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Public Health Releases 2006 Community Health Plan for Champaign-Urbana and Champaign County

Health Assessment Identifies Ten Local Health Priorities

This week the Champaign-Urbana Public Health District and the Champaign County Public Health Department released the 2006 Community Health Plan, a comprehensive health assessment created in collaboration with more than a dozen local civic leaders, academic professionals and health and social service providers. This is the most comprehensive “report card” on county health since the late 1990s.

The report is available on the Health District website (www.cuphd.org) and on the County Board of Health website (www.champaigncountyhealth.org).

The Community Health Plan includes information on community characteristics such as population, social and economic status, health status, quality of life and health behaviors as well as comprehensive data on many other health measures.

Ten issues were identified as the most pressing health needs in the community. These health priorities are:

- **Access to Health Care:** The shortage of Medicaid providers, the ratio of the uninsured to Medicaid patients at the county’s only Federally Qualified Health Center, the low and slow reimbursements for services provided to Medicaid recipients, the undersupply of specialists even for the insured population, the lack of affordable health care for the uninsured, language and transportation barriers to care and the

lack of health providers in schools were all identified as major public health concerns in this assessment.

- **Cancer:** Deaths related to cancer are second only to death by cardiovascular diseases. It is one of the leading causes of death in Champaign County. In 2004 cancer accounted for 15.6% of all deaths in Champaign County. Of all cancers, lung and colon cancer are the top causes of cancer mortality in the county.
- **Cardiovascular Disease:** For decades cardiovascular disease has been the leading cause of death in the United States and in Champaign County. Males and females are equally affected. One-quarter of all deaths are directly attributed to this condition. It is also the leading cause of disability.
- **Domestic Violence, Sexual Abuse, Elder Abuse and Child Abuse and Neglect:** Violence in the home, sexual assault, substance abuse, homicide, suicide, depression and other social and mental health problems are often linked. There is significant overlap between child abuse or neglect and domestic violence. If one form of violence exists in a family, there is a high likelihood that other forms of violence are also present. Children are often the invisible victims of domestic violence.

There is currently no agency or other entity collecting reliable data on domestic violence in Champaign County. The picture for child abuse is clearer: the rate of substantiated child abuse and neglect reports in Champaign County is significantly higher than for the state as a whole, a troubling trend that has persisted for many years.

A disturbing number of domestic violence homicides have occurred in Central Illinois in recent months, another trend that does not appear to be abating.
- **Infant Mortality:** The rate of infant mortality is higher in Champaign County than for the state. The rate is disproportionately higher in the African American population than other groups.
- **Mental Health:** Nearly a third (30.4%) of respondents to a Champaign County behavioral risk factor survey reported that they felt depressed, sad or blue more than two days per month. In a separate question, a larger portion of non-whites (23.4%) than whites (13.5%) reported that they had 8-30 days in the previous month when their mental health was “not good” (in terms of stress, depression and problems with emotions).
- **Obesity:** There is a direct relationship between obesity and a host of diseases including diabetes, hypertension, myocardial infarction and stroke. Childhood obesity is one of the fastest growing concerns for public health authorities worldwide. According to a Behavioral Risk Factor Survey done in Champaign County, 50% of the adults surveyed were in the overweight category and of that number 17% were obese. Diet, lack of exercise and isolated living were the main attributing factors. 55% of all adults surveyed indicated that they do not get the recommended amount of exercise.
- **Oral Health** Often neglected, oral health is included as a priority problem in Champaign. The Surgeon General’s report in 2000 emphasized the need for improvements in oral health via prevention and promotion. In Champaign County, 42% of respondents to a local survey reported that they do not have any dental insurance and 25% said they could not afford to visit a dentist in 2004. There is also a great disparity in care between whites and non-whites.
- **Sexually Transmitted Diseases:** Sexually Transmitted Disease (STD) prevention was included in the priority list for Champaign County because of the higher than average rates of Gonorrhea and Chlamydia infections here. The rates for Gonorrhea (379 per 100,000 in 2004) and Chlamydia (669 per 100,000 in 2004) have been on the rise in previous years and are higher than state rates (175 and 388 per 100,000, respectively, in 2004) and national rates (in 2003, the Centers for Disease Control and Prevention reports a national Gonorrhea rate of 116.2 per 100,000 and for Chlamydia a rate of 304.3 per 100,000). STD’s

are of particular concern due to the direct association of increased risk of HIV.

- **Substance Abuse:** Substance abuse takes an enormous toll on health, society and the economy. Not only did the Health Plan committee rank it as a high priority, but informal surveys conducted of the community also indicated high importance. According to the risk factor survey, 18% of all adults in Champaign are at risk for acute/binge drinking. Smokers account for 20% of the adult population. There is increasing concern over the rise in use of marijuana and cocaine in adolescents, and the methamphetamine abuse problem has drastic public health consequences.

Finalizing the Community Health Plan is not the end of the process, but the beginning. Public Health is already working with other agencies and civic and academic leaders to begin to address these and other health issues of concern.

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