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**Date: July 1, 2022**

**To:** Honorable Members of the Illinois General Assembly

**From:** Amaal V.E. Tokars, acting director, Illinois Department of Public Health

**Re:** Data Governance and Organization to Support Equity and Racial Justice Act Section 20-15(a) Report

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This report is issued pursuant to the provisions of Section 20-15(a) of the Data Governance and Organization to Support Equity and Racial Justice Act (“the Act”) (20 ILCS 65/20-1). The Act requires the Illinois Department of Public Health (IDPH) to report statistical data on the racial, ethnic, age, sex, disability status, sexual orientation, gender identity, and primary or preferred language demographics of program participants for each major program the IDPH administers.

### **Introduction**

In the first Annual March Data Governance and Organization to Support Equity and Racial Justice Act Report, the IDPH identified the following “major programs” and corresponding participant populations for analysis:

1. Health Promotion – Genetics Counseling
2. Health Promotion – Illinois Tobacco Quit Line
3. Health Protection – Illinois Lead Program
4. Minority Health – COVID-19 Community-Based Testing and Intervention Targeting Minority Populations
5. Minority Health – COVID-19 Migrant Workers Mobile Testing and Outbreak Response
6. Policy, Planning, and Statistics – Underserved Physician Workforce Loan Repayment Program
7. Women’s Health – Family Planning
8. Women’s Health – Illinois Breast and Cervical Cancer Program
9. Women’s Health – Illinois WISEWOMAN Program
10. Women’s Health – University of Illinois at Chicago Division of Specialized Care for Children

IDPH had previously included the following programs in the definition of major program, however after additional discussions it was decided for various reasons the following will not be included at this time:

1. Disease Control – Case Identification/Contact Tracing and Resource Coordination- No direct services provided by IDPH.
2. Disease Control – Human Immunodeficiency Virus/Acquired Immunodeficiency Syndrome- No direct services provided by IDPH, data surveillance system.
3. Disease Control – Illinois Ryan White Part B Program- No direct services provided by IDPH.

4. Disease Control – Sexually Transmitted Infections Prevention and Control - No direct services provided by IDPH.
5. Disease Control – Tuberculosis - No direct services provided by IDPH.
6. Health Promotion – Centers for Disease Control and Prevention (CDC) COVID-19 Equity - Program has not launched yet, no data has been collected, and no direct services provided by IDPH.
7. Health Promotion – Preventive Health and Health Services Block Grant - No direct services provided by IDPH.
8. Health Promotion – Resiliency Education to Advance Community Healing – Pass through funds from Illinois State Board of Education. No direct services provided by IDPH.
9. Health Promotion – Chronic Disease Grants - IDPH is currently in final year of a five-year grant cycle and it is unclear if another iteration of this federal grant will be released. IDPH does provide a limited number of direct services under this grant but has not done so in the recent past due to COVID-19.
10. Policy, Planning, and Statistics – Identified Offenders Program - No direct services provided by IDPH and there is concern about the ability to gather required data.
11. Policy, Planning, and Statistics – Behavioral Risk Factor Surveillance System Survey - No direct services provided by IDPH, data surveillance system.
12. Policy, Planning, and Statistics – Illinois State Cancer Registry - No participants or direct services provided by IDPH.

For each major program identified in the Illinois Department of Public Health March 2022 report, this report will provide statistical data where available for each of demographic dispositions enumerated in the Act: race, age, sex, disability status, sexual orientation, gender identity, and primary or preferred language.

[Section 20-15(e) of the Act states “if the Board or Department is unable to begin reporting the data required by subsection (a) by July 1, 2022, the Board or the Department shall state the reasons for the delay under the reporting requirements.” As of the date of this report the Illinois Department of Public Health was unable to begin reporting the following data.

The information we do not currently collect can be found, by program, in the statistical data section of this report.

### **Change Management Efforts and Potential Challenges**

- **Health Promotion – Genetics Counseling** - Data from this program is dependent on data available in grantee’s electronic health records. Additional data requiring changes to grantees’ medical record system may require financial support. Grantees report data to IDPH via EGrAMS. Modifications to EGrAMS would be needed to support additional fields. In the future, grants will be managed in Amplifund. A platform in Amplifund to support data collection and management needs to be built and supported.
- **Health Promotion – Illinois Tobacco Quit Line** - Changes in reporting could be made without additional agreements or funding, however, several months would be needed to execute the changes.

- **Minority Health – COVID-19 Community-Based Testing and Intervention Targeting Minority Populations and the COVID-19 Migrant Workers Mobile Testing and Outbreak Response** - An issue with collecting information is the limitation of the data reporting in EGrAMS. The system only allows a certain number of fields for data collection and does not give consolidated reports on narrative entries. IDPH must develop a second metrics report for grantees to use to ensure there are enough fields available to capture the requested data. Grantees have not always collected all the data requested, so this presents an opportunity for IDPH to educate them about the importance of compiling information on the minority populations served and the value of reporting accurate information.
- **Policy, Planning, and Statistics – Underserved Physician Workforce Loan Repayment Program** - The program's database needs modifications to collect other data requirements for the Act. At this time, no challenges in collecting additional data are anticipated.
- **Women's Health – Family Planning (IFPP)** - The IFPP provides reproductive health grants for local delegate agencies (30) with state and federal funds. The IFPP is funded by the U.S. Department of Health and Human Services Office of Population Affairs (OPA) for Title X family planning services grants. The IFPP collects program and billing data through the Ahlers data system (contracted data vendor). The data is compiled monthly for grantee reimbursement, Family Planning Annual Report (FPAR), and ad hoc reports. The OPA is refining FPAR clinic level data collection to seek client level data in its FPAR 2.0. The IFPP and its delegate agencies will review the process to assess client level data requirements to revise data collection tools and determine the hardware/software needs of the clinics as well as the increased staff time necessary for intake. The delegate agency intake staff collect demographic and medical service data on the Client Visit Record (CVR). The CVR is undergoing a revision to include the FPAR 2.0 demographic requirements. The FPAR 2.0 demographic it requires are consistent with the General Assembly report requirements except for disability status and language. The IFPP has submitted a waiver to OPA to ask for an extension on the implementation start date to allow time for CVR revisions, Ahlers data and billing system update, source and procure the delegate agency hardware/software needs, and delegate agency testing/training.
- **Women's Health – Illinois Breast and Cervical Cancer Program (IBCCP) and Illinois WISEWOMAN Program (IWP)** - The IBCCP provides breast and cervical cancer screening and diagnostic services. The IWP companion program to IBCCP is where their clients can receive cardiovascular health services. The IBCCP and IWP share lead agency grantees and program participants. Of the 29 IBCCP lead agencies, seven are IWP lead agencies offering breast and cervical cancer screening and diagnostic services along with cardiovascular health services in co-located grantee sites. The IBCCP and IWP collect minimum data elements (MDE) for submission to the CDC to document progress towards federal program performance measures. The IBCCP and IWP also collect client level data. The IBCCP and IWP use the Cornerstone data and billing system to capture client level data inclusive of demographics and medical services provided. The Illinois Department of Innovation and Technology (DoIT) maintains the Cornerstone data and billing system but plans to terminate the system. A request for proposal (RFP) was released to secure a new data and billing system vendor for the program. That RFP review process is pending and a two- year window is anticipated to transition the two programs. The IBCCP and IWP lead agency intake teams use enrollment and health assessment forms to capture client level data. The data is entered into Cornerstone where MDE queries extract performance and demographic data. The DoIT team updates the Cornerstone data and billing system on behalf of the programs through an Inter-Governmental Agreement. The programs demographic data has some inconsistencies with the General Assembly Report requirements. IDPH needs to review the intake documents and assess DoIT's ability to further modify the

system to add additional data elements to the RFP. There will also be training needs for the new data elements and the billing system.

- **Women’s Health – University of Illinois at Chicago Division of Specialized Care for Children (UIC-DSCC)** - This program uses a care coordination software hosted by Eccovia called Client Track for data collection on individuals served.
  - There are two additional categories of race that need to be added to Client Track before data can be collected/reported for “Middle Eastern/North African” or “Some other race alone.” While “Middle Eastern/North African” is not a statutorily required category, the agency will begin collecting information regarding that demographic category based on guidance provided by the Governor’s Office of Equity. The addition of these fields will have to be completed by Eccovia and it is estimated it will be completed by January 2023. Once the software updates are completed, UIC-DSCC will educate and train team members. This minor update requires simple education and training.
  - Demographic questions pertaining to gender identity and sexual orientation also require a revision to the Client Track software system. These questions will be combined in demographic screens and assessment data. The work required by Eccovia for these updates is more extensive and is estimated it will be the summer of 2023 before completion. As UIC-DSCC is preparing for the software updates to take place, plans must be developed to provide additional support and training to team members on these additional questions. Training will need to include sensitive approaches to the questions with the pediatric and adolescent population and on the availability of related topics that participants or family members may need.
  - UIC-DSCC will await further guidance from the state on plans to collect information on indigeneity.

## Methodology

The information contained in this report is based solely on the data provided by program participants and collected by programming personnel for the various major programs. The data has not been audited for completeness and quality, therefore, no baseline for comparison has been established.

For the purpose of this report, program participants are defined as ***any individual who receives program services or interventions directly from state agency staff, contractors, or grantees.*** The program participants count is the number of distinct individuals who have been identified as program participants regardless of demographic category.

### General Methodology

**University of Illinois at Chicago Division of Specialized Care for Children (UIC-DSCC)** - UIC-DSCC gathered information for this report from their care coordination software, Client Track by Eccovia, for individuals enrolled in the DSCC Care Program. The DSCC Connect Care Program and Home Care Programs were not included in this data pull as the individuals served by this program are Medicaid

recipients and would be reflected in the counts from the Illinois Department of Healthcare and Family Services. Data was accessed on May 11, 2022, with dates of July 1, 2021 through March 30, 2022.

**Family Planning, Illinois Breast and Cervical Cancer Program, Illinois WISEWOMAN Program** - For the IBCCP, IWP, and IFPP client level data is collected during the intake process through program enrollment forms. The data from the enrollment forms is uploaded into data and billing systems that compile data for federal fund reporting and documentation of medical services for reimbursements. IBCCP and IWP use the Cornerstone data and billing system; IFPP uses the Ahlers data and billing system. Updates to the enrollment forms, data and billing systems are necessary for expended data collection for gender identity, sexual orientation and disability status classifications.

**Underserved Physician Workforce Loan Repayment Program** -The online application currently collects data on race, age, and gender. The database needs modifications to collect data on ethnicity, disability status, sexual orientation, gender identify, and primary or preferred language. No challenges are anticipated to adding these requirements to the online application and associated database.

### **Race and Ethnicity**

The Act provides that the Illinois Department of Public Health “shall use the same racial and ethnic classifications for each program.” 20 ILCS 65/20-15(a). The enumerated classifications are:

- (1) American Indian and Alaska Native alone
- (2) Asian alone
- (3) Black or African American alone
- (4) Hispanic or Latino of any race
- (5) Native Hawaiian and Other Pacific Islander alone
- (6) White alone
- (7) Some other race alone
- (8) Two or more races

*Id.* The Act further allows for the Illinois Department of Public Health to “further define the racial and ethnic categories[.]” *Id.*

The Act further states that 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).

### **Programs that will maintain federal reporting for race and ethnicity:**

1. Illinois Family Planning Program (IFPP)
2. Illinois Breast and Cervical Cancer Program (IBCCP)
3. Illinois WISEWOMAN Program (IWP)

The IBCCP, IFPP, and IWP collect demographic data to support federal grant funding. There is consistency in the racial and ethnic classifications required in the legislation, so the programs will remain consistent with the federal reporting.

### **Race**

Genetics Counseling: Grantees collect information on race and store in their electronic health record. Grantees report to IDPH via EGrAMS.

Quitline: Individuals who enroll in Quitline services complete an intake that include race information. Grantees maintain this information in salesforce systems and report to IDPH on a monthly, quarterly, and annual basis. Grantees also report to the CDC Quitline Data warehouse.

### **Age**

UIC-DSCC's program serves a primarily pediatric aged population and, if needed, is able to provide additional age breakdown of those under age 18.

Genetic Counseling: Method of collection is described in the race section. Of note, the age breakdown for Genetic Counseling as currently collected is driven by the fact that the program inherently focuses on the pediatric populations. The program reports that it will be able to report in the required categories after changes are discussed with grantees and implemented.

### **Sex**

Genetic Counseling: Only collects male/female at this time.

Quitline: Only collects male/female.

### **Disability Status**

UIC-DSCC Core Program requires the individual to have a chronic medical condition in order to enroll. As a result, program participants will be included in disability counts as a "yes."

Genetic Counseling: Not reported by grantees.

Quitline: Actively collects disability status.

### **Sexual orientation**

Illinois Underserved Physician Workforce Program: This program does not currently ask applicants for their sexual orientation.

Genetic Counseling: Not collected by grantees or reported due to age range of focus.

### **Gender Identity**

Genetic Counseling: Not collected by grantees or reported due to age range of focus.

**Primary or preferred language**

Genetic Counseling: Not currently reported to IDPH.

**Statistical Data**

**Key:**

- **“X”** is used to indicate when a demographic disposition has 10 or fewer people.
- **“0”** is used to indicate that data for a demographic disposition is collected, but no program participants have selected that category as of when the report was pulled.
- A blank space is used to indicate that data for a demographic disposition is not collected.

**Statistical Data**

Health Promotion – Genetics Counseling

**Race**

Date Pulled	Program Count	Race								
		American Indian/Alaskan Native	Asian/Asian American	African American/Black	Native Hawaiian and Other Pacific Islander	Middle Eastern North African	White/European American	Some Other Race Alone	Two or More Races	No Race Specified
5/31/2022	2,563	X	129	464			1,706		91	165

### Ethnicity

Date Pulled	Program Count	Ethnicity				Indigenous
		<i>Latina/Latino/ Latinx/Hispanic</i>	<i>Other category not specified</i>	<i>Other category not specified</i>	<i>Other category not specified</i>	
5/31/2022	2,563	442	2,121			2,563

### Age

Date Pulled	Program Count	Age						
		<i>18 and under</i>	<i>19-24</i>	<i>25-34</i>	<i>35-44</i>	<i>45 - 54</i>	<i>55-64</i>	<i>65+</i>
5/31/2022	2,563	1,432						

### Sex

Date Pulled	Program Count	Sex				
		<i>Female</i>	<i>Male</i>	<i>Other category not specified</i>	<i>Other category not specified</i>	<i>Other category</i>
5/31/2022	2,563	1,679	884			

### Disability Status

Do not currently collect



**Sexual Orientation**

Do not currently collect

**Gender Identity**

Do not currently collect

**Primary or Preferred Language**

Do not currently collect

**Statistical Data**

Health Promotion – Illinois Tobacco Quit Line

**Race**

Date Pulled	Program Count									
		<i>American Indian/Alaskan Native</i>	<i>Asian/Asian American</i>	<i>African American/Black</i>	<i>Native Hawaiian and Other Pacific Islander</i>	<i>Middle Eastern North African</i>	<i>White/European American</i>	<i>Some Other Race Alone</i>	<i>Two or More Races</i>	<i>No Race Specified</i>
4/15/2022	818	X	X	235	X		559	16		

**Ethnicity**

Date Pulled	Program Count	Ethnicity				Indigenous
		<i>Latina/Latino/Latinx/Hispanic</i>	<i>Other category not specified</i>	<i>Other category not specified</i>	<i>Other category not specified</i>	
4/15/2022	818	79	739			818

### Age

Date Pulled	Program Count	Age						
		<i>18 and under</i>	<i>19-24</i>	<i>25-34</i>	<i>35-44</i>	<i>45 - 54</i>	<i>55-64</i>	<i>65+</i>
4/15/2022	818	X	16		141 age 25-44		381 age 45-64	277

### Sex

Date Pulled	Program Count	Sex				
		<i>Female</i>	<i>Male</i>	<i>Other category not specified</i>	<i>Other category not specified</i>	<i>Other category</i>
4/15/2022	818	487	324	X		

### Disability Status

Date Pulled	Program Count	Disability Status		
		<i>Please provide the type of disability status tracked with counts</i>	<i>Other category not specified</i>	<i>Other category not specified</i>
4/15/2022	818	104 - physical disability	201 - blind or visually impaired  334 - no disability	109 - deaf or hard of hearing  70 - medical disabilities

### Sexual Orientation

Date Pulled	Program Count	Sexual Orientation							
		<i>Bisexual</i>	<i>Gay</i>	<i>Lesbian</i>	<i>Queer</i>	<i>Questioning and/or unsure</i>	<i>Straight (heterosexual)</i>	<i>Additional category/identity not listed</i>	<i>Prefer not to answer</i>
4/15/2022	818	X	X	X		X	768		

### Gender Identity

Date Pulled	Program Count	Gender Identity				
		<i>Man</i>	<i>Woman</i>	<i>Non-binary, gender non-conforming</i>	<i>Other</i>	<i>Prefer not to answer</i>
4/15/2022	818	487	324	X		X

### Primary or Preferred Language

Date Pulled	Program Count	Primary Language								
		<i>Non-English Primary Language</i>	<i>Spanish</i>	<i>Polish</i>	<i>Chinese (including Mandarin, Cantonese)</i>	<i>Tagalog (Including Filipino)</i>	<i>Hindi</i>	<i>Arabic</i>	<i>Vietnamese</i>	<i>Korean</i>
4/15/2022	818		19	X	X	X		X	X	X

## Statistical Data

### Health Protection – Illinois Lead Program

#### Race

Date Pulled	Program Count	Race									
		<i>American Indian/Alaskan Native</i>	<i>Asian/Asian American</i>	<i>African American/Black</i>	<i>Native Hawaiian and Other Pacific Islander</i>	<i>Middle Eastern North African</i>	<i>White/European American</i>	<i>Some Other Race Alone</i>	<i>Two or More Races</i>	<i>No Race Specified</i>	<i>Refused to Answer</i>
5/19/2022	212,408	478	6,253	39,804	x		75,734		35,087	55,046	x

#### Ethnicity

Date Pulled	Program Count	Ethnicity				Indigenous
		<i>Latina/Latino/Latinx/Hispanic</i>	<i>Not Hispanic or Latino</i>	<i>Other category not specified</i>	<i>Other category not specified</i>	
5/19/2022	212,408	49,302	80,985	82,162		

#### Age

Date Pulled	Program Count	Age						
		<i>18 and under</i>	<i>19-24</i>	<i>25-34</i>	<i>35-44</i>	<i>45 - 54</i>	<i>55-64</i>	<i>65+</i>
5/19/2022	212,408	199,375	2,215	4,612	2,393	1,570	1,277	1,010

**Sex**

Date Pulled	Program Count	Sex				
		<i>Female</i>	<i>Male</i>	<i>Unknown</i>	<i>Other category not specified</i>	<i>Other category</i>
5/19/2022	212,408	106,399	103,951	2,058		

**Disability Status**

Do not currently collect

**Sexual Orientation**

Do not currently collect

**Gender Identity**

Date Pulled	Program Count	Gender Identity					
		<i>Man</i>	<i>Woman</i>	<i>Non-binary, gender non-conforming</i>	<i>Other</i>	<i>Prefer not to answer</i>	<i>Unknown</i>
5/19/2022	212,408	100,960	95,789				2,000

**Primary or Preferred Language**

Date Pulled	Program Count	Primary Language						
		<i>Non-English Primary Language</i>	<i>Spanish</i>	<i>Polish</i>	<i>Chinese (including Mandarin, Cantonese)</i>	<i>Tagalog (Including Filipino)</i>	<i>Hindi</i>	<i>Arabic</i>
5/19/2022	212,408		46,685					

**Statistical Data**

COVID-19 Community-Based Testing and Intervention Targeting Minority Populations

**Race**

Date Pulled	Program Count	Race								
		American Indian/Alaskan Native	Asian/Asian American	African American/Black	Native Hawaiian and Other Pacific Islander	Middle Eastern North African	White/European American	Some Other Race Alone	Two or More Races	No Race Specified
2/28/2022	1,990,930	0	247	1,237	0	0	3,779	0	0	1,985,667

**Ethnicity**

Do not currently collect

**Age**

Date Pulled	Program Count	Age						
		18 and under	19-24	25-34	35-44	45 - 54	55-64	65+
2/28/2022	1,990,930	6250				6,790 (ages 18-49)	2,205 (ages 50+)	

**Sex**

Date Pulled	Program Count	Sex				
		Female	Male	Other category not specified	Other category not specified	Other category
2/28/2022	1,990,930	3695	2562	1,984,673		

**Disability Status**

Do not currently collect

**Sexual Orientation**

Date Pulled	Program Count	Sexual Orientation							
		Bisexual	Gay	Lesbian	Queer	Questioning and/or unsure	Straight (heterosexual)	Additional category/identity not listed	Prefer not to answer
2/28/2022	1,990,930								1,990,930

**Gender Identity**

Date Pulled	Program Count	Gender Identity							
		Man	Woman	Non-binary, gender non-conforming	Other	Prefer not to answer	Other category not specified	Other category not specified	Other category not specified
2/28/2022	1,990,930	2,562	3,695	1,984,667	x				

**Primary or Preferred Language**

Do not currently collect

**Statistical Data**

Minority Health – COVID-19 Migrant Workers Mobile Testing and Outbreak Response

**Do not currently collect data**

**Statistical Data**

Policy, Planning, and Statistics – Underserved Physician Workforce Loan Repayment Program

**Race**

Date Pulled	Program Count	Race								
		American Indian/Alaskan Native	Asian/Asian American	African American/Black	Native Hawaiian and Other Pacific Islander	Middle Eastern North African	White/European American	Some Other Race Alone	Two or More Races	No Race Specified
6/1/2022	x			x			x			x

**Ethnicity**

Do not currently collect

**Age**

Do not currently collect



**Sex**

Date Pulled	Program Count	Sex				
		<i>Female</i>	<i>Male</i>	<i>Other category not specified</i>	<i>Other category not specified</i>	<i>Other category</i>
6/1/2022	x	x	x			

**Disability Status**

Date Pulled	Program Count	Disability Status		
		<i>Please provide the type of disability status tracked with counts</i>	<i>Other category not specified</i>	<i>Other category not specified</i>
6/1/2022	x	0		

**Sexual Orientation**

Do not currently collect

**Gender Identity**

Date Pulled	Program Count	Gender Identity					
		<i>Man</i>	<i>Woman</i>	<i>Non-binary, gender non-conforming</i>	<i>Other</i>	<i>Prefer not to answer</i>	<i>Other category not specified</i>
6/1/2022	x	x	x				

**Primary or Preferred Language**

Do not currently collect

**Statistical Data**

**Women’s Health – Family Planning**

**Race**

Date Pulled	Program Count	Race								
		American Indian/Alaskan Native	Asian/Asian American	African American/Black	Native Hawaiian and Other Pacific Islander	Middle Eastern North African	White/European American	Some Other Race Alone	Two or More Races	No Race Specified
5/31/2022	75,027	391	2,102	19,042	224		42,061		1,327	9,880

**Ethnicity**

Date Pulled	Program Count	Ethnicity				Indigenous
		Latina/Latino/Latinx/Hispanic	Other category not specified	Other category not specified	Other category not specified	
5/31/2022	75,027	31,056	43,343			

**Age**

Date Pulled	Program Count	Age						
		18 and under	19-24	25-34	35-44	45 - 54	55-64	65+
5/31/2022	75,027	5,087		28,760	13,045	0	0	0

**Sex**

Date Pulled	Program Count	Sex		
		Female	Male	Other category not specified
5/31/2022	75,027	67,716	7,311	

**Disability Status**

Do not currently collect

**Sexual Orientation**

Do not currently collect

**Gender Identity**

Do not currently collect

**Primary or Preferred Language**

Do not currently collect

**Statistical Data**

Women’s Health – Illinois Breast and Cervical Cancer Program

**Race**

Date Pulled	Program Count	Race								
		American Indian/Alaskan Native	Asian/Asian American	African American/Black	Native Hawaiian and Other Pacific Islander	Middle Eastern North African	White/European American	Some Other Race Alone	Two or More Races	No Race Specified
5/31/2022	11,574	43	1,061	379	22		9,834		39	196

### Ethnicity

Date Pulled	Program Count	Ethnicity				Indigenous
		<i>Latina/Latino/Latinx/Hispanic</i>	<i>Other category not specified</i>	<i>Other category not specified</i>	<i>Other category not specified</i>	
5/31/2022	11,574	8,430	2,999	145		

### Age

Date Pulled	Program Count	Age						
		<i>18 and under</i>	<i>19-24</i>	<i>25-34</i>	<i>35-44</i>	<i>45 - 54</i>	<i>55-64</i>	<i>65+</i>
5/31/2022	11,574	0	35	365	2,355	5,371	2,849	599

### Sex

Date Pulled	Program Count	Sex				
		<i>Female</i>	<i>Male</i>	<i>Other category not specified</i>	<i>Other category not specified</i>	<i>Other category not specified</i>
5/31/2022	11,574	11,574				

### Disability Status

Do not currently collect

### Sexual Orientation

Do not currently collect

### Gender Identity

Do not currently collect

### Primary or Preferred Language

Date Pulled	Program Count	Primary Language							
		Non-English Primary Language	Spanish	Polish	Chinese (including Mandarin, Cantonese)	Tagalog (Including Filipino)	Hindi	Arabic	Other language not specified
5/31/2022	11,574	307	8,606	22	50	73	13	X	2,503

### Statistical Data

Women’s Health – Illinois WISEWOMAN Program

### Race

Date Pulled	Program Count	Race									
		American Indian/Alaskan Native	Asian/Asian American	African American/Black	Native Hawaiian and Other Pacific Islander	Middle Eastern North African	White/European American	Some Other Race Alone	Two or More Races	No Race Specified	Asian or Pacific Islander
5/31/2022	2,470	X	1,231	152	X		1,058	12	X	X	X

### Ethnicity

Date Pulled	Program Count	Ethnicity				Indigenous
		<i>Latina/Latino/Latinx/Hispanic</i>	<i>Other category not specified</i>	<i>Unknown</i>	Mexican, Puerto Rican, Central/So. American	
5/31/2022	2,470	720	1,736	X	X	

### Age

Date Pulled	Program Count	Age						
		<i>18 and under</i>	<i>19-24</i>	<i>25-34</i>	<i>35-44</i>	<i>45 - 54</i>	<i>55-64</i>	<i>65+</i>
5/31/2022	2,470	0	0	0	347	1,084	906	133

### Sex

Date Pulled	Program Count	Sex				
		<i>Female</i>	<i>Male</i>	<i>Other category not specified</i>	<i>Other category not specified</i>	<i>Other category not specified</i>
5/31/2022	2,470	2,470				

### Disability Status

Do not currently collect

### Sexual Orientation

Do not currently collect

### Gender Identity

Do not currently collect

### Primary or Preferred Language

Date Pulled	Program Count	Primary Language								
		Non-English Primary Language	Spanish	Polish	Chinese (including Mandarin, Cantonese)	Tagalog (Including Filipino)	Hindi	Arabic	Other language not specified	Other language not specified
5/31/22	2,470	982	593	X	13	80	15	X	1,488	Napoli-X, Other-21, Filipino-X, Russian-18, Romanian-X, Telugu-X, Thai-X, Urdu-27, Vietnamese-87, Bengali-X, Bosnian-X, Burmese-X, Mongolian-41, Cambodian/Khmer-X, French-X, Fujing-X, Gujarati-26

### Statistical Data

Women’s Health – University of Illinois at Chicago Division of Specialized Care for Children

### Race

Date Pulled	Program Count	Race								
		American Indian/Alaskan Native	Asian/Asian American	African American/B lack	Native Hawaiian and Other Pacific Islander	Middle Eastern North African	White/European American	Some Other Race Alone	Two or More Races	No Race Specified
5/11/2022	2,682	x	112	210	0		1,375		x	972

### Ethnicity

Date Pulled	Program Count	Ethnicity				Indigenous
		<i>Latina/Latino/Latinx/Hispanic</i>	<i>Multiple ethnicities</i>	<i>Other category not specified</i>	<i>Other category not specified</i>	
5/11/2022	2,682	388	x			

### Age

Date Pulled	Program Count	Age						
		<i>18 and under</i>	<i>19-24</i>	<i>25-34</i>	<i>35-44</i>	<i>45 - 54</i>	<i>55-64</i>	<i>65+</i>
5/11/2022	2,682	2,398	312	0	0	0	0	0

### Sex

Date Pulled	Program Count	Sex				
		<i>Female</i>	<i>Male</i>	<i>Not specified</i>	<i>Other category not specified</i>	<i>Other category not specified</i>
5/11/2022	2,682	1,211	1,421	50		



### Disability Status

Date Pulled	Program Count	Disability Status		
		<i>Please provide the type of disability status tracked with counts</i>	<i>Other category not specified</i>	<i>Other category not specified</i>
5/11/2022	2,682	2,682		

### Sexual Orientation

Do not currently collect

### Gender Identity

Do not currently collect

### Primary or Preferred Language

Date Pulled	Program Count	Primary Language								
		<i>Non-English Primary Language</i>	<i>Spanish</i>	<i>Polish</i>	<i>Chinese (including Mandarin, Cantonese)</i>	<i>Tagalog (Including Filipino)</i>	<i>Hindi</i>	<i>Arabic</i>	<i>Other language not specified</i>	<i>Other language not specified</i>
5/11/2022	2,682	272	158	x	x	0	x	x	x - Urdu	x – French; x- Burmese; x- sign language; 102- not specified

### Conclusion

This report is transmitted on behalf of Amaal V.E. Tokars, acting director, Illinois Department of Public Health. For additional copies of this report or more specific information, contact Allison Nickrent, chief, IDPH Division of Governmental Affairs at Allison.Nickrent@illinois.gov or call 217-685-5076.