SANGAMON COUNTY COMMUNITY HEALTH NEEDS ASSESSMENT
Analysis of Public Input from Community Forums and Survey
Conducted by UIS Survey Research Office

Final Full Report submitted on December 2, 2014
Project Methodology
The Survey Research Office was asked by Memorial Medical Center, St. John’s Hospital, the Sangamon County Department of Public Health, and SIU School of Medicine’s Office of Community Health and Service to collect, record, and analyze public input for the 2015 Sangamon County Community Health Needs Assessment. The data that is included in this report is from two different but connected sources. First, it includes the survey responses completed by Sangamon County residents. The survey was available to residents online, at public forums, and at various locations throughout the community. In addition, public input from the five community health forums was recorded, transcribed, and coded in order to identify reoccurring themes as well as report on any additional health priority areas not previously identified.

Data Analysis
This report contains information collected from an online survey, a paper survey, and community forums (a copy of the survey is found in the full report). As part of the community health needs assessment, a survey was available (online and printed copies) to members of the public. Copies of the survey were available at specific locations throughout Sangamon County as well as at the community health forums. The link to the online survey was widely distributed via media and the partnering organizations. Overall, 781 individuals completed the survey. Fifty-five of the surveys were completed at the community forums, 137 printed surveys were returned to the SRO, and 589 individuals completed the survey online. The survey was available to Sangamon County community members from September 22 to October 20, 2014.

Quantitative survey results
The survey includes two sections included in the quantitative analysis. First, participants were given nine different health priority areas and asked to rate each of them as either “a high priority,” “a low priority,” or “not a priority at all.” Second, respondents were asked to select the top three priority areas. These responses were analyzed using measures of standard tendency and differences between subgroups were measured using chi-square testing.

Qualitative survey results
The survey includes two open-ended questions included in the analysis. Participants were asked, prior to receiving any other question, “What is the ONE thing you would do to improve the health of Sangamon County residents?” In total, 605 respondents provided usable responses to this open-ended question. After receiving the list of priority areas and ranking the priority areas, respondents were also asked, “Are there any other health needs that we should consider a priority in Sangamon County?” There were 228 usable responses to this open-ended question.

Each open-ended response was evaluated and placed into a category created by researchers from both the CHNA group and the Survey Research Office. Often, respondents responded with an answer that encompassed more than one category. For these responses, we selected the category that stood out the most. When responses contained data that could be placed equally into more than one category, we selected the category that came first in the response.
The open-ended responses to the first question were coded into 15 themes using qualitative coding methodology. Three coders, independently, coded all of the responses into the 15 categories and intercoder reliability was measured by Krippendorf’s Alpha, .775, which is well above the accepted limit. The open-ended responses to the second question were coded into 16 themes using qualitative coding methodology. Three coders, independently, coded all of the responses into the 16 categories and intercoder reliability was measured by Krippendorf’s Alpha, .812, which is well above the accepted limit.

The table below presents the categories for each of the open-ended responses as well as measurement for intercoder reliability.

Table 1. Open-ended response categories

<table>
<thead>
<tr>
<th>What is the ONE thing you would do to improve the health of Sangamon County residents?</th>
<th>Are there any other health needs that we should consider a priority in Sangamon County?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Access to care</td>
<td>Access to care</td>
</tr>
<tr>
<td>Child Abuse</td>
<td>Child Abuse</td>
</tr>
<tr>
<td>Overweight/Obesity</td>
<td>Overweight/Obesity</td>
</tr>
<tr>
<td>Mental Health</td>
<td>Mental Health</td>
</tr>
<tr>
<td>Diabetes</td>
<td>Diabetes</td>
</tr>
<tr>
<td>Food insecurity/Nutrition</td>
<td>Food insecurity/Nutrition</td>
</tr>
<tr>
<td>Oral health/Dental issues</td>
<td>Oral health/Dental issues</td>
</tr>
<tr>
<td>Recreational and exercise opportunities</td>
<td>Recreational and exercise opportunities</td>
</tr>
<tr>
<td>Economic factors (housing, employment)</td>
<td>Economic factors (housing, employment)</td>
</tr>
<tr>
<td>Addictive behaviors (substance abuse, gambling, smoking)</td>
<td>Addictive behaviors (substance abuse, gambling, smoking)</td>
</tr>
<tr>
<td>Maternal/infant/children issues</td>
<td>Maternal/infant/children issues</td>
</tr>
<tr>
<td>Education/trainings/health campaigns</td>
<td>Education/trainings/health campaigns</td>
</tr>
<tr>
<td>Other</td>
<td>Other</td>
</tr>
</tbody>
</table>

| Krippendorf’s Alpha-.775 | Krippendorf’s Alpha-.812 |

Community Forum Transcripts

The five community forums were recorded and then transcribed using a combination of computer-assisted transcription software and human researchers. Transcriptions of all of the community forums are available at the full report. The selections used in the summary were identified using thematic coding from the forum discussions as well as the results from the survey.
Respondent Demographics

Table 2 presents the demographic characteristics of both samples (community forum participants, community survey participants) compared to the most recent population estimates according to the 2012 American Community Survey. As you can see in the table, a higher percentage of females participated in the community survey compared to overall population estimates. Three-fourths of the responses in the community survey are from female respondents while they only represent 52 percent of the Sangamon County population. In addition, we find that a higher percent of those who participated in the survey (forum participants and community participants) reported having advanced degrees compared to population estimates. For example almost three-fourths of individuals who attended the forums and completed a survey reported having an advanced degree as did 45.7 percent of those who completed a survey outside of the forum. This compares to only 11.6 percent of Sangamon County’s population that has an advanced degree (see figure 1).

![Figure 1: Comparing both samples to population](chart.png)
### Table 2. Demographic characteristics of community forum participants and community participants compared to population

<table>
<thead>
<tr>
<th></th>
<th>Sangamon County Population (2012 ACS estimates)</th>
<th>Community forum participants $N=55$</th>
<th>Community participants (online and paper surveys) $N=726$</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Gender</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Female</td>
<td>52.0%</td>
<td>52.9%</td>
<td>75.2%</td>
</tr>
<tr>
<td>Male</td>
<td>48.0%</td>
<td>45.1%</td>
<td>22.3%</td>
</tr>
<tr>
<td><strong>Race</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>White</td>
<td>83.7%</td>
<td>78.0%</td>
<td>83.2%</td>
</tr>
<tr>
<td>African-American</td>
<td>12.0%</td>
<td>16.0%</td>
<td>11.3%</td>
</tr>
<tr>
<td>Asian</td>
<td>1.6%</td>
<td>6.0%</td>
<td>0.9%</td>
</tr>
<tr>
<td>Other</td>
<td>2.7%</td>
<td>0.0%</td>
<td>4.6%</td>
</tr>
<tr>
<td><strong>Ethnicity</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hispanic/Latino(a)</td>
<td>1.8%</td>
<td>2.2%</td>
<td>2.7%</td>
</tr>
<tr>
<td>Non-Hispanic/Latino(a)</td>
<td>98.2%</td>
<td>97.8%</td>
<td>97.3%</td>
</tr>
<tr>
<td><strong>Age</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>18-24 years old</td>
<td>6.0%</td>
<td>8.0%</td>
<td>4.8%</td>
</tr>
<tr>
<td>25-34 years old</td>
<td>12.8%</td>
<td>16.0%</td>
<td>18.4%</td>
</tr>
<tr>
<td>35-44 years old</td>
<td>12.8%</td>
<td>8.0%</td>
<td>18.9%</td>
</tr>
<tr>
<td>45- 54 years old</td>
<td>15.2%</td>
<td>14.0%</td>
<td>26.4%</td>
</tr>
<tr>
<td>55-64 years old</td>
<td>13.3%</td>
<td>26.0%</td>
<td>23.2%</td>
</tr>
<tr>
<td>65 and older</td>
<td>13.7%</td>
<td>28.0%</td>
<td>8.3%</td>
</tr>
<tr>
<td><strong>Education</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Less than high school diploma</td>
<td>8.2%</td>
<td>0.0%</td>
<td>4.0%</td>
</tr>
<tr>
<td>HS diploma</td>
<td>28.6%</td>
<td>4.0%</td>
<td>8.5%</td>
</tr>
<tr>
<td>Some college/trade school</td>
<td>31.6%</td>
<td>6.0%</td>
<td>23.1%</td>
</tr>
<tr>
<td>College degree</td>
<td>20.1%</td>
<td>16.0%</td>
<td>18.7%</td>
</tr>
<tr>
<td>Advanced degree</td>
<td>11.6%</td>
<td>74.0%</td>
<td>45.7%</td>
</tr>
<tr>
<td><strong>Disability Status</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Have a disability</td>
<td>-</td>
<td>6.1%</td>
<td>8.4%</td>
</tr>
<tr>
<td>Do not have a disability</td>
<td>-</td>
<td>93.9%</td>
<td>91.6%</td>
</tr>
<tr>
<td><strong>Income</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Less than $20,000</td>
<td>-</td>
<td>14.0%</td>
<td>10.4%</td>
</tr>
<tr>
<td>$20,000-$40,000</td>
<td>-</td>
<td>12.0%</td>
<td>16.4%</td>
</tr>
<tr>
<td>$40,001-$60,000</td>
<td>-</td>
<td>24.0%</td>
<td>18.4%</td>
</tr>
<tr>
<td>$60,001-$80,000</td>
<td>-</td>
<td>12.0%</td>
<td>13.7%</td>
</tr>
<tr>
<td>$80,001-$100,000</td>
<td>-</td>
<td>8.0%</td>
<td>8.4%</td>
</tr>
<tr>
<td>More than $100,000</td>
<td>-</td>
<td>16.0%</td>
<td>14.0%</td>
</tr>
<tr>
<td>Retired</td>
<td>-</td>
<td>10.0%</td>
<td>3.4%</td>
</tr>
<tr>
<td>Prefer not to say</td>
<td>-</td>
<td>4.0%</td>
<td>15.2%</td>
</tr>
</tbody>
</table>
Results

The first question on the survey instrument and a common theme in the community forums asked Sangamon County residents: What is the ONE thing you would do to improve the health of Sangamon County residents?

Among survey respondents who provided a response to this question, 29.4 percent reported that access to care was the most important thing that could be done to improve the health of Sangamon County residents. This was followed by education/trainings/health campaigns (14.2 percent) and recreational/exercise opportunities (10.4 percent). As you can see, Sangamon County residents are providing preventative solutions as the one thing that could be done to improve the health of the county.

Table 3. Responses to “What is the ONE thing you would do to improve the health of Sangamon County residents?”

<table>
<thead>
<tr>
<th>Priority Area</th>
<th>Percent (n)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Access to care</td>
<td>29.4% (178)</td>
</tr>
<tr>
<td>Education/trainings/ health campaigns</td>
<td>14.2% (86)</td>
</tr>
<tr>
<td>Recreational and exercise opportunities</td>
<td>10.4% (63)</td>
</tr>
<tr>
<td>Food insecurity/ Nutrition</td>
<td>8.3% (50)</td>
</tr>
<tr>
<td>Maternal/infant/children issues</td>
<td>4.3% (26)</td>
</tr>
<tr>
<td>Mental Health</td>
<td>3.6% (22)</td>
</tr>
<tr>
<td>Addictive behaviors (substance abuse, gambling, smoking)</td>
<td>3.1% (19)</td>
</tr>
<tr>
<td>Oral health/Dental issues</td>
<td>2.8% (17)</td>
</tr>
<tr>
<td>Overweight/Obesity</td>
<td>2.8% (17)</td>
</tr>
<tr>
<td>Economic factors (housing, employment)</td>
<td>2.0% (12)</td>
</tr>
<tr>
<td>Diabetes</td>
<td>0.5% (3)</td>
</tr>
<tr>
<td>Child Abuse</td>
<td>0.3% (2)</td>
</tr>
</tbody>
</table>

One of the responsibilities of the core group of the Sangamon County Health Needs Assessment was to collect external data assessing the health of Sangamon County residents. These individuals relied on a variety of different publicly available datasets and selected fourteen different health priority areas to be considered. This list of health priority areas was subsequently limited to nine health priority areas through deliberation with the CHNA Advisory Group. The list of the nine health priority areas was included in the community forums as well as on the survey instrument.

Using these nine pre-selected areas, respondents were asked to rate each of the nine health priority areas as either “a high priority,” “a low priority,” or “not a priority at all.” As seen in table 4 below, the top four health priority areas are mental health, child abuse, overweight/obesity, and access to care. For each of these health priority areas, more than three-fourths of respondents reported these were “high priority areas.”
Table 4. Rating of health priority areas

<table>
<thead>
<tr>
<th></th>
<th>High priority</th>
<th>Low priority</th>
<th>Not a priority at all</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mental Health</td>
<td>86.9%</td>
<td>10.5%</td>
<td>2.7%</td>
</tr>
<tr>
<td>Child Abuse</td>
<td>83.4%</td>
<td>13.5%</td>
<td>3.1%</td>
</tr>
<tr>
<td>Overweight/Obesity</td>
<td>78.8%</td>
<td>18.2%</td>
<td>3.1%</td>
</tr>
<tr>
<td>Access to Care</td>
<td>76.2%</td>
<td>19.6%</td>
<td>4.2%</td>
</tr>
<tr>
<td>Heart Disease</td>
<td>71.9%</td>
<td>25.6%</td>
<td>2.6%</td>
</tr>
<tr>
<td>Diabetes</td>
<td>71.6%</td>
<td>25.6%</td>
<td>2.7%</td>
</tr>
<tr>
<td>Dental Care</td>
<td>62.1%</td>
<td>34.3%</td>
<td>3.6%</td>
</tr>
<tr>
<td>Food Insecurity</td>
<td>58.4%</td>
<td>31.9%</td>
<td>9.7%</td>
</tr>
<tr>
<td>Asthma</td>
<td>46.3%</td>
<td>48.5%</td>
<td>5.2%</td>
</tr>
</tbody>
</table>

When we examine whether demographic groups rated health priority areas differently, we only find a few significant differences (chi-squares in which significance is p<.05).

First, women are more likely than men to report that mental health and child abuse are a high priority. Eighty-six percent of women compared to 73.3 percent of men report that child abuse is a high priority. In addition, 91.3 percent of women compared to 74.8 percent of men report that mental health is a high priority. Overall, women rate the majority of all of the health priorities higher than the male respondents (the only exception is heart disease).

In addition, African-American respondents are more likely to report that asthma, child abuse, and heart disease are high priorities than either White respondents or respondents who do not identify as either White or African-American (see figure 2 below).
After determining the priority level of each of the health needs, survey respondents were asked to identify the top three health priorities in the area. Table 5 presents the percentage of individuals who rated each of the health priorities as the top priority as well as the percentage of individuals who rated it in the top three priorities. The top four priorities are the same ones presented in the section above: access to care, overweight/obesity, mental health, and child abuse.

**Table 5. The top health priority in the area**

<table>
<thead>
<tr>
<th>Health Priority</th>
<th>Top Priority</th>
<th>One of the top three priorities</th>
</tr>
</thead>
<tbody>
<tr>
<td>Access to Care</td>
<td>24.2%</td>
<td>43.4%</td>
</tr>
<tr>
<td>Overweight/Obesity</td>
<td>19.0%</td>
<td>44.3%</td>
</tr>
<tr>
<td>Mental Health</td>
<td>14.5%</td>
<td>49.9%</td>
</tr>
<tr>
<td>Child Abuse</td>
<td>10.0%</td>
<td>34.4%</td>
</tr>
<tr>
<td>Heart Disease</td>
<td>6.4%</td>
<td>22.9%</td>
</tr>
<tr>
<td>Food Insecurity</td>
<td>4.9%</td>
<td>22.2%</td>
</tr>
<tr>
<td>Dental Care</td>
<td>3.7%</td>
<td>16.9%</td>
</tr>
<tr>
<td>Diabetes</td>
<td>2.4%</td>
<td>19.0%</td>
</tr>
<tr>
<td>Asthma</td>
<td>0.6%</td>
<td>4.9%</td>
</tr>
</tbody>
</table>

The second open-ended question asked respondents to list any other health needs that should be considered a priority in Sangamon County. As previously mentioned, there were 228 usable responses to this open-ended question. As seen in table 6, addictive behaviors dealing with substance abuse, gambling, and tobacco use was the response provided by the largest percent of Sangamon County residents followed by Cancer/Disease/Prevention (13.7%) and Access to care (13.7%).

**Table 6. Responses to “Are there any other health needs that should be considered a priority in Sangamon County?”**

<table>
<thead>
<tr>
<th>Health Priority</th>
<th>Percent (n)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Addictive behaviors (substance abuse, gambling, smoking)</td>
<td>17.6% (40)</td>
</tr>
<tr>
<td>Cancer/Disease/Prevention</td>
<td>13.7% (31)</td>
</tr>
<tr>
<td>Access to care</td>
<td>13.7% (31)</td>
</tr>
<tr>
<td>Maternal/infant/children issues</td>
<td>8.8% (20)</td>
</tr>
<tr>
<td>Food insecurity/Nutrition</td>
<td>6.6% (15)</td>
</tr>
<tr>
<td>Mental Health</td>
<td>5.3% (12)</td>
</tr>
<tr>
<td>Seniors/ Individuals with Disabilities</td>
<td>5.3% (12)</td>
</tr>
<tr>
<td>Recreational and exercise opportunities</td>
<td>4.0% (9)</td>
</tr>
<tr>
<td>Education/trainings/ health campaigns</td>
<td>2.6% (6)</td>
</tr>
<tr>
<td>Economic factors (housing, employment)</td>
<td>1.3% (3)</td>
</tr>
<tr>
<td>Asthma</td>
<td>0.9% (2)</td>
</tr>
<tr>
<td>Overweight/Obesity</td>
<td>0.9% (2)</td>
</tr>
<tr>
<td>Child Abuse</td>
<td>0.9% (2)</td>
</tr>
<tr>
<td>Oral health/ Dental issues</td>
<td>0.4% (1)</td>
</tr>
<tr>
<td>Diabetes</td>
<td>0.0% (0)</td>
</tr>
</tbody>
</table>
Respondents were also asked to report whether they thought any of the nine priority areas identified by the advisory group were not a health priority in Sangamon County. Overall, 147 individuals reported that they did not think food insecurity was a priority area and 115 individuals reported that asthma was not a priority area. In addition, only five percent of the sample (39 individuals) reported thinking that mental health was not a priority area in the area (see Table 7).

**Table 7. Percent of respondents who reported that the health issue is not a priority area**

<table>
<thead>
<tr>
<th>Health Issue</th>
<th>Not a health priority</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mental Health</td>
<td>5.0%</td>
</tr>
<tr>
<td>Heart Disease</td>
<td>5.1%</td>
</tr>
<tr>
<td>Child Abuse</td>
<td>6.4%</td>
</tr>
<tr>
<td>Diabetes</td>
<td>6.5%</td>
</tr>
<tr>
<td>Overweight/Obesity</td>
<td>9.2%</td>
</tr>
<tr>
<td>Dental Care</td>
<td>10.6%</td>
</tr>
<tr>
<td>Access to Care</td>
<td>11.5%</td>
</tr>
<tr>
<td>Asthma</td>
<td>14.7%</td>
</tr>
<tr>
<td>Food Insecurity</td>
<td>18.8%</td>
</tr>
</tbody>
</table>

**Differences by Zip codes**

In addition to examining how different demographic groups rank the community health needs, we also examined any differences by regions of Sangamon County. Of the 635 individuals who provided their zip codes, only seven zip codes included enough responses (at least 30) to report any significant findings (see Table 8). The total number of responses included in this analysis is 496.

**Table 8. Number of responses by zip code**

<table>
<thead>
<tr>
<th>Zip code</th>
<th>Number of responses</th>
</tr>
</thead>
<tbody>
<tr>
<td>62561</td>
<td>30</td>
</tr>
<tr>
<td>62629</td>
<td>46</td>
</tr>
<tr>
<td>62702</td>
<td>93</td>
</tr>
<tr>
<td>62703</td>
<td>75</td>
</tr>
<tr>
<td>62704</td>
<td>174</td>
</tr>
<tr>
<td>62711</td>
<td>43</td>
</tr>
<tr>
<td>62712</td>
<td>35</td>
</tr>
</tbody>
</table>

When we examine differences in the ranking of health priorities (high priority, low priority, not a priority at all) across zip codes, we find two statistically significant differences. First, a higher percentage of individuals living in 62703 report that food insecurity is a high priority than in any other region. Of the 62703 respondents, 75.7 percent report that food insecurity is a “high priority,” compared to 61.7 percent of all respondents in the zip codes included in the analysis. Second, while child abuse ranks high in all zip codes, it is ranked less positively among respondents in 62703 and 62711, 77.5 percent and 72.1 percent, respectively, rank it as a high priority. Almost ninety percent of respondents living in 62629 rank it as a high priority.
Table 9 presents the top three health priority areas by zip code.

**Table 9. Health priority areas by zip codes**

<table>
<thead>
<tr>
<th>Zip code</th>
<th>Top priority area</th>
<th>Second priority area</th>
<th>Third priority area</th>
</tr>
</thead>
<tbody>
<tr>
<td>62561</td>
<td>Mental Health</td>
<td>Heart Disease</td>
<td>Child Abuse</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Heart Disease (tie)</td>
</tr>
<tr>
<td>62629</td>
<td>Mental Health</td>
<td>Overweight/Obesity</td>
<td>Access to Care</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Child Abuse (tie)</td>
</tr>
<tr>
<td>62702</td>
<td>Access to Care</td>
<td>Overweight/Obesity</td>
<td>Mental Health</td>
</tr>
<tr>
<td>62703</td>
<td>Access to Care</td>
<td>Mental Health</td>
<td>Overweight/Obesity</td>
</tr>
<tr>
<td></td>
<td></td>
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<td>Child Abuse (tie)</td>
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Results from Community Forums

Overall, approximately 100 individuals participated in one of the five community forums held in various locations throughout Sangamon County. The full transcripts of these forums are found at the end of this report. However, this section provides examples from the community forums on each of the nine health priority areas identified by the CHNA Advisory Committee.

Access to Care

- I've grown up in Riverton my whole life so I mean you're seeing, you know the people that I've grown up with that were, you know people that were through school through the village at work here they are getting to point where they are getting hard to get around. They still love their community they don't want to move to a nursing home they want to stay home as long as they can. There just doesn't seem to be a lot of assistance locally where we could afford to do it (participant, Riverton Village Hall, October 1).

- There was one that was left off and it is the one that most of us do like talk about a whole lot but I want to use the word and its racism. When I use that word I use it in the context specifically of racism that exists at an institutional systemic level not individual prejudice, but the kind that that is embedded in all of our organizations. It’s of our history and I think when we think of the health of the community and racism is a better topic to look at because there are ways to address that at an institutional level that in turn set the stage for creating a really totally healthy community (participant, Union Baptist Church, October 2).

- One of the issues that you brought up was access to health care, and my concern is transportation for those who may be the elderly, disabled the low-income individuals. We have to major hospitals here will a major clinic and some other facilities but if people can't get to those facilities to be taken care of, like you said it would be of no use. So my concern is what are the hospitals, what are the clinics doing, or is there something that can be done to provide transportation on a need bases to those individuals may need transportation (participant, Union Baptist Church, October 2).

Asthma

- In response to what you were saying about the increase in asthma and allergies and all those other things you're correct. I think there is an increase in all of those things. Part of the problem is that there is lack of education of the parents there caring for those children. You notice if you’re living in poverty sometimes I don’t think that you have been educated on how to care for those children. In access to care we have all these providers here in Springfield but we have kids that don't have a provider that they routinely go to, to take care of their asthma, so they're going to the emergency room to get their asthma needs met and they are not getting on preventative medications. So I think education as far as many of the diseases and illnesses, diet nutrition, all of those things is the key that were going to have to educate the general population about a lot of those things in order to make an impact on them. That includes mental health, you know there's just not enough education for people to realize what resources are out there or how to access those resources (participant, Lanphier High School, October 9).

- There's also studies that show inequality makes people sick and that's our system that were in. I
think of the asthma that seemed at least I don't have the statistics for, but from what I gather from teachers, it's increased greatly the talk about how many inhalers they have at school how many EpiPen's because everybody is allergic to something and so it's a systemic problem of what we are putting into the soil, what we are putting into the air, what we are putting into our foods, and that I individually can't handle take care of the but together we have to work on that is a system (participant, Lanphier High School, October 9).

- Counties and different towns like Auburn are you guys looking at other states that do so well and say hey what you guys are doing to make this work. There are chronic health problems but very few acute health problems when they get to an acute stage like asthma it leads to hospitalization that so much of these are our current problems that are going to affect us even more as we get older if we get older (participant, Auburn Community Center, October 8).

**Child Abuse**

- There was a study done on 17,000 women who were seeking medical care for almost all the things that were on here; heart disease, alcoholism, cancer, variety of illnesses and what they had in common they discovered many of them were also they are to be in a weight loss program. There was a high incidence of obesity. One of the common denominators was child abuse. Out of the 17,000 women and they started learning from them about sexual abuse. These people had a variety of health issues later in life. They'd never disclosed they never talk to anybody about these issues before and till they went into this study they were not aware of the long-lasting issues that they would then encounter as a result of the abuse. And we also know that obesity is also linked to child abuse (participant, Lanphier High School, October 9).

**Dental Care**

- There are maybe 10 dentists that they could choose from and 10 is probably a big number. Where they can go and get tooth cleaning and dental examinations and filling and they can get their tooth pulled, that’s where they can Medicaid now. People who don't have a dental insurance cannot afford it because they are so expensive and there's not many dentists out there who provide care sliding scale fee but there’s two of us. That the problem there is nobody in the county that is willing to accept Medicaid patients if they do it's very few numbers and they just want to do their discounted rate. So even though we have lots and lots of dentist there's just not access for people that don't have dental insurance (participant, Auburn Community Center, October 8).

- Now dental is covered for people with Medicaid and there are people just don't know this and even something like having problems with your mouth can cause other health problems in the body. So people need this information out there not just that the affordable care act is there, but what it covers. Like what you can get now (participant, Union Baptist Church, October 2).

**Diabetes**

- I am very interested in health fitness and nutrition in my own life because of my mother who died five years ago almost 6 years ago and at the time she suffered from diabetes, obesity, heart disease including high blood pressure, cholesterol of blood clots, a host of health conditions that
I believe are all tied to what we put into our bodies (participant, Lanphier High School, October 9).

- I am a diabetes educator, and the struggle with some of my patients/clients. It is sometimes a pain to find good care...some of the services are not covered, so they can see a dietician. If they have Medicare, Medicare doesn’t cover someone to see a dietician. That’s crazy, unless they have diabetes so you have to, get bad enough to get the disease, so where is our, our proactive prevention? There is 86 or 89 million people with pre-diabetes, and we can, we can reverse that. But we need that action and teaching people to eat healthier to be active, and a lot of people, sometimes there is, mental health to tag on to your first comment. They are so depressed or so down, that they need to get pass that to be able to take care of themselves, so there is a lot of work to be done (participant, Washington Park Botanical Gardens, October 6).

**Food Insecurity**

- The schools are throwing away more food than may ever been thrown away before. For many reasons children aren’t eating it or aren’t eating all of it. So, providing a nutritious meal and having it there for them is definitely one step that needs to be taken. But, we have to change the culture of the students’ acceptance and their liking towards different types of foods. That goes beyond the school, you can’t teach just in school. If they don’t eat here, they go home after school and grab a bag of food and off they go. We’re not accomplishing goals by simply regulating the food you have to eat your lunch here. It’s just one component of what has to happen. It is more about culture I think (participant, Lanphier High School, October 9).

- You know? I think that if we can get students involved in producing healthy foods and becoming more cognizant of farming and you know this farm to table and whole food movement, I really try to encourage our school to start a community garden and when students are made a part of that whole process and they plant, they hoe, they weed those gardens, I think they become more open to trying new things. But I mean were 100% correct, it’s got a start at home and I know my son for instance just when he was a young boy we couldn’t get him to eat anything green. He went off to college in Colorado and I’m just astounded at the things he will eat now, but it’s been a process and I think kids have to get that modeling from their parents and I just think gemstones starting this farmers markets over on in the parking lot of Penny’s was a wonderful thing and if we could encourage the members of our city to go there, if we could have more cooking demonstrations and tasting demonstrations so that people can get exposed to this kind of thing it’s a good thing. But it is definitely an uphill battle. I mean there’s just no two ways about it (participant, Lanphier High School, October 9).

**Heart Disease**

- The high level of chronic stress levels that people are under a lot in their jobs because I think that contributes to a lot of the diabetes, heart failure, heart issues, heart disease hypertension but if that’s over chronic long period of time it is terrific damage(participant, Auburn Community Center, October 8).

- We have so many diet-related diseases with obesity, and heart disease, and many others, and I think there is a really big opportunity in so many ways, there are so many exciting things that
are happening all over the country of ways that communities are growing more of their own food, increasing access to healthy food, I mean, up in Wisconsin, they have farmers, vending machines where you have salads, you know, farm fresh salads available in vending machines so you have healthy fast food, instead of, you know, candy bars and potato chips and sodas, right? So I think that, there is so many opportunities, we are working a lot on, looking how we can increase community gardening (participant, Washington Park Botanical Gardens, October 6).

Mental Health

- One of the concerns that I think, is, not, adequately addressed by the whole country, is, is the issues of mental health, and primarily because, there are mental health services, but, as a society, we need to be more, aware of the magnitude of what these problems are when we hear about, people being shot and college campuses being shot at army posts and whatever, it doesn’t surprise me that much because, there is a lot more mental health problems that are out there, but the public doesn’t know about them, and I would really like to see something more to be done, including trying to make it more acceptable for people to come and, admit that they have mental health problems (participant, Washington Park Botanical Gardens, October 6).

- Our mental wellness because it seems like going off with what [redacted] was just talking about looking at these health needs you know access to care, dental care, food insecurity leads to a lot of stress in our families. That’s you know it in and it were 81st in the whole state so it’s all levels in our community, right? It’s not just the kids and it’s everybody. So I’m just wondering about our mental state you know how hopeful we are or how much stress we have. You had on there about affordable housing and when you’re spending 50% of your income and more on your house, no matter what income you are, you put a lot of stress on yourself. So, I just thought that was a big need for our children and for our adults is looking at that mental wellness and your mental ability and you know. Not mental health but how we determine what mental health means. Your well-being and how you feel about your life. That’s what I was thinking about (participant, Lanphier High School, October 9).

Overweight/Obesity

- I’m struck as I said in this high school by the signs that I see on the walls, Pepsi, I look back at the vending machines and I see high calorie, high sugar snacks, I see Mountain Dew and I think this is a real problem in our schools and I’m not particularly criticizing Lanphier high school. It’s everywhere I’m on the board at the high school where my children used to go to school. We have a full-time fry cook! I think that’s just inexcusable. I think that we need to take a serious look at what we’re putting in our bodies and what power modeling for our children and begin to change our eating habits and how that would help our over hell, overall health and well-being. And know we talk about women with depression and issues related to child abuse. All of that is kind of tied up in self-esteem and I think that if we assist as society could try to get a handle on our own personal health that would help, that would help tremendously (participant, Lanphier High School, October 9).

- For many reasons children aren’t eating it or aren’t eating all of it. So, providing a nutritious meal and having it there for them is definitely one step that needs to be taken. But, we have to change the culture of the students’ acceptance and their liking towards different types of foods.
That goes beyond the school, you can’t teach just in school. If they don’t eat here, they go home after school and grab a bag of food and off they go. We’re not accomplishing goals by simply regulating the food you have to eat your lunch here. It’s just one component of what has to happen. It is more about culture I think (participant, Lanphier High School, October 9).

- Interest in full disclosure I’m a pediatrician in the area, so I definitely have a focus on the pediatric population. But I definitely see a rising in pediatric obesity, and I do think we definitely need to focus on the kids getting them the healthy, healthy foods, but also focusing on activity in the community as a whole. I don’t have a one quick and easy answer for how to fix that but I definitely think it’s something we need to focus on because kids are obviously our future. And the problems they are developing now in childhood are just going to follow them later on into adulthood and result in increased mortality and morbidity (participant, Washington Park Botanical Gardens, October 6).
The purpose of this survey is to identify the most important community health needs in the region. You can choose not to answer any of the questions. All of the information shared with us today is anonymous. Your input is extremely valuable and we are very appreciative of your participation in this process.

What is the one thing you would do to improve the health of Sangamon County residents?

- Provide and strengthen training in small towns for first responders in medical situations
- Fitness and nutrition education and training
- 1) Bike paths and sidewalks 2) Clean water supply
- A campaign that educates residents to keep accurate list of medications they are taking and their allergies.
- A community recreation center, in addition to the YMCA, in another part of the community, to improve access to indoor activity in the late fall to early spring months.
- A more visible Sangamon County Health Department that focuses on preventive medicine in ALL areas of health (STDS, obesity prevention, screenings, etc.)
- Ability to schedule appointments more reasonably
- Access to care
- Access to care for all residents inclusive of the homeless to lessen the burden on the Emergency Room Services. More affordable care for all residents as well as help low income residents find a primary physician that can be used for non-emergency care such as monthly medications, minor illnesses, etc.
- Access to care, either rural health clinics or rural transportation
- Access to dental care
- Access to dentists
- Access to health nutritionist
- Access to healthcare
- Access to healthier lifestyle including foods, fitness, etc.
- Access to more health care facilities
- Access to more health food stores
- Access to transportation
- Access to veterans services in Sangamon
- Accessibility
- accessibility
- Activities to encourage physical activity in persons over age 21.
- Actually teach and educate community on how to make a living (take care of health, get a job, find stable living etc..). Not just constantly give free handouts.
- Add more paved bicycle trails
- address food insecurity among the disabled and seniors
Addressing the social determinants of health
affect childhood health and wellness
Affordable Care
affordable health care
Affordable home health assistance for senior citizens so they can live in their own home longer.
Aggressively promote fitness and healthy diet
Ask all health and healthcare organizations to undertake an analysis of systemic and institutional racism
Assist in community health programs.
assure greater accessibility for elderly, poor, children
ban smoking everywhere
ban smoking in more places
ban the consumption of alcohol
Ban tobacco sales in the county
Be available open on weekends and evenings during the week 4p-8p for those of us who work and it is difficult to make it to a doctor's or dentist's office during normal business hours.
Be more lenient on Medicaid programs for needed people
better access to affordable, preventative health care
better access to dental
Better access to educational materials (especially web based) and better access to healthcare resources for preventative measures that are realistic (not crisis intervention)
Better access to healthcare
Better access to healthcare information. It all balls down to dollars and cent. If one does not have the money or insurance they lose
Better conversations and planning for the future
Better doctors
Better educate, to increase knowledge of one's own health.
better education
Better education for recently diagnosed diabetics
Better exchange of records between facilities, create a community patient chart.
Better filtration systems in buildings where the public gathers.
Better food choices
Better food handling practices.
better mental health care
better nutrition and public parks
Better Primary Care Access
Better service at a better price
bicycle and walking paths
Bicycle lanes- an interconnecting system of lanes plus tails that connect every part of Springfield.
bike and running trails - trail from Chatham to Springfield is not desirable-Wabash portion feels unsafe
Bike paths to promote exercise. Also walking paths and improved bus service to promote pedestrians.
birth control
bring in more primary care doctors
Bring in the Nurse Family Partnership program and other evidence based preventory intervention models.
build a bike path around Lake Springfield
Build awareness of the prevalence of child abuse and mandated report.
Build more bike trails and bicycle lanes throughout downtown.
Build more walking/biking paths and more bike lanes on roads.
Can't really say at this time
cannot narrow list to one
Cheaper Gym Memberships
Cheaper medical rates for doctor visits.
Check up on them more often
children should be taught portion control in school
Cleaning the neighborhoods
Community exercise healthy living incentive
Community Health Workers
Community outreach and education regarding the appropriate uses of the ER, Urgent Care, and PCP offices. As well as other educational topics.
Community Resource awareness
Consider building another hospital or care facility in the area to meet the demands of the county.
Continue to educate especially in schools and the general public
Continue to serve in helping people stay healthy. By given the acknowledgement and the resources to do so.
Continued emphasis on nutrition - focus on reducing sugar which would alleviate many health problems
continuity of care
Cook every night no matter if its late or no instead of fast food
Coordinate health care with shelters, crisis nurseries, and schools.
Coordinate primary care access openings through one web site/service center for Sangamon County.
Counseling availability
Create more access/opportunities for adults to participate in organized sports or fitness activity.
Create more good-paying, entry-level jobs and make affordable education easier to obtain.
Create more jobs for African Americans so that they can afford medical coverage
Create safe bike paths and access to shopping and business destinations to provide a reasonable alternative to driving everywhere.
Crime stopping
deal with obesity
Decrease health care cost.
Decrease smoking prevalence
Dental assistance
Dental care
Dental care availability
Dental care for adults with low income
Dental care should be available for all. Medicaid not paying for most of it is an issue for good health care. I have private insurance, so I am good; but others are not as fortunate.
Dental care.
dental health
Dental needs for children
Dentists that accept Medicaid in Springfield.
Determine the best method for providing information which would result in a change of behaviors among its residents.
Develop effective public relations campaigns to inform residents of services and assistance available to them through the affordable care act and other programs
Develop more direct education efforts to make sure kids are eating healthy and exercise regularly
Develop nutrition programs for children
Diet education
disinfect my classroom
disinfectant wipes at gas stations
Dismiss the Republican political health boss Jim Stone and replace him with the former City Health Director!
do not know
do not sell any cigarettes or liquor
ease the way to finding doctors who care
Easier access to preventative information and medicines
easier to make apt with primary care and pediatricians; right now have to call and leave mgs with nurse who then calls back and many times you play phone tag. It is especially hard when you have sick children and you can’t get to the office until after they open to then leave a message with reception for the RN who then has to call you back, etc.
Eat more organically produced food
Educate about smoking cessation and healthy eating.
Educate about the benefits of healthy lifestyle
Educate and spread awareness on the importance of staying fit
Educate more on preventative
Educate patients to take control of their own health
Educate people on nutrition, how nutrition or lack thereof, leads to obesity,
Educate people to understand their risks
Educate regarding the importance of preventative care, and provide incentives for those who practice it.
Educate them about the impact of their diets on their health. Many people are killing themselves at the dinner table.
Educate them about the importance of good nutrition and fitness
education
Education
Education about resources provided throughout the county
Education about weight, hypertension, diabetes mgmt., as well as health risk behaviors (drinking while driving, smoking, STD)
education for parents on getting students proper sleep, nutrition, hygiene
education on personal hygiene
Education residents on the importance of their health
eliminate exposure to second-hand smoke
Eliminate Fast Food restaurants
Eliminate racism and poverty. Racism increases stress-related illnesses.
Eliminate smoking on or adjacent to the Campuses; put all of the overweight hospital staff on programs that gets their weight down. They don’t exactly look like role models to people coming to the facilities.
Eliminate SNAP for those unwilling to work
Enable all residents to have a primary care provider with ready access to this provider.
encourage better eating habits
Encourage breastfeeding support
encourage children to eat healthy and exercise daily
Encourage everyone to eat a Whole Foods Plant-Based Diet
Encourage healthy eating
encourage healthy eating habits
Encourage more physical activity
Encourage more physical activity. Perhaps form walking group outings.
Encourage more preventive health programs and inform and educate as much as possible
encourage non-motorized forms of transportation, i.e., walking, biking
Encourage physical activity by increasing bike lanes and making city plans more compact so people can walk
Enforce the "No burning of domicile waste" within 1000' of Springfield, also in areas of Springfield.
Ensure all school age children are up to date with physicals, immunizations and dental care.
Ensure better working conditions for doctors and nurses so that there are more professionals available with smaller patient loads.
Ensure grocery or convenience stores offered more healthy food, not junk food, at the front of the store.
Ensure that all children have health insurance and a pediatric physician or family physician.
Establish geographically accessible clinics with extra hours for families who end up in the ER for hours for simple ailments.
Everyone should have an annual checkup
Exercise programs for the community
Expand the locations of the farmer’s market to be able to buy fresh produce on the west & south sides
Explain that if you cannot afford food and health care for your current family, do not have more kids!
Extensive walking, jogging, biking paths zig-sagging throughout all neighborhoods
Faster response to child abuse allegations.

fewer buffet restaurants

Find a better way to eradicate bed bug epidemic in Springfield.

find a cure for diabetes

find a way for people to get more exercise into their schedules - time and affordability

Find Doctors and Dentists that accept the Public Aide Medical Card.

Find ways to keep our physicians here in Springfield.

Firearm safety

Fitness Club participation at "significantly" discounted rates (or free)

Fix the sewers in older neighborhoods

flu shot clinics in public schools

Focus on active living in the community.

focus on hand hygiene

Focus on mental and physical health prevention/education services.

Focus on obesity

Focus on smokers.

food education - whole foods, healthy foods, get away from drive through restaurants, education about quick filling healthy foods

Form a leadership council comprised of employers, not-for-profits, health care providers and insurance companies who can set goals, marshal resources, and accept volunteers to help with initiatives. A good model would be the Memphis Common Table Health alliance.

Free annual physical for any individual that is unable to have the cost covered by his/her insurance plan.

Free check for blood pressure, cholesterol etc.

free clinics

free clinics or low cost clinics prescription help

free clinics periodically

free diabetic supplies/meds to those who could not afford

free education

Free flu shots for everyone

Free health clinics at high schools and churches year round.

Free health coverage that covers strategies (nutrition, vitamins, exercise, etc.) as well as new treatments available (and experimental drugs)

free health screenings, eye, ear, etc.

Free healthcare to families

Free immunizations

free medical clinic

Free or discounted vitamins and healthy food items for low income residents
free or minimum charge exercise workout sessions throughout the city at varying times (adults and kids) reinstitute gym in all schools and make it mandatory
Free or reduced gym membership for low income individuals.
Free preventative health care
Free vaccination clinics
free wellness clinics / free health education
free/low cost dental care
General public health education on healthy eating behavior and physical activities.
Get access to some sort of health care for everyone, especially children
Get everyone registered for insurance and get them to see a primary care provider
Get good specialized pediatric doctors and keep them, so I don't have to travel to St. Louis for good care
Get more education about staying health
Get quality healthcare options for low income population.
get the texting drivers off the roads by arresting them if necessary
Get them all a primary care physician
Get them into exercise programs
Get them to stop smoking
Give everyone assistance- a medical card
Give residents the basics of good nutrition
Give them free health care
Government subsidies for healthy foods and taxes on unhealthy foods
Have a truly free health and dental clinic that is friendly, non-judgmental and caring.
Have easy access health care for all our residents
have employers stay out of employees health
Have Landlords held accountable and fined for substandard housing.
Have more activities for seniors
Have more bike paths.
Have more free clinics
have more GI drs and shorter wait times
Have more places take medical card
Have more walking groups or group exercise classes.
Have organization collaborating more
Have the Health Department come in to schools for presentations/guest speakers. And have the Health Department available for questions about cold/flu season at the beginning of the year Open Houses at the schools. Also provide flyers, brochures to parents/teachers on how to stay healthy.
have them quit smoking
Health education classes, to the lower income, including how to access the care provided through insurance
Health, fitness, nutrition training and education for prevention of disease and other health disorders.
healthier eating
Healthier eating options at restaurants, events that include healthy eating options (i.e. Taste of Downtown, Car Shows, etc.)

healthier food choices
Healthier school lunches
Healthier school lunches coupled with healthy eating curriculum for students and parents.

Help connect persons (if needed) to a health care provider.
Help get dental care easier for Medicaid and children
Help people own their own house cause landlords some of them don't keep house up to date
help poor people
Higher taxes on fast food
Hire people of color
home visits to parents of newborns and frequent contact with parents the first 5 years

housing
I believe the health care for Sangamon County residents is very high and have no suggestions for improving the care
I can do nothing to improve the health of Sangamon County residents. Is that really the question you wanted to ask?
I do not know enough about what is missing to provide a good answer.
I don't know- free dental visit?
I don't know.
I have to spend more time thinking about this to narrow it down to one thing.
I think companies, from small businesses to large corporations, have a responsibility to encourage workers to make good choices and develop healthy habits. We don't see enough of that in Sangamon County. Employers, who often the bear some of the costs of healthy lifestyles, should offer more programs and incentives to employees to get healthy. It may be up to the county's major health providers to get businesses to see the value of this and get on board.
I would aim to ensure that all pregnant women had adequate pree natal care.
i would like to reverse the obesity
I would love to be able to make an appointment for the next day with my physician
I would make access to knowledge of all health problems.
I would make mental health services more accessible for children and adolescents.
I would make sure that hospitals and nursing home facilities were being inspected routinely, holding these establishments accountable for the inadequate care that many of the elderly patients are being subjected to, due to the understaffed healthcare facilities.
I would offer health programs that provide incentives to exercise and eat healthy to combat obesity.
I would place a clinic in the Sangamon Towers and Bononsinga and Madison Park Place.
I would raise the minimum wage to help alleviate the stress that working people face-- which, in turn, complicates a multitude of health issues.
I would stop crimes
I would try to get more citizens involved in exercising every day.
identify community champions to promote healthy behaviors
immunizations for every child
Improve access for under/uninsured. e.g. free clinic
Improve access to care for all by improving communication and letting the uninsured know they can get care.
Improve access to healthy foods
Improve access to services
Improve area for health of residents
improve ease of access to health care across the community
improve education and access to health care for all people
Improve job opportunities.
Improve knowledge about healthy eating, provide instruction, teaching, recipes, support groups, fitness programs-all free
Improve maternal and infant health
improve overall access to healthcare - physical and mental services
Improve pedestrian travel, i.e. trails, sidewalks, bike lanes, etc.
Improve Public transportation to motivate walking
Improve public transportation; more bus routes, more bus stops throughout all Springfield to parks/lakes, more times throughout day
Improve roads in the city leading to hospitals & clinics
Improve science education and health education
Improve the general public's understanding of laboratory results.
Improve the working relationship between the two hospitals!
improved communication/cooperation between competing medical entities - hospitals, medical groups, etc.
Improved options for exercise.
Improvement of Dental Care. Programs for seniors. Extended Care facilities
Increase access to health care
increase access to health information
Increase access to healthy foods and promote healthy eating.
increase accessibility of low income individuals through church based and other local initiatives
Increase amount of services available for substance use/detox facilities
Increase awareness of and education on the hazards of smoking - especially for teens.
Increase awareness of healthy foods to help decrease obesity. Offer classes to show the public how to prepare healthy foods.
increase awareness of preventative care options in Sangamon county
increase education on the importance of regular prenatal care
increase health education
increase job opportunities
increase mental health care for children and adults
Increase mental health resources
Increase mental health services
Increase mental health services for Developmentally Disabled Individuals.
Increase Mosaic in more schools - which will increase family access to mental health services.
Increase opportunities for physical activity. Bike paths, safe side walks & parks, more usage of public transit, increasing children walking to school & activity while at school, & community walks/runs
increase primary care providers
Increase programs for seniors, to encourage better preventive healthcare measures.
Increase programs that develop strategies to tackle the obesity crisis
Increase support for behavioral health.
Increase the number and length of safe paths, trails, roads, etc. for walking and bicycling
increase the number of middle-class-paying jobs
Increase the recreational areas in the county
Increase trust in community, acknowledge biases of health care providers, and work to equalize so there is truly equal access to health care
Increase wages for those in poverty and the middle class
Increased access to mental health services
Increased accessibility
Increased education on nutrition and wellness in schools...maybe incentives of some kind for kids to be healthy. Start young
Increased exercise participation
increased integration of mental health care in primary care offices, and increased screening for mental health/more focus on prevention
increased preventative care
individuals making their own care a priority rather than expecting others to do all their care and advocating
Inform people of the danger of a high carb- low fat diet!
Information on access to health care communicated in several ways. We are rich in medicine in this community X dental
Inform them to make healthier eating out choices.
Invite them to visit their local community health center or medical center and tell them what services cost
Involve Sangamon Public Health Department in a "Prevention" initiative and offer some type of incentive to those that enroll in this prevention program.
keep the focus on healthy choices for students and eliminate all vending machines in schools - except bottled water kill them
Leave poor families alone, except to help them not taking children away
Less emphasis on tests. More emphasis on physician thinking and analysis.
Less expensive for those with private health insurance
Less wait times in emergency rooms. Patients who have colds etc. need a separate area and others who have more serious problems need to be seen before them which is not always the case.
Let them know of services available to them and where to go to get those services.
Limit the use of link card/food stamps for buying fresh fruits, veggies, meats, and breads. Not for prepackaged convenience meals.

Limit what LINK can purchase. No junk food.

Lose weight and increase physical activity

Low cost dental and eye glasses

Low cost dental and eye care

Lower cost of co-pay for the working people

Lower cost of health care and insurance premiums

Lower cost on 60 and older

Lower costs, but that's not realistic.

Lower prices on healthy food.

Lower prices or cost of living

LOWER THE COST OF HEALTHIER FOOD

Lower the costs to go to dr.

Make "good" food more affordable

Make affordable health care more accessible, and not just in the emergency rooms.

Make available equal access to health care for everyone

Make bottled water freely accessible

Make Drs appts, lab tests and x-rays less expensive

Make flu and vaccine shots more available

Make fresh fruits and vegetables accessible at a reasonable cost.

Make fresh produce more affordable.

Make gyms more affordable and help people quit smoking

Make health care available to all residents without having to go to an emergency room.

Make health care equally accessible to all!

Make health care more affordable

Make health care services more affordable.

Make Health clubs more accessible to everyone regardless of family income. Low income families get in basically free but those of us who make a decent living can't afford the cost and the Y for instance uses your income regardless of what your monthly bills are.

Make healthcare preventative

Make inoculations available at the schools so that parents will have no excuse why they can’t get their child inoculated. Also a dentist coming to schools every couple months would be a great addition to our program since many of the low income kids do NO brush their teeth!!!

Make local, fresh food (fruits, vegetables, etc.) available

Make medical care available to everyone.

Make more bike lanes available to encourage exercise through bicycling
Make more free clinics available to those that need assistance and develop free programs for weight loss that can assist those on a budget.

Make obtaining healthier/"clean" food easier.

Make people get vaccines so they don't spread their sickness.

Make physical education part of kids’ daily classroom routine. For adults……provide more bike lanes and trails.

Make preventative medicine/healthcare free or more affordable.

Make Springfield more walkable and biker friendly.

Make sure all residents have access to accessible and affordable health care.

Make sure children have parents at home to get them to bed at night and off to school in the morning.

Make sure everyone had a primary care physician.

Make sure EVERYONE has access to the basic needs for survival - food, water and shelter and do this by relaxing the red tape for organizations to help accomplish this goal - not so much to risk serious safety issues but to implement common sense.

Make sure that all Drs, Hospitals, Dr's offices are linked for immediate results.

Make sure that patients make their doctor appointment and are able to maintain medications.

Make sure those in receiving services from community health clinics are made aware of all responsibilities when receiving information. Critical pieces regarding internal processes are not always explained and because the person receiving services didn't know about them service is often delayed for the most vulnerable.

Make the city and county walkable/bike able.

Make the cost of medicine cheaper/more affordable.

Make the sale of cigarettes illegal in Sangamon County, or increase taxation to assist in care of cancer patients.

Making the process for testing simple.

Mandatory awareness/labeling in restaurants and food service of nutrition information.

Mandatory vaccinations for children except extreme medical/religious reasons.

Mandatory flu shots for the staff to prevent the spread of the flu.

May Priority Care locations easily accessible.

MD offices leaving time available on a daily basis for ‘drop-in’ needs to free up ER's and patients have access to their personal physicians.

Memorial and St. John's GETTING ALONG!

Mental Health

Mental Health Services.

mental health services for all mental health problems, not just the most severe.

Mental health- Homelessness.

Mental Health, ostensibly having more services for the underinsured and working poor: The stigma of having a mental illness must change before any remedy or change can take place.

Merge St. John's and Springfield clinic together.

mobile clinics for diagnosis and immunizations.

Monthly Weekend Health education classes covering consumer-oriented public health topics at the Lincoln Library.
More accessible mental healthcare.
more access to evening exercise and fitness programs for working adults
More access to mental health services for low income families
More accessible clinics for low-income families.
More accessible dental health
More activities for pre-teens
More activity
MORE AFFORDABLE HEALTH CARE
More availability to information and more importance on BASIC health needs like exercise, water/hydration, nutrition etc.
More availability to middle class working people for services
More bike lanes
more cooperation between the hospitals
More educational programs in schools for parents.
More emotional and behavioral support in the county for students who have social and emotional issues
More exercise
More focus on prevention.
more free or reduced cost clinics
More free screenings for those in need.
More health education fairs
More healthy eating and lifestyle
More help for disabled person and senior
More help with meds for the homeless and low income
More higher paying jobs
More information on free medical services
More intercity gardens- better streets- change Springfield city council
More jobs
More joint effort to offer school physicals in the Springfield Public Schools during registration each year in early August.
More local parks with exercise friendly layout and equipment.
more mental health services
more mental health services for youth
More mental health services!!!
More one on one contact with residents regarding their specific health status
More physicians or clinks who are willing to see uninsured or public aid patients
more preventative programs (i.e. diabetes, childhood obesity)
More prompt services when patients check in.
More public aid
More services at schools for students
more sidewalks
More specialized doctors devoted to thyroid cancer

More tests when diagnosing medical ailments. Especially at emergency room at hospitals.

more understanding health care providers

dale walking and biking trails

more walking paths in towns and country

Need more doctors and nurses

neighborhood clinics

Networking with all non-for-profits, gov’t, local and municipalities, churches, school districts, foundations, etc. To be aware of all the various programs and resources available to our county and surround communities. Get people to the programs they are in dire need of. If we don't know about the resources, how can we help! DHS or IDPH need to be a clearing house for all programs and services available to citizens in IL!

not allow the selling of marijuana

Not offer free healthcare

Nothing at this time

Nutrition education for poverty level residents substance abuse

obesity

Obesity

Offer a location on site at schools for children needing medicine during flu season. Parents wait until the child is really bad or has infected a lot of people, and then they go to the emergency room instead of seeking treatment at a clinic or dr.'s office/

Offer better coverage for health/dental

Offer cheaper health care options for students who are working full time and married.

Offer dental care to underinsured or uninsured!!! And choices for women’s healthcare not just SIU healthcare for underinsured.

Offer free assessments

Offer free classes on eating healthy, diet and exercise, and provide resources and support for good health.

Offer free dental and doctor visits.

Offer free flu shots

Offer free nutrition classes at local community centers

Offer health care to everyone regardless

Offer healthy weight-loss programs.

Offer more free fitness nights in the areas

offer more free health education classes and screenings

Offer more help to get educational classes out there about health

Offer more mobile health services (all kinds - dental, medical, behavioral) for the rural communities.

Offer more opportunities for community input

Offer more services to our homeless, veterans, and those who cannot afford services.

Offer transportation to apts.
Opportunity for free health fairs for the public to be screened for things such as HBP, Diabetes, risk for heart disease
Organize groups to go into pockets of our community door-to-door to determine what residents need in specific areas of the county
Orthopedic or rehab doctors who monitor semiannually or annually patients with prosthetics to be sure the prosthetics still fit or need adjustment. They should be part of the team that included prosthetics.
Patient education concerning lifestyle behaviors for healthy aging
plant more trees to beautify the county
Population Health
poverty
Practice better hygiene together
preventative screenings
prevention of preventable medical conditions - hypertension, diabetes, etc. with general exercise
Preventive care
Primary care away from emergency Rooms
promote "eat less, move more"
promote active lifestyles through bike and pedestrian trails
Promote and implement a yearly Springfield community weight loss "Biggest Loser" campaign
Promote better nutrition education and importance of exercise in disease prevention
Promote education about preventative measures like hand hygiene, vaccines, etc.
Promote exercise to reduce obesity and in turn diabetes, heart disease, etc. It's so disheartening that many events tie exercise to beer consumption - Fat Ass 5K, golfing and drinking, etc.
Promote local, healthy food to residents.
Promote opportunities to be active
provide accessible health care for those not able to afford health care
Provide all citizens with access to quality affordable healthcare
Provide better and more resources for children and adolescents with mental health needs.
Provide better mental health care and options for those of our patient base that are low income/high risk.
Provide better resources to help address our obesity epidemic, better, safer was to be active, more resources for families to learn about healthy eating, etc.
Provide bike trails and that are accessible to more people. Provide nice parks with amenities that are accessible to more people not just the more affluent areas.
Provide classes on how to eat healthy on a budget.
Provide convenient access to health care needs for uninsured that will prevent need to use ER for minor issues.
Provide easy to understand nutrition information- why a balanced diet is important- a balanced diet is not costly- a balanced diet affects health, education and society's well being
provide education for healthy lifestyles for the everyday person: proper nutrition and exercise
Provide education on how to offset the negative health impacts of sedentary jobs and lives.
Provide enough physicians it seem to take forever to get into to see a physician. When we first moved here and were looking for a physician we had trouble because none of them were taking new patients.

Provide flu shot clinics in public schools. Too many children go without the flu shot.

Provide free clinics to teach people how to make healthy food choices.

Provide free health care to everyone.

Provide free health clinics to individuals with no income and no health insurance. This was done years ago by CCHC at the homeless shelters and was very helpful.

provide free healthcare to those in need

Provide free structured weight loss programs to be available to all residents

Provide greater access to healthcare to the underserved areas of the county.

Provide healthcare at a reasonable cost.

Provide healthy & affordable meal plans via classes or online resources

provide housing and jobs for parents

Provide immunization and physical clinics, free.

Provide immunizations

Provide jobs to all able to work

provide more health services that are located in underserved areas of the county, including the east side of Springfield

Provide more low cost medical care

Provide more opportunities for exercise at work locations, such as making locker rooms and showers mandatory at large places of employment

provide more options for alternative medicine

Provide more preventive care education.

Provide more recreation center where residents could workout. And I would subsidize the cost to make it CHEAP so residents can work out without impacting their family budget. Healthy residents who are in better shape, need fewer medical services.

Provide more recreational activities, i.e. bike paths

Provide more seminars/screening while making medical professionals more accessible.

Provide more uniform preventive care for all people not just appointments to fill Doctors/ hospitals pockets

provide necessary prescription medication for those that can't afford them

Provide or sponsor activities that create more active lifestyle and events for area residents. This could include adult sports leagues for various sporting activities.

Provide preventative care to residents

Provide School based physical and mental health centers in the school settings.

Provide tasty, nutrient rich, affordable food and teach proper daily consumption amounts.

provide vaccination especially for pneumonia

Provide/promote better immunizations, both to children but maybe just as important to the adult populations, especially with need to revaccinate for some diseases.

push for insurance coverage of wellness care, such as massage, acupuncture, naturopath care, etc.
Push into elementary schools and educate students who can pass on information to parents and families.
Put greater limits on what is acceptable for purchase under SNAP (healthier food)
reasonable and affordable health care that available to all
Recruit and retain more Mental Health Professionals specializing in children's mental health.
Reduce Costs
reduce costs for work out businesses and decrease # of hours people work to 36 hours weekly and keep pay
reduce delay in treatment
Reduce incidence of low birth weight babies
Reduce obesity
Reduce obesity, assure each restaurant post calorie count
Reduce obesity.
Reduce Pneumonia risk
Reduce rates of obesity
Reduce smoke use
Reduce stigma of individuals with chronic disease/disorders (epilepsy, MI, PTS, Autism, HIV, drug abuse/use/addiction).
Families & patients don't seek treatment because of what their neighbors/friends will say. Reduce stigma & people will get help willingly.
Reduce the rate of obesity, especially in children
reduction or rebates for purchasing fresh fruit and vegetables
reasonable office visit prices
Services and pricing for residents with mental illness issues
services for low income people to help with dental, including dentures, and eye exams and eye glasses
Single-payer health insurance
Smoking cessation
Smoking cessation
spray for mosquitos county wide
Start with the young children and limit the unhealthy choices at restaurants.
Stay out of poor families lives. Help them instead of attacking them.
stop crimes
Stop free food programs. Make person(s) work for food and get drug tested.
Stop immunizations such as the flu shot that don't actually do anything. (Mumps and others are working vaccines. The FLU vaccine is just a false money maker that does nothing.)
Stop taking children away from parents for being poor help them instead. This has happened numerous times in this community. Keep families together.
stop taking children away from parents who are poor
stop taking children from parents
Stop them from smoking!
Stop using the pesticides on the fields that get into the ground water carrying carcinogens
Stress the importance of the utilization of Community Health Centers, such as Central Counties Health Centers, for uninsured and underinsured individuals.

Stressing the importance of overall health to low income and minority families.

Support creation of a city wide system of bike trails.

Take vending machines out of schools

Talk about obesity - causes, impact and prevention

Teach kids how to eat properly

Teach preventive health care. Show them where affordable healthcare is.

Teach them to buy smart, healthy foods

Teaching men and women how important a stable family can be for the independent of a kid's life. Helping families to understand the value of a family

That there was more time to come in when you need to renew the WIC book

The cost of everything

The crime rate

The one thing I would do is put everybody on a diet.

The person has to want to improve their own health before the health care system can help them improve it. I believe the County provides every type of doctor and service needed to make patients better when they are sick. It also provides healthy food and affordable places to go work out and maintain a healthy life style

There is too much space here; We need a track for residents to safely walk around

To get more benefited

To give contagious (and possibly contagious) patients a face mask that covers their nose & mouth and have them wear it in waiting rooms (hospitals, prompt cares and doctor's offices)

To provide full accessible communication between professionals and deaf patients.

Tobacco cessation

Track it with wearable technology.

Transportation for residents to appt.

Transportation- The county needs to continue to support the rural transportation project as a priority.

Understanding which providers and services go to which hospitals

Universal health care

Universal health care

Universal health care- preferably single payer

Universally increase the standard of living

Unsure

Urgent care facilities that accept the Medical card

Vaccinations

Walk more places

Wash hands regularly
We need affordable places to exercise. The new YMCA is located on the West end of Springfield. I would like to see a facility on the North end. Also, it would be great to have finished bike trails for exercise.

We need to start creating healthy environments starting with infrastructure. We need to make being healthy the easy choice.

We need to treat Ebola and to help people disabled in the hospitals

weight loss

Wellness checks (a direct marketing plan to get whole-health programs in place) for all.

Wellness Education
Wellness programs
Wellness screenings
Whole healthy foods
Work on healthy food provision and education

Work to ensure more dental care was available for everyone, adults and children.

would like to see a health care facility here
The 2015 Community Health Need Assessment Advisory Committee has identified the following nine community health needs as possible priorities for Sangamon County. For the following health needs, please identify whether you think it is a high priority, a low priority, or not a priority at all for Sangamon County?

<table>
<thead>
<tr>
<th>Health Need</th>
<th>Percent of forum participants (n)</th>
<th>Percent of community participants (n)</th>
<th>Total percent(n)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Access to Care</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>High priority</td>
<td>83.7% (41)</td>
<td>75.7% (520)</td>
<td>76.2% (561)</td>
</tr>
<tr>
<td>Low priority</td>
<td>14.3% (7)</td>
<td>19.9% (137)</td>
<td>19.6% (144)</td>
</tr>
<tr>
<td>Not a priority at all</td>
<td>2.0% (1)</td>
<td>4.4% (30)</td>
<td>4.2% (31)</td>
</tr>
<tr>
<td><strong>Asthma</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>High priority</td>
<td>50.0% (24)</td>
<td>46.1% (315)</td>
<td>46.3% (339)</td>
</tr>
<tr>
<td>Low priority</td>
<td>47.9% (23)</td>
<td>48.5% (332)</td>
<td>48.5% (355)</td>
</tr>
<tr>
<td>Not a priority at all</td>
<td>2.1% (1)</td>
<td>5.4% (37)</td>
<td>5.2% (38)</td>
</tr>
<tr>
<td><strong>Child Abuse</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>High priority</td>
<td>85.4% (41)</td>
<td>83.3% (579)</td>
<td>83.4% (620)</td>
</tr>
<tr>
<td>Low priority</td>
<td>10.4% (5)</td>
<td>13.7% (95)</td>
<td>13.5% (100)</td>
</tr>
<tr>
<td>Not a priority at all</td>
<td>4.2% (2)</td>
<td>3.0% (21)</td>
<td>3.1% (23)</td>
</tr>
<tr>
<td><strong>Dental Care</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>High priority</td>
<td>68.6% (35)</td>
<td>61.6% (427)</td>
<td>62.1% (462)</td>
</tr>
<tr>
<td>Low priority</td>
<td>29.4% (15)</td>
<td>34.6% (240)</td>
<td>34.3% (255)</td>
</tr>
<tr>
<td>Not a priority at all</td>
<td>2.0% (1)</td>
<td>3.8% (26)</td>
<td>3.6% (27)</td>
</tr>
<tr>
<td><strong>Diabetes</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>High priority</td>
<td>77.1% (37)</td>
<td>71.3% (491)</td>
<td>71.6% (528)</td>
</tr>
<tr>
<td>Low priority</td>
<td>20.8% (10)</td>
<td>26.0% (179)</td>
<td>25.6% (189)</td>
</tr>
<tr>
<td>Not a priority at all</td>
<td>2.1% (1)</td>
<td>2.8% (19)</td>
<td>2.7% (20)</td>
</tr>
<tr>
<td>Health Issue</td>
<td>Percent of forum participants (n)</td>
<td>Percent of community participants (n)</td>
<td>Total percent(n)</td>
</tr>
<tr>
<td>----------------------</td>
<td>-----------------------------------</td>
<td>--------------------------------------</td>
<td>------------------</td>
</tr>
<tr>
<td><strong>Food Insecurity</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>High priority</td>
<td>74.0% (37)</td>
<td>57.2% (391)</td>
<td>58.4% (428)</td>
</tr>
<tr>
<td>Low priority</td>
<td>20.0% (10)</td>
<td>32.8% (224)</td>
<td>31.9% (234)</td>
</tr>
<tr>
<td>Not a priority at all</td>
<td>6.0% (3)</td>
<td>10.0% (68)</td>
<td>9.7% (71)</td>
</tr>
<tr>
<td><strong>Heart Disease</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>High priority</td>
<td>83.7% (41)</td>
<td>71.0% (490)</td>
<td>71.9% (531)</td>
</tr>
<tr>
<td>Low priority</td>
<td>16.3% (8)</td>
<td>26.2% (181)</td>
<td>25.6% (189)</td>
</tr>
<tr>
<td>Not a priority at all</td>
<td>0.0% (0)</td>
<td>2.8% (19)</td>
<td>2.6% (19)</td>
</tr>
<tr>
<td><strong>Mental Health</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>High priority</td>
<td>88.0% (44)</td>
<td>86.8% (604)</td>
<td>86.9% (648)</td>
</tr>
<tr>
<td>Low priority</td>
<td>10.0% (5)</td>
<td>10.5% (73)</td>
<td>10.5% (78)</td>
</tr>
<tr>
<td>Not a priority at all</td>
<td>2.0% (1)</td>
<td>2.7% (19)</td>
<td>2.7% (20)</td>
</tr>
<tr>
<td><strong>Overweight/Obesity</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>High priority</td>
<td>82.0% (41)</td>
<td>78.5% (549)</td>
<td>78.8% (590)</td>
</tr>
<tr>
<td>Low priority</td>
<td>16.0% (8)</td>
<td>18.3% (128)</td>
<td>18.2% (136)</td>
</tr>
<tr>
<td>Not a priority at all</td>
<td>2.0% (1)</td>
<td>3.1% (22)</td>
<td>3.1% (23)</td>
</tr>
</tbody>
</table>
Listed below are the nine health needs, please identify the top three priorities in the region by drawing a line from the health need to the priority ranking. Please select only one health need for each priority ranking.

<table>
<thead>
<tr>
<th>Health Need</th>
<th>Forum participants</th>
<th>Community participants</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Highest priority</td>
<td>Second Highest Priority</td>
<td>Third Highest Priority</td>
</tr>
<tr>
<td>Access</td>
<td>35.5%</td>
<td>10.9%</td>
<td>1.8%</td>
</tr>
<tr>
<td>Asthma</td>
<td>0%</td>
<td>1.8%</td>
<td>1.8%</td>
</tr>
<tr>
<td>Child Abuse</td>
<td>3.6%</td>
<td>12.7%</td>
<td>5.5%</td>
</tr>
<tr>
<td>Dental Care</td>
<td>1.8%</td>
<td>0.0%</td>
<td>14.5%</td>
</tr>
<tr>
<td>Diabetes</td>
<td>1.8%</td>
<td>5.5%</td>
<td>5.5%</td>
</tr>
<tr>
<td>Food Insecurity</td>
<td>3.6%</td>
<td>10.9%</td>
<td>18.2%</td>
</tr>
<tr>
<td>Heart Disease</td>
<td>9.1%</td>
<td>7.3%</td>
<td>5.5%</td>
</tr>
<tr>
<td>Mental Health</td>
<td>3.6%</td>
<td>10.9%</td>
<td>18.2%</td>
</tr>
<tr>
<td>Overweight/ Obesity</td>
<td>25.5%</td>
<td>14.5%</td>
<td>3.6%</td>
</tr>
<tr>
<td>Access</td>
<td>24.1%</td>
<td>9.5%</td>
<td>10.2%</td>
</tr>
<tr>
<td>Asthma</td>
<td>0.7%</td>
<td>2.5%</td>
<td>1.8%</td>
</tr>
<tr>
<td>Child Abuse</td>
<td>10.5%</td>
<td>12.8%</td>
<td>12.1%</td>
</tr>
<tr>
<td>Dental Care</td>
<td>3.9%</td>
<td>5.8%</td>
<td>7.3%</td>
</tr>
<tr>
<td>Diabetes</td>
<td>2.5%</td>
<td>9.2%</td>
<td>7.7%</td>
</tr>
<tr>
<td>Food Insecurity</td>
<td>5.0%</td>
<td>7.4%</td>
<td>9.0%</td>
</tr>
<tr>
<td>Heart Disease</td>
<td>6.2%</td>
<td>7.4%</td>
<td>9.4%</td>
</tr>
<tr>
<td>Mental Health</td>
<td>15.3%</td>
<td>19.0%</td>
<td>16.9%</td>
</tr>
<tr>
<td>Overweight/ Obesity</td>
<td>18.5%</td>
<td>13.4%</td>
<td>12.5%</td>
</tr>
</tbody>
</table>
Please select all, if any, of the following health needs that you do not think are priority in Sangamon County.

<table>
<thead>
<tr>
<th>Health Need</th>
<th>Forum participants</th>
<th>Community participants</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Access</td>
<td>1</td>
<td>89</td>
<td>90</td>
</tr>
<tr>
<td>Asthma</td>
<td>4</td>
<td>111</td>
<td>115</td>
</tr>
<tr>
<td>Child Abuse</td>
<td>3</td>
<td>47</td>
<td>50</td>
</tr>
<tr>
<td>Dental Care</td>
<td>5</td>
<td>78</td>
<td>83</td>
</tr>
<tr>
<td>Diabetes</td>
<td>1</td>
<td>50</td>
<td>51</td>
</tr>
<tr>
<td>Food Insecurity</td>
<td>5</td>
<td>142</td>
<td>147</td>
</tr>
<tr>
<td>Heart Disease</td>
<td>2</td>
<td>38</td>
<td>40</td>
</tr>
<tr>
<td>Mental Health</td>
<td>2</td>
<td>37</td>
<td>39</td>
</tr>
<tr>
<td>Overweight/ Obesity</td>
<td>3</td>
<td>69</td>
<td>72</td>
</tr>
</tbody>
</table>

Are there any other health needs that we should consider a priority in Sangamon County? If yes, please provide a brief description. If no, please leave blank.

- 24 hour clinic near ED of all hospitals
- Abuse of adults (elders, spouse, partner, etc.)
- access to children's dental care, environmental issues
- Access to eye health.
- Access to nutritional food options for low income families.
- Access to parasite information and referral to a where this could be different
- Access to running water, electricity....
- access to vital prescription medication
- addiction services targeting various populations with access, in and outpatient treatment; access to treatment for behavioral disturbed individuals with developmental disabilities
- Addictions of all kinds through mental health issues or not that can lead to homelessness
- Additional safe centers for the homeless to have shelter during the winter.
- Affordable care for all
- Affordable health insurance, vision care
- Affordable substance abuse and addiction treatment
- Alcohol Abuse
- alcohol and cigarette abuse
- Alcohol and drug abuse
- Alcohol/Substance Abuse
- Alcoholism and drug addictions
- Anti-smoking
- any other health issues stemming from poor diets (too much fast food being consumed)
arthritis and aging bodies
Asthma
Asthma, child abuse, heart disease
Awareness and definition of particular access and which to pursue in certain situation. If PLP, ER, Express/priority/urgent care is more relevant than another situation.

ban leaf burning in small areas adjacent to Springfield city limits, like Laketown, Jerome and Southern View.(have pickups)
better access to birth control
Better food in schools, students do not like the cafeteria food as it lacks flavor. They end up going to the store and buying chips. The students will eat vegetables and fruits, but they need to be prepared in a more appetizing way.
Better response to disabled citizens, more public information on disabilities

birth - 3 screening for developmental disabilities
Birth control education and sexually transmitted diseases
birth defects such as spinal bifida, cystic fibrosis, md, cp.
Blind; deaf; cancer; trauma patients; hospice; aging; expecting mothers; preemies
Breast cancer
buy needed medicines at whatever pharmacy convenient; pharmacies open 24 hours 7-days/week
cancer
Cancer
cancer, tobacco, alcohol/substance abuse
Cancer!!!
Care for the aged.
Chemical dependency treatment services the waiting lists are too long
Child Developmentally Delayed Population
Child NEGLECT
Children left home alone
Chronic pain, narcotic abuse, alcohol abuse
civic engagement and trust
Clothing, clean clothing
Coal plants and air quality, Quality of institutional food (schools, jails, hospitals), Gun violence
Community acquired pneumonia and sexually transmitted diseases
Community focus on exercise and recreation
Cost of medication
Crohn's
Dental care for Developmentally Disabled Individuals, as well as low & medium income citizens
Domestic violence
domestic violence and homelessness
domestic violence, substance abuse
Drug Abuse
drug abuse (illegal drugs and prescription) Access in rural areas
Drug abuse needs to be addressed, as many are using cocaine, marijuana, etc.
Drug abuse; Alcohol abuse; Home invasion
Drug addiction
drug and alcohol abuse, Gang involvement, cancer, nutrition and access to healthy food, transportation, and help when population is illiterate/case management
Drug counseling
Educating young people on birth control sexual health issues.
Education about seizures/epilepsy. Seizures occur with not just Epilepsy but Diabetes, Asthma, lob blood sugar.
Doctors, EMTs, RNs, teachers & cops must not discriminate because someone has a seizure & jump to the conclusion that if someone has a seizure that that person is MI. Joan of Arc had Epilepsy and she was thought to be a Witch. She was more productive in her young life than many of us are in ours. People with Epilepsy have families, go to college, marry. This is important for others to know.
Education of people regarding what they eat. Most people have no idea how many fats proteins are carbohydrates they should have in one day. And most people have an overload of carbohydrates and fats and not enough protein and they have no idea. And it leads to all other kinds of health problems that could be avoided with education.
Education on healthy eating/cooking & smoking cessation.
Elder assistance
Elder care
Elder care in own home
Eliminating germs in public places...checking like you do in restaurants!
Emergency care during bad weather
Employment- people need more opportunities to have jobs, to make money, to afford a healthy lifestyle, to stay active. Health comes at a cost- it requires personal sacrifice, but also the money needed to buy secure housing, transportation, food, clothes, computers, phones.
Ending dog fighting, cock fighting and dog thefts.
financial security
Fitness Programs/ Nutrition programs, Local educational programs
fitness, activity programs
Food security is necessitated by the times that we live in. Heart Disease and Diabetes should also be a concern.
Free health clinics.
Get everyone free and easy access to the flu vaccine
Gluten allergies is becoming a very serious condition affecting the liver and other issues. More needs to be done immediately.
Greater access for the elderly and mental health for students that is free.
Gun violence, substance abuse
Head and Neck Cancer
Health & Wellness Screenings for Cancer
Health care of caregivers.
Health education
Health Education
Healthy minds will lead to less overweight, less heart disease, less food insecurity, less diabetes, less child abuse. The root of all these problems is the lack of values of all kinds.
Helping the community get properly insured
High Cholesterol
HIV; HCV; STD in all age groups
HIV/AIDS
Home assistance for senior citizens.
Homelessness
How to address health needs of the low income residents
how to eat healthy and access to wholesome foods
I say yes because I'm sure there are many, but I have no specific need in mind. And "NO" would be incorrect.
I'm surprised that there is no reference to any drug addictions - I'm new here, perhaps it's not a priority.
illness prevention
Immunization awareness
Immunizations
Immunizations & Infection control
immunizations and revaccination of adults
Immunizations for children, adults and senior citizens.
Importance of having a primary care physician and follow-up with them on a regular basis.
improved access to and education on the importance of regular prenatal care
in home care of the elderly
In the gym, I often found that people who were physically fit were more likely to stay. People who were overweight/obese were easily discouraged and stop coming. Hope there are more ways to motivate them moving.
Infant mortality- Low birth weight and mother infant issues
Inoculation
insensitivity of medical providers and cost of care
It's not just food insecurity, it's not being able to afford fresh, quality food. It's about disparity in incomes in the area!
Keep fighting cancer, diabetes, overweight
Lack of cooperating in training recipients at shelters and mental health offices. We just simply post pose the problem with a simple quick fix.
Lack of free, clean and safe recreation areas.
Lack of Mental health providers and access to medication for these issues.
Length of wait for a patient to get in to a doctor when they do not have the high medical benefits.
Loneliness among the disabled and the seniors.
Maternal/Child Health. Tobacco use, especially among adolescents.
Mental Health Issues with Children (behavioral issues), Unable to afford medical attention or meds, co-pays, etc.,
Addictions, bullying in Schools, Homelessness.
Mental Health Services
Mental health services are limited for families with public aid cards. The mental health needs keep growing and most of our families have public aid cards.
Mental health services to the homeless population.
Mind/Body Medicine
Mobile health unit.
More affordable educational programs for African Americans to facilitate them with their job skills.
More education to the younger population as the dangers of drugs and unprotected sex.
More neighborhood watch meetings and police doing more to stop criminals. Traffic needs- giving more tickets.
More pediatric specialists- all of them have left SIU- Neurology, gastroenterology, urology etc.
No. You have the list.
Nutrition Education
Nutrition, Alternative Medicine and Therapies
Obesity
Obesity is the catalyst for so many other conditions, it seems we should focus here first.
OTC medicines that would eliminate extensive treatment if could afford them such as sinus and allergy meds, Tylenol or alive, etc. Co pays for Drs and meds!
Over pushing of pills instead of sures. Legalize Marijuana and a lot of drugs can stop being taken.
Overall wellness
Parenting skills
Parenting skills for young parents.
Pediatric Ophthalmology
People need free rides to dr appointments.
Personal hygiene, cleanliness can go a long way to the spread of germs and disease.
Physical activity
Physical activity/ nutrition for children.
Physician choices for women’s healthcare for underinsured and uninsured - can only choose SIU at present time and receive substandard care at SIU healthcare for women.
pick one
Pneumonia risk
Poor diet - lack of education about healthy, nutritious food instead of high calorie & sodium fast food
post-traumatic stress disorder in military personnel working in Sangamon County
Pre-natal care and at home visiting docs (not just for babies)
Prenatal and newborn - 5 information and support
prevent teen pregnancy
prevention of these conditions
Prevention, nutritional (real food/whole food) education,
Preventive issues- like paths/ sidewalks for both safety and exercise. Would also decrease use of cars. Also better transit district - would also encourage people to not drive for everything. I am new to this community and came from an area with excellent mass transit. I am also worried about what I read about the water sources -potential pollution sources?
Prostate problems, ovarian cancer, breast cancer
Provide recreational centers for residents to work out and make it a low cost
Providing a third emergency room. Preferably on the south side of Springfield where Doctors Hospital used to be.
Public health response should be directed to ending adult rape and child sexual assault.
Public safety (crime, transportation, accessibility, housing, etc.)
Quality of care provided - high-quality pediatric specialties and pediatric ER
Race relations are integral to the mental health of the community. To the degree that racism exists and impacts people’s lives, it will impact their health and well-being. Everyone, including the perpetrators will continue to be negatively affected by this terrible mind-set.
Sangamon County Health Dept. is almost nonexistent in some of the towns around Springfield. An F.
Sangamon County needs more affordable alternatives to nursing home care. Perhaps idea would be to fund programs that allow patients to remain independent in their own homes.
sanitary conditions in homes of the lower class citizens, healthy diets for lower class also
school aged health programs
School Lunch programs - children eat very little if any of the "healthy" mandated by groups like GenH - they are hungry the rest of the day and consequentially will make poor food choices when they leave the school.
See below
Services than provide for less reliance on Emergency Services for routine care
Since we recognize that there’s a heart disease growth in the US, we feel we should focus on this issue more and more.
smoking
Smoking
Smoking and related illnesses
smoking cessation
Smoking cessation
smoking cessation assistance, especially for those on the medical card
Smoking related illness
Smoking; Low birth weight and premature babies
Smoking; underage drinking/drugs
Social determinants of health
Social media and other technology's effect on school-aged children: addiction to it, use to bully others, affects their sleep, dehumanizes them
Specifically, children's mental health and counseling. There are long waiting lists and a void of services for children with mental health needs.
Start with family environment- care for self then caring for others - children to child abuse - 12 step programs-helpful- not known by many
STD's & the spread of HIV/AIDS in the African American Community.
STDs
STDs, Aids prevention, etc. - I believe Sangamon County is one of the highest %s in the state.
stress reduction
Stroke
substance abuse
Substance abuse
Substance Abuse
substance abuse issues
Substance abuse tobacco, drugs, alcohol
Substance abuse treatment and services
Substance use/abuse
Substance/alcohol abuse
Teach good nutrition as a subject in all grades & birth control in Jr High & High School
teenage pregnancy
The compounding of the interaction al effects of poverty and trauma on childhood education and adult outcomes
the correlation between poor diet and disease
The flu shot is a pile of shit pushed out by pharmaceutical companies and only works on prior flu and not the current....this is an over-all increase in health problems.
The high percentage of babies born at a low birth weight.
Things that are not in the medical model of care - transportation, continuity, palliative needs at home
tobacco use
traffic safety
Transportation, Housing for disabled adults
treatment for eating disorders - more accessible and private
Treatment for lesser-known conditions and diseases such as Ehlers-Danlos syndrome
treatment resources for alcoholism and addiction
<table>
<thead>
<tr>
<th>Underweight</th>
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<tbody>
<tr>
<td>Vaccinations should be required in public schools, without exceptions due to &quot;parental objection.&quot;</td>
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<tr>
<td>Veteran access to quality care.</td>
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<tr>
<td>violence</td>
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<td>Violent crime</td>
</tr>
<tr>
<td>vision care</td>
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<tr>
<td>Wellness</td>
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<tr>
<td>With St. John's losing psych beds, better crisis services are needed for mental health issues.</td>
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<tr>
<td>Women’s issues - access to abortion, contraception, sex ed to all students. etc.</td>
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<tr>
<td>Women’s Health Access - birth control and abortion services.</td>
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<tr>
<td>Wound &amp; Cancer Care</td>
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<tr>
<td>Youth mental healthcare</td>
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Is there anything else you would like to share with us today about community health needs in Sangamon County?

- A little less focus on the health of special needs people or at least an equal amount of focus with those who do not have special mental needs.
- Access to care isn’t just availability of great medical care - need to figure out how to merge/desegregate the disparities between black and white health disparities across the board - Health literacy (understanding condition, treatment, medication maintenance, prevention, lifestyle change) - Joining health resources w/ job help and financial resources as well, or referring people to job/financial management resources b/c many times it’s connected - Low health = low income in many instances - Have affordable housing in different places throughout Springfield to spread access to different things and lessen burden on just 1-2 areas
- Need improved access/encouragement for increased activity - Continue support for bike paths - Supplemental programs in our school health programs by hospitals or health departments - Regional (town) health programs - Diabetic educators in the community for seminars - Nutritional information availability - Meal plans - Local walk in clinics in our community - Education is key, working with local providers
  1. Determine and subsequently advertise the need for follow-up adult whooping cough/DPT, polio, etc. vaccinations. 2. Keep the public informed about other forthcoming public health issues (Ebola) and ways to cope with them if inoculation is not available or an answer. 3. Low-Birth weight, mother-infant issues - Mom remains a high concern, especially teen mom issues.
  1. Stop talking about obesity and food. 2. Support lifestyle change and continue to support research that recognizes metabolic differences. 3. Improve emergency room response to visitors of rape.

A lot of people who get sick end up going to nursing homes which is very costly to taxpayers if the person is underinsured or on Medicare/Medicaid. It would be good if the medical community would give more financial support to community programs that support independent living.

A single all health providers work on one thing to make input

A third ER on the south side at a facility that previously served as one could potentially save lives by offering quicker access to care for residents in the southern portion of the county.

Access to care is difficult and to many CCHC is very demeaning

Access to discounted health club for those who qualify.

Access to Urgent Care facilities that accept the state medical card is an enormous need in Sangamon county. I work at a homeless shelter and I know that mothers with children would utilize these facilities instead of (VERY COSTLY) emergency rooms if they had the ability to.

Alcoholism and drug addiction

Alcoholism/Drug addictions, particularly the use of heroin, seems to be at an all-time high in this area. I personally know people who have sought treatment in this area only to find that there is a waiting list for inpatient treatment and no medical detoxification services in Springfield. People are dying.

Although Springfield has many hospitals and providers, it is confusing to select providers within the health care system that will meet an individual’s needs and also qualify for their various employer coverage.
As is part of my audio recorded remarks, it is a shame that the community has such an advanced medical community with progressive missions scores so poorly in state rankings of healthcare outcomes. What seems missing is proactive engagement on the part of the city (and county) government. Please refer to my recorded comments at the 9/6 forum.

As long as we have a dying economy, there are serious limits to any efforts at improving the health of Sangamon County residents. Low-wage, no-benefit, no pension, irregular working hours, part-time hours/"just-in-time" scheduling, no-opportunity "McJobs" have health consequences in the form of unsafe housing/neighborhoods, inadequate nutrition, stress, disrupted family dynamics, increased substance abuse, increased violence, etc.

Breastfeeding initiatives and follow-up

Can’t stress enough the need for additional mental health services in our county

Childhood obesity.

Children should not be taken from birth parents for issues related to poverty or religious training including spanking.

Children should not be taken from families poor people love their children too. Help them instead of breaking them up.

City leaders need to hire veterans including those who served in the National Guard. Not all disabilities can be seen. PTS, Asthma, Depression and Chron's Disease are invisible disorders but they are no less important than losing an arm in combat.

Communicable diseases return as threats to the quality of our community health when we become complacent or indifferent. Preventive Health should be the aim for all our citizen. It is the focus of the ACA Health Plans and may shift the way we perceive quality of life.

Community education classes are needed for health issues such as diabetes and obesity.

Community mental health agencies are so poorly funded that it is difficult to hire and then maintain quality staff. Persons with serious and persistent mental illness are often marginalized in terms of funding, even though they cost the community quite a bit when untreated.

Concentrate on wellness so that there is less of a need on disease control

Coordination of efforts- taking of "political hats" -need more employee sponsored programs

Could use the mail to send out periodic information on Basic health needs, preparedness, elder care, at-home exercises, nutrition etc. To save mailing costs in part of the area - could partner with CWLP to include information sheets of this nature in their mailings.

dental care and education regarding resources available to the poor and working poor

Dental care including preventative care such as cleaning and exams should be provided to low income and the underinsured. Currently dental vouchers are only given to a very low percentage of needy residents. The Sangamon county resource center should have more staff that can answer phone calls regarding their services. Residents should also be able to have fillings instead of only getting their teeth pulled. When residents get teeth extracted instead of fillings this results in low self-esteem and difficulty chewing, both of which affects their overall health and wellbeing for their entire life. Thanks!
DHS, IDPH, United Way - One of these agencies needs to be a clearinghouse for all programs and services available to IL residents, by specific counties, whatever their needs. We also need to have a Monthly Roundtable Meeting NETWORKING AND SHARING information about the various services and programs available to residents (Attendees should include, but are not limited to: county, city, state and federal agencies, NFPs agencies and orgs, Churches, School Districts, Hospitals, foundations, Businesses, etc.) Attendees should be encouraged to bring brochures, literature, and business cards to share. Resource Tables should be provided for brochures, literature and upcoming events, etc. Get people to a lot of these programs and services and it should alleviate some of the financial burdens on DHS, HFS, DCFS, etc. as well as help the overall health of our citizens we are committed to serve. Many of these programs and services are cut because they are not utilized...it's because people don't know about many of these programs!! Thank you!
Disadvantage families/ those in poverty and families of color do not have adequate access to preventative health care and thereby suffer from more serious and long term illnesses. Institutional Racism!
Doctors who refuse to see patients on Medicaid deny those patients the best of timely care.
Drug addicts and sexual transmitted disease.
Drug testing for those getting government assistance.
Early Education funding and support
Educate parents
education on preventive care
Emergency room care
Employers need to be encouraged to get onboard to provide programs to assist with this (i.e. if they have a cafeteria, provide healthy food choices; provide assistance to access a gym or provide an on location exercise room; etc.).
FAR too many girls are getting pregnant while teens. Something is not working. Girls AND boys need to get education. Girls need to know that the boy will most likely not be around when she has the baby. Money will be hard to come by, her education will suffer. Her future employment will suffer. Baby is 24/7, not just a cute thing to play with. Birth control is far cheaper than raising a baby for 18 years.
Finding primary doctors who truly follow a patients care when sent to specialist. Most primary care doctors do not visit their patients in the hospital, they leave it to residents who know nothing about the patient.
Fitness should be considered part of our health care plan, not just another activity one would like to do (or not do!)
Follow up visits to the doctor for a check to make sure disease or wound etc. is healed should be free. Then people would go causing less recurrences or reinfections. Expenses cause people not to be reevaluated.
Forcing schools and children to have only healthy lunch choices is causing a huge waste of vital resources. Go to any elementary school and watch how much of the “healthy” food is being eaten and how much is being thrown away. The children in our school need to be fed something they will eat - not Twinkies and donuts; but there are alternatives which they have eaten in the past that are not completely unhealthy. Eliminating anything containing sugar or fat does not solve anything. It just encourages the kids to go hungry!

From a school district employee having gone through exclusions for health records, have a central location for registration with a health clinic on site for compliance of Physicals/immunizations.

Generation H is doing an excellent job of getting information about a healthy lifestyle out to children. It would be nice to have a similar program for adults.

Good list of health need priorities. Note that Diabetes and Heart disease are significantly affected by the epidemic of overweight/obesity. Thus, addressing the more fundamental problem of obesity will have downstream health benefits.

Having a medical home for our most needy families and education on health issues.

Health care providers and insurance companies would benefit from looking at preventative care: nutrition and exercise to manage chronic issues and the many diet-related diseases.

hunger homelessness

I am aware of the negative affect of systemic racism on the health of individuals of color and on the community as a whole. In some way that needs to be factored into the discussion.

I am not in touch with the teenage population these days, but wonder if cigarette smoking is an issue with that group. I just hate to see young people smoking!

I believe resources and services for assisted living and long term care (nursing homes facilities) are not up to standards for a community of this size. I do not understand why individual requiring a pulmonary stents must go to St Louis.

I believe Sangamon County has plenty of options available for health care to citizens from the hospital clinics, doctors, and the county health department.

I believe there needs to be a stronger partnership amongst various community leaders (i.e. the hospitals, the Y, various clinics, education systems)

I believe this community is a great need of more mental health facilities. People are still going hungry in this county do to them not having enough money. When having all the household considered when trying to get help from places with getting food. The don't stop to consider that yes other people in the house might bring home a good pay check but it goes out in bills. So they can't help you get food. You don't make enough money to live on your own. So you go hungry. Or it could be you don't have enough money for healthy food because the foods that are bad for you are more affordable than healthy so you eat junk food and become obese

I did not select diabetes as a high, medium, or low priority; however, I believe it is an issue in our county. I believe strategies developed to impact obesity will also have an impact on diabetes and do not feel they need to be separate issues.
I don’t think so.
I don’t understand why the county has a role in providing health care. Isn’t that the responsibility of the individual?
I feel it is wonderful that you are making such an effort to help those of us with no or very little income to achieve medical treatment and stability. However, OTC (over the counter drugs) are inaccessible to many such as lice treatment, allergy or sinus medications and many other. Non-treatment leads to epidemic (as for lice), or serious health breathing problems. No allergy meds turns to asthma then COPD or pneumonia!
I feel our community health is affected by economic issues. When people lack employment and adequate pay, it increases their stress which impacts their health, the health of their family, their ability to provide, etc.
There is a domino effect. We need a better, more accountable public school system in Springfield that aims to truly educate the poor. Disparities in education guarantee that the poor remain poor. Outside of state government and white collar jobs in banking, insurance and the universities, there is little job opportunity. We have a brain drain here. Students who leave and go away to school do not tend to return. Springfield has to make itself attractive to young people -- all young people, not just white and middle class.
I have always been pleased with the care my wife and I have received...
I listed child abuse and the #1 health need in Sangamon County. The problem goes way beyond physical abuse. Child sexual abuse is an ignored problem. Neglect is also a pervasive issue. Sangamon County needs to find a way to support all parents and to promote positive parenting styles through education, community norms and by valuing all families.
I love the community gardens for people. There are many yards with too much shade for growing vegetables. Having them interspersed through the community would be awesome.
I made by priorities by listing things that are now not covered or not sufficiently covered. The medical conditions also need priority but through public aid, low cost clinic and emergency rooms have at least some attention. Child abuse is another important issue which can be addressed through education and is not as well addressed as it should be by government. Some of these conditions can be addressed if diet and obesity is addressed. We say childhood obesity is a problem and then allow our schools to drop gym classes. Daily gym classes even if only fast walking around the building would aid in this problem and may also help with hyperactivity problems.
I see a lot of repeat patients in the ER with health issues relating to their teeth, including asthma issues, that could be resolved and ultimately save everyone time and money.
I sometimes wonder if there couldn’t be a volunteer service put into place - using retired Boomers - to help out in areas of severe need.
I think a top priority that many not at first thought seem to be a health priority is education. However, education is a significant issue that impacts health- access to health, obesity/overweight, etc.
I think each physician in our community should be required to donate time in this county to work in clinics for people who don’t have insurance.
I think if obesity is addressed - heart disease, diabetes, even asthma is impacted. I think patients have access to health care in Sangamon county. I also think STDs are rampant and the education in schools for STDs is appalling an may be a community need
I think if the community could have access to more education about eating healthy and how to keep utilities cost down I think that can be a start
I think one priority will have the greatest impact. Concentrate on one priority for a year then move on. Since nutrition is key to so many health issues, a good understanding is important. How much protein should we eat at each meal, how much grain, how much fruit and vegetables. What foods contain protein, what foods are considered grain. What nutrients do these foods supply to the body. What nutrients help the heart, regulate insulin and help the various systems of the body function well. Use billboards, brochures, etc. as visible constant reminder about a balanced diet. Create a coalition of health care providers, business leaders, school boards, YMCA, boys and girls club, fitness clubs, athletic associations get volunteers to walk in parades, attend community events, etc. etc.
I think people just don't have the knowledge that they need in the way that they need it. I think we need to be thinking about non-traditional ways of informing people outside medical practitioners and services. By the time people are seeking help from the doctor, it is late. Getting kids early in school seems to be a great way to help both our youngest citizens but also their families.
I think that Sangamon County needs to start a case work program that would work with patients to maintain doctor appointments and medication needs. Also make it known the community services that are available to utilize in Sangamon County.
I think there are a lot of programs available and people have access to all of these programs.
I think there are many reasons for poor health. Poverty, attitudes against health, environmental factors (no sidewalk, no grocery store nearby, too many gas stations). We need to think innovatively when building new roads, businesses, etc. Put prevention first.
I went into a restaurant the other day and the area around the door handle...which was a push...was literally black...i refused to eat there but it didn't seem to bother too many other people!
I went to a food distribution event. Potatoes are the first to go, while some apples and cabbages were left at the end. Maybe there is a need to educate people on the nutrition and teach people how to cook to make vegetables more acceptable.
I would like to see county planning and city planning reflect the efforts and priorities you all will work to combat.
I would like to see health clinics in the high schools.
Improving access to affordable medication and assisting with treatment engagement and compliance with medication.
In addition to dental care, more mental health services are needed, especially substance abuse treatment and detox. Mental health services are still woefully underfunded in Sangamon County.
In addition to making healthier/cleaner foods more easily accessible to all, I think making our cities and county in general more bike- and pedestrian-friendly would help the overall health of the community.
In DSM, our Industrial Areas Foundation organizing committee made up of 20-30 member organizations holds grass-roots neighborhood meetings to find out where people are under stress. One health issue into which our work led us was getting a commitment from local hospitals to change uninsured patients on the same basis (at the same rate) as insured patients and insurance companies. If there is not an IAF affiliate in Springfield, it would be worth the effort.

In terms of transportation there is a gap in service availability for public transportation for those who live in the city limits but not within the boundaries of SMTD. For those in the city there no public transportation options from Saturday, 6 pm - Monday, 6 am. While there is growing options for those in the county through the rural transportation initiatives, transportation needs to be addressed as metro solution and not be driven by boundaries or lines. I believe 6% of Springfield citizens do not have cars and those with disabilities are particularly impacted by this basic quality of life factor within our community.

Issues surrounding poverty and food insecurity must be aggressively addressed and corrected. It is all about communication and education for families. Many parents don't know what services are available to them. But they can't come to a health fair because many don't have transportation. Any way we can get information to them about services for example that the county health department provides-their hours, walk ins, location, phone numbers, etc. Same for dental. What are their options with medical card? I have never seen anything go out to schools on this information.

It seems that street violence is negatively influencing the health of habitants of certain communities. Keep both hospitals as a level I trauma center. Central Illinois is large as well as the county and the residents would benefit from both being keep as a level I trauma center instead of rotating. Keep helping people who really need help and senior citizens.

Leave families alone, stop taking children away from families for being poor. Help them instead.

Less welfare
Living conditions of homeless and mental/physical shape of the people.
Mental health affects so much of home life- possible child abuse/animal abuse -domestic violence
Mental health is a huge issue that impacts all family members
Mental Health Screenings for all that get public aid
More access to mental health facilities to adolescents and children
More awareness about diabetes for people of all types
More general dentists need to accept Medicaid and do more to serve the needs of low-income residents.
There needs to be more interaction between the upper, middle and lower classes and whites and blacks.
More publicity for things like flu shots, other programs. Understand not very good turnouts.
Much better need for medical providers to coordinate care and reduce the duplicative and unnecessary testing. With healthcare being 18 percent of GDP it is unaffordable to the average wage earner.
My biggest complaint is no good specialized doctors for children, when therapist seeing your grandchild recommend that we make the trip to St. Louis for neurology, eye care, basically any care over seeing what few doctors there are in Springfield that is sad. When there isn't even Neurology here on weekend for children that are critical, that's sad.
My primary care doctor retired. I was very surprised to find out how difficult it was to get a new primary care physician. I kept hearing "not accepting new patients". We have so many doctors and 2 fine hospitals in Springfield, right at our doorstep. I wanted to stay with the group my doctor had been with or I would go with SIU physicians. Springfield Clinic has a slew of doctors but I didn't want to go there. I now have a doctor at SIU Family Medicine Clinic and I'm very happy with my doctor. My youngest of six, son aged 26, should be under a doctor's care but he won't go, main reason is cost. I suppose for our household I should say access of care is a high priority. I didn't have health insurance for 25 years, not until I qualified for Medicare. Up to that point, I paid out-of-pocket and I was lucky enough to be fairly healthy and accident-free. Forgive me but I just have to say that Obamacare created more problems than it tried to solve. I only bring that up because Obamacare tried to deal with the issue of access of care. I have no idea which medical illnesses should be a high priority or not. Wouldn't physicians be in a better position to answer that. I had assumed that this survey was for the general public.

Nationwide, we need better understanding of the illness and injury that can be caused by implanted medical devices and injectable. Doctors do not seem to understand (and are usually dismissive and sometimes even hostile about) the foreign body reaction/immune system damage that can be caused by a device rejection, so those who are injured end up debilitated, morally-degraded from being denied care and treated like idiots, and reliant on social services when they would otherwise be contributing to society. Hernia mesh is what did me in from age 28-31, until I demanded it be removed, despite the surgeon's disbelieve that it was the problem, and the foreign body giant cell reaction was clear upon inspection. Mesh is the "gold standard" in hernia repair (about a million hernias are repaired per year, usually with mesh). Hundreds of thousands of people are injured from many different devices: "permanently implanted" mesh, hip replacements (some with 40% failure rates), breast implants, cosmetic fillers, birth control devices. Many of the mid- to high-risk devices were never required to undergo safety studies, instead falling under the 510(k) substantial equivalence process, which the Institute of Medicine, in 2011, said does not ensure safety and needs to be replaced. Products are cleared onto the market based on similarity to predicate devices, grandfathered in--also without required safety testing--by the 1976 Medical Device Amendments to the Federal Food, Drug, and Cosmetic Act. Please, medical professionals everywhere, we need you to learn about these issues, learn to prevent harm by developing screening mechanisms, push for testing of devices, and figure out how to treat injured patients. We have been alone to fight this for too long. I still have trauma to my connective tissues, but at least my lungs, heart, brain, digestive tract, and nerves improved rapidly, and I can finally work.

Need more health activities for children.

Need to continue to work toward creating a network of providers that works together and can seamlessly provide coordinated care. (A lot of promise has been shown toward that end)

not enough therapists for adults
One issue not often addressed in healthcare is the associated costs, which is different from health insurance. People who pay cash typically pay much higher rates than do insurance companies. This is not fair. It might also help control costs if rates are more readily available to patients. We might be more cautious if we knew of the costs required for tests, exams, etc. Finally, competition between healthcare facilities should be discouraged more than it appears to be. If costs of healthcare could be controlled, it might improve access to healthcare and therefore the health of Sangamon County residents.

Our service system is so splintered and fragmented that it is hard for professionals in the health care field to negotiate much less those that are uninformed. Access and quick response is an issue. Poverty and need for help with access and survival needs cyclically impact the families as education sometimes isn't a priority. We need to organize the system. SIU is so huge even professionals within that system can't access the care they need. The system is hard to negotiate. Gang and drug and alcohol are health issues perhaps a commitment process as in the Mental health system for those that are dying of alcohol and drug addictions/abuse may need to legislatively be taken a look at rather than prison. Gang involvement is increasing fatality..... What is being done to address our city issues with that? Parents need to understand that their child has to have health info to be at school and what the schools needs are to keep the child healthy.

People have access to care at CCHC but they don't go on a regular basis for care or when they are sick they will go to the ER instead.

People need to be educated and held accountable for making healthy life choices. There could be incentives for healthy living (like eating healthy and regular exercise) and/or disincentives for unhealthy living (like smoking, eating mostly junk food, and unprotected sex with near-strangers).

Please increase funding for mental health services. Too many are not getting appropriate treatment. Police brutality is on the rise....

Poverty is a huge factor in our community health needs, if we can address that issue, we can also help alleviate a lot of the health issues.

Pregnancy prevention, address the high rate of STDs

Provide funding to small villages for spraying programs
Providing a council or forum for collaboration among employers, health providers and not-for-profit organization would give our community a good chance for improving health care. Many employers want to improve their employees' health and would appreciate device on initiatives from health care providers. Many employers in Springfield are generous and invest in their community already. Not-for-profits provide Springfield crucial services, including safety net services. Not for profits would likely relish direct connection to employers and health providers around health issues. Focus, creativity, resources, and manpower are likely to result. It would be helpful to have city leaders behind the initiative. Perhaps a visit to Memphis would help them see the potential? Here's the address of their website, http://www.commontablehealth.org/index.php. Identifying community health promoters (Promotora Model) active in organizations like churches, Boys and Girls Club, etc. also seems like an initiative with a lot of leverage once priorities and initiatives have been identified. An initiative to train these individuals would be time and resources well spent, there are excellent programs in this area and the recognition and training would likely be welcomed by these passionate individuals. Thanks for the opportunity to provide input on this important cause.

Return the Stolen City Health Dept. back to the City. The Republican County Board Negotiated the steal. The old County Health Department was filled with inefficient Republican Political Plums. Jim Stone is one of them -- he is ignorant in many health rea!

Sangamon County seems to have a chip on its shoulder when it comes to adopting and maintaining healthy lifestyles; it seems to celebrate its aversion to exercise, healthy eating, wellness, etc. Is it because Sangamon is "downstate" and feels "less than" Cook County? Sadly area organizations and the local media feed into the pervasive "like my bad habits or leave" attitude - point in case, the Illinois Times "Best Of" is a ranking of the "Worst Of" Springfield - bars, beer based events and all you can eat buffets! I listed access as the most important need, we need to raise awareness and change attitudes and long term bad behaviors - it's not cool to be drunk, obese, etc. even though area events and media say otherwise. Get folks into systems of care BEFORE they develop diabetes, COPD, CHF, etc. It's not uppity or upstate to be healthy! How about a "It's Hip to Be Healthy!" campaign!

SC offers plenty of services to the community, with the exception of dental care, which they are doing a great job of increasing! Medical services are readily available if they seek them. Thank you!

Sewer backups in our older neighborhoods spreads disease. I think this should be a priority.

Share patient history so tests are not repeated should a patient change physicians either due to moving or some other reason - worldwide - not just locally, state wide or nationally. Also so a physician has a heads up on a patient's health history from birth to present.

Should be more reasonable charges from medical provider and more reasonably from Medicare and other insurers!!!!!!!!!!!!

Simpler medication information and the importance of taking medication as prescribed by MD. Also a campaign to keep narcotics locked up from household members.
Since I completed this questionnaire during one of the public forums, I am completing this section only at this time. I applaud the sponsoring organizations for including the forums as an additional way of understanding the community health problems faced by Springfield and Sangamon County and hope they continue. If so, I would suggest a fundamental shift in how future forums are conceived and executed. This year's forums seemed built around the idea of validating already gathered data. In the future I suggest the organizers use discovery as the guiding notion. To accomplish this some important preparatory work needs to be done to ensure a diverse and robust turnout of community members. Once gathered together, the organizers should set the stage with brief descriptions of the major components of what constitutes a health community and then invite comments. This might be best done through the use of focus groups which would allow for greater understanding of the problems as seen through the eyes of community members and then to explore possible interventions/solutions. The structure used this year was too heavy on data and seems to be constructed to get the public to validate the data already gathered. Of the three forums held in the City, the one at Lanphier came closest to a real conversation. Let's turn this into an opportunity for richer community engagement and insight.

Single Mothers and their unwanted children which usually leads to child abuse on the part of her current partner.

Social Media, unchristian attitudes
Stop breaking up poor families for spanking or issues of how to raise children. Has happened again and again at our church.

Stop making us wait for hours in the waiting room
Students in K, 6, & 9 should NOT be allowed to REGISTER their child without physical/updated immunizations on these required years. This will motivate parents EARLIER to do their job as a parent and get school physcals done- They should not be allowed to even start the FIRST day of school without these requirements. District 186 is TOO nice allowing 10 days- get rid of 10 days and make parents accountable. Then we have no exclusion numbers because these students WOULDN'T BE ALLOWED TO ENROLL!!!!!

Thank you for providing health services for our area
The CDC identifies Injury as the Leading Cause of Death among Persons Ages 1-44. Sangamon County is listed in the top 23 IL counties for vehicle fatalities (2013 IL Highway Safety Performance Plan). This needs to be addressed locally.

The community needs to appoint a new board of directors to the Community Care Health Center. Most of the directors are uneducated and have no clue about being a board member or a clue about healthcare.

The Friends of Sangamon County Animal Control seems to have made a big difference; Churches feed the homeless. There are many groups that have passion and causes with folks that are willing to bend over backwards to fulfill their mission. Perhaps involving more community to help stretch the reach of paid staff could be employed in other areas.

The homeless population continues to grow with not only single people on the streets but also families. We need to expand the number of potential housing units that are affordable for not only our lower income or destitute individuals as well as our senior population.
The housing establishments
The importance of natural fruits and vegetables and how to make them accessible to people who might not normally purchase it
The importance of physical health and how it effects the mental health
The middle class is suffering do to the Affordable Health Care Act. We need Affordable Health care for all, no one should suffer!
The more we are able to educate Sangamon County about health, health issues, healthy living, etc. the better.
The people with health insurance pay a higher premium for those that don’t have insurance I don’t feel that that is fair. Those that don’t have insurance should maybe find a way to do community service to pay for their care, there is a lot of things that the county needs that they could be assigned to do. For example clean up areas of the city highways etc.
There are virtually few if any specialized services for people with developmental disabilities who have a psychiatric needs other than limited psychiatric services at SIU; this is now a grossly underserved population in an area with a very high number of individuals by virtue of geography. There are numerous facilities, and community living arrangements for this population, but limited coordinated psychiatric services including therapy, respite for acute behavioral issues, and training.
There are a lot of health care options now. Getting families to actually use them is a struggle.
There are definitely areas of our community who need a lot of help!
There are mobility issues like those that need electric scooters. Cost, fixing them-They provide such independence.
There are not enough providers willing to see or take on uninsured or public aid patients for mental health. With the market place including mental health now, you can’t find someone who will see a patient, and they have huge waiting list.
There are people who need medical treatment around the clock because of work schedules, an ill child, etc. Having a 24 hour clinic available near every ED would be an effective way for healthcare access without the ED expense. Run the clinic with Nurse practioners. Have a triage nurse in the ED waiting area to direct patients to the 24 hour clinic when appropriate. Have the clinic set up to accept insurance, Medicare and Medicaid. Avoidance of an ED visit and associated costs would help the county and its residents in many ways.
There are so many behavioral issues in the schools, and they all relate to mental health-of children and their families!!!
There is a great need for better services especially the wait time to be seen and costs. This is especially the case for low income and under insured. People wait hours to see a doctor and pay hundreds out of pocket, even with insurance. Lower the income levels for medical card and increase the doctor pool. Offer a program providing doctors with partial tuition reimbursement if they agree to work a certain number of years for a community healthcare facility. Bottom line, it is shameful that, at this point, people have to choose between healthcare and feeding their families!
There is a huge divide between the rich and middle class/working poor. If wages don't increase or actually decrease because a raise is far less than the cost of living (which is my case), then community health will continue a downward spiral. We don't make enough to have fresh, quality food and many are working more than one job so there's little time to plan & prepare those types of meals or grow things ourselves. The farmer's market isn't an option for most of us.

There is a lagging/unmet need in the area of services for the developmentally delayed child population. Especially, when it comes to psychiatric treatment for those individuals.

There is not enough room here

There is too much focus on medical point of care interventions and not enough on keeping people in their homes and getting them help in their own homes. Episodic crisis interventions and not enough keeping people well. Can't even walk in some parts of town and doctors look down on people with not enough resources like it is their fault they are sick.

There needs to be less routing of care, specifically some providers need to do more work with the poor and Medicare populations.

There needs to be more help for the elderly.

There's an incredible amount of poverty in Springfield, especially in the disabled, seniors, and young families Those with mental health issues need care, medication and supervision. They are a danger to themselves and the entire community.

Transportation - a way to get to where the help is given. Many people do not have cars and may not have the cash need to travel - especially with kids.

Veteran security  Homeless shelters  Mental health awareness

We have to tackle the problem of poverty.

We need a more robust and ongoing public discussion of what constitutes a healthy community and how social factors impact individual/population health. Are SIU School of Medicine, St. John's Hospital, MMC and SCDPH healthy organizations?

We need more community gardens which promote healthy eating (nutrition), physical activity (exercise) and social connections (mental health) that could address many health issues that are a problem.

We need more DASA beds in our Substance Abuse Clinics.

We need to do better job of providing QUALITY care--staff must understand the value and importance of what they do--just because someone cannot afford a private physician does not mean they do not deserve quality care. We need better focus on preventative medicine and not reactive medicine.

We need to get the word out about this program
We need to make healthier foods more affordable. My son is on a gluten free diet and it's ridiculous I have to pay more money to have less chemicals and crap put into his food. Also we need to have more places available for dental work. Not the place where you wait in line forever to get one thing done but can't get any cosmetic things done. Sorry but some people will not get hired because their teeth do not look appropriate. How can they contribute to society if they can't get a job because they can't get decent dental work. Also I think the food colorings should be banned. There is not taste in the coloring additives. Just a death wish. It only adds color. We don't need it. Thanks

We need to stress equality among healthcare providers on providing care for low income and indigent patients. One Hospital is managing a disproportionate amount of this population and this creates issues not just financially but for the patient population.

Wellness / prevention / community health should receive as much or more funding than hospitals and sick care

What do we have in place in case of an Ebola case in Sangamon County?

Whatever we do in Sangamon County with regards to health I would like to see more people with advocacy in health care. I work with impoverished families who don't get treated well and then stop seeking treatment because of that and we have to treat them better and offer more support for them as they care for themselves and their families.

With all of the new OP health care facilities popping up everywhere, it is confusing to know which ones are available to who for what services, accepted by your insurance and what hours they maintain or if you have to have a referral to go to them.

With the new health care coverage laws, I truly hope that all physicians (especially the primary care physicians - FPs, Internists, Pediatricians, etc.) will accept all forms of coverage (ACA, Medicare, and Medicaid, insurance). What good is having an overabundance of physicians in this town if they turn away patients in need due to their form of health care coverage?

Work in early intervention and see what a success this program is. Wish we had the same for other groups.

In Louisiana some years ago they had such a success by having a monthly newsletter sent to each new mother for the first year ...gave information on what to expect that month. It was like having a mentor to advise new mom.

Yes! This city and region does not have the infrastructure to support an active lifestyle, which research shows helps prevent many of the items on your list: Heart disease, diabetes, obesity, some mental health issues (such as mild to moderate depression) can all be better managed if people exercise or otherwise have an active lifestyle. Installing safe lanes for bicycling, repairing sidewalks, and supporting our downtown infrastructure in Springfield could make the city more walk-able, which will have long-term, positive impact on many of the problems identified as priorities. Further, food insecurity would be my 4th listed priority in our region if you asked me for 4 priorities.
Yes. Smoking occurs regularly and copiously around the SMTD bus stop downtown. Even though there are signs up, people disregard these signs. Could SMTD staff do more to discourage smoking around bus stops. I am a person with a serious health condition who is not supposed to be around cigarette smoke. However, it is very difficult to avoid cigarette smoke when smokers are all over the place. If there could be maybe only one or two places where smokers would be allowed to smoke near the bus stop and if the law of “no smoking” would be enforced elsewhere, that would be helpful. I understand smokers have the need to smoke. I just don’t want their bad habit to interfere with my health.

You might do a better job of advertising what low-cost options are available. I know several people who suffered with treatable conditions much longer than they should have because they couldn't afford to pay. Also I was charged $200 for a urinalysis of a condition that required only $4 antibiotics to treat. That’s not right.
Transcripts

Riverton Village Hall, October 1, 6-7:30pm

It occurred to me, when we’re listening at the figures, that if I understood correctly, that I, if I understood correctly, the death rate and the cancer rate were higher than the norm in Sangamon County. I wondered if that is because we have fine hospital facilities and people come here and die in those hospitals.

With the Sangamon County being above the age 65, Riverton has a lot of older residents also, so, I know we form that category there and trying to find a way where we can bring healthcare closer to them, might be another factor where we could help out reduce some of the issues there, for transportations to prompt for some of them and just, you know, they don’t have anybody to take’em places, so, I know that’s a concern out here that we are also looking to try to address also.

And I, I do agree we see a lot of the, little ones we do have a couple areas in the county that have higher teen pregnancy rates. And we’re sitting in one right now, so, we need to address that a little bit. And, and transportation is a huge issue and dental is a huge issue for our folks. You know and I know there’s a lot of seniors out here that could use help.

County regional planning commission and over the last year, so some of the stats are brand new stats that we’ve received. A lot of it boils down to theft, there is a lot of it on there. You know when we do our year end numbers, thank goodness not every year we have a murder out here but if we don’t have one this year we have one next year, and it shows a hundred percent increase and something like that, so when you look at your stats at a higher level that shows a fluctuation there, but our biggest problem is, there is some drug abuse going on out Riverton along with thefts, and that’s something where we staff at least 24-7 and we have two officers on duty at minimum 20 hours of the day so, we’re trying to nip things in the bud before they get out of control. So, we’ve listened to some of things that come off the survey so we’re justing things around to see if we can make a difference with it.

The numbers I’m gonna refer to, it isn’t so much the numbers I’m gonna refer to surprise me so much this year because, we’ve known about these for decades, and that is low birth weight, infant mortality. These are problems that are persistent in Sangamon County over time and I guess the surprising thing is that we’ve been unable to deal with it yet, because it remained consistently high. So the numbers didn’t surprise me but the fact that we haven’t figured out how to handle it that continues to surprise me. I don’t live in Riverton, I live in Springfield.

No I didn’t have a comment.

You know the pinpoint down to the exact thing I’m not sure there. I’ve grown up in Riverton my whole life, so I mean, you’re seeing, you know, the people that I have grown up with that were, you know, people that were though the school or through the village that work here, they are getting to the point where they are getting hard to get around. They still love their community, they don’t want to move to a nursing home, they want to stay home as long as they can. There just doesn’t seem to be a lot of assistance locally where we could afford to do it, to give them an extra hand. Now I know our fire
department does a fabulous job with, you know, they can call and say, you know I’ve slipped and I can’t get up, can you just come pick me up and our fire department responds to those kinda calls and goes in and helps them up. So I mean we do have something in place, but also our fire department is a volunteer organization too, so that does put stress on them also, so they’re really, and our police department is the same way, somebody calls our police officers do respond and try to help somebody out, so, but to actually get them some help, you know, I mean, bus to get to Springfield or something like that, we know that’s probably not going to happen, but what else can we do to get them to a place like that. So that’s what are looking at towards transportation.

You know, unfortunately that’s probably not a priority of the village of Riverton at this point of time. Is it something we’re looking at yet we’re looking at different opinions and try to bring people out here to provide those services, but with everything else going on, money obviously is tight and it’s not something...

With regard to the matter of transportation for people that need medical care, I’ve been hearing off and on for years it seems like, about smart transportation available. Is there any headway on that? Does anybody have anything to say about that?

My kids went to school here (same here). My health education, my children went to school here and I am really, surprised of how much tobacco use that the young people, maybe you won’t see them smoke but they’re chewing a lot. I think we need to really address that with the young folks and it’s probably not just here, I think it’s everywhere. I think they figured they don’t smoke but they chew and I just, I was really surprised at how many young men, chew tobacco.... It’s a cool thing to do I think, I think they think, you know it’s a cool thing to do and I think we need to redirect that in advance and get them to understand it’s not.
Union Baptist Church, October 2, 6-7:30pm

One of the issues that you brought up was access to health care, and my concern is transportation for those who may be the elderly, disabled the low-income individuals. We have to major hospitals here will a major clinic, and some other facilities but if people can't get to those facilities to be taken care of, like you said it would be of no use. So my concern is what are the hospitals, what are the clinics doing, or is there something that can be done to provide transportation on a need bases to those individuals may need transportation. My thoughts was that we are we are trying to deal with multimodal center here in Springfield. The same kind of concept for healthcare transportation. If the healthcare facilities, the major hospitals and clinics, can get together to provide a solution to the transportation network to provide an as need bases of transportation for individuals.

My name is [redacted] and I think the affordable care act went a long way to get people of insurance coverage. There are still people out there that aren't aware that they can be covered because in the past they weren't able to be covered by Medicaid. And some people weren't able to afford insurance but the affordable care act made that possible. But even some people getting the insurance through Medicaid are not aware of what that covers and what they're able to do. And there are changes that have come about like October 1 podiatry is covered. Medicaid used only to the people that had diabetes for podiatry. Now dental is covered for people with Medicaid and there are people just don't know this and even something like having a problems with your mouth can cause other health problems in the body. So people need this information out there not just that the affordable care act is there, but what it covers. Like what you can get now. I think that more information needs to be put out there so they can take advantage of that. I know every once in while you see the vans or health vans that go around and they’re testing for HIV. They were not only testing for HIV or AIDS on but also passing out information about the affordable health care act and getting Medicaid or getting assistance for paying for your health insurance. Because some people that do have jobs, that make too much for Medicaid, they're able to buy insurance but they don't know that they can get help paying for that insurance also. So some kind of way getting that information out there and that could be one way.

My name is [redacted] with Springfield urban league and I do work with the affordable care act and we are looking to solutions. As far as the wild van going out and doing screenings for HIV we’re also looking well looking into solutions for putting on a lot of our information so that when people get their screenings they can also get information regarding the affordable care. And we’re also holding a lot of post enrollments this time around at the different colleges and places like that so that people can get educated more so than the first time this program was implemented into the community. So now we are moving forward with a lot of different information. We’re educating the community a lot more because this was new and so we were all pretty new with this, but this time the next season were doing a lot of educating. Initially we would just go out and set up events. Well now were setting up events for post enrollment were we’re telling the community what they need when they actually do an event and do an enrollment were let them know what they need as far as birth certificates, Social Security cards, their information regarding their wages and salaries, and that kind of thing. Which is getting that information out of the way. Because initially we were having some difficulties with the marketplace and it was just mainly getting emails address is set up, that kind of thing. So now were getting all of that all of those preliminaries out of the way so that when they actually get enrolled November 15 will have all of that in place time.
I am going to go back to the statement made about access to care. Earlier on, a friend of mine, constriction, of a friend of mine brought up the constituent issue of taking her children to the health department or the community health center whatever, but they are at the only means of transportation is a bus. They're on a day like this in years, and on the side there's no bus shelter is out there with your children with possibly one umbrella. So that is another means, of you know me it may be difficult to get to health center or community health department when you're only means is public transportation there's not even a shelter for you to be while waiting for transportation

I guess I'll address the statement about the transportation. I'm aware of a young man who has started a transportation service, I don't know the name of it but he picks up people from their homes as an individual. He has a contract with health alliance and some of the other health insurers that are covered under the affordable act and he has purchased vans he picks up clients in both Springfield and Decatur. His name is [Redacted] and so I know that that is a source for people who have insurance and who are on Medicaid. They can call him; he will send one of his vans to pick them up. And his drivers they also do wait for individuals while they are at their appointments. I don't believe so I believe that it is covered by Medicaid.

Going back to the statement about access to healthcare my thought was that the health providers create a one-call system where you call one number and someone is sent to that location to pick up someone. You know to provide transportation verses searching to try to find one. Also want to pick someone up just call at one number and then the number one that moment that person will dispatch someone to that individual. That was my thought about that solution to all providing all access.

My name is [Redacted] and one of the issues to access to health care is the people that represents this room, St. Johns, Memorial, SIU School of Medicine, county health department, they could do a real good job at hiring people of color and people who are poor with less means. I think if they had jobs they could get health care and health care assistance. And one of the things that I think I have notices in this community since I've been here for a long time is that the institutions that you represent do a real good job at not allowing these kinds of things happen. There is no way that as smart as the heads of these institutions are, P.H.Ds, M.Ds that they don't know what’s going on in their institutions. This survey shouldn’t surprise them and you have to have some compassion, you have to show some mercy to some of these people who show up at your doorstep; who need help, who need assistance. And I know that’s going to take a lot of money and resources to do that. And the institutions that I’m referring to make a lot of money off the people who are less fortunate and I think if you give them access to employment and I know there are a lot of institutions, we’re talking about licensed people, and all that kind of stuff. But there are so many more institutions that require that. People who aren’t trying to get the 6-figure income. They’d be happy for a 2-ticket income. So we need people who have enough passion to be able to allow their institutions to make a difference in their institutions their institutions haven’t changes. It’s been this was for a long time. You got to let other people in the door. So you can see this coming. The fact that you’re having this issue that is didn’t stack up well. It didn’t happen over night. It’s been this was and you would have to have blinders on not to see it. Do I’m saying you have to allow other people who are less fortunate in your organizations. Maybe it would help you identify issues going on in your institution. And I know the ones here have the right heart and right temperament to get the job done. But the institution says your job description doesn’t include that and so you have to look beyond what 1 or 2 individuals are trying to do. And look at you institution and see if you could make some changes so
that policies and your job descriptions have the heart and the core value in your institution. And making sure you’re living up to as opposed to putting some type of brochure and it looks good on paper. They look in the community, but not doing anything. You need to be doing what the core value says, you need to be doing.

My name is [redacted] I work with this committee for a while I think that I am troubled by the fact that you talk about access to health care and you talk about dental care. I think that the may be maybe need to be separated because it’s a different problem in trying to get a problem solved with dental healthcare as opposed to general health here and I know a lot of people who have a lot of problems with getting access to the dental care I know I have went through that with some of my siblings. So I would hope that you don’t just combine access to health care and dental care and the same thing and not recognize that there may be some specificities put into that. I have a sense that the dental care is not more of a problem than healthcare but it’s more of a problem than we’re willing to acknowledge.

Hi my name [redacted] and I feel compelled to stand up since my neighbors have done that. All I want is to sort of key off some and things rich said here a minute ago and take the discussion. Some of you already know where I’m going to go with this that you heard me say this in some other areas. I think the discussion that were having tonight has to be as much about all the health of the community as it has to do with the health of the people in the community. I think there are some clear areas of distinction and one of one of them that I would suggest to you, and again this keys off some of the things that rich said a minute ago, is that when we think of or typically think of health and health of individuals in the kinds of conditions that are in your survey here and everything rich brought up to us is the fact that if we are going to look at what makes this a healthy community we have to also look at the health of the organizations, the institution. So what does it mean to have a healthy organization, healthy institutions around the community? And then in turn all that together or perhaps helps us get to the notion of a totally healthy community and there was a slide that you showed early on that listed certain factors and conditions that might speak to what the constitutes a healthy community. There was one that was left off and it is the one that most of us do like talk about a whole lot but I want to use the word and its racism. When I use that word I use it in the context specifically of racism that exists at an institutional systemic level not individual prejudice, but the kind that that is embedded in all of our organizations. Its of our history and I think when we think of the health of the community and racism is a better topic to look at because there are ways to address that at an institutional level that in turn set the stage for creating a really totally healthy community.

Yes I just wanted to also address information, getting information out to the community. I think we talked about the patients not knowing you know what kind of services that they can get and I feel like you know one of our big things that we need to go to them. I mean as we can see in the room today we have many of our leaders here but they’re not here. And we need to you now continue to go to where they are, like churches, the church services or the grocery stores that they are at or the public offices to get this information out about what access they may have. You know I see this on one of the newer doctors in town, I’m an intern, a resident here and I just see that as part of the problem. When I was a med student I know there we took on an initiative to go out to the churches, to give them small lectures on their health and also to supply them with you know just baseline blood pressures and the glucose levels that sort of thing, but also as mentioned earlier we could also be going out to give them information about what kind services are provided in town because I see a lot of people don’t know
what services that are available.

My name is [redacted] I work for a school of medicine, it's not just a question of what services are available but a medical center is a very confusing place. I'll tell you a little story that happened to me. My office is at 2nd Madison and a young woman came to the door, I'm not a physician, my office is not in the clinical area but she saw SIU and someone from one of the hospitals had directed her to go to a certain place at SIU. She saw SIU and stopped and of course I can't help her and I sent her to the center for family medicine. She told me she didn't have health insurance and I don't know what the problem was but that just reminded me of when I try to and I work at the school of medicine and trying to find a clinic in the school of medicine is a very confusing thing. So its what's available but where is it at, you know.

This gentleman brought up racism but I worked for healthcare and family services and I talk about Medicaid all day long. Classism. Yeah people have jobs and they are having to deal with people that are on Medicaid. There should be something in place everywhere in the medical field, hospitals everywhere, that at least teaches these people that have these jobs, that have medical insurance, how to treat people that are on Medicaid. Just because I walk in with my health alliance card doesn't mean I should be treated better than the person that walks in with the Medicaid card. That person shouldn't be talk down to just because they can't afford or they don't have a job or can afford insurance like I can. And these people also need realized there are people that have a medical card that are paying for the medical card for the children, not all Medicaid is free.

I expressed it in the committee as we were trying to put together this thing. The real problem that I struggle with is looking around in this room and all the empty chairs that are here in this room. How do you get people that need to be in the room, that need to be heard in this room so that they can be heard? I think that’s the major problem, I can't say that I have a solution as to how to address. I think that the committee was wise at one point they were going to do one general session, but after we had dialogue, we are having several sessions and I think that good. That's good but one of the major problems is all the empty chairs that's in this room. Getting people in this room that can tell us what it is that they really need from us that's a struggle.

[redacted] here again. If you look around town you see that St. John's, Memorial, and Springfield clinic all have satellite facilities all over town. In the hospitals I'm kind of speaking from experience, I have family members employed by the hospitals but they are not. When jobs become vacant they are not replacing or filling those jobs again. It seems like they are so focused on building facilities, but they are not putting people in the facilities to man them. What good does it do to build facilities but you don’t have anybody there to take care of the people that need the care? I think that the hospitals and clinics need to be not so focused on bottom line. There so focused on building facilities but not putting the people there to take care of folks. All I know, that nurses are in short demand, all over town, but what is being done to remedy that? LPNs, even clerks that are needed. You got nurses running around doing clerk work. You know when they should be taking care of patients. It’s a problem that I think the hospitals need to deal with, not be so concerned with building facilities as is taken care of what is in those current facilities they have.
I’m [REDACTED], and I work for the State Health Department and, I am, aware, I’m very aware of a lot of the data that’s here, and one of the concerns that I think, is, not, adequately addressed by the whole country, is, is the issues of mental health, and primarily because, there are mental health services, but, as a society, we need to be more, aware of the magnitude of what these problems are when we hear about, people being shot and college campuses being shot at army posts and whatever, it doesn’t surprise me that much because, there is a lot more mental health problems that are out there, but the public doesn’t know about them, and I would really like to see something more to be done, including trying to make it more acceptable for people to come and, admit that they have mental health problems.

Well to start off for full disclosure, I work for a non-profit organization in Illinois Stewardship Alliance who works with farmers. But I would say that my belief in the power of food and the problem with food in the Unite States proceeds by time of work in at the Illinois Stewardship Alliance. And I think the quality of the food we eat is a very big problem as well as the food that’s available, and schools and cafeterias, I mean an adventure guess, maybe even at your hospital cafeterias. But, when you go to the grocery store, how much, food is processed, with additives, you know, junk, it’s junk food. There is, you know, the parameter, that maybe has Whole Foods fruits and vegetables, but the majority of the food that’s available, that’s consumed, and so many of the health problems, here and across the United States are related to diet. We have so many diet-related diseases with obesity, and heart disease, and many others, and I think there is a really big opportunity in so many ways, there are so many exciting things that are happening all over the country of ways that communities are growing more of their own food, increasing access to healthy food, I mean, up in, Wisconsin, they have farmers, vending machines where you have salads, you know, farm fresh salads available in vending machines so you have healthy fast food, instead of, you know, candy bars and potato chips and sodas, right? So I think that, there is so many opportunities, we are working a lot on, looking how we can increase community gardening. Community gardening allows people to grow their own food. It allows them to cut back on their food bill so they are not paying as much, it gives them physical activity, people that work in the soil and have that physical activity are happier, they, you know, they conduct with their neighbors so it helps your mental health, you social, you know, connections to the community, there is a lot of benefits to that growing your own food. There is places in the United States where they have farmed hospital. There is hospitals that host CSAs which are Community Supported Agriculture drop-off sites for farmers that bring in fresh food and they are delivering it in the hospitals so that employees, as well as patients would have access to it. So I think there is a lot of creative solutions of ways that we can improve the food that’s available in our community, but I, and I definitely think that, that is one of the problems to creating a healthier community here in Springfield.

Interest in full disclosure I’m a pediatrician in the area, so I definitely have a focus on the pediatric population. But I definitely see a rising in pediatric obesity, and I do think we definitely need to focus on the kids getting them the healthy, healthy foods, but also focusing on activity in the community as a whole. I don’t have a one quick and easy answer for how to fix that but I definitely think it’s something we need to focus on because kids are obviously our future. And the problems they are developing now in childhood are just gonna follow them later on into adulthood and result in increased mortality and morbidity.
I’m new to Springfield, and I’m really kinda disappointed in my new community. I come from a place, where there are bicycling and sidewalks where you can easily, more easily get from point A to point B without having to drive 5 miles. It’s just really, shocking to me, and I’ve tried the bus twice, it’s inscrutable. The system is totally, almost impossible to understand. The price is ridiculous, I mean there is no, yearly pass, where you could get like a reasonable rate even try to, use the bus. So, and the other thing is really kind of shocking to me and worrisome to me is the water supply. Cus I read in the paper about the, dump sites and toxic, I don’t even, I am not even sure of the water and the quality of the water around here, so I’m a little disappointed, in Springfield so far.

Well I kinda tag on to what you just said, with first that there are, you know we moved here 4 years ago and my husband is an avid runner, and there really is hardly any place to run in the community. We live in Rochester so it does have the route there but he is a very long distance runner and so, you know, that, we have a beautiful lake right there, that could have a route all around that lake, but it’s never been taken advantage of. The other thing with that lake is that, why don’t we fix it? I mean it’s right there could be beautified, all of that kinda stuff. I know Decatur is working on that same thing. They are beautifying their lake and it’s gonna be amazing place up there. I think that we could do the same thing here, that could bring, first of all, lots of dollars to our city, much more tourism to the city, that beach would be a great activity for kids in the summer. I know that there was problems of the past but those can all be fixed. How many places have a beach for kids, there is no problems with beaches for kids, as long as it’s supervised just fine. Okay, for disclosure, again from me, I’m an owner of Healthy Selves magazine. I hear from the community a lot of what they want to read about, what they interested in, and I’ve done surveys with community on what they are interested in. and one thing that, the number one thing that always comes back, is that they want more information on fitness, nutrition, obesity that is the one thing that they, the top thing that they want more information on and I got the most comments from articles, from the community on those articles, when they are written about that, that subject matter. There is other articles as well, but tho, that would be the top category that I get from the community.

So to also kinda tag along with that, too, I, am a diabetes educator, and the struggle with some of my patients clients, it’s sometimes pain for a good care, so, if their medicate, you know, is some of the services, are those covered, you know, can they see a dietician if they have medicare, medicare doesn’t cover someone to see a dietician, that’s crazy, unless they have diabetes so you have to, get bad enough to get the disease, so where is our, our proactive prevention? There is 86 or 89 million people with pre-diabetes, and we can, we can reverse that. But we need that action and teaching people to eat healthier to be active, and a lot of people, sometimes there is, mental health to tag on to your first comment. They are so depressed or so down, that they need to get pass that to be able to take care of themselves, so there is a lot of work to be done.

It is a shame, to live in a city that has such a high number, of medical providers, who I’m sure all have the best of intention. To live in a city that has major health delivery systems, with wonderful missions, and to somehow have a disconnect between that and city government. We live in a city that’s, the, the local government is somewhat stunted, by the existence of the huge building in the middle of town with the governor in it, occasionally. So we’ve always lived in the city where its own local government doesn’t take itself seriously enough, doesn’t understand the proactive role that it has in the lives of its 117,000 citizens. So some way to try, to make the wonderful medical community we have here, to translate itself
into more of a resource that the city becomes proud of, there is no reason that we should be sitting at number 82 or whatever it is that’s just absurd given the talent and willingness that is here to deliver health. So I think there is this breakdown between, the stunted city government and the health services that are here, that citizens need.

Well, obesity and diabetes is my field, so, there is no question that, obesity is a domino that stands in front of pretty much everything up there, so, I always think that we need give it high priority.

Oh, I don’t have the answers. But, but I’m really glad that, our community is pooling together, you know, groups with a broad cross-section of background because, it truly takes a community-based approach. We had a CTC speaker here at one of the conferences a couple weeks ago that SIU sponsor that Dr. Stewart was very involved in. and he spoke to that point, you know that’s gonna take advocacy and community based and, I think we need to get political hats off everybody, and really face these issues.

Thank you. One of the things that I kept thinking about is we were seeing this is, you know, is the group looking at what are theories of personal change, how do people, we can identify problems but how do you get people to change and people know that diet and exercise are the answer, but that doesn’t mean that they’re compelled to do something about it. So I think it would just be really interesting to look at some of those theories of personal change, how do people make changes in their habits, in their lifestyle as well as one thing that I’m really interested in. I’ve seen some innovative things that people are doing and I know that there is, something’s happening here in the community but I don’t know a lot about as far as, what employers are doing to incentivize health, and healthy habits, and healthy eating, and physical activity. For example, my sister worked for a company previously where, you know, they gave everyone a pedometer. They measured how many steps they took and, they had people on teams and the more steps that your team took, you know, you could get entered to win a day off, or you know, bonus time or bonus pay or healthy lunch for your crew or you know, there is just a lot of different things that employers can do. And I think that, that could, you know, if the hospitals and those in the health care community are already doing everything that they can, to incentivize healthy habits for their employees, how can they work with other large employers or small employers to also enroll them or incentivize them to be a part of that. I think that, you know, it’s so much harder to do things on your own, right? I mean, and that they know that about we lost and healthy eating habits and things like that. But if you have a friend, if you have a group, if your neighborhood, if your employers, the people that you’re eating lunch with every day are also, you know, in it with you, then it makes it easier to make these changes. So I’d just be interested to see if the group is looking, you know, that’s working on this. Are you looking at how people are successful in making changes to their life style and their health habits?

I’m not sure whether there is anything missing from the data but I think what’s missing from your question, at this point, is that, maybe this reflects my own, perspective on this is that, you know it’s hard to assimilate a lot of data very quickly. I suspect a lot of us came here tonight, from our own particular points of experience, and interactions here, so this conversation we are having, I would suggest, is really not about the data. It has to do with more about some of the issues that a number of people brought up earlier in the discussion, and my talking about the role of city government, in this particular community I think, got closest to the sort of where the conversation might best be served. Because beyond the data, it suggests me not the, you know, what needs to be done. As important as that is, but
it’s how it’s going to be done. And so part of that how I would suggest is that, with the four major health and healthcare institutions that are behind this effort, is the question I think for each of them individual.

Sir, are that portion of the population that don’t even have a high school diploma, and what is the community doing to try and, encourage, people to at least stay in school, so that they have a high school diploma, or at least a GED. Education is a great predictor of health. I know that in my, with the work I do, and I don’t know, if it’s been addressed very much.

Amongst African American populations, but is the group, you know, looking at that further, looking at what solutions might be or what causes might be, to why there is that greater disparity, is that part of this health needs assessment, I mean, I know you looked at it, but I was just curious about that.

The concept of disparity be, but one of the things that I’m aware of because it’s the kind of data that I collect. But when you are talking about disparities, the group that, again it’s a number that people are not aware of. But when you start looking at people with disabilities, and you see, quality life measures that are very poor, you see, levels of obesity, that are just astronomical compared to any other kind of demographic grouping. But, people with disabilities, they have a lot of problems that they are dealing with and most of them deal with them as well as they can, but, if you are gonna talk about disparities, you also need to take a look at the percentage. Are those people that have disabilities and primarily, one of the things that is, looking at the activities of daily living? Those people that have one of those, there is a number of ADLs, activity of daily living, and the number of people that have one or more of those ADLs, where they’re deficient at? Those are the people that I think, need to be addressed too in terms of health care delivery system.
Auburn Community Center, October 8, 6:30-8pm

Position actually getting the rural transportation system up and running and I am I'm hoping that that will be happening soon but I see the results of what rode transportation means for communities like this in Pawnee etc. and in its life-changing so to me access to health care in terms of getting onto a bus or store a van or something and getting into the city is the start of it if you don't have that you have anything said to me that's a huge issue.

One your presentation was confusing to me is that the ZIP Code poverty level in actually in Auburn 62615 is was pretty good 11% but what we're hearing you here in Auburn is that 42% of the children that attend Auburn Elementary are there are 42% of the children that are living under the poverty level now, how can that be in the ZIP Code is still preschool the well we are combined now with diapering so that you might and that is a combination of others in specialist because the numbers have been escalating to that might be additional data clock outreach program for were people as far as health and poverty we have an extremely active food pantry and their awesome. We do participate in Meals on Wheels for the seniors however that the volunteers are hard to find I've used the senior center in Springfield I called out for people who are unable to care for themselves in their homes and I have been successful in getting people from that from the senior center to come out and be with people that you may become once a week to do help them with their homes and their meals and that type of thing I'm trying to think how you know what else could we do I don't know, I don't think one case you live in a small town in pretty basic I'm a pretty all around this area but there is some out far and then since we are with Vernon I know what people don't get the paper they don't read the paper so if you're having health event they don't know. A lot of them don't watch TV you know maybe this is a computer seminar on CNN you know it is a communication from a big thing in a smaller town it might be in the bigger to that you could mail things to people and sometimes it is you won't open it and I think that's all human nature but with smaller towns I think everybody knows what's going on in the small town, it's not like that anymore because you get more generations than the people here so I think communication when things are going on, me for help with no maybe there could be I and I don't know what the solution to that would be. I know you could go to Someone's house and pick him up and they still won't go just now what to do but I think that's one thing that may not go with help to me if they don't know that offering thing can go.

That’s really true that is one of the most that I would say is the number one frustrating thing that I found. I don't know how to communicate with people, I there just is not that there's not a way to reach everyone because is Carol right as Carol said well there are so many outreaches that we use here in Auburn there is the local newspaper with a either don't get it or they don't read, there's we have what's called a group cast, they can sign up with their telephone numbers and they can get information about emergencies, water breaks, snowplows, all of this they don't watch TV they don't listen to the radio they don't take responsibility for themselves to find out about things and one of the this is the a number one thing they say but how was I supposed to know about that have. the best thing I found is through the post office it's called ED DM it's every door direct mail and everybody gets it, it's not that it isn't personal but if the flyer and it will be sent out by post office for $17 17.5 cents per flight but how do you know there read they might see a flyer in their newspaper or in the mailbox and a throw it away. They don’t even look to see what it is, so it's really difficult to reach everyone and the kids take notes home from school and the parents go through their school bags and throw this away and when
they don’t read so I don’t know it’s very frustrating. Probably 93% got off the board the structure of the makeup of Auburn as is changed. There were lot of people called to bedroom community you know on the outskirts of Springfield housing isn’t outrageous hear and they can come down here and live pretty well but the entire function in the entire services is in Springfield and you know so the kids go to school here even the ones that are in some of which are talking about is the school not keeping track of what is the free lunch programs and all that stuff.

They got to have a certain household income to level to get on those programs and it is high here ever since the program started. So it’s nothing is going to be gone overnight you know it didn’t get this way overnight is not going to become better overnight. As Barb said you got to get some interest in the community and put people together and get things moving. I mean as far as saying access to health care if you don’t have a car or a friend how do you get it. When I was on the squad for several years people would call up and get a ride to Springfield from you soon there people in the hospital they got out and walked off. You know spending all this time and in doing everything I don’t think it’s that way now but I think the change that. You had to because they’re all paramedics down just not EMTs they are much more medical training and it’s really easy to spot the ones that are. They don’t let they do anymore cheaper to let the ambulance take them in their public transportation and let the problems rollover. You know something like this could probably, if its inundated with the goes into the community and accepted will change the community. I know what I was saying is that a lot of the calls are not serious you know they’ve got a stomach ache and they want somebody to come and see if they’re okay or you know they took some medication and they’re afraid that they took too much could somebody come and check on and so consequently the ambulance squad or the emergency squad doesn’t answer what’s called a calls because they have certain criteria before they will go out but I think you’re right as far as the community changing because years ago the moms could stay home the dads work the moms could stay home they paid more attention to what was going on with the kids and everything but now moms have to work and so I need they need themselves coming and going I know that and they just plain don’t have time to delve into everything and all the details. Now we do have computers now but the older generation there they don’t have access to computers. Now the younger and younger people do you even get word out while through Facebook and all they read that but then you’ve got people that are not interested in computers and so you can’t get to them. (So I don’t know what is in that life is that)

The world transportation project is in process I just don’t know if anybody from the county here knows that status of [redacted] project from County but they were in the process of purchasing all the new vehicles and I don’t know if status right now but it’s supposed to be up and running soon, one of our meeting came up critical these folks that are the stomachache individuals they can have easy access and I’m not sure the pay schedule or free schedule and not sure they’re doing it for Sangamon but you used to do it and like in the coop and on that board. You can go to Carl for $3.05 dollars it’s very cheap. will how are St. John and Memorial going to handle the outline of facilities like there’s one up by Meyer here and he would that be easier for them to try transportation to take someone there instead of all the way to the hospital.

That it’s all up to where they want to go they just make up for the call if you need a ride at 7 AM to go to such and such and they take them there. The critical thing about rode transportation is the return trip they may have to wait a while because of somebody else’s being picked up and then are taken home. the beauty of transportation as they pick you up at your doorstep and they drop you off at your doorstep they do not help the invalid necessarily in the home for two but they will take you to your
doorstep it's fabulous project and its if it allows individuals like these isolated individuals to have access to shopping to anything, church activities etc. it is not limited to medical but the medical is always number one always number one so this is an answer I think at least it will help us. I have a question about the structure of the Sangamon County public health department. You operate in Springfield but you are another organization to have other outlets etc. The county emerged so we cover Springfield and the whole Sangamon County. So do you go out to the communities or the community goes to you. We go out and do clinics to the communities and we do home visits to communities. You said access is identified as a priority issue so than at that point people get together and brainstorm solutions to access them and then pull these groups together. Will be actionable items to or generated as a result. Need to watch the community ranking drop from 81 to 75 to 30 to.

Maybe 10 dentists that they could choose from and 10 is probably a big number. Where they can go and get tooth cleaning and dental examinations and filling and they can get their tooth pulled, that’s where they can medicaid now. People who don’t have a dental insurance cannot afford it because they are so expensive and there’s not many dentists out there who provide care sliding scale fee but there’s two of us.

That the problem there is nobody in the county that is willing to accept Medicaid patients if they do it’s very few numbers and they just want to do their discounted rate. So even though we have lots and lots of dentist there’s just not access for people that don’t have dental insurance.

The high level of chronic stress levels that people are under a lot in their jobs because I think that contributes to a lot of the diabetes, heart failure, heart issues, heart disease hypertension but if that's over chronic long period of time it is terrific damage I don't think any that I don't how measurable that is you see that probably practice will I can't get I wonder if there

There were a lot of Controversies about getting free meals in the school, I was wondering if there's any information about how hospital dietitians feel about the food that the children are getting in schools that are free lunch. I just know not only in Auburn but all over the country and there's controversy about the school lunches and I I'm just interested in it and I would appreciate any information.

Cooking at home is a big problem and it does take a change of an entire change in the way that the timetable at home is structured to cook from scratch big trouble.

It just seems to me that not that child abuse doesn't have a lifetime effect but it seems to me that infant mortality or low birth weight may be a lot more children and infants affected by that than child abuse and with equally damaging long-term implications. I know you can’t change or make that higher.

This seems to effect everybody at some point in time. I was just wondering why cancer wasn’t up there is that it was looked at by so many different organizations or got doctor specializing in it you got all kinds of you know cancer centers and everything like that is that why that’s not up there

Counties and different towns like Auburn are you guys looking at other states that do so well and say hey what you guys are doing to make this work.
Their chronic health problems very few acute health problems when they get to an acute stage like asthma it leads to hospitalization that so much of these are our current problems that are going to affect us even more as we get older if we get older.
Thank you I just want to make an interesting correlation and it probably hasn't come up in a previous forum. I wish I'd been able to attend a couple more. I'm Betsy Goulet I'm a research assistant professor at UIS and actually my background is child welfare/child protection. One of the things that's really startling in terms of not responding to child abuse issues is the correlation between the rest of these indicators on here and child abuse that is when there's no intervention. And about maybe 15 years ago there was a study, Dr. Stewart you're probably familiar with it, the aces study which is adverse childhood experiences. Anybody familiar? You shook your head, yes. That study was done on 17,000 women who were seeking medical care for almost all the things that were on here; heart disease, alcoholism, cancer, variety of illnesses and what they had in common they discovered many of them were also they are to be in a weight loss program. There was a high incidence of obesity. One of the common denominators was child abuse. Out of the 17,000 women and they started learning from them about sexual abuse. These people had a variety of health issues later in life. They'd never disclosed they never talk to anybody about these issues before and till they went into this study they were not aware of the long-lasting issues that they would then encounter as a result of the abuse. And we also know that obesity is also linked to child abuse. We know that adolescent pregnancies, there's a link there. So, if we aren't paying attention to that when children come forward and disclose or children who never disclose, if we don't intervene early then we will pay for it later, in healthcare costs in crime and in other adverse experiences as adults. So, I think that a lot of what we're looking at is the result of a community that doesn't really put a lot of emphasis on child abuse and prevention particularly. We don't do a very good job and so I'm really interested. I'm thrilled to see this rise to the level of this awareness to become part of the survey more than the nine issues, that's the first in my lifetime living here for 55 years that we've talked about it in a public forum.

I'm a student as well as an intern at the Department of Public Health, down on Jefferson Street. I think the Springfield does a pretty good health care system. I was very pleased when I went to the doctor and was only there for an hour and a half, versus five. I think it's a thing for most of the kids that were transported here or were born here, if they really have healthcare problems, they're sent to other health care places like Chicago to Missouri to Indiana and to Iowa. Like they don't ever stay here in Springfield to get the full treatment and even if they are diagnosed here, it probably takes within 12 days, you know, and that's too long for a parent to be worried about what's really going on. After they probably already been dealing with the symptoms for months or four weeks or whatever that is. So, I just think that is something to keep in mind about response time. You know you can get into the doctor within minutes, but how long does it take them to actually give you an answer.

Do you have a specific case that you wanna mention of a child, but had to go somewhere else, after being diagnosed here?...oh, okay, alright thank you. Anybody else in this table? Okay, I'm going to move this way to the UIS table. In my heart... no you from Chicago. Oh, so you're not from here. Okay, well let me move back here. Move back here my cords to go with me.

I'm off track on something, that study did the other priorities I wish to see something like whether the resident is just physically active or not. I go to gym and I find people who are fit are the more like to stay and those out of shape, those who need to know and more, I think they easily discouraged and stop coming. So, hoping there are more ways to motivate those people you keep moving. Another things, like
we do free or reduced the launch of all those in low income case. I was wondering if there's a way that have this low or reduce the membership fee for the low income people. Just motivate them to go to gym more like to see or like a physically active community here, because I think all the diabetes all those diseases, all these illnesses related somehow to a certain degree. If not a genetic way the lifestyle has a lot of related to their health problems. If keep them more active physical and more active. In the process you see all the keys there all sorts of sports, right from the little kids in the middle school, high school. The parents we basically as an affordable mom I was I just go there watch or I just drop him and I left. So if that mold of those activities for adults to keep, keep moving.

It's a great suggestion. I like that suggestion about possibly tying in reduction of fees at the health clubs for the parent...

To bounce off of that and ask everyone to be very cognizant of how our park district is funded in the city of Springfield. The park district provides many great programs at a very reduced cost, but their budget is incredibly tight and I know they would like to serve more. So, if you have time to call your park district people and find out ways to support them so that they can extend programming to increase activity particularly to low income families. You know many of their activities and their facilities are free of charge and I know they would like to see more people use the park.

In our interest in health and nutrition and I’m struck as I said in this high school by the signs that I see on the walls, Pepsi, I look back at the vending machines and I see high calorie, high sugar snacks, I see Mountain Dew and I think this is a real problem in our schools and I’m not particularly criticizing Lanphier high school. It's everywhere I'm on the board at the high school where my children used to go to school. We have a full-time fry cook! I think that's just inexcusable. I think that we need to take a serious look at what we’re putting in our bodies and what power modeling for our children and begin to change our eating habits and how that would help our over hell, overall health and well-being. And know we talk about women with depression and issues related to child abuse. All of that is kind of tied up in self-esteem and I think that if we assist as society could try to get a handle on our own personal health that would help, that would help tremendously.

Thank you stay right here. At. We too are concerned. We actually turn these off during the lunch hour. The machines are not allowed to be on and that's actually part of our wellness policy at the district level. And then we were actually not even allowed to sell snacks at like the school store or anything they have over 200 calories and we’ve completely change the way were doing the cooking in the eating during the lunch hour and much of the kids dismay in some respects. Because it's all wheat bread and the different types of products but it is been a slow change and still were. Pepsi is more than willing to fund and give things to the school and that's why you see some of the signs and things like that we do have these machines on after hours and kids to get into them. So, we know that it's not something that’s maybe becoming as we like to be more talking about health and nutrition, but we have been doing a lot of initiatives. Gen H is a big project we’ve been working with our schools. They come up to the elementary schools and with that is a lot of fitness a lot of family events, as well as student events to really can focus on our health and nutrition. Those are great things is it actually really integrates well into our health and physical education/education at the elementary level specifically and in moving into the high submittals on high school with her health classes. So we know we can get better in that.
I know in relation to nutrition loan from nutrition programs in schools or offering these days has done a far better job than what they have in the past and they learn how to prepare healthier foods in such a way they can feed them to the masses. But, some of the policies that have been pushed down from the federal government to schools lately have only the best intentions to a highly nutritious meals of the proportions and so forth. Students don’t care for them and sometimes they do. So, a lot of them don’t. So a lot in turn leaves the problem the USDA did a study here originally the schools are throwing away more food than may ever been thrown away before. For many reasons children aren’t eating it or aren’t eating all of it. So, providing a nutritious meal and having it there for them is definitely one step that needs to be taken. But, we have to change the culture of the students’ acceptance and their liking towards different types of foods. That goes beyond the school, you can’t teach just in school. If they don’t eat here, they go home after school and grab a bag of food and off they go. We’re not accomplishing goals by simply regulating the food you have to eat your lunch here. It’s just one component of what has to happen. It is more about culture I think.

You know? I think that if we can get students involved in producing healthy foods and becoming more cognizant of farming and you know this farm to table and whole food movement, I really try to encourage our school to start a community garden and when students are made a part of that whole process and they plant, they hoe, they weed those gardens, I think they become more open to trying new things. But I mean were 100% correct, it’s got a start at home and I know my son for instance just when he was a young boy we couldn’t get him to eat anything green. He went off to college in Colorado and I’m just astounded at the things he will eat now, but it’s been a process and I think kids have to get that modeling from their parents and I just think gemstones starting this farmers markets over on in the parking lot of Penny’s was a wonderful thing and if we could encourage the members of our city to go there, if we could have more cooking demonstrations and tasting demonstrations so that people can get exposed to this kind of thing it’s a good thing. But it is definitely an uphill battle. I mean there's just no two ways about it.

Thank you

Thank you, thanks Janel I wanted to stay on the food aspect with the children.

Okay, well even though you didn't want us to speak about nutrition I believe in all holistic it all ties in and I'll just come from a personal note because I'm not you know a health professional. I've actually worked for the Department of Revenue but I am very interested in health fitness and nutrition in my own life because of my mother who died five years ago almost 6 years ago and at the time she suffered from diabetes, obesity, heart disease including high blood pressure, cholesterol of blood clots, a host of health conditions that I believe are all tied to what we put into our bodies. And as you said the activity that we have on a daily basis because of my mother before she died and as a married mother she told me when I gained weight, a lot of weight, do not wait until you get my age to try to do something about it, because it's going be so much harder. She told me that and she always encouraged me. And then when she passed away that became so much more real to me. She ended up dying because of her heart failing because she had cancer after all this other stroke she had cancer. She got chemotherapy and her body couldn’t take it because she was already so beaten down. So, in my own life it has become a personal crusade for me, because there are so many people who you can say are in underserved areas. underserved communities. I mean I’m a member of the fit club. I’m a member of, I work at the YMCA
you know? I, as far as people from the community that I come from, which is low income, single-family, what you call it? Not rural, urban, right? From these areas you don't have a lot of access to, you know, fitness. Like I can enjoy and even when you do have access through YMCA scholarship you still have to pay for the adult and the adults sometimes can't pay $10 a month to go to the wire even if they can they don't have transportation. So with my husband and myself we have begun. We are in the beginning processes of starting a nonprofit called the fitness philanthropist. We are both certified personal trainers and we will soon be certified fitness nutrition specialists. And my whole goal and I feel like my purpose, what I've been put here for, is to help people like my mother and families, you know, who are losing family members because of things that are so preventable. They don't know what to do, you know. We can say there's all these things we should be doing is be modeling to our kids. We don't know that we don't know how to walk it out ourselves, how can we teach them. You know, so.

I really appreciate her sharing her story because my mother had the same.

I don't know if I'll give you the answer of what you can do, but as I listen to your story and other pieces, I think of the word systemic. The systemic kinds of things that are there this is what you were talking about when you said your mother had all the diseases that usually African-Americans have. As I said we do some work on just the whole question of dismantling racism and it is been proven that the stress of racism makes people sick. There's also studies that show inequality makes people sick and that's our system that were in. I think of the asthma that seemed at least I don't have the statistics for, but from what I gather from teachers, it's increased greatly the talk about how many inhalers they have at school how many EpiPen's because everybody is allergic to something and so it's a systemic problem of what were putting into the soil, what were putting into the air, what were putting into our foods, and that I individually can't handle take care of the but together we have to work on that is a system. That's another piece of this whole picture. I wanted to switch over to the mental health bullet. Our mental wellness because it seems like going off with what [sister Marceline] was just talking about looking at these health needs you know access to care, dental care, food insecurity leads to a lot of stress in our families. That's you know it in and it were 81st in the whole state so it's all levels in our community, right? It's not just the kids and it's everybody. So I'm just wondering about our mental state you know how hopeful we are or how much stress we have. You had on there about affordable housing and when you're spending 50% of your income and more on your house, no matter what income you are, you put a lot of stress on yourself. So, I just thought that was a big need for our children and for our adults is looking at that mental wellness and your mental ability and you know. Not mental health but how we determine what mental health means. Your well-being and how you feel about your life. That's what I was inking about.

In response to what you were saying about the increase in asthma and allergies and all those other things you're correct. I think there is an increase in all of those things. Part of the problem is that there is lack of education of the parents there caring for those children. You notice if you're living in poverty sometimes I don't think that you have been educated on how to care for those children. In access to care we have all these providers here in Springfield but we have kids that don't have a provider that they routinely go to, to take care of their asthma, so they're going to the emergency room to get their asthma needs met and they are not getting on preventative medications. So I think education as far as many of the diseases and illnesses, diet nutrition, all of those things is the key that were gonna have to educate the general population about a lot of those things in order to make an impact on them. That includes
mental health, you know there's just not enough education for people to realize what resources are out there or how to access those resources.

Not just at the community level but at the provider level, my sisters a teacher here in town and she was at the doctor's office once and she heard the nurse put a patient in the room next to her as the doctor was coming into her room and she says to the doctor she's on public assistance or Medicaid or whatever it's called. Why would a doctor need to know that? That's something for the billing office unless there is a different treatment that you give to those people. So there has to be a mindset. We have to go beyond the days of seeing the low income as test dummies and we've seen it in in the medical field It's definitely a stain, you have the Tuskegee project work they were shooting the syphilis in the prisoners. That kind of you can only test an animal along before you know how something is going to react in a human and I think there is this mindset because you have, you know, and it's it, I don't know any providers but you have providers who have a just a very business, very different mindset but you've got to come back to the humane and the the humanity of why you join the field. These are people were talking about. Yes, there is junk food and there's other things. Why, because an Apple is two dollars but candy bars 3 for a dollar. So it's it again going back to that idea of being systemic it is it's got to be a change in the mindset and how we do everything not just one particular thing or another, because it is circular and it all starts at one place and no matter where that circle it starts, it still comes full circle. So, if people don't have the money to purchase the healthier items, then they're buying the bad items which leads them to medical conditions, which leads them to the medical system, which then gives the disparity in care because this person has Blue Cross Blue Shield and this person has the government, you know? So, it’s that mindset that has to change and we have to begin to look at one another as humans and not just as another number on a chart.

Thank you, thank all of you for your comments. There will be another section where you have an opportunity.

Before I get my question in of data. I see you get a lot of '02 census tracks up in Twin Lakes and that area. This area too as well. I didn't see anything on track 15,16, 17,18. One thing I have in terms of what's not in the room, is that that our business very well in one of the good and to all problems and trying to solve them. We look at the problem and try to address it as opposed to the symptoms and when we looking at the institutions and today we getting bombarded because election is coming up and will talk about who gets to control the resources in the state, the county and in the nation. The hospital have a lot to the people who control a lot of resources and we talk about that access to care and also looking at the over and under represented groups on. But we also need to be controlling resources or to be looking at how fair you gonna be with the resources not how my special interest groups gonna get only get taken care of. And that’s what too often happens, is that everybody is looking at all they can get my special interest as opposed to what’s fair and I can rest assured people were talking about is not in this room. The people we are talking about or say you want to represent are not voting. They are not represented on anybody's board will hear. And they are not employed at any of your institutions. So, you don’t even know what they think, how to get hold of them, how to access them. And so these are some issues that I think should be talked about should be addressed. Come November It will probably be some new people determining how to allocate the resources and it could mean the gap gets wider or could get closer, but probably need to pay attention to what's going on in who’s gonna be able to control the resources. That’s my comment for the night and I hope you can think about it anyway.