

Sinai Community Health Survey 2.0 A Look at Chicago Lawn



Did you know?

Freedom Field in Chicago Lawn's Marquette Park celebrates Martin Luther King Jr.'s 1966 March through the neighborhood while providing southwest side residents a place to play.

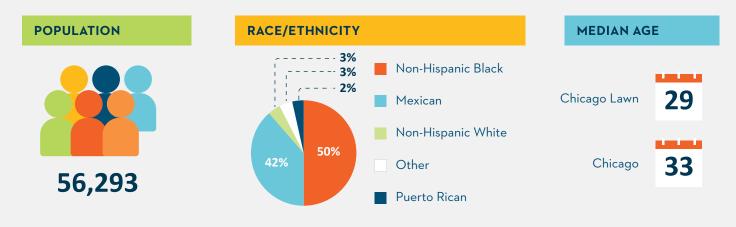
Immigrants from Lithuania, Poland, and other countries sparked the community's population growth in the 1920s.

Chicago Lawn is now home to great ethnic and racial diversity, with Hispanic, African-American, Middle Eastern, and Eastern European residents.



MLK Living Memorial in Marquette Park

Who lives in Chicago Lawn?¹



What shapes wellbeing?



Physical Environment



Social and Economic Factors



Clinical Care



Health Behaviors



Health Outcomes



Physical Environment

A community's physical environment, such as open green space, housing quality, and safety, can greatly impact the health of its residents. To reduce health inequities, we must consider the role the environment plays in shaping health.



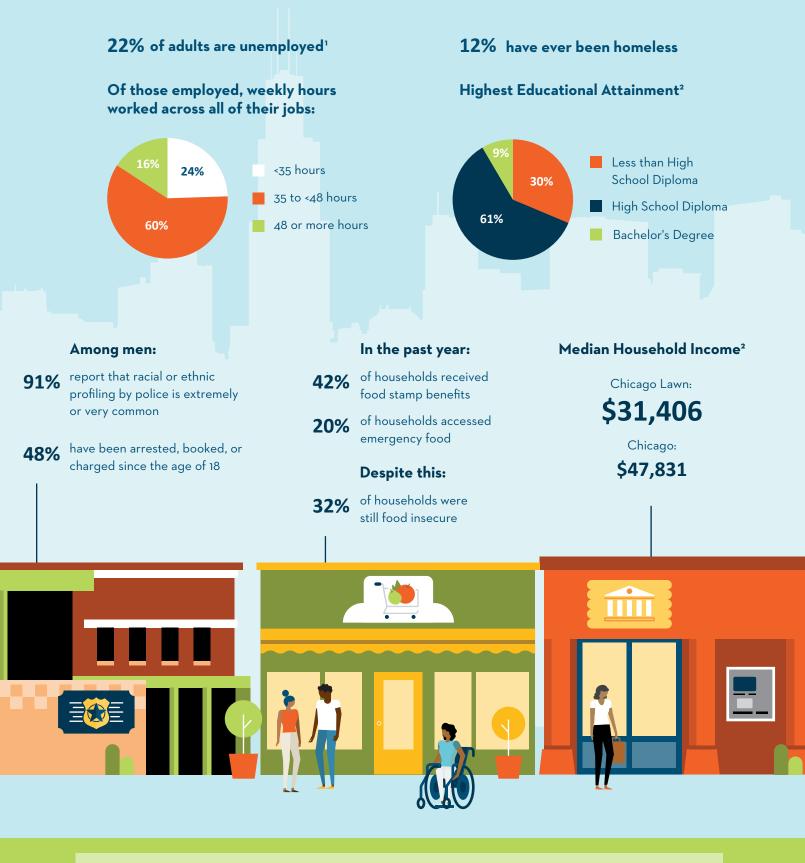
Housing units³ Vacant **Owner-occupied** Built before 1940 Chicago Lawn: Chicago Lawn: Chicago Lawn: 16% 44% 32% Chicago: Chicago: Chicago: Use public transit 14% 45% 45% as their main way to get to work³ Chicago Lawn: 21% Chicago: 29% bus stop

> ¹ Chicago Metropolitan Agency for Planning Parcel-Based Land Use Inventory, 2013. Includes green space, parks, and space reserved for recreational activity. ² Chicago Metropolitan Agency for Planning Parcel-Based Land Use Inventory, 2013. Includes vacant residential, commercial, and industrial land as well as areas under construction. ³ 2014 American Community Survey five-year estimates. All results on this page are for adults aged 18 years and older unless otherwise specified.



Social and Economic Factors

Social and economic factors drive health inequities. These factors are often beyond an individual's control and impact health behaviors, access to care, and community health as a whole.

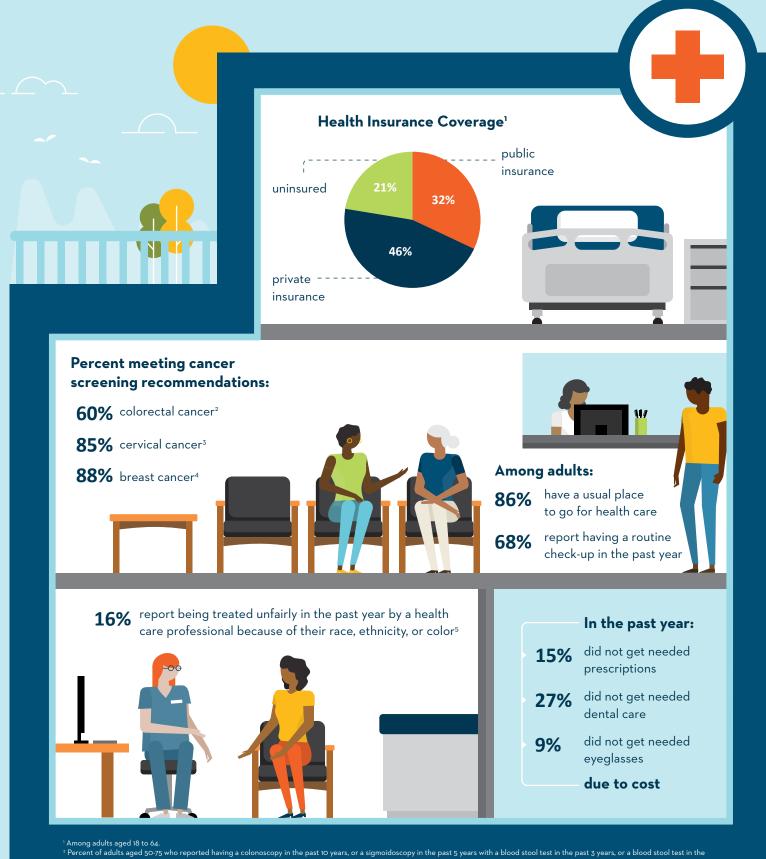


¹ 2014 American Community Survey five-year estimates. Includes individuals aged 16 and older that are in the workforce. ² 2014 American Community Survey five-year estimates. All results on this page are for adults aged 18 years and older unless otherwise specified.



Clinical Care

Access to health care is a basic human right and a necessity for improving health outcomes. Yet, current policies have resulted in unequal access and quality of clinical care for underserved communities.



- past year. ³ Percent of women aged 21-65 years who have not had a hysterectomy and who report having a pap test within the past 3 years.
- ⁴ Percent of women aged 50-74 who reported having a mammogram in the past two years. ⁵ Among those who saw a health care professional in the last year. All results on this page are for adults aged 18 years and older unless otherwise specified.



Health Behaviors

Health behaviors are the actions people take that influence their health. Although these behaviors are traditionally considered the primary cause of health outcomes, they are often the result of economic and environmental factors which must be addressed at the city, state, or national level.



10%

of men

report ever being emotionally or physically abused by their partner or someone important to them

> This likely underestimates intimate partner violence, which is often underreported



used cocaine, crack cocaine, heroin, methamphetamine, or prescription painkillers that were not prescribed by a medical professional

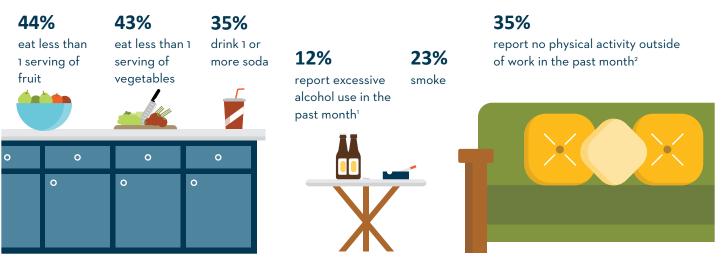
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23% used marijuana

6%

Every day:

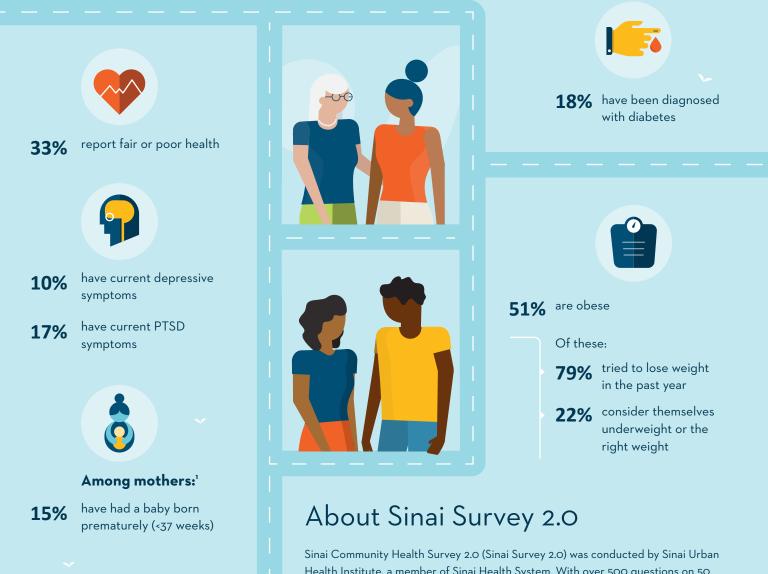


¹Per CDC, excessive drinking is binge drinking (4+ drinks for women, 5+ drinks for men during a single occasion) or heavy drinking (8+ drinks for women/week, 15+ drinks for men/week) ²500 Cities Project (CDC, BRFSS, 2014). All results on this page are for adults aged 18 years and older unless otherwise specified.



Community Health Outcomes

Health outcomes provide a snapshot of community health. However, to truly understand health and wellbeing, we must remember to examine health behaviors, access to clinical care, social and economic factors, and the physical environment.



Health Institute, a member of Sinai Health System. With over 500 questions on 50 topics, Sinai Survey 2.0 is one of the largest community-driven, face-to-face health surveys ever conducted in Chicago. A representative sample of residents from nine Chicago community areas completed interviews from March 2015 through September 2016. Results presented in this health profile are for adults aged 18 years and older. To learn more about Sinai Survey 2.0 and see information on other surveyed communities, visit www.sinaisurvey.org.

Sinai Survey 2.0 community health profiles were funded by generous donations from The Chicago Community Trust and Healthy Communities Foundation.