

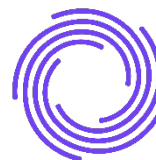
2025 BOSTON CHILDREN'S HOSPITAL COMMUNITY HEALTH NEEDS ASSESSMENT REPORT

- Executive Summary -



Boston Children's Hospital

Where the world comes for answers



**HEALTH
RESOURCES
IN ACTION**

BACKGROUND

Boston Children's Hospital (BCH) is dedicated to improving the health and well-being of children through clinical care, research, education, and community engagement. The hospital's Office of Community Health (OCH) brings together hospital and community resources to address health disparities, improve health outcomes, and promote health equity.

The 2025 Community Health Needs Assessment (CHNA) updates findings from the prior 2022 CHNA. It aims to identify health-related needs, strengths, and resources among children and families in priority Boston neighborhoods¹ and ten satellite and [Determination of Need Community Health Initiative \(DoN\)](#) communities.² While a majority of this report focuses on results from the City of Boston (as this is where Boston Children's is geographically located), findings were consistent across all communities. [See Appendices of full CHNA report for detail.](#)

The 2025 CHNA was conducted in tandem with the City of Boston's 2025 CHNA, conducted by the Boston Community Health Collaborative (BCHC). The BCHC is a group of organizations in Boston that aim to achieve sustainable positive change in the health of Boston residents. Both Boston Children's and the BPHC are key members of this collaborative. While the BCHC process examined broad citywide issues, this report focuses specifically on children's health, integrating citywide findings where relevant.

It should be noted that data collection took place during a time of political division, economic uncertainty, concern for mental health and housing instability. Recent policy changes, particularly around immigration, continue to affect community health and access to services.

Approach and Methods: To identify priority health issues as well as community strengths and suggestions for future initiatives, the Boston Children's CHNA drew on multiple data sources and engaged the Boston Children's Community Advisory Board (CAB) to provide input.

Secondary data was compiled from existing national, state, and city sources. Datasets used include but are not limited to the American Community Survey (ACS), the Boston Behavioral Risk Factor Surveillance System (BBRFSS), the Youth Risk Behavior Survey (YRBS) and the U.S. Census. Boston Children's patient encounter data were also reviewed.

Primary data was comprised of findings from the 2025 City of Boston CHNA community survey (1,866 respondents, available in nine languages), with additional stratified analyses for parents/caregivers and youth/young adults, as well as themes from 13 focus groups and 11 key informant interviews. Primary data collected specifically for the Boston Children's CHNA included two focus groups (with LGBTQ+ youth and with CAB members), two interviews with Boston community leaders, and 18 interviews with key stakeholders from Boston Children's satellite and DoN communities.

Data were analyzed to identify common themes and unique challenges, with particular attention to inequities and their root causes. Limitations included differences in how sources defined variables, small sample sizes for some groups, reliance on convenience sampling, and

¹ **City of Boston Priority Neighborhoods:** Allston/Brighton, Dorchester, Hyde Park, Jamaica Plain, Mattapan, Mission Hill, Roxbury

² **Satellite and DoN Communities:** Brockton, Brookline, Framingham, Lexington, North Dartmouth, Peabody, Quincy, Randolph, Waltham, Weymouth

overlapping geographic boundaries. Most data reflect single points in time and should not be generalized to all residents. To strengthen community input, the Boston Children's CAB, which is made up of residents and leaders from health, education, housing, and youth-serving organizations, helped review findings and set priorities.

COMMUNITY ASSETS AND STRENGTHS

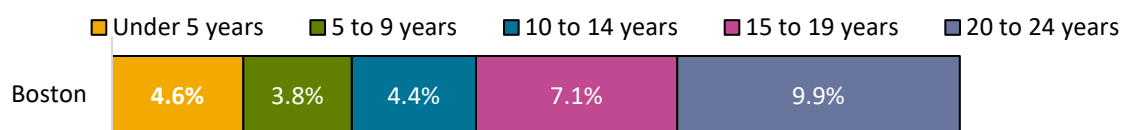
Residents described their communities as deeply connected, resilient, and supportive, and specifically highlighted the strengths of young people. Focus group participants and interviewees discussed a breadth of community-based institutions and services, including those focused on early childhood, youth, food security, housing, mental health, health care, and the LGBTQ+ population.

Assessment participants from satellite and DoN communities echoed a strong sense of community and described the existence of social services and organizations that support families and children (such as health facilities, churches, and museums) as community strengths. Education was also cited as an asset in some communities.

COMMUNITY SOCIAL, ECONOMIC, AND PHYSICAL CONTEXT

Demographics: Boston is a young, diverse city: nearly 1 in 5 residents are under the age of 20. Young adults (20–24) cluster in Fenway, Roxbury/Mission Hill, and Allston/Brighton due to the presence of nearby colleges and universities. The population is 44.5% White, 20.3% Black, 18.8% Hispanic/Latino, and 9.9% Asian, with Mattapan, East Boston, and South End/Chinatown home to the largest shares of Black, Hispanic/Latino, and Asian residents, respectively. More than one-third of residents speak a language other than English at home, and 28.5% have limited English proficiency. Spanish is most common (45.3% of non-English speakers), followed by Chinese (11.4%), Haitian (7.7%), Portuguese (5.2%), and Vietnamese (4.8%).

Total Population Under 24, by Age Group, 2019-2023



SOURCE: U.S. Census, ACS 5-Year Estimates, 2019-2023

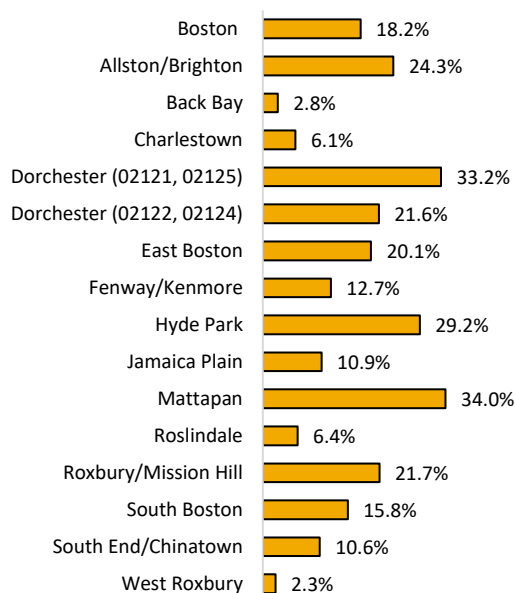
Education: Education is an important issue to Boston families and a critical factor affecting health. Interview and focus group participants shared mixed sentiments about the public education system in Boston. Some participants described the schools as well-resourced. Others expressed concern about the ability of the public education system to provide access to quality education for all students, given the high needs of Boston Public School (BPS) students. Participants also questioned whether BPS has the required resources to fully prepare graduates for higher education and employment opportunities.

“Low-income families are struggling to access free or affordable early education and childcare...This leads to a parent not being able to work or children that can’t access pre-K.” -Boston CHNA

Employment and Workforce: Employment and income strongly influence access to basic needs such as housing, food, and health care. Interview and focus group participants noted barriers to job readiness among youth. Barriers included the high cost of college, limited access to job training, and insufficient workforce development opportunities for youth. Many called for more internships and employment programs to support young people, keep them engaged and promote career readiness.

Financial Security: Childhood poverty remains a pressing concern and varies by both race/ethnicity and geographic location. Nearly one in five children under the age of 5 in Boston (18.2%) live below the federal poverty level, with rates exceeding 30% in Mattapan and parts of Dorchester. By race and ethnicity, poverty rates were highest among Hispanic/Latino families

Percent of Children under 5 Living Below Federal Poverty Level, 2019-2023



SOURCE: U.S. Census, American Community Survey 5-Year Estimates, 2019-2023

(21.9%). Importantly, the federal poverty level does not account for Boston's high cost of living, meaning families often face greater financial strain than the measure suggests.

Housing and Homelessness: Housing emerged as one of the top concerns for families in Boston. Increasing rents, limited rental assistance, gentrification, and frequent moves were cited as drivers of instability and stress.

Cost burden is widespread. Nearly one in four renters (23.7%) and one in eight homeowners (12.1%) spend more than half of their income on housing, with the burden especially high in Dorchester, Fenway, Mattapan, and Roxbury/Mission Hill. Importantly, cost burden is typically defined as housing costs exceeding 30% of income, a measure that does not fully reflect the financial strain of Boston's high cost of living.

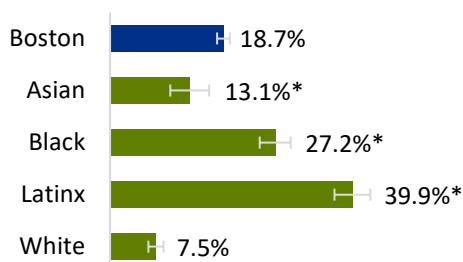
In addition, unhoused populations are growing. Between 2023 and 2024, the number of unhoused families rose by 1.7%, people in families by 9.4%, and unaccompanied youth by 17.9%. Among Boston high school students, 3.1% reported unstable housing in the past year, with rates highest among Hispanic/Latino students.

Cost of Living & Food Access: Rising costs of living in Boston place significant strain on families. Community survey data show that caregivers and youth/young adults most often struggle with the cost of food and housing. Caregivers cited childcare as a major expense, while youth/young adults highlighted tuition and student loans.

***"The food that is available is largely processed...Now we have so many parents who are out working or whatever, and the food that is the cheapest is all processed. It's not healthy."** -Boston CHNA*

Food insecurity is increasingly widespread due to recent inflation and the rising cost of groceries. In Boston overall, one in five Boston Children's primary care patients screened positive for food-related needs. Rates were higher among those with public insurance, younger

Percent Adults Reporting that Food Didn't Last in the Past Year (2019 - 2023)



SOURCE: Boston Public Health Commission: Boston BRFSS, 2019, 2021 and 2023; Asterisk (*) denotes where neighborhood estimate was significantly different vs. reference group ($p < 0.05$)

children, and residents of color. SNAP participation underscores families' vulnerability: while 18.6% of all Boston households receive benefits, more than one-third of households with children (33.6%) rely on SNAP, with rates exceeding 50% in Roxbury, Dorchester, and Mattapan. Despite these supports, many families still report limited access to affordable, healthy food options. Statewide estimates indicate that more than one in five children in Boston's congressional district are food insecure, and many are not eligible for federal nutrition programs despite need.

Transportation: Transportation also poses challenges. Nearly one in six caregivers and youth reported trouble affording transportation, and about 9% of Boston Children's patients screened positive for transportation needs. Families described barriers related to transit accessibility for children with disabilities, reliability of service, and high costs of vehicle ownership.

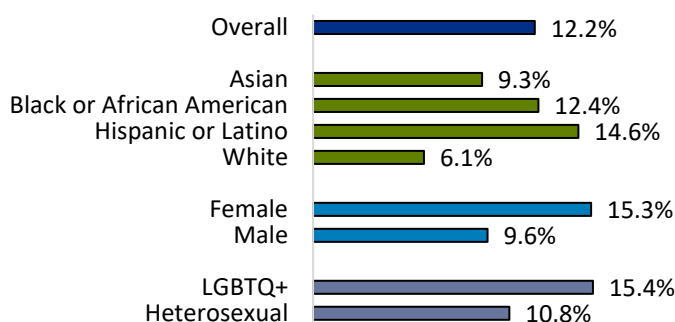
Neighborhood walkability varied widely, with central neighborhoods offering strong access to amenities and outer neighborhoods like Hyde Park, West Roxbury, and Mattapan scoring lower.

Community Perceptions and Neighborhood Safety: Survey results show that while most

caregivers and youth/young adults feel a sense of belonging in their neighborhoods, fewer feel their communities are safe from crime (38% of caregivers, 34% of youth/young adults). Only two-thirds of caregivers and just over half of youth view Boston as a good place to raise children, reflecting persistent concerns about safety.

Youth survey data highlight the impact of safety concerns. More than one in ten Boston high school

Percent of Boston High School Students Who Did Not Go to School Because They Felt Unsafe at School



SOURCE: Centers for Disease Control and Prevention and Boston Public Schools, YRBS, 2023

students reported missing school because they felt unsafe, with higher rates among female, LGBTQ+, and Hispanic/Latino students. Nearly one in five high school students reported being in a physical fight, and almost 8% reported being in a fight at school. Reports of carrying or being threatened with a weapon at school were higher among Black and LGBTQ+ students.

Bullying and cyberbullying are ongoing issues, with about 10% of students reporting each. Students identifying as female or LGBTQ+ were significantly more likely to experience bullying. Sexual violence is another critical concern: nearly 10% of high school students reported

experiencing sexual violence in the past year, with higher rates among female (13.5%) and LGBTQ+ (19.6%) students.

Climate Change and Environmental Health: Community members increasingly described climate change as a major concern, with climate anxiety emerging as a growing factor in youth mental health. Focus group participants raised concerns about the impact of extreme heat on medication effectiveness, birth outcomes, learning, and child development.

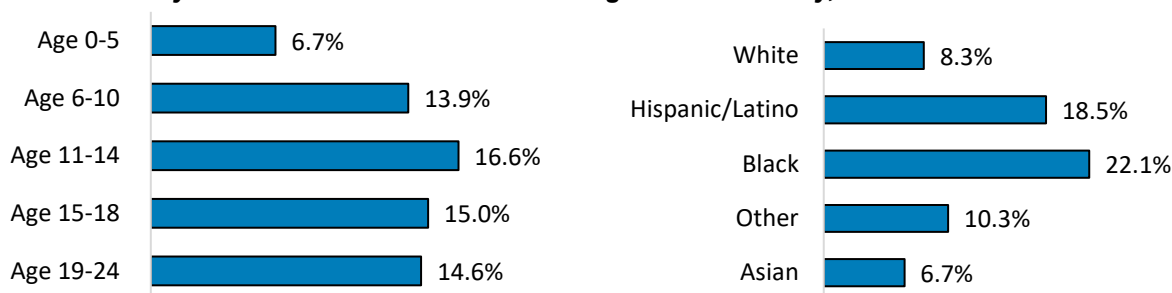
Air pollution was also cited as a growing area of concern among families. In 2022, PM2.5 levels averaged just below the federal standard but were still linked to thousands of health impacts, including 1,840 pediatric asthma cases, 47 low birth weight cases, and an estimated loss of more than three IQ points per child. These findings highlight the hidden cognitive, developmental, and health toll of poor air quality on Boston’s youngest residents.

COMMUNITY HEALTH NEEDS

Overweight and Obesity: Overweight and obesity continue to be of concern among Boston children and youth. Nearly one in five Boston high school students are obese, with higher rates among Black and Hispanic students. Boston Children’s primary care data show similar disparities, with obesity diagnoses highest in Mattapan, Roxbury/Mission Hill, and Hyde Park, and more common among Black and Hispanic children.

Diet and physical activity patterns contribute to these risks. Nearly half of high school students reported not eating any fruit in the past week, and half reported not eating vegetables. Only one-third met recommended physical activity levels, with lower participation among LGBTQ+ youth.

Percent of Primary Care Patients in Boston with Diagnosis of Obesity, 2022-2024



SOURCE: BCH PPOC Data pulled from PPOC Epic 10 Apr 2025; Includes patients (N=15,074) with at least one encounter at a PPOC-affiliated practice between Jan 1, 2022–Dec 31, 2024, who resided in Boston ZIP codes.

Asthma: Asthma remains one of the most common chronic conditions for children in Boston. Although prevalence has declined since the pandemic, rates remain higher than statewide averages. Boston Children’s primary care data show the highest asthma diagnoses in Mattapan, Roxbury/Mission Hill, and Hyde Park, and higher rates among Black and Hispanic children. Asthma continues to drive emergency department visits, particularly among children, and rates are elevated in the same

“A lot of public housing has a lot of mold in it. It’s affecting the health of children and parents.... We’ve had people’s houses tested for mold because as soon as we move them in, their child gets asthma.” - Boston CHNA

neighborhoods most affected by diagnoses. Poor housing quality and environmental factors were frequently cited as contributing causes.

Lead Exposure: Lead exposure, while declining, is still a concern. Rates of elevated blood lead levels among young children in Boston remain comparable to state levels but continue to pose risks to cognitive development and long-term health.

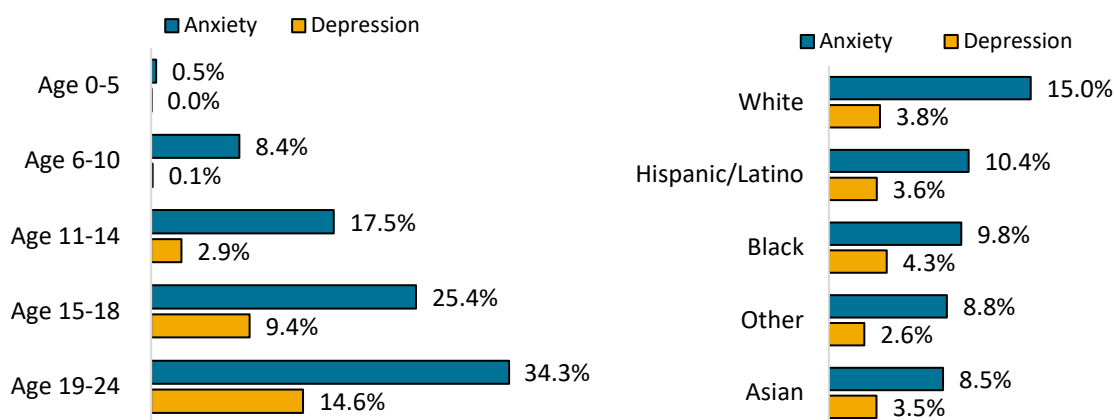
Behavioral and Mental Health: Behavioral and mental health emerged as top concerns in community discussions. Participants emphasized that a lack of belonging, whether at school, among peers, or in the broader community, contributes to worsening mental health for youth.

“Right now, it is a tough environment there is a lot of hate and people saying whatever they want to say right now. Both for LGBTQ+ and undocumented youth.” -BCH CHNA

Social media and cyberbullying were frequently described as normalizing harmful behaviors. LGBTQ+ and immigrant youth were identified as facing heightened stress due to stigma and hostile environments.

Survey (YRBS) and clinical data confirm these concerns. Nearly 40% reported feeling persistently sad or hopeless, and close to 30% reported poor mental health most of the time. Rates were highest among female and LGBTQ+ youth. Primary care data show that anxiety (12.1% overall) and depression (3.6% overall) diagnoses rise sharply during adolescence and early adulthood, with one-third of patients ages 19–24 diagnosed with anxiety.

Percent of Primary Care Patients in Boston with Diagnosis of Anxiety or Depression, 2022-2024



SOURCE: BCH PPOC Data pulled from PPOC Epic 10 Apr 2025; Includes patients (N=15,074) with at least one encounter at a PPOC-affiliated practice between Jan 1, 2022–Dec 31, 2024, who resided in Boston ZIP codes0

Sexual Health: Sexual health is an important part of adolescent development, with long-term implications for health, education, and opportunity. YRBS data show that one-third (33.0%) of Boston high school students had ever engaged in sexual intercourse, and about one in five (20.9%) were currently sexually active. Sexual activity increases steadily by grade level, with nearly half of 12th graders (47.3%) reporting experience. Younger students who are sexually active were more likely not to use contraception. Focus group participants noted both positive and negative trends: while fewer youth were reported to be engaging in sexual activity or risky behaviors compared to the past, use of contraception, including condoms, was also declining.

LGBTQIA+ Youth: LGBTQ+ youth make up a growing share of Boston’s population, with over one in five high school students identifying as LGBTQ+ or questioning their identity. Despite greater visibility, many struggle to access affirming, culturally competent providers - particularly youth of color and those with public insurance - and face long waits for mental health and gender-affirming care. Focus group participants emphasized the need for compassionate guidance through complex systems and noted gaps in crisis support, including suicide hotlines and emergency services.

“Trans youth under 19 are confused about executive orders-confused about continuation of care and need political health literacy for families.” -BCH CHNA

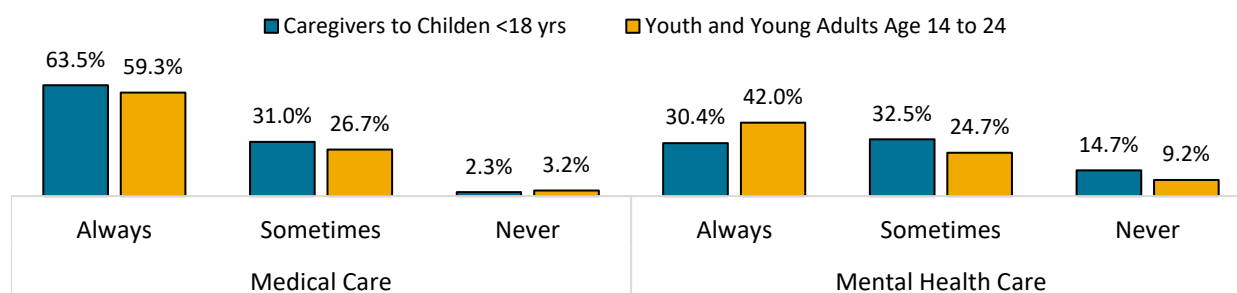
Supportive school environments with trusted adults and safe spaces are critical, as their absence heightens isolation and poor mental health. Intersectional factors such as race, disability, and socioeconomic status compound discrimination and mistrust in care. The shifting political climate around gender-affirming care adds further stress, highlighting the importance of clear communication, family education, and political health literacy to maintain continuity of care.

ACCESS TO HEALTH CARE

Access to health care services remains a concern for families, particularly those with limited resources. Barriers to accessing health care include: income, health insurance, language barriers, and limited culturally relevant care. Persistent barriers to accessing pediatric healthcare services, including high costs of care and long wait times, were a cross-cutting theme in conversations with organizational stakeholders and providers from satellite communities. Finally, fear of immigration enforcement, has emerged as a key barrier to accessing care among immigrant families and can delay or deter care even when it is needed.

Timeliness of care: While most respondents reported being able to access medical care when needed, timely access to mental health care lagged. About 30% of caregivers and about 42% of youth and young adults said they could always get mental health care when needed, and long waits for specialty and developmental services were common.

Percent of Boston CHNA Survey Respondents that Reported Frequency of Getting Care When Needed in Prior 12 Months, 2025



SOURCE: Boston Community Health Needs Assessment Community Survey, 2025

COMMUNITY VISION AND SUGGESTIONS FOR THE FUTURE

Community members shared their hopes for healthier, more equitable neighborhoods, identifying priorities that would most improve daily life. Survey findings highlighted strong

agreement across caregivers and youth/young adults on the need for affordable housing, access to good jobs, and low-cost healthy foods. Caregivers also emphasized the need for better schools, childcare, and access to mental health care, while youth pointed to access to health care, reliable transportation, and a clean environment.

Focus group participants offered suggestions to strengthen community well-being. These included mentorship, engagement, and career opportunities for youth; greater investment in youth workers and community infrastructure; and expanded patient navigation, peer advocacy, and wraparound services to help families access needed resources. Participants also highlighted the importance of health literacy and education, communication and family engagement to support children and youth.

KEY ASSESSMENT THEMES

This assessment highlights persistent challenges and emerging concerns shaping the health and well-being of children, youth, and families in Boston. Several themes cut across the data:

- **Youth and their caregivers face challenges accessing health services – particularly mental health care.** Systemic barriers include transportation, provider availability, long wait times for appointments, and cost. A majority report difficulty receiving treatment for mental and behavioral health needs. Disparities exist by income and race/ethnicity.
- **Chronic health conditions, such as asthma and obesity disproportionately impact low-income and minority children and families.** Asthma and obesity remain prevalent, particularly among Black and Hispanic residents and in neighborhoods such as Mattapan, Roxbury, Dorchester, and Hyde Park. Limited access to healthy foods and recreation contribute to these disparities.
- **Climate change and environmental health are among increasing concerns for Boston youth.** Youth in Boston are increasingly aware of the impacts of climate change on health and many cite climate change as a growing source of anxiety.
- **Perceptions of increased crime and community safety.** Only about one-third of residents reported their neighborhoods are safe from crime, and students continue to report safety concerns at and on their way to school.
- **Rising costs of living negatively impact food security and limit access to healthy food.** Families reported difficulty affording groceries, with healthy food access particularly limited in Mattapan, Dorchester, and East Boston. Nearly one-quarter of Boston Children's primary care patients screened positive for food needs.
- **Housing stability and lack of affordable housing remain a pervasive issue in Boston.** Many families struggle with severe cost burden, rising rents, and risk of displacement. The number of unhoused families and youth is increasing, and one-third of Boston Children's primary care patients screened positive for housing needs.
- **Mental health needs remain high among youth.** Depression, anxiety, and poor mental health symptoms affect a significant share of youth, especially female and LGBTQ+

students. A sense of belonging emerged as a critical protective factor, yet only half of high school students reported feeling close to peers at school.

- **LGBTQ+ youth, especially transgender or gender non-conforming youth face significant challenges that impact their health and well-being.** LGBTQ+ Youth of color and those with public insurance are disproportionately affected by barriers to accessing care. They describe long wait times for critical visits such as mental health and gender-affirming care. Many report difficulties finding providers who understand their needs.

PRIORITIZED HEALTH NEEDS

On May 20, 2025, Boston Children's presented preliminary findings from the CHNA and the Community Health Survey results to the Boston Children's Hospital Community Advisory Board (CAB). Following a presentation of the data, the CAB reviewed the key issues that emerged from the assessment and then used polling to determine priorities to focus on. From the polling, the following four areas of need were identified for prioritization. Note that a second round of voting was conducted to break a tie occurring in the first round:

- **Housing stability**
- **Mental health**
- **Food access**
- **Chronic health conditions (asthma, obesity)**

2025 Community Health Implementation Plan Priorities for 2025 – 2028: Based on the assessment process, prioritization, and feedback gathered from community stakeholders, Boston Children's has selected the following priorities as the focus their Community Health Implementation Plan for 2025-2028:

1. **Promote mental health and emotional wellness**
2. **Support affordable and stable housing for children and families**
3. **Increase access to affordable and nutritious food**
4. **Improve the health of children and families managing asthma and obesity**
5. **Promote healthy youth development**
6. **Improve early childhood education, health, and developmental supports**

CONCLUSION

The 2025 Boston Children's CHNA highlights persistent and emerging health challenges for Boston's children and families, alongside the systemic inequities that shape them. Across topics, ranging from housing and food security to chronic disease, safety, and behavioral health, families continue to face barriers that limit access to care and undermine overall well-being. At the same time, community members identified clear priorities and opportunities, including stronger youth programming, expanded mental health support, and more accessible, affordable, and culturally responsive care. Addressing these needs will require cross-sector collaboration, investment in community-based solutions, and sustained attention to the social and environmental conditions that most influence child and family health.