

# State Health Assessment Health Priority Status Report Update

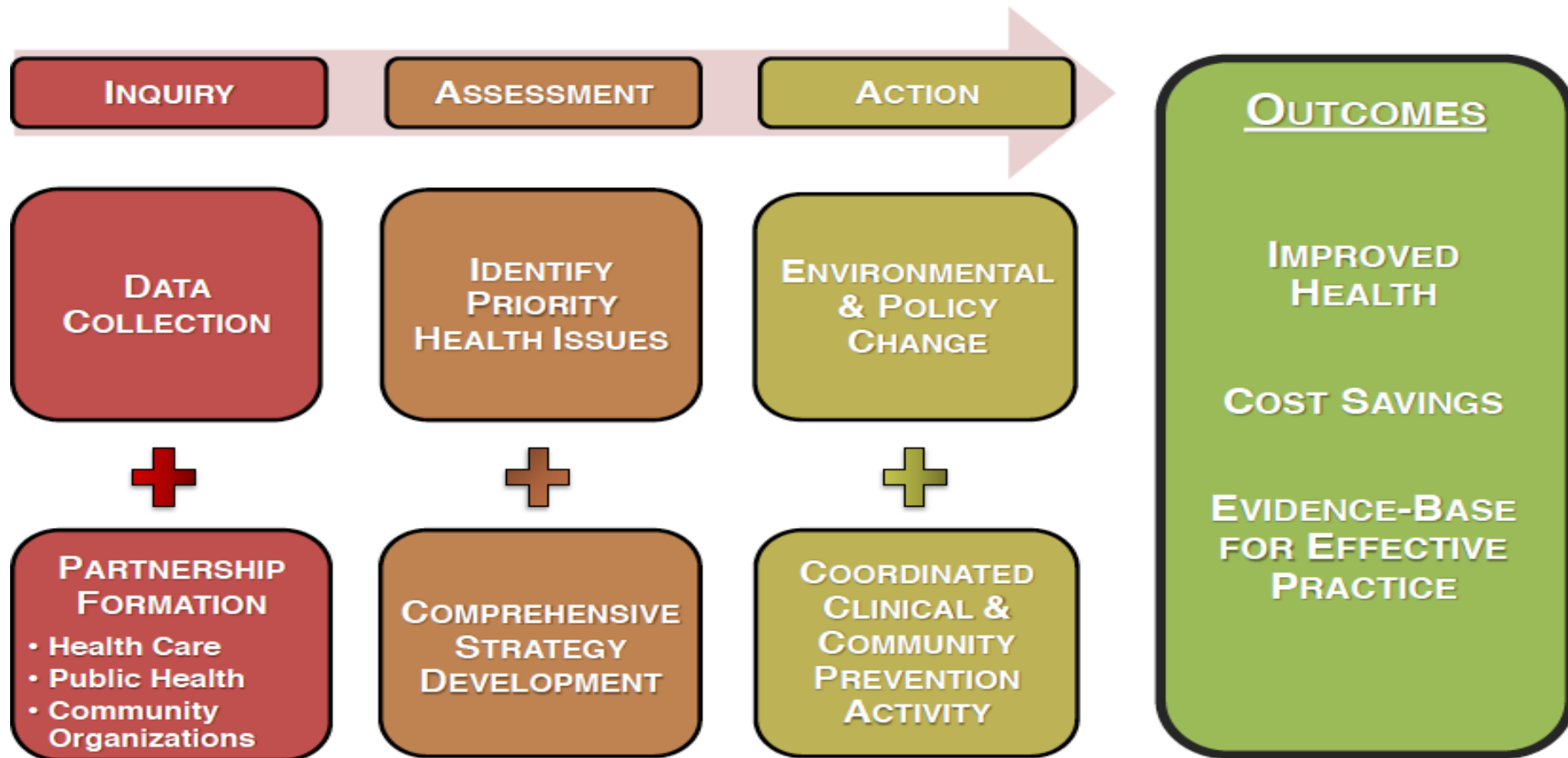
June 29, 2015

Presented by UIC SPH and IDPH

# Health Priority Presentation Objectives

1. Explain context of how this discussion fits into our overall process
2. Provide key examples of the current state of health in Illinois based on the available analyzed data
3. Discuss interpretation, areas of agreement/alignment and gaps in the information provided
4. Agree on several major areas of health prioritization for which to obtain additional information from focus groups

# CLINICAL/COMMUNITY POPULATION HEALTH INTERVENTION MODEL



# What data will be collected?

## Health Indicators

- "How healthy are our residents?" and "What does the health status of our state look like?"

## Forces of change

- "What is occurring or might occur that affects the health of our state?" and "What specific threats or opportunities are generated by these occurrences?"

## Themes and Strengths

- "What is important to the state?", "How is quality of life perceived in the state?" and "What assets exist that can be used to improve health in the state?"

## Health system assessment

- "What are the components, activities, competencies and capacities of our public health system?" and "How are the Essential Services being provided to our state?"
- "To what degree are you satisfied with IDPH/ health system's performance on NPHPS?"

# Indicators

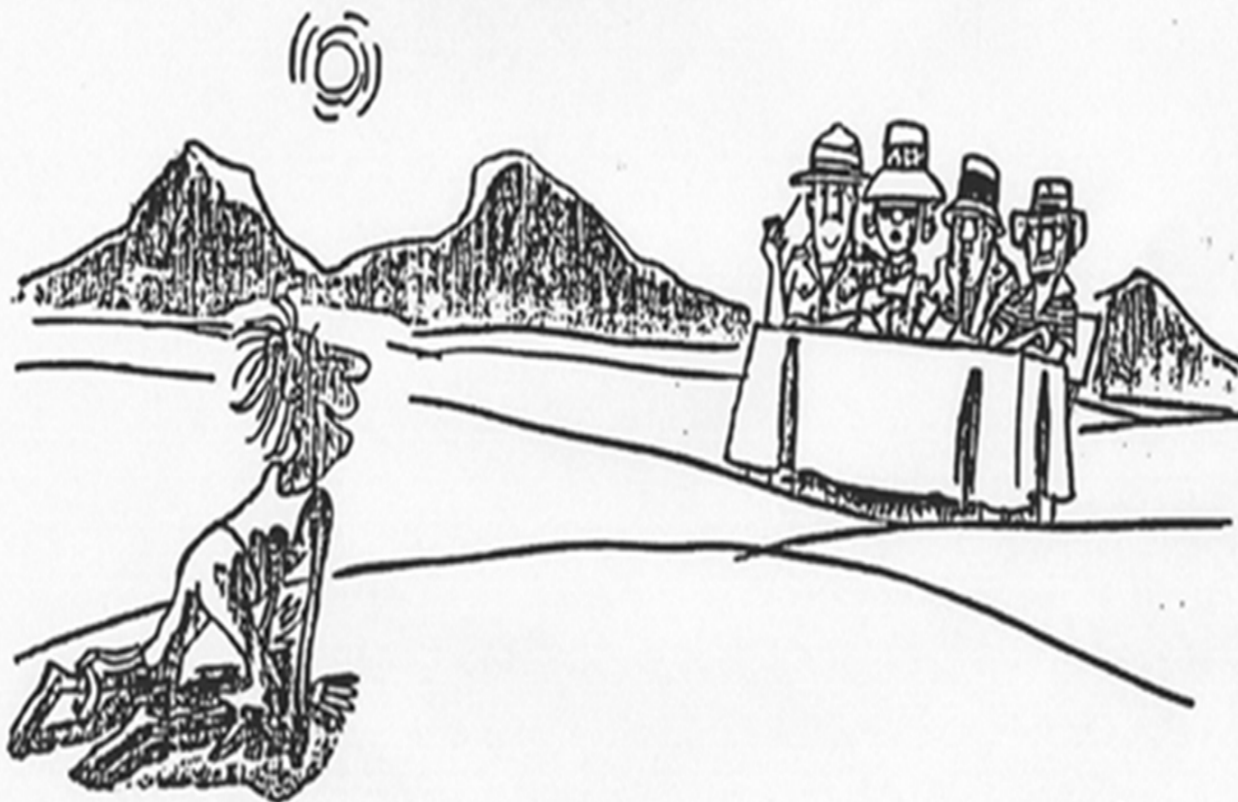
- Indicators are thoughtfully selected data points that provide useful information about the health of a community.
- Indicators can be used to establish a baseline and measure performance/improvement on a particular data point.
- Indicators can present a profile of the community's health and/or serve as a basis to monitor performance.
- Three steps to indicators in an assessment process:
  - Identify indicators that are relevant to community/organization
  - Match indicators to available data
  - Apply the data to the community in a meaningful way

# Domain versus Priority

- Inquiry stage of our assessment process
- Not presenting priorities, but beginning to identify our areas of focus and gather more information
- Use of the term “domain” today suggests this difference



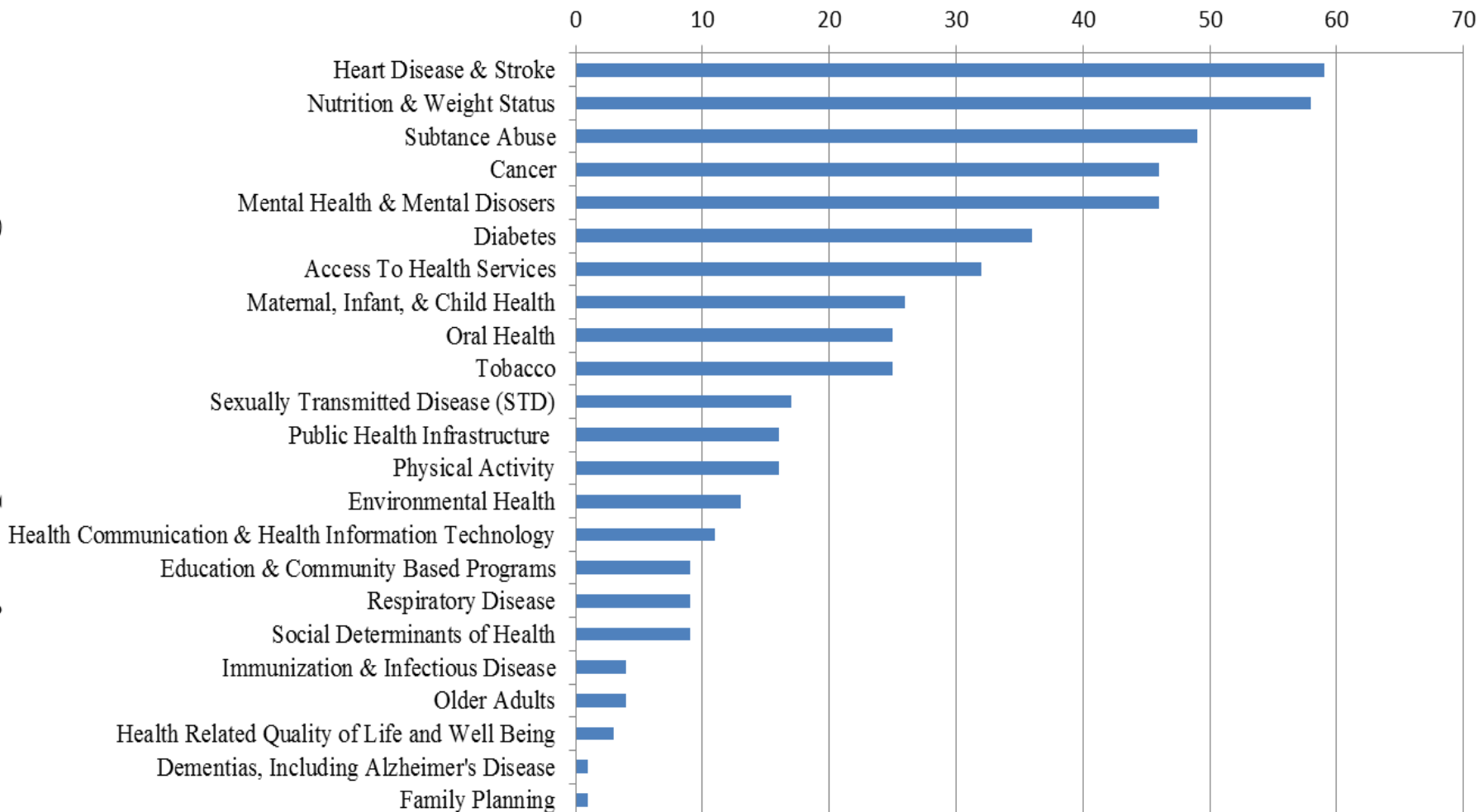
"Thank God! A Panel of Experts!"



# Previously Identified Health Issues LHD IPLANs

## Healthy People 2020 LHD Identified Health Issues

Healthy People 2020 Categories





# Previously Identified Health Issues

## Critical Care Hospitals

- Data is available for 27 critical care hospitals from their community health needs assessment.
- The top priorities listed include:
  - Mental Health Services (26/27)
  - Wellness Education and Prevention ( 23/27)
  - Access to Care (12/27)
  - Continued availability of physicians and medical specialists (10/27)

# Previously Identified Health Issues

## Not-for profit hospitals (N=121)

- Access to HealthCare (71)
- Mental Health (55)
- Obesity (50)
- Substance abuse (26)
- Diabetes (25)
- Cardiovascular Disease (25)

# Previously Identified Health Issues

## LHD/CHNA Summary

- Mental Health
- Access to Care
- Chronic Diseases:
  - Cardiovascular Disease
  - Diabetes
  - Cancer

# Previously Identified Health Issues Planning Council Interviews

- Mental Health
- Access to Healthcare
- Chronic Disease

# Presentation of Illinois Health Data: What to Expect

In hearing the presentation of health data, consider the following questions:

- How do the previously identified health issues from health plans align with the data?
- How do the previously identified health issues from health plans differ from the data?

# Presentation of Illinois Health Data: What to Expect

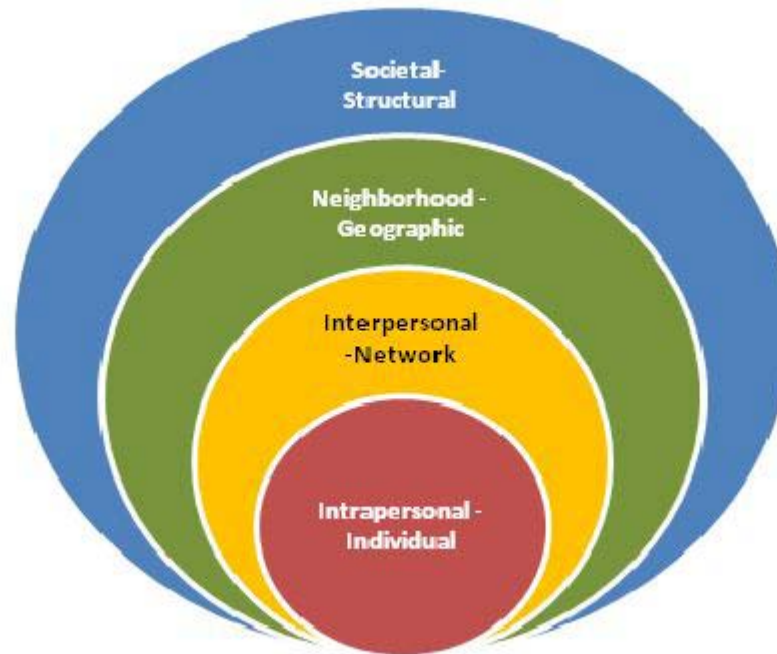
- The data being presented today are only a part of the Illinois health story
- Going forward, the story can be more fully told as we decide what data are needed as a basis for a prioritization process:
  - How many and which data elements
  - Type and extent of stratification and comparisons across groups by age, race/ethnicity, gender, and/or geography
  - Trend data
  - Comparison to external standards such as national goals
  - Maps

# Health Domains

- **Context**
  - Demographics
  - Social Determinants of Health
- **Health Status**
  - Morbidity & Mortality
  - Chronic Conditions
  - Communicable Disease
- **Health Behaviors**
- **Health in the Community**
  - Environmental Quality
  - Neighborhood Safety, Injury and Violence
- **Health Care**
  - Access and Utilization
  - Clinical Indicators

# Health Domains

The identified domains loosely correspond to the arenas of the ecological model of health, which offers a way to link public health action to improved population health





# Health Domain: Context

## Population Size

- In 2014, Illinois was home to nearly 13 million people, and is the fifth most populous state
- Chicago is the third largest city in the nation, with 2.7 million residents
- The total population of Illinois increased 3.3% between 2000 and 2010.

# Health Domain: Context

## Age and Place of Birth

- Over 3 million (23.5%) residents are younger than 18 years old
  - Nearly 800,000 (6%) are under age 5
- 
- As of 2013, close to 14% of Illinois residents were foreign-born; more than half of these were non-citizens.
  - Approximately 1 in 5 Illinoisans speak a language other than English at home; Spanish is the most common

# Health Domain: Context

## Where do people live?

- Two-thirds of Illinois residents live in Cook County and the adjacent 5 “collar” counties.
  - From 2000-2010, Cook County's population decreased 3.4% ; Chicago's population decreased 6.9%
- Population in the collar counties increased 15%
- There was some population decrease in rural counties

# Health Domain: Context

## Racial and Ethnic Diversity

	Illinois Overall, 2013
Non-Hispanic White	62.7%
Non-Hispanic African American	14.7%
Hispanic	16.5%
Asian	5.1%

Cook County and Chicago are more diverse:

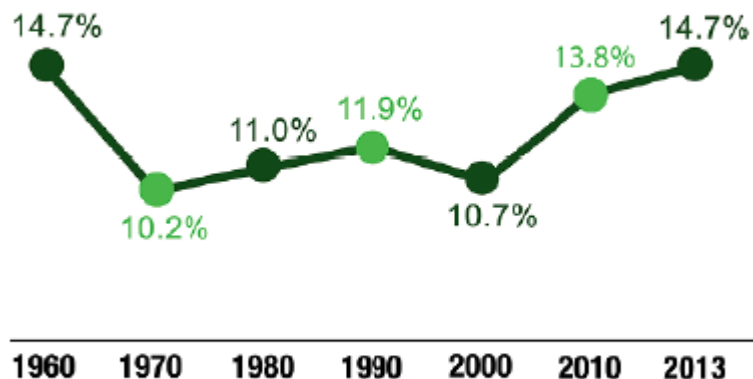
	Cook County, 2013	Chicago, 2010
Non-Hispanic White	43.4%	31.7%
Non-Hispanic African American	24.6%	32.9%
Hispanic	24.7%	28.9%
Asian	6.9%	5.5%

\* <http://quickfacts.census.gov/qfd/states/17000.html>

# Health Domain: Context

## Poverty

Illinois Poverty Over Time



U.S. Census Bureau's decennial censuses and 2010 and 2013 American Community Survey 1-year estimates programs.

Illinois Poverty by Race, Ethnicity, and Age, 2013

Group*	Number	Rate
<b>Total</b>	<b>1,845,393</b>	<b>14.7%</b>
Children	616,060	20.7%
<b>Working Age</b>	<b>1,081,022</b>	<b>13.6%</b>
Seniors	148,311	8.8%
<b>White, Non-Latino</b>	<b>748,920</b>	<b>9.5%</b>
Black	555,756	31.6%
<b>Asian</b>	<b>74,235</b>	<b>11.9%</b>
Latino	430,159	20.7%

\* Groups may not be mutually exclusive.  
U.S. Census Bureau's 2013 American Community Survey 1-year estimates program

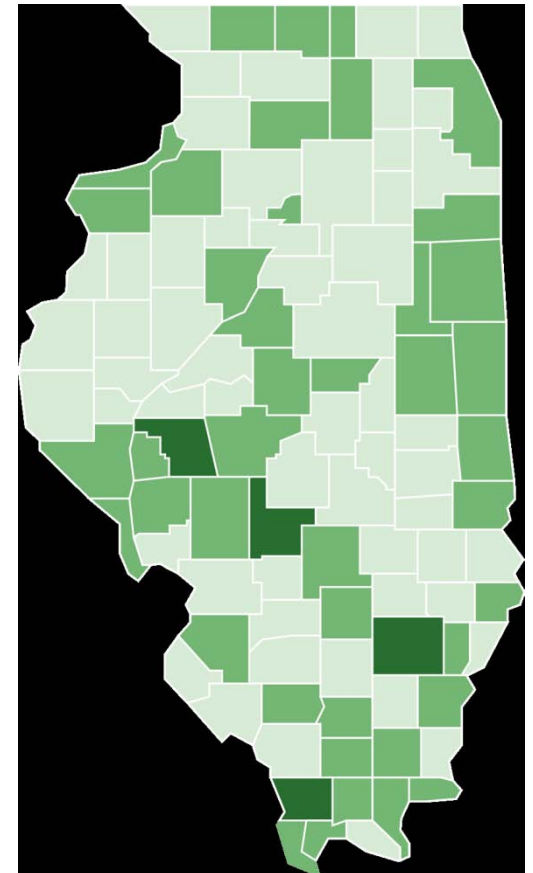
Terpstra, A., Clary, J., & Rynell, A. (2015, January). *Poor by comparison: Report on Illinois poverty. Chicago: Social IMPACT Research Center at Heartland Alliance.*

# Health Domain: Context

## Poverty

The Index of County Well-Being is a score based on particularly negative conditions and trends on four key indicators:

1. poverty
  2. unemployment
  3. teen births
  4. high school graduation rate
- 42 IL counties—the darker green—are on the well-being "watch list"
  - 4 IL counties—the darkest green—are on the well-being "warning list"
    - Montgomery, Morgan, Union, and Wayne



Terpstra, A., Clary, J., & Rynell, A. (2015, January). *Poor by comparison: Report on Illinois poverty*. Chicago: Social IMPACT Research Center at Heartland Alliance.

# Health Domain: Context

## Education and Employment

- Illinois: 87% HS graduates; 31% college graduates
  - Cook County: 81% HS graduates
- 
- 66% adults in labor force, 2009-2013
  - 2013 unemployment: 9.5%
  - Per capita median income: about \$30,000, 2009-2013
  - On average, an hourly wage of \$17.34 is needed to afford a 2 bedroom apartment

<http://quickfacts.census.gov/qfd/states/17000.html>; U.S. Census Bureau, American FactFinder, Table DP-01

Terpstra, A., Clary, J., & Rynell, A. (2015, January). *Poor by comparison: Report on Illinois poverty*. Chicago: Social IMPACT Research Center at Heartland Alliance.

# Health Domain: Context

## Other Example Indicators

- Teen birth rate
- Measures of income inequality
- Measures of food insecurity
- Health insurance status



# Health Domain: Health Status

## Leading Causes of Death

Causes of death which accounted for more than 1,000 deaths each: Illinois, 2011.

All causes	101,291
1. Diseases of heart	24,607
2. Malignant neoplasms	23,852
3. All Accidents, including motor vehicle	7,20
4. Chronic lower respiratory diseases	5,369
5. Cerebrovascular diseases	5,324
6. Alzheimer's disease	2,896
7. Diabetes mellitus	2,658
8. Influenza and pneumonia	2,394
9. Nephritis, nephrotic syndrome / nephrosis	2,361
10. Septicemia	1,828
11. Chronic liver disease and cirrhosis	1,121
12. Intentional self-harm (suicide)	1,041
13. Parkinsons's disease	1,024

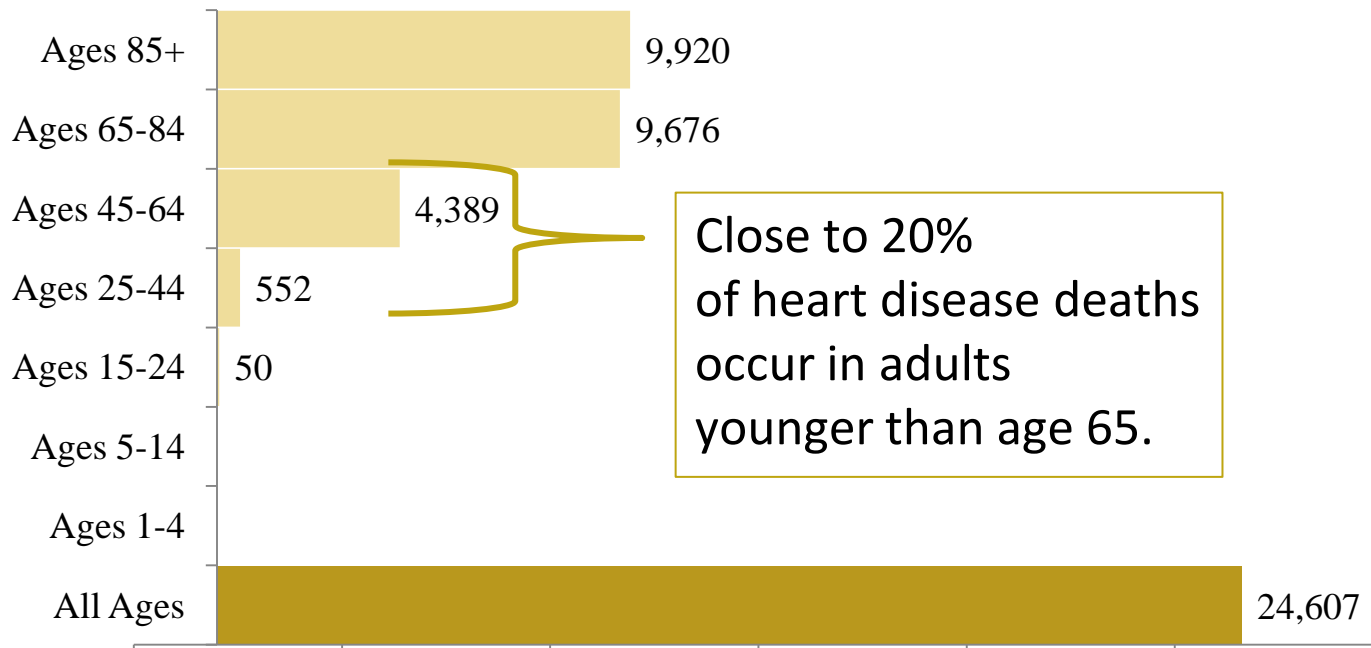
# Health Domain: Health Status

## Heart Disease Mortality

### Select Causes of Death by Age Group

#### Number of Deaths Due to Heart Disease

Illinois, 2011



\*Age-specific numbers may not sum to the total for all ages due to missing values for age.

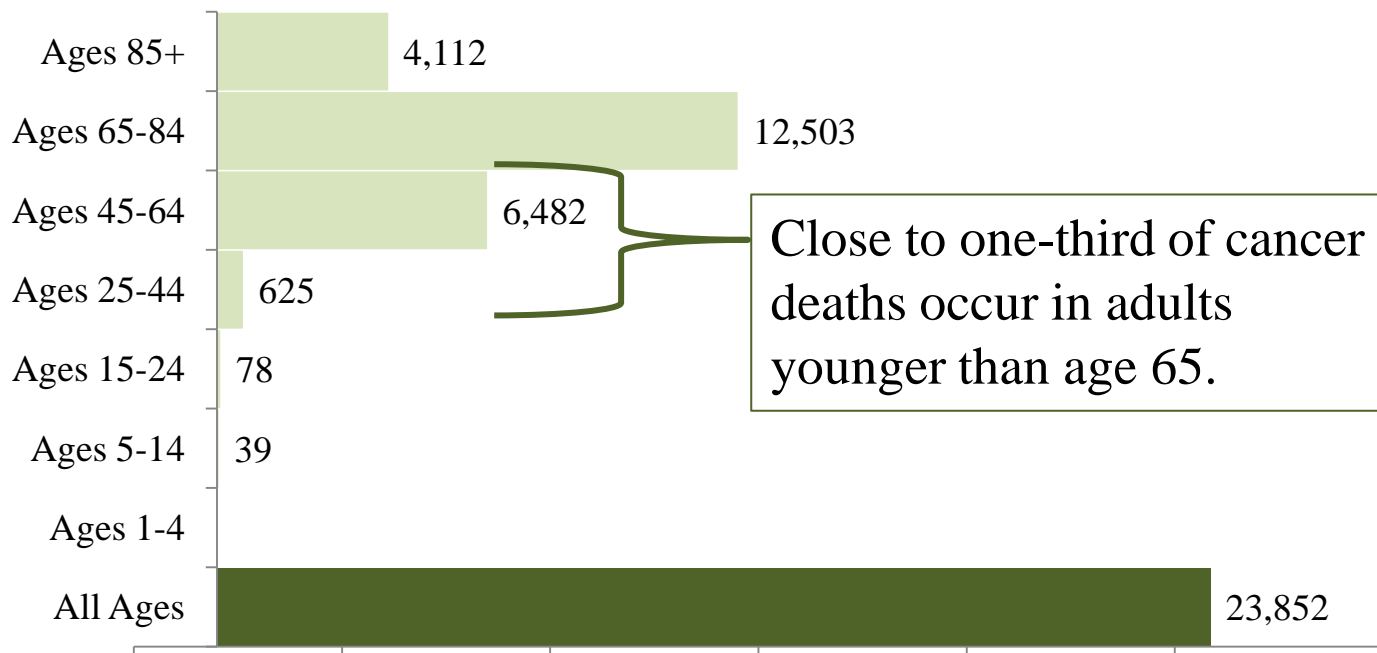
# Health Domain: Health Status

## Cancer Mortality

### Select Causes of Death by Age Group

#### Number of Deaths Due to Malignant Neoplasms

Illinois, 2011



\*Age-specific numbers may not sum to the total for all ages due to missing values for age.

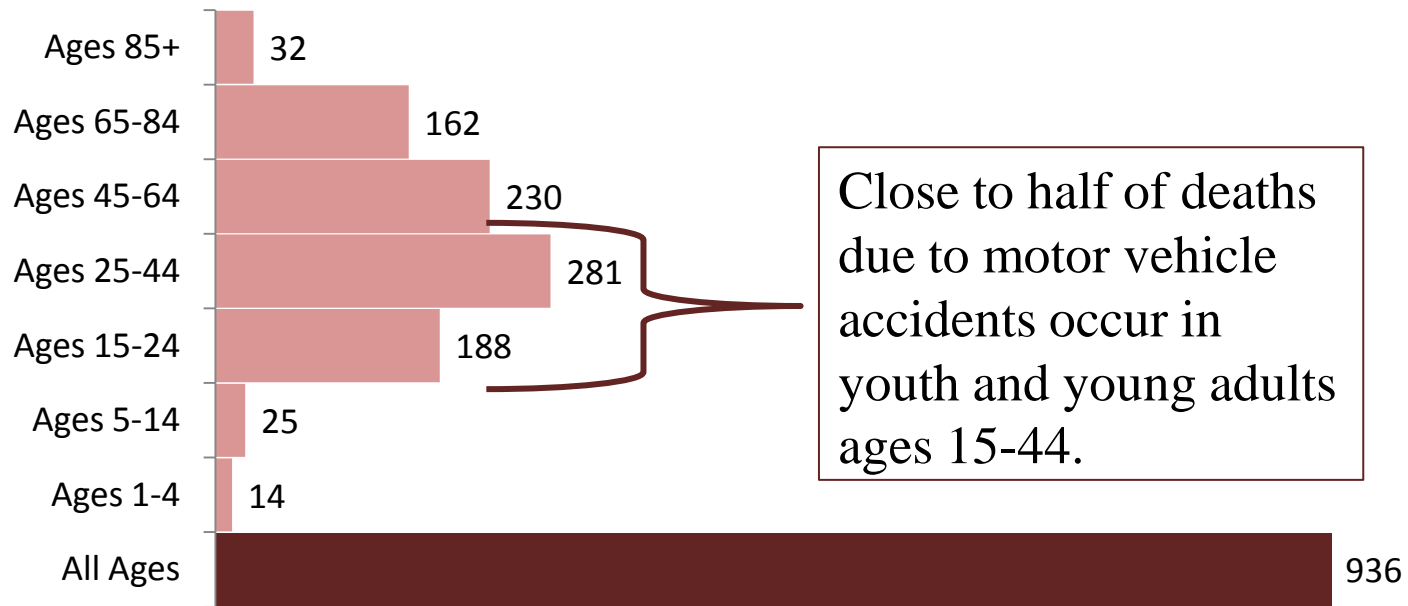
# Health Domain: Health Status

## Motor Vehicle Accident Mortality

### Select Causes of Death by Age Group

#### Number of Deaths Due to Motor Vehicle Accident

Illinois, 2011



\*Age-specific numbers may not sum to the total for all ages due to missing values for age.

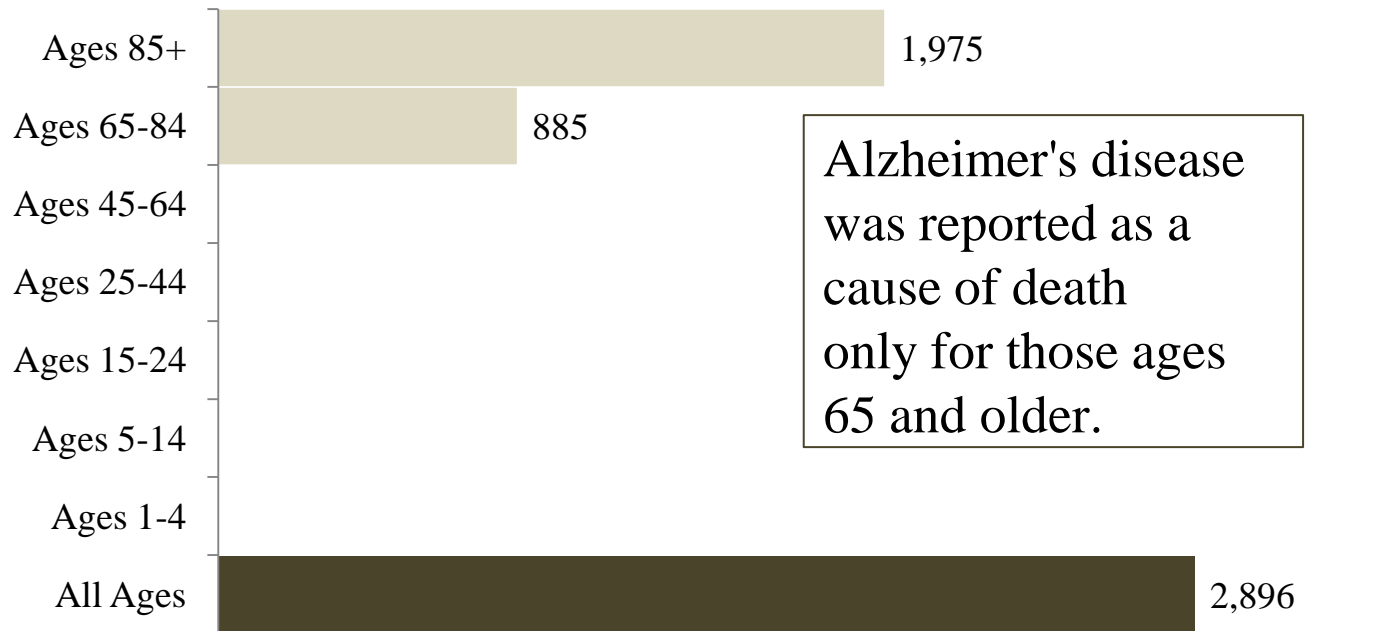
# Health Domain: Health Status

## Alzheimer's Disease Mortality

### Select Causes of Death by Age Group

#### Number of Deaths Due to Alzheimer's Disease

Illinois, 2011

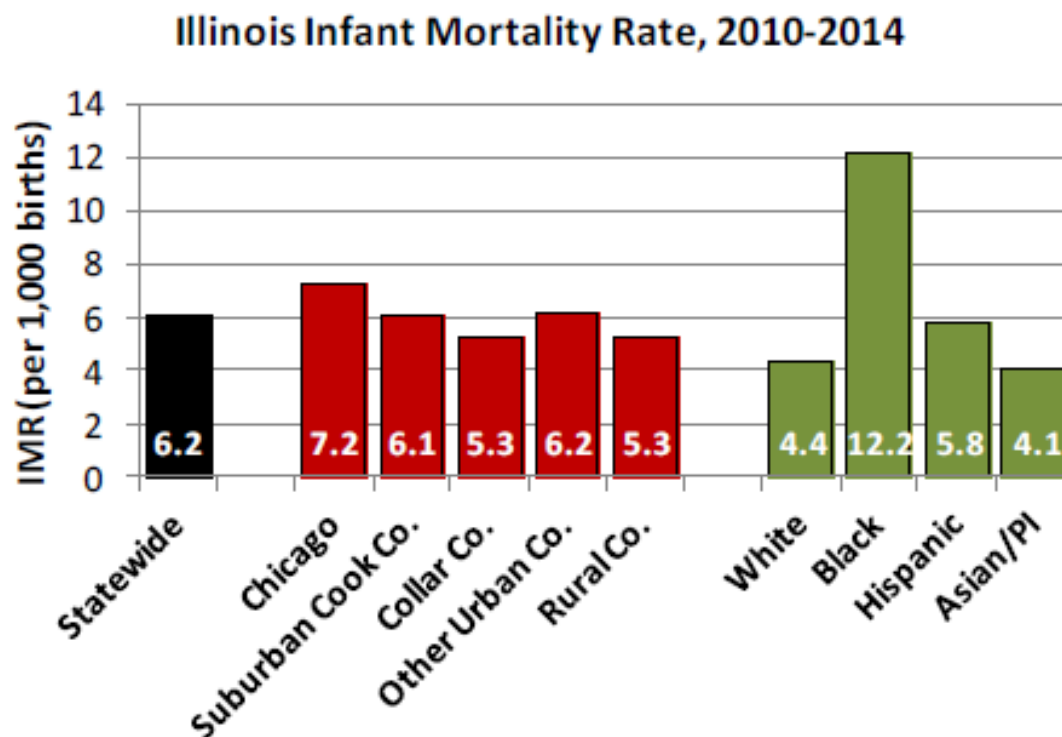


\*Age-specific numbers may not sum to the total for all ages due to missing values for age.

# Health Domain: Health Status

## Infant Mortality

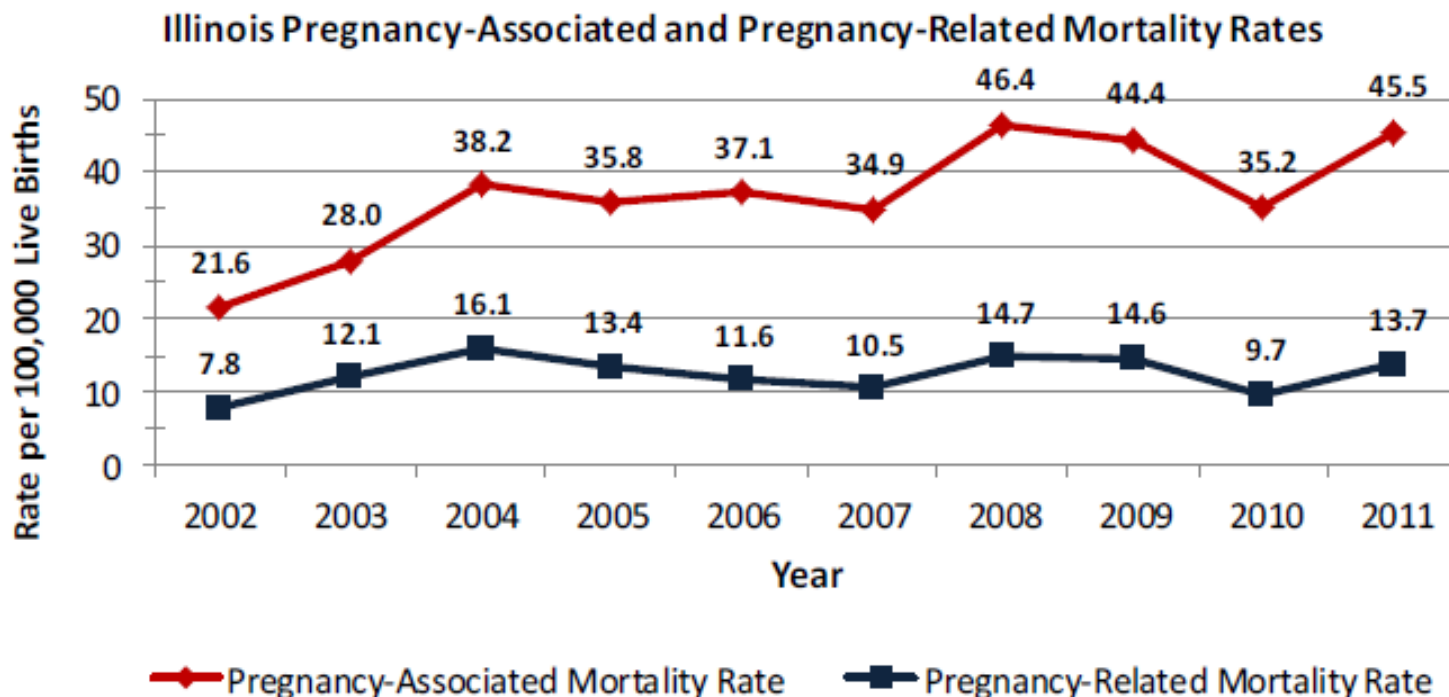
There are striking racial/ethnic disparities in IM, in which black infants are about 2.8 times as likely as white infants to die in the first year of life.



# Health Domain: Health Status

## Maternal Mortality

- Illinois 2013: 28.9 per 100,000 for black women, 3.5 times the rate of 8.1 in white women
- Healthy People 2020 target: 11.4 per 100,000



Death and Birth records, IDPH, Vital Records, accessed through IDHFS-EDW, produced by IDPH-Office of Women's Health and Family Services

# Health Domain: Health Status

## Other Example Mortality Indicators

- Cause-Specific Mortality
  - Coronary heart disease and stroke
  - Specific cancers
  - Asthma mortality
  - Diabetes mortality
  - Suicide
- Age-specific mortality
  - Child mortality
  - Premature adult mortality
- Mortality by race/ethnicity, gender, and geography

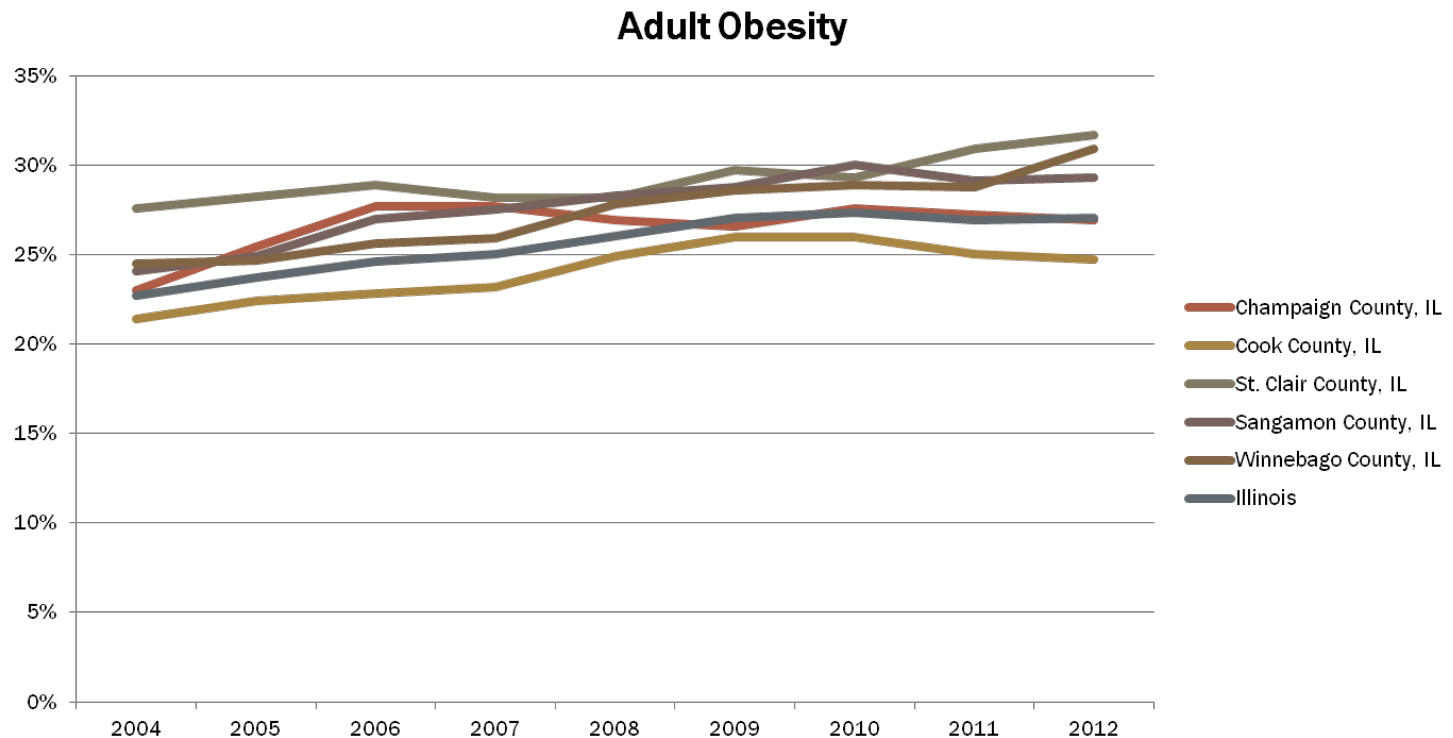


# Health Domain: Health Status

## Obesity

In 2013, nearly 30% of Illinois adults were obese; the rate for African-Americans was almost 39%.

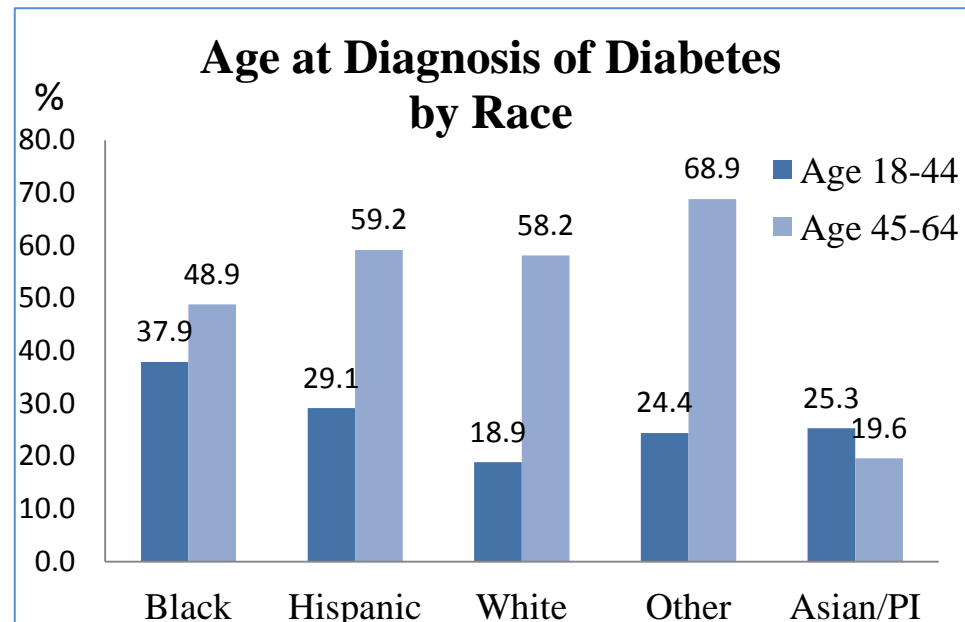
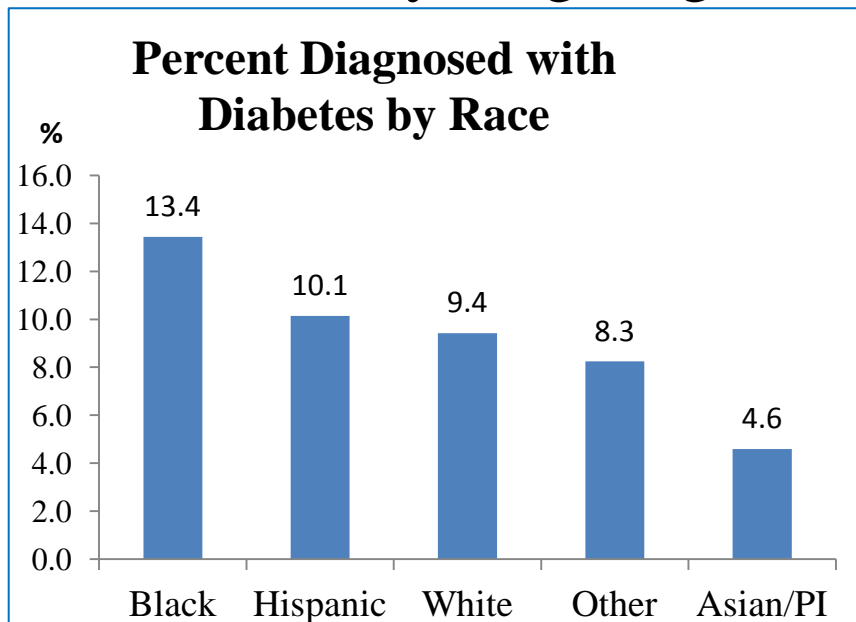
Obesity rates  
rising from  
2004-2012



# Health Domain: Health Status

## Diabetes

- Nearly 10% of Illinois adults surveyed in 2013 had been diagnosed with diabetes at some time.
- African-Americans have the highest percent of diabetes overall, and in addition they tend to be diagnosed with diabetes at younger ages.

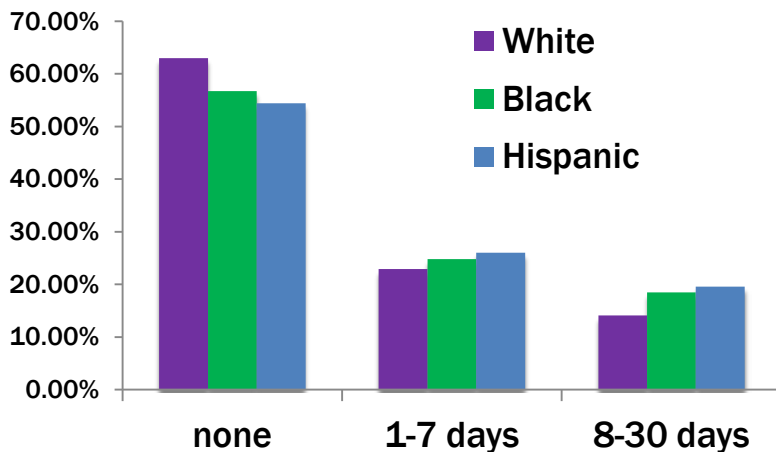


# Health Domain: Health Status

## Mental Health & Adverse Childhood Experiences

- More than 1 out of 10 adults in Illinois reported experiencing poor mental health more than one week in each month.
- The number of poor mental health days reported each month varies by race/ethnicity and is also higher among adults who reported having adverse childhood experiences (ACEs).

**Days Mental Health Not Good,  
by Race and Ethnicity, 2013**



**Average Number of Days per Month Illinois  
Adults Reported Mental Health Not Good,  
According to Number of ACEs**

ACEs	Average Days	95% CI
4 or more	5.9	5.9, 8.0
1-3	3.2	3.2, 4.1
none	2.5	2.5, 3.3

# Health Domain: Health Status

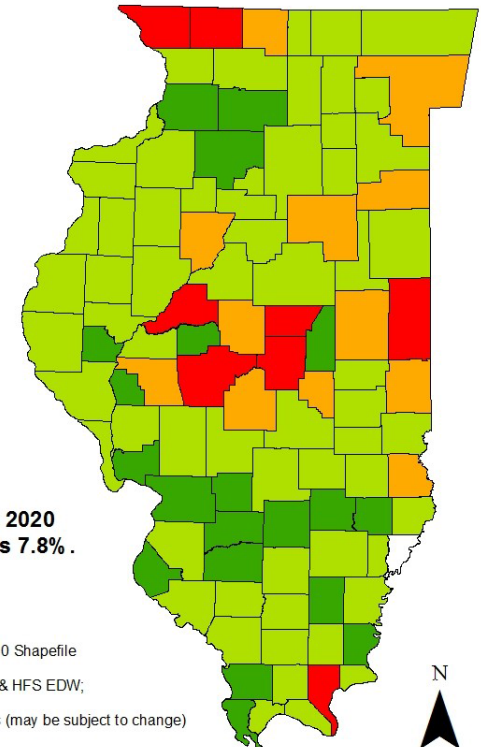
## Low Birthweight

In 2014, 7.8% (around 12,000) Illinois babies were born at low birthweight. This meets the *Healthy People* objective, but pockets of high risk remain in some rural counties along with a persistent black-white disparity across the State.

Low Birth Weight (LBW) Rate, By Illinois County, 2010-2014

**LBW Rate**

- < 6.0%
- 6.0 - 7.8%
- 7.9 - 9.0%
- > 9.0%

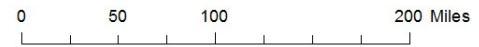


The Healthy People 2020 Objective for LBW is 7.8% .

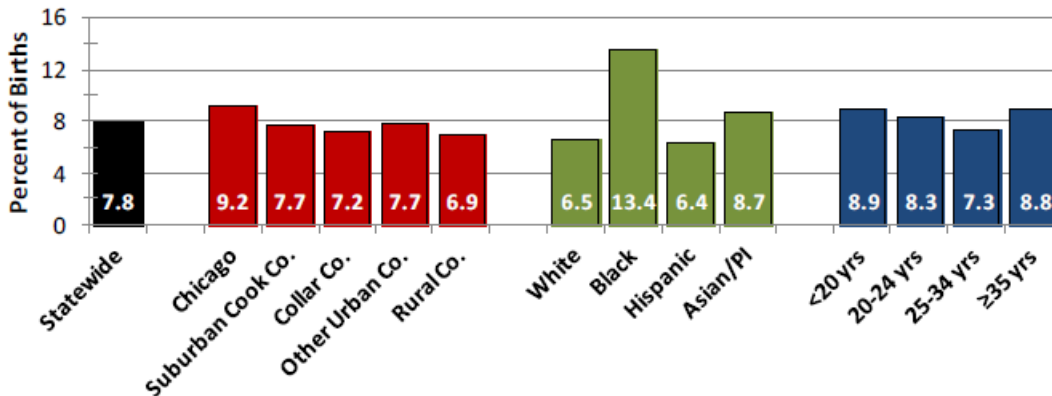
**Data Sources:**

Map File: TigerLine Census 2010 Shapefile  
 Birth Data: IDPH Vital Records & HFS EDW; 2010-2011 final birth files; 2012-2014 provisional birth files (may be subject to change)

Analysis Details:  
 Includes births occurring in Illinois to Illinois resident women



Percent of Illinois Births that were Low Birth Weight (<2500g), Provisional Birth Certificates 2014\*



# Health Domain: Health Status

## Other Example Indicators

- Cancer: specific incidence & prevalence
- Heart disease & stroke, incidence and prevalence
- Sexually transmitted disease incidence/prevalence and trends, including HIV, chlamydia, and gonorrhea
- Tuberculosis incidence, prevalence, and trends
- Vaccine preventable diseases
- Other mental health indicators
- Dementia and aging

# Health Domain: Health Behaviors

## Adolescent Smoking and Alcohol Use

- Substance use and abuse among Illinois teens overall is very similar to that of the U.S. overall
- Survey data showed that almost 40% of teens drank at least once in the month before the survey, and over 20% drank more than 5 drinks in a row in that month
- Almost 20% of teens smoked in that month, and over half had tried to quit

# Health Domain: Health Behaviors

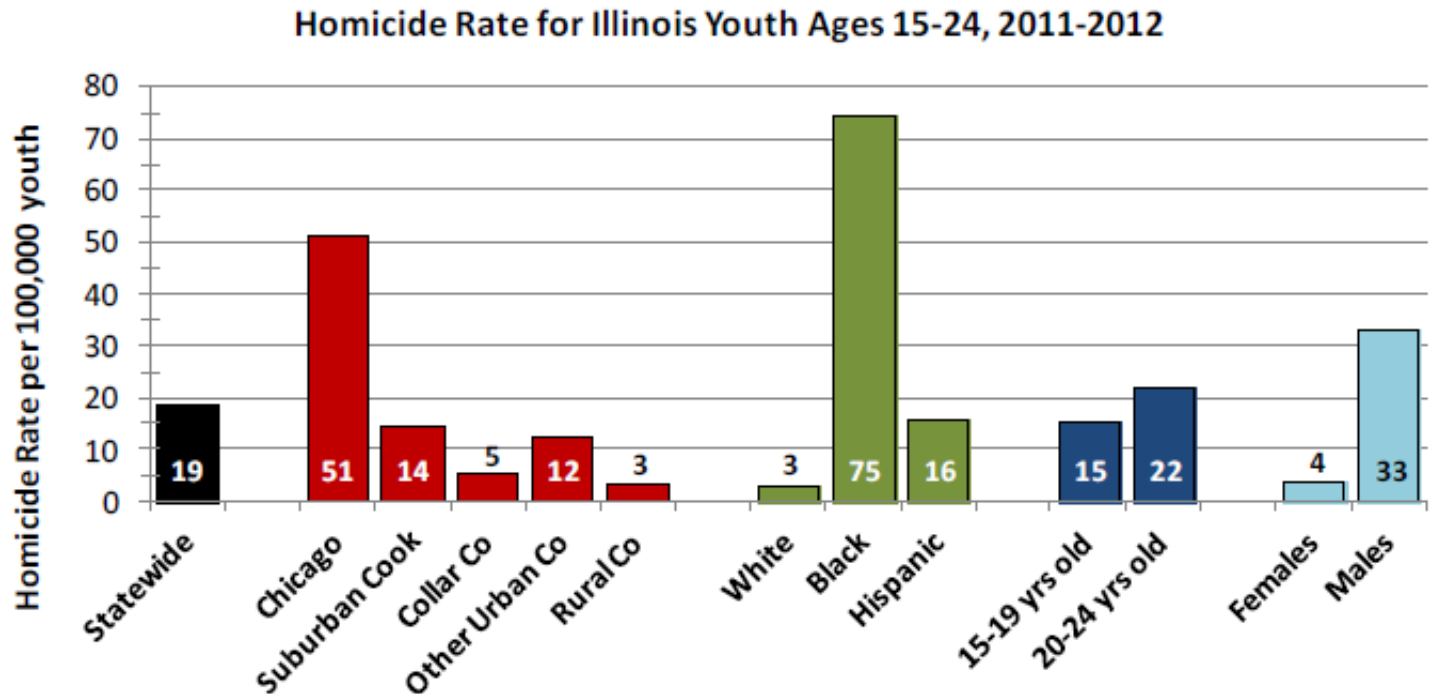
## Other Example Indicators

- Diet and nutrition
- Physical activity
- Drug use
- Smoking and alcohol: teens, adults, during pregnancy

# Health Domain: Health in the Community

## Homicide

For those ages 15-24, the highest homicide rates are seen among those living in urban areas, among males, and among African Americans.

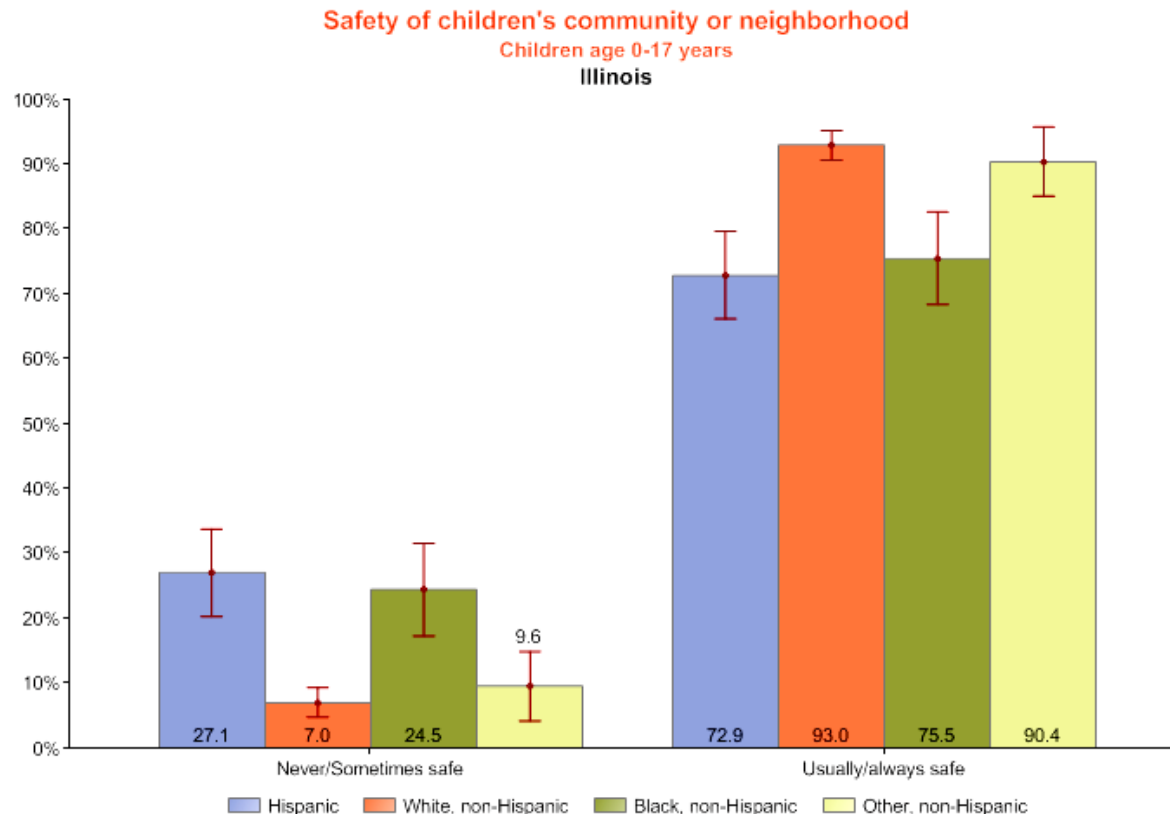




# Health Domain: Health in the Community

## Safe Neighborhoods

Approximately 1 in every 4 Hispanic and black non-Hispanic children were reported to be living in an unsafe neighborhood.



# Health Domain: Health in the Community

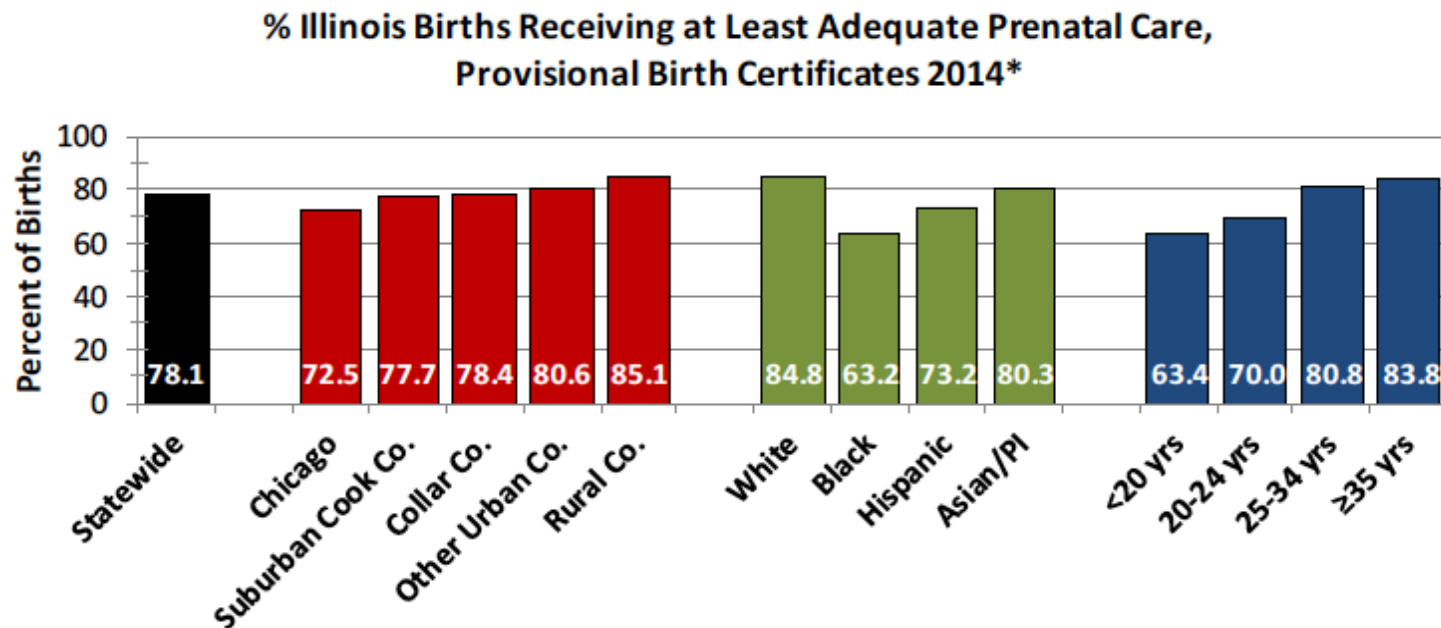
## Other Example Indicators

- Environmental quality, e.g., air and water quality, lead contamination
- Transit
- Family and social support
- Injury

# Health Domain: Health Care

## Prenatal Care

- Healthy People 2020 objective: 77.6% receive early and adequate prenatal care
- Illinois overall: 76.9% in 2010; 78.1% in 2014
- Blacks: 63.2% and women <20 years old: 63.4%

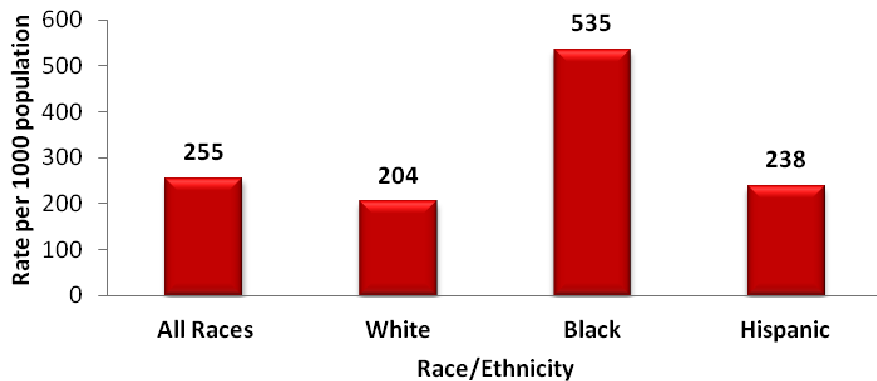


# Health Domain: Health Care

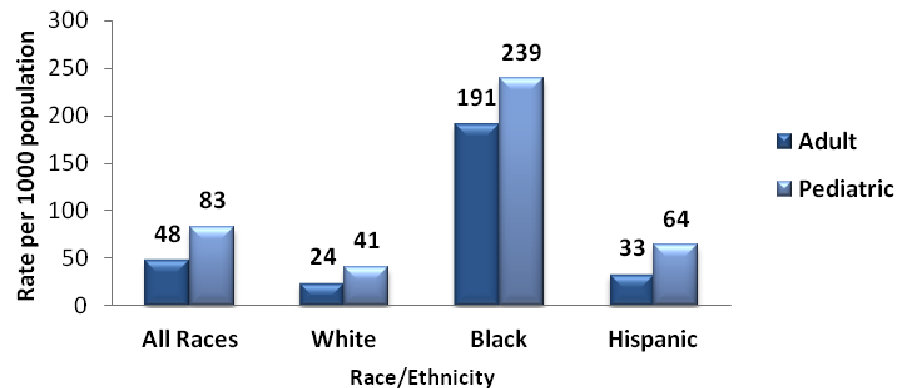
## ED Visits for Diabetes and Asthma

Visits to the Emergency Department (ED) for conditions such as diabetes and asthma are markers of access to care since they should predominantly be managed in a primary care setting.

**Illinois State Adult ED Diabetes Visit Rates, 2011-2013**



**Illinois State Adult & Pediatric ED Asthma Visit Rates, 2011-2013**

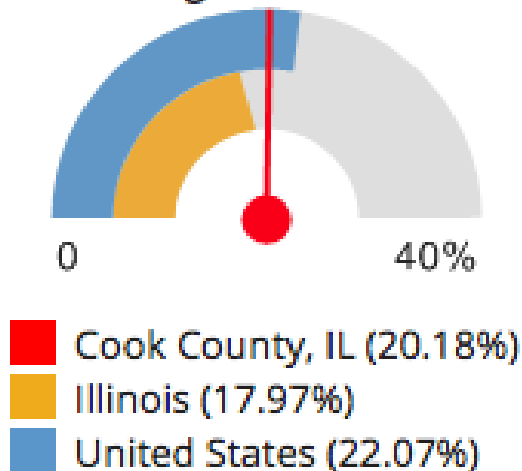


# Health Domain: Health Care

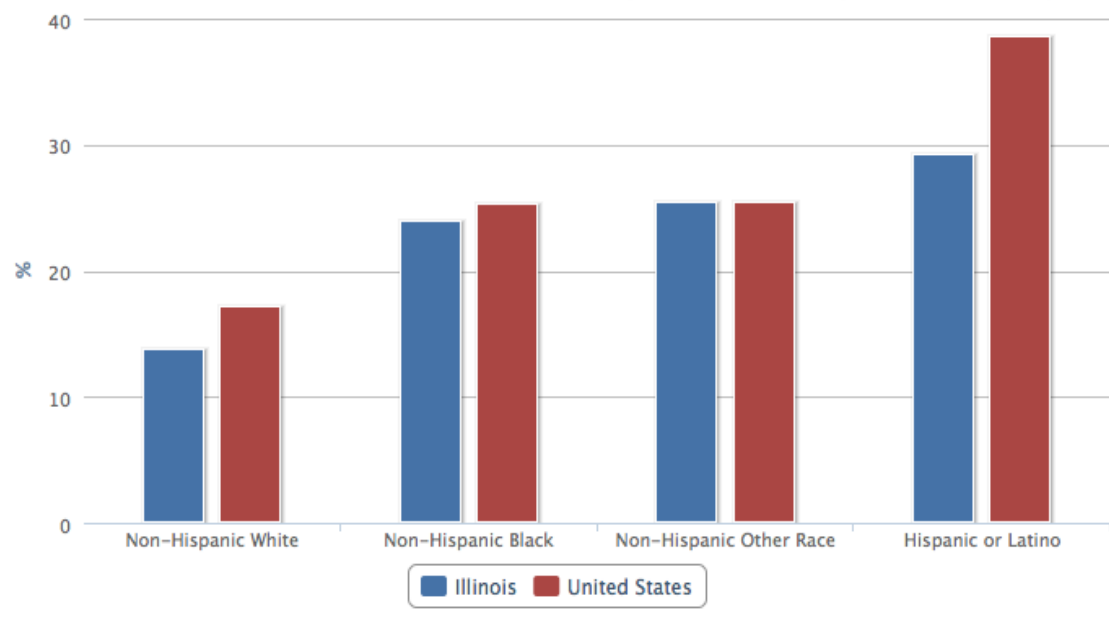
## Primary Care Providers

- Hispanic/Latinos have the highest rate of not having a consistent source of primary care
- The rate in Illinois is lower than the U.S. overall
- Cook: higher than Illinois overall, lower than U.S.

Percent Adults Without Any Regular Doctor



Adults Without a Consistent Source of Primary Care, Percent by Race / Ethnicity



# Health Domain: Health Care

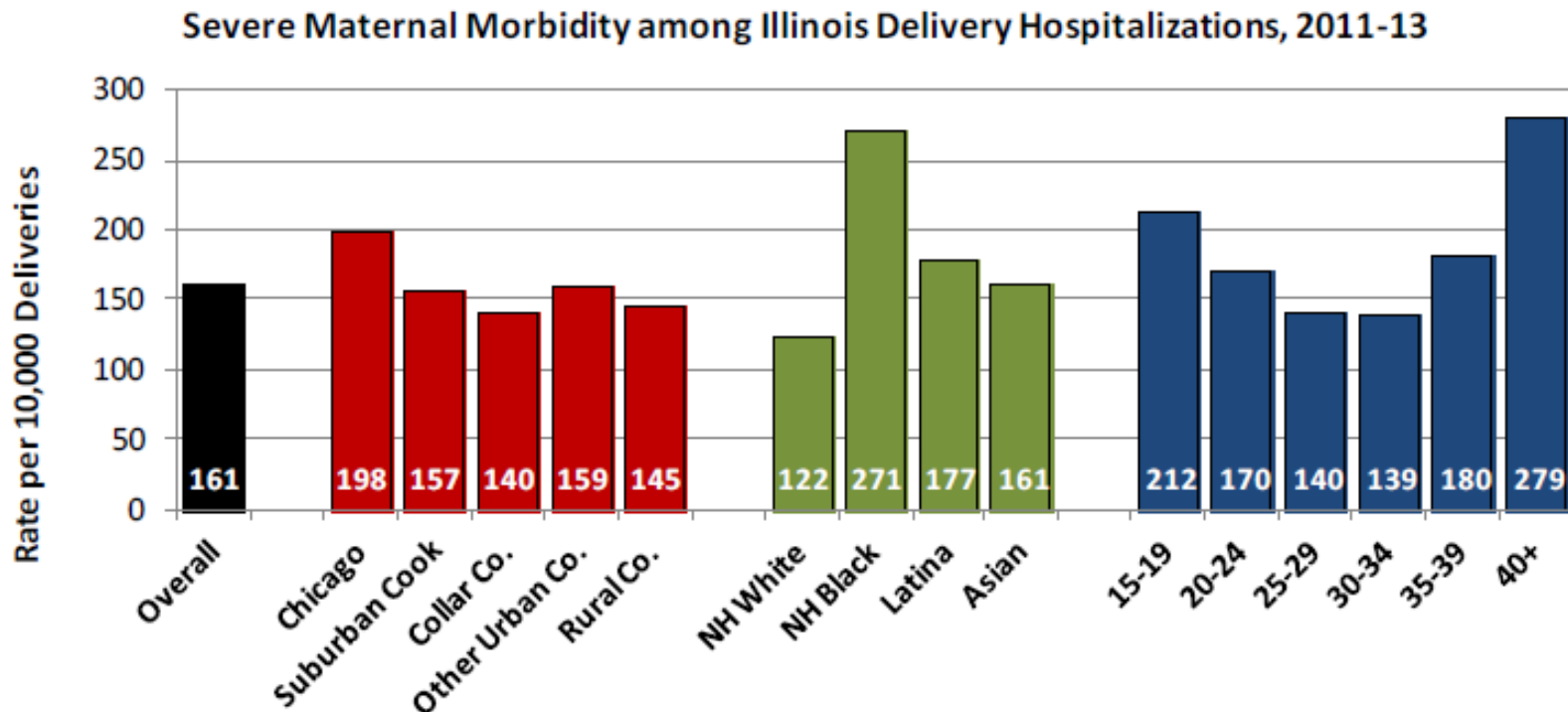
## Other Example Indicators

- Ratio of population to mental health providers
- Percent adults and children with a medical home
- Percent treatable emergent & primary care
- Percent preventable/avoidable emergent & primary care
- Percent of all primary care sensitive visits
- Rate of preventable hospitalizations

# Health Domain: Health Care

## Severe Maternal Morbidity (SMM)

- In 2011-2013, more than 7200 women experienced severe morbidity during pregnancy; the SMM rate in IL was 161/10,000 deliveries, compared to the national rate of 129/10,000



# Health Domain: Health Care

## Hospital Acquired Infections

- Fewer MRSA infections from 2012 to 2013:
  - 358 vs. 293 cases
  - Statistically significant SIR decrease of 16.2%
- No significant drop in *C. difficile* infections
  - 4620 vs. 4466 cases
- Both rates significantly lower than national baseline



# Health Domain: Clinical Indicators

## Other Examples

- Rate of hospital admissions for uncontrolled diabetes
- Rate of hospital admissions for asthma in younger adults
- Central line-associated bloodstream infections
- Emergency Department visits for mental/behavioral health outcomes such as drug overdose