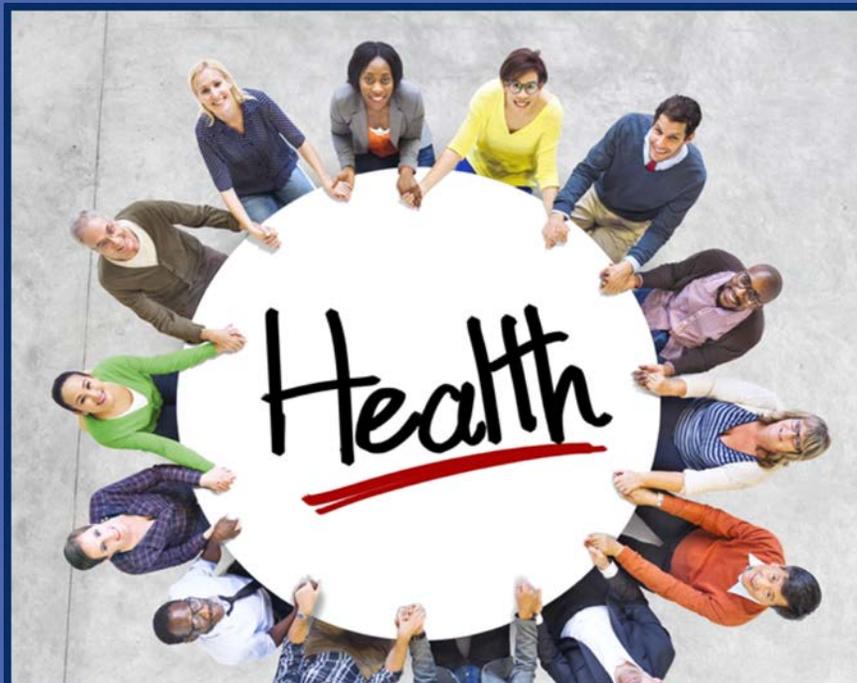


# Community Health Needs Assessment 2016

OSF ST. MARY MEDICAL CENTER

KNOX COUNTY

WARREN COUNTY



*Collaboration for sustaining  
health equity*

# ***KNOX & WARREN COUNTY COMMUNITY HEALTH-NEEDS ASSESSMENT***

The Knox County and Warren County Community Health-Needs Assessment (CHNA) is a collaborative undertaking by OSF St. Mary Medical Center to highlight the health needs and well-being of residents in Knox and Warren Counties. Through this needs assessment, collaborative community partners have identified numerous health issues impacting individuals and families in the Knox and Warren County region. Several themes are prevalent in this health-needs assessment – the demographic composition of the Knox and Warren County region, the predictors for and prevalence of diseases, leading causes of mortality, accessibility to health services and healthy behaviors.



Results from this study can be used for strategic decision-making purposes as they directly relate to the health needs of the community. The study was designed to assess issues and trends impacting the communities served by the collaborative, as well as perceptions of targeted stakeholder groups.

In order to perform these analyses, information was collected from numerous secondary sources, including publically available sources as well as private sources of data. Additionally, survey data from 1,170 respondents in the community were assessed with a special focus on the at-risk or economically disadvantaged population. Areas of investigation included perceptions of the community health issues, unhealthy behaviors, issues with quality of life, healthy behaviors, and access to medical care, dental care, prescription medications and mental-health counseling. Additionally, demographic characteristics of respondents were utilized to provide insights into why certain segments of the population responded differently.

Ultimately, the identification and prioritization of the most important health-related issues in the Knox and Warren County region were identified. The collaborative team considered health needs based on:

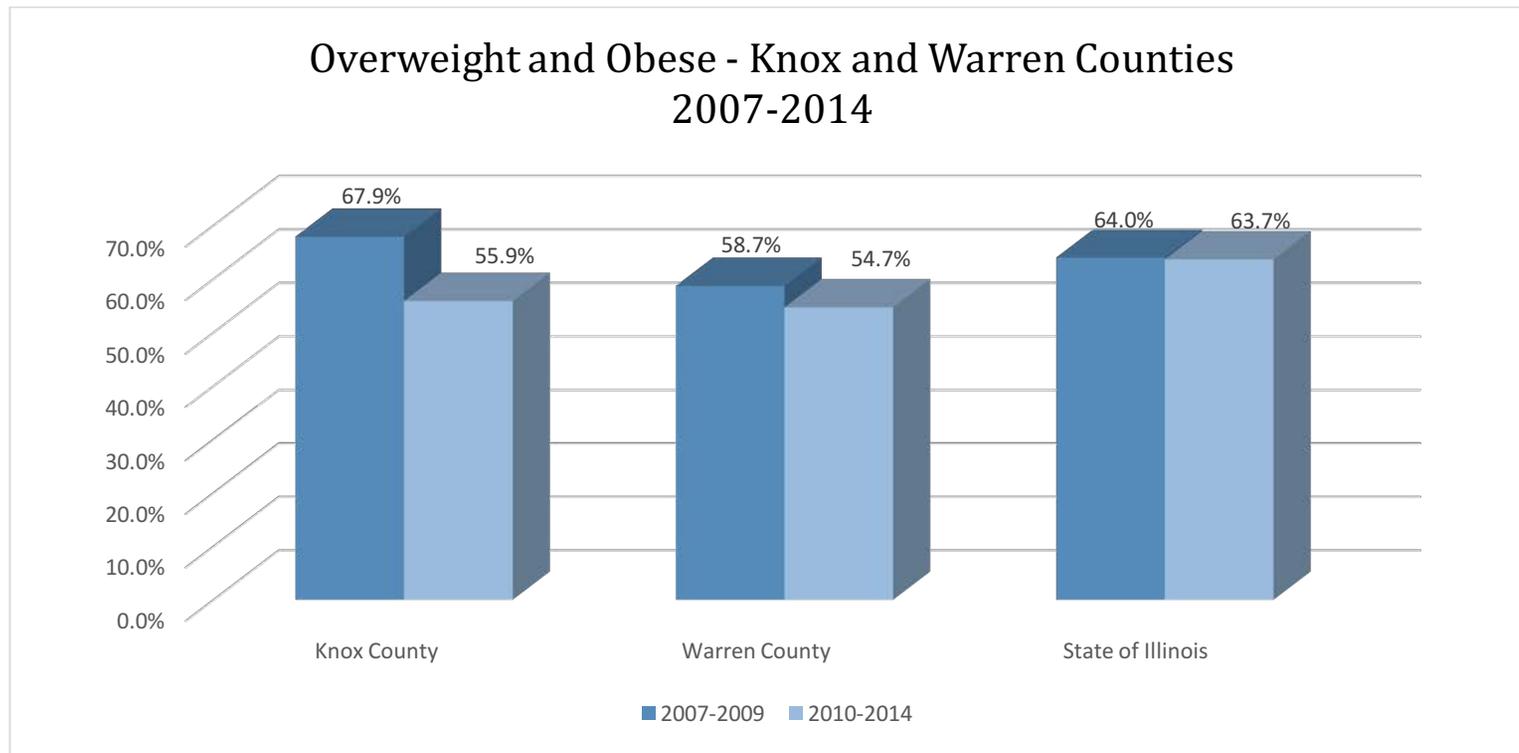
- (1) magnitude of the issue (i.e., what percentage of the population was impacted by the issue);
- (2) severity of the issue in terms of its relationship with morbidities and mortalities;
- (3) potential impact through collaboration.

**Using a modified version of the Hanlon Method, the collaborative team prioritized three significant health needs:**

- **Obesity**
- **Mental Health**
- **Access to Health Services**

## I. OBESITY

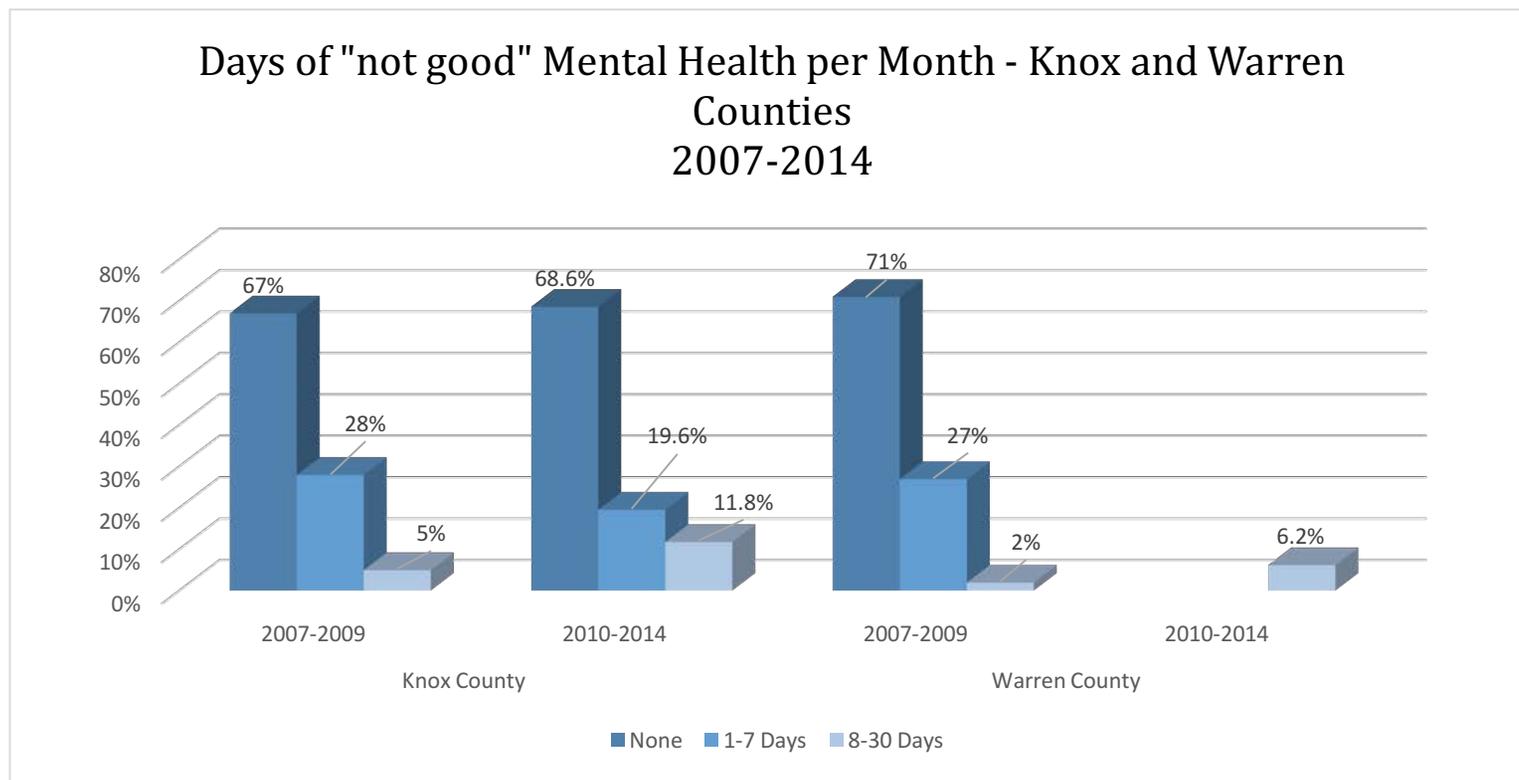
In both Knox and Warren Counties, the number of people diagnosed with obesity and being overweight has decreased from 2009 to 2014. Note specifically that the percentage of overweight and obese people in Knox County has decreased from 67.9% to 55.9% and the percentage of overweight and obese people in Warren County has decreased from 58.7% to 54.7%. Overweight and obesity rates in Illinois has also decreased from 2009 (64.0%) to 2014 (63.7%). While rates of obesity are lower than State averages, over half of the population is still overweight or obese.



Source: Illinois Behavioral Risk Factor Surveillance System

## II. MENTAL HEALTH

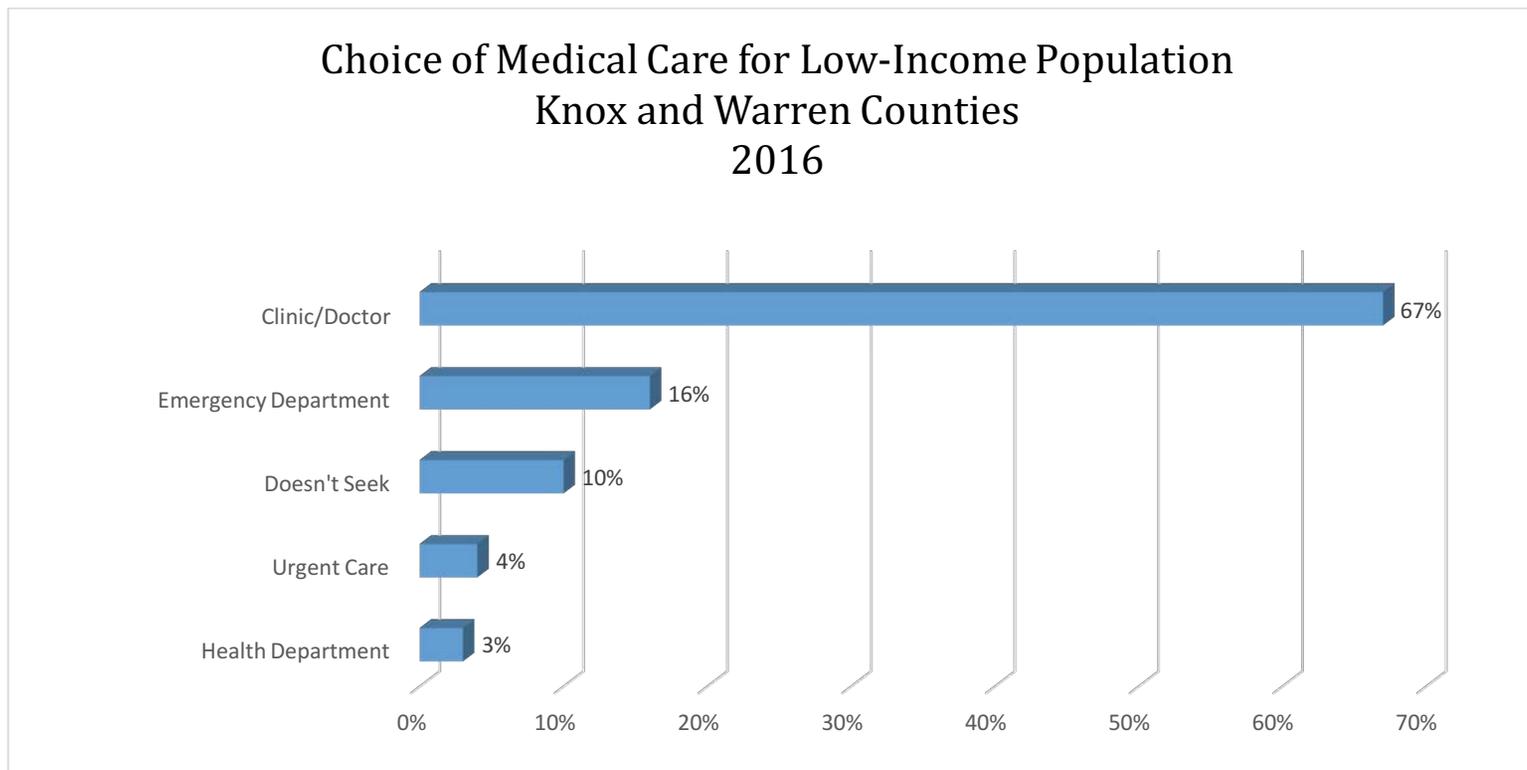
Approximately 28% of residents in Knox County reported they had experienced 1-7 days with poor mental health per month in 2007-2009, and 5% felt mentally unhealthy on 8 or more days per month for 2009. In 2010-2014, there was a moderate decrease in the number of people that reported poor mental health for 1-7 days; however, there was a significant increase in people that reported poor mental health 8 or more days per month to 11.8%. In Warren County, for 2010-2014, data are only available for feeling mentally unhealthy 8 or more days per month. Available data show an increase from 2% in 2009 to 6.2% in 2014.



Source: Illinois Behavioral Risk Factor Surveillance System

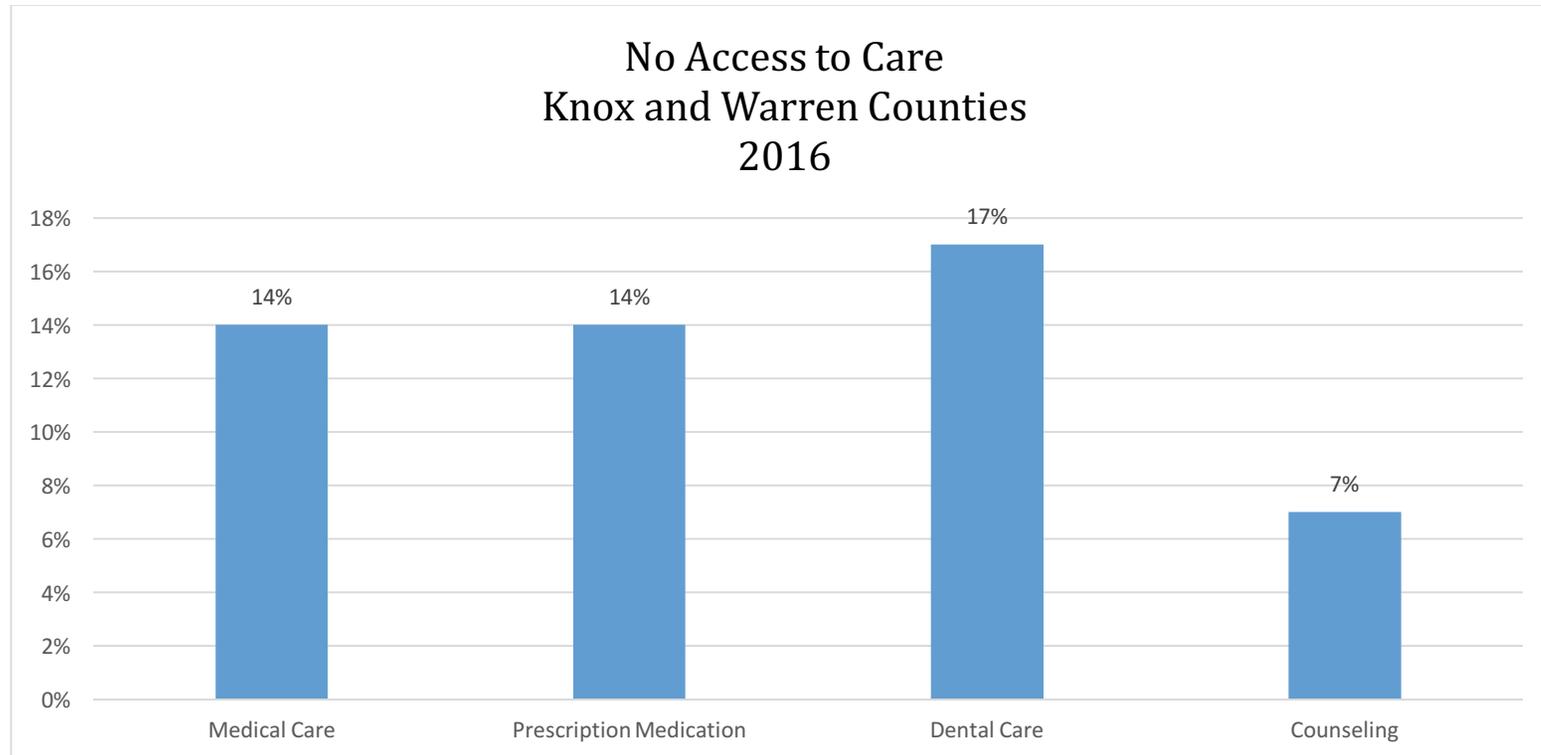
### III. ACCESS TO HEALTH SERVICES

For the low-income population, the emergency department was chosen 16% of the time as a primary source of medical care. Not seeking medical attention was chosen by 10% of the low-income population. Emergency departments tend to be used more often by men, and those with lower education and income. Not seeking medical care is more likely chosen by men and younger people.



Source: CHNA Survey

Additionally, survey results show that 14% of the general population did not have access to medical care when needed; 14% of the population did not have access to prescription medications when needed; 17% of the population did not have access to dental care when needed; and 7% of the population did not have access to counseling when needed. The leading causes of not getting access to health care when needed were no insurance or inability to afford a co-pay.



Source: CHNA Survey

## Collaborative Team

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