

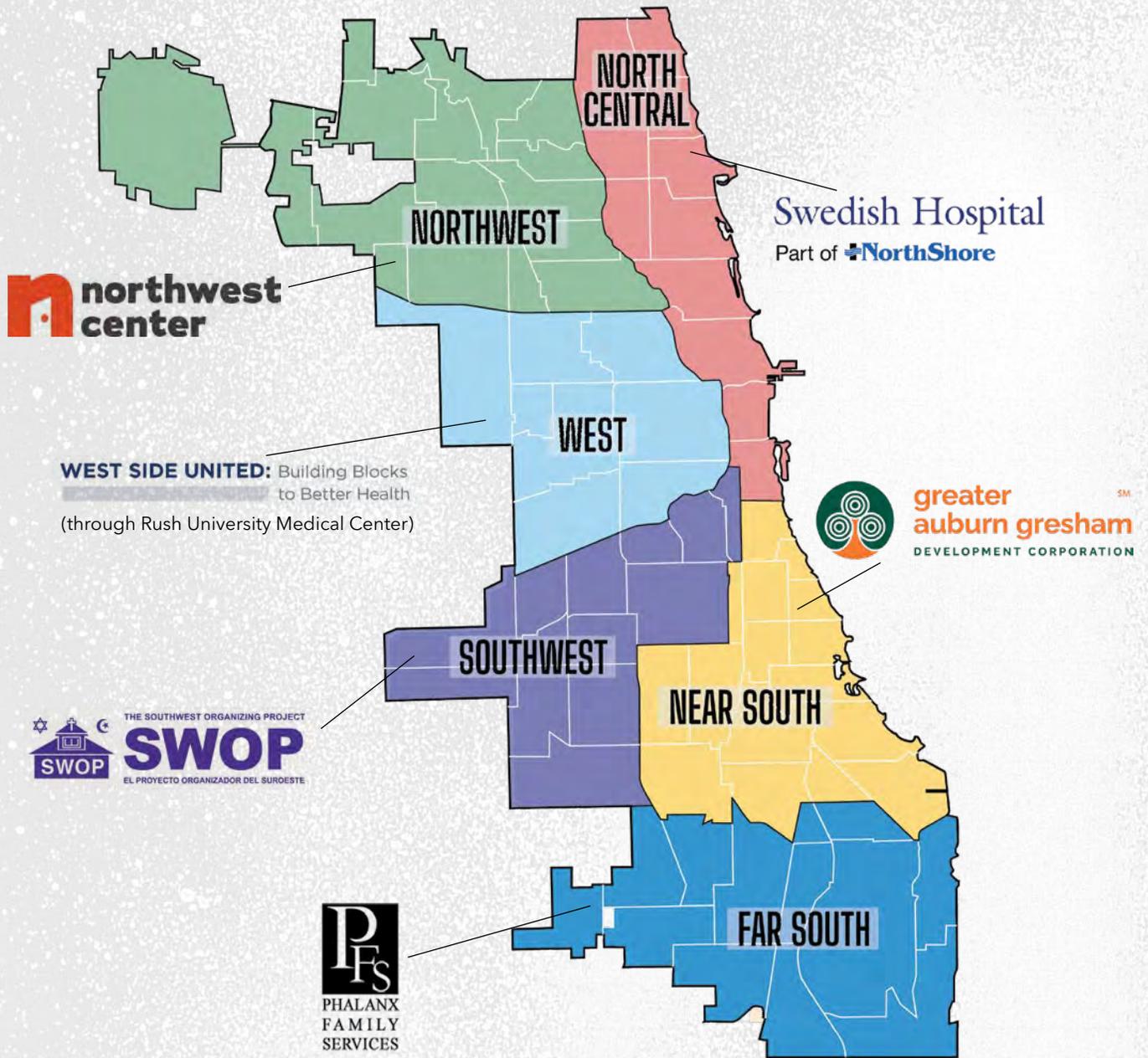


HEALTHY CHICAGO EQUITY ZONES  
**PLAYBOOK**





# Healthy Chicago Equity Zones



The HCEZ Playbook was co-developed by community-led organizations in partnership with the Chicago Department of Public Health.

The Healthy Chicago Equity Zones are a part of the CDPH Bureau of Community Health, which encompasses the Offices of Chronic Disease Prevention & Health Promotion, Community Planning and Equity Zones, Environmental Permitting and Inspections, Epidemiology & Research, and Health Equity in All Policies.

# TABLE OF CONTENTS

Introduction .....	6
HCEZ Overview .....	7
Phase One: Vaccine Equity .....	11
Phase Two: Community Health Assessments .....	15
Far South Region .....	19
West Pullman, Beverly, Mount Greenwood, Washington Heights, Roseland, Morgan Park, North Pullman, Pullman, Burnside, South Deering, Riverdale, Calumet Heights, Hegewisch, East Side	
Near South Region .....	35
Avalon Park, Auburn Gresham, Oakland and Washington Park, Grand Boulevard, Douglas, and Fuller Park, South Chicago, Woodlawn, South Shore, Englewood and West Englewood, Greater Grand Crossing	
North/Central Region .....	45
North Center, Uptown, West Ridge, Edgewater and Lincoln Square, Rogers Park, Lake View	

# TABLE OF CONTENTS *continued*

Northwest Region .....	57
Belmont Cragin, Irving Park, Albany Park, Logan Square	
Southwest Region .....	63
Chicago Lawn and Ashburn, West Elsdon, West Lawn and Clearing, Brighton Park, Armour Square and Bridgeport, Archer Heights, Garfield Ridge, McKinley Park	
West Region .....	73
Austin, East Garfield Park, South Lawndale, Near West Side, Humboldt Park, West Town, Lower West Side, North Lawndale, West Garfield Park	
Phase Three: HCEZ in Action, Now and Future.....	85
Acknowledgements.....	89
Index.....	93



## INTRODUCTION

### Purpose of HCEZ Playbook

The Healthy Chicago Equity Zones (HCEZ) Playbook is designed to:

- Be a resource for current and future community leaders to develop a health equity-centered framework for community-led transformational change.
- Serve as a catalyst for dialogue about community power building, place-based solutions and policies focused on the root causes of health inequities.
- Address power-sharing approaches that can inspire future HCEZ collaboration and alignment with new partners and funders.

This Playbook provides details about the HCEZ model, including its goals of community power building and community-led systems change, and the milestones achieved in its first two years. Additionally, this Playbook describes how the HCEZ Regional collaboratives are expanding and strengthening their networks and creating the conditions for community-led change. HCEZ Regions have worked across their communities to conduct extensive community health assessments and have drawn from this community-level data to identify priority issues and interventions in their neighborhoods. Details on these priority interventions and strategic next steps for implementation are also featured. This HCEZ Playbook captures the spirit of "Six Regions. One Chicago" by featuring the work of HCEZ Regional and Community Lead organizations as they build towards a vision for racial and health equity for all Chicagoans.

### Playbook Content

The Playbook is divided into three sections that align with the distinct operational phases of the HCEZ initiative. They describe the timeline for HCEZ place-based activities since the initiative's inception in January 2021 through the achievement of key community-led milestones in April 2023.

- **Phase One** highlights the year-long Vaccaine Equity phase in which HCEZ Regions served their communities as frontline champions for the City's emergency COVID-19 response.
- **Phase Two** highlights achievements and work in progress in the HCEZ Health Equity phase focusing on internal capacity building of the network. HCEZ Regional and Community Leads share how they developed and grew a hyperlocal network engaging residents of Chicago neighborhoods; cultivated multisector partnerships in support of a shared vision for health equity; and created spaces and practices for ongoing coalition and shared learning building in their communities including conducting Community Health Assessments.
- **Phase Three** highlights how the HCEZ model combines community coalition building and power-building with community-led advocacy and policy work as we build plans for sustainability and growth.

In the next phase of work, HCEZ regional collaboratives will implement their intervention action plans in their communities. As the initiative continues to grow, regional collaboratives will co-develop the Playbook's next chapters to share progress and accomplishments.

# HCEZ OVERVIEW

OVERVIEW

# HCEZ OVERVIEW

Healthy Chicago Equity Zones (HCEZs) are hyper-local partnerships established between the Chicago Department of Public Health (CDPH) and community-based organizations, designed to advance the Healthy Chicago 2025 goal of closing the City's racial life expectancy gap. Equity Zones ensure that community members have power and resources to identify local assets and challenges, and to develop solutions that meet their most pressing needs.

## The Equity Zones Structure

HCEZs are comprised of six geographic areas covering all of Chicago's 77 neighborhoods. Each zone is represented by one Regional Lead (RL) organization. RLs subcontract with at least one Community Lead (CL) organization in every community in their respective regions. Additionally, RLs are responsible for providing administrative, financial and project management support to the CL organizations. Current HCEZ RLs include:

- Far South: [Phalanx Family Services](#)
- Near South: [Greater Auburn Gresham Development Corporation](#)
- North/Central: [Swedish Hospital](#)
- Northwest: [Northwest Center](#)
- Southwest: [Southwest Organizing Project](#)
- West: [Rush University Medical Center](#) (on behalf of [West Side United](#))

RL activities focus on and support CL action plans and interventions to address hyperlocal priorities. Additionally, RLs and CLs collaborate on cross-regional activities that connect health equity interventions with community-led advocacy to influence policy and systems change.

## HCEZ Funding



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# \$29M

To date, the Chicago Department of Public Health has invested \$29 million to fund the Healthy Chicago Equity Zones work.



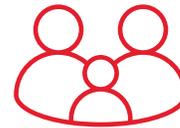
## HCEZ Background

The HCEZ initiative is one of CDPH's programmatic drivers to achieve the priority goals of Healthy Chicago 2025, the city's community health improvement plan. Healthy Chicago 2025 provided a five-year roadmap for community power-building and transformational change to address the social and environmental factors that contribute to health and racial inequity. The plan aims to improve the health and well-being of all Chicagoans, and quality of life for every Chicago community. The overarching, long-term goal of Healthy Chicago Equity Zones and Healthy Chicago 2025 is addressing root causes of health inequities while dismantling racist and oppressive systems and structures that have created a growing life expectancy gap between Black and white Chicagoans.

Building on the success of the Racial Equity Rapid Response Teams and Protect Chicago Plus initiatives that supported an equitable COVID-19 response and recovery in the Summer of 2021, HCEZs support public health infrastructure and coalition-building efforts at the hyperlocal level. These efforts have created a sustainable foundation that enables communities to build power and make their own decisions regarding solutions to community health challenges and priorities.

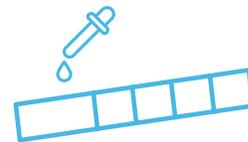
Initial HCEZ activations supported equitable pandemic responses and recovery efforts, including mass community vaccinations efforts, with impressive achievements that helped to save lives at the height of the public health emergency. In mid-2022, the HCEZ initiative shifted its focus to leading foundational health equity work across the city. Their efforts began with each HCEZ Regional collaborative further building and expanding its networks to conduct a community health assessment. Regional Leads, working closely with their Community Lead partners, gathered a combined total of more than 7,000 community needs surveys from residents. After each Region compiled and analyzed this data, they came together to identify their top priorities.

In the next phase of HCEZ work, beginning in mid-2023, HCEZ Regional collaboratives will develop hyperlocal action plans for their community-identified priority interventions, gather necessary resources to support their implementation, and oversee the implementation of interventions in their neighborhoods.



**ALMOST**  
**200,000**

Residents Contacted with  
Vaccination Outreach Activities.



Promoted fentanyl test kits  
to prevent overdoses.



Increased access to diabetes  
preventing programs.



**7,000+**  
community surveys conducted  
to understand local needs.



# VACCINE EQUITY

## PHASE 1

VACCINE EQUITY

## PHASE 1: VACCINE EQUITY

The COVID-19 pandemic had a disproportionate impact on Black and Brown communities globally, resulting in vulnerable populations facing limited healthcare access. In the initial phases of the pandemic, Chicago experienced alarming racial and ethnic disparities, as Black and Latinx residents accounted for more than 72% of the total COVID-19-related deaths, despite representing just 59% of the population. In light of these critical circumstances, the City of Chicago took decisive action by implementing multiple programs to address the impact on disproportionately affected communities and promote equitable healthcare.

Under the umbrella of the Healthy Chicago 2025 initiative, two vaccine equity programs were launched: Protect Chicago Plus (PCP) and the Racial Equity Rapid Response Team (RERRT). These efforts were responsive measures to COVID-19 in Chicago. They formed the basis for data-driven decision making in health equity, and community-based planning to better target Black and Brown communities with health information and resources regarding COVID-19 vaccines. Building upon these programs, the Healthy Chicago Equity Zones (HCEZ) initiative was introduced to promote equity in vaccine access and COVID-19 therapeutics citywide.

To ensure that vaccines were delivered to the communities most in need, the Chicago Department of Public Health (CDPH) developed the Chicago COVID-19 Community Vulnerability Index (CCVI). This index identified communities that were disproportionately impacted by COVID-19 and faced unique barriers to vaccine acceptance.

Using the HCEZ structure, CDPH fostered collaboration with community-based organizations across all regions of the city, empowering them to take ownership of COVID-19 health initiatives in their respective areas and work in partnership with the CDPH to drive the vaccination campaign. This structure provided the foundation for local and regional leadership to ensure equitable access to vaccines, COVID therapeutics, and health-related resources for all Chicagoans. Through the Healthy Chicago 2025 initiative, the City and community-based organizations collaborated to identify and address barriers to healthcare access, health equity within minority neighborhoods, and the implementation of anti-racist policies and systems.

Several stakeholder groups played a vital role in developing the City's vaccine equity initiative over time. These included the following:

- Chicago Department of Public Health
- The CDC Foundation
- Boston Consulting Group
- William Everett
- Chicago Cook Workforce Partnership

The Chicago Department of Public Health's Immunization program effectively responded to the evolving demands of the vaccine rollout and the pandemic. The initial emergency response efforts focused on achieving vaccine equity and saving lives during the COVID-19 crisis, eventually transforming into the HCEZ initiative.

# PHASE 1



**Protect Chicago Plus (PCP) and Vaccine Operations Center (VOC)**

- Emergency vaccine distribution program
- Temporary clinics, pop-up events, canvassing, and phone banking
- Efforts focused on the 15 most vulnerable communities

**CDPH Transition**

- Ramped up hyperlocal vaccine outreach
- Canvassing, hyperlocal outreach, pop-up events, and at-home vaccination
- Efforts focused on the 13 lowest vaccinated communities

**Healthy Chicago Equity Zones**

- Regional and Community Leads lead hyperlocal vaccination efforts across the City
- Pop-up events, outreach to schools and places of worship, canvassing, and other strategies to reach unvaccinated Chicagoans

The HCEZ structures, initially developed as a comprehensive program to address various hyperlocal public health needs, were mobilized to tackle vaccine equity, leveraging the community's capacity to reach the most vulnerable individuals in Chicago. Throughout the process, the city, along with several departments, provided continuous support to these initiatives. Additionally, numerous partners, including private consultants and public entities like the Chicago Public Schools and Cook County, actively contributed to these efforts.

In the subsequent pages, you will read comprehensive information about HCEZ, including its structures, partners, funding, and post-pandemic activities.

## HEALTHY CHICAGO EQUITY ZONES

**6** HCEZ Regions  
**77** Community Areas



Planned and supported nearly  
**2,000**  
 ENGAGEMENTS



Reaching almost  
**200,000**  
 PEOPLE



Leading  
**HYPER-LOCAL VACCINE OUTREACH**  
 in the lowest-vaccinated communities



**Patients need to have access  
to healthcare financially,  
geographically, and  
logistically.**

– NAMI CHICAGO PARTICIPANT

**COMMUNITY HEALTH ASSESSMENTS  
AND CAPACITY BUILDING**

**PHASE 2**

**PRELIMINARY**

## PHASE 2: COMMUNITY HEALTH ASSESSMENTS AND CAPACITY BUILDING

In this Phase, HCEZ organizations participated in capacity building through shared learnings and co-designed Technical Assistance training. This all culminating in the creation of Community Health Assessments (CHAs), and organizations identified their local/regional priority areas.

Support from the following partners helped shape the capacity building, CHAs, and follow-on tools:

- Public Health Institute of Metropolitan Chicago (PHIMC)
  - Rudd Resources
  - Patrick M. Magoon Institute for Healthy Communities
  - McAlpine Consulting for Growth
  - IntuWork
- Partners in Health (PIH)

Regional Lead and Community Lead organizations documented and summarized their findings in CHA reports. The reports will inform action planning for their identified priority issue areas and lead to research and policy agendas that address root causes of health inequities.

**The top three priority areas across all equity zones include:**



### HCEZ MILESTONES



The following pages provide the details of the Regional Lead and Community Lead CHA summaries. Each Region highlights its approach to collecting data on community health needs from residents, facilitating a collaborative process with its coalition partners to interpret CHA findings, and reaching a consensus on community-identified priorities. HCEZ Regions also share their insights and best practices for conducting community research and their key takeaways from CHAs that will inform their ongoing HCEZ work. In addition to sharing Region-specific community health priorities in the Playbook, HCEZ Regional Leads also preview plans to put their priority interventions into action.

# PHASE 2

## CHAs By-The-Numbers

6

Regional Community Health assessments:

- 39 community profiles
- 72 community areas assessed



500+

Partners Engaged



## Primary Data Collection



7000+

Surveys

84

Focus Groups



19

Assets Maps



These asset maps show local resource networks including grocery stores, restaurants, schools, public transportation spots, public safety areas, green spaces, and medical facilities.

Additional primary data collection methods: • Quick Polling • Interviews • Coalitions

## Secondary Data Collection

Approximately

20

Community participants attended data office hours

- Chicago Health Atlas data indicators
- Integrated Referral and Intake System (IRIS)
- Chicago Data Portal
- Census data (census.data.gov)
- Alliance for Health Equity CHNA focus groups and survey data
- IDPH cause of death data (analysis by CDPH)

## Capacity Building Provided

21

Fellows participated CDPH-led Data Academy

22

Data Office Hours completed

- CHA component presentations & resources
- Community Assessment Guide
- Survey analysis training
- Focus group facilitation support
- Weekly office hours for CLs
- Monthly two-day training for Public Health Ambassadors (PHAs)



## Additional Capacity Building: Organizational Analysis

\* 13 Technical Assistance trainings \* 6 Co-Developed Learning Collaborative sessions

All 77 Community Areas in the City of Chicago are part of an HCEZ Region, and all received some level of resources. However, due to limited resources, a subset of areas of highest need was identified to conduct the hyper-local CHAs shown on the following pages. It is our goal to eventually have assessments for all community areas completed.



**#OneHealthyChi** means equitable access to sexual and reproductive health resources for all residents.

– ERIN MONFORTI  
MAYORAL FELLOW

# FAR SOUTH REGION

**Region:**  
Far South

**Community Areas:**

West Pullman  
Beverly  
Mount Greenwood  
Washington Heights  
Roseland  
Morgan Park  
North Pullman  
Pullman  
Burnside  
South Deering  
Riverdale  
Calumet Heights  
Hegewisch  
East Side

## FAR SOUTH REGIONAL LEAD



### Phalanx Family Services [phalanxgrpservices.org](http://phalanxgrpservices.org)

Founded in 2003, Phalanx Family Services (PFS) strives to assist economically disadvantaged youth and families in the pursuit of self-sufficiency through employment centered programs, mentoring, advocacy, and workforce development solutions. The organization's management staff has more than 120 cumulative years of experience providing workforce development solutions and social services to disadvantaged and at-risk populations. PFS uses a strengths-based approach to meet each person where they are and draft a plan for individual success.

## FAR SOUTH REGION/WEST PULLMAN

### Community Overview

Phalanx Family Services (PFS) combined all their Community Lead assessments into their overarching Far South Regional Level assessment. PFS resides in the West Pullman neighborhood. West Pullman is a primarily Black community, like many communities on the far South Side of Chicago and has a 94% Black population. West Pullman is a tight-knit community with many upcoming interventions and projects to enhance value for its residents. Community members are highly engaged in issues of public safety and violence prevention as well as increasing access to quality foods.

### Priority Area

Public safety/Violence prevention

### Community Health Assessment

Phalanx Family Services (PFS) has established a network of partners and an ongoing partnership with West Pullman schools. The organization developed relationships with four schools in the community where it conducted focus groups and provided workshops around racial health inequities. Using the data and guidance from their health consultant, PFS determined its priority areas for the Region and for West Pullman.

### Key Findings

This assessment revealed high levels of concerns around public safety and the need for more interventions in the community. Additionally, the community needs more resources on diabetes and other prevalent health concerns.

### Next Steps

PFS is supporting the West Pullman community to increase health equity with a particular focus on diabetes and public safety. The community and PFS will work with city officials to bring more health resources and information to West Pullman residents and the rest of the Region.

## BEVERLY

### Community Overview

Beverly is a majority-white community with a large Irish population, although in the past ten years the community has diversified with many more Black residents purchasing homes in the area. The neighborhood of Beverly is officially named “Beverly Hills,” which is also the title of a comparative poem by Gwendolyn Brooks in which she describes the lives of poor and wealthy Chicagoans.

### Priority Area

Diabetes

### Community Health Assessment

PFS engaged community members by making cold calls to various entities and community-based organizations to identify resources and areas of opportunity between their organizations. The organization received responses from important groups including the Beverly Area Planning Association, which hosted a focus group and participated in a PFS health and wellness event.

PFS shared assessment data with its community health consultant to identify community needs and health equity challenges. Data revealed significant racial health disparities, especially in regards to hypertension and diabetes.

### Key Findings

The Beverly community is developing diverse engagement strategies for community involvement. Through open dialogue, there is opportunity for growth and authentic conversation around racial disparities and diabetes screening resources.

### Next Steps

Moving forward, PFS will continue to create space for open and intentional conversation/community meetings in efforts to address community health challenges and racial health disparities.

# Phalanx Family Services

## MOUNT GREENWOOD

### Community Overview

Mount Greenwood is also a majority-white community area with strong Irish heritage roots. Mount Greenwood was home to the last farm in Chicago, which was sold to the Chicago Public School system in the mid-1980s. It's a tight-knit community with many residents working in city government, especially fire and police departments.

### Priority Area

Preventative healthcare

### Community Health Assessment

For this assessment, PFS engaged schools in the community, including Chicago High School for Agricultural Sciences (CHAS). The organization also spoke to the Local School Council on the value of their partnership and involvement. In addition to the presentation, PFS engaged two focus groups that revealed community members' experiences of racial health disparities. Data showed that Mount Greenwood community members are aware of their health concerns and are seeking adequate resources.

### Key Findings

PFS will work with the Mount Greenwood community to ensure resource distribution and space for authentic conversations on community health challenges.

### Next Steps

PFS will continue to build partnerships and gather resources to increase intentional community health engagement efforts.

## WASHINGTON HEIGHTS

### Community Overview

Washington Heights is a middle income, 96% Black community. This community area is the original site of the former Chicago Bridge & Iron Company, the Brainerd Bungalow Historic District, and the Carter G. Woodson Regional Library- home of the largest collection of African-American history in the midwestern United States. Unfortunately, the homicide mortality rate is 60.9 per 100,000 persons, which is three times the rate of homicide mortality compared to the city as a whole.

### Priority Area

Public safety/Violence prevention

### Community Health Assessment

Graduates Over Guns leads Washington Heights' community initiative to promote academic achievement, advocate violence prevention, and create socially responsible efforts. Based on its background in education, Graduates Over Guns conducted four focus groups with area school parent groups, revealing frequent concerns about senseless violence and mental health. The City of Chicago has supported its initiative to bridge health disparities by partnering with schools, parents, and community members.

### Key Findings

Graduates Over Guns identified the connection between mental health and violence prevention. Due to senseless violence, Washington Heights needs resources and financial assistance for grief counseling and coping therapy.

### Next Steps

Graduates Over Guns combats health disparities in Washington Heights by promoting healthy lifestyles. The organization aims to increase funding for violence prevention and mental health programs by advocating for legislative changes.

## FAR SOUTH COMMUNITY LEAD



### Graduates Over Guns Corp [graduatesoverguns.org](http://graduatesoverguns.org)

Graduates Over Guns was born from a discussion on the need to create an outdoor event to shift the narrative of violence plaguing communities and edify academic excellence. The thought quickly escalated into action. Graduates Over Guns highlights graduates via an annual walk, where students wear their caps and gowns and walk the South Side community of Englewood. Graduates Over Guns provides community programming to increase the academic and retention gap of students across Chicago's South Side neighborhoods.

Graduates Over Guns Corp

## FAR SOUTH COMMUNITY LEAD



### Kids Off the Block

[kidsofftheblock.us](http://kidsofftheblock.us)

Kids off the Block (KOB) strives to provide at-risk, low-income youth between ages 12 and 24 positive alternatives to gangs, drugs, truancy, violence, and the juvenile justice system. The organization provides multi-service youth programs which focus on promoting good health, educational achievement, and personal and social growth. These programs emphasize self-development and encourage youth to assess their needs and identify the skills and knowledge needed to achieve their goals.

## ROSELAND

### Community Overview

Roseland is a 95% Black and 5% Latinx community. The community was called “HOPE” prior to its current name and in the past, it boasted a vibrant shopping district with stores such as Gately’s, Three Sisters, York’s, Thom McCann and Robert Hall. Roseland is the home of the Chicago Family Health Center, which is a medical network that serves the entire Far South Side.

### Priority Area

Public safety/Violence prevention

### Community Health Assessment

Open to collaboration, Kids Off the Block (KOB) built partners with organizations with similar values and goals to improve health outcomes for Roseland community members, with everyone playing a valuable role in achieving health equity. Together, they collected assessment data by engaging residents, canvassing, and sharing data with groups such as the DePaul University Gun Violence Research Team. Also, KOB facilitated focus groups and distributed hundreds of surveys in the Roseland community.

### Key Findings

KOB’s assessment findings showed that Roseland youth need community engagement and access to information on the impact of health disparities in their communities. KOB’s research showed that it’s imperative that all generations (youth, middle-aged adults and seniors) be included in the public health efforts, or the community will suffer. The priority health issues in the community stem from the need for violence prevention and mental health resources.

### Next Steps

KOB partnered with Region Lead (Phalanx Family Services) and 12 Community Leads to address gun violence. They also partnered with DePaul University Gun Violence Research Team to collect data and share it with stakeholders in the community. The organization is creating action plans to further address the violence and mental health of the community.

## MORGAN PARK

### Community Overview

Morgan Park is a diverse community with predominantly Black roots on the South Side of Chicago. East Morgan Park is in need of economic redevelopment, medical care and chronic disease prevention.

### Priority Area

Chronic diseases

### Community Health Assessment

Morgan Park Roots Organization carefully selected surveys and monitored the progress of the assessment process. After several weeks of partnering with faith-based organizations, community residents, businesses and others to arrive at a consensus, Morgan Park Roots Organization conducted three focus groups and collected 185 surveys to represent the complex diversity of the community. The survey findings were interpreted by a public health expert.

### Key Findings

Morgan Park is a diverse community, but health disparities exist within the area. East Morgan Park is plagued with housing and economic development challenges, a lack of viable businesses and a lack of city resources and services. West Morgan Park residents don't face similar challenges.

### Next Steps

The Morgan Park Roots Organization will work with the community to close the health disparities and social infrastructure gaps that exist between East and West Morgan Park. The organization will discuss these issues with local elected officials and implement programs that address financial literacy, housing resources and economic independence.

## FAR SOUTH COMMUNITY LEAD

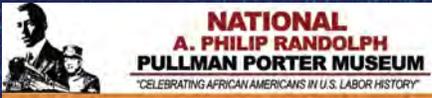


### Morgan Park Roots Organization

[mproots.org](http://mproots.org)

The Morgan Park Community Roots Organization [Morgan Park Roots] was established in 1976 by local Morgan Park residents who possessed a profound love for their community and a desire to instill a “love thy neighbor” cooperative spirit for all residents across Chicago. Today, the Morgan Park Roots Organization has expanded its mission to foster and promote mental and physical health awareness and education; support violence prevention by promoting peace and safe spaces for communities; enhance living and environmental conditions for residents as advocates for economic development, affordable housing; and addressing health and cultural disparities. The organization partners with a plethora of local businesses, schools, coalitions and faith-based organizations to bring information, resources, and education to communities.

## FAR SOUTH COMMUNITY LEAD



### National A. Philip Randolph Pullman Porter Museum

[aprpullmanportermuseum.org](http://aprpullmanportermuseum.org)

The National A. Philip Randolph Pullman Porter Museum is a 501(c)(3) cultural institution with the mission to promote, honor and celebrate the legacy of A. Philip Randolph, Black American railroad employees, the Brotherhood of Sleeping Car Porters and contributions made by Black Americans to America's labor movement. The museum also educates the public about its historic legacy and the contributions made through the study, preservation, and interpretation of their stories that are inextricably intertwined.

## NORTH PULLMAN

### Community Overview

Rooted in history, North Pullman is a predominantly Black neighborhood. The community is known for the history, heritage and culture centered around labor history and tourism.

### Priority Area

Public safety/Violence prevention

### Community Health Assessment

The National A. Philip Randolph Pullman Porter Museum built partnerships organically through collaboration with community groups and service providers with similar missions, goals and interests. Building on the current strengths of the Far South Region, the Museum used a centralized approach in its assessment. The National A. Philip Randolph Pullman Porter Museum conducted focus groups ranging in age and economic background. Data were organized through professional data collection, and the organization came to a consensus on a priority area using the concerns of local stakeholders.

### Key Findings

The North Pullman community experiences some of the largest health disparities in the city. The assessment helped the National A. Philip Randolph Pullman Porter Museum draw connections between the community inequities (i.e., food deserts, lack of access to healthcare resources and education) and health outcomes (i.e., diabetes, arthritis and poor mental health).

### Next Steps

The National A. Philip Randolph Pullman Porter Museum is working to develop community engagement activations to address community violence and health disparities affecting low to moderate income families. The organization will work collaboratively to support legislation that increases access to proactive violence prevention methods as well as opportunities to increase awareness of community health disparities.

## PULLMAN

### Community Overview

The Historic Pullman National Park is nestled on the far South Side of Chicago. The community is a unique mixture of Black, White, and Latinx populations, and is known for its national park and rich labor history.

### Priority Area

Food access/insecurity

### Community Health Assessment

Roses in Roseland's hyperlocal network serves as a connection to the larger regional network and a strengthening support system across the Far South Side region. For its assessment, Roses in Roseland utilized sign-in sheets, pre-assessment, periodic quantitative data, and focus groups with community members. The organization used standard data analysis methods to identify community health priorities and patterns.

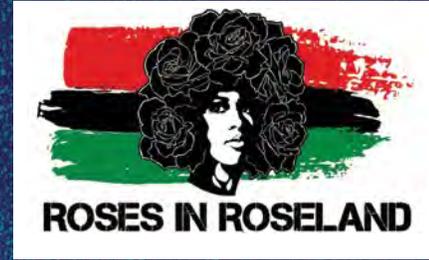
### Key Findings

Approximately 7,000 people call Pullman home and want access to opportunities that will lead to a life of prosperity. The assessment process revealed a lack of essential resources and highlighted the need for sustainable approaches to eradicating food insecurity, healthcare scarcity, and housing instability.

### Next Steps

Roses in Roseland's work is centered around addressing food insecurity. In search of a permanent location, Roses in Roseland will continue to use a "give-and-go" approach to strengthen community infrastructure and enable residents to receive the resources they need.

## FAR SOUTH COMMUNITY LEAD



### Roses in Roseland [rosesinroseland.com](https://rosesinroseland.com)

Roses in Roseland's mission is to provide essential resources on the far South Side of Chicago to the most vulnerable populations seeking to overcome food insecurity and unemployment.

# Roses in Roseland

## FAR SOUTH COMMUNITY LEAD



### New Covenant Harvest Kingdom of God Ministries

[newcovenantharvest.org](http://newcovenantharvest.org)

New Covenant Harvest Kingdom of God Ministries (New Covenant Harvest) is driven by a single goal; to do its part in making the world a better place for all. New Covenant Harvest's decision-making process is informed by comprehensive empirical studies and high-quality data evaluation. The organization strives to build productive relationships and make a positive impact with all its pursuits.

## BURNSIDE

### Community Overview

Burnside is a low-income community where many residents suffer from high blood pressure. New Covenant Harvest strives to address the social determinants of health affecting community health outcomes and to bring more resources to Burnside residents and their families.

### Priority Area

Heart disease

### Community Health Assessment

New Covenant Harvest built partnerships with individuals and organizations that are actively doing work to improve the lives of Burnside residents. These partnerships supported the organization's health assessment process along with collecting data from community focus groups and asset mapping.

### Key Findings

Burnside residents expressed that they feel unheard and would like more access to doctor's offices in the community. Ultimately, heart disease, hypertension, and diabetes are the priority health issues in the community.

### Next Steps

To address the issues of heart disease, hypertension, and diabetes within the population, New Covenant Harvest is creating an intervention that will move forward efforts to bring more nurses and doctors to their community. New Covenant Harvest would also like to have more health fairs and more resources for residents.

## SOUTH DEERING

### Community Overview

The South Deering community is a multicultural area with boundaries of 9500 S. Stony Island (North/West), 9500 S. Colfax (East), and 10600 S. Torrence (South). It includes two income-based senior housing complexes and one public housing development.

### Priority Area

Mental health

### Community Health Assessment

The New Generation Fancy Drill Team conducted assessments via community outreach, surveys and door-to-door conversations with constituents.

- Community partnerships were formed through outreach with receptive organizations.
- Data were gathered through surveys and focus groups from South Deering residents.
- Quantitative and qualitative methods were used to interpret the data.
- Once assessments were completed and needs were identified, a consensus was reached collaboratively.

### Key Findings

The New Generation Fancy Drill Team's assessments aimed to connect South Deering residents with resources to address mental health needs and provide outlets to combat a lack of access and opportunities. During discovery, The New Generation Fancy Drill Team learned that living in income-restricted areas oftentimes made residents feel trapped, and this impacted their mental health.

### Next Steps

The South Deering Community aims to engage residents and seniors through continuous outreach, addressing barriers and providing opportunities for engagement and input.

## FAR SOUTH COMMUNITY LEAD



### New Generation Fancy Drill Team

[newgfancydrillteam.net](http://newgfancydrillteam.net)

The New Generation Fancy Drill Team and Performance Arts Ensemble is a 501(c)(3) and the vanguard of providing a program that is well-focused and can improve the life prospects of disadvantaged youth. The program promotes cultural awareness, academic excellence, and social, emotional, and cognitive resiliency. The drill team, which has expanded city-wide, has helped to provide participants from single-family households with more structure, pride, responsibility, and life skills through physical and educational involvement.

New Generation Fancy Drill Team

## FAR SOUTH COMMUNITY LEAD



### People for Community Recovery

[peopleforcommunityrecovery.org](http://peopleforcommunityrecovery.org)

People for Community Recovery (PCR) prioritizes residents of public housing and environmental injustice communities including the staff, board and membership. Their grassroots model is community-led, valuing community leadership development, transparent decision making, and community-led campaigns.

PCR's mission is to enhance the quality of life of residents living in communities affected by environmental pollution. PCR advocates, educates, and organizes around community-identified priorities including environmental and climate justice, safe and affordable housing, economic equity and community health.

## RIVERDALE

### Community Overview

Riverdale is a predominantly Black community that is heavily disinvested but has an interest in improving health disparities. Riverdale is home to the Altgeld Gardens, a Chicago Housing Authority public housing project where 63% of residents are living below the poverty line.

### Priority Area

Chronic diseases

### Community Health Assessment

People for Community Recovery (PCR) relied on prior relationships with stakeholders to host three community-member focus groups with 8-10 people, using the standard open-dialog setting. Additionally, Dr. Tanya Roberson assisted with developing focus group questions. This approach was tailored for the communities they serve and allowed for strong participation and dialogue.

### Key Findings

The Riverdale community is in need of many resources, but a top priority is building a specialty clinic that offers urgent care. Community participants stated they must travel to receive proper urgent and specialty care for cancer treatments, dialysis, heart diseases, and more.

### Next Steps

As a next step, PCR will set up meetings with the current health stakeholders to see how to collaborate towards community health improvements.

## CALUMET HEIGHTS

### Community Overview

Calumet Heights is a predominantly Black community located on the city's South Side, centered at 87th Street and South Chicago Avenue. Calumet Heights has remained solidly middle class throughout the last several decades, with many professionals and other white-collar workers being drawn to the area.

### Priority Area

Public safety/Violence prevention

### Community Health Assessment

Southeast Calumet Heights Homeowners Association (SCHHA) collaborated with organizations in the community with shared interests. SCHHA gathered assessment data through surveys and community-member focus groups, where residents shared experiences and desires for the future of Calumet Heights. SCHHA collaborated with Dr. Tonya Roberson to analyze and interpret assessment data based on key indicators. As a result, SCHHA and Dr. Tonya Roberson were able to examine the findings and identify priority areas.

### Key Findings

SCHHA's assessment revealed a need for public safety, violence prevention and interventions, in addition to high rates of diabetes within the community. The assessment also revealed that community members have the desire to see change implemented. To address the challenges and priority areas identified in the assessment, SCHHA will continue to bring more resources and healthcare facilities to the residents of Calumet Heights.

### Next Steps

SCHHA is analyzing the assessment to select the most appropriate intervention plan to address the community's needs. SCHHA is taking into account the high number of robberies and acts of violence against the elderly population where more policing and neighborhood meetings are desired. Additionally, SCHHA must ensure that senior citizens have the appropriate devices, such as doorbells, security systems, lighting, and other devices that will increase safety when entering and exiting their residences.

## FAR SOUTH COMMUNITY LEAD



### Southeast Calumet Heights Homeowners Association

The Southeast Calumet Heights Homeowners Association (SCHHA) was established in 1988, under the leadership of Gerald Everett and Betty D. Porter. SCHHA strives to be a pro-active partner in the community with a willingness to galvanize the necessary resources to ensure success in the activities undertaken. The organization emphasizes educating and enlightening its community on the many disparities that plague South Side residents.

## FAR SOUTH COMMUNITY LEAD

The **Hegewisch** Times

### The Hegewisch Times [hegtimes.com](http://hegtimes.com)

The Hegewisch Times is an Illinois not-for-profit corporation, community online newsletter, and newspaper, formed by residents of Hegewisch. The online newsletter and newspaper are published regularly, keeping the community informed of current events and activities in local and surrounding neighborhoods. The Hegewisch Times has over a dozen volunteer staff writers and distributes the print version of the newspaper at over two dozen local establishments, including the Hegewisch Branch Library.

## HEGEWISCH

### Community Overview

Hegewisch is considered Chicago's "hidden" neighborhood due to its remote location in the city's southeast corner, isolated by freeways, railways, and industrial areas. Hegewisch is home to Chicago's only sawmill and its only trailer park. In recent decades, the area has become more diverse and is now 61% Hispanic.

### Priority Area

Mental health

### Community Health Assessment

The Hegewisch Times built partnerships with other local organizations through community meetings, where the Hegewisch Times collected over 300 surveys. Its regional network provided Hegewisch Times with assessment forms and additional resources to conduct four community-member focus groups, which helped to collect data from diverse populations. The data collected were processed by Survey Monkey and rated (percentages) from high to low, helping to determine priority areas.

### Key Findings

Assessments and focus groups revealed the top concerns in Hegewisch: mental health, diabetes, and violence.

### Next Steps

The Hegewisch Times will collaborate with local organizations and its regional network to develop an intervention to address mental health disparities.

## EAST SIDE

### Community Overview

The East Side community is bordered by the Calumet River, northern Indiana and Lake Michigan. With a population of roughly 22,000 residents, 85% are of Mexican heritage with smaller populations of Yugoslavian and Black residents. This is a tight-knit, family-orientated community of laborers and small business owners with a median income of about \$43,421.

### Priority Area

Chronic diseases

### Community Health Assessment

Assessments were conducted with the assistance of many community activists and outreach workers who were instrumental in introducing the organization to concerned residents, organizations and champions of the East Side. These community partners were essential to fostering trust among residents. With their help, YAF completed 356 surveys in less than three weeks. Survey analysis concluded that most health disparities resulted from lifestyle, violence, or the lack of essential resources. The group focused on diabetes because the condition is closely related to other health disparities.

### Key Findings

Diabetes is misunderstood, and it's only being communicated from a medical perspective. East Side residents feel there is nothing that they can do because all solutions for addressing diabetes present additional hardships. Residents want long-term and conceivable solutions, including those that will address food deserts in the community.

### Next Steps

The East Side decided to address the priority area of diabetes. A planned intervention will be a series of prevention management trainings promoted by the Centers for Disease Control and Prevention (CDC) and facilitated by one of the CDC's certified trainers.

## FAR SOUTH COMMUNITY LEAD



### Youth Advocacy Foundation

[yafchicago.org](http://yafchicago.org)

Youth Advocacy Foundation (YAF) is a faith-based organization committed to providing growth and development opportunities for youth and young adults. The organization's youth-based initiatives focus on the four sustaining pillars of community-health and wellness, education, financial literacy, and civic engagement.

# VIEWS ACROSS THE HCEZs



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**#OneHealthyChi** means that we acknowledge the long history of systemic racism and learn what we can do as individuals and in our organizations and workplaces to make lasting change in our policies and the way we act.

—ANN CIBULSKIS, CHICAGOAN

# NEAR SOUTH REGION

**Region:**  
Near South

**Community Areas:**

Avalon Park  
Auburn Gresham  
Oakland and Washington Park  
Grand Boulevard, Douglas,  
and Fuller Park  
South Chicago  
Woodlawn  
South Shore  
Englewood and West Englewood  
Greater Grand Crossing

## NEAR SOUTH REGIONAL LEAD



**Greater Auburn Gresham Development Corporation**  
[gagdc.org/index.html](http://gagdc.org/index.html)

The Greater Auburn-Gresham Development Corporation (GAGDC) works to foster and promote revitalization of the low-to-moderate income communities using comprehensive community development strategies. Since 2001, the GAGDC has worked in all, or parts of, Ashburn, Auburn-Gresham, Englewood, Greater Grand Crossing, Washington Heights, West Englewood, and West Chatham.

## NEAR SOUTH REGION, AVALON PARK AND AUBURN GRESHAM

### Community Overview

The Near South Region spans from the northern point of Bronzeville, south to Auburn-Gresham, and east to South Shore. The region includes mostly Black residents and a minority of Latinx residents. There are thriving partnerships and developments throughout the region.

### Priority Area

Public safety/Violence prevention

### Community Health Assessment

The Greater Auburn Gresham Development Corporation (GAGDC) partnered with organizations whose programs and initiatives directly affect the community at large. The group includes faith-based organizations, health and human services, elected officials, youth/education, financial institutions, city departments, and corporations. GAGDC ensures that its hyperlocal networks are aware of cross-community opportunities within their 8 coalitions that cover the Region.

Community Leads joined pre-existing coalitions ensuring all community partners were aware of the assessment's vision and value. GAGDC sent surveys through the Community Lead's outreach programs and partners were identified through resource mapping and additional online outreach efforts via social media. GAGDC received a total of 1,719 responses. Community Leads moderated more than 20 focus groups on healthy communities and healthcare concerns. Also, CLs conducted hundreds of interviews, captured through recorded videos and verbal testimonials.

### Key Findings

Three priority focus areas were identified in the Near South Region--public safety, mental health, and diabetes. Additionally, although public safety was identified as the priority issue, the team will also work diligently with partners to address the mental health aspect of violence.

### Next Steps

There will be continued cross-community collaborations as the region develops an action plan to focus on public safety through three interventions. These include quarterly police district community accountability meetings, development of a public safety resource kit for the public, and a weekly summer event series for youth in each Near South community.

## OAKLAND AND WASHINGTON PARK

### Community Overview

The Oakland and Washington Park community areas, which are adjacent to the "Black Metropolis" that's also known as Bronzeville, boast a rich historical background, vibrant sense of community, and picturesque natural surroundings.

### Priority Area

Public safety/Violence prevention

### Community Health Assessment

On-the-ground partnerships have allowed Bright Star Community Outreach (BSCO) to collect data from 1,628 resident street surveys. The surveys gauged what residents thought about their community. BSCO interpreted data through its data analyst, and built consensus around the top priority area by using that analysis and discussing lived experiences.

### Key Findings

After gathering data from 1,628 adults in the area BSCO identified the top three priorities expressed by residents which include violence prevention, access to healthcare, and more green spaces, such as parks and gardens. The need for violence prevention programs was most pronounced.

### Next Steps

BSCO is committed to reducing violence and building resilience in Bronzeville through data-informed programming. However, BSCO will continue to champion the need for additional funding support.

## NEAR SOUTH COMMUNITY LEAD



### Bright Star Community Outreach

[brightstarcommunityoutreach.com](http://brightstarcommunityoutreach.com)

Over the course of its 12-year history, Bright Star Community Outreach (BSCO) has made significant contributions to the renewal of Chicago's most vulnerable communities as a 501(c)(3) nonprofit organization. Driven by the hope for change in this city and the families that call it home, BSCO's presence has been marked by effective programming, social development, and advocacy; particularly in the 3rd and 4th ward of Chicago's South Side.

Bright Star Community Outreach

## NEAR SOUTH COMMUNITY LEAD



### Centers for New Horizons [cnh.org](http://cnh.org)

Founded in 1971, Centers for New Horizons, Inc. (CNH) is a nonprofit organization that assists children, youth, and families in becoming self-reliant, improving the quality of their lives, and participating in rebuilding their community. The agency exists to serve and partner with community residents in their efforts to bring about positive changes. CNH envisions that through focusing on community collaborations, a unified, well-organized community is built.

## GRAND BOULEVARD, DOUGLAS, AND FULLER PARK

### Community Overview

Grand Boulevard, Douglas and Fuller Park are predominately Black communities known for their artistic and musical roots, specifically the blues. The area is culturally rich with historic graystones, landmarks, and food.

### Priority Area

Mental health

### Community Health Assessment

Centers for New Horizons (CNH) built partnerships with community partners by attending their events, as well as inviting them to attend CNH's events. The organization engaged its partners based on alignment with its mission and scope of work. CNH gathered data by distributing community surveys to residents.

### Key Findings

The assessment process helped CNH identify and understand its community's needs, and the organization is working on hosting more opportunities for community input.

### Next Steps

The Grand Boulevard area has decided to focus on Mental Health, specifically for women in the community. CNH is working with its community partners to ensure that they meet that specific need.

## SOUTH CHICAGO

### Community Overview

South Chicago is a mixed ethnicity and socioeconomic community. This community boasts robust cultural pride and is comprised of several diverse communities that work and live together. This community offers several resources devoted to its residents, and CFHC plays a major part in providing access to those resources for the community.

### Priority Area

Healthcare access

### Community Health Assessment

To build partnerships, Chicago Family Health Center (CFHC) worked with organizations providing similar resources in the community. Building on the pre-existing relationships and trust between its network and the South Side community, CFHC collected data by working directly with patients and community residents. CFHC built consensus around assessment data using its guiding principles and goals.

### Key Findings

CFHC found that clear, concise and consistent communication is the best way to assess community needs.

### Next Steps

CFHC continues to serve as a leader in healthcare in South Chicago. The organization is engaging the community and striving to bring more critical resources to residents.

## NEAR SOUTH COMMUNITY LEAD



### Chicago Family Health Center

[chicagofamilyhealth.org](http://chicagofamilyhealth.org)

Since its founding in 1977, Chicago Family Health Center (CFHC) has become the primary care medical home for thousands of Chicagoans, including some of the city's most vulnerable populations. As an award winning, nationally-recognized leading voice for community health centers, CFHC has played a vital role in providing access to affordable, comprehensive healthcare services to underserved communities throughout Chicago.

Chicago Family Health Center

## NEAR SOUTH COMMUNITY LEAD



### Project H.O.O.D.

[projecthood.org](http://projecthood.org)

Project H.O.O.D. provides mentorship, training, and community for residents of Woodlawn and Englewood, caring for community members through services that strengthen. Project H.O.O.D.'s goal to end the cycle of poverty, violence, and incarceration drives its work. The organization operates on the belief that all people hold the power to transform their own lives and become peacemakers, leaders, and entrepreneurs.

## WOODLAWN

### Community Overview

Woodlawn is a neighborhood on the South Side that's known for its rich history, cultural diversity, and community activism. With a population of over 25,000 residents, Woodlawn is a predominantly Black community with a mix of lower-income and middle-class households.

### Priority Area

Access to primary care

### Community Health Assessment

Project H.O.O.D.'s Community Health and Wellness department built partnerships to do the assessment by first identifying organizations and individuals that shared a similar mission and vision. Project H.O.O.D. worked with stakeholders who had expertise in areas they wanted to address, such as healthcare providers, community leaders, and local government officials. Data were collected through a combination of six focus groups with a total of 50 participants and surveys of 500 residents. The group also created a community advisory board to gather input from a diverse group of stakeholders and ensure that community voices were represented in the decision-making process. The group interpreted data by analyzing themes that emerged from the focus groups and survey responses and by comparing its findings to existing health data and research.

### Key Findings

There is a lack of access to affordable and healthy food options in the Woodlawn community, which contributes to poor health outcomes. Another relevant finding related to the significant need for mental health services and support, particularly among youth.

### Next Steps

Project H.O.O.D. Community Health and Wellness department will develop intervention that is evidence-based and tailored to the unique needs of the community. To develop the intervention, the organization will engage in ongoing dialogue with community members to better understand their needs and preferences.

## SOUTH SHORE

### Community Overview

South Shore is a predominantly Black neighborhood with 94% of residents identifying as Black or African-American. Known for its proximity to Lake Michigan and its rich cultural history, South Shore is the home to the South Shore Cultural Center.

### Priority Area

Public safety/Violence prevention

### Community Health Assessment

South Shore Works built partnerships with community organizations by networking in person and via telephone. Partnerships were developed with organizations that prioritize public safety and treat the issue holistically. Data collected from door-to-door outreach was an approach that proved to be effective in reaching seniors and those who are most active in the community. The team completed over 100 surveys.

### Key Findings

South Shore residents care most about preventing and managing chronic diseases and building trauma-focused prevention measures, violence recovery, and mental health services.

### Next Steps

South Shore Works decided to address chronic disease prevention and violence prevention. This focus will include continued partnerships with organizations that do similar work. They will also apply for grants to fund violence prevention in order to increase their capacity to do this work.

## NEAR SOUTH COMMUNITY LEAD



### South Shore Works

[southshoreworks.org](https://southshoreworks.org)

South Shore Works strives to create a collaborative that harnesses the collective power of South Shore organizations, agencies, and human capital to design and create a thriving, sustainable community. Its vision is a vibrant, mixed-income community with a bustling commercial corridor, stable housing stock, good schools and stimulating cultural and recreational outlets and opportunities.

# South Shore Works

## NEAR SOUTH COMMUNITY LEAD



### Teamwork Englewood [teamworkenglewood.org](http://teamworkenglewood.org)

Teamwork Englewood was formed in 2003 as part of the New Communities Program, sponsored by Local Initiatives Support Corporation (LISC) and the MacArthur Foundation. The goal is to unite organizations serving Englewood residents and work toward the common goal of building a stronger community. The organization serves as a capacity builder and catalyst for positive community change, focused on safety, services to special needs populations and the promotion of healthy lifestyles for all residents.

## ENGLEWOOD AND WEST ENGLEWOOD

### Community Overview

The Englewood community is a historic and well-known Chicago neighborhood with a majority-Black population.

### Priority Area

Chronic diseases

### Community Health Assessment

Teamwork Englewood collected data through two surveys: the Health Navigator Survey, a 12-week assessment aimed to collect health and wellness data from Englewood residents regarding healthcare access, healthcare utilization, barriers to quality healthcare; and their HCEZ Health Equity Survey, which was used to help determine health equity levels in Englewood.

### Key Findings

The results from both surveys, along with a review of the top seven health indicators in Englewood, helped narrow the focus to chronic illnesses. This focus includes diabetes management, prevention and support; heart disease management, prevention, and support; and healthy eating and lifestyle changes.

### Next Steps

Based on the findings, Teamwork Englewood decided to focus on chronic illness to encompass ways that different conditions are recognized and treated in the community and how they should be addressed.

## GREATER GRAND CROSSING

### Community Overview

Greater Grand Crossing is a thriving Black community with a rich history of housing impactful one-time residents, such as Gwendolyn Brooks, Shani E. Davis, and Wilton D. Gregory. The community boasts the 75th Street Strip, a vibrant hub of Black-owned and operated businesses, including restaurants and stores.

### Priority Area

Public safety/Violence prevention

### Community Health Assessment

The Kindness Campaign prioritized community engagement by using personal interviews, direct community engagement and group conversations to ensure the strategy development and implementation aligned with the community's desires. During discovery, the community expressed the need for communication and space for all voices to be heard, meaningful exchanges, and transformative action. The priorities were established by involving residents, stakeholders, businesses, social service agencies, and students.

### Key Findings

Surveys and community member focus groups supported decade-old empirical data that public safety is a health problem. Safety and low crime were ranked as the highest concerns in the community. Public safety is a priority and critical for community improvement. The Kindness Campaign seeks new approaches to public safety to save lives and build systems of care rooted in improving all communities' well-being.

### Next Steps

The Near South Region is addressing public safety through better relations with the police, community accountability, and action and commitment. The action plan includes a public safety event series, community coalitions with police districts, and a public safety toolbox.

## NEAR SOUTH COMMUNITY LEAD



### The Kindness Campaign [kindnesseveryday.org](http://kindnesseveryday.org)

The Kindness Campaign implements a fearless approach to initiate and improve social change by taking calculated risks on new ideas and partnering "across lines" with stakeholders that share the same belief to engage people and change the community for the better. The Kindness Campaign provides services for all sectors with a set of core values that drive the following initiatives: Healthy Equity, Workforce Equity, Public Equity, and Education Equity.

# The Kindness Campaign

# VIEWS ACROSS THE HCEZs



“

**Institutions and community organizations need to come into the community, listen, be present, and hear what residents are talking about.**

– OAKLEY SQUARE APARTMENTS PARTICIPANT

# NORTH/CENTRAL REGION

**Region:**  
North/Central

**Community Areas:**  
North Center  
Uptown  
West Ridge  
Edgewater and Lincoln Square  
Rogers Park  
Lake View

## NORTH/CENTRAL REGIONAL LEAD

Swedish Hospital  
Part of  NorthShore

### Swedish Hospital

[swedishcovenant.org/  
community/healthy-chicago-  
equity-zone](https://swedishcovenant.org/community/healthy-chicago-equity-zone)

Swedish Hospital's mission and vision is based on a commitment to the neighborhood and serving the community. As a member of the NorthShore University HealthSystem, Swedish Hospital shares the belief that the best healthcare is local, rooted in the community and defined by positive relationships, exceptional experiences and quality care delivery.

## NORTH/CENTRAL REGION

### Community Overview

The North/Central Region consists of 11 communities: West Ridge, Rogers Park, Uptown, North Center, Edgewater, Lincoln Square, Lake View, Near South, Near North, The Loop, and Lincoln Park. The first community in which Swedish Hospital implemented the HCEZ project was West Ridge. Culturally rich, West Ridge was shaped by generations of immigrants who brought customs and traditions from all over the world. Swedish Hospital intentionally started with this community to address the social determinants of health that residents of West Ridge face.

### Priority Area

Access to healthcare

### Community Health Assessment

Swedish Hospital used a mixed-method approach, relying on multiple sources of quantitative and qualitative data collected through focus groups, surveys, organization data, community dialogues, literature and resources such as the Chicago Atlas, U.S. Census Bureau, and the Centers for Disease Control and Prevention (CDC). The organization also facilitated meetings with the hyperlocal and regional network including the Chicago Police Department, faith-based institutions, and Chicago Public Schools to discuss strategic ways to engage residents on community health needs.

### Key Findings

Swedish Hospital clarified and ranked priority issues within each community through the analysis of survey results, statistical data collection, in-depth interviews and focus groups. Swedish Hospital's HCEZ team worked with community partners to identify and prioritize mental and behavioral health, chronic health conditions, and wellness, and social and structural determinates of health.

### Next Steps

Swedish Hospital values the community health assessment process and will continue to take a collective impact approach to support the health and well-being of the communities it serves. The organization will continue to build partnerships with key community organizations to develop strategies that address the most pressing health needs in the North/Central region of Chicago. This strategy will allow the Swedish Hospital HCEZ team to better understand and reach the most vulnerable residents of the community and enable them to achieve improved health.

## NORTH CENTER

### Community Overview

North Center is a tight knit caring community of neighbors helping neighbors.

### Priority Area

Food access/insecurity

### Community Health Assessment

Common Pantry conducted assessments based on data shared in monthly reports that informed about how many clients served and what other social services were provided

### Key Findings

Food insecurity is increasing in the area and there is a need for more support to ensure that neighbors get the food they need. The number of people utilizing the pantry is up 80% from previous years and that number shows no sign of decreasing.

### Next Steps

Common Pantry will continue to provide resources to combat food insecurity. The organization will look for more sources of healthy and culturally relevant food, as well as increase social service support that addresses root causes of food insecurity.

## NORTH/CENTRAL COMMUNITY LEAD



### Common Pantry

[commonpantry.org](https://commonpantry.org)

Common Pantry meets the emergency needs of the local community by providing healthy food, kinship and support to help overcome poverty-related challenges.

Common Pantry

## NORTH/CENTRAL COMMUNITY LEAD



### APNA GHAR

[apnaghar.org](http://apnaghar.org)

Apna Ghar provides critical, comprehensive, and culturally competent services, and conducts outreach and advocacy across communities to end gender violence. Apna Ghar is a human rights organization working to end gender violence with an evidence-based model that factors in macro and micro level conditions that create the unique barriers that Apna Ghar's program participants face. Since 1990, the organization has reached more than 100,000 survivors and community members across the region.

## UPTOWN

### Community Overview

Uptown is home to many diverse communities and social service agencies. This community is bustling with restaurants, retail stores, and a short walk to Montrose Beach.

### Priority Area

Access to healthcare

### Community Health Assessment

Apna Ghar partnered with Change Insight to conduct surveys among the Asian diaspora in Chicago to assess their social determinants of health. The survey aimed to understand the specific health needs of different sub-groups by disaggregating the data. Apna Ghar collected data from 200 surveys at outreach events. As an agency that serves domestic violence survivors who are often left homeless and without financial support, the trauma experienced by clients need to be addressed through mental health services. Apna Ghar partners with other agencies to provide clients with the wrap-around services they need for stability and self-sufficiency.

### Key Findings

Based on the findings, the top five factors were limited English proficiency, low social integration, unemployment, elevated stress, and poverty. Translation services, enrollment in ESL classes, job readiness assistance, financial help and support, connecting clients to mental health services and providing the resources to access healthcare is essential in addressing the trauma experienced by survivors.

### Next Steps

Apna Ghar will address access to healthcare and mental health services as it is essential for survivors of domestic violence, especially for immigrants and refugees. Its continued work with Change Insight is to generate data that will address the specific health needs of different ethnic groups. The utilization of this data will help in programming and policymaking.

## UPTOWN

### Community Overview

Community Counseling Centers of Chicago (C4) is co-lead with Apna Ghar in the Uptown Community. With a history of social service providers, the neighborhood has many available services but also has high needs for social services.

### Priority Area

Mental health

### Community Health Assessment

C4 conducted an assessment and built partnerships from 50 years of serving Uptown and the North Side of Chicago. They recognized that clients, especially those with severe mental illness, needed case management for social determinants of health. C4 is working with its Regional Lead, Swedish Hospital, to integrate the HCEZ Leads into established care networks.

### Key Findings

Despite high needs, the far North Side, including Uptown, has a substantial immigrant and refugee populations with limited mental health resources. The demand for services exceeds what the community can currently provide.

### Next Steps

C4 will design programming that can better serve the cultural needs of refugee and immigrant communities.

## NORTH/CENTRAL COMMUNITY LEAD



### Community Counseling Centers of Chicago (C4)

[c4chicago.org](http://c4chicago.org)

Community Counseling Centers of Chicago (C4) is a behavioral health advocate and social service provider, offering quality, comprehensive customer-oriented services tailored to community diversity.

## NORTH/CENTRAL COMMUNITY LEAD



### ICNA Relief

[icnarelief.org](http://icnarelief.org)

ICNA Relief USA seeks to alleviate human suffering by providing caring and compassionate service to victims of adversities and survivors of disasters. ICNA Relief USA strives to build healthy communities, strengthen families and create opportunities for those in despair while maintaining their dignity.

## WEST RIDGE

### Community Overview

West Ridge is a vibrant neighborhood known for its rich cultural diversity, delicious cuisine, and large Hasidic community. It is also home to a variety of immigrant communities such as Irish-American, German-American, Indian, Pakistani, Bangladeshi, Assyrian, Russian, Korean and Rohingya.

### Priority Area

Financial/economic stability/employment  
Food access/insecurity  
Housing

### Community Health Assessment

ICNA Relief USA builds partnerships with community leaders and organizations that share the goal of helping those in need. These partnerships involve cross-referrals, maintaining relationships based on service offerings, location, and reputation. The hyperlocal network is crucial in implementing decisions made regionally, and ICNA Relief's staff records data to assess changes in needs and services. The focus is targeted to work to meet the community's needs.

### Key Findings

West Ridge's diverse community of refugees and migrants has numerous unmet needs, including dietary restrictions, language barriers, employment, cultural and religious limitations, and access to services.

### Next Steps

ICNA Relief USA will address West Ridges' growing issue of food insecurity, limiting access to its food pantry to individuals residing in the four zip codes in/around its immediate location. ICNA Relief USA will also focus on educating local political leaders and decision-makers to see first-hand the growing need for food and access to help address this through appropriate future legislation.

## WEST RIDGE

### Community Overview

West Ridge is a diverse neighborhood that includes one of the largest Rohingya populations in the United States. West Ridge is known for being full of language, culture and food.

### Priority Area

Refugee support

### Community Health Assessment

Collaborating with different organizations helps West Ridge support constituents even more by identifying regional services and resources. West Ridge collects data through the Chicago Health Atlas and from local constituents.

### Key Findings

West Ridge, located on the North side, is an underserved community that is often overlooked. Despite its vibrant diversity, many are unaware of the demographic makeup and languages spoken in the area.

### Next Steps

West Ridge is taking steps to address health disparities by offering health screenings, vaccine events, and educational workshops.

## NORTH/CENTRAL COMMUNITY LEAD



### Rohingya Cultural Center [rccchicago.org](http://rccchicago.org)

The Rohingya Culture Center is a Chicago-based organization that provides social services to meet the needs of the Rohingya refugee community, widely recognized as the one of most persecuted people in the world. In 1982, Rohingya Muslims of northwestern Burma (Myanmar) were denied legal status and displaced by ethnic violence, rendering them stateless and homeless, and denied the right to education, work, and travel. The Rohingya Cultural Center was established in 2016, in Chicago's West Ridge/West Rogers Park neighborhood, to serve the growing Rohingya refugee community. As many as 1,000 Rohingya have been relocated to Chicago since 2010, with the vast majority in this neighborhood.

# Rohingya Cultural Center

## NORTH/CENTRAL COMMUNITY LEAD



Lutheran Social Services of Illinois

### Lutheran Social Services of Illinois

[LSSI.org](http://LSSI.org)

Lutheran Social Services of Illinois (LSSI) serves over 38,000 people annually, providing critical programs for Illinois residents each year, including foster care, mental health services, alcohol and drug treatment, affordable senior housing, residential programs for people with developmental disabilities, home care for seniors, and services that help families who have been impacted by incarceration.

## EDGEWATER AND LINCOLN SQUARE

### Community Overview

With both proximity to Lake Michigan and the Red Line, Edgewater is home to a vibrant, dynamic community that includes many recent and more established immigrants from countries around the world as well as a close knit LGBTQIA+ community. Lincoln Square is a tight-knit community comprised of both well-established residents and recent arrivals, and an eclectic mix of 1800's Victorian homes, commercial space, and green space where many community events are held.

### Priority Area

Resource connection (Lincoln Square)  
Behavioral Health (Edgewater)

### Community Health Assessment

With both Edgewater and Lincoln Square being designated as Tier 2 communities, Lutheran Social Services of Illinois (LSSI) utilized existing data including the Chicago Health Atlas, US Census data and conducted conversations with key stakeholders including elected officials, librarians, school staff, representatives of an array of community organizations, as well as community members they met around town. The organization worked to identify stakeholders that intersected with community members in a variety of ways so that it could benefit from multiple viewpoints across affinity groups within the communities. LSSI considers its assessment ongoing and continues to seek out and utilize new information to shape their efforts.

### Key Findings

LSSI discovered that the Edgewater community is home to the highest percentage of LGBTQIA+ people in the city, has high rates of people seeking mental health services, suicidality, and STIs, yet there is a shortage of behavioral health services and trauma-informed programs that are responsive to these specific needs. In Lincoln Square, the ecosystem of social support is both underutilized and less concentrated. This can be deduced by the median income combined with the relatively high rate of people who qualify for benefits but are not receiving them, low food access and other key health indicators like diabetes and mental illness.

## Next Steps

In Edgewater, LSSI is prioritizing creating and improving services for LGBTQIA+ folks who need behavioral health and substance use services, reducing barriers to health screenings and treatment with an emphasis on STI, diabetes, and breast and colon cancer, and increasing participation in public benefits programs for all community members. In Lincoln Square, the organization learned that there are many community members who qualify for programs and resources, including but not limited to public benefits and food banks, but are not connected to these needed services. LSSI is focusing their work on identifying the barriers, mitigating them, and connecting community members to the resources.

# Lutheran Social Services of Illinois

## NORTH/CENTRAL COMMUNITY LEAD



### **Tapestry 360 Health** [tap360health.org](http://tap360health.org)

Tapestry 360 Health, formerly known as Heartland Health Centers, are federally qualified health centers with 16 locations across Chicago's North Side and nearby suburbs. Tapestry 360 Health provides over 28,000 patients with a medical home offering primary care, oral health care, and behavioral health care services. As a medical home, Tapestry 360 Health ensures comprehensive, affordable, quality, safe, and coordinated health care that is culturally competent and oriented to addressing all the health care needs of each patient.

## ROGERS PARK

### **Community Overview**

Rogers Park is a port of entry for immigrants and refugees where residents speak over 80 languages. This diverse community has street-end beaches, a thriving arts district, and a welcoming atmosphere

### **Priority Area**

Social determinants of health

### **Community Health Assessment**

The Rogers Park HCEZ team composed of Family Matters and Tapestry 360 Health launched a holistic community health needs survey. Respondents' top concerns include public safety, financial security, community connectedness, and access to services in their preferred languages. Tapestry 360 Health is building a team of stakeholders with deep roots in the community, whose specialty areas complement those of Family Matters and Tapestry 360 Health, including members of the North of Howard Together Collective.

### **Key Findings**

Culturally relevant services offered in multiple languages are crucial for community members. It is especially important that community-based organization enrollment be linguistically accessible. Seeing disparities in specific subpopulations in Rogers Park highlights how access to services varies dramatically based on circumstance.

### **Next Steps**

Tapestry 360 Health will focus on solutions that respond to its community's self-stated requests while expanding language capacities. Tapestry 360 Health will work with community leaders to develop access to services in ways that are meaningful.

## LAKE VIEW

### Community Overview

Lakeview is Chicago's second-largest community area, with a predominantly White population of 80%. The area offers a laidback atmosphere and convenient neighborhood amenities and is bordered on the east by a beautiful stretch of the Lake Michigan shoreline.

### Priority Area

Mental health

### Community Health Assessment

Thresholds initially developed partnerships by attending community events hosted by other organizations and agencies and collaborating with those who aligned with their mission and vision. The hyperlocal network complements the regional network and helps connect the community to services. Thresholds' in-house data and evaluation team tracks services provided to quantify member needs, measure outcomes, and assess the frequency of services provided. This approach is especially beneficial since Thresholds has 90 locations throughout Chicago and the Chicagoland area. The same data collection method was applied to the Lakeview and Lincoln Park areas to target areas of high demand.

### Key Findings

Despite being known as affluent areas, Lakeview and Lincoln Park have a significant population of housing-insecure individuals and those in need of support for mental illness. Through community research, Thresholds targeted high-demand areas and collaborated with organizations to offer services to its clients. This work has proven beneficial in these areas.

### Next Steps

The Mobile Crisis Response (MCR) team is crucial to Thresholds' comprehensive action plan. Since its launch in July 2022, the MCR team has played a significant role in providing immediate 24-hour intervention for individuals with mental illness and contemplating suicide. As the team expands, Thresholds aims to prioritize communities needing this critical service.

## NORTH/CENTRAL COMMUNITY LEAD

The logo for Thresholds, featuring the word "THRESHOLDS" in a bold, black, sans-serif font. The letter "H" is stylized with a vertical blue line extending upwards from its top bar and downwards from its bottom bar.

### Thresholds

[thresholds.org](https://thresholds.org)

Thresholds, founded in 1959, provides healthcare, housing, and hope for thousands with mental illnesses and substance use disorders in Illinois each year. Through care, employment, advocacy, and housing, Thresholds assist and inspire people with mental illnesses to reclaim their lives.

# Thresholds

# VIEWS ACROSS THE HCEZs



“

It feels like this structural racism is impacting everything. I meant, whether we're talking about the meetings we can attend, [...] the properties we can buy because of redlining, [...] being able to buy insurance. It really permeates everything from economics to education to even the way we think.

—GARFIELD PARK COMMUNITY COUNCIL PARTICIPANT

# NORTHWEST REGION

**Region:**  
Northwest

**Community Areas:**  
Belmont Cragin  
Irving Park  
Albany Park  
Logan Square

## NORTHWEST REGIONAL LEAD



### Northwest Center

[northwestcenterchicago.org](http://northwestcenterchicago.org)

Founded in 2003, the Northwest Center identifies and responds to the needs of the community by leveraging resources to improve economic well-being and quality of life in Belmont Cragin and the surrounding communities.

Through housing counseling, financial literacy programs, and community activism, Northwest Center helped thousands of families on Chicago's Northwest Side keep their homes, create financial opportunities, and grow as community organizers and leaders.

## NORTHWEST REGION

### Community Overview

Northwest Side residents of color are overlooked compared to their White counterparts. While the broader region has higher averages compared to the city average, many residents of color experience lower life expectancy rates. This is reflective of the wide gap between wealthier White communities and lower income communities of color.

### Priority Area

Public safety/Violence prevention

### Community Health Assessment

The assessment model used in the Northwest Region blended best practices in health equity planning with quality-of-life planning, a model that enables local communities to take a comprehensive assessment of community needs. Northwest Center's methodology was asset-based, rather than deficit-based, meaning each community inventoried their assets and strengths and used them to build strategies to address challenges such as a lack of affordable housing, health outcome disparities and a rise in public safety challenges.

### Key Findings

This process has allowed the Northwest Region to assert that all priority areas are intersectional - e.g. public safety involved health and human services, particularly mental health, and safe and affordable housing has deep impacts on health outcomes. Through cross-Community Lead meetings, all Community Leads decided to focus regionally on three of the priority areas - public safety, affordable housing, and health and human services.

### Next Steps

The Northwest Region decided to address the priority area of public safety. One of the interventions currently being developed will find trauma-informed care as an alternative to using police to address mental health incidents. Northwest Center is also working to impact legislation by increasing the community-led data collection.

## BELMONT CRAGIN

### Community Overview

Belmont Cragin is a majority Latinx community with Eastern European roots. It's a diverse and vibrant community, and Northwest Center supports working families there as they build a better life with affordable housing, local jobs, access to quality education and holistic healthcare.

### Priority Area

Public safety/Violence prevention

### Community Health Assessment

Utilizing longstanding partnerships with schools, Federally Qualified Health Centers and local government officials, Northwest Center conducted focus groups, soft polling at 15 community events, and surveys of more than 300 residents with a stress indicator survey in partnership with Lurie's Children Hospital. The organization will be hosting townhalls to disseminate the community health assessment, translated and with audio versions.

### Key Findings

Mental health was mentioned frequently in focus groups, with residents saying they have trouble accessing services. One community stakeholder even named Belmont Cragin as a mental health desert. Public safety was also discussed as a top concern. However, all priority areas intersect with mental health care.

### Next Steps

For Northwest Center, improved public safety is the top priority. The issue is close to them, given the loss of a health equity team member to gun violence. The organization will continue to uplift community led data collection to impact legislation.

## NORTHWEST COMMUNITY LEAD



Northwest Center

## NORTHWEST COMMUNITY LEAD



### Metropolitan Family Services

[metrofamily.org](http://metrofamily.org)

Metropolitan Family Services (MFS) mission is for families to learn, to earn, to heal, to thrive. Part-mentor, part-motivator, part-advocate, MFS has been the engine of change that enables Chicago-area families to reach their greatest potential and positively impact their communities since 1857.

MFS has more than 1,100 staff dedicated to providing quality services to families throughout Chicago, DuPage County, Evanston/ Skokie and the southwest suburbs. MFS serves more than 136,600 families and individuals as diverse as the communities in which they live, with 81% being part of the working poor or lower-middle class.

## IRVING PARK

### Community Overview

In addition to Irving Park, the Far Northwest community encompasses the following communities: Portage Park, Norwood Park, Edison Park, Jefferson Park, and Forest Glen. Most residents have a middle-class income/ Houses and other infrastructure are well maintained, and there are many public parks.

### Priority Area

Public safety/Violence prevention

### Community Health Assessment

Metropolitan Family Services' Far Northwest Health Equity Coalition meeting gathers faith based and community leaders, business owners, school principals and community residents. By leveraging this group Metropolitan Family Services (MFS), collected 528 surveys and conducted four focus groups and three workshops to determine which health priority the community wanted to pursue. By the third workshop it was clear that public safety was the top concern.

### Key Findings

The group learned that there is only one hospital in the Far Northwest community of Chicago. Further, they were surprised to learn that Irving Park only has two grocery stores.

### Next Steps

The Far Northwest community has decided to address the priority area of public safety. It will start by meeting community leaders to finalize short-term and long-term goals.

## ALBANY PARK

### Community Overview

Albany Park is an ethnically and linguistically diverse community that is affectionately known to its residents as the “Gateway to the World.” The community is comprised of diverse businesses and organizations representing Mexican, South American, Filipino, Korean, Indian, Cambodian, Somali, Romanian, and Middle Eastern cultures.

### Priority Area

Public safety/Violence prevention

### Community Health Assessment

North River Commission (NRC) is a community development organization that aims to create strong networks with other providers and stakeholders to represent diversity in its service areas. North River conducted surveys at local events and held six focus groups to gather data on social determinants of health. This data was compared to existing data to ensure that it reflected the community’s concerns. After analyzing the feedback and input from diverse stakeholders, NRC identified recurring concerns and voted accordingly.

### Key Findings

Albany Park’s diverse community is cherished by residents, but safety concerns prevent them from fully enjoying it. Youth struggle with health due to violence concerns—particularly when returning home from school—and limited access to violence prevention programs.

### Next Steps

Albany Park’s priority issue is violence prevention. Short and long-term goals include youth development opportunities, better-lit streets, and alternatives to police. Advocating for mental health as part of the required Chicago Public School curriculum is a part of the effort to impact legislation.

## NORTHWEST COMMUNITY LEAD



**North River Commission**  
[northrivercommission.org](http://northrivercommission.org)

North River Commission (NRC) is the nonprofit community and economic development corporation for the Northwest Side of Chicago, stretching from the Chicago River to Cicero Ave over to Addison St across to Devon Ave. Founded in 1962 by concerned residents and neighborhood institutions, NRC unites over 100 civic associations, businesses, schools, institutions, and places of worship to improve the quality of life in its community by creating affordable housing, quality education, arts & cultural endeavors, open spaces, and thriving neighborhood businesses.

## NORTHWEST COMMUNITY LEAD



### Palenque LSNA

[palenquelsna.org](http://palenquelsna.org)

Palenque LSNA (PLSNA) is a catalyst for Black, Brown, Indigenous, and Immigrant communities and allies to care for one another and take strategic action for systemic change and a just, resilient, and joyful future. PLSNA is a multi-issue community organization, directly serving more than 6,500 residents across the Logan Square, Hermosa, and Avondale neighborhoods of Chicago and impacting tens of thousands more through nationally-recognized issue campaigns and programs.

## LOGAN SQUARE

### Community Overview

Logan Square has seen a decline in Latinx families, losing 20% of families between 2000-2017 largely due to gentrification. The families remaining continue to advocate for affordable housing to remain in the community.

### Priority Area

Housing

### Community Health Assessment

Palenque LSNA (PLSNA) has a member action council that includes 45 organizations, schools, and churches devoted to meetings discussing the most pressing issues in the community. PLSNA conducted four focus groups and collected 114 surveys from youth, community leaders, and parents. The results were presented visually, orally and in writing to accommodate different learning styles. The action council holds ongoing committee meetings to ensure accountability in addressing the community's needs.

### Key Findings

This assessment highlighted public safety as one of their top concerns. Community members connected it to increased care resources such as mental health services, community events, cultural art representation around the community, parent-mentors within the schools and accessible community spaces.

### Next Steps

PLNSA identified housing as a top priority and ways to address this would be through the preservation of one to two flats through a community land trust and advocating for new developments to be made affordable to the community at-large.

# SOUTHWEST REGION

**Region:**  
Southwest

**Community Areas:**  
Chicago Lawn and Ashburn  
West Elsdon  
West Lawn and Clearing  
Brighton Park  
Armour Square and Bridgeport  
Archer Heights  
Garfield Ridge  
McKinley Park

## SOUTHWEST REGIONAL LEAD



### Southwest Organizing Project

[swopchicago.org](http://swopchicago.org)

The Southwest Organizing Project's (SWOP) mission is to build a broad-based organization of Christian, Muslim and Jewish faith institutions, local schools and other institutions in Southwest Chicago, which will enable families to exercise common values, determine its own future and connect with each other to improve life in their neighborhoods. To this end, leaders of SWOP have dedicated themselves to building relationships across racial, ethnic, generational, and faith differences and to bringing the common concerns of its institutions into the public life of the community as they develop the capacity to act collectively and "stand for the whole."

## SOUTHWEST REGION

### Community Overview

Nearly 15% of Chicagoans live in the Southwest region, the vast majority of whom identify as Hispanic/Latinx (60.1%). The region is home to the stockyards of the Back of the Yards community, Marquette Park, a growing immigrant community, and many police and firefighters.

### Priority Area

Access to healthcare

### Community Health Assessment

In this assessment, Southwest Organizing Project (SWOP) relied heavily on the analysis of available Health Atlas data with collaborative partners and further investigation of significant data points through surveys, focus groups and one on one interviews of community members. Each hyperlocal network determined the process best suited to understand their own data and insurance enrollment benefits was shown to be a priority in five of nine hyperlocal assessments.

### Key Findings

This process emphasized the importance of collaboration across sectors to both bring forth and best make sense of community data. In addition to access to healthcare, the Southwest Region also determined education, employment/workforce development, safety, housing, and immigration as priorities.

### Next Steps

The Southwest region is creating an intervention that seeks to take advantage of the current expansion of Medicaid for immigrant adults. Additionally, the region seeks to partner with local Federally Qualified Health Centers to both enroll eligible community members and connect them with primary care providers.

## CHICAGO LAWN AND ASHBURN

### Community Overview

Chicago Lawn and Ashburn are Southwest Side communities with large Latinx and Black populations. Chicago Lawn's population is 56.5% Latinx and 39.1% Black. Similarly, Ashburn population is 46.3% Latinx and 43.1% Black. Both neighborhoods are home to beautiful bungalows, strong, vibrant communities and several community development organizations.

### Priority Area

Preventative healthcare

### Community Health Assessment

Southwest Organizing Project (SWOP) established partnerships by leveraging its member institutions and key relationships across the sector. Partners were selected based on their relationship with the community, the resources they offers, and willingness to collaborate. Reliable data was collected from surveys, interviews, and various sources, including the Chicago Health Atlas, CMAP, LISC, and the Census Bureau website. Over 70 surveys were completed, and key data was analyzed to determine the best approach. Consensus was built through conversations around community needs and priorities.

### Key Findings

Chicago Lawn is underinsured, and food access in Ashburn is deficient. Improvements in language translation, increased trust in public health ambassadors (PHAs) and service providers/opportunities, and strengthened service provider coordination could support the intersection of access to public benefits and healthy food (Medicaid, LINK, WIC).

### Next Steps

SWOP's PHAs are trained in connecting residents to food delivery services and Medicaid. The policy impacts relevant to the action plan are Medicaid access and eligibility and lowering/changing the requirements to include more residents who need it.

SOUTHWEST  
COMMUNITY LEAD

Southwest Organizing Project

## WEST ELSDON

### Community Overview

The demographic makeup in West Elsdon has changed since its original European immigrants found their way to the swampy Southwest Side of Chicago. They have since moved to the suburbs or Chicago's North Side and have been replaced by incoming Mexican immigrants and Mexican-American families. It remains solidly working class. West Elsdon is a family-friendly, working-class neighborhood bordering Chicago's Midway Airport, characterized by redbrick bungalows and an 81% Latinx population

### Priority Area

Food access/insecurity

### Community Health Assessment

SWOP/Healthy Southwest prioritized cross-collaboration by forming partnerships with stakeholders across all areas of public life, including CBOs, religious/faith organizations, public schools, legislators, and healthcare organizations. These stakeholders were chosen for their alignment with SWOP's mission and investment in the community.

### Key Findings

SWOP collected data from various sources, highlighting disparities in preventative healthcare, food insecurity, and education. The uniquely intertwined social determinants demonstrate a need for a holistic approach to community investment.. Many community members face experiences challenges such as lack of food access, access to regular healthcare check-ups, low household income averages and low education rates. SWOP's short-term focus is on addressing key priority areas including food insecurity and preventative lifestyles.

### Next Steps

West Elsdon will prioritize preventative healthcare, focusing on education and literacy while addressing food insecurity as a critical issue. The SW Collective (Garfield Ridge), Envision Community Services (Clearing/West Lawn), and SWOP (West Elsdon) have collaboratively decided on food insecurity as a shared community priority.

## WEST LAWN AND CLEARING

### Community Overview

West Lawn is a predominantly Latinx community that is home to 33,543 residents. Clearing has 24,519 residents with two groups making up the majority of the population - Non-Hispanic White residents who account for 58% of the population, and Latinx/Hispanic residents who account for 38%. Both communities surround Midway Airport, which sees millions of travelers every year. Both neighborhoods have a higher rate of residents who have an overall health status of excellent, very good, or good according to the Chicago Health Atlas.

### Priority Area

Food access/insecurity

### Community Health Assessment

Envision Community Services (ECS) pulled data from existing data sources such as the Chicago Health Atlas and informal surveys of community members. Partners selected have been part of efforts to increase access to food in various ways through the community. The priority area derived from ECS's data and the first-hand testimonies from community members.

### Key Findings

The community health assessment process reinforced and validated ECS's food access efforts. Data collected from brief interviews with community members and from the Chicago Health Atlas demonstrated a similar need for food in both the Clearing and West Lawn communities.

### Next Steps

ECS will continue to develop food access interventions to address the needs of its communities through its individual and hyperlocal work.

## SOUTHWEST COMMUNITY LEAD



### Envision Community Services

[envisioncs.org](http://envisioncs.org)

Envision Community Services (ECS) instill hope, enrich lives, and contribute time, resources, and zeal to assist community members in accomplishing success. Envision provides services in various departments including workforce development, health & wellness, street outreach/ gang intervention, and education. The team of public health ambassadors (PHAs) works towards reducing health disparities found within the West Lawn and Clearing Neighborhoods. Some initiatives that PHAs have developed throughout this past year are various community events, the Hale community garden, the Good Neighbor Love Fridge, community clean-ups and Youth Envision Sports. These initiatives help increase food access, promote physical activity, and increase the feeling of community among residents.

## SOUTHWEST COMMUNITY LEAD



### Esperanza Health Centers [esperanzachicago.org](http://esperanzachicago.org)

Esperanza Health Centers (EHC) is a community health center on South California Avenue, providing bilingual high-quality primary care, behavioral health, and wellness services. The centers serve over 35,000 patients annually from communities across the Southwest Side, regardless of their insurance status, immigration status, or ability to pay. EHC has five locations in Brighton Park, Gage Park, Little Village, Marquette Park, and South Lawndale.

## BRIGHTON PARK

### Community Overview

Brighton Park is a primarily residential neighborhood flanked by water and transportation infrastructure. Previously home to a large Eastern European population, Brighton Park today is a Mexican community, principally immigrants facing urban challenges such as insufficient education facilities and unemployment.

### Priority Area

Mental health/Access to healthcare

### Community Health Assessment

Esperanza Health Centers (EHC) collaborated with Alivio, the Resurrection Project, Working Bikes, and Chicago Public Schools to address the Lower West Side community's needs and promote health equity. EHC and PODER also convened at the Brighton Park and Archer Heights community table to collaborate and strengthen the longstanding partnerships with both organizations, and the HCEZ initiative was a natural extension of those relationships..

### Key Findings

The Lower West Side, primarily a Latinx community, faces challenges with access to care and mental health services due to demographic changes and high uninsured rates.

### Next Steps

EHC will partner with West Side United (WSU) and Erie Family Health to create a mental health toolkit for the Lower West Side community. The toolkit will compile digital and print resources on mental health services in the city and region.

## ARMOUR SQUARE AND BRIDGEPORT

### Community Overview

The Armour Square and Bridgeport communities are located on Chicago's Southwest Side. In Armour Square, 52.94% of the population is foreign-born and 33.84% have limited English proficiency. In Bridgeport, 35.2% of the population is foreign-born and 17.41% have limited English proficiency.

### Priority Area

Access to healthcare

### Community Health Assessment

The Midwest Asian Health Association (MAHA) partnered with community-based organizations that have access to the residents who live in Armour Square and Bridgeport. As the community lead, MAHA worked closely with the regional network. Based on the secondary data, the project conducted focus groups and community needs assessment surveys.

### Key Findings

The rates at which residents are receiving needed care and going to routine check-ups are low. This assessment helped connect residents to the care they need and routine health maintenance check-ups.

### Next Steps

The project will help MAHA to work more effectively with community partners to identify resources and develop the strategies needed to connect residents to needed care.

## SOUTHWEST COMMUNITY LEAD



### Midwest Asian Health Association

[maha-us.org](http://maha-us.org)

The Midwest Asian Health Association (MAHA) was established in 2003 with a mission to reduce health disparities for medically underserved, low-income populations in the Midwest through providing culturally sensitive and linguistically appropriate services, which include community outreach education, screening and immunization, linkage to care, mental health services, and research and policy advocacy. To serve its mission, MAHA collaborates with community-based organizations, health care providers, academic institutions, public health departments, and volunteers.

## SOUTHWEST COMMUNITY LEAD



### PODER

[poderworks.org](http://poderworks.org)

PODER equips individuals with the necessary academic tools to promote human dignity, increase employment potential, and facilitate participation in the larger community. Since 1997, PODER's objective has been to enable Spanish-speaking adult immigrants to create successful and fulfilling new lives in the United States. Through a deep commitment to the needs of the immigrant communities on Chicago's southwest side, PODER provides critical societal and workforce integration services with both immediate and long-term impact for families, communities, and employers throughout the City of Chicago.

## ARCHER HEIGHTS

### Community Overview

Archer Heights is a majority Latinx neighborhood with Mexican roots. It's a growing community with great restaurants and small businesses that are deeply engaged with the community.

### Priority Area

Access to healthcare

### Community Health Assessment

PODER's selected its community stakeholders based on their engagement with the community. These partners have roots in both Archer Heights and Brighton Park. PODER's hyperlocal network convened and helped identify, plan, create and execute efforts. Data collected was through canvassing done by Public Health Ambassadors (PHAs) and data shared by other partners. Based on the data, PODER identified that helping individuals access and understand the benefits/coverage of Medicaid would be vital in addressing the lack of use of health-related services in the community.

### Key Findings

Archer Heights' overall health status is much lower than the combined HCEZ Southwest region. The assessment process helped the organization understand how health outcomes are connected to Medicaid enrollment and use of health services. It sheds light on the importance of informing community members on steps to claim their health benefits, especially around the Medicaid redetermination phase.

### Next Steps

The Archer Heights and Brighton Park hyperlocal network decided to address the priority area of healthcare access. The intervention developed will help provide a Medicaid MCO transportation toolkit and a guide on preparing for Medicaid's redetermination phase to help ensure community members knows how to take advantage of and keep their healthcare benefits.

## GARFIELD RIDGE

### Community Overview

Garfield Ridge is a predominantly Latinx neighborhood, with a secondary population of White residents of majority Polish descent. Garfield Ridge is known for its tight knit but large population of City of Chicago employees, including police Officers, Firefighters, and CPS teachers, who are actively involved in the community.

### Priority Area

Food access/insecurity

### Community Health Assessment

The Southwest Collective's (SWC) network of partners promotes health equity through critically necessary actions such as food drives and housing assistance; affordable, accessible, and culturally inclusive healthcare; and holistic treatment of children through education and community. In the data collection process, SWC prioritized quality over quantity and conducted informal surveys at organizational events. The organization analyzed its data and hypotheses at its hyperlocal table and was able to reach a consensus after various discussions around findings and potential gaps in the research.

### Key Findings

Garfield Ridge is not nearly as affluent as initial public perception. The number of households dealing with low food access in Garfield Ridge is nearly double the citywide average. Issues such as the lack of affordable foods, and transportation challenges, including low walkability and difficulty accessing public transit, are major contributors to the food insecurity many community members face.

### Next Steps

SWC is working to address food insecurity in the far Southwest Side of the city. The health intervention the organization is developing will provide consistent meals and fresh produce to address the disparities faced by low-income families. SWC is also supporting legislation that increases access to SNAP benefits.

## SOUTHWEST COMMUNITY LEAD



### Southwest Collective [swcollective.org](http://swcollective.org)

The Southwest Collective (SWC) is relatively new, formed in earnest in 2019 and incorporated just a week prior to the global shutdown in 2020. Much of the Collective's organizing work has centered around equity in terms of quality of life for residents of the Southwest Side. SWC provides an open forum for residents to voice their concerns; hear new perspectives from neighbors; learn about existing public resources; and launch economic, educational, and recreational initiatives that bring siloed communities together.

# Southwest Collective

## SOUTHWEST COMMUNITY LEAD



### The Resurrection Project at Casa Hidalgo

[resurrectionproject.org](http://resurrectionproject.org)

For over 30 years, The Resurrection Project (TRP) has been committed to its mission of creating community ownership, building community wealth, and serving as stewards of community assets in Chicago's Southwest neighborhoods. Founded in 1990 by six local parishes each contributing \$5,000 in seed money, TRP started with the goal of advocating for a safer, cleaner, and more inclusive community. During that time, TRP expanded its services to include access to affordable housing, financial wellness, leadership development, civic engagement, immigration services, domestic violence and family services, breast cancer survivors support, and health promoters/navigators. TRP continues its mission of building relationships and creating healthy communities. As TRP's services and programs have expanded so have its capabilities to fit the needs of the communities around it and the challenges they face and hopes to continue doing so for the generations to come.

## MCKINLEY PARK

### Community Overview

McKinley Park is a diverse community of primarily Hispanic, Asian and White populations. Recent surveys highlight the community's need for resources and programs related to preventative wellness and mental health services. As such, there are efforts across McKinley Park to improve access to the arts, gardening, exercise and involvement in preserving a healthy environment.

### Priority Area

Mental health and preventative healthcare

### Community Health Assessment

The Resurrection Project partnered with Casa Guanajuato, surveyed community members at Blessed Sacrament Church and South Shore Church, and conducted outreach efforts with other youth and family service organizations. The organization also held a monthly hyperlocal network roundtable discussion with other organizations in their network to discuss key issues affecting residents across Southwest communities, including Back of the Yards, Pilsen, Brighton Park and Bridgeport.

### Key Findings

Findings revealed that many McKinley Park community members lack access to preventative wellness resources. As such, community members felt motivated to engage with resources provided by the network in community spaces and gatherings. This sentiment appeared to be shared by members of other under-resourced Chicago communities who were willing to travel to access critical resources.

### Next Steps

The Resurrection Project is working to expand their programs and community reach by partnering with schools and other institutions in the McKinley Park neighborhood. The organization is building new ways to connect with community members, which includes hosting virtual meetings and learning opportunities that may be more accessible for some.

# WEST REGION

**Region:**  
West

**Community Areas:**  
Austin  
East Garfield Park  
South Lawndale  
Near West Side  
Humboldt Park  
West Town  
Lower West Side  
North Lawndale  
West Garfield Park

## WEST REGIONAL LEAD

**WEST SIDE UNITED:** Building Blocks to Better Health

### Rush University Medical Center (on behalf of West Side United)

[westsideunited.org](http://westsideunited.org)

West Side United's mission is to build community health and economic wellness on Chicago's West Side and build healthy, vibrant neighborhoods. Our vision is to improve neighborhood health by addressing inequality in healthcare, education, economic vitality and the physical environment using a cross-sector, place-based strategy. Partners include healthcare providers, education providers, the faith community, business, government and others working together to coordinate investments and share outcomes. WSU's aim is to eliminate the life expectancy gap between ten West Side neighborhoods and Chicago's Loop.

## WEST REGION

### Community Overview

The West Region is home to nine, vibrant and primarily Black and Latinx West Side neighborhoods including: Austin, East Garfield Park, Humboldt Park, Lower West Side, Near West Side, North Lawndale, South Lawndale, West Garfield Park, and West Town. The West Side boasts a strong cultural heritage and historical significance for the entire city.

### Priority Area

Mental health

### Community Health Assessment

West Side United (WSU) began its assessment by gathering and reviewing existing community health needs assessments and public health data. The team then developed community input surveys that were tailored to each community area and surveyed 974 residents across the region, focusing on identifying overarching themes and trends. Each Community Lead selected the top three priority areas, drafted a survey analysis report, and shared the findings with community assessment partners for additional input. Finally, the group collaborated and voted on the single regional priority area that would receive their concentrated attention.

### Key Findings

This assessment confirmed that the West Region still suffers from the trauma of historical disinvestment and racism, experiencing worse health outcomes compared to the city and national averages. Mental health is one of the biggest health concerns in the region, with the highest drug overdose, drug-induced, and opioid-related overdose mortality rates across Chicago. There should be more accessible mental health services, including substance use care and treatment options in the communities.

### Next Steps

Based on what this team heard from those most affected by structural injustices, WSU is working to create culturally relevant, effective, and sustainable solutions to tackle mental health issues, including substance use and overdose. Leveraging its existing partnerships, it will develop a system to provide more mental health education and resources that pave the way for nurturing and healing in the communities.

## AUSTIN

### Community Overview

Austin's longstanding legacy of civic leaders and social justice advocacy can be seen in hundreds of community-based organizations, locally led institutions, and committed leaders who passionately serve the community. Block clubs, gardening groups, religious institutions, service providers, and others all work to improve neighborhood conditions Austin.

### Priority Area

Mental health

### Community Health Assessment

Austin Coming Together (ACT) partnered with block club leaders, nonprofit organizations and community residents to complete the community health assessment. The focus was to reach community members who seek services from the Austin Community Hub and ACT partner network. ACT explored issues including housing, neighborhood safety, healthcare access, and mental health. The organization received 99 responses from Austin residents.

### Key Findings

More than half of the respondents said they have experienced mental health issues, including difficulty sleeping, anxiety, depression, and anger. Nine percent of the respondents indicated they did not have a stable place to call home and nearly 30% of those without stable housing lived out of a car or on the street.

### Next Steps

ACT will address mental health to help create an environment that fosters health and wellness in Austin. As a first step, they will conduct a landscape analysis that helps identify mental wellness service providers for adults and youth.

## WEST COMMUNITY LEAD



### Austin Coming Together [austincomingtogether.org](http://austincomingtogether.org)

Austin Coming Together (ACT) is dedicated to providing backbone support for a 50+ network of non-profit, faith-based, public, and private entities. ACT facilitates collaboration to achieve more, together. This approach is called collective impact. The mission is to increase the collective impact of member organizations on improving education and economic development outcomes for the Austin community.

## WEST COMMUNITY LEAD



### Breakthrough [breakthrough.org](http://breakthrough.org)

Breakthrough is a faith-based, nonprofit organization that partners with those affected by poverty to build connections, develop skills, and open doors of opportunity. With a hyperlocal, 40-block focus, Breakthrough provides a myriad of services focused on a profoundly simple formula: people first. The organization envisions a safe, stable, engaged Garfield Park where success is the norm, and everyone thrives.

## EAST GARFIELD PARK

### Community Overview

East Garfield Park is a predominately Black neighborhood with a rich history. The neighborhood is home to the Garfield Park Conservatory, one of the largest botanical conservatories in the country.

### Priority Area

Hypertension and diabetes

### Community Health Assessment

Breakthrough conducted a qualitative survey to understand the inequities residents of East Garfield Park face through an online survey portal and sharing the survey at Breakthrough's events, programming, and outreach. Breakthrough understands that inequities are multifaceted, so they identified five priority areas to focus on: High School Graduation Rate, Diabetes Mortality Rate, Hypertension, Rent Burden, and Life Expectancy. The organization took this approach to get a diverse sample of the community it serves. The data were interpreted by identifying similarities, and cause and effect relationships.

### Key Findings

When collecting responses to the community input survey in-person, many residents spoke about the challenges around identifying healthy food sources and having access to affordable grocery stores within the community. Breakthrough also learned that residents who cannot access healthy food sources also struggle with paying their rent or struggle to have stable housing. Many residents spend the bulk of their income on rent and utilities which leaves them less money to access healthy food.

East Garfield is in need of quality grocery stores and affordable housing. The assessment helped identify the correlation between the lack of basic necessities and the effects it has on health outcomes such as diabetes and hypertension.

### Next Steps

Breakthrough has decided to address hypertension and diabetes as its priority areas. The team will do this by hosting community conversations on the perceived need and by educating the community on chronic diseases such as diabetes and hypertension. It will work to establish partnership and programs that provide education and strength using community input.

## SOUTH LAWNSDALE

### Community Overview

South Lawndale - better known as Little Village, La Villita, or the "Mexico of the Midwest" - is a predominantly Latinx neighborhood that boasts a rich history of activism, cross-sector planning, and collaboration. It has Chicago's second-highest tax revenue-generating shopping district.

### Priority Area

Financial/economic stability/employment

### Community Health Assessment

Enlace built partnerships by collaborating with other trusted community-based organizations (CBO) and utilizing an asset-based community development framework. This approach incorporated the community's inherent wisdom, knowledge, skills, and gifts, and it centered community members as the primary shapers of their community's future. Enlace completed 104 surveys and conducted three focus groups to share survey results and gather feedback to determine next steps. The group reached consensus by highlighting key trends and finding common overarching themes from the results that aligned with CBOs' missions.

### Key Findings

The top priorities identified by community members related to financial assistance and economic stability, and mental health. This process helped them to understand the importance of creating economic stability for families and its impact on the community's collective mental health.

### Next Steps

The South Lawndale community has decided to address the priority area of economic stability. It plans to build structures and identify resources that promote housing and economic stability and increase the financial literacy of Little Village residents.

## WEST COMMUNITY LEAD



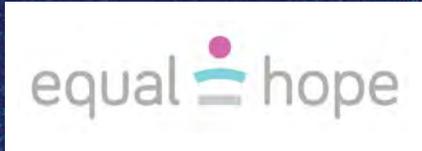
### Enlace

[enlacechicago.org](http://enlacechicago.org)

Enlace Chicago convenes, organizes, and builds the capacity of Little Village stakeholders to confront systemic inequities and barriers to economic and social access. Over the years, Enlace has adapted its work to meet the priorities, needs and interests of the community. Currently, its four areas of focus include education, community health, immigration and violence prevention. Within and across each of these areas, Enlace engages four key strategies that include:

- Organizing and advocacy
- Program implementation and service delivery
- Convening and community planning
- Individual and community capacity building

## WEST COMMUNITY LEAD



**Equal Hope**  
[equalhope.org](http://equalhope.org)

Equal Hope's mission is to save lives by eliminating health inequities. We do so by challenging the status quo—striving to understand the context of people's lives and the barriers they experience, so we can help them achieve their best health and a longer life. Through research, quality assessment and improvements, advocacy, education, and patient navigation, we approach health holistically to achieve sustainable outcomes and true health equity.

## NEAR WEST SIDE

### Community Overview

The Near West Side is home to a number of Chicago institutions including the Illinois Medical District, Malcolm X College, the University of Illinois at Chicago, and the United Center. The neighborhood is 43% White, 24% Black, and 10% Hispanic and is home to historic immigrant communities including Little Italy and Greektown.

### Priority Area

Chronic diseases

### Community Health Assessment

Equal Hope has partnered with Erie Neighborhood House, utilizing the findings from their Community Health Assessment conducted in the nearby Near West Side community area to support and guide the development of a joint community intervention for the West Town and Near West Side community areas.

### Key Findings

The assessment conducted by Erie Neighborhood House identified high involvement by Latinx to share concerns about the lack of resources related to chronic conditions, affordable primary care, mental health support, dental health, domestic violence and cancer prevention. A takeaway is to ensure that bilingual, intergenerational support for women is accessible.

### Next Steps

The group will address the priority area of chronic conditions and social determinants of health by hosting an outdoor community event that includes community organizations and clinics that can help expand access to resources. It will implement inter-generational activities and surveys related to reducing the risk of chronic conditions.

## HUMBOLDT PARK

### Community Overview

Humboldt Park is a vibrant community dedicated to tackling social issues and inequalities. The area spans six zip codes and includes 19,000 households, with a significant young adult (18-39) population of 34.4%, and a predominantly Latinx/Hispanic community.

### Priority Area

Mental health

### Community Health Assessment

Erie Family Health Centers (EFHC) conducted 131 in-person interviews in Humboldt Park through English and Spanish-speaking community health workers and identified the community's top needs: mental health services, housing stability, and substance use disorder care. Partner organizations were selected based on their community work and commitment to equity. Each partner represented different health and social sectors that intercept the social determinants of health.

### Key Findings

EFHC, its partners, and Humboldt Park residents prioritize violence prevention as a linking root cause of economic hardship and other top needs. Sustainable improvement in the quality of life of Humboldt Park residents requires an intentional effort and a collaborative approach to addressing the inequities of the social determinants of health.

### Next Steps

EFHC has convened its partners and together established the Humboldt Park Health Equity Collaborative, a partner collaboration to address mental health in Humboldt Park by providing education and resources that build a path to nurture healing. Erie developed a mental health palm card that is and has been distributed. Erie is also finalizing a mental health resource guide and website to address the lack of information and the stigma around mental health, as it was identified as the top priority area in Humboldt Park by the Collaborative.

## WEST COMMUNITY LEAD



**Erie Family Health Centers**  
[eriefamilyhealth.org](http://eriefamilyhealth.org)

Erie Family Health Centers (EFHC) provides high quality medical, dental, and behavioral healthcare to all in need, regardless of ability to pay. Motivated by the belief that healthcare is a human right, Erie provides high quality affordable care to support healthier people, families, and communities. Erie delivers holistic care to help every member of the family stay healthy and active from infancy through adulthood. Erie is a regional health care resource serving more than 82,000 patients a year at 13 health centers spanning the West Side of Chicago to Waukegan.

## WEST COMMUNITY LEAD



### Erie Neighborhood House [eriehouse.org](http://eriehouse.org)

Since 1870, Erie Neighborhood House (ENH) has provided the most comprehensive support immigrant and low-income families in Chicago need to thrive and has constantly evolved to meet their needs. Today, Erie Neighborhood House is a modern social services nonprofit with programming and resources for children & youth, mental health & community wellness, adult education & training, legal services, and more. Through these programs, ENH works with the neighborhood to build powerful communities.

## WEST TOWN

### Community Overview

Located northwest of the Loop, West Town is a stone's throw away from restaurants, cafes, art galleries, and shops. You can enjoy an abundance of green spaces and plenty of room to work, play, and relax. West Town is another neighborhood that went through the waves of gentrification over the past few decades.

### Priority Area

Chronic diseases

### Community Health Assessment

Erie Neighborhood House (ENH) conducted in-person outreach events in the West Town community and disseminated surveys about community health needs. The West Town neighborhood of Chicago has been experiencing development and gentrification over the past decade, displacing residents of lower incomes and Latinx identities. According to CMAP demographics, the Latinx population decreased by 20% between 2000 and 2020. ENH's objective was to collect data from the residents who are becoming less represented in the neighborhood as development dominates the area.

### Key Findings

Based on data from different sources, mental health, COVID-19, and dental problems were identified as the top three issues concerning West Town residents. Residents have been impacted economically by COVID-19, affecting income, housing security and access to health resources. Some households were also experiencing domestic violence, which highlights a specific area of mental health services and recovery needed for West Town families.

### Next Steps

ENH strives to connect West Side and West Town residents with resources to manage their chronic conditions as well as the social determinants of health that make them difficult to manage.

## LOWER WEST SIDE

### Community Overview

The Lower West Side includes two neighborhoods, Pilsen and Heart of Chicago. Years ago, both were full of industry and populated by European immigrants. Today, these neighborhoods have a large Mexican-American and immigrant population, many of whom are struggling to remain in their family-owned homes due to gentrification.

### Priority Area

Mental health/Access to healthcare

### Community Health Assessment

Esperanza Health Centers (EHC) collaborated with Alivio, the Resurrection Project, Working Bikes, and Chicago Public Schools to address the Lower West Side community's health needs. The goal was to have representation from various community partners across different sectors. Esperanza Health Centers designed and disseminated the community input survey to learn more about the health needs of Lower West Side residents, with a focus on reaching out to community members who do not have access to health insurance or other health coverage.

### Key Findings

The Lower West Side, primarily a Latinx community, faces challenges with access to care and mental health services due to demographic changes and high uninsured rates. When asked survey respondents, who were primarily uninsured, if they were aware of the benefits they may be eligible for, such as SNAP or free transportation, 76.9% said they are not aware of those benefits.

### Next Steps

EHC will partner with West Side United and Erie Family Health to create a mental health toolkit for the Lower West Side community. The toolkit will compile digital and print resources on mental health services in the city and region.

## WEST COMMUNITY LEAD



### Esperanza Health Centers [esperanzachicago.org](http://esperanzachicago.org)

Esperanza Health Centers (EHC), a community health center on South California Avenue, provides high-quality primary care, behavioral health, and wellness services in a bilingual setting. The center serves over 35,000 patients annually from communities across the Southwest Side, regardless of their insurance status, immigration status, or ability to pay. Esperanza has five locations in Brighton Park, Gage Park, Little Village, Marquette Park, and South Lawndale.

# Esperanza Health Centers

## WEST COMMUNITY LEAD



### Sinai Community Institute [sinaichicago.org/en](http://sinaichicago.org/en)

Sinai Community Institute (SCI) opened in 1993 to deliver community-based health and social service programs to address social, economic and environmental factors and improve the health and well-being in community. Approximately 14,000 families each year benefit from SCI's services, ranging from infancy to adulthood. SCI is part of Sinai Chicago, which is a network of four hospitals, 17 community clinics, one community institute, and one nationally recognized research institute all serving communities on Chicago's West and Southwest Sides.

## NORTH LAWDALE

### Community Overview

North Lawndale was the base of Dr. Martin Luther King's operations for the Chicago Freedom Movement and is a source of innovation for Chicago today. The neighborhood is home to Cinespace Film Studios Chicago, the largest independent film studio outside of Hollywood.

### Priority Area

Housing

### Community Health Assessment

Sinai Community Institute's (SCI) partnerships were built and selected based on their ability to improve the West Side communities. They are very well known and respected as goal-oriented, and constituent focused. The organization collected data through a survey that yielded 320 responses and utilized a data analyst to examine the results. Their survey gathered more constituent interest and participation; thus, SCI's findings were truly community driven.

### Key Findings

North Lawndale citizens are keen to assist in the future development of affordable housing. Homelessness and Housing Instability was the most commonly selected health need in the community input survey when residents were asked to select up to 3 health needs that should be prioritized in North Lawndale, with 24.7% of respondents selecting it. This finding will greatly assist in future planning for community health and quality of life improvements.

### Next Steps

Affordable housing in North Lawndale will be developed and available as SCI works with its partners and governing bodies.

## WEST GARFIELD PARK

### Community Overview

West Garfield Park has experienced big shifts throughout the years. Originally farmland, it later became a successful shopping district with great residential growth. Neighbors are now improving the community by fighting depopulation, crime and poverty.

### Priority Area

Public safety/violence prevention

### Community Health Assessment

Sinai Community Institute's (SCI) built and selected its partnership based upon their commitment to improve the West Side of Chicago and how they are regarded in the community. SCI's data was selected via a questionnaire survey to encourage community involvement and this survey yielded 217 responses. The organization then evaluated its data with its data analyst who helped determine priority areas of highest concern.

### Key Findings

West Garfield constituents were eager to assist in the betterment of their community due to neighborhood safety concerns. These findings and future action planning will greatly improve the quality of care and life for the residents.

### Next Steps

SCI and the West Garfield community area will prioritize addressing neighborhood safety and will work with partners and governing bodies to develop intervention strategies.

# VIEWS ACROSS THE HCEZs



“

**On the West Side, there isn't much funding to create better opportunities like schools and jobs.**

– BREAKTHROUGH URBAN MINISTRIES PARTICIPANT

# HCEZ IN ACTION NOW AND FUTURE

## PHASE 3

# HEALTHY CHICAGO EQUITY ZONES

## PHASE 3: HCEZ IN ACTION, NOW AND FUTURE

From early efforts addressing vaccine equity to current capacity-building and intervention action-planning, the Healthy Chicago Equity Zones initiative aims to build healthier, more vibrant neighborhoods. The efforts of HCEZ Regional and Community Lead are critical to Chicago's public health infrastructure, addressing hyperlocal health challenges by:

- Expanding and maintaining neighborhood networks
- Conducting assessments to understand challenges/opportunities in neighborhood health
- Establishing, implementing, and monitoring the success of health and racial equity action plans
- Recruiting, training, and deploying community members and trusted messengers to disseminate public health messages and improve health literacy
- Coordinating outreach, education, and engagement strategies to link people to resources and services and building support for citywide initiatives
- Implementing systems to regularly collect, analyze, and interpret community health data; developing and executing a community-based research agenda
- Identifying and proposing policy and systems changes that address barriers to health

CDPH and HCEZ partners have supported these efforts by developing an Intervention Catalog and Action Planning tool for addressing health priority areas; working collaboratively with the Chicago Department of Health's Health Equity in All Policies (HEiAP) program to impact policy decisions and system level changes; conducting research to inform initiative planning and strategy implementation; spearheading evaluation of the

initiative; and forging a path to a more sustainable existence through state, local, and philanthropic resources.

### Intervention Catalog

CDPH co-developed an intervention catalog and action planning tool in partnership with the Magoon Institute for Healthy Communities.

The HCEZ Intervention Catalog provides strategies that Regional Leads and Community Leads may implement to address systemic barriers to community health and well-being and respond to needs identified in each Region's community health assessment. This catalog provides examples of successful community programs and projects to offer sustainable ways to address the root causes of health inequities. The interventions featured in the catalog were selected if they had connections to health equity and related factors, were evaluated and determined to be effective, supported other ongoing Chicago initiatives, and provided sufficient information for communities to understand the requirements to implement them. These projects are meant to provide a framework for launching further work and may be paired with other ongoing community health equity projects and programs.

### Action Planning Tool

The HCEZ Action Planning Tool provides a framework for RLs to plan, track, monitor, and report their selected intervention. The tool includes a cover sheet summarizing the purpose and scope of the intervention; a workplan for detailing specific action steps, staff responsibilities, and timeline; a performance management dashboard for tracking the key progress indicators; and a budget for proposed costs of the intervention.

The Patrick M. Magoon Institute for Healthy Communities provided Technical Assistance to the Regional Leads, using a train-the-trainer model, on how to effectively use the tool for a regional intervention and support their CLs in utilizing the tool for their local interventions.

# PHASE 3



## Policy

In addition to the HCEZ initiative's hyperlocal, power-building work, change in cross-sector policies and institutions is an essential part of addressing the root causes of health inequity and reducing Chicago's racial life expectancy gap. Healthy Chicago 2025 calls for a Health Equity in All Policies (HEiAP) approach, which focuses on addressing policy in key priority areas, including housing, food, environmental justice, neighborhood planning and development, and institutional change.

HEiAP is a collaborative approach to improving the health of all people by putting equity at the center of decisions made across policy areas and sectors. HEiAP advances equity through transformative community and government partnerships, collaboration across City departments and agencies, community-driven policy change, and co-owned community-led strategies for addressing health inequities.

CDPH's HEiAP team, established in 2022, collaborates with community organizations and government agencies to build power with community organizations, expand capacity for City departments to center health equity in their work, support cross-sector work for transformational change, operationalize new practices, and promote policies that result in more fair and just health outcomes.

The HEiAP team intends to support the HCEZ team and Regional and Community Lead organizations in advancing their policy priorities through ongoing collaboration and technical assistance on tools and tactics such as those above. The HEiAP and HCEZ initiatives are united under the vision of Healthy Chicago 2025 and their respective power-building and systems change efforts are strongest when they are aligned.

## Research

CDPH and Regional Leads have worked to document and share the story of the HCEZ, particularly the community-led Community Health Assessments (CHAs), through presentations at research conferences.

In October 2022, Regional Leads and CDPH presented at the Chicago Consortium for Community Engagement (C3) Conference at Malcolm X College. The C3 Conference was co-sponsored by CDPH, academic research institutions, and community stakeholders to highlight how community-academic research partnerships contribute to improve the health and wellbeing of their communities as well as impact and encourage networking opportunities.

During the conference, HCEZ was awarded the Dr. Martha Clare Morris Community Award. This award recognizes an innovative project led by a community-based organization that has partnered with or has been a recipient of a seed grant from any of the C3 member institutions of which CDPH is a member. This award highlights the HCEZ initiative's impact on under-represented and marginalized communities and its commitment to engaging residents in the process.

CDPH looks forward to presenting the initial outcomes and learnings of the Healthy Chicago Equity Zones at the American Public Health Association Conference in November 2023.

As the HCEZ initiative continues to grow, Regional and Community Leads are looking to partner with academic institutions to conduct community-based participatory research on the priority areas identified in their CHAs.

## Evaluation

As part of this initiative, the Chicago Department of Public Health (CDPH) contracted with the University of Illinois at Chicago School of Public Health (UIC-SPH) to conduct an evaluation of the Healthy Chicago Equity Zones.

Collaborators at UIC-SPH are taking a developmental and participatory approach to the HCEZ evaluation process. In a developmental evaluation, the program and evaluation teams work closely to continually gather feedback about the program and evaluation process as they develop. This allows the teams to be consistent in their response to project and stakeholder needs over time and adjust the evaluation's objectives and metrics accordingly. In a participatory evaluation, key stakeholders of the program (e.g., HCEZ Regional Leads, Community stakeholders, CDPH staff) are directly involved in the evaluation process.

One of the ways that the project engages the participatory evaluation process is by utilizing a multistakeholder Evaluation Advisory Group (EAG) that consists of representatives from each of the six Regional Lead and Community Lead organizations, CDPH's Health Equity in All Policies (HEiAP) compensated community stakeholders, HCEZ project management partners including Illinois Public Health Institute (IPHI) and Public Health Institute of Metropolitan Chicago (PHIMC), and key CDPH staff.

## Sustainability and Growth

While CDPH has identified grant funding to support CDPH's core staff and Regional Leads through mid-2024, they will need additional resources to ensure the long-term sustainability and success of the HCEZ initiative.

CDPH engaged the Public Health Institute of Metropolitan Chicago (PHIMC) and Illinois Public Health Institute (IPHI) to assist with sustainability planning including a national landscape assessment and key informant interviews to learn how other states, municipalities, and local

foundations are funding similar community-led projects. CDPH and the HCEZ community partners will use findings to guide their sustainability efforts further.

As a starting point, a workshop series was held with CDPH leadership to identify opportunities for collaboration across program areas, including behavioral health, community safety, maternal and infant health, and infection prevention and control. CDPH is exploring ways to leverage its recurring grants as a source of support for HCEZ activations that advance the grants' goals. In addition, CDPH intends to:

- Work with the administration to explore the possibility of funding from the city budget.
- Continue to convene with the local philanthropic community to identify ways that they can directly support Regional and Community Lead organizations in carrying out their action plan strategies.
- Seek alignment of resources and activities with the Illinois Department of Public Health (IDPH), which has allocated funds in their 2024 budget to support a similar equity zones model.

In addition, partners are committed to pursuing changes to the City's contracting and payment processes to reduce the administrative burdens that community partners experience.

As stated in the introduction section, this document captures the spirit of the "Six Regions. One Chicago" revolution within the HCEZ ecosystem. As we continue to build, grow, stretch and strengthen, we hope you will join the Regional and Community Lead organizations and their larger network within the Healthy Chicago movement. This is where we ensure power, opportunities and resources are available where they are needed the most. To learn how you can join, please see <https://www.chicago.gov/healthychicago>.

#OneHealthyChi

# PHASE 3

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# INDEX

# INDEX

# INDEX

# INDEX

Priority areas	Page number(s)
Access to primary care	40
Chronic diseases	25, 29, 33, 41, 42, 76, 78, 80
Behavioral health	16, 46, 49, 52, 53, 54, 68, 79, 81, 88, 90
Diabetes	9, 20, 21, 26, 28, 31, 32, 33, 36, 42, 52, 53, 76
Employment	20, 50, 55, 64, 70, 77
Financial/Economic stability	50, 77
Food access/Insecurity	27, 50, 66, 67, 71
Access to healthcare	3, 26, 37, 46, 48, 64, 68, 69, 70, 81
Heart disease	28, 30, 42
Housing	16, 25, 27, 29, 30, 41, 43, 50, 52, 55, 58, 59, 61, 62, 64, 71, 72, 75, 76, 77, 79, 80, 82, 87
Hypertension	21, 28, 76
Mental health	23, 24, 26, 29, 32, 36, 38, 40, 41, 48, 49, 52, 55, 58, 59, 61, 62, 68, 69, 72, 74, 75, 77, 78, 79, 80, 81
Preventative healthcare	22, 65, 66, 72
Public safety	16, 17, 20, 23, 24, 26, 31, 36, 37, 41, 42, 43, 54, 58, 59, 60, 61, 62, 83
Refugee support	51
Resource connection	52
Social determinants of health	28, 46, 48, 49, 54, 61, 78, 79, 80
Violence prevention	20, 23, 24, 25, 26, 31, 36, 37, 41, 43, 58, 59, 60, 61, 77, 79, 83

<b>HCEZ organizations</b>	<b>Page number(s)</b>
<b>Far South Region</b>	
Graduates Over Guns Corp	23, 90
Kids Off the Block	24, 90
Morgan Park Roots Organization	25, 90
National A. Philip Randolph Pullman Porter Museum	26, 90
New Covenant Harvest Kingdom of God Ministries	28, 90
New Generation Fancy Drill Team	29, 90
People for Community Recovery	30, 90
Phalanx Family Services	8, 20, 21, 22, 24, 90
Roses in Roseland	27, 90
Southeast Calumet Heights Homeowners Association	31, 90
The Hegewisch Times	32, 90
Youth Advocacy Foundation	33, 90

<b>HCEZ organizations</b>	<b>Page number(s)</b>
<b>Near South Region</b>	
Bright Star Community Outreach	37, 90
Centers for New Horizons	38, 90
Chicago Family Health Center	24, 39, 90
Greater Auburn Gresham Development Corporation	8, 36, 90
Project H.O.O.D.	40, 90
South Shore Works	41, 92
Teamwork Englewood	42, 90
The Kindness Campaign	43, 90

<b>HCEZ organizations</b>	<b>Page number(s)</b>
<b>North/Central Region</b>	
APNA GHAR	48, 49, 91
Common Pantry	47, 91
Community Counseling Centers of Chicago (C4)	49, 91
ICNA Relief	50, 91
Lutheran Social Services of Illinois	52, 53, 91
Rohingya Cultural Center	51, 91
Swedish Hospital	8, 46, 49, 91
Tapestry 360 Health	54, 91
Thresholds	55, 91

<b>HCEZ organizations</b>	<b>Page number(s)</b>
<b>Northwest Region</b>	
Metropolitan Family Services	60, 91
North River Commission	61, 91
Northwest Center	8, 58, 59, 91
Palenque LSNA	62, 91

<b>HCEZ organizations</b>	<b>Page number(s)</b>
<b>Southwest Region</b>	
Envision Community Services	66, 67, 91
Esperanza Health Centers	68, 91, 81 (W)
Midwest Asian Health Association	69, 91
PODER	68, 70, 91
Southwest Collective	71, 91
Southwest Organizing Project	8, 64, 65, 66, 91
The Resurrection Project at Casa Hidalgo	68, 72, 81, 91

<b>HCEZ organizations</b>	<b>Page number(s)</b>
<b>West Region</b>	
Austin Coming Together	75, 92
Breakthrough	76, 84, 92
Enlace Chicago	77, 92
Equal Hope	78, 92
Erie Family Health Centers	68, 79, 81, 92
Erie Neighborhood House	78, 80, 92
Rush University Medical Center	8, 74, 92
Sinai Community Institute	82, 83, 92
West Side United	8, 68, 74, 81, 92







# SIX REGIONS. ONE CHICAGO.

FAR NORTH  
NORTH  
NORTHWEST  
SOUTH  
WEST

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