Oconto County Community Health Assessment

December 6, 2017

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Creating a healthier place to live, learn, work & play.

Welcome, Introductions, and Objectives for the Day

Kathy Henne, RN

Healthy Oconto County Steering Committee Member

HSHS St. Clare Memorial Hospital

Welcome/Introductions

- Introductions/Participants
- Packet Materials
- Housekeeping

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Objectives

- Update on current health data trends.
- Update on goals/progress of current 2 priorities
- Gather feedback to accelerate current priorities

What is a Community Health Needs Assessment?

Chris Culotta

WI DHS, Division of Public Health- Northeast Region

Community Health Needs Assessment Process

- **Require assessment every 3-5 year**
  - Healthcare systems every 3 years per ACA
  - Public Health every 5 years per State Statue
  - Last assessment 3 years ago: chose 3 priorities

- **Consistent Framework Statewide**

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Collaborative Initiatives

- In Oconto County, includes all health systems as a joint effort to meet Public Health state statute and requirements of the Affordable Care Act
  - Hospitals/Health Systems
  - Public Health (local and state)

Healthiest Wisconsin

Background

- Wisconsin Department of Health Services is required to produce a public health agenda for Wisconsin at least every 10 years.

  — Wis. Stat. §250.07(1)(a)

- Local health departments are required to conduct their own assessments and develop local strategies for health improvement.

  —Wis. Stat. §251.05

  —Wis. Administrative Rule 140.04

Healthiest Wisconsin 2020

- Launched in 2010
- Built with input from
  - Over 1,500 stakeholders
  - More than 60 listening sessions
- Foundation for local community health assessments and improvement plans

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Strengths of Healthiest Wisconsin 2020

- Large number of people vested in the work to develop the plan
- Covers 10-year period, allowing time to address issues
- Provides a broad foundation:
  - Twenty-three objectives address wide range of public health issues
  - All objectives are important to various sectors in the public health system

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Wisconsin Health Improvement Planning Process (WI HIPP)

- **Comprehensive Process**
  - HW2020 foundation
  - Alignment with Wisconsin communities
  - Development and application of prioritization criteria

- **Ongoing Collaboration –WI HIPP Steering Committee**
  - Data workgroups
  - Public Health Council
  - Wisconsin communities

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WI HIPP and *Healthy Wisconsin*

- **State Health Assessment**
  - Overview of the health of the people of Wisconsin
  - Guides the selection of priorities in the State Health Improvement Plan

- **State Health Improvement Plan**
  - Identifies priorities
  - Creates strategies and measures to support solutions for better health by 2020

Shared Priorities in Wisconsin

Local Communities	WI HIPP / Healthy Wisconsin
Excessive alcohol consumption	Alcohol
Nutrition	Nutrition and physical activity
Obesity	
Physical activity	
Prescription and illicit drug Abuse	Opioids
Mental health needs/issues	Suicide
Tobacco use	Tobacco

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Healthy Wisconsin Priorities

- Alcohol
- Nutrition and Physical Activity
- Opioids
- Suicide
- Tobacco

Cross-cutting Issue - Adverse Childhood Experiences (ACEs) and Resilience

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Healthy Wisconsin Priorities

Alcohol – Reduce Binge and Heavy Drinking

- Objective 1 – Reduce binge drinking
- Objective 2 – Reduce alcohol-related deaths

Healthy Wisconsin Priorities

Nutrition and Physical Activity –

Eat Healthier and Move More

- Objective 1 – Increase consumption of healthy foods and beverages
- Objective 2 – Increase breastfeeding
- Objective 3 – Increase physical activity

Healthy Wisconsin Priorities

Opioids –

Prevent and Reduce Opioid-Related Deaths and Harm

- Objective 1 – Reduce overdose deaths, hospitalizations, and emergency department visits

- Objective 2 – Increase use of outreach, intervention, treatment and support services

- Objective 3 – Reduce adolescent nonmedical use of opioids

Healthy Wisconsin Priorities

Suicide – Prevent Suicide in Wisconsin

- Objective 1 – Reduce suicides
- Objective 2 – Reduce rate of suicide attempts
- Objective 3 – Increase and enhance protective factors

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Healthy Wisconsin Priorities

Tobacco – Prevent and Reduce Smoking and Use of Other Tobacco Products

- Objective 1 – Reduce adult smoking
- Objective 2 – Reduce use of other tobacco products by adults
- Objective 3 – Reduce use of other tobacco products by youth

Healthy Wisconsin Priorities

Adverse Childhood Experiences, Trauma, and Resilience

What is *Healthy Wisconsin*?

Website
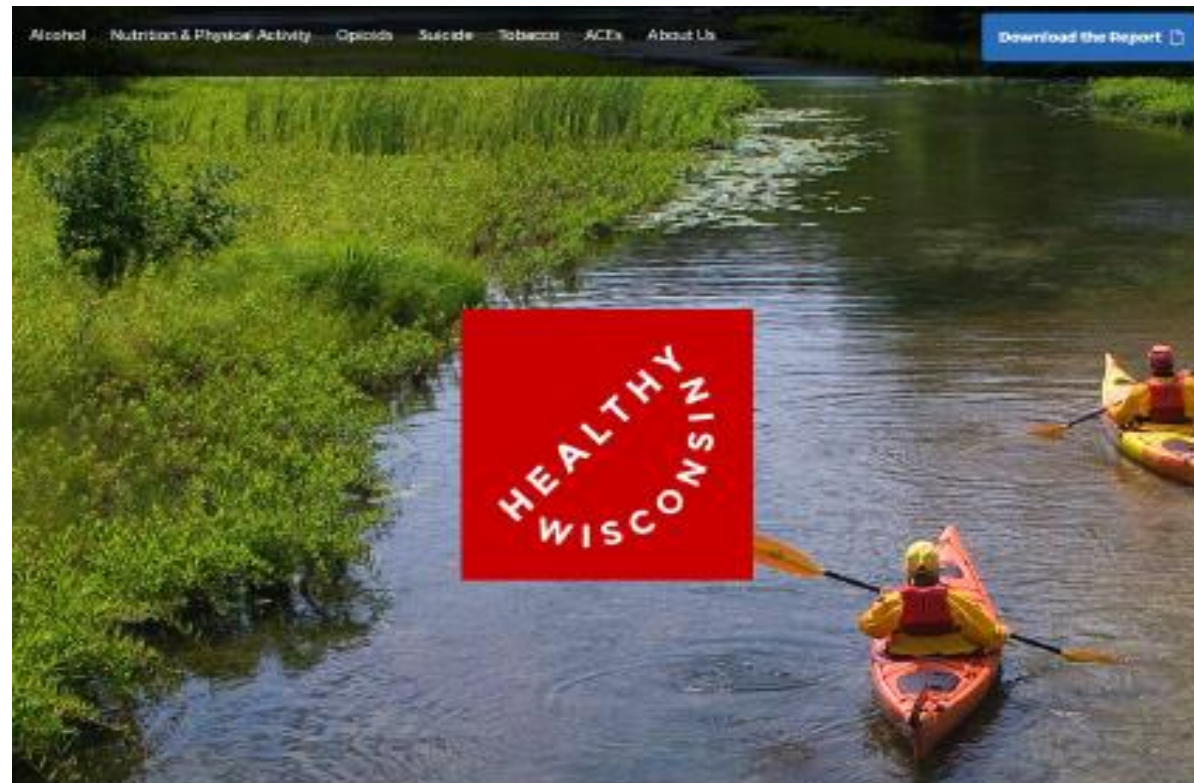
What is *Healthy Wisconsin*?

Downloadable Reports
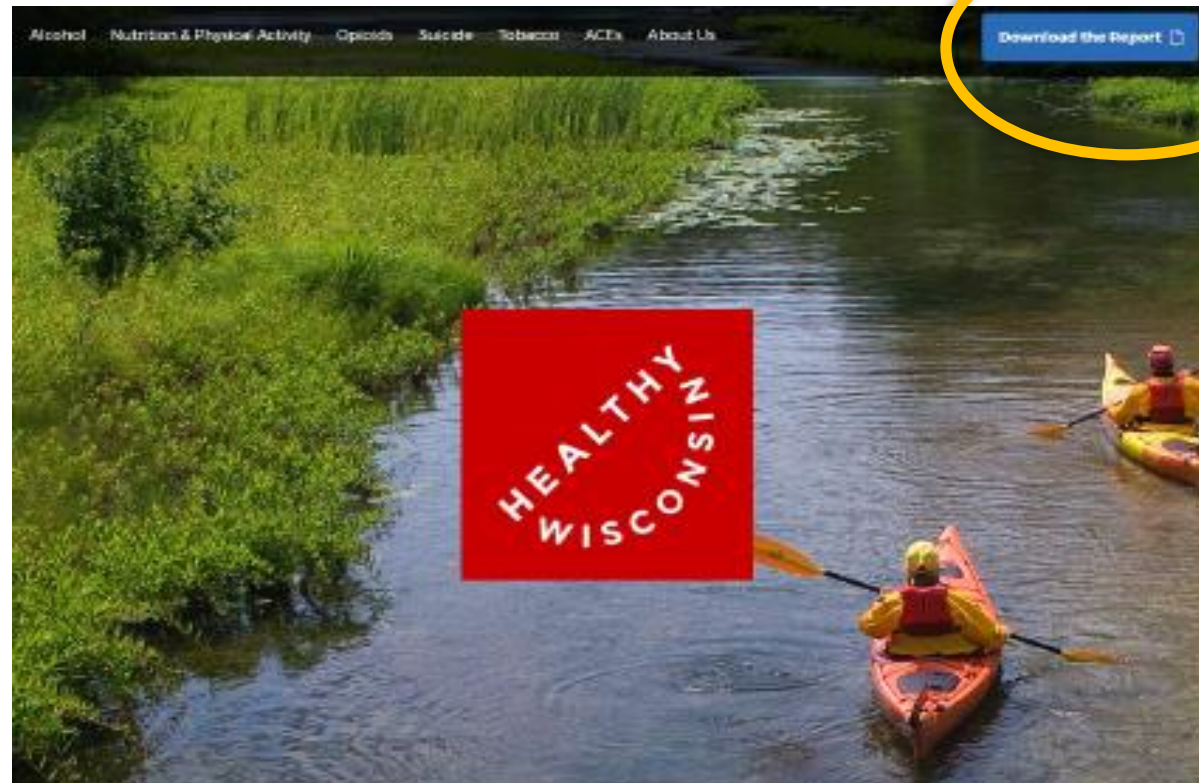
What is *Healthy Wisconsin*?

Downloadable Reports

- **Process Overview**
- **Population Overview**
- **Health Profiles (HW2020)**
  - Focus Areas, Objectives, and Reports
  - America's Health Rankings – best and worst 10
  - Narrative of Submitted Issues
  - Assets and Opportunities

- **Priority Plans**
  - Summaries
  - High-level Goals, Objectives, and Strategies

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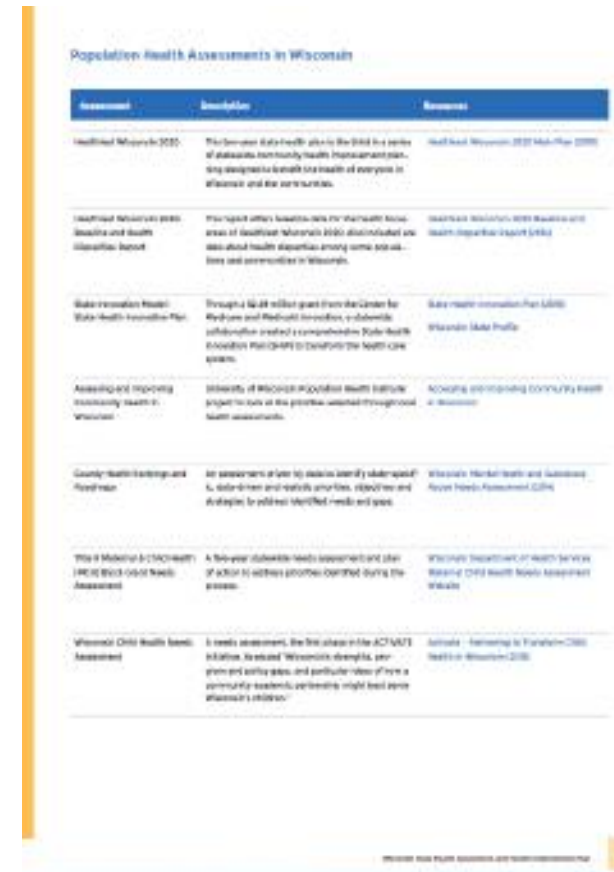
What is *Healthy Wisconsin*?

Downloadable Reports

Population Health Assessments in Wisconsin

- Healthiest Wisconsin 2020

- Healthiest Wisconsin 2020 – Baseline and Health Disparities Report

- State Innovation Model – State Health Innovation Plan

- Assessing and Improving Community Health in Wisconsin

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What is *Healthy Wisconsin*?

Downloadable Reports- Priority Areas

Healthy Wisconsin Implementation

- **Priority Action Teams**
  - —Wisconsin communities and leaders
  - —Division of Public Health teams
- **Tools and Resources**
  - —Website
  - —Measuring success

What's Next for Healthy Wisconsin?

- **Healthy Wisconsin Launch and Ongoing Events**
  - —Website and Report Release – May 2017
  - —SAMHSA Prevention Week – May 15-19, 2017
  - —WPHA Annual Conference Town Hall – May 2017
- **Preparation for the Next State Health Plan**
  - —State Health Assessment – 2017-2018
  - —State Health Improvement Plan – 2018-2019

Social Determinants of Health and Community Data Presentation

Debra Konitzer

Healthy Oconto County Steering Committee Member

Oconto County Public Health

Social Determinants of Health

"The social determinants of health are the conditions in which people are born, grow, live, work and age… (They) are mostly responsible for health inequities - the unfair and avoidable differences in health status."

Source: World Health Organization

# Definition of Public Health

"Public health is the science of protecting and improving the health of people and their communities… Public health also works to limit health disparities. A large part of public health is promoting healthcare equity, quality and accessibility."

Source: Centers for Disease Control

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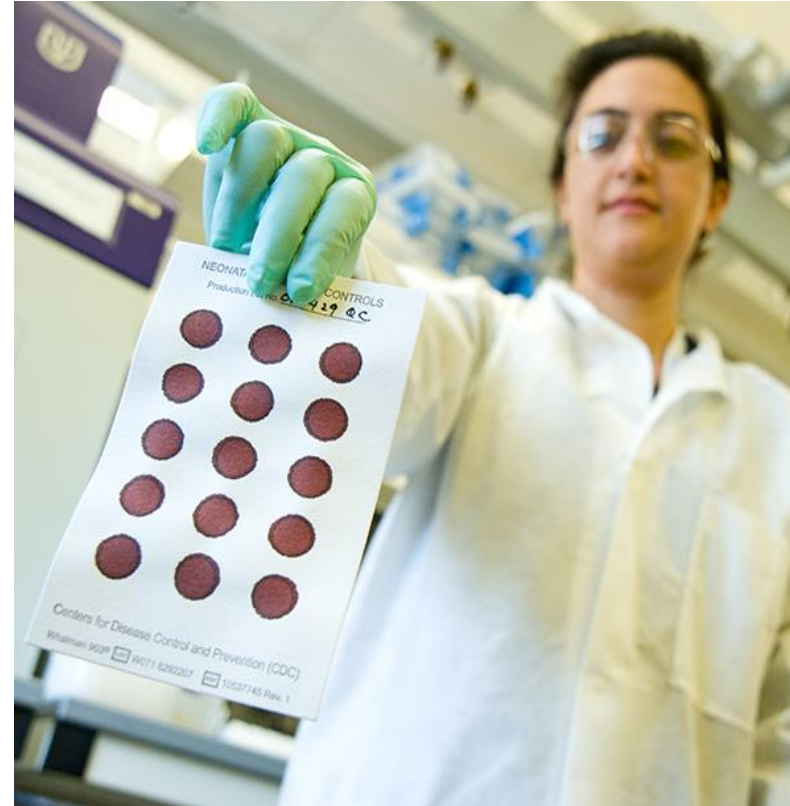
What Makes A Community Healthy?
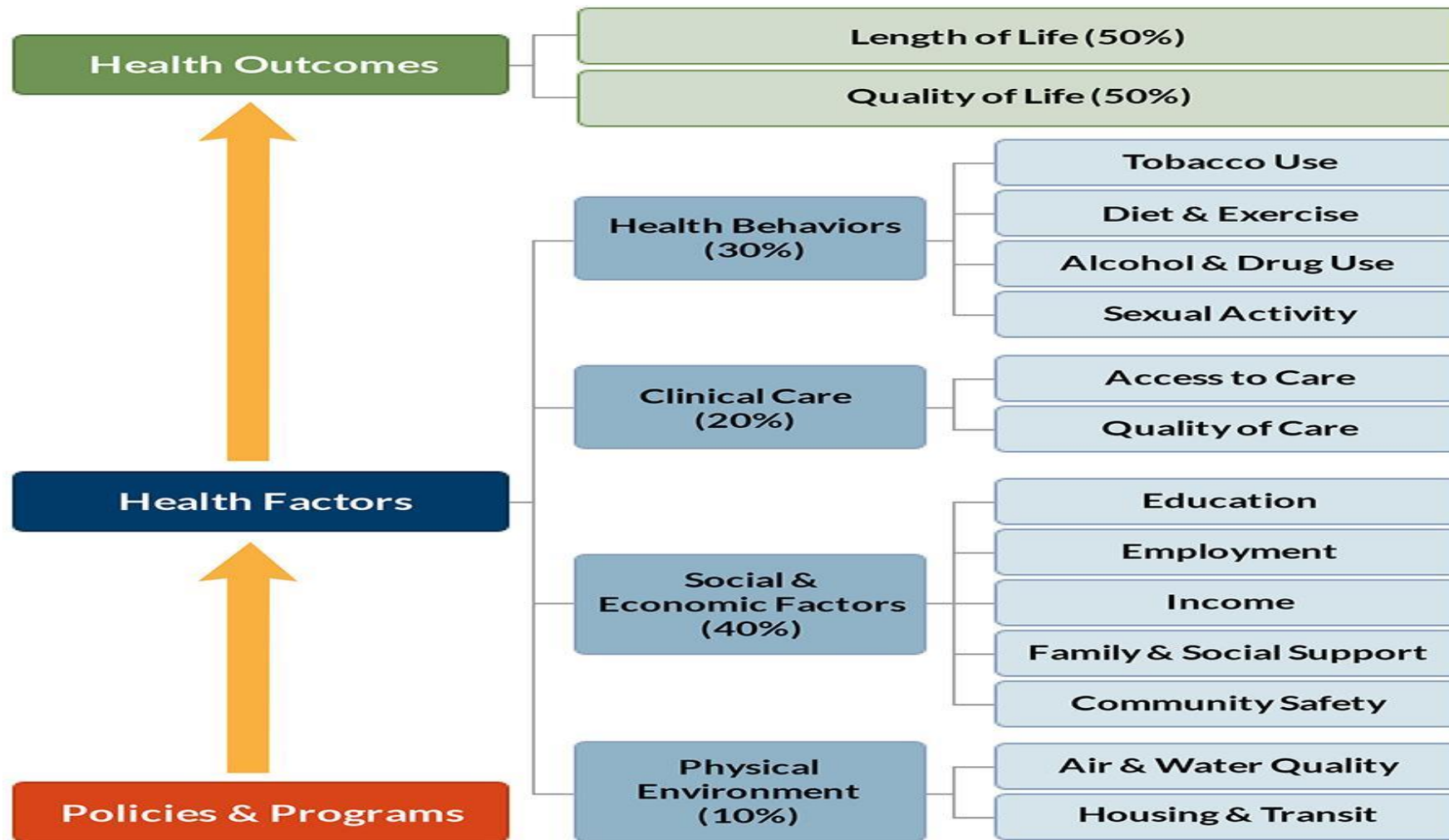
County Health Rankings model © 2014 UWPHI

Trend in Health Outcomes Rank

Oconto County Trend in Health Outcomes Ranking (Out of 72 counties in Wisconsin)

Source: County Health Rankings

Regions

Source: Wisconsin Department of Health Services
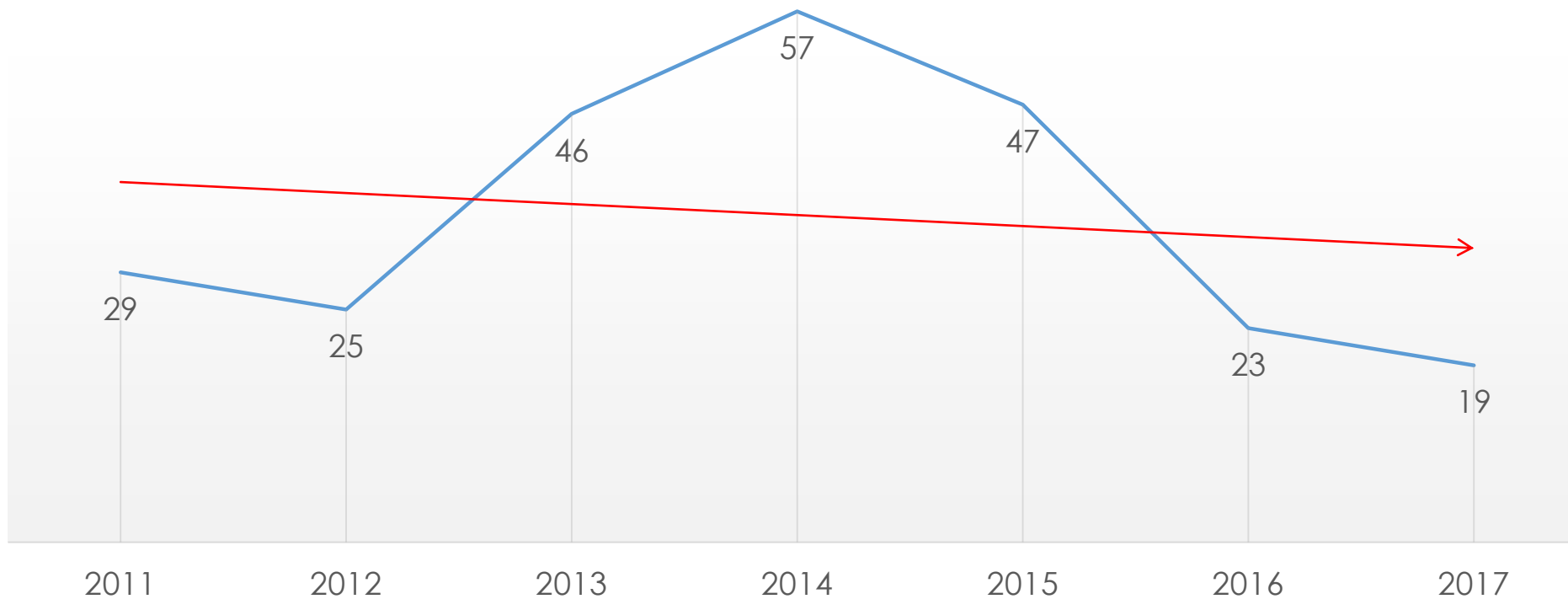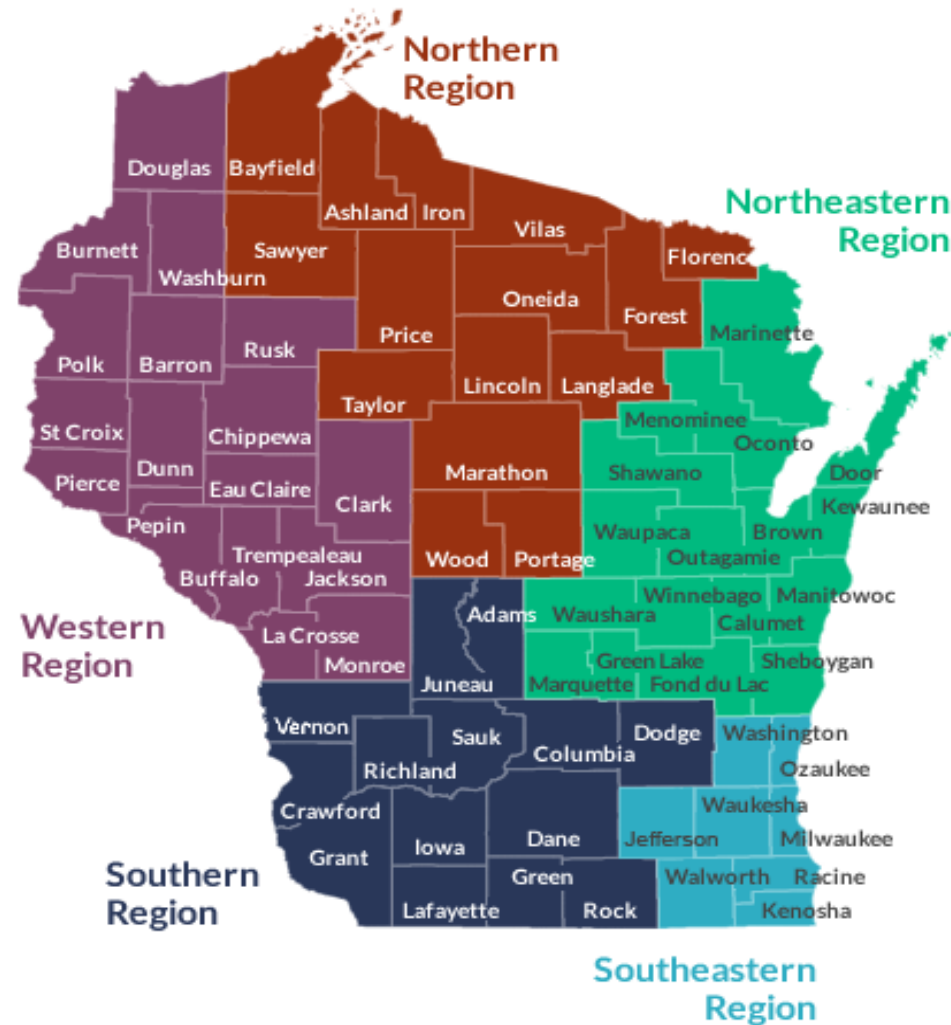
Demographics

Population Growth, Wisconsin, 2000 to 2030

Source: County Health Rankings

Demographics

POPULATION BY AGE GROUPS

	OC	WI
<18	20.5%	22.4%
18-64	60.6%	61.8%
>65	18.9%	15.6%
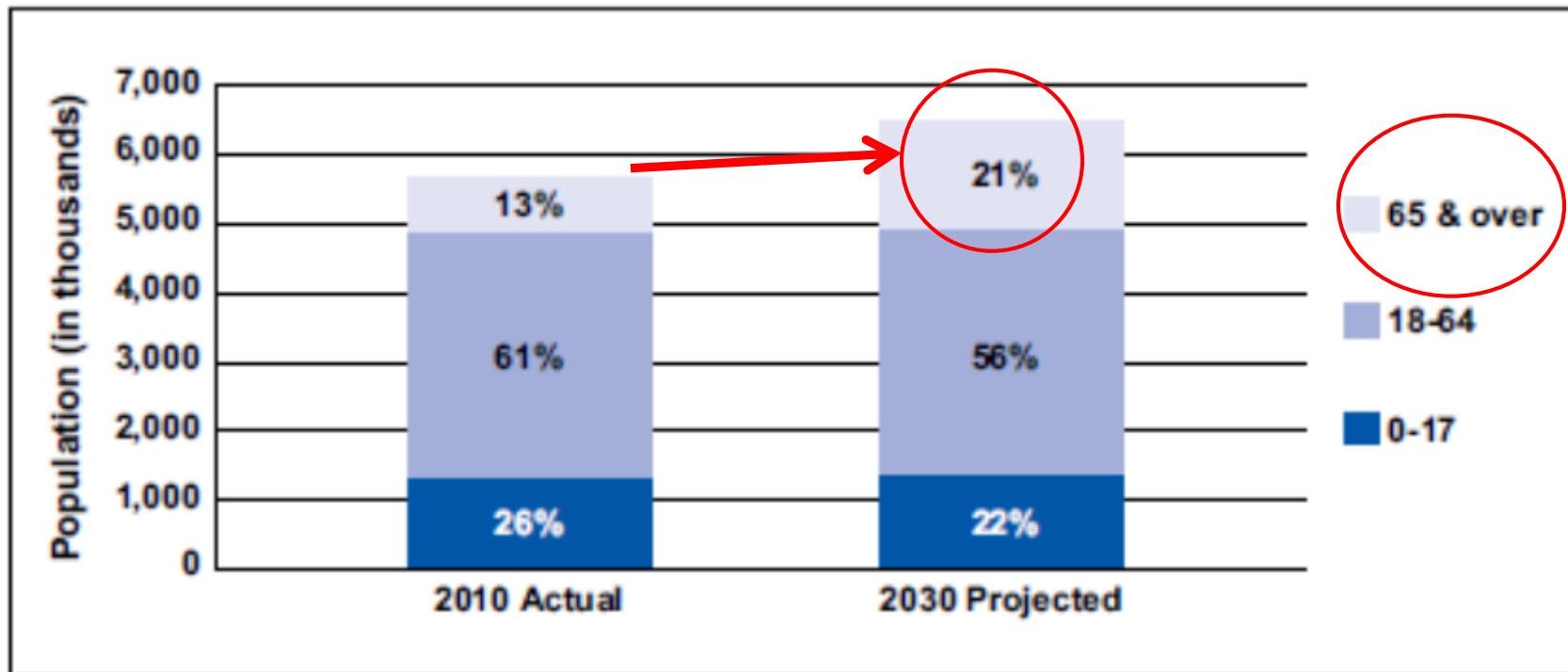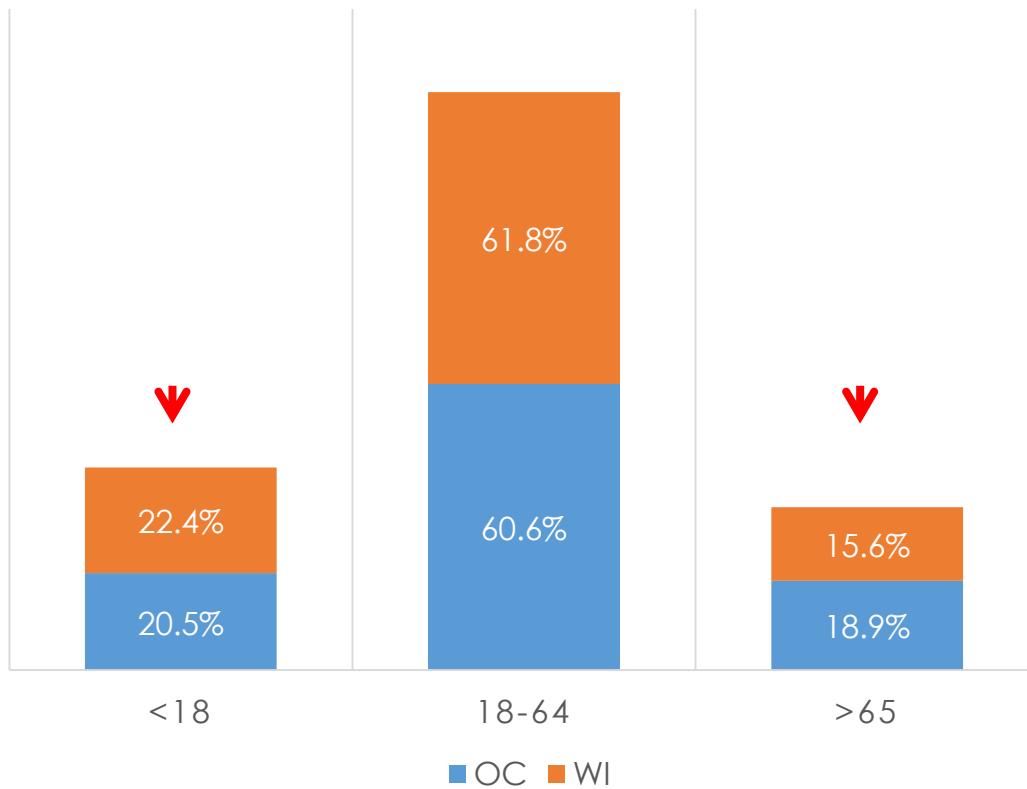
POPULATION LIVING WITHIN RURAL AREA

29.8%

81.3%

■ OC ■ WI

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Source: County Health Rankings 2017
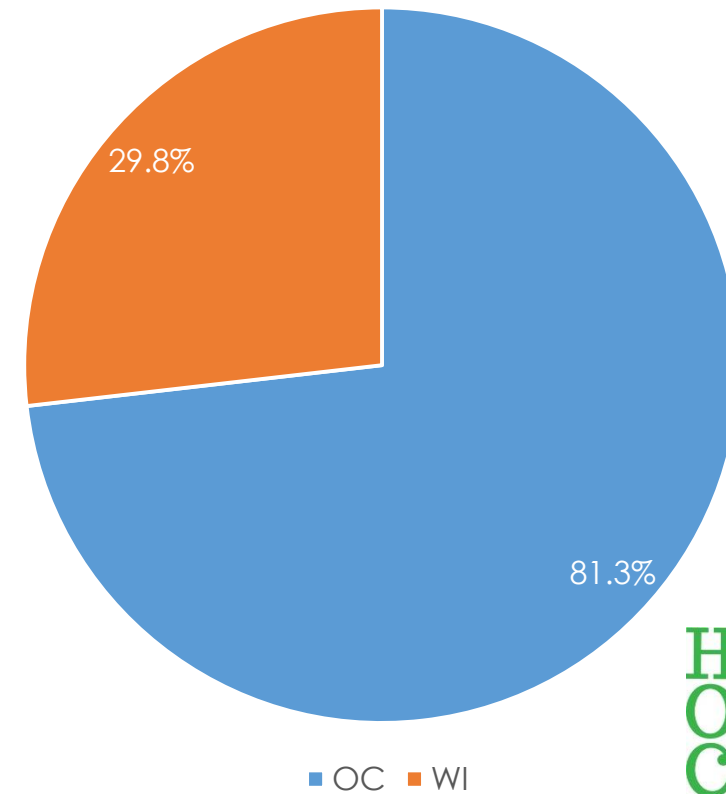
Demographics

Population Distribution By Race

Asian
OC 0.4%
WI 2.8%

Hispanic
OC 1.7%
WI 6.6%

Non-Hispanic African American
OC 0.3%
WI 6.3%

Ameican Indian/Alaskan Native
OC 1.4%
WI 1.1%

White/Caucasian
OC 95.3%
WI 81.9%

■ OC ■ WI

Source: County Health Rankings, 2017
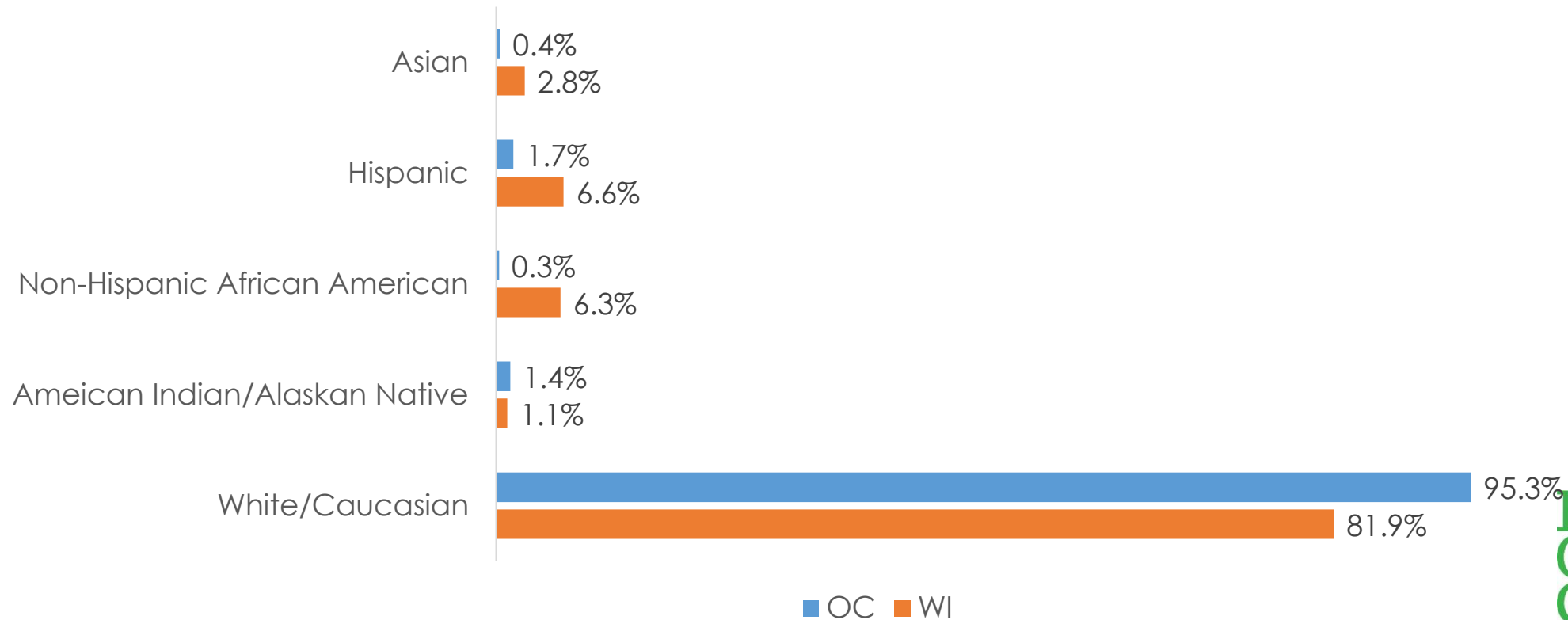
Income

AVERAGE ANNUAL UNEMPLOYMENT RATES, AGE 16+ (SEASONALLY UNADJUSTED)

OC: 7.7% (2013), 6.2% (2014), 5.2% (2015), 4.6% (2016)
WI: 6.7% (2013), 5.4% (2014), 4.6% (2015), 4.1% (2016)
US: 7.4% (2013), 6.2% (2014), 5.3% (2015), 4.9% (2016)

■ 2013 ■ 2014 ■ 2015 ■ 2016

Source: Bureau of Labor Statistics

Income

Median Household Income

OC: $52,765
WI: $53,357
USA: $53,889

Source: U.S. Census Bureau, 2011-2015 American Community Survey 5-Year Estimates

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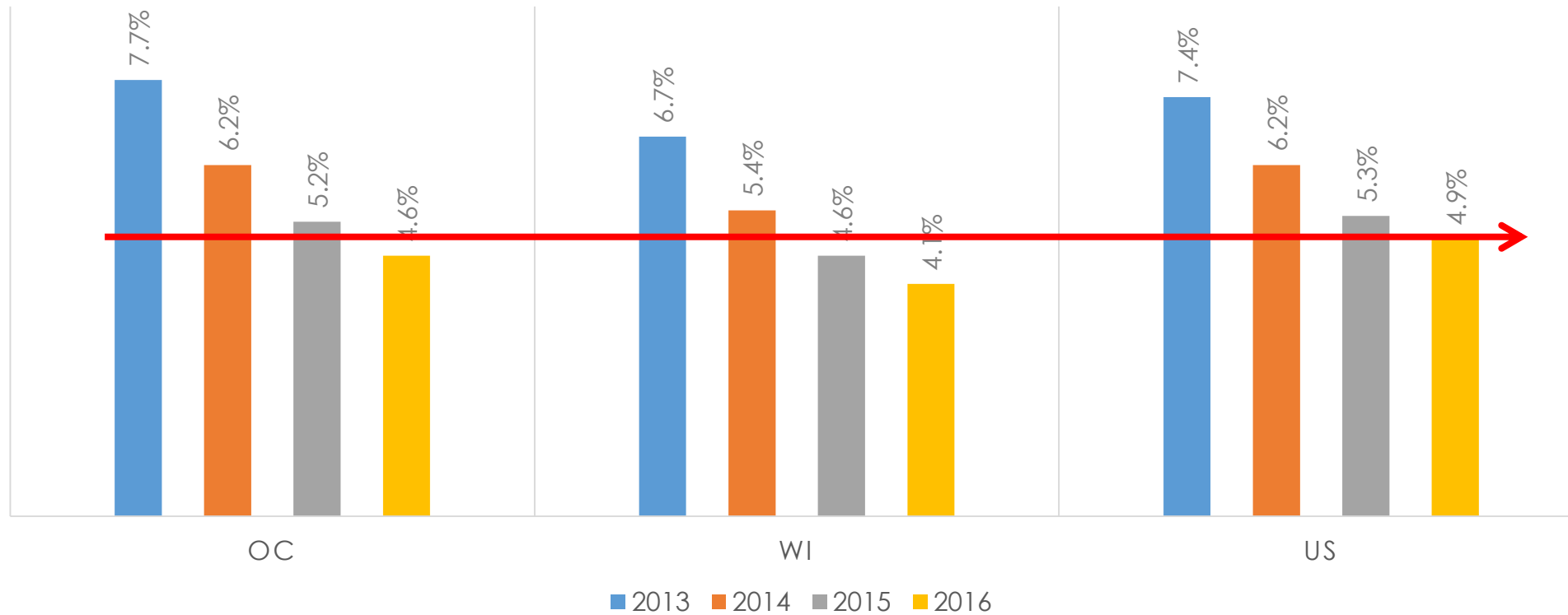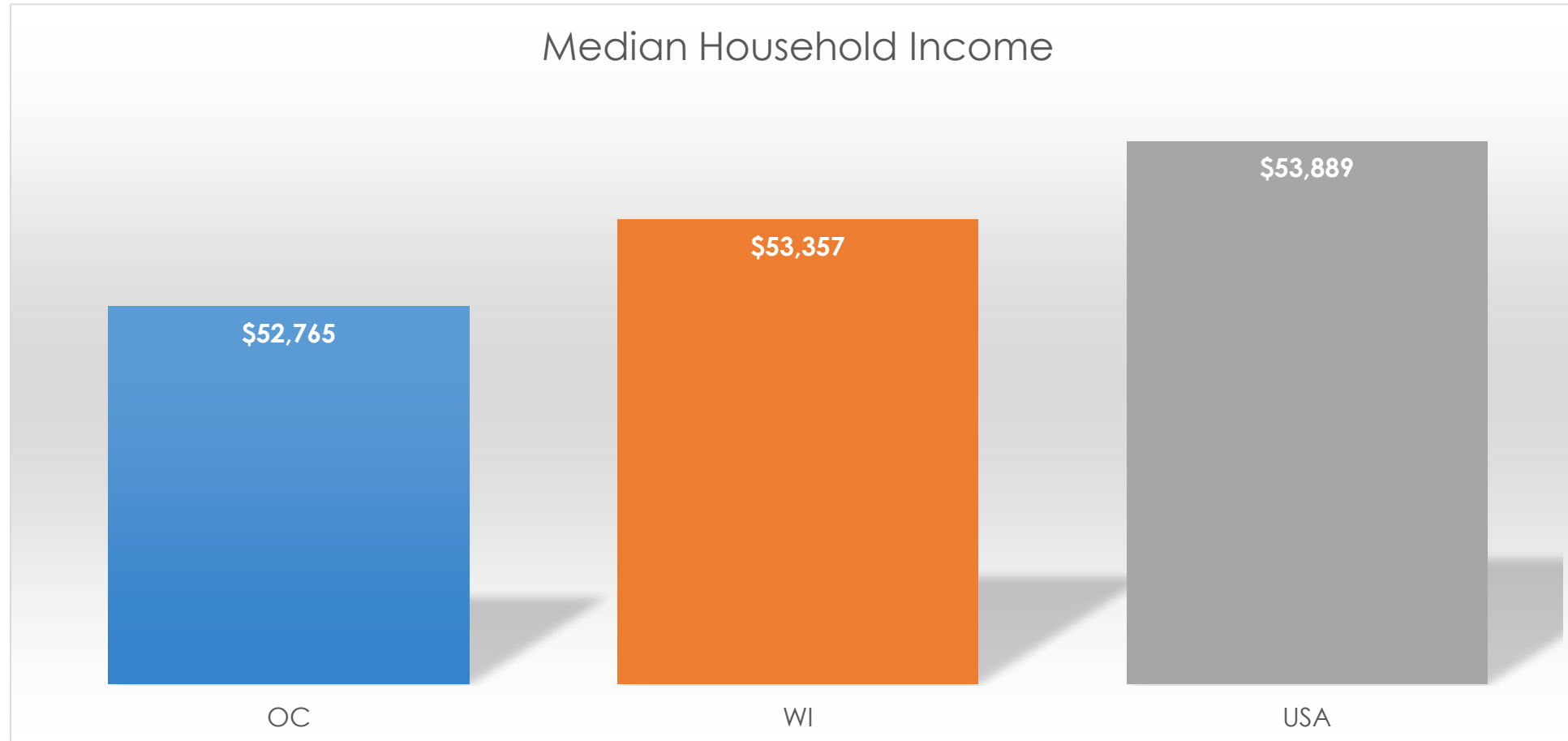
Poverty

PERCENT OF CHILDREN IN PUBLIC SCHOOLS ELIGIBLE FOR FREE/REDUCED PRICE LUNCH

	2012-2013	2014-2015	2015-2016
OC	31%	41%	43%
WI	35%	41%	
US	43%	52%	

Source: National Center for Education Statistics/CHR, 2016 & 2017; Wisconsin DPI
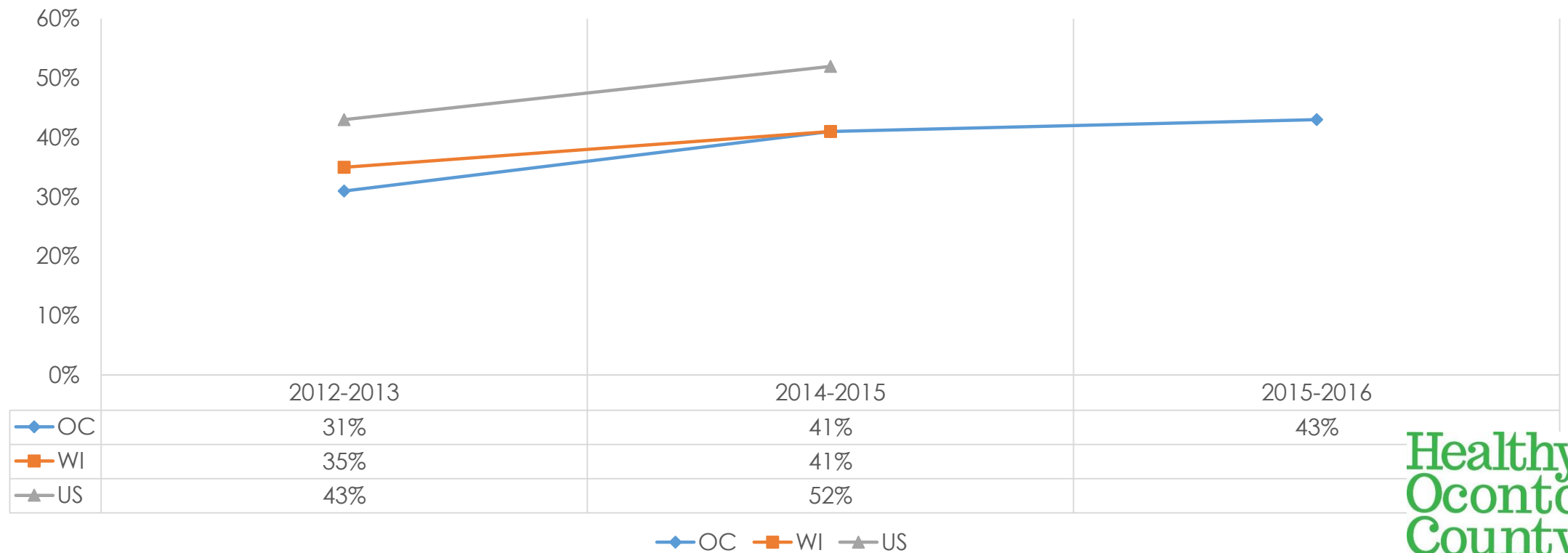
Poverty

Children Living below FPL (<18 yrs)

- 2013: OC 13.9%, WI 18.4%, US 22.2%
- 2014: OC 14.8%, WI 18.0%, US 21.7%
- 2015: OC 13.9%, WI 16.5%, US 20.7%
- National Benchmark: 13%

Legend: OC | WI | US | National Benchmark
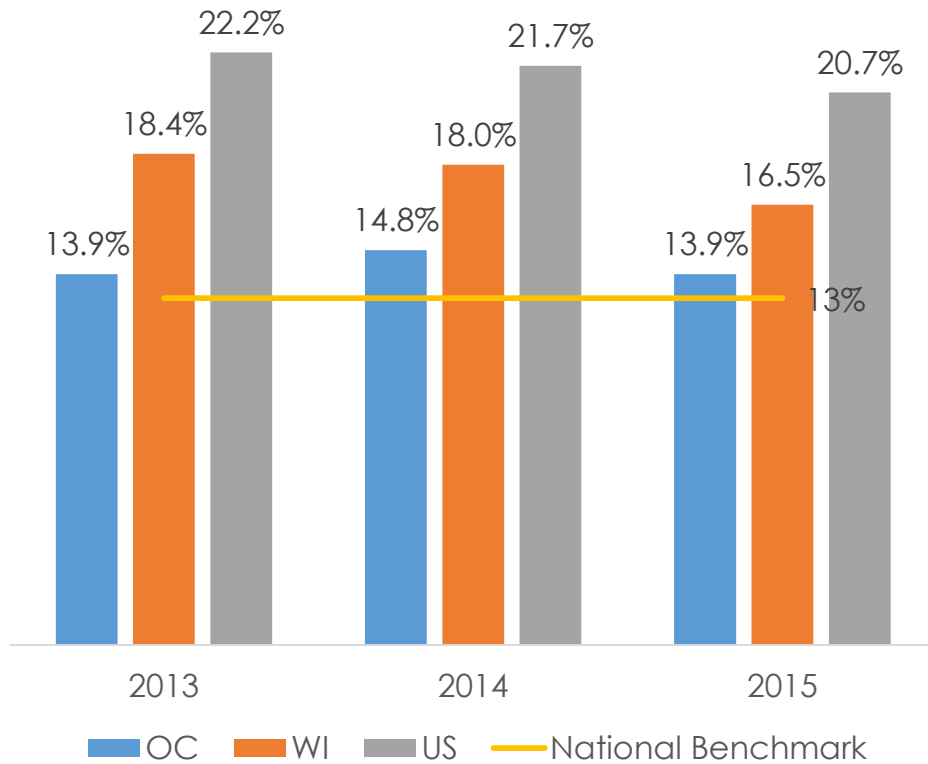
Population Living below FPL

- 2013: OC 9.7%, WI 13.5%, US 15.8%
- 2014: OC 10.5%, WI 13.2%, US 15.5%
- 2015: OC 9.7%, WI 12.1%, US 14.7%

Legend: OC | WI | US

Source: U.S. Census Bureau, Small Area Income and Poverty Estimates (interactive map)

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41
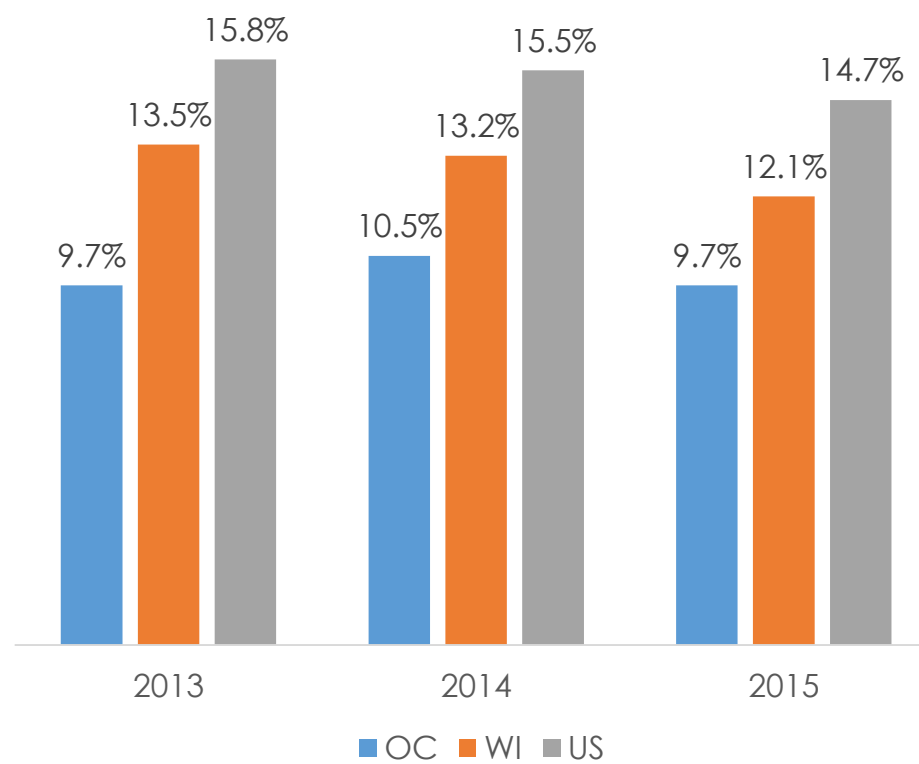
Poverty

Percent of Households that pay more than 30% of monthly income on housing costs

Renter — OC: 33.8%, WI: 44.7%, USA: 47.9%
Owner (with mortgage) — OC: 29.2%, WI: 28.9%, USA: 32.3%
Owner (without mortgage) — OC: 15.2%, WI: 15.3%, USA: 14.5%

■ OC ■ WI ■ USA

Source: U.S. Census Bureau, 2011-2015 American Community Survey 5-Year Estimates

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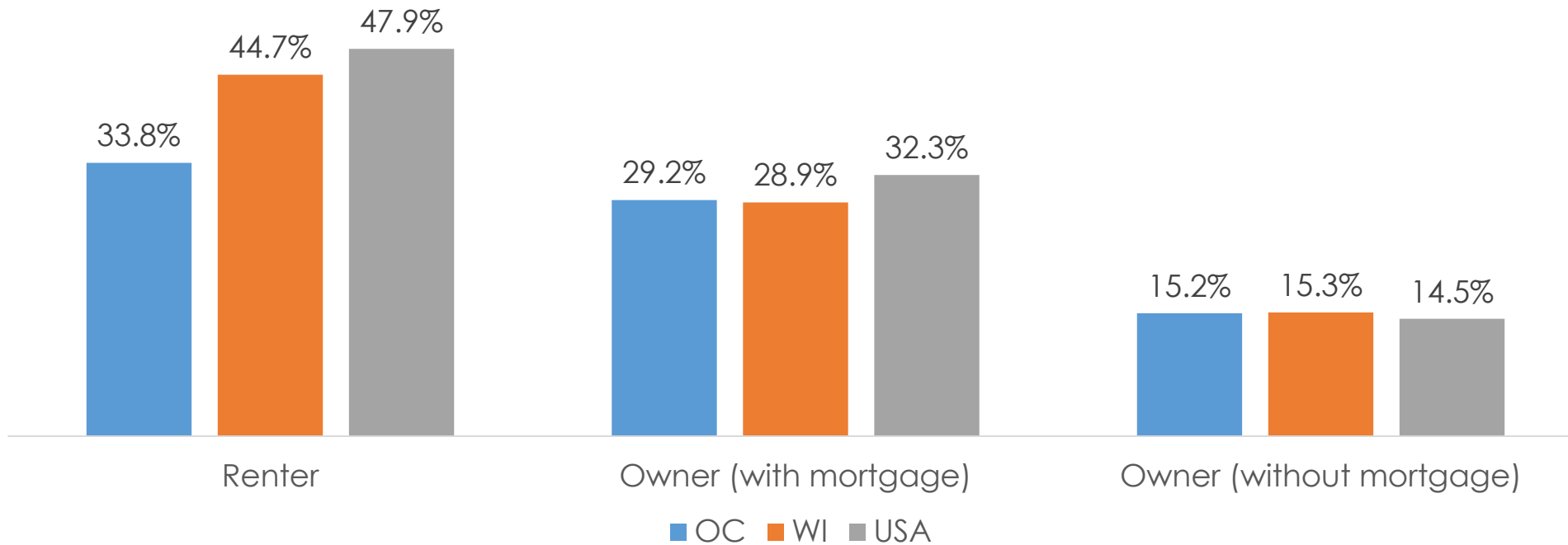
Education

Percentage of 9th grade cohort that graduate in 4 years

OC ■ WI ■ US ■ HP 2020 Target

Source: County Health Rankings, 2017
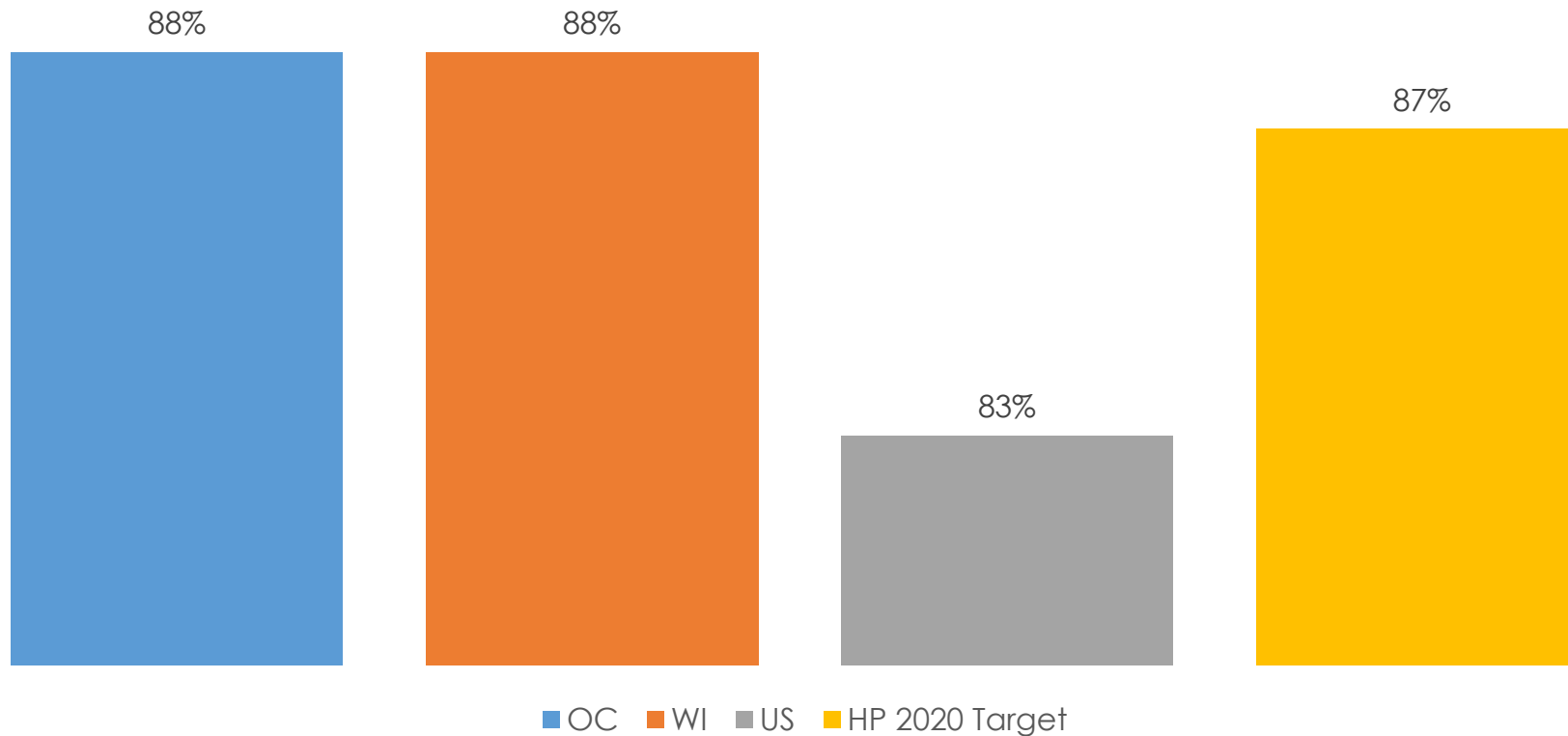
Education

Percent of Adults Aged 25-44 with some Post Secondary Education

68%

65.3%   65.9%   67%   67%

57.9%   58.6%   59%   59%

2008-2012   2009-2013   2010-2014   2011-2015

—— OC   —— WI   —— National Benchmark

Source: County Health Rankings, 2014-2017
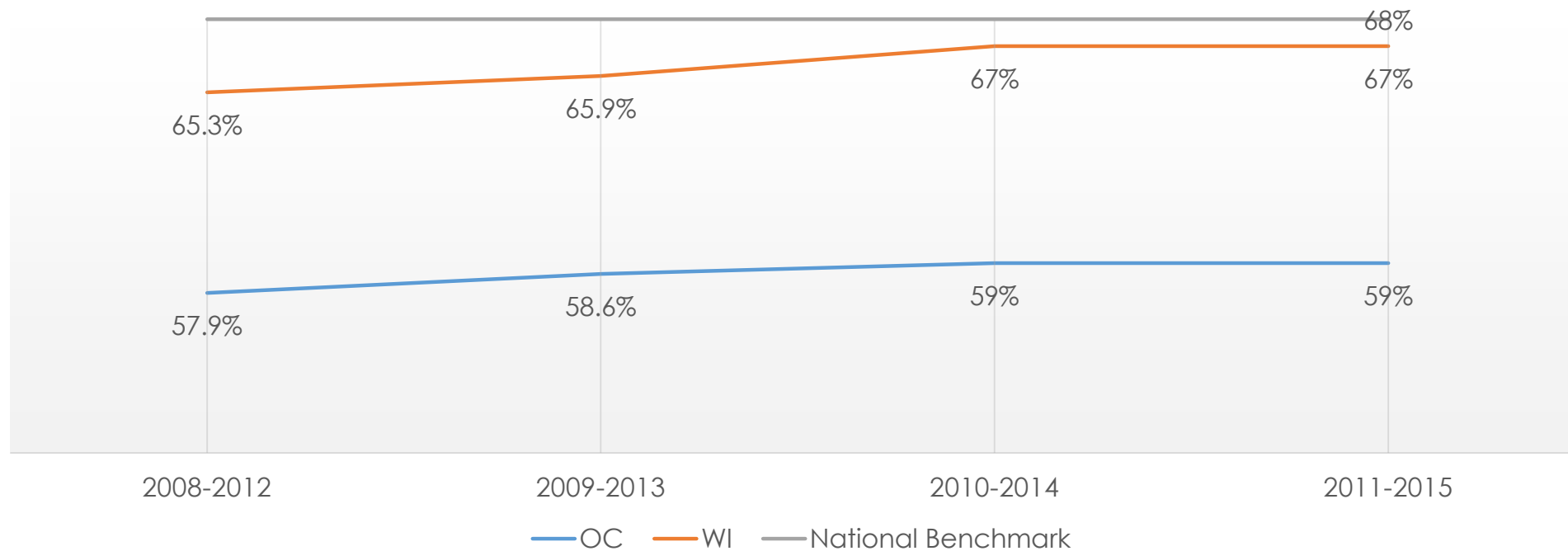
Social Support

Percentage 65 years and older who live alone

24% (OC)
29% (WI)

OC ■ WI ■
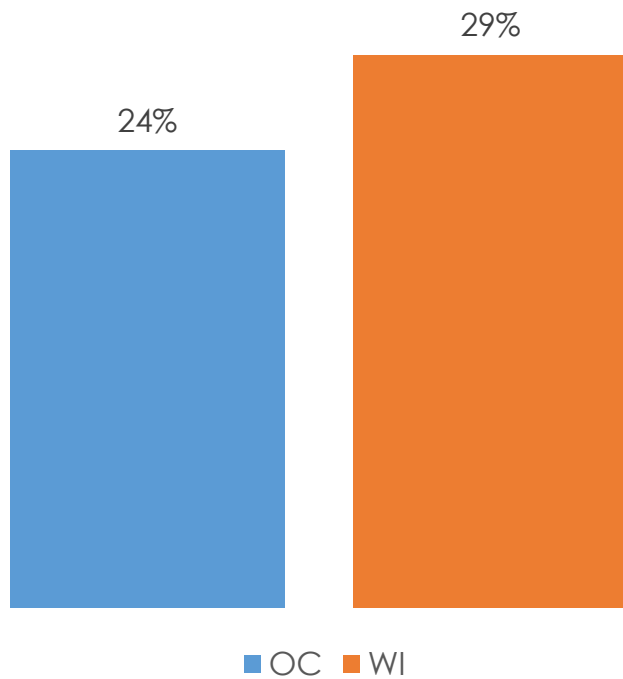
Social Associations
Number of Membership associations per 10,000 population

10.7 (OC)
11.7 (WI)
9.4 (US)

OC ■ WI ■ US ■

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Source: Oconto County Environmental Health Profile 2017

Primary Care Physicians Available for Population

Ratio of Population to Primary Care Physicians

Lower number is better

OC WI US

Source: County Health Rankings
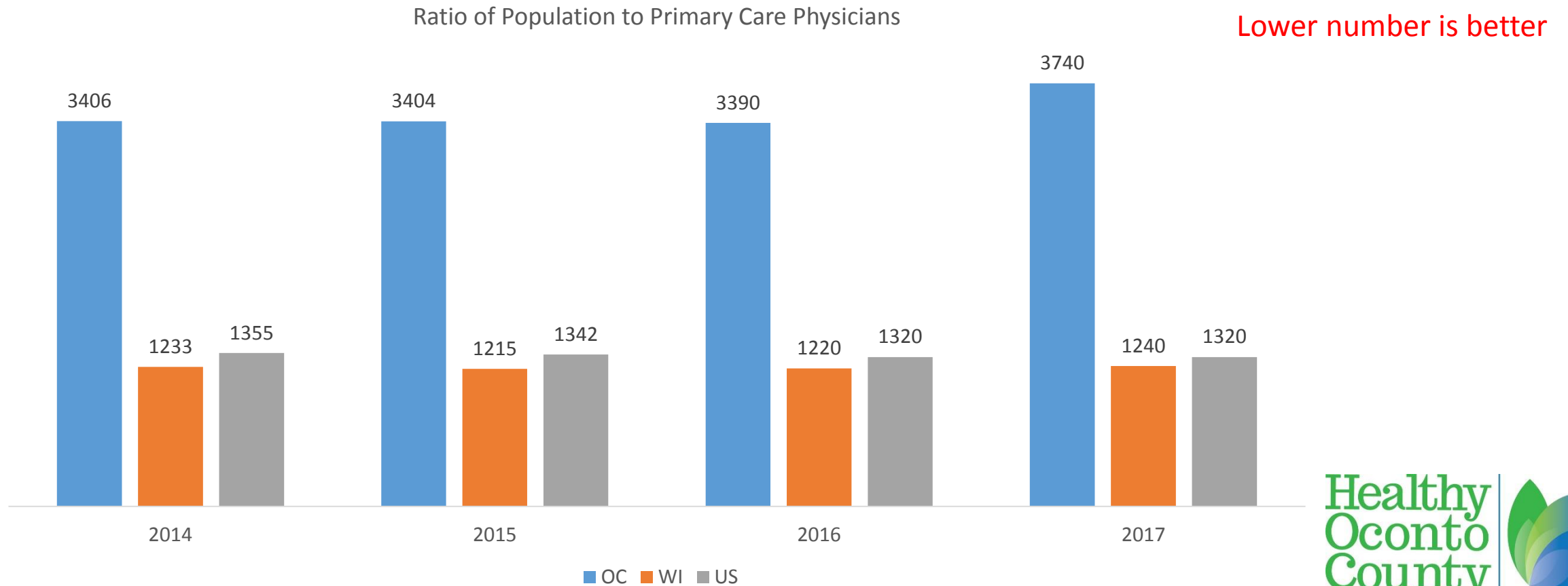
Mental Health Providers Available for Population

Ratio of Population to Mental Health Providers

Lower number is better

	2014	2015	2016	2017
OC	2202	2871	3400	3400
WI	1024	623	590	600
US	753	529	490	500

■ OC ■ WI ■ US

Source: County Health Rankings
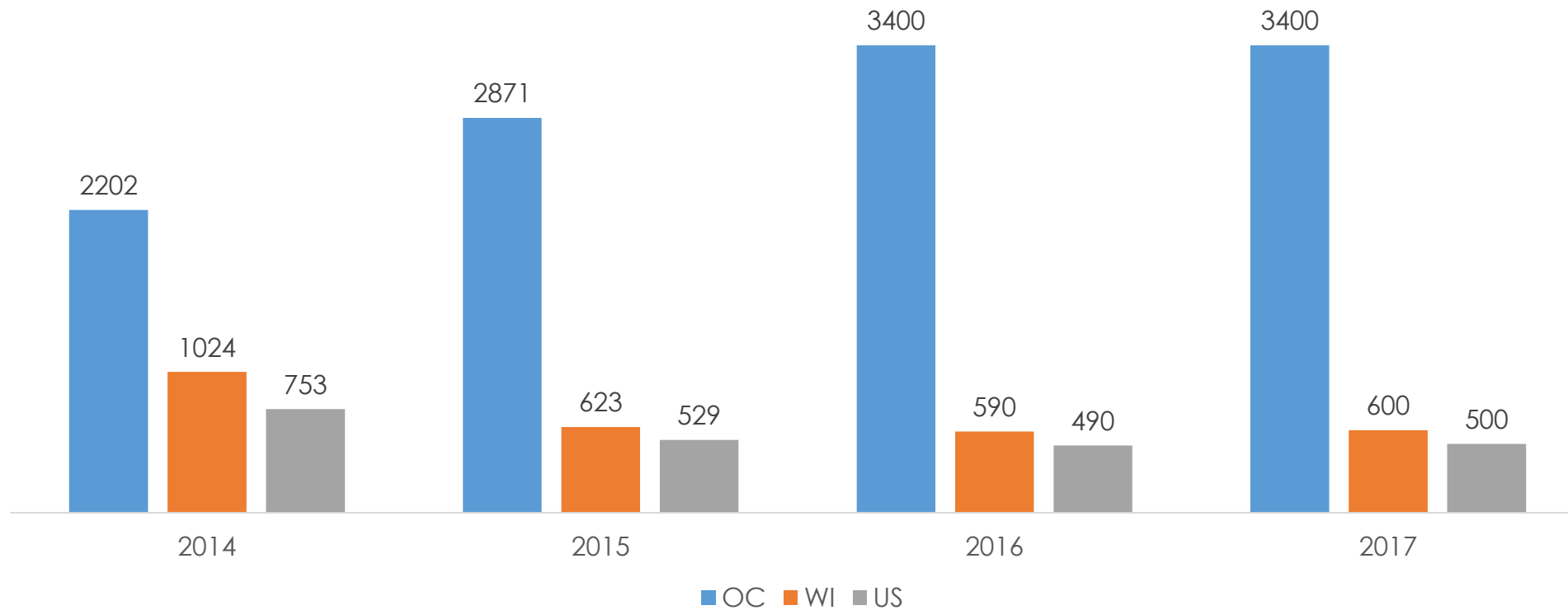
Dentists Available for Population

Ratio of Population to Dentists

Lower number is better

|	2014	2015	2016	2017
OC	2880	2666	2670	2880
WI	1024	1631	1590	1560
US	1663	1583	1540	1520

■OC ■WI ■US

Source: County Health Rankings

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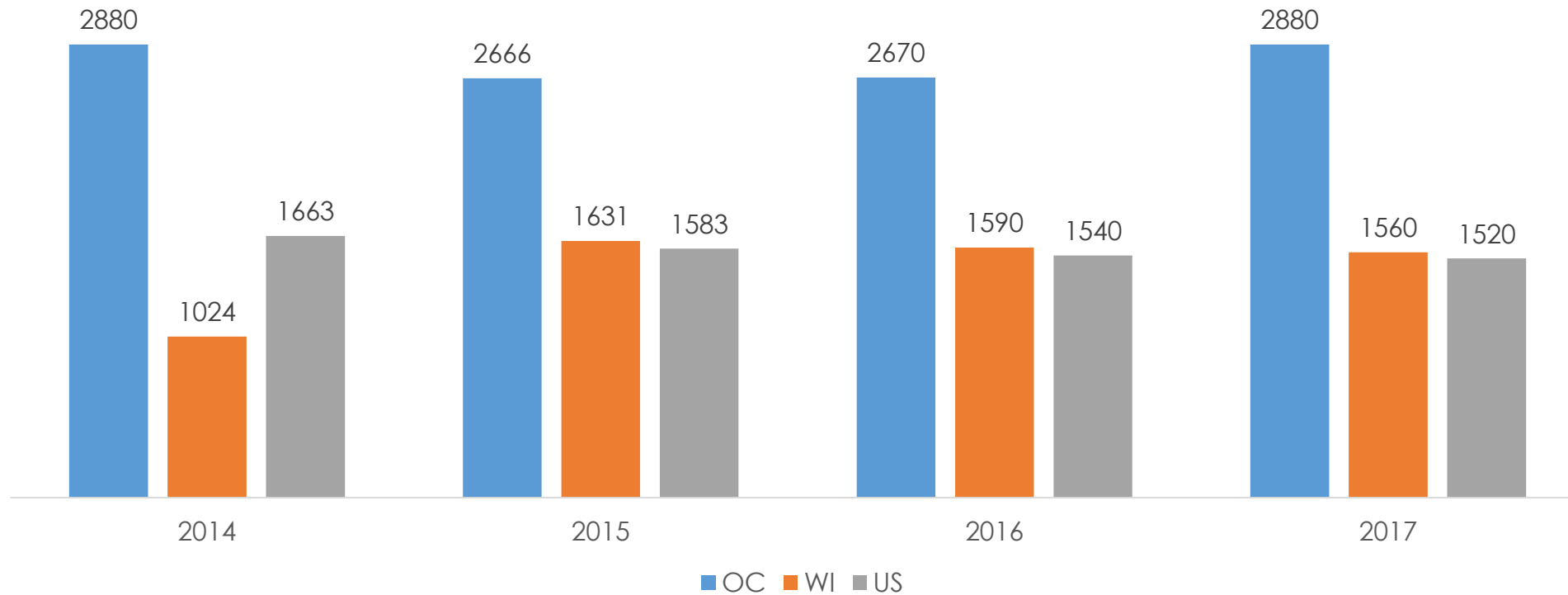
Preventable Hospitalizations

Leading Causes of Hospitalization in Oconto County
Rate Per 1000 population

Source: Wisconsin Department of Health Services/Public Health Profiles
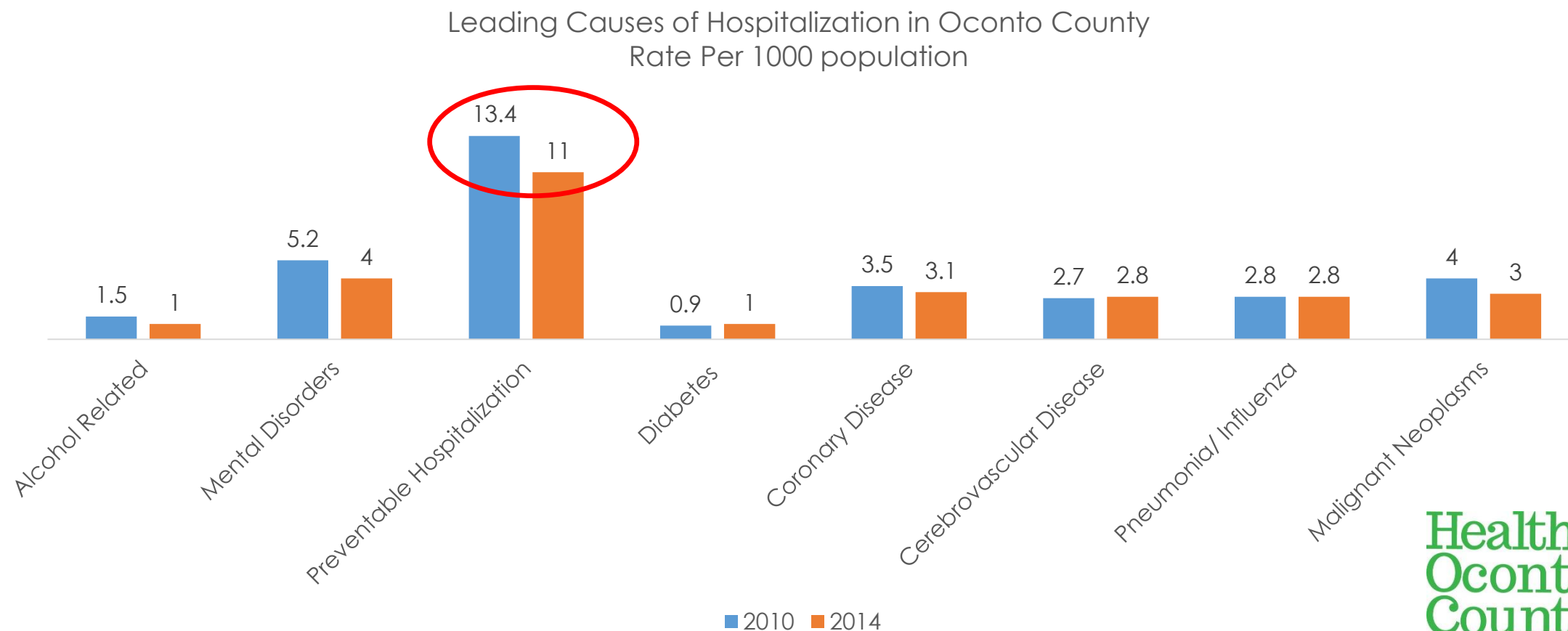
Health Insurance Coverage

Percent of Persons without Health Insurance Under the age of 65

6.8%	6.6%	10.5%

■ OC ■ WI ■ USA

Source: United States Census Bureau

51
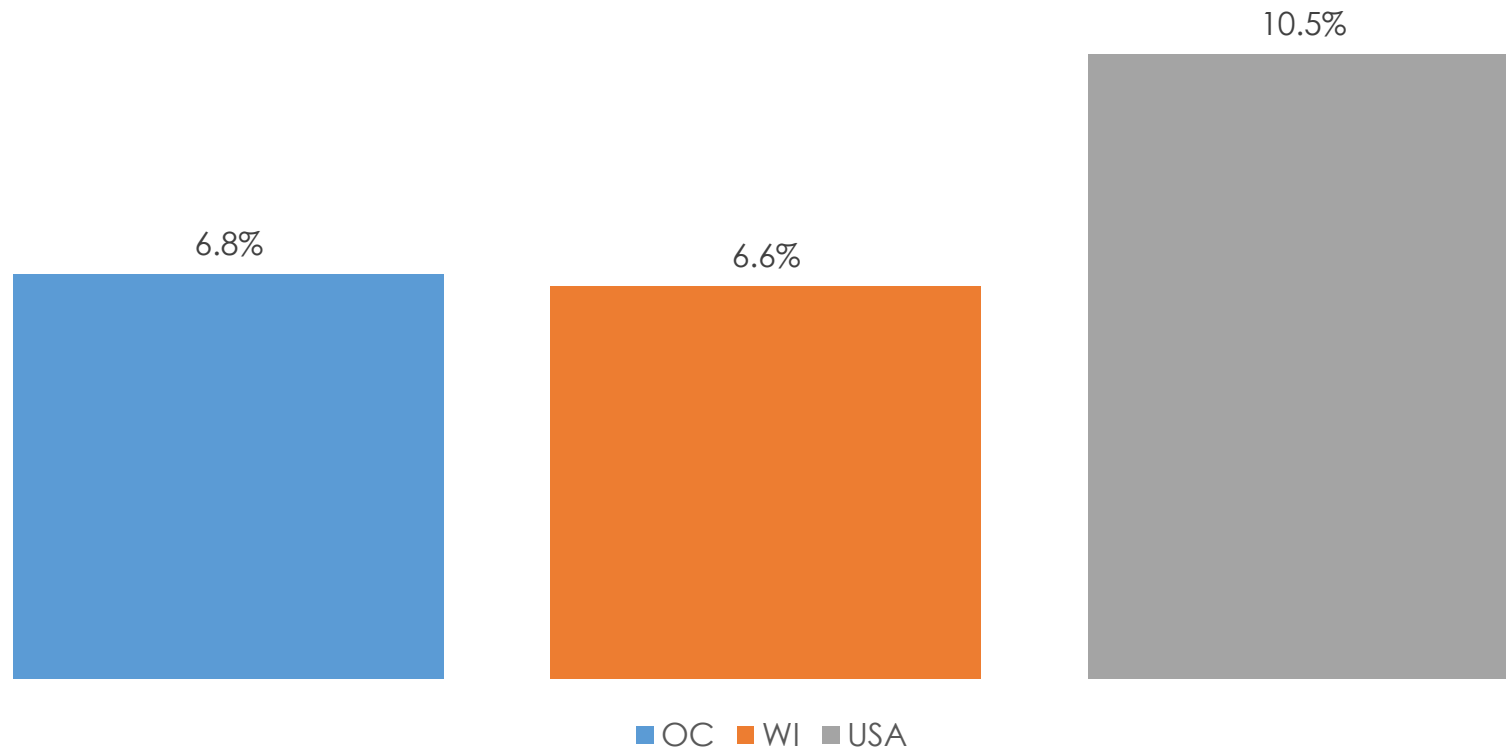
Morbidity

Poor or Fair Health
Percent of Adults Self-Reporting Poor or Fair Health (age-adjusted)

OC: 12%
WI: 14%
US: 15%
Target: 10%

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Source: County Health Rankings, 2017
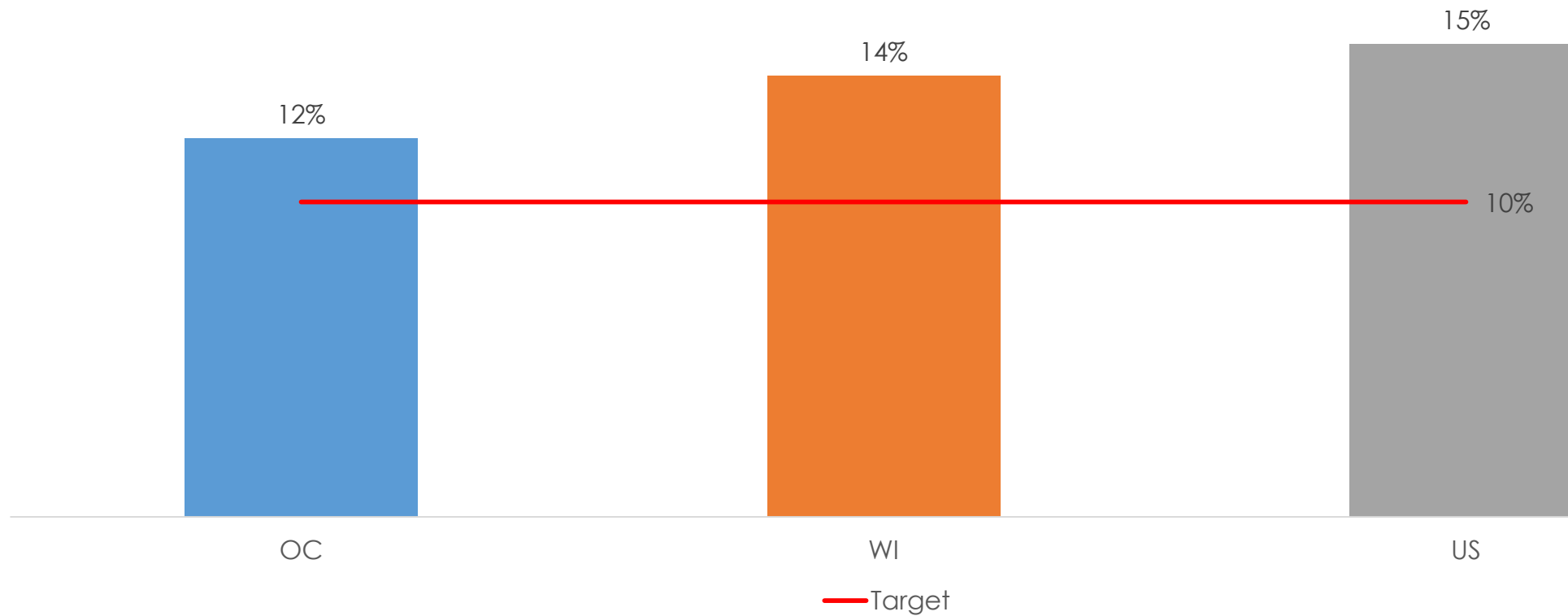
Morbidity

Low Birth Weight
Percent of birth weights < 2,500 grams (2011-2015)

7.2%

6.8%

7.2%

6%

OC

NER

WI

National Benchmark

53

Mortality

Causes of Death in Oconto County

Source: Wisconsin Department of Health Services/Public Health Profiles
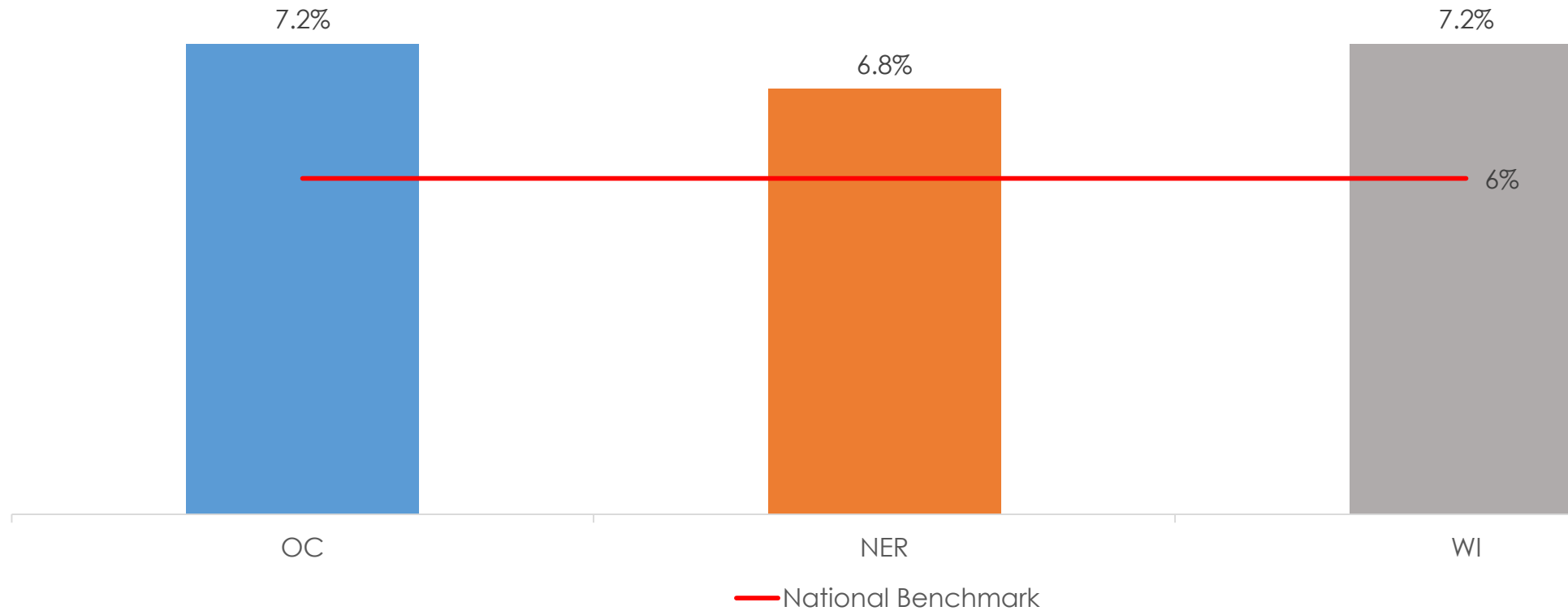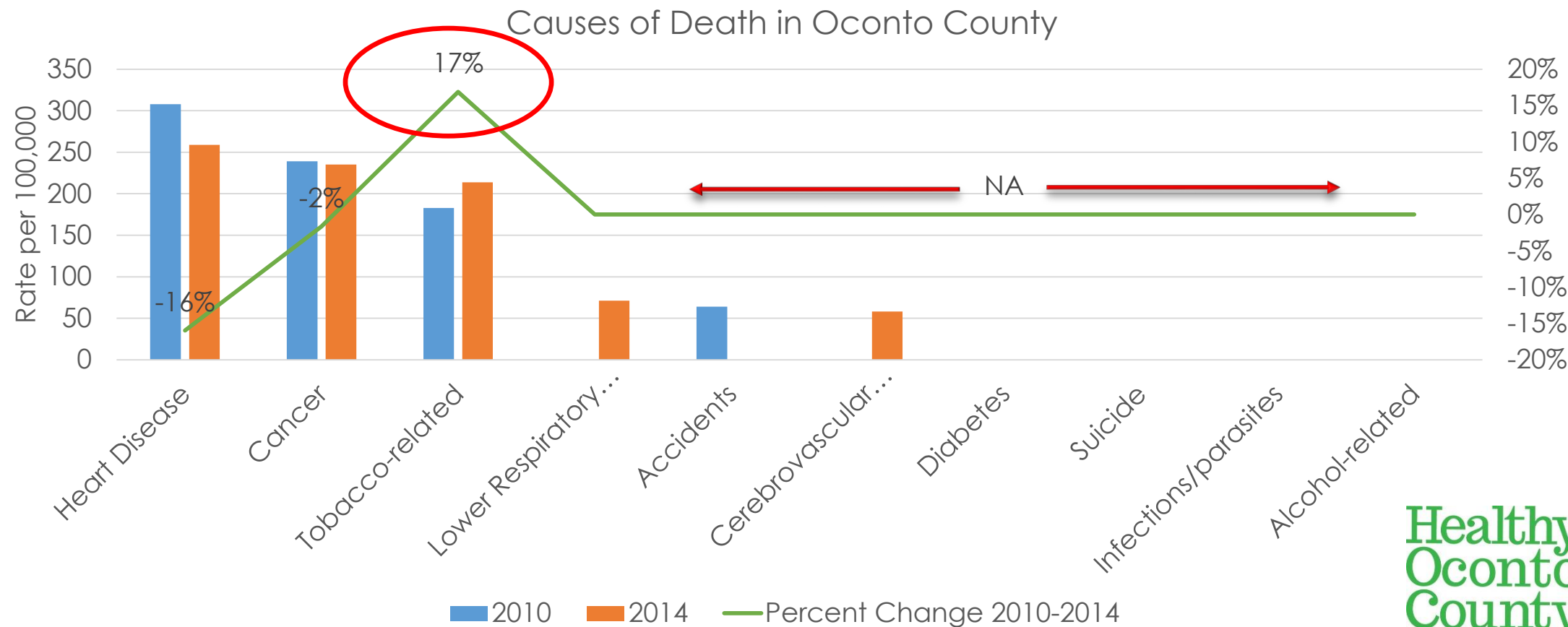
Mortality

This is a measure of Premature death. Years of Potential Life Lost (YPLL) is the potential life lost before the age of 75. it is calculated from the difference between the age of death and 75 which represents the total number of years not lived before 75

Age-Adjusted YPLL per 100,000 population, 2015

Legend: OC, NER, WI, National Benchmark

OC: 5397
NER: 5636
WI: 5943
National Benchmark: 5466

Source: Wisconsin Interactive Statistics on Health (WISH) Data System, 2016
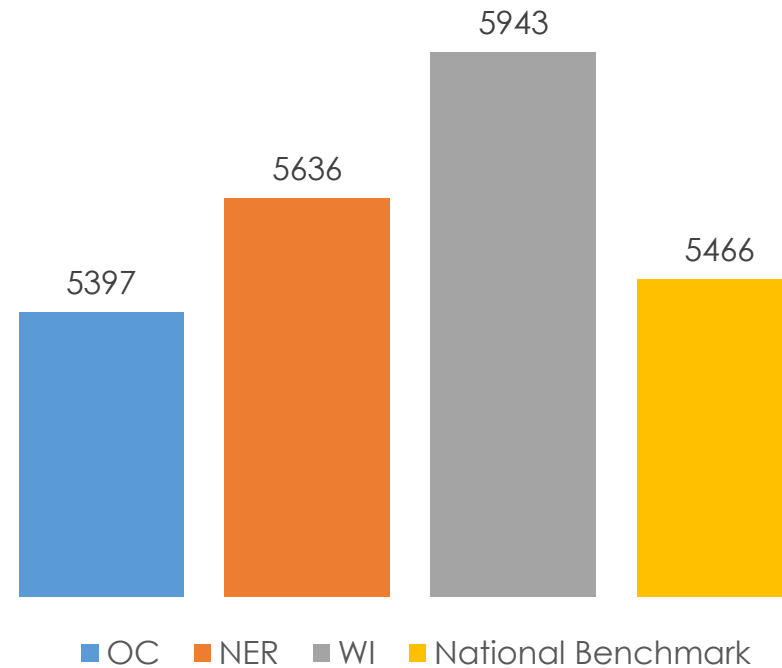
Chronic Disease Management

Data year- 2014

Diabetic Medicare recipients who received HbA1c monitoring in last year
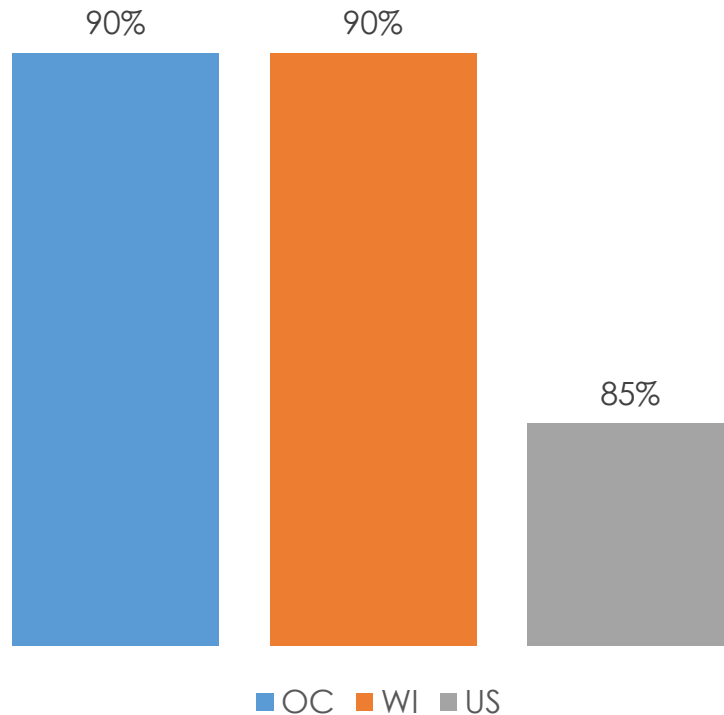
Female Medicare enrollees age 67-69 who had mammogram at least once in last 2 years

90% 90% 85%

62% 72% 63%

OC WI US

OC WI US

Source: County Health Rankings, 2017

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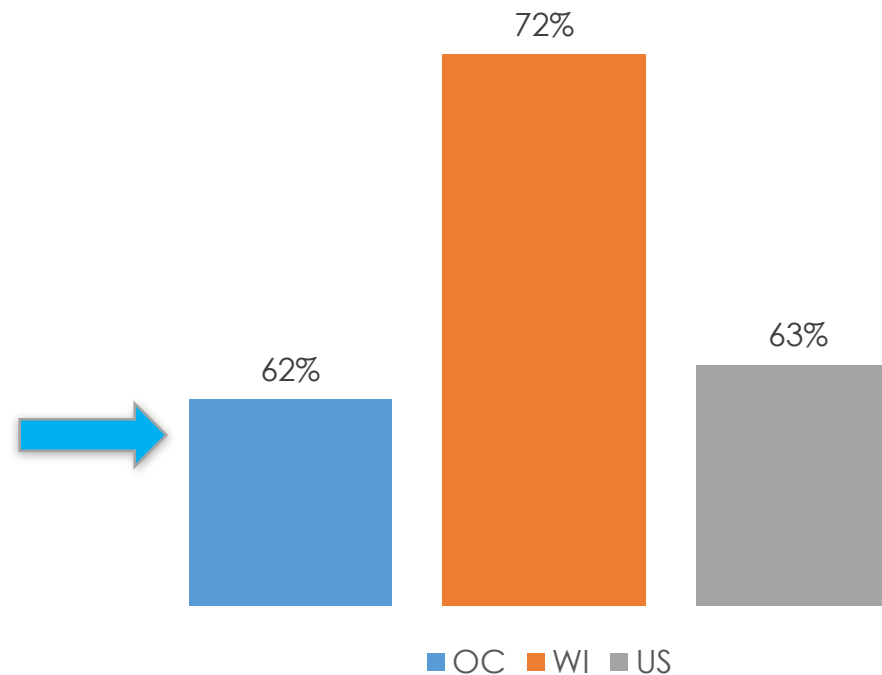
Chronic Disease Management

Female Breast Cancer Incidence Rate per 100,000 population, 2010-2014
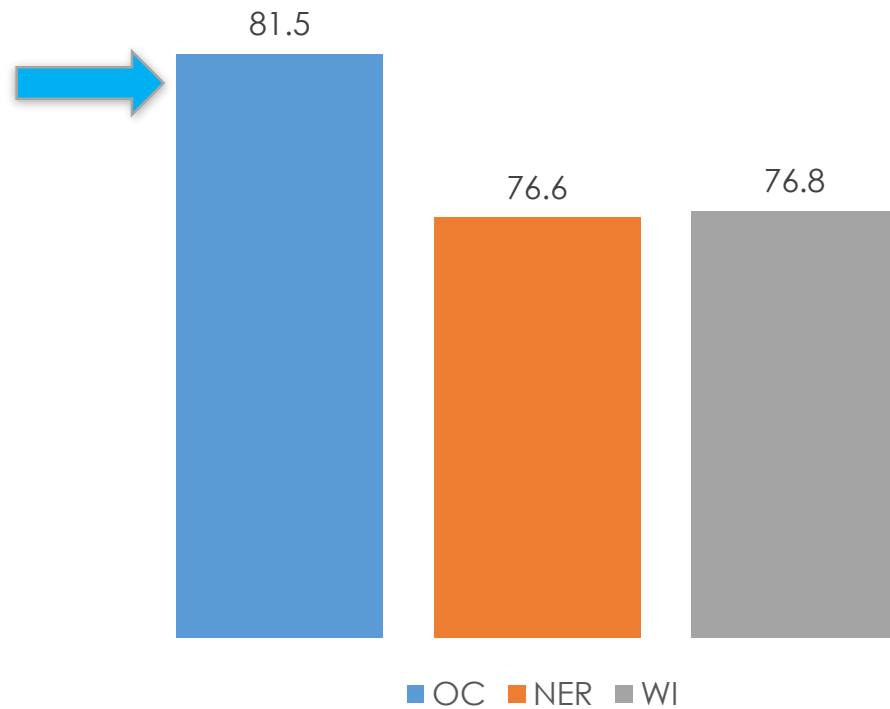
All cancer sites Incidence per 100,000 population, 2010-14 (age-adjusted)

81.5
76.6
76.8

■ OC ■ NER ■ WI

480.7
461.5
469.3

■ OC ■ NER ■ WI

Source: Wisconsin Interactive Statistics on Health (WISH) Data System, 2017

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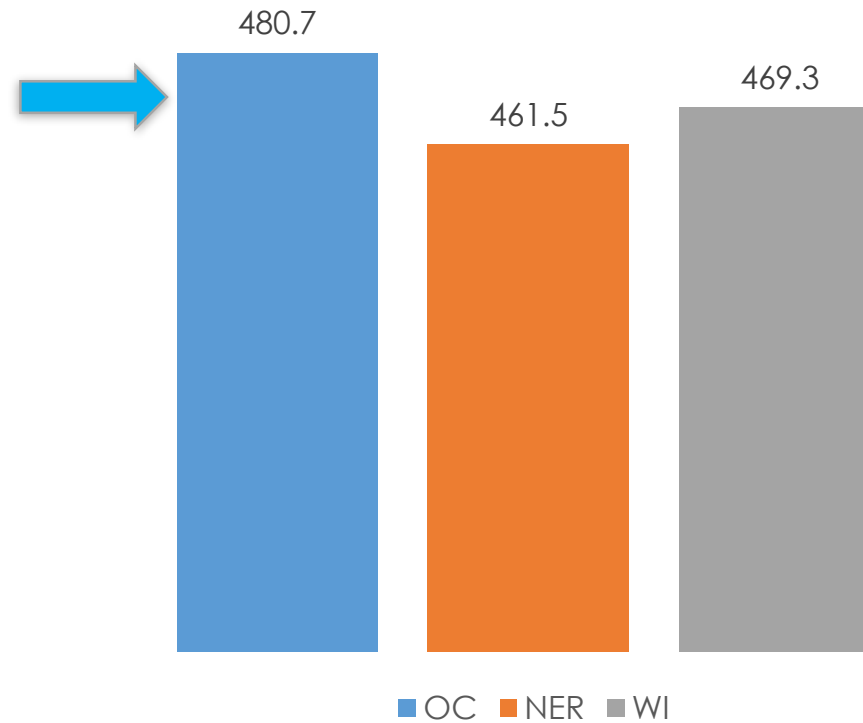
Chronic Disease Management

Coronary Heart Disease Hospitalizations per 1000 Population, 2014
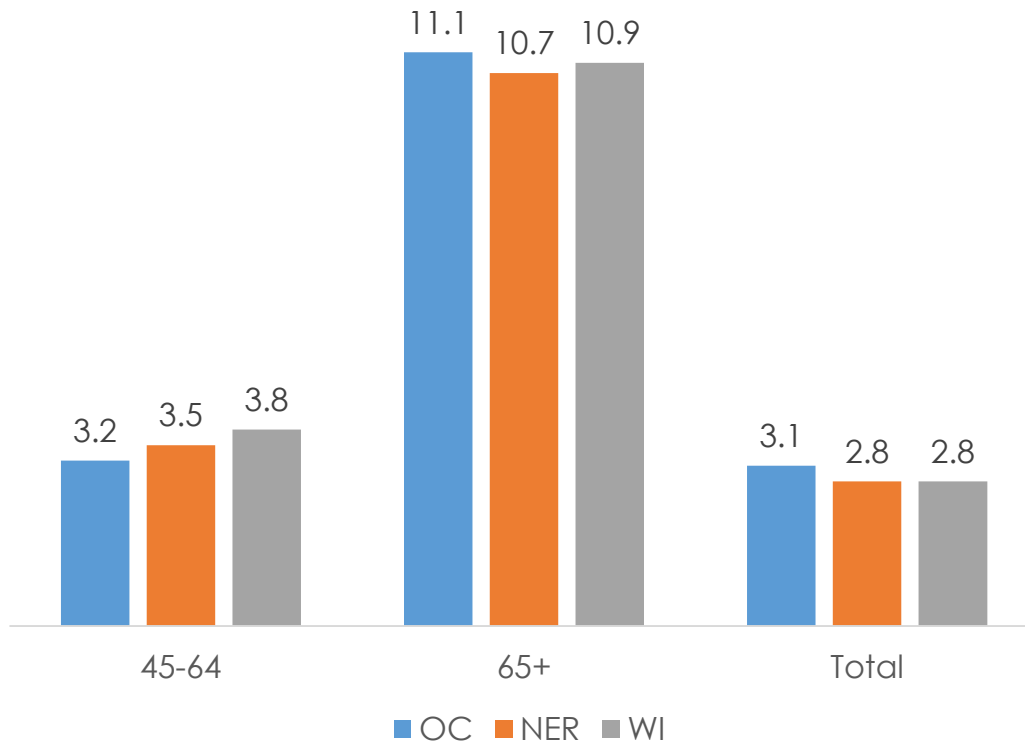
Cerebrovascular disease hospitalization rate per 1,000 Population 2014

Source: Wisconsin Public Health Profile, 2016
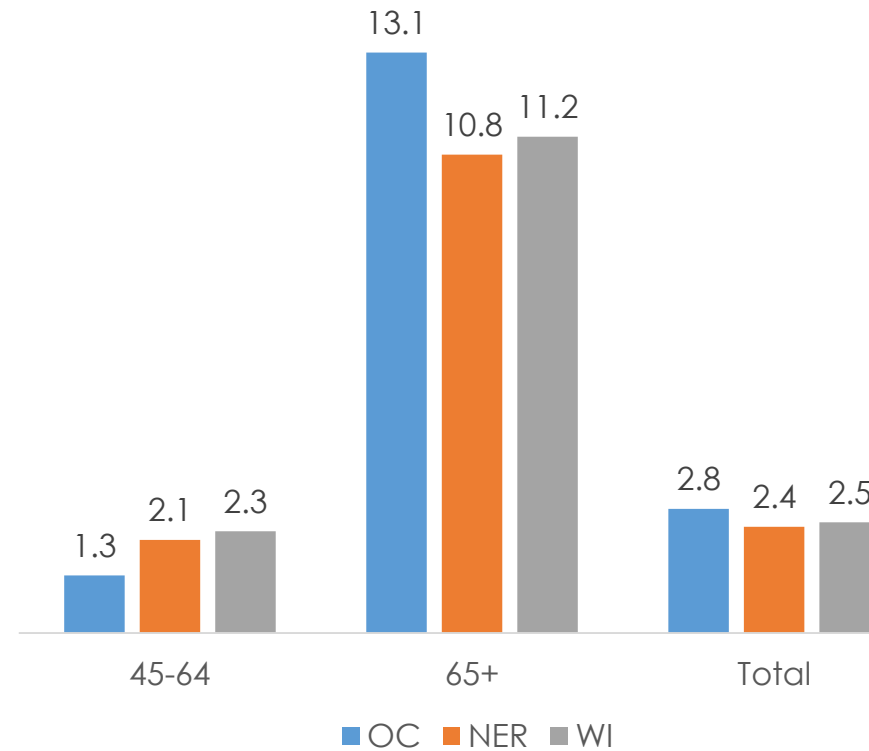
Tobacco Exposure

Prevalence of Cigarette Smoking (%), 2011-2015

OC   WI   HP 2020

Adults: OC 16.3, WI 18.9, HP 2020 12

Pregnancy: OC 20.5, WI 13.5

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Source: Wisconsin BRFSS; Wisconsin WISH System
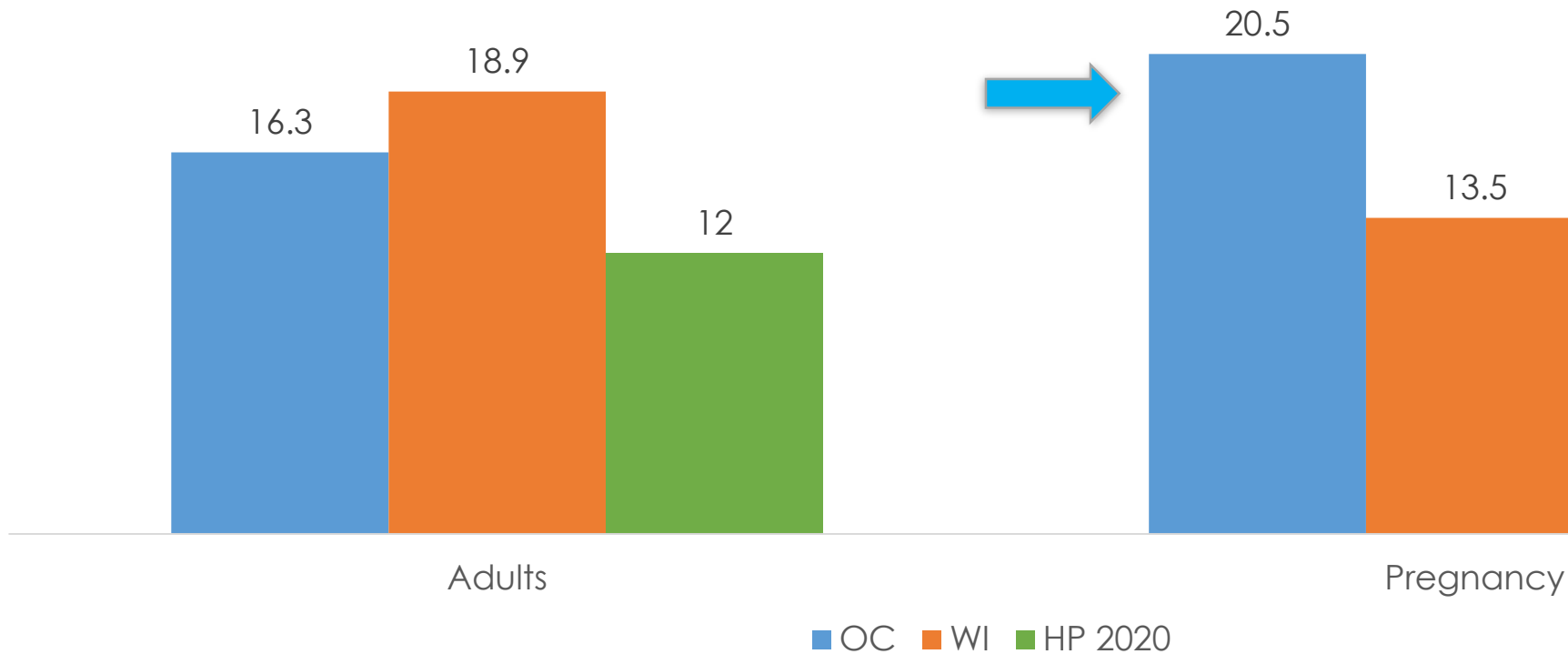
Communicable Diseases

Communicable Diseases in Oconto
Total Incidence Rate per 100,000 population

640.9
593.7
466.7
598.4
740

800
700
600
500
400
300
200
100
0

2012   2013   2014   2015   2016

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Source: https://avr.wisconsin.gov/SASPortal/main.do

60
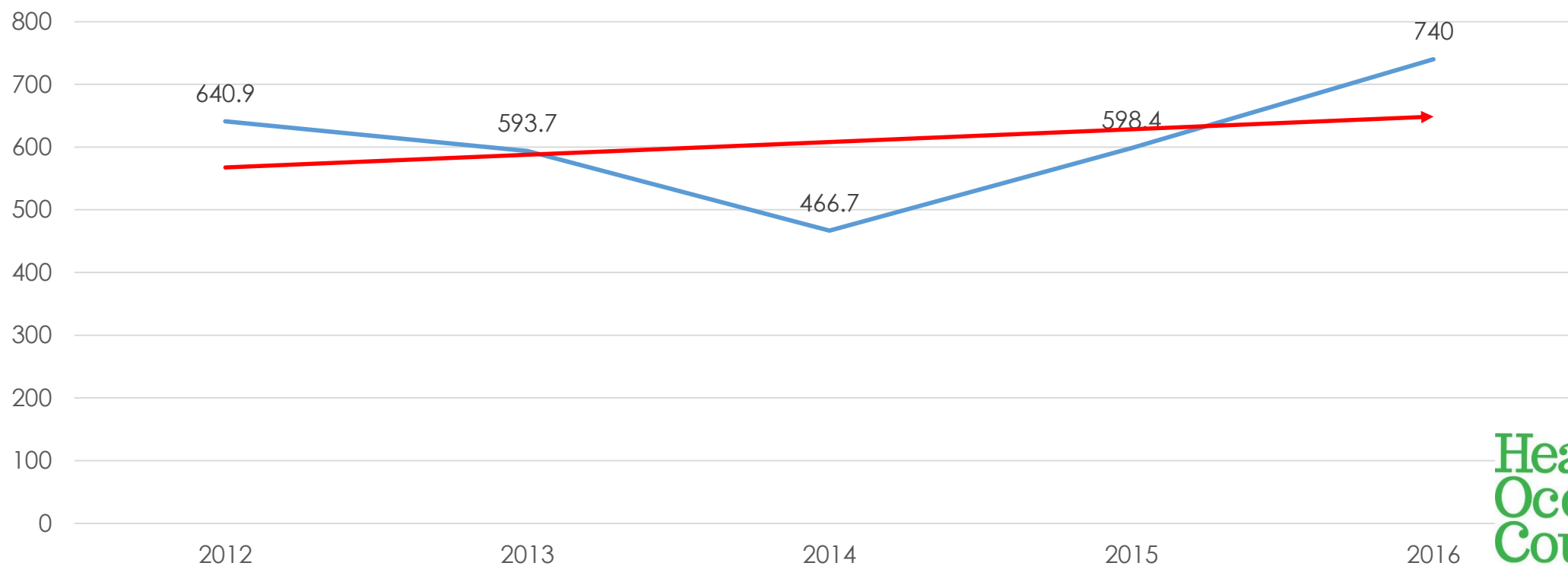
Communicable Diseases

Oconto County Incidence Rates per 100,000 population

Disease	2014	2016
Campylobacteriosis	21.3	93.5
Cryptosporidiosis	18.7	50.7
Giardiasis	16	50.8
Erhlichiosis/Anaplasmosis	5.3	13.4
Chronic Hepatitis C	2.67	37.4

■ 2014 ■ 2016

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Source: https://avr.wisconsin.gov/SASPortal/main.do
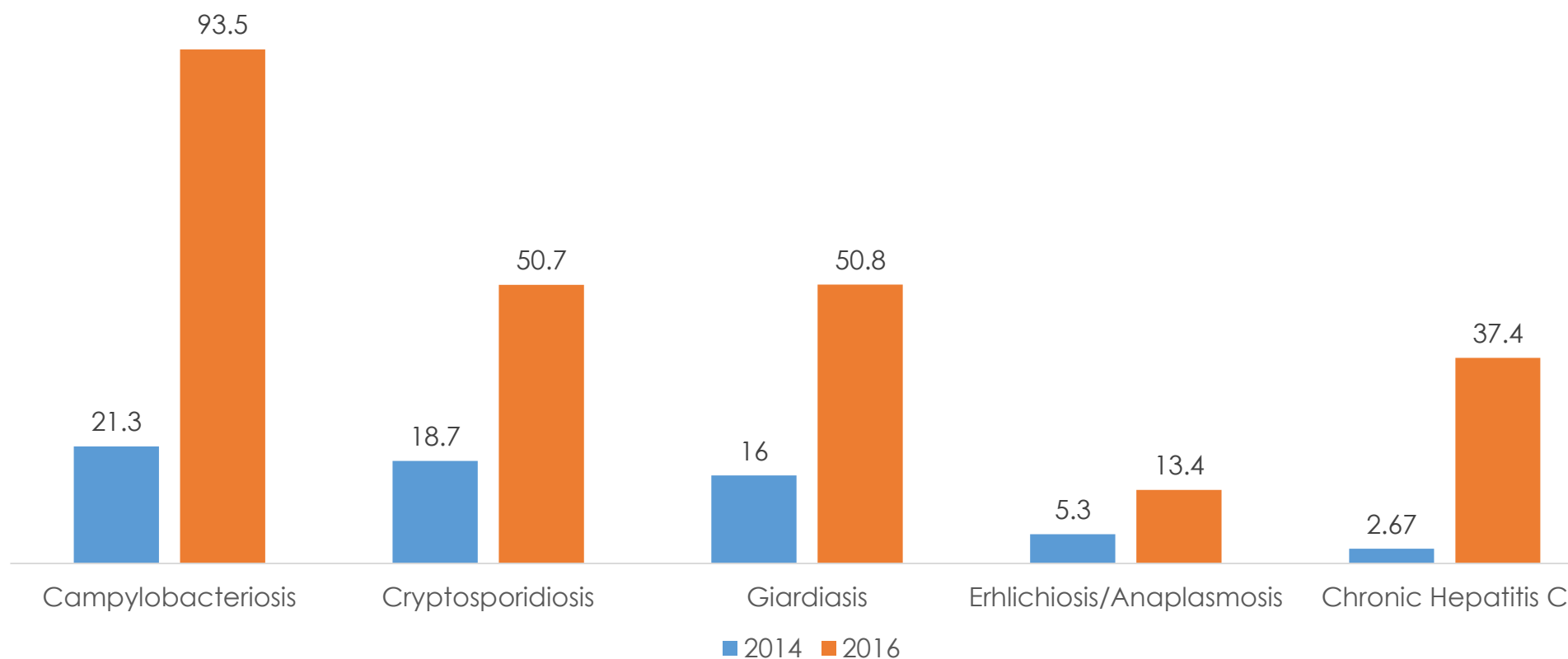
# Maternal and Child Health

% of Children Aged 19-35 months who received the recommended doses of DTaP, polio, MMR, Hib, Hepatitis B, varicella and PCV

90%

|	OC				WI			
2013	73%				70%			
2014		73%				71%		
2015			75%				71%	
2016				75%				73%

2013 2014 2015 2016 ▬▬National Benchmark
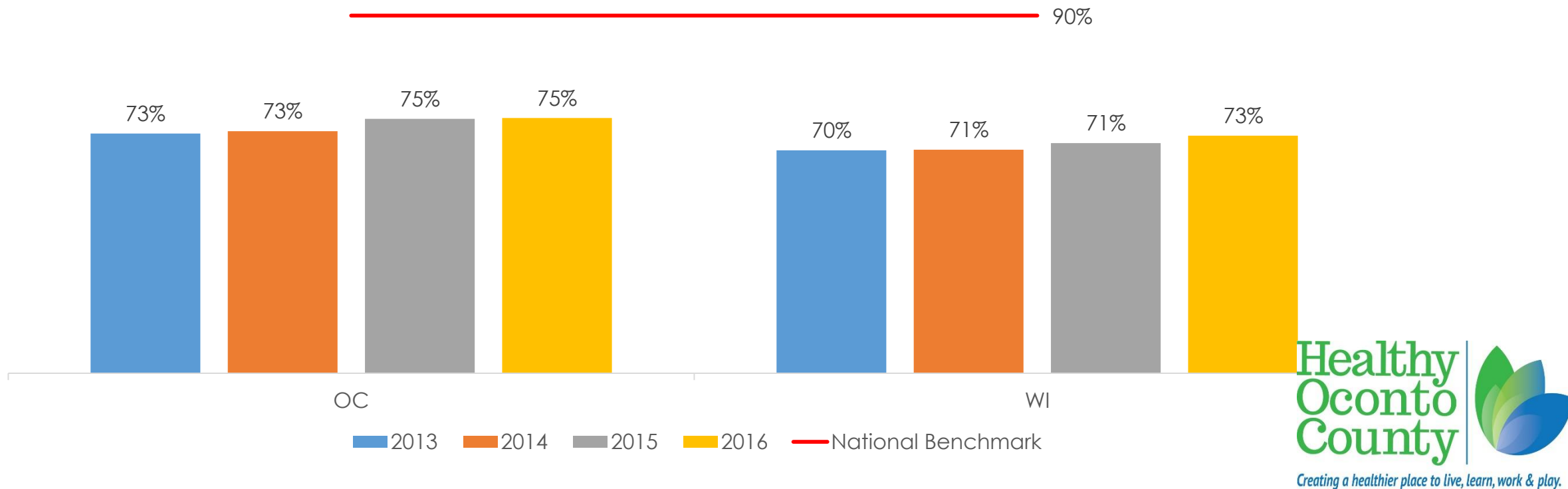
Maternal and Child Health

Immunization Coverage Rates for Oconto County Residents Age 13-18
2013-2016

Hep A 1 dose
- 31% (2013)
- 37% (2014)
- 49% (2015)
- 59% (2016)

HPV 1 dose
- 34% (2013)
- 39% (2014)
- 47% (2015)
- 53% (2016)

HPV 3 doses
- 19% (2013)
- 22% (2014)
- 31% (2015)
- 36% (2016)

Meningococcal
- 63% (2013)
- 65% (2014)
- 71% (2015)
- 76% (2016)

■ 2013 ■ 2014 ■ 2015 ■ 2016

63

Source: Oconto County Health Department
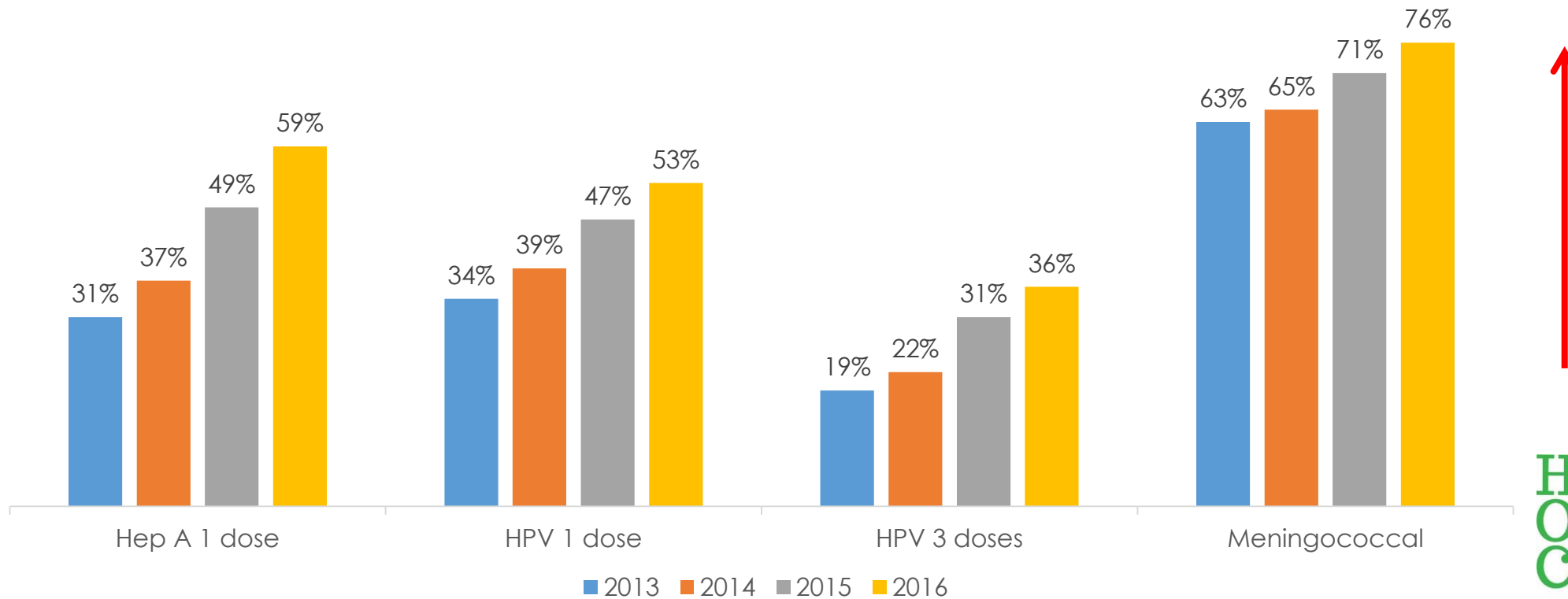
Maternal and Child Health

PERCENT OF BIRTHS TO TEENS (AGE <20)
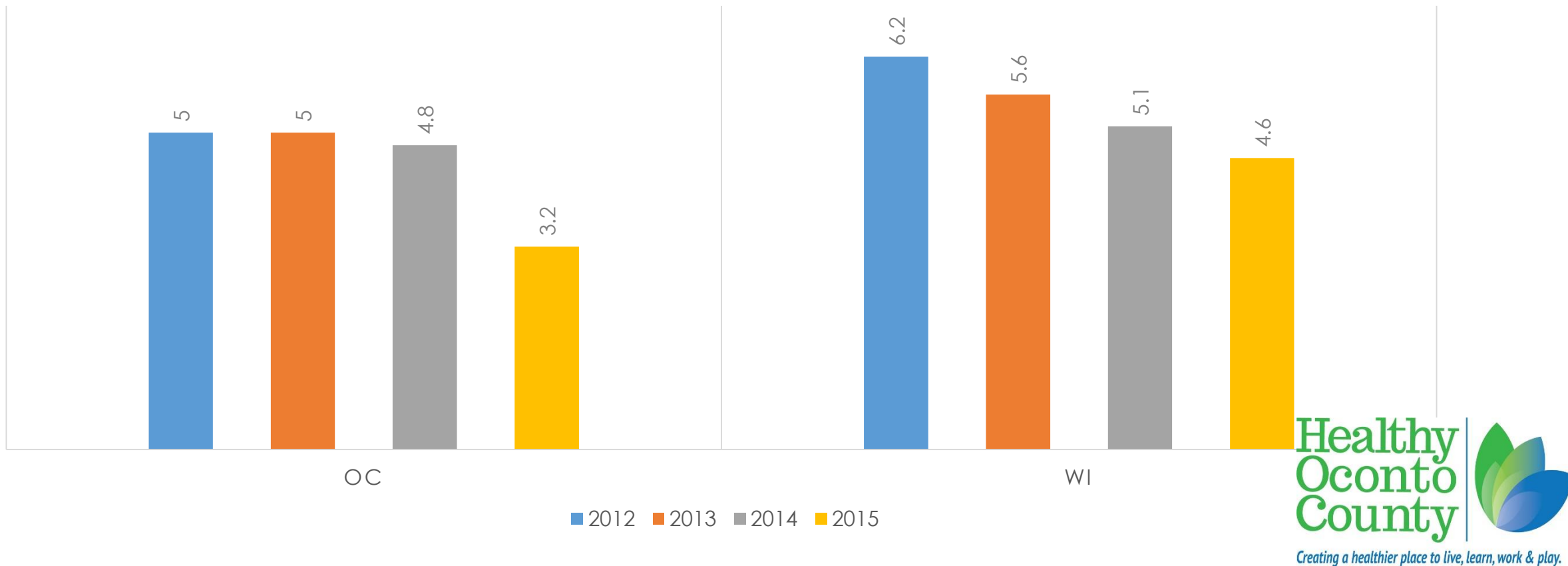
OC: 2012 = 5, 2013 = 5, 2014 = 4.8, 2015 = 3.2

WI: 2012 = 6.2, 2013 = 5.6, 2014 = 5.1, 2015 = 4.6

Legend: ■ 2012 ■ 2013 ■ 2014 ■ 2015

Source: Wisconsin Interactive Statistics on Health (WISH) Data System, 2015

Injury and Violence

Causes of Injury Hospitalization per 100,000 Population (2009-2014)

Falls
- OC: 267
- NER: 294.3
- WI: 358.3

Poisoning
- OC: 87
- NER: 115.8
- WI: 128.1

MVC Occupant
- OC: 47.4
- NER: 34.3
- WI: 38.9

Nontraffic Transport
- OC: 25.2
- NER: 13.3
- WI: 14

Struck by object or person
- OC: 19.6
- NER: 19.9
- WI: 27.5

Legend: OC | NER | WI

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Source: Wisconsin Interactive Statistics on Health (WISH) Data System, 2015

Injury and Violence

MVC OCCUPANT HOSPITALIZATION RATE BY YEAR PER 100,000

Source: Wisconsin Interactive Statistics on Health (WISH) Data System, 2015

Injury and Violence

Non Traffic Transport Hospitalization Rates per 100,000 by Age 2005-2014

Source: Wisconsin Interactive Statistics on Health (WISH) Data System, 2015
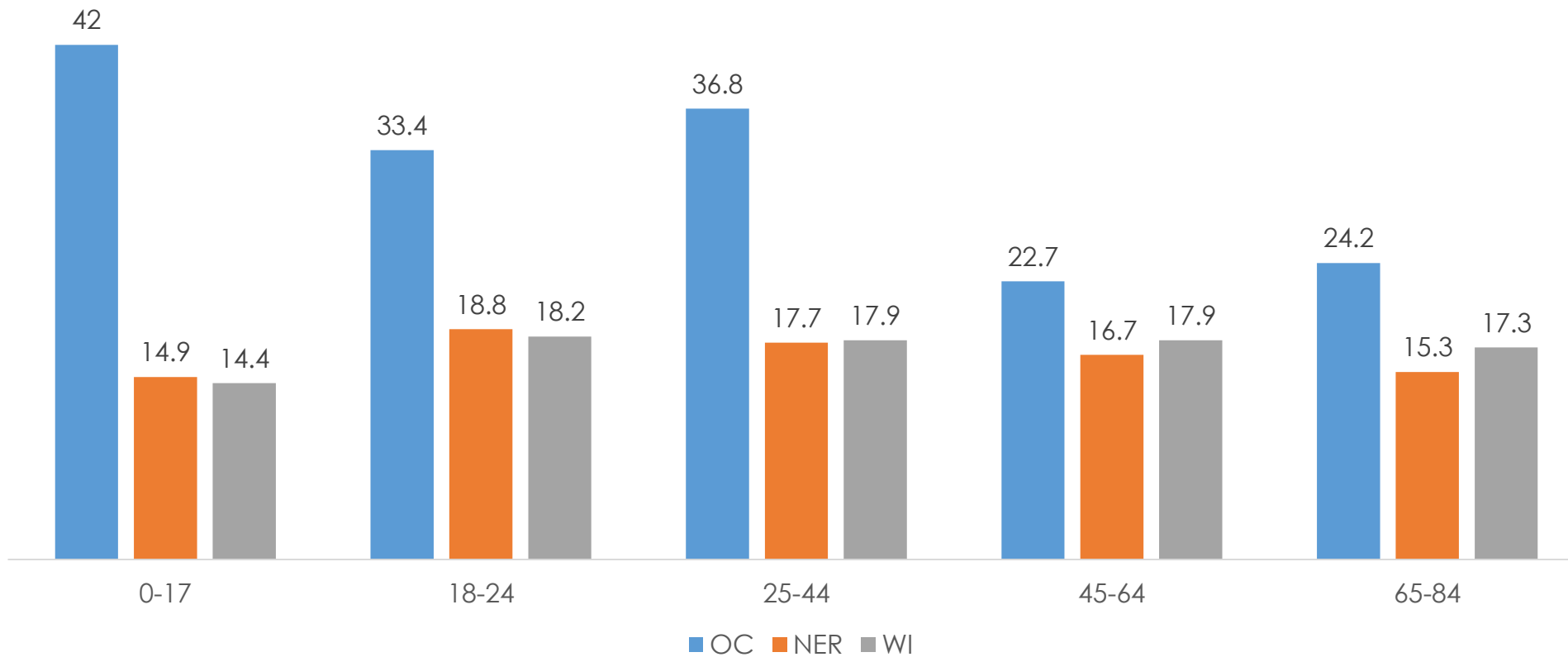
Injury and Violence

Percentage of Oconto County students who texted or emailed while driving a car or other vehicle during the past 30 days.

36.3%

N.A

■ 2010 ■ 2017

Source: Oconto County Online Youth Risk Behavior Survey
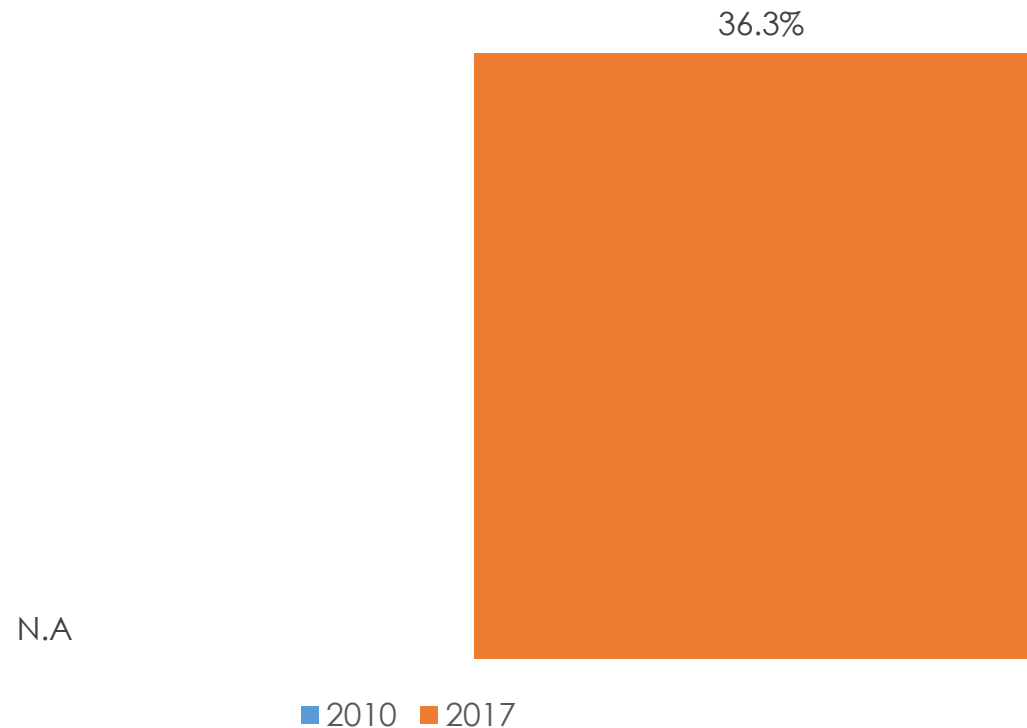
Mental Health

Average Number of Mentally Unhealthy Days in the Past 30 days

	2006-2012	2014	2015
OC	3.8	3.3	3.4
WI	3	3.7	3.5

■ OC ■ WI

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Source: County Health Rankings, 2015-2017
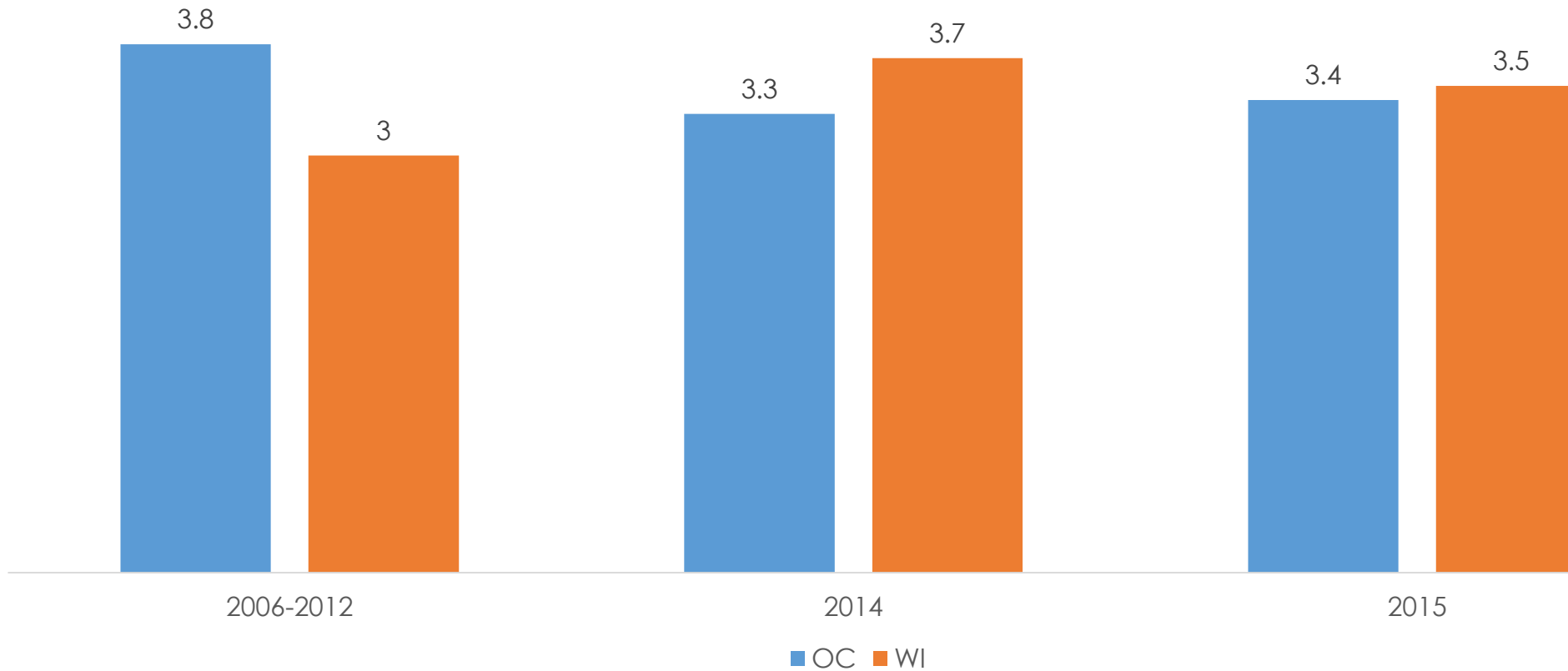
Mental Health

Self-Inflicted Injury Hospitalization (2009-2014)

Rate /100,000 population

OC 62.9 · NER 96.9 · WI 96.7

Self-inflicted injury hospitalization per year

Rate /100,000 population

120 · 100 · 80 · 60 · 40 · 20 · 0

2008 · 2009 · 2010 · 2011 · 2012 · 2013 · 2014

WI: 102.3 · 96.7 · 94.2 · 93.6 · 97.1 · 98.6 · 100.3

OC: 97.8 · 72.3 · 69 · 79.6 · 45.1 · 47.7 · 63.4

OC — WI — Linear (OC)

Source: Wisconsin Interactive Statistics on Health (WISH) Data System, 2015
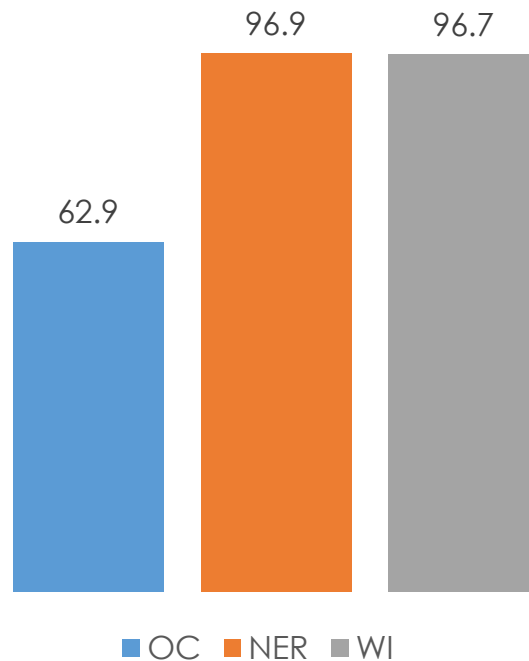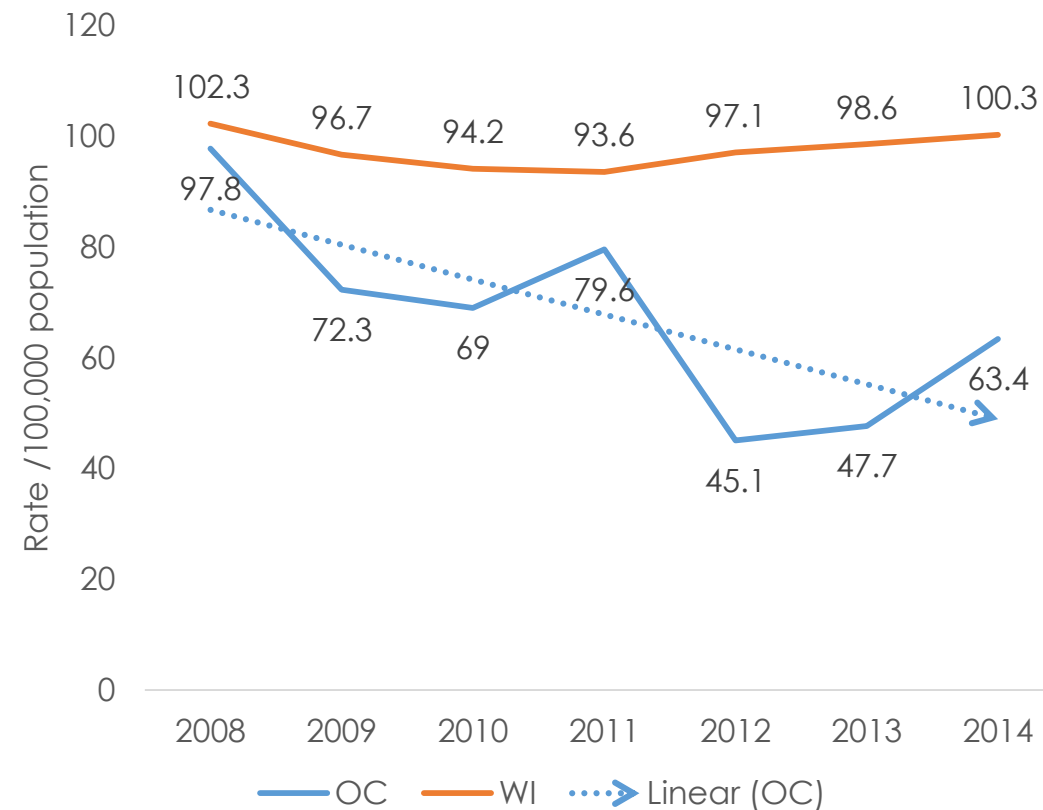
Mental Health

## Suicide Rate per 100,000 population by Age Groups (2004-2015)

	0-17	18-24	25-34	35-44	45-54	55-64	65+	Total
OC	10.8	19.5	15.2	27.4	19.5	15.4	16.7	20
NER	4.3	16.3	16.7	19.8	22	17.1	12.1	14.6
WI	3.5	14.3	16.4	18.1	20	16.3	12.8	13.7

■ OC ■ NER ■ WI

Source: Wisconsin Interactive Statistics on Health (WISH) Data System, 2016

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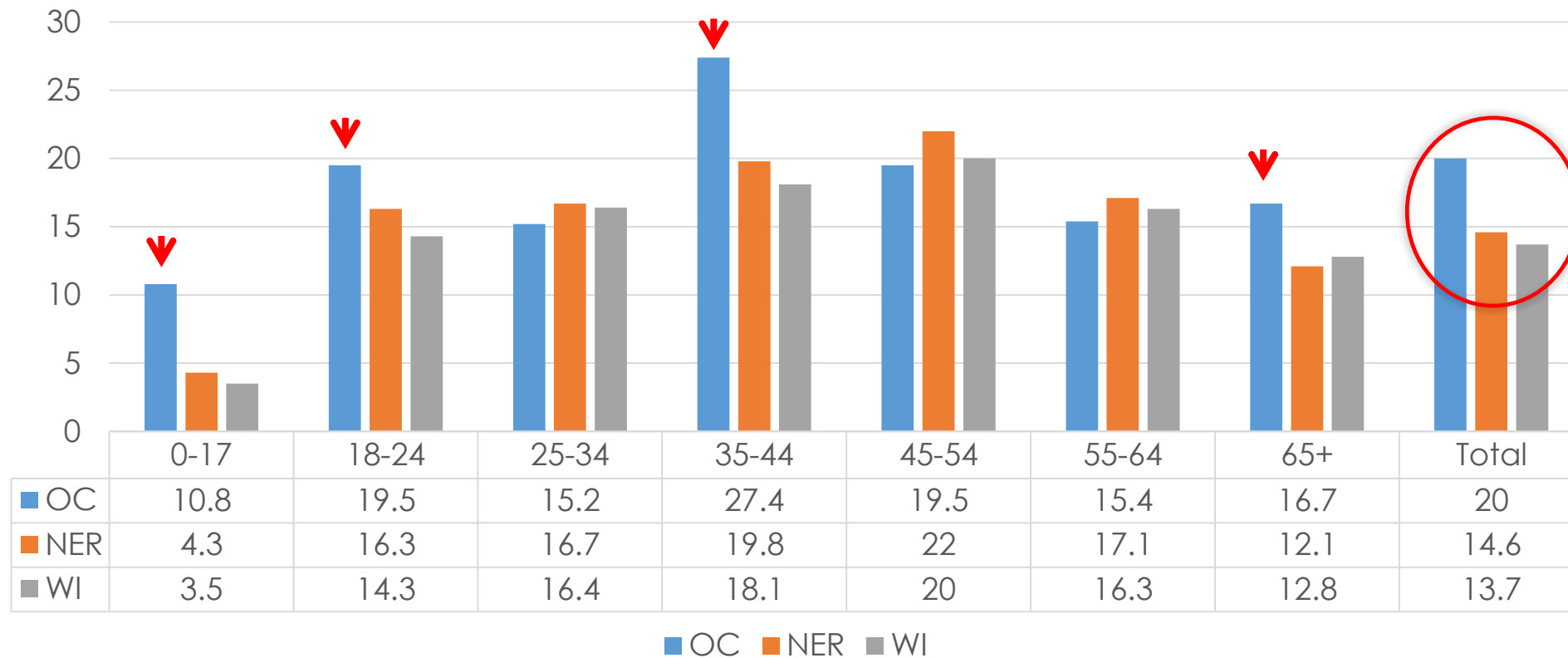
Mental Health

Oconto County Students

	Seriously Considered Suicide in last 12 months	Felt sad or hopeless daily for ≥ 2 weeks affecting usual activities
2010	12.6%	22.0%
2017	17.0%	26.7%

Source: Oconto County Online Youth Risk Behavior Survey
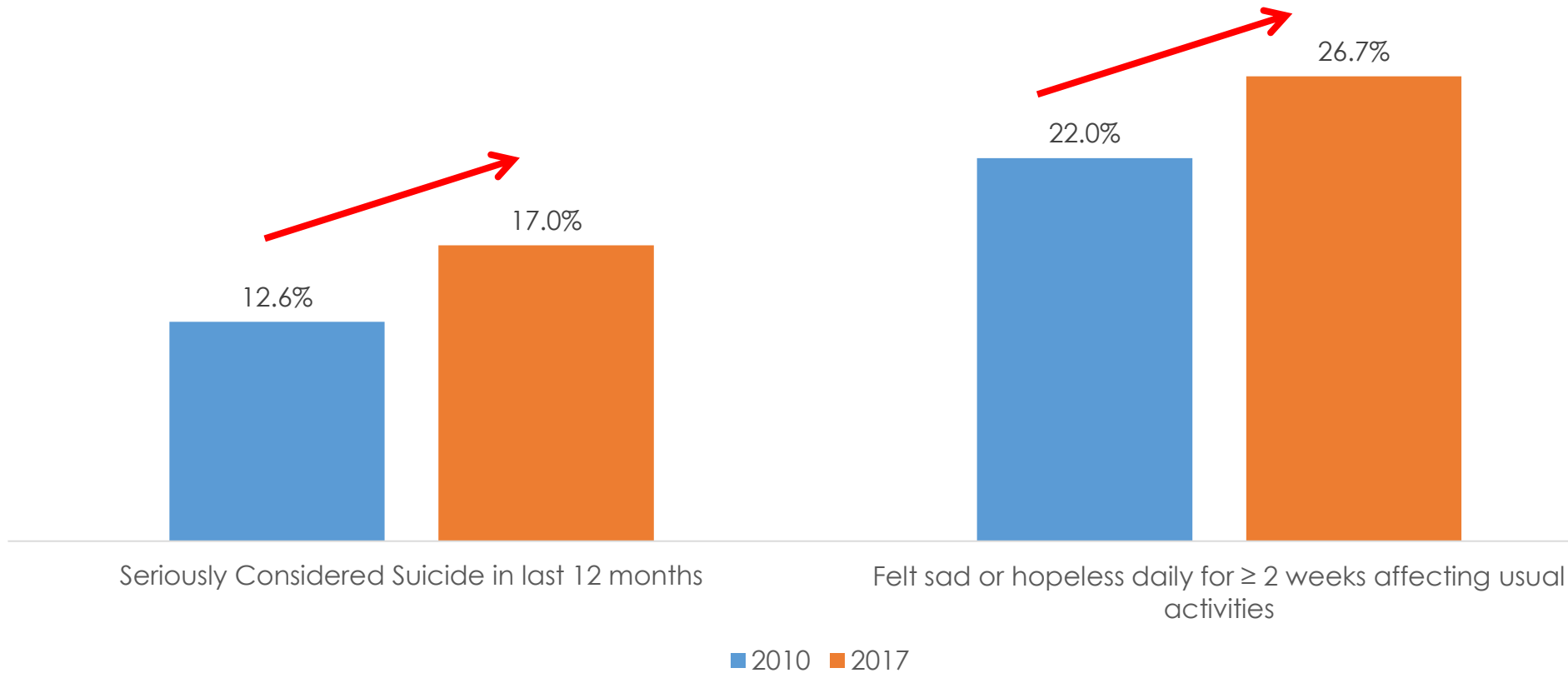
Mental Health

Percentage of 9th-12th Students Who Feel They Belong At School

Source: Oconto County Online Youth Risk Behavior Surveys
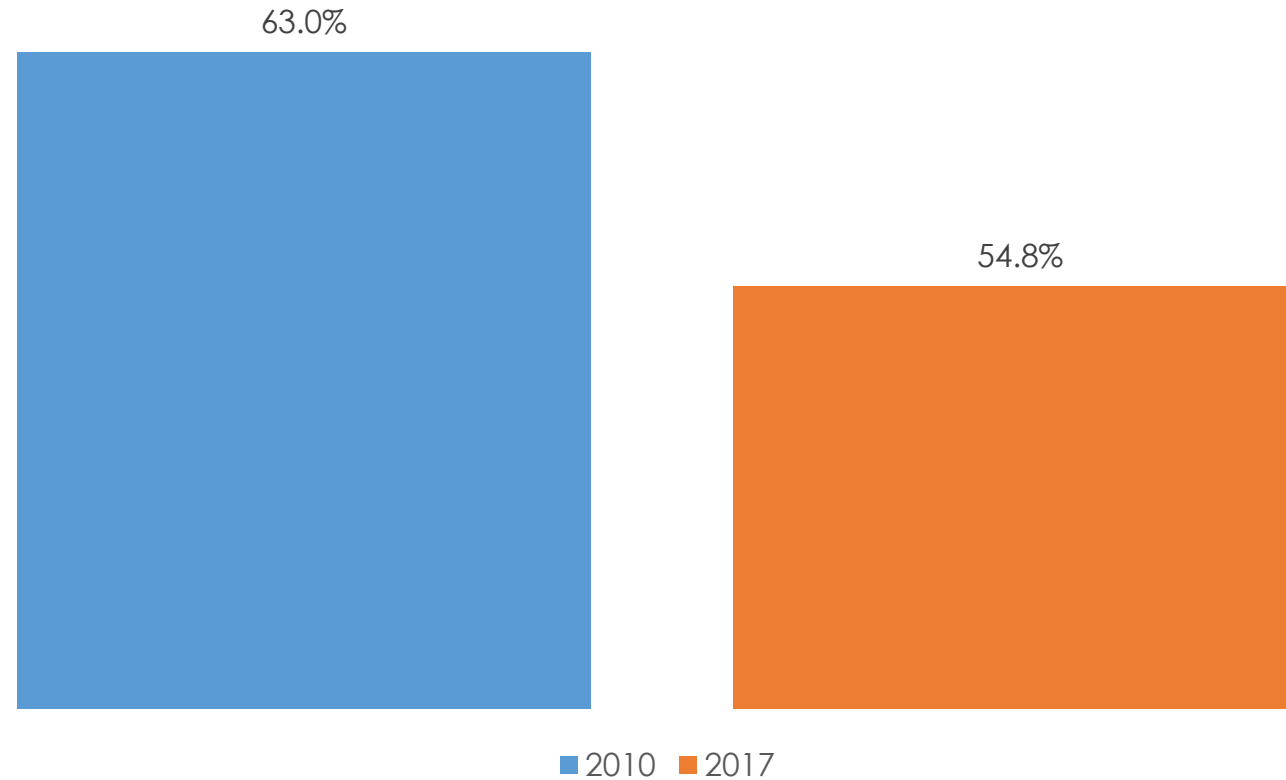
Oral Health

Percentage of the population ages 2+ without a dental visit in the last year
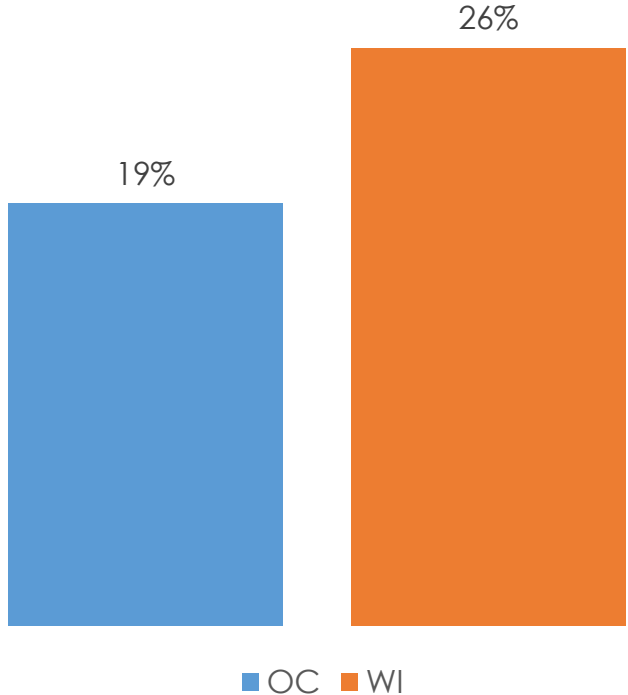
Percent of Population with Access to Optimally Fluoridated Water, 2011
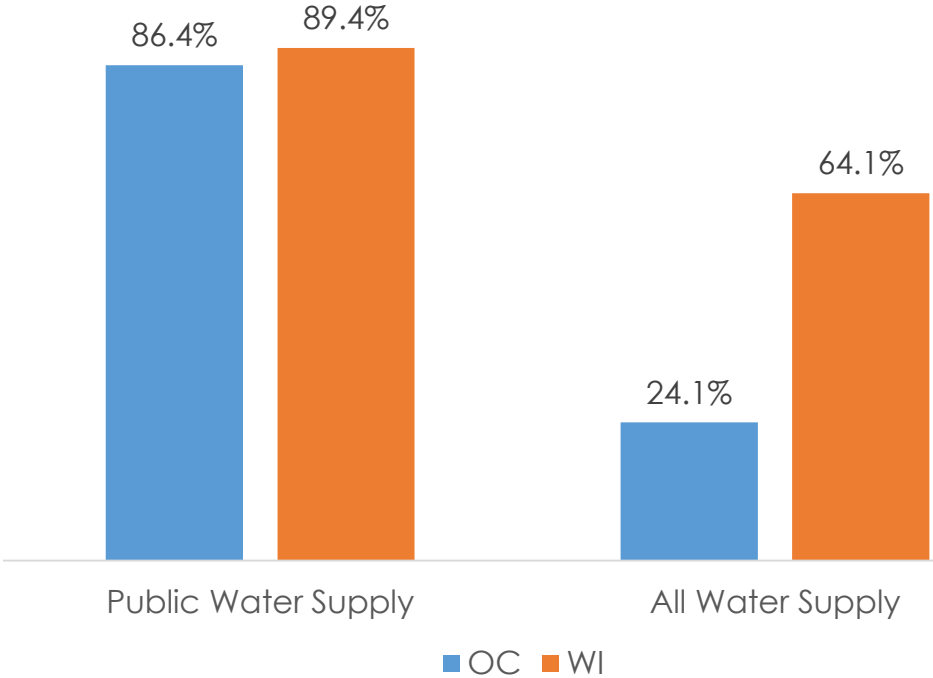
Oral Health

Percent of schools with Preventative Dental Programs

Source: County Oral Health Wisconsin Surveillance System (COWS)
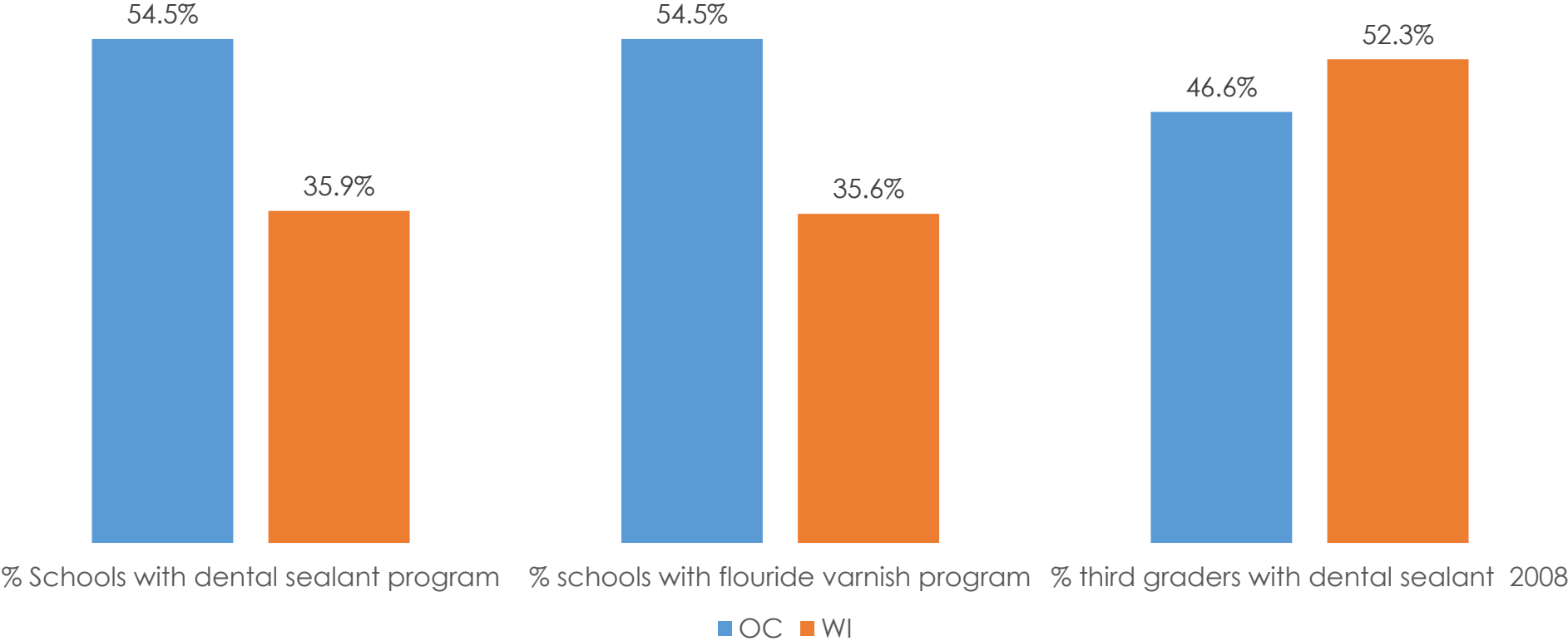
Oral Health

Seal a Smile Data

Percent of Oconto County Students in SAS Program with Untreated Decay

Source: Northern Health Center/Oconto County Public Health Seal-A-Smile Program 2015-2016
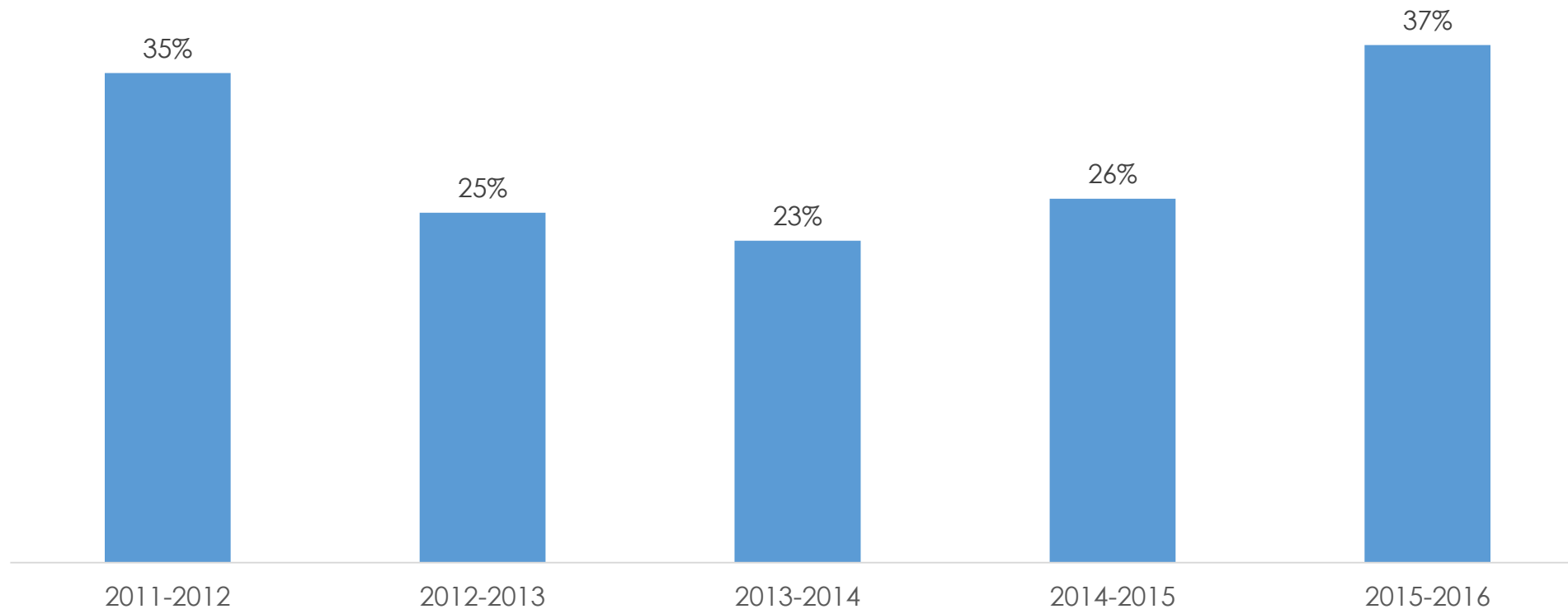
Workgroup Reports:
# Alcohol and Other Drug Abuse (AODA) and Misuse

Laura Cormier

Oconto County Steering Committee Member

Bellin Health Oconto Hospital

Excessive Drinking Prevalence

Excessive drinking- either binge drinking, defined as consuming more than 4 (women) or 5 (men) alcoholic beverages on a single occasion in the past 30 days, or heavy drinking, defined as drinking more than 1 (women) or 2 (men) drinks per day on average

Excessive Drinking

OC   WI   National Benchmark
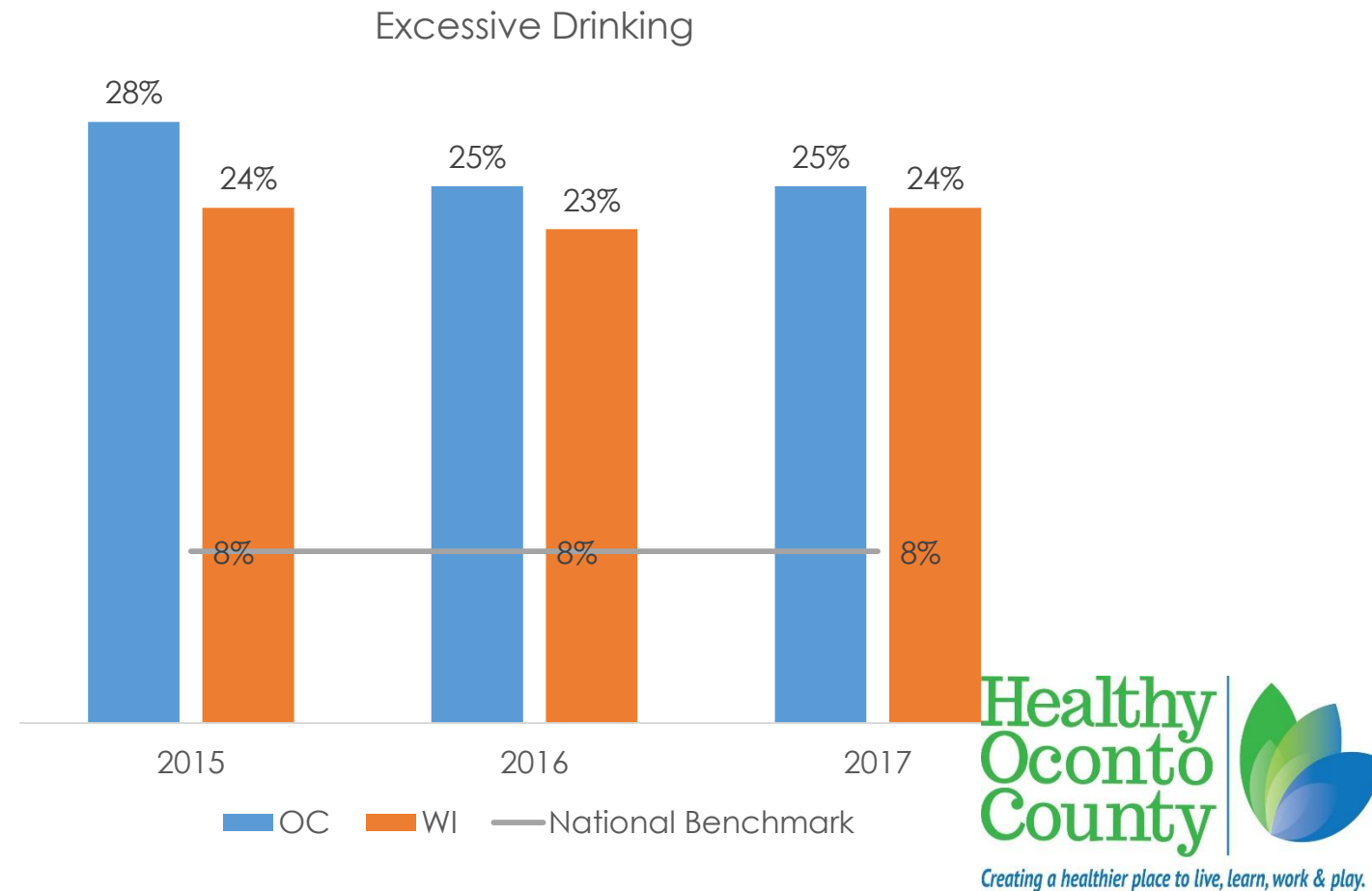
Source: County Health Rankings

Binge Drinking

Average number of drinks among Wisconsin binge drinkers exceeds the benchmark for females (4) and males (5)

Maximum Number of Alcoholic Drinks on One Occasion Among Wisconsin Adult Binge Drinkers

Female: 6.4
Male: 9.5

■ Number of Drinks

Source: WI DHS, Division of Mental and Substance Abuse Services, 2015
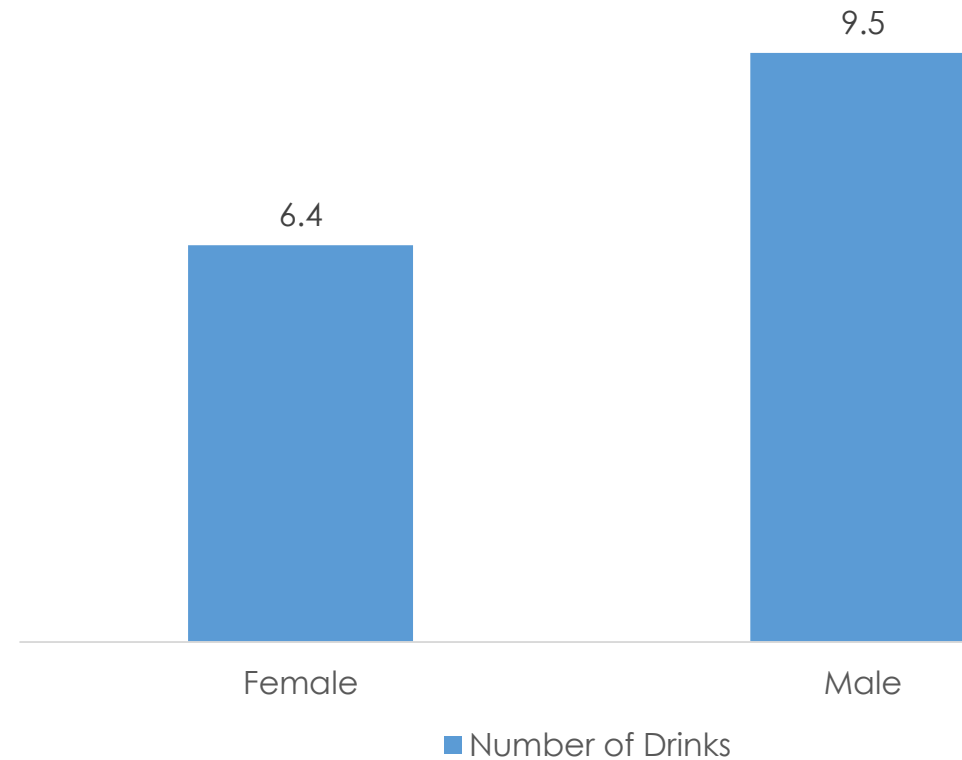
The Cost of Excessive Alcohol Use in Oconto County

Underage Drinking

Cost of Underage Drinking in Wisconsin, 2010

$565,000,000

$281,000,000

$127,000,000

■ Pain and Suffering   ■ Work Lost   ■ Medical

Source: WI DHS, Division of Mental and Substance Abuse Services, 2015
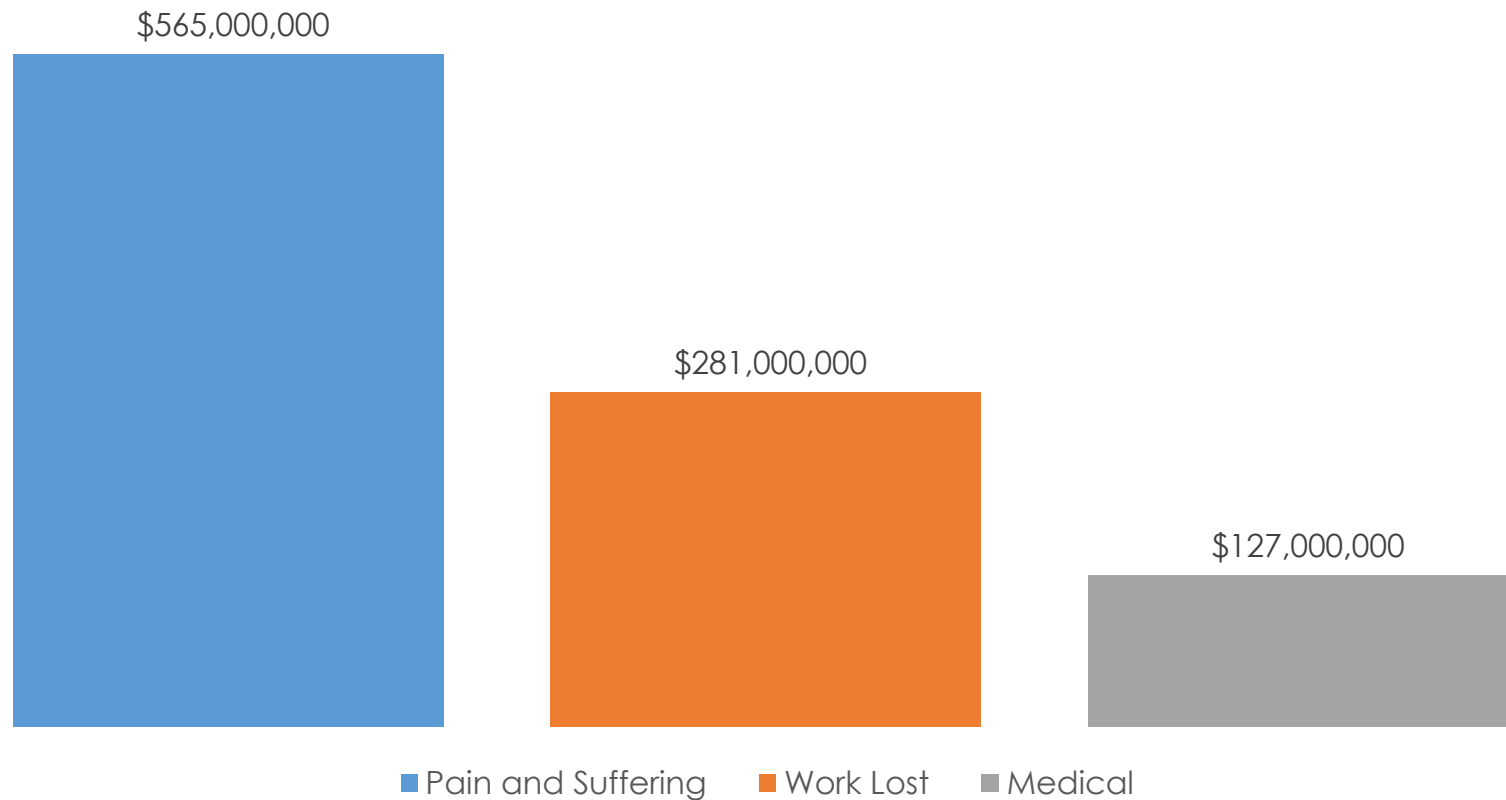
Underage Drinking

Underage Drinking among 9th -12th graders

Source: Wisconsin Youth Risk Behavior Survey
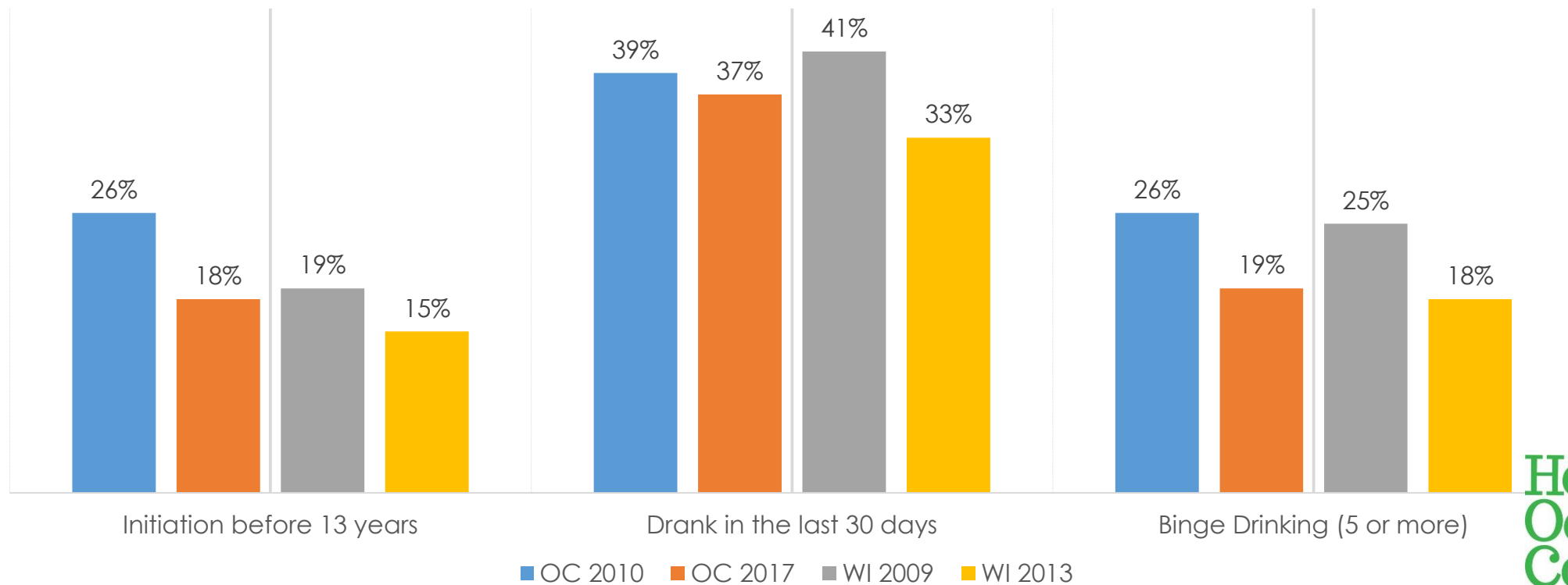
Alcohol Density

Alcohol Licenses per 500 population (2014-2015)

2.5

1.5

■ OC ■ WI

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Source: WI Epidemiological Profile on Alcohol and Other Drugs, 2016
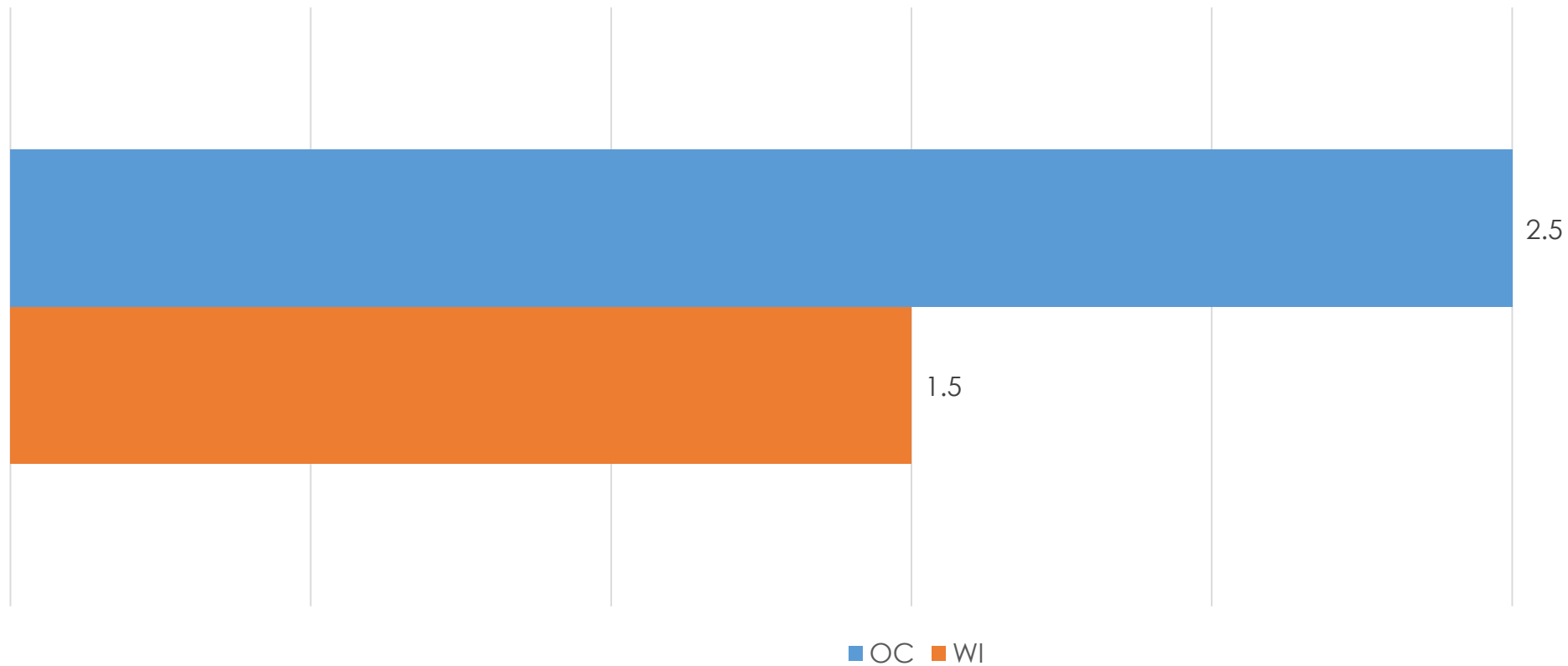
Comparison of Grocery Stores to Bars.
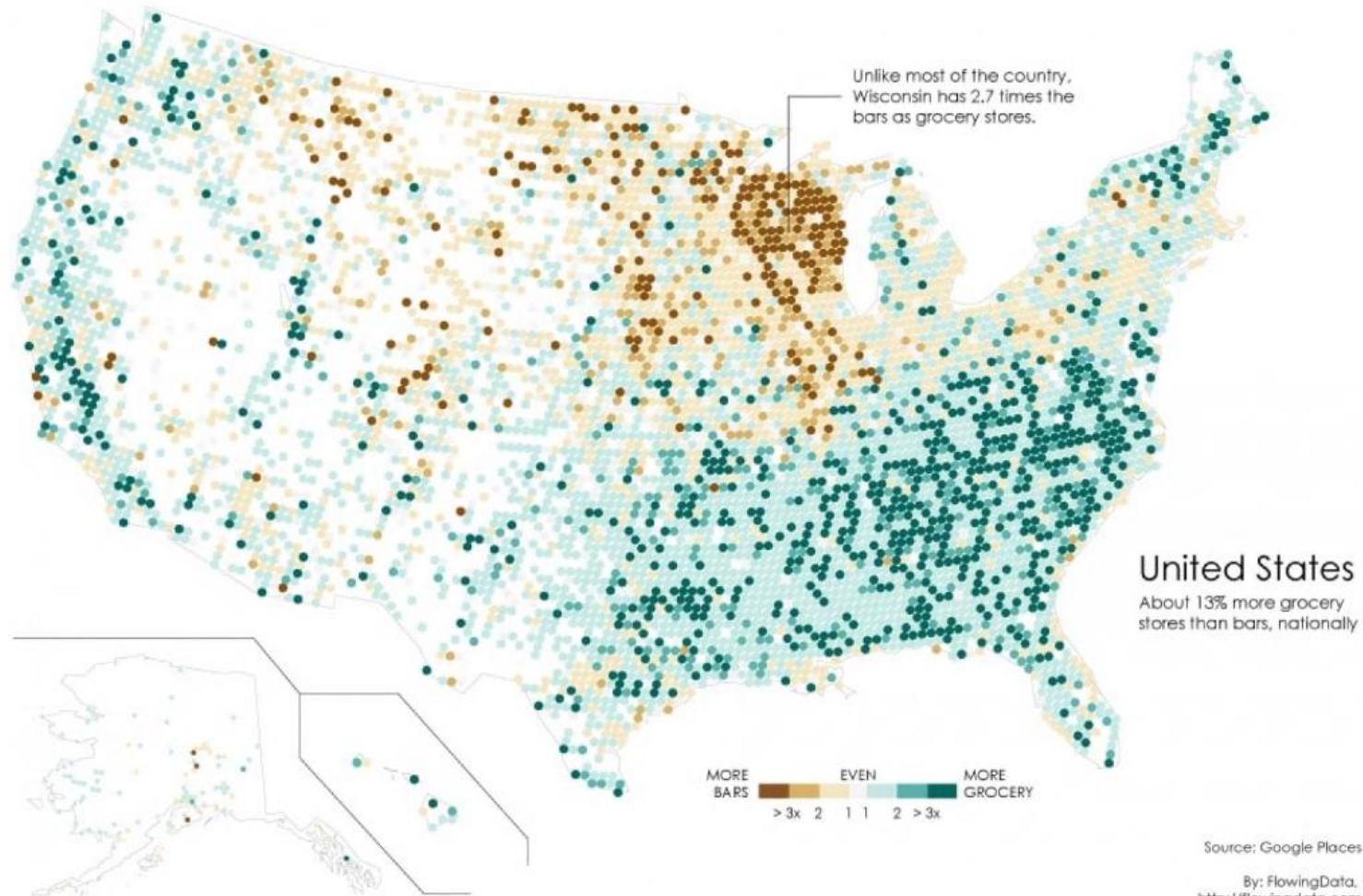
Map courtesy FlowingData.com

Effects of Alcohol

Arrests are defined by the Uniform Crime Reporting program as all persons processed by arrest (booking), citation, or summons (when served by an officer) for committing an offence in its jurisdiction.
Counts are based on the most serious charge reported and not the number of charges

Percent of All Arrests due to Adults OWI

Legend: 2012 · 2013 · 2014 · 2015

Categories: OC, NER, WI

OC: 11.6% (2012), 7% (2013), 5.5% (2014), 3.6% (2015)
NER: 13% (2012), 7% (2013), 9% (2014), 9.5% (2015)
WI: 9% (2012), 9% (2013), 8.7% (2014), 9.2% (2015)

Source: Wisconsin Uniform Crime Reporting Dashboard (doj.state.wi.us/)
Wisconsin Department of Justice (wilenet.org)

Effects of Alcohol

RATES OF OWI ARRESTS (ADULTS AND JUVENILE) PER 100,000 POPULATION

529
465
431

409
369
351

358
74
48

2012
2013
2014

– – OC – – WI – – US

Source: WI Epidemiological Profile on Alcohol and Other Drugs, 2016

Effects of Alcohol

Wisconsin Department of Justice defines liquor law violations as violations of state or local laws or ordinances prohibiting the manufacture, sale, purchase, transportation, possession, or use of alcoholic beverages, not including driving under the influence and drunkenness.
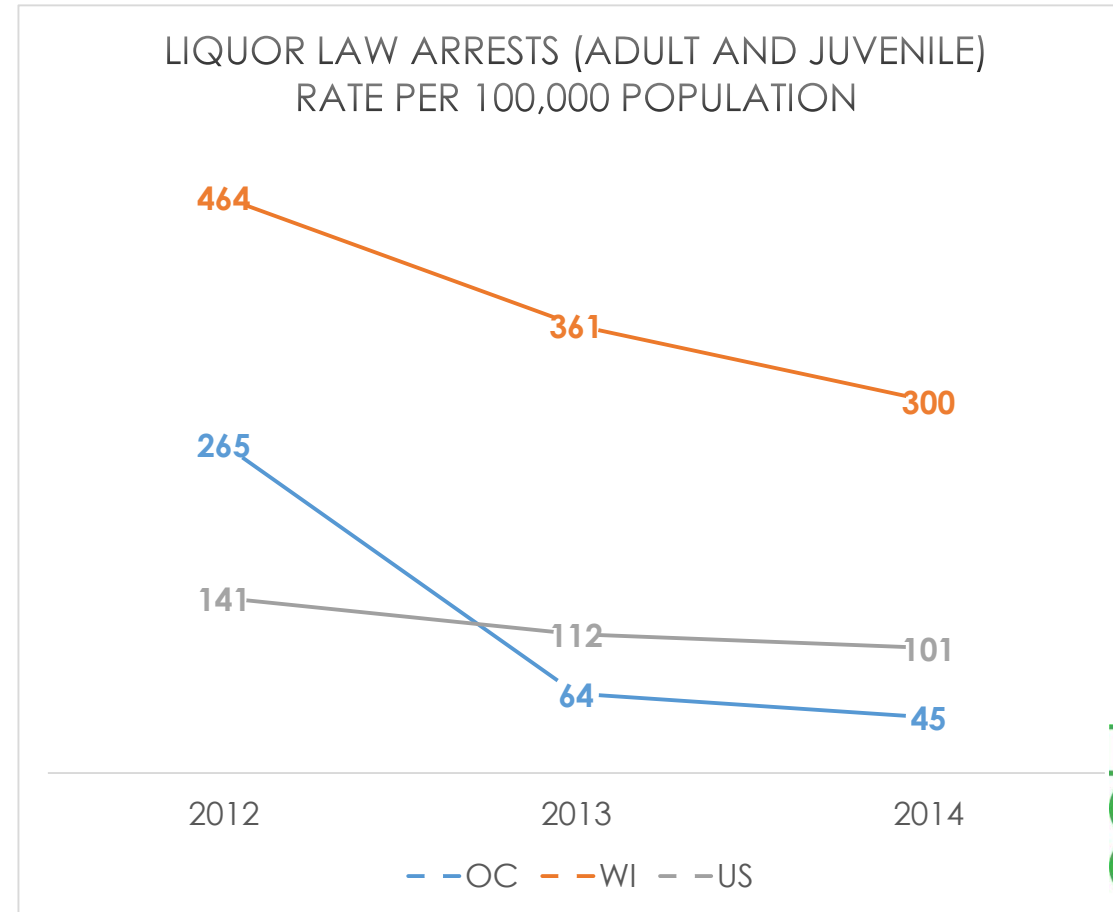
LIQUOR LAW ARRESTS (ADULT AND JUVENILE) RATE PER 100,000 POPULATION

464
361
300

265

141
112
101

64
45

2012   2013   2014

- - OC   - - WI   - - US

Source: WI Epidemiological Profile on Alcohol and Other Drugs, 2016

Effects of Alcohol

Alcohol related hospitalizations per 1000 population

Legend: OC (blue), NER (orange), WI (gray)

Age Group	OC	NER	WI
18-44	NA	1.9	2.1
45-64	NA	3.2	3.5
Total	1	1.7	1.8
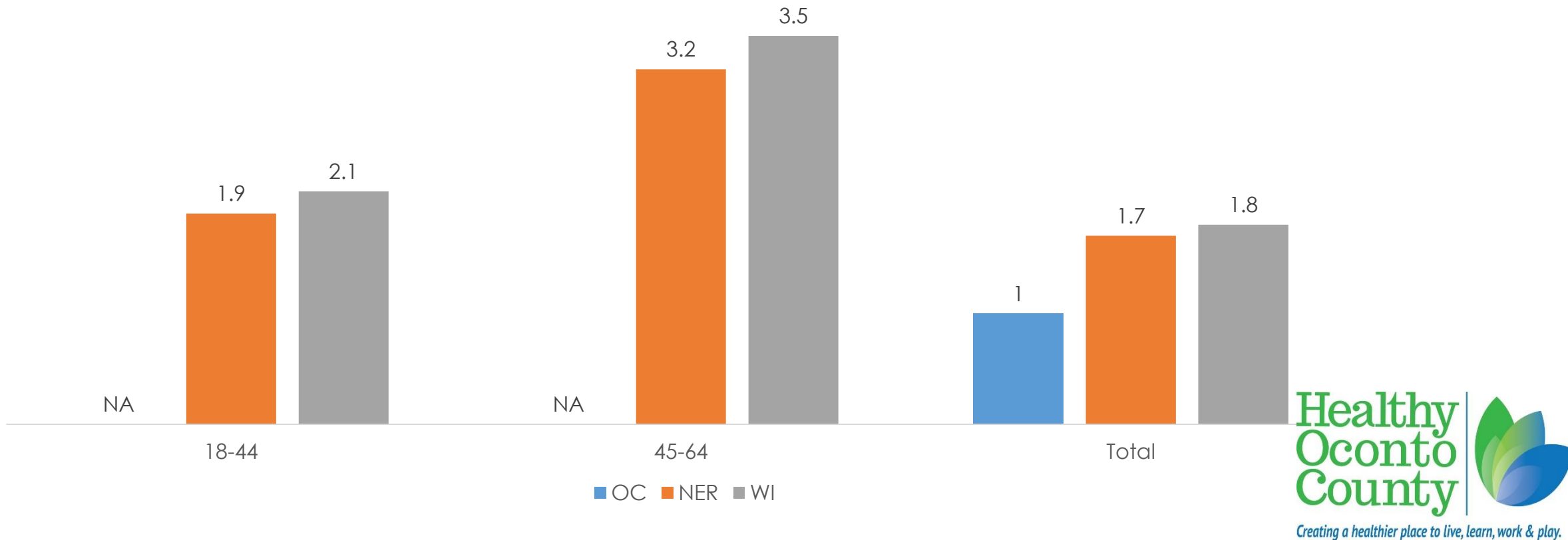
Source: WI Epidemiological Profile on Alcohol and Other Drugs, 2016

Effects of Alcohol

Alcohol-related motor vehicle injuries- Non-fatal injuries resulting form motor vehicle crashes where alcohol was determined to be a major factor, including injuries to drivers, passengers, pedestrians and bicyclists.

ALCOHOL RELATED MOTOR-VEHICLE INJURIES PER 100,000 POPULATION

85
66
56
64
66

62
52
51
46
47

2010   2011   2012   2013   2014

– – OC   – – WI

Source: WI Epidemiological Profile on Alcohol and Other Drugs, 2016
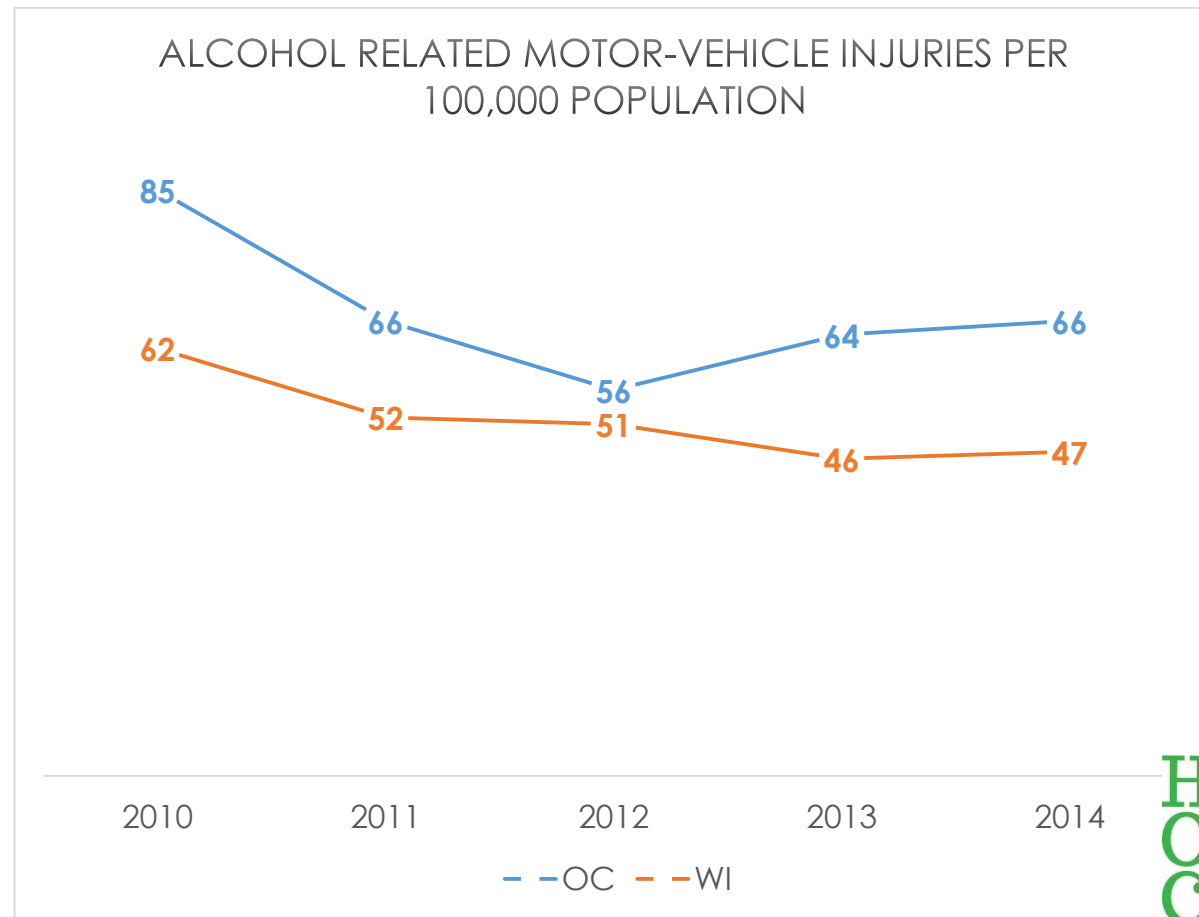
Effects of Alcohol

Alcohol-related crash - a crash in which either a driver, bicyclist, or pedestrian is listed on a police or coroner report as drinking alcohol before the crash.

PERCENT OF PERSONS INJURED IN ALCOHOL RELATED CRASHES

Legend: – – OC   – – NER   – – WI

2011: OC 11%, NER 8%, WI 7%
2012: OC 10%, NER 8%, WI 7%
2013: OC 12%, NER 8%, WI 7%
2014: OC 13%, NER 8%, WI 7%

Source: Wisconsin Public Health Profiles

Effects of Alcohol

ALCOHOL RELATED MOTOR VEHICLE DEATH RATE PER 100,000 POPULATION
(BAC=.01+)

Source: WI Epidemiological Profile on Alcohol and Other Drugs, 2016
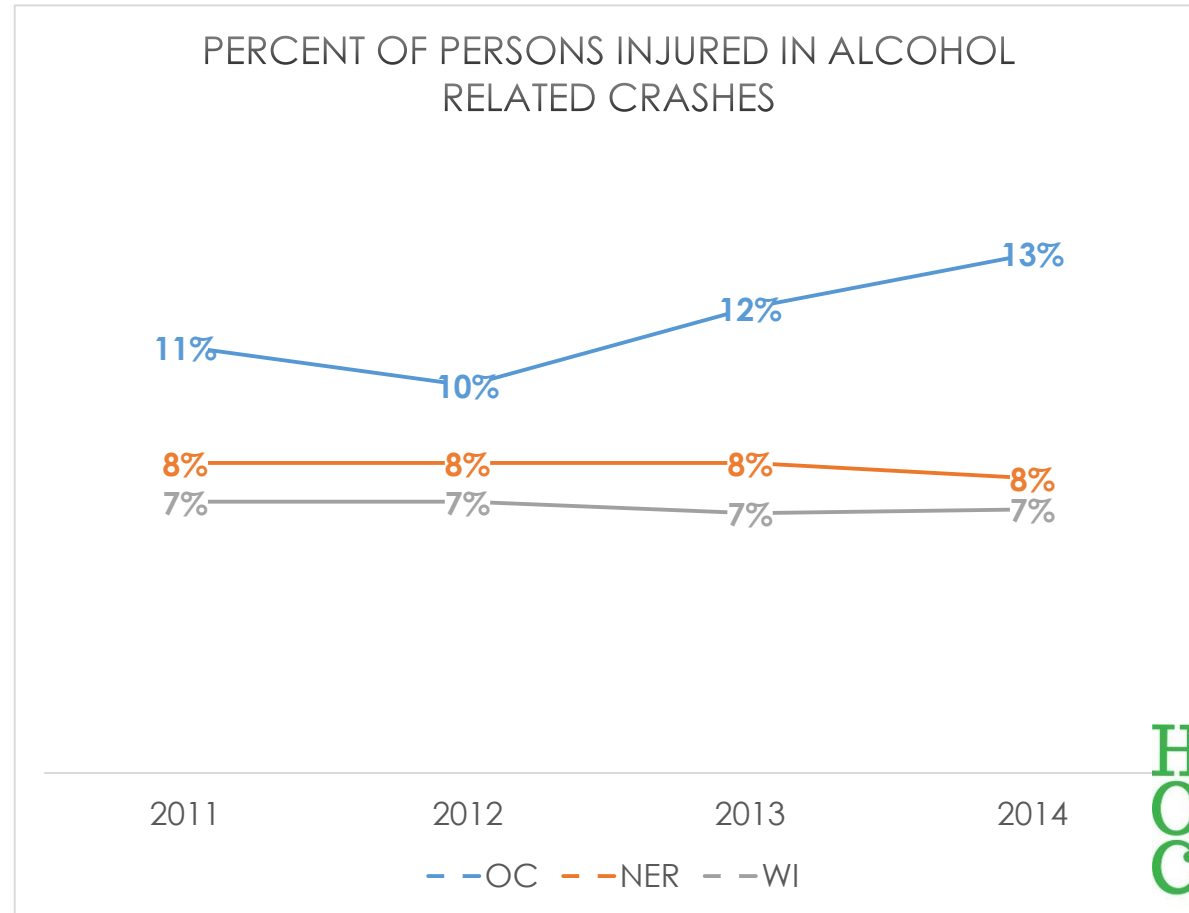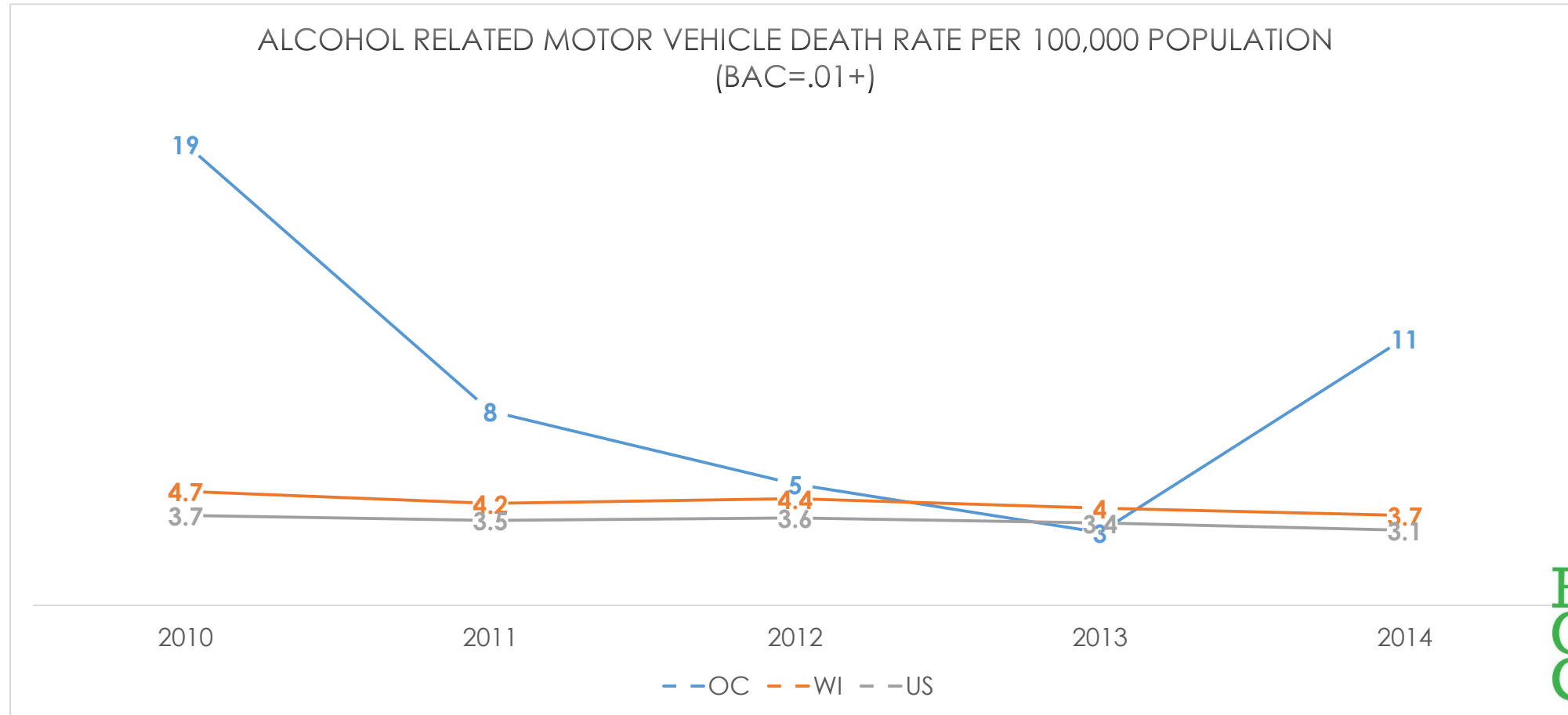
Drugs

Top 15 monitored Prescription Drugs in Wisconsin (January to March 2015)

Source: Wisconsin DHS Publication on Opioids, 2015
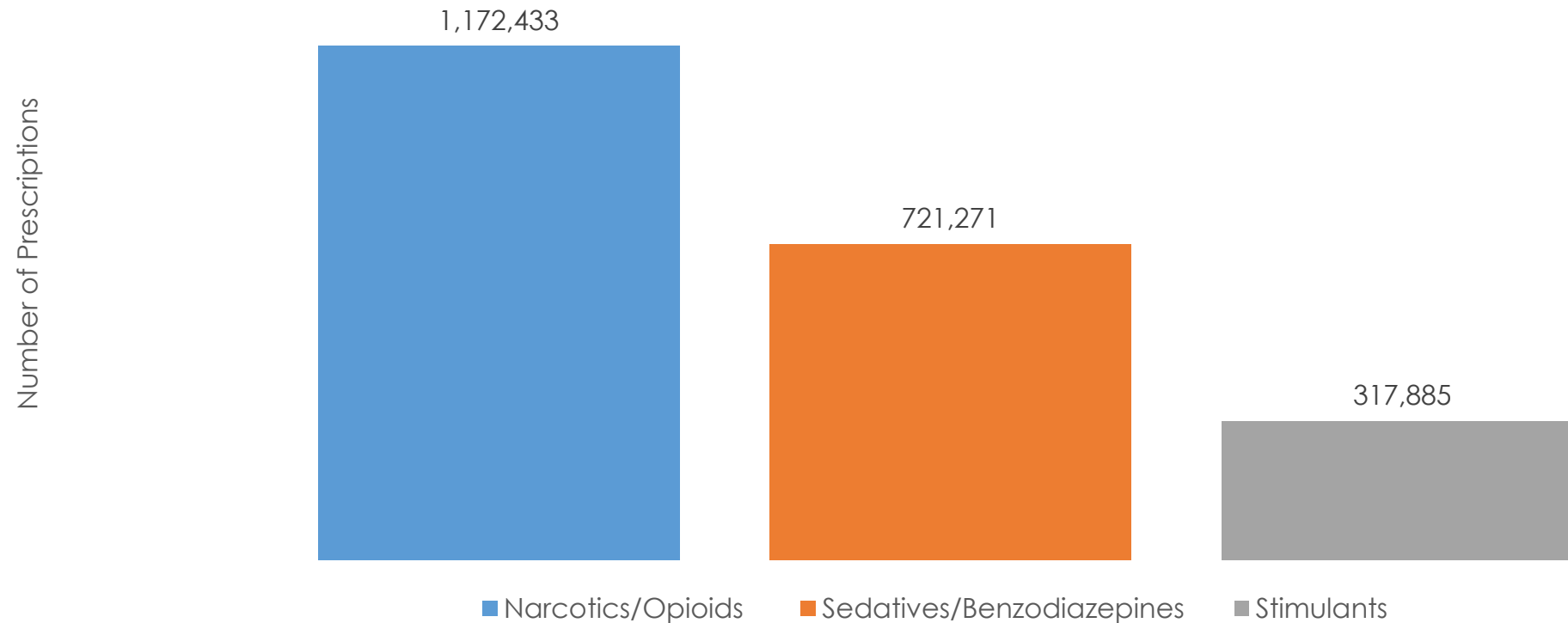
Drugs

OPIOD PRESCRIBING RATES PER 100 PERSONS

	2012	2013	2014	2015	2016
USA	81.3	78.1	75.6	70.6	66.5
WI	76.8	73.8	71.9	67.5	62.2
OC	42.6	41.3	43.5	39.6	36.5

■ OC ■ WI ■ USA

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Source: Centers for Disease Control; Quintiles; IMS Transactional Data Warehouse (TDW) 2006-2016
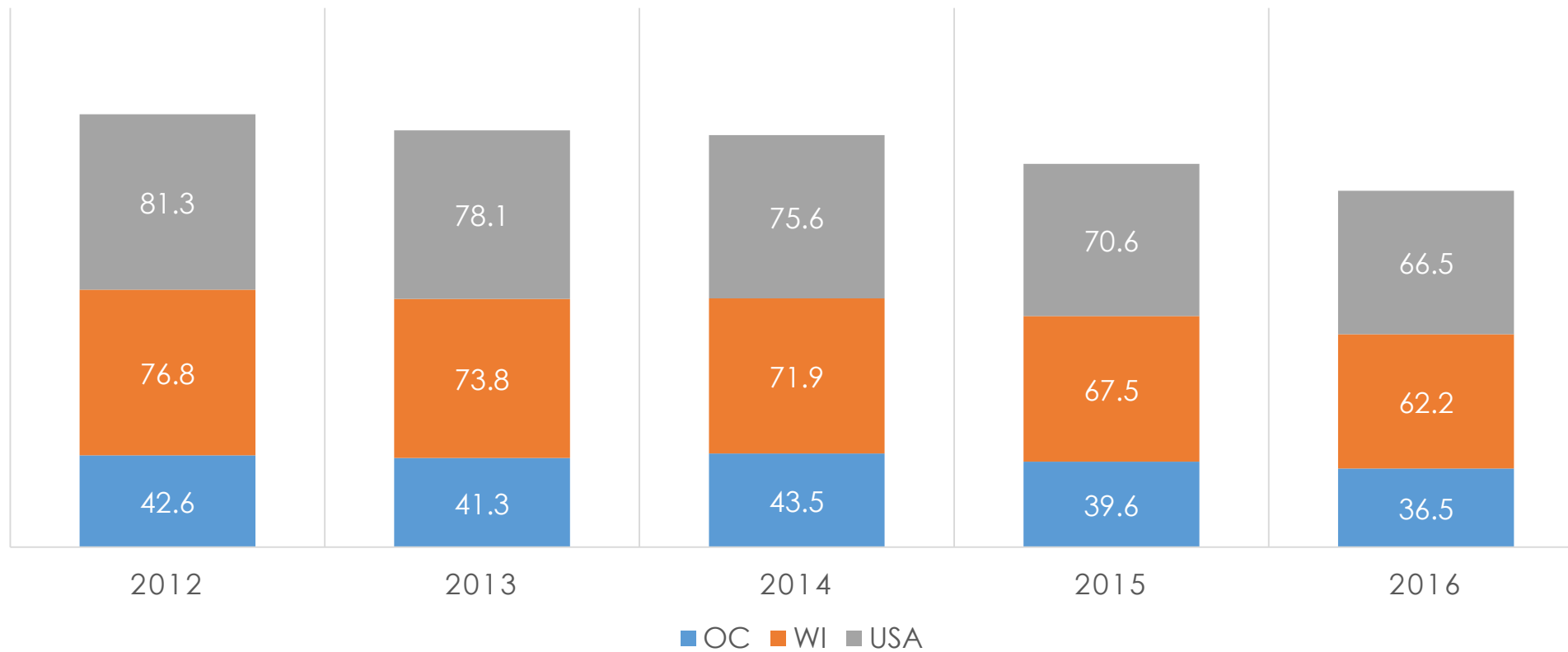
Drugs

Past Year Non-medical use of Pain Relivers, Wisconsin, 2012-2013

■ 12-17 yrs ■ 18-25 yrs ■ 26+

Source: Wisconsin DHS Publication on Opioids, 2015
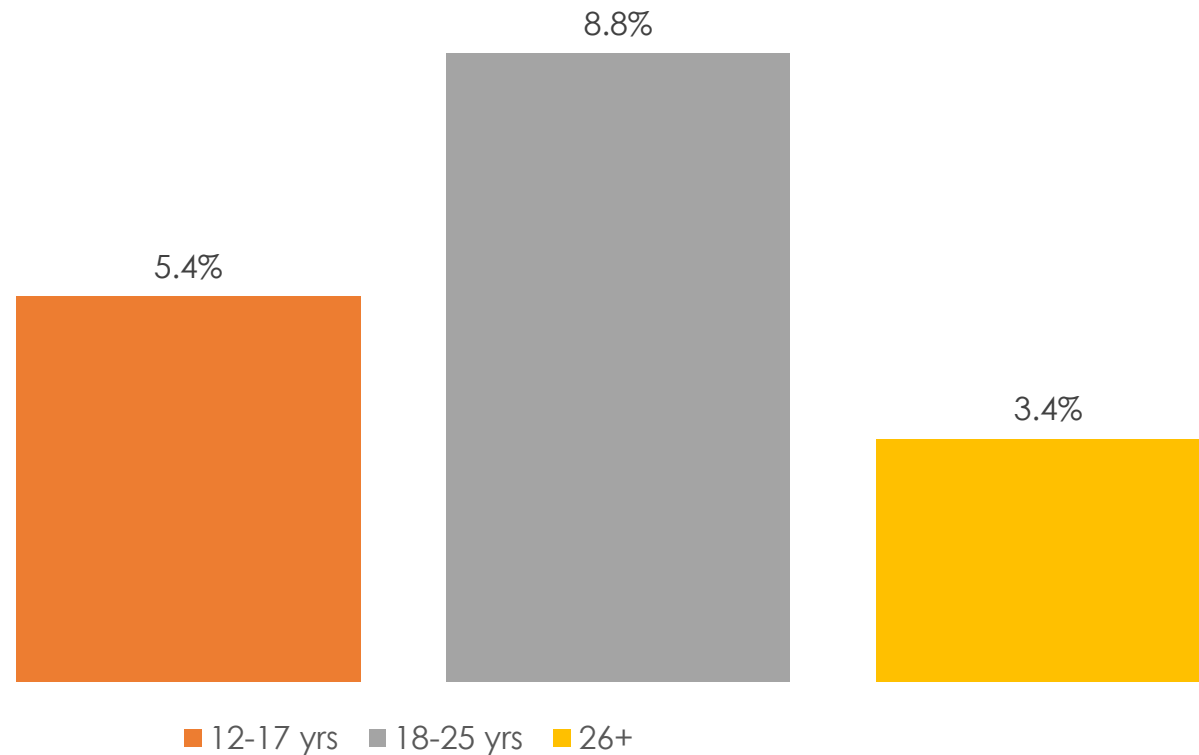
Effects of Drug Use

Diagnoses counted in this metric includes drug psychoses, drug dependence, drug related polyneuropathy, and accidental and intentional poisoning by drugs.

DRUG RELATED HOSPITALIZATION PER 100,000 POPULATION

267 — 269 — 268 — 261 (WI)

203 — 188 — 176 — 138 (OC)

2010-2011 2011-2012 2012-2013 2013-2014

- - OC   - - WI

Source: WI Epidemiological Profile on Alcohol and Other Drugs, 2014 & 2016

Effects of Drug Use

OPIOID RELATED HOSPITALIZATIONS PER 1000 POPULATION

Ages 12-25

All Ages

2008-2009   2009-2010   2010-2011   2011-2012   2012-2013   2013-2014

- - OC   - - WI

Source: WI Epidemiological Profile on Alcohol and Other Drugs, 2014 & 2016

96

Effects of Drug Use

Hospital encounters include inpatient hospitalizations and Emergency Room visits

CRUDE RATE OF HOSPITAL ENCOUNTERS DUE TO PRESCRIPTION OPIODS PER 100,000

Source: Wisconsin DHS Publication on Opioids, 2016
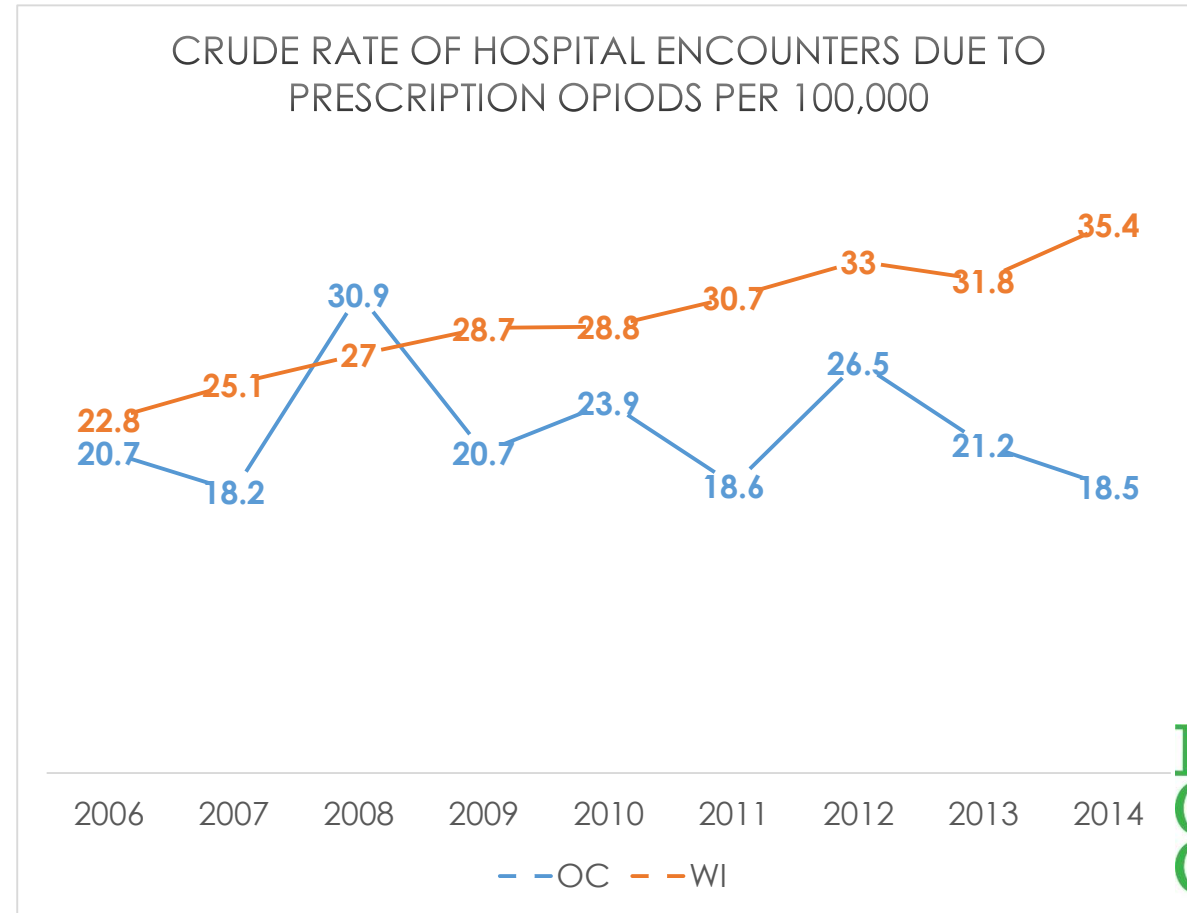
Effects of Drug Use

Heroin, Methadone, and Other Opioid-Related Deaths, Wisconsin, 2005-2014

Source: Wisconsin DHS Publication on Opioids, 2016
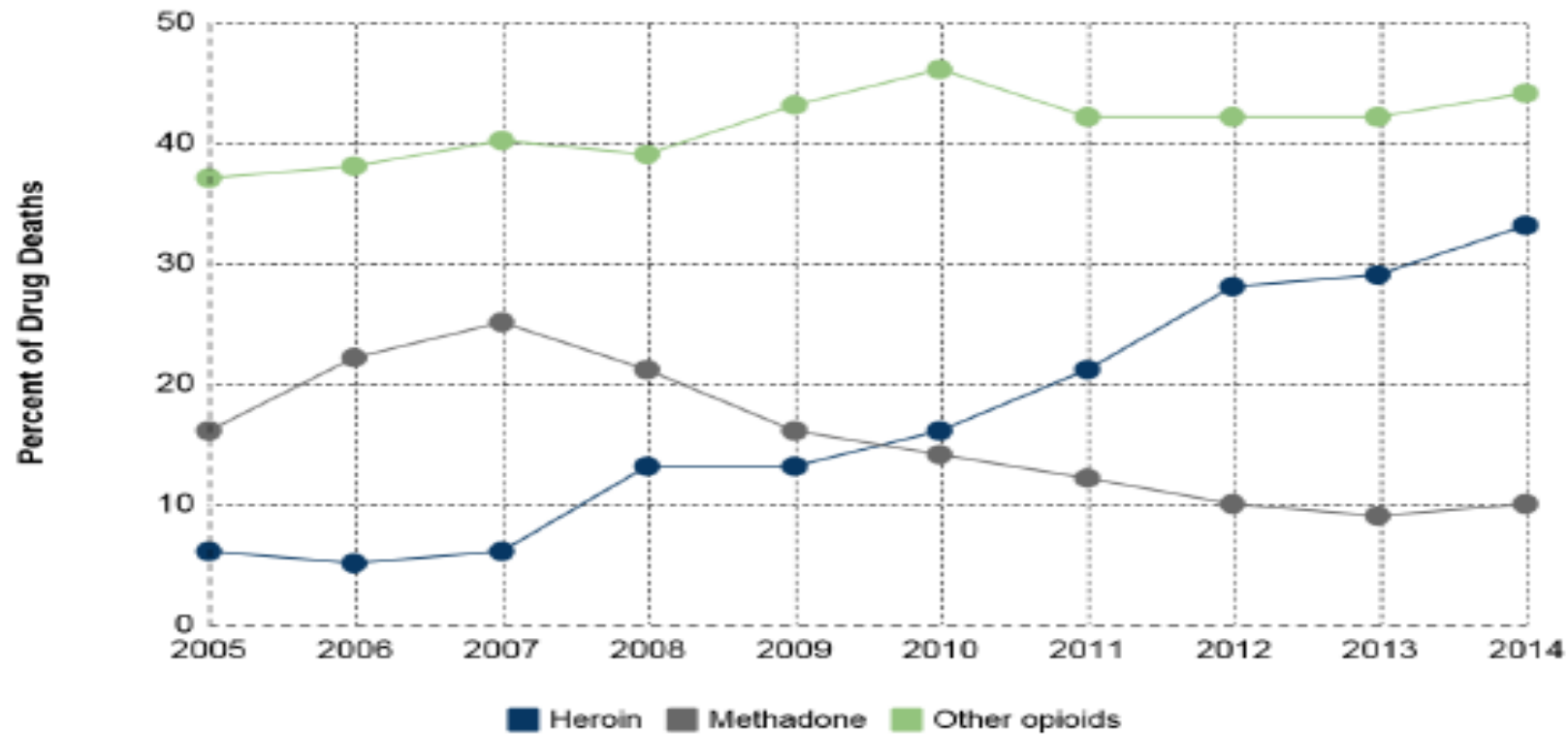
Effects of Drug Use

NUMBER OF DEATHS IN OCONTO COUNTY

Source: Wisconsin DHS Publication on Opioids, 2016
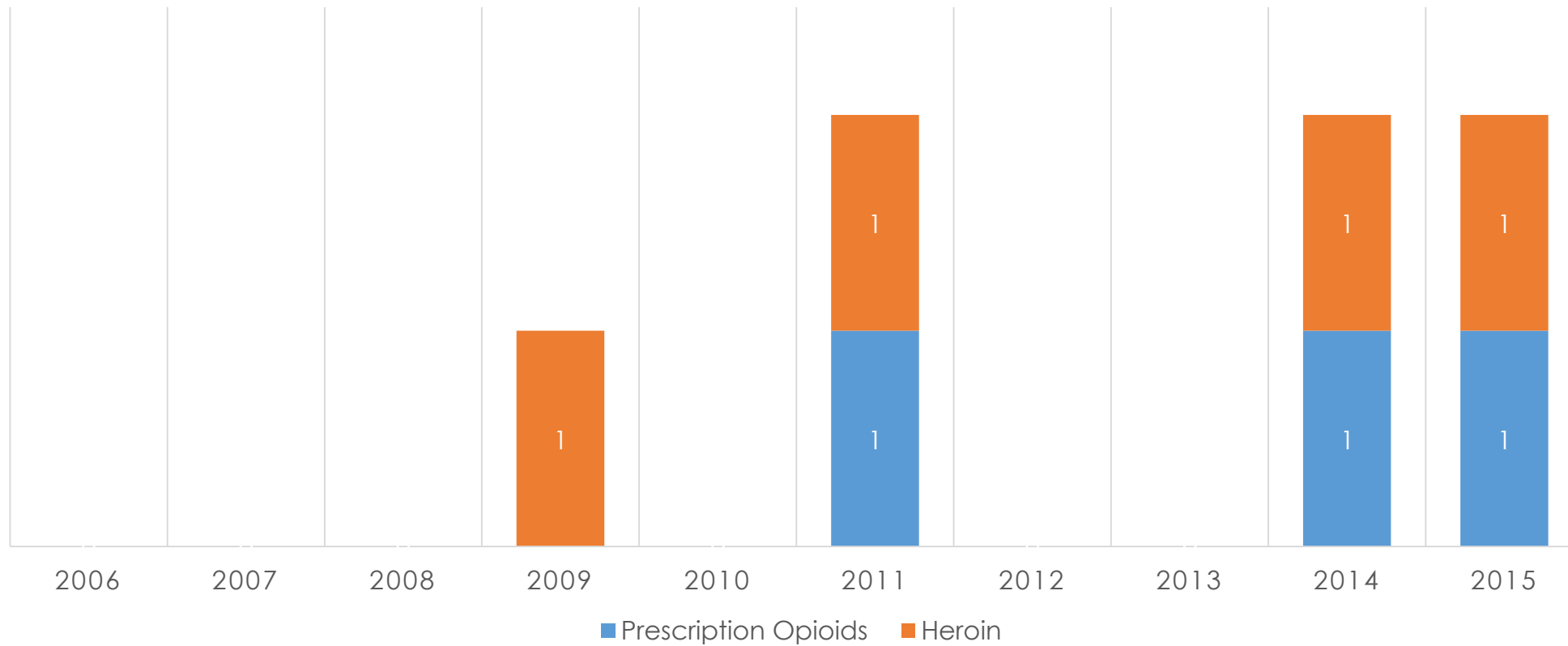
Effects of Drug Use

Maternal Substance Use Identified During Delivery Hospital Stay in Wisconsin 2009-2014

Source: Wisconsin DHS Publication on Opioids, 2016
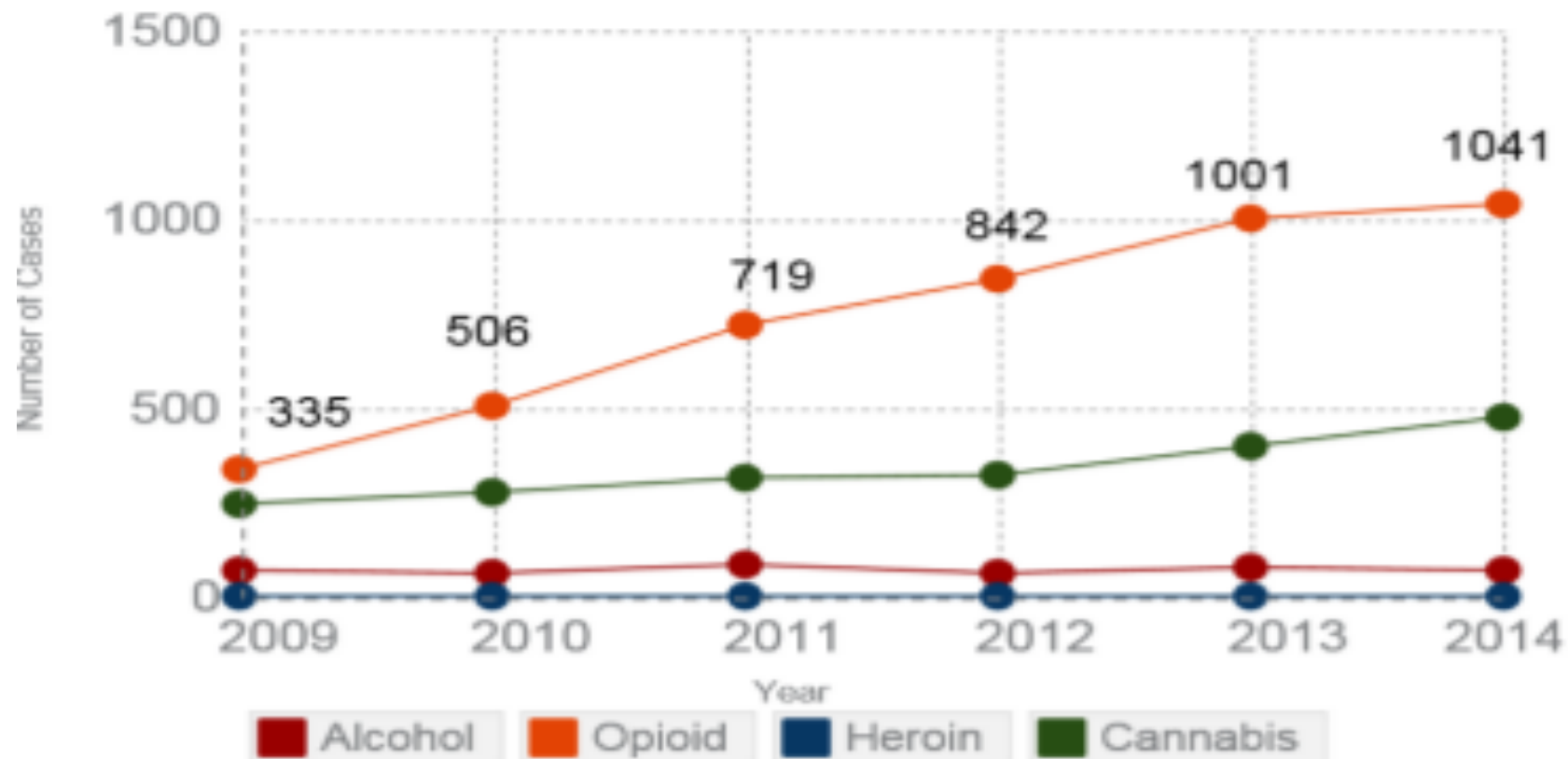
Effects of Drug Use

This metric shows the neonatal effects of Opioid use in pregnancy ranging from withdrawal symptoms to physiological and behavioral complications.

RATE OF MATERNAL OPIOID USE AND NEONATAL ABSTINENCE SYNDROME (NAS) PER 1000 LIVE BIRTHS (2009-2014)

- – –NAS, OC   – –NAS, WI   – –Maternal Opiod Use, WI

Source: Wisconsin DHS Publication on Opioids, 2016

Effects of Drug Use

Count of Suspensions and Expulsions from Public Schools

35
8
2011-2012   2013-2014
■ OC

Rate of drug related suspsensions and expulsions per 1000 students

7.9
1.9
3.8
3.2
OC   WI
■ 2011-2012   ■ 2013-2014

Source: WI Epidemiological Profile on Alcohol and Other Drugs, 2014 & 2016

Effects of Drug Use

DRUG LAW ARRESTS (ADULTS AND JUVENILE) PER 100, 000 POPULATION

491   495   474   490
447   478   454   439

223

138
                                      61
                                                29

2011   2012   2013   2014

- - OC   - - WI   - - US

Source: WI Epidemiological Profile on Alcohol and Other Drugs, 2014 & 2016

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Workgroup Current Activities

Oconto County Youth Risk Behavior Survey

- 752 Middle School Respondents
  - 932 High School Respondents
    - Participating School Districts:
      - Gillett
        - Lena
          - Oconto
            - Oconto Falls
              - Suring

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Community Conversations

22 groups Participated

- School Superintendents
  - Law Enforcement
- Government Groups
  - Civic Groups
  - Care Givers
- Medical Personnel
  - EMS

- 98 of Participants answered yes there is an alcohol and other drug abuse problem in Oconto County

3 Themes Identified by Workgroup for Action

- Education/Awareness
  - Wide range of understanding and awareness of the impact of misuse on County residents
  - Desire for more and earlier efforts to education
- Culture
  - Huge issue with may stakeholders
  - Multiple components
  - Desire to impact
- Resources
  - Lack of what, who and where Knowledge

Nutrition and Physical Activity

Percent of Population Experiencing Food Insecurity in the Past Year

	2013	2014	2015
OC	10.8	10.1	9.4
NER	11.2	10.0	9.3
WI	12.4	11.9	11
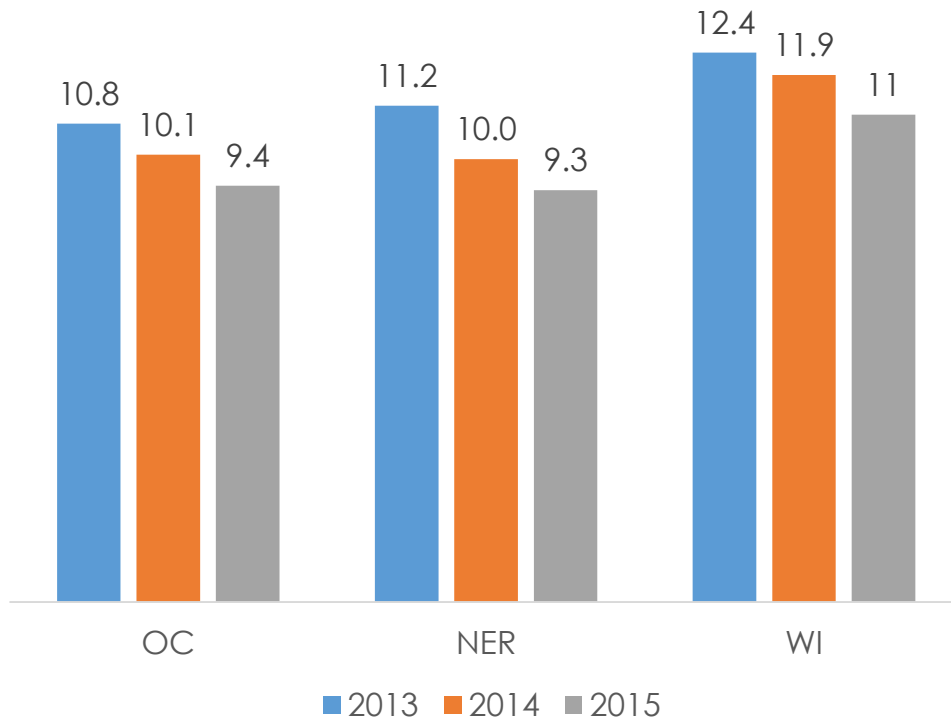
Percent of Children Experiencing Food Insecurity in the Past Year

	2013	2014	2015
OC	20.9	19.4	17.4
NER	20.2	18.1	16.7
WI	20.4	19.1	17

Source: Feeding America (http://map.feedingamerica.org/)

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108
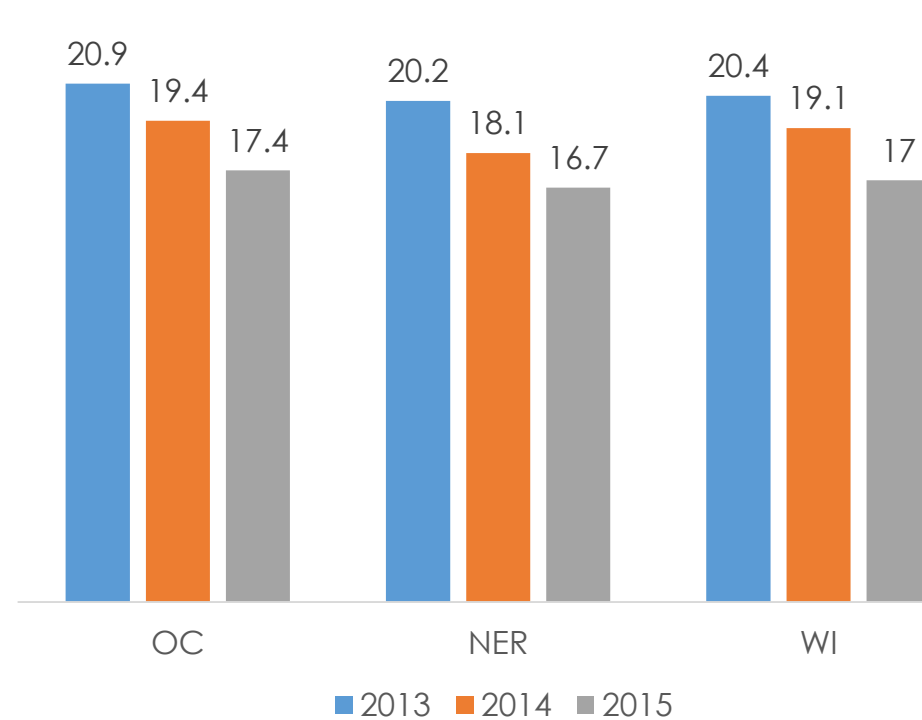
Nutrition and Physical Activity

This is a measure of access to healthy foods. These are the residents who are low income earners and live more than 10 miles (rural) or 1 mile (non-rural) from a grocery store

Percent who are low income and do not live close to a grocery store

4%

5%

■ OC ■ WI

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Source: County Health Ranking, 2017
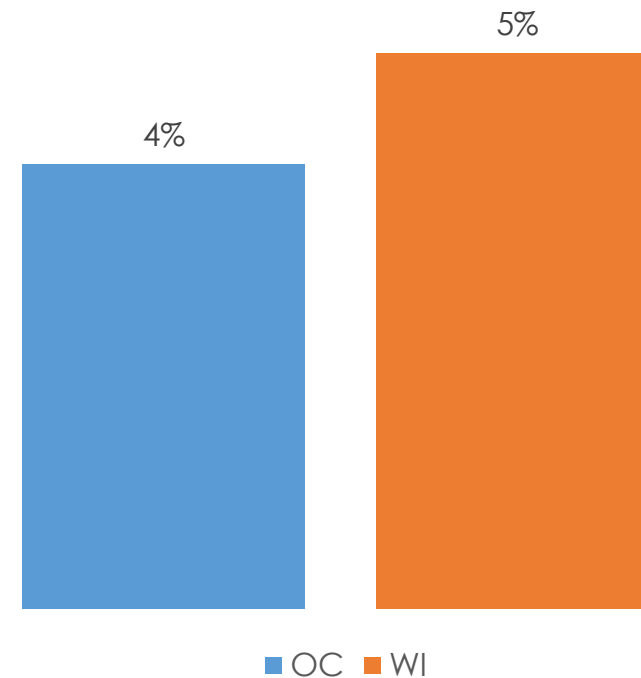
Nutrition and Physical Activity

Index is calculated using equal weighting of 2 indicators of food environment

***Limited access of healthy foods**: low income living more than 10 miles (rural) or 1 mile (non-rural) from a grocery store.*

***Food insecurity**: Percentage of population with poor access to a reliable food source in the past year*

Score index ranges from 0 (worst) to 10 (best)

Food Enviromental Index

OC: 8.4 — Benchmark 8.4

WI: 8

Benchmark

Source: County Health Ranking, 2017
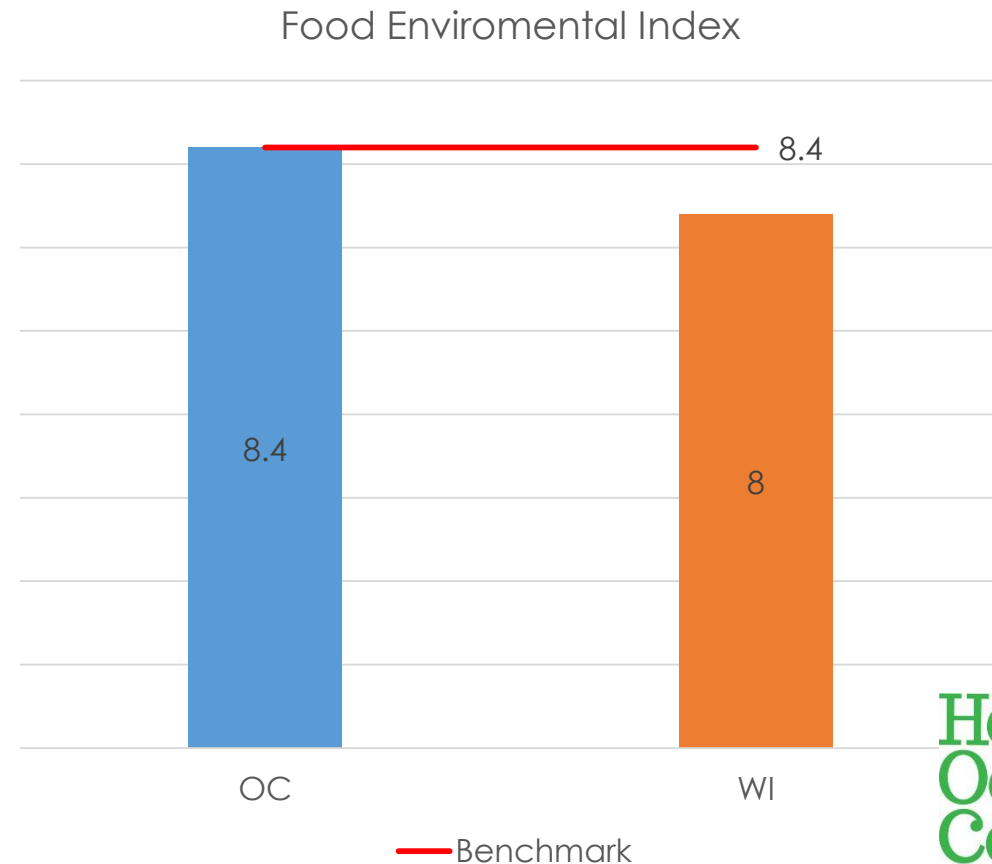
Nutrition and Physical Activity

The State of Obesity project reports that Wisconsin has the 19th highest obesity rate in the country
County and State data- BRFSS
National data - Gallup well-being telephone survey

PERCENT OF ADULTS WITH BMI > 30

	OC	WI	US
2013	30.0	29.8	27.1
2014	NA	31.2	27.7
2015	NA	30.7	28.0

■ 2013 ■ 2014 ■ 2015

Source: County Health Rankings, 2017; The State of Obesity; Gallup Healthways Well-being Index
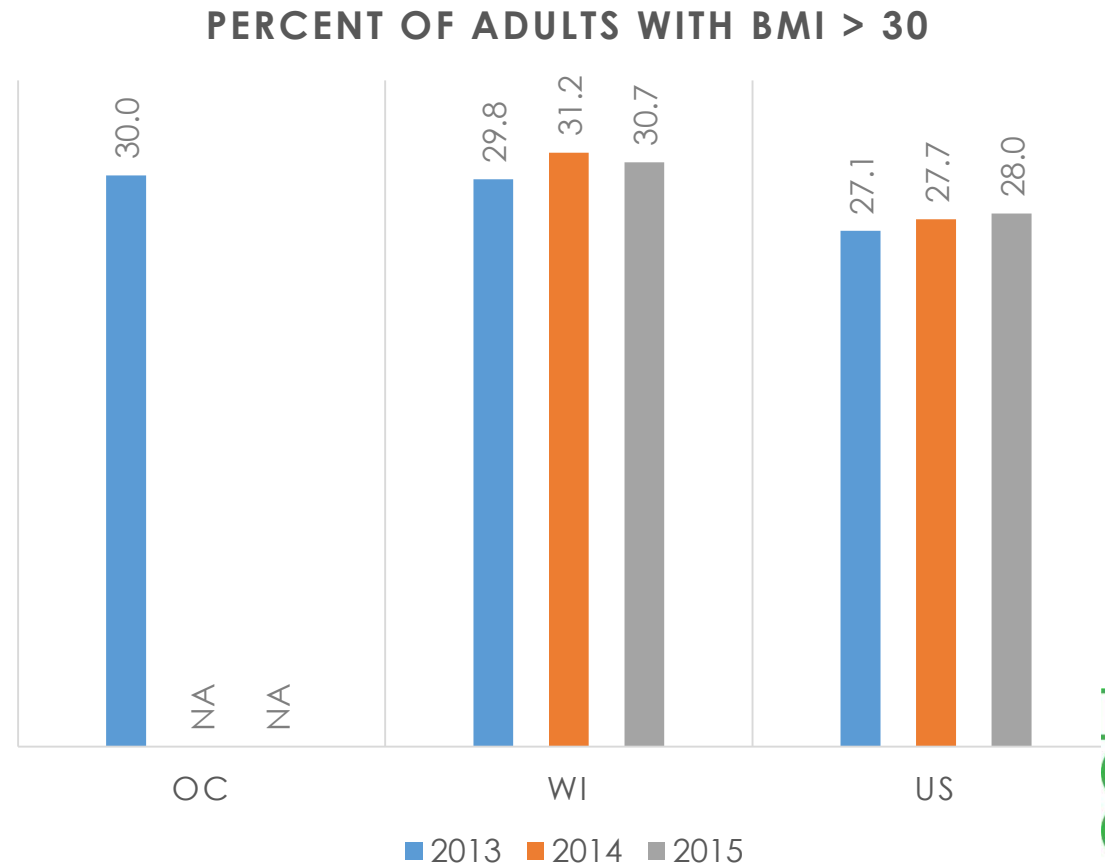
Nutrition and Physical Activity

There is a drop in obesity rates at the state and national level among children enrolled in the Supplemental Nutrition Program for Women, Infants and Children (WIC). On the other hand, the proportion of Obese WIC children increased in Oconto county compared with baseline.

Percent of Obese WIC Children 2-4 years

	OC	WI	US
2010	17.5	15.2	15.9
2014	19	14.7	14.5

■ 2010 ■ 2014

Source: The State of Obesity; CDC MMWR NOV, 2016; Kids Count Data Center
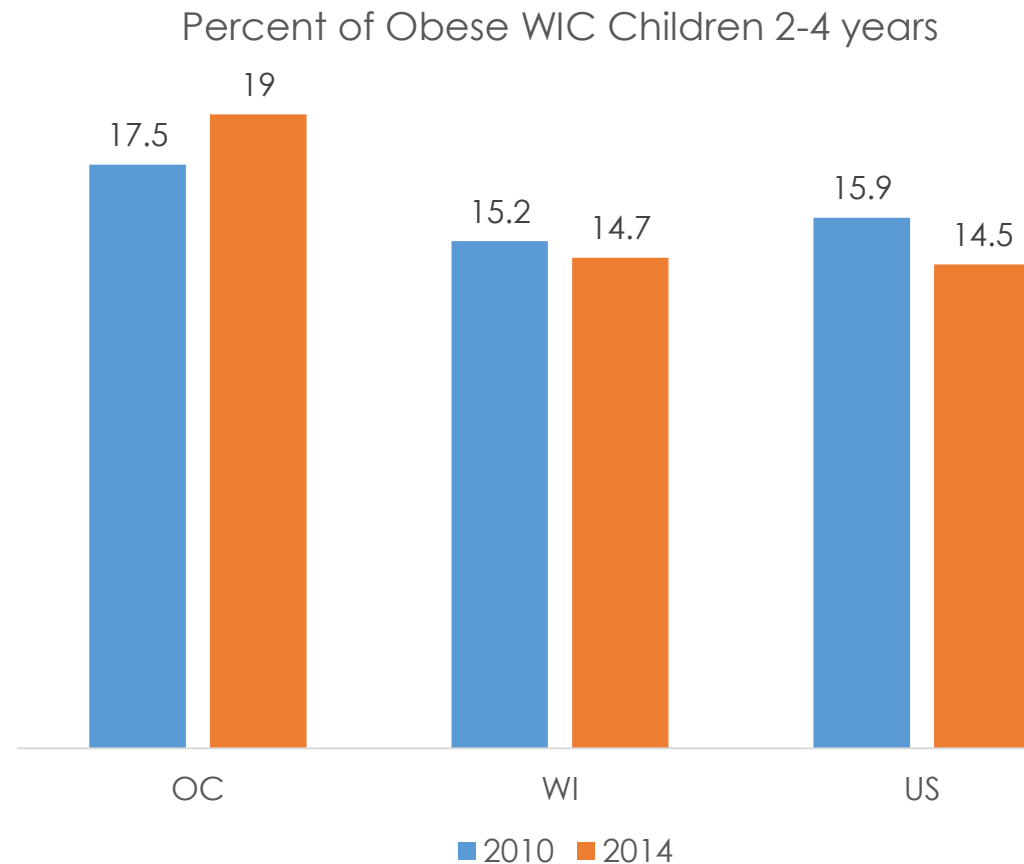
Nutrition and Physical Activity

Percent of Adults 20+ Reporting No leisure time Physical Activity

- OC: 25%
- WI: 20%
- US: 22%
- HP2020 Target (Age 18+): 32.6%

Legend: ■ OC ■ WI ■ US ■ HP2020 Target (Age 18+)
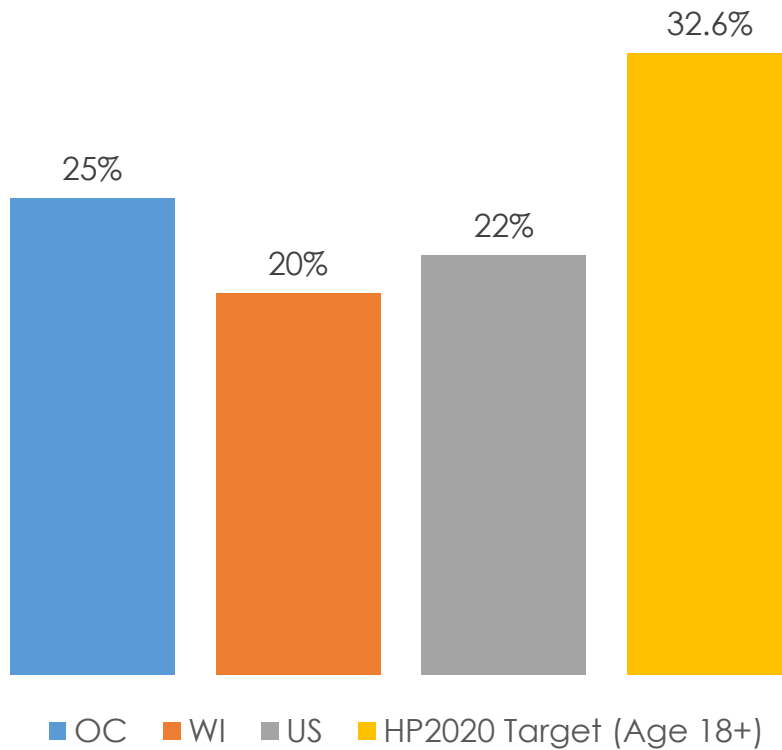
Percent of Population with Adequate Access to Excercise Opportunities

- OC: 49%
- WI: 81%
- US: 84%

Legend: ■ OC ■ WI ■ US

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Source: County Health Rankings, 2017
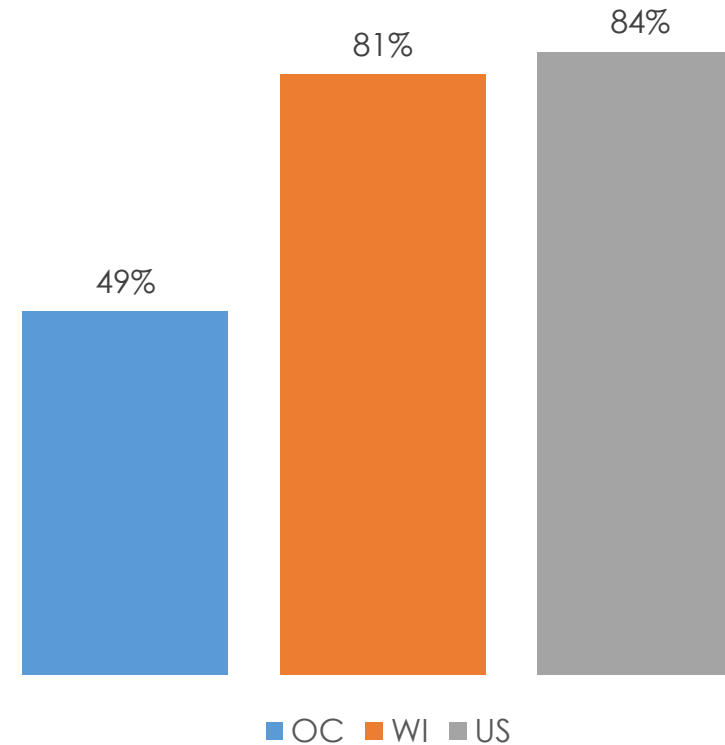
Nutrition and Physical Activity

Grocery Stores and Supermarkets
Rates per 100,00 population by year

Source: U.S. Census Bureau: County Business Patterns; CARES (2015)
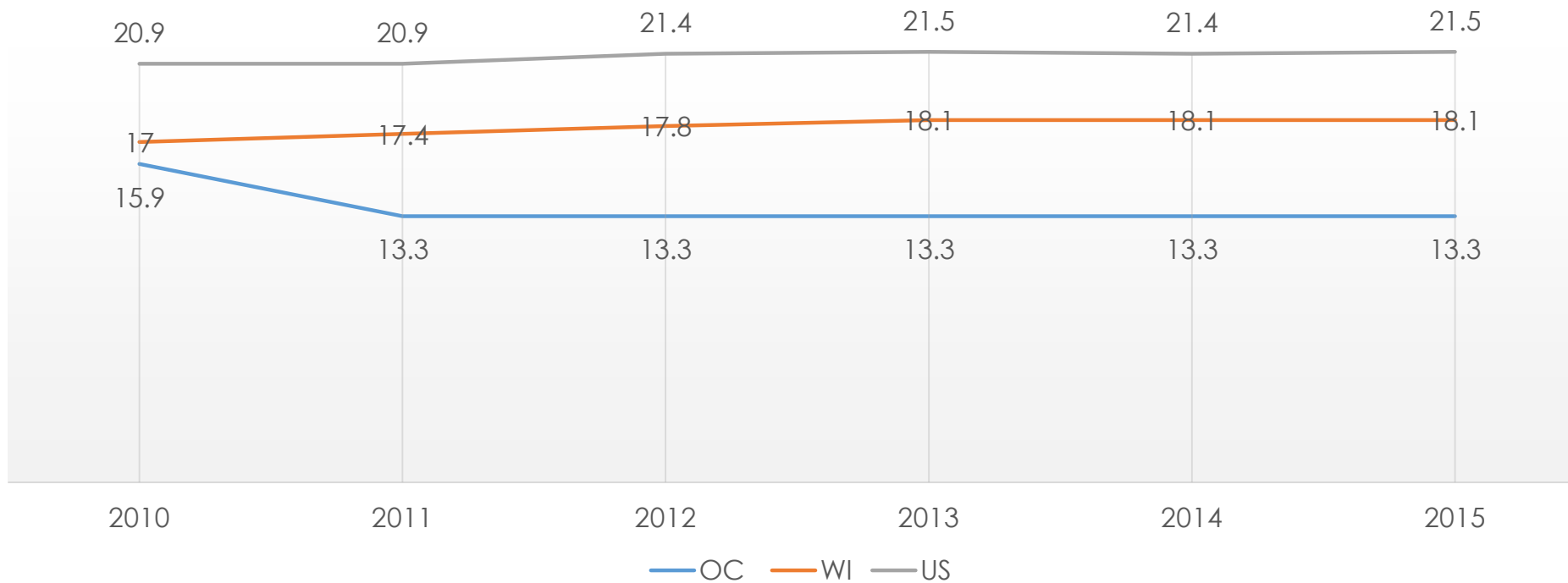
Nutrition and Physical Activity

Grocery Stores, Rate (Per 100,000 Population)

- Oconto County, WI (13.28)
- Wisconsin (18.09)
- United States (21.19)
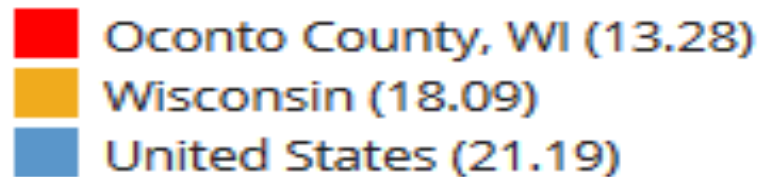
Fast Food Restaurants, Rate (Per 100,000 Population)

- Oconto County, WI (37.17)
- Wisconsin (62.95)
- United States (74.6)

Source: U.S. Census Bureau: County Business Patterns; CARES (2015)
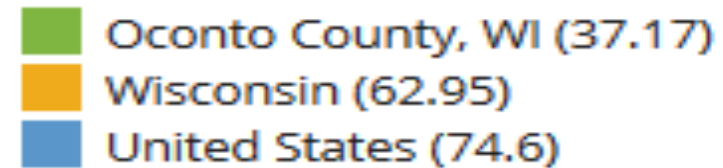
Nutrition and Physical Activity

Physical Activity & Nutrition Workgroup	
Kathy Henne, Facilitator	HSHS St. Clare Memorial Hospital
Brittany Warrichaiet	Oconto County Public Health
Alex Tyink	Feeding America
Beth Wagner	ADRC-Wolf River Region
Carrie Rupert	Bellin Health Oconto Hospital
Cheryl Detrick	NEW Cap
Connie Parkovich	Bellin Health Oconto Hospital
Scott Nelson	Newcap
David Konop	Community Volunteer
David Lally	HSHS St Clare Memorial Hospital
Debbie Konitzer	Oconto County Public Health
Erika Schindel	Suring School PT group
Angela Raleigh	Prevea Health
Hope Kersten	Oconto County Public Health-WIC
Janet Stodola	ADRC-Wolf River Region
Jill Chowlewa	UW-Extension
John Pinkart	UW-Extension
Kathy Reindl	Atrium of OF
Kim Votava	Atrium of OF
Nuala Nowicki	Prevea Leadwell/HSHS St. Clare
Sarah Ciano	Atrium of OF

PRIORITY AREA: Nutrition & Physical Activity

GOAL:
Oconto County's food and physical environment empowers residents to embrace healthy food choices and increase physical activity.

PERFORMANCE MEASURES
How We Will Know We are Making a Difference

Short Term Indicators	Source	Frequency
By December 30, 2018, 2 food pantries will increase the percent of healthy food options and reduce the amount of low-nutrient food without reducing the total amount of food donated.	Local tracking tool	
By December 31, 2016, 2 phases of the Oconto Falls Trail System will be constructed.	Local tracking tool	
By December, 2017, ½ of the Oconto Falls Trail System will be constructed.	Local tracking tool	
Long Term Indicators	Source	Frequency
Access to healthy food choices will increase. (measure of increase to be determined after baseline established.)	Local tracking tool?????	
The percent of obese residents will decrease by 1%.	County Health Rankings	
The percentage of adults 20 and older reporting no leisure activity will decrease by 1%.	County Health Rankings	

Nutrition and Physical Activity

- **OBJECTIVE #1:**
  - By December 31, 2018, the percent of healthy food donations which food pantries receive will increase (measure of increase to be determined after baseline established)
    - Community awareness and education plan
    - Promote "Plant a Seed" program

Nutrition and Physical Activity
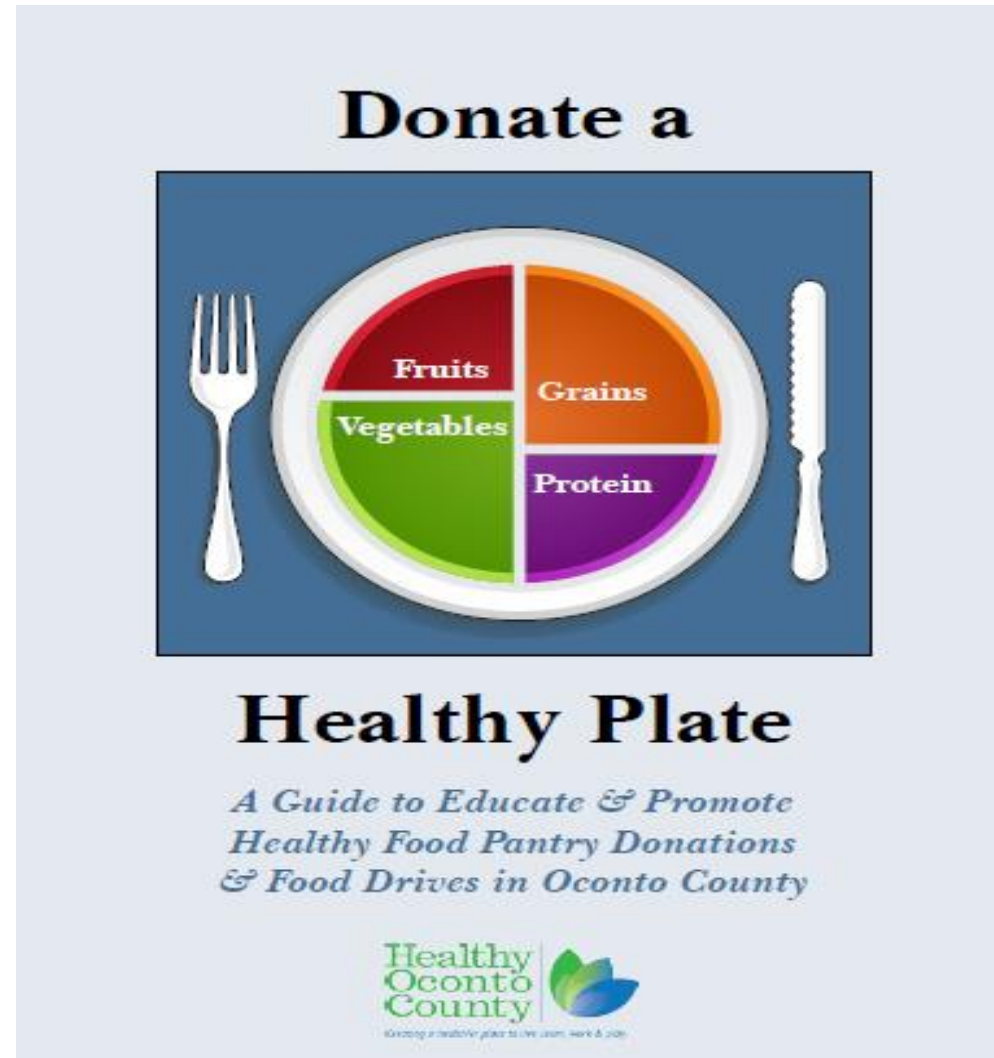
Nutrition and Physical Activity

Nutrition and Physical Activity

- **OBJECTIVE #2**
  - By December 31, 2018, 90% of health care clinics in Oconto County will implement a process to collect food donations for local food pantries.
   - Implement collection of donated food at health care clinics.

Donate a Healthy Plate

Ensure your food donations to a local food pantry contribute to a nutritional diet. Local food pantries have expressed a need for the following items.

Fruits
- Canned fruit, in 100% juice or water
- Unsweetened applesauce
- 100% fruit juice
- Dried fruit, no sugar added

Vegetables
- Canned vegetables, low or no sodium
- 100% vegetable juice
- Canned tomatoes

Other Items
- Tomato/Spaghetti sauce, low sodium
- Canned soups & broth, low sodium
- Vegetable or olive oil
- Spices
- Flour

Please do not donate
- Foods past the expiration date
- Homemade, canned items
- Open or used items
- Rusty or unlabeled cans
- Damaged cans

Grains
- Whole grain cereals with low sugar
- Oatmeal
- Barley
- Brown or wild rice
- Quinoa
- Whole wheat pasta
- Corn or whole wheat tortillas
- Whole grain crackers
- Whole grain granola bars

Protein
- Canned chicken, salmon and tuna, packed in water
- Canned beans, low sodium
- Dried beans or peas
- Peanut Butter
- Nuts and seeds, unsalted

Design and printing services donated by

HSHS St. Clare Memorial Hospital

Food can be donated to any of the following locations:

Bellin Health Oconto Falls Clinic 107 E. Highland, Oconto Falls	HSHS St. Clare Memorial Hospital Prevea Gillett Health Center 340 N. Green Bay Avenue, Gillett	HSHS St. Clare Memorial Hospital Prevea Oconto Falls Health Center 835 S. Main Street, Oconto Falls
Bellin Health Oconto Clinic 820 Arbutus, Oconto	HSHS St. Clare Memorial Hospital Prevea Lena Health Center 200 S. Rosera Street, Lena	Prevea Oconto Health Center 620 Smith Avenue, Oconto
Bellin Health Suring Clinic 307 Manor Drive, Suring	HSHS St. Clare Memorial Hospital Prevea Mountain Health Center 14953 Hwy 32/64, Mountain	HSHS St. Clare Memorial Hospital Prevea Suring Health Center 913 East Main Street, Suring

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Nutrition and Physical Activity

- **OBJECTIVE #3:**
  - By December 31, 2018, based upon alignment of current food pantry infrastructure to current community need, expand sites which offer food distribution.
    - Assess community need for food pantry access
    - Determine gaps in the food pantry infrastructure

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County

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Nutrition and Physical Activity

- **OBJECTIVE #4:**
  - By December 31, 2018, access to physical activity opportunities will be increased by the construction of a trail system for non-motorized forms of transportation.
    - Create awareness of need and plan for trail system
    - Based upon funding, construct trail system in phases

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Nutrition and Physical Activity

How can I help?

Donate funds to help support this important health and safety initiative. No amount is too small.

☐ $50

☐ $100

☐ $500

☐ $1,000

☐ $5,000

☐ Other _____

Name _____

Address _____

City _____

State _____ Zip Code _____

☐ Check enclosed, made payable to
Oconto Falls Area Chamber of Commerce

Mail to:
Oconto Falls Area Chamber of Commerce
P.O. Box 24, Oconto Falls, WI 54154

Visit *ocontofallschamber.com* to make a donation online.

Design and printing donated by
HSHS St. Clare Memorial Hospital

Oconto Falls
Trail System

Nutrition and Physical Activity

Nutrition and Physical Activity

Nutrition and Physical Activity

Interactive Group Activity:

Laura Cormier

Healthy Oconto County Steering Committee Member

Bellin Health Oconto Hospital

Interactive Group Activity:

Objective:

Gather feedback on potential strategies within the Alcohol and Other Drug Misuse and Nutrition and Physical activity health priorities to be included in the *2018-2020 Healthy Oconto County Community Health Improvement Plan (CHIP)*

Interactive Group Activity:

- Each table has one (1) facilitator/note taker
- As a table, **identify additional strategies for consideration** (30 minutes)
- Group report out (15 minutes)
- Voting (15 minutes)

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County

Creating a healthier place to live, learn, work & play.

Results

- ----------

- ----------

- -----------

- -----------

- Workgroup Report out

Wrap-Up & Next Steps

Debra Konitzer

Healthy Oconto County Steering Committee Member

Oconto County Public Health

Wrap-Up & Next Steps

- Next Steps
  - Healthy Oconto County Steering Committee will evaluate strategies and determine which strategies to incorporate into the plan based upon:
    - Data
    - Group and individual feedback received at the December 6th Community Health Assessment
    - Community/public feedback
  - Community Health Improvement Plan (CHIP) roll out

Online Survey

- Please watch for follow-up survey
  - Feedback from event
    - What went well
    - What can be improved upon next time
  - Action Team involvement/interest
  - Questions about data

Healthy Oconto County

Creating a healthier place to live, learn, work & play.

Thank you

- Event Organization
  - Brenda Rehberg, Bellin Health
- Media Release
  - Claudia Bartz, Community Member
- Event Support
  - David Konop, Community Member
- Data Compilation and Presentation Creation
  - Ifeanyi Mbah, Bellin Health

Questions?

Healthy Oconto County | 2018

Creating a healthier place to live, learn, work & play.

**Oconto County
2014 -18
Community Health Improvement Plan**

Health Priorities:

**Alcohol and Other Drugs**

Nutrition and Physical Activity

Mental Health

An Invitation to the Residents of Oconto County

Oconto County is already a great place to live, learn, work and play. How can we improve on that? By understanding how personal choices impact our health and working together to make it a *healthier* place for us to live, learn, work and play.

This plan is a collaborative effort of many county individuals representing public health, education, health care, law enforcement, business, county programs, and city government. You will see the many data sources that were reviewed and analyzed to help identify the three health priorities for the county:

Alcohol and Other Drugs

Nutrition and Physical Activity

Mental Health

A Healthy Oconto County will require us to be engaged and working in partnership as individuals and communities on these priorities to mobilize people, employers and stakeholders to improve the health of our county residents. Inside you will see the goal, measures of success and key objectives for each health priority. We expect this plan to be used as groundwork for many efforts within the county.

Thank you for taking the time to read this plan. We invite you to become involved in the action necessary to positively impact the health of Oconto County – please join us by completing the Plan Endorsement on pgs 12-13.

Regards,

|		
Debra Konitzer, RN BSN	Laura Cormier	Nancy Williquette
Oconto County Health Officer	Bellin Health	Community Memorial Hospital
/Public Health Manager	Oconto Hospital	

County Partners Acknowledgement and Thanks

The Health Department acknowledges and extends sincere appreciation to the following community partners for their time and many contributions to the Oconto County 2014-18 Community Health Improvement Plan (*denotes plan leads):

Ali Carlson, Oconto County Dept of H&HS

Amanda Anderson, NEWCAP

April Konitzer, NWTC

Becky Wolf, Community Member

Bernie Faith, Oconto Police Department

Carol Jean Luebeck, Oconto County Public Health

Carol Kopp, Oconto County Sheriff's Department

David Lally, Community Memorial Hospital

David Honish, Lena Public Schools

Debra Konitzer, Oconto County Public Health*

Dr. Keith Elkins, Public Health Medical Advisor

Elaine Kluth, Bellin Health Oconto Hospital

Hope Kersten, Oconto County WIC Program

Irene Drake, City of Gillett

Jan Stranz, Community Memorial Hospital

Jane Schneider, Oconto Falls School District

Joey Sieber, Oconto Gospel Church

John Pinkart, UW-Extension

Julie Yonker, Gillett Ambulance Service

Kim Wolfmeyer, Aging & Disability Resource Center

Laura Cormier, Bellin Health Oconto Hospital*

Lisa Sbonik, Bellin Health Oconto Hospital

Lynn Stymiest, Oconto County Public Health

Mary Lemmen, County Board, H&HS Board

Nancy Williquette, Community Memorial Hospital*

Rhonda Stuart, Northern Health Centers

Rose O'Hara, TriCity Area United Way

Sara Applebee, Oconto County Public Health

Purpose of Healthy Oconto County 2018

The purpose of *Healthy Oconto County 2018* is to mobilize people, organizations and stakeholders in our county to collaboratively address issues that impact health. The ultimate goal of a Community Health Improvement Plan (CHIP) is to measurably improve the health of Oconto County residents. Our plan asks for action that will lead to positive change in three health focus areas:

Alcohol and Other Drugs

Nutrition and Physical Activity

Mental Health

Developing the Plan

A coalition of agencies and individuals in Oconto County worked together over nine months to assess community health data, strengths, resources, and opportunities for improvement. Data was reviewed from the State Health Plan, Healthy Wisconsin 2020, www.dhs.wisconsin.gov/hw2020, coalition agencies, UW Population Health County Health Rankings www.countyhealthrankings.org, and an Oconto County Community Health Improvement Plan Public Opinion Survey. The results of the Public Opinion Survey can be found on our website at www.healthyocontocounty.info.

The data and health rankings demonstrate that Oconto County has challenges in the three chosen health focus areas. The individuals who participated in putting the plan together are anxious to bring it out to our communities and have others join them in the health focus area of their interest. There are many resources available for each of the three focus areas to help us identify actions to help meet our goals which are listed at the end of this document.

What Determines a Healthy County?

2013 Health Outcomes - Wisconsin

Oconto

Rank 1-18 Rank 19-36 Rank 37-54 Rank 55-72
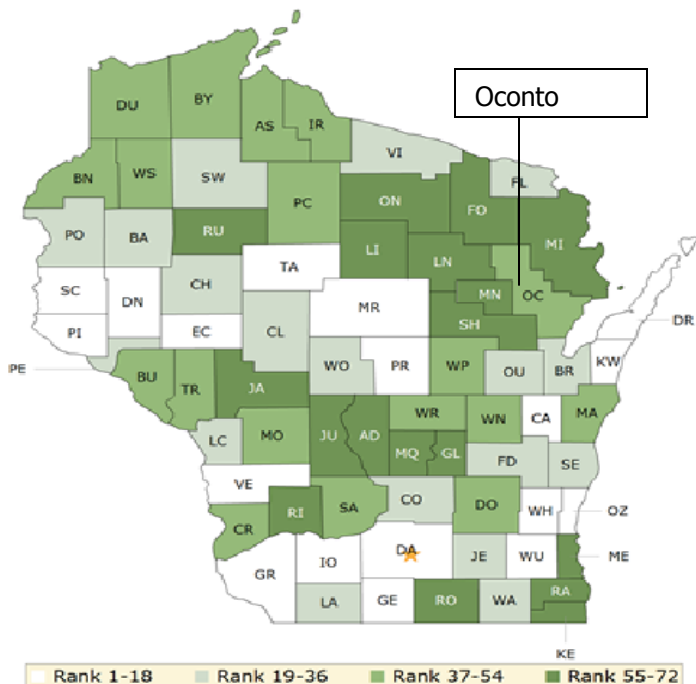
Each year UW Population Health Institute releases health rankings for each county in Wisconsin in partnership with the Robert Wood Johnson Foundation. The rankings give us information on what the current health status of our county is. The health of the residents of the county is dependent on different factors. The factors such as education, jobs, income, social support, access to health care and environment play an important role in how healthy people are and how long we live. The rankings and review of the data helped us identify policies and programs needed to improve health.

The model to the right shows the structure of the rankings. Visit www.countyhealthrankings.org to learn more.

Oconto County Rankings (of 72 Wisconsin Counties):
  - ➢ **Health Outcomes = 25 (how healthy we are)**
  - ➢ **Health Factors = 55 (how healthy we can be)**
  - ➢ **Health Behaviors = 45 (how healthy we live)**
  - ➢ **Clinical Care = 45 (how good our health care is)**
  - ➢ **Social & Economic Factors = 42 (how strong our social fabric is)**
  - ➢ **Physical Environment = 68 (how healthy our environment is)**
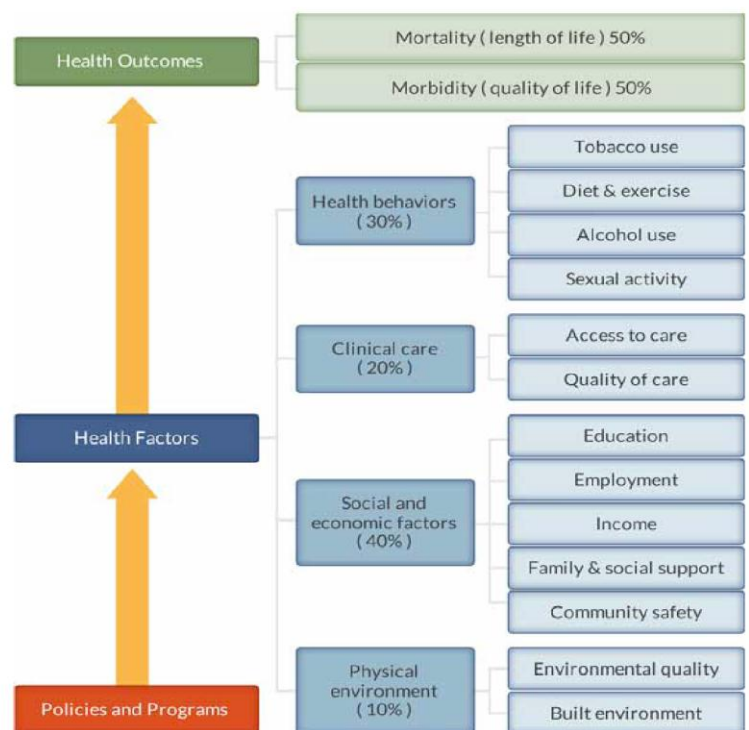
County Health Rankings model ©2012 UWPHI

What is the Definition of Alcohol and Other Drug Use:

Alcohol and other drug use means any use of a substance, or uses of substances, that result in negative consequences. This includes a broad array of mood-altering substances that include, but are not limited to, alcohol, prescription substances, and illegal mood-altering substances. Negative consequences or unhealthy uses include, but are not limited to, operating a motor vehicle while intoxicated, drinking while pregnant, alcohol dependence, fetal alcohol spectrum disorder, alcohol-related hospitalizations, heavy drinking, alcohol-related liver cirrhosis deaths, motor vehicle injury or death, liquor law violations, other alcohol-attributable deaths, underage drinking, non-medical or illicit drug use, drug-related deaths, drug-related hospitalizations, arrests for drug law violations, and alcohol- or drug-related crimes (e.g., property crimes, violent crimes).

Why are improving Alcohol and Other Drugs use important to include in Healthy Oconto County 2018?

Alcohol and other drug use in Oconto County results in:

➢ 29% of Oconto County adults report excessive drinking in the last 30 days compared to 24% for the state.

➢ 1 out of 4 Oconto County high school students used a prescription drug without a doctor's prescription.

Alcohol and Other Drugs

GOAL: Reduce alcohol and drug abuse and related social and public health effects on Oconto County Residents.

Our Strategies	Our Measures of Success
➢ Develop and implement two evidence based strategies in order to reduce AODA use.	➢ Excessive drinking among adults will be reduced from 29% to 26%. ➢ The number of high school students who drink alcohol before the age of 13 will be reduced from 26% to 24%
➢ Coordinate efforts between prescription drug abuse prevention partners.	
➢ Increase integration of prescription drug abuse prevention efforts between medical and behavioral care providers.	➢ The number of high school students who used a prescription drug without a doctor's prescription will be reduced form 25% to 24%.

Who are the Key Stakeholders?
➢ Oconto County AODA Coalition   ➢ Oconto County Medical and Behavioral Care Providers   ➢ Oconto County Residents

What is the Definition of Nutrition and Physical Activity:

Adequate, appropriate and safe food and nutrition means the regular and sufficient consumption of nutritious foods across the life span, including breastfeeding, to support normal growth and development of children and promote physical, emotional, and social well-being for all people.

Physical activity means any bodily activity that enhances or maintains physical fitness and overall health. Public health strategies focus on environmental and policy changes (e.g., active community environment initiatives, urban planning, safety enforcement, trails and sidewalks) to reach large sections of the population.

Why is improving Nutrition and Physical Activity important to include in Healthy Oconto County 2018?

Lack of Good Nutrition and Physical Activity in Oconto County results in:

➢ 28% of Oconto County adults are considered obese

➢ 1 out of 4 Oconto County adults report NO physical activity

➢ Oconto County Adults describe their physical health as POOR almost 4 out of 30 days.

➢ More than 1 in 5 Oconto County residents have no place to purchase food within 10 miles of home.

![Healthy Oconto County 2018 — Creating a healthier place to live, learn, work & play.]

Health Plan Priority Focus Area

Nutrition and Physical Activity

GOAL: Increase the percentage of Oconto County residents who eat healthy and are physically active.

Our Strategies	Our Measures of Success
➢ Implement an environmental policy that supports increased physical activity for all ages.	➢ The amount of physically unhealthy days reported by Oconto County residents in the last 30 days will be reduced to 3.0 or fewer. ➢ The number of residents who are physically active will increase by 2%.
➢ Develop and maintain an ongoing community-wide education campaign on healthy eating and active living.	➢ The number of adults who are at a healthy weight for their height will increase by 2%.
➢ Implement strategies that improve access to healthy, safe, and affordable foods for all residents.	➢ Access to healthy nutrition choices will increase by 3% of residents.
➢ Increase workplace wellness initiatives among Oconto County employers.	

Who are the Key Stakeholders?

➢ Oconto County Public Health
➢ Oconto County Schools, Employers and Food Retailers and Distributors
➢ Oconto County Health Care Providers
➢ Oconto County Residents

What is the Definition of Mental Health:

Mental health is a state of well-being in which the individual realizes his or her own abilities, can cope with the normal stresses of life, can work productively and fruitfully and is able to make a contribution to his or her community (World Health Organization, 2001). *Mental health* is the foundation for well-being and effective functioning for an individual and community. It is more than the absence of mental illness; it is a resource vital to individuals, families and societies (British Columbia, Ministry of Health, 2007).

Why is improving Mental Health important to include in Healthy Oconto County 2018?

Lack of Mental Health in Oconto County results in:

➢ 25 Oconto County residents took their own life from 2009-2011

➢ Nearly 1 out of 4 Oconto County adults state they do not get the emotional support they need

➢ The rate of deaths from suicide has increased every year from 2002-2011 and is higher than the state of Wisconsin rate.

Health Plan Priority Focus Area

Mental Health

GOAL: Improve the mental health of Oconto County residents by increasing access to mental health resources, providing education and decreasing the stigma of mental health issues.

Our Strategies	Our Measures of Success
➢ Create an Oconto County Mental Health Coalition and implement strategic and action plans.	➢ The percentage of adults who report that they don't get adequate emotional support will decrease from 24% to 21%.
➢ Increase coordination between school districts related to mental health issues.	➢ The number of high school students who have at least one adult at their school who they can talk to if they have a problem will increase from 74% to 78%. ➢ The number of middle school students who have at least one adult at their school who they can talk to if they have a problem will increase from 72% to 76%
➢ Increase mental health education and awareness of resources available to Oconto County residents.	➢ The sharp increase in the suicide death rate since 2002 will level off and begin to decline.

Who Are The Key Stakeholders?
➢ Oconto County Mental Health Coalition   ➢ Oconto County School Districts   ➢ Oconto County Medical and Behavioral Care Providers   ➢ Oconto County Residents

This is an ongoing process. Three steering teams will lead broad community coalitions to develop and implement strategies to impact the three health focus areas. The steering teams will report to the Healthy Oconto County 2018 Committee which will meet regularly to monitor progress and address challenges. Here's what you can do to get started:

Review this plan with your family, friends and employer

Support and actively engage with coalition initiatives

Complete the Healthy Oconto County 2018 Plan Endorsement on the next page

Review the Healthy Oconto County 2018 Resources and identify an activity or strategy and begin to improve your health today

To get involved or for more information visit www.healthyocontocounty.info

Our Mission is to assess and impact the priority health needs by facilitating community collaboration.

Our Vision is a community with accessible resources which support healthy lifestyle choices where people live, learn, work and play.

Creating a healthier place to live, learn, work & play.

**Healthy
Oconto
County | 2018**

Creating a healthier place to live, learn, work & play.

Purpose: By endorsing *Healthy Oconto County 2018,* you become part of a network (system) of partners working together to achieve the mission, goals and vision of *Healthy Oconto County 2018.* Network participants will be part of a two-way street: receive periodic updates and communications, and contribute ideas and report needs and progress. *Healthy Oconto County 2018* endorsements are non-binding.

What Does the Endorsement Mean?: As an **individual** it means you are agreeing to support the three health focus areas and are willing to start actions and activities to improve your personal health and/or you are willing to participate on one of the groups or coalitions that are identifying actions and activities for all residents of Oconto County. As an **organization** it means you are willing to support the three health focus areas by putting the link on your website and informing your workforce of the three health focus areas. It could also mean that you are willing to support and act by putting forward resources within your organization for improvement of your workforce and/or put forward resources and time from your organization to engage in the groups or coalitions working on actions and activities for all residents of Oconto County.

Instructions: To endorse the *Healthy Oconto County 2018,* you have two options: (1) save this form as a WORD document, fill it out and email it as an attachment to ochs@co.oconto.wi.us , or (2) print out this form, fill it out and fax it to the Oconto County Health Department at (920) 834-6889.

Note: Your endorsement may be publicly acknowledged on the *Healthy Oconto County 2018* website (www.healthyocontocounty.info) and in plan-related materials.

1. I am endorsing the *Healthy Oconto County 2018 as* an:
· Individual
· Organization

2. Your full name or name of organization / group:

3. What type of sector(s) best describes your organization?
· Advocacy organization
· Agriculture and food
· American Indian Tribe
· Business, labor, finance, commerce
· Built environment
· Civic organization, civic society
· Community-based organization
· Education
· Elected official (state or local)

· Energy and climate
· Faith community
· Health care organizations and hospitals
· Health department (state or local)
· Housing / building safety
· Human services
· Justice and law enforcement
· Laboratory
· Natural resources
· Professional society and organization
· Transportation
· Urban / rural planning, land use
· Veterinary
· Waste management
· Other Specify: _____

4. I will provide a link on my organization's website to the *Healthy Oconto County 2018* website (located at www.healthyocontocounty.info)
· Yes
· No

5. Contact Information (Please Print)
Contact Name: _____
Credentials (if applicable): _____
Organization (if applicable):
_____
Position/Title (if applicable):
_____
Mailing Address:
_____
Telephone No. _____ Fax No. _____
E-mail:
_____
Website:
_____

6. Which focus areas will you and your organization work on to help accomplish the goals of *Healthy Oconto County 2018*?

· **Alcohol & Other Drug Use**
· **Nutrition & Physical Activity**
· **Mental Health**

Healthy Oconto County 2018 References

Data Sources:
1.   2010-2013 County Health Rankings
2.   2012 Alcohol License Overview for WI
3.   WI DHS Public Health Profiles
4.   2006-2011 Arrests in WI, Office of Justice Assistance
5.   2001-2011 Youth Risk Behavior Surveillance System
6.   2011 Burden of Diabetes in WI Report
7.   WI Interactive Statistics on Health
8.   WEDSS
9.   WI DHS (pertussis, lymes disease, % of children with lead poisoning)
10. 2010 US Census Bureau
11. 2010 Burden of Tobacco in WI
12. 2010 Oconto County WIC Report (for % of pregnant smokers)
13. 2010 Youth Risk Behavior Survey
14. WI Mental Health and Substance Abuse Needs Assessment
15. DHS/DPH/WI Primary Care Office
16. 2010 CDC Pediatric Nutrition Surveillance Report
17. UWEX Food Security Report
18. County Oral Health Wisconsin Surveillance System
19. WI Forward Health Portal
20. 2013 Oconto County Community Health Improvement Plan and Process Public Opinion Survey

Healthy Oconto County 2018 Resources

1. Wisconsin What Works for Health
   *   for Diet & Exercise:
       http://www.whatworksforhealth.wisc.edu/factor.php?id=12
   *   for AODA: http://www.whatworksforhealth.wisc.edu/factor.php?id=13
   *   for Mental Health: http://www.whatworksforhealth.wisc.edu/factor.php?id=6
2. Wisconsin Nutrition, Physical and Obesity Health Plan:
   http://www.dhs.wisconsin.gov/physical-activity/2013StatePlan/index.htm
3. Healthiest Wisconsin 2020: www.dhs.wisconsin.gov/hw2020
4. Healthy People 2020 (National): www.healthypeople.gov/2020
5. CDC Nutrition: www.cdc.gov/nutrition/ Can also search mental health, alcohol, physical activity and person who use drugs
6. Healthy Oconto County 2018: www.healthyocontocounty.info
7. What works to promote health: www.thecommunityguide.org