

STATEWIDE THEMES AND STRENGTHS ASSESSMENT 2009 FINDINGS

The Committee revises (bolded content) and affirms the 2007 findings as follows:

1. "Health" is seen as a broad concept. This shared understanding is a strength for Illinois.
Health should be defined per the WHO: Health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity.
2. Health is influenced by many factors – ***policy***, services, insurance, providers, and social, economic, ***community, environmental, and political*** determinants. Understanding determinants is important in shaping interventions.
3. Reducing risk factors for chronic disease is a critical tool. ***In recent years, there has been a significant increase in the number of times local communities, through their local health department led IPLAN processes, have identified obesity and diabetes as priority health issues affecting their communities and in need of action/intervention.***
4. The top local health priorities are access to care, cancer and cardiovascular disease.
5. Illinois has a diverse population that requires multi-cultural and linguistic competence. Unfortunately, bias and discrimination remain obstacles.
6. Awareness of health disparities and the need to eliminate them are evident, but data, ***funding and political will*** are insufficient to address them.
7. People view access to care as encompassing medical care services, behavioral health services and oral health services, which can be affected by workforce distribution, lack of insurance and finances, limited cultural and linguistic competence, and knowledge.
8. Healthy relationships with friends and family combined with a strong community where violence is minimized are key elements to making people well.
9. Illinois attempts to improve health in the state through system approaches. Gaps in the health system infrastructure are an impediment to achieving optimum health.
10. There is a fairly strong planning culture in Illinois, but resources for ~~community~~ implementation are insufficient.
11. Despite geographic differences in population density, major health issues seem to be prioritized similarly in both urban and rural communities.

Additional (2009) Findings:

12. Lack of resources threatens the viability of the public health enterprise.

13. Without a public health approach, costs to treat health problems will continue to escalate.
14. Making progress on the SHIP requires funding and traditional resources, but also requires engagement and alignment of effort toward common interests and priorities.
15. Success of the public health effort depends on the robust engagement of the private sector with the non-profit and governmental sectors.
16. The outcome of federal health care reform will impact the approaches and strategies for public health.
17. Reorganizing the primary care delivery system, focusing on outcomes and providing access to comprehensive, integrated and coordinated primary care (medical homes) is a critical component of improving the public's health.
18. Provisions in proposed health care reform legislation may provide new opportunities for employers to incentivize, promote and motivate improved health behaviors and wellness in their employee population.
19. In addition to the plans/initiatives reviewed in the assessment, other initiatives are underway in Illinois that should be considered as the SHIP planning goes forward: health information exchange planning (DHS); older adult services plan (DOA); DHS Strategic Prevention Framework initiative to reduce mis-use of alcohol.