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March 31, 2022

To the Honorable Members of the Illinois General Assembly:

In compliance with the requirements set forth in the Data Governance and Organization to Support Equity and Racial Justice Act (20 ILCS 65 et. al) (the "Act"), the Illinois Department of Public Health (IDPH) hereby submits a progress report detailing the programs and data that have been catalogued for which the demographic categories described in Section 20-15 of the Act have been standardized and, to the extent possible, the data sets and programs that are planned for the coming year.

The Act requires IDPH to "report statistical data on racial, ethnic, age, sex, disability status, sexual orientation, gender identity, and primary or preferred language demographics of program participants for each major program" administered by the agency.

While "major program" is not defined in the statute, IDPH has adopted the following definition provided by the Governor's Office of Management and Budget (GOMB): a major program is a program with an enacted appropriation of greater than \$1 million in fiscal year; direct services provided to individuals and/or a reasonable expectation that demographic information can be aggregated via proxy data without substantial cost or disruption to program delivery.<sup>1</sup>

With direction from GOMB, IDPH has further defined "program participants" as any individual who receives program services or interventions directly from state agency staff, contractors, or grantees.

Using these definitions, IDPH has identified the following 22 programs and program participant populations for analysis:

- 1. Disease Control Case Identification/Contact Tracing and Resource Coordination
- 2. Disease Control Human Immunodeficiency Virus/Acquired Immunodeficiency Syndrome
- 3. Disease Control Illinois Ryan White Part B Program
- 4. Disease Control Sexually Transmitted Infections Prevention and Control
- 5. Disease Control Tuberculosis
- 6. Health Promotion CDC COVID-19 Equity
- 7. Health Promotion Chronic Disease Grants
- 8. Health Promotion Genetics Counseling
- 9. Health Promotion Illinois Tobacco Quit Line
- 10. Health Promotion Preventive Health and Health Services Block Grant
- 11. Health Promotion Resiliency Education to Advance Community Healing
- 12. Health Protection Illinois Lead Program

<sup>&</sup>lt;sup>1</sup> Programs with anonymous reporting of violations, those which utilize tele-help lines, and regulatory/licensure programs have been excluded from this definition.

- 13. Minority Health COVID-19 Community-Based Testing and Intervention Targeting Minority Populations
- 14. Minority Health COVID-19 Migrant Workers Mobile Testing and Outbreak Response
- 15. Policy, Planning, and Statistics Behavioral Risk Factor Surveillance System Survey
- 16. Policy, Planning, and Statistics Identified Offenders Program
- 17. Policy, Planning, and Statistics Illinois State Cancer Registry
- 18. Policy, Planning, and Statistics Underserved Physician Workforce Loan Repayment Program
- 19. Women's Health Family Planning
- 20. Women's Health Illinois Breast and Cervical Cancer Program
- 21. Women's Health Illinois WISEWOMAN Program
- 22. Women's Health University of Illinois at Chicago Division of Specialized Care for Children

In February and March, IDPH began to assess currently catalogued demographic data for each of the aforementioned programs.

Following its initial assessment, IDPH has determined the following demographic category has been defined and standardized across all "major programs" identified in this report:

## Sex

In the coming year, IDPH will utilize the Office of Equity's guidance to further refine and standardize definitions for the remaining demographic categories, except for race and ethnicity in the following 15 programs, which report that demographic information to the federal government:<sup>2</sup>

- 1. Disease Control Human Immunodeficiency Virus/Acquired Immunodeficiency Syndrome
- 2. Disease Control Illinois Ryan White Part B Program
- 3. Disease Control Sexually Transmitted Infections Prevention and Control
- 4. Disease Control Tuberculosis
- 5. Health Promotion CDC COVID-19 Equity
- 6. Health Promotion Chronic Disease Grants
- 7. Health Promotion Illinois Tobacco Quit Line
- 8. Health Protection Illinois Lead Program
- 9. Minority Health COVID-19 Community-Based Testing and Intervention Targeting Minority Populations
- 10. Minority Health COVID-19 Migrant Workers Mobile Testing and Outbreak Response
- 11. Policy, Planning, and Statistics Behavioral Risk Factor Surveillance System Survey
- 12. Policy, Planning, and Statistics Illinois State Cancer Registry
- 13. Women's Health Family Planning
- 14. Women's Health Illinois Breast and Cervical Cancer Program
- 15. Women's Health Illinois WISEWOMAN Program

<sup>&</sup>lt;sup>2</sup> The Act states the following: "If a program administered by the Board or the Department is subject to federal reporting requirements that include the collection and public reporting of statistical data on the racial and ethnic demographics of program participants, the Department may maintain the same racial and ethnic classifications used under the federal requirements if such classifications differ from the classifications listed in subsection (a)" (20 ILCS 65/20-15(c)).

Once the remaining categories are defined, IDPH will work with the Illinois Department of Innovation and Technology (IDIT) and GOMB to streamline its data collection and gather the relevant data from major program participants.

Furthermore, in the coming year, IDPH will add the following two programs to its list of "major programs" to be analyzed:

- 1. Disease Control Illinois' National Electronic Disease Surveillance System
- 2. Health Protection Comprehensive Lead Education, Reduction, and Window Replacement Program

As the state works to implement the Act, IDPH's data stewards; information and technology staff; and diversity, equity, and inclusion leaders will work with IDIT and GOMB to analyze currently catalogued data, to identify data gaps, and to determine how to collect demographic information. Ultimately, we hope to provide valuable data and analysis that will be meaningful and inform program design and policy-making endeavors.

Very Sincerely and Respectfully,

Amaal V.E. Tokars, Dr.P.H.

**Acting Director** 

Illinois Department of Public Health