

Health Education, Promotion and Management

Our vision **for a healthy Trenton** includes population health outcomes from chronic disease falling in-line with the rest of Mercer County.



Trenton residents face steep barriers to achieving good health. Many struggle with limited access to primary care, preventive screenings, and reliable health information.

Social and economic inequities—such as poverty, language barriers, and lack of transportation—make navigating a fragmented healthcare system even harder.

Without strong health education and promotion, families often lack the knowledge and support to make informed decisions, leaving them more vulnerable to preventable illnesses such as diabetes, asthma, and hypertension, as well as higher healthcare costs.



Nearly **18%** of Trenton adults lack health insurance, 2.5x higher than the state average.

Almost **25%** of Trenton residents do not visit a primary care provider annually, 1.5x higher than the state average.

Nearly **25%** of Trenton residents live below the poverty line, 2.5x higher than the rest of the state.

15% of Trenton adults have diabetes, 1.5x higher than NJ average.

12% have asthma, 1.3x higher than NJ.

38% have hypertension, 1.4x higher than NJ.

Cancer Education and Early Detection (CEED)

Since 2018, THT has led the NJ Department of Health's CEED program in Mercer County, partnering with local providers to deliver breast, prostate, colorectal, and cervical cancer screenings. By hosting events in trusted community spaces such as churches and senior centers—often on evenings and weekends—THT makes preventive care accessible to those who might otherwise go without. Since 2019, CEED participants have also received referrals for social needs like housing, transportation, and food insecurity. To date, THT has facilitated screenings for more than 4,000 residents, improving early detection and linking families to critical support.

Diabetes Care and Management

Since 2019, THT has partnered with organizations to respond to Trenton's diabetes crisis. Our Community Care team provides education, outreach, and one-on-one care management to help residents better manage their condition and avoid preventable complications. In 2024-2025, THT has delivered diabetes education and care management to 347 patients.

SHORT-TERM GOALS

- Expand access to health education events and preventive screenings for diabetes and cancer in community settings to reach at least 1,000 additional residents within the next year.
- Strengthen care management services for diabetes and hypertension, helping residents build self-management skills and consistent connections to primary care.
- Provide training and support to Community Health Workers (CHWs) to enhance outreach, navigation, and referrals for both medical and social needs.

LONG-TERM OUTCOMES

- Percent of Trenton adults with diabetes decreases toward the state average.
- Percent of Trenton adults with a primary care visit in the past year increases, closing the gap with New Jersey overall.
- Percent of Medicaid members with a hospital encounter for potentially preventable problems decreases.