Letter from the Executive Director

Greetings,

I am excited to share the findings of the Healthcare Foundation of Northern Lake County's (HFNLC) Summer Community Listening Initiative (SCLI) with you. It is with much gratitude to the over 800 individuals across northern Lake County who shared their time and expertise with us during the summer of 2024 at a community event, facilitated discussion, or key informant interview. We also appreciate our community and business partners who invited us to engage community members at their events or allowed their sites to be utilized for facilitated discussions over a meal. Additionally, we thank HFNLC's 2024 summer interns, Gisela Contreras, and Stone Yan who are residents of Lake County, and without whom this undertaking would have been extremely difficult.

In December 2024 we shared initial SCLI findings with those who participated in a SCLI activity (or wanted to learn more about it) at our Holiday Open House and Data Walk (HOHDW) at the University Center of Lake County. Two formal power point presentations of SCLI data were delivered by Dr. Venoncia M. Baté-Ambrus, Executive Director, and Angela Baran, Senior Program Officer. HOHDW participants also reviewed SCLI data poster boards located throughout the meeting space in an interactive data walk. Select HFLNC board and committee members, Mike Duffy, Magdalena McElroy, Megan Brady, Sunny Sonnenschein, Frances Baxley, Laura Ramirez, and Adam Carson served as SDOH ambassadors to engage in conversations with participants on their initial impressions, questions, and potential solutions. Time to network was also integral to the experience.

The purpose of the Summer Community Listening Initiative was to learn directly from the community which Social Determinants of Health (SDOH) impact their overall health, wellbeing, and social functioning the most. This valuable information will inform our future funding strategies which were made possible by a bylaw change in 2023. We firmly believe that in order to create a more equitable and just society that those who are most affected by health inequities must also be part the process of creating solutions. The Healthcare Foundation of Northern Lake County is honored to collaborate with communities across our funding area to improve community health and wellbeing.

If you have any questions about the final report, collaborative opportunities, or ideas to share, please contact us.

In solidarity,

Dr. Venoncia M. Baté-Ambrus

Introduction and History

The Healthcare Foundation of Northern Lake County (HFNLC) is a private, independent foundation classified as a health conversion foundation. According to Community Catalyst, "When a nonprofit health care corporation becomes a for-profit corporation through conversion, merger or acquisition, most state laws require that the full value of the nonprofit be preserved for public benefit purposes. The requirement may be met by transferring assets of the nonprofit to an existing charitable organization with the same or similar purposes. Most commonly it is met by establishing a new foundation." [1] HFNLC exists to continue the legacy of its predecessors (Victory Memorial Hospital and St. Therese Medical Center) to advance community health, especially for the uninsured, underinsured, and medically vulnerable.

Established in 2006 in IL - The Healthcare Foundation of Northern Lake County was incorporated on June 6, 2006, following the sale of Saint Therese Medical Center and Victory Memorial Hospital to Community Health Systems. The sale proceeds from this transaction are being transferred to the foundation. The Foundation's mission is to support efforts that improve access to health services for underserved Lake County, Illinois, residents. We strive to improve the health status of uninsured, underinsured, and medically underserved residents. We are especially interested in addressing gaps in health services; increasing the capacity of effective organizations and programs; and fostering innovative solutions to persistent healthcare access problems.

In 2023, HFNLC received approval from the Illinois Attorney General to revise our bylaws, enabling us to focus our grantmaking on addressing root causes and Social Drivers of Health (SDOH). This critical shift positions HFNLC to respond more effectively to the evolving needs of our communities while advancing our commitment to health equity.

Social determinants of health (SDOH) are the non-medical factors that influence health outcomes, encompassing the conditions in which individuals are born, grow, work, live, and age. These determinants are deeply interconnected, collectively shaping the health and well-being of communities. SDOH affects all communities, but has more adverse effects on low income communities and communities of color. Advances toward health equity and ultimately health justice can only occur if SDOH are addressed collaboratively with those most impacted who are uniquely equipped to inform community institutions, such as the Healthcare Foundation of Northern Lake County, about what their needs are and how they prioritize them.

For example, the critical role of the legal sector in addressing the Social Drivers of Health (SDOH) is overlooked by many who are adversely affected by them and/or working to promote health equity.

---

[1] https://communitycatalyst.org/wp-content/uploads/2022/11/conversion_foundations_defining_mission_and_structure.pdf

The inclusion of the Law on HFNLC's SDOH Wheel was intentional to raise awareness about the many ways in which the sector can provide guidance, support, research, and advocacy leading to creative solutions to issues such as income, housing, employment, education, among others, and solicit feedback from the community. In the chart below, created by the National Center for Medical Legal Partnership, we can see how legal services intersect with the social drivers of health of income, housing, and education, among others. [2]

Common Social Determinant of Health	How Legal Services Can Help	Impact of Legal Services on Health / Health Care
INCOME Resources to meet daily basic needs	• Appeal denials of food stamps, health insurance, cash benefits, and disability benefits	1. Increasing someone's income means s/he makes fewer trade-offs between affording food and health care, including medications. 2. Being able to afford enough healthy food helps people manage chronic diseases and helps children grow and develop.
HOUSING & UTILITIES A healthy physical environment	• Secure housing subsidies • Improve substandard conditions • Prevent evictions • Protect against utility shut-off	1. A stable, decent, affordable home helps a person avoid costly emergency room visits related to homelessness. 2. Consistent housing, heat and electricity helps people follow their medical treatment plans.
EDUCATION & EMPLOYMENT Quality educational and job opportunities	• Secure specialized education services • Prevent and remedy employment discrimination • Enforce workplace rights	1. A quality education is the single greatest predictor of a person's adult health. 2. Consistent employment helps provide money for food and safe housing, which also helps avoid costly emergency health care services. 3. Access to health insurance is often linked to employment.
LEGAL STATUS Access to jobs	• Resolve veteran discharge status • Clear criminal / credit histories • Assist with asylum applications	1. Clearing a person's criminal history or helping a veteran change their discharge status helps make consistent employment and access to public benefits possible. 2. Consistent employment provides money for food and safe housing, which helps people avoid costly emergency health care services.
PERSONAL & FAMILY STABILITY Safe homes and social support	• Secure restraining orders for domestic violence • Secure adoption, custody and guardianship for children	1. Less violence at home means less need for costly emergency health care services. 2. Stable family relationships significantly reduce stress and allow for better decision-making, including decisions related to health care.

---

[2] https://medical-legalpartnership.org/response/i-help/

Being newly positioned to focus some of our grantmaking on addressing the Social Drivers of Health, we knew that it was imperative that we reach in to our communities to learn which Social Drivers of Health impact their overall health and wellbeing the most. Our view of health is very ecological, it considers wholistic health, and how the various drivers impact daily functioning. Consequently, in the summer of 2024 we embarked upon the Summer Community Listening Initiative (SCLI) to learn firsthand about what Lake County stakeholders think about the Social Drivers of Health (SDOH). SCLI entailed three distinct aspects: 1) meeting people where they are by collaborating with community partners on local, existing events, 2) convening multi-sector Lake County leaders over a meal for facilitated discussions called SCLI "Table Talks", and 3) interview key informants who could not participant in one of the first two aspects of SCLI.

HFNLC's Summer Community Listening Initiative Implementation

Social Drivers of Health, as defined by Healthy People 2023, refer to the conditions in the environments where individuals are born, live, learn, work, play, worship, and age. [3] These conditions influence a wide range of health, functioning, and quality-of-life outcomes and risks. In parallel, the Robert Wood Johnson Foundation defines health equity as "a fair and just opportunity for everyone to be as healthy as possible," emphasizing the removal of barriers such as poverty, discrimination, and lack of access to essential resources like quality education, housing, and healthcare. [4]

Recognizing the significance of these interconnected factors, HFNLC embarked on a *Summer Community Listening Initiative* in 2024. This initiative aimed to deepen our understanding of the SDOH most affecting northern Lake County residents and was a vital step in our journey toward trust-based philanthropy. Trust-based philanthropy seeks to reimagine relationships between donors, nonprofits, and communities, shifting power and decision-making toward those most impacted by systemic inequities.

To support this effort, we developed an *SDOH Wheel*, a tool to educate and engage the community. The wheel highlights eight critical social drivers: Income and Employment, Health Coverage and Doctor Availability, Healthy Accessible Food, Education, Housing, Support Systems and Community Engagement, Legal Resources, and Transportation.

---

[3] https://odphp.health.gov/healthypeople/priority-areas/social-determinants-health
[4] https://www.rwjf.org/en/insights/our-research/2017/05/what-is-health-equity-.html

WHAT IMPACTS YOUR HEALTH THE MOST?

Over the summer, we connected with over 700 individuals through outreach tables set up at 14 events across our funding area. We collaborated with local food pantries, libraries, community centers, schools, park districts, businesses, and nonprofits to meet people where they are and discuss the SDOH impacting their daily lives.

Additionally, we hosted five multisector *Table Talks*, bringing together representatives from government, healthcare, human services, education, libraries, faith-based organizations, first responders, and chambers of commerce. These facilitated discussions provided insight into the challenges and opportunities identified by those serving northern Lake County communities. For stakeholders unable to participate in these events, we conducted key informant interviews to ensure their perspectives were included.

In this report, we will examine the importance of each social driver of health discussed with the community, analyze existing data related to these drivers, review the findings from both the outreach tables and Table Talks, and outline our anticipated next steps. This work reflects our ongoing commitment to fostering equity and addressing the root causes of health disparities in our region.
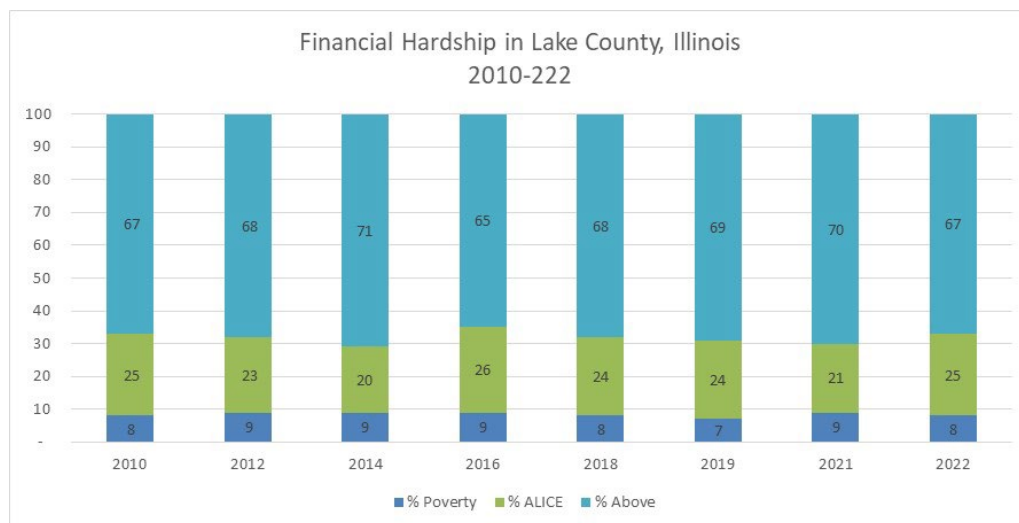
HFNLC's Eight Social Drivers of Health

Income and Employment

Why it is a Social Driver of Health: Stable employment with a livable wage enables individuals to afford basic necessities such as housing, healthcare, nutritious food, and education. Long-term unemployment or low-wage employment, however, can trap individuals in cycles of poverty, impacting health issues over time and limiting upward mobility.

What is Happening in Our Community: ALICE is an acronym for Asset Limited, Income Constrained, Employed. [5] It reflects the households that earn more than the Federal Poverty Level, but less than the basic cost of living for the county. While conditions have improved for some households, many continue to struggle, especially as wages fail to keep pace with the rising cost of household essentials (housing, childcare, food, transportation, health care, and a basic smartphone plan). Households below the ALICE Threshold — ALICE households plus those in poverty — cannot afford the essentials.

In Lake County 32% of households live below the poverty level or are considered asset limited, income constrained and employed. The proportion of households below the ALICE threshold in northern Lake County is even greater. In 2022, over 50% of households in Zion, North Chicago, Great Lakes, Waukegan, and Fox Lake were living below the ALICE Threshold.

The chart below from the United for Alice website shows the proportion of Lake County residents living below the ALICE threshold – green and dark blue sections - since 2010.


Financial Hardship in Lake County, Illinois 2010-222

---

[5] https://www.unitedforalice.org/county-reports-mobile/illinois

Health Coverage & Doctor Availability

Why it is a Social Driver of Health: Health coverage and doctor availability are key social drivers of health because they determine access to essential medical care. Without adequate coverage or available healthcare providers, individuals may delay or forgo necessary treatments, leading to worse health outcomes and widening health disparities.

What is Happening in Our Community: More than 90 percent of northern Lake County residents have some form of health insurance, but approximately 9 percent are uninsured. This is higher than the county or state, which has an uninsurance rates of 7 percent. Meaningful differences in insurance rates can be seen across northern Lake County, which are primarily consistent with income. For example, the communities of Grayslake, Gurnee, Lake Villa, and Wadsworth have the lowest percent of residents with Medicaid or who are uninsured, and the communities of North Chicago, Waukegan and Zion have the largest percentage of residents with Medicaid or who are uninsured.

Medicaid Population
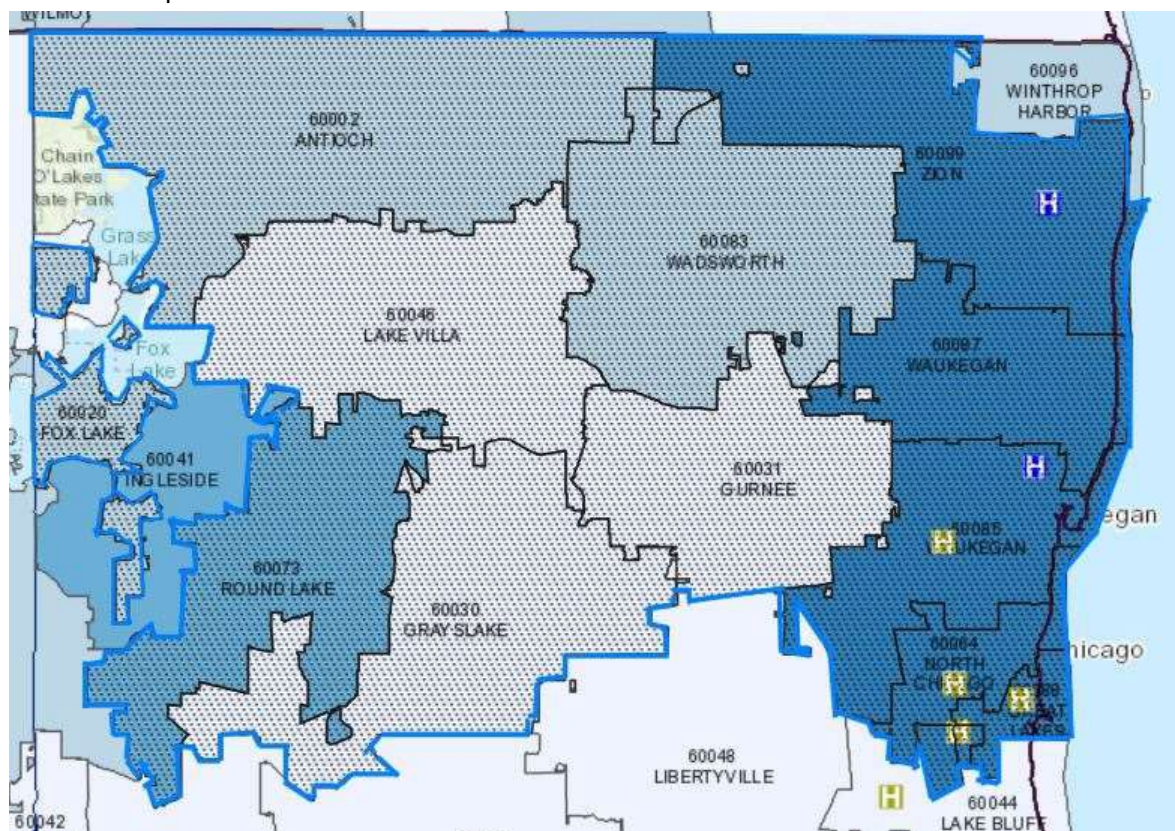
Percent of population with Medicaid by ZIP Code. Darker Blue indicates a higher percentage of the population that has that insurance status (2019).[6]

---

[6] https://www.hfnlc.org/wp-content/uploads/2022/05/HFNLC-Needs-Assessment-2022-5-11-22-FINAL.pdf

Uninsured Population

Percent of population who are insured by ZIP Code. Darker Blue indicates a higher percentage of the population that has that insurance status (2019).

According to the 2022 Community Health Needs Assessment Survey:[7]
- Community members of color and individuals with unique health needs struggle to access affordable, culturally tailored physical and mental healthcare.
- The number of primary care providers has remained constant in Lake County for the past 7 years, despite a growing unmet need.
- 30% of 8th, 10th, and 12th graders in Lake County report having poor mental health; and 12% of Lake County high school seniors have seriously considered suicide.
- While the number of mental health providers in Lake County has consistently increased over time, cost, and other access barriers limit utilization.
- Many community members face barriers to utilizing healthcare services due to a lack of employer-provided benefits, including paid time off.

---

[7] https://www.lakecountyil.gov/DocumentCenter/View/50755/Lake-County-Community-Health-Assessment-CHA-2022-2026

Healthy Accessible Food

Why it is a Social Driver of Health: Healthy, accessible food is a social driver of health because it directly impacts nutrition, which is essential for preventing chronic diseases and maintaining overall well-being. When communities lack access to affordable, nutritious food, they are more likely to experience higher rates of obesity, diabetes, and other diet-related health issues, contributing to health inequities.

What is Happening in Our Community: Distance to a grocery store is a key indicator of food access. In areas far from grocery stores, often called "food deserts", residents may have to rely on fast food or convenience stores, where healthy options are limited and often more expensive. The map below shows the food deserts in northern Lake County.[8] In these areas, people live more than half a mile (orange) or mile (green) from a grocery store. This represents 30% of northern Lake County.
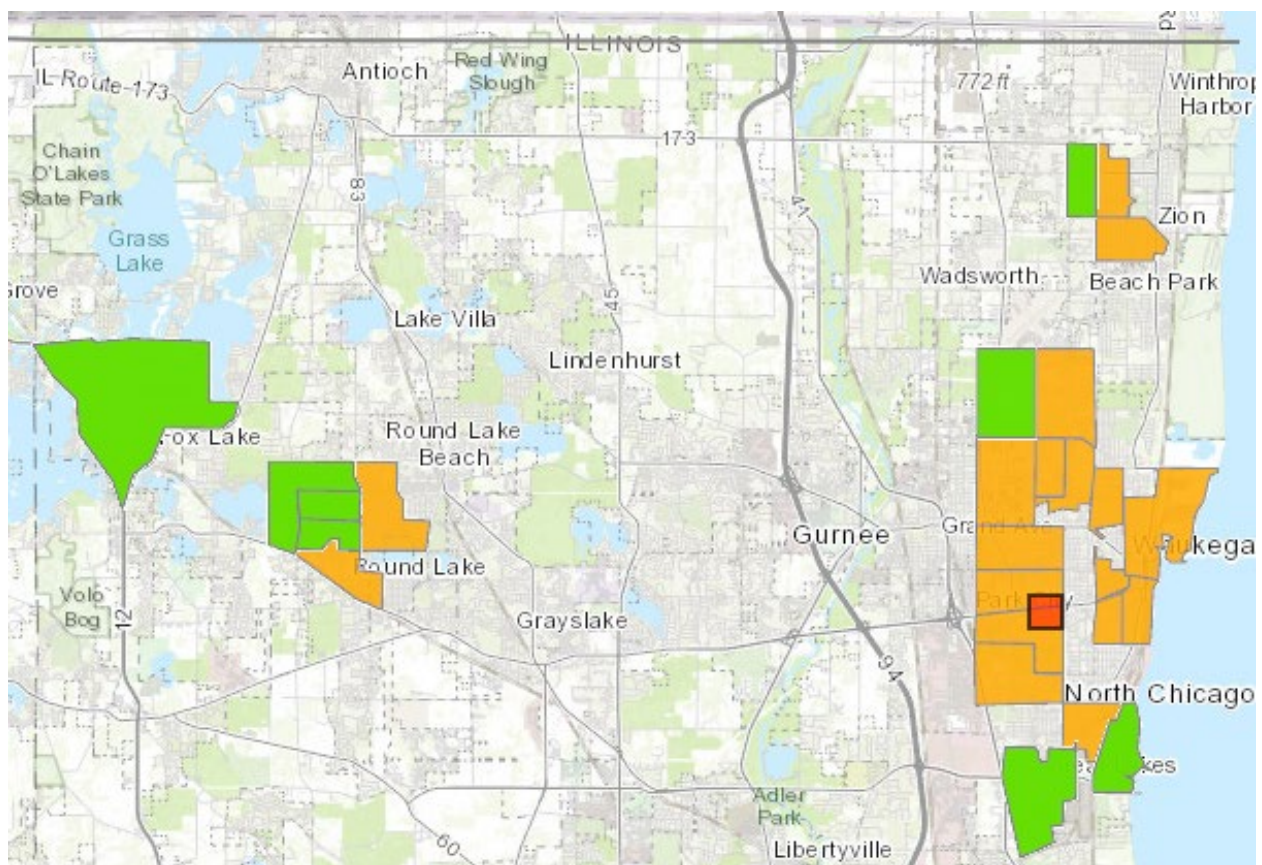
Feeding America estimates that 70,730 Lake County residents, 9.9% of the county's population face food insecurity. [9] Less than have of these residents are eligible for the Supplemental Nutrition

[8] https://www.ers.usda.gov/data-products/food-access-research-atlas/go-to-the-atlas

[9] https://map.feedingamerica.org/county/2022/overall/illinois/county/lake

Assistance Program, also known as SNAP or "food stamps." Additionally, the Northern Illinois Food Bank continues to experience increased demand for meals. [10] Over the past two years, the organization has seen a 35% increase in the number of visits to partnering food pantries.

Education

Why it is a Social Driver of Health: Education is a key social driver of health because it influences employment opportunities, income levels, health literacy, and overall well-being. People with higher education tend to have better access to stable, higher-paying jobs, which enables them to afford healthcare, nutritious food, and safe housing. Education also promotes health literacy, equipping individuals with the knowledge to make informed health decisions, follow medical guidance, and engage in preventive care, ultimately reducing the risk of chronic diseases and improving quality of life.

What is Happening in Our Community: According to the 2022 Community Health Needs Assessment Survey: Educational attainment in northern Lake County is significantly lower compared to the rest of Lake County and the state. [11] Nearly 14% of individuals aged 25 and older in this service area lack a high school diploma, and another 29% have only a high school diploma. In contrast, Lake County, as a whole, has only 10% of individuals without a high school diploma and 23% with just a high school diploma. Additionally, while more than 41% of Lake County residents hold a bachelor's degree or higher, only 29% of residents in the northern Lake County service area have achieved this level of education.

In early childhood education, the current capacity of licensed child care providers can only serve about 25% of all children under 5 years of age. It is also estimated that an additional 1,897 children need early intervention services to address developmental delays or disabilities.
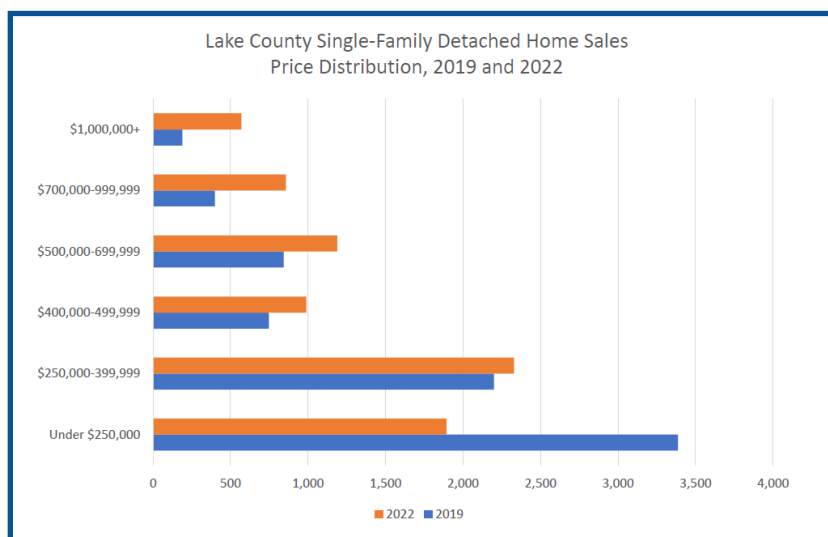
---

[10] https://solvehungertoday.org/
[11] https://www.lakecountyil.gov/DocumentCenter/View/50755/Lake-County-Community-Health-Assessment-CHA-2022-2026

Housing

Why it is a Social Driver of Health: Housing is a critical social driver of health because it influences physical safety, mental well-being, and access to essential resources like healthcare, food, and education. Stable, affordable housing reduces stress and supports economic stability, while poor housing conditions can lead to chronic health issues and financial strain. Investing in safe, quality housing promotes better health outcomes and helps address health inequities across communities.

What is Happening in Our Community: According to the Lake County Housing Analysis conducted by Lake County Partners, 44,000 owners and 29,000 renters in Lake County are living in unaffordable housing and are considered cost-burdened, paying more than 30% of their income on housing costs. [12] Almost 75% of renters with incomes under $50,000 and 31% with incomes between $50,000 and $75,000 are living in housing that is unaffordable. Similarly, 70% of owners with incomes under $50,000 and 37% with incomes between $50,000 and $75,000 are cost burdened. Even sizable numbers with incomes of $75,000-100,000 (22% of owners and 10% of renters) are living in unaffordable housing.

Housing in Lake County primarily consists of owner-occupied single-family detached homes. It does not have a diverse housing stock that provides options for households of different life stages, ages, incomes, and sizes. This lack of housing diversity will limit Lake County's ability to attract and retain the workers needed for economic growth, especially considering the projected decline in the working age population. Housing prices increased at a greater pace than income over the past four years. The share of homes selling for less than $400,000 decreased substantially, while the share that sold for more than $500,000 almost doubled. Rent increases also exceeded the rate of income growth and inflation.

Lake County Single-Family Detached Home Sales Price Distribution, 2019 and 2022

---

[12] https://www.lakecountypartners.com/wp-content/uploads/2023/10/Lake-County-Partners-Housing-Analysis-Final-Report-10-10-23.pdf

Support Systems & Community Engagement

Why it is a Social Driver of Health: Support systems and community engagement are vital social drivers of health because they provide emotional, practical, and social resources that contribute to overall well-being. Strong support systems, whether from family, friends, or community organizations, offer emotional support, reduce stress, and promote resilience. All are protective factors which engender improved mental, physical, and social health. These relationships also provide practical assistance, such as help with transportation, caregiving, or accessing healthcare, which can be especially important for vulnerable populations.

According to U.S. Surgeon General, Dr. Vivek Murthy, loneliness is far more than just a bad feeling—it harms both individual and societal health. It is associated with a greater risk of cardiovascular disease, dementia, stroke, depression, anxiety, and premature death. The mortality impact of being socially disconnected is similar to that caused by smoking up to 15 cigarettes a day, and even greater than that associated with obesity and physical inactivity. And the harmful consequences of a society that lacks social connection can be felt in our schools, workplaces, and civic organizations, where performance, productivity, and engagement are diminished.[13]
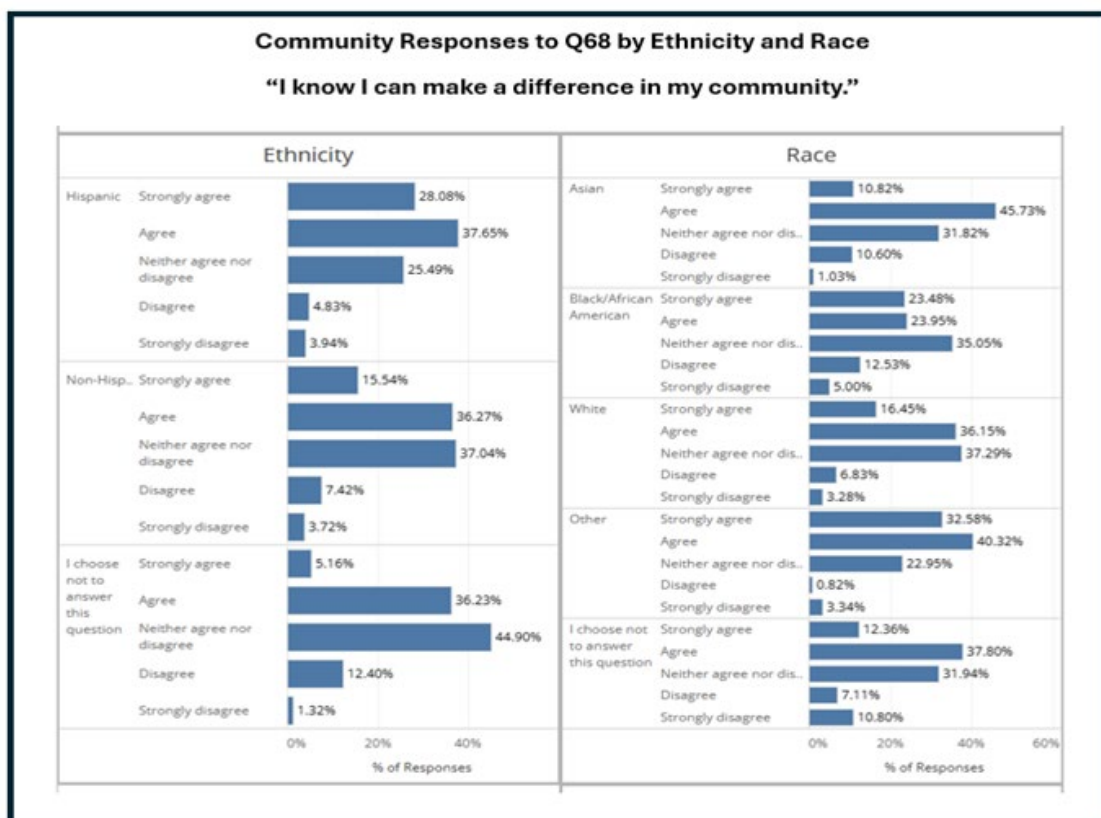
Whereas community engagement connects individuals with local resources, such as healthcare, educational programs, and social services, and fosters a sense of belonging and social cohesion. This can reduce feelings of isolation, encourage healthy behaviors, and empower individuals to take an active role in their health and community. Altogether, support systems and community engagement can improve health outcomes, reduce healthcare disparities, and create healthier, more resilient communities.

What is Happening in Our Community: Although community members are interested in increasing their involvement with their local communities, current representation does not reflect the community demographics. According to the 2022 Community Health Needs Assessment Survey, Latine and female community members are underrepresented in school administrators and state legislators.[14] Community leaders tend to skew older with more education than the general population. And while Lake County has a high voter registration rate (>95%), there is a large disconnect between the number of people registered to vote and the number of people who actually cast ballots; 11% for midterms, 60% for national elections.

Latine community members expresses greater optimism about their ability to make a difference in their community compared to other racial/ethnic groups, despite only about 40% of respondents overall feeling that people take an active role in their community.

---

[13] https://www.hhs.gov/sites/default/files/surgeon-general-social-connection-advisory.pdf
[14] https://www.lakecountyil.gov/DocumentCenter/View/50755/Lake-County-Community-Health-Assessment-CHA-2022-2026

Community Responses to Q68 by Ethnicity and Race

"I know I can make a difference in my community."

Ethnicity		% of Responses
Hispanic	Strongly agree	28.08%
	Agree	37.65%
	Neither agree nor disagree	25.49%
	Disagree	4.83%
	Strongly disagree	3.94%
Non-Hisp..	Strongly agree	15.54%
	Agree	36.27%
	Neither agree nor disagree	37.04%
	Disagree	7.42%
	Strongly disagree	3.72%
I choose not to answer this question	Strongly agree	5.16%
	Agree	36.23%
	Neither agree nor disagree	44.90%
	Disagree	12.40%
	Strongly disagree	1.32%

Race		% of Responses
Asian	Strongly agree	10.82%
	Agree	45.73%
	Neither agree nor dis..	31.82%
	Disagree	10.60%
	Strongly disagree	1.03%
Black/African American	Strongly agree	23.48%
	Agree	23.95%
	Neither agree nor dis..	35.05%
	Disagree	12.53%
	Strongly disagree	5.00%
White	Strongly agree	16.45%
	Agree	36.15%
	Neither agree nor dis..	37.29%
	Disagree	6.83%
	Strongly disagree	3.28%
Other	Strongly agree	32.58%
	Agree	40.32%
	Neither agree nor dis..	22.95%
	Disagree	0.82%
	Strongly disagree	3.34%
I choose not to answer this question	Strongly agree	12.36%
	Agree	37.80%
	Neither agree nor dis..	31.94%
	Disagree	7.11%
	Strongly disagree	10.80%

The lack of representation of minority groups in community leadership positions often discourages community members from participating in certain community spaces. There is an opportunity to encourage and support community members of color and women to take on leadership roles in their communities. Closing the gap between registered voters and those who vote may help increase community representation among elected officials. Community members are interested in increasing their involvement with their local communities and need to be invited and welcomed into those spaces.
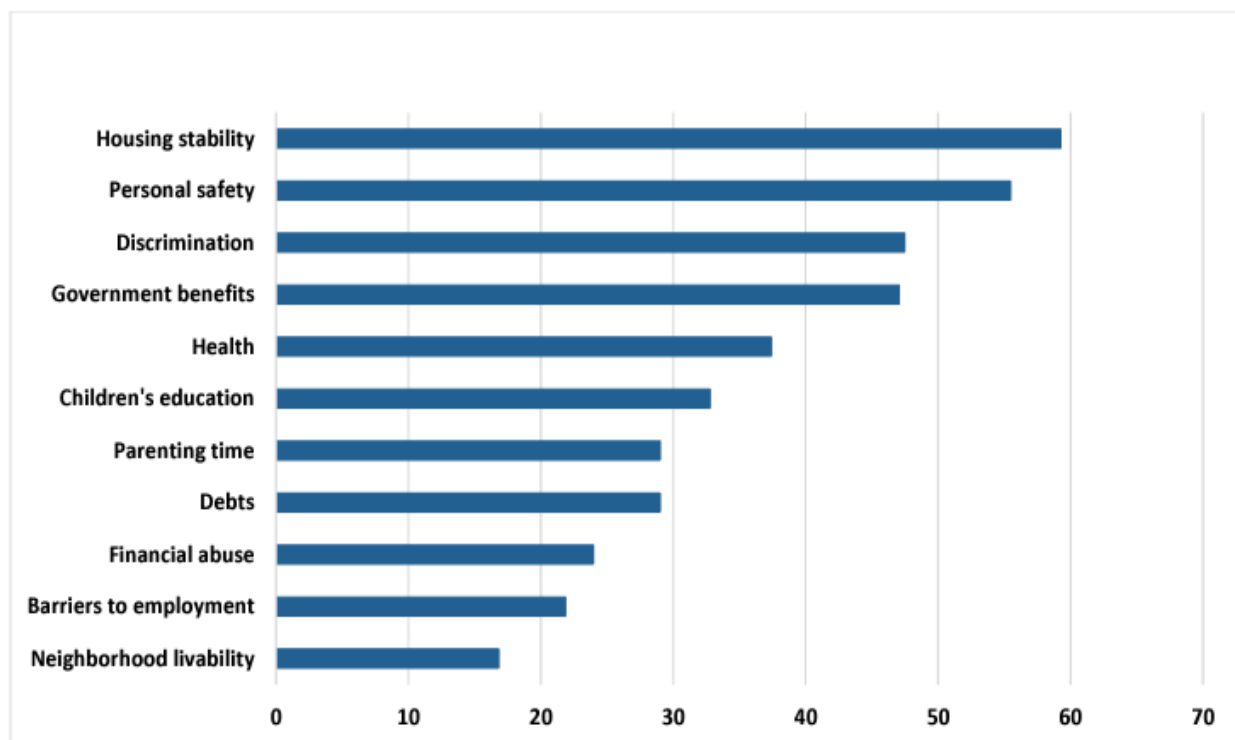
Legal

Why it is a Social Driver of Health: Access to legal services is a social driver of health because it helps individuals address issues like housing stability, income security, and discrimination, which are essential for well-being. Legal support can prevent evictions, secure disability benefits, resolve workplace issues, and protect against unfair treatment, all of which reduce stress and enhance health outcomes. Without access to legal services, people are more vulnerable to social and economic challenges that can harm both mental and physical health.

What is Happening in Our Community: Approximately 74% of low-income households in the United States of America experienced at least one civil legal problem in the last year.[15] The consequences

---

[15] https://justicegap.lsc.gov/the-report/

of these problems sustainably impacted 55% of these households—affecting their finances, mental health, physical health and safety, and relationships. Veterans, children, and survivors of domestic violence are even more likely to encounter civil legal challenges.

When Prairie State Legal Services survey respondents were asked to choose four out of eleven areas that they believed were most important for legal representation. [16] Threats of housing, personal safety, discrimination and denial or loss of government benefits were most commonly chosen.

A little over one-in-four of all Prairie State Legal Services cases are provided representation. In 2023, Prairie State Legal Services provided free legal services to more than 14,000[17] clients and the North Suburban Legal Aid Clinic increased the total number of cases supported by 66% (from 1,500 to nearly 2,500).[18]

It is important to note that the data presented above from Prairie State Legal Services is state-wide. However, it does reflect the health harming legal needs of northern Lake County. Health harming legal needs are the legal burdens that negatively affect a person's overall health.[19]

---

[16] https://pslegal.org/files/galleries/EXHIBIT_C_2021-2023_Community_Needs_Study_pdf.pdf

[17] https://www.flipsnack.com/5C9CBAEEFB5/psls-2023-impact-report/full-view.html

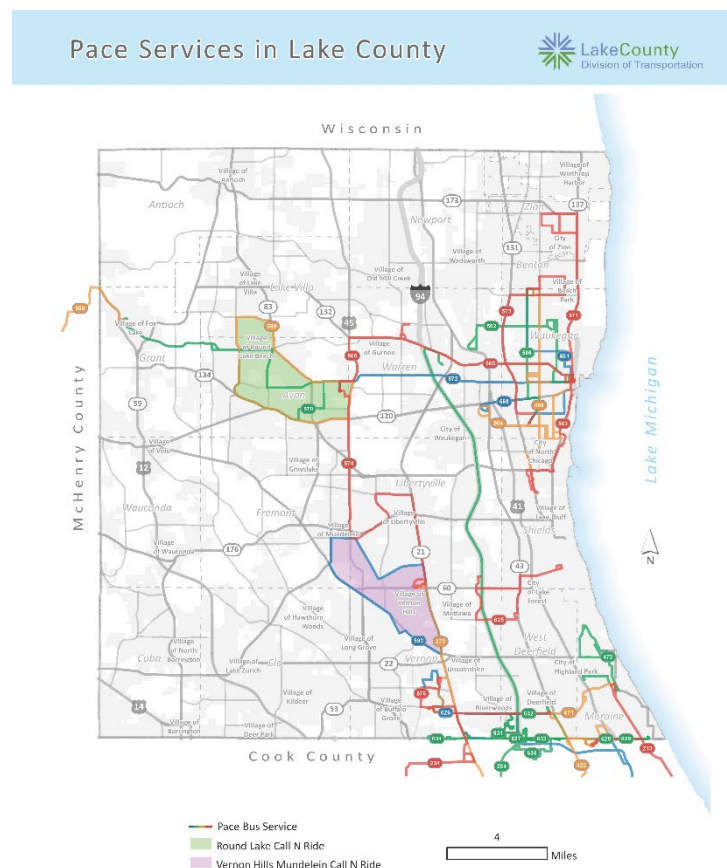[18] https://nslegalaid.org/wp-content/uploads/2024/11/2023-NSLAC-Annual-Report.pdf

[19] https://journals.lww.com/ajnonline/abstract/2024/10000/development_of_a_referral_pathway_to_address.24.aspx

Transigraph

Transportation

Why it is a Social Driver of Health: Transportation is a crucial social driver of health because it affects access to healthcare, nutritious food, employment, and physical activity. Reliable transportation improves quality of life, reduces stress, and promotes healthier lifestyles, while a lack of it can lead to health disparities, especially in underserved communities. Equitable transportation options help foster better health outcomes and reduce environmental impacts.

What is Happening in Our Community: Public transportation in Lake County includes four Metra rail lines and 32 Pace bus routes, with the highest ridership around Waukegan, Grayslake, and the Libertyville-Mundelein-Vernon Hills areas.[20] The number of Metra boardings varies, but ridership is generally higher in the southern half of the county. Barrington, located in the southwest corner of the County, on the Union Pacific Northwest line, has the greatest number of boardings. Twenty-one bus routes are considered fixed-route and operate at least six days a week. Two of these routes offer Sunday service. The other 11 Pace bus routes in Lake County offer services two to three days a week.

[20]https://www.lakecountyil.gov/DocumentCenter/View/50755/Lake-County-Community-Health-Assessment-CHA-2022-2026

The Lake County 2040 Transportation Plan reveals significant differences in street networks between older and newer developed areas. [21] The older areas feature well-organized grid-pattern street systems, while newer developments are more disjointed, making travel more circuitous and limiting route options. Additionally, four-lane roadways are predominantly located in the eastern half of the county, while much of the western half relies on two-lane roads, which further complicates travel.

The diverse land use, population, and employment density across Lake County makes public transit difficult across many areas of Lake County.
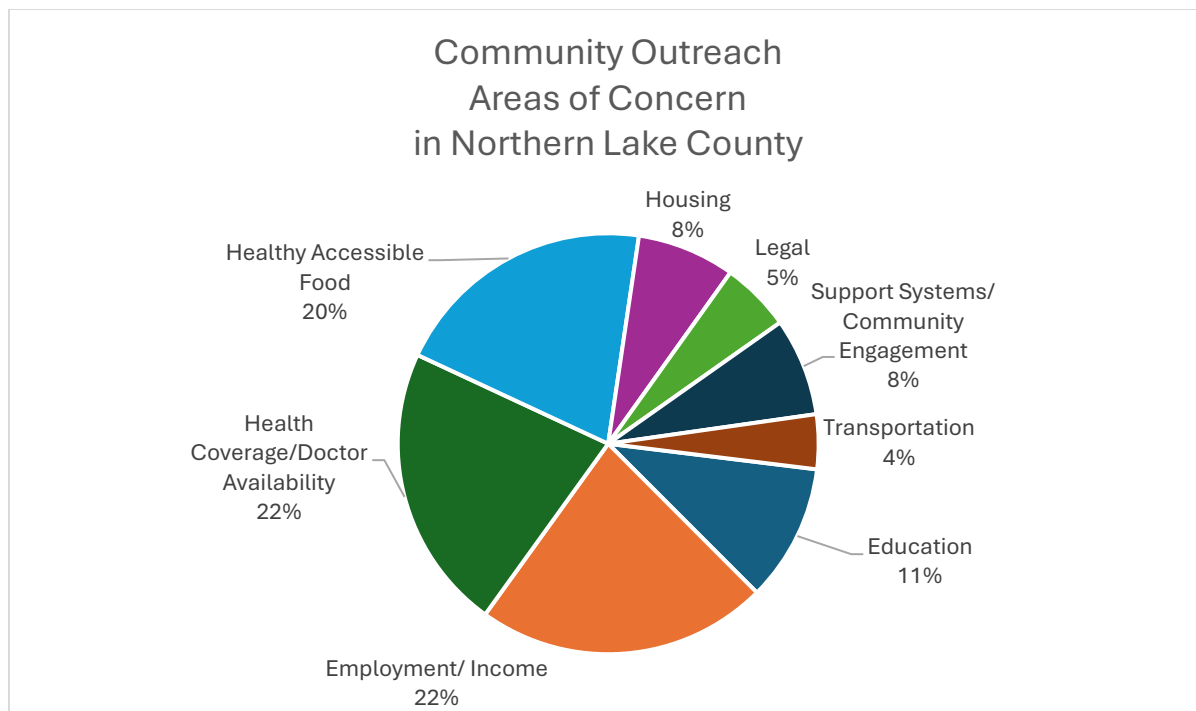
Community Outreach Summary

During the summer of 2024, HFNLC collaborated with local food pantries, libraries, community centers, schools, park districts, businesses, and nonprofits, to engage with residents where they are and discussed the social drivers of health affecting their daily lives.

Our outreach initiatives included participation at various neighborhood sites such as Art Impact, the Black Business Expo, the Brushwood Center, John T. Magee Middle School, the LGBTQ+ Center of Lake County, Mano a Mano, Mundelein Park District, North Chicago Library, Park City Community Center, Northern Illinois Food Bank, Open Arms Mission, Roberti Community House, Rosalind Franklin University Mobile Care Connection, Woodland Middle School, and Zion Benton Public Library.

At each of the 14 events, participants were asked to select up to three SDOH that negatively impacted their life the most from a Social Driver of Health Wheel presented on a poster board. Their responses, along with their zip code, were recorded and analyzed to identify trends in community concerns. We collected a total of 764 responses, with 691 of these responses coming from residents of Lake County. The pie chart below illustrates the selected areas of concern reported by participants. The most frequent Social Drivers of Health selected include health coverage and doctor availability (22%) and employment/income (22%), followed closely by access to healthy food (20%).

---

[21] Lake County Division of Transportation, 2040 Transportation Plan

Community Outreach
Areas of Concern
in Northern Lake County

- Housing 8%
- Legal 5%
- Support Systems/ Community Engagement 8%
- Transportation 4%
- Education 11%
- Employment/ Income 22%
- Health Coverage/Doctor Availability 22%
- Healthy Accessible Food 20%

When analyzing the data by community, most SDOH concerns aligned with the overall findings. However, two notable exceptions emerged:

- Legal Services in North Chicago: Legal services were identified as a concern in 14% of responses. Whether there is a correlation between the demographics of North Chicago and need for better access to legal services is yet to be determined.
- Transportation in Antioch: In Antioch, transportation was highlighted as a concern in 13% of responses. As a community located in the far northwestern corner of the county with limited public transit options, an elevated level of concern is expected.

It is important to note that the list of eight SDOH provided to participants was in no way exhaustive of all possible social determinants impacting communities. Many other factors, such as environmental conditions, language barriers, and mental health support, also play a crucial role in community well-being.

Additionally, HFNLC staff often had to educate community members on what social drivers of health are and how these external factors influence their daily lives. Many participants were unfamiliar with the term social drivers of health before engaging with our outreach efforts. Through these conversations, we were able to raise awareness and recognized the need for more education in order to empower individuals to recognize and advocate for the resources and services they need.
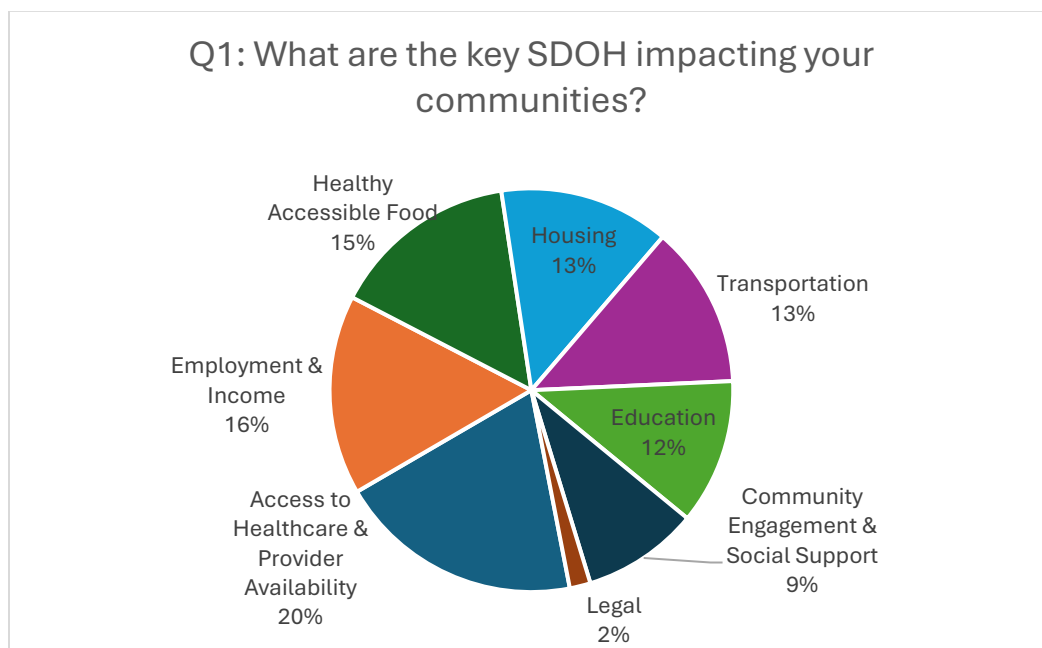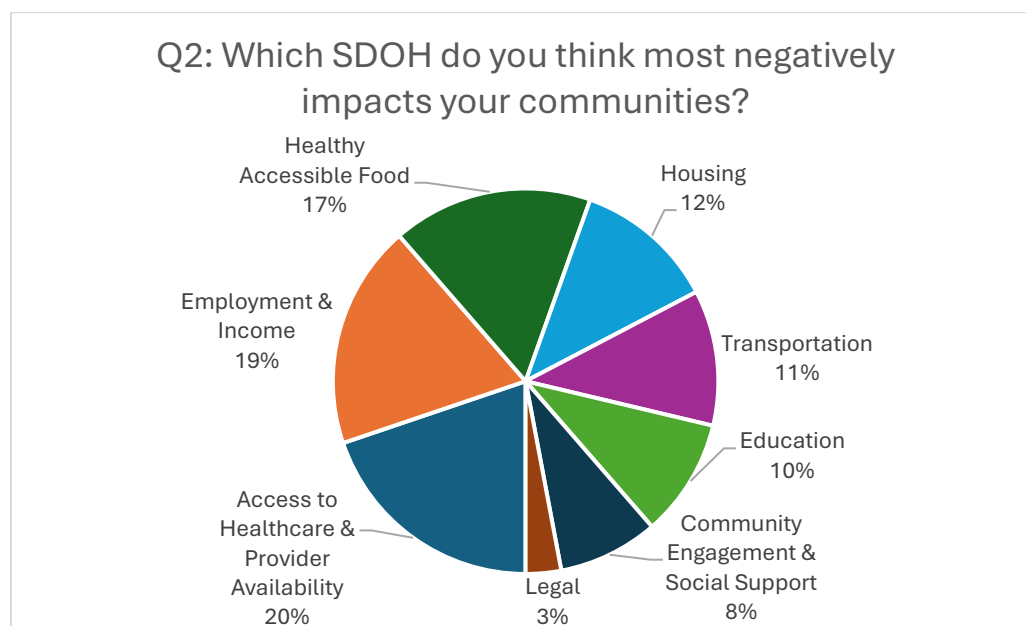
Table Talks Summary

We convened five multisector facilitated discussions, called Table Talks, with 94 representatives from government, healthcare, human services, community and faith-based organizations, education, libraries, first responders, and chambers of commerce. These discussions were designed to explore the social drivers of health affecting the communities they serve. The Table Talks were hosted at various nonprofit and business venues, including the College of Lake County-Lakeshore Campus, Illinois State Beach Park Hotel, LGBTQ Center of Lake County, Olivia's Italian Restaurant, and Timothy O'Toole's Bar and Grill in Lake Villa.

At each Table Talk, we posed six questions:
1. What are the key social drivers of health impacting your communities?
2. Which social drivers of health do you think most negatively impacts your communities?
3. Please describe the community assets and protective factors that are positively impacting your communities.
4. Name solutions to address the social drivers of health and strengthen community assets.
5. How can we work across sectors and communities to improve health equity?
6. What do you envision philanthropy's role to be in addressing social drivers of health and promoting health equity?

For questions one and two, participants selected the social drivers of health using the same Social Driver of Health Wheel presented during community outreach activities. The pie charts below illustrate the number of times a particular social driver of health was included in the participants' written answer.

Q1: What are the key SDOH impacting your communities?

- Healthy Accessible Food 15%
- Housing 13%
- Transportation 13%
- Education 12%
- Community Engagement & Social Support 9%
- Legal 2%
- Access to Healthcare & Provider Availability 20%
- Employment & Income 16%

Q2: Which SDOH do you think most negatively impacts your communities?

Healthy Accessible Food 17%

Housing 12%

Employment & Income 19%

Transportation 11%

Education 10%

Access to Healthcare & Provider Availability 20%

Community Engagement & Social Support 8%

Legal 3%

Similar to the community outreach results, the most frequently selected social drivers of health selected include health coverage and doctor availability and employment/income. However, the remaining social drivers of health ranked very differently.

For question 3: Please describe the community assets and protective factors that are positively impacting your communities; a variety of community assets that are positively impacting communities were described by Table Talk participants including nonprofits, community and faith-based organizations, hospitals, health clinics, green and blue spaces, schools, higher education, libraries, first responders, food pantries, foundations, townships, Lake County Health Department, and multilingual services. Government programs such as Medicare, Medicaid, WIC, SNAP, and TANF were also offered as community assets. Protective factors that were mentioned included radical hope in action, sense of belonging, sense of community, sense of duty, family, pride, work ethic, diversity, culture, community engagement, and community organizing.

For question 4: Name solutions to address the SDOH and strengthen community assets; Some of the solutions to address SDOH and strengthen community assets that were proposed by Table Talk participants included Community Health Workers (CHWs) and other community navigators, community education on finance, nutrition, and public health, advocacy, policy change and school funding tax reform, peer to peer and youth mentoring, create partnerships to foster collaboration and decrease duplication and competition, Asset-Based Community Development (ABCD), multisector approaches to break down silos, better coordinated efforts, utilization of 211 and 988, incentivize and diversify providers to work in low income communities, conduct outreach in non-

traditional locations and access points, implement collective impact strategies, and long term investments.

For question 5: How can we work across sectors and communities to improve health equity; Table Talk participants brainstormed ways we can work across sectors to promote health equity. These are some of their recommendations strengthen community academic partnerships, engage in practices which center community and amplify voice such as community-based participatory research, citizen science, community-driven advocacy, and community psychology, data sharing, pooled resources, strategic collaborations and consolidations, build more affordable housing, encourage and fund innovation, coalesce around shared language, priorities and vision for the future, promote intergenerational opportunities, combat stigma, increase DEI efforts, create a resource database or clearinghouse, foster non-profit advocacy on needed reforms, and provide more convenings like this one for stakeholders to come together to network and share information.

Lastly, for question 6: What do you envision philanthropy's role to be in addressing SDOH and promoting health equity; one Table Talk participant said, "philanthropy has a powerful role in allowing people to reimagine communities that are thriving and not just surviving, It provides access or has the power to maintain barriers, therefore maintaining systems that are oppressive…" The word cloud below was created to summarize participants' responses. The more frequently a word appears in participant's responses, the larger and bolder it is displayed in the word cloud.

Data Analysis and Insights

When the data from the community outreach and question 2 of the table talks is analyzed together the eight social drivers of health evaluated through the Summer Community Listening Initiative are ranked as follows.

1. Access to Healthcare & Provider Availability
   - Ranked #1 in Table Talks (20%)
   - Ranked #2 in community outreach (22%)
2. Employment & Income
   - Ranked #2 in Table Talks (19%)
   - Ranked #1 in community outreach (22%)
3. Healthy Accessible Food
   - Ranked #3 in Table Talks (17%)
   - Ranked #3 in community outreach (20%)
4. Education
   - Ranked #6 in Table Talks (10%)
   - Ranked #4 in community outreach (11%)
5. Housing
   - Ranked #4 in Table Talks (13%)
   - Ranked #5 in community outreach (8%)
6. Community Engagement & Social Support
   - Ranked #7 in Table Talks (8%)
   - Ranked #6 in community outreach (8%)
7. Transportation
   - Ranked #5 in Table Talks (12%)
   - Ranked #8 in community outreach (11%)
8. Legal Services
   - Ranked #8 in Table Talks (3%)
   - Ranked #7 in community outreach (5%)

Key Insights

1. Healthcare Access is a top concern: With an average importance rating of 21%, Access to Healthcare & Provider Availability is the highest priority. This underscores the need for affordable, accessible medical services, particularly in underserved areas.
2. Economic Stability Directly Impacts Health Outcomes: Employment & Income (19%) is the second most pressing issue. Economic security plays a crucial role in healthcare access, as individuals with stable jobs and higher incomes are more likely to afford medical care, insurance, and nutritious food.
3. Food Security is a Critical Health Driver: Healthy Accessible Food (17.5%) ranks third, highlighting the importance of nutrition programs and food access initiatives to improve

overall community health. Malnutrition and food insecurity contribute to chronic diseases and poor health outcomes.

4. Education as a Long-Term Public Health Strategy: Education (11.5%) is closely tied to health literacy, employment prospects, and economic mobility. Investment in education, especially health education and job training, can lead to long-term improvements in community well-being.

5. Housing and Transportation Barriers Affect Healthcare Utilization: Housing (10.5%) and Transportation (8%) rank lower but are still essential concerns. A lack of stable housing can lead to worsening health conditions, while limited transportation options make accessing healthcare facilities more difficult.

6. Community Support Networks Enhance Health and Well-being: Community Engagement & Social Support (8.5%) is a key factor in overall health. Strong community networks can improve mental health, chronic disease management, and health education, particularly for vulnerable populations.

Access to healthcare is the top priority in Northern Lake County, followed closely by economic stability, food security, and education, all of which directly impact community health. Housing and transportation, while ranked lower, remain essential for ensuring healthcare accessibility. Strong community support networks also play a crucial role in mental and physical well-being. Addressing these interconnected issues through healthcare expansion, workforce development, nutrition programs, and transportation solutions can significantly improve overall health outcomes.