Franciscan Children’s
2018 Community Health Needs Assessment
Executive Summary

July 2018
EXECUTIVE SUMMARY

Background
Franciscan Children’s mission is to provide a compassionate and positive environment where children with complex medical, mental health and educational needs receive specialized care from people who are committed to excellence, innovation and family support... so that children can reach their fullest potential and live their best life.

In addition to providing medical, mental health, and educational services for children with complex needs, Franciscan Children’s offers primary care, mental health, and dentistry services to children and families from the local community and beyond.

In 2018, Franciscan Children’s conducted a community health needs assessment (CHNA) of the community it serves. The CHNA examines the current health status of children and families in the Allston/Brighton community, identifies health priorities, and explores community strengths, resources, and gaps in services in order to guide future planning and programming efforts for Franciscan Children’s.

This is the second CHNA for the hospital; the first was conducted in 2015 and led to identification of priority areas, including mental health. Franciscan Children’s and its partners developed and implemented a range of strategies to address these identified needs.

Methods
This CHNA aims to identify the health-related needs and strengths of Allston/Brighton through a social determinants of health framework. This framework defines health in the broadest sense, at multiple levels, and recognizes numerous factors as having an impact on the community’s health, including:

- lifestyle behaviors (e.g., healthy eating and active living)
- clinical care (e.g., access to medical services)
- social and economic factors (e.g., poverty)
- physical environment (e.g., air quality)

Existing social, economic, and health data were drawn from sources such as the U.S. Census, Massachusetts Department of Public Health, Boston Public Schools, Boston Public Health Commission, and Boston Police Department, among others.

Additionally, one focus group and 11 key respondent interviews were conducted to solicit the input of community stakeholders and residents about their perceptions of the community, priority health concerns, and services or resources that are most needed to address these concerns.

Findings

Community Social and Economic Context

- **Demographic Characteristics:** Allston/Brighton is a dynamic and vibrant community with a high proportion of young adults and substantial racial and ethnic diversity. The total population of Allston/Brighton in 2015 was 67,529. Over half of residents are young people ages 20-34 and children under 18 comprise 8.9% of the
population. One third of the Allston/Brighton’s residents are from minority groups; Asians comprise the largest minority population (15.8%), followed by Hispanic residents (12.1%). About twenty percent of Allston/Brighton residents over the age of five speak a language other than English at home; the most common languages spoken are Spanish/Spanish Creole and Chinese.

- **Income, Education, and Employment:** In 2015, median household income in Allston/Brighton was $39,717 and in Brighton it was $50,110, both lower than the median household income for Boston ($55,777). About 15% of the community’s families, and slightly over 20% of the community’s children under 18, live in poverty. Overall education levels in Allston/Brighton are high—over 60% of Allston/Brighton residents have a bachelor’s degree or higher. However, declining school enrollment and low high school graduation rates are of concern.

- **Housing and Transportation:** High housing costs in Allston/Brighton are a substantial challenge to the community as lower income individuals and young immigrant families are being priced out. About 55% of renters in Allston/Brighton paid 30% or more of their household income toward monthly rent, a rate higher than many other neighborhoods and the city of Boston overall. Density of population and continuing development has created a strain on transportation resources.

**Community Health Outcomes and Behaviors**

- **Mental Health:** As in 2015, the mental health of children continued to be one of the most prominent concerns for the community served by Franciscan Children’s. The community noted rising rates of anxiety and depression among children and youth in the community. Trauma is a substantial concern. The age-adjusted suicide rate in Allston/Brighton (6.3 per 100,000 residents) is higher than Boston overall and higher than many other Boston neighborhoods. The mental health hospitalization rate for Allston/Brighton was 109 per 10,000 residents in 2015, the highest rate among all the neighborhoods in Boston. About one quarter of Boston high school students reported feeling sad or hopeless for two weeks straight in 2015; this rate has increased between 2009 and 2017.

- **Substance Use:** Marijuana use among students and a vaping are of concern to community members, but have not impacted Allston/Brighton in the same way that it has for other communities. Data about substance misuse indicates that Allston/Brighton’s death rate of 21 per 100,000 residents is lower than many other neighborhoods, and substantially lower than the rate for Boston overall. Trend data about marijuana use among Boston high school students indicates that current use of marijuana has risen between 2009 and 2017. Data about vaping indicates a decline among Boston high school students from 2015 to 2017.

- **Obesity, Physical Activity and Nutrition:** Respondents mentioned obesity among children and youth as a challenge for the community of Allston/Brighton, as it was in 2015. Almost every respondent mentioned the lack of access to and the high cost of healthy food. Barriers to accessing healthy food were both physical and economic. Allston/Brighton has numerous opportunities for physical activity. However, residents in the community are not as physically active as they could be. A smaller proportion of adults in Allston/Brighton meet CDC guidelines for physical activity versus those in Boston.

- **Violence, Injury and Trauma:** A few respondents mentioned that domestic violence in the community is rising, as is trauma among children and youth, particularly among those from immigrant families. Parent focus group members shared that electronic bullying is prevalent. However, Youth Risk Behavior Survey data indicate that reported rates of electronic bullying and bullying on high school property in Boston have been declining.

**Access to Care**
• **Primary Care:** Respondents reported that primary care services are readily available in the Allston/Brighton community, for residents of any economic circumstances. Decisions about where to go for primary care are often based on word-of-mouth, cost, and acceptance of insurances. Primary care hours are not always convenient for families, especially for urgent care. Community members saw a need for more evening and weekend hours.

• **Mental Health:** Respondents reported mental health services are available in the community but can have long wait lists; mental health emergency care is also in short supply. Mental health services are selected based on recommendations by pediatricians and the ability to get a timely appointment. Issues, such as cost and insurance constraints, stigma, and language barriers, create challenges to accessing mental health services for Allston/Brighton families. Pediatricians play an important role in identifying mental health concerns, especially in young children, yet many were reported to lack training to do so.

• **Oral Health:** The Allston/Brighton community has dental health services, including community-based providers and school-based screening services, but more are needed, especially for pediatric care and for lower income residents without insurance. Cost and location were the primary considerations for parents when choosing a dental provider. Barriers to accessing oral health services are lack of dental insurance, cost, and for some families, lack of understanding about the importance of preventative dental care.

• **Barriers to Accessing Care:** The affordability of healthcare was mentioned most frequently as the barrier to accessing healthcare including the cost of health insurance, as well as out-of-pocket costs for co-pays, deductibles, and medications. Another challenge is what is covered by insurance, particularly MassHealth Standard. Lack of time and attention to healthcare are also challenges for families. Language barriers and fear of being reported by the institutions with which they interact create additional barriers to care for the community’s immigrant families.

**Community Strengths and Assets**

• **Community Organizations:** Strong community organizations are an asset of Allston/Brighton. These include organizations focused on public health, social service providers, schools, youth development organizations, trade organizations, and community development agencies. They also include community coalitions. Respondents viewed these organizations as able to collaborate effectively.

• **Healthcare Providers:** The community is rich in healthcare resources as well, including hospitals, a community clinic, and private providers. While respondents reported a need for more services, they stated that those in the community provide high quality services.

• **Universities:** Although respondents expressed concern about the strong university presence in the community relative to the impact on development and housing costs, they also saw universities as valuable community assets.

• **Active and Engaged Community:** Allston/Brighton residents are very engaged in and committed to the community. The strong “sense of community” was frequently mentioned in conversations. Respondents viewed capable and visible leadership in the community, engagement of local businesses, and community-based policing as assets.

• **Prevention Programs:** The wide variety of community institutions and engaged community members in Allston/Brighton has resulted in strong community programs to address health and the social determinants of health. While the community has many opportunities, respondents reported that information about these programs can be difficult to access.
Community Suggestions

- **Mental Health:** Interviewees and focus group members see a need for expanded services and supports for mental health, especially programs directed toward young children and teens and those with language needs other than English. Recommendations also included promoting existing mental health resources in the community and expanding existing school-based mental health programs like those offered by Franciscan Children’s, as well as student, parent, and pediatrician education about mental health. To overcome stigma, respondents suggested more community education. Respondents viewed specific outreach to immigrant communities, where mental health issues are private and residents are less connected to health services, as critical.

- **Primary and Oral Health:** Respondents saw a need for expanded health services in the community, including more evening and weekend hours and expanded school-based programming. They viewed schools as a critical partner for healthcare. While respondents report that excellent dental services exist in the community, they also perceived an unmet need, especially for affordable dental care for children.

- **Prevention Services and Education:** Respondents suggested more education in the schools and for parents about topics such as substance use (marijuana and vaping in particular), healthy eating, and physical activity. Respondents noted that several community-based programs about nutrition already exist, but additional programming would be helpful. The expansion of existing physical activity programs for children and youth was also suggested.

- **Centralized Source of Information:** Information about services and programs in the community is not always easily accessible. Respondents mentioned a need for a centralized, comprehensive, and up-to-date information source.

- **Build on Existing Efforts:** Allston/Brighton has a strong set of institutions addressing community issues, such as housing and transportation, mental health, substance use, and food (insecurity, provision and nutrition programming). Respondents shared that the community has a history of partnership and urged Franciscan Children’s to connect to and build on existing work, starting with engaging in local networks.