



The **Forces of Change Assessment (FOCA)** is part of the Cook County Department of Public Health's (CCDPH) WePLAN 2020 process. The FOCA was carried out with the aid of 26 people who are well-informed about resources necessary for optimal health and health equity. **The purpose of the FOCA** is to identify the “powerful organized interests that develop structures and support policies and practices that can either contribute to health equity or cause health inequities.”ⁱ

Most focus group (FG) members identified the Affordable Care Act and the budget of the State of Illinois as both opportunities and threats that affect the local public health system and community.

- The Affordable Care Act provides more people with health insurance and increases access to care while encouraging health care providers to develop new partnerships in communities. But undocumented immigrants are not covered, and a shortage of providers, lack of transportation, and uncovered costs are barriers to care.
- State of Illinois budget cuts force people to examine the system and how we collaborate. The state budget limits access to childcare, health care, mental health care, and high quality public education.
- Marriage equality expands benefits to same sex couples. But people with disabilities who want to marry each other face loss of crucial resources; Climate change is also a threat, while increased awareness of transgender people is an opportunity.

Most FG members identified patterns of decisions, policies, investments, rules, and laws as harming people of color, middle-class and working people, and women, while benefiting wealthy people, corporations, white people, and men.

- Incarceration and police contact disproportionately affect people of color and gender minorities.
- While corporations benefit from tax breaks, and prioritize profit-making over a commitment to communities, there is a redistribution of wealth as pensions are weakened, rights of workers to organize is threatened, and wealth disparity increases.
- There is a perception of lack of control over one's community, an inability to affect policy and legislation, disillusionment with elections and voting.

Most FG members identified very wealthy people and corporations as having more power than average people to create, enforce, implement, and change decisions, policies, investments rules and laws.

- The interests of the very wealthy and large corporations were often described as contributing to health inequity.
- Elected officials are too often disconnected from the day-to-day lives of their constituents, and unaware of the scarcity of resources confronting the people they represent.
- People without great wealth have power when they unite to advocate for their interests. This happens through social movements, advocacy of elected officials, and requires organizing.

ⁱ National Association of County and City Health Officials. (2014). *Mobilizing and organizing partners to achieve health equity*. Washington, DC: NACCHO. Page 14.