



# **Community Health Needs Assessment**

**Update and Addendum  
to the  
2013 Report**

**January 2016**

## Acknowledgments

We are deeply grateful to our many partners, represented on our Board of Directors and our Community Advisory Board. We especially thank our Executive Committee, who provide ongoing leadership and contribute countless hours of time to maintaining a truly collaborative spirit within the Trenton Health Team, focusing on the shared goal of transforming health and healthcare for the community:

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- Rescue Mission of Trenton
- Trenton Area Soup Kitchen
- St. Francis Medical Center
- Trenton YMCA and
- Frost Valley YMCA (retreat facilitated by Trenton YMCA))
- Christ Episcopal Church - Cristo Rey
- Reading Senior Center
- Thomas Edison State University
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## Executive Summary

This report is being presented as an update and addendum to the Trenton Health Team Community Health Needs Assessment (CHNA) Report of July 2013, which was developed with support from the Robert Wood Johnson Foundation New Jersey Health Initiatives, available for download on our website: <http://www.trentonhealthteam.org/tht/TrentonCommunityHealthNeedsAssessmentJuly2013.pdf> .

The 2013 CHNA report included a comprehensive review of quantitative data for the six zip codes of Trenton (08608, 08609, 08611, 08618, 08629, and 08638), coupled with qualitative input from residents obtained through 30 community forums and 300 one-on-one interviews.

For this update, survey findings from a county-wide health assessment, conducted by Health Resources in Action (HRiA) on behalf of the Greater Mercer Public Health Partnership ([www.healthymercer.org](http://www.healthymercer.org)), were reviewed and compared to responses from individuals residing in the Trenton zip codes. There were 1,927 responses to the County Survey; of those, 369 responses corresponded to Trenton zip codes. Findings from this survey were supplemented with direct input from Trenton residents provided through the community forums, held between November 30 and December 11, 2015. Findings from this process affirmed that the priority areas identified in the 2013 CHNA are still major concerns for the community, although a few new dimensions have emerged.

**Overarching Themes:** Trenton continues to be illustrative of the health disparities that often exist between a largely affluent, suburban community and a generally low-income, urban area in geographic proximity. While issues and perceived needs may align, the intensity of concern is frequently different within Trenton than it is in Mercer County as a whole. And even within the Trenton community, there are areas of greater affluence and educational attainment where levels of concern are more consistent with those in the surrounding suburbs. It is vitally important, therefore, that we continue to shine a light on the Trenton community and its diverse neighborhoods, to ensure that issues and health needs are not lost as they are rolled into the county-level reports. It is by focusing in that we can see more clearly what it will take to create a culture of health across all our city blocks and zip codes.

**Key findings:** Results from the Mercer County survey affirmed the five priority health issues identified in the 2013 Trenton Health Team CHNA, which were: Health Literacy and Disparities, Safety & Crime, Obesity & Healthy Lifestyles, Substance Abuse & Behavioral Health, and Chronic Disease: Diabetes, Hypertension, and Cancer. Although the County survey has titled their priorities slightly differently, it is clear that there is consistency between the County and THT priorities identified. The top five priorities identified in the County survey for Trenton residents are:

1. Alcohol or Substance Abuse
2. Access to Healthcare
3. Chronic Disease
4. Community Violence
5. Overweight or Obesity

Community forum input confirmed that the priorities identified in 2013 continue to be concerns for the community, and raised a number of additional issues, including: city planning, access to medication, issues related to doctors' visits, housing, food insecurity, transportation, bed bugs, and job insecurity. There were concerns also regarding safety and staffing in senior housing, serious issues pertaining to health insurance literacy, and a need for more cameras in public spaces.

Of note were some disparities within the Trenton community that were evident through the County survey. The 08608 zip code did not have enough respondents to be counted, but among the other five, there was a striking difference between 08609 and 08638 in demographics and educational attainment.

- The 08609 zip code had the highest rates of difficulty in almost all areas (significantly more negative than the Trenton average).<sup>1</sup> Key demographics include:
  - Average Adjusted Gross Income (AGI) in 2012: \$27,311
  - Only 9.1% of residents have bachelor's degree or higher
  - Estimated pop (2013): 14,883
    - 51.5% Black non-Hispanic
    - 28.3% Hispanic or Latino
    - 7.9% White
- The 08638 zip code had the highest rates of ease in many areas (significantly more positive than the Trenton average).<sup>2</sup> Key demographics include:
  - Average Adjusted Gross Income (AGI) in 2012: \$44,720
  - 20.4% of residents have a bachelor's degree or higher
  - Estimated pop (2013): 22,466
    - 44.6% Black non-Hispanic
    - 37.6% White
    - 15.2% Hispanic or Latino

Overall, when comparing Trenton responses to the County as a whole, long-term needs ranked lower in priority (e.g., concern regarding chronic disease and health effects related to aging), which may be indicative of an environment where residents don't feel they have time to be thinking about the future. The fact that they are more concerned about immediate needs such as safety and food access could indicate a sense of instability and insecurity regarding everyday life. Perhaps most telling is the finding that over 55% of Trenton residents think it is difficult to live a healthy lifestyle in their communities and more than 58% feel that their community is not a good place to raise a family. These are issues that we must continue to address, to ensure equity and opportunity and a culture of health for all in our community.

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<sup>1</sup> 08609 City Data link: <http://www.city-data.com/zips/08609.html>

<sup>2</sup> 08638 City Data link: <http://www.city-data.com/zips/08638.html>

## Background and Methodology

In 2013, the Trenton Health Team (THT) published a comprehensive, data-informed Community Health Needs Assessment (CHNA), in which Trenton residents played a key role in identifying and articulating the city's top health priorities. THT, a collaborative of the city's two hospitals, St. Francis Medical Center and Capital Health; its only Federally Qualified Health Center, Henry J. Austin Health Center; and the city government's Department of Health & Human Services, partnered with 29 community and social service agencies across Trenton to develop one CHNA for the city as a whole. A Community Advisory Board comprised of the partner agencies provided guidance and oversight to the CHNA process.

The 2013 CHNA identified five health priorities that require community-wide attention and focus: obesity/health lifestyles, substance abuse/behavioral health, safety and crime, chronic disease (diabetes, hypertension, and cancer), and health literacy/disparities. These were chosen from a longer list of issues, based on health data from THT partner organizations and public sources, which were then reviewed and discussed in over 300 individual interviews and 30 forums held in places of worship, community organizations, and public facilities. Priorities emerged as residents shared their personal stories, their fears, their frustrations and their health and life challenges in conversations guided by THT professionals.

Findings from the 2013 CHNA formed the basis for a Community Health Improvement Plan (CHIP), which was adopted by the THT Community Advisory Board (CAB) in January, 2014. The CAB, through work groups created to address each of the five priority areas, has continued to provide guidance and collaboration in implementing and monitoring the CHIP. Updates to this work are reported regularly to the CAB in their quarterly meetings.

As we approached the end of 2015, an update to the CHNA was needed and THT again facilitated the process. THT staff participated in the County health assessment process, which was being conducted simultaneously, and we were able to obtain results from the Mercer County survey, summarized at the county level and analyzed for Trenton zip codes, as follows: 08608, 08609, 08611, 08618, 08629, and 08638. Sub-group analyses were conducted for five of the six zip codes, but were not presented for 08608 due to an insufficient sample size (N=6). The findings from this process, conducted by Health Resources in Action (HRiA), are included in the Appendix. THT's Data Analyst, Roberto Gerardi, conducted a comparative analysis of the County-wide and Trenton-specific survey results. His analysis and observations (also included in the Appendix) provided important insights for this report.

It should be noted that the County survey was distributed electronically, in English and Spanish, and was a fairly lengthy questionnaire that some residents reported difficulty in processing. Although paper surveys were also distributed, results had to be entered into the electronic forms after the fact. This presented several challenges: residents without easy access to the internet or with limited literacy may have been underrepresented and organizations may have lacked staffing capacity to enter the survey results from those that were gathered in hard copy. In addition, many residents refused to participate in the survey, stating that it was "too long." This was especially true for non-English-speaking constituents, many of whom have limited literacy even in their native language. This refusal often came despite the offer of assistance from personnel who were bilingual.

In addition to the County survey, and to provide context for its findings, THT staff went back to the Trenton community to obtain direct information about residents' experiences and perceptions. A series of community forums were held in various parts of the city (Rescue Mission of Trenton, Trenton Area

Soup Kitchen, St. Francis Medical Center, Trenton YMCA and Frost Valley YMCA (retreat), Christ Episcopal (Cristo Rey) Church, Reading Senior Center, Thomas Edison State University, Sam Naples Center, and Trinity Cathedral), with close to 150 participants, 15 – 90 years of age, from a range of demographic backgrounds and circumstances. They were asked to provide personal stories and experiences pertaining to health and the healthcare system. The five priorities identified in the 2013 CHNA were used as a framework for gathering this information. Input from community residents revealed a number of issues across the board, plus some differences based on personal circumstances and perspectives. These are summarized and highlighted in the pages that follow.

We have grouped our findings to reflect the original priority areas from the 2013 CHNA report and the subsequent 2014 CHIP and added a section that articulates other concerns. Our primary sources for each area are the County survey, the THT comparative analysis, and anecdotal findings from our community forums. We have also reviewed the City Data link for zip code-specific demographic information (<http://www.city-data.com/>). Together, these sources offer important insights regarding the Trenton community that can help to frame programs and strategies for health improvement in the coming years.

## OVERVIEW

In the 2013 Community Health Needs Assessment conducted by the Trenton Health Team (THT), we quoted Dr. Lavizzo-Mourey, President and CEO of the Robert Wood Johnson Foundation in saying, “Our zip code may be more important to our health than our genetic code.” In reviewing survey results and findings from our community forums for this update, we see this geographic determinant continues to be a serious factor for the city of Trenton. While concerns within the Trenton zip codes are similar to those for Mercer County as a whole, the level of concern is at times dramatically different. Challenges pertaining to access and health literacy are more profound; language barriers are more keenly felt; and issues of violence and quality of life in the community are rated far more negatively in Trenton than the County more broadly. These differences are quantified as they relate to the five priority areas.

### Priority Area 1: Health Literacy & Disparities

As noted, health literacy is a concern that has ramifications across the other priority areas as well. Educational disparities, language barriers, lack of insurance and/or understanding of how to use it are some of the issues that undercut efforts to improve health outcomes for area residents.

#### Key Observations

- According to the County survey, access to healthcare ranks as the second biggest health issue Trenton residents are concerned about.
  - Approximately 15% of Trenton residents who completed the survey have no regular source of healthcare, and the 08629 zip code has more than double that rate. This is a difference of 88.6% when compared to the 7.9% of Mercer County residents.
- Trenton respondents had more than double the rate of residents without any type of health care insurance as compared to Mercer County as a whole (7.8% compared to 3.3%).
- Trenton reported lack of specialists as an issue that made it difficult to get health services - this issue was reported 46.5% more frequently than compared to the County.
- Language issues between patients and their health provider and/or office staff were reported as a barrier to receiving health services in Trenton 119.4% more than in the County as a whole. *(It should be noted that the populations in Trenton who have a native language other than English are underrepresented in the survey when compared to Census data. For example the Hispanic/Latino representation on survey was 13.8% as compared to the 33.7% Hispanic/Latino population of Trenton, according to the Census data' - meaning the impact of language barriers is most likely higher than this statistic.)*
- People reported feeling discriminated against as a barrier to getting health services in Trenton 112.1% more than in the County as a whole (7.0% versus 3.3%, respectively).
- Lack of transportation has been identified as a significant impact for residents in getting to the health services they need. Of Trenton residents, 24.3% reported it as an issue, while nearly half as many residents (12.5%) in the County as a whole face this issue.
- Health education: There are a lot of survey responses that indicate a need for education around health services. Over 53% of residents feel that it is difficult to find out about services that are available and how to access them. In forums, this came up as a significant concern, with residents sharing stories of being scheduled to see a doctor, only to learn at the last minute that they were not covered by their insurance policy. In-network providers are often randomly assigned and geographically remote for Trenton residents. Also of note, in a show of hands at



the Cristo Rey forum, which was almost 100% Hispanic, about 50% of the room reported that they had health insurance, but 0% indicated they had a primary care provider.

## **Priority Area 2: Safety & Crime**

Issues pertaining to safety are a much higher concern for Trenton residents than for Mercer County as a whole. Despite significant progress in reducing crime rates through programs such as community policing and the Trenton Violence Reduction Strategy, funded through the State of New Jersey Office of the Attorney General, residents are still afraid to go out and move freely within their neighborhoods. This issue is also a factor that affects the next priority area of obesity and healthy lifestyles.

### *Key Observations*

- Community violence (assault, gangs, robberies) was ranked as a priority 112.5% more frequently in Trenton than the rest of the County (39.1% compared to 18.4%, respectively).
- Over 58% feel that their community is not a good place to raise a family (can also relate to Obesity & Healthy Lifestyles, with “good place” being a subjective term). This was reported as an issue **212.3% more frequently than in the rest of Mercer County.**
- Only 39.7% of Trenton residents feel that they can count on their neighbors in times of need.

## **Priority Area 3: Obesity & Healthy Lifestyles**

Obesity rates in Trenton were reported in the 2013 CHNA to be well above national or state levels, with adults at 39% obese and 49% of three to five year old children overweight or obese (compared to 21% nationally). Access to healthy foods and safe recreational space continues to be a concern for Trenton residents and plays a significant role in these statistics. Progress is being made through the establishment of Healthy Corner Stores, urban gardens, a new farmers market, and educational programs through schools and faith-based organizations including Delivery System Reform Incentive Payment (DSRIP) programs provided through Capital Health and St. Francis Medical Center. But many neighborhoods are still under-served and it will take a consistent effort over to time to attain healthy outcomes.

### *Key Observations*

- Over 55% of Trenton residents think it is difficult to live a healthy lifestyle in their communities.
  - 23.7% believe it is difficult to get to parks in the communities (99.2% greater than reported in County)
  - 47.7% feel they cannot go for a walk easily in their communities (125% greater than County)
  - 50.2% feel that they cannot ride a bike in their neighborhood (70.7% higher than County)
- Over 58% feel that their community is not a good place to raise a family (can also relate to Safety and Crime as “good place” is a subjective term).
- There is a 141.6% difference in residents’ perception around availability of fresh fruits and vegetables. 83.4% of Mercer County residents feel it is easy to find fresh produce in their community, while less than 60% of Trenton residents can say that.

#### **Priority Area 4: Substance Abuse & Behavioral Health**

While substance abuse and mental health are concerns across the County, they are manifest differently in the Trenton zip codes. In Trenton, the need for screening and educational services sometimes ranked lower than it did for the County as a whole, although concerns about substance abuse ranked at the top of Trenton residents' concerns.

##### *Key Observations*

- Alcohol and substance abuse ranked as the highest priority of concern in Trenton.
- According to the County survey, Trenton residents believe that the second and third highest issue areas that deserve a high amount of future resources are mental health screening (depression, suicide) and counseling for youth (75.4%), and school-based prevention and counseling on mental health and substance abuse (74.4%).
- Mental health screening (depression, suicide) and other services that provide mental health/substance education and services were viewed as low priority most frequently in zip code 08609 ("low priority" answer selected more frequently than the city average in every category). This zip code also has a lower AGI (adjusted gross income) than the rest of the City (\$27,311 reported in 2012), which could indicate financial stress limiting individuals to think about the impact of "unseen" issues such as depression.

#### **Priority Area 5: Chronic Disease: Diabetes, Hypertension, and Cancer**

The 2013 CHNA found rates of diabetes to be exceedingly high (16% among adults who are diagnosed, compared with 9% for Mercer County as a whole). Trenton residents also have not prioritized screening and preventive care for cardiovascular health or cancer due to concerns such as lack of insurance, the cost of co-pays, or even fear of the tests. The need to education and programs for self-management is clear.

##### *Key Observations*

- Need for chronic disease education apparent through survey responses- what the diseases are and the **importance** of preventing, treating, and/or managing them.
- According to the County survey, Trenton residents most frequently (75.5%) reported that they believe investing future resources (staff time, organizational funding, etc.) in developing programs that help people **prevent** chronic disease (e.g., diabetes and heart disease) is of high importance.
- Additionally, over 72% of Trenton respondents felt that investing future resources in programs that helped people **manage** their chronic diseases is of high priority.

#### **Other Concerns**

There were a number of other issues that emerged, either through a significantly higher level of survey response within the Trenton zip codes or through direct input in our community forums. Many of these relate to the income and educational disparities that have been noted relative to the Trenton community versus the County as a whole and once again point to the social determinants that underlie the health concerns and outcomes for the city.

### *Key Observations*

- There was a 143.2% difference in the ranking of teen pregnancy as a health impact between Trenton and Mercer County (10.7% and 4.4%, respectively).
- Lack of transportation makes a much larger impact in Trenton than in the rest of Mercer County as a whole. There was a 94.4% difference reported in the ranking of lack of transportation as a health impact between Trenton and Mercer County (24.3% and 12.5%, respectively).
- Miscellaneous concerns (lump of small percentages) include the following:
  - Medical records not being kept confidential
  - Difficulty finding employment
  - City planning
  - Access to medication
  - Issues related to doctor's visits
  - Housing
  - Food insecurity
  - Bed Bugs
  - Job insecurity

### **Summary/Conclusions and Next Steps**

As noted at the outset and illustrated through the findings reported here, Trenton faces significant hurdles in seeking to build a culture of health. The challenges are complex and interwoven, including issues pertaining to the healthcare system as well as issues that go far beyond. To achieve success, though, a collaborative, long-term approach that considers these complexities is needed.

### **Appendices**

- Appendix A: Mercer County Health Assessment Subgroup Analyses
- Appendix B: Mercer County Health Assessment Subgroup Analyses - Trenton
- Appendix C: Comparative Analyses of Trenton vs. County Responses

### **Other Data Sources:**

08609 City Data link: <http://www.city-data.com/zips/08609.html>

08611 City Data link: <http://www.city-data.com/zips/08611.html>

08618 City Data link: <http://www.city-data.com/zips/08618.html>

08629 City Data link: <http://www.city-data.com/zips/08629.html>

08638 City Data link: <http://www.city-data.com/zips/08638.html>

## Appendix A

### Mercer County, NJ 2015 Community Health Assessment Appendix of Survey Sub-Group Findings – Age and Race/Ethnicity

#### BACKGROUND AND METHODS

The 2015 Mercer County community health assessment builds off of a previous comprehensive assessment study in 2012 and aims to update data and delve deeper into areas previously identified as priorities in the community (healthy eating and active living; chronic disease; transportation and the built environment; mental health and substance abuse).

Social, economic, and health data were pulled from a multitude of secondary sources. In order to gather quantitative data that were not provided by secondary sources and to understand public perceptions around health issues, a community health survey was administered online and in hard-copy format to residents within Mercer County via libraries, community events, churches, and community networks. The survey explored key health concerns of community residents as well as their primary priorities for services and programming. A total of 1,927 respondents who live and/or work in Mercer County completed the survey. The survey findings can be found in the 2015 Mercer County Community Health Assessment Report. Below is an appendix that provides sub-group analyses by age and race/ethnicity. Total respondents include the entire survey sample, which includes those did not answer the age or race/ethnicity questions.

#### SUB-GROUP ANALYSES BY AGE

	Total Respondents (N=1,927)	18-39 years old (N=336)	40-64 years old (N=971)	65+ years old (N=363)
<b>Please select the TOP 3 HEALTH ISSUES that have the biggest impact on the Mercer County community in which you live or work.</b>				
Access to health care (transportation, health insurance, cost, etc.)	43.0%	37.7%	42.3%	50.3%
Asthma	8.2%	9.0%	8.5%	4.6%
Chronic disease (diabetes, heart disease, cancer)	43.1%	39.2%	44.0%	45.1%
Overweight or obesity	36.3%	38.0%	38.2%	31.2%
Mental health issues	31.6%	33.1%	36.2%	19.7%
Alcohol or substance use or abuse (e.g., marijuana, heroin, opiates, prescription drug misuse)	38.4%	48.5%	40.9%	22.5%
Smoking	12.5%	16.0%	11.0%	12.4%
Interpersonal violence (domestic violence, sexual violence, bullying, cyber-bullying, etc.)	11.2%	13.9%	10.1%	12.4%
Community violence (assault, gangs, robbery)	18.4%	21.1%	17.6%	17.3%
Oral/dental health	6.5%	5.1%	6.3%	7.5%
Health concerns related to aging (Alzheimer's, arthritis, dementia, falls, etc.)	26.8%	16.9%	25.8%	45.1%
Teen pregnancy	4.4%	6.9%	3.6%	2.0%
Infectious/contagious disease (pneumonia, flu, tuberculosis, etc.)	12.4%	17.2%	11.9%	11.3%
Other	5.4%	3.9%	5.7%	5.2%

	Total Respondents (N=1,927)	18-39 years old (N=336)	40-64 years old (N=971)	65+ years old (N=363)
<b>Have any of these issues made it difficult for you or a member of your immediate family to get needed health services within the last two years?</b>				
Lack of transportation	12.5%	11.2%	10.6%	16.8%
Have no regular source of health care	7.9%	10.6%	7.7%	5.7%
Cost of care	27.4%	36.0%	27.0%	19.4%
Lack of specialists	8.6%	9.6%	8.1%	7.3%
Lack of evening or weekend services	22.8%	28.3%	24.4%	14.9%
Insurance problems/lack of coverage	20.8%	24.2%	22.8%	13.7%
Language problems/could not communicate with health provider or office staff	3.6%	7.1%	3.0%	2.5%
Services not accessible for people with disabilities	3.1%	1.6%	3.4%	3.5%
Unfriendly provider or office staff	12.1%	14.3%	12.9%	9.5%
Felt discriminated against	3.3%	5.9%	3.4%	1.3%
Afraid to get care	4.7%	9.3%	4.3%	1.6%
Don't know where to go for medical services	6.2%	9.0%	5.6%	5.7%
Don't know where to go for dental services	5.8%	8.1%	4.8%	6.3%
Don't know where to go for mental health services	7.6%	8.7%	8.3%	4.4%
Don't understand the health information received	4.2%	5.6%	3.7%	4.1%
No provider available near me	5.2%	5.3%	5.9%	4.4%
Long wait for an appointment	23.3%	27.0%	24.8%	16.2%
Office not accepting new patients	11.4%	9.6%	12.1%	11.1%
Health information is not kept confidential	1.8%	0.6%	2.3%	1.6%
I have never experienced any difficulty in getting care	40.9%	30.1%	40.6%	51.1%
<b>Do you agree or disagree with the following statements about your community?</b>				
It's easy to get to parks in my community.				
Agree	88.1%	89.0%	89.3%	87.3%
Disagree	11.9%	11.0%	10.7%	12.7%
It's easy to find out about the services located in my community.				
Agree	66.9%	64.0%	65.8%	75.1%
Disagree	33.1%	36.0%	34.2%	24.9%
It's easy to go for a walk in my community.				
Agree	78.8%	75.4%	80.5%	80.9%
Disagree	21.2%	24.6%	19.5%	19.1%
It's easy to ride a bike in my community.				
Agree	70.6%	69.1%	71.0%	73.0%
Disagree	29.4%	30.9%	29.0%	27.0%
It's easy to take a bus in my community.				
Agree	52.3%	57.9%	52.3%	47.2%
Disagree	47.7%	42.1%	47.7%	52.8%
My community is a good place to raise a family.				
Agree	81.3%	72.3%	84.8%	82.5%
Disagree	18.7%	27.7%	15.2%	17.5%
I can count on my neighbors in a time of need.				
Agree	77.4%	65.0%	80.5%	82.4%
Disagree	22.6%	35.0%	19.5%	17.6%

	Total Respondents (N=1,927)	18-39 years old (N=336)	40-64 years old (N=971)	65+ years old (N=363)
It's easy to find fresh fruits and vegetables in my community.				
Agree	83.4%	79.7%	83.9%	89.0%
Disagree	16.6%	20.3%	16.1%	11.0%
It's easy to find affordable housing in my community.				
Agree	33.6%	36.8%	30.5%	38.3%
Disagree	66.4%	63.2%	69.5%	61.7%
It's easy to find employment or job opportunities in my community.				
Agree	37.1%	42.1%	35.6%	31.1%
Disagree	62.9%	57.9%	64.4%	68.9%
It's easy to live a healthy lifestyle in my community.				
Agree	76.0%	64.9%	78.1%	83.8%
Disagree	24.0%	35.1%	21.9%	16.2%
It's easy for people with disabilities to access services in my community.				
Agree	55.7%	50.0%	56.5%	60.3%
Disagree	44.3%	50.0%	43.5%	39.7%
It's easy to understand the health information provided in my community.				
Agree	68.1%	66.1%	69.0%	71.7%
Disagree	31.9%	33.9%	31.0%	28.3%
<b>When deciding how future resources - such as staff time and organizational funding - should be spent, what priority do you think should be given to the following within each issue area?</b>				
<i>Healthy Eating and Active Living</i>				
Transportation options for seniors and people who are disabled to increase access for physical activity				
Low Priority	8.1%	8.8%	8.1%	6.5%
Medium Priority	35.2%	43.5%	34.1%	31.2%
High Priority	56.7%	47.7%	57.8%	62.3%
Policy changes that make it easier to walk or bike in your community				
Low Priority	29.5%	25.7%	29.6%	33.4%
Medium Priority	39.2%	42.6%	39.1%	37.3%
High Priority	31.3%	31.7%	31.4%	29.2%
Policy changes to improve access to healthy foods and beverages in the community and in schools				
Low Priority	12.5%	6.9%	12.9%	16.1%
Medium Priority	33.9%	30.7%	33.7%	38.6%
High Priority	53.7%	62.3%	53.4%	45.3%
Programs to educate people about nutrition				
Low Priority	13.7%	15.4%	12.1%	16.5%
Medium Priority	41.4%	34.9%	42.5%	46.2%
High Priority	44.9%	49.7%	45.4%	37.2%
School-based programs that promote physical activity and healthy eating				
Low Priority	7.5%	3.6%	6.7%	12.2%
Medium Priority	23.6%	20.4%	23.8%	25.1%
High Priority	68.9%	76.0%	69.5%	62.7%
Policy changes to increase the number of employers who have wellness programs at work				
Low Priority	15.7%	11.9%	15.8%	19.3%
Medium Priority	38.6%	40.2%	38.1%	38.9%
High Priority	45.7%	47.9%	46.1%	41.7%

	Total Respondents (N=1,927)	18-39 years old (N=336)	40-64 years old (N=971)	65+ years old (N=363)
<i>Chronic Disease</i>				
Programs that help people prevent chronic disease (e.g., diabetes, heart disease)				
Low Priority	4.4%	3.3%	3.9%	6.1%
Medium Priority	23.9%	25.8%	22.9%	23.9%
High Priority	71.6%	70.9%	73.2%	69.9%
Programs that help people manage their chronic disease (e.g., diabetes, heart disease)				
Low Priority	4.4%	3.9%	3.5%	6.3%
Medium Priority	29.2%	34.4%	29.5%	23.8%
High Priority	66.4%	61.6%	67.0%	69.9%
Increase the awareness of health care providers about social services in the community				
Low Priority	7.9%	8.5%	7.9%	7.1%
Medium Priority	36.3%	36.1%	37.5%	33.2%
High Priority	55.8%	55.5%	54.6%	59.7%
Increase education and support to chronic disease patients about the importance of taking their medicine correctly				
Low Priority	8.3%	6.6%	8.5%	9.7%
Medium Priority	34.6%	37.7%	35.9%	27.4%
High Priority	57.1%	55.7%	55.7%	62.9%
<i>Mental Health and Substance Abuse</i>				
Mental health screening (depression, suicide) and counseling for youth				
Low Priority	5.2%	4.0%	3.8%	9.9%
Medium Priority	22.1%	22.8%	21.3%	24.6%
High Priority	72.7%	73.3%	75.0%	65.5%
Programs to educate community members (e.g., parents, educators, providers) about mental illness/help reduce stigma				
Low Priority	6.9%	5.8%	5.3%	11.9%
Medium Priority	30.5%	30.4%	31.7%	28.0%
High Priority	62.6%	63.8%	63.1%	60.2%
Having mental health and substance abuse services more integrated into primary care				
Low Priority	6.8%	4.3%	5.4%	12.2%
Medium Priority	24.3%	24.9%	24.2%	25.1%
High Priority	68.9%	70.8%	70.4%	62.7%
School-based prevention and counseling on mental health and substance abuse				
Low Priority	5.6%	4.6%	4.0%	10.3%
Medium Priority	22.6%	20.7%	22.9%	23.9%
High Priority	71.9%	74.7%	73.2%	65.9%
Increase the number of mental health professionals in areas of highest need				
Low Priority	6.6%	6.1%	4.8%	11.2%
Medium Priority	26.8%	26.7%	27.2%	25.5%
High Priority	66.6%	67.2%	68.0%	63.2%
<i>Transportation and Built Environment</i>				
Policy changes to increase the existing miles of shared roads, safe walk ways, and bike paths				
Low Priority	17.1%	16.5%	15.8%	22.0%
Medium Priority	44.4%	43.3%	46.7%	40.9%
High Priority	38.5%	40.2%	37.6%	37.2%

	<b>Total Respondents (N=1,927)</b>	<b>18-39 years old (N=336)</b>	<b>40-64 years old (N=971)</b>	<b>65+ years old (N=363)</b>
<b>Access to affordable public transportation</b>				
Low Priority	11.5%	12.5%	12.0%	9.4%
Medium Priority	35.8%	35.4%	38.3%	30.7%
High Priority	52.7%	52.1%	49.7%	59.9%
<b>Access to public transportation across communities to and from parks</b>				
Low Priority	19.3%	16.9%	21.0%	17.7%
Medium Priority	40.6%	38.5%	43.2%	37.1%
High Priority	40.1%	44.6%	35.8%	45.2%
<b>Do you have health care insurance?</b>				
No	3.3%	5.8%	2.9%	2.0%
Yes (includes private insurance, Medicare, Medicaid, and other public insurance)	96.7%	94.2%	97.1%	98.0%



### SUB-GROUP ANALYSES BY RACE/ETHNICITY

	Total Respondents (N=1,927)	African American, non-Hispanic (N=244)	Caucasian, non-Hispanic (N=1,138)	Hispanic/Latino(a) (N=124)	Other (N=161)
<b>Please select the TOP 3 HEALTH ISSUES that have the biggest impact on the Mercer County community in which you live or work.</b>					
Access to health care (transportation, health insurance, cost, etc.)	43.0%	41.0%	42.1%	56.6%	42.9%
Asthma	8.2%	11.1%	6.1%	11.5%	12.3%
Chronic disease (diabetes, heart disease, cancer)	43.1%	41.5%	43.7%	34.4%	47.4%
Overweight or obesity	36.3%	36.8%	37.1%	38.5%	32.5%
Mental health issues	31.6%	33.8%	32.8%	27.0%	23.4%
Alcohol or substance use or abuse (e.g., marijuana, heroin, opiates, prescription drug misuse)	38.4%	46.2%	37.8%	46.7%	28.6%
Smoking	12.5%	14.5%	12.0%	10.7%	13.0%
Interpersonal violence (domestic violence, sexual violence, bullying, cyber-bullying, etc.)	11.2%	14.5%	10.4%	14.8%	12.3%
Community violence (assault, gangs, robbery)	18.4%	35.5%	14.6%	29.5%	12.3%
Oral/dental health	6.5%	6.4%	5.8%	9.0%	9.1%
Health concerns related to aging (Alzheimer's, arthritis, dementia, falls, etc.)	26.8%	14.1%	31.6%	18.0%	27.9%
Teen pregnancy	4.4%	10.3%	2.3%	9.8%	3.9%
Infectious/contagious disease (pneumonia, flu, tuberculosis, etc.)	12.4%	5.6%	14.1%	9.8%	16.2%
Other	5.4%	3.0%	5.9%	1.6%	5.2%
<b>Have any of these issues made it difficult for you or a member of your immediate family to get needed health services within the last two years?</b>					
Lack of transportation	12.5%	24.1%	8.1%	27.1%	13.3%
Have no regular source of health care	7.9%	13.6%	5.2%	24.6%	6.0%
Cost of care	27.4%	30.9%	23.2%	47.5%	34.7%
Lack of specialists	8.6%	9.1%	7.7%	13.6%	6.7%
Lack of evening or weekend services	22.8%	19.5%	22.6%	28.0%	30.7%
Insurance problems/lack of coverage	20.8%	21.4%	18.7%	35.6%	27.3%
Language problems/could not communicate with health provider or office staff	3.6%	5.0%	1.7%	22.0%	2.7%
Services not accessible for people with disabilities	3.1%	5.0%	2.2%	2.5%	5.3%
Unfriendly provider or office staff	12.1%	10.0%	12.1%	15.3%	15.3%
Felt discriminated against	3.3%	6.8%	1.7%	13.6%	4.0%
Afraid to get care	4.7%	8.2%	3.5%	13.6%	4.0%
Don't know where to go for medical services	6.2%	12.7%	3.9%	13.6%	10.0%
Don't know where to go for dental services	5.8%	14.5%	2.9%	12.7%	8.0%
Don't know where to go for mental health services	7.6%	11.4%	7.0%	7.6%	7.3%

	Total Respondents (N=1,927)	African American, non-Hispanic (N=244)	Caucasian, non-Hispanic (N=1,138)	Hispanic/Latino(a) (N=124)	Other (N=161)
Don't understand the health information received	4.2%	7.7%	2.2%	9.3%	9.3%
No provider available near me	5.2%	8.2%	4.5%	8.5%	6.7%
Long wait for an appointment	23.3%	21.8%	22.1%	37.3%	23.3%
Office not accepting new patients	11.4%	12.3%	11.2%	15.3%	8.0%
Health information is not kept confidential	1.8%	2.7%	0.9%	5.1%	3.3%
I have never experienced any difficulty in getting care	40.9%	37.3%	44.0%	22.0%	34.7%
<b>Do you agree or disagree with the following statements about your community?</b>					
It's easy to get to parks in my community.					
Agree	88.1%	82.0%	92.0%	72.6%	86.1%
Disagree	11.9%	18.0%	8.0%	27.4%	13.9%
It's easy to find out about the services located in my community.					
Agree	66.9%	56.6%	72.7%	38.8%	66.4%
Disagree	33.1%	43.4%	27.3%	61.2%	33.6%
It's easy to go for a walk in my community.					
Agree	78.8%	68.9%	84.7%	53.5%	80.5%
Disagree	21.2%	31.1%	15.3%	46.5%	19.5%
It's easy to ride a bike in my community.					
Agree	70.6%	67.6%	73.9%	50.5%	72.9%
Disagree	29.4%	32.4%	26.1%	49.5%	27.1%
It's easy to take a bus in my community.					
Agree	52.3%	74.2%	46.4%	62.1%	50.4%
Disagree	47.7%	25.8%	53.6%	37.9%	49.6%
My community is a good place to raise a family.					
Agree	81.3%	57.4%	88.9%	49.1%	88.1%
Disagree	18.7%	42.6%	11.1%	50.9%	11.9%
I can count on my neighbors in a time of need.					
Agree	77.4%	59.9%	84.2%	47.5%	77.1%
Disagree	22.6%	40.1%	15.8%	52.5%	22.9%
It's easy to find fresh fruits and vegetables in my community.					
Agree	83.4%	63.8%	89.5%	65.2%	86.9%
Disagree	16.6%	36.2%	10.5%	34.8%	13.1%
It's easy to find affordable housing in my community.					
Agree	33.6%	29.5%	34.4%	27.1%	37.5%
Disagree	66.4%	70.5%	65.6%	72.9%	62.5%
It's easy to find employment or job opportunities in my community.					
Agree	37.1%	29.5%	39.4%	29.1%	37.0%
Disagree	62.9%	70.5%	60.6%	70.9%	63.0%
It's easy to live a healthy lifestyle in my community.					
Agree	76.0%	53.5%	82.9%	52.8%	79.9%
Disagree	24.0%	46.5%	17.1%	47.2%	20.1%
It's easy for people with disabilities to access services in my community.					
Agree	55.7%	50.3%	58.8%	37.2%	64.9%

	Total Respondents (N=1,927)	African American, non-Hispanic (N=244)	Caucasian, non-Hispanic (N=1,138)	Hispanic /Latino(a) (N=124)	Other (N=161)
Disagree	44.3%	49.7%	41.2%	62.8%	35.1%
It's easy to understand the health information provided in my community.					
Agree	68.1%	56.4%	74.2%	44.4%	71.0%
Disagree	31.9%	43.6%	25.8%	55.6%	29.0%
<b>When deciding how future resources - such as staff time and organizational funding - should be spent, what priority do you think should be given to the following within each issue area?</b>					
<i>Healthy Eating and Active Living</i>					
Transportation options for seniors and people who are disabled to increase access for physical activity					
Low Priority	8.1%	7.8%	7.6%	5.3%	11.6%
Medium Priority	35.2%	24.2%	37.2%	39.8%	35.5%
High Priority	56.7%	68.0%	55.3%	54.9%	52.9%
Policy changes that make it easier to walk or bike in your community					
Low Priority	29.5%	26.5%	31.8%	19.8%	20.9%
Medium Priority	39.2%	40.5%	39.3%	36.2%	45.8%
High Priority	31.3%	33.0%	29.0%	44.0%	33.3%
Policy changes to improve access to healthy foods and beverages in the community and in schools					
Low Priority	12.5%	9.3%	13.5%	6.0%	9.7%
Medium Priority	33.9%	25.7%	37.1%	23.3%	29.2%
High Priority	53.7%	65.0%	49.5%	70.7%	61.0%
Programs to educate people about nutrition					
Low Priority	13.7%	10.0%	14.7%	10.3%	13.1%
Medium Priority	41.4%	32.9%	46.0%	29.3%	29.4%
High Priority	44.9%	57.1%	39.3%	60.3%	57.5%
School-based programs that promote physical activity and healthy eating					
Low Priority	7.5%	7.5%	7.1%	8.5%	5.9%
Medium Priority	23.6%	21.1%	24.0%	18.8%	21.6%
High Priority	68.9%	71.4%	68.9%	72.6%	72.5%
Policy changes to increase the number of employers who have wellness programs at work					
Low Priority	15.7%	12.3%	16.6%	10.3%	15.5%
Medium Priority	38.6%	35.4%	40.2%	31.9%	35.8%
High Priority	45.7%	52.4%	43.2%	57.8%	48.6%
<i>Chronic Disease</i>					
Programs that help people prevent chronic disease (e.g., diabetes, heart disease)					
Low Priority	4.4%	4.3%	4.0%	4.3%	4.5%
Medium Priority	23.9%	13.7%	26.8%	17.2%	20.1%
High Priority	71.6%	82.0%	69.2%	78.4%	75.3%
Programs that help people manage their chronic disease (e.g., diabetes, heart disease)					
Low Priority	4.4%	3.4%	4.1%	3.4%	4.5%
Medium Priority	29.2%	16.8%	31.9%	26.7%	29.2%
High Priority	66.4%	79.8%	64.0%	69.8%	66.2%
Increase the awareness of health care providers about social services in the community					
Low Priority	7.9%	4.3%	8.2%	5.2%	9.8%
Medium Priority	36.3%	19.1%	40.7%	27.0%	33.3%
High Priority	55.8%	76.6%	51.1%	67.8%	56.9%

	<b>Total Respondents (N=1,927)</b>	<b>African American, non-Hispanic (N=244)</b>	<b>Caucasian, non-Hispanic (N=1,138)</b>	<b>Hispanic/Latino(a) (N=124)</b>	<b>Other (N=161)</b>
<b>Increase education and support to chronic disease patients about the importance of taking their medicine correctly</b>					
Low Priority	8.3%	3.8%	9.1%	6.1%	9.7%
Medium Priority	34.6%	19.0%	39.0%	24.3%	30.5%
High Priority	57.1%	77.3%	52.0%	69.6%	59.7%
<b><i>Mental Health and Substance Abuse</i></b>					
<b>Mental health screening (depression, suicide) and counseling for youth</b>					
Low Priority	5.2%	5.1%	4.0%	3.5%	13.0%
Medium Priority	22.1%	12.9%	23.1%	22.6%	29.2%
High Priority	72.7%	82.0%	72.8%	73.9%	57.8%
<b>Programs to educate community members (e.g., parents, educators, providers) about mental illness/help reduce stigma</b>					
Low Priority	6.9%	5.1%	6.8%	3.4%	9.9%
Medium Priority	30.5%	20.1%	31.9%	25.9%	38.2%
High Priority	62.6%	74.8%	61.3%	70.7%	52.0%
<b>Having mental health and substance abuse services more integrated into primary care</b>					
Low Priority	6.8%	5.6%	6.0%	5.2%	13.2%
Medium Priority	24.3%	15.9%	25.3%	27.0%	28.9%
High Priority	68.9%	78.5%	68.8%	67.8%	57.9%
<b>School-based prevention and counseling on mental health and substance abuse</b>					
Low Priority	5.6%	4.7%	4.9%	2.6%	11.1%
Medium Priority	22.6%	16.0%	24.2%	20.9%	20.9%
High Priority	71.9%	79.2%	70.9%	76.5%	68.0%
<b>Increase the number of mental health professionals in areas of highest need</b>					
Low Priority	6.6%	4.7%	6.0%	2.6%	14.6%
Medium Priority	26.8%	17.0%	28.3%	23.7%	28.5%
High Priority	66.6%	78.3%	65.7%	73.7%	57.0%
<b><i>Transportation and Built Environment</i></b>					
<b>Policy changes to increase the existing miles of shared roads, safe walk ways, and bike paths</b>					
Low Priority	17.1%	15.2%	17.5%	14.2%	18.5%
Medium Priority	44.4%	39.8%	46.7%	37.2%	41.7%
High Priority	38.5%	45.0%	35.8%	48.7%	39.7%
<b>Access to affordable public transportation</b>					
Low Priority	11.5%	5.6%	12.5%	11.4%	12.1%
Medium Priority	35.8%	29.4%	37.9%	27.2%	38.9%
High Priority	52.7%	65.0%	49.6%	61.4%	49.0%
<b>Access to public transportation across communities to and from parks</b>					
Low Priority	19.3%	14.2%	20.9%	15.8%	15.1%
Medium Priority	40.6%	31.6%	44.6%	21.9%	40.8%
High Priority	40.1%	54.2%	34.4%	62.3%	44.1%
<b>Do you have health care insurance?</b>					
No	3.3%	3.2%	1.6%	19.1%	4.4%
Yes (includes private insurance, Medicare, Medicaid, and other public insurance)	96.7%	96.8%	98.4%	80.9%	95.6%

**Appendix B**

**Mercer County, NJ  
2015 Community Health Assessment  
Appendix of Survey Sub-Group Findings – Trenton Health Team Focus Area Zip Codes**

**BACKGROUND AND METHODS**

The 2015 Mercer County community health assessment builds off of a previous comprehensive assessment study in 2012 and aims to update data and delve deeper into areas previously identified as priorities in the community (healthy eating and active living; chronic disease; transportation and the built environment; mental health and substance abuse).

Social, economic, and health data were pulled from a multitude of secondary sources. In order to gather quantitative data that were not provided by secondary sources and to understand public perceptions around health issues, a community health survey was administered online and in hard-copy format to residents within Mercer County via libraries, community events, churches, and community networks. The survey explored key health concerns of community residents as well as their primary priorities for services and programming. A total of 1,927 respondents who live and/or work in Mercer County completed the survey. The survey findings can be found in the 2015 Mercer County Community Health Assessment Report. Below is an appendix that provides sub-group analyses for the Trenton Health Team focus area. The Trenton Health Team focus area includes six Trenton zip codes: 08608, 08609, 08611, 08618, 08629, and 08638. Sub-group analyses were conducted for five of the six zip codes. Sub-group results are not presented for 08608 due to an insufficient sample size (N=6).

**TRENTON HEALTH TEAM SUB-GROUP ANALYSES BY FOCUS AREA ZIP CODES**

	<b>Trenton Health Team Focus Area (N=370)</b>	<b>08609 (N=35)</b>	<b>08611 (N=77)</b>	<b>08618 (N=131)</b>	<b>08629 (N=48)</b>	<b>08638 (N=73)</b>
<b>Please select the TOP 3 HEALTH ISSUES that have the biggest impact on the Mercer County community in which you live or work.</b>						
Access to health care (transportation, health insurance, cost, etc.)	42.7%	45.5%	41.6%	44.2%	46.8%	39.4%
Asthma	11.0%	12.1%	9.1%	13.2%	14.9%	7.0%
Chronic disease (diabetes, heart disease, cancer)	39.9%	42.4%	40.3%	36.4%	44.7%	45.1%
Overweight or obesity	32.5%	36.4%	37.7%	34.1%	29.8%	26.8%
Mental health issues	28.1%	24.2%	24.7%	27.1%	40.4%	25.4%
Alcohol or substance use or abuse (e.g., marijuana, heroin, opiates, prescription drug misuse)	47.4%	51.5%	53.2%	45.7%	59.6%	33.8%
Smoking	12.7%	24.2%	18.2%	10.9%	10.6%	5.6%
Interpersonal violence (domestic violence, sexual violence, bullying, cyber-bullying, etc.)	15.4%	15.2%	22.1%	15.5%	23.4%	2.8%
Community violence (assault, gangs, robbery)	39.1%	39.4%	46.8%	38.0%	31.9%	36.6%
Oral/dental health	8.3%	9.1%	13.0%	3.9%	10.6%	9.9%
Health concerns related to aging (Alzheimer's, arthritis, dementia, falls, etc.)	13.5%	12.1%	15.6%	10.9%	8.5%	21.1%

	<b>Trenton Health Team Focus Area (N=370)</b>	<b>08609 (N=35)</b>	<b>08611 (N=77)</b>	<b>08618 (N=131)</b>	<b>08629 (N=48)</b>	<b>08638 (N=73)</b>
Teen pregnancy	10.7%	15.2%	18.2%	7.0%	8.5%	8.5%
Infectious/contagious disease (pneumonia, flu, tuberculosis, etc.)	8.8%	9.1%	9.1%	4.7%	8.5%	15.5%
Other	3.0%	3.0%	3.9%	4.7%	0.0%	1.4%
<b>Have any of these issues made it difficult for you or a member of your immediate family to get needed health services within the last two years?</b>						
Lack of transportation	24.3%	46.9%	25.4%	16.7%	34.9%	18.6%
Have no regular source of health care	14.9%	21.9%	21.1%	6.7%	30.2%	11.4%
Cost of care	34.8%	40.6%	36.6%	34.2%	51.2%	22.9%
Lack of specialists	12.6%	18.8%	18.3%	9.2%	14.0%	10.0%
Lack of evening or weekend services	23.1%	25.0%	19.7%	21.7%	23.3%	25.7%
Insurance problems/lack of coverage	24.6%	25.0%	28.2%	20.8%	39.5%	18.6%
Language problems/could not communicate with health provider or office staff	7.9%	9.4%	14.1%	4.2%	18.6%	1.4%
Services not accessible for people with disabilities	5.6%	12.5%	5.6%	5.8%	9.3%	0.0%
Unfriendly provider or office staff	14.9%	34.4%	7.0%	15.0%	9.3%	15.7%
Felt discriminated against	7.0%	12.5%	7.0%	6.7%	7.0%	5.7%
Afraid to get care	6.7%	12.5%	8.5%	5.0%	9.3%	4.3%
Don't know where to go for medical services	10.2%	9.4%	12.7%	5.8%	16.3%	10.0%
Don't know where to go for dental services	11.4%	9.4%	11.3%	7.5%	20.9%	11.4%
Don't know where to go for mental health services	9.9%	6.3%	9.9%	9.2%	18.6%	7.1%
Don't understand the health information received	8.2%	6.3%	11.3%	5.0%	20.9%	1.4%
No provider available near me	7.3%	15.6%	9.9%	5.8%	7.0%	2.9%
Long wait for an appointment	28.9%	31.3%	31.0%	23.3%	46.5%	27.1%
Office not accepting new patients	16.1%	18.8%	15.5%	14.2%	20.9%	15.7%
Health information is not kept confidential	2.9%	9.4%	4.2%	0.8%	4.7%	1.4%
I have never experienced any difficulty in getting care	33.0%	25.0%	33.8%	38.3%	23.3%	32.9%
<b>Do you agree or disagree with the following statements about your community?</b>						
It's easy to get to parks in my community.						
Agree	76.3%	51.7%	75.0%	75.7%	79.1%	87.5%
Disagree	23.7%	48.3%	25.0%	24.3%	20.9%	12.5%
It's easy to find out about the services located in my community.						
Agree	46.4%	32.1%	49.2%	51.0%	37.5%	46.8%
Disagree	53.6%	67.9%	50.8%	49.0%	62.5%	53.2%
It's easy to go for a walk in my community.						
Agree	52.3%	30.3%	44.3%	54.8%	40.5%	75.0%
Disagree	47.7%	69.7%	55.7%	45.2%	59.5%	25.0%

	<b>Trenton Health Team Focus Area (N=370)</b>	<b>08609 (N=35)</b>	<b>08611 (N=77)</b>	<b>08618 (N=131)</b>	<b>08629 (N=48)</b>	<b>08638 (N=73)</b>
<b>It's easy to ride a bike in my community.</b>						
Agree	49.8%	36.7%	43.5%	50.4%	43.2%	66.1%
Disagree	50.2%	63.3%	56.5%	49.6%	56.8%	33.9%
<b>It's easy to take a bus in my community.</b>						
Agree	72.8%	70.0%	78.0%	72.7%	75.6%	67.9%
Disagree	27.2%	30.0%	22.0%	27.3%	24.4%	32.1%
<b>My community is a good place to raise a family.</b>						
Agree	41.6%	18.5%	27.3%	42.3%	30.0%	76.3%
Disagree	58.4%	81.5%	72.7%	57.7%	70.0%	23.7%
<b>I can count on my neighbors in a time of need.</b>						
Agree	60.3%	53.6%	42.2%	67.0%	47.2%	80.0%
Disagree	39.7%	46.4%	57.8%	33.0%	52.8%	20.0%
<b>It's easy to find fresh fruits and vegetables in my community.</b>						
Agree	59.9%	48.4%	49.2%	60.9%	57.5%	77.6%
Disagree	40.1%	51.6%	50.8%	39.1%	42.5%	22.4%
<b>It's easy to find affordable housing in my community.</b>						
Agree	30.3%	23.1%	29.7%	26.0%	30.0%	40.0%
Disagree	69.7%	76.9%	70.3%	74.0%	70.0%	60.0%
<b>It's easy to find employment or job opportunities in my community.</b>						
Agree	22.0%	7.4%	27.3%	22.3%	15.8%	26.8%
Disagree	78.0%	92.6%	72.7%	77.7%	84.2%	73.2%
<b>It's easy to live a healthy lifestyle in my community.</b>						
Agree	44.9%	48.1%	36.8%	43.2%	30.8%	64.5%
Disagree	55.1%	51.9%	63.2%	56.8%	69.2%	35.5%
<b>It's easy for people with disabilities to access services in my community.</b>						
Agree	38.6%	34.8%	40.4%	36.3%	24.2%	52.3%
Disagree	61.4%	65.2%	59.6%	63.7%	75.8%	47.7%
<b>It's easy to understand the health information provided in my community.</b>						
Agree	46.9%	51.9%	52.5%	44.7%	40.5%	48.1%
Disagree	53.1%	48.1%	47.5%	55.3%	59.5%	51.9%
<b>When deciding how future resources - such as staff time and organizational funding - should be spent, what priority do you think should be given to the following within each issue area?</b>						
<i>Healthy Eating and Active Living</i>						
<b>Transportation options for seniors and people who are disabled to increase access for physical activity</b>						
Low Priority	7.1%	0.0%	10.8%	6.8%	6.8%	6.2%
Medium Priority	33.1%	41.4%	40.0%	27.4%	22.7%	40.0%
High Priority	59.8%	58.6%	49.2%	65.8%	70.5%	53.8%
<b>Policy changes that make it easier to walk or bike in your community</b>						
Low Priority	28.1%	26.7%	32.8%	25.9%	31.8%	26.2%
Medium Priority	34.9%	33.3%	22.4%	39.7%	31.8%	41.5%
High Priority	37.0%	40.0%	44.8%	34.5%	36.4%	32.3%

	<b>Trenton Health Team Focus Area (N=370)</b>	<b>08609 (N=35)</b>	<b>08611 (N=77)</b>	<b>08618 (N=131)</b>	<b>08629 (N=48)</b>	<b>08638 (N=73)</b>
<b>Policy changes to improve access to healthy foods and beverages in the community and in schools</b>						
Low Priority	11.0%	10.0%	14.7%	7.9%	2.3%	16.9%
Medium Priority	26.0%	16.7%	27.9%	25.4%	22.7%	32.3%
High Priority	63.0%	73.3%	57.4%	66.7%	75.0%	50.8%
<b>Programs to educate people about nutrition</b>						
Low Priority	12.5%	16.7%	17.9%	8.5%	0.0%	20.3%
Medium Priority	34.0%	33.3%	23.9%	30.5%	40.9%	45.3%
High Priority	53.5%	50.0%	58.2%	61.0%	59.1%	34.4%
<b>School-based programs that promote physical activity and healthy eating</b>						
Low Priority	9.5%	16.7%	12.3%	5.1%	6.8%	12.5%
Medium Priority	23.3%	16.7%	18.5%	23.1%	13.6%	35.9%
High Priority	67.2%	66.7%	69.2%	71.8%	79.5%	51.6%
<b>Policy changes to increase the number of employers who have wellness programs at work</b>						
Low Priority	12.1%	25.0%	9.4%	11.2%	9.5%	10.6%
Medium Priority	37.3%	14.3%	31.3%	42.2%	35.7%	42.4%
High Priority	50.6%	60.7%	59.4%	46.6%	54.8%	47.0%
<b>Chronic Disease</b>						
<b>Programs that help people prevent chronic disease (e.g., diabetes, heart disease)</b>						
Low Priority	5.3%	10.3%	7.4%	2.7%	2.4%	4.6%
Medium Priority	19.2%	13.8%	14.7%	19.5%	21.4%	24.6%
High Priority	75.5%	75.9%	77.9%	77.9%	76.2%	70.8%
<b>Programs that help people manage their chronic disease (e.g., diabetes, heart disease)</b>						
Low Priority	4.7%	7.1%	6.2%	4.4%	2.4%	3.1%
Medium Priority	22.6%	17.9%	23.1%	17.5%	19.0%	31.3%
High Priority	72.7%	75.0%	70.8%	78.1%	78.6%	65.6%
<b>Increase the awareness of health care providers about social services in the community</b>						
Low Priority	6.6%	10.3%	9.1%	5.4%	9.5%	1.5%
Medium Priority	28.1%	6.9%	27.3%	25.9%	19.0%	46.2%
High Priority	65.3%	82.8%	63.6%	68.8%	71.4%	52.3%
<b>Increase education and support to chronic disease patients about the importance of taking their medicine correctly</b>						
Low Priority	5.3%	6.9%	9.1%	4.4%	4.7%	1.6%
Medium Priority	25.2%	10.3%	18.2%	28.3%	18.6%	37.5%
High Priority	69.5%	82.8%	72.7%	67.3%	76.7%	60.9%
<b>Mental Health and Substance Abuse</b>						
<b>Mental health screening (depression, suicide) and counseling for youth</b>						
Low Priority	6.2%	12.9%	8.8%	5.2%	2.4%	3.2%
Medium Priority	18.5%	12.9%	20.6%	14.7%	16.7%	24.2%
High Priority	75.4%	74.2%	70.6%	80.2%	81.0%	72.6%
<b>Programs to educate community members (e.g., parents, educators, providers) about mental illness/help reduce stigma</b>						
Low Priority	7.1%	10.0%	7.2%	8.0%	2.4%	6.5%
Medium Priority	27.0%	26.7%	26.1%	26.5%	21.4%	30.6%
High Priority	65.8%	63.3%	66.7%	65.5%	76.2%	62.9%



	<b>Trenton Health Team Focus Area (N=370)</b>	<b>08609 (N=35)</b>	<b>08611 (N=77)</b>	<b>08618 (N=131)</b>	<b>08629 (N=48)</b>	<b>08638 (N=73)</b>
<b>Having mental health and substance abuse services more integrated into primary care</b>						
Low Priority	8.0%	12.9%	11.8%	7.8%	2.4%	4.8%
Medium Priority	19.8%	19.4%	7.4%	14.8%	24.4%	37.1%
High Priority	72.1%	67.7%	80.9%	77.4%	73.2%	58.1%
<b>School-based prevention and counseling on mental health and substance abuse</b>						
Low Priority	7.5%	9.7%	9.0%	6.3%	7.1%	6.5%
Medium Priority	18.1%	16.1%	16.4%	17.0%	7.1%	29.0%
High Priority	74.4%	74.2%	74.6%	76.8%	85.7%	64.5%
<b>Increase the number of mental health professionals in areas of highest need</b>						
Low Priority	5.3%	10.0%	6.1%	3.5%	4.8%	4.9%
Medium Priority	21.4%	13.3%	16.7%	24.8%	16.7%	26.2%
High Priority	73.3%	76.7%	77.3%	71.7%	78.6%	68.9%
<b>Transportation and Built Environment</b>						
<b>Policy changes to increase the existing miles of shared roads, safe walk ways, and bike paths</b>						
Low Priority	13.6%	24.1%	19.7%	13.4%	4.8%	8.1%
Medium Priority	41.0%	20.7%	30.3%	39.3%	47.6%	58.1%
High Priority	45.4%	55.2%	50.0%	47.3%	47.6%	33.9%
<b>Access to affordable public transportation</b>						
Low Priority	8.8%	17.2%	9.1%	7.1%	4.8%	10.9%
Medium Priority	29.1%	20.7%	31.8%	28.3%	28.6%	32.8%
High Priority	62.2%	62.1%	59.1%	64.6%	66.7%	56.3%
<b>Access to public transportation across communities to and from parks</b>						
Low Priority	14.4%	23.3%	17.9%	16.1%	7.1%	9.7%
Medium Priority	34.5%	13.3%	37.3%	32.1%	33.3%	46.8%
High Priority	51.1%	63.3%	44.8%	51.8%	59.5%	43.5%
<b>Do you have health care insurance?</b>						
No	7.8%	14.3%	9.1%	2.9%	17.5%	6.3%
Yes (includes private insurance, Medicare, Medicaid, and other public insurance)	92.2%	85.7%	90.9%	97.1%	82.5%	93.7%

### Appendix C: Comparative Analysis of Trenton vs. Mercer County Responses

	Trenton Focus Area (N=370)	County Total Respondents (N=1,927)	Rate of Difference in Level of Concern	Notes/Observations
Please select the TOP 3 HEALTH ISSUES that have the biggest impact on the Mercer County community in which you live or work.				
Access to health care (transportation, health insurance, cost, etc.)	42.70%	43.00%	-0.7%	Not Consistent
Asthma	11.00%	8.20%	34.1%	
Chronic disease (diabetes, heart disease, cancer)	39.90%	43.10%	-7.4%	Not consistent with the incidence of these diagnoses compared with the County values
Overweight or obesity	32.50%	36.30%	-10.5%	
Mental health issues	28.10%	31.60%	-11.1%	
Alcohol or substance use or abuse (e.g., marijuana, heroin, opiates, prescription drug misuse)	47.40%	38.40%	23.4%	
Smoking	12.70%	12.50%	1.6%	
Interpersonal violence (domestic violence, sexual violence, bullying, cyber-bullying, etc.)	15.40%	11.20%	37.5%	
Community violence (assault, gangs, robbery)	39.10%	18.40%	112.5%	
Oral/dental health	8.30%	6.50%	27.7%	
Health concerns related to aging (Alzheimer's, arthritis, dementia, falls, etc.)	13.50%	26.80%	-49.6%	
Teen pregnancy	10.70%	4.40%	143.2%	
Infectious/contagious disease (pneumonia, flu, tuberculosis, etc.)	8.80%	12.40%	-29.0%	
Other	3.00%	5.40%	-44.4%	

	Trenton Focus Area (N=370)	County Total Respondents (N=1,927)	Rate of Difference in Level of Concern	Notes/Observations
<b>Have any of these issues made it difficult for you or a member of your immediate family to get needed health services within the last two years?</b>				
Lack of transportation	24.30%	12.50%	<b>94.4%</b>	High Level
Have no regular source of health care	14.90%	7.90%	<b>88.6%</b>	High Level
Cost of care	34.80%	27.40%	27.0%	
Lack of specialists	12.60%	8.60%	46.5%	
Lack of evening or weekend services	23.10%	22.80%	1.3%	
Insurance problems/lack of coverage	24.60%	20.80%	18.3%	Not consistent with response about lack of insurance: 136.4% higher than the County's
Language problems/could not communicate with health provider or office staff	7.90%	3.60%	<b>119.4%</b>	Especially important since survey's ethnic percentages differ from Census, i.e., Hispanic representation of 13.8% on Survey vs. Hispanic population in Trenton is 33.7% based on Census
Services not accessible for people with disabilities	5.60%	3.10%	<b>80.6%</b>	
Unfriendly provider or office staff	14.90%	12.10%	23.1%	
Felt discriminated against	7.00%	3.30%	<b>112.1%</b>	
Afraid to get care	6.70%	4.70%	42.6%	
Don't know where to go for medical services	10.20%	6.20%	<b>64.5%</b>	

	Trenton Focus Area (N=370)	County Total Respondents (N=1,927)	Rate of Difference in Level of Concern	Notes/Observations
Don't know where to go for dental services	11.40%	5.80%	<b>96.6%</b>	
Don't know where to go for mental health services	9.90%	7.60%	30.3%	
Don't understand the health information received	8.20%	4.20%	<b>95.2%</b>	
No provider available near me	7.30%	5.20%	40.4%	
Long wait for an appointment	28.90%	23.30%	24.0%	
Office not accepting new patients	16.10%	11.40%	41.2%	
Health information is not kept confidential	2.90%	1.80%	61.1%	
I have never experienced any difficulty in getting care	33.00%	40.90%	<b>-19.3%</b>	Contradicts results shown above
<b>Do you agree or disagree with the following statements about your community?</b>				
<b>It's easy to get to parks in my community.</b>				
Agree	76.30%	88.10%	-13.4%	
Disagree	23.70%	11.90%	<b>99.2%</b>	
<b>It's easy to find out about the services located in my community.</b>				
Agree	46.40%	66.90%	-30.6%	
Disagree	53.60%	33.10%	<b>61.9%</b>	
<b>It's easy to go for a walk in my community.</b>				
Agree	52.30%	78.80%	-33.6%	
Disagree	47.70%	21.20%	<b>125.0%</b>	
<b>It's easy to ride a bike in my community.</b>				
Agree	49.80%	70.60%	-29.5%	
Disagree	50.20%	29.40%	<b>70.7%</b>	

	Trenton Focus Area (N=370)	County Total Respondents (N=1,927)	Rate of Difference in Level of Concern	Notes/Observations
It's easy to take a bus in my community.				
Agree	72.80%	52.30%	39.2%	
Disagree	27.20%	47.70%	<b>-43.0%</b>	Contradicts "It's easy to get to parks in my community" with which 99.2% disagreed
<b>My community is a good place to raise a family.</b>				
Agree	41.60%	81.30%	-48.8%	
Disagree	58.40%	18.70%	<b>212.3%</b>	
<b>I can count on my neighbors in a time of need.</b>				
Agree	60.30%	77.40%	-22.1%	
Disagree	39.70%	22.60%	<b>75.7%</b>	
<b>It's easy to find fresh fruits and vegetables in my community.</b>				
Agree	59.90%	83.40%	-28.2%	
Disagree	40.10%	16.60%	<b>141.6%</b>	
It's easy to find affordable housing in my community.				
Agree	30.30%	33.60%	-9.8%	
Disagree	69.70%	66.40%	5.0%	
<b>It's easy to find employment or job opportunities in my community.</b>				
Agree	22.00%	37.10%	-40.7%	
Disagree	78.00%	62.90%	24.0%	
<b>It's easy to live a healthy lifestyle in my community.</b>				
Agree	44.90%	76.00%	-40.9%	
Disagree	55.10%	24.00%	<b>129.6%</b>	Consistent with previous results related to lack of access to high quality food, exercise, and parks due to crime level, safety, etc.

	Trenton Focus Area (N=370)	County Total Respondents (N=1,927)	Rate of Difference in Level of Concern	Notes/Observations
<b>It's easy for people with disabilities to access services in my community.</b>				
Agree	38.60%	55.70%	-30.7%	
Disagree	61.40%	44.30%	<b>38.6%</b>	
<b>It's easy to understand the health information provided in my community.</b>				
Agree	46.90%	68.10%	-31.1%	
Disagree	53.10%	31.90%	<b>66.5%</b>	
<b>When deciding how future resources - such as staff time and organizational funding - should be spent, what priority do you think should be given to the following within each issue area?</b>				
<b><i>Healthy Eating and Active Living</i></b>				
<b>Transportation options for seniors and people who are disabled to increase access for physical activity</b>				
Low Priority	7.10%	8.10%	-12.3%	
Medium Priority	33.10%	35.20%	-6.0%	
High Priority	59.80%	56.70%	5.5%	
<b>Policy changes that make it easier to walk or bike in your community</b>				
Low Priority	28.10%	29.50%	-4.7%	
Medium Priority	34.90%	39.20%	-11.0%	
High Priority	37.00%	31.30%	<b>18.2%</b>	
<b>Policy changes to improve access to healthy foods and beverages in the community and in schools</b>				
Low Priority	11.00%	12.50%	-12.0%	
Medium Priority	26.00%	33.90%	-23.3%	
High Priority	63.00%	53.70%	<b>17.3%</b>	
<b>Programs to educate people about nutrition</b>				
Low Priority	12.50%	13.70%	-8.8%	
Medium Priority	34.00%	41.40%	-17.9%	
High Priority	53.50%	44.90%	<b>19.2%</b>	

	Trenton Focus Area (N=370)	County Total Respondents (N=1,927)	Rate of Difference in Level of Concern	Notes/Observations
<b>School-based programs that promote physical activity and healthy eating</b>				
Low Priority	9.50%	7.50%	26.7%	
Medium Priority	23.30%	23.60%	-1.3%	
High Priority	67.20%	68.90%	-2.5%	
<b>Policy changes to increase the number of employers who have wellness programs at work</b>				
Low Priority	12.10%	15.70%	-22.9%	
Medium Priority	37.30%	38.60%	-3.4%	
High Priority	50.60%	45.70%	10.7%	
<b>Chronic Disease</b>				
<b>Programs that help people prevent chronic disease (e.g., diabetes, heart disease)</b>				
Low Priority	5.30%	4.40%	20.5%	
Medium Priority	19.20%	23.90%	-19.7%	
High Priority	75.50%	71.60%	5.4%	
<b>Programs that help people manage their chronic disease (e.g., diabetes, heart disease)</b>				
Low Priority	4.70%	4.40%	6.8%	
Medium Priority	22.60%	29.20%	-22.6%	
High Priority	72.70%	66.40%	9.5%	
<b>Increase the awareness of health care providers about social services in the community</b>				
Low Priority	6.60%	7.90%	-16.5%	Low contradicts High
Medium Priority	28.10%	36.30%	-22.6%	
High Priority	65.30%	55.80%	17.0%	
<b>Increase education and support to chronic disease patients about the importance of taking their medicine correctly</b>				
Low Priority	5.30%	8.30%	-36.1%	
Medium Priority	25.20%	34.60%	-27.2%	
High Priority	69.50%	57.10%	21.7%	

	Trenton Focus Area (N=370)	County Total Respondents (N=1,927)	Rate of Difference in Level of Concern	Notes/Observations
<b><i>Mental Health and Substance Abuse</i></b>				
<b>Mental health screening (depression, suicide) and counseling for youth</b>				
Low Priority	6.20%	5.20%	19.2%	
Medium Priority	18.50%	22.10%	-16.3%	
High Priority	75.40%	72.70%	3.7%	
<b>Programs to educate community members (e.g., parents, educators, providers) about mental illness/help reduce stigma</b>				
Low Priority	7.10%	6.90%	2.9%	
Medium Priority	27.00%	30.50%	-11.5%	
High Priority	65.80%	62.60%	5.1%	
<b>Having mental health and substance abuse services more integrated into primary care</b>				
Low Priority	8.00%	6.80%	17.6%	Contradicts previous results
Medium Priority	19.80%	24.30%	-18.5%	
High Priority	72.10%	68.90%	4.6%	
<b>School-based prevention and counseling on mental health and substance abuse</b>				
Low Priority	7.50%	5.60%	33.9%	
Medium Priority	18.10%	22.60%	-19.9%	
High Priority	74.40%	71.90%	3.5%	
<b>Increase the number of mental health professionals in areas of highest need</b>				
Low Priority	5.30%	6.60%	-19.7%	
Medium Priority	21.40%	26.80%	-20.1%	
High Priority	73.30%	66.60%	10.1%	
<b><i>Transportation and Built Environment</i></b>				
<b>Policy changes to increase the existing miles of shared roads, safe walk ways, and bike paths</b>				
Low Priority	13.60%	17.10%	-20.5%	
Medium Priority	41.00%	44.40%	-7.7%	
High Priority	45.40%	38.50%	17.9%	



	Trenton Focus Area (N=370)	County Total Respondents (N=1,927)	Rate of Difference in Level of Concern	Notes/Observations
<b>Access to affordable public transportation</b>				
Low Priority	8.80%	11.50%	-23.5%	
Medium Priority	29.10%	35.80%	-18.7%	
High Priority	62.20%	52.70%	18.0%	
<b>Access to public transportation across communities to and from parks</b>				
Low Priority	14.40%	19.30%	-25.4%	
Medium Priority	34.50%	40.60%	-15.0%	
High Priority	51.10%	40.10%	27.4%	Matches previous results about access to parks
<b>Do you have health care insurance?</b>				
No	7.80%	3.30%	136.4%	Trenton shows a 136.4% higher rate of lack of health care than the County as a whole.
Yes (includes private insurance, Medicare, Medicaid, and other public insurance)	92.20%	96.70%	-4.7%	



## **Board of Directors**

### ***Officers***

#### **President:**

Robert Remstein, DO, MBA

Vice President for Accountable Care, Capital Health

#### **Vice President:**

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Health Officer/Director, Department of Health & Human Services, City of Trenton

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Corporate Director of Population Health, SFMC/Lourdes

#### **Treasurer:**

Denise Stone, RN, MBA

Primary Care Director, Henry J. Austin Health Center

### ***Members***

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Chief Executive Officer, Rescue Mission of Trenton

Francis Blanco

Chief of Staff, Mayor's Office, City of Trenton

Dennis Dooley

Vice President Communications and Government Affairs, Capital Health

Renee Haynes

Chief Operating Officer, Henry J. Austin Health Center

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Executive Director, Latin American Legal Defense and Education Fund

Colette Lamothe-Galette

Director of Population Health, NJ Department of Health

Carol McAloon, RN

Director of Cardiovascular Services, St. Francis Medical Center

John Monahan

Principal, Integrated Care for Recovery

Harry Postel

Assoc. Executive Director, Catholic Charities Diocese of Trenton

Pamela Pruitt

Director of Multicultural Affairs, Rider University

Christy Stephenson, RN, MBA

Healthcare Executive (Retired)

### ***Ex Officio***

Gregory Paulson, MS, MICP

Executive Director, Trenton Health Team



**Community Advisory Board  
Member Organizations\***

American Diabetes Association  
American Heart Association  
Anchor House  
Arcadia  
Bethany Evangelical Lutheran Church  
Capital Health  
Capitol County Children’s Collaborative  
Care One  
Catholic Charities, Diocese of Trenton  
Catholic Charities, El Centro  
Central Jersey Family Health Consortium  
Children’s Futures, Inc.  
Children’s Home Society of New Jersey  
Christ Episcopal Church-Cristo Rey  
City of Trenton, Department of Health and Human Services  
Comfort Keepers, LLC  
Family Guidance Center  
Family Resource Network  
Henry J. Austin Health Center  
Holy Redeemer Homecare & Hospice  
HomeFront, Inc.  
Horizon NJ Health  
Isles, Inc.  
Living Hope Empowerment Center/Concerned Pastors  
Lotus Medical Center  
Mama Yoga Wellness  
Meals on Wheels of Trenton/Ewing  
Medina Health  
Mercer Alliance to End Homelessness  
Mercer County Department of Human Services  
Mercer Street Friends  
Millhill Child and Family Development  
New Hope Church of God  
New Jersey Department of Children & Families  
New Jersey Department of Health, Office of Minority and Multicultural Health  
New Jersey Department of Human Services  
New Jersey Health Care Quality Institute  
Pediatrics Day and Night  
Planned Parenthood of Central and Greater Northern New Jersey  
Princeton University  
Rescue Mission of Trenton  
Rider University  
Rutgers University and Rutgers Cooperative Extension of Mercer County  
Shiloh Baptist CDC  
St. Francis Medical Center  
State of New Jersey, Board of Public Utilities  
The College of New Jersey/Trenton Prevention Policy Board  
The Crisis Ministry of Mercer County  
Thomas Edison State University  
Trenton Area Soup Kitchen  
Trenton Civic Association  
Trenton Emergency Medical Services  
Trenton Police Department  
Trenton Public School District  
Trenton YMCA – New Jersey Partnership for Healthy Kids/Trenton Healthy Food Network  
Trinity Episcopal Cathedral  
Turning Point United Methodist Church  
Union Baptist CDC (Trenton’s Hope)  
Urban Mental Health Alliance

***\*Please note that new members and organizations are always welcome and we apologize for any inadvertent errors or omissions.***