Translating local health and social equity data into effective policy, programs and public awareness in Chicago

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No relationships to disclose
Short Distances to Large Gaps in Health

Life expectancy at birth (years)

- Shorter
- Longer

1 mile

Red Line
Green Line
Orange Line

Follow the discussion
#CloseHealthGaps

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Healthy Chicago 2.0
Healthy Chicago 2.0 Vision

“A city with strong communities and collaborative stakeholders, where all residents enjoy equitable access to resources, opportunities and environments that maximize their health and well-being”
Focus on Health Equity

Equality doesn’t mean Equity
Social Determinants of Health

“Social determinants of health are conditions in the environments in which people are born, live, learn, work, play, worship, and age that affect a wide range of health, functioning, and quality-of-life outcomes and risks.” (Healthy People 2020, CDC)
Mobilizing for Action through Planning and Partnerships (MAPP)

Phase 1: Partnership Development

Phase 2: Visioning

Phase 3: The Four Assessments
- Community Themes & Strengths
- Forces of Change
- Local Public Health System
- Community Health Status

Phase 4: Identify Strategic Issues

Phase 5: Formulate Goals and Strategies

Phase 6: Action Cycle

Developed by National Association of County and City Health Officers (NACCHO) and the Centers for Disease Control and Prevention (CDC)
Community Health Status Assessment

Process:

• ~10 million records of health data (2001 - 2014)
• Social determinant lens to health data at the neighborhood level:
  – Child Opportunity Index (looks at neighborhood infrastructure)
  – Educational Opportunity Index (looks at educational quality)
  – Economic Hardship Index (looks at socio-economic conditions)

Outcome:

• Identified disparities in places and subpopulations
• Assessed relationship between health outcomes and SDOH
### Action Areas

#### Health Conditions
- Behavioral Health
- Child & Adolescent Health
- Chronic Disease
- Infectious Disease
- Violence & Injury

#### Root Causes
- Access to healthcare
- Environment & Community Conditions
  *(housing, economic development, education, safety)*

#### Essential Supports
- Data & Research
- Partnerships & Community Engagement
Hardship Index: A measure of disparity

Dependency
Crowded housing
Poverty
Per capita income
Unemployment
High school graduation
Life expectancy is related to hardship

Life Expectancy (years)

Community Area Hardship Index

R² = 0.3797
High hardship strongly correlates to:

- Self-rated health status
- Poor mental health
- Chlamydia incidence
- Inadequate prenatal care
- Teen births
- Smoking
- Fruit and vegetable consumption
- Physical activity
- Obesity
- Cervical cancer
- Hospitalizations related to heart disease
- Hospitalizations related to diabetes
- Hospitalizations related to COPD
- Premature mortality
- Homicides
- Drug-induced mortality
- Infant mortality
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Teen births & economic hardship

Chicago overall = 41.9 per 1,000
Teen Birth Rate


Highest Community Area
East Garfield Park (26): 107.4

Lowest Community Areas
Loop (32): 0.6*
Lincoln Park (7): 1.5*

Chicago: 41.9

* Rates are unreliable due to the low number of reported teen births during this period.
GOAL

Give adolescents and young adults the tools and support they need to make healthy choices

OBJECTIVE

Reduce teen birth rate in high hardship neighborhoods by 10% by 2020

STRATEGIES

• Make condoms available in public high schools
• Provide positive youth development and peer health programs both in and out of school
• Expand education and access to long-acting, reversible contraception and emergency contraception
TEEN BIRTH RATE

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GOAL
Decrease incidents of victimization and exposure to violence and strengthen community protective factors

OBJECTIVE
Reduce gun-related homicide among youth in high hardship neighborhoods by 10% by 2020

STRATEGIES
• Provide positive youth development and peer programs both in and out of school, focusing on positive relationships
• Conduct health impact assessment in advance of school closures and other large scale shifts in community resources
• **25 goals**

• **82 measurable objectives**

• **216 strategies**
  – *Many cross-cutting*
  – *Involve multi-sector partnerships*
Next Steps

• Plan
  – Release Healthy Chicago 2.0 in December 2015

• Implement
  – Launch in January 2016
  – Action Teams will develop workplans to implement strategies

• Evaluate
  – CDPH will track progress using objective metrics developed
  – CDPH will disseminate updates, progress and indicators annually
  – Action Teams will revise and improve action area workplans as needed
When it’s better for everyone, it’s better for everyone

- Eleanor Roosevelt