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OUR VISION
To serve as a leading urban health research institute for eliminating health disparities and working toward health equity

OUR MISSION
To develop and implement effective approaches to improve the health of urban communities through data-driven research, interventions, evaluation, and community engagement

HIGHLIGHTS
SUHI has gained national recognition for its unique implementation of the Community Health Worker model, particularly for its effectiveness combating pediatric asthma and improving access to breast cancer screenings. In addition, SUHI is currently in the field completing the second round of the Sinai Community Health Survey. This will be the largest door-to-door health survey in Chicago history, surveying 4,500 individuals in 10 Chicago community areas. The survey questionnaire includes over 600 questions on a vast range of health topics.

SUHI TEAM
Since its founding in 2000, SUHI has grown from a staff of three to a dynamic collaborative of over 40 epidemiologists, project managers, research assistants, and community health workers. SUHI greatly benefits from its diversity of insights and academic and professional training in service of Sinai Health System’s pledge of “Making lives better.”

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RESEARCH
Members of SUHI have published over 100 peer-reviewed articles, including original population-based research, secondary data analyses, systematic literature reviews, and commentaries that have appeared in journals such as the American Journal of Public Health, the Journal of General Internal Medicine, and Health Affairs. SUHI researchers focus not only on identifying racial and ethnic health disparities, but also on understanding the causes of those differences and translating findings into action. Recently, SUHI published a series of articles highlighting racial disparities in specific causes of death across the 77 Chicago community areas as well as the 50 biggest cities in the US.

TEACHING
SUHI regularly shares its expertise through the teaching of formal courses, workshops, grand rounds, webinars, and presentations at national conferences. Topics range from descriptions of our research findings to didactic lectures on research methodology, epidemiology, health disparities, and intervention best practices.

CONSULTING
SUHI also provides consulting services for organizations interested in the following practices:
- Community Health Worker (CHW) Model: SUHI provides training and implementation assistance for the CHW model, a dynamic, community-based approach to health promotion and education. Evidence-based assistance is available for the hiring, training, supervision, and evaluation of CHWs and related programs.
- Program Evaluation and Capacity-Building: Based on 15 years of evaluation experience, SUHI staff also provide training and consultation on program evaluation and capacity-building tools.

FUNDING
SUHI has received a wide variety of grants from private foundations and government entities to expand its outreach efforts and scientific impact. Over the past 15 years, SUHI has brought more than $32 million in grant funding to Sinai Health System. SUHI also brings in revenue through consulting and disease management contracts.

FUNDING SOURCES FOR ACTIVE SUHI GRANTS

- Local Foundations: 38%
- National Foundations: 25%
- Govt. Agencies: 13%
- Contracts: 24%
BACKGROUND
Asthma affects the health and quality of life of millions of Americans every day, in addition to exerting a heavy burden on the nation’s healthcare system. In Chicago, asthma rates are elevated well above national averages, and the disease burden is felt disproportionately in minority and disadvantaged communities.

SUHI’S ASTHMA PROGRAMS
Since 2000, SUHI has implemented a series of eight asthma interventions in seven communities, including Austin, East Garfield Park, Humboldt Park, Near West Side, North Lawndale, South Lawndale, and West Garfield Park. At the heart of SUHI’s asthma programming is the Community Health Worker (CHW), a lay community member trained to deliver accurate, culturally-appropriate health education to fellow community members on managing and controlling asthma symptoms.

- **The CHICAGO (Coordinated Healthcare Interventions for Childhood Asthma Gaps in Outcomes) Plan:** The CHICAGO Plan is a multicenter randomized controlled trial exploring how health outcomes for Black and Latino children with uncontrolled asthma might best be optimized. A key goal of the project is to understand how to best implement asthma care in the emergency department. SUHI is currently serving as the CHW Coordinating Center for the CHICAGO Plan by hiring, training, and supervising all of the CHWs across the six sites.

- **Asthma CarePartners (ACP):** ACP is SUHI’s first asthma intervention for both publicly and privately insured children and adults, and includes a long-term partnership with Family Health Network, a Medicaid managed care organization. In this yearlong program, CHWs visit client homes to provide education, hands-on demonstrations of proper medical device techniques, and environmental home assessments.

- **Helping Chicago’s Westside Adults Breathe and Thrive:** This is a home-based asthma and healthy homes intervention aimed at improving asthma control and quality of life among adults with poorly-controlled asthma. It is operated in partnership with the Metropolitan Tenants Organization.

- **Consulting:** Via the Sinai Asthma Education Training Institute (SAETI), SUHI provides asthma training and consulting for organizations, their CHWs, and other healthcare staff. SUHI has worked with several health care providers, including a yearlong consulting project with a large Chicagoland healthcare system, to integrate CHWs into their asthma care plan.

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SINAI URBAN HEALTH INSTITUTE

Asthma

PROGRAM HIGHLIGHTS

- Innovative usage of Community Health Workers creates a strong, positively reinforcing link with patients, both children and adults, to reduce the exacerbation of asthma symptoms.

- SUHI asthma programs have won prestigious awards from the American Hospital Association, the Environmental Protection Agency, the Illinois Hospital Association, and the Utilization Review Accreditation Commission.

- As of 2014, Asthma CarePartners saw a 74% reduction in ED visits and a 71% decrease in hospitalizations for clients who participated in the 12-month intervention.

- Asthma CarePartners also documented dramatic improvements in participants’ levels of asthma control and correct usage of asthma medication.

- Helping Chicago’s Westside Adults Breathe and Thrive, an ongoing initiative, has shown a 60% reduction in daytime symptoms, a 56% reduction in ED visits, and a 66% reduction in

SELECT PUBLICATIONS


CURRENT FUNDERS

- Department of Housing and Urban Development
- Family Health Network
- Patient-Centered Outcomes Research Institute

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BACKGROUND
Breast cancer is the most commonly diagnosed form of cancer and the second leading cause of death among women. Like many diseases, the highest mortality and morbidity rates are seen among racial and ethnic minorities and women from lower socioeconomic classes. Of particular concern, SUHI has documented that Black women in Chicago are 48% more likely to die from breast cancer compared to White women.

SUHI’S BREAST CANCER PROGRAMS
SUHI has developed culturally-appropriate breast health promotion programming which focuses on the reduction of common social, cultural, financial, and logistical barriers to screening. SUHI uses Community Health Worker (CHW) and patient navigator models to navigate women through breast cancer screening and care.

Helping Her Live (2007 — present)
- Helping Her Live is an innovative breast cancer education and outreach program focused on underserved women on Chicago’s West and Southwest Sides.
- CHWs assist women with navigating the healthcare system, obtaining routine breast cancer screenings, and reducing delays in obtaining test results and additional follow-up.

Sinai Clinical Navigation (2005 — present)
- The Clinical Navigation program, housed in the Radiology Department at Mount Sinai Hospital, is led by two highly-trained lay patient navigators and focuses on patients with abnormal mammogram findings.
- Navigators assist women with the diagnostic process by providing assistance with scheduling appointments, locating and requesting prior outside health records as needed, and providing information on the next steps recommended by clinicians. Additionally, navigators provide social support during times of uncertainty following an abnormal mammogram.

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SINAI URBAN HEALTH INSTITUTE
Breast Cancer

PROGRAM HIGHLIGHTS
- Helping Her Live staff has educated over 15,000 women on the importance of breast health.
- Our Community Health Workers have navigated over 3,000 women to mammograms.
- Navigators monitored over 91,000 mammograms, facilitated follow-up for over 10,000 women, and assisted over 300 women to obtain cancer treatment.

SELECT PUBLICATIONS


CURRENT FUNDERS
- Avon Foundation for Women
- Lynn Sage Cancer Research Foundation
- Telligen Community Initiative
- Susan G. Komen Chicago

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BACKGROUND
Healthcare reform has called for systems change and attainment of the “triple aim”- better health, better quality, and lower health care costs. One strategy recognized in the Affordable Care Act (ACA), and progressively being discussed by medical providers and policy-makers, is the utilization of Community Health Workers (CHWs) as valued members of healthcare teams. Community-based interventions involving the CHW model are shown to be effective at enhancing service delivery through more efficient, patient-centered care. The American Public Health Association defines a CHW as “a frontline public health worker who is a trusted member of and/or has an unusually close understanding of the community served.” Over the past decade, SUHI has become a national leader in the implementation of the CHW model.

SUHI’S COMMUNITY HEALTH WORKER MODEL
SUHI has amassed extensive experience utilizing CHWs to deliver health education, conduct home assessments, and assist clients in navigating our country’s complex health care system. CHWs trained by SUHI play a vital role in the implementation of sustainable, culturally-competent health interventions designed to reduce health inequities, improve health, and lower costs. SUHI’s renowned CHW model focuses on embedding and empowering these dynamic “resident health experts” and healthcare system stewards to provide personalized, grounded education on effective disease management strategies.

SUHI CONSULTING SERVICES
SUHI is increasingly called upon to help other organizations implement our CHW model, which has been proven to be a cost-effective way to meet a wide variety of program objectives. We offer:

- General CHW program development consultation, including assistance with implementing the CHW model and integrating CHWs into health care systems.
- Education and staff training on CHW Model Best Practices, including modules on cultural competence, patient relationship-building, and continuous quality improvement
- Training for CHWs to care for patients with specific conditions as well as high-risk populations, including CHW core skills training and health condition specific trainings.

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PROGRAM HIGHLIGHTS

- For over 12 years, SUHI has been designing and implementing innovative, cost-effective CHW programming in some of Chicago’s most underserved communities

- CHWs trained through SUHI provide personalized, evidence-based support in the realm of general system navigation, asthma management, diabetes control, breast health, and HIV/STDs

- Our interventions using CHWs have led to 50-75% declines in asthma-related emergency department (ED) visits and hospitalizations

- Results also include statistically and clinically significant improvements in asthma-related quality of life

- Savings of an average of $5 per dollar invested

SELECT PUBLICATIONS


Gutierrez Kapheim M and Campbell J. Best Practice Guidelines for Implementing and Evaluating Community Health Worker Programs in Health Care Settings. Chicago, IL: Sinai Urban Health Institute, January 2014.


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BACKGROUND
Like many chronic conditions, diabetes is influenced by genetic, social, and environmental factors and is most common in poor and minority communities. The West Side of Chicago has consistently shown some of the highest rates of diabetes in the city, making it an area ripe for the implementation of creative interventions focused on leveraging local resources to support change and improved self-management practices.

SUHI’S DIABETES WORK
In 2009, SUHI was awarded a highly-competitive grant by the National Institutes of Health to increase community knowledge and understanding of diabetes risk factors and ways to prevent disease onset in North Lawndale. Since then, SUHI’s work has expanded to include other Chicago communities, including Humboldt Park and South Lawndale. These efforts are focused on improving health-related knowledge, access to care, and better diabetes self-management practices. Community health educators, named “Diabetes Block Captains,” conduct household screenings for diabetes and promote self-management techniques for diabetic individuals and those at risk for the disease. A five-year partnership with Blue Cross Blue Shield (BCBS) of Illinois has enabled this unique,

SUHI’S DIABETES PROGRAMS
- Lawndale Diabetes Project: A Community-Based Collaboration between Mount Sinai Hospital and Blue Cross and Blue Shield of Illinois (2011 — present)
- Humboldt Park Diabetes Task Force (2006 — present)

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PROGRAM HIGHLIGHTS

- During the initial visits for the Lawndale Diabetes Project (LDP), 2,160 persons from both North and South Lawndale were surveyed; 21% self-identified as diabetic, and 24% were classified as high risk. Both rates are well above national levels.

- After participating in the LDP intervention, individuals with diabetes showed a significant decrease in HbA1c levels. For example, 45% of participants saw a clinically meaningful improvement (decrease >0.5%) in HbA1c levels between baseline and follow-up.

- Over the course of the two-phase intervention, other related outcomes also improved. In LDP phase 1, levels of diabetes knowledge, mental health, and consistent medication use increased. In LDP phase 2, self-management activities such as foot care and exercise significantly improved.

SELECT PUBLICATIONS


CURRENT FUNDERS

- Blue Cross and Blue Shield of Illinois
- Northwestern University

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Program evaluation is an essential methodological tool that provides stakeholders with the data and insights necessary to measure program effectiveness. The ability to empirically assess the impact of a program is paramount to ensuring program objectives are reached and sustained. SUHI has the applied experience needed to answer this vital question: “Is our program working?”

Since 2004, the SUHI evaluation team, including epidemiologists and research assistants, has designed and implemented rigorous, data-driven methodologies and metrics to assess the relationship between program processes and outcomes. Additionally, the team provides evaluation capacity building and technical assistance for a variety of community-based programs implementing health interventions throughout Chicago.

- Evaluation Capacity Building Project funded by The Chicago Community Trust (2010-present)
- Sinai Community Institute Evaluation Collaborative funded by the Michael Reese Health Trust (2011-present)
- Evaluation of ACCESS Westside Healthy Start and Stand Against Cancer Programs (2004-2012)

Evaluators for the Chicago Community Trust project have provided evaluation capacity-building to nearly 30 community-based organizations over the course of 5 years.

By the end of the most recent capacity building grant cycle, community partners reported increased confidence in creating a program evaluation plan, drafting surveys for data collection, and using evaluation results to improve programming.

Evaluators for SCI have conducted several full-scale program evaluations while expanding internal monitoring and evaluation capacity.

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BACKGROUND
A growing body of research has documented large and increasing health disparities in both the US and Chicago. Since its inception in 2000, Sinai Urban Health Institute (SUHI) has served as a leading urban health research institute for eliminating health disparities and working towards health equity in the city of Chicago. To do this, we conduct epidemiological studies to document disparities and to understand their determinants. Then, we use this information to guide community-based health interventions in the disadvantaged communities that we serve.

SUHI’S WORK
SUHI’s research in the field of health disparities has several focal points:

- Documenting disparities in Chicago. First and foremost, we aim to understand disparities within the city of Chicago. We do this by studying:
  - Racial disparities at the city-level. We examine differences in health outcomes between Whites, Blacks, and Hispanics. Whenever possible, we separate the Hispanic group to study Mexicans and Puerto Ricans separately, because our research has demonstrated important differences between these and other subgroups.
  - Racial disparities across Chicago community areas. Chicago is comprised of 77 officially designated community areas. The community areas tend to be racially homogenous with large variations in income and other demographic characteristics observed across them. This type of local-level data is important as it reveals health differences masked by city-wide averages. For example, life expectancy differs by a staggering 15 years across these community areas.

- Tracking racial disparities at the national level. National data provide a point of comparison for assessing disparities in Chicago. Researchers at SUHI have published a series of four articles over the past decade, tracking and comparing disparities in Chicago and the US to assess whether the Healthy People goal of reducing and eventually eliminating health disparities is being met.

- Comparing racial disparities across the largest US cities. Examining disparities in other large US cities helps us to situate Chicago, as well as to understand the trend in disparities over time and what factors might be contributing to disparities. Researchers at SUHI have published a series of articles over the past decade, with a particular focus on cause-specific mortality rates.

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SUHI'S WORK (CONTINUED)

- Studying social determinants of racial disparities. To understand the pathways through

SELECT PUBLICATIONS

Documenting Racial Disparities in Chicago


Tracking Racial Disparities at the National Level


Comparing Racial Disparities Across the Largest US Cities


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Sinai Community Health Survey

BACKGROUND
First conducted in 2002, the Sinai Community Health Survey is the largest door-to-door health survey ever implemented in Chicago. The purpose of the Sinai Survey is to:
- Document the health status of Chicago communities
- Use findings to develop public health interventions and policies to address health inequities

The second Sinai Survey was launched in October 2013 with generous funding from the Chicago Community Trust. The data will provide information on approximately 2,000 adults and 1,000 children. The survey is done face-to-face within a randomly selected sample from 10 Chicago community areas.

Data collection, carried out by the Survey Research Laboratory, is expected to be completed in Summer 2016. The survey includes over 600 questions on child and adult health. The final survey instrument was designed and approved in collaboration with a Community Advisory Committee. Findings will be disseminated to both community and academic audiences and will be made available to anyone working to improve health in Chicago.

COMMUNITIES SURVEYED
- Chicago Lawn
- Gage Park
- Hermosa
- Humboldt Park
- Lower West Side
- North Lawndale
- Norwood Park
- South Lawndale
- West Englewood
- West Town
FIRST SINAI COMMUNITY HEALTH SURVEY (2002)

RESULTING INTERVENTIONS AND GRANTS

Results from the initial Sinai Community Health Survey in 2002 led to the generation of nearly $20 million in funding and over 30 health programs to improve the health and well-being of communities throughout Chicago. Sinai Urban Health Institute implemented interventions in conjunction with community partners to address the following health topics and conditions:

- Asthma
- Breast health
- Diabetes
- Obesity
- School wellness
- Smoking

The Sinai Survey has also been replicated in three Chicago communities, including the Jewish Community on the North Side, the Chinese Community in Chinatown, and the Vietnamese and Cambodian Community on the North Side.

REPORTS AND PUBLICATIONS

Findings from the first Sinai Survey have been widely circulated to inform and inspire action to improve the health of the communities involved. This includes:

- 28 peer-reviewed articles using survey data
- 21 reports on the survey findings
- 400+ presentations to diverse local and national audiences
- Nearly 400 reports of the survey in popular media including print, television, and radio
- A book, “Urban Health: Combating Disparities with Local Data,” describing the collective efforts of the survey and resulting interventions

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