

# **Southern Seven Health Department IPLAN**



**June 2015**

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## **Executive Summary**

Southern Seven Health department is pleased to announce the completion of the recertification application for the Illinois Project for Local Assessment of Needs (IPLAN). This five year plan, 2015 through 2020, includes the remittance of the Community Health Needs Assessment and Community Health Plan. This includes submitting supporting documents to the Illinois Department of Public Health for review and approval. A signed letter of approval from the Board of Health is required to accompany this recertification application document acknowledging the Organizational Capacity Self-Assessment was conducted, reviewed, and the community health plan adopted.

Southern Seven Health Department has a history of community planning, partnering, and collaborating with all seven counties. In 2009, when our last 2010 IPLAN process was completed a commitment was made to meet quarterly with partners from the region over the next five years and this commitment has been fulfilled. Through the Healthy Southern 7 Region Coalition, we have addressed many areas of health as a region, understanding the diverse population within the seven counties.

Southern Seven Health Department and a subcommittee of the Healthy Southern Seven Region formed a coalition to complete the 2015-2020 IPLAN. This project consisted of a community needs assessment and a community health plan that resulted in prioritizing the region's top four health problems and the creation of an action plan designed to reduce risk factors associated with those conditions:

1. Obesity
  - a. Promote healthier nutrition
  - b. Increase physical activity
  - c. Promote access to care
2. Cancer
  - a. Reduce use of tobacco products
  - b. Promote healthier nutrition
  - c. Increase physical activity
  - d. Advocate for policies to influence environmental changes
  - e. Promote access to care
3. Type II Diabetes Mellitus
  - a. Decrease overweight/obesity
  - b. Increase physical activity
  - c. Promote access to care

#### 4. Heart Disease

- a. Reduce blood cholesterol levels
- b. Reduce hypertension
- c. Reduce the use of tobacco products
- d. Promote access to care

In summary, Southern Seven in partnership with community stakeholders identified goals for the next five years in the following areas: promote increased physical activity; promote increased nutrition education; promote the continued efforts in the reduction of secondhand smoke exposure and the Illinois Quitline with healthcare providers for cessation; and finally promote early detection, screenings, and disease prevention efforts. As we continue to improve in these areas over the next five years, we hope to realize a decrease in overall cardiovascular disease, Cancer, Type II Diabetes and Obesity.

Engaging the community through multiple channels allowed the coalition to raise awareness about the region's current health status and promote healthier lifestyles throughout the seven southernmost counties of Illinois. For more information regarding the 2015-2020 IPLAN, contact Southern Seven Health Department at 618-634-2297 ext. 136 or visit [www.southern7.org](http://www.southern7.org).

## **Board of Health Review of the Organizational Capacity Assessment**

Southern Seven Health Department, according to the IPLAN requirements, has completed an Organizational Capacity Assessment. The assessment is an internal review of our local health department's capacity to provide public health functions. The benefit of the assessment process is that it assists the department in creating an organizational action plan that includes setting priorities for correcting perceived weaknesses and strengthening its leadership role in the community. The assessment shows results with areas of improvement specifically for administrative functions. The following eight steps are included in the organizational capacity self-assessment process:

1. Prepare for the Organizational Capacity Assessment
2. Score Indicators for Importance and Current Status
3. Identify Strengths and Weaknesses
4. Analyze and Report Strengths
5. Analyze and Report Weaknesses
6. Rank Problems in Order of Priority
7. Develop and Implement Action Plans
8. Institutionalize the Assessment Process

An internal review team made up of Administrators, Directors, and other key personnel identify and score a variety of indicators including the department's ability to conduct a community health assessment. Board of Health Executive members are also called upon to complete this assessment.

The signed letter of approval, from the Board of Health, that is required to accompany this recertification application documentation is on the following page.



## Southern Seven Health Department Administrative Office

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April 23, 2015

Tom Szpyrka, IPLAN Administrator  
Division of Health Policy  
Illinois Department of Public Health  
525 W. Jefferson Street  
Springfield, Illinois 62761-0001

Dear Mr. Szpyrka:

This letter is being sent to acknowledge that Southern Seven Health Department has conducted an Organizational Capacity Self-Assessment and that the Community Health Plan was reviewed and adopted as of this date by the Southern Seven Health Department Board of Health.

Sincerely,

Dr. Gene Zinn, President  
Southern Seven Board of Health

GZ:ja

## **Community Health Needs Assessment**

### ***Purpose Statement***

This needs assessment set out to identify the prevailing health conditions affecting the residents of the seven southernmost counties of Illinois. Using a holistic approach, the assessment process consisted of a community survey, analysis of individual and county-level health data, and community stakeholder participation. Stakeholders utilized the data obtained from the assessment process to prioritize the prevailing health conditions. This ultimately led to the development of an action plan with interventions aimed at improving individual and community health outcomes.

### ***Community Participation***

Southern Seven Health Department (S7HD) relied on the assistance of the Healthy Southern 7 Region Coalition (HS7RC) to help assess the seven-county region health status and establish the top four health priorities. In fact, the HS7RC has met quarterly over the last five years to address public health needs throughout the region. This diverse set of stakeholders provided valuable insight into regional dynamics affecting the community's health. Under the direction of S7HD, members of the HS7RC formed a subcommittee that agreed to participate in a needs assessment and community health planning process. A team of staff from S7HD and the HS7RC subcommittee held several meetings during the fall and winter of 2014 to analyze data, set priorities, and discuss strategies to improve the region's current health status. *Appendix A* lists the HS7RC and S7HD subcommittee members and their affiliations; a majority of the group participated in the 2010 IPLAN process.

### ***Method***

Southern Seven Health Department formed an internal team to develop a method for completing the community health needs assessment for the 2015-2020 IPLAN. As a guide, the team utilized the IPLAN's modified version of the APEXPH Part II. On August 5, 2014, the Community Health Education Director collaborated with this team to set the time line for completion of the needs assessment process. On September 9, 2014, the S7HD team met with the subcommittee of the HS7RC. At that meeting, the group reviewed a plethora of information on the seven southernmost counties of Illinois: demographics, socioeconomic status (educational attainment, employment status, median household income, family and social support, and community safety), disease incidence, mortality and morbidity rates, as well as county health rankings. This review and analysis utilized secondary data from a variety of sources. These included the National Center for Health Statistics, Illinois Center for Health Statistics, a division of the Illinois Department of Public Health; Illinois Department of Employment Security, the Illinois Behavioral Risk Factor Surveillance System (BRFS), and the IPLAN data system.

In addition to secondary data, the group also discussed distributing a community survey amongst residents of the seven counties to determine their perception of the most serious health problems facing their community. The committee decided to use a survey template from the 2010 IPLAN (*Appendix B*). Each stakeholder received twenty-five surveys to disperse to a range of individuals in an effort to capture data from residents of different races, socioeconomic groups, gender, education levels, and ages. The coalition set a deadline for the return of completed surveys and unanimously agreed to have the surveys returned to the health department, in a self-addressed stamped envelope, within the agreed upon timeframe.

Analysis of the secondary data and the community survey contributed to the coalition's estimation of the health status of the seven counties. Coalition members compiled data in accordance with IPLAN categories: demographic and socioeconomic characteristics, general health and access to care, maternal and child health, chronic disease, infectious disease, environmental/occupational/injury control. The final analysis of this data would contribute to the prioritization of the four top health priorities.

### ***Health Status of the Seven Southernmost Counties of Illinois***

#### ***Demographic and socioeconomic characteristics (Appendix C)***

Southern Seven Health Department is a multicounty health department that includes the following seven counties: Alexander, Hardin, Johnson, Massac, Pope, Pulaski, and Union. The region's ethnic composition remains consistent at 84.5% White, 13% Black/African American, and 2.5% Hispanic/Latino. Geographically the area is 2003 square miles and has a population of 67,363, which is a 4% reduction since the 2010 IPLAN. Alexander and Pulaski counties reported the most significant decreases in population, while Johnson County is the only county reporting a population increase. This decline is due, in part, to residents moving from the area in search of improved job opportunities.

Due to lack of commerce and employment opportunities, 20.1% of persons are living below poverty level. This is down slightly from 2010, but remains much higher than the state average of 14.1%. The seven-county median household income is \$37,393, a slight increase since the 2010 IPLAN. In comparison, the State of Illinois median household income is \$56,797. Average income per capita for the seven counties is \$19,832, up 5% from \$16,086 in 2010, while Illinois increased by 4.5% from \$23,104 to \$29,666. According to the Illinois Department of Employment Security for November 2014, only one county, Massac, has an unemployment rate lower than the state unemployment rate of 6.9%. The seven-county average unemployment rate is 7.8%.

Finally, the percentage of adults 25 or over with at least a high school education is 82.7%. Due to the competitiveness of the current job market, it has become increasingly important for families to receive post-secondary education in order to acquire the income needed to meet their basic needs. Approximately 14% of adults within the seven counties have attained a Bachelor's



Degree. As previously stated, residents with a Bachelor's Degree or higher often leave the area in search of job opportunities commensurate to their qualifications.

Rural geography, socioeconomic status, and educational attainment play a major role in the health status of the seven southernmost counties of Illinois. Lack of income and the inability to traverse the region make it increasingly difficult for residents to participate in healthy lifestyles that include proper nutrition, adequate physical activity, and access to preventative medical services—all of which are necessary to combat many of the health problems afflicting residents of the region.

#### *General health and access to care*

Residents' remain optimistic about their health. In fact, according to the Illinois Behavioral Risk Factor Surveillance System data (*Appendix D*), 43.7% of persons report excellent/very good general health, 47.8% report good/fair and 8.6% report poor health. However, reviewing the Reported Days of Physical Health Not Good, 23% reported 1 to 7 days and 22.9% reported 8 to 30 days, which is an increase from Fourth Round IPLAN data.

Data from the County Health Rankings and Roadmaps (2015) reveals that residents may have an inaccurate perception of their community's health status: county health rankings indicate that all seven counties with the exception of one in the area of health outcomes, rank in the lowest third of the State of Illinois' 102 counties; this is for both health factor and health outcome rankings. Health factor rankings include Johnson County at 76, Union County at 84, Pope County at 86, Massac County 95, Pulaski County at 98, Hardin County at 101, and Alexander County at 102. Health outcome rankings have Johnson County at 55, Union County at 74, Alexander County 93, Hardin County at 96, Pulaski County 99, Pope County at 101, Massac County at 102.

According to a Healthy Southern Illinois Delta Network assessment of Behavioral Risk Factor Surveillance (BRFS) data, most of the seven counties rank high in risk factors attributed to many chronic diseases. These risk factors include reported high blood pressure, high blood cholesterol levels, low intake of fruits and vegetables, and reported low numbers of persons meeting and or exceeding the recommended standard of physical activity. One health behavior that has decreased is smoking, which is a risk factor for many of the chronic diseases reported by residents of the seven counties. Smoking, according to the BRFS, has dropped to an average of 25.8%, down from 30% in the fourth round 2007-2009 data.

Access to care seems to be increasing due to local Department of Human Services (DHS) offices linking more clientele to medical providers; however, the community survey shows that the population still perceives this as an issue. There are three hospitals (approximately 25 beds each) in the region: Hardin County, Massac County, and Union County. There are two Federally Qualified Health Care (FQHC) centers: Rural Health Inc. (RHI) with clinics in Union and Johnson County and Community Health and Emergency Services, Inc. (CHESI) with clinics in Alexander, Pope, Pulaski, and Hardin County. Currently no clinic is open in Pulaski County. In

“Massac County, there are two rural health centers, Massac Memorial Medical Clinic and a Comprehensive Health Center.”

### *Maternal and child health (Appendix E: 1, 2)*

There are no delivering hospitals within the seven counties; however, there are OB/GYN providers in both FQHCs and at the Comprehensive Health Center in Metropolis. S7HD, through Maternal Child Health funding, continues to address and work to improve earlier prenatal visits and decrease infant mortality rates. The Women, Infants, and Children (WIC) program showed first trimester pregnancy entry into the program at 68% in 2011, 60% in 2012, 64% in 2013, and 63% in 2014. The Family Case Management program for first trimester pregnancy entry into the program was at 72% in 2011, 64% in 2012, 69% in 2013, and 66% in 2014. The total number of low birth weight infants has remained steady from IPLAN 2010 data while the total births continue to decline through 2013. Teen pregnancy births continue to decline: there were 115 births (16.4%) in 2009 and 94 births (13.2%) in 2010. This trend is consistent with figures across the rest of the state, which has a total teen birth rate of 9.1%.

### *Chronic disease*

Chronic disease continues to be the primary cause of mortality in S7HD’s jurisdiction (**Appendix F**). According to IDPH vital statistics, cancer is now the leading cause of death in the seven counties accounting for 23.3% of all deaths. The cancer death rate for the seven counties is 280 per 100,000, while Illinois is 183.9 per 100,000. According to Illinois NCI/CDC Cancer Data released in February 2014, four of the seven counties are in the top twenty Illinois counties with All-Cancers Death Rates in the Highest Quantile Interval (**Appendix G**): Hardin County ranks first in the state, Alexander County third, Pulaski County fourth, and Massac County is fourteenth. The seven counties also include three of the top ten counties in Illinois with the highest Lung and Bronchus cancer death rates: Hardin County is number one; Massac County number two; and Alexander County number four. Alexander was identified as priority 1, assigned by CDC, with six other Illinois counties for focusing cancer control efforts in the 2010 IPLAN. In looking at 2011, Alexander has now dropped to 28<sup>th</sup> in the state and is holding stable.

Disease of the heart accounted for 22.7% of the deaths in the seven counties in 2010. Both the seven county region and the state have decreased in heart disease deaths overall since the completion of the 2010 IPLAN. However, heart disease deaths for the seven counties total 272 per 100,000 which is considerably higher than the state, which reports 194 deaths per 100,000 populations. Unfortunately, there appears to be an increase in the percentage of participants who were told they had high blood cholesterol: 38.5% of BRFs participants in 2007-2009 versus 46.6% of 2010 BRFs participants. The surge could be the result of increased screenings.

Diabetes has decreased slightly from the 4<sup>th</sup> round BRFs of 12% to 11.7% in the 5<sup>th</sup> Round. The rate remains substantially higher than the state average of 8.5% in 2010. It is estimated that 9.3% of the United States population has diabetes with 27.8% of these cases being undiagnosed. In

addition to the increasing number of individuals diagnosed with diabetes, it is estimated that 33% of US adults have prediabetes.

The prevalence of overweight and obesity in both children and adults continues to be a public health concern. The overweight and obesity rate of the southern seven counties has continued to rise and remains higher than the Illinois average at 71% and 62% respectively. In 2010, an average of 27.7% of Illinois adults were obese while obesity rates for the southern seven counties averaged 35.8%. Overweight and obese individuals are at greater risk for developing chronic health conditions and diseases.

### *Infectious disease*

Sexually transmitted infections continue to be the most prevalent cause of monitored infectious disease throughout the seven counties. Of the sexually transmitted infections, the most common are chlamydia, followed by gonorrhea with just a single case of syphilis. During the 3 years of 2012 through 2014, chlamydia cases have showed a small increase in all of the seven counties with a total of 249, 256, and 272 respectively. Gonorrhea cases for the same period have remained steady with a small decline in 2014; the numbers show 45, 46, and 37 respectively. There was 1 case of syphilis reported during 2012-2013.

Other reported infectious diseases include: tuberculosis (from 2012 to 2014 S7HD had 1 active case and treated 12 clients for latent tuberculosis infection), 14 confirmed salmonella cases, 6 cases of hepatitis B, 60 confirmed hepatitis C cases, 3 ehrlichia chaffeensis cases, 3 lyme disease cases, and 2 confirmed cases of rocky mountain spotted fever and 18 probable.

### *Environmental/occupational/ injury control*

High blood lead levels (BLL) in children remain an environmental focus for the region; fortunately, the number of children screened showing high BLL has continued to decline. S7HD clinics and FQHCs routinely screen children for high BLL. In the seven counties, clinicians reported 15 children with elevated BLL. Pope County reported no high BLL on the 266 children screened. The State of Illinois revealed that 6% of children tested had elevated BLL while S7HD testing revealed a 3% rate of elevated BLL.

Neither homicide nor vehicle accidents were identified in the top twelve causes of death in the seven counties during 2010 or 2011. Suicides accounted for 1.1% or 5 total deaths in the seven counties during 2010 and 1.5% or 13 total deaths in 2011.

### ***Establishing Priorities***

Establishing the top priorities consisted of an analysis of the aforementioned data groupings and the community survey. When the coalition convened on October 28, 2014, community survey results were available and there was a discussion of the findings. Stakeholders distributed nearly 600 surveys, twice as many as in 2010. By the end of October, the coalition received 582 surveys

(97%) with 456 (78%) accurately completed and 126 (22%) inaccurately completed. Survey results showed community perception of the number one health problem to be Cancer, Access to Medical Care, Obesity, Diabetes, and Accidents (*Appendix H*). After using weighted vote calculation the priorities were Cancer #1, Heart Disease/Stroke #2, Diabetes #3, Obesity #4, and Access to Medical Care #5 (*Appendix H*).

Coalition members used the Hanlon method and criteria weighting to identify and rank the health problems for the seven counties (*Appendix I*). Comparing the analyzed secondary data and information with the community survey, members completed the health problem priority setting worksheet by assessing each health problem as to the size of the problem, seriousness, effectiveness of interventions, priority score, and rank. This process led to the classification of the five health problem priorities:

1. Obesity
2. Cancer
3. Type II Diabetes Mellitus
4. Heart disease
5. Access to medical care

Since the definition of access to medical care was not clearly defined on the community survey, the group decided to keep only four priorities for this IPLAN, but to include information on access to care while discussing the other four priorities.

## **Community Health Plan**

### ***Board of Health Adoption***

The Board of Health for Southern Seven Health Department approved and adopted the community health plan on April 23, 2015.

### ***Purpose Statement***

Creating a community health plan provides S7HD and other stakeholders a strategic framework that can guide program development, implementation, and evaluation through 2020. Utilizing scientific data and receiving community feedback allowed for the formation of relevant, realistic, and effective interventions. Stakeholders will employ this action plan to address the top four health priorities and increase vitality throughout the seven southernmost counties of Illinois.

### ***Community Participation***

S7HD staff and the HS7RC subcommittee transitioned from the needs assessment to the community health plan by meeting several times over the course of five months. Stakeholders from all seven counties were present to provide information on resources available to the community. Knowing the resources available to the community allowed planners the ability to develop realistic objectives and interventions. With such a large geographic territory, it was crucial to have these participants available for discussion and feedback. S7HD staff facilitated these meetings using IPDH IPLAN workbook as a guide.

### ***Community Health Plan Process***

Several influences led to the creation of the community health plan. First, S7HD staff performed a literature review on risk factors associated with the top four health priorities prior to meeting with the entire coalition. Next, in December of 2014, S7HD presented this information to the HS7RC subcommittee, which then began to complete the Health Problem Analysis Worksheet for each priority (*Appendix J: 1, 2, 3, 4*)

An additional meeting took place where committee members began to identify community health resources for the direct and indirect contributing factors. Listed on the Community Health Plan Priority sheets are the resources for each of the top four health problems. Attendees used the Centers for Disease Control and Prevention and The Community Guide to review best practices and strategies to address contributing factors. This guide provided recommended strategies to address various areas of need. Planners also researched Healthy People in Healthy Communities (Healthy People 2020) for objectives related to the four health priorities. Healthy People 2020 provided the group suggestions on broad-based prevention efforts including moving beyond what happens in physicians' offices, clinics, and hospitals to include policy development ideas and sustainability projects towards better health. S7HD working directly with UIC Center for Research on Women and Gender over the last seven years has broadened our capability to

promote and support these systems and environmental changes. Lastly, using this information, S7HD staff completed Community Health Plan Worksheets for each priority. These worksheets laid out the final plan, including all objectives and interventions, for each priority.

## ***Description and Analysis of the Priority Health Problems***

### **Obesity - #1 Priority**

#### *Mortality and morbidity*

The prevalence of overweight and obesity in both children and adults continues to be a public health concern. The national average for overweight and obesity in adults is 68.5% with 34.9% being obese. The overweight and obesity rate of the southern seven counties has continued to rise and remains higher than the Illinois average at 71% and 62% respectively. In 2010, 27.7% of Illinois adults were obese while obesity rates for the southern seven counties averaged 35.8%. With an estimated one in five children being obese, Illinois is ranked 10<sup>th</sup> in the country for overweight and obese children aged 10-17 years of age.

A plethora of chronic health conditions and diseases are associated with obesity including cancer (#2 priority), diabetes (#3 priority), heart disease (#4 priority), stroke, hypertension, high cholesterol, respiratory disease, fatty liver disease, kidney disease, sleep apnea, osteoarthritis, and reproductive problems. Obesity in adults adds \$3.4 billion to Illinois' annual health care costs and, along with its comorbidities, accounts for 43% of national health-care spending by businesses. Obesity in children results in similar health concerns as adults. In addition, social stigma associated with youth obesity can lead to serious psychological and emotional burdens resulting in increased levels of sadness, loneliness, nervousness, smoking, and alcohol consumption.

#### *Risk factors, direct contributing and indirect contributing factors*

The major risk factors for obesity include poor nutrition, inactivity, and genetics. Contributing risk factors comprise poor health and food literacy, a sedentary lifestyle, oversized portions, an abundance of unhealthy options, social and cultural norms, limited active transport, lack of safe walking routes, food deserts, lack of access to fresh food, fat distribution, metabolism, lack of access to programming, excessive screen time, not breast feeding, parental role modeling, limited or no physical activity at work, nutritional quality of school lunches, and lack of physical education and recess in schools.

### **Corrective Actions to Reduce the Level of the Indirect Contributing Factors:**

- Healthy Southern Illinois Delta Network (HSIDN) and the HS7RC partners are dedicated to decreasing the rates of overweight and obesity within the seven southernmost counties of Illinois and are dedicated to meet the challenge of having more healthy and fit communities.
- U of I Extension will provide healthy cooking classes within the counties.
- WIC nurses will continue to encourage mothers to breastfeed for at least one year.

- The Southern Seven Health Education Division will continue to work with local schools to encourage policy changes related to nutrition and physical activity for students and staff.
- Southern Seven will offer free Chronic Disease Self-Management Classes within the community.
- Head Start, Public Health, and WIC staff will be afforded the opportunity to participate in continuing education regarding optimal methods for talking to and providing education to clients about weight management for themselves and/or their children.
- WIC nurses will continue to follow nutrition practice standards set forth by the United States Department of Agriculture Food and Nutrition Services.
- WIC nurses will continue to conduct length/height by weight measurements at every certification and mid-certification appointment.
- WIC nurses will continue to provide appropriate weight management counseling and encourage follow-up with their primary care provider when infants and children are found to be at or above the 98th and 85th percentile respectively for their length/height by weight measurements.
- Nutrition education sessions will continue to be provided to WIC participants every three months through individual, group, or online education.
- Public health nurses will continue to monitor height and weight on clients during all billable services.
- Public health nurses will continue discussing weight management with all clients who meet or exceed a BMI of 25.
- Head Start Facilities will continue to comply with nutrition standards put forth by the USDA.
- Head Start Site Supervisors and Parent Coordinators will continue to take BMI measurements and educate parents about weight management when appropriate.
- Head Start Teachers will continue to incorporate nutrition and physical activity in the classroom.



**Proposed Community Organizations to Provide and Coordinate the Activities:**

- Southern Seven Health Department
- U of I Extension
- Federally Qualified Health Centers (FQHCs)\*
- Hospitals\*
- Shawnee Development
- Shawnee Community College
- Faith Community / Parish Nurses
- Fitness clubs
- Local governments
- Regional Office of Education

*\* Appendix K*

**Evaluation Plan to Measure Progress Towards Reaching Objectives:**

Health information and BRFSS statistical data will be monitored and shared with stakeholders through the Executive Director and Division Directors. Community education sessions on the importance of good nutrition, increased physical activity, and implementing a healthy lifestyle will be promoted and monitored. UIC Center for Research on Women and Gender have completed at least two journal articles on Heart Smart for Women programming in rural areas in both the Journal of Rural Health and the Journal of Health Education.

## **Cancer - #2 Priority**

### *Mortality and morbidity*

According to IDPH Causes of Death by Resident County for 2010, the second leading cause of death is cancer. Cancer is the leading cause of death for the seven counties. Rate of deaths for cancer per 100,000 equals 203.4 for the seven counties. According to the National Cancer Institute / Center for Disease Control Illinois Cancer data 2006-2010 for all cancer deaths (*Appendix G*), four of the seven counties are in the top twenty in Illinois which rank in the highest quantile interval of 208.1-246.7. Hardin ranks first, Alexander third, Pulaski fourth, and Massac fourteenth in the state. While incidence is not as high as some of the Illinois counties three of the seven counties incidence is 498.1 to 512.3 (2006-2010) while one county is 486.5-498.1 and the remaining three counties are lowest at 360.0 to 454.5. The region continues to see both male and female mortality highest for Lung and Bronchus cancers. Hardin ranks first at 87.0, Massac second at 83.8, Alexander fourth at 80.1, Pope 69.1, Johnson 59.3, Union 57.5, and Pulaski 55.1 while Illinois is 51.8. There has been a significant decrease in smoking rates since fourth round (2007-2009) from over 30% to 25% according to the most recent 2010 BRFS data. Annual death rates in 2010 for colorectal are highest in Johnson county at 24.2 (IL 18.1). Second is Union county at 18.6. Union county also sees the highest breast cancer deaths at 28.2 (5<sup>th</sup> in IL) higher than Illinois at 23.6.

### *Risk factors, direct contributing and indirect contributing factors*

Risk factors identified by the IPLAN group for cancer include use of tobacco products, genetics, environmental factors, obesity and physical inactivity. Contributing factors both direct and indirect include addiction to tobacco, secondhand smoke exposure, socioeconomic status, lack of fresh fruits and vegetables, sedentary lifestyle, excessive alcohol use and lack of early detection.

### **Corrective Actions to Reduce the Level of the Indirect Contributing Factors:**

- Partners to add the Quitline widget to their web sites for employees as well as patrons who visit their sites.
- Southern Seven Health Education Divisions is working with our 16 dentists to encourage use of the faxed referral to the Quitline.
- Union County Hospital has signed up as a faxed referral site as well as both FQHCs.
- Anna Rural Health, Inc has just received an American Cancer Society grant to increase education and early screening for colorectal, cervical, and breast. This grant can be continued through the next three years.

- HS7RC partners are all on board with creating better physical environments that support healthy living and outdoor safety for those who bicycle, run, and walk.
- The Fellowship House in Anna had their first Reindeer Run in 2015 and has already planned to do another 5K in 2015.
- Southern Seven plans to have their first annual 5K during 2015 and hope to make it an annual event.
- S7 and partners will educate communities about the importance of prevention and early detection in communities and promote worksite wellness among the regions employers.
- Head Start sites and nearly all elementary schools within the seven counties have implemented CATCH including Food Service and staff wellness.
- Walking paths have increased from only one in 2009 to now at least seven which are marked with a “Start Walk” signage provided through the Healthy SI Delta Region coalition and our Healthy S7 Region coalition. Walking paths are identified through our southern seven website at [www.southern7.org](http://www.southern7.org)
- S7 received the Radon grant in 2009 and has increased radon testing within the seven counties and plans to continue.

#### **Proposed Community Organizations to Provide and Coordinate the Activities:**

- Hospitals \*
- FQHCs \*
- U of I Extension
- Southern Seven Health Department
- Hope Light Foundation
- American Cancer Society
- Community Libraries (Cancer Corners)\*
- Mental Health Centers\*
- Dentists

*\* Appendix K*

#### **Evaluation Plan to Measure Progress Towards Reaching Objectives:**

Cancer data information and progress will be reviewed and updated with our stakeholders and communities annually through the Executive Director and the Division Directors and or outreaches and education. Cancer screening increase updates will be provided through the American Cancer Society of Illinois in the southern region of the state.

### **Diabetes #3**

#### *Mortality and morbidity*

It is estimated that 9.3% of the United States population has diabetes with 27.8% of these cases being undiagnosed. While the diabetes rate in the southern seven counties of Illinois has decreased slightly from the 4<sup>th</sup> round BRFs of 12% to 11.7% in the current 5<sup>th</sup> round, the rate still remains substantially higher than the state average of 8.5% in 2010. In 2010, diabetes was the 7<sup>th</sup> leading cause of death both nationally and within the southern seven counties. In addition to the increasing number of individuals diagnosed with diabetes, it is estimated that 33% of U.S. adults have prediabetes with less than 10% of these individuals having been informed of their condition.

Type II Diabetes accounts for 95% of diagnosed diabetes in adults. Diabetes can result in various complications including: retinopathy, the leading cause of blindness and visual disability; nephropathy, the leading cause of dialysis and kidney transplant; neuropathy, the most common diabetic complication which can lead to sensory loss, damage to or loss of limbs, and impotence in men; and cardiovascular disease, leading to a heart attack, stroke, extremity pain, or diminished ability to heal. Individuals with prediabetes are at an increased risk for developing Type II Diabetes and other serious health complications including heart attack and stroke. Without lifestyle intervention, 15% to 30% of people will develop diabetes within five years.

#### *Risk factors, direct contributing and indirect contributing factors*

The major risk factors for developing diabetes include being overweight or obese, inactivity, genetics, and medical history. Contributing factors comprise poor health and food literacy, a sedentary lifestyle, inactivity, limited active transport, poor preventative care access, lack of access to nutrition counseling, lack of education, lack of medication, social and cultural norms, family history, and genetics.

#### **Corrective Actions to Reduce the Level of the Indirect Contributing Factors:**

- HSIDN and S7 partners are dedicated to decreasing the rates of overweight and obesity within the seven southernmost counties of Illinois and are dedicated to meet the challenge of having more healthy and fit communities.
- Southern Seven, along with community members, will create and maintain a Diabetes Today Resource Team (DTRT).
- Southern Seven will assist the DTRT with their activities where applicable including developing a 5-year plan, updating and distributing the Diabetes Resource Guide, promoting professional development, and increasing diabetes

screening and referral practices.

- U of I Extension will provide healthy cooking classes within the counties.
- The Southern Seven Health Education Division will continue to work with local schools to encourage policy changes related to nutrition and physical activity for students and staff.
- Southern Seven will offer free Diabetes Self-Management Classes within the community.
- Southern Seven will offer free Chronic Disease Self-Management Classes within the community. Public health nurses will continue to encourage lipid panel and glucose screenings.
- Public health nurses will continue to take corrective action and make appropriate referrals when a client's fasting blood glucose rises above 120 mg/dL
- Southern Seven will implement a standardized education protocol for persons with diabetes.

**Proposed Community Organizations to Provide and Coordinate the Activities:**

- Southern Seven Health Department
- U of I Extension
- FQHCs\*
- Hospitals\*
- Shawnee Development
- Shawnee Community College
- Faith Community / Parish Nurses
- Fitness clubs
- Local governments
- Regional Office of Education

*\* Appendix K*

**Evaluation Plan to Measure Progress Towards Reaching Objectives:**

Health information and BRFSS statistical data will be monitored and shared with stakeholders. Community education sessions on the importance of good nutrition, increased physical activity, and implementing a healthy lifestyle will be promoted and monitored.

## **Heart Disease - #4**

### *Mortality and morbidity*

Heart disease remains the number one cause of death among U.S. residents. In 2010, heart disease was the leading cause of death in Illinois—accounting for 24.9% of the total deaths. Heart disease also leads to increased morbidity and can lead to years of potential life lost (YPLL). Heart disease in Illinois has resulted in 131,000 YPLL. Analysis of BRFS data revealed mixed results concerning the improvement of heart disease risk factors. 2010 BRFS data reported that 34.4% of respondents were told that they had high blood pressure. That is a slight decrease from 2007-2009 Round Four BRFS data that had 35.3% of respondents being told they had high blood pressure. 2010 BRFS data also noted that 87.6% of survey participants take medication for hypertension.

The seven southernmost counties of Illinois saw heart disease account for 188 deaths or 22.7% of the total deaths in 2010, ranking it as the second leading cause of death. This was less than the aforementioned percentage for the entire State of Illinois; however, according to the IDPH, three of the seven counties had heart disease as the leading cause of mortality: Alexander (30.7%), Massac (25.1%), and Union (21.8%). Diseases of the heart can include coronary artery disease, heart attack, heart failures, arrhythmias, etc...data determining the exact condition in each of the 188 deaths is not available at the time of this report.

### *Risk factors, direct contributing and indirect contributing factors*

During the community health needs assessment, committee members identified three risk factors and several direct and indirect contributing factors for heart disease. The three risk factors for heart disease did not change from the 2010 IPLAN: hypertension, tobacco-use, and high blood cholesterol levels. Committee members deduced that direct contributing factors included obesity, stress, lack of physical activity, excessive sodium and caffeine intake, nicotine addiction, societal pressure, advertising, poor nutrition, genetics, and lack of access to medication. Numerous indirect contributing factors increase the prevalence of said direct contributing factors.

### **Corrective Actions to Reduce the Level of the Indirect Contributing Factors:**

- Southern Seven's Health Education Division will continue to raise awareness for women's heart disease through partnership with UIC Center for Research on Women and Gender. This includes gathering data over a five year period through Heart Smart for Women and Heart Smart Maintenance with churches.
- Southern Seven Health Education Division will continue to raise awareness of health by educating the public on a variety of health topics, which include proper nutrition and exercise's role in mitigating the risk factors associated with heart

disease and recognition of the early warning symptoms of a heart attack.

- Health Educators will continue to work with the Illinois CATCH onto Health Consortium to promote CATCH at schools, pre-k, and head start sites throughout the seven southernmost counties of Illinois.
- Promotion of the CATCH program will contribute to changes in students' attitude, knowledge, skills, and behaviors:
  - Students will know the difference between GO, SLOW, and WHOA foods.
  - Students will identify three negative consequences of tobacco use.
  - Students will identify three positive outcomes of avoiding tobacco use.
  - CATCH will result in an increase in students' moderate to vigorous physical activity.
- Health Educators will continue to work with local schools to encourage policy changes that promote healthy food choices and recommended amounts of physical activity.
- U of I Extension will provide healthy cooking classes within the counties.
- Southern Seven's administration and staff will collaborate with county and city officials to promote policy, systems, and environmental changes that reduce indirect and direct risk factors related to heart disease.
- Health Educators will continue to promote the Illinois Tobacco Quit line among the dentists in the seven southern counties of Illinois.
- Public Health Nurses will implement a variety of strategies to reduce the level of indirect risk factors:
  - Establish a baseline for client blood pressure to implement a tracking and surveillance system.
  - Increase lipid panel screenings through community outreach activities
  - Continue referral and intervention on high blood pressure cases

**Proposed Community Organizations to Provide and Coordinate the Activities:**

- U of I Extension
- Southern Seven Health Department
- Faith based organizations\*
- FQHCs\*

- Hospitals\*
- Shawnee Development
- Local exercise facilities
- Am Heart Association of IL

***\*Appendix K***

**Evaluation Plan to Measure Progress Towards Reaching Objectives:**

An annual review of several data sources by the Executive Director and Division Administration will determine progress towards reaching outcome and impact objectives. Data will be primarily collected and processed by external agencies: Illinois Behavioral Risk Factor Surveillance System, Illinois Tobacco Quitline reporting numbers, the Illinois Department of Public Health Vital Statistics, and UIC Center for Research on Women and Gender. Southern Seven will gather reporting numbers for clinical data internally through nursing staff at clinics, WIC, and Head Start. Health Education staff plans to survey school staff to assess effectiveness of Coordinated School Health programming.



## *Objectives and Interventions for Priority Health Problems*

### COMMUNITY HEALTH PLAN PRIORITY #1

<p><b>Health Problem:</b></p> <p>Obesity</p>	<p><b>Outcome Objective:</b></p> <p><b>By 2020:</b></p> <ul style="list-style-type: none"> <li>• Reduce the proportion of adults who are obese to 33% (baseline 35.8% BRFSS, IL 29.4% IDPH) HP 2020 baseline 33.9%, target 30.5% <b>LHI</b></li> <li>• Reduce the proportion of children and adolescents aged 2 to 19 who are considered obese to 14.5% (baseline 16.1%) HP 2020 <b>LHI</b></li> </ul>
<p><b>Risk Factor(s):</b></p> <p>Poor nutrition</p> <p>Inactivity</p> <p>Genetics</p>	<p><b>Impact Objective:</b></p> <p><b>By 2020:</b></p> <ul style="list-style-type: none"> <li>• Increase the proportion of southern seven residents who report having exercised within the last 30 days to 65% (baseline 63.5%) BRFSS</li> <li>• Increase proportion of adults that meet the minimum moderate-to-vigorous activity standard to 48% (baseline 43.5%) HP 2020</li> <li>• Increase the proportion of adults who meet Federal physical activity guideline objectives for aerobic physical activity and for muscle strengthening activity to 20.1% (baseline 18.2%) HP 2020 <b>LHI</b></li> <li>• Increase the number of adolescents who meet current Federal physical activity guidelines for aerobic physical activity to 31.6% (baseline 28.7%) HP 2020</li> <li>• Increase the contribution of fruits to the diets of population aged 2 years and older to 0.90 cup equivalent per 1,000 calories (baseline: 0.53 cup) HP 2020</li> <li>• Increase the contribution of total vegetables to the diets of population aged 2 years and older to 1.14</li> </ul>

	<p>cup equivalent per 1,000 calories (baseline: 0.77 cup) HP 2020 <b>LHI</b></p> <ul style="list-style-type: none"> <li>• Reduce the consumption of calories from solid fats and added sugars for the population aged 2 yrs and older to 29.8% of total daily calories intake (baseline 34.6%) HP 2020</li> </ul>
<p><b>Contributing Factors (direct and indirect)</b></p> <ul style="list-style-type: none"> <li>• Poor Food and Health Literacy</li> <li>• Sedentary Lifestyle</li> <li>• Oversized Portions</li> <li>• Abundance of Unhealthy Options</li> <li>• Social/Cultural Norms</li> <li>• Limited Active Transport</li> <li>• Lack of Safe Walking Routes</li> <li>• Limited access to Fresh Food</li> <li>• Fat distribution</li> <li>• Metabolism</li> <li>• Lack of Access to Programing</li> <li>• Excessive screen time</li> <li>• Not breastfeeding</li> <li>• Parental Role Modeling</li> <li>• Limited/No physical activity at work</li> </ul>	<p><b>Proven Intervention Strategy(s):</b></p> <ul style="list-style-type: none"> <li>• Behavioral interventions to reduce screen time</li> <li>• Use of electronic or mobile technology to support coaching or counseling for weight loss or maintenance</li> <li>• Develop worksite programs for weight loss</li> <li>• Promote physical activity &amp; nutrition in community group settings</li> <li>• Enhanced school based physical education</li> <li>• Increase &amp; maintain CATCH components in schools</li> <li>• Increase support for and number of safe walking paths</li> <li>• Point of decision prompts to encourage stair use</li> <li>• Design health and communication and social marketing campaigns that use a variety of channels, including mass media.</li> </ul>
<p><b>Resources Available:</b></p> <ul style="list-style-type: none"> <li>• U of I Extension</li> <li>• Southern Seven Health Department</li> <li>• Faith based organizations*</li> <li>• Community Behavioral Health Centers*</li> </ul>	<p><b>Barriers:</b></p> <ul style="list-style-type: none"> <li>• Funding</li> <li>• Sensitivity of Issues</li> <li>• Employers Noninterest</li> <li>• Local Government Economics</li> <li>• Resistance of Some Schools</li> <li>• Lack of Motivation</li> <li>• Competitive Advertising</li> </ul>

<ul style="list-style-type: none"> <li>• FQHCs*</li> <li>• Hospitals*</li> <li>• Shawnee Development</li> <li>• Local exercise facilities</li> <li>• Am Heart Association of IL (southern region)</li> <li>• UIC Center for Research on Women and Gender</li> </ul> <p><i>*Appendix K</i></p>	<ul style="list-style-type: none"> <li>• Food Deserts</li> <li>• Nutrition &amp; Physical Education is Low Priority</li> <li>• Low Income Areas</li> <li>• Access to Care</li> </ul>
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## COMMUNITY HEALTH PLAN PRIORITY #2

<p><b>Health Problem:</b></p> <p>Cancer</p>	<p><b>Outcome Objective:</b></p> <p><b>By 2020:</b></p> <ul style="list-style-type: none"> <li>• Reduce cancer mortality rate by 5% (baseline S7 203.4, IL 181.1, U.S. 173.8) HP 2020 Goal – 161.4 (revised per HP 2020)</li> <li>• Increase cancer screenings HP 2020</li> </ul>
<p><b>Risk Factor(s)</b></p> <p>Use of Tobacco</p> <p>Poor Nutrition</p> <p>Physical Inactivity</p> <p>Genetics</p> <p>Environmental Factors</p>	<p><b>Impact Objective:</b></p> <p><b>By 2020:</b></p> <ul style="list-style-type: none"> <li>• Reduce smoking rate to 20% (baseline BRFS 2010) S7 25.8%, IL 16.9%, U.S. 20.6%) HP 2020 Goal 12%</li> <li>• Increase the proportion of women who receive a cervical cancer screening to 93% (baseline 84.5% HP 2020)</li> <li>• Increase the proportion of adults who receive a colorectal cancer screening to 70.5% (baseline 52.1% HP 2020) <b>LHI</b></li> <li>• Increase the proportion of women who receive a breast cancer screening to 81.1% (baseline 73.7% HP 2020)</li> </ul>
<p><b>Contributing Factors (direct/indirect; may be many)</b></p> <ul style="list-style-type: none"> <li>• Addiction</li> <li>• Secondhand smoke exposure</li> <li>• Socioeconomic status</li> <li>• Food Deserts</li> <li>• Numerous fast food</li> </ul>	<p><b>Proven Intervention Strategies:</b></p> <ul style="list-style-type: none"> <li>• Increase Smoking cessation attempts</li> <li>• Reduce health disparities</li> <li>• Increase access to early screening / medical care</li> <li>• Increase persons over age 50 to receive Colorectal Screening</li> <li>• Promote HPV vaccinations with adolescents</li> <li>• Increase the proportion of women who received a cervical cancer and breast cancer screening</li> </ul>

<p>restaurants</p> <ul style="list-style-type: none"> <li>• Sedentary Lifestyles</li> <li>• Excessive Alcohol use</li> <li>• Meds/Underlying health conditions</li> <li>• Genetics</li> <li>• Lack of early detection / screening</li> </ul>	<p>based upon guidelines</p> <ul style="list-style-type: none"> <li>• Support Health Provider client reminders for screenings</li> <li>• Promote the Illinois QUITLINE by adding Quitline widget on employers websites</li> <li>• Promote healthy and fit community efforts toward increasing physical activity / nutrition</li> </ul>
<p><b>Resources Available:</b></p> <ul style="list-style-type: none"> <li>• American Cancer Society</li> <li>• Hope Light Foundation</li> <li>• Hospitals*</li> <li>• IL Cancer Control Partnership</li> <li>• IL Quit Line</li> <li>• Libraries (Cancer Corners)*</li> <li>• National Cancer Institute</li> <li>• FQHCs*</li> <li>• Community &amp; Behavioral Health Centers*</li> <li>• Shawnee Community College</li> <li>• Southern Seven Health Department</li> <li>• U of I Extension</li> </ul> <p><i>*Appendix K</i></p>	<p><b>Barriers:</b></p> <ul style="list-style-type: none"> <li>• Funding</li> <li>• Some persons still feel the “right” to smoke</li> <li>• Lack of some local States Attorney support for enforcement in some counties</li> <li>• Employers noninterest in wellness</li> <li>• Education on preventative cancer screenings</li> <li>• Access to early detection screening</li> <li>• Lack of public knowledge or education /importance of screenings</li> <li>• Low Socioeconomic Status</li> <li>• Access to Medical Care</li> </ul>

### COMMUNITY HEALTH PLAN PRIORITY #3

<p><b>Health Problem:</b></p> <p>Type II Diabetes Mellitus</p>	<p><b>Outcome Objective:</b></p> <p><b>By 2020:</b></p> <ul style="list-style-type: none"> <li>• Reduce the percent of deaths caused by diabetes to 1.4% (baseline 2.4) IDPH 2010</li> <li>• Reduce the proportion of persons with diabetes with an A1c value greater than 9% to 16.1% (baseline 17.9%) HP 2020 <b>LHI</b></li> <li>• Reduce the proportion of persons with diabetes to 9.7% (baseline 10.7%) BRFSS 2010</li> </ul>
<p><b>Risk Factor(s):</b></p> <p>Overweight/Obesity</p> <p>Inactivity</p> <p>Genetics</p> <p>Medical History</p>	<p><b>Impact Objective(s):</b></p> <p><b>By 2020:</b></p> <ul style="list-style-type: none"> <li>• Increase the proportions of persons with diagnosed diabetes who receive formal diabetes education to 62.5% (baseline 56.8%) HP 2020</li> <li>• Increase the proportion of persons with diabetes whose condition has been diagnosed to 80.1% (baseline 72.8%) HP 2020</li> <li>• Increase prevention behaviors in persons at high risk for diabetes with prediabetes by: HP 2020 <ul style="list-style-type: none"> <li>○ Increasing those who report increasing their levels of physical activity to 49.1% (baseline 44.6%) HP 2020</li> <li>○ Increase the proportion of residents who report having exercised within the last 30 days to 65% (baseline 63.5%) BRFSS 2010</li> <li>○ Increasing those who report trying to lose weight to 55% (baseline 50%) HP 2020</li> </ul> </li> </ul>

	<ul style="list-style-type: none"> <li>○ Increasing those who report reducing the amount of fat and calories in their diet to 53.4% (baseline 48.5%) HP 2020</li> </ul>
<p><b>Contributing Factors (Direct/Indirect; may be many)</b></p> <ul style="list-style-type: none"> <li>• Inactivity</li> <li>• Sedentary Lifestyle</li> <li>• Poor Health Literacy</li> <li>• Poor Food Literacy</li> <li>• Limited Active Transport</li> <li>• Poor Preventative Care Access</li> <li>• Lack of Access to Nutrition Counseling</li> <li>• Lack of Education</li> <li>• Lack of Medication</li> <li>• Social and Cultural Norms</li> <li>• Family History / Genetics</li> </ul>	<p><b>Proven Intervention Strategies:</b></p> <ul style="list-style-type: none"> <li>• Combined nutrition and physical activity promotion programs to prevent diabetes among children / adults</li> <li>• Case management preventions to improve glycemic control</li> <li>• Disease Management programs</li> <li>• Self-Management programs in community gathering places</li> <li>• Increase screenings for glucose</li> </ul>
<p><b>Resources Available:</b></p> <ul style="list-style-type: none"> <li>• U of I Extension</li> <li>• Southern Seven HD</li> <li>• Community &amp; Behavioral Health Centers*</li> <li>• FQHCs*</li> <li>• Hospitals*</li> <li>• Medical Providers</li> <li>• Dietitians</li> <li>• Local exercise facilities</li> <li>• Shawnee Community College</li> </ul>	<p><b>Barriers:</b></p> <ul style="list-style-type: none"> <li>• Funding</li> <li>• Sensitivity of Issues</li> <li>• Employers Non Interest</li> <li>• Local Government Economics</li> <li>• Lack of Motivation</li> <li>• Competitive Advertising</li> <li>• Food Deserts</li> <li>• Nutrition and Physical Education is Low Priority</li> <li>• Resistance of some schools</li> <li>• Low Income Areas</li> <li>• Access to Care</li> </ul>

- Am Heart Association
- Academy of Nutrition & Dietetics
- Am Diabetes Association
- Am Association of Diabetes Educators
- Parish Nurses
- WIC
- UIC Center for Research on Women and Gender

***\*Appendix K***



## COMMUNITY HEALTH PLAN PRIORITY #4

<p><b>Health Problem</b></p> <p>Heart Disease</p>	<p><b>Outcome Objective</b></p> <p><b>By 2020:</b></p> <ul style="list-style-type: none"> <li>• Reduce coronary heart disease deaths to 258 per 100,000 population (HP 2020 baseline 129.2 coronary heart disease deaths per 100,000 population in 2007; Southern Seven baseline 272 per 100,000 population in 2010)</li> </ul>
<p><b>Risk Factor(s)</b></p> <p>Cholesterol</p> <p>Hypertension</p> <p>Use of Tobacco</p>	<p><b>Impact Objective</b></p> <p><b>By 2020:</b></p> <ul style="list-style-type: none"> <li>• Reduce the proportion of adults with high total blood cholesterol levels to 40% (HP 2020 baseline – 15% of adults aged 20 years and older had total blood cholesterol levels of 240 mg/dL or greater, HP 2020 target 13.5%; 2010 IL BRFS baseline – 46.6%)</li> <li>• Increase the percentage of southern seven residents who have had their blood cholesterol level checked in the last 12 months to greater than 70% (2010 IL BRFS baseline – 66.6%)</li> <li>• Reduce the proportion of adults with hypertension to 30% (HP 2020 baseline – 29.9% of adults aged 18 years and older had high blood pressure/hypertension in 2005–08, HP2020 target 26.9%; 2010 IL BRFS baseline – 34.4%)</li> <li>• Increase the proportion of adults with hypertension whose blood pressure is under control to 61.2% (HP 2020 baseline – 43.7% of adults aged 18 years and older with high blood pressure/hypertension had it under control in 2005–08 ) <b>LHI</b></li> <li>• Reduce cigarette smoking by southern seven residents to 20% (HP 2020 baseline – 20.6% of adults aged 18 years and older were current cigarette smokers in 2008;</li> </ul>

	<p>2010 IL BRFS baseline – 25.8%) <b>LHI</b></p> <ul style="list-style-type: none"> <li>• Increase recent smoking cessation success by adult smokers to 8.0% (HP 2020 baseline – 6.0% of adult smokers aged 18 years and older last smoked 6 months to 1 year ago in 2008) <ul style="list-style-type: none"> <li>○ Increase the percentage of smokers in the southern seven counties who stopped smoking for one day or more in the past 12 months to 60% (2010 IL BRFS baseline – 56.5%)</li> <li>○ Increase the percentage of southern seven residents who last smoked regularly more than five years ago to 80% (2010 IL BRFS baseline – 74.5%)</li> </ul> </li> </ul>
<p><b>Contributing Factors (direct and indirect)</b></p> <ul style="list-style-type: none"> <li>• Tobacco addiction</li> <li>• Obesity</li> <li>• Stress</li> <li>• Sedentary Lifestyle</li> <li>• Poor nutrition</li> <li>• Excessive Sodium intake</li> <li>• Genetics</li> <li>• Poor Health Literacy</li> <li>• Environmental Influences</li> <li>• Access to Care</li> </ul>	<p><b>Proven Intervention Strategy(s)</b></p> <ul style="list-style-type: none"> <li>• Encourage reporting violations of SFI Act</li> <li>• Team-based care to improve blood pressure control</li> <li>• Increase CATCH implementation in schools</li> <li>• Increase community education on lipid screenings through outreach</li> <li>• Increase dissemination and education on the importance of blood pressure screenings and pre-hypertension through clinics and outreach</li> <li>• Promote the Illinois Tobacco Quit line among dentists and physicians in the region</li> <li>• Increase Quit line promotion among all Southern Seven Health Department programs</li> <li>• Community supported initiatives for healthier lifestyles to increase physical activity and proper nutrition</li> </ul>
<p><b>Resources Available</b></p> <ul style="list-style-type: none"> <li>• U of I Extension</li> <li>• Southern Seven Health Department</li> <li>• Faith based organizations*</li> <li>• FQHCs*</li> <li>• Hospitals*</li> </ul>	<p><b>Barriers</b></p> <ul style="list-style-type: none"> <li>• Funding</li> <li>• Local socioeconomic status</li> <li>• Cultural influences</li> <li>• Food deserts</li> <li>• Health equity</li> <li>• Lack of motivation</li> <li>• Access to safe open spaces</li> </ul>

<ul style="list-style-type: none"> <li>• UIC Center for Research on women and Gender</li> <li>• Shawnee Development</li> <li>• Local exercise facilities</li> <li>• Am Heart Association of IL</li> <li>• UIC Center for Research of Women and Gender</li> </ul> <p><i>*Appendix K</i></p>	<ul style="list-style-type: none"> <li>• Lack of awareness or education on the importance of physical activity and proper nutrition</li> <li>• Access to medical care</li> </ul>
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## **Appendix**

### ***Appendix A: Healthy Southern 7 Region Coalition & S7HD IPLAN Team***

<b>Name</b>	<b>Area Represented</b>	<b>Essential Service</b>	<b>Other Criteria Met</b>
Melanie Koch	Union County Hospital	Provider	Interest in Health
Lynne Chambers-Ketchens	Legacy Training & Development Corporation	Wellness on Wheels Van – IDPH	Interest in overall health of the communities served
Carol Hannan	Hardin County Hospital	Provider Nursing Manager	Interest in Health
Lisa Nixon	Massac County Hospital	Diabetes Educator	Availability and interest in Health
Lisa Tolbert	Delta Center Inc. serving Alexander and Pulaski counties	Mental Health CEO	Interest in overall health of the region
Christi Rogan	Community Rural Health Center in Alexander, Hardin, & Pulaski counties	Director of Nursing	Availability and interest in community's health
Sherri Crabb	Family Counseling Center Johnson, Pope, and Hardin counties	Mental Health CEO	Availability and interest in region's health
Jody Johnson	U of I Extension Office Director of Alexander, Pulaski, Massac, Johnson, and Union counties	Director of five county offices	Community's health interest
Mickey Finch	The Fellowship House, Inc	Drug Treatment and Prevention Center CEO	Interest in overall health of the communities served
Caleb Nehring	Area of Cancer Expertise	American Cancer Society	Interest in seven county's health and cancer status
Ginger McBride	Alternative HS Coordinator &	Shawnee Community College	Availability and health interest

	Junior College community for region		
Deena Williams	Shawnee Development serves five of seven counties	Shawnee Development	Availability and community's health interest
Nancy Holt	Executive Director PH Administrator	Southern Seven Health Department	Interest in the overall health of the communities served by Southern Seven
Patricia Moehring	Community Health Education Director	Southern Seven Health Department	Interest in the overall health of the communities served by Southern Seven
<b>Southern Seven Health Department IPLAN Team</b>			
Dave Vachon	Health Educator	Southern Seven Health Department	Availability and interest in overall health of the region.
Nicole Lence	Health Educator /Dietitian	Southern Seven Health Department	Availability and interest in health of adults and children in the region
Marla Groaning	Program Manager for Communicable Disease and IBCCP	Southern Seven Health Department	Availability and interest in cancer & communicable disease
Kevin Bohnert	Early Childhood Director	Southern Seven Health Department and Head Start	Availability and interest in children and parents in the region.
Patricia Moehring	Community Health Education Director	Southern Seven Health Department	Availability, interest, and responsibility to the region, agency, and state.

## *Appendix B: S7HD Community Health Problem Survey*

### **SOUTHERN SEVEN HEALTH DEPARTMENT**

#### **Community Health Problems Survey**

One of the responsibilities of a local health department is to evaluate community health needs and develop mechanisms to address those needs. The Southern Seven Health Department is beginning such a project at this time and is interested in community input to identify health problems.

For this project a definition is given:

Health problem: *A situation or condition of people which is considered undesirable, it exists now, is likely to exist in the future, and is measured as death, disease or disability.*

#### **RESPONSES ARE CONFIDENTAL**

**!!! DO NOT WRITE YOUR NAME ANYWHERE ON THIS FORM!!!**

Please rate the top five health concerns with **1 being the most important and 5 being the least important.**

#### ***Rate only five:***

<input type="checkbox"/> Accidents	<input type="checkbox"/> HIV / AIDS / STI's
<input type="checkbox"/> Access to medical care	<input type="checkbox"/> Infectious diseases (hepatitis, TB, etc.)
<input type="checkbox"/> Aging Problems (arthritis, hearing/vision, etc)	<input type="checkbox"/> Obesity
<input type="checkbox"/> Cancer	<input type="checkbox"/> Respiratory/lung disease (COPD)
<input type="checkbox"/> Diabetes	<input type="checkbox"/> Suicide
<input type="checkbox"/> Environment	<input type="checkbox"/> Violence (including domestic)
<input type="checkbox"/> Heart Disease / Stroke	<input type="checkbox"/> Other _____

In which county do you live?

☐ Alexander    ☐ Hardin    ☐ Johnson    ☐ Massac    ☐ Pope  
☐ Pulaski    ☐ Union    ☐ Other

Age: ☐ 15 – 21 yrs.    ☐ 22 – 40 yrs.    ☐ 41 - 55 yrs.    ☐ over 55 yrs.

Sex: ☐ Male    ☐ Female    Number persons in your household: \_\_\_\_\_

Education level: Circle the highest number of years completed.

8   9   10   11   12   13   14   15   16   17 + (Masters or above)

Are you familiar with Southern Seven Health Department and all the services and programs we can provide?

☐ Yes    ☐ No    ☐ Not sure

#### **Appendix C: Southern Seven Demographics**

## SEVEN COUNTY DEMOGRAPHICS

County	Population (2010)	Population (2013 est.)	Median Income (2013)	Persons Below Poverty Level (2013)	Female (2013)	White (2013 )	Black (2013 )	Hispanic (2013)
Alexander	8,238	7,629	26,972	31.6%	49.5%	60.6%	36.1%	2.3%
Hardin	4,320	4,181	37,071	23.6%	49.7%	97.3%	0.5%	1.8%
Johnson	12,582	12,677	40,760	14.1%	44.2%	90.1%	8.4%	3.2%
Massac	15,429	15,073	43,615	16.3%	52.4%	91.4%	5.7%	2.4%
Pope	4,470	4,312	38,371	17.0%	47.6%	91.4%	6.7%	1.6%
Pulaski	6,161	5,908	33,117	18.8%	52%	64.4%	32.7%	1.7%
Union	17,808	17,583	41,848	19.5%	50%	96.3%	1.1%	5.1%
<b>Total Population for the Seven Counties</b>								67,363
<b>Average Median Income</b>								\$37,393
<b>Average Percent Below Poverty Level</b>								20.12%
<a href="http://quickfacts.census.gov">http://quickfacts.census.gov</a> 2013 Estimates								

<b>Illinois Seven County Unemployment Rates and Rankings</b> <b>Not Seasonally Adjusted</b>				
<b>November 2014</b>	<b>Unemployment Rate 2014</b>	<b>Rank</b>	<b>Unemployment Rate 2013</b>	<b>Rank</b>
Alexander	8.1	9	10.7	16
Hardin	8.4	3	11.8	4
Johnson	7.8	14	10.7	16
Massac	6.6	37	8.3	58
Pope	7.5	19	10.6	19
Pulaski	8.2	7	11.2	9
Union	7.8	14	11.2	9
Source: Illinois Department of Employment and Securities, Economic Information and Analysis				

<b>Educational Attainment</b> <b>2009 - 2013</b>							
	<b>Alexander</b>	<b>Hardin</b>	<b>Johnson</b>	<b>Massac</b>	<b>Pope</b>	<b>Pulaski</b>	<b>Union</b>
Total Population Age 25 and Older	5,550	3,176	9,095	10,768	3,238	4,152	12,391
No High School Degree	1,342 24.2%	671 21.1%	1,778 19.5%	1,692 15.7%	415 12.8%	907 21.8%	2,162 17.4%
High School Degree	4,208 74.6%	2,505 83.2%	7,317 83.4%	9,076 83.4%	2,823 87.2%	3,345 80.2%	10,229 83.9%
Bachelor's Degree	8.4%	12.2%	15.1%	16.7%	13.5%	12%	20%
Alexander County has the Lowest Percentage of Residents with a Bachelor's Degree.							
Alexander County has the Highest Percentage of Residents Ages 25 & Older with no High School Degree.							



## Appendix D: Illinois Behavioral Risk Factor Surveillance System Surveys 5<sup>th</sup> Round

### Demographics

2010 Southern Seven Counties Round 5 Illinois County BRFS		Count	Col %	Confidence Interval %	Unweighted Count
AGE OF RESPONDENT	18-24	6,095	11.4%	+/- 6.2%	18
	25-44	16,854	31.5%	+/- 6.5%	97
	45-64	19,261	36.0%	+/- 5.7%	235
	65+	11,251	21.0%	+/- 3.9%	219
Total		53,461	100.0%		569
SEX OF RESPONDENT	male	27,342	51.1%	+/- 6.4%	225
	female	26,119	48.9%	+/- 6.4%	344
Total		53,461	100.0%		569
RACIAL CATEGORIES	white	45,366	85.7%	+/- 5.5%	501
	non-white	7,582	14.3%	+/- 5.5%	63
Total		52,948	100.0%		564
INCOME LEVEL	< \$15,000	7,422	15.0%	+/- 5.3%	94
	\$15-35,000	15,091	30.4%	+/- 6.0%	176
	\$35-50,000	8,344	16.8%	+/- 5.1%	86
	> \$50,000	18,727	37.8%	+/- 6.6%	161
Total		49,584	100.0%		517
MARITAL STATUS	married	32,870	61.5%	+/- 6.4%	321
	widowed	4,153	7.8%	+/- 2.0%	114
	divorced/separated	6,922	12.9%	+/- 3.8%	82
	never married	7,563	14.1%	+/- 6.1%	44
	member of unmarried couple	1,954	3.7%	+/- 3.5%	8
Total		53,461	100.0%		569
HOUSEHOLD TYPE	1 adult/0 children	7,728	14.5%	+/- 3.1%	179
	1 adult with children	1,182	2.2%	+/- 1.3%	22
	>1 adult/0 children	24,982	46.7%	+/- 6.4%	257
	>1 adult with children	19,569	36.6%	+/- 6.6%	111
Total		53,461	100.0%		569
HISPANIC/LATIN ORIGIN	yes	1,412	2.6%	+/- 2.0%	11
	no	51,946	97.4%	+/- 2.0%	556
Total		53,358	100.0%		567
EMPLOYMENT STATUS	employed	29,989	56.1%	+/- 6.2%	238
	out of work	2,527	4.7%	+/- 2.6%	24
	homemaker/student	5,270	9.9%	+/- 4.1%	52
	retired/unable to	15,655	29.3%	+/- 5.0%	254
Total		53,440	100.0%		568

2010 Southern Seven Counties Round 5 Illinois County BRFS  
Unweighted counts of 5 or less do not meet standards of reliability.

### Alcohol

5th Round Southern Seven ICBRFS		Count	Col %	Confidence Interval %	Unweighted Count
AT RISK FOR CHRONIC DRINKING	at risk	1,198	2.2%	+/- 1.3%	15
	not at risk	52,073	97.8%	+/- 1.3%	551
Total		53,272	100.0%		566
AT RISK FOR ACUTE/BINGE DRINKING	at risk	5,706	10.8%	+/- 4.3%	45
	not at risk	47,290	89.2%	+/- 4.3%	519
Total		52,996	100.0%		564
AT RISK FOR DRINKING & DRIVING	Yes	*	*	*	3
	No	52,184	98.5%	+/- 2.6%	561
Total		52,954	100.0%		564

Southern Seven 5th Round County BRFS

Unweighted counts of 5 or less do not meet standards of reliability.

### Diagnosed with Asthma/Has Asthma Now

2010 Southern Seven Counties Round 5 Illinois County BRFS		Count	Col %	Confidence Interval %	Unweighted Count
Ever Diagnosed with Asthma and Has Asthma Now	yes	5,684	10.6%	+/- 3.7%	58
	no	47,756	89.4%	+/- 3.7%	510
Total		53,440	100.0%		568

2010 Southern Seven Counties Round 5 Illinois County BRFS

Unweighted counts of 5 or less do not meet standards of reliability.

### Cardiovascular Disease

2010 Southern Seven Counties Round 5 Illinois County BRFS		Count	Col %	Confidence Interval %	Unweighted Count
TOLD YOU HAD CORONARY HEART DISEASE	yes	2,832	5.3%	+/- 2.1%	44
	no	50,457	94.7%	+/- 2.1%	520
Total		53,289	100.0%		564
EVER TOLD HAD HEART ATTACK	yes	4,394	8.2%	+/- 3.0%	62
	no	48,898	91.8%	+/- 3.0%	504
Total		53,293	100.0%		566
EVER TOLD HAD STROKE	yes	2,575	4.8%	+/- 2.1%	35
	no	50,886	95.2%	+/- 2.1%	534
Total		53,461	100.0%		569

2010 Southern Seven Counties Round 5 Illinois County BRFS

Unweighted counts of 5 or less do not meet standards of reliability.

### Cholesterol

2010 Southern Seven Counties Round 5 Illinois County BRFS		Count	Col %	Confidence Interval %	Unweighted Count
EVER HAD CHOLESTEROL CHECKED	yes	37,520	73.6%	+/- 7.1%	470
	no	13,451	26.4%	+/- 7.1%	78
Total		50,971	100.0%		548
HOW LONG SINCE LAST BLOOD CHOLESTEROL CHECK	within the past year (1 to less than 12 months ago)	24,976	68.6%	+/- 6.7%	345
	within the past 2 years (1 to less than 2 years ago)	6,974	18.6%	+/- 5.6%	67
	within the past 5 years (2 to less than 5 years ago)	2,771	7.4%	+/- 3.0%	38
	5 or more years ago	2,778	7.4%	+/- 5.3%	21
Total		37,499	100.0%		469
EVER TOLD BLOOD CHOLESTEROL IS HIGH	yes	17,497	46.8%	+/- 6.4%	242
	no	20,023	53.4%	+/- 6.4%	228
Total		37,520	100.0%		470

2010 Southern Seven Counties Round 5 Illinois County BRFS  
Unweighted counts of 5 or less do not meet standards of reliability.

### Chronic Obstructive Pulmonary Disease

2010 Southern Seven Counties Round 5 Illinois County BRFS		Count	Col %	Confidence Interval %	Unweighted Count
EVER TOLD YOU HAVE COPD BY DOCTOR	yes	3,304	8.9%	+/- 2.7%	50
	no	44,345	93.1%	+/- 2.7%	458
Total		47,649	100.0%		508
PAST YEAR SAW DOCTOR SPECIFICALLY FOR COPD SYMPTOMS	yes	*	*	*	19
	no	*	*	*	31
Total					50
DOES SHORTNESS OF BREATH AFFECT QUALITY OF LIFE	yes	*	*	*	28
	no	*	*	*	22
Total					50
EVER HAD BREATHING TEST TO DIAGNOSE COPD	yes	*	*	*	40
	no	*	*	*	10
Total					50
TAKE MEDICATION FOR COPD	yes	*	*	*	30
	no	*	*	*	20
Total					50

2010 Southern Seven Counties Round 5 Illinois County BRFS  
Unweighted counts of 5 or less do not meet standards of reliability.

### Colorectal Cancer Screening

2010 Southern Seven Counties Round 5 Illinois County BRFS		Count	Col %	Confidence Interval %	Unweighted Count
HAD HOME BLOOD STOOL TEST (AGES 50+)	yes	10,637	41.0%	+/- 6.2%	185
	no	15,277	59.0%	+/- 6.2%	220
Total		25,914	100.0%		405
LAST HOME BLOOD STOOL TEST (AGES 50+)	within the past year	1,090	27.1%	+/- 12.3%	22
	one year or longer	2,938	72.9%	+/- 12.3%	51
Total		4,026	100.0%		73
AGE 50+: HAD COLON/SIGMOIDOSCOPY	yes	14,728	56.8%	+/- 6.6%	262
	no	11,185	43.2%	+/- 6.6%	143
Total		25,914	100.0%		405
LAST EXAM SIGMOIDOSCOPY OR COLONOSCOPY	sigmoidoscopy	632	4.4%	+/- 3.3%	12
	colonoscopy	13,692	95.6%	+/- 3.3%	243
Total		14,324	100.0%		255

2010 Southern Seven Counties Round 5 Illinois County BRFS  
Unweighted counts of 5 or less do not meet standards of reliability.

### Diabetes

2010 Southern Seven Counties Round 5 Illinois County BRFs		Count	Col %	Confidence Interval %	Unweighted Count
TOLD HAVE DIABETES	Yes	6,253	11.7%	+/- 3.2%	95
	No	47,208	88.3%	+/- 3.2%	474
Total		53,461	100.0%		569

2010 Southern Seven Counties Round 5 Illinois County BRFs  
Unweighted counts of 5 or less do not meet standards of reliability.

### Exercise

2010 Southern Seven Counties Round 5 Illinois County BRFs		Count	Col %	Confidence Interval %	Unweighted Count
ANY EXERCISE PAST 30 DAYS	yes	33,937	63.5%	+/- 5.9%	340
	no	19,524	36.5%	+/- 5.9%	229
Total		53,461	100.0%		569

2010 Southern Seven Counties Round 5 Illinois County BRFs  
Unweighted counts of 5 or less do not meet standards of reliability.

### Flu and Pneumonia

2010 Southern Seven Counties Round 5 Illinois County BRFs		Count	Col %	Confidence Interval %	Unweighted Count
HAD FLU VACCINATION PAST YEAR	yes	19,425	36.7%	+/- 5.7%	278
	no	33,508	63.3%	+/- 5.7%	285
Total		52,933	100.0%		563
EVER HAD PNEUMONIA VACCINATION	yes	16,590	31.7%	+/- 5.7%	236
	no	35,755	68.3%	+/- 5.7%	322
Total		52,345	100.0%		558

2010 Southern Seven Counties Round 5 Illinois County BRFs  
Unweighted counts of 5 or less do not meet standards of reliability.

### Health Care Coverage

2010 Southern Seven Counties Round 5 Illinois County BRFs		Count	Col %	Confidence Interval %	Unweighted Count
DO YOU HAVE ANY KIND OF HEALTH CARE COVERAGE	yes	43,211	80.8%	+/- 6.3%	507
	no	10,250	19.2%	+/- 6.3%	62
Total		53,461	100.0%		569
HAVE USUAL PERSON AS HEALTH CARE PROVIDER	Yes	42,818	80.1%	+/- 6.0%	499
	No	10,643	19.9%	+/- 6.0%	70
Total		53,461	100.0%		569

2010 Southern Seven Counties Round 5 Illinois County BRFs  
Unweighted counts of 5 or less do not meet standards of reliability.

### Health Care Utilization

2010 Southern Seven Counties Round 5 Illinois County BRFSS		Count	Col %	Confidence Interval %	Unweighted Count
12 MOS: NO DOCTOR VISIT DUE TO COST	yes	9,524	17.8%	+/- 6.0%	70
	no	43,937	82.2%	+/- 6.0%	499
Total		53,461	100.0%		569
LAST ROUTINE CHECKUP	1 year or less	32,625	61.3%	+/- 6.8%	413
	More than 1 year/Never	20,813	38.7%	+/- 6.8%	153
Total		53,238	100.0%		566

2010 Southern Seven Counties Round 5 Illinois County BRFSS  
Unweighted counts of 5 or less do not meet standards of reliability.

### Health Status

2010 Southern Seven Counties Round 5 Illinois County BRFSS		Count	Col %	Confidence Interval %	Unweighted Count
GENERAL HEALTH	excellent/very good	23,341	43.7%	+/- 6.6%	207
	good/fair	25,532	47.8%	+/- 6.3%	299
	poor	4,588	8.6%	+/- 3.0%	63
Total		53,461	100.0%		569
DAYS PHYSICAL HEALTH NOT GOOD	none	28,867	54.2%	+/- 6.4%	278
	1-7 days	12,255	23.0%	+/- 5.8%	132
	8-30	12,184	22.9%	+/- 4.7%	155
Total		53,307	100.0%		565
DAYS MENTAL HEALTH NOT GOOD	none	35,447	66.5%	+/- 5.9%	381
	1-7 days	8,591	16.1%	+/- 4.2%	102
	8-30	9,228	17.3%	+/- 5.1%	103
Total		53,265	100.0%		566
DAYS HEALTH KEPT FROM DOING USUAL ACTIVITIES	none	17,301	58.0%	+/- 7.7%	177
	1-7 days	4,897	16.4%	+/- 5.2%	68
	8-30	7,613	25.5%	+/- 6.6%	98
Total		29,811	100.0%		343

2010 Southern Seven Counties Round 5 Illinois County BRFSS  
Unweighted counts of 5 or less do not meet standards of reliability.

### HIV/AIDS

2010 Southern Seven Counties Round 5 Illinois County BRF3		Count	Col %	Confidence Interval %	Unweighted Count
EVER TESTED FOR HIV EXCEPT FOR BLOOD DONATION	yes	8,739	21.5%	+/- 6.0%	76
	no	31,949	78.5%	+/- 6.0%	266
	<b>Total</b>	<b>40,688</b>	<b>100.0%</b>		<b>342</b>
RISKY BEHAVIOR FOR HIV/AIDS	yes	*	*	*	5
	no	39,656	97.3%	+/- 3.2%	335
	<b>Total</b>	<b>40,753</b>	<b>100.0%</b>		<b>340</b>
HAD RAPID HIV TEST	yes	*	*	*	5
	no	*	*	*	9
	<b>Total</b>				<b>14</b>
LOCATION OF LAST HIV TEST	private doctor or HMO office	*	*	*	22
	counseling and testing site	*	*	*	4
	hospital	1,948	22.4%	+/- 12.3%	19
	clinic	1,384	15.8%	+/- 10.2%	14
	jail, prison or other correctional facility	*	*	*	1
	drug treatment facility	*	*	*	1
	at home	*	*	*	4
	somewhere else	1,080	12.2%	+/- 8.5%	10
<b>Total</b>		<b>8,709</b>	<b>100.0%</b>		<b>75</b>

2010 Southern Seven Counties Round 5 Illinois County BRF3  
Unweighted counts of 5 or less do not meet standards of reliability.

### Hypertension

2010 Southern Seven Counties Round 5 Illinois County BRF3		Count	Col %	Confidence Interval %	Unweighted Count
TOLD BLOOD PRESSURE HIGH	Yes	17,661	34.4%	+/- 5.5%	265
	No	33,670	65.6%	+/- 5.5%	287
	<b>Total</b>	<b>51,331</b>	<b>100.0%</b>		<b>552</b>
TAKE MEDS FOR HYPERTENSION	yes	15,478	87.6%	+/- 5.5%	238
	no	2,182	12.4%	+/- 5.5%	27
	<b>Total</b>	<b>17,661</b>	<b>100.0%</b>		<b>265</b>

2010 Southern Seven Counties Round 5 Illinois County BRF3  
Unweighted counts of 5 or less do not meet standards of reliability.

### Injury Control

2010 Southern Seven Counties Round 5 Illinois County BRF3		Count	Col %	Confidence Interval %	Unweighted Count
RISK FOR INJURY DUE TO NO SEATBELT USE	At risk	9,647	18.4%	+/- 4.5%	91
	Not at risk	42,845	81.6%	+/- 4.5%	471
	<b>Total</b>	<b>52,492</b>	<b>100.0%</b>		<b>562</b>
HAD A FALL PAST 3 MONTHS (AGE 45 AND OLDER)	Yes	7,063	23.8%	+/- 5.4%	102
	No	22,652	76.2%	+/- 5.4%	348
	<b>Total</b>	<b>29,715</b>	<b>100.0%</b>		<b>448</b>
INJURED IN A FALL PAST 3 MONTHS (AGE 45 AND OLDER)	Yes	1,955	27.7%	+/- 12.4%	26
	No	5,108	72.3%	+/- 12.4%	76
	<b>Total</b>	<b>7,063</b>	<b>100.0%</b>		<b>102</b>

2010 Southern Seven Counties Round 5 Illinois County BRF3  
Unweighted counts of 5 or less do not meet standards of reliability.

### Oral Health

2010 Southern Seven Counties Round 5 Illinois County BRFs		Count	Col %	Confidence Interval %	Unweighted Count
LAST TIME TEETH CLEANED	within one year	24,717	53.2%	+/- 7.1%	248
	more than one year or never	21,704	46.8%	+/- 7.1%	224
	<b>Total</b>	<b>46,422</b>	<b>100.0%</b>		<b>470</b>
LAST DENTAL VISIT	<= 1 year	28,229	52.8%	+/- 6.4%	290
	1-2 years	6,151	11.5%	+/- 4.7%	68
	> 2 years/never	19,056	35.7%	+/- 6.0%	212
	<b>Total</b>	<b>53,436</b>	<b>100.0%</b>		<b>568</b>
NUMBER OF PERMANENT TEETH LOST OR REMOVED	1 to 5	14,981	28.1%	+/- 5.0%	161
	6 or more, but not all	7,710	14.5%	+/- 3.7%	115
	all	7,014	13.1%	+/- 3.6%	98
	none	23,648	44.3%	+/- 6.5%	191
	<b>Total</b>	<b>53,354</b>	<b>100.0%</b>		<b>565</b>

2010 Southern Seven Counties Round 5 Illinois County BRFs  
Unweighted counts of 5 or less do not meet standards of reliability.

### Prostate Cancer Screening

2010 Southern Seven Counties Round 5 Illinois County BRFs		Count	Col %	Confidence Interval %	Unweighted Count
HAD DIGITAL RECTAL EXAM (MEN AGES 40+)	yes	11,174	67.6%	+/- 9.7%	140
	no	5,348	32.4%	+/- 9.7%	42
	<b>Total</b>	<b>16,522</b>	<b>100.0%</b>		<b>182</b>
WHEN HAD LAST DIGITAL RECTAL EXAM	within the past year	3,799	34.0%	+/- 9.2%	60
	one year or longer	7,374	66.0%	+/- 9.2%	80
	<b>Total</b>	<b>11,174</b>	<b>100.0%</b>		<b>140</b>
EVER HAD PSA TEST (MEN AGES 40+)	yes	11,095	67.8%	+/- 9.5%	139
	no	5,266	32.2%	+/- 9.5%	42
	<b>Total</b>	<b>16,361</b>	<b>100.0%</b>		<b>181</b>
WHEN HAD LAST PSA TEST	within the past year	6,430	58.2%	+/- 11.0%	88
	one year or longer	4,624	41.8%	+/- 11.0%	50
	<b>Total</b>	<b>11,054</b>	<b>100.0%</b>		<b>138</b>
TOLD YOU HAD PROSTATE CANCER	yes	748	4.5%	+/- 2.7%	14
	no	15,733	95.5%	+/- 2.7%	167
	<b>Total</b>	<b>16,481</b>	<b>100.0%</b>		<b>181</b>

2010 Southern Seven Counties Round 5 Illinois County BRFs  
Unweighted counts of 5 or less do not meet standards of reliability.

### Quality of Life

2010 Southern Seven Counties Round 5 Illinois County BRFs		Count	Col %	Confidence Interval %	Unweighted Count
DISABILITY	yes	15,888	29.3%	+/- 5.5%	202
	no	37,795	70.7%	+/- 5.5%	367
	<b>Total</b>	<b>53,461</b>	<b>100.0%</b>		<b>569</b>
ACTIVITIES LIMITED BY IMPAIRMENT	yes	14,084	26.3%	+/- 5.4%	182
	no	39,377	73.7%	+/- 5.4%	387
	<b>Total</b>	<b>53,461</b>	<b>100.0%</b>		<b>569</b>
USE SPECIAL EQUIPMENT DUE TO IMPAIRMENT	yes	6,315	11.8%	+/- 3.4%	84
	no	47,146	88.2%	+/- 3.4%	485
	<b>Total</b>	<b>53,461</b>	<b>100.0%</b>		<b>569</b>
PAST 30 DAYS: NOT ENOUGH REST	yes	37,822	70.6%	+/- 5.5%	379
	no	15,517	29.1%	+/- 5.5%	188
	<b>Total</b>	<b>53,339</b>	<b>100.0%</b>		<b>567</b>
FREQUENCY OF SOCIAL/EMOTIONAL SUPPORT	always/usually	40,629	78.6%	+/- 5.5%	432
	sometimes	7,418	14.3%	+/- 5.2%	68
	rarely/never	3,648	7.1%	+/- 2.8%	51
	<b>Total</b>	<b>51,694</b>	<b>100.0%</b>		<b>551</b>
HOW SATISFIED YOU ARE WITH YOUR LIFE	very satisfied/satisfied	47,544	92.3%	+/- 4.6%	511
	dissatisfied/very dissatisfied	3,977	7.7%	+/- 4.6%	39
	<b>Total</b>	<b>51,521</b>	<b>100.0%</b>		<b>550</b>

2010 Southern Seven Counties Round 5 Illinois County BRFs  
Unweighted counts of 5 or less do not meet standards of reliability.

### Social Context

2010 Southern Seven Counties Round 5 Illinois County BRFs		Count	Col %	Confidence Interval %	Unweighted Count
FREQUENCY OF SOCIAL/EMOTIONAL SUPPORT	always/usually	40,629	78.6%	+/- 5.5%	432
	sometimes	7,418	14.3%	+/- 5.2%	68
	rarely/never	3,648	7.1%	+/- 2.8%	51
	<b>Total</b>	<b>51,694</b>	<b>100.0%</b>		<b>551</b>
HOW SATISFIED YOU ARE WITH YOUR LIFE	very satisfied/satisfied	47,544	92.3%	+/- 4.6%	511
	dissatisfied/very dissatisfied	3,977	7.7%	+/- 4.6%	39
	<b>Total</b>	<b>51,521</b>	<b>100.0%</b>		<b>550</b>

2010 Southern Seven Counties Round 5 Illinois County BRFs  
Unweighted counts of 5 or less do not meet standards of reliability.

### Tobacco

2010 Southern Seven Counties Round 5 Illinois County BRFs		Count	Col %	Confidence Interval %	Unweighted Count
SMOKING STATUS	smoker	13,802	25.6%	+/- 4.9%	128
	former smoker	13,927	26.1%	+/- 5.3%	170
	non-smoker	25,689	48.1%	+/- 6.4%	270
	<b>Total</b>	<b>53,418</b>	<b>100.0%</b>		<b>568</b>
STOPPED SMOKING FOR ONE DAY OR MORE PAST 12 MONTHS	yes	7,798	56.5%	+/- 12.3%	72
	no	6,004	43.5%	+/- 12.3%	58
	<b>Total</b>	<b>13,802</b>	<b>100.0%</b>		<b>128</b>
LAST SMOKED REGULARLY	5 years or less	3,415	25.5%	+/- 11.5%	27
	more than 5 years ago	9,981	74.5%	+/- 11.5%	139
	<b>Total</b>	<b>13,396</b>	<b>100.0%</b>		<b>166</b>
USE SMOKELESS TOBACCO NOW	Yes	3,201	6.0%	+/- 3.3%	23
	No	50,260	94.0%	+/- 3.3%	546
	<b>Total</b>	<b>53,461</b>	<b>100.0%</b>		<b>569</b>

2010 Southern Seven Counties Round 5 Illinois County BRFs  
Unweighted counts of 5 or less do not meet standards of reliability.



### Weight Control

2010 Southern Seven Counties Round 5 Illinois County BRFs		Count	Col %	Confidence Interval %	Unweighted Count
OBESITY	underweight/normal	15,321	29.4%	+/- 5.7%	176
	overweight	18,148	34.8%	+/- 6.4%	199
	obese	18,689	35.8%	+/- 6.1%	187
<b>Total</b>		<b>52,158</b>	<b>100.0%</b>		<b>562</b>

2010 Southern Seven Counties Round 5 Illinois County BRFs  
Unweighted counts of 5 or less do not meet standards of reliability.

### Women's Health

2010 Southern Seven Counties Round 5 Illinois County BRFs		Count	Col %	Confidence Interval %	Unweighted Count
HAD MAMMOGRAM (women 40 and older)	Yes	16,108	88.3%	+/- 5.9%	279
	No	2,132	11.7%	+/- 5.9%	27
	<b>Total</b>	<b>18,241</b>	<b>100.0%</b>		<b>306</b>
LAST MAMMOGRAM	<= 1 year	7,878	46.3%	+/- 8.0%	152
	> 1 year	9,127	53.7%	+/- 8.0%	132
	<b>Total</b>	<b>17,005</b>	<b>100.0%</b>		<b>284</b>
EVER HAD CLINICAL BREAST EXAM	yes	21,651	83.2%	+/- 6.7%	300
	no	4,359	16.8%	+/- 6.7%	40
	<b>Total</b>	<b>26,010</b>	<b>100.0%</b>		<b>340</b>
LAST CLINICAL BREAST EXAM	<= 1 year	15,018	69.6%	+/- 9.8%	225
	> 1 year	6,551	30.4%	+/- 9.8%	74
	<b>Total</b>	<b>21,570</b>	<b>100.0%</b>		<b>299</b>
EVER HAD A PAP TEST	yes	23,020	88.5%	+/- 8.6%	317
	no	2,990	11.5%	+/- 8.6%	23
	<b>Total</b>	<b>26,010</b>	<b>100.0%</b>		<b>340</b>
LAST PAP SMEAR	<= 1 year	14,230	61.9%	+/- 7.7%	170
	> 1 year	8,769	38.1%	+/- 7.7%	146
	<b>Total</b>	<b>22,998</b>	<b>100.0%</b>		<b>316</b>
HAD A HYSTERECTOMY	yes	7,701	30.6%	+/- 7.0%	133
	no	17,452	69.4%	+/- 7.0%	205
	<b>Total</b>	<b>25,153</b>	<b>100.0%</b>		<b>338</b>

2010 Southern Seven Counties Round 5 Illinois County BRFs  
Unweighted counts of 5 or less do not meet standards of reliability.

During the past month, did you participate in any physical activities or exercises such as running, calisthenics, golf, gardening, or walking for exercise?

5th Round Southern Seven Counties Adults		ANY EXERCISE PAST 30 DAYS					
		yes			no		
		Count	Row %	Unweighted Count	Count	Row %	Unweighted Count
AGE OF RESPONDENT	18-24	*	*	14	*	*	4
	25-44	12,324	73.1%	64	4,530	26.9%	33
	45-64	11,739	60.9%	147	7,522	39.1%	88
	65+	5,215	46.4%	115	6,036	53.6%	104
	Total	33,937	63.5%	340	19,524	36.5%	229
RACIAL CATEGORIES	white	28,153	62.1%	296	17,213	37.9%	205
	non-white	5,403	71.3%	41	2,179	28.7%	22
	Total	33,556	63.4%	337	19,392	36.6%	227
SEX OF RESPONDENT	male	17,561	64.2%	135	9,781	35.8%	90
	female	16,375	62.7%	205	9,744	37.3%	139
	Total	33,937	63.5%	340	19,524	36.5%	229
INCOME LEVEL	< \$15,000	4,209	56.7%	50	3,213	43.3%	44
	\$15-35,000	7,200	47.7%	81	7,891	52.3%	95
	\$35-50,000	5,579	66.9%	58	2,765	33.1%	28
	> \$50,000	14,150	75.6%	118	4,576	24.4%	43
	Total	31,138	62.8%	307	16,446	37.2%	210
EDUCATION LEVEL	< high school graduate	2,996	51.2%	36	2,856	48.8%	33
	high school graduate	10,590	59.0%	116	7,371	41.0%	92
	some college	12,467	68.4%	108	5,770	31.6%	68
	college graduate	7,884	69.2%	80	3,507	30.8%	35
	Total	33,937	63.5%	340	19,503	36.5%	228
EMPLOYMENT STATUS	employed	21,295	71.0%	157	8,694	29.0%	81
	out of work	*	*	14	*	*	10
	homemaker/student	3,834	72.7%	36	1,436	27.3%	16
	retired/unable to work	7,384	47.2%	132	8,270	52.8%	122
	Total	33,915	63.5%	339	19,524	36.5%	229
HISPANIC/LATIN ORIGIN	yes	*	*	8	*	*	3
	no	32,816	63.2%	331	19,130	36.8%	225
	Total	33,915	63.6%	339	19,443	36.4%	228
MARITAL STATUS	married	22,083	67.2%	205	10,767	32.8%	116
	widowed	1,888	45.5%	60	2,265	54.5%	54
	divorced/separated	3,011	43.5%	41	3,910	56.5%	41
	never married	*	*	30	*	*	14
	member of unmarried couple	*	*	4	*	*	4
	Total	33,937	63.5%	340	19,524	36.5%	229
DISABILITY	yes	7,123	45.5%	87	8,543	54.5%	115
	no	26,813	70.9%	253	10,982	29.1%	114
	Total	33,937	63.5%	340	19,524	36.5%	229

IDPH, ICHS, 2010 Illinois BRFSS Unweighted counts of 5 or less or row totals of 50 or less do not meet standards of reliability.

At risk for health problems related to being overweight (based on body mass index calculated from height and weight)

5th Round Southern Seven Counties Adults		OBESITY					
		underweight/normal			overweight		
		Count	Row %	Unweighted Count	Count	Row %	Unweighted Count
							obese
					Count	Row %	Unweighted Count
AGE OF RESPONDENT	18-24	*	*	11	*	*	*
	25-44	4,052	25.1%	23	5,592	34.7%	29
	45-64	4,368	23.3%	64	6,973	37.2%	84
	65+	4,125	36.8%	78	3,748	33.4%	82
Total		15,321	29.4%	176	18,148	34.8%	199
RACIAL CATEGORIES	white	13,781	30.9%	161	14,599	32.7%	173
	non-white	1,402	19.7%	14	3,549	50.0%	26
Total		15,183	29.4%	175	18,148	35.1%	199
SEX OF RESPONDENT	male	5,675	20.9%	51	10,049	37.0%	96
	female	9,645	38.6%	125	8,099	32.4%	103
Total		15,321	29.4%	176	18,148	34.8%	199
INCOME LEVEL	< \$15,000	2,877	39.9%	35	2,527	35.0%	27
	\$15-35,000	3,658	24.2%	49	5,256	34.8%	53
	\$35-50,000	2,386	28.6%	30	2,541	30.5%	29
	> \$50,000	4,998	27.4%	44	6,471	35.4%	68
Total		13,919	28.5%	158	16,794	34.3%	177
EDUCATION LEVEL	< high school graduate	1,805	32.4%	24	1,814	32.6%	23
	high school graduate	6,633	36.9%	69	5,599	31.2%	75
	some college	4,425	24.7%	45	6,606	36.9%	60
	college graduate	2,436	22.8%	37	4,128	38.6%	41
Total		15,299	29.3%	175	18,148	34.8%	199
EMPLOYMENT STATUS	employed	6,138	21.0%	58	11,304	38.6%	96
	out of work	*	*	8	*	*	7
	homemaker/student	2,787	52.9%	18	1,404	26.6%	16
	retired/unable to work	5,677	37.7%	91	4,465	29.6%	80
Total		15,299	29.3%	175	18,148	34.8%	199
HISPANIC/LATIN ORIGIN	yes	*	*	2	*	*	5
	no	15,102	29.8%	174	17,448	34.5%	193
Total		15,321	29.4%	176	18,127	34.8%	198
MARITAL STATUS	married	8,575	26.6%	85	11,944	37.0%	118
	widowed	1,926	46.4%	49	978	23.5%	34
	divorced/separated	1,514	23.2%	21	2,113	32.4%	33
	never married	*	*	18	*	*	11
Total		*	*	3	*	*	3
DISABILITY	yes	15,321	29.4%	176	18,148	34.8%	199
	no	3,866	25.3%	54	3,550	23.2%	58
Total		11,454	31.1%	122	14,598	39.6%	141
Total		15,321	29.4%	176	18,148	34.8%	199

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Have you ever been told by a doctor that you have diabetes?

5th Round Southern Seven Counties Adults		TOLD HAVE DIABETES					
		Yes			No		
		Count	Row %	Unweighted Count	Count	Row %	Unweighted Count
AGE OF RESPONDENT	18-24	*	*	1	*	*	17
	25-44	678	4.0%	7	16,176	96.0%	90
	45-64	3,020	15.7%	39	16,241	84.3%	196
	65+	2,440	21.7%	48	8,811	78.3%	171
	<b>Total</b>	<b>6,253</b>	<b>11.7%</b>	<b>95</b>	<b>47,208</b>	<b>88.3%</b>	<b>474</b>
RACIAL CATEGORIES	white	5,599	12.3%	86	39,767	87.7%	415
	non-white	585	7.7%	8	6,997	92.3%	55
	<b>Total</b>	<b>6,184</b>	<b>11.7%</b>	<b>94</b>	<b>46,764</b>	<b>88.3%</b>	<b>470</b>
SEX OF RESPONDENT	male	3,082	11.3%	37	24,260	88.7%	188
	female	3,171	12.1%	58	22,948	87.9%	286
	<b>Total</b>	<b>6,253</b>	<b>11.7%</b>	<b>95</b>	<b>47,208</b>	<b>88.3%</b>	<b>474</b>
INCOME LEVEL	< \$15,000	1,399	18.9%	22	6,023	81.1%	72
	\$15-35,000	2,787	18.5%	37	12,304	81.5%	139
	\$35-50,000	509	6.1%	10	7,835	93.9%	76
	> \$50,000	1,091	5.8%	16	17,636	94.2%	145
	<b>Total</b>	<b>5,786</b>	<b>11.7%</b>	<b>85</b>	<b>43,797</b>	<b>88.3%</b>	<b>432</b>
EDUCATION LEVEL	< high school graduate	1,407	24.0%	16	4,445	76.0%	53
	high school graduate	2,470	13.8%	43	15,491	86.2%	165
	some college	1,691	9.3%	25	16,545	90.7%	151
	college graduate	685	6.0%	11	10,706	94.0%	104
	<b>Total</b>	<b>6,253</b>	<b>11.7%</b>	<b>95</b>	<b>47,187</b>	<b>88.3%</b>	<b>473</b>
EMPLOYMENT STATUS	employed	1,694	5.6%	23	28,295	94.4%	215
	out of work	*	*	5	*	*	19
	homemaker/student	*	*	2	5,205	98.8%	50
	retired/unable to work	4,031	25.7%	65	11,624	74.3%	189
	<b>Total</b>	<b>6,253</b>	<b>11.7%</b>	<b>95</b>	<b>47,187</b>	<b>88.3%</b>	<b>473</b>
HISPANIC/LATIN ORIGIN	yes	*	*	1	*	*	10
	no	6,122	11.8%	94	45,823	88.2%	462
	<b>Total</b>	<b>6,253</b>	<b>11.7%</b>	<b>95</b>	<b>47,105</b>	<b>88.3%</b>	<b>472</b>
MARITAL STATUS	married	4,041	12.3%	55	28,830	87.7%	266
	widowed	769	18.5%	23	3,384	81.5%	91
	divorced/separated	942	13.6%	9	5,979	86.4%	73
	never married	*	*	8	*	*	36
	<b>Total</b>	<b>*</b>	<b>*</b>	<b>*</b>	<b>*</b>	<b>*</b>	<b>8</b>
DISABILITY	yes	3,592	22.9%	46	12,074	77.1%	156
	no	2,661	7.0%	49	35,134	93.0%	318
	<b>Total</b>	<b>6,253</b>	<b>11.7%</b>	<b>95</b>	<b>47,208</b>	<b>88.3%</b>	<b>474</b>

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Have you ever been told by a doctor, nurse, or other health professional that you have high blood pressure?

5th Round Southern Seven Counties Adults		TOLD BLOOD PRESSURE HIGH					
		Yes			No		
		Count	Row %	Unweighted Count	Count	Row %	Unweighted Count
AGE OF RESPONDENT	18-24	*	*	1	*	*	17
	25-44	2,063	12.8%	18	14,031	87.2%	76
	45-64	8,432	46.6%	107	9,667	53.4%	120
	65+	7,051	63.8%	139	3,992	36.2%	74
	Total	17,661	34.4%	265	33,670	65.6%	287
RACIAL CATEGORIES	white	14,974	34.4%	233	28,509	65.6%	254
	non-white	2,593	35.4%	30	4,742	64.6%	30
SEX OF RESPONDENT	male	17,567	34.6%	263	33,251	65.4%	284
	female	8,976	34.3%	99	17,195	65.7%	118
		8,684	34.5%	166	16,475	65.5%	169
	Total	17,661	34.4%	265	33,670	65.6%	287
INCOME LEVEL	< \$15,000	2,782	40.3%	51	4,125	59.7%	41
	\$15-35,000	5,515	38.2%	91	8,925	61.8%	80
	\$35-50,000	2,943	36.0%	41	5,227	64.0%	44
	> \$50,000	5,104	28.1%	58	13,035	71.9%	98
	Total	16,344	34.3%	241	31,311	65.7%	263
EDUCATION LEVEL	< high school graduate	2,341	43.6%	34	3,027	56.4%	32
	high school graduate	6,549	36.7%	109	11,299	63.3%	96
	some college	4,905	28.3%	75	12,436	71.7%	96
	college graduate	3,843	35.7%	46	6,908	64.3%	63
EMPLOYMENT STATUS	Total	17,639	34.4%	264	33,670	65.6%	287
	employed	7,355	25.7%	77	21,225	74.3%	152
	out of work	*	*	9	*	*	14
	homemaker/student	913	17.3%	23	4,357	82.7%	29
	retired/unable to work	8,878	59.3%	156	6,105	40.7%	91
HISPANIC/LATIN ORIGIN	Total	17,661	34.4%	265	33,649	65.6%	286
	yes	*	*	5	*	*	6
	no	17,148	34.4%	258	32,668	65.6%	281
	Total	17,558	34.3%	263	33,670	65.7%	287
MARITAL STATUS	married	11,355	36.5%	144	19,774	63.5%	168
	widowed	2,453	60.6%	71	1,595	39.4%	39
	divorced/separated	2,588	38.0%	34	4,224	62.0%	45
	never married	*	*	16	*	*	27
	member of unmarried couple	*	*		*	*	8
DISABILITY	Total	17,661	34.4%	265	33,670	65.6%	287
	yes	8,139	53.5%	126	7,065	46.5%	74
	no	9,522	26.4%	139	26,605	73.6%	213
	Total	17,661	34.4%	265	33,670	65.6%	287

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Have you ever had your blood cholesterol checked?

5th Round Southern Seven Counties Adults		EVER HAD CHOLESTEROL CHECKED					
		yes			no		
		Count	Row %	Unweighted Count	Count	Row %	Unweighted Count
AGE OF RESPONDENT	18-24	*	*	2	*	*	15
	25-44	10,296	64.2%	65	5,729	35.8%	28
	45-64	16,824	93.0%	206	1,275	7.0%	21
	65+	9,951	91.1%	197	968	8.9%	14
	Total	37,520	73.6%	470	13,451	26.4%	78
RACIAL CATEGORIES	white	32,951	76.3%	422	10,240	23.7%	62
	non-white	4,193	57.7%	44	3,074	42.3%	15
	Total	37,145	73.6%	466	13,313	26.4%	77
SEX OF RESPONDENT	male	18,738	71.8%	182	7,352	28.2%	34
	female	18,782	75.5%	288	6,099	24.5%	44
	Total	37,520	73.6%	470	13,451	26.4%	78
INCOME LEVEL	< \$15,000	4,192	60.7%	73	2,714	39.3%	19
	\$15-35,000	9,837	68.5%	142	4,534	31.5%	28
	\$35-50,000	5,886	72.8%	76	2,202	27.2%	8
	> \$50,000	14,752	81.3%	137	3,386	18.7%	19
	Total	34,668	73.0%	428	12,837	27.0%	74
EDUCATION LEVEL	< high school graduate	3,976	74.1%	54	1,392	25.9%	12
	high school graduate	11,637	66.1%	169	5,962	33.9%	34
	some college	12,369	71.6%	146	4,904	28.4%	24
	college graduate	9,516	88.9%	100	1,192	11.1%	8
	Total	37,499	73.6%	469	13,451	26.4%	78
EMPLOYMENT STATUS	employed	20,443	71.5%	190	8,137	28.5%	39
	out of work	*	*	17	*	*	5
	homemaker/student	2,206	43.2%	33	2,896	56.8%	18
	retired/unable to work	13,323	89.7%	229	1,536	10.3%	16
	Total	37,499	73.6%	469	13,451	26.4%	78
HISPANIC/LATIN ORIGIN	yes	*	*	7	*	*	4
	no	36,775	74.4%	462	12,680	25.6%	73
	Total	37,439	73.6%	469	13,429	26.4%	77
MARITAL STATUS	married	24,981	80.6%	276	6,023	19.4%	34
	widowed	3,351	82.8%	97	697	17.2%	13
	divorced/separated	6,093	89.4%	69	719	10.6%	10
	never married	*	*	24	*	*	18
	member of unmarried couple	*	*	4	*	*	3
	Total	37,520	73.6%	470	13,451	26.4%	78
DISABILITY	yes	13,076	86.5%	182	2,046	13.5%	17
	no	24,444	68.2%	288	11,404	31.8%	61
	Total	37,520	73.6%	470	13,451	26.4%	78

IDPH, ICHS, 2010 Illinois BRFSS Unweighted counts of 5 or less or row totals of 50 or less do not meet standards of reliability.

Have you ever been told by a doctor, nurse or other health professional that your blood cholesterol is high? (those who had cholesterol checked)

5th Round Southern Seven Counties Adults		EVER TOLD BLOOD CHOLESTEROL IS HIGH					
		yes			no		
		Count	Row %	Unweighted Count	Count	Row %	Unweighted Count
AGE OF RESPONDENT	18-24	*	*	1	*	*	1
	25-44	2,874	27.9%	19	7,421	72.1%	46
	45-64	8,526	50.7%	101	8,298	49.3%	105
	65+	5,982	60.1%	121	3,970	39.9%	76
	Total	17,497	46.6%	242	20,023	53.4%	228
RACIAL CATEGORIES	white	15,378	46.7%	219	17,573	53.3%	203
	non-white	*	*	21	*	*	23
SEX OF RESPONDENT	Total	17,403	46.9%	240	19,742	53.1%	226
	male	9,403	50.2%	101	9,335	49.8%	81
	female	8,094	43.1%	141	10,688	56.9%	147
INCOME LEVEL	Total	17,497	46.6%	242	20,023	53.4%	228
	< \$15,000	2,426	57.9%	45	1,766	42.1%	28
	\$15-\$35,000	4,816	49.0%	72	5,022	51.0%	70
	\$35-\$50,000	2,598	44.1%	38	3,288	55.9%	38
	> \$50,000	6,414	43.5%	66	8,339	56.5%	71
EDUCATION LEVEL	Total	16,254	46.9%	221	18,415	53.1%	207
	< high school graduate	2,635	66.3%	35	1,341	33.7%	19
	high school graduate	4,933	42.4%	85	6,704	57.6%	84
	some college	6,175	49.9%	80	6,194	50.1%	66
	college graduate	3,733	39.2%	41	5,783	60.8%	59
EMPLOYMENT STATUS	Total	17,475	46.6%	241	20,023	53.4%	228
	employed	8,086	39.6%	77	12,358	60.4%	113
	out of work	*	*	10	*	*	7
	homemaker/student	*	*	16	*	*	17
	retired/unable to work	7,818	58.7%	138	5,505	41.3%	91
HISPANIC/LATIN ORIGIN	Total	17,475	46.6%	241	20,023	53.4%	228
	yes	*	*	2	*	*	5
	no	17,312	47.1%	239	19,463	52.9%	223
MARITAL STATUS	Total	17,415	46.5%	241	20,023	53.5%	228
	married	11,313	45.3%	136	13,667	54.7%	140
	widowed	1,782	53.2%	57	1,570	46.8%	40
	divorced/separated	3,414	56.0%	36	2,679	44.0%	33
	never married	*	*	12	*	*	12
DISABILITY	member of unmarried couple	*	*	1	*	*	3
	Total	17,497	46.6%	242	20,023	53.4%	228
	yes	7,367	56.3%	106	5,709	43.7%	76
DISABILITY	no	10,130	41.4%	136	14,314	58.6%	152
	Total	17,497	46.6%	242	20,023	53.4%	228

IDPH, ICHS, 2010 Illinois BRFSS Unweighted counts of 5 or less or row totals of 50 or less do not meet standards of reliability.



About how long has it been since you last had your blood cholesterol checked?

5th Round Southern Seven Counties Adults		HOW LONG SINCE LAST BLOOD CHOLESTEROL CHECK									
		within the past year (1 to less than 12 months ago)					within the past 2 years (1 to less than 5 years ago)				
		Count	Row %	Unweighted Count	Count	Row %	Unweighted Count	Count	Row %	Unweighted Count	Count
AGE OF RESPONDENT	18-24	5,709	55.5%	41	2,309	22.4%	13	796	7.7%	7	4
	25-44	10,681	63.5%	142	3,299	19.6%	32	1,699	10.1%	20	12
	45-64	8,471	85.3%	161	1,032	10.4%	21	277	2.8%	9	5
	65+	24,976	66.6%	345	6,974	18.6%	67	2,771	7.4%	36	21
Total		21,956	66.6%	309	6,376	19.4%	60	2,563	7.8%	34	19
RACIAL CATEGORIES	white	24,775	66.7%	342	6,974	18.8%	67	2,597	7.0%	36	21
	non-white	12,273	65.5%	131	3,227	17.2%	28	1,210	6.5%	14	9
SEX OF RESPONDENT	male	12,703	67.7%	214	3,747	20.0%	39	1,561	8.3%	22	12
	female	24,976	66.6%	345	6,974	18.6%	67	2,771	7.4%	36	21
INCOME LEVEL	< \$15,000	3,436	82.4%	59	1,678	17.1%	3	323	7.8%	8	2
	\$15-\$35,000	6,740	68.5%	104	1,078	18.3%	24	394	4.0%	6	8
	\$35-\$50,000	4,264	72.4%	56	1,078	18.3%	15	3	1,025	10.4%	2
	> \$50,000	8,431	57.2%	92	3,566	24.2%	22	1,671	11.3%	16	7
Total		22,871	66.0%	311	6,596	19.0%	64	2,565	7.4%	33	19
EDUCATION LEVEL	< high school graduate	3,373	84.8%	44	2,993	25.8%	27	559	4.8%	10	5
	high school graduate	7,699	66.3%	126	2,618	21.2%	23	1,495	12.1%	15	8
	some college	6,925	56.0%	100	976	10.3%	14	565	5.9%	6	6
	college graduate	24,955	66.6%	344	6,974	18.6%	67	2,771	7.4%	36	21
Total		12,379	60.6%	128	4,151	20.3%	33	1,983	9.7%	19	10
EMPLOYMENT STATUS	employed	11	*	1	*	*	1	*	*	*	2
	out of work	27	*	6	*	*	6	*	*	*	9
	homemaker/student	10,146	76.3%	179	1,915	14.4%	27	579	4.4%	13	8
	retired/unable to work	24,976	66.6%	345	6,974	18.6%	67	2,750	7.3%	35	21
Total		24,300	66.1%	338	6,974	19.0%	67	2,771	7.5%	36	20
HISPANIC/LATIN ORIGIN	yes	24,895	66.5%	344	6,974	18.6%	67	2,771	7.4%	36	21
	no	17,085	68.4%	204	4,622	18.5%	40	1,833	7.3%	20	12
	married	2,746	82.5%	77	375	11.3%	11	166	5.0%	6	2
	widowed	3,634	59.6%	48	1,342	22.0%	11	476	7.8%	6	6
Total		17	*	5	*	*	5	*	*	2	1
MARITAL STATUS	divorced/separated	1	*	1	*	*	1	*	*	2	1
	never married	24,976	66.6%	345	6,974	18.6%	67	2,771	7.4%	36	21
	member of unmarried couple	10,213	78.1%	143	1,766	13.5%	20	775	5.9%	12	7
	yes	14,764	60.5%	202	5,207	21.3%	47	1,996	8.2%	24	14
Total		24,976	66.6%	345	6,974	18.6%	67	2,771	7.4%	36	21

ICPH, ICH-6, 2010 Illinois BRFSS Unweighted counts of 5 or less or row totals of 50 or less do not meet standards of reliability.



Have you smoked at least 100 cigarettes in your entire life?  
Do you now smoke cigarettes everyday, some days, or not at all?

5th Round Southern Seven Counties Adults		SMOKING STATUS							
		smoker				former smoker			
		Count	Row %	Unweighted Count	Count	Row %	Unweighted Count	Count	non-smoker Row %
									Unweighted Count
AGE OF RESPONDENT	18-24	*	*	5	*	*	2	*	11
	25-44	4,986	29.6%	28	3,146	18.7%	15	8,722	51.8%
	45-64	6,387	33.2%	73	5,081	26.4%	64	7,793	40.5%
	65+	1,030	9.2%	22	5,207	46.5%	89	4,971	44.4%
Total		13,802	25.8%	128	13,927	26.1%	170	25,689	48.1%
RACIAL CATEGORIES	white	12,434	27.4%	109	12,879	28.4%	153	20,010	44.2%
	non-white	1,236	16.3%	17	1,048	13.8%	17	5,299	69.9%
Total		13,669	25.8%	126	13,927	26.3%	170	25,309	47.8%
SEX OF RESPONDENT	male	8,030	29.4%	55	7,829	28.6%	86	11,483	42.0%
	female	5,772	22.1%	73	6,098	23.4%	84	14,206	54.5%
Total		13,802	25.8%	128	13,927	26.1%	170	25,689	48.1%
INCOME LEVEL	< \$15,000	2,012	27.1%	29	1,591	21.4%	26	3,820	51.5%
	\$15-35,000	5,003	33.2%	44	4,485	29.7%	57	5,603	37.1%
	\$35-50,000	2,302	27.6%	22	1,792	21.5%	24	4,250	50.9%
	> \$50,000	4,329	23.1%	30	5,261	28.1%	47	9,137	48.8%
Total		13,646	27.5%	125	13,128	26.5%	154	22,810	46.0%
EDUCATION LEVEL	< high school graduate	2,076	35.5%	18	1,738	29.7%	27	2,037	34.8%
	high school graduate	4,275	23.8%	46	5,569	31.0%	69	8,117	45.2%
	some college	6,601	36.3%	51	3,908	21.5%	44	7,685	42.2%
	college graduate	829	7.3%	12	2,712	23.8%	30	7,851	68.9%
Total		13,780	25.8%	127	13,927	26.1%	170	25,689	48.1%
EMPLOYMENT STATUS	employed	7,547	25.2%	59	6,675	22.3%	58	15,767	52.6%
	out of work	*	*	11	*	*	7	*	*
	homemaker/student	1,145	21.7%	10	369	7.0%	9	3,756	71.3%
	retired/unable to work	3,605	23.1%	48	6,252	40.0%	96	5,755	36.9%
Total		13,802	25.8%	128	13,927	26.1%	170	25,668	48.1%
HISPANIC/LATIN ORIGIN	yes	*	*	*	*	*	5	*	6
	no	13,802	26.6%	128	13,462	25.9%	165	24,639	47.5%
Total		13,802	25.9%	128	13,927	26.1%	170	25,586	48.0%
MARITAL STATUS	married	7,690	23.4%	61	10,355	31.5%	111	14,782	45.0%
	widowed	566	13.6%	16	1,351	32.5%	33	2,235	53.8%
	divorced/separated	3,040	43.9%	35	1,565	22.6%	19	2,317	33.5%
	never married	*	*	13	*	*	5	*	*
Total		*	*	3	*	*	2	*	3
DISABILITY	yes	13,802	25.8%	128	13,927	26.1%	170	25,689	48.1%
	no	4,344	27.8%	54	4,902	31.4%	73	6,378	40.8%
Total		13,802	25.8%	128	13,927	26.1%	170	25,689	48.1%

IDPH, ICHS, 2010 Illinois BRFSS Unweighted counts of 5 or less or row totals of 50 or less do not meet standards of reliability.

During the past 12 months, have you stopped smoking for one day or longer because you were trying to quit smoking?

26th Round Southern Seven Counties Adults		STOPPED SMOKING FOR ONE DAY OR MORE PAST 12 MONTHS					
		yes			no		
		Count	Row %	Unweighted Count	Count	Row %	Unweighted Count
AGE OF RESPONDENT	18-24	•	•	4	•	•	1
	25-44	•	•	17	•	•	11
	45-64	3,269	51.2%	40	3,118	48.8%	33
	65+	•	•	11	•	•	11
	Total	7,798	56.5%	72	6,004	43.5%	56
RACIAL CATEGORIES	white	6,808	54.8%	58	5,625	45.2%	51
	non-white	•	•	12	•	•	5
	Total	7,665	56.1%	70	6,004	43.9%	56
SEX OF RESPONDENT	male	4,765	59.3%	28	3,264	40.7%	27
	female	3,032	52.5%	44	2,740	47.5%	29
	Total	7,798	56.5%	72	6,004	43.5%	56
INCOME LEVEL	< \$15,000	•	•	18	•	•	11
	\$15-35,000	•	•	27	•	•	17
	\$35-50,000	•	•	9	•	•	13
	> \$50,000	•	•	16	•	•	14
	Total	7,755	56.8%	70	5,891	43.2%	55
EDUCATION LEVEL	< high school graduate	•	•	12	•	•	6
	high school graduate	•	•	24	•	•	22
	some college	3,500	53.0%	31	3,101	47.0%	20
	college graduate	•	•	4	•	•	8
	Total	7,776	56.4%	71	6,004	43.6%	56
EMPLOYMENT STATUS	employed	4,220	55.9%	28	3,327	44.1%	31
	out of work	•	•	5	•	•	6
	homemaker/student	•	•	6	•	•	4
	retired/unable to work	•	•	33	•	•	15
	Total	7,798	56.5%	72	6,004	43.5%	56
HISPANIC/LATIN	no	7,798	56.5%	72	6,004	43.5%	56
	married	4,675	60.8%	36	3,015	39.2%	26
	Total	7,798	56.5%	72	6,004	43.5%	56
MARITAL STATUS	widowed	•	•	10	•	•	6
	divorced/separated	•	•	16	•	•	19
	never married	•	•	9	•	•	4
	member of unmarried couple	•	•	2	•	•	1
	Total	7,798	56.5%	72	6,004	43.5%	56
DISABILITY	yes	3,081	70.9%	37	1,263	29.1%	17
	no	4,716	49.9%	36	4,741	50.1%	39
	Total	7,798	56.5%	72	6,004	43.5%	56

IDPH, ICHS, 2010 Illinois BRFSS Unweighted counts of 5 or less or row totals of 50 or less do not meet standards of reliability.

How long has it been since you last smoked cigarettes regularly?

5th Round Southern Seven Counties Adults		LAST SMOKED REGULARLY					
		5 years or less			more than 5 years ago		
		Count	Row %	Unweighted Count	Count	Row %	Unweighted Count
AGE OF RESPONDENT	18-24	*	*	1	*	*	1
	25-44	*	*	6	*	*	9
	45-64	1,054	23.1%	11	3,506	76.9%	50
	65+	667	12.8%	9	4,529	87.2%	79
	Total	3,415	25.5%	27	9,981	74.5%	139
RACIAL CATEGORIES	white	3,105	25.2%	24	9,242	74.8%	125
	non-white	*	*	3	*	*	14
	Total	3,415	25.5%	27	9,981	74.5%	139
SEX OF RESPONDENT	male	1,433	19.5%	13	5,926	80.5%	71
	female	1,982	32.8%	14	4,055	67.2%	68
	Total	3,415	25.5%	27	9,981	74.5%	139
INCOME LEVEL	< \$15,000	*	*	5	*	*	21
	\$15-35,000	680	15.3%	8	3,775	84.7%	48
	\$35-50,000	*	*	5	*	*	19
	> \$50,000	*	*	7	*	*	38
	Total	3,309	26.2%	25	9,299	73.8%	126
EDUCATION LEVEL	< high school graduate	*	*	6	*	*	21
	high school graduate	1,684	30.5%	12	3,844	69.5%	55
	some college	*	*	6	*	*	38
	college graduate	*	*	3	*	*	25
	Total	3,415	25.5%	27	9,981	74.5%	139
EMPLOYMENT STATUS	employed	2,200	35.6%	15	3,983	64.4%	41
	out of work	*	*	1	*	*	6
	homemaker/student	*	*	1	*	*	8
	retired/unable to work	1,000	16.1%	10	5,212	83.9%	84
	Total	3,415	25.5%	27	9,981	74.5%	139
HISPANIC/LATIN ORIGIN	yes	*	*	1	*	*	4
	no	3,284	25.4%	26	9,646	74.6%	135
	Total	3,415	25.5%	27	9,981	74.5%	139
MARITAL STATUS	married	2,916	29.6%	21	6,948	70.4%	88
	widowed	*	*	2	*	*	30
	divorced/separated	*	*	3	*	*	16
	never married	*	*		*	*	4
	member of unmarried couple	*	*	1	*	*	1
	Total	3,415	25.5%	27	9,981	74.5%	139
DISABILITY	yes	933	21.1%	11	3,498	78.9%	60
	no	2,481	27.7%	16	6,483	72.3%	79
	Total	3,415	25.5%	27	9,981	74.5%	139

IDPH, ICHS, 2010 Illinois BRFSS Unweighted counts of 5 or less or row totals of 50 or less do not meet standards of reliability.

Have you ever had a mammogram? (women 40 and older)

5th Round Southern Seven Counties Adults		HAD MAMMOGRAM (women 40 and older)					
		Yes			No		
		Count	Row %	Unweighted Count	Count	Row %	Unweighted Count
Age Groups	40-44	*	*	18	*	*	8
	45-64	8,814	92.4%	132	724	7.6%	8
	65+	5,714	89.7%	129	659	10.3%	11
	Total	16,108	88.3%	279	2,132	11.7%	27
RACIAL CATEGORIES	white	13,932	91.5%	245	1,292	8.5%	20
	non-white	*	*	32	*	*	6
	Total	16,014	88.9%	277	1,995	11.1%	26
SEX OF RESPONDENT	female	16,108	88.3%	279	2,132	11.7%	27
	Total	16,108	88.3%	279	2,132	11.7%	27
INCOME LEVEL	< \$15,000	2,463	71.7%	54	972	28.3%	12
	\$15-35,000	4,942	91.3%	93	468	8.7%	8
	\$35-50,000	*	*	43	*	*	1
	> \$50,000	4,471	92.1%	61	*	*	5
	Total	14,679	88.8%	251	1,846	11.2%	26
EDUCATION LEVEL	< high school graduate	*	*	24	*	*	11
	high school graduate	6,788	92.9%	113	521	7.1%	7
	some college	4,458	91.4%	88	421	8.6%	7
	college graduate	3,599	97.6%	54	*	*	2
	Total	16,108	88.3%	279	2,132	11.7%	27
EMPLOYMENT STATUS	employed	6,671	90.8%	91	676	9.2%	8
	out of work	*	*	15	*	*	2
	homemaker/student	*	*	31	*	*	8
	retired/unable to work	6,884	91.4%	141	650	8.6%	9
	Total	16,087	88.3%	278	2,132	11.7%	27
HISPANIC/LATIN ORIGIN	yes	*	*	4	*	*	3
	no	15,617	90.0%	273	1,727	10.0%	24
	Total	16,005	88.2%	277	2,132	11.8%	27
MARITAL STATUS	married	9,237	90.0%	138	1,029	10.0%	12
	widowed	3,099	88.1%	86	417	11.9%	10
	divorced/separated	*	*	40	*	*	3
	never married	*	*	12	*	*	2
	member of unmarried couple	*	*	3	*	*	
	Total	16,108	88.3%	279	2,132	11.7%	27
DISABILITY	yes	6,742	94.5%	109	391	5.5%	6
	no	9,366	84.3%	170	1,742	15.7%	21
	Total	16,108	88.3%	279	2,132	11.7%	27

IDPH, ICHS, 2010 Illinois BRFSS Unweighted counts of 6 or less or row totals of 60 or less do not meet standards of reliability.

How long has it been since you had your last mammogram? (women 40 and older that had a mammogram)

5th Round Southern Seven Counties Adults		LAST MAMMOGRAM (women 40 and older)					
		<= 1 year			> 1 year		
		Count	Row %	Unweighted Count	Count	Row %	Unweighted Count
Age Groups	40-44	*	*	10	*	*	8
	45-64	4,011	45.5%	70	4,803	54.5%	62
	65+	2,527	44.2%	69	3,165	55.4%	59
	Total	7,384	45.8%	149	8,703	54.0%	129
RACIAL CATEGORIES	white	6,368	45.7%	133	7,564	54.3%	112
	non-white	*	*	15	*	*	16
	Total	7,315	45.7%	148	8,678	54.2%	128
SEX OF RESPONDENT	female	7,384	45.8%	149	8,703	54.0%	129
	Total	7,384	45.8%	149	8,703	54.0%	129
INCOME LEVEL	< \$15,000	469	19.0%	16	1,972	80.1%	37
	\$15-35,000	2,402	48.6%	53	2,540	51.4%	40
	\$35-50,000	*	*	25	*	*	18
	> \$50,000	2,178	48.7%	39	2,293	51.3%	22
	Total	6,587	44.9%	133	8,071	55.0%	117
EDUCATION LEVEL	< high school graduate	*	*	12	*	*	12
	high school graduate	2,540	37.4%	56	4,227	62.3%	56
	some college	2,131	47.8%	48	2,327	52.2%	40
	college graduate	1,912	53.1%	33	1,687	46.9%	21
	Total	7,384	45.8%	149	8,703	54.0%	129
EMPLOYMENT STATUS	employed	3,700	55.5%	54	2,971	44.5%	37
	out of work	*	*	4	*	*	11
	homemaker/student	*	*	15	*	*	16
	retired/unable to work	2,868	41.7%	76	3,994	58.0%	64
	Total	7,384	45.9%	149	8,682	54.0%	128
HISPANIC/LATIN ORIGIN	yes	*	*	1	*	*	3
	no	7,287	46.7%	147	8,308	53.2%	125
	Total	7,362	46.0%	148	8,622	53.9%	128
MARITAL STATUS	married	4,750	51.4%	78	4,487	48.6%	60
	widowed	1,340	43.2%	46	1,737	56.1%	39
	divorced/separated	*	*	19	*	*	21
	never married	*	*	5	*	*	7
	member of unmarried couple	*	*	1	*	*	2
	Total	7,384	45.8%	149	8,703	54.0%	129
DISABILITY	yes	3,185	47.2%	53	3,557	52.8%	56
	no	4,198	44.8%	96	5,146	54.9%	73
	Total	7,384	45.8%	149	8,703	54.0%	129

IDPH, ICHS, 2010 Illinois BRFSS Unweighted counts of 5 or less or row totals of 50 or less do not meet standards of reliability.

Have you ever had a Pap smear? (all women)

5th Round Southern Seven Counties Adults		EVER HAD A PAP TEST					
		yes			no		
		Count	Row %	Unweighted Count	Count	Row %	Unweighted Count
AGE OF RESPONDENT	18-24	*	*	4	*	*	4
	25-44	7,466	98.6%	53	*	*	1
	45-64	9,185	96.7%	137	*	*	2
	65+	5,500	86.6%	123	852	13.4%	16
	<b>Total</b>	<b>23,020</b>	<b>88.5%</b>	<b>317</b>	<b>2,990</b>	<b>11.5%</b>	<b>23</b>
RACIAL CATEGORIES	white	20,141	92.7%	278	1,580	7.3%	19
	non-white	*	*	36	*	*	4
	<b>Total</b>	<b>22,789</b>	<b>88.4%</b>	<b>314</b>	<b>2,990</b>	<b>11.6%</b>	<b>23</b>
SEX OF RESPONDENT	female	23,020	88.5%	317	2,990	11.5%	23
	<b>Total</b>	<b>23,020</b>	<b>88.5%</b>	<b>317</b>	<b>2,990</b>	<b>11.5%</b>	<b>23</b>
INCOME LEVEL	< \$15,000	3,540	68.6%	58	1,620	31.4%	12
	\$15-35,000	7,196	97.7%	109	*	*	3
	\$35-50,000	*	*	46	*	*	*
	> \$50,000	7,808	97.9%	78	*	*	1
	<b>Total</b>	<b>21,560</b>	<b>91.7%</b>	<b>291</b>	<b>1,954</b>	<b>8.3%</b>	<b>16</b>
EDUCATION LEVEL	< high school graduate	*	*	29	*	*	6
	high school graduate	8,931	89.9%	120	998	10.1%	13
	some college	6,192	81.2%	100	*	*	4
	college graduate	*	*	68	*	*	*
	<b>Total</b>	<b>23,020</b>	<b>88.5%</b>	<b>317</b>	<b>2,990</b>	<b>11.5%</b>	<b>23</b>
EMPLOYMENT STATUS	employed	11,557	91.4%	122	*	*	2
	out of work	*	*	19	*	*	*
	homemaker/student	*	*	35	*	*	10
	retired/unable to work	7,393	92.0%	141	641	8.0%	10
	<b>Total</b>	<b>23,020</b>	<b>88.6%</b>	<b>317</b>	<b>2,969</b>	<b>11.4%</b>	<b>22</b>
HISPANIC/LATIN ORIGIN	yes	*	*	7	*	*	*
	no	22,144	88.2%	309	2,969	11.8%	22
	<b>Total</b>	<b>22,938</b>	<b>88.5%</b>	<b>316</b>	<b>2,969</b>	<b>11.5%</b>	<b>22</b>
MARITAL STATUS	married	14,422	97.9%	166	*	*	4
	widowed	3,057	86.9%	85	459	13.1%	11
	divorced/separated	*	*	49	*	*	*
	never married	*	*	14	*	*	8
	<b>Total</b>	<b>*</b>	<b>*</b>	<b>3</b>	<b>*</b>	<b>*</b>	<b>*</b>
DISABILITY	yes	23,020	88.5%	317	2,990	11.5%	23
	no	7,749	94.2%	115	475	5.8%	6
		15,271	85.9%	202	2,515	14.1%	17
	<b>Total</b>	<b>23,020</b>	<b>88.5%</b>	<b>317</b>	<b>2,990</b>	<b>11.5%</b>	<b>23</b>

IDPH, ICHS, 2010 Illinois BRFSS Unweighted counts of 6 or less or row totals of 50 or less do not meet standards of reliability.



How long has it been since you had your last Pap smear? (women who had a Pap smear)

5th Round Southern Seven Counties Adults		LAST PAP SMEAR					
		<= 1 year			> 1 year		
		Count	Row %	Unweighted Count	Count	Row %	Unweighted Count
AGE OF RESPONDENT	18-24	*	*	4	*	*	
	25-44	5,807	77.8%	41	1,659	22.2%	12
	45-64	5,720	62.3%	88	3,464	37.7%	49
	65+	1,834	33.5%	37	3,645	66.5%	85
	Total	14,230	61.9%	170	8,769	38.1%	146
RACIAL CATEGORIES	white	11,637	57.8%	139	8,504	42.2%	139
	non-white	*	*	28	*	*	7
	Total	13,998	61.5%	167	8,769	38.5%	146
SEX OF RESPONDENT	female	14,230	61.9%	170	8,769	38.1%	146
	Total	14,230	61.9%	170	8,769	38.1%	146
INCOME LEVEL	< \$15,000	1,118	31.8%	15	2,401	68.2%	42
	\$15-35,000	4,533	63.0%	61	2,664	37.0%	48
	\$35-50,000	*	*	25	*	*	21
	> \$50,000	5,982	76.6%	56	1,826	23.4%	22
	Total	13,305	61.8%	157	8,234	38.2%	133
EDUCATION LEVEL	< high school graduate	*	*	8	*	*	21
	high school graduate	5,953	66.8%	57	2,957	33.2%	62
	some college	2,898	46.8%	57	3,294	53.2%	43
	college graduate	4,585	77.1%	48	1,360	22.9%	20
	Total	14,230	61.9%	170	8,769	38.1%	146
EMPLOYMENT STATUS	employed	8,026	69.4%	81	3,531	30.6%	41
	out of work	*	*	11	*	*	8
	homemaker/student	*	*	14	*	*	21
	retired/unable to work	3,615	49.0%	64	3,757	51.0%	76
	Total	14,230	61.9%	170	8,769	38.1%	146
HISPANIC/LATIN ORIGIN	yes	*	*	6	*	*	1
	no	13,517	61.1%	164	8,606	38.9%	144
	Total	14,230	62.1%	170	8,587	37.9%	145
MARITAL STATUS	married	9,945	69.0%	104	4,478	31.0%	62
	widowed	880	29.0%	28	2,155	71.0%	56
	divorced/separated	*	*	25	*	*	24
	never married	*	*	10	*	*	4
	member of unmarried couple	*	*	3	*	*	
	Total	14,230	61.9%	170	8,769	38.1%	146
DISABILITY	yes	4,293	55.4%	55	3,456	44.6%	60
	no	9,937	65.2%	115	5,312	34.8%	86
	Total	14,230	61.9%	170	8,769	38.1%	146

IDPH, ICHS, 2010 Illinois BRFSS Unweighted counts of 6 or less or row totals of 50 or less do not meet standards of reliability.

A clinical breast exam is when a doctor, nurse, or other health professional feels the breast for lumps. Have you ever had a clinical breast exam?

5th Round Southern Seven Counties Adults		EVER HAD CLINICAL BREAST EXAM					
		yes			no		
		Count	Row %	Unweighted Count	Count	Row %	Unweighted Count
AGE OF RESPONDENT	18-24	*	*	4	*	*	4
	25-44	6,210	82.0%	49	*	*	5
	45-64	8,503	89.6%	130	991	10.4%	9
	65+	5,234	82.4%	117	1,118	17.6%	22
	Total	21,651	83.2%	300	4,359	16.8%	40
RACIAL CATEGORIES	white	18,078	83.2%	263	3,644	16.8%	34
	non-white	*	*	34	*	*	6
	Total	21,420	83.1%	297	4,359	16.9%	40
SEX OF	female	21,651	83.2%	300	4,359	16.8%	40
	Total	21,651	83.2%	300	4,359	16.8%	40
INCOME LEVEL	< \$15,000	3,955	76.7%	55	1,204	23.3%	15
	\$15-35,000	6,500	88.3%	100	863	11.7%	12
	\$35-50,000	*	*	45	*	*	1
	> \$50,000	7,010	87.9%	74	*	*	5
	Total	20,400	86.8%	274	3,114	13.2%	33
EDUCATION LEVEL	< high school graduate	*	*	26	*	*	9
	high school graduate	7,687	77.4%	112	2,242	22.6%	21
	some college	6,435	84.4%	97	1,192	15.6%	7
	college graduate	5,757	96.8%	65	*	*	3
	Total	21,651	83.2%	300	4,359	16.8%	40
EMPLOYMENT STATUS	employed	10,959	86.7%	115	1,679	13.3%	9
	out of work	*	*	16	*	*	3
	homemaker/student	*	*	35	*	*	10
	retired/unable to work	7,057	87.8%	133	978	12.2%	18
	Total	21,629	83.2%	299	4,359	16.8%	40
HISPANIC/LATIN ORIGIN	yes	*	*	6	*	*	1
	no	20,892	83.2%	292	4,222	16.8%	39
	Total	21,548	83.2%	298	4,359	16.8%	40
MARITAL STATUS	married	12,573	85.3%	156	2,162	14.7%	14
	widowed	2,972	84.5%	82	544	15.5%	14
	divorced/separated	*	*	45	*	*	4
	never married	*	*	14	*	*	8
	member of unmarried couple	*	*	3	*	*	
	Total	21,651	83.2%	300	4,359	16.8%	40
DISABILITY	yes	7,342	89.3%	108	883	10.7%	13
	no	14,309	80.5%	192	3,476	19.5%	27
	Total	21,651	83.2%	300	4,359	16.8%	40

IDPH, ICHS, 2010 Illinois BRFSS Unweighted counts of 5 or less or row totals of 50 or less do not meet standards of reliability.



How long has it been since your last breast exam?

5th Round Southern Seven Counties Adults		LAST CLINICAL BREAST EXAM					
		<= 1 year			> 1 year		
		Count	Row %	Unweighted Count	Count	Row %	Unweighted Count
AGE OF RESPONDENT	18-24	*	*	2	*	*	2
	25-44	*	*	42	*	*	7
	45-64	6,276	73.8%	103	2,227	26.2%	27
	65+	3,063	59.5%	78	2,089	40.5%	38
RACIAL CATEGORIES	Total	15,018	69.6%	225	6,551	30.4%	74
	white	13,223	73.5%	195	4,774	26.5%	67
	non-white	*	*	27	*	*	7
SEX OF RESPONDENT	Total	14,787	69.3%	222	6,551	30.7%	74
	female	15,018	69.6%	225	6,551	30.4%	74
INCOME LEVEL	Total	15,018	69.6%	225	6,551	30.4%	74
	< \$15,000	1,664	42.1%	31	2,291	57.9%	24
	\$15-35,000	4,839	75.4%	81	1,580	24.6%	18
	\$35-50,000	*	*	33	*	*	12
	> \$50,000	5,600	79.9%	60	1,410	20.1%	14
EDUCATION LEVEL	Total	14,103	69.4%	205	6,216	30.6%	68
	< high school graduate	*	*	18	*	*	8
	high school graduate	5,390	70.9%	79	2,216	29.1%	32
	some college	3,924	61.0%	77	2,511	39.0%	20
	college graduate	4,394	76.3%	51	1,363	23.7%	14
EMPLOYMENT STATUS	Total	15,018	69.6%	225	6,551	30.4%	74
	employed	7,848	71.6%	93	3,111	28.4%	22
	out of work	*	*	11	*	*	5
	homemaker/student	*	*	22	*	*	12
	retired/unable to work	4,471	63.4%	98	2,586	36.6%	35
HISPANIC/LATIN ORIGIN	Total	14,997	69.6%	224	6,551	30.4%	74
	yes	*	*	4	*	*	1
	no	14,492	69.4%	220	6,399	30.6%	72
MARITAL STATUS	Total	14,937	69.6%	224	6,530	30.4%	73
	married	10,392	82.7%	121	2,181	17.3%	35
	widowed	1,892	63.7%	61	1,080	36.3%	21
	divorced/separated	*	*	29	*	*	15
	never married	*	*	12	*	*	2
	member of unmarried couple	*	*	2	*	*	1
DISABILITY	Total	15,018	69.6%	225	6,551	30.4%	74
	yes	5,217	71.1%	74	2,125	28.9%	34
	no	9,802	68.9%	151	4,426	31.1%	40
	Total	15,018	69.6%	225	6,551	30.4%	74

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Have you ever had a digital rectal exam? (males age 40 or older)

5th Round Southern Seven Counties Adults		HAD DIGITAL RECTAL EXAM (MEN AGES 40+)					
		yes			no		
		Count	Row %	Unweighted Count	Count	Row %	Unweighted Count
Age Groups	40-44	*	*	2	*	*	12
	45-64	7,097	78.4%	74	1,953	21.6%	18
	65+	3,765	79.2%	64	989	20.8%	12
	Total	11,174	67.6%	140	5,348	32.4%	42
RACIAL CATEGORIES	white	10,154	67.2%	128	4,951	32.8%	38
	non-white	*	*	11	*	*	3
	Total	11,000	67.7%	139	5,241	32.3%	41
SEX OF RESPONDENT	male	11,174	67.6%	140	5,348	32.4%	42
	Total	11,174	67.6%	140	5,348	32.4%	42
INCOME LEVEL	< \$15,000	*	*	11	*	*	9
	\$15-\$35,000	3,386	79.5%	42	872	20.5%	9
	\$35-\$50,000	*	*	23	*	*	10
	> \$50,000	4,523	71.0%	52	1,843	29.0%	10
	Total	10,400	67.3%	128	5,052	32.7%	38
EDUCATION LEVEL	< high school graduate	*	*	20	*	*	6
	high school graduate	3,342	67.4%	50	1,620	32.6%	13
	some college	3,829	58.9%	41	2,667	41.1%	16
	college graduate	*	*	29	*	*	6
	Total	11,174	67.7%	140	5,327	32.3%	41
EMPLOYMENT STATUS	employed	6,387	64.1%	64	3,571	35.9%	21
	out of work	*	*	*	*	*	2
	homemaker/student	*	*	1	*	*	*
	retired/unable to work	4,746	75.0%	75	1,579	25.0%	19
	Total	11,174	67.6%	140	5,348	32.4%	42
HISPANIC/LATIN ORIGIN	yes	*	*	2	*	*	*
	no	11,071	67.4%	138	5,348	32.6%	42
	Total	11,174	67.6%	140	5,348	32.4%	42
MARITAL STATUS	married	8,563	66.0%	98	4,403	34.0%	29
	widowed	*	*	13	*	*	3
	divorced/separated	*	*	21	*	*	4
	never married	*	*	7	*	*	6
	member of unmarried couple	*	*	1	*	*	*
	Total	11,174	67.6%	140	5,348	32.4%	42
DISABILITY	yes	4,216	80.3%	57	1,032	19.7%	15
	no	6,957	61.7%	83	4,316	38.3%	27
	Total	11,174	67.6%	140	5,348	32.4%	42

IDPH, ICHS, 2010 Illinois BRFSS Unweighted counts of 5 or less or row totals of 50 or less do not meet standards of reliability.

How long has it been since your last digital rectal exam?

5th Round Southern Seven Counties Adults		WHEN HAD LAST DIGITAL RECTAL EXAM					
		within the past year			one year or longer		
		Count	Row %	Unweighted Count	Count	Row %	Unweighted Count
AGE OF RESPONDENT	25-44	*	*	1	*	*	1
	45-64	2,341	33.0%	31	4,756	67.0%	43
	65+	1,254	33.3%	28	2,511	66.7%	36
	<b>Total</b>	<b>3,799</b>	<b>34.0%</b>	<b>60</b>	<b>7,374</b>	<b>66.0%</b>	<b>80</b>
RACIAL CATEGORIES	white	3,240	31.9%	53	6,914	68.1%	75
	non-white	*	*	7	*	*	4
	<b>Total</b>	<b>3,799</b>	<b>34.5%</b>	<b>60</b>	<b>7,200</b>	<b>65.5%</b>	<b>79</b>
SEX OF	male	3,799	34.0%	60	7,374	66.0%	80
	<b>Total</b>	<b>3,799</b>	<b>34.0%</b>	<b>60</b>	<b>7,374</b>	<b>66.0%</b>	<b>80</b>
INCOME LEVEL	< \$15,000	*	*	6	*	*	5
	\$15-35,000	*	*	14	*	*	28
	\$35-50,000	*	*	10	*	*	13
	> \$50,000	1,663	36.8%	24	2,860	63.2%	28
	<b>Total</b>	<b>3,436</b>	<b>33.0%</b>	<b>54</b>	<b>6,964</b>	<b>67.0%</b>	<b>74</b>
EDUCATION LEVEL	< high school graduate	*	*	9	*	*	11
	high school graduate	1,577	47.2%	22	1,765	52.8%	28
	some college	*	*	13	*	*	28
	college graduate	*	*	16	*	*	13
	<b>Total</b>	<b>3,799</b>	<b>34.0%</b>	<b>60</b>	<b>7,374</b>	<b>66.0%</b>	<b>80</b>
EMPLOYMENT STATUS	employed	2,281	35.7%	29	4,107	64.3%	35
	homemaker/student	*	*	1	*	*	
	retired/unable to work	1,478	31.1%	30	3,268	68.9%	45
	<b>Total</b>	<b>3,799</b>	<b>34.0%</b>	<b>60</b>	<b>7,374</b>	<b>66.0%</b>	<b>80</b>
HISPANIC/LATIN ORIGIN	yes	*	*	1	*	*	1
	no	3,718	33.6%	59	7,353	66.4%	79
	<b>Total</b>	<b>3,799</b>	<b>34.0%</b>	<b>60</b>	<b>7,374</b>	<b>66.0%</b>	<b>80</b>
MARITAL STATUS	married	2,589	30.2%	40	5,973	69.8%	58
	widowed	*	*	6	*	*	7
	divorced/separated	*	*	9	*	*	12
	never married	*	*	5	*	*	2
	member of unmarried couple	*	*		*	*	1
	<b>Total</b>	<b>3,799</b>	<b>34.0%</b>	<b>60</b>	<b>7,374</b>	<b>66.0%</b>	<b>80</b>
DISABILITY	yes	1,052	25.0%	23	3,164	75.0%	34
	no	2,747	39.5%	37	4,210	60.5%	46
	<b>Total</b>	<b>3,799</b>	<b>34.0%</b>	<b>60</b>	<b>7,374</b>	<b>66.0%</b>	<b>80</b>

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A blood stool test is a test that may use a special kit at home to determine whether the stool contains blood. Have you ever had this test using a home kit? (ages 50 and older)

5th Round Southern Seven Counties Adults		HAD HOME BLOOD STOOL TEST (AGES 50+)					
		yes			no		
		Count	Row %	Unweighted Count	Count	Row %	Unweighted Count
AGE OF RESPONDENT	45-64	5,694	38.3%	80	9,155	61.7%	111
	65+	4,943	44.7%	105	6,122	55.3%	109
	Total	10,637	41.0%	185	15,277	59.0%	220
RACIAL CATEGORIES	white	9,805	42.7%	169	13,182	57.3%	196
	non-white	*	*	16	*	*	22
	Total	10,637	41.4%	185	15,078	58.6%	218
SEX OF RESPONDENT	male	4,777	40.0%	69	7,165	60.0%	85
	female	5,860	41.9%	116	8,112	58.1%	135
	Total	10,637	41.0%	185	15,277	59.0%	220
INCOME LEVEL	< \$15,000	1,491	37.6%	33	2,471	62.4%	43
	\$15-35,000	3,059	40.1%	56	4,561	59.9%	72
	\$35-50,000	2,654	56.3%	37	2,061	43.7%	29
	> \$50,000	2,412	32.5%	40	5,003	67.5%	56
	Total	9,616	40.6%	166	14,096	59.4%	200
EDUCATION LEVEL	< high school graduate	1,135	33.4%	20	2,264	66.6%	33
	high school graduate	4,332	44.2%	76	5,476	55.8%	83
	some college	2,837	36.9%	53	4,847	63.1%	65
	college graduate	2,333	46.6%	36	2,669	53.4%	38
	Total	10,637	41.1%	185	15,255	58.9%	219
EMPLOYMENT STATUS	employed	3,860	38.7%	52	6,119	61.3%	71
	out of work	*	*	2	*	*	10
	homemaker/student	*	*	14	*	*	23
	retired/unable to work	6,102	46.9%	117	6,913	53.1%	115
	Total	10,637	41.1%	185	15,255	58.9%	219
HISPANIC/LATIN ORIGIN	yes	*	*	4	*	*	218
	no	10,290	40.4%	181	15,174	59.6%	218
	Total	10,637	41.2%	185	15,174	58.8%	218
MARITAL STATUS	married	7,291	43.7%	104	9,377	56.3%	116
	widowed	1,509	38.1%	52	2,451	61.9%	56
	divorced/separated	1,249	31.3%	19	2,745	68.7%	37
	never married	*	*	10	*	*	10
	member of unmarried couple	*	*	*	*	*	1
	Total	10,637	41.0%	185	15,277	59.0%	220
DISABILITY	yes	5,397	51.3%	93	5,123	48.7%	75
	no	5,240	34.0%	92	10,153	66.0%	145
	Total	10,637	41.0%	185	15,277	59.0%	220

IDPH, ICHS, 2010 Illinois BRFSS Unweighted counts of 5 or less or row totals of 50 or less do not meet standards of reliability.

Sigmoidoscopy and colonoscopy are exams in which a tube is inserted in the rectum to view the colon for signs of cancer or other health problems. Have you ever had either of these exams?

5th Round Southern Seven Counties Adults		AGE 50+: HAD COLON/SIGMOIDOSCOPY					
		yes			no		
		Count	Row %	Unweighted Count	Count	Row %	Unweighted Count
AGE OF RESPONDENT	45-64	8,124	54.7%	115	6,725	45.3%	76
	65+	6,605	59.7%	147	4,460	40.3%	67
Total		14,728	56.8%	262	11,185	43.2%	143
RACIAL CATEGORIES	white	12,593	54.8%	235	10,394	45.2%	130
	non-white	*	*	26	*	*	12
Total		14,703	57.2%	261	11,011	42.8%	142
SEX OF RESPONDENT	male	6,054	50.7%	92	5,888	49.3%	62
	female	8,674	62.1%	170	5,298	37.9%	81
Total		14,728	56.8%	262	11,185	43.2%	143
INCOME LEVEL	< \$15,000	1,741	43.9%	39	2,221	56.1%	37
	\$15-35,000	4,450	58.4%	89	3,170	41.6%	39
	\$35-50,000	2,932	62.2%	39	1,784	37.8%	27
	> \$50,000	4,220	56.9%	69	3,194	43.1%	27
Total		13,343	56.3%	236	10,369	43.7%	130
EDUCATION LEVEL	< high school graduate	1,608	47.3%	29	1,791	52.7%	24
	high school graduate	5,524	56.3%	104	4,284	43.7%	55
	some college	4,285	55.8%	77	3,399	44.2%	41
	college graduate	3,312	66.2%	52	1,689	33.8%	22
Total		14,728	56.9%	262	11,164	43.1%	142
EMPLOYMENT STATUS	employed	5,983	60.0%	79	3,996	40.0%	44
	out of work	*	*	5	*	*	7
	homemaker/student	*	*	21	*	*	16
	retired/unable to work	7,466	57.4%	156	5,550	42.6%	76
Total		14,707	56.8%	261	11,185	43.2%	143
HISPANIC/LATIN ORIGIN	yes	*	*	4	*	*	*
	no	14,300	56.2%	257	11,164	43.8%	142
Total		14,647	56.7%	261	11,164	43.3%	142
MARITAL STATUS	married	9,245	55.5%	143	7,423	44.5%	77
	widowed	2,109	53.3%	69	1,850	46.7%	39
	divorced/separated	2,498	62.5%	36	1,496	37.5%	20
	never married	*	*	14	*	*	6
	member of unmarried couple	*	*	*	*	*	1
Total		14,728	56.8%	262	11,185	43.2%	143
DISABILITY	yes	7,200	68.4%	122	3,320	31.6%	46
	no	7,528	48.9%	140	7,865	51.1%	97
Total		14,728	56.8%	262	11,185	43.2%	143

IDPH, ICHS, 2010 Illinois BRFSS Unweighted counts of 5 or less or row totals of 50 or less do not meet standards of reliability.

Have not had sigmoidoscopy/colonoscopy (50 years and older)

5th Round Southern Seven Counties Adults		HAD NO SIGMOIDOSCOPY OR COLONOSCOPY EXAM (AGES 50+)					
		At risk			Not at risk		
		Count	Row %	Unweighted Count	Count	Row %	Unweighted Count
AGE OF RESPONDENT	45-64	6,725	45.3%	76	8,124	54.7%	115
	65+	4,460	40.3%	67	6,605	59.7%	147
	Total	11,185	43.2%	143	14,728	56.8%	262
RACIAL CATEGORIES	white	10,394	45.2%	130	12,593	54.8%	235
	non-white	*	*	12	*	*	26
	Total	11,011	42.8%	142	14,703	57.2%	261
SEX OF RESPONDENT	male	5,888	49.3%	62	6,054	50.7%	92
	female	5,298	37.9%	81	8,674	62.1%	170
	Total	11,185	43.2%	143	14,728	56.8%	262
INCOME LEVEL	< \$15,000	2,221	56.1%	37	1,741	43.9%	39
	\$15-35,000	3,170	41.6%	39	4,450	58.4%	89
	\$35-50,000	1,784	37.8%	27	2,932	62.2%	39
	> \$50,000	3,194	43.1%	27	4,220	56.9%	69
	Total	10,369	43.7%	130	13,343	56.3%	236
EDUCATION LEVEL	< high school graduate	1,791	52.7%	24	1,608	47.3%	29
	high school graduate	4,284	43.7%	55	5,524	56.3%	104
	some college	3,399	44.2%	41	4,285	55.8%	77
	college graduate	1,689	33.8%	22	3,312	66.2%	52
	Total	11,164	43.1%	142	14,728	56.9%	262
EMPLOYMENT STATUS	employed	3,996	40.0%	44	5,983	60.0%	79
	out of work	*	*	7	*	*	5
	homemaker/student	*	*	16	*	*	21
	retired/unable to work	5,550	42.6%	76	7,466	57.4%	156
	Total	11,185	43.2%	143	14,707	56.8%	261
HISPANIC/LATIN ORIGIN	yes	*	*	*	*	*	4
	no	11,164	43.8%	142	14,300	56.2%	257
	Total	11,164	43.3%	142	14,647	56.7%	261
MARITAL STATUS	married	7,423	44.5%	77	9,245	55.5%	143
	widowed	1,850	46.7%	39	2,109	53.3%	69
	divorced/separated	1,496	37.5%	20	2,498	62.5%	36
	never married	*	*	6	*	*	14
	member of unmarried couple	*	*	1	*	*	
	Total	11,185	43.2%	143	14,728	56.8%	262
DISABILITY	yes	3,320	31.6%	46	7,200	68.4%	122
	no	7,865	51.1%	97	7,528	48.9%	140
	Total	11,185	43.2%	143	14,728	56.8%	262

IDPH, ICHS, 2010 Illinois BRFSS Unweighted counts of 5 or less or row totals of 50 or less do not meet standards of reliability

## Appendix E – 1: WIC/FCM/Teen Births

### WIC/FCM

FIRST TRIMESTER ENTRY INTO WIC & FCM PROGRAMS FY2011 thru FY2014								
	WIC	1st Tri	TOTAL	%	FCM	1st Tri	TOTAL	%
FY 2011		358	530	68%		299	414	72%
FY 2012		304	503	60%		256	397	64%
FY 2013		285	446	64%		265	385	69%
FY 2014		301	497	63%		270	409	66%

### IDPH Comparison 2009/2010 Teen Births

	Alexander	Hardin	Johnson	Massac	Pope	Pulaski	Union
2009	25 (21.9%)	5 (11.6%)	10 (8.8%)	26 (13.1%)	3 (9.7%)	12 (17.4%)	34 (17.6%)
2010	19 (19.8%)	4 (9.5%)	11 (9.8%)	25 (14.3%)	4 (14.3%)	7 (11.5%)	24 (13%)

### TEEN BIRTHS BY AGE EACH CALENDAR YEAR BY SPECIFIC COUNTY (Teens were enrolled WIC/FCM Program)

YEAR	2010					2011					2012					2013				
AGE	15	16	17	18	19	15	16	17	18	19	15	16	17	18	19	15	16	17	18	19
COUNTY																				
ALEXANDER	0	1	6	8	10	0	0	3	2	8	1	0	2	2	6	0	0	2	4	6
HARDIN/POPE	0	0	1	1	3	0	1	2	0	4	0	0	0	3	2	0	0	0	0	3
JOHNSON	0	1	4	3	7	0	0	2	7	7	0	0	1	4	6	0	3	1	3	3
MASSAC	0	1	5	9	15	0	5	4	12	14	2	2	5	4	7	2	5	2	2	5
PULASKI	0	0	1	1	6	0	1	2	6	9	0	0	0	0	3	0	0	2	4	4
UNION	1	3	9	5	10	1	1	5	7	10	1	4	0	3	9	1	1	2	6	8
<b>S7HD TOTALS</b>	<b>1</b>	<b>6</b>	<b>26</b>	<b>27</b>	<b>51</b>	<b>1</b>	<b>8</b>	<b>18</b>	<b>34</b>	<b>52</b>	<b>4</b>	<b>6</b>	<b>8</b>	<b>16</b>	<b>33</b>	<b>3</b>	<b>9</b>	<b>9</b>	<b>19</b>	<b>29</b>



## Appendix E – 2: Births by County of Residence/Birth Characteristics

**Births by County of Residence – 2010-2013 (As of July 2014)**

COUNTY	2010	2011	2012	2013		
Alexander	96	110	106	103		
Hardin	42	44	30	33		
Johnson	112	119	121	99		
Massac	175	166	156	135		
Pope	28	32	32	23		
Pulaski	61	64	57	61		
Union	184	171	188	198		
S7HD	698	706	690	652	0	0

**Birth Characteristics (Number) by County - 2010 (Most Current Stats Available)**

COUNTY	Number of Births	Low Birth Wt <2,500 Grams	Low Birth Wt <1,500 Grams	Pre-Term <37 Wks	Teens Age 16 - 19	Infant Deaths
Alexander	96	12	1	11	19	2
Hardin	42	2	0	3	4	1
Johnson	112	9	4	12	11	2
Massac	175	14	3	18	25	1
Pope	28	1	1	1	4	0
Pulaski	61	5	0	8	7	0
Union	184	15	2	16	24	0
S7HD	698	58	11	69	94	6

**Birth Characteristics (Percentages) by County - 2010  
(Most Current Stats Available)**

COUNTY	Number of Births	Low Birth Wt <2,500 Grams	Low Birth Wt <1,500 Grams	Pre-Term <37 Wks	Teens Age 16 - 19	Infant Deaths
Alexander	96	*	*	*	19.80	*
Hardin	42	*	0.00	*	9.50	*
Johnson	112	*	*	10.70	9.80	*
Massac	175	8.00	*	10.30	14.30	*
Pope	28	*	*	*	14.30	0.00
Pulaski	61	*	0.00	*	11.50	0.00
Union	184	2.00	*	8.70	13.00	0.00
S7HD	698	8.00	*	1.25	13.00	*

\* Rate of percentage does not meet standards of reliability (Numerator <10 or denominator <100)



## Appendix F: Leading Causes of Death in 2010

Leading Causes of Death in 2010								
Illinois	Southern 7	Alexander	Hardin	Johnson	Massac	Pope	Pulaski	Union
1) Disease of the Heart	1) Malignant Neoplasms 193 (23.3%)	1) Disease of the Heart 28 (30.7%)	1) Malignant Neoplasms 17 (27.4%)	1) Malignant Neoplasms 28 (23.5%)	1) Disease of the Heart 54 (25.1%)	1) Malignant Neoplasms 16 (27.6%)	1) Malignant Neoplasms 28 (32.6%)	1) Disease of the Heart 43 (21.8%)
2) Malignant Neoplasms	2) Disease of the Heart 188 (22.7%)	2) Malignant Neoplasms 12 (13.2%)	2) Disease of the Heart 13 (21%)	2) Disease of the Heart 15 (12.6%)	2) Malignant Neoplasms 52 (24.2%)	2) Disease of the Heart 12 (20.7%)	2) Disease of the Heart 23 (26.7%)	2) Malignant Neoplasms 40 (20.3%)
3) Cerebrovascular Diseases	3) Chronic Lower Respiratory Diseases 51 (6.2%)	3) Chronic Lower Respiratory Disease 6 (6.6%)	3) Chronic Lower Respiratory Disease 6 (9.7%)	3) Accidents 8 (6.7%)	3) Chronic Lower Respiratory Disease 15 (7%)	3) Chronic Lower Respiratory Disease 5 (8.6%)	3) Nephritis, Nephrotic Syndrome, and Nephrosis 5 (5.8%)	3) Cerebrovascular Disease 16 (8.1%)
4) Chronic Lower Respiratory Diseases	4) Cerebrovascular Diseases 43 (5.2%)	3) Accidents 6 (6.6%)	4) Accidents 4 (6.5%)	3) Septicemia 8 (6.7%)	4) Cerebrovascular Disease 9 (4.2%)	3) Cerebrovascular Disease 5 (8.6%)	4) Chronic Lower Respiratory Disease 4 (4.7%)	4) Chronic Lower Respiratory Disease 10 (5.1%)
5) Accidents	5) Accidents 42 (5.1%)	4) Cerebrovascular Disease 4 (4.2%)	5) Alzheimer's Disease 2 (3.2%)	4) Cerebrovascular Disease 6 (5%)	4) Accidents 9 (4.2%)	4) Accidents 3 (5.2%)	5) Accidents 3 (3.5%)	5) Accidents 9 (4.6%)
6) Alzheimer's Disease	6) Nephritis, Nephrotic Syndrome, and Nephrosis 25 (3%)	5) Diabetes Mellitus 3 (3.3%)	5) Intentional Self-Harm 2 (3.2%)	5) Chronic Lower Respiratory Disease 5 (4.2%)	5) Diabetes Mellitus 6 (2.8%)	5) Diabetes Mellitus 2 (3.4%)	6) Cerebrovascular Disease 2 (2.3%)	5) Alzheimer's Disease 9 (4.6%)
7) Nephritis, Nephrotic Syndrome, and Nephrosis	7) Diabetes Mellitus 20 (2.4%)	6) Nephritis, Nephrotic Syndrome, and Nephrosis 2 (2.2%)	5) Nephritis, Nephrotic Syndrome, and Nephrosis 2 (3.2%)	5) Nephritis, Nephrotic Syndrome, and Nephrosis 5 (4.2%)	6) Alzheimer's Disease 5 (2.3%)	6) Nephritis, Nephrotic Syndrome, and Nephrosis 1 (1.7%)	7) Alzheimer's Disease 1 (1.2%)	6) Influenza and Pneumonia 7 (3.6%)
8) Diabetes Mellitus	8) Alzheimer's Disease 19 (2.3%)	7) Intentional Self-Harm 1 (1%)	6) Cerebrovascular Diseases 1 (1.6%)	6) Alzheimer's Disease 2 (1.7%)	6) Nephritis, Nephrotic Syndrome, and Nephrosis 5 (2.3%)	6) Influenza and Pneumonia 1 (1.7%)	7) Diabetes Mellitus 1 (1.2%)	7) Diabetes Mellitus 6 (3%)

9) Influenza and Pneumonia	9) Influenza and Pneumonia 13 (1.6%)	7) Septicemia 1 (1%)	6) Diabetes Mellitus 1 (1.6%)	6) Influenza and Pneumonia 2 (1.7%)	7) Intentional Self-Harm 3 (1.5%)	Alzheimer's Disease 0 (0%)	7) Septicemia 1 (1.2%)	8) Nephritis, Nephrotic Syndrome, and Nephrosis 5 (2.5%)
10) Septicemia	9) Septicemia 13 (1.6%)	7) Chronic Liver Disease and Cirrhosis 1 (1%)	6) Influenza and Pneumonia 1 (1.6%)	7) Diabetes Mellitus 1 (0.8%)	8) Influenza and Pneumonia 2 (0.9%)	Intentional Self-Harm 0 (0%)	Influenza and Pneumonia 0 (0%)	9) Intentional Self-Harm 2 (1%)
11) Intentional Self-Harm	10) Intentional Self-Harm 9 (1.1%)	Influenza and Pneumonia 0 (0%)	6) Septicemia 1 (1.6%)	7) Chronic Liver Disease and Cirrhosis 1 (0.8%)	9) Chronic Liver Disease and Cirrhosis 1 (0.5%)	Septicemia 0 (0%)	Intentional Self-Harm 0 (0%)	9) Septicemia 2 (1%)
12) Chronic Liver Disease and Cirrhosis	11) Chronic Liver Disease and Cirrhosis 3 (0.4%)	Alzheimer's Disease 0 (0%)	Chronic Liver Disease and Cirrhosis 0 (0%)	7) Intentional Self-Harm 1 (0.8%)	Septicemia 0 (0%)	Chronic Liver Disease and Cirrhosis 0 (0%)	Chronic Liver Disease and Cirrhosis 0 (0%)	Chronic Liver Disease and Cirrhosis 0 (0%)

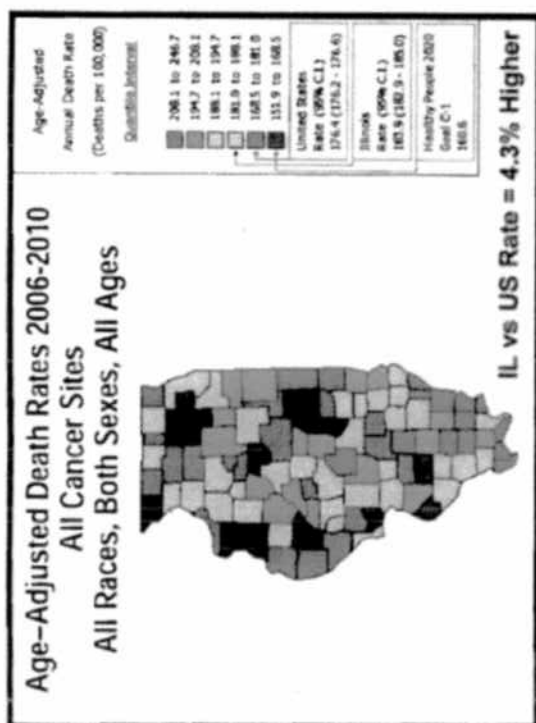
Preliminary data for 2011 indicate the 15 leading causes of death remained the same except two causes changed rank.

- |                                      |   |
|--------------------------------------|---|
| 1) Diseases of heart                 | 9) Nephritis, nephrotic syndrome, and nephrosis           |
| 2) Malignant neoplasms               | 10) Intentional self-harm                                 |
| 3) Chronic lower respiratory disease | 11) Septicemia  |
| 4) Cerebrovascular disease           | 12) Chronic liver disease and cirrhosis                   |
| 5) Accidents                         | 13) Essential hypertension and hypertensive renal disease |
| 6) Alzheimer's Disease               | 14) Parkinson's disease                                   |
| 7) Diabetes Mellitus                 | 15) Pneumonitis due to solids and liquids                 |
| 8) Influenza and pneumonia           |   |

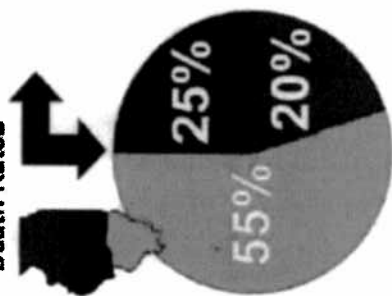
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# Appendix G: Illinois Cancer Data Stats 2014

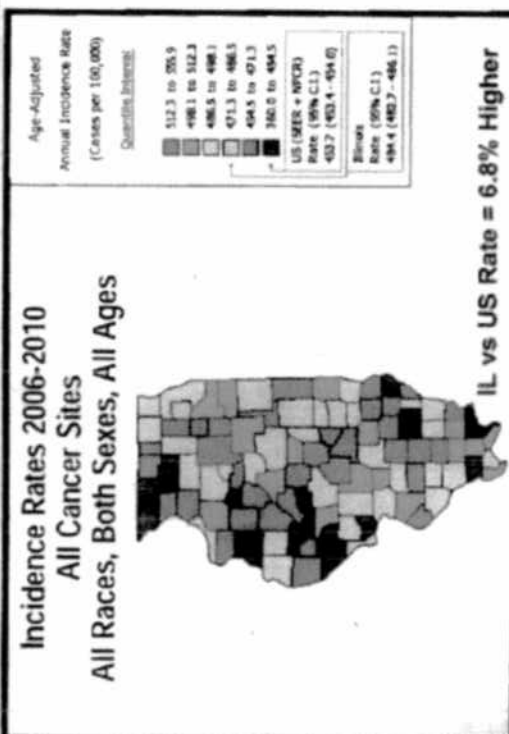


Top 20 Counties with Highest All-Cancers Death Rates

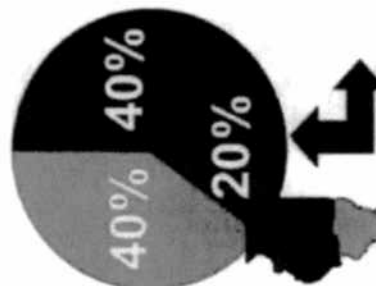


## ILLINOIS CANCER DATA STATS 2014

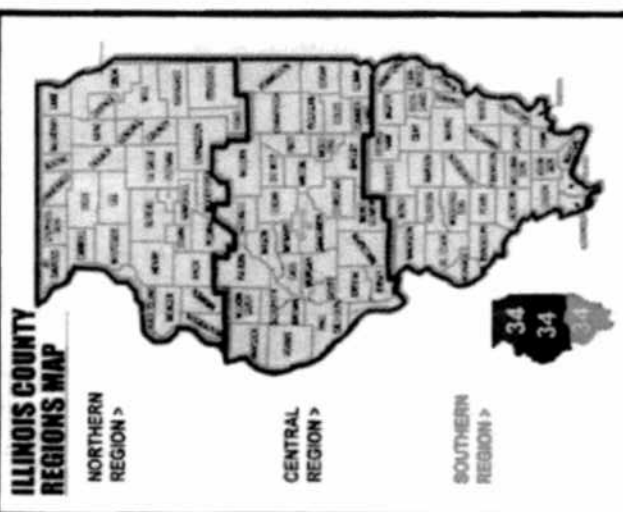
Data Source: NCI/CDC Website @ <http://statecancerprofiles.cancer.gov/>  
Prepared By: The Hope Light Foundation on 27 February 2014



Top 20 Counties with Highest All-Cancers Incidence (New Case) Rates



Death Rate Rank	County	Region	Death Rate Rank	County	Region
1	Hardin	Southern	11	Lee	Northern
2	Gallatin	Southern	12	Christian	Central
3	Alexander	Southern	13	Vermilion	Central
4	Pulaski	Southern	14	Massac	Southern
5	Saline	Southern	15	Williamson	Southern
6	Edwards	Southern	16	Putnam	Northern
7	White	Southern	17	Marion	Southern
8	Franklin	Southern	18	Clark	Central
9	Greene	Central	19	Cass	Central
10	Ford	Northern	20	Grundy	Northern



Incidence Rate Rank	County	Region	Incidence Rate Rank	County	Region
1	Macon	Central	11	Richland	Southern
2	Crawford	Southern	12	Mason	Central
3	Christian	Central	13	Marion	Southern
4	Clay	Southern	14	Franklin	Southern
5	Fulton	Central	15	Peoria	Northern
6	Grundy	Northern	16	Jefferson	Southern
7	Gallatin	Southern	17	Ford	Northern
8	LaSalle	Northern	18	Tazewell	Central
9	Vermilion	Central	19	Montgomery	Central
10	Brown	Central	20	Massac	Southern

## *Appendix H: Community Health Problem Survey Results*

Based on being rated as #1 health problem from community surveys

HEALTH PROBLEM	1	2	3	4	5
Cancer	128	82	57	42	27
Access To Medical Care	72	25	36	33	29
Obesity	44	39	50	52	52
Diabetes	36	64	68	37	37
Accidents	35	28	20	33	51
Heart Disease/Stroke	28	71	61	76	39
HIV/AIDS/STD's	24	18	19	15	20
Violence	21	26	26	26	34
Suicide	19	19	18	23	40
Infectious Diseases	14	24	19	16	15
Environment	14	16	26	27	35
Respiratory/Lung Disease	4	16	25	36	28
Total Votes	439	428	425	416	407

#1 Cancer, #2 Access to Medical Care, #3 Obesity, #4 Diabetes, #5 Accidents

Based on total number of weighted\* votes (last column)

HEALTH PROBLEM	1	2	3	4	5	Total
Cancer	640	328	171	84	42	1,265
Access to Medical Care	360	100	108	66	33	667
Obesity	220	156	150	104	52	682
Diabetes	180	256	204	74	37	751
Accidents	175	112	60	66	51	464
Heart Disease/Stroke	140	284	183	152	39	798
HIV/AIDS/STD's	120	72	57	30	20	299
Violence	105	104	78	52	34	373
Suicide	95	76	54	46	40	311
Infectious Diseases	70	96	57	32	15	270
Environment	70	64	78	54	35	301
Respiratory / lung dis	20	64	75	72	28	259
Total Votes	2,195	1,712	1,275	832	426	6,440

#1 Cancer, #2 Heart disease/stroke, #3 Diabetes, #4 Obesity, #5 Access To Medical Care

\* weighting of votes - if a problem was rated #1, it was multiplied by 5, if it was rated #2, it was multiplied by 4, if it was rated #3, it was multiplied by 3, if it was rated #4 it was multiplied by 2, if it was rated #5, it was multiplied by 1.

## *Appendix I: Health Problem Priority Setting Worksheet*

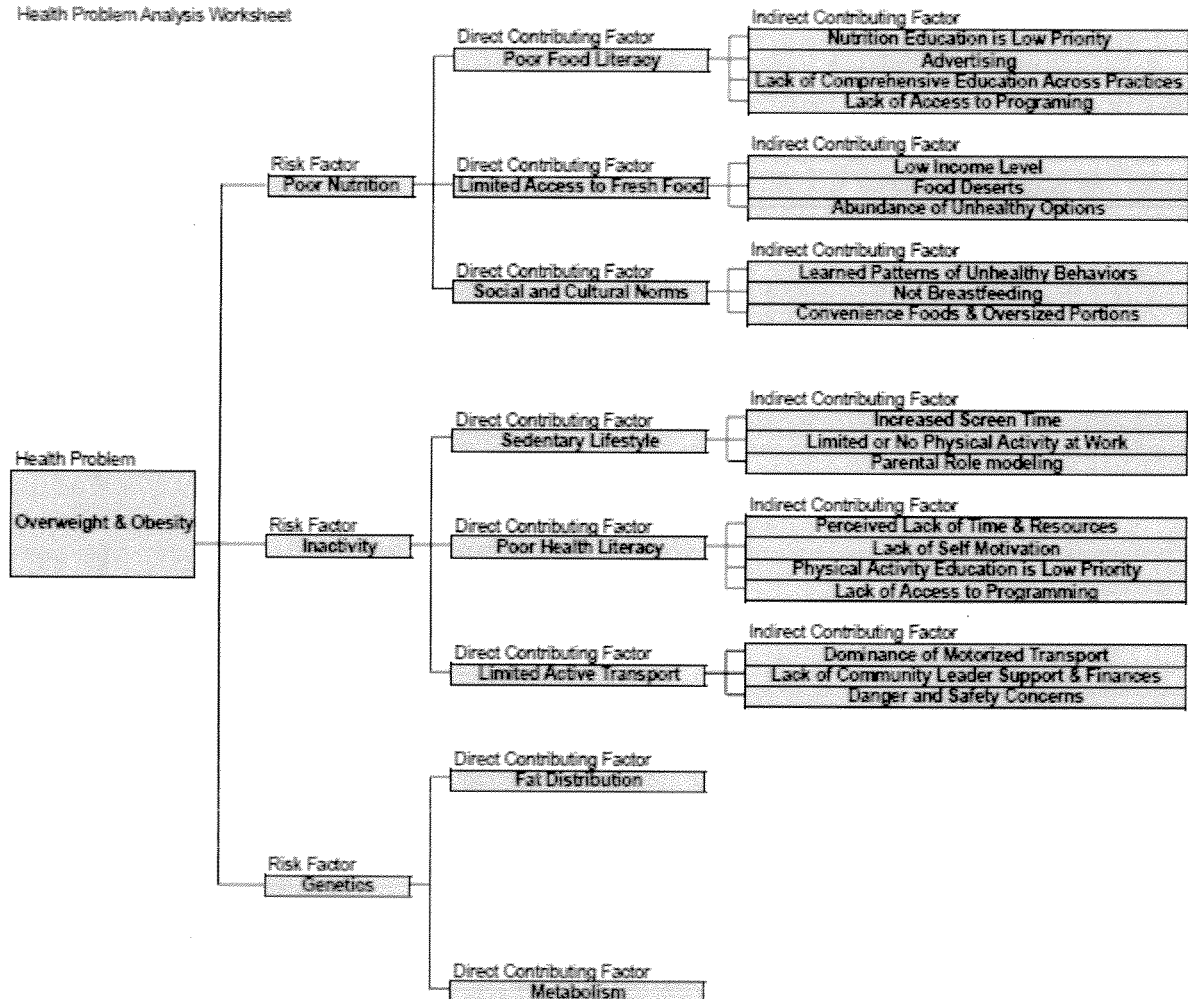
### **Health Problem Priority Setting Worksheet**

List the health problems as determined through data collection, community perceptions, or other means. Make additional copies of this worksheet, as necessary.

<b>Health Problem</b>	<b>A Size</b>	<b>B Seriousness</b>	<b>C Effectiveness Of Intervention</b>	<b>D Priority Score (A+2B) C</b>	<b>E Rank</b>
Cancer	8	9	9	$8+18 \times 9 = 234$	2
Heart Disease	9	9	7	$9+18 \times 7 = 189$	4
Diabetes	7	9	8	$7+18 \times 8 = 200$	3
Obesity	10	10	9	$10+20 \times 9 = 270$	1
Access to Medical Care	9	7	5	$9+14 \times 5 = 115$	5

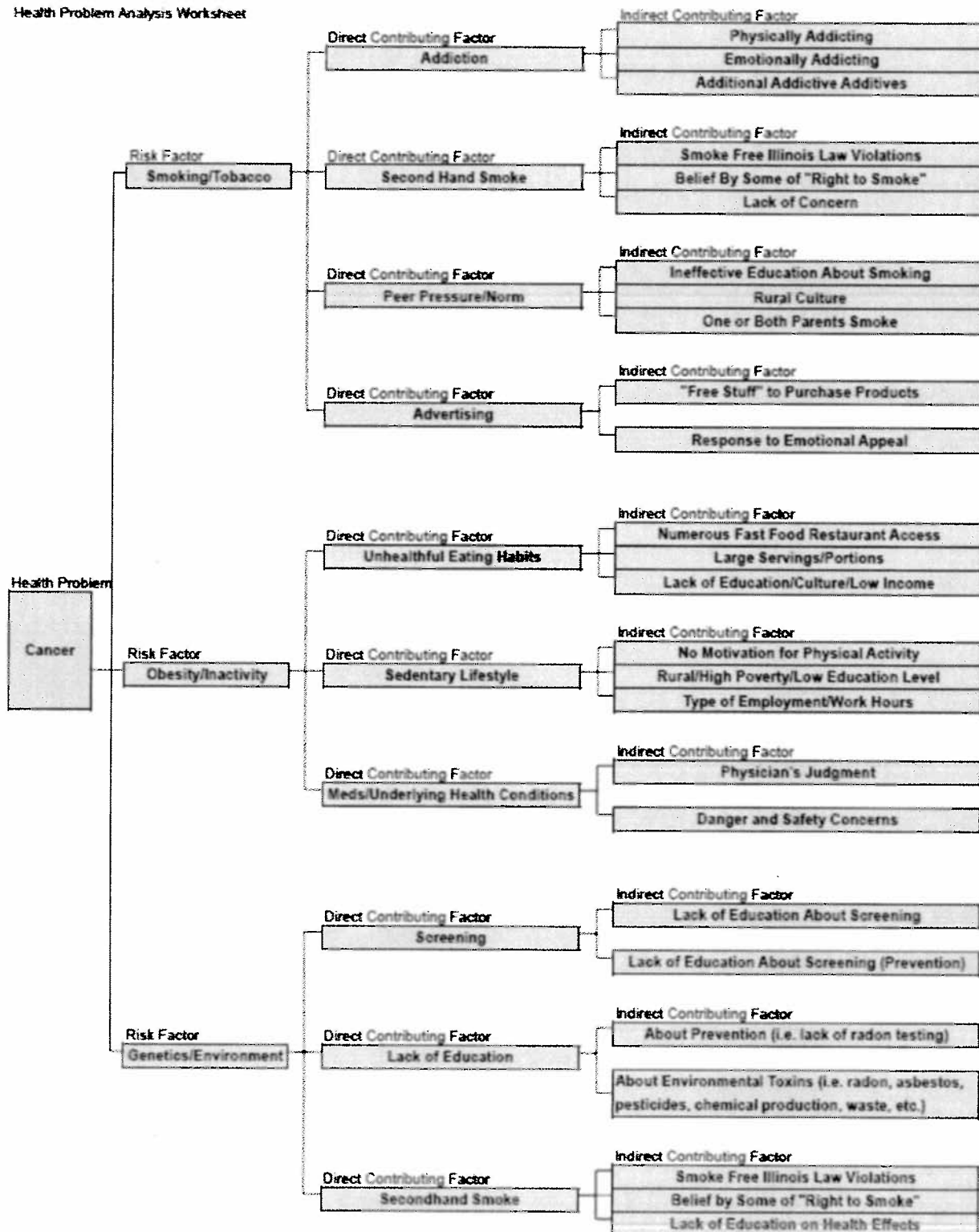
## Appendix J-1: Overweight & Obesity Healthy Analysis Problem Worksheet

Health Problem Analysis Worksheet



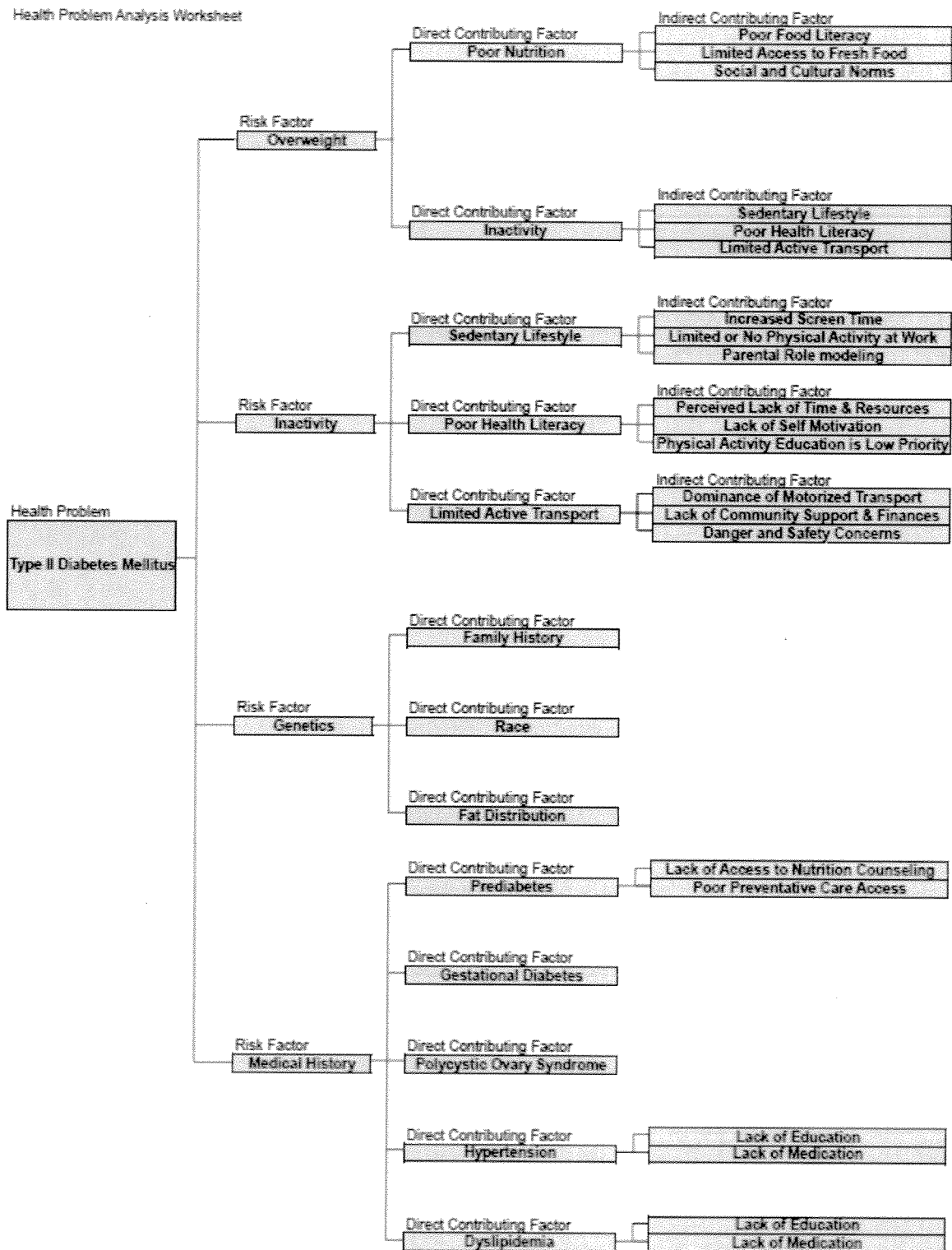
## Appendix J-2: Cancer Health Analysis Problem Worksheet

Health Problem Analysis Worksheet



## Appendix J-3: Type II Diabetes Mellitus Health Analysis Problem Worksheet

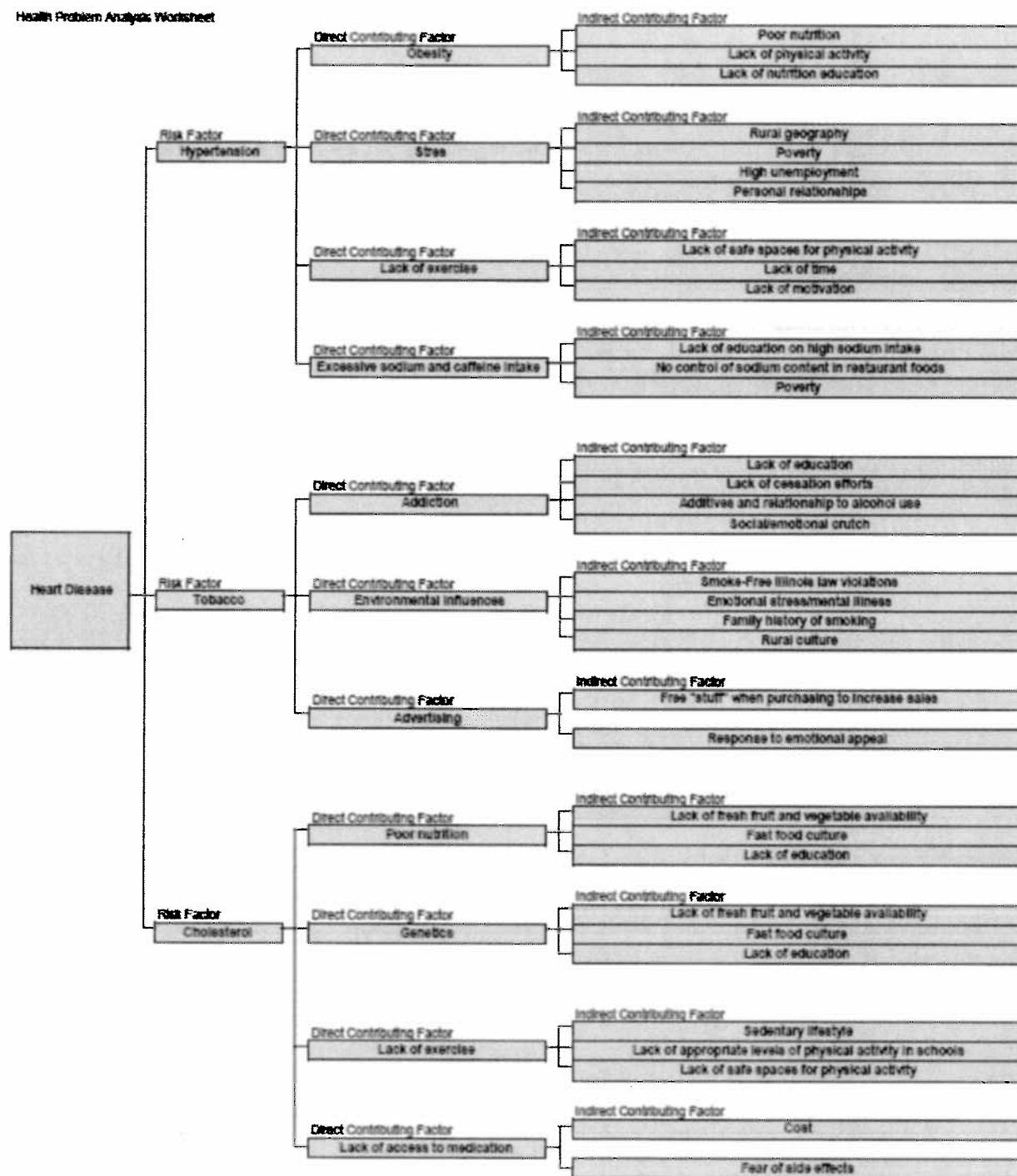
Health Problem Analysis Worksheet





## Appendix J-4: Heart Disease Health Problem Analysis Worksheet

Health Problem Analysis Worksheet



## ***Appendix K: Community Organizations***

### Community Organizations

#### \*Cancer Corners

- Metropolis Library
- Mounds Library
- Rosiclare Library
- Southern Seven Health Department – Pulaski Clinic

#### \*Community and Behavioral Health Centers

- Delta Center – Alexander and Pulaski
- Family Counseling Center – Hardin, Johnson, and Pope
- Massac Mental Health – Massac
- Union County Counseling – Union

#### \*Faith Based Organizations

- Anna Heights Baptist Church – Anna
- Cross Road United Methodist Church – Ullin
- Community Chapel - Golconda
- First Missionary Baptist Church – Cairo
- First United Methodist Church – Metropolis
- Life Church Eastland – Metropolis
- Ohio Chapel United Methodist Church – Grand Chain
- Salem Lutheran Church – Jonesboro
- St John Praise and Worship – Pulaski
- United Methodist Church - Anna
- United Methodist Church - Goreville
- United Methodist Church – Vienna

#### \*Federally Qualified Healthcare Centers (FQHC)

- Community Health & Emergency Services, Incorporated (Alexander, Hardin, Pope, and Pulaski)
- Rural Health, Incorporated (Union and Johnson counties)

#### \*Hospitals

- Hardin County Hospital
- Massac Memorial Hospital
- Union County Hospital

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