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The MGH Center for Community Health Improvement (CCHI) conducted its first community health needs assessments (CHNA) in 1995 in Revere, Chelsea and Charlestown. As a result of these assessments and together with our community partners, we have made substantial progress on preventing and reducing substance abuse, improving access to care for vulnerable populations, expanding opportunities for youth and more.

The Patient Protection and Affordable Care Act now requires hospitals to conduct CHNA's every three years. In 2012-2013, CCHI collaborated with the communities of Revere, Chelsea and Charlestown to conduct assessments. Almost 3,000 people across the three communities had input into this process through a quality of life survey, community forums, Assessment Committee Members, focus groups and public health data.

#### **2012 Community Health Needs Assessment**

By a significant margin, all three communities identified substance abuse, and the effects it has on quality of life including perceptions of violence and public safety, as their top two issues. Obesity/healthy living, cancer prevention/early detection, and access to care for vulnerable populations too were identified by all three communities. Finally, developing the assets of youth and encouraging educational attainment also were identified to protect against multiple high risk behaviors. These are CCHI's six priority areas for at least the next three years.

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#### **2012 Charlestown Health Needs Assessment**

By a significant margin, Charlestown identified substance abuse and the effects it has on quality of life including perceptions of violence and public safety, as the community's top issue. In addition the community identified cancer prevention/healthy living, access to care (with an emphasis on helping families with autistic youth) and promotion of educational attainment as additional priorities to be addressed.

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#### **2012 Chelsea Health Needs Assessment**

By a significant margin, Chelsea identified substance abuse, and the effects it has on quality of life including perceptions of violence and public safety, as their top issue. Although many other health issues were identified by the community at large, the Chelsea assessment committee felt strongly about working collectively on one issue to make measurable change. There already are significant efforts targeting some of the other major areas of concern identified by the community, such as obesity, cancer prevention, education. Although much good work is already being done to prevent and treat substance use disorders, a more concerted and collective effort is needed.

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#### **2012 Revere Health Needs Assessment**

By a significant margin, Revere, similar to other communities, identified substance abuse, and obesity/healthy living, as the community's top two issues. Revere also identified developing the assets of youth and encouraging healthy relationships and violence and public safety as priorities. To address the new priorities, Revere CARES will integrate gang violence into its substance abuse work and public safety into its obesity work. In addition, Revere CARES will establish the Healthy Relationship Initiative to address multiple high risk behaviors and health issues identified by the community at large, such as teen pregnancy, mental health and interpersonal violence.

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#### **2013 Special Populations Health Assessment Report**

CCHI launched the second phase of our assessment process in 2013 by reviewing national and local data and trends, and patient data when appropriate. CCHI also conducted focus groups and interviews with experts in the field who are familiar with

our current programs. The report summarizes our findings and outlines our plans to improve upon our work in the coming years.

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