

CLINTON COUNTY  
COMMUNITY HEALTH NEEDS ASSESSMENT  
and  
COMMUNITY HEALTH PLAN  
2006 - 2011

Prepared by

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for

ILLINOIS DEPARTMENT OF PUBLIC HEALTH  
SPRINGFIELD, ILLINOIS

August 30, 2006

PRIORITIES

CORONARY HEART DISEASE  
LUNG CANCER  
UNINTENTIONAL INJURIES

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August 30, 2006

Illinois Department of Public Health  
525 West Jefferson Street  
Springfield, Il. 62761

RE: IPLAN Approval Letter

Dear Sirs:

The Clinton County Board of Health has reviewed and approved the Organizational Needs Assessment, the Community Health Assessment, and the Community Health Plan as submitted to your agency August 2006.

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Dr. Clinton Smith, D.C.  
Health Board President

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Date

## ORGANIZATIONAL CAPACITY

The Health Department conducted an organizational assessment. The Health Department went through a complete organizational capacity assessment was completed and a review of the past assessment weaknesses. Health Department staff felt some of the past weaknesses had not been corrected. The Health Department staff decided on 5 weaknesses we wanted to correct or improve over the next several years. The 2006 review found 50 strengths and 31 weaknesses. This is our list of the top weaknesses to be corrected or improved:

1. The Health Department should have a strategic short and long term plans.
2. The Health Department should develop a prepared presentation for informing the community and community groups about the Health Department and its role and authority in relation to the community's health.
3. The Health Department needs to collect and analyze information describing program administration and funding, program activities, work load, client characteristics and service costs to effectively evaluate program activities.
4. Employees should have structured, routine, group opportunities to discuss program methods and procedures, current levels of demand for services and quality of work issues with respective supervisors.
5. The Health Department needs a means of regular public communication, such as a regular newsletter or column in a community newspaper.

## **II. COMMUNITY HEALTH NEEDS ASSESSMENT**

### **A. PURPOSE STATEMENT AND BACKGROUND**

The purpose of the community health needs assessment is to assess the health status within the community. To identify community resources and bring those resources together to work toward a common goal for the total well-being of the community.

#### **Background Information:**

Local Health Departments have a responsibility to take a key role in the total well being of their communities. The local health departments should lead its community in an examination of local health problems and in the development of plans to overcome the problems. A community committee was developed with a representative of each community within the county. The committee members work along with the health department in identifying and assessing health problems of the county.

#### **Background:**

Clinton County was created December 27, 1824, from Washington, Fayette and Bound Counties. Clinton County was named for DeWitt Clinton, a distinguished lawyer, financier and statesman. A United States Senator and chief promoter of the Erie Canal. Clinton County is divided into fifteen municipal townships and covers 474.3 square miles. In the past agriculture was the leading industry, with its rich soil, plenty of timber, and water. Located in Clinton County is Carlyle Lake, the largest man-made lake in Illinois, covering 26,000 acres.

#### **Transportation Features:**

Interstate highways serving the community are I-57, I-70 and I-64. The distance to the nearest interstate is about 14 miles. Highways serving the community are State route 127, U.S. Rt. 50 and Rt. 160. There are no public forms of transportation. Railroads; The main lines of Burlington Northern and CSX follow Old Rt. 50 and Rt. 161. Airports; There are no public airports in Clinton County. The nearest commercial airport with national and international flights are at Mid-America, O'Fallon and Lambert Airport in St. Louis, which are within a 30 to 60 minute drive.

#### **Service Facilities**

The percent of Clinton County citizens who are 25 years old and older, who are not high school graduates is higher than the State's rate. There are 24 schools in Clinton County, with approximately 6,500 students in attendance. Kaskaskia College, in Centralia has an enrollment of 2,900. There are two private colleges located within a short distance, Greenville College and McKendree College. Southern Illinois University is about 45 miles from Clinton County.

Clinton County has one licensed full service hospital - St. Joseph in Breese. There are fifteen physicians; Family Practice, OB/GYN, Internal Medicine, Pediatrics, and General Surgery. There are several medical specialists from the St. Louis area providing out patient clinics at the hospital. Clinton County continues to be in a medical care health professional shortage area. There are eight Dentists and four Optometrists providing services in Clinton County.

There are five nursing homes and five pharmacies in Clinton County. There are numerous churches representing most religious denominations. The County Sheriff's office is responsible for many of the smaller towns and employs eleven deputies. Most towns have their own fire protection and rural areas covered by fire protection districts. The county has five ambulance service agencies, which are equipped with EMT's.

## B. COMMUNITY PARTICIPATION PROCESS

Prior to the re-certification process past members were contacted. Several members were no longer available. A new committee of sixteen members was formed from existing members and new members for the re-certification process. There were previously twenty members on the community committee. In July 1999 five additional members were added to make up a Tobacco Free Communities Coalition. Three members from the education field and 2 members appointed by area State Representatives. The mayors of each town were instrumental in the selection of key individuals from the community or organization they represent. Other members were solicited because of their involvement within the community. The members were instrumental in the community process.

### Members of the Committee and Organization Represented

Dave Erlinger	Assistant Regional Superintendent of Schools
Karen Muench	Instructor McKendree College
Gary Kennedy	Clinton County Farm Bureau
LaDean Scheurer	Clinton County COOP Extension Office
Janice Wiegmann	Instructor McKendree College
Donna Thole	Visiting Nurses association
Lillie Rowell	Retired Homemaker
Mike Kreke	Clinton County Sheriff
Kathy Heimann	St. Joseph Hospital
Denise Daum	Community Resource Center
Kellie Haar	Clinton County ITFC
Nancy Huels	Clinton County Health Department
Joan Goebel	Clinton County Health Department
Sandra Hohman	Clinton County WIC/FCM
Beth Finn	Central High School
Stacy Williams	Community Resource Center
Mary Rakers	Senator Watson's Office
Gloria Freels	Representative Granberg's Office

## **C. METHOD**

The Suggested Guidelines for IPLAN Re-certification was used to conduct the Community Health Needs assessment: IPLAN was the main method used in the community health needs assessment. The community and Board of Health, via the health department administrator and the media were informed the Health Department was conducting an assessment to identify health problems within the county.

On May 11, 2005 the Community Health Committee met to discuss the re-certification process as outlined in STEP 2. The 2001 IPLAN was discussed. The health problems identified by the previous committee and the four health problems identified were reviewed.

On October 19, 2005, the Community Health Committee met to discuss the Analysis of Health Priorities as outlined in Step 3 and Prioritize Community Health Problems as outlined in Step 4. Based on this information the Community Health Committee felt that the current health priorities Heart Disease, Lung Cancer and Motor Vehicle Accidents and Unintentional Injuries should be combined into Unintentional Accidents.

On March 31, 2006 the Community Health Committee met to discuss the Analysis the Community Health Problems (as outlined in Step 5), reviewed the Inventory of Community Health Resources (as in Step 6), and the Development of the Community Health Plan ( as in Step 7). Reviewed and changed the previous 2001 IPLAN Reports.

On June 8, 2006, the 2006 IPLAN Report and Health Department Organizational Capacity Report was presented to the Clinton County Health Board for approval and was approved.

## **D. Community Health Plan**

The purpose of the Community Health Plan is to improve the health status of Clinton County residents. To enhance the awareness and cooperation among community resources through implementation of programs to decrease the health problems identified and prioritized through the health needs assessment.

### **Background:**

Ten essential elements are important to a community health system. Local health departments provide some of these elements directly and assure that all services are provided, whether alone or by other health providers.

Local health departments have a unique oversight role regarding all of the essential elements. This sets them apart from other entities in the health system. The ten elements are:

#### **1. Conduct Community Diagnosis:**

Factors change over time, therefore, health departments must be ever aware of changes in the population, county resources, scientific advances, and health problems in the county, in order to identify assets, uncover problems and address needs.

#### **2. Preventing and Controlling Epidemics:**

Investigating and containing diseases and injuries, warning individuals of risks, provide screening and treatment, and taking preventive measures.

#### **3. Providing a Safe and Health Environment:**

Maintaining a clean and safe air, water, food and facilities to minimize the public's exposure to hazards.

#### **4. Measuring Performance, Effectiveness and Outcomes of Health Services**

Monitoring health care providers and the health care system, assuring competency in addressing issues which affect the public's health. To strive to assure maximum healthy conditions in the community.

#### **5. Promoting Health Lifestyles:**

Providing health education to individuals and communities, by effective use of communication techniques that promote accurate understanding of possible health threats to the community.

#### **6. Laboratory Testing:**

Identify disease agents which pose environmental threats and hazards to the public.

#### **7. Providing Targeted Outreach and Forming Partnerships:**

Assure access to services for all populations, in a manner which respects their individuality. Partnerships between health care providers promote a continuous flow of ideas, influences and cooperation.

8. Providing Personal Health Care Services:

Having the capacity to screen and monitor health problems which may be experienced by each individual, and making the proper referrals as necessary for specialized health care services. Emphases must be on primary and preventive care to decrease more complicated and advanced medical conditions.

9. Research and Innovation:

Healthy communities must be engaged in ongoing activities to continually improve health services.

10. Mobilizing the Community for Action:

Leadership to guide the development of partnerships and policies which improve community health for all of the population served.

## **E. RESULTS**

### **1. IPLAN Data (IPLAN Summary Data 2001 in Section V):**

The data system summary report includes statistics for demographic and socioeconomic characteristics, general health and access to care indicators, maternal child health indicators, infectious disease indicators and environmental/occupational injury control indicators (Section V) Some of the data is misleading, due to the size of the county, when comparing the statistics with state and national levels. Data on Mortality and Years of Potential Life Lost were combined to increase numbers to reflect a larger population size to provide a better comparison of data (Appendix J and K).

Additional data was obtained from the following sources: Illinois Hospital and Health Systems, Community Health Information System (CHIS), State Highway Safety Office, Lung Association, Illinois Department of public Health (Health Statistics), University of Illinois, Selected Population Housing Characteristics (Clinton County), and local State's Attorney, Sheriff, and Coroner's Offices.

#### **a. Demographics and Socioeconomic Characteristics:**

1. The population of Clinton County is 35,600 of which 63.6 percent is rural, as compared to the state population of 12,482,000, with 15.4 percent being rural (Appendix A, tables 1 & 2). Race distribution is mostly white, 3 percent black, and 1.6% Hispanic. (Appendix C, table 2)
2. The size and composition of the county's population often reflects the social and economic needs. There has been a steady increase in the population of Clinton County (Appendix B, table 1). There was a +5.0 percent of change in population from 1990 to 2000 (Appendix B, table 2).
3. The median age of Clinton County residents is slightly higher as that of the state in 2000 (Appendix C, table 1)
4. The county's poverty rate is lower than the state rate (Appendix C, table 4). The possibility of having a high number of dependent citizens may have a greater liability for the county. The young children need services including WIC, Immunizations, Family Case Management, and well baby checks. The older children need prevention programs in living healthy lifestyles. The elderly require prevention programs on chronic disease.
5. Clinton County's per capita personal income is higher than that of the State (Appendix C, table 3) The percent of Clinton County Families living in poverty in 2000 was 4.6 percent compared to the state's 9.2 percent (Appendix C, table 4).

#### **b. General Health and Access to Care:**

1. The crude mortality rate per 100,000 people in Clinton County was 851.1 compared to the State rate of 840.1 (Appendix F, Table 1)
2. Unintentional injuries, perinatal conditions and malignant neoplasms are major contributors to years of potential life lost to age 65 in Clinton County (Appendix D).

3. The leading causes of mortality in Clinton County for all races are heart disease, malignant neoplasms, and lung cancer (Appendix E, table 1).

4. According to the state, Clinton County residents are living in a primary care health professional shortage area (Appendix F, table 2). There are fifteen physicians, one full service hospital, county health department three rural health clinics and five nursing homes in Clinton County. Eighteen percent of Clinton County residents have received no medical physical in the past two years.

c. Maternal Child Health:

1. Infant mortality rate for Clinton County has been lower than the State wide average for the past several years. In 2001, there were 3 infant and 3 neonatal death unlike in 1998 when there was 1 infant deaths, and 1 neonatal death. (Appendix F, table 3)

2. There were 438 live births in Clinton County in 2004. Smoking is directly linked to low birth weight and infant mortality. The number of Clinton County mothers who smoked during pregnancy from 1993 to 2001 but, the rate is still higher than the State average. (Appendix F, table 4).

3. Prenatal care is vital for a healthy infant, 89.3 percent in Clinton County pregnant women received prenatal care in their first trimester in 2001. The year 2010 objective is for 90 percent of pregnant women to receive prenatal care in their first trimester. (Appendix G, table 1). The WIC and Family Case Management programs address the importance of prenatal care. Prenatal classes are offered through the local hospital.

d. Chronic Disease:

1. Clinton County mortality rates for Heart Disease, Coronary Heart Disease, Malignant Neoplasms, and Lung Cancer are higher than the state (Appendix E, table 1). Prevention through education of life style behavioral changes are necessary to bring Clinton County closer to the year 2010 objectives.

e. Infectious Disease:

1. There were no reported cases of syphilis or tuberculosis in Clinton County. Sexually transmitted diseases continue to increase while there were only 8 cases in 1997 by 1999 there were 28 cases.

2. There were seven reported cases of salmonella and 12 Campylobacter in 2005.

3. There was only one reported case of vaccine preventable disease (Chicken Pox) in 2005. Infectious Diseases is an area where under reporting or no reporting of cases occurs.

f. Environmental/Occupational Health and Injury Control:

1. Clinton County was above the 2001 state mortality rate for unintentional injuries and motor vehicle injuries. Unintentional injury and motor vehicle accidents are the leading causes of years of potential life lost to age 65 (Appendix D, Table 1).

2. In 2001 there was a lower percent of households in Clinton County with drinking water from

regulated supplies/private tested wells than the state . Public water supplies continue to be expanded across Clinton County and probably within 2 years the majority of Clinton County will have public water available.

3. In 2005, Clinton County Coroner reported that alcohol and non seat belt use cause the majority of Motor Vehicle Accident deaths. Driving Under the Influence Arrests and enforcement of seat belts laws have increased in Clinton County (Appendix I. table 3). Vehicle crash data indicates a small increase in crashes results in a large increase in personal injuries. (Appendix I table 2)

## F. PRIORITIES

The Three Health Priorities identified in 2006 are similar to the previous year Health Priorities. The committee was also concerned about the increase in Sexually Transmitted Diseases (Appendix N) and Kidney Disease (Appendix J). This was based on the analysis of data describing the health of the population and on the judgement of the community concerning the seriousness of the health problems, needs, ability to implement programs, and availability of resources.

### THREE PRIORITY HEALTH PROBLEMS

Coronary Heart Disease  
Lung Cancer  
Unintentional Injuries

---

The leading causes of Mortality in Clinton County:

2001	303	
Diseases of Heart	94	31%
Malignant Neoplasms	81	27%
Coronary Heart Disease@	77	25%
Lung Cancer@	24	8%
Cerebrovascular Disease	19	6%
Chronic Lower Resp Disease	18	6%
Colo-rectal Cancer@	16	5%
Septicemia	15	5%
Accidents	15	5%
Influenza & Pneumonia	9	3%

The leading causes of Mortality in Illinois

2001		
Diseases of Heart	30,827	29%
Malignant Neoplasms	24,674	24%
Coronary Heart Disease@	23,223	22%
Cerebrovascular Disease	7,195	7%
Lung Cancer@	6,760	6%
Chronic Lower Resp. Disease	4,756	5%
Accidents	4,027	4%
Diabetes Mellitus	3,085	3%
Colo-rectal Cancer@	2,723	3%
Influenza & Pneumonia	2,648	3%

@This is a subcategory of a preceding cause

The Leading Causes of Specific Years of Potential Life Lost:

Clinton County 2001

Malignant Neoplasms	220
Accidents	197
Motor Vehicle Accidents@	167
Firearms	133
Suicide	133
Perinatal Condition	129
Lung Cancer@	98
Diseases of Heart	80
Influenza & Pneumonia	71
Congenital Malformations	64

Illinois 2001

Accidents	80,731
Malignant Neoplasms	75,999
Diseases of Heart	61,568
Perinatal Conditions	47,689
Coronary Heart Disease@	39,589
Motor Vehicle Accidents@	36,679
Homicide	35,179
Firearms	34,289
Suicide	21,079
Congenital Malformations	18,311

@ This is a subcategory of a preceding cause.

## Community Plan Process

The Community Committee, using the nominal group process, identified four priority health problems. The nominal group process involved in committee members identifying health problems, listing those problems, collating and prioritizing the health problems in an orderly fashion. The four health problems identified, in order by the community committee are: Heart Disease, Lung Cancer, and Accidents. In the following text are some reasons why the health problems were identified as a concern in Clinton County.

Heart Disease is the second leading cause of mortality in 1993, 1998, and 2001 accounting for 31 percent (1993 Baseline: 36 percent) of total deaths compared to the State rate of 29 percent (Appendix E). Behavioral Risk Factor Survey data indicate that a higher percent of 25 to 44 year olds need a healthier lifestyle. Annual physical check ups and family health knowledge would improve their health.(Appendix J, table 1) Our goal was to reduce Heart Disease deaths to no more than 25 percent of total deaths by 2001 but, 2001 data indicates that we will not reach this goal. There does appear to be some progress in reducing Heart Disease over the past 8 years. This appears to be similar to CDC assessment that while an improvements were made, the Health People 2000 Objective will not be reached. Healthy People 2010 Target is 162 deaths per 100,000 population. Baseline 203 Heart Disease death per 100,000 in 1999 (age adjusted to year 2000) The 2010 Target is to see a 20 percent improvement. Educational programs on risk factor reduction such as smoking, proper nutrition, and physical activity need to be initiated. Clinton County has a high rate of elderly population which correlates with Heart Disease.

Lung Cancer accounts for 9 percent (1993), 8 percent (1998) and 8 percent (2001) of total deaths in Clinton County, compared to State rates 6, 7 and 6 percent (Appendix E). Our objective was to reduce Lung Cancer deaths to no more than 5 percent of Total Deaths. We will probably not reach this 2000 goal. Healthy People 2010 Lung Cancer target is 43.3 deaths per 100,000 population. Baseline: 55.5 Lung Cancer deaths per 100,000 population occurred in 1999 (age adjusted to the year 2000 standard population) Target is a 22 percent improvement. The Healthy People 2010 Objective, in reducing the initiation of cigarette smoking by children, adolescents, and young adults, aged 12 - 17 , to a rate of 81.2 per 1000 persons. Baseline was 100.1 per 1000 persons 2002. The Healthy People 2010 Objective to increase adult smoking cessation to 75 percent. Baseline 41 percent adult smokers age 18 and older stopped smoking for 1 day or longer because they were trying to quit in 1998. Educational programs need to be in the entire school system, with focus on prevention. CDC recently reported the initiation of cigarette smoking by our youth is higher now than a decade ago. Educational programs on smoking cessation need to be presented and more focus on the benefits of smoking cessation. Currently the Illinois Tobacco Free Communities Grants will greatly help reach this goal but, only if funding continues.

Unintentional Injuries in Clinton County is the eight leading cause of mortality (Appendix E), and the leading cause of specific years of potential life lost to age 65 (Appendix D). Motor Vehicle Fatalities is the second leading cause of specific years of potential life lost to age 65 in Clinton County. The Clinton County Coroners Reports continue to indicate that half of the traffic fatalities

are alcohol related (Appendix M). Motor Vehicle Accidents, Healthy People 2010 target is 8.0 deaths per 100,000 (1999 Baseline was 14.7 deaths per 100,000). Non-use of restraints such as car seat belts are a contributing factor for motor vehicle fatalities. Seatbelt use, Health People 2010 established a target of 92 percent use (1998 Baseline was 69 percent of the total population used safety belts in 1998). This would be a 33 percent improvement. Agriculture (Farming) ranks eighth among occupations and Dairy Farming is a major industry in Clinton County. Lake Carlyle is also a major attraction for boaters in Clinton County. Over the past 4 years there have been 6 drownings at Lake Carlyle (Appendix H, table 3) Health People 2010 established a Unintentional Injuries target of 17.1 deaths per 100,000. (Baseline was 35.3 deaths per 100,000 in 1992, age adjusted to year 2000 standard population. . To met the Healthy People 2010 Objective educational programs need to be presented to adults on prevention and alcohol abuse with greater. Community involvement and awareness.

## **G. Summary**

The Community Health Plan is an initiative to improve the health status of Clinton County residents. To improve the ability of the Clinton County Health Department to provide leadership in articulating the county's major health needs. Because improvements in public health require active community ownership and commitment, the Clinton County Health Department must work in partnership with community agencies, community leaders, interest groups and representatives of high risk population groups.

The Community Health Advisory Committee completed the re-certification of the Clinton County Community Health Plan in August 2006. In 1999, the advisory committee also became the Tobacco Free Communities Committee. The Health Advisory Committee reviewed the 2001 Clinton County Community Health Plan, I PLAN Summary Data and other Clinton County information. Upon review of this information the advisory committee decided that the health priorities would be Heart Disease, Lung Cancer and Unintentional Injuries in 2006.

Heart Disease is the second leading cause of mortality in Clinton County. Heart Disease accounts for the largest proportion of Heart Disease. It is estimated that 12 million people in the United States have Heart Disease. Many factors of Heart Disease can be controlled by changes in lifestyle. Our goal is to provide health screening and education to residents on risk factors of Heart Disease and to promote healthy life styles, thus reducing mortality rate of Heart Disease (Appendix D, E, J and L). Educational programs will be offered to the community and in schools on reducing the risk factors of Heart Disease.

Lung Cancer is the fourth leading cause of mortality in Clinton County. Lung Cancer is the leading cause of cancer deaths in the United States and the most common type of cancer world wide. The major risk for lung cancer is cigarette smoking. Our goal is to provide education to residents on the risk factors of lung cancer and to promote health life styles , thus reducing the mortality rate of lung cancer (Appendix D, J and L). Smoking cessation classes are offered at the hospital and will be soon offered at the health department. Continuation of the Illinois Tobacco Free Communities Grants helped to increase educational programs throughout Clinton County schools. We hope funding for the anti-tobacco program will continue.

Unintentional Injuries in Clinton County is the eighth leading cause of mortality and the leading cause of specific years of potential life lost at age sixty five. Alcohol related automobile accidents, not wearing safety belts, or accidents at work or home greater safety is needed. Motor Vehicle Accident Fatalities is the second leading cause of specific years of potential life lost at age sixty-five. In Illinois, 21 percent of all accidents are alcohol related. In Clinton County 12.5 percent of accidents in Clinton County are alcohol related but, 50 percent of all accident fatalities are alcohol related (Appendix M). Alcohol related crashes, injuries and fatalities cost society over \$46 billion in lost productivity, medical costs, property damage, and other direct expenditures annually. Seat belts and proper child restraints can save lives if used properly. Lake Carlyle is a major summer attraction for Clinton County. Boating accidents and drownings could be prevented with life vests, boater education

and less alcohol. Our goal is to heighten community awareness of these problems and offer educational programs

CLINTON COUNTY  
COMMUNITY HEALTH PLAN  
2006 - 2011

Priorities:

CORONARY HEART DISEASE

LUNG CANCER

UNINTENTIONAL INJURIES

PREPARED BY

MICHAEL MCMILLAN, MPA/LEHP  
PUBLIC HEALTH ADMINISTRATOR  
CLINTON COUNTY HEALTH DEPARTMENT

## **A. Priority ONE - CORONARY HEART DISEASE**

### Rationale:

Between 1987 and 1996 the death rate for Coronary Heart Disease declined by 22.2 percent and Stroke declined by 13.2 percent. Despite these declines CHD and Stroke will not reach the Healthy People 2000 objectives. High blood cholesterol is a major risk factor for CHD that can be modified. High blood pressure is known as the "Silent Killer" and remains a major risk factor for CHD, Stroke and Heart Failure. Of the 50 million adults who have high blood pressure only about 73 percent are aware that they have high blood pressure. Numerous studies have shown that lifestyle intervention can help prevent high blood pressure and reduce blood cholesterol levels. Lifestyle interventions include: stop cigarette smoking, greater physical activity, maintaining a healthy weight and proper nutrition. Overweight and obesity increase risks for high blood pressure, high blood cholesterol, type II diabetes, CHD, Stroke and other diseases. Coronary Heart Disease and Stroke continue to kill as many Americans as all other diseases combined (Healthy People Review 1998/1999). People age 25 to 50 need to be aware of the causes of Heart Disease and have regular physical checkup with their physician. The 2004 BRFSS that only about 71.7 percent of Clinton County residents had visited a doctor in the past 12 months. Males had a lower rate (66.6 percent) than females (71.7 percent). Only 66.3 percent of the 25 to 44 age group had seen a doctor in the past 12 months.

In 1993 Clinton County had 107 Heart Disease deaths ( 36 percent of all deaths), 1998, 117 Heart Disease deaths ( 33 percent of all deaths) and in 2001, 94 Heart Disease deaths (31 percent of all deaths) 2001 was above the State average of 29 percent. (IPLAN, 1993, 1998 and 2001). Heart Disease is the leading cause of Mortality over the past 8 years (Appendix D and E). Heart Disease appeared to decline over the first several years but when data is combined it appears to be on the increase ( Appendix K )

In 1993, the cost associated with medical care, lost earnings, and the lost productivity due to CHD were expected to total \$51.6 billion dollars. Today there are about 12 million Americans who currently have CHD.

The 1996 objective was to reduce Heart Disease deaths to no more than 25 percent of the total deaths by year 2001. (Clinton County Baseline: 107 Heart Disease deaths in 1993). In 1998 and 2001 there were 117 and 94 Heart Disease deaths. It appears that the 1996 target (80.5 deaths) will not be reached . The Health People 2010 Target is 162 Heart Disease deaths per 100,000 population or a 20 percent reduction.

Based on Healthy People 2010, Clinton County's long term objective is to have no more than 74.4 Heart Disease deaths by 2010.

**Goal:**

To provide education to residents of Clinton County, especially in the 25 to 50 age group, on risk factors of Heart Disease, thus promoting a healthy life style, and reducing mortality rates for Heart Disease.

**RESOURCES**

Heart Association  
Hospital  
Schools  
Media  
Health Department  
Cooperative Extension Service  
Illinois Department of Public Health  
Clinton County Park and Recreation

**BARRIERS**

Lack of Transportation  
Lack of Funding

# HEALTH PROBLEM ANALYSIS WORKSHEET

Indirect Contributing Factors  
 Image  
 Advertising  
 Peer Pressure

Direct Contributing Factor  
 Age

Indirect  
 Contributing Factors  
 Levels of Nicotine in Tobacco  
 Social Pressure in Smoke  
 Frequency of Use

Direct Contributing Factor  
 Physical Addiction

Risk Factor  
 Smoking

*chances here / Herededitary*

Indirect Contributing Factors  
 Second Hand Smoke  
 Indirect Contributing Factor  
 Lack of Knowledge  
 Limited Resources  
 Finances

Direct Contributing Factor  
 Environmental

Direct Contributing Factor  
 Poor Food Choices

Health Problem  
 Heart Disease

Risk Factor  
 Diet

Indirect Contributing Factors  
 Fast Pace Life Style  
 Deadlines  
 Indirect Contributing Factors  
 Poor Self Control  
 Advertising  
 Easy Access

Direct Contributing Factor  
 Stress

Direct Contributing Factor  
 Over Consumption

# HEALTH PROBLEM ANALYSIS WORKSHEET

Health Problem Heart Disease	Risk Factor Inactivity	Direct Contributing Factor Sedentary Life Style	Indirect Contributing Factors Occupation Age Lack of Motivation
---------------------------------	---------------------------	--	--

## HEART DISEASE - OUTCOME OBJECTIVE

Reduce Heart Disease deaths to no more than 85 Heart Disease deaths by year 2008. (Clinton County Baseline: 107 Heart Disease deaths in 1993). Healthy People 2010 Target is 162 Heart Disease deaths per 100,000 population or a 20 percent reduction in Heart Disease deaths. Clinton County long term target is no more than 74.4 Heart Disease deaths by year 2010.

## IMPACT OBJECTIVE AND INTERVENTION STRATEGY

I. By 2008, increase access by 100 percent blood cholesterol tests provided to Clinton County residents and enhance their awareness of elevated cholesterol levels, and the proper action in the reduction of blood cholesterol to recommended levels. This will be promoted by the health department. (Clinton County Baseline: 51 Cholesterol tests in 2000)

A. The Clinton County health organizations will continue to offer blood pressure and cholesterol screening, targeting the adult population. Informational handouts will be available to interested recipients. This will be promoted through the Clinton County health organizations, businesses and media.

B. The Hospital and Cooperative Extension Center will continue to offer free informational meetings to the adult population on good nutritional practices and the importance of blood cholesterol screening and stress reduction. The programs have and will continue to be offered by the hospital and cooperative extension office.

Resources and sources of funding: Hospital and Extension Office will fund their programs. The health department will seek funding through the Illinois Health and Wellness Initiative grant. Handouts are received from the American Heart Association.

## **B. PRIORITY TWO - LUNG CANCER**

### Rationale:

The major risk factor for lung cancer is cigarette smoking. An estimated 87 percent of Lung Cancer cases are attributed to cigarette smoking. Environmental exposures to second hand smoke causes an estimated 3,000 non-smoker lung cancer deaths. The Healthy People 2000 Objective for total cancer deaths was achieved by 1995. Lung Cancer deaths declined for the first time in 50 years. Improvements were also observed in cancer risk factors regarding tobacco use. None the less, Lung Cancer is the leading cause of cancer deaths in the United States, accounting for more than 440,000 deaths per year among adults. This represents more than 5.6 million years of potential life lost (CDC, Cigarette Smoking Attributes 2003). Direct costs related to smoking total more than \$92 billion per year. Primary prevention through smoking reduction has tremendous potential to reduce Lung Cancer deaths. Smoking cessation drastically reduces the risk of lung cancer. After ten years of abstinence from smoking, the ex-smoker's risks of Lung Cancer is reduced to half of a continuing smoker.

Smoking among adults declined steadily from the mid 1960's through the 1980's, however, smoking among adults appears to have leveled off in the 1990's. The national rate of smoking among adults in 2003 was 21.6 percent, 24.1 percent men and 19.2 percent women. In 2004 Clinton County adult smoking rate was 19.6 percent , 18.5 percent males and 24.7 females. ( Appendix J BRFSS ) In Clinton County, lung cancer ranked fourth in total deaths in 1993, 1998 and 2001. Lung Cancer was 8 percent of the total deaths and attributed to 98 years of potential life lost to age 65, in 2001. (Appendix D and E). In 2001, Clinton County, 14.9 percent of pregnant women smoked and 15.8 percent smoked in 1998. (Appendix F, table 4)

A major concern is the number of teenage smokers. Every day, more than 4000 young people (aged 12 - 17) try cigarettts for the first time. (CDC 2005) The average age at which smokers try their first cigarette is 14 ½ years and almost 70 percent have become regular smokers by age 18. (CDC 1994). Prevention of tobacco use among youth is critical to the overall goal of the reduction in smoking. Tobacco use among adolescents increased in the 1990's but, declined since that time. Currently High School smoking rates have dropped to 22.3 percent in 2004. (CDC 2005) If current tobacco use patterns continue, an estimated 5 million persons under age 18 will die prematurely form a smoking related disease.

The more Second Hand Smoke (ETS) you are around the greater your health problems. Each year ETS causes approximately 3000 Lung Cancer deaths and 35,000 - 62,000 Heart Disease deaths in adult non-smokers each year. (American Lung Association) Second hand smoke is especially harmful to young children. ETS is responsible for between 150,000 to 300,000 lower respiratory tract infections in infants and children under 18 months of age. This results in between 7500 to 15,00 hospitalizations and 1900 to 2700 Sudden Infant Death Syndrome deaths in the United States. ( American Lung Associations).

The 1996 objective was to reduce lung cancer deaths by 5 percent of total deaths by 2001. (Clinton County Baseline: 29 lung cancer deaths in 1998). In 2001 there were 24 Lung Cancer death or a reduction of 17 percent. The Healthy People 2010 Target is 43.3 deaths per 100,000 population. Healthy People 2010 objective is to reduce Lung Cancer Deaths by 12 percent. (Baseline: 55.5 lung cancer deaths per 100,000 population occurred in 1999 - or an improvement of 22 percent.

Based on Healthy People 2010, Clinton County's long term objective is to have no more than 20 Lung Cancer Deaths by 2010.

Goal: To provide education to the citizens of Clinton County on the risk factors of Lung Cancer. To promote healthy lifestyles, thus reducing the mortality rate of Lung Cancer in Clinton County.

**RESOURCES**

Lung Association  
Cancer Society  
Schools  
Hospital  
Health Department  
Media  
Work Sites  
Illinois Department of Public Health  
Community Resource Center  
Law Enforcement

**BARRIERS**

Lack of Funding  
Lack of Interest

# HEALTH PROBLEM ANALYSIS WORKSHEET

Indirect Contributing Factor  
Advertising  
Image  
Peer Pressure

Direct Contributing Factor  
Age

Indirect Contributing Factor  
Nicotine  
Pleasure

Direct Contributing Factor  
Addiction

Risk Factor  
Smoking

Indirect Contributing Factor  
Second Hand Smoke

Direct Contributing Factor  
Environment

Health Problem  
Lung Cancer

Indirect Contributing Factor  
Family  
Work Place  
Public Places

Direct Contributing Factor  
Second Hand Smoke

Indirect Contributing Factor s  
Pesticides/Herbicides  
Burning/Smoke  
Auto Emissions

Direct Contributing Factor  
Exposure to Pollutants

Risk Factor  
Environment

### Lung Cancer - Outcome Objective

Reduce Lung Cancer deaths to no more than 22 by 2008. (Clinton County Baseline: 29 Lung Cancer deaths in 1998). Healthy People 2010 Objective is to reduce Lung Cancer mortality to no more than 44.9 deaths per 100,000 population or a 22 percent improvement by 2010. Clinton County long term objective is no more than 20 lung cancer deaths by 2010.

### Impact Objective and Intervention Strategy

I. By 2008, reduce the initiation of cigarette smoking by adolescents (grades 9 - 12) so that no more than 25 percent have become regular smokers by age 20. (Youth Study Substance Abuse : 28.4 percent of youths had become regular smokers by ages 20 - 24 in 1998). Healthy People 2010 Target is 16 percent.

A. By 2008, increase tobacco use prevention in curricula in elementary, middle and secondary school health education. Educational programs to be presented by the Community Resource Center and Health Department. Educational programs will conduct pre and post testing. A yearly survey of tobacco use among adolescents will be a joint venture by the community resource center, schools, hospital, and health department.

Resources and source of funding: Schools, law enforcement, Community Resource Center will provide education. Health department will seek grant funding from State Illinois Tobacco Free Communities for health education.

II. By 2008, Increase smoking cessation among the adult population. (Clinton County Baseline: 26.1 percent of Clinton County adults were regular smokers in 1998) Healthy People 2010 Target is 75 percent quit attempts by adults. Baseline 41 percent adult smokers aged 18 and older stopped smoking for 1 day or longer because they were trying to quit in 1998.

A. By 2006, the health department will initiate greater media attention to the Illinois Tobacco Quit Line. Increase media awareness in physician, dentists and other stores to promote the Illinois Tobacco Quit Line.

Resources and source of funding: The Hospital will fund their program. Health Department will seek funding from State Illinois Tobacco Free Communities for smoking cessation.

## **C. PRIORITY THREE - UNINTENTIONAL ACCIDENTS**

### Rationale:

Unintentional injuries is the eighth leading cause of mortality and the leading cause of years of potential life lost to age 65 in Clinton County (Appendix D and E).

Illinois saw a slight increase in workplace fatalities of 208 in 2004. The record low was 190 in 2002 and a record high was 262 in 1996. (IDPH 2006) It is estimated that 60 - 70 percent of farming injuries go unreported. In 1998 there were 900 cases of injuries and illnesses per 10,000 full time workers in the agriculture, forestry and fishing industry.

In 2002 Illinois had a motor vehicle fatality rate of 11.2 per 100,000 population with an estimated economic cost of \$8.98 billion dollars.. Alcohol was related to 46 percent of these deaths and 37 percent were related to speeding. (NHTSA 2002) According to the County Coroner 50 percent of Clinton County motor vehicle deaths are alcohol and or non use of seat belt related (Appendix M).

Traffic accidents remain the leading cause of injury-related deaths for persons age 5 - 33. According to Illinois Department of Transportation an estimated 2,000 motorists lives were saved simply because they buckled up. It is projected that 80 additional lives saved, almost 2,700 injuries avoided and \$150 million dollars cut from health care costs each year if safety belt use increased from the current 64 percent to 75 percent (IDOT, 2001).Thirty seven percent of all occupants killed are unrestrained by safety belts. Alcohol-related highway crashes are the leading cause of death for adolescents and young adults in the United States. (Appendix I, table 2 and 3) Young adult drinking drivers are the most resistant to changing impaired drinking behavior. Over the past 10 years, the number of underage drunk drivers has decreased by 40 percent. In comparison, the number of 21 - 34 year old impaired drivers has only changed by 3.7 percent.

In Illinois 87 percent of high school seniors have used alcohol. Approximately 2/3 of teenagers who drink report they can buy their own alcoholic beverages. Use of alcohol and other drugs are associated with the leading cause of death and injury among teenagers and young adults. Local law enforcement arrested 84 DUI's in Clinton County (Appendix I table 3).

In 2004 the majority of the 42,636 people who died on the Nations Highways, 75 percent were occupants in passenger vehicles and the majority (55 percent) killed were unrestrained. (NHTSA 2006). Each year, motor vehicle crashes injure or kill more children than any disease and most of these incidents could have been prevented by the simple act of using child safety seats. Child safety seats reduce the risk of death in a motor vehicle crash by 71 percent. Safety belts reduce the risks of fatal or serious injury to front seat passengers by 45 - 50 percent. In 2005, the survey of law enforcement agencies in Clinton county reported issuing 259 citations for failure to wear seat belts. Percent of unrestrained passenger vehicle occupants killed in the last 5 years (2000 to 2004) decreased by only 5 percentage points.

Boating accidents continue to show significant improvement over the past 6 years (1996 - 2001) Indications are that many of those that died may have survived if they had been wearing life jackets.

The Healthy People 2010 objective is to reduce Unintentional Injury Deaths to 17.1 per 100,000 population. (Baseline: 35.3 deaths per 100,000 in 1992 (age adjusted to year 2000 standard population) . Clinton County baseline 17 in 1998. Clinton County needs to reduce Unintentional Injury Deaths to no more than 6.24 by 2010

**GOAL:** Increase community awareness on risk factors contributing to unintentional accidents.

**RESOURCES**

Law Enforcement  
Schools  
Illinois Department of Transportation  
Community Resource Center  
Hospital  
Health Department  
Community Organizations  
Illinois Department of Public Health  
AA Group  
WIC/FCM  
U.S. Army Corp of Engineers  
Farm Bureau  
Cooperative Extension Office  
University of Illinois  
Ambulance Service  
4-H Clubs

**BARRIERS**

Social/Cultural Habit  
Historical Bias  
Lack of Community Interest  
Lack of Knowledge

# HEALTH PROBLEM ANALYSIS WORKSHEET

<p>Indirect Contributing Factors Peer Pressure Low Self Esteem Desire for Acceptance</p>	<p>Direct Contributing Factor Under Age Consumption</p>	
<p>Indirect Contributing Factors Lack of Enforcement Media Advertising</p>	<p>Direct Contributing Factor Accessibility</p>	<p>Risk Factor Alcohol Related Injuries</p>
<p>Indirect Contributing Factors Social Habits Cultural Acceptability</p>	<p>Direct Contributing Factor Irresponsible Consumption</p>	<p>Health Problem Unintentional Accidents</p>
<p>Indirect Contributing Factors Lack of Knowledge Fatigue Carelessness Inappropriate age/skill</p>	<p>Direct Contributing Factor New Equipment/Vehicle</p>	
<p>Indirect Contributing Factors Improper Clothing Improper use Protection Improper Ventilation</p>	<p>Direct Contributing Factor Lack of Protection/Supervision</p>	<p>Risk Factor Lack of Training</p>
<p>Indirect Contributing Factor Unwillingness to wear Unwillingness to Obey Laws Lack of Enforcement</p>	<p>Direct Contributing Factor Resist Governmental Dictate</p>	

## UNINTENTIONAL ACCIDENT FATALITIES OUTCOME OBJECTIVE

By year 2008 reduce deaths from Unintentional Injuries to 12.  
( Baseline: 17 accident deaths in 1998)

## IMPACT OBJECTIVE AND INTERVENTION STRATEGY

I. By 2008 maintain a 75 percent safety belt use among adult drivers. (Behavioral Risk Factor Surveillance System, Baseline: 69 percent of total population used safety belts in 1998). Healthy People 2010 target is to see a 33 percent improvement by year 2010.

A. The health department, community coalition and law enforcement will continue to work together to heighten the awareness of the importance of using seat belts. The law enforcement agencies will present yearly evaluations of citations issued.

II. By 2008, maintain a 92 percent usage of infant and child car seats. (Behavioral Risk Factor Surveillance System, Baseline: 92 percent children 4 and under used child restraints in 1998)

A. Continue to provide education on restraints usage in the WIC and Family Case Management program.

B. Provide information to residents needing infant and child car seats. Resources, law enforcement, WIC/FCM programs, and hospital.

III. By 2008, reduce Clinton County unintentional accident deaths by 25 percent.

A. Initiate safety programs, targeting youth and young adults on a variety of topics and how to effectively deal with injuries. Program will be presented through the cooperation of the University of Illinois, Clinton County Farm Bureau, U.S. Corp of Engineers, Clinton County Cooperative Extension Office, area Ambulance Services and/or a demonstration farm. A yearly report will be presented on the number of programs presented and attendance numbers.

Resources and source of funding: Clinton County Farm Bureau and Clinton County Cooperative Office will provide the programs. Resources: Health Department, Hospital, Schools, EMT's, ambulance services, U.S. Army Corp Engineers and media.

Various agencies in Clinton County will work together to heighten public awareness on a variety of safety issues.

attendance numbers.

Resources and source of funding: Clinton County Farm Bureau and Clinton County Cooperative Office will provide the programs. Resources: Health Department, Hospital, Schools, EMT's, ambulance services, U.S. Army Corp Engineers and media.

Various agencies in Clinton County will work together to heighten public awareness on a variety of safety issues.

**V. APPENDICES**

Appendix A

Table 1

Population

<u>Year</u>	<u>Clinton County</u>	<u>Illinois</u>
1993	34,800	11,697,000
1998	35,800	12,045,000
2001	35,600	12,482,000

---

(PLAN data System Summary Report, 2001)

Table 2

Percent of Population Rural

<u>Year</u>	<u>Clinton County</u>	<u>Illinois</u>
1993	63.6	15.4

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(IPLAN Data System Summary Report, 1993)

32  
Appendix B

Table 1  
Population

<u>Year</u>	<u>Clinton County</u>	<u>Illinois</u>
1960	24,029	10,081,158
1970	28,315	11,113,976
1980	32,617	11,426,518
1990	33,944	11,430,602
1998	35,800	12,045,000
2000	35,535	12,419,293

(U.S. 2000 Census Data)

Table 2  
Percent of Change Population

<u>Year</u>	<u>Clinton County</u>	<u>Illinois</u>
1960-1990	+ 41.3	+13.4
1980-1990	+ 4.1	+ 0.4
1990-2000	+ 5.0	+ 9.0

(U.S. Census Data 2000)

Table 3  
Ratio of Medicaid Enrollees to Medicaid Physician Vendors

	<u>Clinton County</u>	<u>Illinois</u>
Total	(195) 8:1	(74) 3:1

(IPLAN Data Summary Report, 2001)

33  
Appendix C

Table 1

Median Age

<u>Year</u>	<u>Clinton County</u>	<u>Illinois</u>	<u>US</u>
1990	32.8	32.8	32.9
1997	34.4	34.4	34.9
2000	36.6	34.7	

(U.S. Census 2000)

Table 2

Ethnic Distribution

<u>Total Populations</u>	<u>Clinton County</u>	<u>U.S.</u>
Males	51.6%	49.1%
Females	48.4%	50.9%
White	94.2%	75.1%
Black	3.9%	12.3%
Hispanic	1.6%	12.5%

(U.S. Census 2000)

Table 3

Per Capita Personal Income

	<u>Clinton County</u>	<u>Illinois</u>
1993	18,600	22,560
1998	22,582	29,853
2000	44,618	23,104

(U.S. Census 2000)

Table 4

Percent of population in Poverty & Disabled

	<u>Clinton County</u>	<u>U.S.</u>
Individual below Poverty	2138 6.4%	12%
Families below Poverty	433 4.6%	9.2%
Disabled	5087 16.4%	19.3%

(Fact Finder Census 2000)

## Appendix D

Cause Specific Years of Potential Life Lost At Age 65

<u>Cause</u>	<u>Clinton County</u>		<u>Illinois</u>	
		<u>1993</u>		<u>1993</u>
Malignant Neoplasms		316	Unintentional Injuries	86,868
Perinatal Conditions		259	Malignant Neoplasms	84,657
Unintentional Injuries		170	Heart Disease	66,871
Heart Disease		164	Perinatal Conditions	54,177
Motor Vehicle Accidents		150	Firearms	49,259
Suicide		150	Homicide	48,060
Congenital Anomalies		136	Coronary Heart Disease	43,300
Coronary Heart Disease		95	Motor Vehicle Injuries	40,119
Lung Cancer		71	HIV Infection	32,552
Firearms		44	Congenital Anomalies	28,604
<hr/>				
		1998		1998
Unintentional Injuries		444	Unintentional Injuries	80,541
Motor Vehicle Accidents		239	Malignant Neoplasms	77,770
Malignant Neoplasms		237	Heart Disease	64,303
Heart Disease		199	Perinatal Conditions	49,440
Coronary Heart Disease		132	Coronary Heart Disease	42,124
Fires and Burns		85	Firearms	39,524
Lung Cancer		58	Homicide	38,765
Lymph & Hemato Cancer		54	Motor Vehicle Accidents	37,045
Nephritis, etc		41	Congenital Anomalies	22,709
Drowning		30	Suicide	20,491
<hr/>				
		2001		2001
Malignant Neoplasms		220	Accidents	80,731
Accidents		197	Malignant Neoplasms	75,999
Motor Vehicle Accidents		167	Diseases of Heart	61,568
Firearms		133	Perinatal Conditions	47,689
Suicide		133	Coronary Heart Disease	39,679
Perinatal Conditions		129	Motor Vehicle Accidents	36,679
Lung Cancer		98	Homicide	35,179
Diseases of Heart		80	Firearms	34,289
Influenza & Pneumonia		71	Suicide	21,079
Congenital Malformations		64	Congenital Malformations	18,311

(IPLAN Data System Summary Report, 1993 , 1998 and 2001)

## Appendix E

Leading Causes of Mortality

	<u>Clinton County</u>		<u>Illinois</u>	
	1993		1993	
Total Deaths	298		Total Deaths	106,875
Heart Disease	107	36%	Heart Disease	35,624 33%
Coronary Heart Disease	93	31%	Coronary Heart Disease	28,531 27%
Malignant Neoplasms	80	27%	Malignant Neoplasms	25,263 24%
Lung Cancer	26	9%	Cerebrovascular Dis.	7,291 7%
Chronic Obst. Pulm. Dis.	15	5%	Lung Cancer	6,914 6%
Cerebrovascular Disease	13	4%	COPD	4,312 4%
Pneumonia/Influenza	12	4%	Pneumonia/Influenza	4,021 4%
Colo-Rectal Cancer	12	4%	Unintent. Injuries	3,717 3%
Lymph & Hemato Cancer	11	4%	Colo-Rectal Cancer	2,968 3%
Unintentional Injuries	8	3%	Diabetes Mellitus	2,474 2%
<hr/>				
	1998		1998	
Total Deaths	359		Total Deaths	104,070
Heart Disease	117	33%	Heart Disease	32,722 31%
Coronary Heart Disease	100	28%	Coronary Heart Disease	25,517 25%
Malignant Neoplasms	92	26%	Malignant Neoplasms	24,592 24%
Lung Cancer	29	8%	Cerebrovascular Disease	7,247 7%
Pneumonia/Influenza	21	6%	Lung Cancer	6,846 7%
Chronic Obstr. Pulm Dis.	20	6%	COPD	4,542 4%
Cerebrovascular Disease	18	5%	Pneumonia/Influenza	3,944 4%
Unintentional Injuries	17	5%	Unintentional Injuries	3,803 4%
Motor Vehicle Injuries	10	3%	Colo-rectal Cancer	2,731 3%
Nephritis, etc.	10	3%	Diabetes Mellitus	2,724 3%
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	2001		2001	
Total Deaths	303		Total Deaths	104,858
Diseases of Heart	94	(31%)	Diseases of Heart	30,827 (29%)
Malignant Neoplasms	81	(27%)	Malignant Neoplasms	24,674 (24%)
Coronary Heart Disease	77	(25%)	Coronary Heart Dis.	23,223 (22%)
Lung Cancer	24	(8%)	Cerebrovascular Dis.	7,195 (7%)
Cerebrovascular Disease	19	(6%)	Lung Cancer	6,760 (6%)
Chronic Lower Resp. Dis.	18	(6%)	Chronic Lower resp. Dis.	4,756 (5%)
Colo-rectal Cancer	16	(5%)	Accidents	4,027 (4%)
Septicemia	15	(5%)	Diabetes Mellitus	3,085 (3%)
Accidents	15	(5%)	Colo-rectal Cancer	2,723 (3%)
Influenza & Pneumonia	9	(3%)	Influenza & Pneumonia	2,648 (3%)

(IPLAN Data System Summary Report, 1993, 1998, and 2001)

## Appendix F

Table 1

Crude Mortality Rates (Rates per 100,000).

	<u>Clinton County</u>	<u>Illinois</u>
	2001	2001
Crude	851.1 (303)	840.1 (104,858)
Asian/Pac. Is	(1)	(1101)
Black	(3)	(16,217)
White	(299)	(87,472)

(IPLAN Data System Summary Report, 2001)

Table 2

Percent of Population Living in a Primary Care Health Professional Shortage Area

	<u>Clinton County</u>	<u>Illinois</u>
	100.0%	15.4%

(Center for Rural Health, IDPH, 2005)

Table 3

Infant Mortality: Rates per 1,000 Live Births

	<u>Clinton County</u>			<u>Illinois</u>		
	1993	1998	2001	1993	1998	2001
Infant Mortality	6	1	3	1834	1505	1379
Neonatal Mortality	5	1	3	1166	988	919
Post Neonatal Mortality	1	0	0	668	517	460

(IPLAN Data System Summary Report, 1993, 1998 and 2001)

Table 4

Percent of Mothers who Smoke During Pregnancy

	<u>Clinton County</u>			<u>Illinois</u>		
	1993	1998	2001	1993	1998	2001
Total	18.9%	15.8%	14.91	14.5%	12.0%	10.5%
Black	66.7%	00.0	50%	16.4%	14.2%	13.2%
White	18.8%	16.2%	14.6%	14.5%	12.1%	10.3%
Other	00.0%	00.0	00.0	2.1%	2.2%	1.9%

(IPLAN Data System Summary Report, 1993, 1998 and 2001)

## Appendix G

Table 1  
Mothers who begin prenatal care in the 1st trimester

	<u>Clinton County</u>			<u>Illinois</u>		
	1993	1998	2001	1993	1998	2001
Total	87.7%	88%	89.3%	78.3%	81.2%	81.9%
Asian/PI	66.7%	100%	50%	18.5%	83.8%	81.4%
Black	66.8%	57.1%	75%	63.4%	68.5%	71.1%
White	87.9%	88.6%	89.7%	82.8%	84.3%	84.4%
Other	100.0%	0.0%	0%	63.2%	71.9%	81.2%

(IPLAN Data System Summary Report, 1993,1998 and 2001)

Table 2

Hospitalization for alcohol dependence syndrome (rates per 100,000)

	<u>Clinton County</u>			<u>Illinois</u>		
	1993	1998	2001	1993	1998	2001
ages 15-44	28	10	2	7192	4227	3120
ages 45-64	4	4	2	2392	2079	2006

(IPLAN Data System Summary Report, 1993, 1998 and 2001).

## Appendix H

Table 1

	Work Place Fatalities	Men	Whites
1996	262		
2002	190		
2003	200	185	163
2004	208	191	183

(Illinois Department of Public Health 2005)

Table 2

	Illinois Farm Injuries and Deaths	
	Injuries	Deaths
2003	45	19
2004	32	29

(University of Illinois, AgSafety 2006)

Table 3

	Illinois Boating Accidents					
	2002	2001	2000	1999	1998	1997
Deaths	23	8	14	13	19	14
Injuries	92	75	76	75	107	81
Accidents	135	112	155	159	176	146

(Illinois Department of Natural Resources 2001)

Lake Carlyle	Accidents	Injuries	Fatalities	#Vessels
2001	7	1	0	10

(Illinois Department of Natural Resources 2001)

Table 4

Fatal Crashes	Illinois Fatal Crash Data			
	2000	2001	2002	2003
Total	1418	1414	1420	1454
16 - 20	260	299	279	289
>65	210	226	212	241

(Illinois Department of Transportation)

## Appendix I

## Clinton County Vehicle Crash data

Table 2	2002	2003
Crashes	823	831
Persons Killed	8	10
Persons Injured	261	308

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(Illinois Department of Transportation)

## Illinois Drunk Driving Statistics

Table 3	Fatalities	Alcohol Related	0.08+	No Seat Belt used
1985	1534	835	723	
1990	1589	826	707	
2000	1418	628	536	529
2001	1414	623	537	542
2002	1420	553	556	519
2003	1453	639	539	
2004	1356	604	517	

---

(Alcohol Alert - Illinois Drunk Driving Statistics 2006)

## Clinton County Law Enforcement

Table 3	DUI Arrests	Seat Belt Violations
2001	86	282
2002	54	346
2003	89	291
2004	102	321
2005	84	259

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(Clinton County Sheriff and City Police Reports)

Appendix J  
Behavior Risk Factor Surveys

Cardiovascular	1999	2001 - 2003	2004
Told High Blood Pressure	26.2%	25.6%	30.3%
Told High Cholesterol	28.1%	25.5%	29.1%

	Clinton County			Illinois		
	1999	2001-2003	2004	1999	2001-2003	2004
Tobacco Smoker	22.6%	20.8%	21.4%	23.3%	21.1%	22.2%
Former Smoker	22.3%	25.0%	20.4%	24.1%	22.6%	21.5%
Non-Smoker	55.1%	54.2%	58.2%	52.6%	56.3%	56.2%

	Clinton County			Illinois		
	1999	2001-2003	2004	1999	2001-2003	2004
High Blood Pressure						
25 - 44	14.0%	15.9%	18.4%	11.2%	13.9%	--
45 - 64	32.8%	32.8%	35.9%	33.1%	31.7%	--
>65	51.9%	49.9%	48.7%	59.4%	53.4%	--
Males	28.3%	27.8%	30.8%	26.1%	23.9%	--
Females	24.1%	23.2%	29.7%	24.5%	24.7%	--

	Clinton County			Illinois		
	1999	2001-2003	2004	1999	2001-2003	2004
High Cholesterol						
25 - 44	17.9%	14.2%	17.1%	22.9%	18.4%	--
45 - 64	35.9%	27.8%	43.9%	40.9%	37.6%	--
>65	34.0%	53.1%	42.9%	41.0%	43.7%	--
Males	26.9%	33.0%	29.6%	31.9%	29.3%	--
Females	29.2%	18.2%	29.6%	31.6%	29.9%	--

	Clinton County			Illinois		
	1999	2001-2003	2004	1999	2001-2003	2004
Smoking						
18 - 24	41.1%	--	--	27.5%	25.7%	--
25 - 44	27.8%	27.1%	22.0%	26.2%	26.1%	26.2%
45 - 64	17.7%	18.3%	22.2%	23.5%	19.1%	19.9%
>65	8.7%	--	14.6%	12.9%	8.3%	9.4%
Males	24.4%	24.3%	18.5%	26.5%	22.7%	26.1%
Females	20.8%	17.1%	24.7%	20.4%	19.6%	18.6%

	Clinton County			Illinois		
	1999	2001-2003	2004	1999	2001-2003	2004
Obesity						
18 - 24	30.1%	--	--	9.9%	14.7%	--
25 - 44	30.1%	20.9%	19.2%	20.6%	19.0%	23.0%
45 - 64	35.0%	31.0%	31.5%	26.3%	27.3%	26.7%
>65	37.5%	15.6%	30.9%	23.3%	18.1%	18.7%
Males	37.9%	21.6%	28.0%	20.7%	22.6%	22.5%
Females	28.5%	24.6%	23.8%	21.8%	19.1%	21.7%

## Appendix K

Combined Years 1990 through 2001  
Causes of Death

	90/91/92	93/94/95	96/97/98	99/00/01
Heart Disease	353	325	300	381
Ischemic	279	267	247	321
Malignant				
Neoplasms	195	226	235	240
Lung	47	71	74	67
Breast	6	15	17	17
Cerebrovascular				
Disease	40	52	40	51
Unintentional				
Injuries	40	36	40	52
Motor Vehicles	29	23	21	29
Chronic Obstr.				
Pulmonary	25	43	50	55
Pneumonia &				
Influenza	37	54	49	33
Diabetes Mellitus	5	17	11	8
Suicide	5	10	10	16
Nephritis &				
Nephrosis	1	14	18	14

## Appendix L

Combined Years 1990 through 2001  
Years of Life Lost

	90/91/92	93/94/95	96/97/98	99/00/01
Heart Disease	515	608	382	421
Ischemic	392	485	252	312
Malignant				
Neoplasms	650	761	650	714
Lung	67	283	113	229
Breast	79	46	26	41
Cerebrovascular Disease	23	60	45	--
Unintentional Injuries	1015	761	917	1124
Motor Vehicle	957	621	535	816
Chronic Obstr. Pulmonary	43	83	103	--
Pneumonia & Influenza	0	98	150	71
Diabetes Mellitus	15	106	8	--
Suicide	274	241	156	409
Nephritis & Nephrosis	0	26	41	--

## Appendix M

### CLINTON COUNTY CORONER REPORTS

	2005	2004	2003	2002	2001	2000
<b>Illinois Reported</b>						
Total Deaths	249	215	287	229	226	245
<b>St. Joseph Hospital</b>						
Fetal Deaths	50	29	56	45	48	47
	2	3	1	2	2	3
<b>Coroner Notification</b>						
Emergency Room	17	14	30	22	19	17
Residence	49	48	63	53	50	53
Nursing Home	100	94	102	92	84	89
<b>At Scene of Incident</b>	28	26	30	15	18	
<b>Natural</b>	14	17	23	3	13	12
Heart	11	13	21	3	11	11
Cancer	3	3	1	0	0	0
Diabetes	0	1	1	0		
<b>Accidental Deaths</b>						
MVA	9	7	5	7	6	6
Alcohol	5	4	2	6	5	1
No Seat Belt	8	5	4	7	4	4
Drownings	2	1	2	1	0	0
Drugs	0	1	1	0	0	0
Work Related	1	0	0	0	0	2
<b>Suicide</b>	2	2	3	3	5	5
Guns	2	0	2	1	5	3
Homicide	0	0	1	1	1	0

## Appendix N

Table 1

Sedentary Lifestyle

	Clinton County	Illinois
1994	89.9%	84.4%
1995	34.1%	31.8%
1996	27.0%	24.8%
1997	34.5%	26.5%
1998	32.9%	27.2%

---

(IPLAN Data System Summary Reports)

Table 2

Smoking

	Clinton County	Illinois
1993	21.8%	26.5%
1994	23.9%	23.7%
1995	26.5%	23.3%
1996	28.0%	25.1%
1997	24.8%	22.6%
1998	26.1%	22.7%

---

(IPLAN Data System Summary Reports)

Table 3

Obesity

	Clinton County	Illinois
1993	28.9%	26.5%
1994	31.4%	26.7%
1995	33.6%	28.6%
1996	28.4%	28.1%
1997	18.7%	18.5%
1998	20.4%	19.5%

---

(IPLAN Data Summary Reports)

## Appendix O

Sexually Transmitted Diseases

	2000	2001	2002	2003	2004
Gonorrhea	5	5	6	6	5
Chlamydia	18	22	27	15	29
Syphilis	0	0	1	0	0
New AIDS/HIV	3	3	4	5	0

---

(IDPH Sexually Transmitted Disease Report 2004)

Appendix P

COUNTY RESOURCES

Abuse and Neglect

Community Resource Center  
Department of Children and Family Services

Adult adolescent Counseling

Community Resource Center

Adoption Services

Department of Children and Family Services

Alcohol and Substance Abuse

Community Resource Center

Child Welfare and Foster Care

Children and Family Services

Child Safety Car Seat Rental

Clinton County Rehab

Clothing

BCMw

Hospice

St. Joseph's Hospital

Public Housing

Clinton County Housing Authority

Job Services

Illinois Department of Labor

Lamaze

St. Joseph's Hospital

Medical Equipment

American Legion Hall

Mental Health

Community Resource Center

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Public Aid

Illinois Department of Public Aid

Reading

Reading Link-Kaskaskia College

Crisis Intervention

Community Resource Center

Early Childhood Development

Head Start

Birth - to - three

Education and GED

Kaskaskia College

Energy Assistance

BCMW

Senior Center

Illinois Power Customer Relations

Food

Food Pantry

Senior Services

Clinton County Senior Citizens Center

Sexually Transmitted/Infectious Diseases

Clinton County Health Department

Substance Abuse

Community Resource Center

Transportation

Senior Citizens Center

Immunizations

Clinton County Health Department

Environmental

Clinton County Health Department

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## VII. GLOSSARY

**IPLAN:** Illinois Project Local Assessment of Needs. A strategic planning process carried out by local health departments.

**APEXPH:** Assessment Protocol for Excellence in Public Health. Designed process to identify community health problems and propose solutions. Adopted by IPLAN.

**Healthy People 2000 and Healthy People 2010:** A national promotion and disease prevention objectives. Presenting a national strategy for improving the health of the American people.

**Risk Factors:** Scientifically established factor (determinant) that relates directly to the level of a health problem.

**Direct Contributing Factor:** Scientifically established factor that directly affects the level of a risk factor.

**Indirect Contributing Factor:** Community specific factor that directly affects the level of the direct contributing factors.

**Outcome Objective:** Goal for reducing level to which a health problem should be reduced, long term and measurable (5 years).

**Impact Objective:** Goal for reducing level of a direct or indirect contributing factor or goal for the level at which a corrective action should occur, short term (1 - 2 years) and measurable.

## IPLAN Data System Summary Report

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### 1.01 POPULATION BY AGE AND GENDER

2001 Race Data not available.

### 1.02 DEPENDENCY INDICATORS

2001 Race Data not available.

### 1.03 RACE/ETHNICITY DISTRIBUTION

YEAR: 2001	CLINTON		Illinois		U.S.	YEAR 2010
	Percent	Number	Percent	Number		
Total Population	100.0%	35,600	100.0%	12,482,000	N/A	N/A
Asian/PI	**.*%	0	**.*%	0	N/A	N/A
Black	**.*%	0	**.*%	0	N/A	N/A
Native Amer	**.*%	0	**.*%	0	N/A	N/A
White	**.*%	0	**.*%	0	N/A	N/A

### 1.04 MEDIAN AGE FOR POPULATION

2001 Race Data not available.

### 1.05 POPULATION 25+ WHO ARE NON-HIGH SCHOOL GRADUATES

2001 Race Data not available.

### 1.06 HIGH SCHOOL DROP-OUTS

2001 Race Data not available.

### 1.07 POPULATION IN POVERTY

2001 Race Data not available.

### 1.08 POPULATION RECEIVING FOOD STAMPS

2001 Race Data not available.

### 1.09 RURAL POPULATION

2001 Race Data not available.

### 1.10 UNEMPLOYED

2001 Race Data not available.

### 1.11 POPULATION ENROLLED IN MEDICAID

YEAR

YEAR: 2001	CLINTON		Illinois		U.S.	2010
	Percent	Number	Percent	Number		
All Age Groups	9.9%	3,524	12.6%	1,570,257	N/A	N/A
Under 21 Years	**.*%	1,633	**.*%	907,011	N/A	N/A
Black	**.*%	78	**.*%	499,381	N/A	N/A
White	**.*%	1,539	**.*%	370,272	N/A	N/A
Other	**.*%	16	**.*%	37,358	N/A	N/A

1.12 SINGLE PARENT HOUSEHOLD

2001 Race Data not available.

1.13 PER CAPITA PERSONAL INCOME

2001 Race Data not available.

2.01 MORTALITY RATES  
(Rates per 100,000)

YEAR: 2001	CLINTON		Illinois		U.S.	YEAR 2010
	Rate	Number	Rate	Number		
Age-Adjusted	**.*		**.*		N/A	N/A
Asian/Pac IIs	**.*		**.*		N/A	N/A
Black	**.*		**.*		N/A	N/A
White	**.*		**.*		N/A	N/A
Crude	851.1	303	840.1	104,858	N/A	N/A
Asian/Pac IIs	**.*	1	****.*	1,101	N/A	N/A
Black	**.*	3	****.*	16,217	N/A	N/A
White	****.*	299	****.*	87,472	N/A	N/A

If < 10 deaths/events or no population data, no rates calculated.

2.02.01 LEADING CAUSES OF MORTALITY, ICD-9

2001 Race Data not available.

2.02.02 LEADING CAUSES OF MORTALITY, ICD-10

YEAR: 2001	CLINTON		ILLINOIS		# of	% of
CAUSE	# of	% of	# of	% of	DEATHS	TOTAL
	DEATHS	TOTAL	DEATHS	TOTAL		
Asian/PI Total	1				1,101	
Influenza and Pneumonia	1	100%	Diseases of Heart		314	29%
			Malignant Neoplasms		282	26%
			Coronary Heart Disease @		267	24%
			Cerebrovascular Diseases		92	8%
			Lung Cancer @		49	4%
			Diabetes Mellitus		48	4%
			Accidents		45	4%
			Colo-rectal Cancer @		40	4%
			Influenza and Pneumonia		34	3%

		Lymph & Hemato Cancer @	29	3%
Black Total	3		16,217	
Malignant Neoplasms	1	33% Diseases of Heart	4,397	27%
Septicemia	1	33% Malignant Neoplasms	3,676	23%
Lung Cancer @	1	33% Coronary Heart Disease @	3,302	20%
HIV Disease	1	33% Lung Cancer @	969	6%
		Cerebrovascular Diseases	963	6%
		Accidents	731	5%
		Homicide	640	4%
		Diabetes Mellitus	576	4%
		Firearms (see description	539	3%
		Septicemia	520	3%
White Total	299		87,472	
Diseases of Heart	94	31% Diseases of Heart	26,101	30%
Malignant Neoplasms	80	27% Malignant Neoplasms	20,701	24%
Coronary Heart Disease @	77	26% Coronary Heart Disease @	19,642	22%
Lung Cancer @	23	8% Cerebrovascular Diseases	6,138	7%
Cerebrovascular Diseases	19	6% Lung Cancer @	5,735	7%
Chronic Lower Resp. Disea	18	6% Chronic Lower Resp. Disea	4,278	5%
Colo-rectal Cancer @	16	5% Accidents	3,245	4%
Accidents	15	5% Diabetes Mellitus	2,458	3%
Septicemia	14	5% Colo-rectal Cancer @	2,282	3%
Motor Vehicle Accidents @	8	3% Influenza and Pneumonia	2,252	3%
Other Total	0		68	
		Diseases of Heart	15	22%
		Malignant Neoplasms	15	22%
		Coronary Heart Disease @	12	18%
		Lung Cancer @	7	10%
		Accidents	6	9%
		Diabetes Mellitus	3	4%
		Congenital Malformations,	3	4%
		Lymph & Hemato Cancer @	3	4%
		Cerebrovascular Diseases	2	3%
		Motor Vehicle Accidents @	2	3%
Total for All Races	303		104,858	
Diseases of Heart	94	31% Diseases of Heart	30,827	29%
Malignant Neoplasms	81	27% Malignant Neoplasms	24,674	24%
Coronary Heart Disease @	77	25% Coronary Heart Disease @	23,223	22%
Lung Cancer @	24	8% Cerebrovascular Diseases	7,195	7%
Cerebrovascular Diseases	19	6% Lung Cancer @	6,760	6%
Chronic Lower Resp. Disea	18	6% Chronic Lower Resp. Disea	4,756	5%
Colo-rectal Cancer @	16	5% Accidents	4,027	4%
Septicemia	15	5% Diabetes Mellitus	3,085	3%
Accidents	15	5% Colo-rectal Cancer @	2,723	3%
Influenza and Pneumonia	9	3% Influenza and Pneumonia	2,648	3%

@ This is a subcategory of a preceding cause.  
 Total number of deaths is for all causes (excludes subcategories; i.e., no double-cc

2.03 LIFE EXPECTANCY AT BIRTH

2001 Race Data not available.

2.04 EXCESS NON-WHITE DEATHS

YEAR: 2001	CLINTON	Illinois	U.S.	YEAR 2010
------------	---------	----------	------	--------------

	Percent	Number	Percent	Number		
	-----	-----	-----	-----	-----	-----
0-64 yrs.	**.*%	*	100.0%	7,728	N/A	N/A

Note: No data for intercensal years.

2.05 POPULATION UNINSURED

2001 Race Data not available.

2.06.01 CAUSE-SPECIFIC YEARS OF POTENTIAL LIFE LOST, ICD-9

2001 Race Data not available.

2.06.02 CAUSE-SPECIFIC YEARS OF POTENTIAL LIFE LOST, ICD-10

YEAR: 2001	CLINTON	ILLINOIS
CAUSE	TOTAL	CAUSE TOTAL
Asian/PI		
Influenza and Pneumonia	44	Malignant Neoplasms 1,564
		Perinatal Conditions 1,167
		Accidents 1,064
		Diseases of Heart 955
		Motor Vehicle Accidents @ 764
		Congenital Malformations, 748
		Coronary Heart Disease @ 701
		Suicide 616
		Lymph & Hemato Cancer @ 298
		Cerebrovascular Diseases 238
Black		
HIV Disease	29	Homicide 22,089
Malignant Neoplasms	7	Diseases of Heart 18,722
Lung Cancer @	7	Firearms (see description) 18,409
		Accidents 18,213
		Perinatal Conditions 16,739
		Malignant Neoplasms 15,653
		Coronary Heart Disease @ 11,073
		HIV Disease 7,684
		Motor Vehicle Accidents @ 6,306
		Congenital Malformations, 3,867
White		
Malignant Neoplasms	213	Accidents 61,265
Accidents	197	Malignant Neoplasms 58,713
Motor Vehicle Accidents @	167	Diseases of Heart 41,813
Firearms (see description)	133	Perinatal Conditions 29,716
Suicide	133	Motor Vehicle Accidents @ 29,491
Perinatal Conditions	129	Coronary Heart Disease @ 27,746
Lung Cancer @	91	Suicide 17,726
Diseases of Heart	80	Firearms (see description) 15,667
Congenital Malformations,	64	Congenital Malformations, 13,059
Coronary Heart Disease @	58	Homicide 12,889
Other		
		Congenital Malformations, 194
		Accidents 188

Malignant Neoplasms	133
Motor Vehicle Accidents @	116
Lymph & Hemato Cancer @	89
Diseases of Heart	76
Coronary Heart Disease @	69
Perinatal Conditions	64
Suicide	61
Influenza and Pneumonia	54

Total for All Races

Malignant Neoplasms	220	Accidents	80,731
Accidents	197	Malignant Neoplasms	75,999
Motor Vehicle Accidents @	167	Diseases of Heart	61,568
Firearms (see description	133	Perinatal Conditions	47,689
Suicide	133	Coronary Heart Disease @	39,589
Perinatal Conditions	129	Motor Vehicle Accidents @	36,679
Lung Cancer @	98	Homicide	35,179
Diseases of Heart	80	Firearms (see description	34,289
Influenza and Pneumonia	71	Suicide	21,079
Congenital Malformations,	64	Congenital Malformations,	18,311

@ This is a subcategory of a preceding cause.

2.07 PERCENT POPULATION NO MEDICAL PHYSICAL IN PAST 2 YEARS

2001 Race Data not available.

2.08 MEDICAID ENROLLEES TO MEDICAID PHYSICIAN VENDORS RATIO

YEAR: 2001	CLINTON	Illinois	U.S.	YEAR 2010
Total	195.8:1	74.3:1	N/A	N/A

2.09 ADVANCED LIFE SUPPORT EMERGENCY CARE VEHICLES

2001 Race Data not available.

2.10 POPULATION RESIDING IN PRIMARY CARE HPSA

2001 Race Data not available.

2.11 POPULATION WITH OPTIMALLY FLUORIDATED WATER

2001 Race Data not available.

3.01 LIVE BIRTHS

YEAR: 2001	CLINTON		Illinois		U.S.	YEAR 2010
	Percent	Number	Percent	Number		
	-----	-----	-----	-----	-----	-----
Total		375		184,022	N/A	N/A
Asian/PI	0.5%	2	4.4%	8,121	N/A	N/A
Black	1.1%	4	18.0%	33,162	N/A	N/A
White	98.4%	369	77.3%	142,277	N/A	N/A
Other	**.*%	0	0.3%	462	N/A	N/A

3.02 INFANT MORTALITY RATE  
(Rates per 1,000 live births)

YEAR: 2001	CLINTON		Illinois		U.S.	YEAR 2010
	Rate	Number	Rate	Number		
Infant Mortality	**.*	3	7.5	1,379	0.0	4.5
Asian/PI	**.*	0	4.7	38	N/A	4.5
Black	**.*	0	14.9	493	N/A	4.5
White	**.*	3	5.9	843	N/A	4.5
Neonatal Mortality	**.*	3	5.0	919	N/A	2.9
Asian/PI	**.*	0	3.3	27	N/A	2.9
Black	**.*	0	8.9	296	N/A	2.9
White	**.*	3	4.2	592	N/A	2.9
PostNeonatal Mort	**.*	0	2.5	460	N/A	1.2
Asian/PI	**.*	0	1.4	11	N/A	1.2
Black	**.*	0	5.9	197	N/A	1.2
White	**.*	0	1.8	251	N/A	1.2

If < 10 deaths/events or no population data, no rates calculated.

### 3.03 LOW BIRTH WEIGHT

YEAR: 2001	CLINTON		Illinois		U.S.	YEAR 2010
	Percent	Number	Percent	Number		
<b>LOW BIRTHWEIGHT (&lt;2,500 gms)</b>						
Total	5.1%	19	8.0%	14,773	N/A	5.0%
Asian/PI	50.0%	1	8.5%	692	N/A	5.0%
Black	**.*%	0	13.8%	4,566	N/A	5.0%
White	4.9%	18	6.7%	9,474	N/A	5.0%
<b>VERY LOW BIRTHWEIGHT (&lt;1,500 gms)</b>						
Total	0.5%	2	1.6%	2,875	N/A	0.9%
Asian/PI	**.*%	0	1.2%	97	N/A	0.9%
Black	**.*%	0	3.1%	1,031	N/A	0.9%
White	0.5%	2	1.2%	1,740	N/A	0.9%

### 3.04 MOTHERS WHO SMOKE DURING PREGNANCY

YEAR: 2001	CLINTON		Illinois		U.S.	YEAR 2010
	Percent	Number	Percent	Number		
Total	14.9%	56	10.5%	19,244	N/A	1%
Black	50.0%	2	13.2%	4,363	N/A	1%
White	14.6%	54	10.3%	14,720	N/A	1%
Other	**.*%	0	1.9%	161	N/A	1%

### 3.05 MOTHERS WHO DRINK DURING PREGNANCY

YEAR: 2001	CLINTON		Illinois		U.S.	YEAR 2010
	Percent	Number	Percent	Number		

Total	**.*%	0	0.4%	819	N/A	6%
Black	**.*%	0	1.0%	322	N/A	6%
White	**.*%	0	0.3%	488	N/A	6%
Other	**.*%	0	0.1%	9	N/A	6%

3.06 KESSNER INDEX OF PRENATAL CARE

YEAR: 2001	CLINTON	Illinois		U.S.	YEAR 2010
	Percent	Number	Percent	Number	
Adequate	86.7%	325	74.5%	137,153	N/A 90%
Intermediate	10.4%	39	17.5%	32,180	N/A N/A
Inadequate	2.9%	11	7.3%	13,356	N/A N/A

3.07 MOTHERS BEGIN PRENATAL IN 1ST TRIMESTER

YEAR: 2001	CLINTON	Illinois		U.S.	YEAR 2010
	Percent	Number	Percent	Number	
Total	89.3%	335	81.9%	150,690	N/A 90%
Asian/PI	50.0%	1	81.4%	6,610	N/A 90%
Black	75.0%	3	71.1%	23,579	N/A 90%
White	89.7%	331	84.4%	120,126	N/A 90%
Other	**.*%	0	81.2%	375	N/A 90%

3.08 INFANTS POSITIVE FOR COCAINE  
(Incidence rates per 10,000 live births)

YEAR: 97-01	CLINTON	Illinois		U.S.	YEAR 2010
	Rate	Avg#/Year	Rate	Avg#/Year	
Total	N/A	N/A	44.5	813.2	N/A 0%
Lower CI	N/A		43.1		N/A N/A
Upper CI	18.4		45.8		N/A N/A

Note: 5-year average rate and average number per year. CI=Confidence Interval

3.09.01 LEADING CAUSES OF MORTALITY (AGES 1-4), ICD-9

2001 Race Data not available.

3.09.02 LEADING CAUSES OF MORTALITY (AGES 1-4), ICD-10

YEAR: 2001	CLINTON	ILLINOIS			
CAUSE	# of DEATHS	% of TOTAL	# of DEATHS	% of TOTAL	
Asian/PI Total	0		3		
			Accidents	1	33%
Black Total	0		84		
			Accidents	18	21%

		Homicide	15	18%
		Fires and Burns @	11	13%
		Congenital Malformations,	11	13%
		Diseases of Heart	6	7%
		Malignant Neoplasms	5	6%
		Influenza and Pneumonia	4	5%
		Motor Vehicle Accidents @	3	4%
		Drowning @	2	2%
		Chronic Lower Resp. Disea	2	2%
White Total	0		140	
		Accidents	36	26%
		Malignant Neoplasms	16	11%
		Motor Vehicle Accidents @	13	9%
		Congenital Malformations,	13	9%
		Diseases of Heart	10	7%
		Drowning @	8	6%
		Homicide	8	6%
		Lymph & Hemato Cancer @	8	6%
		Septicemia	6	4%
		Fires and Burns @	5	4%
Other Total	0		2	
		Motor Vehicle Accidents @	1	50%
		Accidents	1	50%
Total for All Races	0		229	
		Accidents	56	24%
		Congenital Malformations,	24	10%
		Homicide	23	10%
		Malignant Neoplasms	21	9%
		Motor Vehicle Accidents @	17	7%
		Diseases of Heart	16	7%
		Fires and Burns @	16	7%
		Drowning @	10	4%
		Influenza and Pneumonia	9	4%
		Lymph & Hemato Cancer @	9	4%

@ This is a subcategory of a preceding cause.

Total number of deaths is for all causes (excludes subcategories; i.e., no double-cc

3.10 WIC: LOW WEIGHT FOR HEIGHT

2001 Race Data not available.

3.11 TEEN BIRTH RATE  
(Rates per 1,000 females)

YEAR: 2001	CLINTON		Illinois		U.S.	YEAR 2010
	Rate	Number	Rate	Number		
	-----	-----	-----	-----	-----	-----
Total	***.*	8	***.*	6,979	N/A	N/A
Ages 10 to 14	***.*	0	***.*	344	N/A	N/A
Ages 15 to 17	***.*	8	***.*	6,635	N/A	43

If < 10 events or no population data, no rates calculated.

3.12 PERCENT BIRTHS TO TEENS

## (Under 18 years of age)

YEAR: 2001	CLINTON		Illinois		U.S.	YEAR 2010
	Percent	Number	Percent	Number		
Total	2.1%	8	3.8%	6,979	N/A	N/A
Asian/PI	**.*%	0	0.5%	42	N/A	N/A
Black	**.*%	0	9.1%	3,008	N/A	N/A
White	2.2%	8	2.7%	3,907	N/A	N/A

## 3.13 FOUNDED CHILD ABUSE/NEGLECT RATE

2001 Race Data not available.

3.14 CONGENITAL ANOMALIES  
(Incidence rates per 10,000 live births)

YEAR: 97-01	CLINTON		Illinois		U.S.	YEAR 2010
	Rate	Number	Rate	Number		
Total	328.7	13.2	311.3	5,691.2	N/A	N/A
Lower CI	255.1		307.7		N/A	N/A
Upper CI	416.3		314.8		N/A	N/A

Note: 5-year average rate and average number per year. CI=Confidence Interval

## 3.15 MEDICAID DELIVERIES

2001 Race Data not available.

## 3.16 IDPA-ELIGIBLE CHILDREN RECEIVING EPSDT

2001 Race Data not available.

## 3.17 KOTELCHUCK INDEX OF PRENATAL CARE UTILIZATION

YEAR: 2001	CLINTON		Illinois		U.S.	YEAR 2010
	Percent	Number	Percent	Number		
Total Live Birth	100.0%	375	100.0%	184,022	N/A	N/A
Adequate Plus	39.5%	148	29.9%	54,937	N/A	N/A
Adequate	49.9%	187	44.6%	82,096	N/A	N/A
Intermediate	5.1%	19	12.1%	22,312	N/A	N/A
Inadequate	4.5%	17	10.2%	18,695	N/A	N/A
Unknown	1.1%	4	3.3%	5,982	N/A	N/A

## 3.18 METHOD OF DELIVERY

YEAR: 2001	CLINTON		Illinois		U.S.	YEAR 2010
	Percent	Number	Percent	Number		
Total Live Births	**.*	375	**.*	184,022	N/A	N/A
Vaginal	87.7	293	84.7	138,552	N/A	N/A

VBAC	36.8	14	19.7	3,869	N/A	N/A
Primary Cesrn	12.3	41	15.3	25,053	N/A	N/A
Repeat Cesrn	63.2	24	80.3	15,753	N/A	N/A
Unknown	**.*	3	**.*	795	N/A	N/A
<b>Vaginal</b>						
Ages 10-19	9.2	*	12.2	16,930	N/A	N/A
Ages 20-29	58.7	172	51.2	70,943	N/A	N/A
Ages 30-39	31.4	92	34.6	47,912	N/A	N/A
Ages 40+	0.7	*	2.0	2,759	N/A	N/A
Unknown	**.*	0	**.*	8	N/A	N/A
<b>Primary Cesarean</b>						
Ages 10-19	7.3	*	10.6	2,661	N/A	N/A
Ages 20-29	56.1	23	46.2	11,568	N/A	N/A
Ages 30-39	36.6	*	39.7	9,958	N/A	N/A
Ages 40+	**.*	*	3.5	865	N/A	N/A
Unknown	**.*	0	**.*	1	N/A	N/A
<b>Repeat Cesarean</b>						
Ages 10-19	**.*	0	2.1	324	N/A	N/A
Ages 20-29	50.0	12	40.1	6,310	N/A	N/A
Ages 30-39	50.0	12	53.6	8,443	N/A	N/A
Ages 40+	**.*	0	4.3	676	N/A	N/A
Unknown	**.*	0	**.*	0	N/A	N/A

If < 10 events, numbers are suppressed.

The number of events is suppressed if less than 10 or if the number reveals through subtraction another category number of less than 10 (i.e., complimentary suppressor)

Suggestion: if numbers are suppressed, try combining multiple years of data or combine geographies for a single year of data.

#### 4.01.01 CORONARY HEART DISEASE MORTALITY RATES, ICD-9

2001 Race Data not available.

#### 4.01.02 CORONARY HEART DISEASE MORTALITY RATES, ICD-10 (Rates per 100,000)

YEAR: 2001	CLINTON		Illinois		U.S.	YEAR 2010
	Rate	Number	Rate	Number		
	-----	-----	-----	-----		
Total: Age-Adjusted	**.*		**.*		N/A	166
Crude	216.3	77	186.1	23,223	N/A	N/A
Premature(<65)	**.*	8	37.4	4,105	N/A	N/A
Asian: Age-Adjusted	**.*		**.*		N/A	166
/ PI Crude	**.*	0	**.*	267	N/A	N/A
Premature(<65)	**.*	0	**.*	66	N/A	N/A
Black: Age-Adjusted	**.*		**.*		N/A	166
Crude	**.*	0	**.*	3,302	N/A	N/A
Premature(<65)	**.*	0	**.*	1,124	N/A	N/A
White: Age-Adjusted	**.*		**.*		N/A	166
Crude	**.*	77	**.*	19,642	N/A	N/A

Premature(<65) \*\*\*.\* 8 \*\*\*.\* 2,911 N/A N/A

If < 10 events or no population data, no rates calculated.

4.02.01 CEREBROVASCULAR DISEASE MORTALITY RATES, ICD-9

2001 Race Data not available.

4.02.02 CEREBROVASCULAR DISEASES MORTALITY RATES, ICD-10  
(Rates per 100,000)

YEAR: 2001	CLINTON		Illinois		U.S.	YEAR 2010
	Rate	Number	Rate	Number		
Total: Age-Adjusted	***.*		***.*		N/A	48
Crude	53.4	19	57.6	7,195	N/A	N/A
Premature(<65)	***.*	2	7.3	801	N/A	N/A
Asian: Age-Adjusted	***.*		***.*		N/A	48
/ PI Crude	***.*	0	***.*	92	N/A	N/A
Premature(<65)	***.*	0	***.*	19	N/A	N/A
Black: Age-Adjusted	***.*		***.*		N/A	48
Crude	***.*	0	***.*	963	N/A	N/A
Premature(<65)	***.*	0	***.*	285	N/A	N/A
White: Age-Adjusted	***.*		***.*		N/A	48
Crude	***.*	19	***.*	6,138	N/A	N/A
Premature(<65)	***.*	2	***.*	497	N/A	N/A

If < 10 events or no population data, no rates calculated.

4.03.01 CHRONIC LIVER DISEASE AND CIRRHOSIS MORTALITY RATES, ICD-9

2001 Race Data not available.

4.03.02 CHRONIC LIVER DISEASE AND CIRRHOSIS MORTALITY RATES, ICD-10  
(Rates per 100,000)

YEAR: 2001	CLINTON		Illinois		U.S.	YEAR 2010
	Rate	Number	Rate	Number		
Total: Age-Adjusted	***.*		***.*		N/A	3.0
Crude	***.*	4	8.8	1,101	N/A	N/A
Premature(<65)	***.*	3	6.1	666	N/A	N/A
Asian: Age-Adjusted	***.*		***.*		N/A	3.0
/ PI Crude	***.*	0	***.*	7	N/A	N/A
Premature(<65)	***.*	0	***.*	4	N/A	N/A
Black: Age-Adjusted	***.*		***.*		N/A	3.0
Crude	***.*	0	***.*	158	N/A	N/A
Premature(<65)	***.*	0	***.*	122	N/A	N/A
White: Age-Adjusted	***.*		***.*		N/A	3.0
Crude	***.*	4	***.*	935	N/A	N/A
Premature(<65)	***.*	3	***.*	539	N/A	N/A

If < 10 events or no population data, no rates calculated.

#### 4.04.01 BREAST CANCER (FEMALE) MORTALITY RATES, ICD-9

2001 Race Data not available.

#### 4.04.02 BREAST CANCER (FEMALE) MORTALITY RATES, ICD-10 (Rates per 100,000)

YEAR: 2001	CLINTON		Illinois		U.S.	YEAR 2010
	Rate	Number	Rate	Number		
Total: Age-Adjusted	***.*		***.*		N/A	22.3
Crude	***.*	6	28.8	1,836	N/A	N/A
Premature(<65)	***.*	4	13.7	749	N/A	N/A
Asian: Age-Adjusted	***.*		***.*		N/A	22.3
/ PI Crude	***.*	0	***.*	21	N/A	N/A
Premature(<65)	***.*	0	***.*	17	N/A	N/A
Black: Age-Adjusted	***.*		***.*		N/A	22.3
Crude	***.*	0	***.*	316	N/A	N/A
Premature(<65)	***.*	0	***.*	165	N/A	N/A
White: Age-Adjusted	***.*		***.*		N/A	22.3
Crude	***.*	6	***.*	1,499	N/A	N/A
Premature(<65)	***.*	4	***.*	567	N/A	N/A

If < 10 events or no population data, no rates calculated.

#### 4.05.01 LUNG CANCER MORTALITY RATES, ICD-9

2001 Race Data not available.

#### 4.05.02 LUNG CANCER MORTALITY RATES, ICD-10 (Rates per 100,000)

YEAR: 2001	CLINTON		Illinois		U.S.	YEAR 2010
	Rate	Number	Rate	Number		
Total: Age-Adjusted	***.*		***.*		N/A	44.9
Crude	67.4	24	54.2	6,760	N/A	N/A
Premature(<65)	***.*	8	17.3	1,904	N/A	N/A
Asian: Age-Adjusted	***.*		***.*		N/A	44.9
/ PI Crude	***.*	0	***.*	49	N/A	N/A
Premature(<65)	***.*	0	***.*	11	N/A	N/A
Black: Age-Adjusted	***.*		***.*		N/A	44.9
Crude	***.*	1	***.*	969	N/A	N/A
Premature(<65)	***.*	1	***.*	362	N/A	N/A
White: Age-Adjusted	***.*		***.*		N/A	44.9
Crude	***.*	23	***.*	5,735	N/A	N/A
Premature(<65)	***.*	7	***.*	1,528	N/A	N/A

If < 10 events or no population data, no rates calculated.

## 4.06.01 COLORECTAL CANCER MORTALITY RATES, ICD-9

2001 Race Data not available.

4.06.02 COLORECTAL CANCER MORTALITY RATES, ICD-10  
(Rates per 100,000)

YEAR: 2001	CLINTON		Illinois		U.S.	YEAR 2010
	Rate	Number	Rate	Number		
Total: Age-Adjusted	***.*		***.*		N/A	13.9
Crude	44.9	16	21.8	2,723	N/A	N/A
Premature(<65)	***.*	2	6.0	661	N/A	N/A
Asian: Age-Adjusted	***.*		***.*		N/A	13.9
/ PI Crude	***.*	0	***.*	40	N/A	N/A
Premature(<65)	***.*	0	***.*	16	N/A	N/A
Black: Age-Adjusted	***.*		***.*		N/A	13.9
Crude	***.*	0	***.*	400	N/A	N/A
Premature(<65)	***.*	0	***.*	148	N/A	N/A
White: Age-Adjusted	***.*		***.*		N/A	13.9
Crude	***.*	16	***.*	2,282	N/A	N/A
Premature(<65)	***.*	2	***.*	497	N/A	N/A

If &lt; 10 events or no population data, no rates calculated.

## 4.07.01 CERVICAL CANCER (FEMALE) MORTALITY RATES, ICD-9

2001 Race Data not available.

4.07.02 CERVICAL CANCER (FEMALE) MORTALITY RATES, ICD-10  
(Rates per 100,000)

YEAR: 2001	CLINTON		Illinois		U.S.	YEAR 2010
	Rate	Number	Rate	Number		
Total: Age-Adjusted	***.*		***.*		N/A	2.0
Crude	***.*	0	2.9	183	N/A	N/A
Premature(<65)	***.*	0	2.4	132	N/A	N/A
Asian: Age-Adjusted	***.*		***.*		N/A	2.0
/ PI Crude	***.*	0	***.*	3	N/A	N/A
Premature(<65)	***.*	0	***.*	2	N/A	N/A
Black: Age-Adjusted	***.*		***.*		N/A	2.0
Crude	***.*	0	***.*	57	N/A	N/A
Premature(<65)	***.*	0	***.*	35	N/A	N/A
White: Age-Adjusted	***.*		***.*		N/A	2.0
Crude	***.*	0	***.*	122	N/A	N/A
Premature(<65)	***.*	0	***.*	94	N/A	N/A

If &lt; 10 events or no population data, no rates calculated.

## 4.08.01 PROSTATE CANCER (MALE) MORTALITY RATES, ICD-9

2001 Race Data not available.

4.08.02 PROSTATE CANCER (MALE) MORTALITY RATES, ICD-10  
(Rates per 100,000)

YEAR: 2001	CLINTON		Illinois		U.S.	YEAR 2010
	Rate	Number	Rate	Number		
Total: Age-Adjusted	***.*		***.*		N/A	28.8
Crude	***.*	3	22.8	1,396	N/A	N/A
Premature(<65)	***.*	0	2.0	109	N/A	N/A
Asian: Age-Adjusted	***.*		***.*		N/A	28.8
/ PI Crude	***.*	0	***.*	5	N/A	N/A
Premature(<65)	***.*	0	***.*	0	N/A	N/A
Black: Age-Adjusted	***.*		***.*		N/A	28.8
Crude	***.*	0	***.*	280	N/A	N/A
Premature(<65)	***.*	0	***.*	36	N/A	N/A
White: Age-Adjusted	***.*		***.*		N/A	28.8
Crude	***.*	3	***.*	1,111	N/A	N/A
Premature(<65)	***.*	0	***.*	73	N/A	N/A

If < 10 events or no population data, no rates calculated.

4.09.01 CHILDHOOD CANCER (UNDER AGE 15) MORTALITY RATES, ICD-9

2001 Race Data not available.

4.09.02 CHILDHOOD CANCER (UNDER AGE 15) MORTALITY RATES, ICD-10  
(Rates per 100,000)

YEAR: 2001	CLINTON		Illinois		U.S.	YEAR 2010
	Rate	Number	Rate	Number		
Ages						
Total 0 - 4	**.*	0	2.7	24	N/A	N/A
5 - 14	**.*	0	2.3	43	N/A	N/A
Asian 0 - 4	**.*	0	**.*	1	N/A	N/A
/ PI 5 - 14	**.*	0	**.*	1	N/A	N/A
Black 0 - 4	**.*	0	**.*	5	N/A	N/A
5 - 14	**.*	0	**.*	9	N/A	N/A
White 0 - 4	**.*	0	**.*	18	N/A	N/A
5 - 14	**.*	0	**.*	32	N/A	N/A
Other 0 - 4	**.*	0	**.*	0	N/A	N/A
5 - 14	**.*	0	**.*	1	N/A	N/A

If < 10 events or no population data, no rates calculated.

4.10 ALCOHOL DEPENDENCE SYNDROME HOSPITALIZATION RATES  
(Rates per 100,000)

YEAR: 2001	CLINTON		Illinois		U.S.	YEAR 2010
	Rate	Number	Rate	Number		

Ages 15-44	**.*	2	**.*	3,120	N/A	N/A
Ages 45-64	**.*	2	**.*	2,006	N/A	N/A

If < 10 events or no population data, no rates calculated.

4.11 TOTAL PSYCHOSES HOSPITALIZATION RATES  
(Rates per 100,000)

YEAR: 2001	CLINTON		Illinois		U.S.	YEAR 2010
	Rate	Number	Rate	Number		
Ages 15-44	**.*	75	**.*	53,526	N/A	N/A
Ages 45-64	**.*	37	**.*	23,672	N/A	N/A

If < 10 events or no population data, no rates calculated.

4.12 DIABETES HOSPITALIZATION RATES  
(Rates per 100,000)

YEAR: 2001	CLINTON		Illinois		U.S.	YEAR 2010
	Rate	Number	Rate	Number		
Total	168.5	60	174.2	21,746	N/A	N/A
Ages 1-14	**.*	2	**.*	957	N/A	N/A
Ages 15-64	**.*	30	**.*	12,968	N/A	N/A

If < 10 events or no population data, no rates calculated.

4.13 OVERWEIGHT, SMOKERS, SEDENTARY LIFESTYLES

2001 Race Data not available.

4.14.01 BREAST CANCER AGE-ADJUSTED INCIDENCE RATE

2001 Race Data not available.

4.14.02 COLORECTAL CANCER AGE-ADJUSTED INCIDENCE RATE

2001 Race Data not available.

4.14.03 CERVICAL CANCER AGE-ADJUSTED INCIDENCE RATE

2001 Race Data not available.

4.14.04 LUNG CANCER AGE-ADJUSTED INCIDENCE RATE

2001 Race Data not available.

4.14.05 PROSTATE CANCER AGE-ADJUSTED INCIDENCE RATE

2001 Race Data not available.

4.14.06 PERCENT DIAGNOSED IN SITU BREAST CANCER (FEMALE)

2001 Race Data not available.

4.14.07 PERCENT DIAGNOSED AT LOCAL STAGE COLORECTAL CANCER

2001 Race Data not available.

4.14.08 PERCENT DIAGNOSED AT LOCAL STAGE PROSTATE CANCER

2001 Race Data not available.

4.14.09 PERCENT DIAGNOSED AT LATE STAGE CERVICAL CANCER

2001 Race Data not available.

4.14.10 CHILDHOOD CANCER AGE-ADJUSTED INCIDENCE RATE

2001 Race Data not available.

5.01 SYPHILIS INCIDENCE RATES  
(Rates per 100,000)

YEAR: 2001	CLINTON		Illinois		U.S.	YEAR 2010
	Rate	Number	Rate	Number		
Total	**.*	0	3.3	409	N/A	0.2
Asian/PI	**.*	0	**.*	N/A	N/A	0.2
Black	**.*	0	**.*	211	N/A	0.2
White	**.*	0	**.*	137	N/A	0.2
Other	**.*	0	**.*	16	N/A	0.2

If < 10 events or no population data, no rates calculated.

5.02 GONORRHEA INCIDENCE RATES  
(Rates per 100,000)

YEAR: 2001	CLINTON		Illinois		U.S.	YEAR 2010
	Rate	Number	Rate	Number		
Total	**.*	5	192.5	24,025	N/A	19
Asian/PI	**.*	0	**.*	148	N/A	19
Black	**.*	N/A	**.*	16,413	N/A	19
White	**.*	N/A	**.*	2,369	N/A	19
Other	**.*	N/A	**.*	247	N/A	19
Adolescents: Ages 15-19	**.*	N/A	**.*	6,387	N/A	N/A
Women: Ages 15-44	**.*	N/A	**.*	11,689	N/A	N/A

If < 10 events or no population data, no rates calculated.

5.03 CHLAMYDIA INCIDENCE RATES  
(Rates per 100,000)

YEAR: 2001	CLINTON		Illinois		U.S.	YEAR 2010
	Rate	Number	Rate	Number		

Total	61.8	22	350.2	43,716	N/A	N/A
Asian/PI	**.*	0	**.*	211	N/A	N/A
Black	**.*	N/A	**.*	22,880	N/A	N/A
White	**.*	14	**.*	9,953	N/A	N/A
Other	**.*	0	**.*	1,169	N/A	N/A

If < 10 events or no population data, no rates calculated.

5.04 AIDS INCIDENCE RATES

2001 Race Data not available.

5.05 HIV INFECTION INCIDENCE RATES

2001 Race Data not available.

5.06 BASIC SERIES VACCINATIONS

YEAR: 2001	CLINTON	Illinois	U.S.	YEAR 2010
	Percent	Percent		
Basic Series	97.0%	72.4%	N/A	90%

5.07 HAEMOPHILUS MENINGITIS (AGES 0-2 AND 0-4)  
(Rates per 100,000)

YEAR: 2001	CLINTON	Illinois	U.S.	YEAR 2010
	Rate	Number	Rate	Number
Ages 0 - 2	**.*	0	**.*	3
Ages 0 - 4	**.*	0	**.*	3

If < 10 events or no population data, no rates calculated.

5.08 FOODBORNE PATHOGENS INFECTION RATES  
(Rates per 100,000)

YEAR: 2001	CLINTON	Illinois	U.S.	YEAR 2010
	Rate	Number	Rate	Number
Salmonella	**.*	3	11.1	1,383
Campylobacter	36.5	13	10.1	1,265
Listeria monocytogenes	**.*	0	0.2	24

If < 10 events or no population data, no rates calculated.

5.09 VACCINE PREVENTABLE DISEASES

YEAR: 2001	CLINTON	Illinois	U.S.	YEAR 2010
	Number	Number		
Total	1	226	N/A	N/A

Diphtheria	0	0	N/A	0
Pertussis	1	198	N/A	2,000
Tetanus	0	2	N/A	0
Measles	0	3	N/A	0
Mumps	0	21	N/A	0
Rubella	0	2	N/A	0
Polio	0	0	N/A	0

5.10 HEPATITIS B INCIDENCE RATES  
(Rates per 100,000)

YEAR: 2001	CLINTON		Illinois		U.S.	YEAR 2010
	Rate	Number	Rate	Number		
Total	**.*	0	1.7	218	N/A	N/A

If < 10 events or no population data, no rates calculated.

5.11 TUBERCULOSIS INCIDENCE RATES  
(Rates per 100,000)

YEAR: 2001	CLINTON		Illinois		U.S.	YEAR 2010
	Rate	Number	Rate	Number		
Total	**.*	0	5.6	703	N/A	1.0
Asian	**.*	0	**.*	137	N/A	1.0
Black	**.*	0	**.*	279	N/A	1.0
White	**.*	0	**.*	274	N/A	1.0
Other	**.*	0	**.*	6	N/A	1.0

If < 10 events or no population data, no rates calculated.

6.01 ENVIRONMENTAL INDICATORS

2001 Race Data not available.

6.02 TOXIC AGENTS RELEASED INTO AIR, WATER, SOIL

2001 Race Data not available.

6.03.01 MOTOR VEHICLE ACCIDENTS MORTALITY RATES, ICD-9

2001 Race Data not available.

6.03.02 MOTOR VEHICLE ACCIDENTS MORTALITY RATES, ICD-10  
(Rates per 100,000)

YEAR: 2001	CLINTON		Illinois		U.S.	YEAR 2010
	Rate	Number	Rate	Number		
Total: Age-Adjusted	***.*		***.*		N/A	9.2
Crude	***.*	8	12.5	1,559	N/A	N/A
Premature(<65)	***.*	5	11.7	1,289	N/A	N/A
Asian: Age-Adjusted	***.*		***.*		N/A	9.2

/ PI Crude	***.*	0	***.*	26	N/A	N/A
Premature(<65)	***.*	0	***.*	24	N/A	N/A
Black: Age-Adjusted	***.*		***.*		N/A	9.2
Crude	***.*	0	***.*	236	N/A	N/A
Premature(<65)	***.*	0	***.*	215	N/A	N/A
White: Age-Adjusted	***.*		***.*		N/A	9.2
Crude	***.*	8	***.*	1,295	N/A	N/A
Premature(<65)	***.*	5	***.*	1,048	N/A	N/A

If < 10 events or no population data, no rates calculated.

6.04.01 HOMICIDE RATES, ICD-9

2001 Race Data not available.

6.04.02 HOMICIDE RATES, ICD-10  
(Rates per 100,000)

YEAR: 2001	CLINTON		Illinois		U.S.	YEAR 2010
	Rate	Number	Rate	Number		
Total: Age-Adjusted	***.*		***.*		N/A	3.0
Crude	***.*	1	8.5	1,064	N/A	N/A
Premature(<65)	***.*	1	9.3	1,019	N/A	N/A
Asian: Age-Adjusted	***.*		***.*		N/A	3.0
/ PI Crude	***.*	0	***.*	9	N/A	N/A
Premature(<65)	***.*	0	***.*	8	N/A	N/A
Black: Age-Adjusted	***.*		***.*		N/A	3.0
Crude	***.*	0	***.*	640	N/A	N/A
Premature(<65)	***.*	0	***.*	628	N/A	N/A
White: Age-Adjusted	***.*		***.*		N/A	3.0
Crude	***.*	1	***.*	415	N/A	N/A
Premature(<65)	***.*	1	***.*	383	N/A	N/A

If < 10 events or no population data, no rates calculated.

6.05.01 SUICIDE RATES, ICD-9

2001 Race Data not available.

6.05.02 SUICIDE RATES, ICD-10  
(Rates per 100,000)

YEAR: 2001	CLINTON		Illinois		U.S.	YEAR 2010
	Rate	Number	Rate	Number		
Total: Age-Adjusted	***.*		***.*		N/A	5.0
Crude	***.*	5	9.1	1,131	N/A	N/A
Premature(<65)	***.*	4	8.5	929	N/A	N/A
Asian: Age-Adjusted	***.*		***.*		N/A	5.0
/ PI Crude	***.*	0	***.*	22	N/A	N/A
Premature(<65)	***.*	0	***.*	18	N/A	N/A

Black: Age-Adjusted	***.*		***.*		N/A	5.0
Crude	***.*	0	***.*	110	N/A	N/A
Premature(<65)	***.*	0	***.*	92	N/A	N/A
White: Age-Adjusted	***.*		***.*		N/A	5.0
Crude	***.*	5	***.*	997	N/A	N/A
Premature(<65)	***.*	4	***.*	817	N/A	N/A

If < 10 events or no population data, no rates calculated.

6.06 NON-FATAL HEAD/SPINAL CORD, HIP INJURY HOSPITALIZATION RATES  
(Rates per 100,000)

YEAR: 2001	CLINTON		Illinois		U.S.	YEAR 2010
	Rate	Number	Rate	Number		
Hip Fracture (Ages 65+)	717.1	37	734.8	10,985	N/A	N/A
Head Injury	28.1	10	65.9	8,223	N/A	45.0
Spinal Cord	**.*	0	3.8	471	N/A	2.4

If < 10 events or no population data, no rates calculated.

6.06.01 NON-FATAL HIP FRACTURE HOSPITALIZATION RATES (AGES 65 AND UP)  
(Rates per 100,000)

YEAR: 2001	CLINTON		Illinois		U.S.	YEAR 2010
	Rate	Number	Rate	Number		
Ages 65+	717.1	37	734.8	10,985	N/A	N/A
Females	**.*	27	931.1	8,337	N/A	416.0
Males	**.*	10	441.6	2,648	N/A	474.0

If < 10 events or no population data, no rates calculated.  
If < 6 events, numbers are suppressed.

6.06.02 NON-FATAL HEAD INJURY HOSPITALIZATION RATES  
(Rates per 100,000)

YEAR: 2001	CLINTON		Illinois		U.S.	YEAR 2010
	Rate	Number	Rate	Number		
Total	28.1	10	65.9	8,223	N/A	45.0
Females	**.*	*	43.0	2,742	N/A	45.0
Males	**.*	*	89.7	5,481	N/A	45.0
Ages < 15	**.*	*	**.*	958	N/A	N/A
Ages 15-24	**.*	*	**.*	1,484	N/A	N/A
Ages 25-64	**.*	*	**.*	3,458	N/A	N/A
Ages < 65	**.*	*	25.1	5,900	N/A	N/A
Ages 65 +	**.*	*	155.4	2,323	N/A	N/A

If < 10 events or no population data, no rates calculated.

The number of events is suppressed if less than 6 or if the number reveals through subtraction another category number of less than 6 (i.e., complimentary suppression)

Suggestion: if numbers are suppressed, try combining multiple years of data or combine geographies for a single year of data.

6.06.03 NON-FATAL SPINAL CORD INJURY HOSPITALIZATION RATES  
(Rates per 100,000)

YEAR: 2001	CLINTON	Illinois		U.S.	YEAR 2010
	Rate	Number	Rate	Number	
Total	**.*	0	3.8	471	N/A 2.4
Females	**.*	*	1.9	120	N/A 2.4
Males	**.*	*	5.7	351	N/A 2.4
Ages < 15	**.*	*	**.*	15	N/A N/A
Ages 15-24	**.*	*	**.*	98	N/A N/A
Ages 25-64	**.*	*	**.*	252	N/A N/A
Ages < 65	**.*	*	1.6	365	N/A N/A
Ages 65 +	**.*	*	7.1	106	N/A N/A

If < 10 events or no population data, no rates calculated.

6.07 ALCOHOL-RELATED MOTOR VEHICLE MORTALITY RATES

2001 Race Data not available.

6.08 OCCUPATIONAL DISEASES/INJURIES

2001 Race Data not available.

6.09 BLOOD LEAD LEVELS IN CHILDREN

2001 Race Data not available.

6.10 ASSAULT RATES

2001 Race Data not available.

7.01 SENTINEL EVENTS

YEAR: 2001	CLINTON	Illinois		U.S.	YEAR 2010
	Number	Number			
Infants (0-1) Hospitalization for Dehydration	3	958		N/A	N/A
Children (1-17) Hospitalization for Rheumatic Fever	0	29		N/A	N/A
Children (1-14) Hospitalization for Asthma	8	6,599		N/A	N/A
Adults (>=18)					

5	0	647	N/A	N/A
Uncontrolled	21	13,469	N/A	N/A

7.02 SENTINEL EVENTS - CANCER

Data not available.

ta System Report 07/11/06 12:06:04 PM

a report shows all zero numbers, it means that no data is available for this county or community.

ore information about this indicator, please read [Indicator Descriptions](#).

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