, is considered an MUA, as are parts of several other zip codes. This demonstrates that there is still a geographic-based need in Lake County.

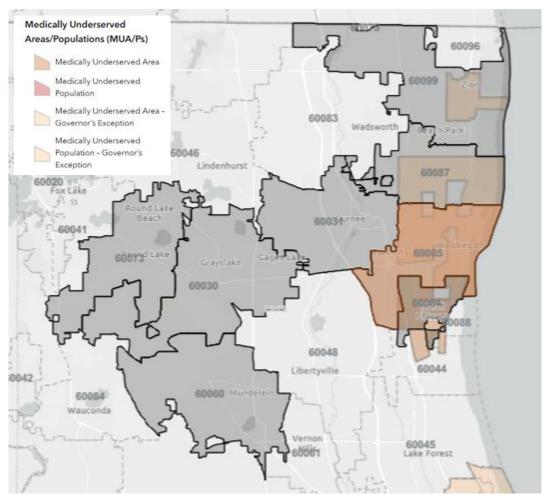


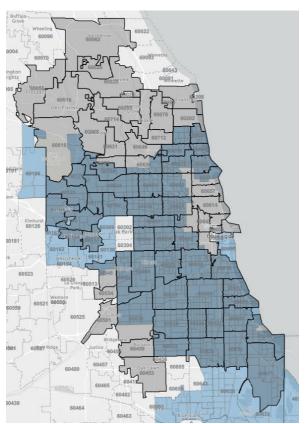
Figure 55: Medically Unserved Areas (MUAs) and Populations (MUPs) in the Lake County portion of the Erie service area. Source: GeoCare Navigator.

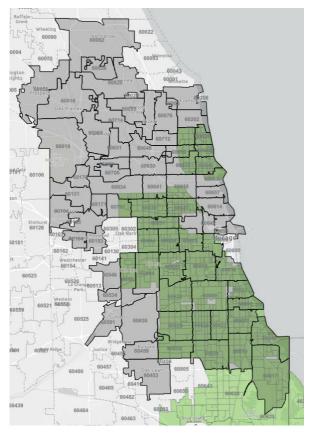
Health Professional Shortage Areas

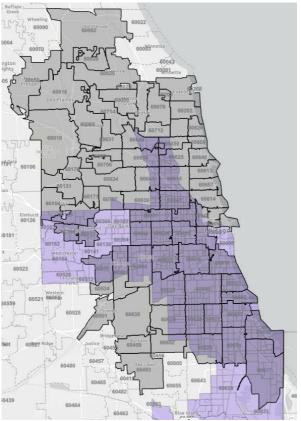
The Health Professional Shortage Area (HPSA) designation indicates a shortage of health professionals in primary care, mental health care, or dental care. In the Cook County portion of Erie's service area, numerous zip codes are considered primary care HPSAs (shown in green on the map at the top right), mental health HPSAs (in blue on the map at the bottom left), and/or dental HPSAs (in purple on the map at the bottom right). As can be seen, shortages in mental health professionals are particularly notable.

Regionally, the Northern Cook Suburbs is the only region with a small corner covered by HPSAs. Chicago North and West/Southwest Cook Suburbs are partially covered by different HPSAs. The remaining 2 regions, Chicago West and Chicago South, are mostly covered by 2 if not all 3 types of HPSAs, demonstrating the depth of health professional shortages in these regions.

Figure 56: Primary care HPSAs (top right), mental health HPSAs (bottom left), and dental HPSAs (bottom right) in the Cook County area, with Erie's service area zip codes outlined. Source: GeoCare Navigator







In Northern Lake County, most of the east half of the region is designated as both a primary care HPSA (green map on top) and dental HPSA (purple map in the center).

Interestingly, no zip codes within the Northern Lake County region are covered by an official mental health HPSA (map on the bottom). However, that does not mean there are no barriers to accessing a mental health professional. For example, this designation considers the total number of providers relative to the population size, but it does not consider what languages the providers speak, whether they have accessible hours of operations, or whether they accept Medicaid.

Responses to the community survey highlight the need for greater primary, mental health, and dental care. When asked about the top 3 health or social services the community needs more of, the top 2 selections were dental care (34% or 23/68) and counseling for mental health (34% or 23/68, with providers (doctors or nurses) a close 3rd at 29% (20/68).

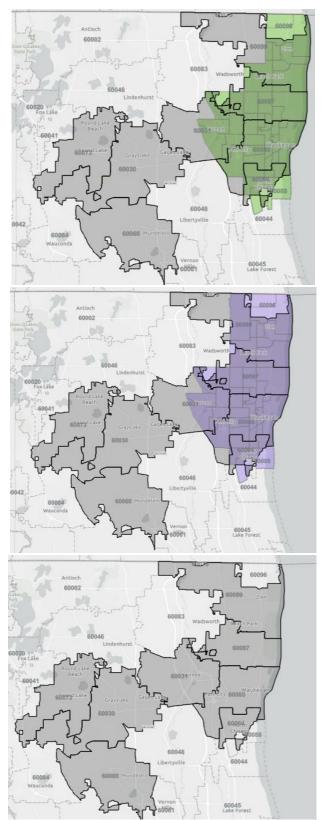


Figure 57: Primary care HPSAs (top), dental HPSAs (center), and mental health HPSAs (bottom) in the Lake County area, with Erie's service area zip codes outlined. Source: GeoCare Navigator

Other measures of healthcare workforce access do show a need for more mental health providers, as well as other provider types, in the Northern Lake County region and other regions. The table below shows the Centers for Medicare and Medicaid Services (CMS) data regarding total providers per 100,000 residents. As of May 2025, the Northern Lake County region was worse than the state or nation for number of mental health providers, dental health providers, or primary care providers per 100,000. Chicago South and West/Southwest Cook Suburbs fare even more poorly for mental health providers, with roughly half the mental health providers per capita of the state and nation. Chicago South also lacks sufficient dental health providers.

For addiction/substance use disorder service providers, all Cook County regions have fewer providers or a comparable number of providers per 100,000 than Illinois. Meanwhile, Northern Lake County has triple this ratio of addiction and substance use providers, exceeding even the national rate of 29.0. Still, it is unknown whether these providers accept Medicaid or uninsured patients or address the various other barriers that patients in that region face such as language or hours of operations.

Health Indicators	Northern Cook Suburbs	Chicago North	Chicago West	Chicago South	West/ Southwest Cook Suburbs	Northern Lake County	Illinois	US
Healthcare Workforce								
Access to Care - Addiction/								
Substance Abuse Providers	6.4	6.5	10.8	6.7	5.5	30.8	10.3	29.0
Access to Care - Mental Health								
Providers	595.2	559.4	383.9	174.6	175.2	272.6	330.9	319.1
Access to Care - Dental Health								
Providers	129.9	100.5	81.8	50.9	81.8	61.4	76.2	66.6
Access to Care - Primary Care								
Providers	237.6	212.3	351.8	131.9	158.5	106.4	131.3	116.6

Figure 58: Select healthcare workforce measures by Erie service area region compared to Illinois and US. Source: CMS, May 2025 via SparkMap

In addition to shortages of providers, qualitative feedback suggests that there is a shortage of flexible types of care offered at times that are convenient to the community. Half of all conversations (4/8) highlighted that hours of operations can be a major barrier for patients who work 2nd and 3rd shifts or who need childcare in order to access appointments. Long wait times, more demand than available services, and complex scheduling processes further compound the problem. Several interview subjects and focus group participants suggested that the community needs more drop-in, walk-in, or living room types of programs that accommodate unstable work schedules and childcare schedules, and that there is currently a lack of next day, same day, or urgent care options. One participant noted that the economic fragility in the community leads patients to need to pick up overtime shifts and cancel or no-show for appointments rather than miss out on much-needed income.

Community survey respondents shared these perspectives. When asked to select the top 3 things that keep people in the community from seeing a healthcare provider, 25% (24/68) selected cannot get time off work. Although 63% of respondents (43/68) said people generally prefer to schedule appointments, 7% (5/68) said they prefer to walk in and 26% (18/68) said either or it depends. Open ended survey feedback also indicated some respondents have a desire for Erie to have more immediate care capacity, overall capacity for sooner appointments, and better phone scheduling.

Unserved by Health Centers

Within the Erie service area, there are 1,183,548 low-income residents, of whom 650,949 are current patients of health centers within the Health Center Program (both Look-Alikes and award recipients) as of 2023. In 2024, Erie served 88,919 individuals who reside in this area, or 13.9% of all health center patients residing in the area in 2023. Erie was the dominant health center in 17 of the 84 zip codes.

The total health center penetration for all low-income individuals is 55%, leaving 532,597 low-income residents unserved by any health center. This represents an opportunity for all local health centers, including Erie, to help close the gap and reach these otherwise unserved residents. This also represents a challenge, with several subject matter expert interviews mentioning concerns about the overall capacity of the safety net or of health centers to meet ongoing and rising needs for care.

Region	Low- Income Populatio n 2018– 2022 5- Year Estimates	Total # Health Center Patients, 2023	Unserved Low- Income Populatio n	Health Center Penetrati on of Low- Income Populatio n	Erie Unique Patients, 2024	Erie Patients as % of All Health Center Patients
Northern Cook Suburbs	93,387	32,422	60,982	34.7%	8,718	27%
Chicago North	243,155	118,820	124,252	48.9%	30,555	26%
Chicago West	236,976	165,141	71,804	69.7%	23,545	14%
Chicago South	375,458	233,237	142,198	62.1%	8,481	4%
West/Southwest Cook Suburbs	144,515	62,193	82,373	43.0%	6,082	10%
Northern Lake County	90,057	39,136	50,882	43.5%	11,538	29%
Total	1,183,548	650,949	532,591	55.0%	88,919	14%

Figure 59: Low-income populations, health center patients, unserved populations, and Erie patients by region. Please note that Erie patients are 2024 data, while total health center patients in 2023 data and total low-income population is derived from ACS 2018–2022 five-year estimates. Sources: GeoCare Navigator and Erie's own UDS data

IV. Health Outcomes

As a result of these SDOH, the Erie service area population experiences disparities in numerous health indicators, including diabetes, cardiovascular disease, cancer, prenatal and perinatal health, and behavioral health. The following section details the population health status in the service area by examining the morbidity and mortality within each region.

To more fully describe the substantial and disproportionate impact of these health issues, this section also compares each of the 6 service area regions to the state and nation on these indicators. Indicators were obtained from SparkMap, which contains a variety of sources including but not limited to CDC Wonder and BRFSS.

When using data only available at a larger geographic level, such as county- or state-level data, this report uses an extrapolation method to estimate the percent of a population with a certain condition in each service area region. This methodology allows data only available at the state or county level to be reliably extrapolated down to a smaller geography. Extrapolations in this report were provided by SparkMap where available. Where not available, extrapolations were conducted by Leading Healthy Futures using a methodology recommended by HRSA. Data visualized on CDC PLACES maps were extrapolated by CDC PLACES. Please note that when county-level data is the smallest available, the 5 Cook County area regions are all extrapolated using Cook County data, while Northern Lake County is extrapolated using Lake County data.

Data are then compared to benchmarks such as national or state averages. In each of the tables that present this data, green highlights indicate the health indicator is better than both the state and national average; yellow highlights indicate health status is worse than one of the state or national averages; and red highlights indicate that health status is worse than both the state and national average.

A. Chronic Disease

Chronic diseases, such as diabetes and cardiovascular disease, are highly prevalent conditions and among the leading causes of death and disability nationwide. As seen in the table below, several risk factors for chronic disease, including obesity and physical inactivity, are more prevalent in the service area than in Illinois or the US. All 5 Chicago-area regions have self-reported physical inactivity levels among adults aged 20 and older that are above both the state and national averages. Chicago West, Chicago South, West/Southwest Cook Suburbs, and Northern Lake County also have elevated levels of adult obesity and every region except Northern Cook Suburbs has an elevated level of childhood obesity in children aged 6-17 years.

					West/						
	Northern				Southwest	Northern					
	Cook	Chicago	Chicago	Chicago	Cook	Lake					
Health Indicators	Suburbs	North	West	South	Suburbs	County	Illinois	US			
Chronic Disease (Adult Except Who	Chronic Disease (Adult Except Where Noted)										
Childhood Obesity (6-17)	15.3%	18.2%	22.8%	23.3%	21.7%	20.9%	17.0%	17.0%			
Obesity	27.2%	29.4%	38.5%	39.6%	35.6%	35.2%	34.3%	33.3%			
Physical Inactivity	21.1%	22.1%	20.7%	20.5%	20.4%	17.6%	19.6%	19.5%			
Cholesterol Screening (Past 5 Yrs)	85.9%	82.0%	79.0%	80.4%	81.5%	81.7%	83.4%	86.4%			
High Cholesterol	33.0%	27.1%	29.0%	30.3%	31.4%	31.2%	32.1%	35.5%			
High Blood Pressure	29.7%	23.9%	31.1%	35.3%	30.1%	29.4%	31.8%	32.7%			
High Blood Pressure											
Management	81.6%	74.3%	76.5%	79.7%	78.6%	75.9%	79.4%	78.2%			
Diabetes Prevalence	10.8%	8.7%	13.9%	15.5%	12.9%	13.0%	11.8%	12.0%			
Heart Disease	6.1%	4.4%	5.6%	6.1%	6.2%	5.8%	6.3%	6.8%			
Kidney Disease	2.9%	2.3%	3.1%	3.6%	3.0%	2.6%	3.1%	3.1%			
Asthma	8.4%	8.8%	10.2%	10.6%	9.5%	9.5%	9.5%	9.9%			
Stroke	3.0%	2.4%	3.9%	4.5%	3.5%	3.2%	3.4%	3.1%			
Mortality - Stroke	44.2	46.2	50.8	55.2	46.1	37.6	52.8	48.3			
Mortality - Heart Disease	186.8	192.4	195.0	206.5	184.2	155.7	209.1	207.2			
Mortality - Coronary Heart											
Disease	86.3	88.2	83.3	85.1	82.7	68.7	97.1	111.0			

Figure 60: Select chronic disease indicators by Erie service area region compared to Illinois and US. Source: National Survey of Children's Health, BRFSS, and CDC Wonder via SparkMap

Although fewer service area residents have been told they have high cholesterol compared to the state or nation in all regions but the Northern Cook Suburbs, fewer service area residents in all these regions have actually had cholesterol screening done in the past 5 years. This suggests that some individuals with high cholesterol may not be getting diagnosed in the service area.

In Chicago South, more adults have been told they have high blood pressure than in the state or nation, while all other regions have lower rates of high blood pressure than the state or nation. However, among those with a high blood pressure diagnosis, fewer report taking medication to manage their high blood pressure in Chicago North, Chicago West, and Northern Lake County.

Another key chronic disease that is elevated in parts of the service area is diabetes, which is much more prevalent in Chicago West (13.9%), Chicago South (15.5%), West/Southwest Cook Suburbs (12.9%), and Lake County (13.0%) compared to Illinois (11.8%) or the US (12.0%). Other chronic diseases with higher prevalence rates in parts of the service area include kidney disease, which is particularly elevated in Chicago South; adult asthma, which is particularly elevated in Chicago West, and Stroke, which is particularly elevated in Chicago West,

Chicago South, and the West/Southwest Cook Suburbs. Heart disease prevalence rates are better across the service area than in Illinois or the US as a whole.

Most of the service area fares better than Illinois or the nation on chronic disease mortality. A notable exception is that stroke mortality is elevated in Chicago South (55.2 stroke deaths per 100,000), and to a lesser extent Chicago West (50.8 stroke deaths per 100,000), compared to the state (52.8 per 100,000) and nation (48.3 per 100,000).

The maps below from CDC PLACES show the zip codes with increased stroke prevalence (yellow map to the left) and diabetes prevalence (pink map to the right). For both indicators, zip codes in Chicago South, Chicago West, West/Southwest Cook Suburbs, and Northern Lake County have higher prevalence rates, in some cases more than double that of zip codes elsewhere in the service area.

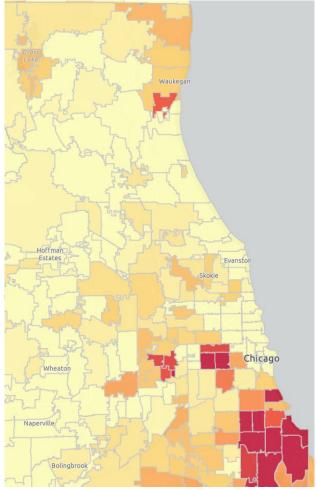


Figure 61: Stroke crude prevalence rate by zip code in entire service area. Red indicates higher stroke prevalence. Source: CDC PLACES

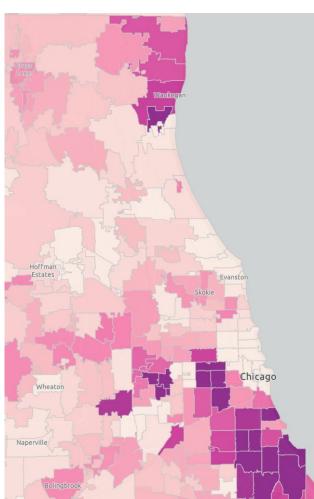


Figure 62: Diabetes crude prevalence rate by zip code in entire service area. Darker pink indicates higher diabetes prevalence. Source: CDC PLACES

City of Chicago hospitalization rates for chronic diseases also show similar patterns, with high rates of coronary heart disease hospitalization (left map) and diabetes-related hospitalization (right map) in the Chicago South and Chicago West regions in particular.

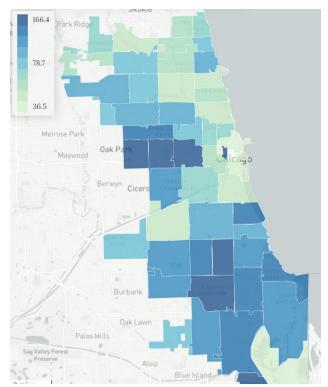


Figure 63: Age-adjusted rate of people hospitalized due to coronary artery disease in the city of Chicago by zip code, 2023. Darker blue indicates higher hospitalization rate. Source: Chicago Health Atlas.

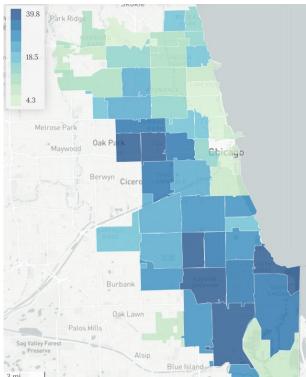


Figure 64: Age-adjusted rate of diabetes-related hospitalization discharges, excluding discharges to VA hospitals, in the city of Chicago by zip code, 2023. Darker blue indicates higher hospitalization discharge rate. Source: Chicago Health Atlas.

Chronic diseases such as diabetes, hypertension, and obesity were top health concerns among subject matter experts and focus group participants, with 5/8 conversations discussing this. Many would like to see more preventive care for these conditions and would like to see more focus on general primary care, wellness, physical activity, and food access work. A few conversations also mentioned chronic needs for older adults in particular, including dialysis, and the importance of wellness, prevention, and education on healthy aging.

Survey participants also indicated that chronic disease is 1 of the top reasons that people in the community see a healthcare provider, with 34% (23/68) selecting care for chronic conditions in their top 2.

B. Cancer

Cancer is among the costliest and most prevalent causes of death nationwide, and was the 2nd leading cause of death in Cook County pre-pandemic. ²¹ Early screening and treatment, changes to modifiable risk factors, such as nutrition and tobacco use, and addressing social barriers, such as poverty, can all help mitigate cancer incidence and mortality. The table below shows a variety of cancer indicators in the Erie service area, which present a somewhat mixed picture.

	Northern				West/ Southwest	Northern		
	Cook	Chicago	Chicago	Chicago	Cook	Lake		
Health Indicators	Suburbs	North	West	South	Suburbs	County	Illinois	US
Cancer								
Mammogram (Past 2 Yrs)	75.0%	75.2%	72.2%	73.6%	72.2%	73.2%	73.5%	76.5%
Cervical Cancer Screening	79.8%	80.1%	77.0%	78.4%	78.6%	80.2%	80.3%	82.8%
Sigmoidoscopy or Colonoscopy	62.0%	62.0%	51.3%	53.8%	54.2%	57.7%	55.4%	54.1%
Cancer Prevalence	8.5%	5.7%	4.5%	4.8%	6.3%	6.2%	7.6%	8.2%
Cancer Incidence - All Sites	418.0	427.2	433.3	435.9	430.8	442.9	459.2	444.4
Colon/Rectum Cancer Incidence	35.4	36.1	38.9	40.5	37.0	35.6	38.8	36.4
Lung Cancer Incidence	48.2	48.4	52.2	54.2	49.6	45.5	58.3	53.1
Cancer Mortality	158.4	163.4	162.2	168.8	157.0	162.8	187.8	182.7

Figure 65: Select cancer indicators by Erie service area region compared to Illinois and US. Source: BRFSS, CDC Wonder via SparkMap

Cancer screening rates are generally worse in the service area than in Illinois and the US. Cervical cancer screening rates are below the state and national average in every region of the service area, and mammogram rates are below the national average in every region and only above the state in three regions. The adjacent map from CDC PLACES visualizes the zip codes with lower mammography rates on Chicago West, Chicago South, West/South Cook Suburbs, and Northern Lake County.

The service area fares somewhat better on colon cancer screening rates, but still is worse than the state and nation in Chicago West and Chicago South as well as worse than the state and on par with the nation in West/Southwest Cook Suburbs.

Cancer prevalence, or the proportion of adults who report ever having been told by a health professional that they have cancer, is generally lower in the service area than in the state or nation, with only the northern Cook Suburbs having a higher cancer prevalence than either the state or nation. As with chronic disease, this combined with the generally lower screening rates suggests that it is possible some individuals have not been diagnosed with cancer due to not having been screened.

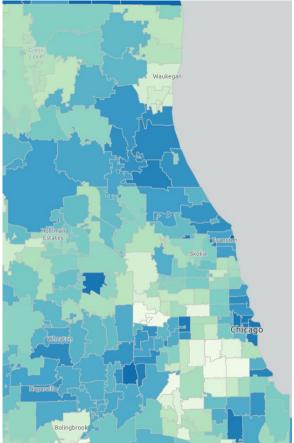


Figure 66: Mammography use crude prevalence rate by zip code in entire service area. Darker blue indicates higher mammography prevalence while yellow indicates gaps in mammography use. Source: CDC PLACES

Compared to the state and nation, the service area also has lower all site cancer incidence per 100,000 in all regions, and lower lung cancer incidence in all but 1 region. Colon and rectum cancer incidence is elevated in Chicago West, Chicago South, and West/Southwest Cook Suburbs, but better in the other regions.

Despite the lower screening rates and slightly mixed prevalence and incidence rates, the service area has lower cancer mortality rates than the state or nation. However, at the zip code or community level, disparities still exist. The maps below show cancer-related hospitalization rates by zip code (left) and cancer mortality rates by community area (right) in the city of Chicago. As with some other indicators, many of the most heavily impacted communities are in the Chicago West and Chicago South regions of the service area.

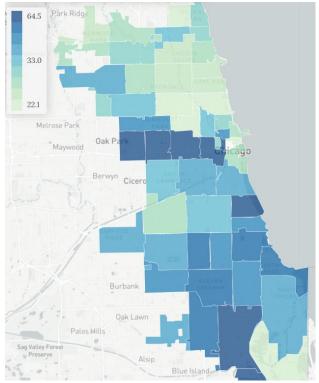


Figure 67: Age-adjusted rate of cancer-related hospitalization discharges, excluding discharges to VA hospitals, in the city of Chicago by zip code, 2023. Darker blue indicates higher hospitalization discharge rate. Source: Chicago Health Atlas.

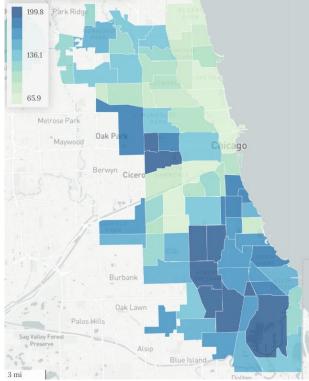


Figure 68: Age-adjusted rate of people who died due to cancer in the city of Chicago by community area, 2019-2023. Darker blue indicates higher mortality rate per 100,000. Source: Chicago Health Atlas.

C. Prenatal and Perinatal Health

As a leading provider of maternal and child healthcare, with a delivery volume in the top 5 of more than 1,400 community health centers nationwide, and #1 for newborn delivery volume among health centers in Illinois, prenatal and perinatal indicators are of great importance to Erie. The Chicago West and Chicago South regions of the service area experience poor prenatal and perinatal health outcomes. Low birth weight births and infant mortality are both elevated in both regions. Rates of births to teenage mothers is especially elevated in Chicago South, and somewhat elevated in Chicago West. The West/Southwest Cook Suburbs also have somewhat elevated teen birth rates and infant mortality, though with lower rates of low birth weight births. Focus group participants with expertise in maternal and child health highlighted some of the unique needs that teen mothers face, such as challenges accessing and taking prenatal vitamins, late entry to prenatal care, and transportation barriers to ongoing prenatal care.

Health Indicators	Northern Cook Suburbs	Chicago North	Chicago West	Chicago South	West/ Southwest Cook Suburbs	Northern Lake County	Illinois	US
Prenatal/Perinatal Health								
Teen Births	7.1	7.7	14.2	17.4	13.5	12.1	13.5	15.5
Low birth weight	8.1%	8.0%	9.5%	10.5%	8.0%	8.2%	8.5%	8.4%
Birth Outcomes - Infant Mortality	3.9	4.3	6.5	7.7	5.9	5.0	6.0	5.6

Figure 69: Select pre and perinatal indicators by Erie service area region compared to Illinois and US. Source: CDC Wonder via SparkMap

Severe maternal morbidity-related hospitalizations in Chicago and maternal care-related inpatient hospitalizations in suburban Cook County are shown on the zip code maps below. Again, pockets of elevated hospitalization rates can be seen in Chicago South, Chicago West, West/Southwest Cook Suburbs, and some parts of Northern Cook County.

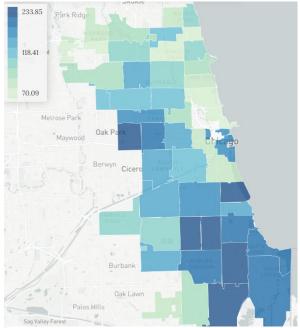


Figure 70: Crude rate of severe maternal morbidity hospitalization discharges among females aged 12-54 years old who were admitted to the hospital for a newborn delivery, 2019-2023. Darker blue indicates higher rate per 10,000 newborn delivery hospitalizations. Source: Chicago Health Atlas.

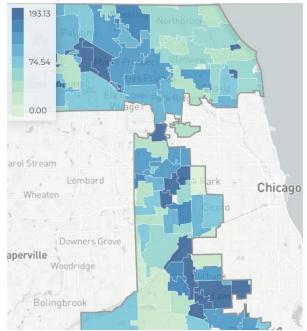


Figure 71: Age-adjusted maternal care-related inpatient hospital discharges per 100,000 by suburban Cook County zip code, 2016-2020. Darker blue indicates higher hospital discharge. Source: Cook County Health Atlas.

D. Behavioral Health

Behavioral health needs affect large portions of the population, with an estimated more than 1 million Illinois residents living with a mental health condition.²²

As shown in the table below, every region of Erie's service area has a higher proportion of youth 15-18 who report 14 or more days during the past 30 days during which their mental health was not good compared to the state or nation. Furthermore, 4 regions of the service area face much higher rates of poor mental health among adults, including Chicago West, Chicago South, West/Southwest Cook Suburbs, and Northern Lake County. These communities do not have higher rates of diagnosed depression among adults, but the elevated rates of adults and youth who report 14 or more days during the past 30 days during which their mental health was not good is of concern.

	Northern Cook	Chicago	Chicago	Chicago	West/ Southwest Cook	Northern Lake		
Health Indicators	Suburbs	North	West	South	Suburbs	County	Illinois	US
Behavioral Health								
Poor Mental Health (age 15-18)	28.9%	30.9%	30.8%	29.9%	32.3%	31.0%	26.0%	28.5%
Poor Mental Health (age 18+)	13.1%	15.0%	18.3%	18.0%	16.8%	16.3%	15.4%	15.8%
Depression (age 18+)	16.9%	18.8%	18.5%	17.3%	18.6%	18.9%	19.0%	20.7%
Youth Alcohol Use in Past 30 Days								
(age 15-18)	23.5%	24.0%	22.0%	20.9%	24.4%	24.3%	25.5%	22.1%
Youth Marijuana Use in the Past								
30 Days (age 15-18)	15.0%	15.8%	17.3%	18.1%	15.8%	16.1%	17.3%	17.0%
Current Smokers (18+)	10.5%	10.9%	16.9%	16.8%	15.0%	14.2%	13.3%	12.9%
Alcohol - Binge Drinking	19.1%	23.6%	20.0%	17.7%	20.6%	17.5%	19.2%	16.6%
Mortality - Drug Overdose - All								
Substances	22.9	25.6	40.8	49.6	30.3	22.1	27.7	29.1
Mortality - Drug Overdose - Opioid	19.6	22.0	35.6	43.5	26.1	17.6	22.9	22.0
Mortality - Suicide	9.5	9.8	8.6	8.1	9.5	11.6	11.7	14.5
Mortality - Deaths of Despair								
(Suicide + Drug/Alcohol								
Poisoning)	53.1	51.4	61.3	69.8	50.6	41.8	51.8	58.5

Figure 72: Select adolescent and adult behavioral health indicators by Erie service area region compared to Illinois and US. Source: YRBS, BRFSS, CDC Wonder via SparkMap

For substance use indicators, youth in 4 regions, Northern Cook Suburbs, Chicago North, West/Southwest Cook Suburbs, and Northern Lake County, have somewhat elevated rates of alcohol use in the past 30 days — lower than the state average but higher than the US. In the other 2 regions, Chicago West and Chicago South, youth have an elevated rate of marijuana use in the past 30 days. For adults, 4 regions have higher smoking rates than state or nation, while Northern Cook Suburbs and Chicago North have a smaller proportion of current smokers. All 6 regions have elevated binge alcohol use rates compared to the US and 3 regions — Chicago North, Chicago West, and West/Southwest Cook Suburbs — exceed the state and national averages. Chicago North has the highest binge drinking rate, with 23.6% of adults reporting having had 5 or more drinks (men) or 4 or more drinks (women) on 1 occasion in the last 30 days compared to just 19.2% in Illinois and 16.6% nationwide.

For mortality, 3 regions are above the state and national averages for drug overdose mortality rate (all substances): Chicago West, Chicago South, and West/Southwest Cook Suburbs. The

region with the highest rate, Chicago South, has an overdose mortality rate of 49.6 deaths per 100,000, approaching double the state (27.7 per 100,000) and national (29.1 per 100,000) averages. The same 3 regions are elevated for opioid-specific mortality, though Chicago North also has a rate on par with the state and nation.

Although no region exceeds the state or nation for suicide mortality rate, it should be noted that the highest suicide mortality is in Northern Lake County, where the rate approaches that of Illinois as a whole.

Three service area regions also have somewhat elevated rates of "deaths of despair," which is a composite indicator combining suicide and drug/alcohol poisoning. Two regions have rates above the state and national averages, with 61.3 deaths of despair per 100,000 in Chicago West and 69.8 per 100,000 in Chicago South, compared to just 51.8 in Illinois. The Northern Cook Suburbs also have a somewhat elevate rate, at 53.1 deaths per 100,000, which is worse than Illinois but better than the nation (58.5 deaths per 100,000).

In half (4/8) of the subject matter expert interviews and focus group conversations, participants shared that awareness and acknowledgement of mental health and substance use needs has improved in the community, and that there has been a drop in overdoses and an improvement or turnaround in opioid use. However, multiple conversations stressed that opioid use and drug overdoses remain a community challenge. Furthermore, some experts highlighted that mental health needs have actually increased in recent years, including anxiety, depression, and trauma. Several noted that there is a distinct lack of mental health services available in the community.

While not in the top few overall, 9% of survey participants (6/68) did select mental health as 1 of the top reasons people in the community see a provider. The top barriers that keep people from seeking mental health care included it's too expensive (46% or 31/68), lack of health insurance (46% or 31/68), stigma (38% or 26/68), don't know where to go or how to access care (21% or 14/68), lack of trust (19% or 13/68), and cannot get time off work (16% or 11/68).

The maps below from CDC PLACES show the zip codes with increased frequent mental health distress (brown map to the left) and binge drinking prevalence (red map to the right). Poor mental health is more concentrated in Chicago South, Chicago West, and Northern Lake County, while binge drinking is prevalent throughout the service area but especially in Chicago North, Chicago West, and West/Southwest Cook Suburbs.

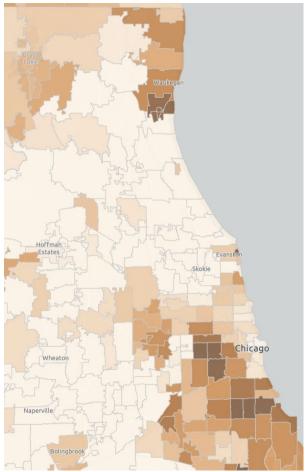


Figure 73: Frequent mental health distress crude prevalence rate by zip code in entire service area. Darker colors denote a higher percent of adults who report 14 or more days during the past 30 in which their mental health was not good. Source: CDC PLACES

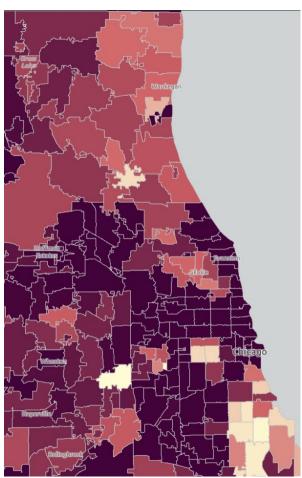


Figure 74: Binge drinking crude prevalence rate by zip code in entire service area. Darker red indicates higher binge drinking prevalence. Source: CDC PLACES

E. Other Health Indicators

HIV/AIDS and STIs

HIV and other sexually transmitted infections (STI) are conditions that disproportionately affect residents of the city of Chicago and Cook County as a whole. According to AIDSvu, as of 2022, Cook County had 25,980 people living with HIV, of whom 19,204 are in the city of Chicago. Cook County also had 868 people newly diagnosed with HIV in 2022, of whom 636 were in Chicago. This translates to both a prevalence rate and new diagnoses rate well above Illinois, the Midwest, or the US as a whole.

RATE PER 100K (POPULATION), 2022

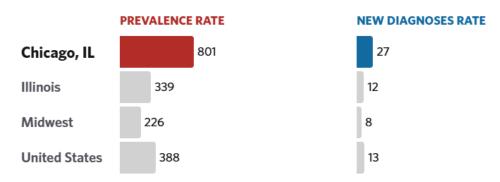


Figure 75: HIV/AIDs per 100k population in 2022 in the city of Chicago. Source: AIDSvu

RATE PER 100K (POPULATION), 2022

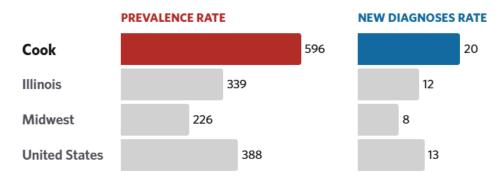


Figure 76: HIV/AIDs per 100k population in 2022 in Cook County. Source: AIDSvu.

RATES OF STIS PER 100K (POPULATION), 2022

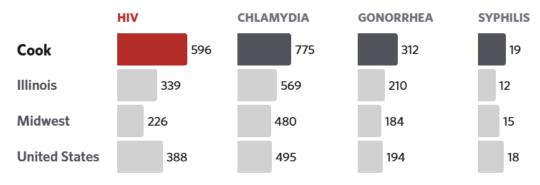


Figure 77: STI rates per 100k population in 2022 in Cook County. Source: AIDSvu

Receipt of HIV care, defined as those living with diagnosed HIV who have received medical care for HIV in that year, is variable across the city of Chicago and the service area. As shown on the maps below, some Chicago zip codes, especially those in parts of Chicago North and Chicago South where there have historically been high HIV rates, have more than 86% of their residents with diagnosed HIV having received care for their HIV in the last year. Other zip codes have barely half their residents receiving care; for example, 60608 (Lowest West Side) in Chicago West has only 56.3% of its residents with HIV who received HIV care during the year. Overall, Cook County and Lake County have comparable rates to each other (76.6% and 78.4%, respectively), which are also comparable to the state average of 77.0%.

The dots on the map below represent locations of HIV testing sites, pre-exposure prophylaxis (PrEP) services, and HIV/AIDS medical treatment services, with notable gaps in the Northern Lake County, Northern Cook Suburbs, and West/Southwest Cook Suburbs, as well as individual zip codes in the city of Chicago in Chicago North and Chicago West such as 60618, 60641, 60634, 60630, 60631, 60646, and 60659.

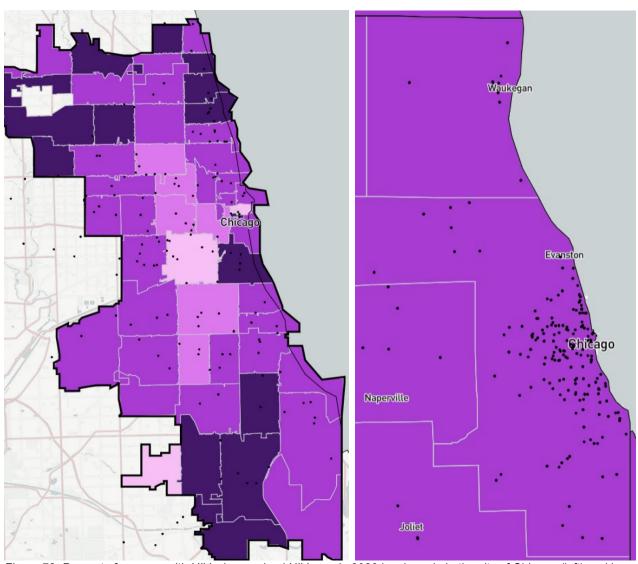


Figure 78: Percent of persons with HIV who received HIV care in 2022 by zip code in the city of Chicago (left) and by county (right). Darker purple indicates higher proportion of people with HIV who received care. Dots overlayed indicate locations of HIV testing sites, PrEP services, and HIV/AIDS medical treatment services Source: AIDSvu.

Oral Health

Another important health topic is oral health. The percent of children aged 1-17 years in the service area without a dental visit in the past year is higher in the service area than in the state in all regions and higher than the nation in all but 1 region. This is consistent with adults, where a smaller percent of adults 18 and older have a visit to a dental clinic in the past year compared to the state or US in 4 regions of the service area: Chicago West, Chicago South, West/Southwest Cook Suburbs, and Northern Lake County. The other 2 regions, Northern Cook Suburbs and Chicago North, have better adult dental care utilization rates.

Health Indicators Oral Health Care	Northern Cook Suburbs	Chicago North	Chicago West	Chicago South	West/ Southwest Cook Suburbs	Northern Lake County	Illinois	US
No Dental Visit in Past Year								
(Age 1-17)	17.1%	17.4%	19.3%	20.3%	17.7%	17.6%	16.4%	17.4%
Dental Care Visit in Past Year								
(18+)	68.2%	66.0%	51.7%	51.6%	56.8%	59.3%	63.4%	63.9%
Teeth in Fair or Poor Condition								
(Age 1-17)	5.1%	5.3%	6.3%	6.8%	5.6%	5.7%	6.0%	5.6%
Teeth Loss (65+)	7.8%	8.5%	17.9%	18.7%	13.2%	14.2%	10.3%	12.2%

Figure 79: Select pediatric and adult oral health indicators by Erie service area region compared to Illinois and US. Source: National Survey of Children's Health, BRFSS via SparkMap

This correlates with oral health outcomes, which are poorest in the same regions as poor oral health utilization. Children in 2 of the 6 service area regions have higher rates of teeth in fair or poor condition than in the state or nation, and children in another 2 regions have rates on par with the state and nation. The indicator around tooth loss, which represents the percentage of adults over age 65 who have lost all their natural teeth because of tooth decay or gum disease, also is poorest in these same regions. While less than 9% of Northern Cook Suburbs and Chicago North older adults have lost all their teeth, more than 13% of every other region has, including as high as 18.7% in Chicago South.

The CDC PLACES maps below show the 2 adult indicators of dental visits and all teeth lost visually, with some striking oral health needs around Waukegan and in portions of Chicago South and Chicago West.

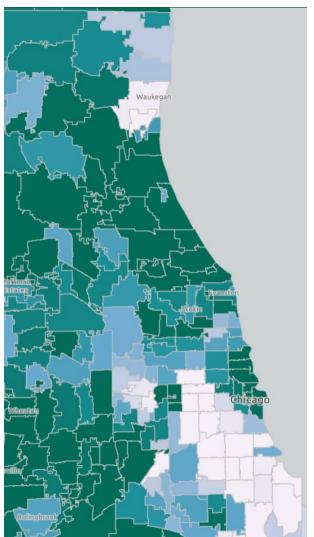


Figure 80: Dental visit crude prevalence by zip code in entire service area. Lighter green indicates lower rate of dental visits. Source: CDC PLACES.

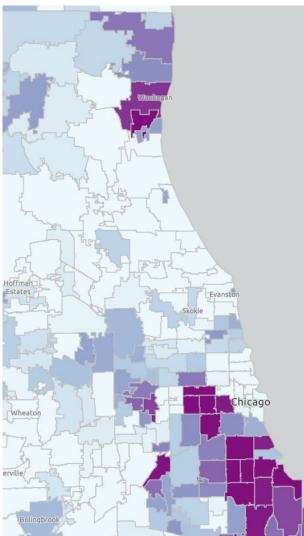


Figure 81: All teeth lost crude prevalence by zip code in entire service area. Darker colors indicate higher percent of older adults with all teeth lost. Source: CDC PLACES.

Routine Preventive Care

Utilization of primary care and preventive services varies across the service area. All 6 regions of the service area have higher rates of children aged 1-17 years without a preventive medical or well-child visit in the past year compared to the state, and 2 also exceed the nation. Five regions of the service area fare worse than the state or nation when it comes to adults who have been to a primary care provider for a routine checkup in the past year; only Northern Cook Suburbs very slightly exceed the state and national average.

					West/						
	Northern				Southwest	Northern					
	Cook	Chicago	Chicago	Chicago	Cook	Lake					
Health Indicators	Suburbs	North	West	South	Suburbs	County	Illinois	US			
Routine Care	Routine Care										
No Preventive Medical Visit in											
Past Year (Age 1-17)	19.9%	20.1%	21.9%	22.7%	20.7%	20.8%	19.5%	21.3%			
Recent Primary Care Visit (18+)	76.2%	71.9%	76.0%	75.7%	72.9%	75.2%	76.1%	76.1%			
Core Preventative Services for											
Men 65+	47.3%	44.1%	33.6%	34.0%	39.6%	33.3%	42.1%	43.7%			
Core Preventative Services for											
Women 65+	39.5%	38.1%	30.4%	30.3%	33.6%	32.5%	38.2%	37.9%			

Figure 82: Select pediatric and adult preventive care utilization indicators by Erie service area region compared to Illinois and US. Source: National Survey of Children's Health, BRFSS via SparkMap

Most regions also fare more poorly than the state and nation for older adults being up to date on core preventive services. For men above age 65, this includes being up to date on a core set of clinical preventive services such as influenza vaccination in the past year; pneumonia vaccination ever, and colon cancer screening on the appropriate time frame; for women this also includes a mammogram in the past 2 years. Four regions are worse than the state or nation for both men and women being up to date on these core services, with only Northern Cook Suburbs consistently being better than the state or national averages.

The adjacent CDC PLACES map highlights the prevalence of annual checkup by zip code, with the lighter blue areas representing gaps in annual checkups. Notably, much of Chicago North, Chicago West, Chicago South, and Northern Lake County have lower rates of annual checkups, though there are pockets on Chicago South and Chicago West that have higher visit rates.

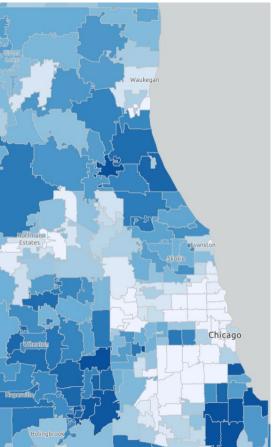


Figure 83: Annual checkup crude prevalence by zip code in entire service area. Lighter blue indicates lower rate of annual preventive care visits. Source: CDC PLACES

Other Mortality

Several other causes of mortality not yet discussed are elevated in the service area. Although the all-cause mortality rate is not higher than the state or US is any region, other specifical mortality rates are. The rate of both firearm fatalities and homicide are higher in Chicago West, Chicago South, and West/Southwest Cook Suburbs than other regions. In fact, Chicago South has more than twice the firearm fatality rate as the state and more than 3 times the homicide rate as the state; Chicago West is not far behind these rates.

					West/			
	Northern				Southwest	Northern		
	Cook	Chicago	Chicago	Chicago	Cook	Lake		
Health Indicators	Suburbs	North	West	South	Suburbs	County	Illinois	US
Mortality								
Mortality - All Cause Mortality	862.0	856.4	877.1	940.8	806.3	655.4	957.0	969.6
Mortality - Firearm Fatalities	9.7	12.2	26.8	34.4	17.1	10.7	13.6	13.8
Mortality - Homicide	7.1	9.6	25.4	33.6	15.0	6.5	10.0	7.1
Mortality - Influenza & Pneumonia	15.8	16.7	16.9	17.2	16.6	12.4	15.9	14.3

Figure 84: Select mortality indicators by Erie service area region compared to Illinois and US. Source: CDC Wonder via SparkMap

The influenza and pneumonia death rates are elevated in all 5 Cook County regions, particularly so in Chicago North, Chicago West, Chicago South, and West/Southwest Cook Suburbs.

These disparate mortality rates feed into the substantial racial and geographic life expectancy gap in Chicago. As can be seen in the adjacent Chicago community arealevel map, life expectancy in Chicago ranges from as high as 87 in the Loop to as low as 66 in West Garfield Park.

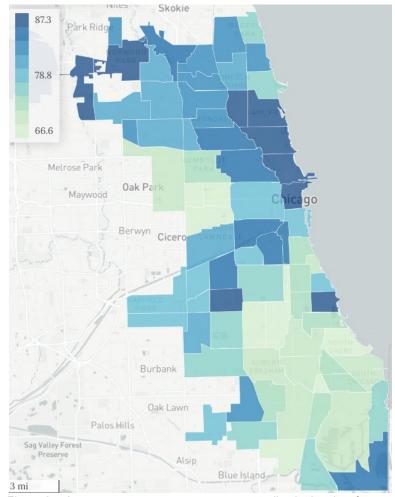


Figure 85: Average years a person may expect to live in the city of Chicago by community area, 2023. Darker blue indicates higher life expectancy. Source: Chicago Health Atlas.

V. Conclusion

Erie Family Health Centers continues to provide a comprehensive range of adult and pediatric primary care, behavioral health, and oral health services across its service area, which spans Chicago's west side, northern suburbs, and into Waukegan. As a community health center recognized for delivering care ranked in the top 10% nationwide, Erie is well-positioned to address the complex health and social needs of its communities.

This assessment highlights the importance of Erie's work in a community with persistent challenges, including high rates of poverty, food insecurity, housing instability, and barriers to healthcare access particularly for immigrant populations and non-English speakers. Many communities also experience elevated rates of chronic disease, behavioral health needs, maternal and child health risks, and insufficient access to dental and mental health professionals. Future policy changes that may affect insurance coverage are of ongoing concern.

The findings of this assessment point to several potential recommendations, as resources allow:

- Continue to hire bilingual and multilingual staff where needed, considering the specific language needs of the community near each site location and the constraints of the labor market, and address other concerns of immigrant populations,
- Expand community outreach and awareness, especially as new sites open, capacity changes, and/or coverage landscape changes,
- Expand access to care through initiatives that increase appointment availability and make it easier to schedule appointments,
- Continue to provide health education around chronic diseases and preventive care
- Continue to focus on social determinants such as food insecurity, housing, and transportation,
- Convene and coordinate with partners to address systemic challenges and shortages.
- Ensure the successful opening of a new site in West Garfield Park, located in a region and zip code this report identifies as having some of the highest health needs, and
- Consider future geographic expansion into other regions in the service area with high, unmet health needs.

By focusing on these priorities, Erie can continue to fill critical gaps in primary care, behavioral health, and dental health care as well as address some of the underlying causes of health disparities. As new opportunities emerge, Erie can use the findings of this assessment to design responsive services, sites, and programs that align with the unique needs of the different communities it serves. In this way, Erie will be able to continue advancing its vision of *all* people living their healthiest lives.

VI. Appendices

Appendix A: List of Interview Participants and Focus Groups

Erie Family Health Centers would like to thank all the individuals who participated in interviews and focus groups in May and June 2025 as part of this needs assessment.

Interview Participants

Irma Barrientos Healthy Families Program Manager Mano á Mano Family Resource Center

Noy Frial-Lopez Chief Executive Officer PEER Services, Inc.

Graciela Guzman Illinois State Senator Illinois 20th District

Ricardo Jimenez Director of Public Health Initiatives Puerto Rican Cultural Center

Brian Moro Health Equity and Operations Manager Northwest Center

Dulce Ortiz Executive Director Mano á Mano Family Resource Center

Mike Tomas
Executive Director
Garfield Park Community Council

Focus Groups Held

Erie Family Health Centers Patient Board Members May 1, 2025

Erie Family Health Centers Patient-Facing Staff June 27, 2025

Appendix B: Erie Family Health Centers Locations

Chicago Locations

Erie Division Street 2418 W. Division Chicago, IL 60622

Erie Foster Avenue 5215 N. California Chicago, IL 60625

Erie Helping Hands 4747 N. Kedzie Chicago, IL 60625

Erie Humboldt Park 2750 W. North Chicago, IL 60647 Erie Johnson 1504 S. Albany Chicago, IL 60623

Erie Teen Center 2418 W. Division Chicago, IL 60622

Erie Westside 646 N. Lawndale Chicago, IL 60624

Erie West Town 1701 W. Superior Chicago, IL 60622

Student Health Centers in High Schools

Erie Amundsen 5110 N. Damen Chicago, IL 60625

Erie Clemente 1147 N. Western Chicago, IL 60622

Erie Lake View 4015 North Ashland Avenue Chicago, IL 60613

Suburban Locations

Erie Evanston/Skokie 1285 Hartrey Evanston, IL 60202

Erie HealthReach Waukegan 2323 Grand Waukegan, IL 60085

Coming in 2026

Erie at the Sankofa Village Wellness Center West Madison Street at South Kildare Avenue Chicago, IL 60624

Appendix C: Community Survey

Welcome to the Survey!

Thank you for your willingness to take Erie Family Health Centers' community survey.

We are interested in learning about you, your household, and the community to better understand your needs and the needs of those around you.

The survey is voluntary, anonymous, and confidential. We will not ask for your name or report your individual responses, just the overall results of the survey. If you do not wish to answer a question for any reason, you may select "I choose not to answer."

The survey is expected to take approximately 10-20 minutes to complete. If you close the survey, it will NOT save your progress. So, please complete the survey in one sitting. If you leave the survey and wish to complete it, you must start from the beginning.

By participating in this survey, you will be helping Erie hear diverse perspectives of community members, assess the needs of the community, and understand the current services available to meet these needs. In the future, this may help Erie set priorities around community needs.

Trigger warning: Some of the questions may contain references to issues that may trigger unpleasant feelings. Please take this survey when you are prepared to think about diverse community concerns and needs.

If you have any questions about this survey or wish to follow up with Erie, please email Dalia Galvan Morales at dmorales@eriefamilyhealth.org

Demographics		
* 1. In which of these	zip codes do you live? (Check c	only one)
O 60016	O 60402	O 60631
O 60018	O 60453	<u> </u>
O 60025	O 60459	<u> </u>
O 60026	O 60501	<u> </u>
O 60030	O 60534	60637
O 60031	O 60546	60638
O 60053	O 60607	60639
O 60056	60608	60640
O 60060	O 60609	<u> </u>
60062	O 60610	<u> </u>
O 60064	O 60611	<u> </u>
O 60068	O 60612	O 60645
O 60073	O 60613	O 60646
O 60076	O 60614	O 60647
O 60077	60615	O 60649
60085	O 60616	O 60651
60087	O 60617	O 60652
O 60099	O 60618	O 60653
O 60104	O 60619	O 60654
O 60131	O 60620	O 60656
O 60153	O 60621	60657
O 60160	O 60622	O 60659
O 60164	O 60623	O 60660
O 60171	O 60624	60706
O 60176	O 60625	<u> </u>
O 60201	O 60626	O 60712
60202	O 60629	O 60714
O 60203	O 60630	O 60804
I live in a zip code no	ot on this list (please specify)	

* 2. Wl	hat is your gender identity?	
_ M	ale	
○ Fe	emale	
Ot	ther	
O I o	choose not to answer	
* 3. Wl	hat is your age?	
13	3-17	
18	3-25	
_ 26	5-39	
40)-49	
<u> </u>	0-64	
O 65	5 or older	
\bigcirc I \circ	choose not to answer	
₩		
* 4. WI apply.	hich of these best represents your racial or ethnic	background? Please select all that
	ack or African American	
_ w	hite	
La	atino/a/x	
As	sian	
I	choose not to answer	
Ot	ther (please specify)	
* 5. Wl	hat language are you most comfortable speaking?	
C Er	nglish	
○ Sp	panish	
O Ar	rabic	
O Ro	phingya	
Ru	ussian	
O Po	olish	
O Da	ari	
O Uı	rdu	
\bigcirc I \circ	choose not to answer	
Ot	ther (please specify)	
		1

* 6. How do you pay for healthcare? Do you have health insurance? (No insurance) Sliding fee scale, according to my income, at a health center (No insurance) Full cost, out-of-pocket Medical Card (Medicaid) (HBIA/HBIS) Health Benefits for Immigrant Adults/Seniors Medicare Insurance through the Veteran's Administration or Indian Health Service Private insurance through my job or the job of a family member Private insurance through the health insurance marketplace-"Obamacare" I do not seek healthcare services

Other (please specify)

* 7. How satisfied are you with how your insurance works for you?
Extremely satisfied
Somewhat satisfied
Somewhat unsatisfied
Extremely unsatisfied
I choose not to answer
* 8. What problems do you experience with your insurance? Please check all that apply.
I can't see primary care providers (doctors, nurses, etc.) that I want to see
I can't see and/or afford specialists that I want to see
Monthly payments or bills from visits are too expensive
The plan does not cover the services I need (dental care, mental health, etc.)
Medications I need are not covered or are too expensive
It is confusing or hard to understand how to use it
I have no problems with my insurance
I choose not to answer

* 9. What is the highest level of school that you have finished?
Less than high school degree
High school diploma or GED
Some education after high school, no degree
○ Vocational or Associate's Degree
Bachelor's, or higher degree
I choose not to answer
* 10. What is your current work situation?
Full-time work
Part-time or temporary work
Freelance, gig, or independent work
Unemployed, seeking work
Unemployed, not seeking work (have a disability that does not allow me to work, or am a student, retired, or unpaid primary care giver)
I have my own company
I choose not to answer

School and Work

Home
* 11. What is your housing situation today?
I have housing – I, or my family, own a house/apartment
I have housing – I, or my family, rent an apartment/house
My housing situation is not stable (I stay with others, stay in a hotel or motel, stay in a shelter, or I live outside on the street, in a car, or in a park)
I choose not to answer
* 12. In the last 5 years, have you been worried about not being able to pay your housing costs and/or losing your home or apartment?
Yes
○ No
I choose not to answer
* 13. Within the past year, have you felt unsafe at home, such as been afraid of your partner or ex-partner?
○ Yes
○ No
Unsure
I choose not to answer
* 14. Do you feel safe in your neighborhood/where you live?
○ Yes
○ No
Unsure
I choose not to answer

	y of Life
exan	. How often do you see or talk to people that you care about and feel close to? (For aple: talking to friends on the phone, visiting friends or family, going to church or club tings)
	Never
	A few times a year
	A few times a month
	1 or 2 times a week
	3 to 5 times a week
	Most days
	I choose not to answer
	. How stressed do you feel in your daily life? Signs of stress may include feeling nervouser pressure, like things are too hard to manage, or not being able to sleep.
\bigcirc	Not at all
	A little bit
	Somewhat
	Quite a bit
	Very much
\bigcirc	I choose not to answer
	I choose not to answer In the past year, have you or any household members been UNABLE to get, or afford, of the following when it was REALLY NEEDED? Please check all that apply.
	. In the past year, have you or any household members been UNABLE to get, or afford,
	. In the past year, have you or any household members been UNABLE to get, or afford, of the following when it was REALLY NEEDED? Please check all that apply.
	In the past year, have you or any household members been UNABLE to get, or afford, of the following when it was REALLY NEEDED? Please check all that apply.
	In the past year, have you or any household members been UNABLE to get, or afford, of the following when it was REALLY NEEDED? Please check all that apply. Food Utilities
	In the past year, have you or any household members been UNABLE to get, or afford, of the following when it was REALLY NEEDED? Please check all that apply. Food Utilities Clothing
	In the past year, have you or any household members been UNABLE to get, or afford, of the following when it was REALLY NEEDED? Please check all that apply. Food Utilities Clothing Child care
	In the past year, have you or any household members been UNABLE to get, or afford, of the following when it was REALLY NEEDED? Please check all that apply. Food Utilities Clothing Child care Health care (including medical, dental, vision)
	In the past year, have you or any household members been UNABLE to get, or afford, of the following when it was REALLY NEEDED? Please check all that apply. Food Utilities Clothing Child care Health care (including medical, dental, vision) Medicine or medications
	In the past year, have you or any household members been UNABLE to get, or afford, of the following when it was REALLY NEEDED? Please check all that apply. Food Utilities Clothing Child care Health care (including medical, dental, vision) Medicine or medications Phone
	In the past year, have you or any household members been UNABLE to get, or afford, of the following when it was REALLY NEEDED? Please check all that apply. Food Utilities Clothing Child care Health care (including medical, dental, vision) Medicine or medications Phone Internet
	In the past year, have you or any household members been UNABLE to get, or afford, of the following when it was REALLY NEEDED? Please check all that apply. Food Utilities Clothing Child care Health care (including medical, dental, vision) Medicine or medications Phone Internet Transportation

Your relationship with Erie Family Health Center
* 18. In the past 2 years, have you, your children, or another immediate family member received care from Erie Family Health Centers?
○ Yes
○ No
I choose not to answer
* 19. Which of the following services were you aware Erie Family Health Centers offers? Please check all services that you are aware of, even if you have not received that service.
Medical care
Dental Care
Mental Health
Substance use or Medication Assisted Treatment (MAT) services
Reproductive health care services, including pregnancy care and contraceptives
Infant, child, and adolescent health
Health insurance enrollment assistance
Specialty services including diabetes and HIV/AIDS care
Health promotion services including health education, case management, and group classes
Referrals to specialty services like mammograms, colonoscopy, dermatology, cardiology, etc.
I was not aware of any of these services
I choose not to answer

	Needs
	What are the top two reasons you or people in your community see a healthcare der (doctor or nurse) /dentist/counselor? Please choose no more than TWO.
	Accident or injury
	Feeling sick
	Regular check-ups, preventive care
	Care for chronic conditions (diabetes, high blood pressure, asthma, etc.)
	Domestic violence
	Substance or alcohol problems
	Mental health (feeling down, feeling anxious, etc.)
	Reproductive health care services, including pregnancy care and contraceptives
	Experiencing pain
	Referrals to specialty services like mammograms, colonoscopy, dermatology, cardiology, etc.
	I don't know
	Other (please specify)
г	
* 21	TATIL and all and a second and a second and a second a se
healt	Where do you or those in your community go most often when you want to receive hcare services? Emergency room
healt	hcare services?
healt	hcare services? Emergency room
healt	hcare services? Emergency room Community health center
healt	hcare services? Emergency room Community health center Clinic inside a drug store like Walgreens or CVS
healt	hcare services? Emergency room Community health center Clinic inside a drug store like Walgreens or CVS Private doctor's office
healt	hcare services? Emergency room Community health center Clinic inside a drug store like Walgreens or CVS Private doctor's office Hospital clinic
healt	hcare services? Emergency room Community health center Clinic inside a drug store like Walgreens or CVS Private doctor's office Hospital clinic Cultural or traditional health worker, like a curandero/a or herbalist, OR lay health provider
* 22. etc.),	hcare services? Emergency room Community health center Clinic inside a drug store like Walgreens or CVS Private doctor's office Hospital clinic Cultural or traditional health worker, like a curandero/a or herbalist, OR lay health provider I don't know When you or people in your community want to see a healthcare provider (doctor, nurs
* 22. etc.),	Emergency room Community health center Clinic inside a drug store like Walgreens or CVS Private doctor's office Hospital clinic Cultural or traditional health worker, like a curandero/a or herbalist, OR lay health provider I don't know When you or people in your community want to see a healthcare provider (doctor, nursedo you prefer to schedule an appointment or walk into a clinic?
* 22. etc.),	Emergency room Community health center Clinic inside a drug store like Walgreens or CVS Private doctor's office Hospital clinic Cultural or traditional health worker, like a curandero/a or herbalist, OR lay health provider I don't know When you or people in your community want to see a healthcare provider (doctor, nursedo you prefer to schedule an appointment or walk into a clinic?

	3. What are the top three health or social services that your community needs more of? ase choose up to THREE.
	Services in languages other than English. Specify the language below.
	Health education
	Providers (Doctors or nurses)
	Dental health
	Vision care
	Foot care
	Drug and alcohol counseling
	Counseling for depression, anxiety, family problems, etc.
	Care for elderly adults
	Child care
	Food services (such as food pantries)
	Employment services
	Services for those experiencing homelessness
	Emergency shelter for survivors of domestic violence
] I don't know
	Please specify language or other service needed.
24	4. What keeps or prevents people in your community from seeing a healthcare provider
	ctor, dentist, nurse, etc.)? Please choose the top THREE.
	It's too expensive
	Religious or cultural differences
	Fears about law enforcement, like immigration (ICE)
	Lack of health insurance
	Lack of transportation
	Lack of trust
	Language differences
	Cannot get time off work
	Lack of childcare
	I don't know
	Other (please specify)

_ It	's too expensive
R	eligious or cultural differences
Fe	ears about law enforcement, like immigration (ICE)
Lá	ack of health insurance
Lá	ack of transportation
Fe	ear
St	tigma
La	ack of trust
La	anguage differences
C	annot get time off work
Lá	ack of childcare
D	o not know where to go or how to access services
] I	don't know
0	ther (please specify)

6. What (if anything) would you recommend Erie Family Health Centers do to better meet the needs of the community? 7. What is one thing Erie Family Health Centers does well to meet the needs of the community?	6 What (if anyth	ning) would you recommend Frie Family Health Centers do to bette	ar maat
7. What is one thing Erie Family Health Centers does well to meet the needs of the			n meet
ommunity?	7. What is one th	ning Erie Family Health Centers does well to meet the needs of the	<u> </u>
	ommunity?		

Thank you! Thank you for taking the Erie Family Health Center's survey! This will help the Erie better understand your needs and the needs of those around you. If you have any questions about this survey or wish to follow up with Erie, please email Dalia Galvan Morales at dmorales@eriefamilyhealth.org.

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