

WILL COUNTY COMMUNITY HEALTH NEEDS ASSESSMENT



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ACKNOWLEDGEMENTS



To all Will County Residents and Partners in our Public Health System,

It is my pleasure to present to you the 2016 Community Health Needs Assessment for the County of Will. This document is a culmination of a great amount of effort from our Mobilizing for Action in Planning and Partnership (MAPP) Collaborative.

I use the word “our” because it is truly a group effort. The many partner organizations that devote their time to this process have donated countless hours, in addition to the responsibilities of their jobs, to make Will County a better place to live and work. Additionally, many of these member partners have been with the Collaborative for several years, and have proven to be a vital part of the process. This is evident by the successes we have been able to celebrate by documented improvements in our community.

This Community Health Needs Assessment will provide the blueprint for the MAPP Collaborative and its partner organizations for the next three years. It will assist residents, institutions, and leaders of Will County by informing them of factors that can improve health, prevent illness, and move towards health equity.

I am motivated by the opportunities this assessment provides in improving the health and wellness of Will County and look forward to working with all our community partners, and hopefully gathering additional community health partners in the process!

Susan Olenek
Executive Director
Will County Health Department
Chairman, Will County MAPP Collaborative

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Will County Community Health Needs Assessment Executive Summary

The Community Health Needs Assessment (CHNA) is a collaborative effort of the Will County Mobilizing for Action through Planning and Partnerships (MAPP) Collaborative. The purpose of the CHNA is to provide a community plan that is developed by and for the community. The assessment and planning process is required every three years for hospitals and every five years for local health departments. The Will County Health Department has aligned its assessment process with the three-year hospital requirements to avoid a duplication of efforts.

Vision, Mission, and Value Statements

Vision Statement

Achieving equitable and optimal health in body and mind for all Will County residents.

Mission Statement

The Will County MAPP Collaborative will assess the health needs of the community and develop, implement, and evaluate initiatives to promote the highest quality of life for all residents.

Value Statements

Health Equity: All individuals have the opportunity to realize their full potential and to achieve the highest quality of life.

Collective Impact: We strive to be a progressive community that maximizes the use of community partnerships and collaboration among all sectors to ensure, enhance and promote comprehensive, quality, and equitable education, healthcare, and social services.

Respect: Every life has value.

Communication: We commit to sharing our data, assessments, and plans in order to educate and engage the community.

Quality: We believe in evaluation, continuous improvement, and innovation.

Inclusiveness: We are a community rich in diversity, where involvement and commitment have deep roots among our residents.

Collaborative Process and Assessment Methodology

In 2016, the Will County MAPP Collaborative convened to conduct the third iteration of the MAPP process. MAPP is a community-driven, strategic planning framework that assists communities in developing and implementing efforts around the prioritization of public health issues and the identification of resources to address them, as defined by the 10 Essential Public Health Services. The MAPP process has six phases which include four assessments. The *Mobilizing and Organizing Partners to Achieve Health Equity* supplemental guide was used during this assessment process.

Community Health Status Assessment

The Community Health Status Assessment (CHSA) is one of four assessments conducted as a part of the MAPP process. During this assessment, information regarding demographics, health status, health

behaviors, and social determinants in the community is gathered and analyzed. Data is collected from a variety of resources and analyzed comparing local, state, and national benchmarks when available. The CHSA was conducted May – November 2016.

Community Themes and Strengths Assessment

The Community Themes and Strengths Assessment (CTSA) aims to gather community members' perceptions, thoughts, opinions, and concerns regarding quality of life in Will County. This input provides valuable insight into the issues of importance to the community. The CTSA was conducted December 2016 – March 2017.

Forces of Change Assessment

The Forces of Change Assessment (FOCA) aims to identify all the forces and associated opportunities and threats that can affect, either now or in the future, the local public health system. Forces may be social, economic, political, technological, environmental, scientific, legal, and/or ethical in nature. Forces can be trends, factors, or events. The FOCA was conducted September – December 2016.

Local Public Health System Assessment

The Local Public Health System Assessment (LPHSA) was conducted on December 1, 2016. The LPHSA is used to understand the overall strengths and weaknesses of the public health system based on the 10 Essential Public Health Services.

Prioritization of Strategic Issues

On April 7, 2017, forty-one Will County public health stakeholders participated in a planning session at Presence Saint Joseph Medical Center to review key findings from the four MAPP assessments, identify cross-cutting themes and potential strategic issues, and prioritize a set of strategic issues. The meeting was facilitated by the Illinois Public Health Institute. Attendees identified five potential strategic issues but could not come to consensus.

In May of 2017, MAPP Executive Committee members were asked to use a *Prioritization Criteria and Planning Worksheet* during the discussion of the previously identified strategic issues. All attendees agreed that transportation is a concern, but that it could be nested under all strategic issues and become a goal of the MAPP Executive Committee. Access to healthy lifestyle choices would also be nested in all issues as a strategy.

MAPP Executive Committee members decided that behavioral health, access to dental and primary care, and chronic disease would be the top three strategic issues for the next three years.

Access to Dental and Primary Care

Access to comprehensive, quality healthcare services is important for promoting and maintaining health, preventing and managing disease, reducing unnecessary disability and premature death, and achieving health equity. Access is a complex issue with multiple components including availability, affordability, and timeliness. Findings from the assessments detail access issues to healthcare services and resources. Specific priority needs identified in the assessment process include:

- Better data to define and prioritize access issues, identify populations most affected, and monitor progress
- Navigating insurance and potential changes to the Affordable Care Act
- Transportation to healthcare services and resources
- Improving health literacy
- Equitable services throughout the county
- Health resources for seniors

Figure 1.1. Summary of Key Assessment Findings Related to Access to Dental and Primary Care

Access to Dental and Primary Care	
Insurance Coverage	
Issue	Target Population
9.2% of the Will County adult population under the age of 65 was uninsured in 2014. There has been an overall decrease in the percentage of uninsured population since 2010. 20.2% of the Hispanic/Latino population in Will County reported no health insurance coverage, compared to 7.1% of the non-Hispanic/Latino population.	<ul style="list-style-type: none"> • Males • African American and Asian races • Hispanic ethnicity • 60432, 60433, and 60484 zip codes
Provider Availability	
Issue	Target Population
Will County has a total of 372 primary care physicians, yielding a ratio of population to primary care physicians of 1,840:1 compared to 1,240:1 for Illinois. Will County has a total of 361 dentists, yielding a ratio of population to dentists of 1,950:1 compared to 1,410:1 for Illinois. 15.9% of adults in Will County report that they do not have at least one person that they consider to be their primary care provider. There is one community on the East side of Joliet designated by the Health Resources and Services Administration as an area having shortages of primary care, dental care, or mental health providers.	<ul style="list-style-type: none"> • 60433 zip code • Non-white males, ages 25-44 with an income less than \$35,000
Preventable Hospital Visits	
Issue	Target Population
Will County’s ambulatory care sensitive condition discharge rate was 69 per 1,000 Medicare enrollees in 2014, which is higher than both Illinois (59) and the U.S. (38), but has decreased since 2010. Ambulatory care sensitive conditions include pneumonia, dehydration, asthma, diabetes, and other conditions which could have been prevented if adequate primary care resources were available and accessed by those patients.	<ul style="list-style-type: none"> • Medicare beneficiaries

Improving Behavioral Health

Behavioral health is a term used to include both mental health and substance abuse disorders. Mental health disorders are among the most common causes of disability. Mental disorders attributed to 7.8% (5,783) of Will County hospitalizations in 2014, and is the third leading cause of hospitalizations overall. Findings from the assessments detail access issues to behavioral health services, as well as resources.

Behavioral health issues impact population groups across income levels as well as racial and ethnic groups. Specific priority needs and populations identified in the assessment process include:

- Better data to define and prioritize behavioral health issues, identify populations most affected, and monitor progress
- Adequate funding for expansion of services, resources, and providers
- Equitable services throughout the county

Figure 1.2. Summary of Key Assessment Findings Related to Behavioral Health

Improving Behavioral Health	
Provider Availability	
Issue	Target Population
Will County has a total of 645 mental health providers, yielding a ratio of population to mental health providers of 1,060:1, compared to 370:1 for Illinois and 560:1 nationally. There is one community on the East side of Joliet designated by the Health Resources and Services Administration as an area having a shortage of mental health providers. According to providers, three barriers for clients to access services were identified: cost of needed services, wait for services, and distance to services. They also reported that psychiatric services are the most difficult to access.	<ul style="list-style-type: none"> • 60433 zip code • Southern Will County
Emotional and Mental Health	
Issue	Target Population
37% of Will County adults, aged 18 and older, self-reported that they experienced at least one and up to 30, “not good” mental health days in the past 30 days. 19.2% of adults self-reported that they receive insufficient social and emotional support all or most of the time. 28% of 12 th graders experienced depression in 2014.	<ul style="list-style-type: none"> • Adults • High school youth
Substance Use	
Issue	Target Population
22.4% of adults, aged 18 and older, reported binge or heavy alcohol consumption. 53% of 12 th graders and 33% of 10 th graders reported drinking alcohol in the past 30 days. 30% of 12 th graders reported binge drinking at least once in the past two weeks. 26% of 12 th graders and 16% of 10 th graders reported using marijuana. In the past year, 9% of 12 th graders reported using any illicit drug, excluding marijuana. 6% of 12 th graders and 4% of 10 th graders reported using prescription drugs to get high in the past 30 days. 35% of 12 th graders experienced two or more negative consequences from drug use, indicating the potential need for substance abuse assessment.	<ul style="list-style-type: none"> • Adults • High school youth
Drug Overdose	
Issue	Target Population
In 2015, there were 89 total overdose deaths, 66% of which were male. Of the 89 accidental overdoses, 52 deaths were heroin	Males

related. Combined drug intoxication was the second leading cause of accidental overdose. Will County’s drug induced mortality rate in 2014 was 12.75, which is a significant increase from 5.93 in 2003.	
Suicide	
Issue	Target Population
In 2015, there were 285 unnatural deaths in Will County, of which approximately 20% were attributed to suicide. Will County’s suicide rate is 9.2. There are significant disparities within gender and race, with males more likely to commit suicide at a rate of 15.1 versus females at 3.7. 13% of 12 th graders and 15% of 10 th graders reported that they had considered suicide in the past year, which has decreased since 2014.	<ul style="list-style-type: none"> • White males • High school youth

Preventing and Reducing Chronic Disease

Chronic diseases are the most common, costly, and preventable of all health problems. Heart disease is the second leading cause of hospitalizations in Will County and cancer is the fifth. Heart disease, cancer, and diabetes account for approximately 58% of all deaths in Will County. Many chronic diseases are linked to lifestyle choices, or health risk behaviors, which can be changed. Four of these health risk behaviors—lack of physical activity, poor nutrition, tobacco use, and excess alcohol consumption—cause much of the illness, suffering, and early death related to chronic diseases and conditions. Findings from the assessments detail access issues to chronic disease resources. Specific priority needs and populations identified in the assessment process include:

- Better data to define and prioritize chronic disease problems, identify populations most affected, and monitor progress
- Healthcare services to prevent or enable early detection of disease, reduce risk factors, and manage conditions
- Strategies that link community and clinical services to ensure that people with or at high risk of chronic diseases have access to the resources they need to prevent or manage these diseases
- Access to affordable, healthy foods

Figure 1.3. Summary of Key Assessment Findings Related to Chronic Disease

Preventing and Reducing Chronic Disease	
Cancer Incidence and Mortality	
Issue	Target Population
In 2014, there was a total of 4,223 deaths in Will County. Cancer is the second leading cause of death. Of the total cancer deaths, lung cancer is the top cause in Will County. From 2009-2013, there were 15,268 newly-diagnosed cases of cancer in Will County, with an age-adjusted cancer incidence rate of 492.5 per 100,000 population. Men were slightly more likely to develop cancer than women. Women mostly developed breast cancer and men mostly	<ul style="list-style-type: none"> • Males • Adults aged 50 to 75 years • Females aged 21 to 65 years • Females aged 50 to 74 years

EXECUTIVE SUMMARY

<p>developed prostate cancer. 69.9% of men have reported ever having a Colonoscopy/Sigmoidoscopy. Only 58.4% of women met breast cancer screening guidelines, which is approximately a 15% decrease from 2009. 78% of adult women met cervical cancer screening guidelines.</p>	
<p>Chronic Disease Mortality</p>	
Issue	Target Population
<p>Will County's coronary heart disease mortality rate of 107.7 per 100,000 population is slightly higher than the state rate. The White population has the highest rates of reported heart disease, however, heart disease mortality is highest among African Americans. Over the past decade, mortality due to diabetes has slowly decreased in Will County. In 2014, the age-adjusted mortality rate of diabetes was 14.9 deaths per 100,000 population, well below the Healthy People 2020 target of 66.6 deaths. The concern with diabetes is the high percentage of Medicare beneficiaries with diabetes.</p>	<ul style="list-style-type: none"> • African Americans • Medicare beneficiaries
<p>Obesity</p>	
Issue	Target Population
<p>26.8% of adults in Will County are obese. Males were more likely to be obese than women. Additionally, 34.3% of adults, aged 18 and older, self-reported that they were overweight, with the highest percentage being Non-Hispanic White. 21% of adults are physically inactive. Only 30% of 6th graders and 22% of 12th graders met the recommended physical activity guidelines. 80.7% of Will County adults are consuming less than five servings of fruits and vegetables each day, compared to 76.3% in Illinois. 53% of Will County 6th graders ate fruit and 71% ate vegetables less than two times a day.</p>	<ul style="list-style-type: none"> • White males • Middle and high school youth
<p>Food Access</p>	
Issue	Target Population
<p>436,934 people live in a food desert census tract in Will County. This indicator reports the number of neighborhoods in the report area that are within food deserts.</p>	<p>60417, 60432, 60433, 60436, 60440, 60441, and 60484 zip codes</p>
<p>Tobacco Use</p>	
Issue	Target Population
<p>During 2010-2014, 13.4% of Will County adults were smokers. For the state of Illinois and the U.S., this figure was higher, with 16.7% and 16.8% of adults reporting they were current smokers. The percentage of smokers in Will County has declined since 2001 but is still higher than the Healthy People 2020 target of 12%. 12% of 12th graders reported using cigarettes, while another 10% reported using smokeless tobacco.</p>	<ul style="list-style-type: none"> • Adults • High school youth

Goals and action plans will be developed or updated for each of these priority health issues. These action plans will be implemented and aligned to improve the local public health system and ultimately the health and well-being of the Will County community, in alignment with the collaborative's vision.

Introduction

Demographic Profile of Will County

According to the U.S. Census Bureau, Will County has grown rapidly over the past decade. Although the total population for Will County was projected to reach 810,000 by 2015, it only reached 687,263. However, Will County's population has and is expected to continue outpacing the growth rate for Illinois.

Will County has a total of 849 square miles (12 of which are water), 31 zip codes, 23 cities, and five area codes. Of 12,859,995 Illinois residents, 5% (687,263) resided in Will County in 2015. A majority of these Will County residents reside in Joliet, Plainfield, Bolingbrook, and Romeoville. Will County is predominantly urban, with 96.07% of the total population living in urban areas. Geographically, southern Will County is largely rural.

The median age of Will County is 36.2 years, and the County's population is slightly younger than Illinois' population. According to the 2014 U.S. Census Bureau, 63% of Will County's population is below the age of 45, compared to 60% statewide.

In 2014, the majority of Will County's population was White (77.6%), followed by Black/African American (12.2%), Asian (5.6%), and American Indian/Alaska Native (0.7%). The population for all races increased since 2010, however the White population has decreased overall since 2000. The Hispanic/Latino ethnicity has increased since 2000 and 2010 (8.7% in 2000 to 15.6% in 2010 to 16.1% in 2014).

The population of foreign-born residents in Will County increased slightly between 2011 and 2014 (an increase of 3,057 residents). Currently, the foreign-born population constitutes 11.8% of the Will County population. As of 2014, a little over half of the foreign-born population had become U.S. citizens. Almost 80% of Will County's foreign-born population originated from Latin America (48.9%) and Asia (30.4%) in 2014. A higher concentration of Will County's foreign-born population resided in northern Will County and in the Joliet area.

As of 2014, there are 94,393 families with children (under age 18) which accounts for 42.3% of total households in Will County. This percentage is 10% higher than in Illinois (32.3%).

In Will County, 8.32% of the population, or 56,202 people has a disability. This percentage is slightly lower than Illinois (10.62%). Large concentrations of this population resided in certain areas in northern, eastern, and southern Will County, as well as Joliet.

In Will County, 6.6% of the total population, or 32,514 people, are veterans, who mostly reside in southern and eastern Will County.

Will County Mobilizing for Action through Planning and Partnerships Collaborative

The Community Health Needs Assessment (CHNA) is a collaborative effort of the Will County Mobilizing for Action through Planning and Partnerships (MAPP) Collaborative. The purpose of the CHNA is to provide a community plan that is developed by and for the community. The assessment

INTRODUCTION

and planning process is required every three years for hospitals and every five years for local health departments. The Will County Health Department has aligned its assessment process with the three year hospital requirements to avoid a duplication of efforts.

The MAPP Project was established in 2008 as an effort to meet the IRS guidelines for not-for-profit hospitals and the requirements of the Illinois Department of Public Health for local health department certification. A 25 member steering committee guided the community through the MAPP Strategic Planning Framework. The assessment phase was completed in 2010, with approval of the plan in January 2011.

The Will County MAPP Collaborative was formed following the completion of the MAPP Project in 2011. The second iteration of the MAPP process began in September 2012 and was completed in May 2014. The third round of the MAPP process began in January 2016.

The MAPP Executive Committee meets bi-monthly to provide oversight to the ongoing MAPP process and make recommendations to the overall operations of the MAPP Collaborative. A program coordinator was appointed in March 2013. The coordinator is a full-time staff member of the Will County Health Department, with partial funding by the Will County MAPP Collaborative. Action Teams were established around the identified priorities and have been implementing action plans and strategies to address those needs. The action teams are led by chairs and co-chairs from partner organizations. Most of the teams meet monthly or bi-monthly as needed. Organizations involved in the MAPP Executive Committee are listed below.

- AMITA Health Adventist Medical Center
Bolingbrook
- Aunt Martha's Youth Services
- Catholic Charities
- Chestnut Health Systems
- Easterseals Joliet Region, Inc.
- Edward Hospital
- Governors State University
- New Life Church
- Presence Saint Joseph Medical Center
- Senior Services of Will County
- Silver Cross Hospital
- Stepping Stones, Inc.
- United Way of Will County
- Will County Community Health Center
- Will County Executive's Office
- Will County Health Department
- Will-Grundy Medical Clinic

The Data, Evaluation, and Monitoring Team (DEM) was established to review and monitor the progress of the Action Teams, and maintain and update data for the Community Health Status Assessment. The team also serves as a resource for the data needs of the Action Teams.

The general membership consists of partners who are not involved directly with an Action Team, but participate as appropriate for their organization. They contribute to the overall assessment process and some implementation strategies.

Many partners participated in developing this Community Health Needs Assessment, which are listed on the next page:

INTRODUCTION

1. Agape Missions, NFP
2. Agency on Aging Northeastern IL
3. AMITA Health Adventist Medical Center Bolingbrook
4. Aunt Martha's Youth Services
5. Bluestem Earth Festival
6. Bolingbrook Fire Department
7. Braidwood Area Healthy Community Coalition
8. Breast Intentions of Illinois
9. C.W. Avery Family YMCA
10. Catholic Charities Diocese of Joliet
11. Channahon Park District
12. Chestnut Health Systems
13. Child and Family Connections #15
14. Child Care Resource & Referral
15. CITGO Petroleum Corp
16. Coldwell Banker Residential
17. Community Alliance & Action Network
18. Community Lifeline Ministries, Inc.
19. Cornerstone Services Inc.
20. Easterseals Joliet Region, Inc.
21. Edward-Elmhurst Health
22. Evergreen Terrace Apartments
23. Food Allergy Research & Education
24. Forest Park Center
25. Franciscan Communities, Inc.- Marian Village
26. Glenwood Rehab Center
27. Governors State University
28. Greater Joliet Area YMCA
29. Guardian Angel Community Services
30. Harvey Brooks Foundation
31. Heritage Woods of Plainfield
32. Illinois Department of Children & Family Services
33. Illinois Department of Employment Security
34. J.F. Holder Foundation
35. Joliet Fire Department
36. Joliet Junior College
37. Joliet Police Department
38. Joliet Public School District 86
39. Joliet Township High School District 204
40. Lakewood Nursing Center
41. Lewis University
42. Mari Gallagher Research & Consulting Group
43. Mokena Police Department
44. Mt. Zion Baptist Church
45. New Life Church
46. PACE Suburban Bus
47. Plainfield Counseling Center LLC
48. Presence Home Care
49. Presence Saint Joseph Medical Center
50. PT Solutions Physical Therapy
51. Rasmussen College
52. Senior Services Center of Will County
53. Silver Cross Healthy Community Commission
54. Silver Cross Hospital
55. Illinois Department of Public Health
56. Stepping Stones, Inc.
57. TEC Services Consulting Inc.
58. The Community Foundation of Will County
59. Trinity Services, Inc.
60. United Way of Will County
61. University of Illinois Extension
62. University of St Francis
63. Valley View School District
64. VNA Health Care
65. Warren-Sharpe Community Center
66. Will County Adult Detention Facility
67. Will County Board
68. Will County Board of Health
69. Will County Center for Community Concerns
70. Will County Circuit Clerk
71. Will County Community Health Center
72. Will County Emergency Management Agency
73. Will County Executive's Office
74. Will County Forest Preserve District
75. Will County GIS
76. Will County Health Department
77. Will County Land Use Department
78. Will County Medical Reserve Corps
79. Will County Residents
80. Will County Veterans Assistance Commission
81. Will Grundy Center for Independent Living
82. Will-Grundy Medical Clinic

Vision, Mission, and Value Statements

The Will County MAPP Collaborative chose to revise the current vision statement, but also add mission and value statements. The collaborative used the current vision statement to develop the new value statements. There were three rounds of voting on developed statements. Approximately 100 MAPP

members participated in this voting process. MAPP Executive Committee members gave final approval in November 2016 on the statements listed below.

Vision Statement

Achieving equitable and optimal health in body and mind for all Will County residents.

Mission Statement

The Will County MAPP Collaborative will assess the health needs of the community and develop, implement and evaluate initiatives to promote the highest quality of life for all residents.

Value Statements

Health Equity: All individuals have the opportunity to realize their full potential and to achieve the highest quality of life.

Collective Impact: We strive to be a progressive community that maximizes the use of community partnerships and collaboration among all sectors to ensure, enhance and promote comprehensive, quality and equitable education, healthcare and social services.

Respect: Every life has value.

Communication: We commit to sharing our data, assessments and plans in order to educate and engage the community.

Quality: We believe in evaluation, continuous improvement and innovation.

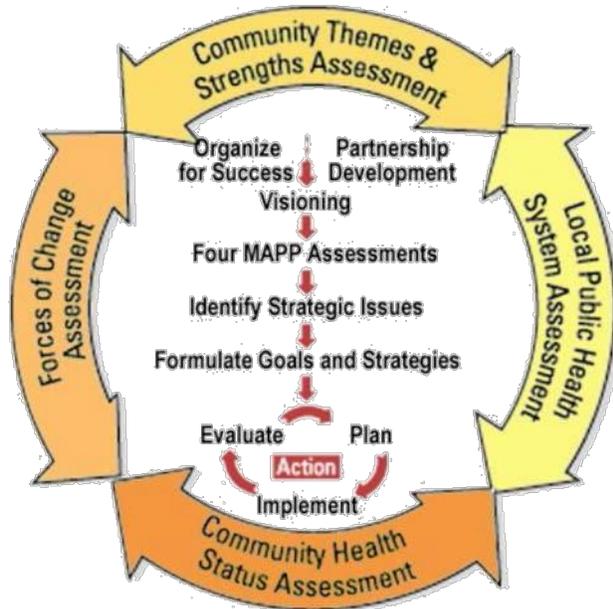
Inclusiveness: We are a community rich in diversity, where involvement and commitment have deep roots among our residents.

Collaborative Process and Assessment Methodology

Framework

In 2016, the Will County Mobilizing for Action through Planning and Partnerships (MAPP) Collaborative convened to conduct the third iteration of the MAPP process. MAPP is a community driven, strategic planning framework that assists communities in developing and implementing efforts around the prioritization of public health issues and the identification of resources to address them as defined by the 10 Essential Public Health Services. The MAPP process includes four assessments, as shown in the graphic to the right.

Figure 3.1. MAPP Process Framework



Community Health Status Assessment

The Community Health Status Assessment (CHSA) is one of four assessments conducted as a part of the MAPP process. During this assessment, information regarding demographics, health status, health behaviors and social determinants in the community is gathered and analyzed. Data is collected from a variety of resources and analyzed comparing local, state, and national benchmarks when available.

The CHSA provides a picture of our community by answering three questions:

1. Who are we and what do we bring to the table?
2. What are the strengths and risks in our community that contribute to health?
3. What is our health status?

The MAPP process recommends and identifies health indicators in the following eleven categories for conducting the CHSA:

- Demographics
- Socioeconomics
- Health Resource Availability
- Quality of Life
- Behavioral Risk Factors
- Environmental Health
- Social and Mental Health
- Maternal and Child Health
- Death, Illness and Injury
- Communicable Diseases
- Sentinel Events

In the summer of 2016, a student intern from University of Illinois collected and summarized data in the above categories. County level data from public and proprietary sources were used. The MAPP Data, Evaluation, and Monitoring (DEM) Team, which was established by the Will County MAPP Collaborative in 2013, reviewed, edited, and provided data for the report. Additional partnering organizations provided staff and interns to assist in collecting additional data for the report.

Community Themes and Strengths Assessment

The Community Themes and Strengths Assessment (CTSA) aims to gather community members' perceptions, thoughts, opinions, and concerns regarding quality of life in Will County. This input provides valuable insight into the issues of importance to the community. This assessment engages the community by requesting their input on the following questions:

1. What is important to our community?
2. How is quality of life perceived in our community?
3. What are the assets in our community?

Community engagement is key to the success of any community-wide initiative, and provides residents with a sense of ownership and participation in their county. The Will County MAPP Collaborative conducted a survey among Will County residents to answer the questions above.

The Will County MAPP Collaborative participated in the CTSA through the use of a community-wide survey. The survey contained 55 questions on a variety of topics, including quality of life, health status, access to resources, social support, economic opportunity, health equity, and social issues. Residents were able to report on their perceptions of health and quality of life issues within their homes, community, and county. Most of the survey questions asked participants to rate issues on a Likert scale, however, some questions were open-ended, giving respondents opportunities to comment on their responses.

The CTSA survey was developed using Survey Monkey, and made available online in both English and Spanish. The survey was open to all Will County residents and the collection period ran from January 23, 2017 to February 27, 2017. 1,620 surveys were collected during the collection period (1,582 English and 38 Spanish). Survey results were analyzed by the CTSA Subcommittee and used to gather the top identified health and quality of life issues in Will County.

Upon a mid-collection period review of the random sample of survey participants, it was identified that the demographics were not reflective of the entire Will County population. Underrepresented populations included the following groups: Latino/Hispanic, African American, men, youth/young adults, and residents from Plainfield, Bolingbrook, and Romeoville. The CTSA Subcommittee attempted to further reach these populations by distributing paper copies of the survey to various groups throughout the county, including the YMCA, youth groups in Bolingbrook and Wilmington, and a prominent African American cultural organization. Surveys were also collected from clients of the Will County Health Department's WIC (Women, Infants, and Children) and Immunizations programs in waiting areas. 170 paper surveys were collected and input into Survey Monkey for analysis.

Questions addressing health equity were included in the survey to measure the effects of discrimination on health. Respondents were asked to identify perceptions of discrimination due to race, ethnicity, and color in Will County. These questions were adapted from "Experiences of discrimination: Validity and reliability of a self-report measure for population health research on racism and health."

Forces of Change Assessment

The Forces of Change Assessment (FOCA) aims to identify all the forces and associated opportunities and threats that can affect, either now or in the future, the local public health system. Forces may be social, economic, political, technological, environmental, scientific, legal, and/or ethical in nature. Forces can be trends, factors, or events.

- Trends are patterns over time, such as migration in and out of a community or a growing disillusionment with government.
- Factors are discrete elements, such as a community's large ethnic population, an urban setting, or the jurisdiction's proximity to a major waterway.
- Events are one-time occurrences, such as a hospital closure, a natural disaster, or the passage of new legislation.

During the FOCA, participants answer the following questions:

1. What is occurring or might occur that affects the health of our community or the local public health system?
2. What specific threats or opportunities are generated by these occurrences?

The Will County MAPP Collaborative participated in the FOCA through a three phase process. In October of 2016, the Will County MAPP Collaborative participated in the first phase of the FOCA. MAPP members were emailed and invited to participate in a survey through Survey Monkey to identify the forces of change affecting Will County's local public health system and the community. The survey contained open-ended questions, with guided prompts, intended to identify the forces of change. The survey used eight categories of forces, as well as an "other" option, to elicit broad community input. Survey results were analyzed by the FOCA Subcommittee and used to gather the top identified forces.

Results from this survey were summarized and used to develop the second survey, which solicited refined community input to identify threats and opportunities to previously identified forces from the previous survey. This survey was sent to members of the MAPP Executive Committee, Action Teams, Will County Board of Health, and Presence Community Leadership Board. The survey contained open-ended questions with guided prompts. Also in this survey, we asked respondents to choose the top 10 forces they felt impacted the Will County public health system or community. Both surveys were open to anyone who lived or worked in Will County.

Following the initial compilation of FOCA by community members, the forces were combined into cross-cutting themes and a neutral facilitator guided the MAPP Executive Committee through the third phase of the process. Committee members were presented with the top eleven forces identified to have the most impact on Will County's public health system. MAPP Executive Committee members participated in a facilitated dialogue on November 16, 2016 in which they discussed the forces and were asked to identify additional missing forces. Committee members then participated in an activity where they were asked specific health equity questions to determine the need to identify additional forces, threats, and opportunities.

Local Public Health System Assessment

The Local Public Health System Assessment (LPHSA) was conducted on December 1, 2016. The LPHSA is used to understand the overall strengths and weaknesses of the public health system based on the 10 Essential Public Health Services shown in Figure 3.2.

Conducting the Local Public Health System Assessment (LPHSA), answers the following questions:

1. What are the activities, competencies, and capacities of the local public health system?
2. How are the 10 Essential Public Health Services being provided to the community?

The National Public Health Performance Standards (NPHPS) Assessment is the instrument used to measure the performance of the local public health system – defined as the collective efforts of public, private, and voluntary entities, as well as individuals and informal associations that contribute to the public’s health within a jurisdiction. Any organization or entity that contributes to the health or wellbeing of a community is considered part of the public health system. Ideally, a group that is broadly representative of these public health system partners participates in the assessment process. By sharing diverse perspectives, all participants gain a better understanding of each organization’s contributions, the interconnectedness of activities, and how the public health system can be strengthened. The NPHPS does not focus specifically on the capacity or performance of any single agency or organization.

Figure 3.2. Essentials of Public Health



The instrument is framed around the 10 Essential Public Health Services (EPHS) that are utilized in the field to describe the scope of public health. The 10 EPHS support the three core functions of public health: assessment, policy development, and assurance. NPHPS results are intended to be used for quality improvement purposes for the public health system and to guide the development of the overall public health infrastructure.

The 2016 Will County LPHSA included supplemental questions for each EPHS to identify how well the local public health system acknowledges and addresses health inequities. The LPHSA supplement is called “System Contributions to Assuring Health Equity,” from the National Association of County and City Health Officials (NACCHO) MAPP User’s Handbook.

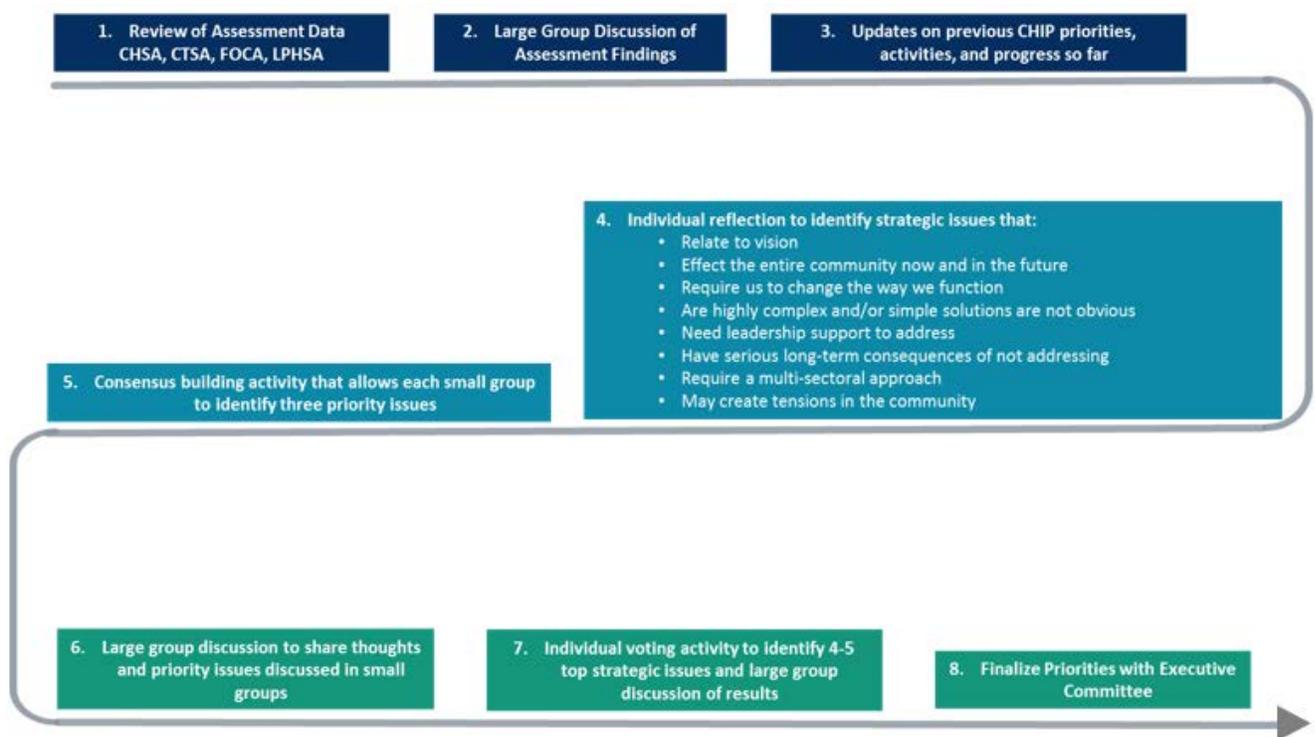
The event drew 79 public health system partners that included public and voluntary sectors. The composition of attendees reflected a diverse representation of partners.

Prioritization of Strategic Issues

On April 7, 2017, 41 Will County public health stakeholders participated in a six hour meeting at Presence Saint Joseph Medical Center to review key findings from the four MAPP assessments, identify cross-cutting themes and potential strategic issues, and prioritize a set of strategic issues. The meeting was facilitated by the Illinois Public Health Institute.

Following the discussion of assessment findings and updates on previous Community Health Implementation Plan priorities, participants individually reflected on the top strategic issues by noting up to five top strategic issues for Will County. Individual reflections were discussed in small groups to build a consensus around the top strategic issues using a set of defined prioritization criteria (Figure 3.2). Each small group came to consensus on the top three strategic issues.

Figure 3.3. Process for Prioritization of Strategic Issues



Next, each small group shared their recommendations and rationale for the top three strategic issues, followed by a facilitated discussion to further explore and define the potential priorities. This discussion yielded a consolidated list of potential top strategic issues, as well as consensus agreement from the large group that behavioral health should be one of the top priorities. To further narrow the set of strategic issues, participants were given dots to use as votes to identify the top strategic priorities. Thus, the following top priorities were identified:

- Lack of access to care
- Access to healthy lifestyle choices and resources/creating a culture of health
- Chronic disease
- Transportation (transportation was also nested under access to care by some groups)
- Behavioral health

The results of the voting activity are presented in Figure 3.4.

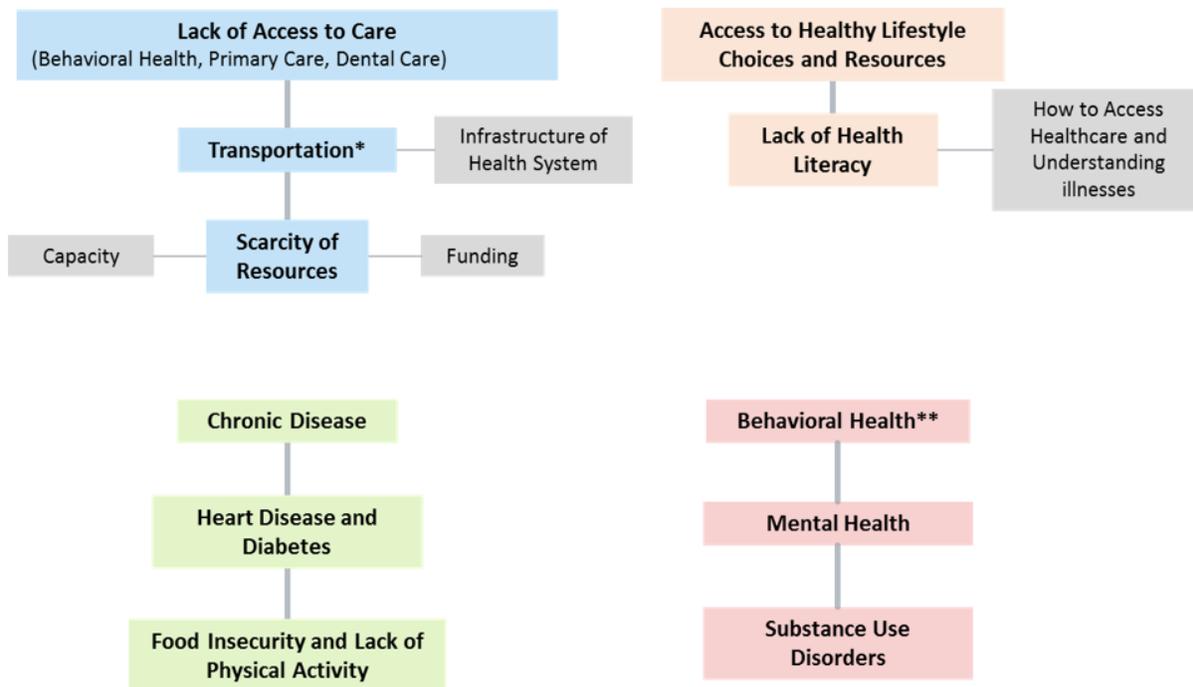
Figure 3.4. Results of Voting Activity to Narrow Priorities*

Priorities	Number of Votes	Percentage
Lack of access to care	16	26%
Access to healthy lifestyle choices and resources/Creating a culture of health	17	27%
Chronic disease	15	24%
Transportation (Transportation was also nested under access to care by some groups)	14	23%

*There was consensus that behavioral health should be a priority, so it was not voted on.

Because the votes for each of the priorities were so close, the meeting attendees were asked to give further feedback on the priorities on the evaluation forms. Slightly more than a third of evaluation respondents indicated that creating a culture of health should be an overarching theme, goal, or vision that is embedded into all other priorities. The same number of respondents indicated that transportation should be a separate priority and not nested under access to care. Two respondents suggested combining access to care and chronic disease into a single priority and there were multiple respondents recommending consolidation of some of the priorities. Figure 3.5 provides an outline of the top priorities discussed and key aspects of each strategic priority.

Figure 3.5. Priority Areas Identified by the Overall Group



*Transportation was nested under lack of access to care and as a separate category

**The entire group agreed that behavioral health should be a priority health issue, so it was not included during the individual voting activity.

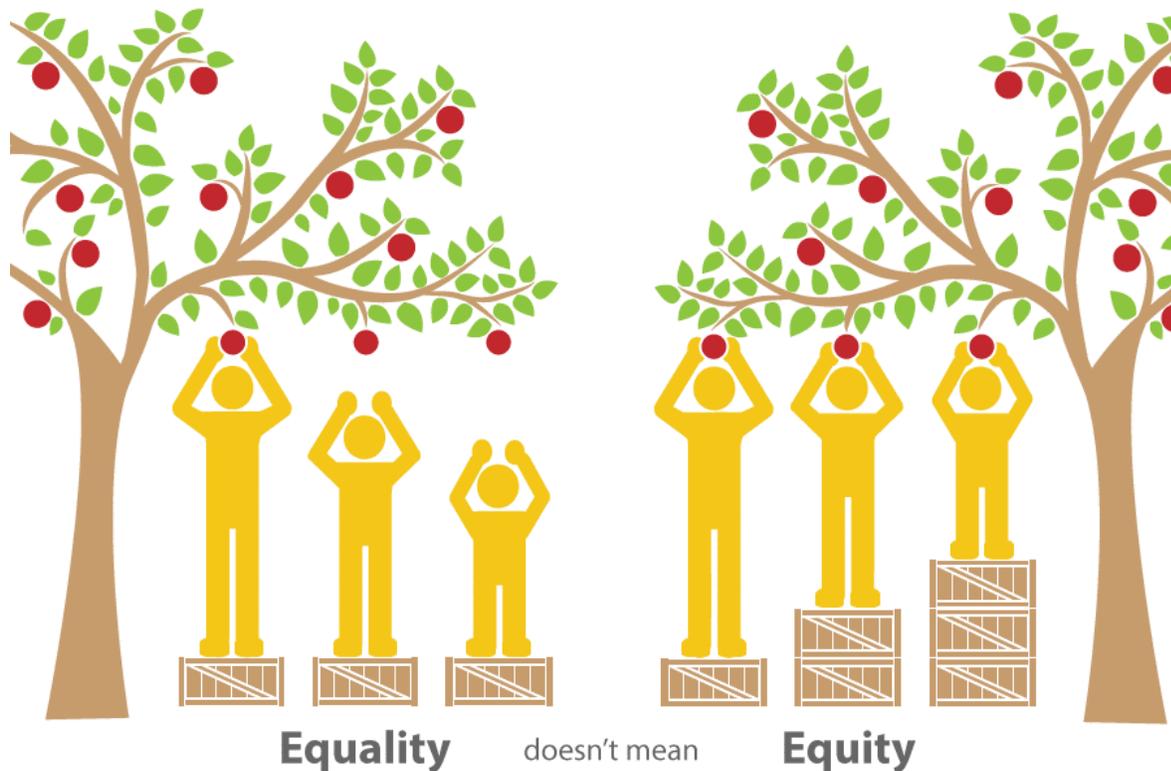
In May of 2017, MAPP Executive Committee members were asked to use a Prioritization Criteria and Planning Worksheet during the discussion of the previously identified strategic issues. All attendees agreed that transportation is a concern, but that it could be nested under all strategic issues, as well as become a goal of the MAPP Executive Committee. Access to healthy lifestyle choices would also be nested in all issues as a strategy.

MAPP Executive Committee members decided that behavioral health, access to dental and primary care, and chronic disease prevention would be the top three strategic issues for the next three years. Goals and action plans will be developed or updated for each of these priority health issues. These action plans will be implemented and aligned to improve the local public health system, and ultimately the health and wellbeing of the Will County community in alignment with our vision.

Health Equity

One of the core values of the Will County MAPP Collaborative is health equity, with the belief that all individuals have the opportunity to realize their full potential and to achieve the highest quality of life. Healthy People 2020 defines health equity as the "attainment of the highest level of health for all people." To achieve health equity, avoidable health inequities and health disparities must be eliminated. This requires short and long term strategies addressing the root causes of health inequities and health disparities, specifically social determinants of health. The *Mobilizing and Organizing Partners to Achieve Health Equity* supplemental guide was used during this assessment process.

Figure 3.6. Health Equity



Source: Saskatoon Health Region, https://www.communityview.ca/infographic_SHR_health_equity.html

Key Findings of Strategic Issue: Access to Dental and Primary Care

Overview

Access to comprehensive, quality healthcare services is important for promoting and maintaining health, preventing and managing disease, reducing unnecessary disability and premature death, and achieving health equity. Access to healthcare improves both individual and community health. Access is a complex issue with multiple components including availability, affordability, and timeliness. Findings from the assessments detail access issues to healthcare services, as well as resources. Certain communities in Will County labeled as a healthcare provider shortage area also experience issues with social, economic, and environmental inequities.

Specific priority needs and populations identified in the assessment process include:

Needs	Populations
<ul style="list-style-type: none"> • Better data to define and prioritize access issues, identify populations most affected, and monitor progress • Navigating insurance and potential changes to the Affordable Care Act • Transportation to healthcare services and resources • Improving health literacy • Equitable services throughout the county • Health resources for seniors 	<ul style="list-style-type: none"> • Medicaid recipients • Medicare recipients • Hispanic/Latino population • East side of Joliet (60432 and 60433) • Southern Will County

Assessment Findings

The Forces of Change Assessment and Local Public Health System Assessment identified the lack of equitable and quality healthcare as a major concern in Will County. Opportunities pinpointed in these assessments include:

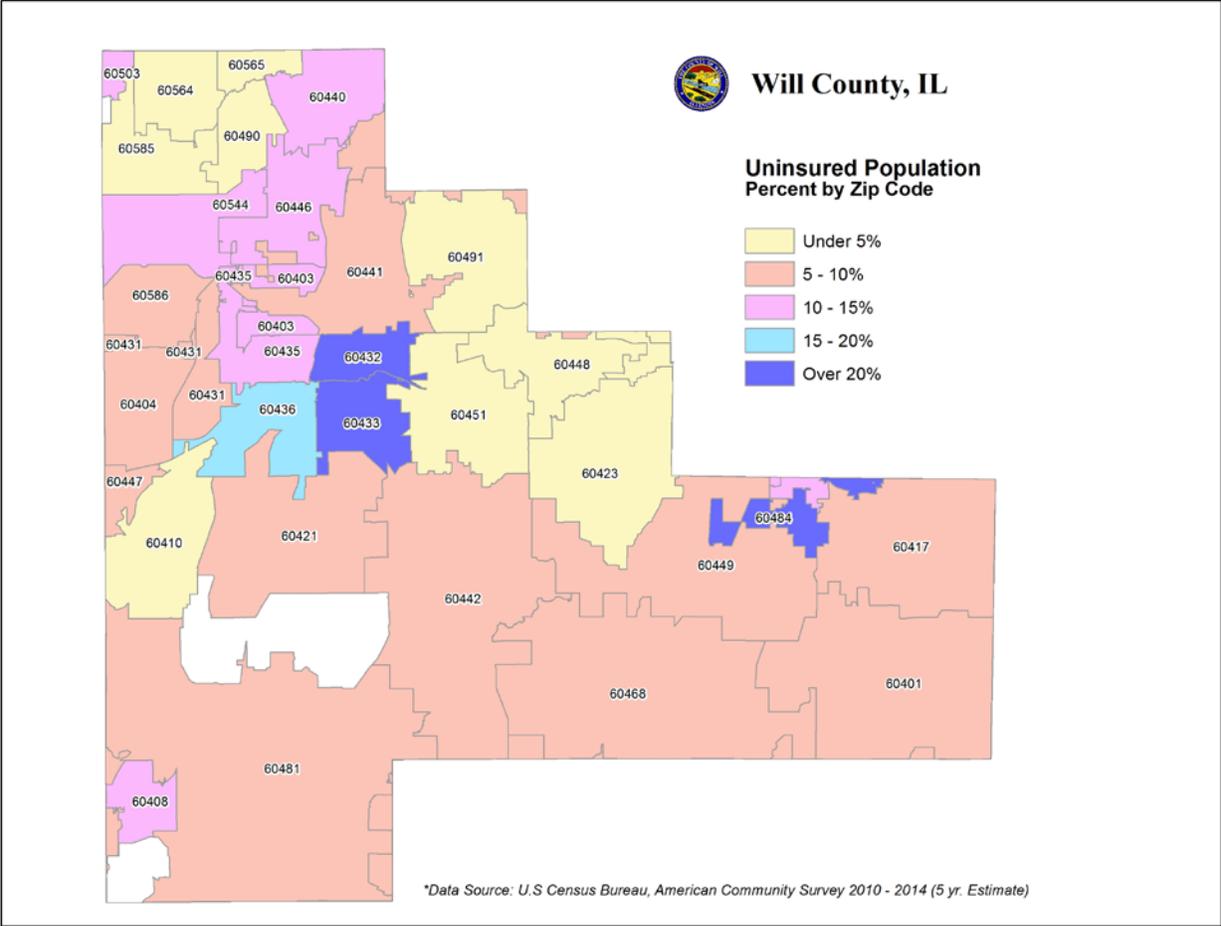
- Improve population health by developing county-wide healthcare programs
- Increase advocacy and funding for equitable healthcare
- Increase capacity for provision of services
- Improve system interoperability of electronic medical records

Insurance Coverage

The lack of health insurance is considered a key driver of health status and is a primary barrier to healthcare access including regular primary, specialty, dental, and other healthcare services. According to the U.S. Census Bureau, 9.2% of the Will County population under the age of 65 was uninsured in 2014, compared to 12.3% of the Illinois population. There has been an overall decrease in the percentage of uninsured population since 2010 (12.3%). According to the 2014 American Community Survey, 20.2% of the Hispanic/Latino population in Will County reported no health insurance coverage,

compared to 7.1% of the non-Hispanic/Latino population. Along with disparities in ethnicity, there are geographical inequities as displayed in Figure 4.1.

Figure 4.1. Percent of Uninsured Will County Adults by Zip Code, 2014



Provider Availability

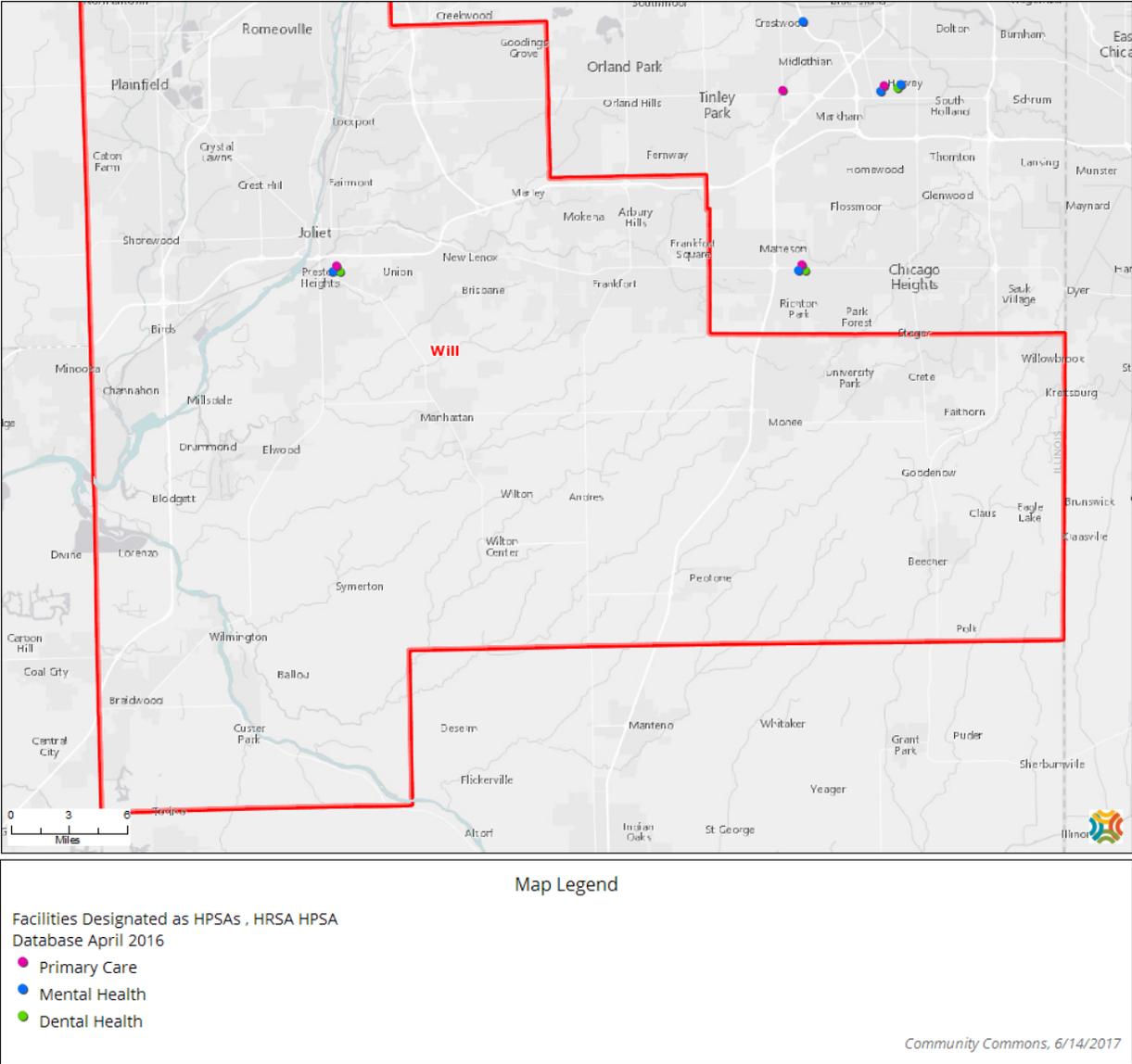
In terms of clinical care, Will County is ranked 33rd out of 102 counties in the state. These measures suggest a shortage of providers available in the community. Will County has a total of 372 primary care physicians, yielding a ratio of population to primary care physicians of 1,840:1, compared to 1,240:1 for Illinois and 1,040:1 nationally. Will County has a total of 361 dentists, yielding a ratio of population to dentists of 1,950:1, compared to 1,410:1 for Illinois and 1,340:1 nationally.

There are more than 120,000 Medicaid enrollees in Will County. Approximately one in seven residents are enrolled in Medicaid, with 50% of the enrollees being children. There are 757 physicians and 138 nurse practitioners participating in Medicaid. 355 of these physicians are primary care providers. The rate of primary care providers to Medicaid enrollees is three for every 1,000 Medicaid enrollees. There is one pediatrician per 1,000 children enrolled. There are 91 dentists participating in Medicaid, which is a rate of less than one dentist for every 1,000 Medicaid enrollees.

ACCESS TO DENTAL AND PRIMARY CARE

The U.S. Department of Health Resources and Service Administration (HRSA) has developed shortage designations that are used to determine if areas or population groups are Health Professional Shortage Areas (HPSA). HPSAs may be designated as having a shortage of primary medical care, dental, or mental health providers. In Will County, the east side of Joliet has been identified as a HPSA for primary care, dentists, and mental health providers, as identified on the map below. 12.9% (87,398) of Will County residents live in a HPSA.

Figure 4.2. Map of Provider Shortage in Will County, 2016



Data Source: Health Resources and Services Administration, Health Professional Shortage Area Database, 2016

In 2014, 84.1% of adults had a primary healthcare provider, which is a slight decrease from previous years. The percentage in Will County is higher than what was reported for Illinois in 2013 (79.9%) and

the HP2020 Target (83.9%). Even though Will County meets the HP2020 target, there are significant disparities in gender, income, race, and age, as displayed in Figure 4.3.

Figure 4.3. Will County Adults Who Report Having a Regular Provider, 2010-2014

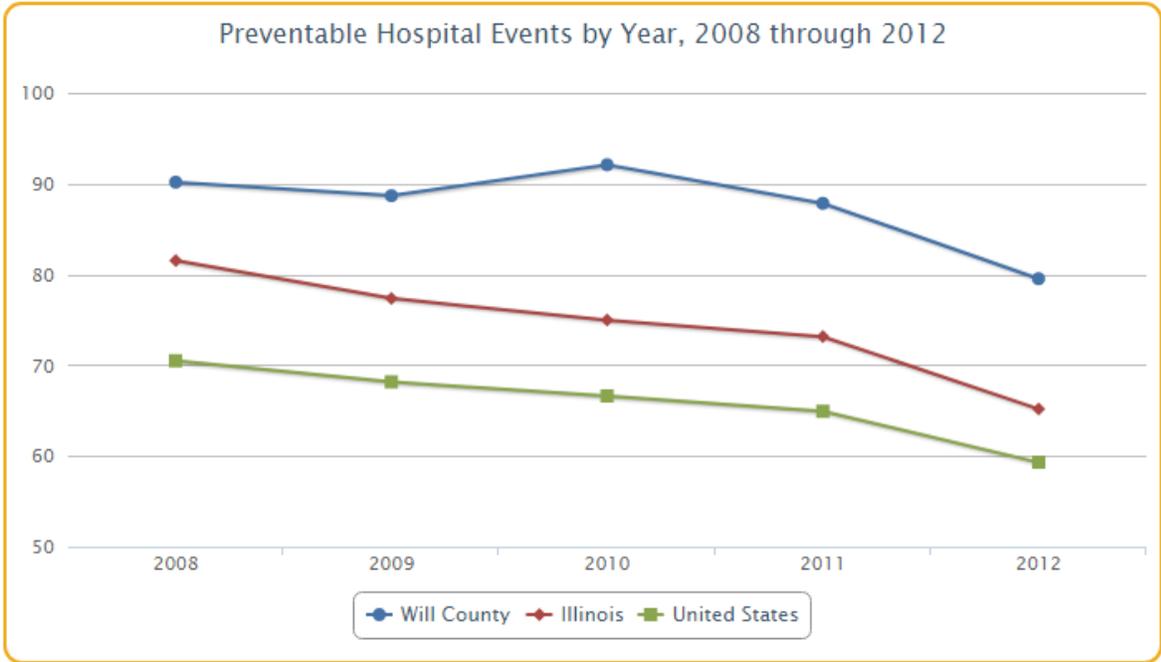
Gender		Income		Race		Age	
Female	90.6%	\$15-35,000	76.9%	Non-white	77.5%	25-44	79.4%
Male	77.5%	\$35-50,000	95.0%	White	85.9%	45-64	86.5%
		> \$50,000	85.0%			65+	95.7%

Data Source: Illinois Behavioral Risk Factor Surveillance System, 2010-14

Preventable Hospital Events

Figure 4.4 reports the discharge rate (per 1,000 Medicare enrollees) for conditions that are ambulatory care sensitive (ACS). ACS conditions include pneumonia, dehydration, asthma, diabetes, and other conditions which could have been prevented if adequate primary care resources were available and accessed by those patients.

Figure 4.4. Medicare Preventable Hospital Events in Will County



Data Source: Dartmouth College Institute for Health Policy & Clinical Practice, Dartmouth Atlas of Healthcare, 2012

Community Survey

In the Community Themes and Strengths Assessment (CTSA), a survey was distributed to the community. Survey respondents were asked where they receive healthcare and dental services. The majority of respondents (91.2%) visit a private dentist for dental services. With respect to healthcare services, respondents visit a variety of locations. 80.4% receive healthcare from a private practice or

family healthcare provider, 39.7% go to the Immediate Care Center, 25.7% visit the hospital emergency rooms, 20.8% visit Quick Clinics, such as Walgreens or CVS, and 6.9% visit Community Health Centers.

Respondents receive health-related information from a variety of sources as well. The majority (64.0%) get their information from the internet. Other prominent sources of health information identified include: the doctor (52.8%), online/print newspaper (45.6%), village/township newsletter (32.4%), social media (31.7%), the hospital (31.3%), family members (27.1%), and the local health department (25.6%).

Residents indicated the high cost of healthcare as their main concern, noting that the high cost limits their use of services and resources. Also, out of pocket expenses place a huge financial burden on individuals and families in the County.

When asked to rate the quality of life in Will County, the majority of survey respondents (74.7%) perceive life in Will County as “very good” or “good.” The most commonly mentioned issues regarding the quality of life, related to healthcare, include:

- High cost of living
- Lack of quality healthcare
- Lack of access to transportation
- Lack of services for senior citizens

Approximately one quarter (26.5%) of respondents negatively perceive the quality of healthcare in Will County. Survey participants mentioned a few issues in particular, including a shortage of hospitals and medical facilities, low quality service at the existing hospitals, a lack of mental/behavioral health providers, and difficulty locating Medicaid providers. It should be noted that many respondents mentioned having to drive out of Will County, often long distances, to find a medical provider that accepts their insurance. Multiple mentions of a lack of healthcare services in Southern and Eastern Will County are of importance as well. Comments show that navigating and accessing healthcare in Will County is especially challenging for senior citizens and residents with Medicaid.

Key Findings of Strategic Issue: Behavioral Health

Overview

Behavioral health is a term used to include both mental health and substance abuse disorders. Mental health is defined as a state of well-being in which every individual realizes their own potential, can cope with the normal stresses of life, can work productively, and is able to make a contribution to their community. The existing model for understanding mental health and mental disorders emphasizes the interaction of social, environmental, and genetic factors throughout the lifespan. In behavioral health, researchers identify:

- Risk factors, which predispose individuals to mental illness
- Protective factors, which protect them from developing mental disorders

Mental health disorders are among the most common causes of disability. Mental health disorders attributed to 7.8% (5,783) of Will County hospitalizations in 2014, and it is the third leading cause of all hospitalizations.

Substance abuse refers to the harmful or hazardous use of psychoactive substances, including alcohol and illicit drugs. Substance abuse has a major impact on individuals, families, and communities. The effects of substance abuse are cumulative, significantly contributing to costly social, physical, mental, and public health problems.

Findings from the assessments detail access issues to behavioral health services, as well as resources. Behavioral health issues impact population groups across income levels, as well as racial and ethnic groups. Certain communities in Will County labeled as mental healthcare provider shortage areas also experience issues with social, economic and environmental inequities.

Specific priority needs and populations identified in the assessment process include:

Needs	Populations
<ul style="list-style-type: none"> • Better data to define and prioritize behavioral health issues, identify populations most affected, and monitor progress • Adequate funding for expansion of services, resources, and providers • Equitable services throughout the county 	<ul style="list-style-type: none"> • 60433 zip code • Southern Will County • Youth • White population • Males

Assessment Findings

The Forces of Change Assessment and Local Public Health System Assessment identified behavioral health as a major concern in Will County. Opportunities pinpointed in these assessments include:

- Increase education, advocacy, and prevention efforts to decrease substance abuse trends and stigma around behavioral health

- Increase coordination of care between social service agencies, law enforcement, and healthcare agencies
- Advocacy for increased funding and reimbursements for services

Provider Availability

In 2012, the State closed the Tinley Park Mental Health Center which was the only long-term state-run inpatient facility for the chronically mentally ill located near Will County. While there are other mental health services in Will County, none are inpatient facilities. All three hospitals in Will County have inpatient mental health units, totaling 75 beds.

Will County has a total of 645 mental health providers, yielding a ratio of population to mental health providers of 1,060:1, compared to 370:1 for Illinois and 560:1 nationally.

The U.S. Department of Health Resources and Service Administration (HRSA) has developed shortage designations that are used to determine if areas or population groups are Health Professional Shortage Areas (HPSA). The East side of Joliet (zip code 60433) has been identified as a HPSA for mental health providers.

The Will County MAPP Collaborative has found through a capacity assessment of key stakeholders that behavioral health is a key area of need in Will County. The MAPP Behavioral Action Team, with guidance from the University of Saint Francis, surveyed providers and referrers in 2016 to get a picture of system capacity. In this survey, three barriers for clients to access services were identified; cost of needed services (34%), wait for services (32%), and distance to services (30%). The survey also found that, according to providers, psychiatric services were hardest to access, especially for mental health disorders.

Self-Reported Emotional and Mental Health

One of the indicators in the Behavioral Risk Factor Surveillance Survey (BRFSS) is to measure the number of days residents report their mental health to be ‘not good,’ during the last 30 days.

Figure 5.1. Will County Adults Who Report Bad Mental Health Days

BRFSS Round	1-7 Mental Health Days ‘Not Good’	8-30 Mental Health Days ‘Not Good’
	Collective %	Collective %
2010-2014	22.0%	15.0%
2007-2009	17.3%	17.3%
2004-2006	25.8%	11.6%
2001-2003	26.8%	10.4%

Data Source: Illinois Behavioral Risk Factor Surveillance System, 2001-14

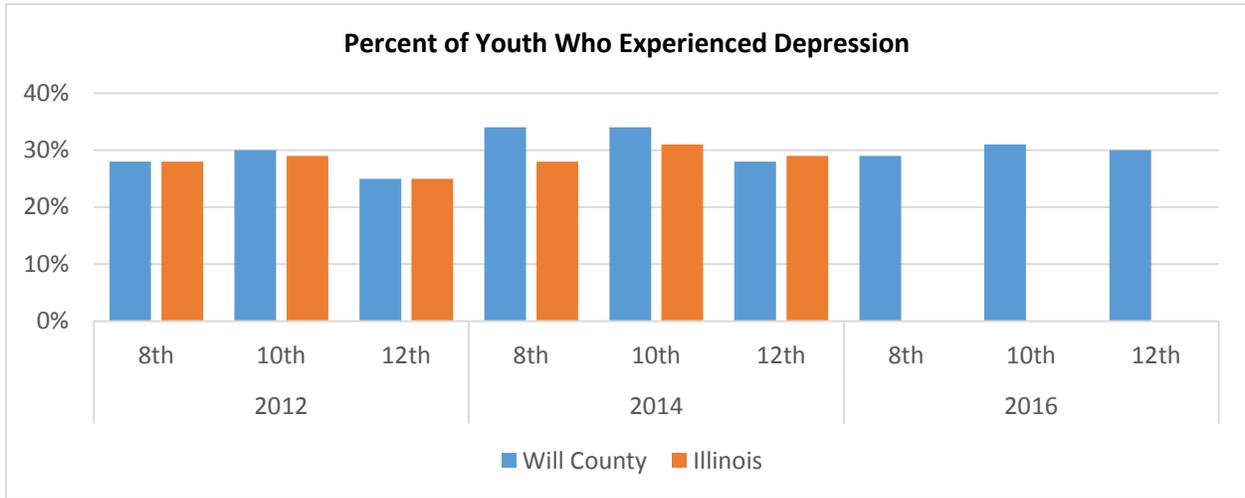
Emotional Support

The percentage of adults, aged 18 and older, who self-report that they receive insufficient social and emotional support all or most of the time in Will County is 19.2% (91,148).

Youth Depression

When asked, “During the past 12 months did you ever feel so sad or hopeless almost every day for two weeks or more in a row that you stopped doing some usual activities?,” 30% of 12th graders responded yes in 2016, which is an increase from 28% reported in 2014.

Figure 5.2. Percent of Will County Youth Who Experienced Depression in the Past Year

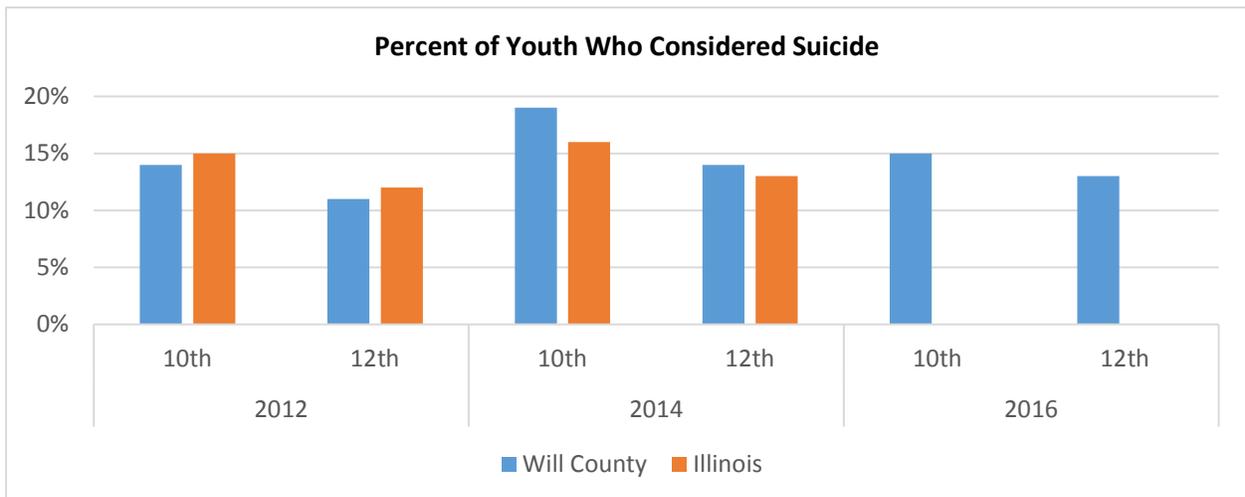


Data Source: Illinois Youth Survey, 2016

Suicide

When asked, “During the past 12 months did you ever seriously consider attempting suicide?,” 13% of 12th graders and 15% of 10th graders responded yes, which has decreased from 2014, as shown in the figure below.

Figure 5.3. Percent of Will County Youth Who Considered Suicide in the Past Year

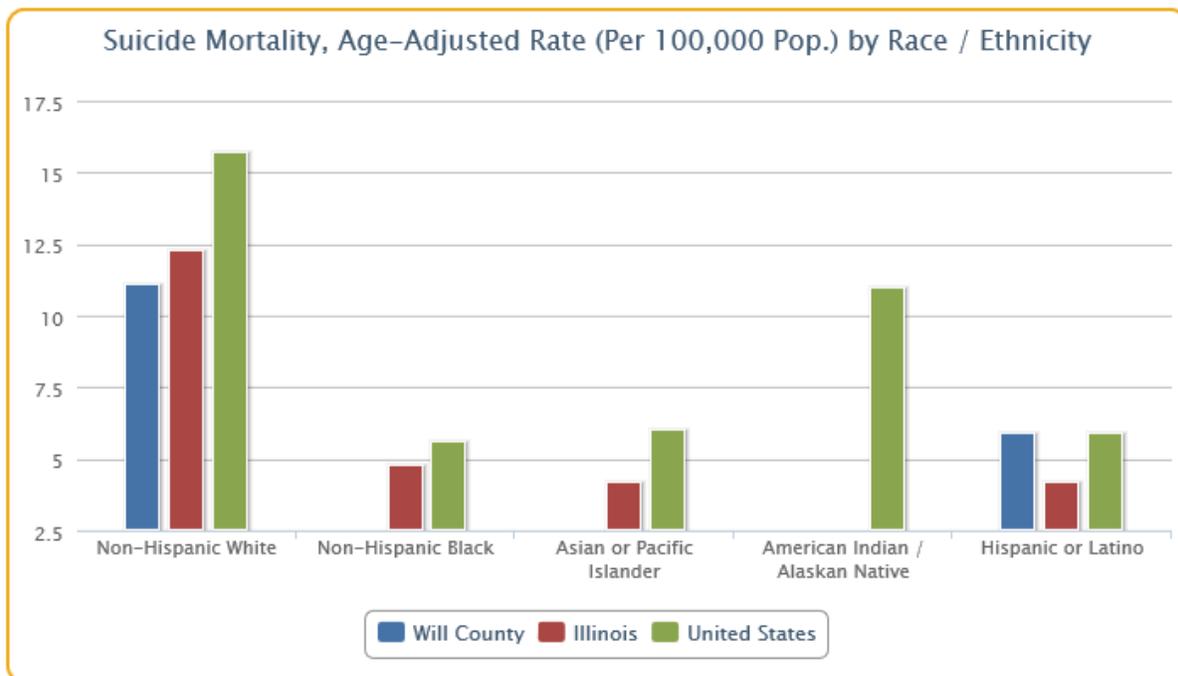


Data Source: Illinois Youth Survey, 2016

Unnatural deaths include all suicides, homicides, traffic fatalities, work-related accidents, all other accidental deaths, and any deaths where the cause or manner cannot be determined. In 2015, there were 285 unnatural deaths in Will County. Of those 285 unnatural deaths, approximately 20% were attributed to suicide.

This indicator reports the rate of death due to intentional self-harm (suicide) per 100,000 population. Will County’s suicide rate is 9.2. There are significant disparities within gender and race, with males more likely to commit suicide at a rate of 15.1 versus females at 3.7. Breakdown by race/ethnicity is displayed in the graph below.

Figure 5.4. Will County Adult Suicide Mortality Rate by Race/Ethnicity, 2010-2014



Data Source: Centers for Disease Control and Prevention, National Vital Statistics System. Accessed via CDC WONDER, 2010-14

Substance Use

Youth Substance Use

Will County youth substance use in 2014:

- 53% of 12th graders and 33% of 10th graders reported drinking alcohol in the past 30 days
- 30% of 12th graders reported binge drinking at least once in the past two weeks
- 26% of 12th graders and 16% of 10th graders reported using marijuana
- In the past year, 9% of 12th graders reported using any illicit drug excluding marijuana
- 6% of 12th graders and 4% of 10th graders reported using prescription drugs to get high in the past 30 days

- 35% of 12th graders experienced two or more negative consequences from drug use, indicating the potential need for substance abuse assessment

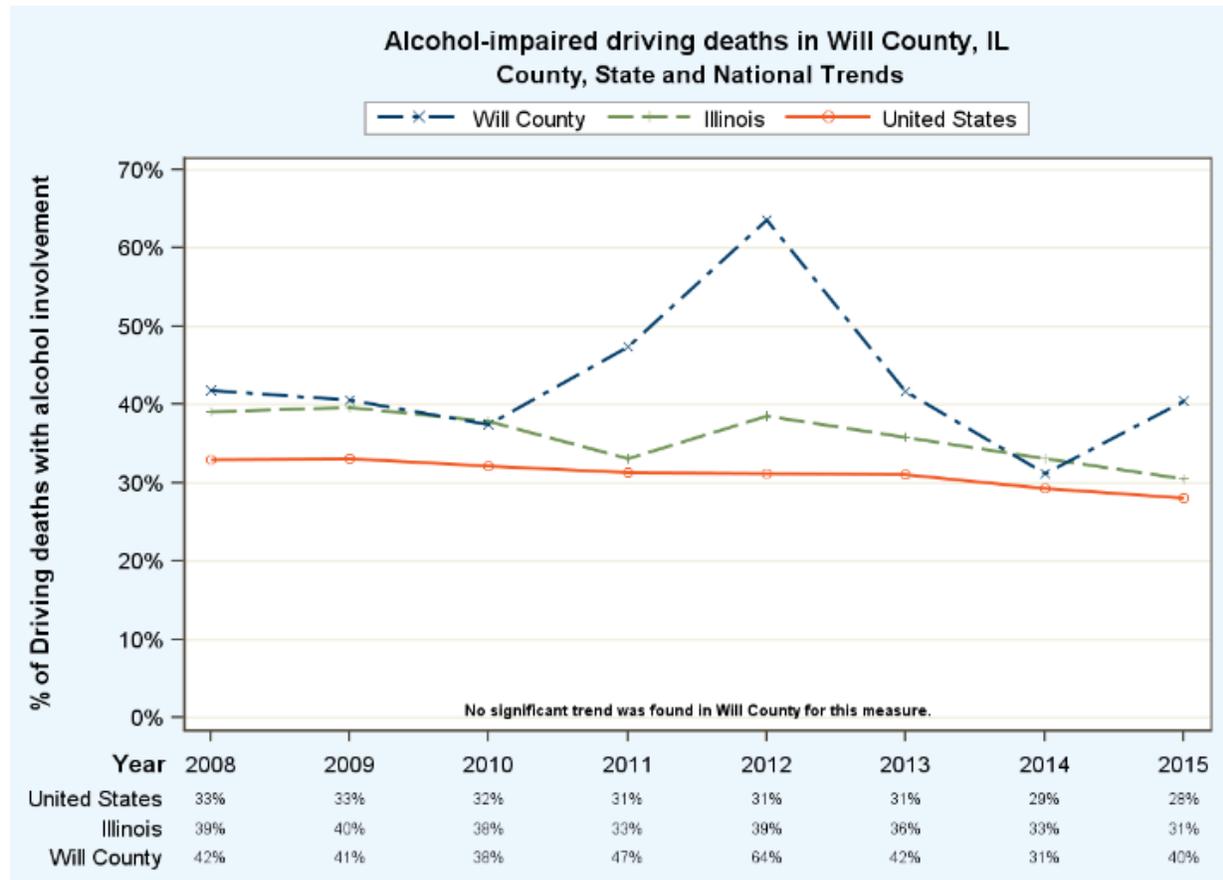
Alcohol Use

Less than a quarter (22.4%) of adults, aged 18 and older, reported binge or heavy alcohol consumption (defined as more than two drinks per day for men and one drink per day for women).

Liquor store access reports the number of beer, wine, and liquor stores per 100,000 population. In 2014, Will County (10.48) had a slightly higher rate of liquor establishments than in Illinois (10.2), however, still lower than the United States (10.6).

The percent of driving deaths which include alcohol is declining statewide and nationally, but is on the rise in Will County, as illustrated in the graph below.

Figure 5.5. Percent of Driving Deaths with Alcohol Involvement



Data Source: University of Wisconsin Population Health Institute. *County Health Rankings* Key Findings, 2016

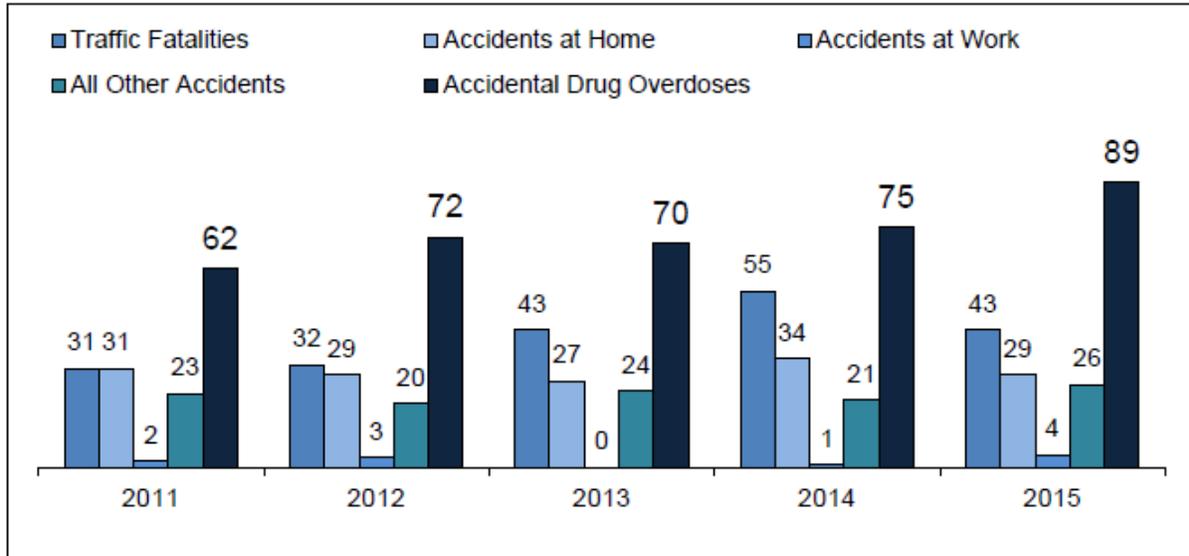
Overdoses and Drug Induced Mortality

In 2015, males accounted for 66% of accidental overdose deaths in Will County. According to the Will County Coroner's Office, heroin deaths continue to be the leading cause of accidental overdose deaths.

Of the 89 accidental overdoses, 52 deaths were heroin related. Combined drug intoxication was the second leading cause of accidental overdose. Figure 5.6 displays the causes of accidental deaths in Will County.

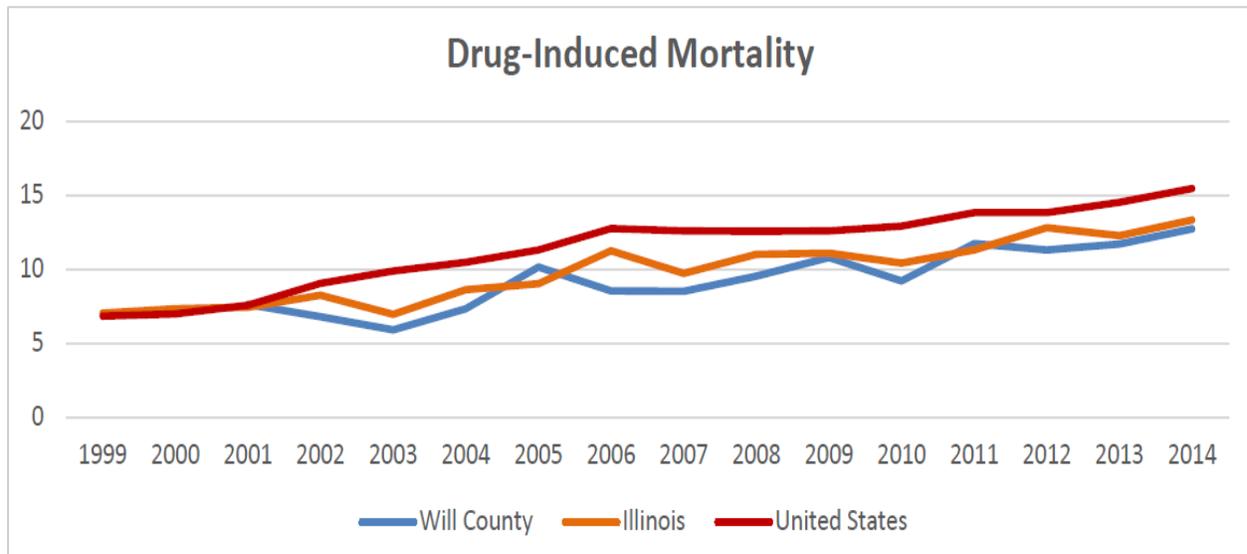
Drug induced mortality reports the rate of death due to drug overdose per 100,000 population. Will County is above the Healthy People 2020 target of 11.3 deaths per 100,000 population, as indicated in Figure 5.7.

Figure 5.6. Adult Accidental Deaths in Will County



Data Source: The Will County Coroner Annual Report, 2015

Figure 5.7. Will County Drug Induced Mortality Rate



Data Source: Centers for Disease Control and Prevention, National Vital Statistics System. Accessed via CDC WONDER, 2010-14

Community Survey

In the Community Themes and Strengths Assessment (CTSA), a survey was distributed to the community. Survey respondents were asked where they receive mental health services. Those seeking mental health services visit a private practice or family health care provider (37.8%), the hospital emergency room (6.7%), Community Health Centers, such as Aunt Martha’s or the Will County Community Health Center (5.1%), or an Immediate Care Center (3.2%).

Questions on a variety of health issues were asked in the survey and respondents were able to rate the impact of each issue in their home, in their community, and in the county on a Likert scale. The following health issues were identified by survey respondents, combining the answers “It is somewhat a problem” and “It is a large problem.”

Figure 5.8. Top Health Issues Identified as ‘Somewhat’ or a ‘Large’ Problem

	At Home	In my Community/Neighborhood	In Will County
1	Depression/Anxiety Disorder	Illegal Drug Abuse	Illegal Drug Abuse
2	Other Mental Health Issues	Underage Drinking	Prescription Drug Abuse
3	Dementia/Alzheimer’s Disease	Excessive Drinking/Alcohol Abuse	Underage Drinking
4	Excessive Drinking/Alcohol Abuse	Prescription Drug Abuse	Violence
5	Illegal Drug Abuse	Depression/Anxiety Disorder	Excessive Drinking/Alcohol Abuse

The following figures display the number of respondents rating health issues as a problem in their homes, communities, and in Will County.

Figure 5.9. Health Issues Rated as a Problem at Home

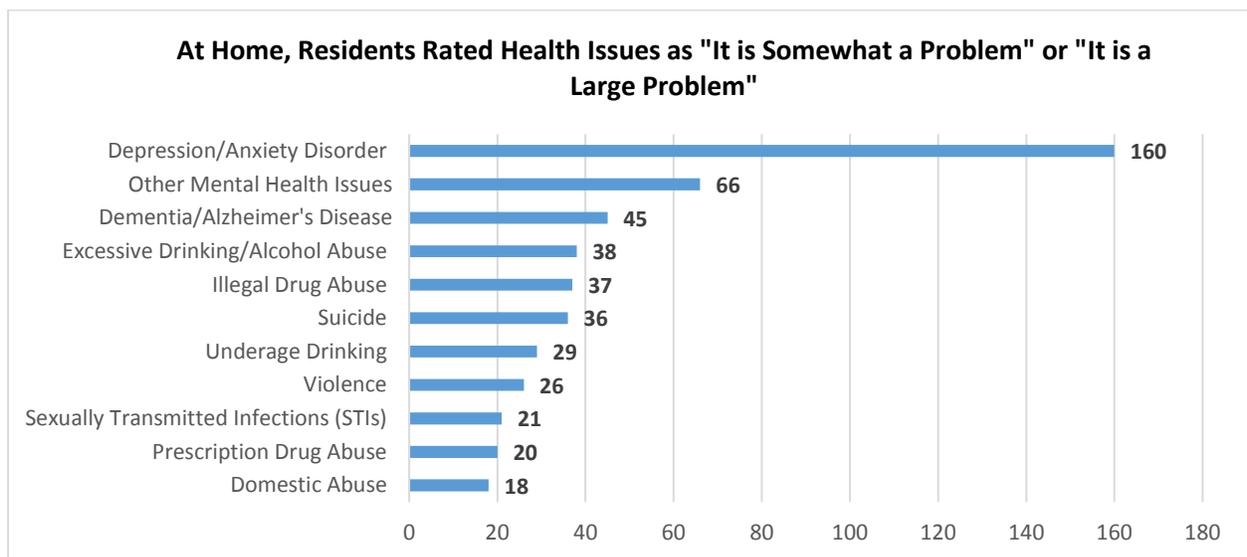


Figure 5.10. Health Issues Rated as a Problem in the Neighborhood/Community

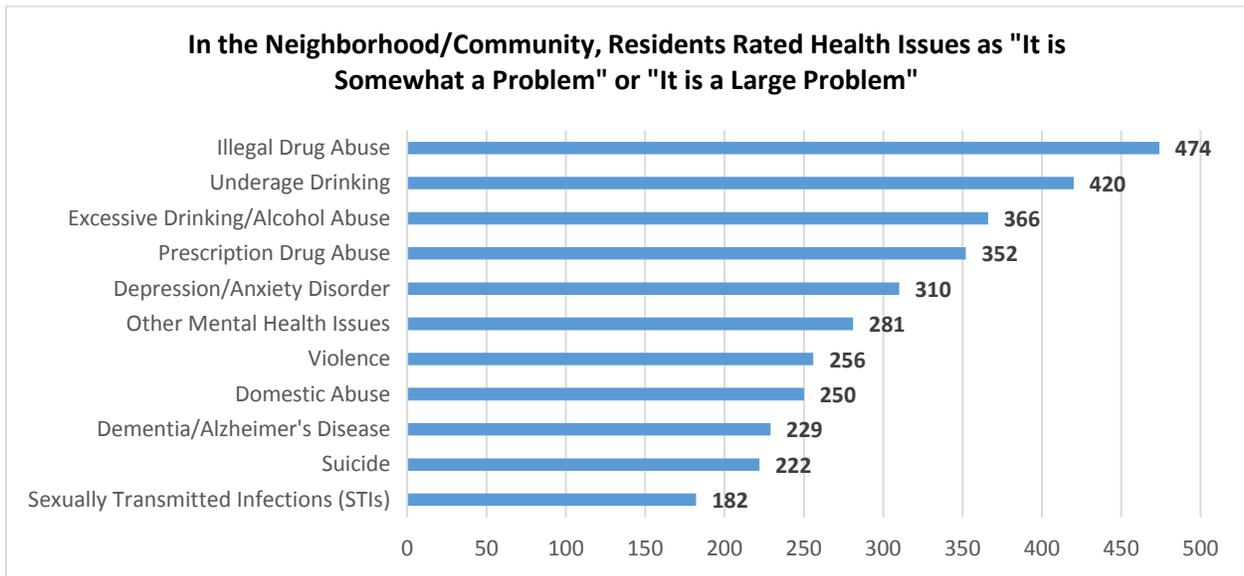
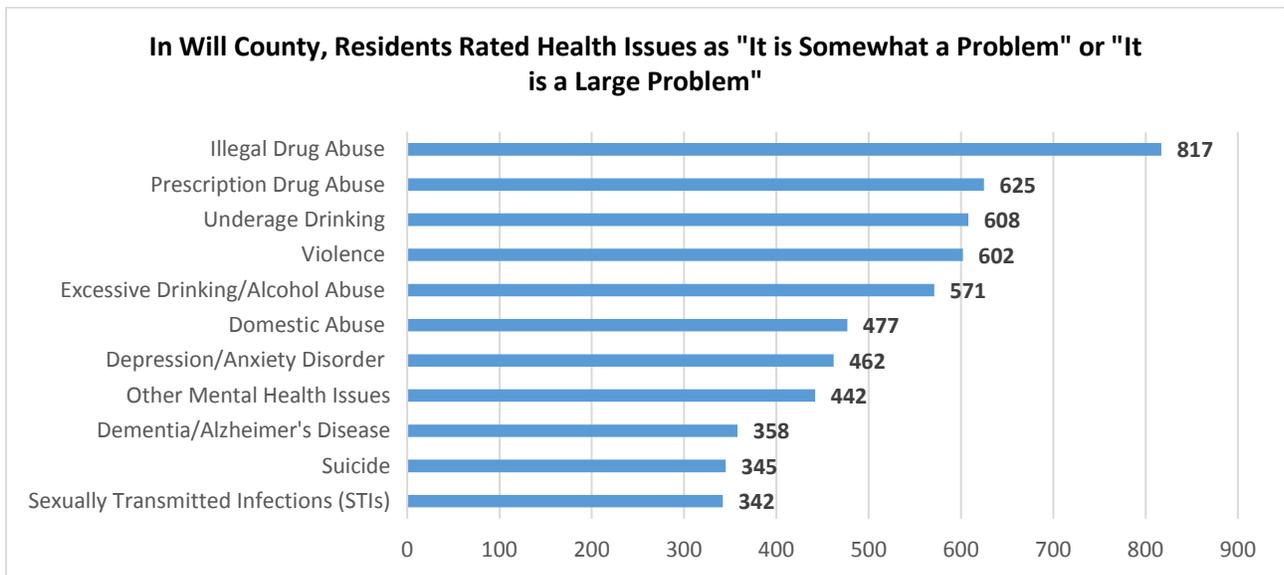


Figure 5.11. Health Issues Rated as a Problem in Will County



Residents were invited to list any further comments to help us understand their ratings. Of the 1,620 respondents, 68 chose to leave a comment. Of these comments, the main area of concern was on drug and alcohol problems in the county. Specifically, respondents mentioned the rise of heroin overdoses and illegal drug abuse in recent years. Another area of concern mentioned was a lack of services and housing for individuals with any type of mental/emotional disorder.

Key Findings of Strategic Issue: Chronic Disease

Overview

Chronic diseases, such as heart disease, cancer, type 2 diabetes, stroke, and obesity, are the most common, costly, and preventable of all health problems. Heart disease is the second cause of hospitalizations in Will County and cancer is the fifth. Heart disease, cancer and diabetes account for approximately 58% of all deaths in Will County.

Many chronic diseases are linked to lifestyle choices, or health risk behaviors, which are unhealthy behaviors that can be changed. Four of these health risk behaviors—lack of physical activity, poor nutrition, tobacco use, and excess alcohol consumption—cause much of the illness, suffering, and early death related to chronic diseases and conditions. Eating nutritious foods, becoming more physically active, and avoiding tobacco can help avoid developing many of these diseases and conditions.

Findings from the assessments detail access issues to healthcare services and resources. Specific priority needs and populations identified in the assessment process include:

Needs	Populations
<ul style="list-style-type: none"> • Better data to define and prioritize chronic disease problems, identify populations most affected, and monitor progress • Healthcare services to prevent or enable early detection of disease, reduce risk factors, and manage conditions • Strategies that link community and clinical services to ensure that people with or at high risk of chronic diseases have access to the resources they need to prevent or manage these diseases • Access to affordable, healthy foods 	<ul style="list-style-type: none"> • Medicare population • Males • African American population • 60417, 60432, 60433, 60436, 60440, 60441, and 60484 zip codes

Assessment Findings

The Forces of Change Assessment identified access to and affordability of healthy foods as a major concern in Will County. Opportunities pinpointed in these assessments include:

- Increase advocacy and funding for healthy eating campaigns and policies to support healthy eating
- Focus on bringing new healthy businesses, grocery stores, farmers markets, and community gardens to Will County

Cancer Incidence and Mortality

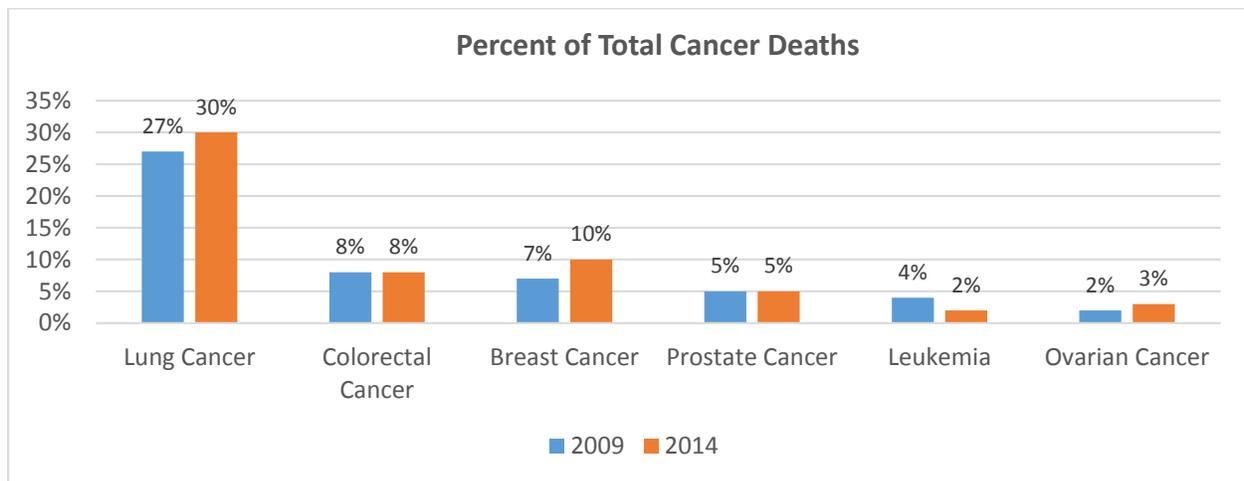
In 2014, there were 4,223 deaths in Will County. Cancer was the leading cause of death in Will County until 2014, when it was surpassed by diseases of the heart. Cancer is now the second leading cause of death. The table below shows the leading causes of death in Will County. Of the total cancer deaths, lung cancer is the top cause in Will County, as shown in Figure 6.1.

Figure 6.1. Leading Causes of Will County Deaths in 2014

2014 Leading Causes of Death in Will County	Number of Deaths	Percent of Deaths
All Causes	4,223	100.0%
Cancer	1,063	25.1%
Diseases of the Heart	1,105	26.1%
Chronic Lower Respiratory Diseases	205	4.8%
Accidents	197	4.6%
Cerebrovascular Disease	214	5.0%
Nephritis and Nephrosis	130	3.0%
Alzheimer's Disease	107	2.5%
Diabetes	113	2.7%
Septicemia	40	0.9%
Pneumonia	88	2.0%
Suicide/Self-harm	56	1.3%
Chronic Liver Disease/Cirrhosis	75	1.8%

Data Source: Illinois Department of Public Health, Vital Statistics, 2014

Figure 6.2. Will County Percent of Cancer Deaths by Type

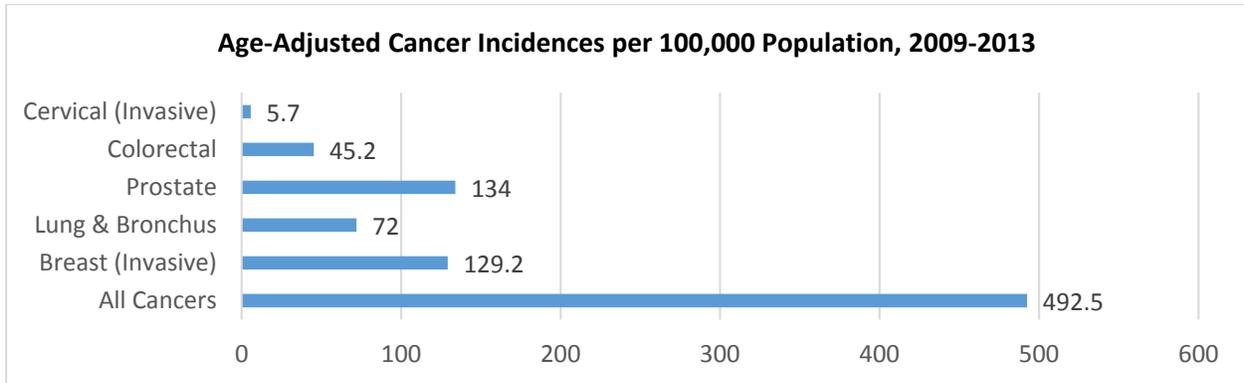


Data Source: Centers for Disease Control and Prevention, CDC Wonder, 2009-14

From 2009-2013, there were 15,268 newly diagnosed cases of cancer in Will County. The age-adjusted cancer incidence rate was 492.5 per 100,000 population. Men were slightly more likely to develop

cancer than women. Women mostly developed breast cancer (129.2 per 100,000 women) and men mostly developed prostate cancer (134 per 100,000 men).

Figure 6.3. Will County Age-Adjusted Cancer Incidence by Type



Data Source: Will County Health Department 2015 Annual Report

Lung Cancer

Lung cancer is the most common cause of cancer death among both females and males, accounting for approximately 27% of all cancer deaths in Will County during 2014. Cigarette smoking is the most significant risk factor for lung cancer, though other risk factors include environmental sources such as tobacco smoke and air pollution, radiation exposure, and occupational exposure to organic chemicals such as radon and asbestos. The lung cancer incidence rate in Will County is 72, which is much higher than the state (67.9) and national (62.62) rates.

Colorectal Cancer

Colorectal cancer is the third most commonly diagnosed cancer among men and women, as well as the third leading cause of cancer deaths in Will County. While the colorectal cancer mortality rate for Will County is decreasing, it is still higher than the Illinois colorectal cancer mortality rate and the Healthy People 2020 target. According to the 2010-2014 Behavioral Risk Factor Surveillance System (BRFSS), 69.9% of men in Will County have reported ever having a colonoscopy/sigmoidoscopy.

Breast Cancer

In Will County, 58.4% of women met breast cancer screening guidelines, which is approximately a 15% decrease from 2009 and well below the Healthy People 2020 goal. The Will County breast cancer mortality rate is 16.6 deaths, which is lower than the state and Healthy People 2020 target. However, female breast cancer incidence increased 5% between 2000 and 2013.

Prostate Cancer

Prostate cancer is the fourth leading cause of cancer death in Will County. After increasing from 1995-2004, incidence rates of prostate cancer have been steadily decreasing and have returned to an incidence rate of 134.2, which is significantly higher than the national rate of 123.41.

Cervical Cancer

Cervical cancer used to be one of the most common causes of cancer deaths in women, but the mortality rate due to cervical cancer, has declined significantly over the years. In 2013, there were 100 cases of cervical cancer with an age-adjusted incidence rate of 5.7, which has continued to decline since 2005. According to the 2006-2012 BRFSS data, approximately 78% of adult women met cervical cancer screening guidelines, which is significantly lower than the Healthy People 2020 target of 93%.

Chronic Disease Management

The percentage of adults with a reported chronic disease is similar to state and national percentages, as show in in Figure 6.4, however the Medicare population has a higher percentage of reported heart disease, high cholesterol, and diabetes.

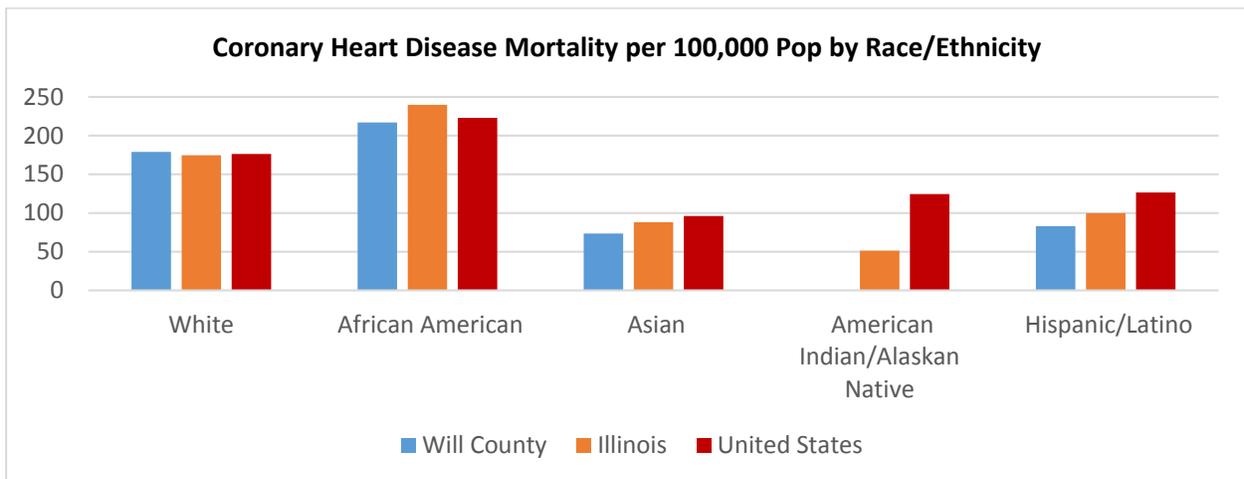
Figure 6.4. Percent of Adults with a Chronic Disease, 2014-15

	Total Adults			Medicare Population		
	Will County	Illinois	U.S.	Will County	Illinois	U.S.
Heart Disease	2.4%	3.8%	4.4%	28%	26.8%	26.46%
High Blood Pressure	28.2%	28.2%	28.16%	28.8%	56.35%	54.99%
High Cholesterol	38.89%	38.02%	38.52%	51.51%	46.19%	44.61%
Diabetes	8.2%	8.47%	9.19%	27.38%	26.27%	26.55%

Data Source: Centers for Medicare and Medicaid Services, 2015 and Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System, 2014

Will County's coronary heart disease mortality rate of 107.7 is slightly higher than both Illinois' mortality rate and the Healthy People 2020 target. The White population has the highest rates of reported heart disease, however, heart disease mortality is highest among African Americans, as shown in Figure 6.5.

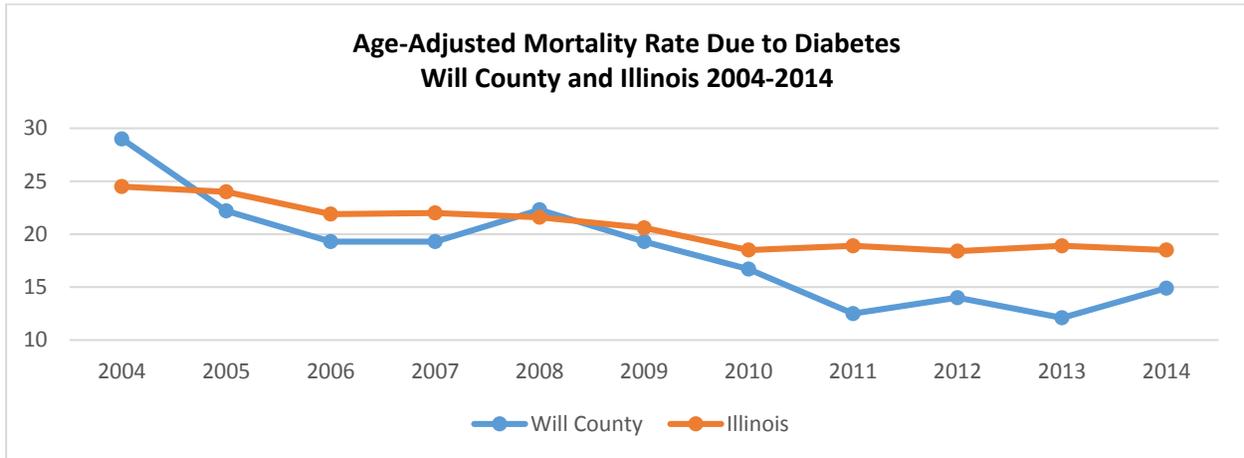
Figure 6.5. Will County Heart Disease Mortality Rate by Race/Ethnicity, 2010-2014



Data Source: Centers for Disease Control and Prevention, National Vital Statistics System. Accessed via CDC WONDER. 2009-13

Over the past decade, mortality due to diabetes has slowly decreased in Will County, as shown in Figure 6.6. In 2014, the age-adjusted mortality rate of diabetes was 14.9 deaths, well below the Healthy People 2020 target of 66.6 deaths. The concern with diabetes is the high percentage of Medicare beneficiaries with diabetes, as shown in Figure 6.4.

Figure 6.6. Will County Diabetes Mortality Rate

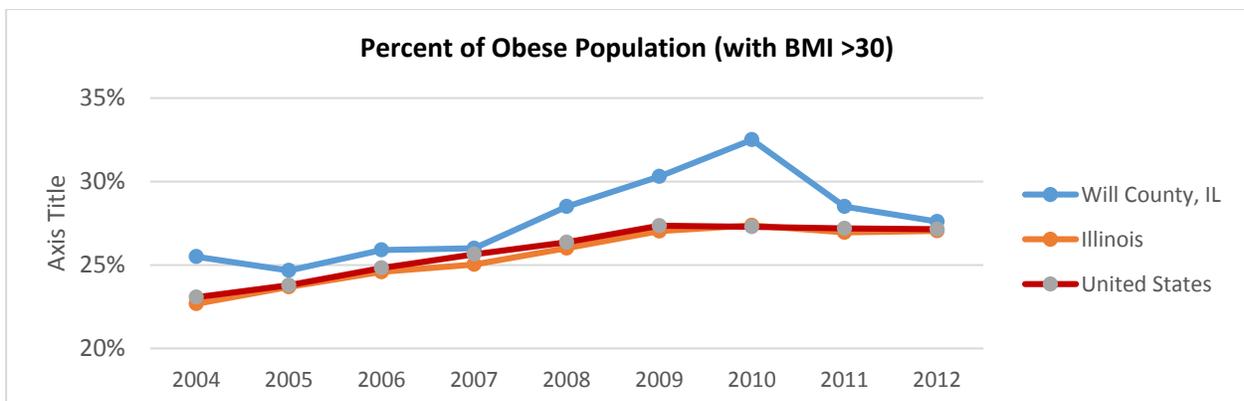


Data Source: Centers for Disease Control and Prevention, National Vital Statistics System. Accessed via CDC WONDER, 2009-13

Obesity

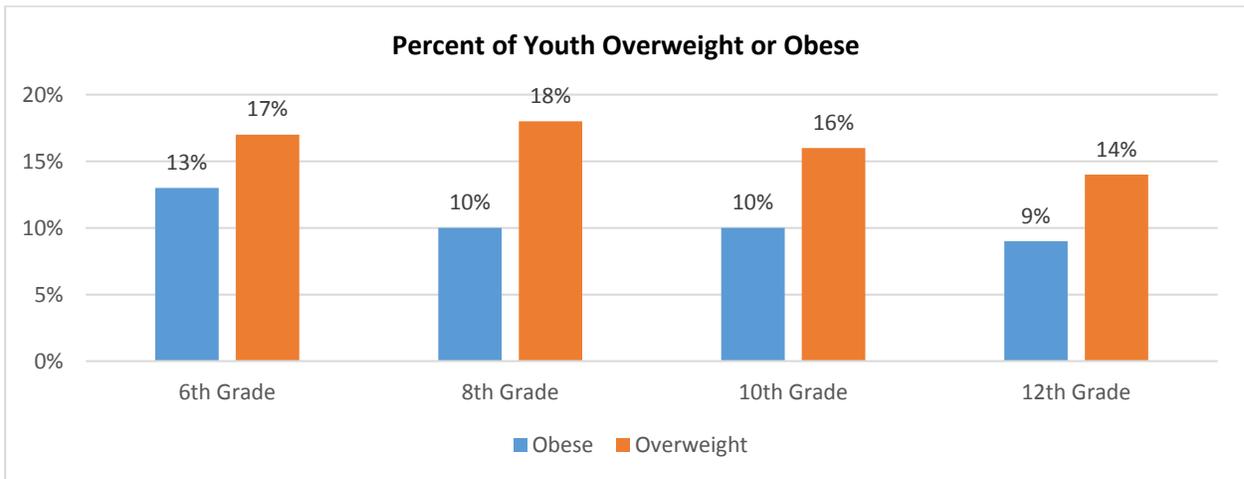
Excess weight is a prevalent problem in the U.S., as it indicates an unhealthy lifestyle and puts individuals at risk for further health issues. The graph below reports the percentage of adults aged 20 and older who self-report that they have a Body Mass Index (BMI) greater than 30.0 (obese). Males were more likely to be obese than females. Additionally, 34.3% of adults aged 18 and older self-reported that they have a BMI between 25-30 (overweight), with the highest percentage being Non-Hispanic White. Additionally, obesity is an issue in Will County youth, as shown in Figure 6.7.

Figure 6.7. Percent of Will County Adult Population Who Are Obese



Data Source: Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, 2012

Figure 6.8. Percent of Overweight and Obese Will County Youth, 2014



Data Source: Illinois Youth Survey, 2014 County Report

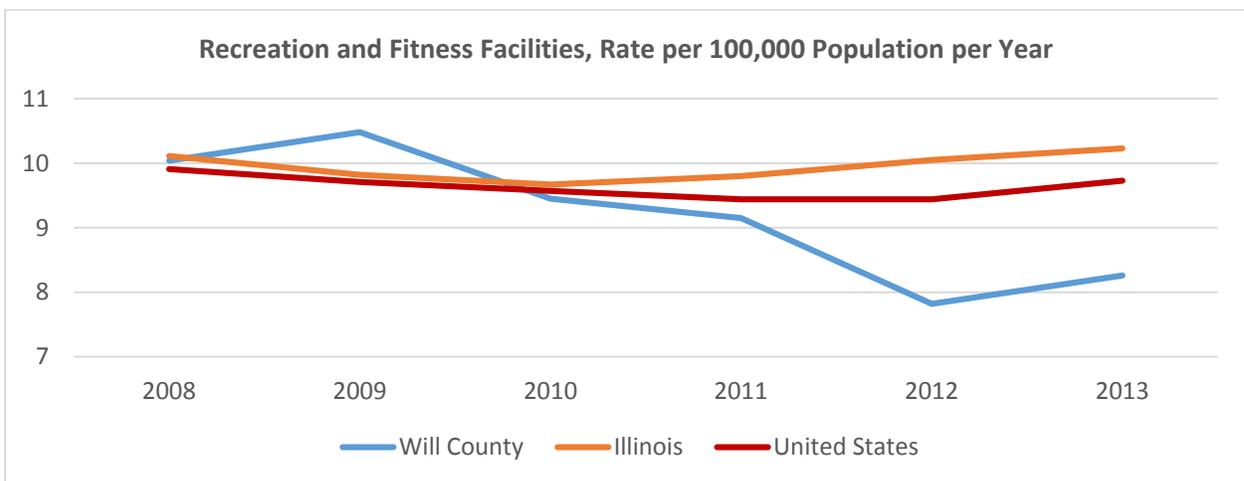
Healthy Food Consumption

Healthy food consumption is an issue among youth and adults in Will County. Among Will County adults, 80.7% are consuming less than five servings of fruits and vegetables each day, compared to 76.3% in Illinois and 75.7% in the U.S. 53% of Will County 6th graders ate fruit and 71% ate vegetables less than two times per day. 67% of Will County 12th graders ate fruit and 74% ate vegetables less than two times per day.

Physical Inactivity

Physical inactivity is a contributing factor to obesity and many chronic diseases. The figure below reports the number, per 100,000 population, of recreation and fitness facilities. A lack of access to recreation and fitness facilities contributes to low levels of physical activity.

Figure 6.9. Rate of Will County Recreational Facilities per 100,000 Population

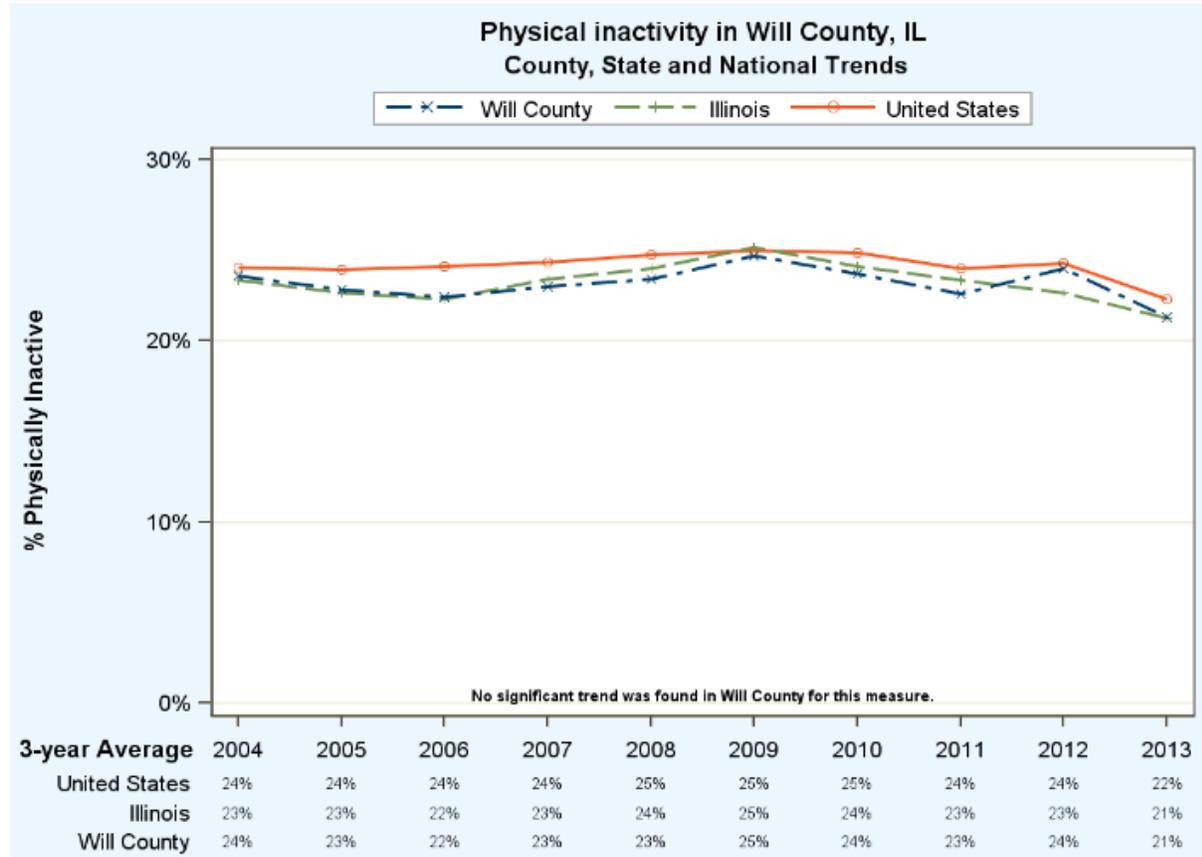


Data Source: US Census Bureau, County Business Patterns. Additional data analysis by CARES, 2013

CHRONIC DISEASE

Among adults and older adults, physical activity can lower the risk of early death, coronary heart disease, stroke, high blood pressure, type 2 diabetes, cancer, falls, and depression. Adults are recommended to get 150 minutes of moderate-to-vigorous physical activity per week, however many adults are physically inactive as show in Figure 6.10.

Figure 6.10. Percent of Adults Physically Inactive



Data Source: Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, 2012

Physical inactivity is also an issue among Will County youth. In 2014, only 30% of 6th graders and 22% of 12th graders met the recommended physical activity guidelines. On an average school day, youth are spending more than the recommended screen time on electronics (not including time for school work), as shown in Figure 6.11.

Figure 6.11. Screen Time Spent On an Average School Day, 2014

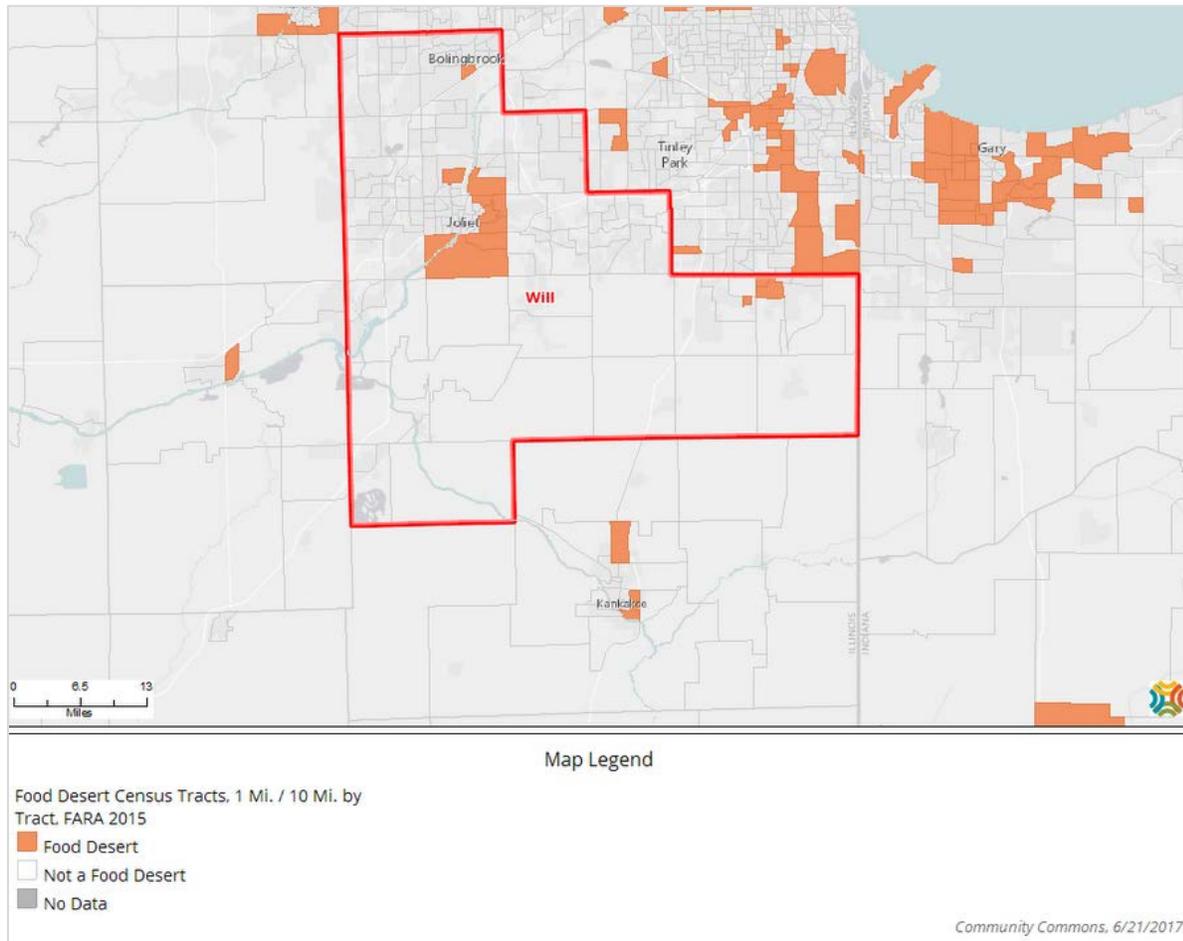
	2+ Hours Screen Time	2+ Hours Television
6 th Grade	67%	60%
8 th Grade	77%	59%
10 th Grade	68%	50%
12 th Grade	62%	54%

Data Source: Illinois Youth Survey, 2014

Food Access

An environment that provides access to healthy food and recreational opportunities is important to maintaining and improving community health. There are 81 neighborhoods in Will County that are within food deserts, affecting approximately 437,000 residents, located in or around Joliet, as shown in Figure 6.12. Also, 16.36% of the population do not have access to healthy foods as shown in Figure 6.13.

Figure 6.12. Will County Food Desert by Census Tract, 2015



Data Source: US Department of Agriculture, Economic Research Service, USDA - Food Access Research Atlas, 2015

Figure 6.13. Percentage of Population Living In Census Tracts with No or Low Access to Healthy Retail Food Stores, 2011

Report Area	% Population with No Food Outlet	% Population with No Healthy Food Outlet	% Population with Low Healthy Food Access	% Population with Moderate Healthy Food Access	% Population with High Healthy Food Access
Will County	1.08%	16.36%	37.11%	43.14%	2.30%
Illinois	0.79%	21.04%	38.50%	36.13%	3.53%
United States	0.99%	18.63%	30.89%	43.28%	5.02%

Data Source: Centers for Disease Control and Prevention, Division of Nutrition, Physical Activity, and Obesity, 2011

CHRONIC DISEASE

Access to healthy, affordable food is a key component of obesity and chronic disease prevention. Retailers who accept SNAP and WIC provide a measure of food security and healthy food access for women and children in poverty, as well as environmental influences on dietary behaviors. Figure 6.14 depicts that Will County has a shortage of retailers which accept SNAP or WIC compared to the state rate.

Figure 6.14. Rate of Grocery Stores, SNAP and WIC-Authorized Retailers per 100,000 Population

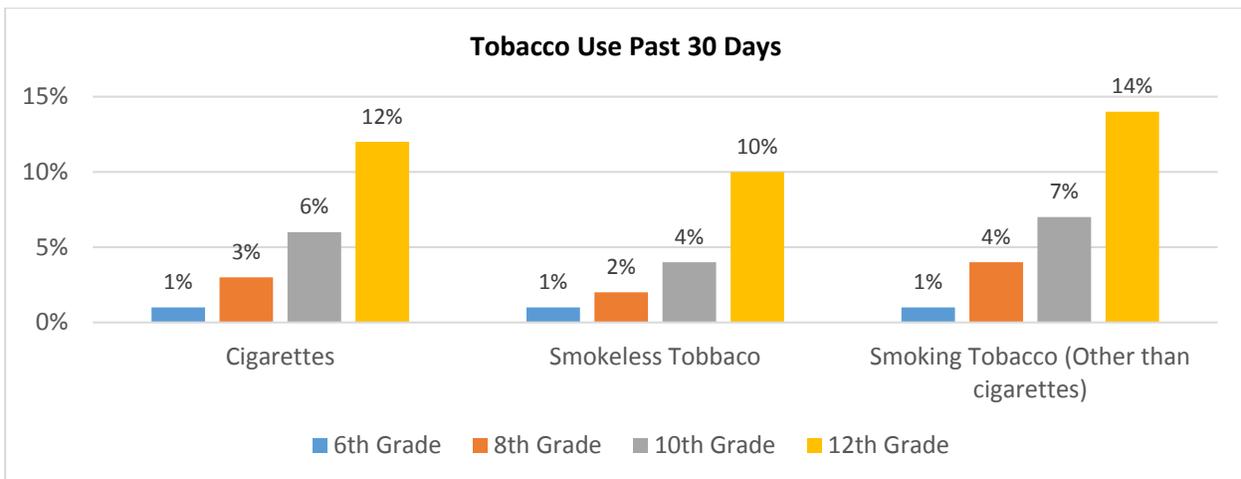
Report Area	Grocery Store Rate	SNAP-Authorized Retailers Rate	WIC-Authorized Food Store Rate
Will County	15.05	5.3	15
Illinois	21.8	7.27	18.4
United States	21.1	8.29	15.6

Data Source: US Department of Agriculture, Food and Nutrition Service, USDA - SNAP Retailer Locator. Additional data analysis by CARES, 2016 and US Department of Agriculture, Economic Research Service, USDA - Food Environment Atlas. 2011 and US Census Bureau, County Business Patterns 2014

Tobacco Use

In 2010-2014, 13.4% of Will County adults were smokers. For the state of Illinois and the U.S, this figure was similar with 16.7% and 16.8% of adults reporting they were current smokers. The percentage of smokers in Will County has declined since 2001 but is still higher than the Healthy People 2020 target of 12%. Tobacco use is also an issue among Will County youth, as shown in Figure 6.15.

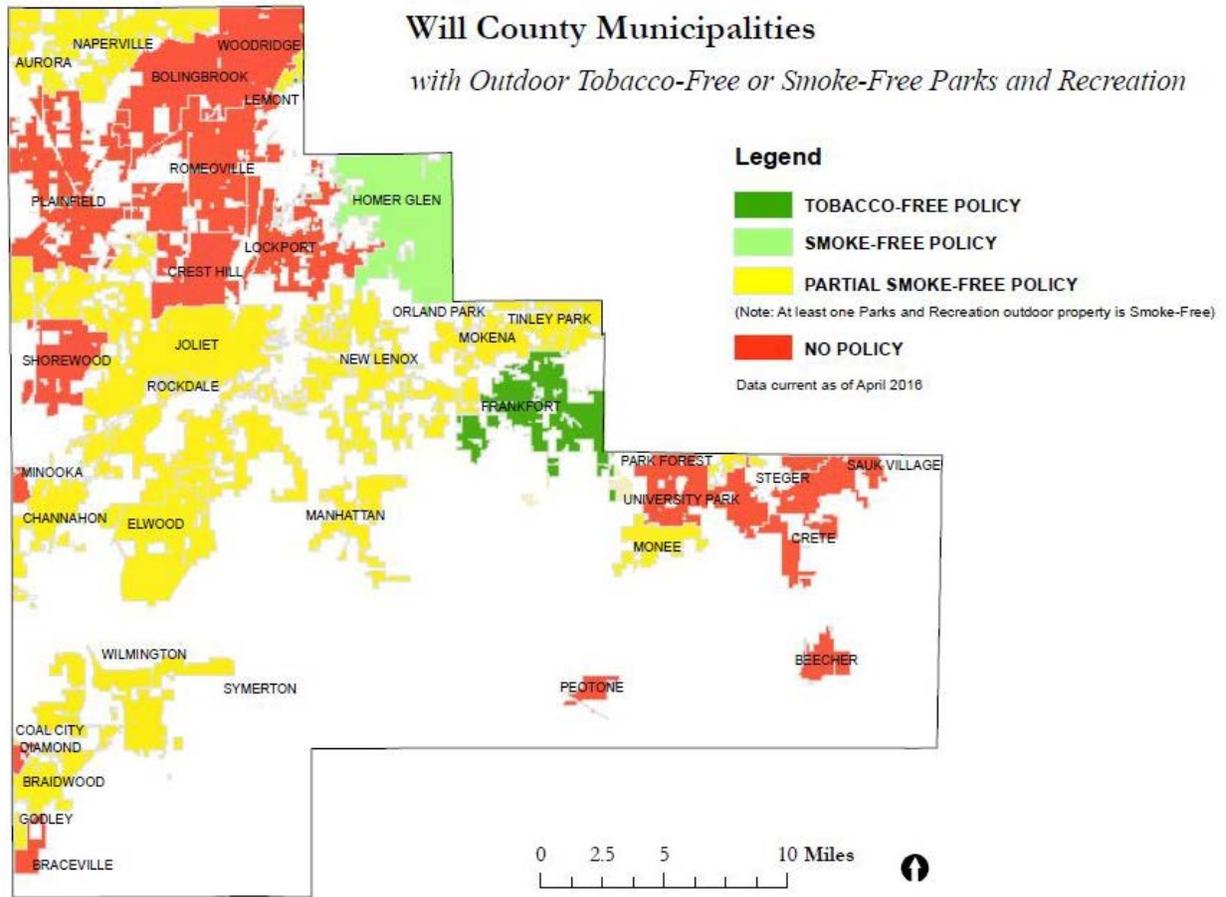
Figure 6.15. Percent of Will County Youth Tobacco Use, Past 30 Days, 2014



Data Source: Illinois Youth Survey, 2014

The Smoke-Free Illinois Act [PA 95-0017] enacted on January 1, 2008, and amended on February 4, 2009, prohibits smoking in all public places and within 15 feet of any entrance, exit, window, and ventilation intake. Tobacco-free outdoor policies have become a growing trend in Will County. As of 2016, 55% of Will County municipalities have a partial or 100% smoke/tobacco-free outdoor policy, as shown in Figure 6.16.

Figure 6.16. Will County Municipalities with Outdoor Tobacco-Free or Smoke-Free Policies, 20146



Data Source: Will County Health Department, Tobacco Control & Prevention Program, 2016

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Community Health Status Assessment Executive Summary

Based on the information gathered through this Community Health Needs Assessment and the guidelines set forth in Healthy People 2020, the following “areas of opportunity” represent the significant health needs of the community.

Areas of Opportunity Identified by the Will County Community Health Status Assessment

Area of Opportunity	Data Identified	Target Population
Access to Health Services	Health professional shortage area designation	(60433)
	Lack of Consistent Source of Primary Care	<ul style="list-style-type: none"> • Males • Non-white • Ages 25-44 • Incomes less than \$35,000
	Lack of Health Insurance	<ul style="list-style-type: none"> • Males • African American or Black, Asian, and other races • Hispanic ethnicity • 60432, 60433, and 60484 zip codes
	More medical/surgical, intensive care beds, obstetric beds, and mental illness beds	All of Will County
	Primary care physician ratio	All of Will County
	Preventable hospital events	Medicare Enrollees
Animal/Vector Borne Disease	Lyme disease incidence	All of Will County
	Rabies incidence	
	West Nile incidence	
Cancer	Second cause of death	All of Will County
	Breast cancer mortality rate	
	Colorectal mortality rate and colonoscopy screenings	
	Mammograms Pap screenings	
Diabetes	Adults who have been told they have diabetes	All of Will County
	Population with diabetes	Medicare
Education	High school diploma	<ul style="list-style-type: none"> • Males • American Indian/Alaskan Native and other races • 60432, 60433, 60435, and 60436 zip codes
	High school four year graduation rate	Bolingbrook, Crete-Monee, Joliet Central, Joliet West, and Reed-Custer high schools

Heart Disease	High blood pressure prevalence and many report not taking prescribed medication	All of Will County
	High total blood cholesterol prevalence	
	Top cause of death and high mortality rate and second cause of hospitalizations	
Injury	Fourth cause of hospitalizations and death	All of Will County
Maternal and Child Health	Fertility rate	All of Will County
	Low birth rate	African American or Black
	Infant mortality rate	African American or Black
Mental Health	8-30 days adult mental health not good	All of Will County
	Mental health professional shortage area designation	60433
	Mental health provider ratio	All of Will County
	Social associations	All of Will County
	Third cause of hospitalizations	All of Will County
	Youth experiencing depression	8 th – 12 th grades
Nutrition, Physical Activity and Weight	Low grocery store and healthy food retailer access and lack of retailers that accept SNAP and WIC	All of Will County and low income
	Low park and recreational facility access	All of Will County
	Obesity	Adult
	Physical inactivity	
Oral Health	Dental health professional shortage area designation	60433
	Dental health provider ratio	All of Will County
Public Transportation	Commuting to work	All of Will County
Substance Abuse	Accidental drug overdoses	All of Will County
	Heavy alcohol consumption	Adult and youth 10 th – 12 th grades
	Liquor store access	All of Will County
	Prescription drug misuse	10 th – 12 th graders
	Substance use assessment need	12 th graders
Tobacco Use	Lung cancer is the leading cause of cancer deaths	All of Will County
	Outdoor tobacco-free areas	
	Tobacco use	Adults and 12 th graders

Community Themes and Strengths Assessment Executive Summary

A community survey open to all Will County residents was conducted from January 26, 2017 – February 27, 2017. As a result, 1,620 responses were elicited from the community, answering questions on their perceptions of their quality of life, social issues, health issues, and access to health care. The complete results can be found in Appendix C.

As the majority of respondents were over the age of 45, women, and identified as White, the survey sample does not represent all Will County residents. However, responses were recorded from every zip code in Will County. The majority of respondents have also lived in Will County for over 15 years.

The survey captured valuable data on the health system in Will County. Most respondents visit their private practice provider for health care, however, many also visit immediate care centers, hospital emergency rooms, and quick clinics. They receive health information from a variety of sources, namely the internet, their doctor, and the newspaper. The majority of respondents also have health insurance through their employer.

The majority of respondents perceive life in Will County as “very good” or “good.” Issues such as quality of the environment, quality of health care, lack of senior services, high rates of crime and violence, high cost of living, and discrimination contribute to lower ratings of the quality of life in Will County.

Health equity questions were asked in this survey to determine any perceived discrimination in Will County due to race, ethnicity, or color. Many people have felt discriminated against at work or on the street/in a public setting.

The following themes were identified by survey respondents as perceived issues that need to be addressed in Will County:

- Discrimination
- High rates of crime and violence
- Illegal and prescription drug abuse
- Increased cost of living
- Lack of affordable housing
- Lack of community
- Lack of good jobs / healthy economy
- Lack of mental health services
- Lack of quality health care
- Lack of services for senior citizens
- Lack of transportation
- Underage and excessive drinking

Forces of Change Assessment Executive Summary

The Forces of Change Assessment (FOCA) elicited broad community input to identify forces of change impacting the local public health system in Will County. Community members reported on current trends, events, and factors that may have implications on the local public health system and quality of life for Will County residents. FOCA participants also addressed threats and opportunities posed by each of the major forces.

An analysis of the forces reported by community members and the MAPP Executive Committee throughout the FOCA process produced seven cross-cutting issues, listed below.

- Behavioral health/substance abuse
- Lack of access to/affordability of healthy foods
- Lack of access to transportation
- Lack of equitable and quality healthcare
- Political climate
- Unemployment/underemployment
- Violence

While many of these forces of change are external influences and often cannot be avoided, community members identified several opportunities to create positive change in Will County regarding the issues at hand. Below are notable opportunities associated with each of the cross-cutting issues.

Force of change	Opportunities identified
Behavioral health/substance abuse	<ul style="list-style-type: none"> • Increase education, advocacy, and prevention efforts to decrease substance abuse trends and stigma around behavioral health • Increase coordination of care between social service agencies, law enforcement, and healthcare agencies
Lack of access to and affordability of healthy foods	<ul style="list-style-type: none"> • Increase advocacy and funding for healthy eating campaigns and policies to support healthy eating • Focus on bringing new healthy businesses, farmers markets, and community gardens to Will County
Lack of access to transportation	<ul style="list-style-type: none"> • Development of a comprehensive transportation plan for Will County • Increase advocacy and funding for enhanced transportation
Lack of equitable and quality healthcare	<ul style="list-style-type: none"> • Improve population health by developing county-wide healthcare programs • Increase advocacy and funding for equitable health care
Political climate	<ul style="list-style-type: none"> • Increase advocacy for health care and prevention efforts • Community collaboration to improve the health and wellness of Will County
Unemployment/underemployment	<ul style="list-style-type: none"> • Increased advocacy for employment support and development of workforce programs • Encourage and attract more businesses to bring jobs to Will County

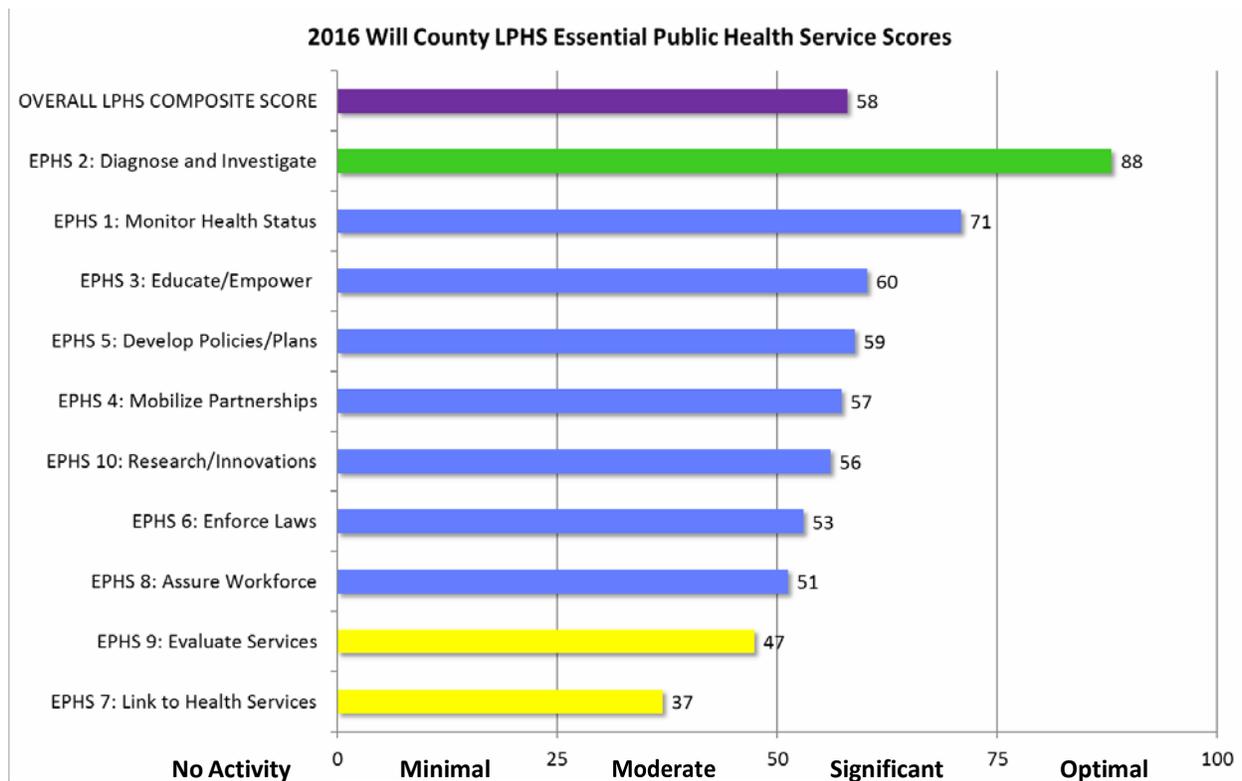
Violence	<ul style="list-style-type: none">• Increase improvement opportunities for education, employment, community service, and family development• Collaboration between law enforcement and community members to develop a comprehensive violence reduction plan
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The issues mentioned above, as well as the opportunities stemming from them, will inform future strategic planning in Will County to improve the health and overall quality of life of Will County residents. The FOCA and other MAPP assessments are key in identifying and prioritizing health issues in Will County.

Local Public Health Status Assessment Executive Summary

Cross-Cutting Themes from the Will County Local Public Health System Assessment (LPHSA)

The average scores by Essential Public Health Service (EPHS) from the December 1, 2016 Will County LPHSA are pictured below. The highest score was EPHS 2, Diagnose and investigate health problems and health hazards in the community. The lowest score was EPHS 7, Link people to needed personal health services and assure the provision of health services. The overall system performance composite score was 58 (significant), without the Health Equity Measures averaged into the score.¹



Throughout the discussions of the 10 Essential Public Health Services, a number of cross-cutting themes emerged in the dialogue across groups. The themes arose as strategic areas to address to improve the functioning, capacity, and effectiveness of the local public health system (LPHS) in Will County. These include:

- Participants identified a need for better **sub-population data** and standardized data related to health equity.
- **Lack of funding and budget cuts** affect the provision of services in every public health domain in the LPHS, from policy implementation to research.

¹ The 2016 Health Equity Measures were not incorporated into the 2016 EPHS composite scores. Please see page 16 for further explanation.

- **Lack of awareness** among the general public affects LPHS performance in all Essential Public Health Services. People are unaware of many public health activities, including assessments, planning, policy, and services.
- More **consumer voices** need to be heard in decision-making, planning, implementation, and evaluation of community initiatives. Participants expressed their desire for an even higher level of engagement from the community.
- Participants noted that Will County organizations do well connecting and networking but capacity is a barrier to adequate service provision, particularly for **substance abuse and mental health services**.
- Will County is diverse and **outlying areas are disconnected** and/or lack providers.
- Advanced technology (such as electronic medical records) is widely used across the LPHS, but **system interoperability** is an issue.
- Participants noted a need for adequate representation from **marginalized populations** in many domains including data collection, leadership roles, and decision-making.
- Participants in several breakout sessions noted **critical partners were missing** from the discussion.
- The LPHS needs **formal, coordinated assessments** in various areas including personal health needs and workforce needs.

Key strengths of the LPHS that were noted throughout the assessment include:

- Participants agreed that the LPHS excels at **collecting and sharing data**, with known limitations.
- The group reported that the MAPP process has **enhanced collaboration** throughout the LPHS by building relationships based on respect and trust, and by facilitating communication between partners and constituents in the community.
- Participants acknowledged a high level of involvement from many partners, especially with the **Will County MAPP Collaborative**. The Collaborative was frequently cited by participants as a leading example and was lauded for its recruitment efforts and the work of its action teams.
- The LPHS demonstrates **diverse partnerships** which serves as a mechanism to bring forth the voices from a variety of perspectives.
- There is awareness and excitement about **health equity** research and planning, which represents readiness to dig into the opportunities for growth.
- Participants across several discussion groups stated that the LPHS performed strongly in **emergency preparedness**. The LPHS has resources available for emergency planning, and participants recognized synergy between emergency planning partners.

