

Crawford County
Community Health Needs Assessment
2012 – 2017



Prepared by

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Crawford County Health Department

for

Illinois Department of Public Health
Springfield, Illinois

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Priorities: Mental Health
 Obesity
 Cancer

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I. CRAWFORD COUNTY HEALTH DEPARTMENT

In November 1991, the Crawford County Board signed a resolution to establish the Crawford County Health Department and appointed the Board of Health. Factors influencing the Board's decision were an unknown childhood immunization rate, a tripled number of TB cases, and increasing sanitation complaints.

In February 1992, the Board of Health signed a contract with Crawford Memorial Hospital District to provide the Health Department programs. In March 1992, the Crawford County Health Department opened in the Commercium Building at 301 S. Cross Street in Robinson.

In March 1998, the Crawford County Board, Crawford County Board of Health, and Crawford Memorial Hospital District mutually realized that the Health Department had reached an independent level of maturity. Therefore, it was resolved that the Intergovernmental Agreement, having effectively served its vital purpose of establishing a viable county health department, be terminated as of May 1, 1998. On this date all Health Department employees were transferred from the employment of Crawford Memorial Hospital District to that of Crawford County.

In March of 2003, Crawford County Health Department relocated to its current address at 202 N. Blaine Blvd. Robinson, IL. This move allowed improved accessibility by offering services on one level. The new building also offers a more efficient floor plan for the public and staff.

II. MISSION STATEMENT

The mission of the Crawford County Health Department is to prevent disease and to assist in the maintenance of optimum health for the citizens of Crawford County through the assessment of needs, development of policy, provision of education, and the assurance of services.

III. PURPOSE

The purpose of the community health needs assessment was to assist the Crawford County Health Department in identifying health concerns within the county. The specific tasks of the needs assessment were to collect, analyze, prioritize, and share information about health problems within Crawford County. The community health needs assessment was used to provide a sturdy information base from which the quality of health in Crawford County may be improved. The Crawford County Health Department began this project to promote community involvement and to increase awareness of health department programs. It was the intent of the Crawford County Health Department to act as a liaison between the professional health community and the county residents.

IV. INTRODUCTION

The secretary of Health and Human Services released a document in September of 1990 titled Healthy People 2000. This publication sought to be a "national strategy for significantly improving the health of the nations over the coming decade". This document was the basis for the IPLAN (Illinois

Project of Local Assessment of Needs) project, because it provided the statistical foundation for health problem reduction.

Since 1990, two updated versions of Healthy People have been released, titled Healthy People 2010 and Healthy People 2020. Within these documents are national rates for numerous health problems as well as objectives for health problem reductions. The baselines within these documents as well as the statistical data found in IPLAN Data Summary reports, US Census Bureau, IDOT, IDOC, ISP, and other sources of information were used for this project.

Since the original Healthy People 2000, Illinois has implemented a plan of action for the health of its citizens. This plan of action was described in a publication titled A Road to Better Health for All Illinois Citizens. Contained in this publication are two suggestions for Illinois.

1. Local and statewide needs assessments to identify and describe public health needs.
2. A state health plan related to the national health objectives.

These suggestions included a community health needs assessment process for all local health departments. This was the preface and subsequent new rule for local health department certification, hence the IPLAN process. The process identified three priority health problems and developed strategies to reduce these problems within five years.

V. METHODS

A. Community Participation Process

The Crawford County Health Department followed the eight recommended steps of the APEX-PH (Assessment Protocol for Excellence in Public Health) model:

- 1) Prepare for the Community Process.
- 2) Collect and Analyze Health Data.
- 3) Form a Community Health Committee.
- 4) Identify Community Health Problems.
- 5) Prioritize Community Health Problems.
- 6) Analyze Community Health Problems.
- 7) Inventory Community Health Problems.
- 8) Develop a Community Health Plan.

To begin the IPLAN process, all staff was made aware of the process during a staff meeting and internal newsletter. Prior organizational capacity assessments for the Crawford County Health Department were reviewed by the Administrator and Management staff. Management staff completed the 2012 Crawford County Health Department organizational capacity assessment utilizing the National Association of County and City Health Officials (NACCHO) Self Assessment Tool. The Board of Health was made aware of the IPLAN process and organizational capacity assessment during board meetings. The board expressed commitment to proceed with the IPLAN process.

B. Committee Membership

A list of potential committee members was compiled. These persons were solicited by written correspondence or telephone for initial contact. The letter contained a brief introduction of the IPLAN process. Approximately a week after the letter was mailed, a follow-up telephone call was made to inquire if the individual would be involved in the process. A committee of ten Crawford County residents or people working in Crawford County was selected. These people represented many diverse backgrounds, ages, and careers.

IPLAN Committee

- 1) Bobbi Branson
Administrative Assistant, Crawford County Health Department, Robinson
- 2) Michele Brown
Occupational Health Nurse/Fitness & Wellness Coordinator
Hershey Chocolate Company, Robinson
- 3) Sandra Burtron
Chief Nursing Officer, Crawford Memorial Hospital, Robinson
- 4) Todd Liston
Sheriff of Crawford County, Robinson
- 5) Kelly Meeks
Director of Pharmacy, Crawford Memorial Hospital, Robinson
- 6) Donna Milam
Director of Environmental Health and Planning and Preparedness
Crawford County Health Department, Robinson
- 7) Terry Shaffer
Nursing Supervisor, Crawford County Health Department, Robinson
- 8) John Sutfin, II
Crawford County Board, Robinson
- 9) Darla Tracy
Certified Public Health Administrator
Crawford County Health Department, Robinson
- 10) Jodi Wiman
Social Worker/Counselor, Oblong

Darla K. Tracy, Certified Public Health Administrator of Crawford County Health Department coordinated the committee meeting. The Committee met September 11, 2012 for the community needs assessment and the community health plan in the V.C. Van Tassell Room of Crawford Memorial Hospital, Robinson, Illinois. The role of the IPLAN committee was to identify health problems facing Crawford County residents and to differentiate between true health problems and risk factors. Once understood, the group prioritized health problems and ultimately chose three that they felt were the highest priority in Crawford County. After three health problems were identified, the committee discussed available resources to Crawford County residents and also potential barriers. Outcome objectives and intervention strategies were then developed to reduce these problems.

VI. RESULTS

A. Data Analysis

Most data was obtained from the internet from a variety of sources including, but not limited to the Illinois Department of Public Health, Illinois Department of Transportation, Illinois State Police, Department of Children and Family Services, and the US Census Bureau.

B. 2011 Illinois Health Rankings

The Robert Wood Johnson Foundation and the University of Wisconsin Population Health Institute have conducted a County Health Ranking project for the past two years. This project is a collection of fifty reports that reflect

the overall health of counties in each state in the U.S. The purpose is to allow counties to get a snapshot of how healthy their residents are by comparing their overall health and the factors that influence their health with other counties in their state. Illinois has 102 counties. The higher the rank, the worse the factor is in Crawford County when compared to other counties in Illinois. Of the six factors studied, Crawford County ranked as follows: Socioeconomic Factors (45th of 102), Health Behaviors (47th of 102), Physical Environment (50th of 102), Mortality (60th of 102), Clinical Care (65th of 102), and Morbidity (74th of 102).

C. Community Health Problem Survey

A survey was created explaining the definition of a health problem and asking persons to simply write what they felt the top three health problems were in Crawford County. The survey also asked some demographic questions such as age and gender. A total of 209 surveys were circulated in the county. The surveys were distributed to eleven sites within Crawford County: Crawford County Health Department, Crawford Memorial Hospital, Hershey Chocolate, Marathon Petroleum, Walmart, Robinson Correctional Center, Brookstone Estates, Crawford County Courthouse Annex, Lincoln Trail College, Crawford County Board and Board of Health Members, and Pulliam Funeral Home. Six of these eleven sites chose to participate in the survey. The six participating sites were Crawford Memorial Hospital (33), Crawford County Health Department (16), Crawford County Courthouse Annex (5),

Pulliam Funeral Home (2), Lincoln Trail College (9), and Crawford County Board and Board of Health Members (8).

Of the combined 73 returned surveys, the top five identified health problems were:

1.	Cancer	48
2.	Diabetes	42
3.	Obesity	38
4.	Heart Disease	24
5.	Drug Abuse	8

Generally speaking a person's perceptions of what is a health problem in the county can be determined by what they have seen in their family, friends, or at work. This survey demonstrates this fact by the responses given. Persons working at the hospital and at the college encounter a great deal of cancer, while those working at the Health Department encounter diabetes and obesity on a regular basis.

D. Demographic and Socioeconomic Characteristics

Crawford County Profile

Crawford County, Illinois is a small county with a total area of 446 square miles. Crawford County has several acres of floodplain and significant flooding has been recorded in the past. It is geographically located on the extreme eastern side of Illinois and borders Indiana. Because of this proximity to Indiana, many Crawford County residents go to physicians or hospitals in Terre Haute or Vincennes, Indiana.

Crawford County is a small county of approximately 19,817 persons according to the 2010 Census. Robinson is the county seat for Crawford County and has a population of 7,726. Other municipalities within Crawford County are Oblong with a population of 1,469; Palestine with a population of 1,372; Hutsonville with a population of 556; Flat Rock with a population of 332; and Stoy with a population of 108.

According to the 2010 census there were 7,763 households in Crawford County between 2006 and 2010 with an average size of 2.36 persons per household. The median income per household during those years was \$41,434, and the percentage of the population that was below the poverty line during that time was 16.9%. The average value of the housing units in Crawford County during the time frame of 2006 to 2010 was \$70,400.

The racial makeup of the county is 93% white non-Hispanic, 5% African American, and 2% of other races including Asian, Hispanic, and Native American. Crawford County has a state correctional facility, Robinson Correctional Center, which houses 1,200 inmates and the above mentioned population and race data include these inmates.

Population

In 2010, the population for Crawford County was 19,817 while the population for Illinois was 12,830,632 and the population for the United States was 308,745,538.

Gender

In 2010, the gender distribution for Crawford County was divided fairly equal with 51.9% male (10,287) and 48.1% female (9,530).

Age

Population distribution by age revealed that a great deal of Crawford County residents were between 45 to 54 years of age (3,121 or 15.7%). The population of Crawford County below and including age 24 is 5782 or 29.2%, while the population above and including age 65 is 3336 or 16.8%.

Race

The majority of Crawford County residents, 18,381 (92.8%) were white, non Hispanic. In 2010 approximately 980 (4.9%) of the Crawford County residents were African American while the other 502 (2.5%) were of various races.

Marriage, Divorce, and Annulment

Historically, the marriage rate for Illinois has been significantly more than the divorce rate. In 1960, the marriage rate was 8.7 while the divorce rate was 2.2 (per 1,000 persons). In 2009, the marriage rate for Illinois was 5.6 and the divorce rate was 2.5. Since 1960, the spread between the marriage and divorce rate has become less, because fewer people are getting married and more are getting divorced.

In 2009, the marriage rate for Crawford County was 5.9 while the divorce rate was 4.7. When marriage and divorce rates for Crawford County are compared to Illinois, the data shows that the Crawford County rates are much higher than Illinois statistics.

Unemployment Rate

Unemployed persons are defined as those not at work during the survey week, but who had attempted to find work during the last four weeks and were still looking. The unemployment rate is the percentage of these people that are unemployed. Overall, the unemployment rate for Crawford County and Illinois appears to be decreasing. The May 2012 the unemployment rate for Crawford County was 7% which was lower than the unemployment rate for Illinois which was 8.6%.

Federal Poverty Levels

The federal poverty level slightly increases each year and in 2012 the combined income for a family of four is at or below \$23,050. The federal poverty level is the threshold from which food stamps and Medicaid operates. The WIC (Women, Infants, and Children) grant, which administers food coupons to pregnant mothers or mothers with small children through the age of five, operates at a slightly higher level than federal poverty level. The WIC grant serves persons at or below 185% of federal poverty level which is at or below \$42,643 for a family of four in 2012.

Medicaid

The percentage of persons enrolled in Medicaid for Crawford County consistently is higher than the percentage of persons enrolled in Illinois. In 2000, the Crawford County percentage was 15.0% while the Illinois percentage was 12.2%. Each year these numbers steadily rose both in Crawford County and in Illinois. In 2002, the Crawford County percentage of persons enrolled in Medicaid was 17.0% while the Illinois percentage was 14%.

Food Stamps

In general, the percentage of persons receiving food stamps in Crawford County is fairly consistent with the Illinois percentage. In 2003, the percentage of Crawford County residents receiving food stamps was 8.2% while the Illinois percentage was 7.8%. Each year, the percentage of persons receiving food stamps rises slightly. In 2005 the percentage of Crawford County residents receiving food stamps was 9.8% while the Illinois percentage was 9.2%.

E. General Health and Access to Care

Leading Causes of Death

For each year from 2006-2008, the four leading causes of death in Crawford County were:

- 1) Diseases of the Heart
- 2) Malignant Neoplasms

- 3) Chronic Lower Respiratory Disease
- 4) Cerebrovascular Disease

Between the years 2006-2008, an average of approximately 223.6 Crawford County residents died per year. Generally speaking, the numbers of people that die by one of the top four causes of death in Crawford County are very similar from year to year. For instance, in the year 2006, 56 persons died of disease of the heart, 65 died in 2007, and 61 died in 2008.

Years of Potential Life Lost

Years of Potential Life Lost (YPLL) is a measurement of premature death.

YPLL is the number of years which are lost by persons who die before age 65.

If someone dies at the age of 50 they are said to have 15 YPLL.

For the year 2006, the top five types of death for Crawford County and Illinois in terms of YPLL were:

- 1) Accidents including motor vehicle
- 2) Malignant Neoplasms
- 3) Diabetes
- 4) Diseases of the Heart
- 5) Chronic Lower Respiratory Disease

Medicaid Physician Ratio

The number of Medicaid enrollees per one physician in Crawford County is more than double the number for Illinois. In 2002, there were 169.9

Medicaid enrollees to one physician in Crawford County while in Illinois there were 82.3 enrollees per physician.

F. Maternal and Child Health Indicators

Birth Rates

Crawford County birth rates are consistently lower than Illinois. In 2008, the Crawford County birth rate per 1,000 was 9.8 while the Illinois birth rate was 13.7. Over time, the birth rate for Illinois is very slightly decreasing while the Crawford County birth rate appears to be relatively stable.

Unmarried Birth Mothers

Historically, in Illinois, the birth rate to unmarried mothers has been very low. In 1950 the rate per 1,000 was 36.0. This number has dramatically increased over the years. In 2009, the birth rate to unmarried mothers was 407.6 per 1,000.

Births to Teens

Historically, in Illinois, the percent of birth to teens has decreased over time. In 1970, 16.9% of the children born in Illinois were born to a teenage mother. Since that time, the percentage of births to teens has decreased. In 2009, 9.6% of the children in Illinois were born to a teenage mother. From the data it appears that births to teenage mothers is decreasing in Illinois, but fluctuates in Crawford County.

In Crawford County, the percent of births to teens has consistently been higher than Illinois with the exception of 2008. In 2009, 13.2% of the children born in Crawford County were born to a teenage mother, while in Illinois the percentage was 9.6%.

Infant Mortality

Historically, the infant mortality rates in Illinois have been very high. In 1910, the infant mortality rate was 149.4 per 1,000 live births. Today, through education, good nutrition, and prenatal care, this number dropped to 7.2 per 1,000 in 2008.

Percentage of Mothers Who Smoke During Pregnancy

In Illinois, the percentage of pregnant mothers who smoked was 10.2% in 2004 and decreased to 8.6% in 2005 and 2006. The percentage of pregnant mothers who smoke in Crawford County was consistently much higher than Illinois. In 2004, the percentage in Crawford County was 50.3% which was nearly five times higher than the Illinois percentage of 10.2%. In 2006, the percentage of smoking pregnant mothers in Crawford County decreased to 26.8% and Illinois was 8.6%.

Low Birth Weight

Any baby born under 2,500 grams (5.5 pounds) is considered at a low birth weight. In Illinois, the percentage of babies born with low birth weight has slightly increased over time. In 2004, the Illinois percent of babies born with

low birth weight was 8.4% and in 2006 it was 8.6%. In Crawford County, the percent of babies born with low birth weight did not stay consistent from year to year. In 2004, 6.2% of the babies born were low birth weight. This number decreased to 6.0% in 2005 and then increased to 9.3% in 2006.

Child Abuse and Neglect

Child abuse and neglect report rates per 1,000 in Crawford County were 45.7 and 48.3 respectively for years 2009 and 2010. The rates of reports in Illinois were 30.1 and 29.6 respectively for years 2009 and 2010. The rates for child abuse and neglect investigations in Crawford County were more than double the Illinois rate in the years 2009 and 2010. In 2010 the Crawford County rate for child abuse and neglect investigations was 17.2 while the Illinois rate was 8.3. When sexual abuse was reported, the Crawford County rates were also double Illinois rates. Crawford County sexual abuse investigations rates were also significantly higher than the Illinois rates. In 2010, the rate for sexual abuse investigations in Crawford County was 1.9 per 1,000 while the Illinois rate was 0.6.

G. Chronic Disease

An average of approximately 223.6 Crawford County residents died each year between 2006-2008. Nearly 50% of these deaths are from either cardiovascular disease or malignant neoplasms. When the rates per 100,000 are compared between Illinois and Crawford County for the leading four causes of death, the results are the same. In each year from 2006 to 2008,

Crawford County shows a higher mortality rate than Illinois in each of the four leading causes of death: cardiovascular disease, malignant neoplasms, cerebrovascular disease, and chronic lower respiratory disease.

Cardiovascular Disease

Cardiovascular Disease is a disease that affects the heart or blood vessels which produces a heart attack, heart failure, hypertension, or arteriosclerosis among other health problems. The Crawford County rates per 100,000 were consistently higher than Illinois rates for years 2006-2008. In 2008, the Crawford County rate for cardiovascular disease was 311.05 while the Illinois rate was 202.13.

Malignant Neoplasms

Malignant Neoplasms are various forms of cancer. The Crawford County rates per 100,000 were consistently higher than Illinois rates for years 2006-2008. In 2008, the Crawford County rate for malignant neoplasms was 300.85 while the Illinois rate was 188.37. For each year from 2006-2008, the five leading types of cancer fatalities in Crawford County were:

- 1) Lung
- 2) Female Breast
- 3) Colorectal
- 4) Prostate
- 5) Cervical

Cerebrovascular Disease

Cerebrovascular Disease is a disease that involves the blood vessels that supply the brain. It is also known as a stroke. The Crawford County rates per 100,000 were consistently higher than Illinois rates for years 2006-2008. In 2008, the Crawford County rate for cerebrovascular disease was 91.79 while the Illinois rate was 44.85.

Chronic Lower Respiratory Disease

Chronic Lower Respiratory Disease is a disease characterized by airflow obstruction or limitation. This disease is also known as Chronic Obstructive Pulmonary Disorder or COPD. The Crawford County rates per 100,000 were consistently higher than Illinois rates for years 2006-2008. In 2008, the Crawford County rate per 100,000 for chronic lower respiratory disease was 107.08 while the Illinois rate was 43.45.

H. Infectious Disease

Sexually Transmitted Diseases

For year 2009, the most numerous type of reportable sexually transmitted disease in both Crawford County and in Illinois was Chlamydia. This was followed by Gonorrhea and then Syphilis.

Chlamydia

In Crawford County, the rates for Chlamydia were much lower than the Illinois rates. In general, Crawford County averages approximately 22.8

cases of Chlamydia each year. In 2005, the Crawford County rate for Chlamydia was 127.1 while the Illinois rate was 407.1 per 100,000. The rate for Chlamydia has continued to increase slightly each year for Illinois, while Crawford County's rate has fluctuated. In the year 2009 Crawford County rate for Chlamydia was 127.1 and the rate for Illinois was 487.5.

Gonorrhea

In Crawford County, there have only been four cases of Gonorrhea for the years 2005-2009. Since there were less than ten cases each year, a rate cannot be figured on these. In Illinois the rate per 100,000 for Gonorrhea in 2005 was 161.2. The rate of Gonorrhea infection in Illinois slightly increased over the next three years until it decreased to 160.7 per 100,000 persons in 2009.

Syphilis

There have been six reported cases of Syphilis for Crawford County for the years 2005-2009. Since there were less than ten cases each year, a rate cannot be figured on these. Between 2005 and 2009 in Illinois, the rates for Syphilis infection have ranged from 5.5 to 8.8 per 100,000.

HIV and AIDS

As of December 31, 2010 there were thirty-four persons living in Crawford County that were HIV positive and twenty-five persons living in the country with AIDS. The Crawford County diagnosis rate for HIV for 2005-2010 was

6.9 while the downstate Illinois rate was 4.1. Crawford County does have a correctional facility, the Robinson Correctional Center, which is included in the HIV and AIDS statistics.

I. Environmental/Occupational/Injury Control Indicators

Motor Vehicle

In Crawford County, the motor vehicle crash rate is very similar to Illinois. For 2010, Crawford County had a crash rate of 25.69 per 1,000 and Illinois had a crash rate of 22.54. Between years 2007 and 2010 there were eleven motor vehicle fatalities in Crawford County.

Crime

Crawford County is a relatively low crime area in Illinois. Of the crimes committed in Crawford County during the years 2008 and 2009, theft was the most numerous followed by burglary, aggravated assault, criminal sexual assault, motor vehicle theft, robbery, and arson. During those years no murders were reported for the county. In all areas of reported crime the Illinois rate was significantly higher than the Crawford County rate with the exception of criminal sexual assault. In 2009, the criminal sexual assault rate in Crawford County was 76.71 per 100,000 while the Illinois rate was 41.20.

Drug Crime

According to the Illinois State Police data, Crawford County is a relatively low drug crime area in Illinois. Of the drug crimes committed during the years of 2008 and 2009, cannabis was the most numerous followed by controlled substances, drug paraphernalia, and hypodermic needles. When the Crawford County rates for these four crimes were compared to Illinois rates, the rates were much lower in Crawford County with the exception of drug paraphernalia, which had a higher rate in Crawford County than Illinois during 2008 and 2009. For instance in the year 2009, the Crawford County rate for cannabis arrests was 301.71 per 100,000 population while the Illinois rate was 400.26. In 2009, the Crawford County rate for drug paraphernalia was 138.07 which was significantly higher than the Illinois rate of 5.18.

J. Behavioral Risk Factor Surveillance System

The Behavioral Risk Factor Surveillance System (BRFSS) is a state-based program that gathers information on risk factors among Illinois adults eighteen years of age and older through monthly telephone surveys.

Established in 1984 as collaboration between the U.S. Centers for Disease Control and Prevention (CDC) and state health departments, the BRFSS has grown to be the primary source of information on behaviors and conditions related to the leading causes of death for adults in the general population.

The most recent BRFSS (Round 4) data available for Crawford County was for the years 2007 to 2009.

Alcohol Use

In the Round 4 BRFSS, 17.3% of the Crawford County residents surveyed said that they were at risk for acute or binge drinking while Illinois residents reported 19.5% being at risk.

Cancer Screenings

In the Round 4 BRFSS, 67.4% of men aged 40+ in Crawford County reported they had a PSA completed while 62.4% Illinois residents had a PSA completed. The data showed 64.1% residents surveyed in Crawford County that were aged 50+ said they had a colonoscopy; this is higher than the Illinois percentage which was 58.8%. Of the women aged 40+ that were surveyed, 88.1% of Crawford County residents and 91.2% Illinois residents had a mammogram. Of the women surveyed, 95.3% of Crawford County residents and 93.7% Illinois residents had ever had a pap smear.

Cardiovascular

In the Round 4 BRFSS, of the Crawford County residents surveyed, 36.2% were told that they had high blood pressure and 38.6% were told that they had high cholesterol, 9.8% were told they were diabetic, 6.8% had previously had a heart attack, 6.7% were told they had angina, and 4.4% were told they had a stroke. In this same round, of the Illinois residents surveyed, 27.6% of the Illinois residents surveyed were told that they had high blood pressure, 37.3% were told they had high cholesterol, 8.4% were

told they were diabetic, 4.2% had previously had a heart attack, 4.4% were told they had angina, and 2.7% were told they had a stroke.

Tobacco Use

In the Round 4 BRFSS, 25.1% of the Crawford County residents surveyed identified themselves as a smoker, 25.6% said they were a former smoker, and 49.4% said they were a non-smoker. In Illinois, 21.3% of the residents surveyed identified themselves as a smoker, 23.4% said they were a former smoker, and 55.3% were a non-smoker.

Weight Control

The BRFSS Round 4 showed 28.5% of the Crawford County residents surveyed reported that they were underweight or normal weight, 38.2% said they were overweight, and 33.3% said they were obese. In Illinois, 37.3% of the residents surveyed said they were underweight or normal weight, 36.3% said they were overweight, and 26.4% said they were obese. From these results, 71.5% of Crawford County residents were overweight or obese which is higher than 62.7% of Illinois residents who were overweight or obese. For this survey, a body mass index (BMI) was reported using height and weight. A BMI of <25 were underweight/normal, 25 to 30 were overweight and 30 or more were obese.

K. Mental Health

Data on mental health in the United States was collected from the National Institute on Mental Health. According to the Institute, an estimated 40 million people in the U.S. have had an anxiety disorder within the past year. Another estimated 4.1 million persons in the U.S. have attention deficit hyperactivity disorder. An estimated 0.5% to 3.7% of the females in the U.S. have an eating disorder. An estimated 21 million adults in the U.S. suffer from a mood disorder. According to the CDC, half of the adults in the U.S. will develop a mental health issue during their lifetime and only 40% of persons affected will seek treatment. According to the National Alliance on Mental Illness (NAMI), suicide ranks as the 11th cause of death in the U.S., but as the 3rd highest cause of death among teenagers.

VII. CONCLUSIONS

Committee meeting minutes were taken by Bobbi Branson, Administrative Assistant for the Crawford Health Department.

September 11, 2012 Meeting

The meeting began with member introductions and a brief history of the Crawford County Health Department and its mission, programs, and services. A brief presentation about the history of IPLAN was provided as well as the objectives of the project and the process. The data presentation was provided next. The data presented included statistics from the areas of: demographics, socioeconomics, general health and access to care, maternal and child health, chronic disease, infectious disease, environmental/

occupational and injury control, behavioral risk factors, and mental health. At the end of the data presentation, the formal definition of a health problem was reviewed. The committee members discussed the various health problems of Crawford County, either in reference to those supported by the data or those of perception. After the discussion, an initial list of priority health problems was made. This list included: cardiovascular disease, obesity, stroke, substance abuse, child abuse, cancer, and mental health. This initial list was reviewed to see if these categories all met the definition of a health problem. A formal vote was taken from the final list of health problems. The results of this vote were: Mental Health (9), Obesity (6), Cancer (5), Substance Abuse (4), Cardiovascular Disease (2), Child Abuse (2) and Stroke (2).

The top three responses from this list, mental health, obesity, and cancer will serve as the top three priority health problems for Crawford County for the next five years.



Crawford County Health Department
IPLAN 2012

Illinois Project of Local Assessment of Needs



The Illinois Project for Local Assessment of Needs (IPLAN) is a **community** health assessment and planning process that is conducted every five years by local health jurisdictions in Illinois. The essential elements of IPLAN are:

- an organizational capacity assessment;
- a community health needs assessment; and
- a community health plan, focusing on a minimum of three priority health problems.



Crawford County Health
Department Staff

“Successes in Public Health are measured by things NOT happening.”
Dr. George Comstock



Rate per 1,000 or 100,000

Rate per 1,000 or 100,000 = A unit of measurement based on a population of 1,000 or 100,000. This is used to compare counties with different sized populations. The rate equalizes the population to the same number of persons.

For example, if you wanted to know comparatively if cancer deaths were higher in Crawford County than in the entire state of Illinois for year 2007 you could calculate a rate for both populations.

In 2007:

Population of Crawford County was 19,825 and there were 45 deaths due to cancer.
Population of Illinois was 12,763,371 and there were 24,052 deaths due to cancer.

Rate= Number of cases/Population X 100,000:

Crawford County $45/19,825 \times 100,000 = 226.97$

Illinois $24,052/12,763,371 \times 100,000 = 188.45$

Conclusion: In 2007, cancer was a worse health problem in Crawford County than it was in the state of Illinois.

2011 Illinois County Health Rankings

The Robert Wood Johnson Foundation and the University of Wisconsin Population Health Institute have conducted a County Health Ranking project for the past two years. This project is a collection of 50 reports that reflect the overall health of counties in every state in the US. The purpose is to allow counties to get a snapshot of how healthy their residents are by comparing their overall health and the factors that influence their health with other counties in their state. Illinois has 102 counties. The higher the rank, the worse the factor is in Crawford County when compared to other counties in Illinois.

Crawford County Rank	Factor	Definition
45 th of 102	Socioeconomic Factors	Education, employment, income, family & social support, safety
47 th of 102	Health Behaviors	Tobacco, diet, exercise, alcohol use, high risk sexual behavior.
50 th of 102	Physical Environment	Air quality & access to healthy foods and recreational facilities
60 th of 102	Mortality	Premature Death
65 th of 102	Clinical Care	Uninsured adults, number of primary care providers, preventable hospital stays, screenings
74 th of 102	Morbidity	Quality of Health (poor to excellent)

2012 Crawford County Health Problem Surveys

Health Problem	CMH (33)	CCHD (16)	BOH, CB (8)	Lincoln Trail (9)	Annex (5)	Pulliam FH (2)	TOTAL
Cancer	21	15	2	5	5		48
Diabetes	23	8	3	3	4	1	42
Obesity	17	8	3	6	2	2	38
Heart Dis	11	7	1	2	3		24
Drugs	3	2		1		2	8
Hypertension	7		1				8
Smoking	3		3				6
Alzheimer's	1	2	2				5
Malnutrition	2		2				4
Mental Illness	2	1		1			4
Asthma/Aller	1	1		1			3
COPD	2						2
Kidney Dis	1	1					2
Stroke	1						1
STDs							--
Teen Preg							--

Demographic & Socioeconomic Characteristics



Demographic

- Population
- Gender and Age
- Race

Socioeconomic

- Marriage & Divorce
- Unemployment
- Federal Poverty Levels
- Medicaid
- Food Stamps

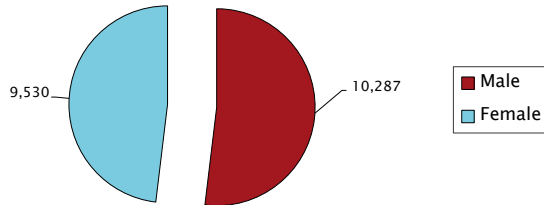
Quick Facts: Demographics & Socioeconomics

Quick Facts	Crawford County	Illinois
Population 2010	19,817	12,830,632
Median value of owner occupied housing units 2006-2010	\$70,400	\$202,500
Total households 2006-2010	7,763	4,769,951
Average household size 2006-2010	2.36	2.62
Median household income, 2006-2010	\$41,434	\$55,735
Percent of persons below poverty level, 2006-2010	16.9%	12.6%

Source: US Census Bureau, 2010 Census

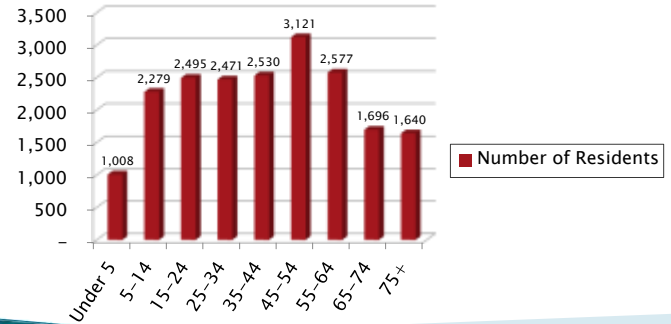
Crawford County Population by Gender

Crawford County



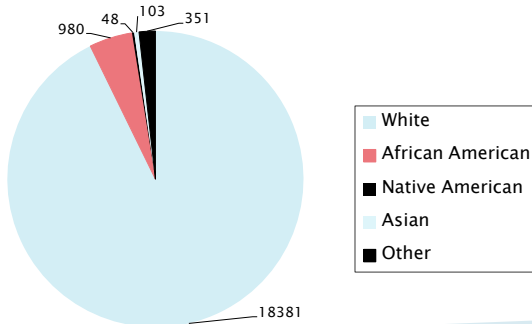
Source: U.S. Census Bureau, 2010 Census

Crawford County Population by Age



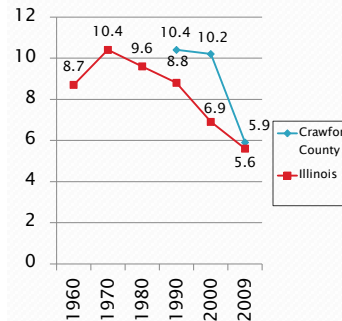
Source: US Census Bureau, 2010 Census

Crawford County Population by Race

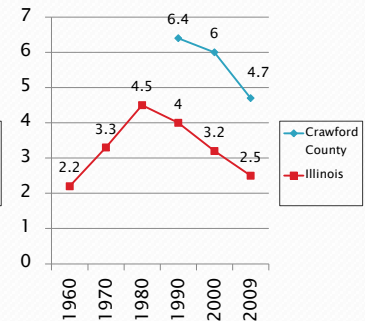


Source: U.S. Census Bureau, 2010 Census

Marriage



Divorce & Annulment

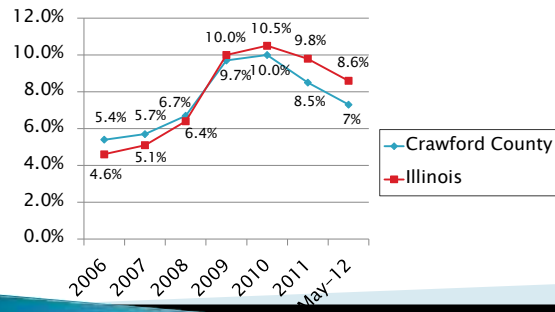


Crawford County 2000 = 209, 2001 = 175, 2002 = 146, 2003 = 178, 2004 = 166, 2005 = 150, 2006 = 146, 2007 = 133, 2008 = 129, 2009 = 115

Crawford County 2000 = 123, 2001 = 145, 2002 = 133, 2003 = 130, 2004 = 119, 2005 = 88, 2006 = 109, 2007 = 104, 2008 = 114, 2009 = 92

Historical Marriage, Divorce, and Annulment rates per 1,000

Unemployment Rate



Source: Illinois Department of Employment Security

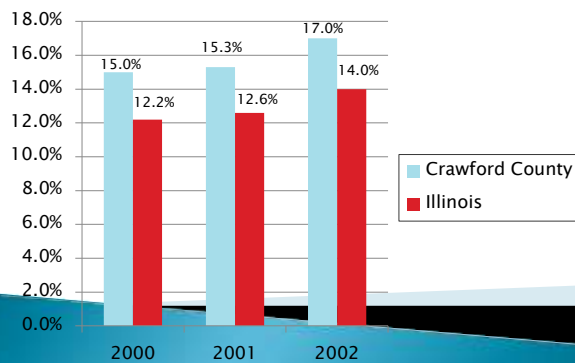
Federal Poverty Levels

For a Family of Four

Year	Gross Income	For Each Additional Person Add
2008	\$21,200	\$3,600
2009	\$22,050	\$3,740
2010	\$22,050	\$3,740
2011	\$22,350	\$3,820
2012	\$23,050	\$3,960
WIC 2012	\$42,643	\$7,326

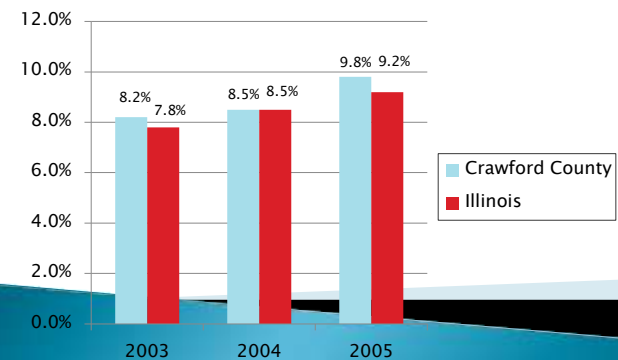
Federal Poverty Level is 100% of Poverty Level
WIC is 185% of Federal Poverty Level

Percent Population Enrolled in Medicaid



Source: Illinois Department of Public Health, IPLAN Data System

Percent Population Receiving Food Stamps



Source: Illinois Department of Public Health, IPLAN Data System

General Health And Access to Care



General Health

- Causes of Death
- Years of Potential Life Lost

Access to Care

- Medical Enrollees to Medicaid Physician

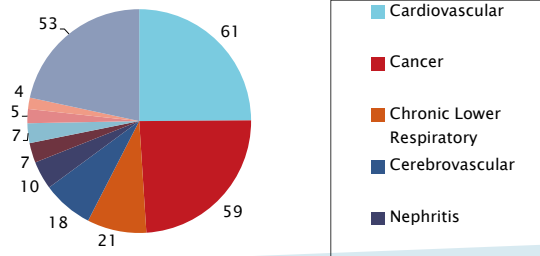
Leading Causes of Death

For Crawford County

Cause of Death	2006	2007	2008
1. Diseases of the Heart	56	65	61
2. Malignant Neoplasms	51	45	59
3. Chronic Lower Respiratory Disease	13	13	21
4. Cerebrovascular Disease (stroke)	22	11	18
5. Nephritis	5	11	10
6. Diabetes	9	5	4
7. Alzheimer's Disease	10	6	5
8. Influenza & Pneumonia	3	4	7
9. Accidents	14	10	7
10. All Other Causes	43	40	43
Total Deaths	226	210	235

Source: Illinois Department of Public Health, IPLAN Data System Report

Crawford County Leading Causes of Death 2008



Source: Illinois Department of Public Health, Health Statistics

Crawford County 2006

Cause of Death	YPLL
Accidents	276
Malignant Neoplasms	204
Diabetes	61
Diseases of the Heart	58
Chronic Lower Respiratory D	14
Cerebrovascular Disease	14

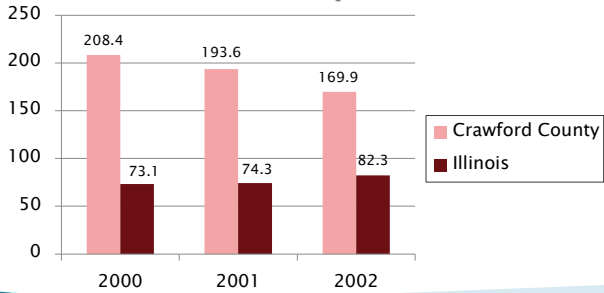
Illinois 2006

Cause of Death	YPLL
Accidents	85,216
Malignant Neoplasms	73,388
Diseases of the Heart	54,579
Perinatal Conditions	45,158
Homicide	27,275
Congenital Malformations	19,618

Years of Potential Life Lost – YPLL

Years of Potential Life Lost is a measure of premature death before the age of 65. This is the number of years which are lost by persons who dies before the age of 65. For example, if someone dies at the age of 45 they are said to have 20 YPLL.

Ratio of Medicaid Enrollees to one Medical Physician



Source: Illinois Department of Public Health IPLAN Data System Summary Report

Maternal And Child Health



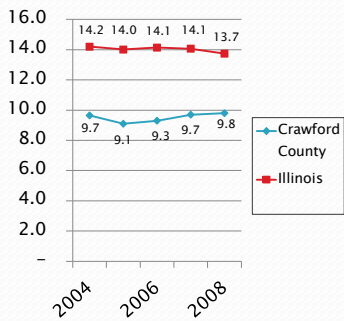
Maternal Health

- Unmarried Birth Mothers
- Births to Teens
- Mothers Who Smoke During Pregnancy

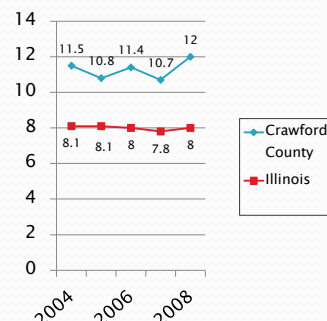
Child Health

- Infants with Low Birth Weight
- Child Abuse & Neglect
- Sexual Abuse

Birth

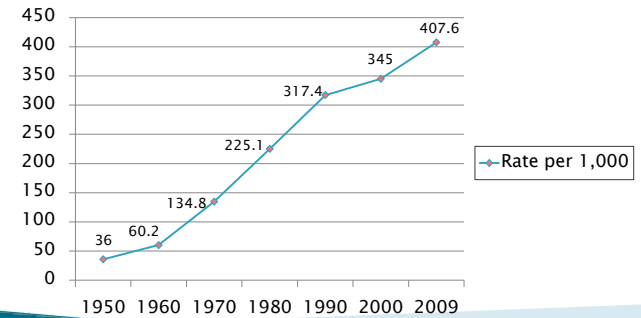


Death



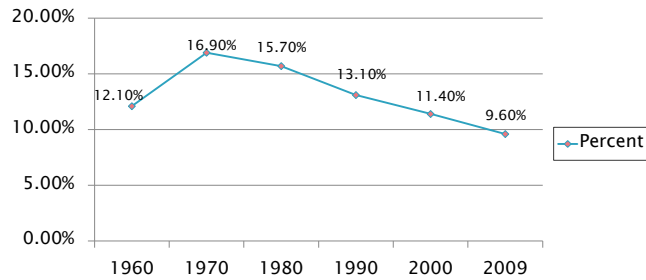
Births & Death rates per 1,000

Historical Birth Rates to Unmarried Women in Illinois



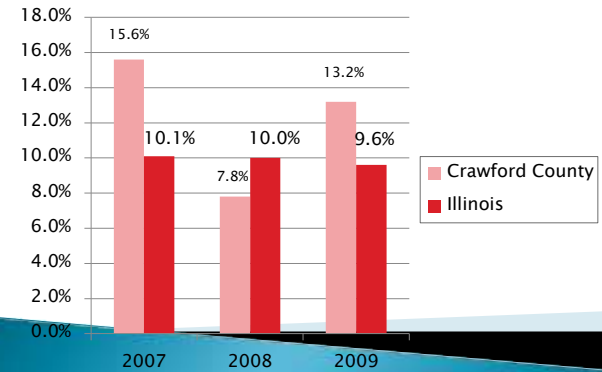
Source: Illinois Department of Public Health, Health Statistics

Historical Percent of Births to Teens in Illinois



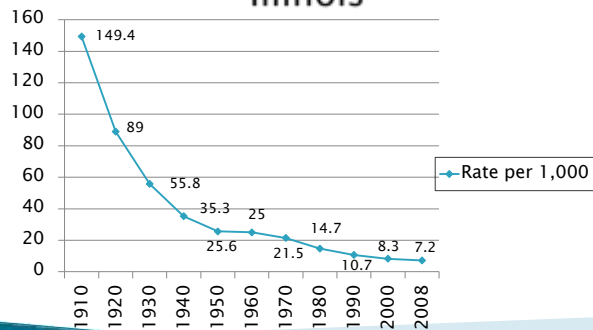
Source: Illinois Department of Public Health, Health Statistics

Percent of Births to Teens



Source: Illinois Department of Public Health, IPLAN Data System

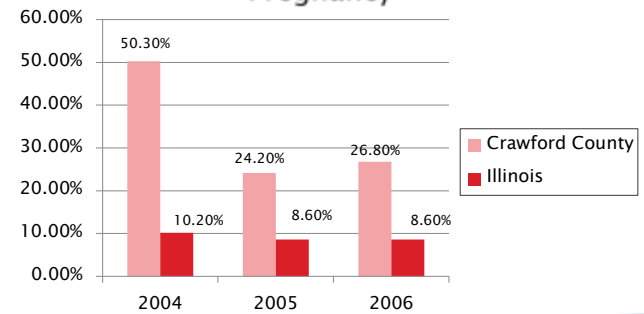
Historical Infant Mortality Rates in Illinois



Infant Mortality = death within the first year of life

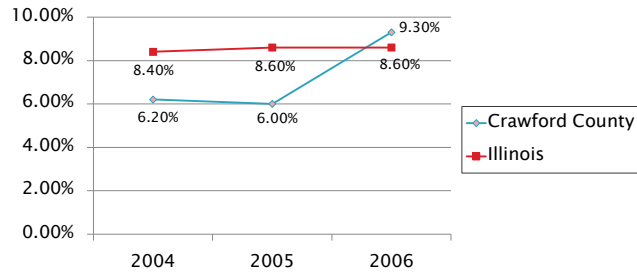
Source: Illinois Department of Public Health, Health Statistics

Percentage of Mothers Who Smoke During Pregnancy



Source: Illinois Department of Public Health, IPLAN Data System Report

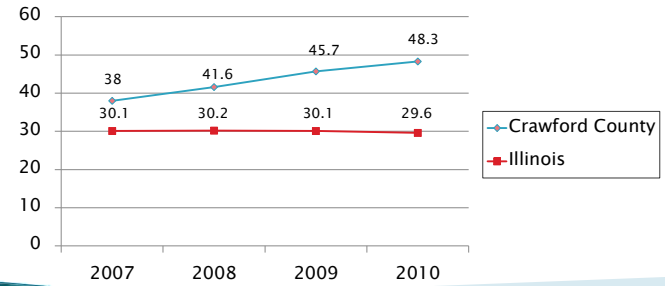
Percent of Infants with Low Birth Weight



Low Birth Weight = 2,500 grams (5.5 pounds) or less.

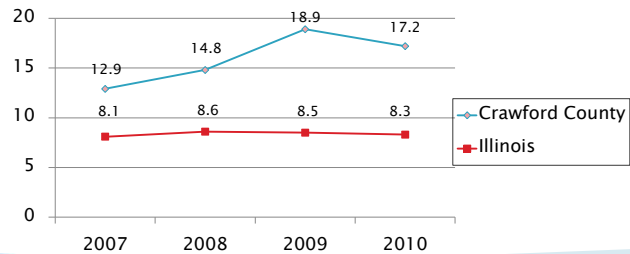
Source: Illinois Department of Public Health, IPLAN Data System

Child Abuse & Neglect Reports Rates per 1,000



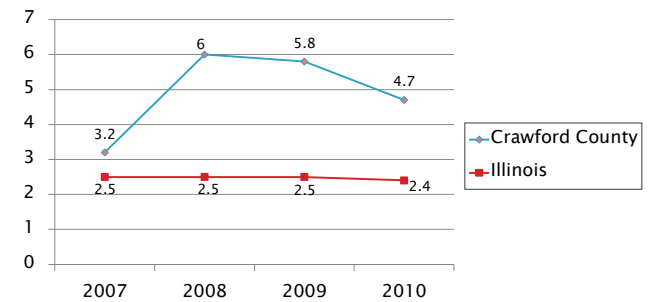
Source: Illinois Department of Children & Family Services

Child Abuse & Neglect Indicated Investigation Rates per 1,000



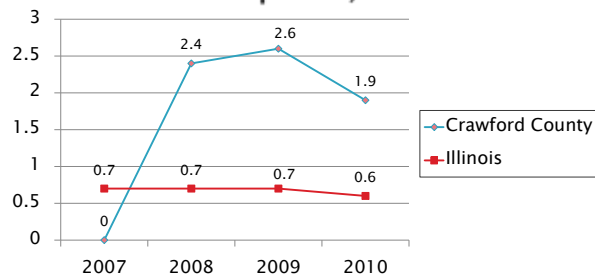
Source: Illinois Department of Children & Family Services

Sexual Abuse Report Rates per 1,000



Source: Illinois Department of Children & Family Services

Sexual Abuse Indicated Investigation Rates per 1,000



Source: Illinois Department of Children & Family Services

Hospitalizations from child abuse in the USA



Yale Study – 2006 Kid's Inpatient Database

Approximately 4,600 kids were hospitalized as a result of child abuse. 300 of them died.

Infants aged 1 year or younger were at highest risk for child abuse related hospitalization. The hospitalization rate for 1 year olds was 58 per 100,000. This rate is higher than the rate of persons that die in Illinois and Crawford County each year from strokes.

Poverty appears to be a risk factor for child abuse. Children covered under Medicaid were about 6 times more likely to be victims of serious abuse as children who were not on Medicaid.

Research suggests that the rates may be even higher since the economy began to falter. One study found that the rate of abusive head trauma rose from 9 per 100,000 to 15 per 100,000 from 2004 – 2009 which coincides with the onset of the recession and massive job losses. That study appeared in the October 2011 issue of Pediatrics.

Source: Karel Amaranth, MPH, MA, Executive Director, JE and ZB Butler, Child Advocacy Center, The Children's Hospital at Montefiore, New York City; Walter Lambert, MD, Associate Professor of Pediatrics, Medical Director, University of Miami Child Protection Team; March 2012 Pediatrics

Chronic Disease



Chronic Disease

- Cardiovascular Disease
- Cancer
- Cerebrovascular Disease
- Chronic Lower Respiratory Disease

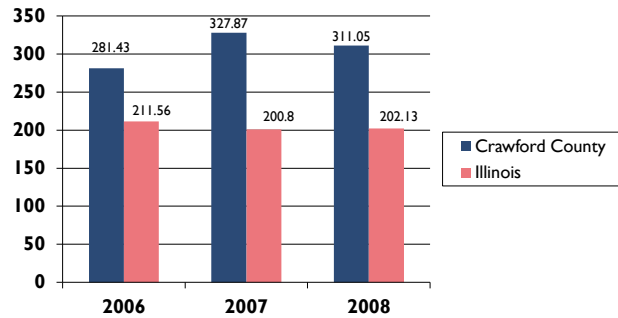
Leading Causes of Death Rates per 100,000

Cause of Death	Location	2006	2007	2008
Diseases of the Heart	Crawford County	281.43	327.87	311.05
	Illinois	211.56	200.80	202.13
Malignant Neoplasms	Crawford County	256.31	226.99	300.85
	Illinois	188.45	187.69	188.37
Cerebrovascular Disease	Crawford County	110.56	55.49	91.79
	Illinois	46.81	45.60	44.85
Chronic Lower Respiratory Disease	Crawford County	65.33	65.57	107.08
	Illinois	37.02	36.87	43.45
Accidents	Crawford County	70.36	50.44	**
	Illinois	34.48	33.66	32.47

** denotes less than 10 events. In 2008 Crawford County had 7 fatalities due to accidents.

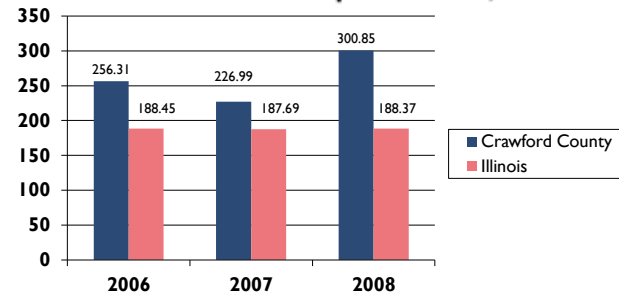
Source: Illinois Department of Public Health IPLAN Data System Summary Report

Cardiovascular Disease Rates per 100,000



Source: Illinois Department of Public Health, IPLAN Data System Summary Report

Cancer Rates per 100,000

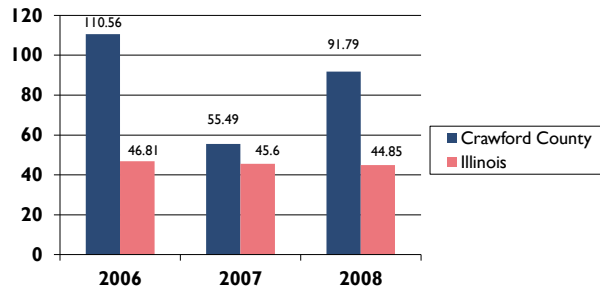


Top 5 Types of Cancer Deaths

1. Lung
2. Female Breast
3. Colorectal
4. Prostate
5. Cervical

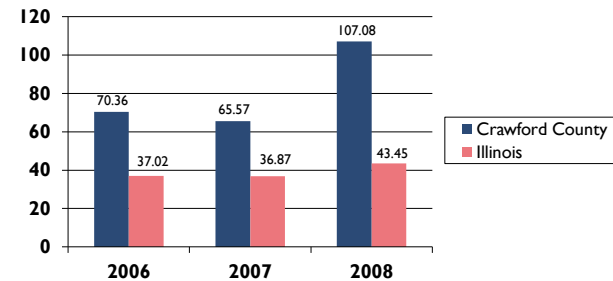
Source: Illinois Department of Public Health, IPLAN Data System Summary Report

Cerebrovascular Disease Rates per 100,000



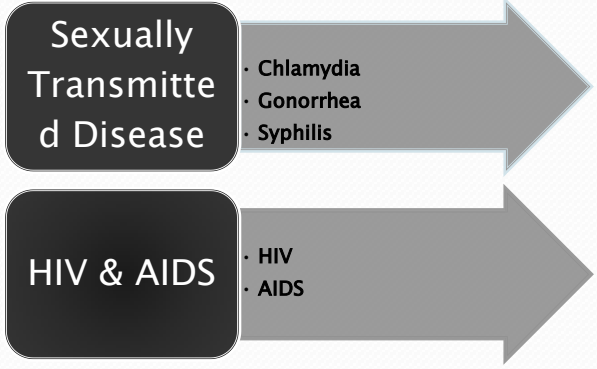
Source: Illinois Department of Public Health, IPLAN Data System Summary Report

Chronic Lower Respiratory Disease Rates per 100,000

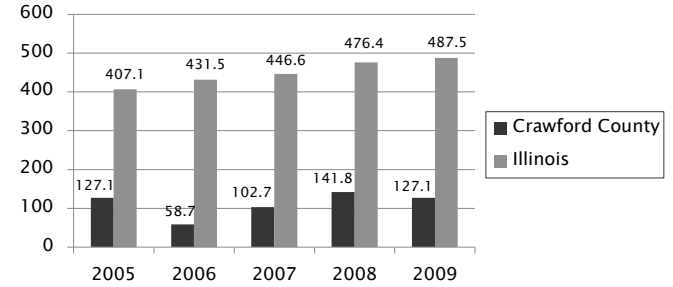


Source: Illinois Department of Public Health, IPLAN Data System Summary Report

Infectious Disease

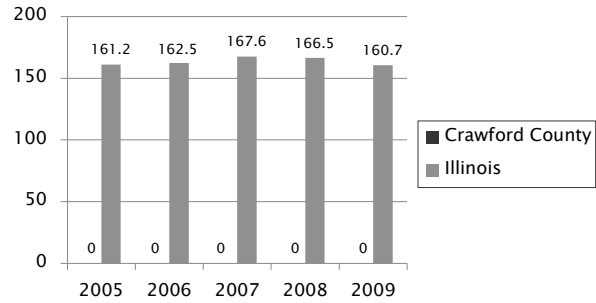


Chlamydia Case Rates per 100,000



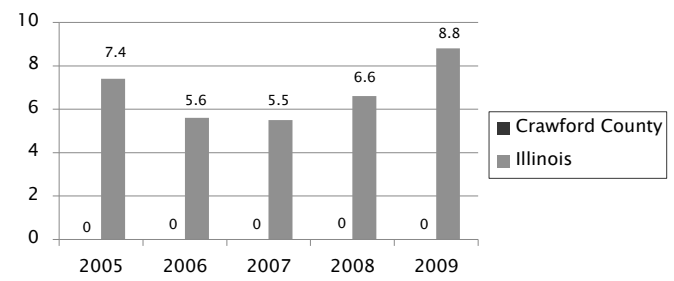
Crawford County number of cases:
 2005 = 26, 2006 = 12, 2007 = 21, 2008 = 29, 2009 = 26
Source: Illinois Department of Public Health, Health Statistics

Gonorrhea Case Rates per 100,000



Crawford County number of cases:
 2005 = 0, 2006 = 0, 2007 = 2, 2008 = 0, 2009 = 2
Source: Illinois Department of Public Health, Health Statistics

Early Syphilis Case Rates per 100,000



Crawford County number of cases:
 2005 = 0, 2006 = 0, 2007 = 3, 2008 = 1, 2009 = 2
Source: Illinois Department of Public Health, Health Statistics

HIV and AIDS as of December 31, 2010

HIV Cases

	Diagnosed during the year 2010	Living as of 12/10	Cumulative Cases Diagnosed since 2005	Diagnosis Rate 2005-2010
Crawford County	0	34	8	6.9
Downstate Illinois	163	2478	1099	4.1

AIDS Cases

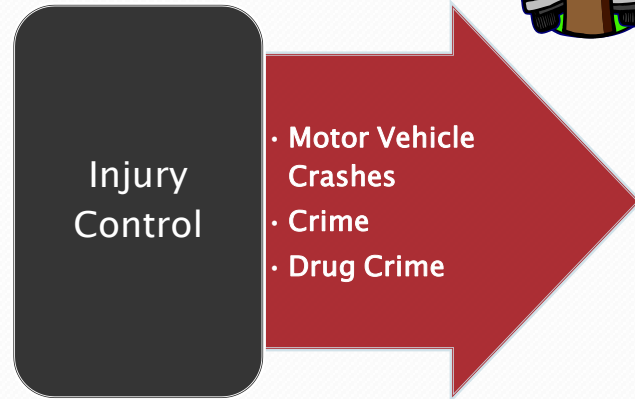
	Diagnosed during the year 2010	Living as of 12/10	Cumulative Cases Diagnosed since 2005	Diagnosis Rate 2005-2010
Crawford County	0	25	6	5.2
Downstate Illinois	84	2786	1003	3.8

*Illinois Department of Corrections cases are included in the county totals.

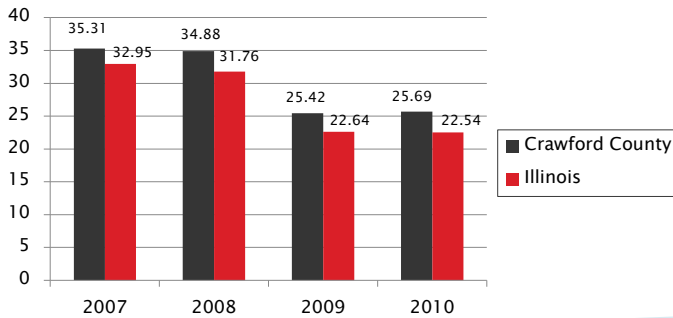
**Downstate counties are the rest of Illinois counties other than Cook, DuPage, Kane, Lake, McHenry, and Will.

Source: Illinois Department of Public Health, HIV/AIDS Surveillance Unit

Environmental, Occupational, Injury Control



Motor Vehicle Crash Rates per 1,000



Crawford County Number of Fatalities = 2007 (4), 2008 (5), 2009 (0), 2010 (2)

Source: Illinois Department of Transportation

Crime Rates per 100,000

Type of Crime		2008	Rate	2009	Rate
1. Theft	Crawford County	257	1310.49	231	1181.28
	Illinois	274,707	2137.37	253,184	1962.42
2. Burglary	Crawford County	71	362.04	86	439.79
	Illinois	79,260	616.68	77,850	603.41
3. Aggravated Assault	Crawford County	38	193.77	35	178.98
	Illinois	39,134	304.48	36,700	284.46
4. Criminal Sexual Assault	Crawford County	7	**	15	76.71
	Illinois	5,646	43.93	5,316	41.20
5. Motor Vehicle Theft	Crawford County	11	56.09	7	**
	Illinois	32,784	255.08	26,917	208.63
6. Robbery	Crawford County	2	**	0	0
	Illinois	24,140	187.82	22,940	177.81
7. Arson	Crawford County	4	**	6	**
	Illinois	2,096	16.31	2,040	18.31
8. Murder	Crawford County	0	0	0	0
	Illinois	791	6.15	773	5.99

** Events under 10 are considered to not statistically significant.

Source: Illinois State Police and includes Sheriffs' Offices, Police Departments, Colleges, and Universities.

Drug Crime Arrest Rates per 100,000

Type of Crime		2008	Rate	2009	Rate
1. Cannabis	Crawford County	49	249.86	59	301.71
	Illinois	50,738	394.77	51,640	400.26
2. Controlled Substance	Crawford County	26	132.58	40	204.55
	Illinois	32,492	252.81	29,379	227.72
3. Drug Paraphernalia	Crawford County	23	117.28	27	138.07
	Illinois	556	4.32	668	5.18
4. Hypodermic Needles	Crawford County	3	**	0	0
	Illinois	15,138	117.78	14,137	109.58

** Events under 10 are considered to not statistically significant.

Source: Illinois State Police and includes Sheriffs' Offices, Police Departments, Colleges, and Universities.

Behavioral Risk Factor Surveillance System (BRFSS) Round 4: 2007 - 2009

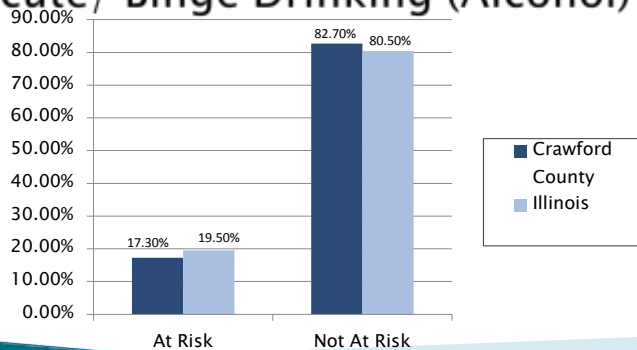


The Behavioral Risk Factor Surveillance System (BRFSS) is a state based program that gathers information on risk factors among Illinois adults 18 years of age and older through monthly telephone surveys. Established in 1984 as a collaboration between the CDC and state health departments, the BRFSS has grown to be the primary source of information on behaviors and conditions related to the leading causes of death for adults in the general population.

BRFSS

- Acute/Binge Drinking (Alcohol)
- Cancer Screenings
- Cardiovascular Health
- Tobacco Use
- Weight Control

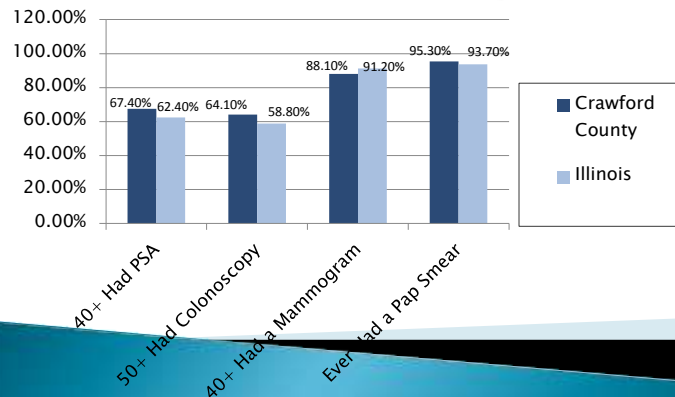
Acute/ Binge Drinking (Alcohol)



Acute intoxication = results from a very high level of alcohol in the blood
Binge Drinking = drinking alcoholic beverages with the intent of becoming intoxicated

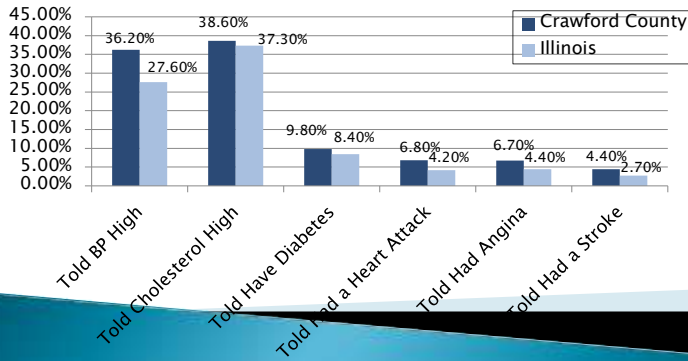
Source: 4th Round Behavioral Risk Factor Surveillance System

Cancer Screenings



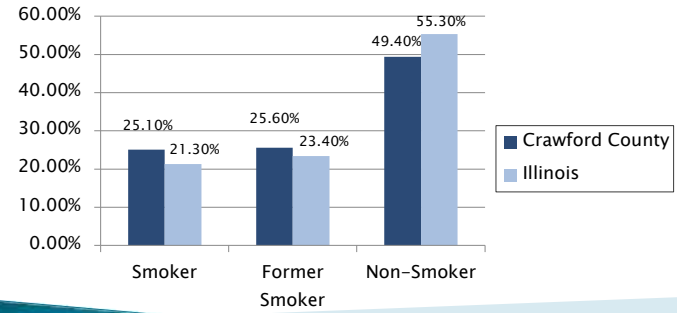
Source: 4th Round Behavioral Risk Factor Surveillance System

Cardiovascular Health



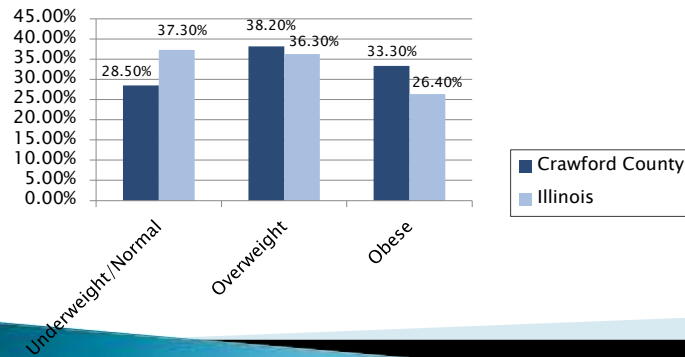
Source: 4th Round Behavioral Risk Factor Surveillance System

Tobacco Use



Source: 4th Round Behavioral Risk Factor Surveillance System

Weight Control



**The BRFSS uses CDC guidelines for weight. A body mass index (BMI) is reported using height and weight. A BMI of <25 is underweight, normal, 25-30 is overweight, and 30 or more is obese.
Source: 4th Round Behavioral Risk Factor Surveillance System

Mental Health in the US

<p>Anxiety Disorders</p> <p>Includes panic disorder, OCD, PTSD & Phobias. Est. 40 million adults per yr. Frequently occur with depression or substance abuse. Est. 7.2 million adults or 1 in 15 suffer from panic disorder. In any given year 1/3 of all adults will have at least 1 panic attack.</p>	<p>Attention Deficit Hyperactivity Disorder</p> <p>One of the most common mental disorders in children and adolescents. Est. 4.1 million adults.</p>	<p>Eating Disorders</p> <p>Includes anorexia and bulimia. Est. .5% to 3.7% of females suffer from anorexia. Est. 1.1% to 4.2% suffer from bulimia.</p>
<p>Mood Disorders</p> <p>Includes major depressive disorder, dysthymic disorder, and bipolar disorder. Est. 21 million adults have a mood disorder. Depressive disorders often co-occur with anxiety disorders and substance abuse.</p>	<p>CDC</p> <p>Half of adults in the US will develop a mental illness during their lifetime. 1 in 4 adults experience a mental disorder in any given year, 1 in 17 lives with a serious mental illness such as schizophrenia, major depression, or bipolar disorder. 40% of persons affected will seek treatment</p>	

2010 US Population 312,745,538 according to US Census Bureau
Source: National Institute of Mental Health

More Mental Health....Suicide

- ▶ An average of one person kills him or herself every 16 minutes. Firearms are used in 57% of suicides.
- ▶ 4X more men than women die by suicide, but women attempt it 2–3 times more often than men.
- ▶ An average of one young person (ages 15–24) dies every two hours and 4.8 minutes.
- ▶ Suicide ranks as the 11th cause of death in the US but as the 3rd highest cause of death among teenagers.

Source: National Alliance on Mental Illness (NAMI)

Health Problem

A situation or condition in the people which is considered undesirable, is likely to last in the future, and is measured in terms of:

Death
Disease
Disability

2012 Priority Health Problems

1. Mental Health
2. Obesity
3. Cancer



“The objective of public health is to help people to die young at a very old age.”
Dr. Myron Wegman

Crawford Health Department



Crawford County
Community Health Plan
2012 – 2017



Prepared by

Darla K. Tracy, RN, BA
Certified Public Health Administrator

Crawford County Health Department

for

Illinois Department of Public Health
Springfield, Illinois

November 27, 2012

Priorities: Mental Health
 Obesity
 Cancer

TABLE OF CONTENTS

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I. CRAWFORD COUNTY HEALTH DEPARTMENT

In November 1991, the Crawford County Board signed a resolution to establish the Crawford County Health Department and appointed the Board of Health. Factors influencing the Board's decision were an unknown childhood immunization rate, a tripled number of TB cases, and increasing sanitation complaints.

In February 1992, the Board of Health signed a contract with Crawford Memorial Hospital District to provide the Health Department programs. In March 1992, the Crawford County Health Department opened in the Commercium Building at 301 S. Cross Street in Robinson.

In March 1998, the Crawford County Board, Crawford County Board of Health, and Crawford Memorial Hospital District mutually realized that the Health Department had reached an independent level of maturity. Therefore, it was resolved that the Intergovernmental Agreement, having effectively served its vital purpose of establishing a viable county health department, be terminated as of May 1, 1998. On this date all Health Department employees were transferred from the employment of Crawford Memorial Hospital District to that of Crawford County.

In March of 2003, Crawford County Health Department relocated to its current address at 202 N. Blaine Blvd. Robinson, IL. This move allowed improved accessibility by offering services on one level. The new building also offers a more efficient floor plan for the public and staff.

II. MISSION STATEMENT

The mission of the Crawford County Health Department is to prevent disease and to assist in the maintenance of optimum health for the citizens of Crawford County through the assessment of needs, development of policy, provision of education, and the assurance of services.

III. PURPOSE

The purpose of the community health needs assessment was to assist the Crawford County Health Department in identifying health concerns within the county. The specific tasks of the needs assessment were to collect, analyze, prioritize, and share information about health problems within Crawford County. The community health needs assessment was used to provide a sturdy information base from which the quality of health in Crawford County may be improved. The Crawford County Health Department began this project to promote community involvement and to increase awareness of health department programs. It was the intent of the Crawford County Health Department to act as a liaison between the professional health community and the county residents.

IV. INTRODUCTION

The secretary of Health and Human Services released a document in September of 1990 titled Healthy People 2000. This publication sought to be a "national strategy for significantly improving the health of the nations over the coming decade". This document was the basis for the IPLAN (Illinois

Project of Local Assessment of Needs) project, because it provided the statistical foundation for health problem reduction.

Since 1990, two updated version of Healthy People has been released, titled Healthy People 2010 and Healthy People 2020. Within these documents are national rates for numerous health problems as well as objectives for health problem reductions. The baselines within these documents as well as the statistical data found in IPLAN Data Summary reports, US Census Bureau, IDOT, IDOC, ISP, and other sources of information were used for this project.

Since the original Healthy People 2000, Illinois has implemented a plan of action for the health of its citizens. This plan of action was described in a publication titled A Road to Better Health for All Illinois Citizens. Contained in this publication are two suggestions for Illinois.

1. Local and statewide needs assessments to identify and describe public health needs.
2. A state health plan related to the national health objectives.

These suggestions included a community health needs assessment process for all local health departments. This was the preface and subsequent new rule for local health department certification, hence the IPLAN process. The process identified three priority health problems and developed strategies to reduce these problems within five years.

V. METHODS

A. Community Participation Process

The Crawford County Health Department followed the eight recommended steps of the APEX-PH (Assessment Protocol for Excellence in Public Health) model:

- 1) Prepare for the Community Process.
- 2) Collect and Analyze Health Data.
- 3) Form a Community Health Committee.
- 4) Identify Community Health Problems.
- 5) Prioritize Community Health Problems.
- 6) Analyze Community Health Problems.
- 7) Inventory Community Health Problems.
- 8) Develop a Community Health Plan.

To begin the IPLAN process, all staff was made aware of the process during a staff meeting and internal newsletter. Prior organizational capacity assessments for the Crawford County Health Department were reviewed by the Administrator and Management staff. Management staff completed the 2012 Crawford County Health Department organizational capacity assessment. The Board of Health was made aware of the IPLAN process and organizational capacity assessment during board meetings. The board expressed commitment to proceed with the IPLAN process.

B. Committee Membership

A list of potential committee members was compiled. These persons were solicited by written correspondence or telephone for initial contact. The letter contained a brief introduction of the IPLAN process. Approximately a week after the letter was mailed, a follow-up telephone call was made to inquire if the individual would be involved in the process. A committee of ten Crawford County residents or people working in Crawford County was selected. These people represented many diverse backgrounds, ages, and careers.

IPLAN Committee

- 1) Bobbi Branson
Administrative Assistant, Crawford County Health Department, Robinson
- 2) Michele Brown
Occupational Health Nurse/Fitness & Wellness Coordinator
Hershey Chocolate Company, Robinson
- 3) Sandra Burtron
Chief Nursing Officer, Crawford Memorial Hospital, Robinson
- 4) Todd Liston
Sheriff of Crawford County, Robinson
- 5) Kelly Meeks
Director of Pharmacy, Crawford Memorial Hospital, Robinson
- 6) Donna Milam
Director of Environmental Health and Planning and Preparedness
Crawford County Health Department, Robinson
- 7) Terry Shaffer
Nursing Supervisor, Crawford County Health Department, Robinson
- 8) John Sutfin, II
Crawford County Board, Robinson
- 9) Darla Tracy
Certified Public Health Administrator
Crawford County Health Department, Robinson
- 10) Jodi Wiman
Social Worker/Counselor, Oblong

Darla K. Tracy, Certified Public Health Administrator of Crawford County Health Department coordinated the committee meeting. The Committee met September 11, 2012 for the community needs assessment and the community health plan in the V.C. Van Tassell Room of Crawford Memorial Hospital, Robinson, Illinois. The role of the IPLAN committee was to identify health problems facing Crawford County residents and to differentiate between true health problems and risk factors. Once understood, the group prioritized health problems and ultimately chose three that they felt were the highest priority in Crawford County. After three health problems were identified, the committee discussed available resources to Crawford County residents and also potential barriers. Outcome objectives and intervention strategies were then developed to reduce these problems.

VI. RESULTS

PRIORITY #1

MENTAL HEALTH

Definition

According to the Healthy People 2010 Manual in Section 18, mental illness is a term that refers collectively to all diagnosable mental disorders. Mental disorders are health conditions characterized by alterations in thinking, mood, or behavior (or some combination thereof) that are all mediated by the brain and associated with distress or impaired functioning or both.

Rationale

Mental Health was chosen as a priority health problem based on data according to the National Institute of Mental Health. Mental Illness encompassed all forms including but not limited to anxiety disorder, (post traumatic stress disorder, obsessive compulsive disorder, panic disorder), phobias, attention deficit disorder, eating disorders (anorexia and bulimia), and mood disorders (major depressive disorder, dysthymic disorder, bipolar disorder), self injury, and suicide.

National data from the National Institute of Mental Health (NIMH) was also considered for the selection of mental illness as a priority health problem. For the purposes of this project, the committee chose to focus on substance abuse and access to care.

Healthy People 2020 Objectives

1. Increase the proportion of persons with co-occurring substance abuse and mental health disorders who received treatment for both disorders.

Baseline:	3.0 percent of persons with co-occurring substance abuse and mental disorders received treatment for both disorders in 2008
Target:	3.3 percent

2. Increase the proportion of adults with mental health disorders who receive treatment.

Baseline:	58.7 percent of adults aged 18 years and older with serious mental illness (SMI) received treatment in 2008
Target:	64.6 percent
Baseline:	68.3 percent of adults aged 18 years and older with major depressive episodes received treatment in 2008
Target:	75.1 percent

3. Increase the proportion of children with mental health disorders who receive treatment.

Baseline:	68.9 percent of children with mental health problems received treatment in 2008
Target:	75.8 percent

Outcome Objective for Mental Health

By 2017, increase the proportion of Crawford County residents with co-occurring substance abuse and mental health disorders who received treatment for both disorders to 3.2%.

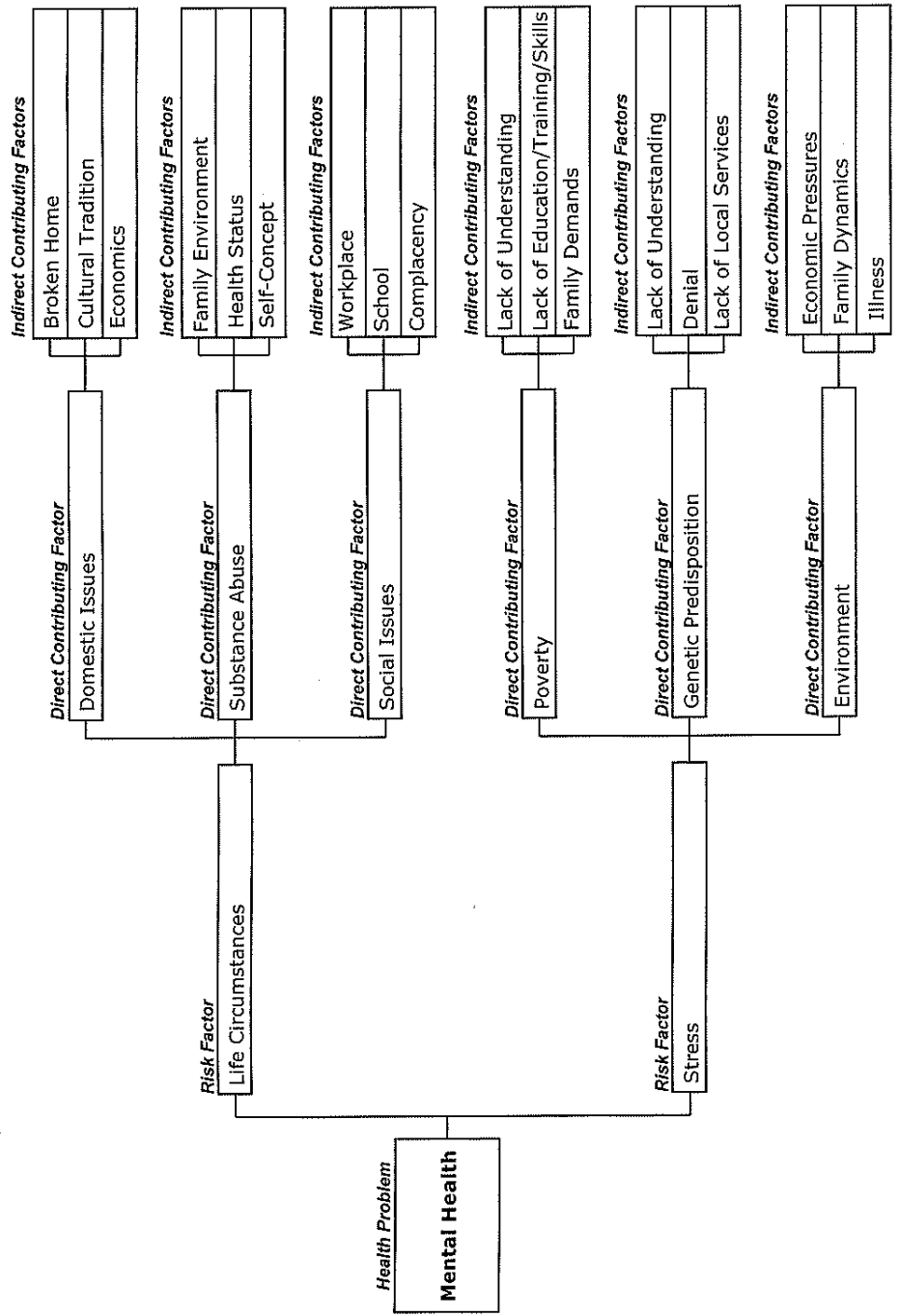
Baseline: Healthy 2020 People reported 3.0% of persons in the U.S. with co-occurring substance abuse and mental disorders received treatment for both disorders in 2008.

Impact Objectives

By 2015, reduce the percentage of Crawford County residents who described themselves as being depressed, sad, or blue more than 2 days per month on the BRFSS to no more than 30%.

Baseline: Round 4 BRFSS reported 33.2% of surveyed Crawford County residents described themselves as being depressed, sad, or blue more than 2 days per month.

HEALTH PROBLEM ANALYSIS WORKSHEET



RESOURCES AND BARRIERS

Health Problem: Mental Health

Resources:

- 1) Physicians
- 2) Counseling Center
- 3) School counselors and social workers
- 4) Clergy
- 5) Counseling and Information for Sexual Assault and Abuse
- 6) Neighboring health departments
- 7) Community Transformation Grant (We Choose Health)

Barriers:

- 1) Social stigma
- 2) Cost of services and medications
- 3) Lack of proper diagnosis
- 4) Noncompliance with treatment
- 5) Denial

Intervention Strategies

Crawford County Health Department – IPLAN

Intervention Strategies

Health Problem: Mental Health

This impact objective will be reached by the following:

1. Increase awareness of local available services.
2. Collaborate with local healthcare partners to develop support groups.
3. Educate local businesses on importance of mental healthcare.
4. Encourage worksite programs.

PRIORITY #2

OBESITY

Definition

Obesity is an excess proportion of total body fat. A person is considered obese when his or her weight is 20% or more above normal weight. The most common measure of obesity is the body mass index or BMI. A person is considered overweight if his or her BMI is between 25 and 29.9; a person is considered obese if his or her BMI is over 30.

"Morbid obesity" means that a person is either 50%-100% over normal weight, more than 100 pounds over normal weight, has a BMI of 40 or higher, or is sufficiently overweight to severely interfere with health or normal function.

Rationale

Obesity was chosen as a priority health problem based on national data and community perception. During Round 4 of the BRFSS (2007-2009), 71.5% of Crawford County residents described themselves as overweight or obese. In 2011 the BRFSS was conducted in the state of Illinois. On this report, an average of 64% of Illinois residents described themselves as being overweight or obese. The national objectives for Healthy People 2020 goals are to reduce the proportion of adults who are obese and adults who engage in no leisure time physical activity. In addition to these facts, the IPLAN Committee feels like the health problems stemming from obesity are staggering and need to be addressed.

Healthy People 2020 Objectives

1. Reduce the proportion of adults who are obese.

Baseline:	33.9 percent of persons aged 20 years and older were obese in 2005–08 (age adjusted to the year 2000 standard population)
Target:	30.5 percent

2. Increase the proportion of primary care physicians who regularly assess body mass index (BMI) in their adult patients.

Baseline:	48.7 percent of primary care physicians regularly assessed body mass index (BMI) in their adult patients in 2008
Target:	53.6 percent

3. Increase the proportion of primary care physicians who regularly assess body mass index (BMI) for age and sex in their child or adolescent patients.

Baseline:	49.7 percent of primary care physicians regularly assessed body mass index (BMI) for age and sex in their child or adolescent patients in 2008
Target:	54.7 percent

4. Increase the proportion of schools that sell or do not offer calorically sweetened beverages to students.

Baseline:	9.3 percent of schools did not sell or offer calorically sweetened beverages to students in 2006
Target:	21.3 percent

5. Increase the proportion of adults who engage in aerobic physical activity of at least moderate intensity for at least 150 minutes per week, or 75 minutes per week of vigorous intensity, or equivalent combination.

Baseline:	43.5 percent of adults engaged in aerobic physical activity of at least moderate intensity for at least 150 minutes/week, or 75 minutes/week of vigorous intensity, or an equivalent combination in 2008
Target:	47.9 percent

6. Reduce the proportion of adults who engage in no leisure time physical activity.

Baseline:	36.2 percent of adults engaged in no leisure-time physical activity in 2008
Target:	32.6 percent

Outcome Objective for Obesity

By 2017, reduce the percentage of Crawford County residents who describe themselves as overweight or obese on the BRFSS to no more than 68%.

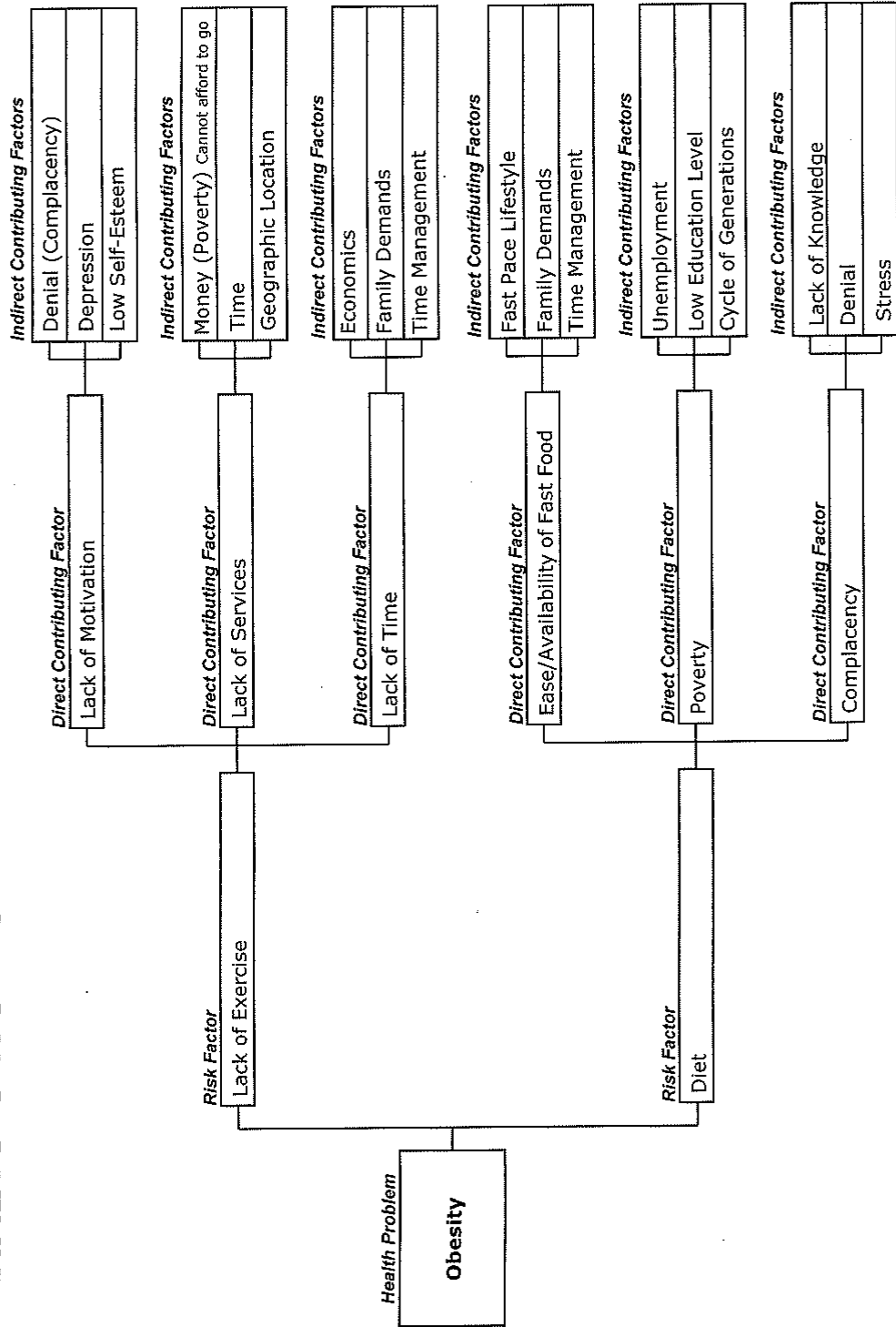
Baseline: Round 4 BRFSS reported 71.5% of surveyed Crawford County residents described themselves as overweight or obese.

Impact Objective

By 2015, increase the percentage of Crawford County residents who report themselves as meeting or exceeding regular and sustained physical activity guidelines on the BRFSS by 3%.

Baseline: Round 4 BRFSS reported 58% of surveyed Crawford County residents described themselves as meeting or exceeding regular and sustained physical activity guidelines.

HEALTH PROBLEM ANALYSIS WORKSHEET



RESOURCES AND BARRIERS

Health Problem: Obesity

Resources:

- 1) Healthworks
- 2) Depot Fitness Center
- 3) Physicians
- 4) Walking paths
- 5) Exercise Classes (yoga, Zumba, pilates)
- 6) Worksite Wellness Programs
- 7) Community Transformation Grant (We Choose Health)
- 8) Nutritionist at Crawford Memorial Hospital
- 9) Weight-Watchers
- 10) Lincoln Trail College Pool and Classes

Barriers:

- 1) Cost of exercise equipment and programs
- 2) Embarrassment/denial/complacency
- 3) Ease and availability of fast food

Intervention Strategies

Crawford County Health Department – IPLAN

Intervention Strategies

Health Problem: Obesity

- 1) Investigate worksite wellness programs.
- 2) Increase worksite wellness programs/Weight-Watchers, reimbursement, etc. in collaboration with Community Transformation Grant (We Choose Health).
- 3) Encourage utilization of local walking trails.
- 4) Utilize social media for education and promotion of local resources.

PRIORITY #3

CANCER

Definition

Cancer is a term used for diseases in which abnormal cells divide without control and are able to invade other tissues. Cancer cells can spread to other parts of the body through the blood and lymph systems. Cancer is not just one disease, but many diseases. There are more than one hundred different types of cancer. Most cancers are named for the organ or type of cell in which they start (for example, cancer that begins in the colon is called colon cancer; cancer that begins in basal cells of the skin is called basal cell carcinoma).

Rationale

During the IPLAN process the committee spent a significant amount of time discussing tobacco use and the related risks of lung cancer. Due to this discussion, the committee decided to target cancer "in general" as the outcome objective and smoking for the impact objectives.

Healthy People 2020 Objectives

1. Reduce the overall cancer death rate.

Baseline:	178.4 cancer deaths per 100,000 population occurred in 2007 (age adjusted to the year 2000 standard population)
Target:	160.6 deaths per 100,000 population

2. Reduce the lung cancer death rate.

Baseline:	50.6 lung cancer deaths per 100,000 population occurred in 2007 (age adjusted to the year 2000 standard population)
Target:	45.5 deaths per 100,000 population

3. Reduce cigarette smoking by adults.

Baseline:	20.6 percent of adults aged 18 years and older were current cigarette smokers in 2008 (age adjusted to the year 2000 standard population)
Target:	12.0 percent

4. Reduce use of cigarettes by adolescents (past month).

Baseline:	19.5 percent of adolescents in grades 9 through 12 smoked cigarettes in the past 30 days in 2009
Target:	16.0 percent

5. Increase cessation attempts by adult smokers.

Baseline:	48.3 percent of adult smokers aged 18 years and older attempted to stop smoking in the past 12 months in 2008 (age adjusted to the year 2000 standard population)
Target:	80.0 percent

6. Increase recent smoking cessation success by adult smokers.

Baseline:	6.0 percent of adult smokers aged 18 years and older last smoked 6 months to 1 year ago in 2008 (age adjusted to the year 2000 standard population)
Target:	8.0 percent

7. Increase smoking cessation during pregnancy.

Baseline:	11.3 percent of females aged 18 to 49 years (who reported having a live birth in the past 5 years and smoking at any time during their pregnancy with their last child), stopped smoking during the first trimester of their pregnancy and stayed off cigarettes for the rest of their pregnancy in 2005
Target:	30.0 percent

Outcome Objectives for Cancer

1. By 2017, reduce the rate Crawford County deaths due to malignant neoplasms to no more than 290 per 100,000.

Baseline: 2008 IPLAN Summary Data reported a rate of 300.85 per 100,000 for deaths due to malignant neoplasms in Crawford County.

2. By 2017, reduce the rate of Crawford County deaths due to lung cancer to no more than 100 per 100,000.

Baseline: 2006 IPLAN Summary Data reported a rate of 106.2 per 100,000 for deaths due to lung cancer in Crawford County.

Impact Objectives

By 2015, increase availability of preventative screening services in Crawford County.

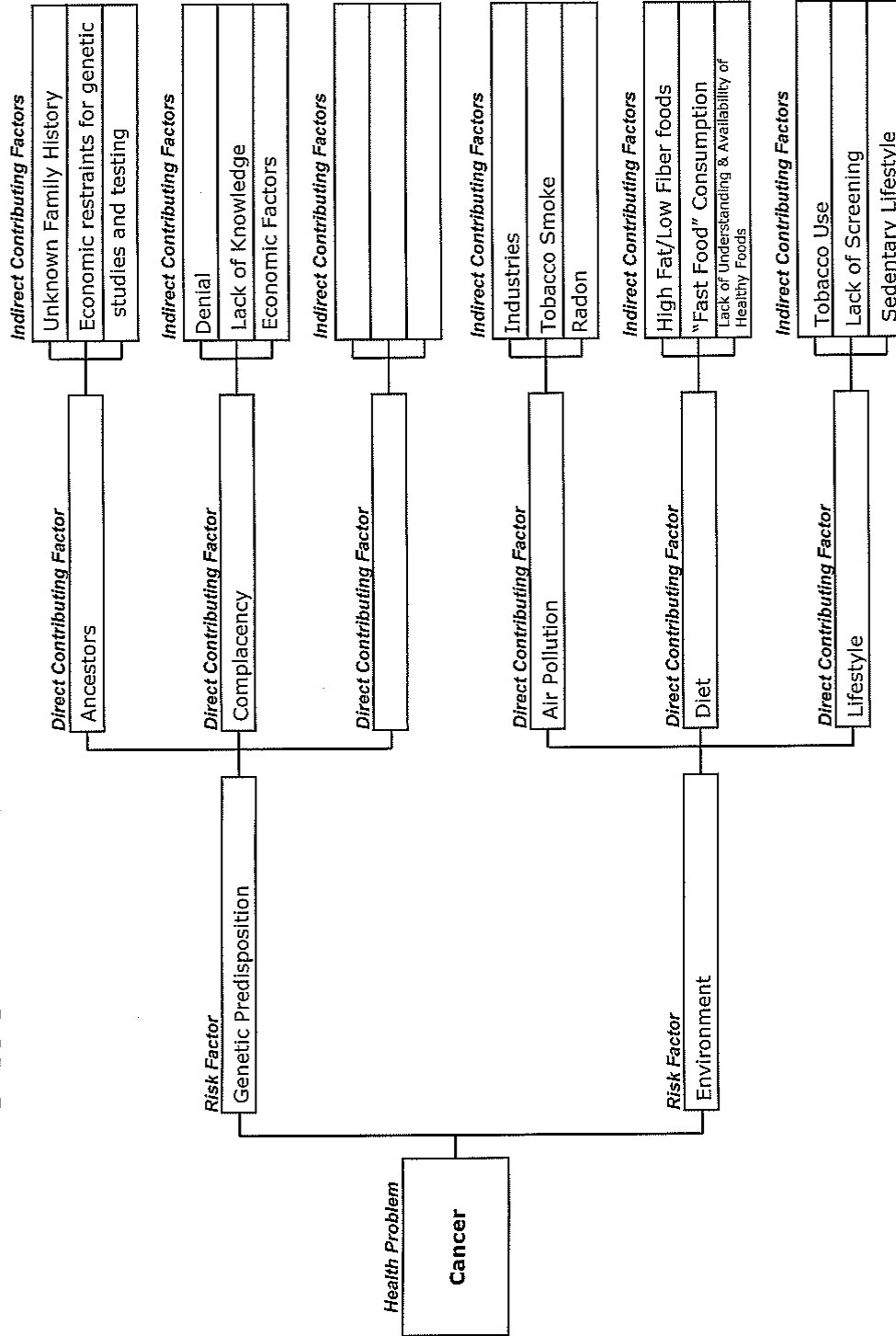
1. By 2015, reduce the percentage of Crawford County residents who describe themselves as a current smoker on the BRFSS to no more than 23%.

Baseline: Round 4 BRFSS reported 25.1% of surveyed Crawford County residents described themselves as a current smoker.

2. By 2015, reduce the percentage of pregnant mothers who smoke to no more than 25%.

Baseline: 2006 IPLAN Summary Data reported 26.8% of pregnant Crawford County mothers smoke.

HEALTH PROBLEM ANALYSIS WORKSHEET



RESOURCES AND BARRIERS

Health Problem: Cancer

Resources:

- 1) American Cancer Society
- 2) Physicians
- 3) Crawford Memorial Hospital
- 4) Illinois Breast and Cervical Cancer Program
- 5) Prostate Screens
- 6) Quit-Line
- 7) Illinois Tobacco Free Communities Grant
- 8) Leadership Crawford County (Radon Kits)
- 9) Vaccine for Children (HPV Vaccine)
- 10) Community Transformation Grant (We Choose Health)
- 11) Illinois Department of Public Health

Barriers:

- 1) Lack of dermatologists
- 2) Lack of funds for screening
- 3) Lack of knowledge
- 4) Complacency/denial/fear

Intervention Strategies

Crawford County Health Department – IPLAN

Intervention Strategies

Health Problem: Cancer

- 1) Offer free or reduced-cost screenings.
- 2) Educate on recommended screenings and importance of knowing family history via social media and outreach efforts.
- 3) Collaborate with Community Transformation Grant (We Choose Health).

VI. CONCLUSIONS

Committee meeting minutes were taken by Bobbi Branson, Administrative Assistant for the Crawford Health Department.

September 11, 2012 Meeting

The meeting began with member introductions and a brief history of the Crawford County Health Department and its mission, programs, and services. A brief presentation about the history of IPLAN was provided as well as the objectives of the project and the process. The data presentation was provided next. The data presented included statistics from the areas of: demographics, socioeconomic, general health and access to care, maternal and child health, chronic disease, infectious disease, environmental/occupational and injury control, behavioral risk factors, and mental health. At the end of the data presentation, the formal definition of a health problem was reviewed. The committee members discussed the various health problems of Crawford County, either in reference to those supported by the data or those of perception. After the discussion, an initial list of priority health problems was made. This list included: cardiovascular disease, obesity, stroke, substance abuse, child abuse, cancer, and mental health. This initial list was reviewed to see if these categories all met the definition of a health problem. A formal vote was taken from the final list of health problems. The results of this vote were: Mental Health (9), Obesity (6), Cancer (5), Substance Abuse (4), Cardiovascular Disease (2), Child Abuse (2) and Stroke (2).

The top three responses from this list, mental health, obesity, and cancer will serve as the top three priority health problems for Crawford County for the next five years. The Committee discussed available resources and barriers to Crawford County residents. Outcome objectives and intervention strategies were then developed to reduce these problems.