CHILDREN'S HOSPITAL ASSOCIATION

FROM TRUST TO ACTION: WHAT DRIVES PUBLIC SUPPORT FOR CHILDREN'S HOSPITALS

November 10, 2026

AGENDA

- Introduction
- Overview survey findings
- Discussion of impacts & opportunities



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2026 Drivers of Trust in Children's Hospitals

Second annual survey of public views on trust in children's hospitals, perception of their quality, access and community partnership, and what drives the public's willingness to act on their behalf

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Field Dates: 7/16/26-8/2/26

Representative sample of U.S. adults age 18+

Oversample of parents

N = 2016, Margin of error: ± 2.2%

About Jarrard and Chartis

Serve All

of the Best Children's Hospital Honor Roll

US News & World Report

Best Overall Healthcare Management

Consulting firm for 5 Consecutive Years

KLAS Research

Serve Over Half

of the Best Hospitals Honor Roll

US News & World Report

Thought Leader

and Author of *The Future of Children's Hospitals: What's Next for Child Health*

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CHARTIS

With us, our clients...

- Accelerate change
- Achieve partnership and growth goals faster
- Increase thought leadership recognition
- Protect reputation in times of crisis
- Seize opportunities to improve healthcare



We've helped

1,800+

healthcare organizations in 49 states



Ranked among the

Top 10

healthcare communications firms in the country



$100B

in announced M&A and partnership transaction communications

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Driving Strategy Through Real-World Data Insights

Whether on behalf of clients or in support of our nationally recognized consumer and clinician surveys, our team is skilled at developing, fielding and analyzing in-depth polls, surveys and focus groups.

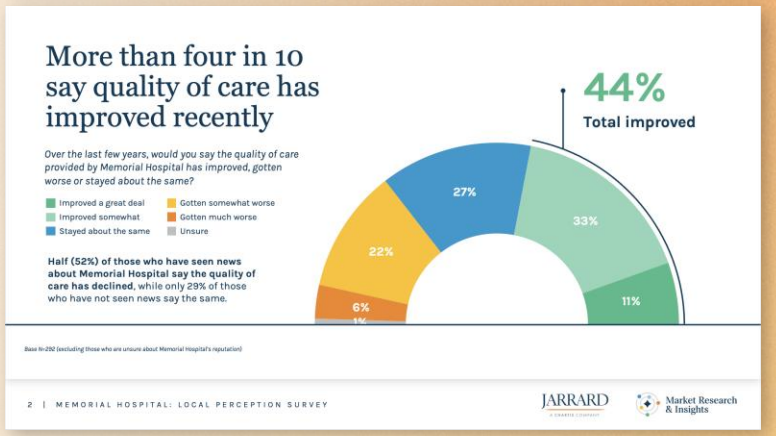
Our clients use data-driven insights to connect with key stakeholders, effect change and establish a better position within their market. Recent client and internal research has:

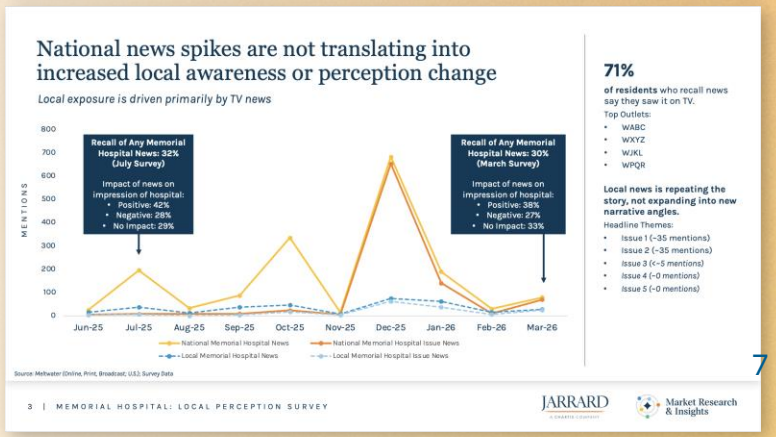
- Quantified patient priorities and behaviors when seeking care.
- Assessed public perception of and support for new healthcare facilities.
- Guided branding strategies for new healthcare facilities.
- Established strong public support for public affairs campaigns on sensitive social issues.
- Tracked patient sentiment during tense payer negotiations to prevent reputational harm.

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FROM 2025 TO 2026

How 2025 findings shaped this year's study

2025 established the strength…

- Trust in children's hospitals was high and clearly distinct from how the public sees hospitals in general.
- That advantage held across nearly every demographic group.

…and located the gap

- Credit for community benefit lagged behind that trust — much of the public was unsure what children's hospitals do beyond acute care.

2026 moves to trust and action

- Going beyond nonprofit status & community benefit
- 24 elements across seven pillars of trust, modeled to separate what builds trust from what drives action.
- Willingness to **act** measured across levels of commitment

79%

trusted children's hospitals with the health of their children

62%

said they provide enough community benefit; one in five were unsure

71%

agreed they earn their nonprofit status — vs. 51% for hospitals in general

2025: more than 1,000 U.S. adults age 18+, margin of error ±3.2%. 2026: more than 2,000 U.S. adults age 18+, margin of error ±2.2%. The two studies used different instruments and samples and are not directly comparable.

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Understanding What Drives Trust in Children's Hospitals

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Understanding What Drives Trust in Children's Hospitals

Quality & Expertise

- Caring for children with serious illnesses and complex medical conditions
- Providing high-quality medical care for kids in my area
- Providing access to doctors and specialists with expertise in children's health
- Making sure families have the follow-up care, therapy, resources and support they need after leaving the hospital

Access & Affordability

- Maintaining access to pediatric specialists and services close to home
- Making sure children can receive care regardless of their family's financial situation
- Helping families get timely appointments and care when they need it
- Using virtual care options, such as telehealth and remote monitoring, to improve access to pediatric specialists

Compassionate Care

- Helping children feel comfortable and less afraid during medical care
- Helping families understand their child's condition and care options
- Listening to parents' questions and concerns

Equity

- Providing the same high standard of care to every child
- Understanding and meeting the needs of families from different background
- Having doctors and staff from diverse backgrounds that reflect the community they serve

Community Impact

- Training the next generation of pediatric doctors and nurses
- Supporting programs that improve the health and wellbeing of all children in the community, such as nutrition, housing and injury prevention
- Improving access to behavioral and mental health services for children and adolescents

Innovation & Research

- Using advanced medical technologies, such as advanced imaging and specialized treatments, to improve care for children
- Investing in research to develop new treatments for childhood illnesses and diseases
- Leading efforts to address the biggest health challenges facing children
- Using artificial intelligence (AI), such as tools that help doctors diagnose illnesses and personalize care, responsibly to improve care for children

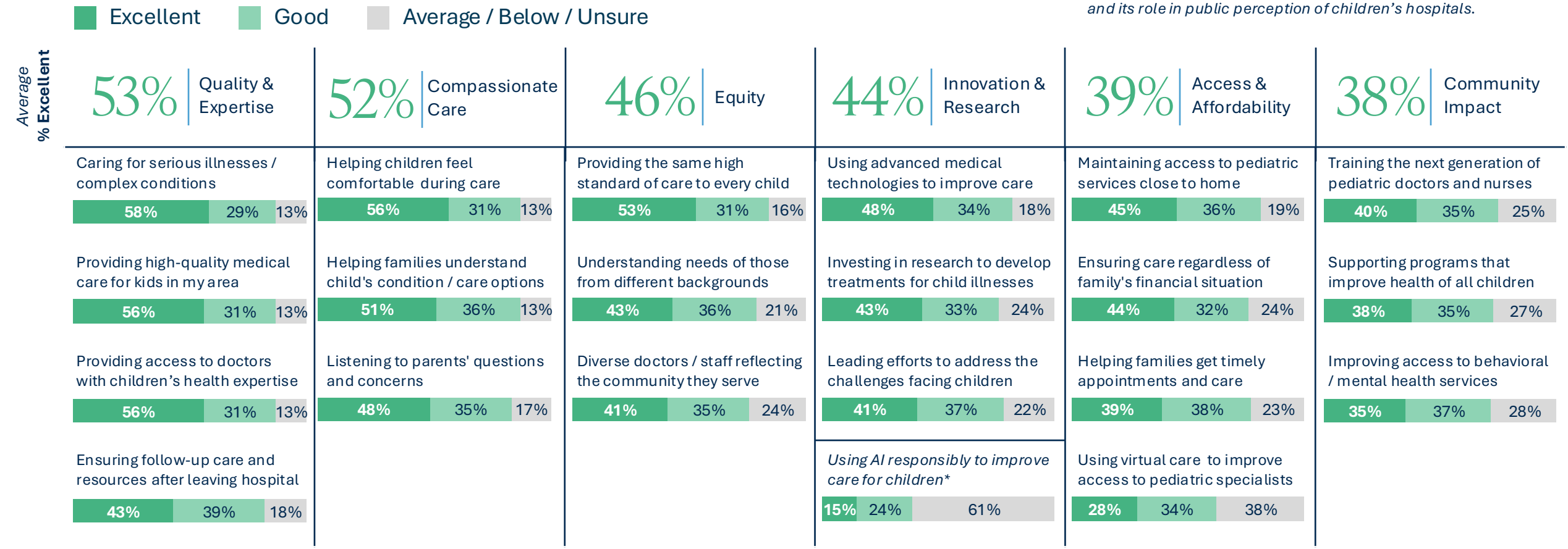
Institutional Trust

- Being a trusted source of information on children's health issues
- Acting in the best interests of the communities they serve
- Putting patients' needs above financial interests

Consumer-stated ratings of children's hospitals

Based on what you know or have heard, whether through personal experience or other sources, how would you rate the children's hospital you're most familiar with when it comes to each of the following?

**AI was excluded from the Innovation & Research average because its individual score was so low. Further analysis will be conducted in future surveys to better understand this element and its role in public perception of children's hospitals.*



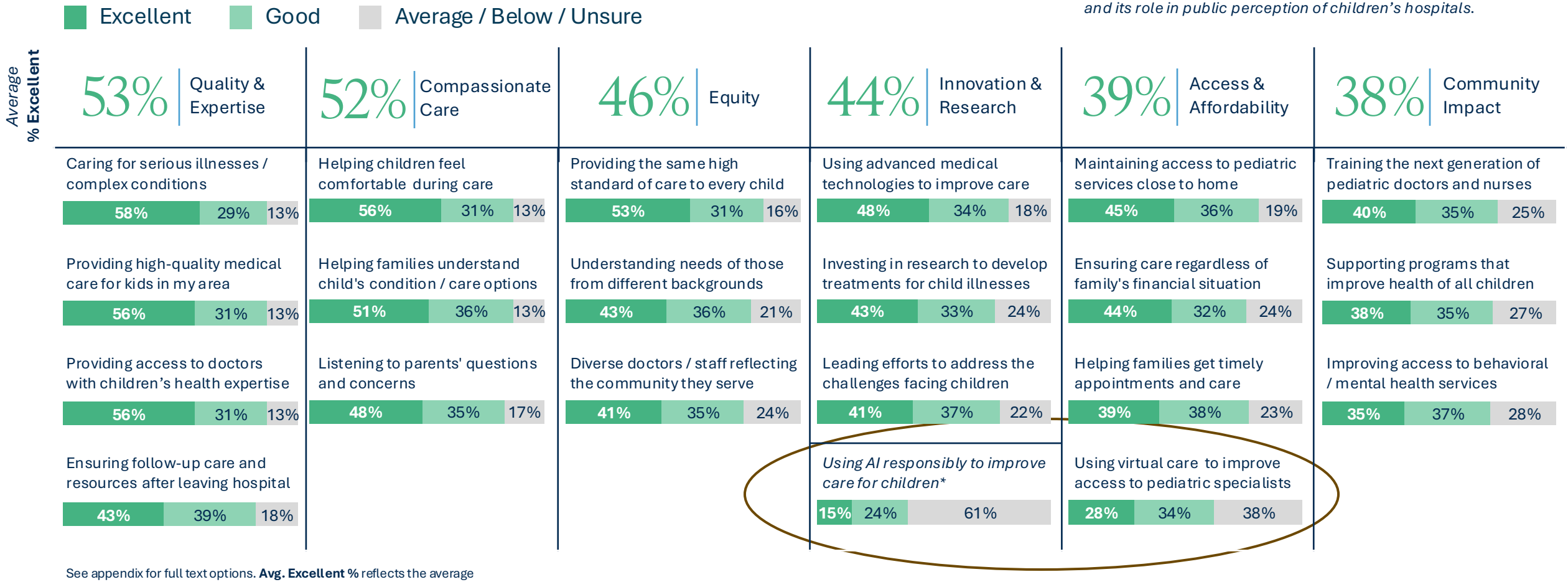
See appendix for full text options. Drivers of trust are based on respondent-level averages across items within each domain (1–5 scale from Poor to Excellent; "Unsure" excluded). **Avg. Excellent %** reflects the average share of rated items marked Excellent.

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Consumer-stated ratings of children's hospitals

Based on what you know or have heard, whether through personal experience or other sources, how would you rate the children's hospital you're most familiar with when it comes to each of the following?

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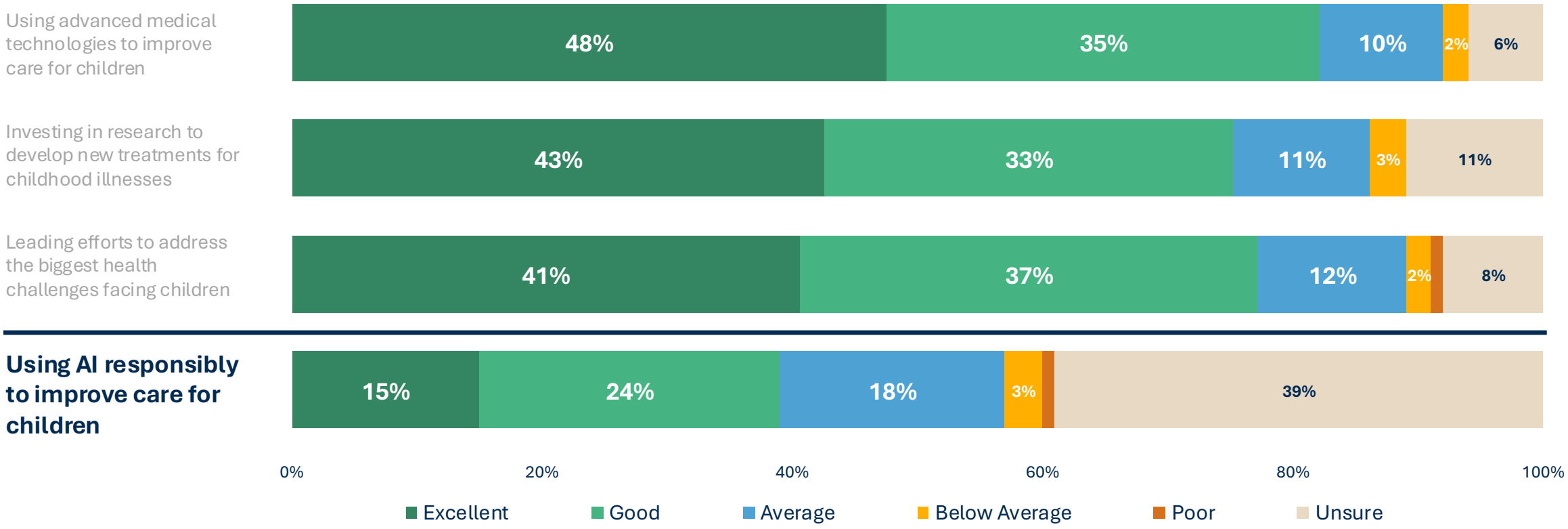
AI in Pediatric Care

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The public is unsure about the use of AI in children's health

Based on what you know or have heard, whether through personal experience or other sources, how would you rate the children's hospital you're most familiar with when it comes to each of the following?

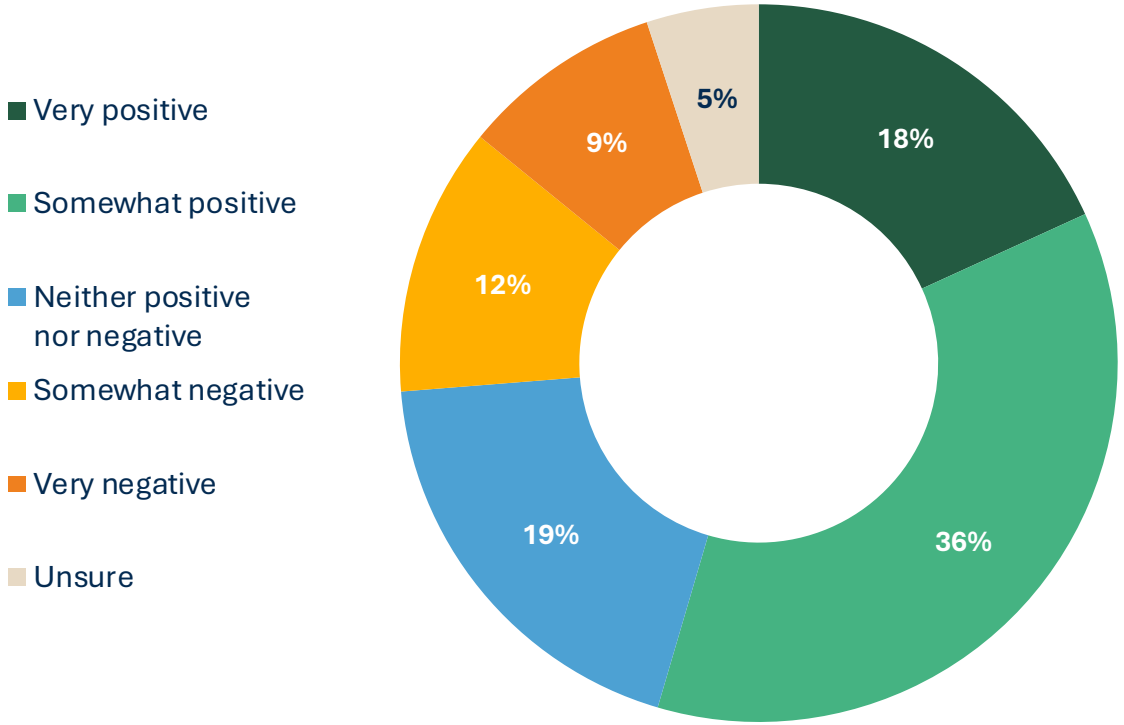


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Over half are at least somewhat optimistic about the use of AI for pediatric care, but with some caveats

Overall, do you think use of AI by doctors will have a positive or negative effect on children's healthcare?



	Very Positive	Difference from Average
Special healthcare needs	**27%**	+9
Donors/volunteer	**24%**	+6

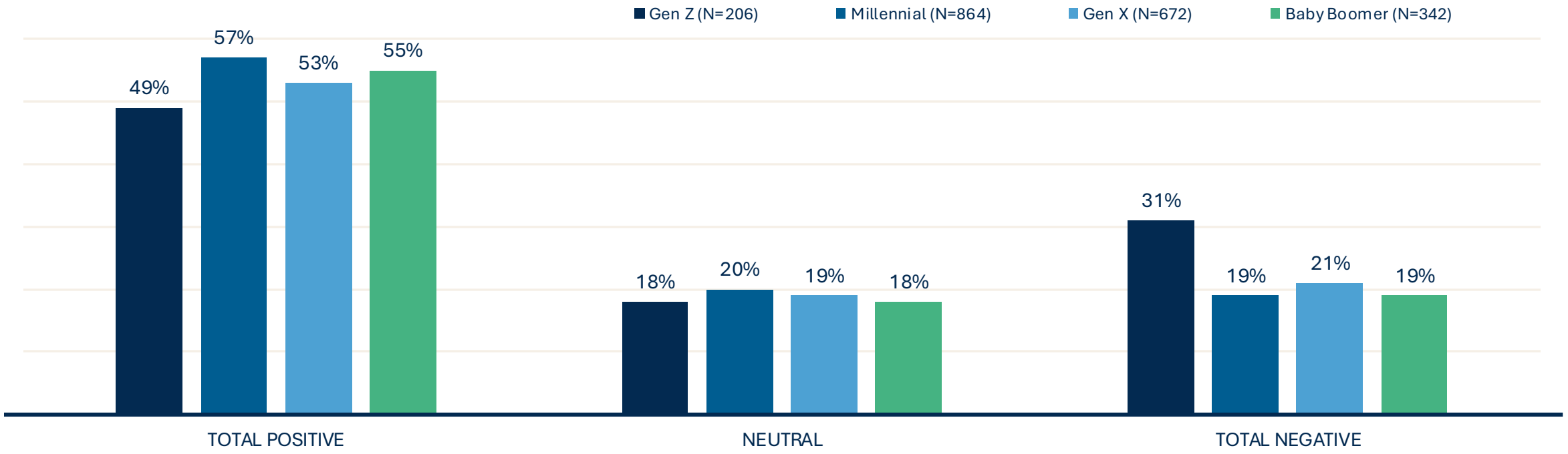
	Very Negative	Difference from Average
<$50,000	**13%**	+5
Rural	**15%**	+7

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Gen Z significantly less positive than other generations about overall effect of AI on children's healthcare

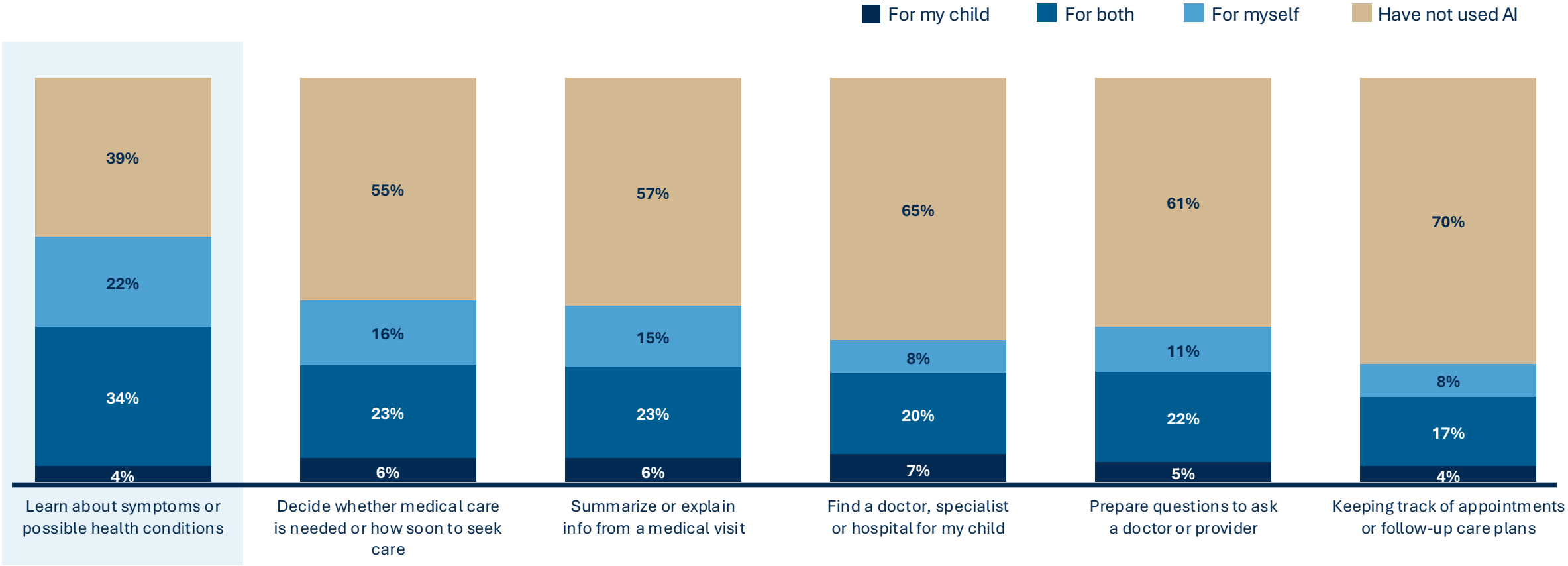
Overall, do you think use of AI by doctors will have a positive or negative effect on children's healthcare?



Note: Generational groups are defined by respondent age: Gen Z (18–29), Millennials (30–45), Gen X (46–61) and Baby Boomers (62–80).

Personal use of AI for pediatric medical purposes (not search) is low

Some people use AI tools, such as ChatGPT, Gemini, Claude or Microsoft Copilot, to find information or help make decisions. Have you used AI tools in any of the following ways for your own health, your child's health, both or neither?

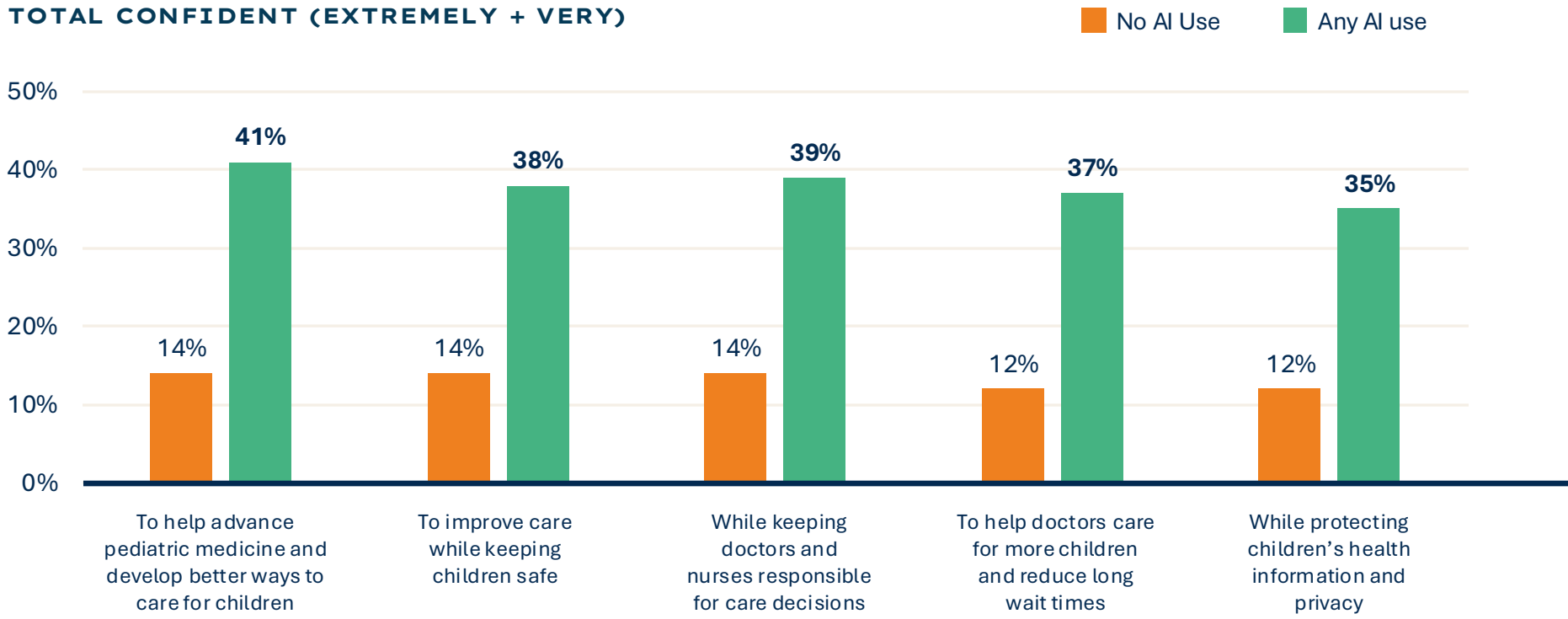


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Those who use AI are substantially more confident in children's hospitals' ability to use it responsibly

Children's hospitals are beginning to use AI to help support patient care. AI can assist doctors and hospital staff in severa l ways, such as reviewing medical images (like X-rays and MRIs), supporting diagnosis and treatment decisions, taking notes during patient visits and helping manage medical records and scheduling. How confident are you that children's hospitals can use AI…

Confidence in children's hospitals' ability to use AI is consistently higher among AI users. Across all five measures, **35%-41%** of AI users are very/extremely confident, compared with just **12%-14%** of non-users - a consistent gap of more than 20 points, though confidence never reaches a majority even among AI users.



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Understanding Trust and Action

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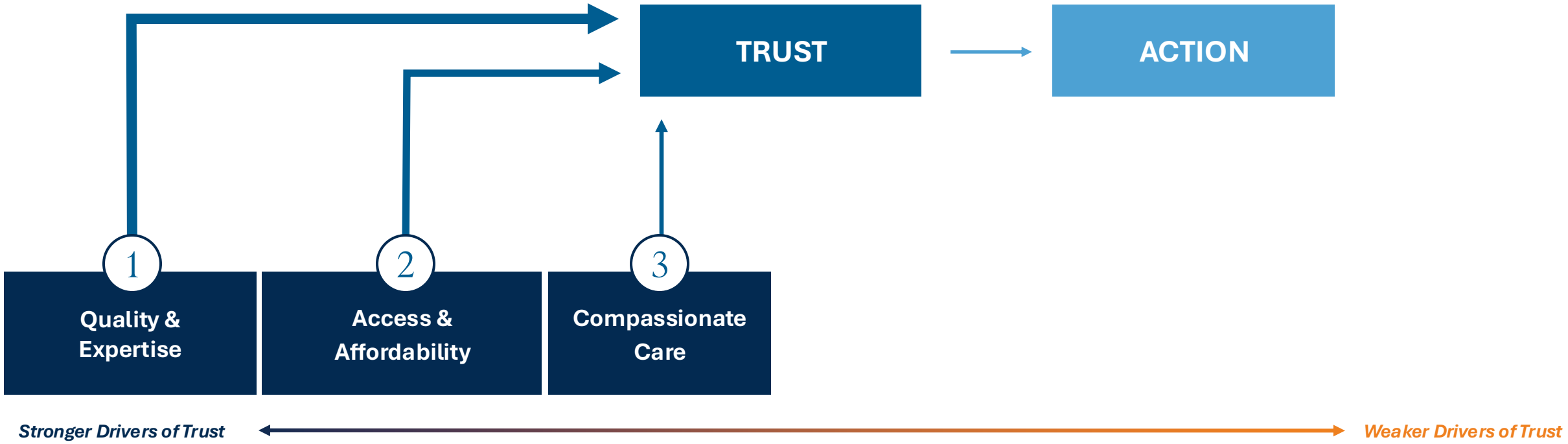
Average **% Excellent**

53% Quality & Expertise	52% Compassionate Care	46% Equity
44% Innovation & Research	39% Access & Affordability	38% Community Impact

See appendix for full text options. **Avg. Excellent %** reflects the average share of rated items marked Excellent across items within each category.

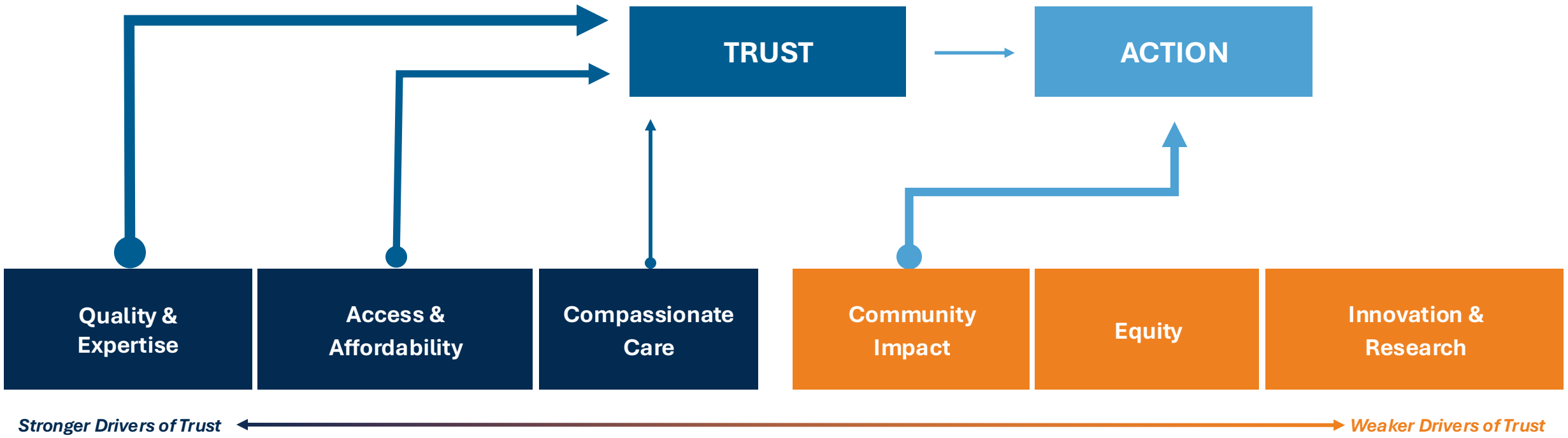
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Quality & expertise, access & affordability and compassionate care drive trust.



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Quality & expertise, access & affordability and compassionate care drive trust. **Community impact drives action.**



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Measuring willingness to act on behalf of children's hospitals across commitment areas

We identified the following high-value activities on behalf of children's hospitals – and asked how likely consumers would be to do them

Active Voice

LOWER COMMITMENT

- Speak positively about them to friends or family
- Defend them if someone criticized them
- Share supportive information on social media

Policy Advocacy

MODERATE COMMITMENT

- Support increased public funding for local hospitals
- Sign a petition supporting them
- Support temporary tax measures to stabilize hospitals
- Contact an elected official in support of them

Personal Contribution

HIGH COMMITMENT

- Volunteer time
- Make a personal financial contribution

See appendix for frequencies of individual items.

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Understanding What Drives Trust in Children's Hospitals

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In their own words, most define a “good community partner” in terms that go beyond quality

In your own words, what does it mean for a hospital to be a “good community partner”?

“Provide the best and compassionate care.”

EXPERIENCE: PATIENT-FIRST CARE, COMPASSION & QUALITY

“Care more about the health of the community than money or profit.”

PEOPLE OVER PROFITS

“Listening to the people who are living in the community.”

LISTENING & RESPONSIVENESS

“Offer affordable services for the general public.”

AFFORDABLE & ACCESSIBLE CARE

“Conduct community outreach and support public health efforts.”

COMMUNITY OUTREACH & INVOLVEMENT

“Provide the same care for all people.”

EQUITY

“Trustworthy, honesty, dignity.”

TRANSPARENCY

Having an active voice on behalf of children's hospitals is more likely when seen as good community partners

ACTIVE VOICE

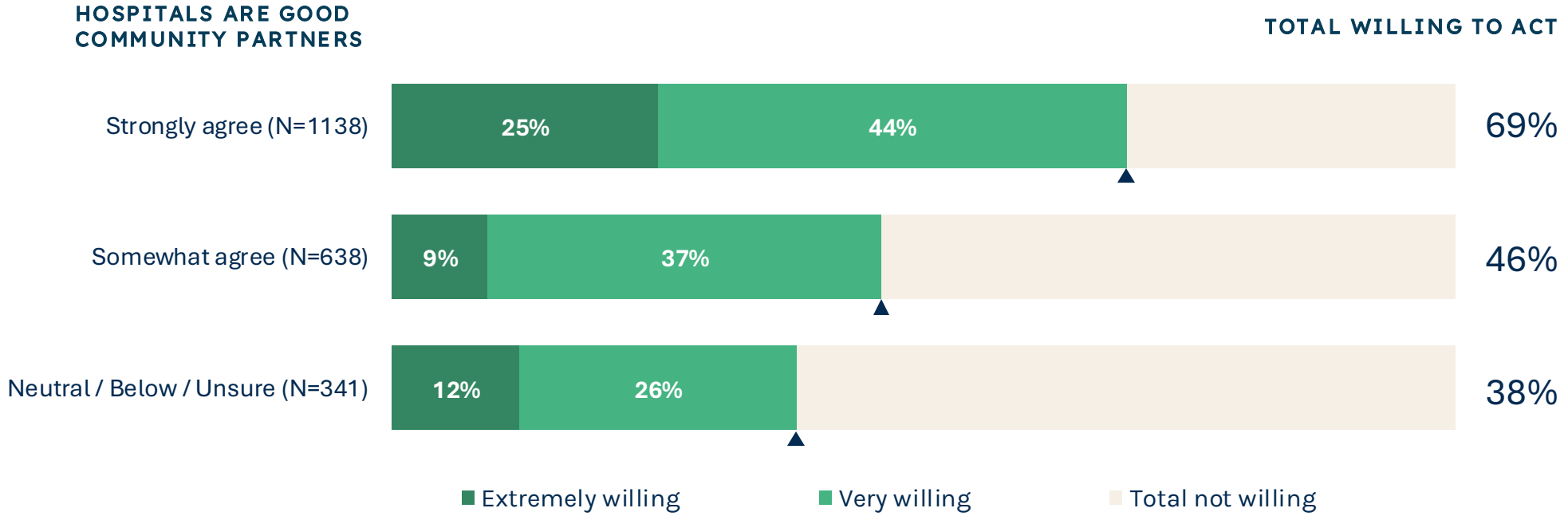
Speak positively to friends/family, defend when criticized, share supportive information on social media

If children's hospitals in your area faced a major crisis (such as major cuts in government funding) and you were asked to take action, how willing would you be to do each of the following?

+26

AMONG "STRONGLY AGREE"

***43%** Willing to act among all others*



Willing to act is based on the average across items within action domain (1–5 scale from not at all to extremely willing; "unsure" excluded), categorized as extremely (4.5 and above), very (3.5–4.49) and total not willing (<3.5).

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Advocating on policy issues is more likely when hospitals are seen as good community partners

If children's hospitals in your area were publicly criticized or facing a major crisis (such as financial instability, a natural disaster or a public health emergency) and you were asked to take action, how willing would you be to do each of the following?

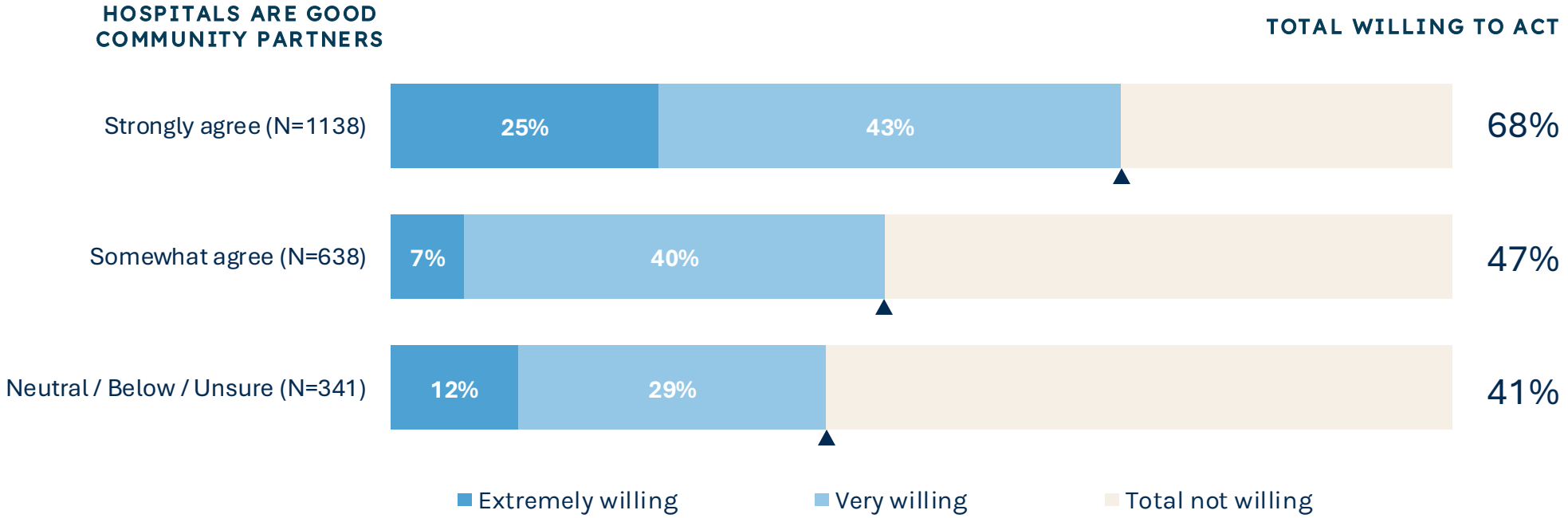
POLICY ADVOCACY

Support increased public funding, sign a petition, support temporary tax measures, contact an elected official

+24

AMONG "STRONGLY AGREE"

***44%** Willing to act among all others*



Willing to act is based on the average across items within action domain (1–5 scale from not at all to extremely willing; "unsure" excluded), categorized as extremely (4.5 and above), very (3.5–4.49) and total not willing (<3.5).

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Contributing time or money is more likely when hospitals are seen as good community partners

PERSONAL CONTRIBUTION

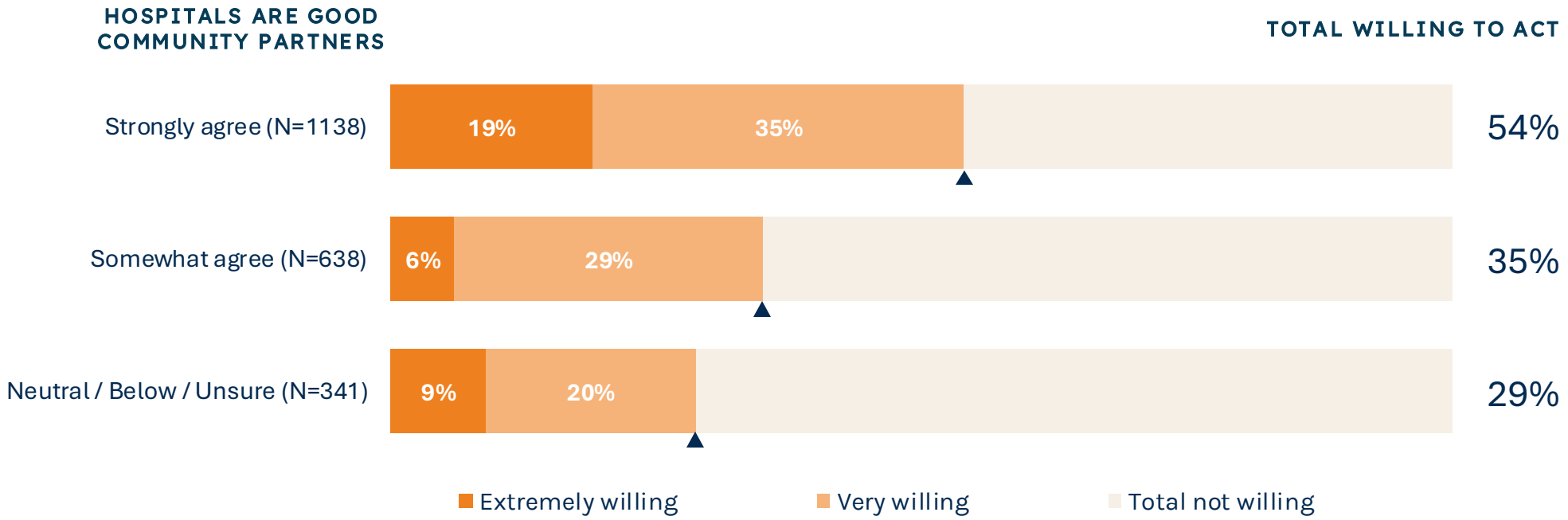
Volunteer time, make a personal financial contribution

If children's hospitals in your area were publicly criticized or facing a major crisis (such as financial instability, a natural disaster or a public health emergency) and you were asked to take action, how willing would you be to do each of the following?

+21

AMONG "STRONGLY AGREE"

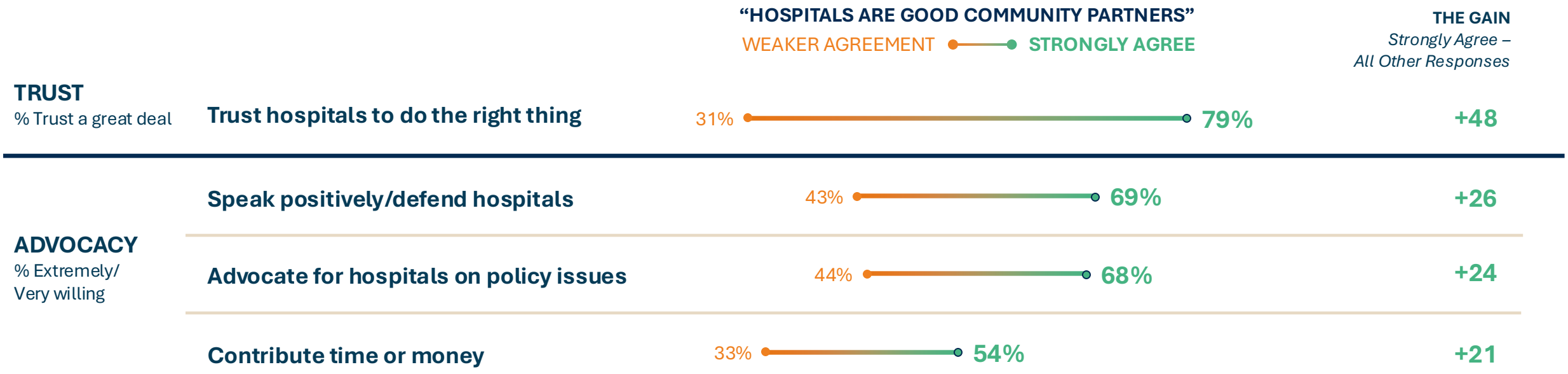
***33%** Willing to act among all others*



Willing to act is based on the average across items within action domain (1–5 scale from not at all to extremely willing; "unsure" excluded), categorized as extremely (4.5 and above), very (3.5–4.49) and total not willing (<3.5).

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Strong belief that children's hospitals are good community partners drives dramatic increase in trust and action



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Key Insights

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Key Insights

1. Clinical quality + compassion is the foundation of trust, but perception of community impact drives action. Children's hospitals should drive action and advocacy using two parallel levers:

- Continue to build trust by showcasing Quality & Expertise, Access & Affordability, and Compassionate Care.
- Motivate action by highlighting the community impact work underway – that is, work that goes beyond the provision of medical care within the clinical setting.

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2. Emphasizing commitment to maintain access and affordability drives both trust and action.

- This is also consistent with last year's findings on what drives community benefit/tax exempt perception

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3. Believing in the hospital as a "community partner" drives the most valuable kinds of advocacy.

- It increases willingness to give money and to actively engage in policy discussions from 10 to 26 percentage points

Key Insights

4. A majority say the effects of Medicaid changes will go beyond those covered by the program, but political affiliation and personal experience influence whether changes are viewed as positive or negative.

- Medicaid/CHIP families are highly willing to take action, so continue to rely on this population as advocates. But keep the focus on support for children's hospital support rather than Medicaid policy positions.

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5. AI represents a risk…and opportunity.

- People are skeptical and uncertain about the use of AI in pediatric care in general, and the primary concern is privacy.
- At the same time, AI is a component of the Innovation & Leadership pillar of trust, which drives perception of community partnership.

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6. A distinct children's hospital brand represents a meaningful advantage for health systems.

- Those most familiar with children's hospitals report higher levels of trust and more favorable perceptions.

Key Insights: Segmentation

Parents in rural communities differ from their urban counterparts in several ways:

- More positive on several measures of trust, particularly community partnership and compassionate care
- More skeptical about AI in pediatric care
- More likely to say the effects of Medicaid cuts will be limited to those covered by the program

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Nonwhite respondents are more skeptical about clinical quality, a difference that disappears or even reverses for other elements of trust

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Uninsured respondents show a clear trust gap: Fewer than half say they trust children's hospitals "a great deal" to make difficult operational decisions.

Parents who have **children with special needs** have among the highest levels of trust and are among the most willing to act on behalf of children's hospitals.

Independents are less positive on many elements of trust than Republicans and Democrats.

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Jarrard Survey: Drivers of Trust in Children's Hospitals

Chartis Report: The Future of Children's Hospitals

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Appendix

Demographics and additional data

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Field Dates: 7/16/26-8/2/26

Representative sample of U.S. adults age 18+

Oversample of parents

N = 2016, Margin of error: ± 2.2%

About us

Our mission is to make healthcare better through our work.

Jarrard Inc. is a U.S. Top 10 strategic communications consulting firm focused on healthcare and the unique opportunities and challenges inherent in this sector. Founded in 2006, the firm has worked with more than 1,800 clients across 49 states and has led communications and political strategy on $100+ billion in announced M&A and partnership transactions.

With offices in the healthcare hubs of Nashville, Chicago and D.C., Jarrard partners with leaders across the spectrum of healthcare in high-stakes moments of growth, innovation, change and reputational/public affairs challenges. Jarrard brings deep experience supporting children's hospitals as they build trust, navigate change and strengthen support among the communities and stakeholders they serve.

Jarrard Inc. is a division of Chartis, one of the nation's leading healthcare advisory firms.

For more information, visit jarrardinc.com.

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Methodology

We conducted an online survey of more than 2,000 adults age 18+ from across the U.S. The survey took 17 days to complete. The margin of error is ±2.2%. We oversampled parents to ensure strong representation of that key audience, without excluding the perspective of non-parents.

Survey respondents comprised a representative sample of the overall population on demographics including:

- Gender
- Race/ethnicity
- Age
- Census region
- Insurance type and status
- Household income
- Political affiliation

We collect and report race/ethnicity and insurance as "select all that aptly." For sampling, we align to standard Census definitions used in benchmark data.

To categorize respondents by environment (rural/urban), we mapped respondent zip codes to the USDA Economic Research Service Rural-Urban Commuting Area codes.

2025 survey: more than 1,000 U.S. adults age 18+, margin of error ±3.2%. The 2025 and 2026 studies used different instruments and samples, so 2025 figures are shown as context for this year's findings, not as a year-over-year trend.

Data quality and security is ensured though manual and automated review, including IP verification, link manipulation detection, duplication prevention and visual review of responses, among other safeguards.

All statistical analyses were performed using IBM SPSS Statistics.

Generative AI tools were used to support aspects of survey instrument development, analysis and reporting within a workflow in which research staff retained full oversight and actively directed the AI's use. All AI-assisted outputs were reviewed and validated prior to dissemination. AI usage occurred exclusively within a secure, zero-retention enterprise environment.

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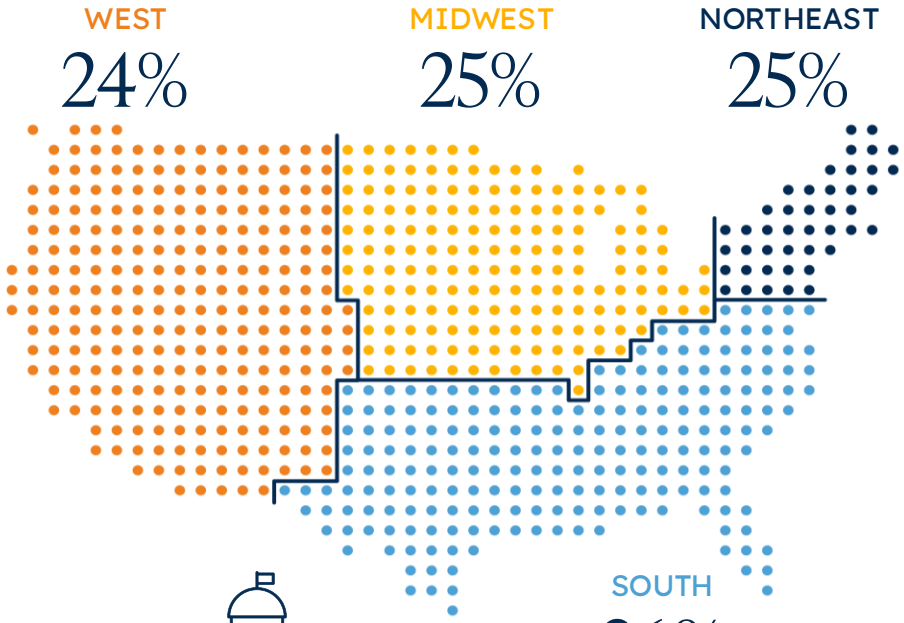
Demographics

N = 2017
Margin of error: ± 2.2%

Gender	
Female	51%
Male	49%

Age	
18-34	19%
35-44	29%
45-54	26%
55-64	12%
65+	14%

Environment	
Urban/Suburban	87%
Rural	13%



Race/Ethnicity (Select all that apply)	
White	69%
Hispanic or Latino	18%
Black or African American	17%
Asian	5%
American Indian or Alaska Native	3%
Hawaiian/Other Pacific Islander	1%
Middle Eastern/North African	<1%
Other	1%

Child's Health Coverage	
Private Health Ins.	64%
Marketplace/State Plan	12%
Medicaid/CHIP	25%
Other	2%
No health insurance	2%

Political Affiliation		
Republican		34%
Unaffiliated/Independent		21%
Democrat		43%
Parent/Caregiver < 18	Yes	58%
	No	42%
Parent/Caregiver 18+	Yes	28%
	No	72%

Household Income	
< $50,000	25%
$50,000-$99,999	31%
$100,000-$199,999	36%
$200,000 +	7%
Prefer not to answer	1%

Note: Totals may not add up to 100% due to rounding

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