

*McDonough County
Illinois Project for Local
Assessment of Needs
(IPLAN)
2021-2026*

*Approved by IDPH
March 29, 2022*



Letters of Approval



McDonough County Health Department
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January 12, 2022

Illinois Department of Public Health
IPLAN Administrator
IHDDI Project Administrator
525 West Jefferson St.
Springfield, IL 62761-0001

Dear Project Administrator,

The McDonough County Health Department has completed our 2021-2026 IPLAN. We are requesting renewal of certification in accordance with the 77 Illinois Administrative Code 600. Enclosed you will find a letter from the McDonough County Board of Health acknowledging the IPLAN, Strategic Plan/Organizational Capacity, and Community Health Plan have been reviewed and adopted by the Board of Health, along with our plan.

Sincerely,

Kerri Allen, BS, RN
Administrator
McDonough County Health Department



IPLAN 2021 - 2026



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January 12, 2022

To Whom It May Concern:

The McDonough County Board of Health has reviewed the 2021-2026 McDonough County Health Department IPLAN and Strategic Plan/Organizational Capacity. At the January 12, 2022 Board of Health Meeting the board members voted to approve the McDonough County Health Department's 2016-2026 IPLAN and Strategic Plan/Organizational Capacity.

Sincerely,

Andrea Ratermann, RN, MSN
President of the McDonough County Board of Health



IPLAN 2021 - 2026

**McDonough County
Illinois Project for Local Assessment of Needs
(IPLAN)
2021-2026**

McDonough County Health Department

For
Illinois Department of Public Health
Springfield, Illinois
February 22, 2022

- Priorities:**
- 1. Sexual Health**
 - 2. Mental Health**
 - 3. Oral Health**
 - 4. Obesity**
- Focus Area:** **COVID-19**



Acknowledgements

The McDonough County Health Department would like to extend their sincere gratitude to the members of the Community Health Committee for their time and input into this process. A special thank you to the IPLAN project team and all those who made this happen in spite of significant barriers caused by the COVID-19 pandemic.

Suggested Citation:

Ndibeshe, B., Tucker, R., Williams, L., Miller, J., Shockency, J., Trone, S. (2022). McDonough County: Illinois Project for Local Assessment of Needs: 2021-2026. McDonough County Health Department. Macomb, IL



IPLAN 2021 - 2026

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Statement of Purpose

The primary goal of the IPLAN process is to improve the health of the people of McDonough County. The Community Health Needs Assessment is overseen to establish highlighted community health needs as recognized by data analysis and the opinion of community members. Not all issues a community faces can be determined or addressed, but the goal is to work on concerns that highly affect the community. The assessment indicates where additional collaboration between organizations would be beneficial for enhancing the health condition of McDonough County's people.

Community Health Needs Assessment/Process

The Community Health Needs assessment included a community survey and review of the county-level health data. The Community Health Advisory Committee (CHC), established in 2004 and active during the 2005 and 2015 IPLAN process, was reconvened. The CHC met in January and February 2020 to review data and determine McDonough County's 2021-2026 health priorities. A total of fourteen community representatives participated. Four health priorities were established with a focus area concentrating on continued COVID-19 efforts.

Members of the Community Health Advisory Committee report a consensus amongst the committee members that priority objectives from the previous IPLAN had not been met and should continue to be priorities for the new IPLAN. The presentation of data, a survey, sharing



of documents with relevant information, and discussions during the meetings lead to determining health priorities. A PowerPoint provided to committee members via email can be found in Appendix A.

Community Data Summary from IDPH: McDonough County

Demographic & Socioeconomic Characteristics

Population by Age and Gender

Population by Age and Sex for McDonough county, July 1, 2019			
Age Groups	Females	Males	Total
Total	15121	14561	29682
00-04	690	661	1351
05-09	655	749	1404
10-14	698	748	1446
15-19	1552	1313	2865
20-24	2248	2364	4612
25-29	767	944	1711
30-34	793	851	1644
35-39	795	759	1554
40-44	693	675	1368
45-49	710	719	1429
50-54	708	678	1386
55-59	902	846	1748
60-64	907	870	1777
65-69	857	837	1694
70-74	667	620	1287
75-79	510	423	933
80-84	363	253	616
85+	606	251	857

Source - American Community Survey; Source: U.S. Census Bureau, 2015-2019 American Community Survey 5-Year Estimates

<https://data.census.gov/cedsci/table?q=&t=Age%20and%20Sex&g=0500000US17191&y=2019&tid=ACSST5Y2019.S0101&hidePreview=true>



Race/Ethnicity

Population by Race and Ethnicity for McDonough County, July 1, 2019		
Race/Ethnicity	Number	Percent
Total	29682	100
Non-Hispanic White	26255	88.5
Non-Hispanic Black	1719	5.8
Asian and Pacific Islander	749	2.5
American Indian and Alaskan Native	85	0.3
Hispanic	874	2.9

Source - American Community Survey; Source: U.S. Census Bureau, 2015-2019 American Community Survey 5-Year Estimates

<https://data.census.gov/cedsci/table?q=&t=Race%20and%20Ethnicity&g=0500000US17191&y=2019&tid=ACSDT5Y2019.B03002&hidePreview=true>

Median Household Income

Median Household Income in Dollars for Population in McDonough County, 2019, 2015 and 2011	
Year	Median household Income (\$)
2019	44,471
2015	40,314
2011	34,186

Source - American Community Survey; Source: U.S. Census Bureau, 2015-2019 American Community Survey 5-Year Estimates

Population in Poverty

Number and Percent of Population Below Poverty level for McDonough County, 2019 and 2015			
2019	Pop Estimate	Below Poverty Level (No.)	Percent Below Poverty



Total Population	27017	5928	21.9
Under 18 Years	5068	818	16.1
2015	Pop Estimate	Below Poverty Level (No.)	Percent Below Poverty
Total Population	27748	6394	23
Under 18 Years	5125	1019	19.9

Source - American Community Survey; Source: U.S. Census Bureau, 2015-2019 American Community Survey 5-Year Estimates

Population 25+ Who Are Non-High School Graduates

Percent of Population 25+ Who Are Non-High School Graduates in McDonough County, 2019, 2015 and 2011	
Year	% Non-High School Graduates
2019	6.4
2015	7.7
2011	8.4

Source - American Community Survey; Source: U.S. Census Bureau, 2015-2019 American Community Survey 5-Year Estimates

Population Uninsured

Percent of Population Uninsured in McDonough County, 2019 and 2015	
Year	%
2019	4.3
2015	7.5



Source - American Community Survey; Source: U.S. Census Bureau, 2015-2019 American Community Survey 5-Year Estimates

<https://data.census.gov/cedsci/table?q=&t=Health%20Insurance&g=0500000US17119&y=2015&tid=ACSDT1Y2015.B27001&hidePreview=true>

<https://data.census.gov/cedsci/table?q=&t=Health%20Insurance&g=0500000US17119&y=2019&tid=ACSDT1Y2019.B27001&hidePreview=true>

GENERAL HEALTH.

Mortality Rates.

Mortality Rates for McDonough County 2015-2020 by Sex									
	All			Female			Male		
Year	Deaths	Crude Rates	Age Adjusted Rates	Deaths	Crude Rates	Age Adjusted Rates	Deaths	Crude Rates	Age Adjusted Rates
2015	325	1037.2	819.1	180	1136.7	756.7	145	935.7	902.1
2016	320	1032.4	821.1	176	1124.4	736.2	144	938.5	915.3
2017	316	1025.2	805.1	166	1062.3	677.6	150	987.1	958.1
2018	316	1054.9	760.8	159	1040.5	632.2	157	1069.9	956.4
2019	336	1132.0	830.8	173	1144.1	727.4	163	1119.4	996.1
2020	370	1263.0	906.0	194	1299.2	765.3	176	1225.4	1067.0

Crude Rates and Age Adjusted Rates per 100,000 population

Source: Illinois data from IDPH and national data from NCHS Vital Statistics System.

Years of Expectancy.

Life Expectancy at Birth for McDonough County 2015-2020 by Sex						
	All		Female		Male	
Year	e	ME	e	ME	e	ME
2015	78.8	1.6	79.7	2.4	77.7	2.0
2016	78.5	1.5	80.3	2.0	76.8	2.3
2017	76.8	2.3	80.6	2.6	73.2	3.6
2018	79.5	1.5	81.8	2.3	77.1	2.0
2019	77.7	1.8	79.3	2.8	76.0	2.3
2020	76.2	1.9	78.9	2.5	73.5	2.7



Life Expectancy at Age 65 for McDonough County 2015-2020 by Sex						
Year	All		Female		Male	
	e	ME	e	ME	e	ME
2015	18.0	1.1	19.1	1.5	16.8	1.6
2016	17.9	1.2	18.4	1.6	17.3	1.7
2017	19.0	1.3	20.4	1.8	17.3	1.7
2018	19.0	1.1	20.8	1.7	17.0	1.4
2019	18.7	1.1	20.2	1.6	17.1	1.3
2020	18.3	1.1	19.5	1.5	17.0	1.5

e = life expectancy, ME = margin of error

Source: Illinois data from IDPH and national data from NCHS Vital Statistics System.

Years of Potential Life Lost.

Years of Potential Life Lost for McDonough County 2015-2020 by Sex			
Year	All	Female	Male
2015	50.2	51.2	49.3
2016	52.1	38.5	65.5
2017	75.7	52.0	99.1
2018	51.5	42.1	60.9
2019	66.2	58.1	74.3
2020	85.3	63.9	106.8

Years of Potential Life Loss per 1000 population

Source: Illinois data from IDPH and national data from NCHS Vital Statistics System.

Maternal and Child Health.

Life Births.

Live Births in Illinois and McDonough County 2015-2019 by Sex				
Area	Year	All	Female	Male
Illinois	2015	158,101	77,077	81,024
Illinois	2016	154,467	75,523	78,944
Illinois	2017	149,390	73,094	76,296



Illinois	2018	144,828	70,702	74,126
Illinois	2019	140,145	68,354	71,791
McDonough	2015	260	138	122
McDonough	2016	285	131	154
McDonough	2017	280	140	140
McDonough	2018	263	119	144
McDonough	2019	255	110	145

Source: Illinois Vital Records System (IVRS) & Department of Healthcare and Family Services' (HFS) Enterprise Data Warehouse (EDW). IQuery, Illinois Department of Public Health

Infant Deaths and Mortality Rates.

Infant Deaths and Mortality Rates (IMR) for McDonough County 2015-2019		
Year	Deaths	IMR
2015	1	*
2016	0	*
2017	7	*
2018	0	*
2019	2	*

* means that the value is in the interval 1-11 and is suppressed to ensure confidentiality

Source: IDPH More Detailed Infant Mortality Statistics <https://www.dph.illinois.gov/data-statistics/vital-statistics/infant-mortality-statistics/more-statistics>

Low Birthweight.

Number of Low Birth Weight (1500-2499 grams) Live Births (N) for Illinois and McDonough County 2013-2019			
Area	Year	N	%
Illinois	2013	10,575	3.4
Illinois	2014	10,518	3.3



Illinois	2015	10,747	6.8
Illinois	2016	10,620	6.9
Illinois	2017	10,520	7
Illinois	2018	10,242	7.1
Illinois	2019	9,842	7
McDonough	2013	18	3.1
McDonough	2014	*	-
McDonough	2015	16	6.2
McDonough	2016	13	4.6
McDonough	2017	21	7.5
McDonough	2018	14	5.3
McDonough	2019	17	6.7

Number of Very Low Birth Weight (under 1500 grams) Live Births (N) for Illinois and McDonough County 2013-2019

Area	Year	N	%
Illinois	2013	2,320	0.7
Illinois	2014	2,409	0.8
Illinois	2015	2,320	1.5
Illinois	2016	2,368	1.5
Illinois	2017	2,189	1.5
Illinois	2018	2,190	1.5
Illinois	2019	1,993	1.4
McDonough	2013	*	-
McDonough	2014	*	-
McDonough	2015	*	-
McDonough	2016	*	-
McDonough	2017	*	-
McDonough	2018	*	-
McDonough	2019	*	-

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- means that the value is small and is suppressed to ensure confidentiality and meaningful data.



Rate Type: Live Births_2009-2018. Formula: % = ((Number of live births where birthweight is 1500-2499 grams) / (Total live births)) x 100.

Rate Type: Live Births_2009-2018. Formula: % = (Number of live births where birthweight is less than 1500g) / (Total of live births).

Sources: IQuery, Illinois Department of Public Health.

Illinois Vital Records System (IVRS) & Department of Healthcare and Family Services' (HFS) Enterprise Data Warehouse (EDW). IQuery, Illinois Department of Public Health

Mothers Who Smoke During Pregnancy

Babies Born to Mothers Who Smoke During Pregnancy (N) in Illinois and McDonough County 2013-2017 by Sex							
Area	Year	All		Female		Male	
		N	Age Adjusted Rate	N	Age Adjusted Rate	N	Age Adjusted Rate
Illinois	2013	12,975	100	6,250	97.6	6,725	102.4
Illinois	2014	12,869	99.4	6,242	97.2	6,627	101.5
Illinois	2015	12,535	97.4	6,120	95.9	6,415	98.9
Illinois	2016	16,467	129.4	8,021	127.6	8,446	131.1
Illinois	2017	11,457		5,568		5,889	
McDonough	2013	44	115.7	27	133.3	17	105.8
McDonough	2014	57	145	28	144.8	29	144.9
McDonough	2015	54	157.6	29	177.1	25	143.4
McDonough	2016	58	180.4	25	142.3	33	219.6
McDonough	2017	44		27		17	

Age-Adjusted Rate is a statistical process applied to rates of disease, death, injuries or other health outcomes which allows communities with different age structures to be compared. Age-Adjusted Rate is expressed as the number of cases Per 100,000 with confidence level.

Age Adjusted Rate data not provided for 2017 in IQuery

Source: IDPH Vital Statistics. IQuery, Illinois Department of Public Health

Contact: IDPH Illinois Center for Health Statistics : 535 W. Jefferson St.Springfield, IL 62761 217-785-1064
<http://www.idph.state.il.us/health/statshome.htm> IDPH Illinois Center for Health Statistics



Teen Birth Rates

Teen Birth Data 2015-2019			
CountyName	Report_Year	Characteristic	Births
Illinois	2015	Teen < 18	2528
Illinois	2015	Teen 18-19	6278
Illinois	2016	Teen < 18	2093
Illinois	2016	Teen 18-19	5709
Illinois	2017	Teen < 18	1858
Illinois	2017	Teen 18-19	5303
Illinois	2018	Teen < 18	1645
Illinois	2018	Teen 18-19	4813
Illinois	2019	Teen < 18	1474
Illinois	2019	Teen 18-19	4474
McDonough	2015	Teen < 18	3
McDonough	2015	Teen 18-19	12
McDonough	2016	Teen < 18	3
McDonough	2016	Teen 18-19	8
McDonough	2017	Teen < 18	3
McDonough	2017	Teen 18-19	13
McDonough	2018	Teen < 18	4
McDonough	2018	Teen 18-19	12
McDonough	2019	Teen < 18	3
McDonough	2019	Teen 18-19	4

Source: IDPH Birth Statistics (<https://www.dph.illinois.gov/data-statistics/vital-statistics/birth-statistics>)

Infectious Disease

HIV/AIDS

HIV/STD/Sexual Behavior					
ICBRFS - McDonough County		Estimated Population	Weighted Percent	95% Confidence Interval	Number of Respondents
EVER HAD HIV TEST	Yes	5,061	22.20%	16.9%-28.7%	97
	No	17,712	77.80%	71.3%-83.1%	301
TREATED FOR STD PAST YEAR	Yes	*	*	*	*
	No	*	*	*	*



NUMBER OF SEXUAL PARTNERS PAST 12 MONTHS	None	6,929	30.80%	23.1%-39.6%	138
	1 Partner	13,408	59.50%	50.6%-67.8%	230
	2-3 Partners	1,054	4.70%	1.7%-12.3%	13
	4+ Partners	1,135	5.00%	2.5%-10.1%	13

* , means that the value is in the interval 1-11 and is suppressed to ensure confidentiality

Source: Illinois County Behavioral Risk Factor Survey, Round 6 (Collected 2015-2019)

Vaccine Preventable Diseases.

Incidences of Vaccine Preventable Diseases for Illinois and McDonough County 2012-2016							
Area	Year	Hepatitis A (acute)	Hepatitis B (chronic)	Measles	Mumps	Pertussis	Varicella (Chicken Pox)
Illinois	2012	67	1,714	0	32	2,026	898
Illinois	2013	79	1,838	5	26	785	731
Illinois	2014	82	2,062	2	142	764	596
Illinois	2015	57	1,891	17	430	718	443
Illinois	2016	71	1,798	2	333	1,034	469
McDonough	2012	0	3	0	0	2	3
McDonough	2013	0	1	0	0	4	0
McDonough	2014	1	1	2	2	3	1
McDonough	2015	0	0	0	1	0	0
McDonough	2016	1	1	0	0	0	0

Contact: IDPH Communicable Disease Control Section : <http://www.idph.state.il.us/health/infect/> IDPH Communicable Disease Control Section

Source: IDPH Vital Statistics. IQuery, Illinois Department of Public Health

Chronic Disease

Heart Disease Mortality Rates

Deaths by Diseases of the Heart (N) for Illinois and McDonough County 2015-2020 by Sex													
Area	Year	All				Female				Male			
		N	Age Adjusted Rate	LCI	UCI	N	Age Adjusted Rate	LCI	UCI	N	Age Adjusted Rate	LCI	UCI
Illinois	2015	25,653	176.6	174.2	179.1	12,384	152.7	149.4	156.0	13,269	204.3	200.7	207.9



Illinois	2016	25,017	169.3	166.9	171.7	11,954	145.1	141.8	148.4	13,063	197.2	193.7	200.8
Illinois	2017	25,393	166.7	164.2	169.1	12,032	141.5	138.1	144.8	13,361	196.0	192.4	199.6
Illinois	2018	25,747	166.5	164.0	168.9	12,109	140.3	137.0	143.6	13,638	196.7	193.0	200.4
Illinois	2019	25,655	163.1	160.6	165.6	11,856	135.0	131.7	138.3	13,799	195.7	192.0	199.4
Illinois	2020	27,466	171.5			12,566	131.6			14,900	221.1		
McDonough	2015	86	231.4	177.0	297.2	42	199.7	128.0	297.2	44	268.9	191.2	367.5
McDonough	2016	78	210.9	158.9	274.5	44	204.2	129.4	306.3	34	211.5	143.7	300.1
McDonough	2017	74	186.3	135.9	249.3	41	181.6	110.9	280.4	33	189.9	122.9	280.3
McDonough	2018	66	168.9	120.1	230.9	33	150.3	85.9	244.1	33	190.1	121.8	282.8
McDonough	2019	83	218.3	162.6	287.0	40	201.1	127.5	301.8	43	243.2	162.8	349.2
McDonough	2020	88	219.1			46	180.6			42	256.9		

Age-Adjusted Rate is a statistical process applied to rates of disease, death, injuries or other health outcomes which allows communities with different age structures to be compared. Age-Adjusted Rate is expressed as the number of cases Per 100,000 (US 2000 std) with 95% confidence level.

Contact: IDPH Illinois Center for Health Statistics : 535 W. Jefferson St. Springfield, IL 62761 217-785-1064
<http://www.idph.state.il.us/health/statshome.htm> IDPH Illinois Center for Health Statistics

Source: Illinois data from IDPH and national data from NCHS Vital Statistics System. IQuery, Illinois Department of Public Health

Cerebrovascular Disease Mortality Rates

Deaths by Cerebrovascular Diseases (N) for Illinois and McDonough County 2015-2020 by Sex							
Area	Year	All		Female		Male	
		N	Crude Rate	N	Crude Rate	N	Crude Rate
Illinois	2015	5,709	44.4	3,374	51.6	2,335	37.0
Illinois	2016	5,660	44.2	3,348	51.4	2,312	36.8
Illinois	2017	6,021	47.0	3,615	55.5	2,406	38.2
Illinois	2018	5,853	45.9	3,381	52.2	2,472	39.5
Illinois	2019	6,144	48.5	3,551	55.1	2,593	41.6
Illinois	2020	6,762	53.7	3,931	61.4	2,831	45.8
McDonough	2015	14	44.7	*	-	*	-
McDonough	2016	20	64.5	15	95.8	*	-
McDonough	2017	22	71.4	*	-	12	79.0
McDonough	2018	20	66.8	*	-	*	-
McDonough	2019	33	111.2	19	125.7	14	96.2
McDonough	2020	20	68.3	11	73.7	*	-



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- means that the value is small and is suppressed to ensure confidentiality and meaningful data.

Contact: IDPH Illinois Center for Health Statistics : 535 W. Jefferson St. Springfield, IL 62761 217-785-1064

<http://www.idph.state.il.us/health/statshome.htm> IDPH Illinois Center for Health Statistics

Source: Illinois data from IDPH and national data from NCHS Vital Statistics System. IQQuery, Illinois Department of Public Health

Cancer Mortality Rates.

Deaths by Malignant Neoplasms (Cancer) for Illinois and McDonough County 2015-2020 by Sex				
Area	Year	All	Female	Male
Illinois	2015	24,713	11,907	12,806
Illinois	2016	24,396	11,941	12,455
Illinois	2017	24,147	11,769	12,378
Illinois	2018	23,877	11,697	12,180
Illinois	2019	23,875	11,547	12,328
Illinois	2020	24,020	11,592	12,428
McDonough	2015	71	41	30
McDonough	2016	67	35	32
McDonough	2017	71	39	32
McDonough	2018	50	21	29
McDonough	2019	57	30	27
McDonough	2020	67	34	33

Contact: IDPH Illinois Center for Health Statistics : 535 W. Jefferson St. Springfield, IL 62761 217-785-1064

<http://www.idph.state.il.us/health/statshome.htm> IDPH Illinois Center for Health Statistics

Source: Illinois data from IDPH and national data from NCHS Vital Statistics System. IQQuery, Illinois Department of Public Health.

Obesity

ICBRFS - McDonough County		Estimated Population	Weighted Percent	95% Confidence Interval	Number of Respondents
BODY MASS INDEX ¹	Normal or Underweight	8,591	35.70%	28.1%-43.9%	144
	Overweight	8,767	36.40%	28.3%-45.3%	143



	Obese	6,737	28.00%	20.9%-36.4%	125
OVERWEIGHT OR OBESE	No	8,591	35.70%	28.1%-43.9%	144
	Yes	15,504	64.30%	56.1%-71.9%	268

BMI calculated from reported height and weight. BMI Categories: Underweight <18.5, Normal >=18.5 and <25, Overweight >=25 and <30, Obese >=30.

Source: Illinois County Behavioral Risk Factor Survey, Round 6 (Collected 2015-2019)

Tobacco & E-Cigarettes Use

Tobacco & E-Cigarettes					
ICBRFS - McDonough County		Estimated Population	Weighted Percent	95% Confidence Interval	Number of Respondents
CALCULATED SMOKING STATUS ¹	Smoker	4,578	19.50%	13.8%-26.9%	80
	Former Smoker	4,868	20.80%	15.4%-27.5%	106
	Never Smoked	13,976	59.70%	51.5%-67.3%	227
QUIT SMOKING (FORMER SMOKERS) ²	Past Year	*	*	*	*
	More than 1 Year Ago	4,686	96.30%	90.6%-98.6%	101
USE SMOKELESS TOBACCO ³	No	22,415	95.60%	91.1%-97.9%	398
	Yes	1,029	4.40%	2.1%-8.9%	16
CALCULATED E-CIGARETTE STATUS ⁴	Current User	977	4.20%	2.0%-8.5%	14
	Not Currently Using	5,260	22.40%	15.9%-30.6%	63
	Never Used	17,212	73.40%	65.1%-80.3%	337

1. Calculated smoking status from tobacco questions.
2. Asked only if respondent reported smoking 100+ cigarettes and reported frequency is not at all.
3. Smokeless tobacco includes cigarettes, chewing tobacco, snuff, or snus.
4. Calculated e-cigarette status from e-cigarette questions.

Source: Illinois County Behavioral Risk Factor Survey, Round 6 (Collected 2015-2019)



Physical Activities

Physical Activities					
ICBRFS - McDonough County		Estimated Population	Weighted Percent	95% Confidence Interval	Number of Respondents
ANY PHYSICAL ACTIVITY PAST 30 DAYS	Yes	15,899	68.70%	60.6%-75.8%	270
	No	7,248	31.30%	24.2%-39.4%	139
MEETS PHYSICAL ACTIVITY GUIDELINES	Yes	9,464	50.80%	41.6%-59.9%	162
	No	9,179	49.20%	40.1%-58.4%	173

Source: Illinois County Behavioral Risk Factor Survey, Round 6 (Collected 2015-2019)

Environment/Occupation/Injury Control

Deaths by Accidents

Deaths by Accidents (N) for Illinois and McDonough County 2015-2020 by Sex										
Area	Year	All			Female			Male		
		N	Crude Rate	Age Adjusted Rate	N	Crude Rate	Age Adjusted Rate	N	Crude Rate	Age Adjusted Rate
Illinois	2015	4,853	37.7	35.8	1,710	26.1	23.5	3,143	49.8	48.8
Illinois	2016	5,506	43.0	41.0	1,844	28.3	25.5	3,662	58.2	57.0
Illinois	2017	6,017	47.0	44.4	2,017	31.0	27.9	4,000	63.6	61.6
Illinois	2018	6,013	47.2	44.2	2,023	31.2	27.7	3,990	63.7	61.4
Illinois	2019	6,086	48.0	44.5	2,032	31.5	27.6	4,054	65.1	62.2
Illinois	2020	7,159	56.9	53.3	2,276	35.6	31.0	4,883	79.0	76.7
McDonough	2015	12	38.3	32.9	*	-	-	*	-	-
McDonough	2016	13	41.9	43.5	*	-	-	*	-	-
McDonough	2017	15	48.7	48.5	*	-	-	*	-	-
McDonough	2018	15	50.1	42.1	*	-	-	*	-	-
McDonough	2019	19	64.0	58.3	*	-	-	14	96.2	93.9
McDonough	2020	16	54.6	38.1	*	-	-	*	-	-

Occurrences in a specified population period. It is expressed as the number of cases Per 100,000.

* means that the value is in the interval 1-11 and is suppressed to ensure confidentiality



- means that the value is small and is suppressed to ensure confidentiality and meaningful data. Crude Rate is the number of

Source: Illinois data from IDPH and national data from NCHS Vital Statistics System and IQuery, Illinois Department of Public Health.

Homicide Rates

Deaths by Homicide (N) for Illinois and McDonough County 2012,2014,2018 by Sex							
Area	Year	All		Female		Male	
		N	Crude Rate	N	Crude Rate	N	Crude Rate
Illinois	2012	838	6.5	119	1.8	719	11.4
Illinois	2014	790	6.1	113	1.7	677	10.7
Illinois	2018	993	7.8	168	2.6	825	13.2
McDonough	2012	*	-	0	0	*	-
McDonough	2014	*	-	0	0	*	-
McDonough	2018	*	-	*	-	0	0

Crude Rate is the number of occurrences in a specified population period. It is expressed as the number of cases Per 100,000.

* means that the value is in the interval 1-11 and is suppressed to ensure confidentiality

- means that the value is small and is suppressed to ensure confidentiality and meaningful data.

Source: Illinois data from IDPH and national data from NCHS Vital Statistics System and IQuery, Illinois Department of Public Health.

Suicide Rates

Deaths by Suicide for Illinois and McDonough County 2015-2020 by Sex				
Area	Year	All	Female	Male
Illinois	2015	1,362	290	1,072
Illinois	2016	1,415	316	1,099
Illinois	2017	1,473	324	1,149
Illinois	2018	1,488	326	1,162
Illinois	2019	1,439	328	1,111



Illinois	2020	1,358	283	1,075
McDonough	2015	*	*	*
McDonough	2016	*	*	*
McDonough	2017	*	0	*
McDonough	2018	*	*	*
McDonough	2019	*	*	0
McDonough	2020	*	*	*

* means that the value is in the interval 1-11 and is suppressed to ensure confidentiality

Source: Illinois data from IDPH and national data from NCHS Vital Statistics System and IQery, Illinois Department of Public Health.

Blood Lead Levels in Children

Children Tested for Blood Lead						
Year	Illinois/ County/ Delegate Agency	Estimated Population 6 Years of Age and Younger	All Children Tested			
			Total Tested	Capillary and Venous BLL (%)		
			N	< 5 µg/dL	5 - 9 µg/dL	≥ 10 µg/dL
2018	Illinois	1,067,942	237,491	94.8	3.3	0.5
2018	McDonough	1,889	330	93.9	4.2	1.8
2017	Illinois	1,103,797	229,203	96.8	2.4	0.7
2017	McDonough	2,066	387	93.5	4.1	2.3
2016	Illinois	1,103,797	237,253	96.5	2.8	0.8
2016	McDonough	2,066	401	92.0	5.0	3.0
2015	Illinois	1,103,797	256,545	96.0	3.3	0.8
2015	McDonough	2,066	374	89.8	7.0	3.2
2014	Illinois	1,154,225	269,230	93.2	6.0	0.8
2014	McDonough	2,097	399	92.7	5.5	1.8



BLL = Blood Lead Level

Sources:

<https://www.dph.illinois.gov/sites/default/files/publications/lead-surveillance-report-2018.pdf#page=26&zoom=100,46,108>

<https://www.dph.illinois.gov/sites/default/files/publications/lead-surveillance-report-2017-20.pdf>

<https://www.dph.illinois.gov/sites/default/files/publications/lead-surveillance-report-2016.pdf>

<https://www.dph.illinois.gov/sites/default/files/publications/lead-surveillance-report-2015-122116.pdf>

<https://www.dph.illinois.gov/sites/default/files/publications/leadsurveillance-report2014-rev101916-102116.pdf>

Sentinel Events

All Adverse Medical Events (N) in Illinois and McDonough County 2016-2017 by Sex							
Area	Year	All		Female		Male	
		N	Crude Rate	N	Crude Rate	N	Crude Rate
Illinois	2016	145,404	1,135.8	76,423	1,174.0	68,981	1,096.4
Illinois	2017	150,498	1,175.6	78,205	1,201.4	72,293	1,148.9
McDonough	2016	268	864.6	131	836.9	137	892.9
McDonough	2017	337	1,093.3	187	1,196.7	150	987.1

Medical Devices Adverse Events (N) in Illinois and McDonough County 2016-2017 by Sex							
Area	Year	All		Female		Male	
		N	Crude Rate	N	Crude Rate	N	Crude Rate
Illinois	2016	34,507	269.6	16,068	246.8	18,439	293.1
Illinois	2017	36,304	283.6	16,259	249.8	20,045	318.6
McDonough	2016	75	242.0	31	198.1	44	286.8
McDonough	2017	94	305.0	44	281.6	50	329.0

Medication Adverse Events (N) in Illinois and McDonough County 2016-2017 by Sex							
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Area	Year	All		Female		Male	
		N	Crude Rate	N	Crude Rate	N	Crude Rate
Illinois	2016	83,335	651	46,589	715.7	36,746	584
Illinois	2017	89,054	695.6	49,405	759	39,649	630.1
McDonough	2016	114	367.8	67	428.0	47	306.3
McDonough	2017	166	538.6	102	652.7	64	421.2

Complications of Care (N) in Illinois and McDonough County 2016-2017 by Sex							
Area	Year	All		Female		Male	
		N	Crude Rate	N	Crude Rate	N	Crude Rate
Illinois	2016	48,618	379.8	23,803	365.7	24,815	394.4
Illinois	2017	47,110	368	22,810	350.4	24,300	386.2
McDonough	2016	127	409.7	54	345.0	73	475.8
McDonough	2017	152	493.1	75	479.9	77	506.7

* means that the value is in the interval 1-10 and is suppressed to ensure confidentiality

Crude Rate is the number of occurrences in a specified population period. It is expressed as the number of cases .

Contact: IDPH Division of Patient Safety and Quality <http://www.idph.state.il.us/patientsafety/index.htm> IDPH Division of Patient Safety and Quality.

Covid-19

COVID-19 Stats, 2020				
	McDonough		Illinois	
	Number	Crude Rate	Number	Crude Rate
Positive Cases	1,978	6,664.0	963,389	7,602.6
Deaths	35	117.9	16,490	130.1
Fully Vaccinated	0	0	29	0.2

COVID-19 Stats, 1/1/2021 - 8/26/2021				
	McDonough		Illinois	
	Number	Crude Rate	Number	Crude Rate
Positive Cases	1,360	4,540.1	539,674	4,235.7



Deaths	18	60.1	7,385	58.0
Fully Vaccinated	11,934	39,839.8	6,742,785	52,921.6

Crude Rates per 100,000 population

Source: Illinois data from IDPH

<https://dph.illinois.gov/covid19/data/data-portal/cases-tests-and-deaths-day1.html>

<https://dph.illinois.gov/covid19/data/data-portal/vaccine-administration-data.html>

Contact: Illinois Department of Public Health, Office of Policy, Planning, and Statistics, Division of Health Data and Policy. Phone: 217-782-0667. Email: nelsonagbodo@illinois.gov.

Community Health Committee Meetings

January 15, 2020 Meeting

IPLAN 2020-2025 COMMUNITY HEALTH COMMITTEE MEETING MINUTES

JANUARY 15, 2020

Starting time 8:00

Introduction and overview of the meeting as well as introduction of all committee members

Objectives:

- . Defines I PLAN and describe the key components
- . Identify strategies for community engagement and partnership
- . Identify strategies for data compilation and analysis
- . Introduce community survey.
- . Define the components of a community health plan

Community Participation:

- . Community Health advisory committee
- . Identify 3 priority health areas.



IPLAN 2021 - 2026

Local Public Health System

Phase 1: Community Health Needs Assessment

- . Data collection
- . Community Participation

Phase 2: Community Health Plan

- . Description
- . Target population
- . Relationship to Health people 2030
- . Objectives
- . Intervention strategy

Phase3: Implementation

- . Make McDonough County Healthier place to live
- . Annual forum for Stakeholder
- . Public progress update

Timeline/ Important Dates

Main Contacts

Questions/ Suggestions

8:45 end of the meeting. Next meeting on February 19, 2019



McDonough County Health Department

Strategic Planning / I PLAN 2020-2025

Date 04/15/2020

Name	Title	Signature
Tracy Petersen	I/A-Outreach - YMCA	<i>[Signature]</i>
Lisa Ferrance	Inf = Ext. Sr.ctr	<i>[Signature]</i>
John Agboola	WU Public Health.	<i>[Signature]</i>
Cynthia Shuffler	MDA	<i>[Signature]</i>
Ben Thompson	MCHD	<i>[Signature]</i>
SPENCER FAUST	CORRESPONDENT	<i>[Signature]</i>
BENJY NDIBESHE	MCHD	<i>[Signature]</i>

February 19, 2020 Meeting

IPLAN LIAISON MEETING MINUTES

FEBRUARY 19, 2020

The meeting was well attended with a total number of 14 persons many of whom were seated by 8.00AM. Mr. Benjy Ndibeshe called the meeting to order by 8.02 am by describing the sources of data, explaining the paucity of current data and highlighting the main points of the data.



The data of the McDonough county with that of the state of Illinois and that of the USA. The highlights of the presentations included the following:

- The population of the McDonough County consists mainly of young adults between 15 – 34 years.
- The median income of the population is roughly 60% of that of Illinois – significant poverty rate.
- The county has more of native born than foreign born and consists >80% whites.
- Significant health behavior changes in the last decade was adult obesity, (31%) and sexually transmitted infections (762.8%). This surge in STDs was noted in the last 4 years and mainly when the university is in session. Gathering for STDs is easy because they are reported electronically, and the health department also has an STD clinic.
- The level of physical inactivity and alcohol impaired driving death is notable but is still within similar rates as the nation.
- A high level of the birth rate seen in McDonough County consists of teen births and this is worth taking a look into.

Mental health has become a significant issue nationwide and McDonough County is not left out, members of the committee highlighted the need for mental health care practitioners in the county as well as the need to care for children with mental health problems.



Other issues which were mentioned at the meeting included the need to segregate data to know which strata of the county are responsible for the bulk of each problem. For example, the students have access to the REC center for increased activity and should not be responsible for the reported issues with reduced activity and obesity. Also, while STDs may be high in the among the college students, what part of the reported STD proportion is due to the rest of the county. The need to obtain current data became obvious. In the absence of this, we may have to do with existing data.

Members of the Community Health Advisory Committee report a consensus amongst the committee members that priority objectives from the previous IPLAN had not been met and should continue to be priorities for the new IPLAN. The presentation of data, a survey, sharing of documents with relevant information, and discussions during the meetings lead to determining health priorities. A PowerPoint provided to committee members via email can be found in Appendix A.

The meeting ended by 8.45AM.

IPLAN Community Health Advisory Committee Meeting

Date: February 19, 2020



Name	Agency	Phone	Email
Michael Illavsky	Volunteer	309 533 1839	me-illavsky@wiu.edu
John Agboola	Volunteer	917 353 6656	jo.agboola@wiu.edu
Rebecca Sanner	Volunteer	217-322-7095	dannerrrebecca26@gmail.com (with change form)
Josh Crist	SIV Medicine	504-296-8253	joshued.crist@gmail.com
Gaotshijing Her	Genesis Garden	470-955-4937	g-her@wiu.edu
Melissa Calhoun	Genesis Garden	309-333-9321	melissa@genesisgarden.org
Katie McAllister (McAllister)	DOE 26	309-731-4385	erlybzqmc@earthlink.net
Devin Kosicki	Mosaic	309-837-5506	Devin.Kosicki@MosaicInfo.org
Lisa Torrance	U of I Extension	309-333-2501	lfulkers@illinois.edu
Lynette Cale	MCHD	309-837-9951	LCale@mchdept.com
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IPLAN SUMMARY MEETING OF FEBRUARY 19TH

Heart Disease: McDonough County had a 3% higher rate of heart disease than the national average (IDPH, n.d.- d). There are many risk factors associated with coronary heart disease and stroke. Some risk factors such as family history, ethnicity and age, cannot be changed. Other risk factors that can be treated or changed include tobacco exposure, high blood pressure (hypertension), high cholesterol, obesity, physical inactivity, diabetes, unhealthy diet, and harmful use of alcohol (WHF, 2015). Heart disease encompasses a wide range of cardiovascular problems. Heart disease is the leading cause of death in the United States, according to the Centers for Disease Control and Prevention (CDC). In the United States, 1 in every 4 deaths is as a result of a heart disease. That's about 610,000 people who die from the condition each year. Heart disease doesn't discriminate. It's the leading cause of death for several populations, including Caucasians, Hispanics, and African Americans. Almost half of Americans are at risk for heart disease, and the numbers are rising. Heart disease and stroke are, respectively, the first and third leading causes of death and the major causes of disability in Illinois. In 2010, there were 24,868 deaths in Illinois due to heart disease and 5,333 deaths due to stroke. The total number of deaths from all causes during the year was 99,624. The Illinois Department of Public Health and its partner agencies and colleagues around the state are making significant progress in helping people to address their risk factors. McDonough District Hospital



and Prairie Cardiovascular have teamed together to bring specialized heart care to Macomb and the surrounding area. Successful programs are in place to reduce tobacco use; to increase daily physical activity and consumption of fruits, vegetables and low-fat milk; and to change environmental and policy systems that can have an impact on heart disease and stroke.

McDonough County had a 3% higher rate of heart disease than the national average (IDPH, n.d.-d). When comparing Illinois and McDonough County, the five leading causes of death are the same and similar in percentages: heart diseases, cancer, lung diseases, stroke, and accidents (IDPH, n.d.-d).

Cancer: Cancer is a disease caused when cells divide uncontrollably and spread into surrounding tissues. Cancer is caused by changes to DNA. Most cancer-causing DNA changes occur in sections of DNA called genes. These changes are also called genetic changes. After heart disease, it is the second most common cause of death in the United States. 4.5% of McDonough County adults reported being told that they had a type of cancer (non-skin cancer) (CI-2.4%) (BRFS, 2013). 4.7% of McDonough County adults reported being told that they have skin cancer (CI-3%) (BRFS, 2013). A total of 9.2% of McDonough county adults reported being told they have some type of cancer (BRFS, 2013). Cancer in McDonough County, like the nation, is the number two killer of residents. Not counting some kinds of skin cancer, breast cancer in the United States is the most common cancer in women, no matter your race or ethnicity. It is the most common cause of death from cancer among Hispanic women. The second most common cause of death from cancer among white, black, and Asian/Pacific Islander women. The third most common cause of death from cancer among American Indian/Alaska



Native women. All women are at risk for cervical cancer. It occurs most often in women over age 30. Each year, about 12,000 women in the United States get cervical cancer and about 4,000 women die from it. The best defense is early detection by getting a mammogram every year starting at age 40, doing a breast self-exam every month starting at age 20, getting a clinical breast exam every year if you are age 40 or over and every 3 years for women age 20-39. Fulton-McDonough-Schuyler County Breast and Cervical Cancer Consortium is set up so that a client can participate in the Illinois Breast and Cervical Cancer Program (IBCCP) at one county health department and go to a doctor for the services in any of the other counties. IBCCP reduces breast and cervical cancer mortality by providing quality screening and diagnostic services that promote early detection.

Unintentional Injuries: Unintentional injuries are the #1 cause of death among people ages 1 to 44. Motor vehicle crashes and drowning consistently rank as top causes of unintentional death in this age group. According to motor vehicle accident data, McDonough County continues to have a higher rate of accidents in the younger population. Those aged 20-24 represent 40.4% of the accidents from 2007-2012 (IDPH, n.d.). This might be attributable to the higher rate of younger individuals living in McDonough County attending Western Illinois University. In the County seat of Macomb, the crime rates per 100,000 population for 2012 were: violent crime rate of 248.8, rape rate of 46.7, robbery rate of 10.4, aggravated assault rate of 191.8, property crime rate of 2167, burglary rate of 342.2, larceny/theft rate of 1,783.4, and motor vehicle theft rate of 41.5 (UCR, 2012). Males 35-44 are nearly three times more likely to die in a motor vehicle crash than females. 97% to 99% of injuries are caused by our own errors



and mistakes. Of all registered vehicles in the U.S. in 2012, 3% were motorcycles, according to Injury Facts, a statistical report on unintentional injuries and deaths published by National Safety Council (NSC). Of all the vehicle miles traveled, .7% percent were logged by motorcyclists. Yet, motorcyclists accounted for 15% of all traffic fatalities, 18% of all occupant fatalities and 4% of all occupant injuries. About 10 people die every day from unintentional drowning, and two of those are children 14 and younger. According to the Centers for Disease Control and Prevention, for every child who dies from drowning, another five receive emergency care for non-fatal submersion injuries. Prescription drug overdose is the leading cause of poisoning deaths, far surpassing incidents involving chemicals, gases or other substances, according to NSC. Drug poisoning is now the #1 cause of unintentional death in the United States. In 2017, a total of 61,311 people died from drug overdoses – many from prescription opioid medicine. The opioid category that includes morphine, oxycodone and hydrocodone was involved in 12,255 deaths in 2017. The drug category most frequently involved in opioid overdoses and growing at the fastest pace is synthetic opioids other than methadone (fentanyl, fentanyl analogs and tramadol). Fentanyl accounted for 26,211 preventable deaths in 2017, representing a 48% increase over the 17,696 totals in 2016. Heroin accounted for the second highest number of deaths, claiming 14,762 lives in 2017.

Access to Care: Patient access to healthcare sets the baseline for all patient encounters with the healthcare industry. McDonough County ranks 11th out of the 102 counties in Illinois for health outcomes, according to county health rankings. Health outcomes are based on an equal weighting of length and quality of life (CHR, 2014). Lack of adequate coverage makes it



difficult for people to get the health care they need and, when they do get care, burdens them with large medical bills. Uninsured people are more likely to have poor health status. Healthcare organizations must investigate convenient care options and other patient services to drive more patient access to healthcare. McDonough County ranks 29th out of 102 counties for health factors in Illinois (CHR, 2014). With a substantial percentage of the county population living below the poverty line, there is potential difficulty obtaining access to healthcare. Six percent (1,637 people*) of adults in McDonough County avoided doctor visits due to cost (CI 4.9%) (BRFS, 2013). The uninsured rate for non-seniors in 2011, was 13.3% for McDonough County and 14.8% for the state of Illinois (IMPACT, n.d.). Patients living in rural areas such as McDonough Counties are disproportionately more likely to struggle to access their clinician than a patient living in an urban or suburban area. As many as 57 million Americans currently live in a rural area, according to the American Hospital Association. These individuals face a litany of challenges, ranging from where they live to having enough doctors to provide care. The patient-to-primary care physician ratio in McDonough County is 2,090:1 compared to 53.3 physicians per 100,000 in urban areas. Even when a patient has access to a provider and can schedule an appointment, transportation barriers can keep patients from seeing their clinicians. Patients who are physically unable to drive, who face financial barriers, or who otherwise cannot obtain transportation to the clinician office often go without care. Healthcare organizations need to have the right patient-centered mechanisms in place that ensure patients can easily access those care services.



Sexual Health: Sexual health is the ability to embrace and enjoy our sexuality throughout our lives. It is an important part of our physical and emotional health. The phrase “sexual health” encompasses a range of public health and clinical issues related to prevention of sexually transmitted infections. For sexual health to be attained and maintained, the sexual rights of all persons must be respected, protected and fulfilled. According to the CDC, nearly half of the new sexually transmitted diseases diagnosed each year are among youth aged 15-24 years (2014). McDonough County has a large population of adolescents/adults aged 15-24, (31.9%) compared to the Illinois state average (14.1%). This is due to the location of Western Illinois University and Spoon River Collage in the county seat of Macomb (Census, 2012). The instances of reportable sexually transmitted diseases in McDonough County does quite well in a few indicators. The incidence and prevalence of adults living with HIV or AIDS is low compared to the state (IDPH, 2014). The syphilis rates reported in McDonough County have been so low the rate does not have significant data to be reported from 2009 to 2013 (IDPH, 2014). There have been relatively large increases in both gonorrhea and chlamydia rates in McDonough County. The gonorrhea rate in McDonough County is low compared to the state but has seen a large proportionate increase. In 2011, the McDonough County gonorrhea rate was 70.5 (per 100,000) compared to the state rate around 130 (per 100,000) (IDPH, 2014). This low rate is nearly double what it was in 2010, 33.7 (per 100,000) (IDPH, 2014). In McDonough County, there was an increasing trend of chlamydia cases from 2009 to 2012. In 2012, the rate of chlamydia infection in McDonough County surpassed the Illinois chlamydia rate (IDPH, 2014). Chlamydia in McDonough County is by far the most prevalent reportable sexually transmitted disease. There



are monthly spikes of STD testing and reported cases that appear to cycle with the University schedule. Both diseases, chlamydia and gonorrhea, showed a 50 to 100% increase from 2010 to 2011, respectively.

Mental Health: Despite suicide being a virtual epidemic, mental health and suicide are often surrounded by stigma. A study by the World Health Organization found that between 30-80 percent of people with mental health concerns don't seek treatment. Accessibility and access to care and mental health are important indicators of quality of life. 27.2% of the adults in McDonough County reported being limited in any way by physical, mental, or emotional problems (CI 11.8%) (BRFS, 2013). 10.9% of adults in McDonough County reported using special equipment such as a cane, wheelchair, special bed, or special telephone (CI 7.6%) (BRFS, 2013). 17.3% of adults in McDonough County reported depression (CI 7.8%) (BRFS, 2013). Mental illness and disability are present in McDonough County and are potentially cross-cutting for many health outcomes.

Oral Health: The mouth is our primary connection to the world. It is how we take in water and nutrients to sustain life, our primary means of communication, the most visible sign of our mood, and a major part of how we appear to others. Oral health is an essential and integral component of people's overall health throughout life and is much more than just healthy teeth. Oral health care for the medically underserved in McDonough County has been a challenge ever since the close of the Eagle View Medical Center. The closest community dental clinics are in neighboring counties. Conversely, changes in the mouth often are the first signs of problems elsewhere in the body, such as infectious diseases, immune disorders, nutritional



deficiencies, and cancer. Percentage of McDonough County adults whose last dental visit was greater than 2 years ago was 27.6% (CI 8.9%). Those who reported getting their teeth cleaned within the last year was 51.9% (CI 11.3%). Providing oral health education and access to care for the residents in McDonough County is a community-driven priority.

Obesity Prevention: Obesity related priorities have been a focus of public health nationwide. Obesity is a national issue that negatively affects McDonough County residents at a local level. 26.5% of adults in McDonough County are obese according to self-reported heights and weights (CI 10.2%) (BRFS, 2013). This percentage is lower than the reported state and national percentages. 29.4% of Illinois residents are obese according to self-reported data (CI 1.7) (BRFS, 2013). 34.9% of the adult U.S. population is obese (CDC, 2014). Obesity is a major risk for cardiovascular disease and predisposition to diabetes. Experts agree that regular exercise is one of the most effective ways to prevent obesity. Most adults in McDonough County (79.9%) reported participating in activities or exercises such as running, calisthenics, golf, gardening or walking during the past month (CI-8.4%) (BRFS, 2013). When examining obesity statistics for McDonough County, it is important to keep in mind that roughly one third of the population is between the ages of 18-24. This may skew the percentage of adults reporting that they are obese.

Alcohol & Drug Use: Tobacco use, whether smoking or chewing, increases the risk of cardiovascular disease. The risk is especially high if smoking began at a young age, the individual smokes heavily, or is a woman. Passive smoking is also a risk factor for cardiovascular disease. Stopping tobacco use significantly reduces the risk of cardiovascular



disease (WHF, 2015). 38.8 % of adults in McDonough County reported being a current or former smoker (BRFS, 2013). Of that group, 15.5% reported being a current smoker (CI- 8.0), and 23.3% reported being a former smoker (CI 10.7) (BRFS, 2013). 10.3% of adults in McDonough County reported using smokeless tobacco (BRFS, 2013). Of that group, 5.6% of individuals reported using smokeless tobacco every day (CI 12.4), and 4.7% reported using smokeless tobacco some days (CD 5.8%) (BRFS, 2013). 8.5% of adults in McDonough County have been told that they have Chronic Obstructive Pulmonary Disease (COPD) (CI- 7.1%) (BRFS, 2013). Excessive alcohol use has immediate effects that increase the risk of many harmful health conditions. These are most often the result of binge drinking and include: injuries, violence, alcohol poisoning, risky sexual behaviors, and miscarriage, stillbirth or fetal alcohol spectrum disorders (FASDs) among pregnant women (WHF, 2015). In McDonough County, 20.1 % of adults 18-65 reported being at risk for chronic drinking in (BRFS, 2013). Of those reported, males were 10% more likely to be at risk for chronic drinking (BRFS, 2013).

Suicide: Suicide rates have been steadily increasing since hitting a low in 2000, prompting several news sources to describe it as an “epidemic” for its rapid spread across the nation, and even the globe. According to the Center for Disease Control, suicide is defined as “death caused by injuring oneself with the intent to die.” A suicide attempt is defined as “when someone harms themselves with the intent to end their life, but they do not die as a result of their actions.” According to the Center for Disease Control, there were 1,474 deaths by suicide in 2017 in Illinois. According to the Illinois Department of Public Health, there were 32 reported deaths by suicide in McDonough County between 2003 and 2012. More recent data from the



IDPH indicates that 33 people, or just under 11 people per 100,000, died of suicide in McDonough County from 2006 to 2015. According to a survey conducted in 2017 by the Centers for Disease Control and Prevention, suicide was the tenth leading overall cause of death in the United States, claiming the lives of over 47,000 people; suicide was the second leading cause of death for those 10-34 years of age and the fourth leading overall cause of death for those 35-54 years of age. Many individuals do not have the financial means to seek mental health services, or there are not enough services provided in their area in general; this is especially a problem in more rural areas. There are several reasons that individuals do not seek out help for mental health concerns as they would for physical health concerns. Many individuals feel that reaching out will be a sign of weakness. They may be afraid to seek treatment due to their unfamiliarity with the process or because of its negative depictions in media. However, reaching out can be the difference between life and death for an individual contemplating suicide.

References

Illinois Oral Health Plan

www.ifloss.org/OralHealth/

Sexually Transmitted Diseases

www.countyhealthranking.org

Obesity

www.countyhealthranking.org

Mental Health Care

www.countyhealthranking.org

Illinois Oral Health Burden Document



www.idph.state.il.us/HealthWellness/oralhlth/BurdenDocument.pdf

U.S. Centers for Disease Control and Prevention National Oral Health Surveillance System
www.cdc.gov/nohss

Association of State and Territorial Dental Directors
www.astdd.org

Behavioral Risk Factor Surveillance System
www.cdc.gov/BRFSS/

Illinois Behavioral Risk Factor Surveillance System
<http://app.idph.state.il.us/brfss/>

Rural Healthy People 2010
www.srph.tamhsc.edu/centers/rhp2010/publications.htm

Health Priorities and Focus Area

*An overview presentation of the IPLAN health priorities and focus areas can be found in Appendix B.

Health Priority: Sexual Health

Description of Health Problem

According to the World Health Organization's Sexual Health (2021), sexual health can be defined as a sense of bodily, psychological, and communal well-being regarding sexual roles. It is not simply the absence of infection or disability. Sexual health necessitates a clear and concise approach that is considerate to sexuality and sensual connections and the chance of engaging in satisfying and protected erotic situations without intimidation, bias, or brutality.



Sexual health was a concern in McDonough County for the last IPLAN from 2015-2020. In 2021, sexual health in McDonough County remains an issue. Reasons for this health concern may be related to young sexually active college-aged people being in a small rural community and making up a large portion of the population. Recent sexual issues may be associated with the COVID-19 pandemic that we are currently facing. Many people were not able to get out of the house due to restrictions related to COVID-19. There was a stay-at-home order put in place for an extended time. With those restrictions, many people were only leaving their house to work or buy essential living supplies. The perceived risk of COVID exposure through physician offices, clinics, and hospitals may have resulted in a decreased demand for STI testing.

According to Martarelli & Wolff (2020), being bored may have been another reason young people engage in risky sexual behaviors and even try drugs. These behaviors are risk factors for contracting a sexually transmitted disease (Certain Medical Conditions and Risk for Severe COVID-19 Illness, 2021). There are some suggestions that boredom and self-control are two important mental theories for understanding the mental challenges that the COVID-19 pandemic presents to individuals. Researchers considered the effects of boredom and self-control demands provoked by the pandemic on consequent behavior.

According to How Healthy is Your County (2021), the county value for McDonough County is 976.5, which is among one of the highest values in the ranking. Data reflects an increasing trend in STIs for McDonough County since 2016. This increase could be due to the County's youthful population. The health community suggests that youth are the most sexually active members of



our communities. Thus, McDonough County's sexually active youth populations represent the most significant record of sexually transmitted infections.

According to How Healthy is your County (2021), McDonough County has a population of about 16,967, and 17.1% of McDonough County's population are 18 years or younger. Only 17.6% of the County's population is 65 years of age or older. This data suggests that a significant portion of the population is between the active ages of 18 and 65. Additionally, the existence of Western Illinois University within the County puts a majority of the active population (18-65yrs) in the young adult category. Young adults are individuals between the ages of 17 years to 35 years. The average college and university student age is 18-23 years, thus places them in the young adult category. This category is also the most sexually active and the most at risk of sexually transmitted infections.

The McDonough Health Department has agreed that sexual health is a crucial issue for those residing in McDonough County and decided to concentrate on Chlamydia because of its rising rates in the area.

Target Population

- Primary target: ages 15-24
- Secondary target: college-aged students 18-24
- Any sexually active individual



Relationship to Healthy People 2020

- Promote healthy sexual behaviors, strengthen community capacity, and increase access to quality services to prevent sexually transmitted diseases (STDs) and related complications.
- Reduce the number of teens and young adults infected with and community spread of Chlamydia Trachomatis infections.

Risk Factors

Sexual Health

- Having unprotected sex
- Having multiple sexual partners
- History of STDs
- Teen and young adult years
- Alcohol and recreational drug usage

Chlamydia

- Above risks
- Being Female (a woman's anatomy is more vulnerable to the Chlamydia infection)
- Risk is high among teens and young adults

Contributing Factors

- Free or reduced condoms are not easily accessible in McDonough County



- Limited access to anonymous education, information, contraceptives, and family planning
- Limited access to low-cost sexual health services
- No community family planning clinic
- Large college population, which is a high-risk population

Outcome Objectives

- Have a reduction of 6% or more in all reported STD cases in McDonough County in the next five years. Baseline: 349 reported STD cases in 2019 (MCHD 2020 Annual Report).
- Decrease the amount of McDonough County youth and adults infected with Chlamydia by 11% or more in the next five years. Baseline: 282 reported Chlamydia cases in 2019 (MCHD 2020 Annual Report).

Impact Objectives

- By next year, increase free contraceptive availability in McDonough County by at least three locations. Baseline of two locations.
- In two years, increase the number of reportable STI partners/contacts examined and treated by 10% or more at public health clinics and private providers within McDonough County. Baseline to be determined. Fifty-five screenings were performed at the MCHD in 2019 (MCHD 2020 Annual Report).
- Stabilize the increasing number of Chlamydia cases in McDonough County in two years. Baseline: Chlamydia case rate of 925/100,00 (County Health Rankings, 2018).



Intervention Strategy

- Partner counseling and referral services for those who test positive for a sexually transmitted infection.
- Condom availability program in McDonough County for the university population, general population, and high school students.
- The MCHD and CHC advocate for comprehensive risk reduction programs for sexual education (abstinence-plus).
- Behavioral interventions focusing on sexual health.
- Normalized STD testing available (regular working hours so as not to stand out).
- Incorporating Community Day educational sessions for all residents, young and young at heart; share information with focus groups and advisory board leaders of risks and solutions.
- Provide a confidential referral program for care.
- Increase partnerships with schools.
- Behavioral-based interventions delivered to adolescents to promote prevention or reduce the risk of pregnancy and STIs.
- Encourage research and epidemiologic study of McDonough County STI cases.
- Increase awareness of the sexual health status of youth, the implications of early and unprotected sexual activity, and the factors influencing youth sexual decisions.
- Increase coordination of youth health and social service providers to increase understanding of current community resources and better meet youth's needs.



- Sex education plan for the County.
- Expansion of MCHD testing services.
- Produce an informational handout for providers outlining sexual health services in the County.

Community Resources

- McDonough County Health Department
- Condom Vending Machines in Local Bars
- Citizens Bank
- Beu Health Center
- McDonough District Hospital
- Western Illinois University
- Western Illinois University (Nursing, Health Science, and Social Work Departments)
- Spoon River College

Beu Health Center

- Category: AIDS/HIV
- Primary phone: 309-298-1888
- Fax #: 309-298-2188
- Address1: 1 University Cir.
- City: Macomb
- State: IL



- Zip: 61455
- Website: wiu.edu/student_services/beu_health_center/
- Office hours: Mon-Fri 8:00am-4:30pm
- Eligibility: WIU Students
- Area Served: Western Illinois University
- Services Provided: Clinical, Immunization, Laboratory, Pharmacy, Psychiatric, Sexual Health, and X-Ray Services

Family Planning Services of Western Illinois

- Categories: Healthcare, AIDS/HIV, and Pregnancy Assistance
- Primary Phone: 309-343-6162
- Address1: 311 E Main St.
- City: Galesburg
- State: IL
- Zip: 61401
- Website: [facebook.com/FamilyPlanningServiceOfWesternIllinoisInc](https://www.facebook.com/FamilyPlanningServiceOfWesternIllinoisInc)
- Office Hours: M,T,F 8:00am-4:00pm W, Th 9:00am-5:00pm
- Eligibility: All managed care plans are welcome
- Area Served: No Limit



- Services Provided: Sexual health testing and prevention awareness. Women's health/pregnancy services

Pregnancy Resource Center (Rushville)

- Category: Adoption/Foster Care
- Primary Phone: 217-322-2700
- Toll-Free Phone: 800-424-1991
- Address1: 213 W. Washington St.
- City: Rushville
- State: IL
- Zip: 62681
- Website: mypregnancyoptions.com
- Office Hours: Mon-Fri 8:30am-4:30pm
- Eligibility: Women & Men seeking assistance with sexual health and pregnancy
- Area Served: Rushville and surrounding communities
- Services Provided: Free medical, pregnancy, and parenting support services. Pregnancy tests, ultrasounds, STI screening, and more.

Estimated Funding Needs: Unknown

Anticipated Sources of Funding for Interventions



IPLAN 2021 - 2026

- McDonough County Health Department
- Family Planning of Illinois
- Beu Health Center/WIU
- Citizens Bank
- Federal and State Government
- VIBE

In-Kind Funding Sources (Labor, Supplies, Space, etc.)

- Spoon River Collage
- Citizens Bank
- Library
- Genesis Garden
- AmeriCorps

Health Priority: Mental Health

Description of the Health Problem

CDC states that during August 2020–February 2021, the percentage of adults with recent anxiety symptoms or a depressive disorder increased from 36.4% to 41.5%. The rate of those reporting unmet mental health care needs increased from 9.2% to 11.7% during the same time. Increases were most significant among adults aged 18–29 years and those with less than a high school education (CDC). Mental Health is an important topic today. As more people face overwhelming



challenges, we all have many feelings and thoughts swirling around our minds. COVID-19 has created a gap between mental health and the pandemic. This pandemic also threatens to widen existing disparities in access, treatment, and recovery for mental illness and substance use disorders (TFAH). Many people have experienced undiagnosed mental illnesses due to the lack of these services. The pandemic has created surrounding challenges and contributing factors in today's societal world around COVID-19.

The COVID-19 pandemic has had a significant effect on our lives. Many of us are facing stressful and challenging times. Some of those challenges include depression, anxiety, substance abuse, etc., problems that can deplete our daily living lifestyles.

Economic struggles are stressful during times like these and could cause many people to become stressed and anxious due to the surrounding "noise" of COVID-19. Some people are worried about their physical health, but many people face economic issues such as losing their job, not having enough money for bills, or fear of the unknown.

Objective: About half of all people in the United States will be diagnosed with a mental disorder at some point in their lifetime (CDC). Healthy People 2030 focuses on preventing, screening, assessing, and treating mental disorders and behavioral conditions (Healthy People 2030).

Twenty percent of COVID-19 patients developed a mental health issue like depression and anxiety within three months of diagnosis.

Target Population:

- Young adults



- Lower-income families
- Lower-income adults
- Veterans

Secondary target population

- Everyone (The general population can benefit)

Risk Factors

- Stress
- Substance abuse
- Genetics- Bio/Chem imbalance
- Environment and social causes (current or childhood)
- Traumatic experiences
- Physical or emotional neglect
- Illegal drug abuse/dependence
- Isolation
- Victim of physical, emotional, or sexual abuse

Contributing Factors:

- Knowledge of having a potentially deadly virus can strike stress
- Isolation/ quarantine can trigger anxiety, insomnia, suicide, and depression



- Lack of knowledge or incorrect information can conclude negative thoughts about the virus
- Unemployment
- Long wait for psychiatric services
- Costs to individuals with/without insurance
- Sporadic weather patterns in the Midwest
- Adult antisocial behavior
- Depression
- Poverty
- Bullying
- Phobias
- Generalized anxiety disorder
- Witnessing parental violence
- Not using mental health services/Treatment
- Exposure to infections or toxins during pregnancy
- Drug addiction
- Self-medication
- Poor social support systems
- Genetics
- Trauma (physical/emotional psychological)
- Abuse



- Stress
- Non-healthy home environment
- Indirect

Outcome Objective

- Decrease the number of adults who report symptoms of depression by 5% in McDonough County by 2025. Baseline: 17.3% report symptoms of depression (IBRFS, 2013). Report mental health not good – 26.7% for 1-7 days and 14.4% for 8 – 30 days (IBRFS, 2015-2019). 23% have been told they have a depressive disorder (IBRFS, 2015-2019).
- By 2025, decrease the age-adjusted rate for individuals in McDonough County who visit the ER due to mental health issues. Baseline: Age-adjusted rate of 1.2 (IQuery, 2014).

Intervention Strategy: Several confidential Crisis and Call Centers have been implemented and expanded to provide services pertaining to mental health assessments. There are also healthy ways to cope with stress.

- **Take care of your body-** Meditation, eating healthy, exercise regularly, getting plenty of sleep, and avoiding excessive amounts of alcohol, tobacco, etc.
- **Take breaks-** Take breaks from watching, reading, and listening to the news, including those on social media. Limit and disconnect from your phone and televisions for a while. Excessive and constant news stories about coronavirus can trigger upsetting thoughts and can become consuming.



- **Connect with others-** While social distancing measures are in place, connect with others through phone, video chats, social media, and mail. It is important to keep yourself engaged with your loved ones during these times to help cope with isolation and stress.

Community Resources Available

Bridgeway Rehabilitation Services

Child and Family Connections

Illinois Veterans- Substance Abuse Treatment

Macomb Mental Wellness

North Central Behavioral Health Systems (NCBHS)

Estimated funding Needs:

Funding needs are not known at this time.

In-Kind Funding Sources (Labor, Supplies, Space, etc.)

Spoon River College

Citizens Bank

Library

Genesis Garden

AmeriCorps

CHS

Volunteers

Service Organization



Faith-based organizations

Community organizations

Students' fraternity and sororities

Local media

Health Priority: Obesity

Description of the Health Problem

Overweight and obesity are defined as abnormal or excessive fat accumulation that presents a health risk. A body mass index (BMI) over 25 is considered overweight, and over 30 is obese (NCBI). The issue has grown to epidemic proportions, with over 4 million people (about twice the population of New Mexico) dying each year because of being overweight or obese (WHO)

Rates of overweight and obesity continue to grow in adults and children. Data from USA Facts states from 2015 to 2019, the prevalence of obesity in adults increased from 29.8% to 32.4% in the United States (CDC).

Obesity is one side of the double burden of [malnutrition](#), while today, more people are obese than underweight in every region except sub-Saharan Africa and Asia. Once considered a problem only in high-income countries, overweight and obesity are now dramatically rising in low- and middle-income countries, particularly in urban settings. The vast majority of overweight or obese children live in developing countries, where the rate of increase has been more than 30% higher than that of developed countries (WHO).

Obesity prevention strategies must be developed, tested, and implemented across the life course, from pre-conception, through childhood, and into older age.



Obese persons are at a higher risk for severe COVID-19 due to underlying health conditions related to obesity. Many people who experience obesity are also affected by other medical conditions such as diabetes, high blood pressure, hypertension, asthma, etc.

Stay at Home Orders due to COVID-19 made an impact on dietary and physical health.

As leisure increased, obesity increased as well.

Health Priorities

Physical Activity

Unhealthy diet and eating

Environment (lack of sidewalk, workplace sidewalks, community, childcare, school, etc.)

Genetics/family history

High blood pressure

High LDL

Low HDL

Cigarette smoking

High blood glucose (sugar)

Environmental factors

Mental health-lack self-efficacy, motivation



Objective: Reduce overweight and obesity by helping people eat healthily and get physical activity. Baseline: 64.3% self-report being overweight or obese (IBRFS, 2015-2019).

- Reduce the proportion of children and adolescents with obesity. Baseline data needed.
- Primary and secondary obesity prevention efforts are to be continued and enhanced for all without discrimination as a necessary means to increase population resilience to pandemics.

Contributing Factors:

- Sedentary work environments and leisure
- The abundance of convenience/fast foods (24 hr. fast food on Jackson St.)
- Low socioeconomic status of the area
- Lack of consistent nutrition education
- Stress response (comfort food)

Community Resources available

- Fitness centers (SNAP, Free Range Yoga, Recreation Center)
- Walking trails
- Frisbee/disc golf courses
- YMCA
- Youth programs
- Summer camps (Food for Thought)



- Farmer's Market
- Hy-Vee dietitian

MDH Programs-

- Diabetes Education center Rehabilitation Services (Silver Sneakers Program)
- Nutrition Counseling
- Wellness Coaching
- Employee Wellness Challenges
- Corrective actions (Ideas to reduce contributing factors): Provide more healthy food choices at local restaurants
- Encourage local food growers to participate in Farmer's Market (meager attendance the last few years in McDonough County)
- Offer fresh and healthier food options at our schools
- summer camps and food programs
- Better quality of fresh foods at our area grocery stores
- More community support to our Macomb Food Coop
- More bike routes throughout town (have seen improvement here)
- MDH- Focus on more education on weight control with primary healthcare providers (more screenings), increased nutrition education at all levels.
- Citizen's Bank
- Proving employees with relevant and timely facts of health risks



- Providing healthy snacks and water daily at the bank
- Providing a place for employees to walk during breaks
- Encouraging each employee to share the news and provide their families/peers groups with information. Incorporating Community Day educational sessions for all residents' young and youthful; share information with focus groups and advisory board leaders of risks and solutions IL Extension
- Life educator- programming on stress and balancing work/family. Target Population (Who are we impacting in McDonough County?): Under 18, Over 18, All ages.
Estimated funding needed (how much?): \$10,000 community-wide funding (MDH)

Stress and bad eating habits could correlate with COVID-19 and aid in being a stressor during times like these. Monitor your health mentally and physically and consider healthier food options.

Health Priority: Oral Health

Description of the Health Problem

According to the Centers for Disease Control's Oral Health Fast Facts (2020), Oral health is essential to general health and well-being. Oral disease can cause pain and infections that may lead to eating, speaking, and learning problems. It can also affect social interaction and employment potential. The three oral conditions that most affect overall health and quality of life are cavities, severe gum disease, and severe tooth loss. By age 8, over half of children (52%) have had a cavity in their primary (baby) teeth.



Low-income children are twice as likely to have cavities as higher-income children. One in four adults aged 20 to 64 currently has cavities. Drinking fluoridated water and applying dental sealants (in childhood) prevent cavities and save money by avoiding expensive dental care. Tobacco use and diabetes are two risk factors for gum disease. On average, 34 million school hours are lost each year because of unplanned (emergency) dental care, and over \$45 billion in US productivity is lost each year due to untreated dental disease. Medical-dental integration between oral health and chronic disease prevention programs benefits patients and saves money (Oral Health Fast Facts, 2020).

Oral Health remains an issue in McDonough County as it was for years 2015-2020. Oral health is being prioritized because it is a significant issue in the community. When the global pandemic started, many dentist offices had to shut down or prioritize visits based on the seriousness of need. This disruption in services caused many people to go past their check-up times. With many people not being able to go to the dentist for months, oral health has become an even bigger issue for McDonough County and other counties.

Pre-pandemic oral health in this community was not easily accessible and still is. Medicaid recipients are significantly affected by limited access to dental providers. Eagle View Medical Center was closed, leaving many people with no choice of dental care in McDonough County. The McDonough County Health Department will be working to open a Dentist Office that will allow all people to receive needed dental services with just a \$50 payment. Payment installment plans will be implemented for those in need.



According to How Healthy is your County (2021), the ratio of the population to dentists in McDonough County is 3,300:1. The ratio represents the population served by one dentist if the entire county population was distributed equally across all practicing dentists. For example, if a county has a population of 50,000 and has 20 dentists, their ratio would be 2,500:1. The value on the right side of the ratio is always 1 or 0; 1 indicates at least one dentist in the county, and zero means no registered dentists in the county.

Target Population

Primary target:

- Medically underserved:
 - Families with lower economic statuses
 - Uninsured children and adults
 - Underinsured children and adults

Secondary target:

- General population:
 - Youth
 - Adults

Relationship to Healthy People 2020

- Reduce the proportion of children and adolescents who have dental caries experience in their primary or permanent teeth
- Reduce the proportion of children and adolescents with untreated dental decay



- Reduce the proportion of adults with untreated dental decay
- Increase the proportion of children, adolescents, and adults who used the oral health care system in the past year. Target: 49.0 %
- Increase the proportion of low-income children and adolescents who received any preventive dental service during the past year

Risk Factors

- Age
- Genetics
- Unhealthy Diet
- Poor oral hygiene habits
- Smoking and Tobacco Use

Contributing Factors

- Dental provider shortage for underinsured or uninsured county residents
- Insurance coverage limitations
- Disproportionately expensive for residents -especially for low-income residents
- Socioeconomic status
- Poor eating habits
- Geographic isolation- rural areas have fewer dental professionals necessitating travel to receive dental care.
- Inadequate transportation- limited public transportation may hinder residents, particularly low-income residents, from traveling to a dentist.



- Large elderly population- elderly populations in our area are less likely to have dental coverage. They are typically unemployed, and Medicare does not provide dental coverage.

Outcome Objective

- Increase the proportion of uninsured/underinsured children, adolescents, and adults who receive routine, annual, oral health care by 2020 (Baseline data required). 34.1% report having no dental coverage and 15% report not visiting dentist due to cost (IBRFS, 2015-2018).
- By 2026, reduce the proportion of McDonough County children and adolescents with untreated dental decay by 15% or more (Baseline data required).
- By 2026, decrease the percentage of McDonough County adults whose last dental visit was greater than two years ago by 5% or more. Baseline of 33.2% of population reporting greater than two years since last dental visit (IBRFS, 2015 – 2018).
- Increase the number of McDonough County residents who report getting their teeth cleaned within the last year by 10% or more by 2026. Baseline data required. 58.4% of population report seeing dentist in last year (IBRFS, 2015-2018).
- By 2026, establish a known dental clinic in the region to serve low-income, underinsured/uninsured, and Medicaid eligible residents.

Impact Objective



- By 2024, increase the number of primary care providers performing oral health exams for uninsured/underinsured adults by 5% or more. Baseline: 2018 data - Population per provider ratio of 3298:1 (County Health Rankings, 2021).
- By 2024, decrease the percentage of McDonough County adults whose last dental visit was greater than two years ago by 2% or more. Baseline of 33.2% of population reporting greater than two years since last dental visit (IBRFS, 2015 – 2018).
- By 2024, increase the number of McDonough County residents who report getting their teeth cleaned within the last year by 5% or more (Baseline: needed).
- By 2024, increase the percentage of individuals who report visiting a dentist in the last year by 3% or more. Baseline of 58.4% of population report seeing dentist in last year (IBRFS, 2015-2018).
- By 2026, decrease visits to emergency departments for oral health issues by 5% or more (Baseline data required).

Intervention Strategy

McDonough County

- Community dental day
- Continue working towards establishing a dental clinic in the region
- Increase informational access relating to oral health services in the County, especially underserved populations
- Incorporate local media and social media for oral health prevention marketing



- Encouraging local employees to share the news and provide their families/ peers groups with oral health information
- Incorporating Community Day educational sessions with an oral health focus
- Adopt-a-class programs to include oral care

Community Resources Available

- Dr. Pawlias accepts children on Medicaid

Other oral health providers

- Primary care providers
- Childcare
- WIU
- WAVE
- WIU HS Students
- MDH
- Public and Private grant funding
- Local Media
- School districts and early childhood education
- Affordable Care Act funding
- Carl Sandburg College Dental Hygienist program
- YMCA
- Miles of Smiles – school based mobile dentistry



Estimated Funding Needs: Unknown

- Anticipated Sources of Funding for Interventions
- Citizens Bank
 - Funding such as the purchase of toothbrushes and paste for children
- 5 K run/walk to fund dental day (Miles for Smiles)
- MCHD
- State and National funding opportunities

In-Kind Funding Sources (Labor, Supplies, Space, etc.)

Labor

- WIU students
- WAVE
- WIU HS Students
- Carl Sandburg College Dental Hygienist program
- Miles of Smiles – school based mobile dentistry

Space

- Spoon River Outreach Center
- YMCA
- Citizens Bank

General sources

- Spoon River Collage
- Citizens Bank



- Library
- Genesis Garden
- AmeriCorps
- CHC
- Volunteers
- Service organizations
- Faith-based organizations
- Community organizations
- Student fraternities and sororities

Focus Area: COVID-19

Description of the Health Problem

The Centers for Disease Control and Prevention (CDC) released an article presenting their goals to help minorities slow the spread of Covid-19. According to the CDC COVID-19 Global Response (2020), Covid-19 is a communicable disease that is highly contagious and can spread from close contact and surfaces. The CDC plans to grant 2.25 billion dollars to public health departments to employ more health educators to spread awareness and hopefully slow the spread of the virus. The plan is also to promote vaccination, as well. The CDC COVID-19 Global Response (2020) discussed the importance of equal health opportunities for everyone, no matter ethnicity, wealth, or age. Research suggests that minorities are at a higher risk of getting Covid-19 and are dying more frequently due to reasons beyond their control.



Recent research suggests that minorities are contracting Covid-19 at a higher rate due to the lack of resources in their communities. According to the CDC COVID-19 Global Response (2020), many minorities have unhealthy eating habits that may cause chronic illnesses. Chronic illnesses place people at a higher risk of weakened immune systems, which can cause a higher death rate. According to Certain Medical Conditions and Risk for Severe COVID-19 Illness (2021), the risk of contracting Covid-19 may be higher among minorities due to many minorities being essential workers, which means they are still required to work face to face with this crisis happening. Lastly, minorities may experience a more challenging time obtaining testing, treatment, and vaccinations.

A lack of education on the virus itself and the vaccination is causing many people living in lower economic status communities to be hesitant about the Covid-19 vaccination or be tested for the virus. Many people from inner-city communities may be misinformed about the virus and vaccinations, believing that they are not to get vaccinated because they have already tested positive for Covid-19. They do not have enough knowledge about the vaccine. This lack of knowledge may cause them to believe it will harm their bodies in unknown ways. Many refuse to put something in their bodies that they do not quite understand (Coronavirus (COVID-19) frequently asked questions, 2021).

When trying to get tested for the Coronavirus, many minorities do not know where they can get tested for free. Many of them do not have insurance, or all providers do not accept their insurance. Some do not have the time to wait in long lines and may need to take a day off work to do so. When waiting for test results, many do not quarantine because they can't afford to miss



work. Missing work can mean a shortened paycheck which can mean homelessness for some. These factors are why the CDC decided to develop a strategic plan to work with public health officials to ensure that everyone, including the minority population, has equal access to resources in their communities (CDC COVID-19 Global Response, 2020).

Target Population

Global Pandemic. Everyone worldwide is being affected by this disease.

Relationship to Healthy People 2020

Unknown

Risk Factors

According to Certain Medical Conditions and Risk for Severe COVID-19 Illness (2021), people who have high-risk medical conditions and are over the age of 65 are more at risk for COVID-19. Older adults are more likely to get severely ill from COVID-19. More than 80% of COVID-19 deaths occur in people over age 65, and more than 95% of COVID-19 deaths occur in people older than 45.

Contributing Factors

COVID-19, also known as Sars-v, has been shown to spread most commonly through close person-to-person contact, including people who are physically near each other (within 6 feet).



People infected but not showing symptoms (asymptomatic) can also spread the virus to others. Infections occur mainly through exposure to respiratory droplets when people with COVID-19 cough, sneeze, sing, talk, or breathe. These droplets can be inhaled into the nose, mouth, airways, and lungs and cause infection. Some infections can be spread by exposure to the virus in tiny droplets and particles that linger in the air for minutes to hours (CDC COVID-19 Global Response, 2020).

Impact Objective

According to The Impact of COVID-19 on Global Health Goals (2021), COVID-19 had infected over 82 million people and killed more than 1.8 million worldwide.

Prevention

CDC and the FDA have implemented preventive measures for COVID-19.

PPE is one of the most preventable ways of stopping the spread of the virus.

Wearing masks and practicing social distancing of at least six feet will help slow the spread of the virus. Wash hands frequently and sanitize/disinfect mostly touched surfaces (Coronavirus (COVID-19) frequently asked questions, 2021).

Vaccination



Vaccines are now being offered. Pfizer, Moderna, and Johnson and Johnson are the three EUA, and FDA approved vaccines eligible in the United States. Everyone 12 years and older is now eligible to receive vaccination (CDC COVID-19 Global Response, 2020).

Resources Available-

- McDonough County Health Department
- McDonough District Hospital
- HyVee
- Walgreens
- CVS pharmacy
- Western Illinois University
- Local partners
- Pandemic Health Navigators (PHN)

Local Health Departments (LHDs), Centers for Disease Control (CDC), and the Food and Drug Administration (FDA) have partnered up in providing information about COVID-19 cases, outbreaks, deaths, and vaccines. In correlation to Governors and political figures, mitigations have been implemented to help slow the spread of the virus. Mandates and phases have been formatted to keep citizens safe and educated on the progress of reopening.

Intervention Strategy

- Get a COVID-19 vaccine. All three vaccines are safe and effective. Be sure to complete the recommended series.



- Carefully wash your hands with plain soap and water for at least 20 seconds. Wash your hands as often as possible. It is recommended to wash your hands every 30 minutes.
- Wear a face covering, and be sure to cover your mouth and nose, especially when in close contact with others.
- Avoid being in large crowds and practice social distancing. Stay at least 6 feet away from others.

Community Resources Available

- COVID-19 Testing Centers
- COVID-19 Vaccine Clinics
- McDonough District Hospital
- McDonough County Health Department
- CVS
- Walgreens
- Beu Health Center (WIU Students)
- Western Illinois University

Estimated Funding Needs

Unknown

Anticipated Sources of Funding for Interventions

Unknown

In-Kind Funding Sources (Labor, Supplies, Space, etc.)

Unknown



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Appendix A

