

Walworth County Community Health Assessment



Walworth County Community Health Assessment

2022

Walworth County Division of Public Health February 2, 2022

NOTE: This platform is best viewed on a desktop. If viewing on a mobile device or tablet, rotate to landscape orientation for the best experience.

Executive Summary

Overview of Process

Every 3-5 years, we take a step back and ask our community what the most important health issues and needs are for Walworth County. We don't do this alone and involve many other groups, organizations, and agencies in the assessment. Partners across the community **listen**, **learn**, and **identify** ways that we all can connect to improve health.

Goals of the Community Health Assessment & Improvement Planning Process:

- 1. **Identify** social & environmental policies and systems that impact health in our community
- 2. **Analyze** health data to identify priorities for health in our community
- 3. **Assess** how well entities in the community work together to create community wellness
- 4. **Create** a plan led by the community to improve health & wellness for all

Health Equity and Social Determinants of Health

The 2022 Walworth County Community Health Assessment is broken down into categories based on the social determinants of health. Social determinants of health are the nonmedical factors that influence a person's overall health.

Each of these categories address health inequities and are important for

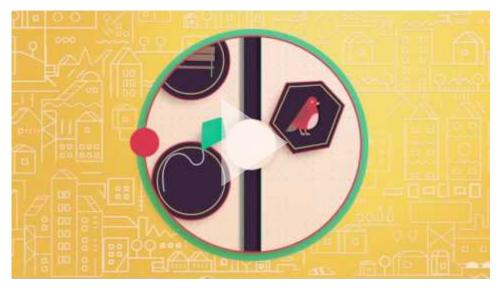




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Social Determinants of Health

addressing a community's health. 'Health equity' means that **everyone** has a fair and just opportunity to attain their highest level of health. Achieving health equity in a community requires the removal of obstacles to health such as poverty, discrimination, and their consequences. Health inequities are reflected in differences in length of life; quality of life; rates of disease, disability, and death; severity of disease; and access to treatment (CDC) Learn more about how your zip code can mean more than your genetic code in the video below.



A Tale of Two Zip Codes



About Walworth County

Located in southeast Wisconsin, Walworth County is a rural community within driving distance of three major cities: Milwaukee, Madison, and Chicago. The county is 577 square miles, 22 of which are water. While much has changed since we last conducted our Community Health Assessment in 2016, the top qualities of living in Walworth

County have not. Respondents to our 2021 Community Health Survey noted the small, rural atmosphere and beautiful landscape as the best parts of living here.¹

Major industries within the county include tourism, agriculture, and manufacturing.

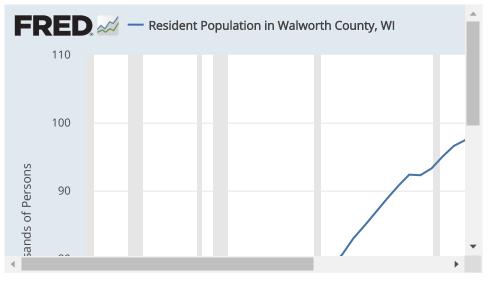
Community Demographics

Total Population:

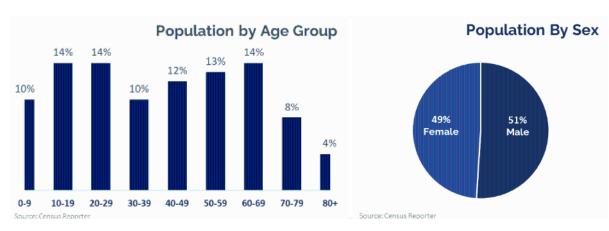
106,478 (2020)²

TRACE Population by Census Tract

Walworth County is the **14th** most populous county in Wisconsin. The total population (2020) in Walworth County makes up 1.8% of the total Wisconsin state population.⁴ Walworth County's population has grown significantly over time.



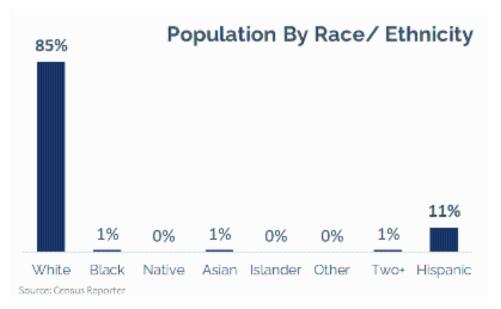
Population Over Time, Walworth County⁵



Age & Sex

Source: Census Reporter⁶

Race & Ethnicity



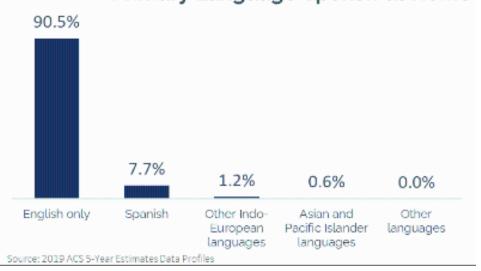
Source: Census Reporter⁶

Hispanic All County S Wisconsin	-	•	County,	
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Total Hispanic or Latino Population: 12,550. US Census Bureau⁷

Language

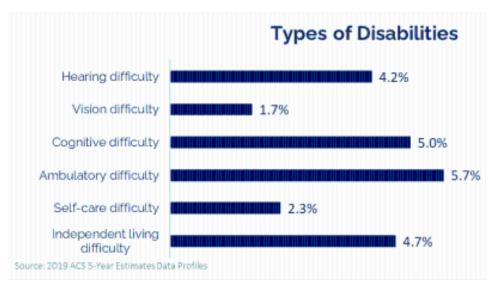
Primary Language Spoken at Home



US Census Bureau⁷

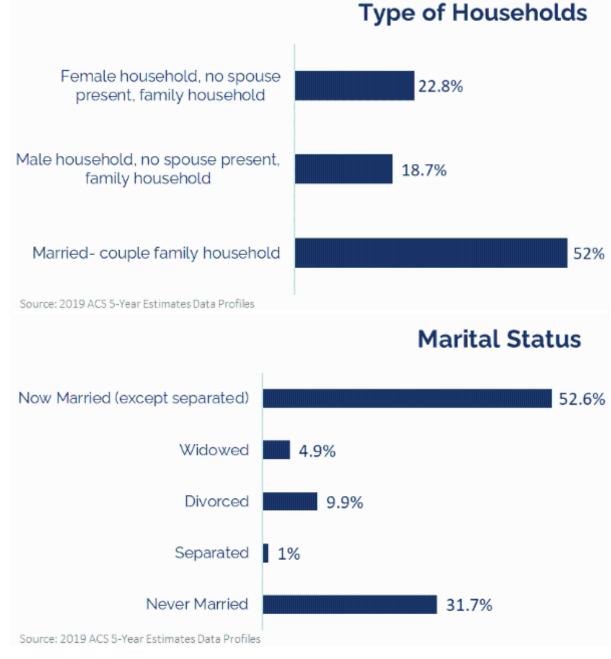
Disability

13.3% of residents have a disability in Walworth County, compared to 11.8% in Wisconsin.⁷



US Census Bureau⁷

Household Characteristics



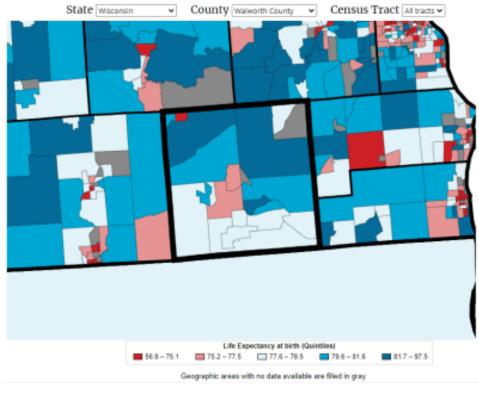
US Census Bureau⁷

Health & Health Outcomes

How are disease and premature deaths affecting our community?

Life expectancy varies by location even within Walworth County. Walworth County's overall life expectancy is **79.4 years**, but this is not the same for all census tracts within the following areas ⁸:

- Delavan: 77.4 years
- Elkhorn: 76.5 years
- Whitewater: 73.2 years



Source: CDC⁸

Learn more: Life Expectancy

Top 10 Causes of Death, 2016-2020, Walworth County



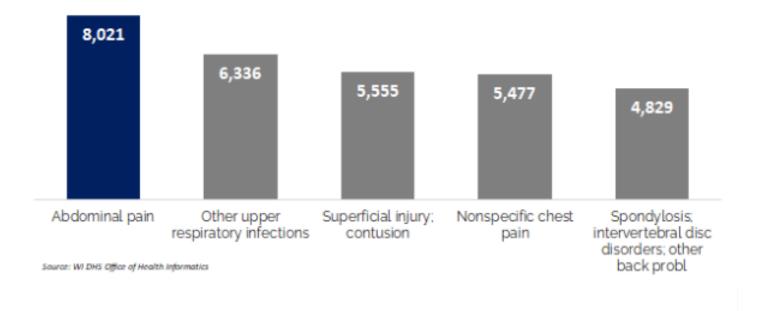
Top Causes of Death

The top three causes of death in Walworth County in 2020 were malignant neoplasms (cancer/cancerous tumors), heart diseases, and 'other' causes.⁹

NOTE: COVID-19 deaths are associated with 'Other causes', causing this rate to be abnormally high due to the pandemic.

Learn More: Causes of Death

Top Reasons for Hospitalization Walworth County, 2016-2020



Top Causes of Hospitalizations

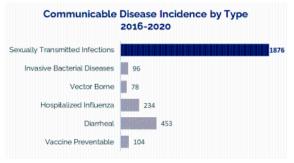
The top cause for hospitalization in Walworth County from 2016-2020 was abdominal pain at over 8,000 hospitalizations.¹⁰ Other hospitalization causes include respiratory infections, injuries, chest pain, and back problems.

Chronic Conditions

Chronic conditions are health outcomes that occur over time and typically last for at least one year or more. These conditions typically require consistent medical attention to manage the condition. Walworth County and the state have similar rates and prevalence of most chronic conditions. However, Walworth County has significantly higher **heart disease** prevalence and **heart attack** death rates compared to the state average. Walworth County Community Health Assessment

Rate	Walworth County	Wisconsin
Diabetes Prevalence ¹¹	9%	10%
Heart Disease Prevalence 12	6.80%	3.80%
Heart Attack Death Rate (2017-2019) ¹²	64.6 per 100,000	54.5 per 100,000
Asthma Rate (2019) ¹⁴	10%	9%
HIV Prevalence (2018) ¹¹	37 per 100,000	129 per 100,000
Obesity Rate (2017) 13	34%	32%
Physical Inactivity Adults 18+ (2019) ¹⁴	22.60%	21.40%
Adults Reporting Fair or Poor Health ¹¹	15%	15%

Learn more: Chronic Disease



Source: Wisconsin Electronic Disease Surveillance System (WEDSS)¹⁵

Communicable Disease:

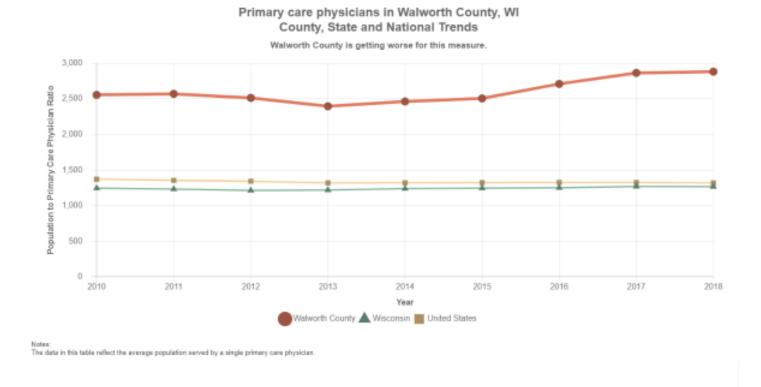
From 2016 to 2020, sexually transmitted infections (STI's) including chlamydia and gonorrhea were the most common communicable disease in Walworth County with **almost 2,000 total cases**.

How does healthcare access

and quality affect health in our community?

Walworth County is currently listed as a Health Care Shortage Area by the Health Resources and Services Administration (HRSA) for Primary Care, Dental Health, and Mental Health.¹⁶ However, these designations for Walworth County are currently proposed for withdrawal. Respondents to the Community Health Survey & participants in focus groups mentioned healthcare access, particularly for mental health services, as an issue in our community.^{23,24}

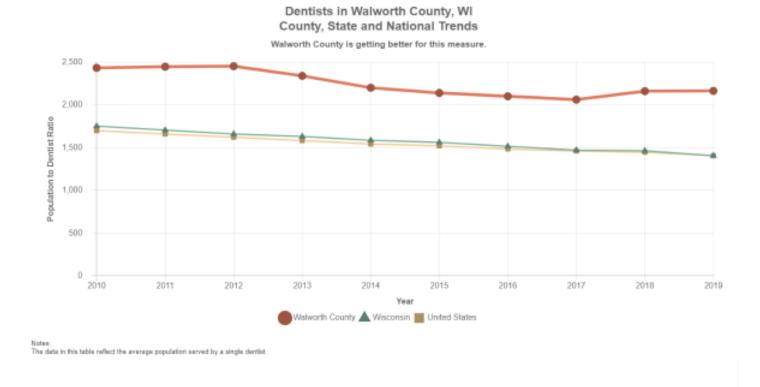
Despite these gaps, 85% of residents have a primary care physician.¹² 76% of residents 18 years and older receive an annual check-up.¹⁴



Primary Care Physicians

Walworth County physicians serve a significantly higher proportion of individuals than the rest of the state or nation, with a ratio of 2,880 patients per 1 primary care physician.¹¹

Source: County Health Rankings & Roadmaps



Dentists

Again, Walworth County dentists on average serve a significantly greater proportion of patients than the state average,

Walworth County has a ratio 2,160 patients per one dentist, compared to Wisconsin's ratio of 1,410 patients per one dentist.¹¹

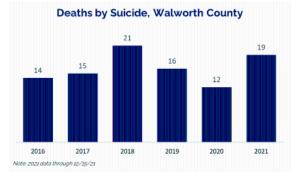
Learn more: Access to Care

How does mental health affect our community?

Communities prosper when the mental health needs of community members are met. Unaddressed mental health problems can have a negative influence on homelessness, poverty, employment, safety, and the local economy. They may impact the productivity of local businesses, increase health care costs, impede the ability of children and youth to succeed in school, and lead to family and community disruption.

On average, Walworth County and WI residents report the same frequency of 'Poor Mental Health Days': 4.0 days per month.¹¹

According to our healthcare partners, **24%** of Walworth County adults reported having a mental health condition in the



Walworth County suicide rates from 2015-2019 were 15 per 100,000 individuals which is comparable to the

state average.¹⁷ The majority of Walworth County community members who die by suicide are white middle aged males as a result of a gunshot wound. *Source: Walworth County Medical Examiner's Office*¹²

past 3 years (Examples include anxiety, bipolar disorder, depression).¹⁸

Learn more: Mental Health

How does substance use affect health in our community?

Alcohol, drug, and tobacco use can have significant impacts on both physical and mental health.

Adult Smoking: 19% (*WI: 17%*)¹¹ Binge Drinking (adults 18+): 29% (*WI: 27%*)¹⁹ Opioid Death Rate: 16.9 per 100,000 (*WI: 16.5 per 100,000*)²⁰

Learn more: Substance Use

How are mothers & infants' health affected in our community?

Improving women's health includes treating their health problems, but it also requires changing the conditions of their lives so they can gain more power over their own health. When this happens, everyone—the woman, her family and community —benefits. A healthy woman has a chance to fulfill all of her potential. Plus, she will have healthier babies, be better able to care for her family, and can contribute more to her community.

	Walworth County	Wisconsin
Infant Mortality Rate	5.0 per 1,000 live births	6.1 per 1,000 live births
Percent Low Birth Weight	6.3% of live births	7.6% of live births
Breastfeeding Initiation	87.7%	81%

Infant Mortality Rate (2016-2020)²¹. Percent Low Birth Weight (2016-2020)²¹. Breastfeeding Initiation²².

Having a low weight at birth can cause serious health problems for some babies. A baby who is very small at birth may have trouble eating, gaining weight and fighting off infections. Some may have long-term health problems.

Learn more: Maternal/Child Health

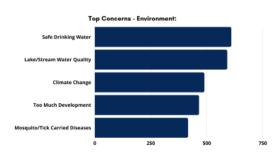
How does insurance coverage affect health?

Walworth County has a higher percentage of residents uninsured (6.56%) than the rest of the state (5.71%).²⁵ The percentage of uninsured residents has decreased since 2014. Source: Data USA: Wisconsin²⁵

Learn more: Health Insurance

Neighborhood & Environment

Walworth County has a unique, rural environment. The large tourism industry in Walworth County is mostly due to the fact that the county is filled with beautiful lakes, parks for recreation, and space for the community to enjoy the outdoors. The environment was highlighted as very important to the community members during the Community Health Survey.²³



Results from the Community Health Survey -Environment.²³ To the right, you can see the top concerns regarding the environment in Walworth County. Safe drinking water, lake and stream water quality, and climate change were identified as the top three concerns.

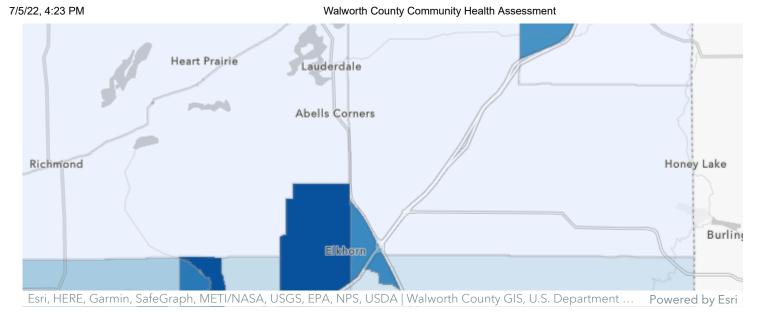
Environment is more than just the ground we walk on but it also includes things such as the air we breath, the food we eat, and the streets we drive on; environment covers many different aspects of health.

How does housing affect health?

Housing is a human right and connected directly to our health and well-being. Learn more about how housing influences health by <u>clicking this link</u>.

Housing was identified as a top 3 issue in the Community Health Survey.²³ Focus group and key informant participants noted a lack of affordable housing in Walworth County.²⁴

"There is not enough affordable housing, especially for families. I have seen many people posting on Facebook that they cannot find a place to live in Walworth County. Either because it's pricey or there just isn't anything." - Community Health Survey respondent



Subsidized Housing Availability

Housing availability, affordability, and accessibility were prominent concerns from community members and stakeholders throughout the Community Health Assessment. The dark areas on this map show census tracts with more subsidized housing units available.

Source: HUD Office of Policy Development and Research²⁶

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Excessive Housing Costs

Cost burden is when when a household spends more than 30% of their income on housing expenses such as rent or mortgage payments. 42% of renters in Walworth County are cost burdened. 22% of owners in Walworth County are cost burdened.²⁷

Elkhorn & Whitewater have the highest percentages of renters who experience cost burden.²⁸

	Walworth County	Wisconsin
Total housing units	52,946	2,725,296
% of housing units that are owner-occupied	68.60%	67.00%
Median value of owner-occupied housing units (2015-2019)	\$203,400	\$180,600
Median monthly homeowner costs - with a mortgage	\$1,492	\$1,430
Median monthly homeowner costs -without a mortgage	\$607	\$553
Median gross rent (2015-2019)	\$880	\$856
Source: US Census		

Compared to Wisconsin

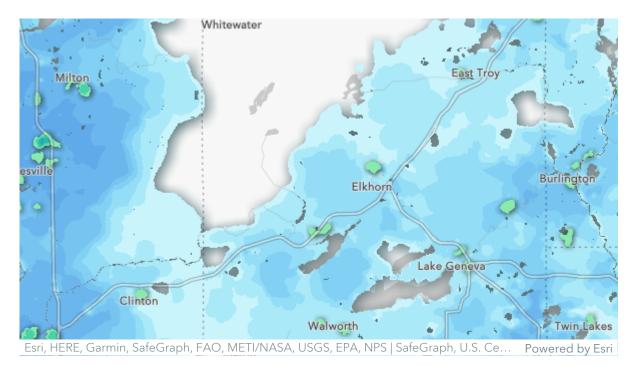
Walworth County has a higher median gross rent than the rest of the state. Home values are also higher. ²⁹

Learn more: Housing

How does food access affect health?

"Housing and food prices are high and access to both is limited here in Whitewater, especially with a population of 14,000 and not a single grocery store." - *Community Health Survey respondent*

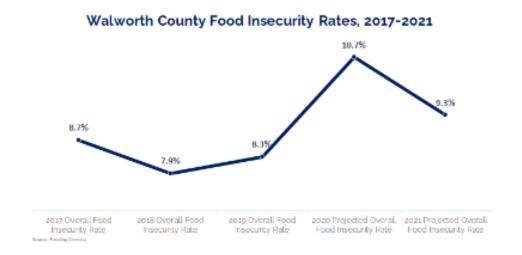
Many areas of Walworth County do not have adequate access to food. Since the closure of Sentry Foods in 2015 in Whitewater, that community has not had access to a supermarket. Below, areas in blue are within a 10 minute drive to at least one store. Areas in green are within a 10 minute walk to at least one store. Areas in grey have a longer than 10 minute drive or walk to a grocery store.³⁰



Source: US Census Bureau³⁰

Food Insecurity in Walworth County

Food insecurity is an issue of lack of basic needs due to financial insecurity and inadequate wages. Adults who are food insecure may be at an increased risk for a variety of negative health outcomes and health disparities. Children may also be at an increased risk for a variety of negative health outcomes, including obesity. They also face a higher risk of developmental problems compared with food-secure children. In addition, reduced frequency, quality, variety, and quantity of consumed foods may have a negative effect on children's mental health.³¹



Walworth County's food insecurity rate is lower than the state average (9.1%), but has risen in the past couple years. However, the average meal cost is \$0.10 higher than the state.³² SNAP & WIC are important nutritional support programs that not only improve food access, but also help lift families out of poverty. Of food insecure people in Walworth County, 73% of people meet the thresholds to qualify for these programs. Food insecurity rose during the COVID-19 pandemic in Walworth County.³³

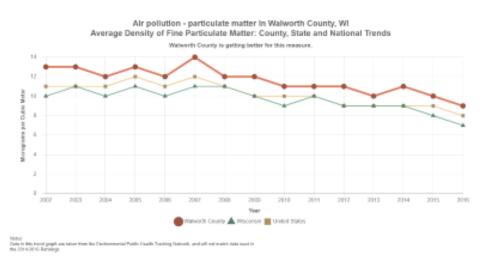
How do water and air quality affect health?

Having safe water to drink and clean air to breathe are two important environmental factors that can positively influence our health. Drinking water quality was brought up as a top concern in both the Community Health survey and in focus groups, including an environmental stakeholder focus group.^{23,24}

"The presence of bodies of water in Walworth County is part of what make the county so unique, so ensuring the lakes and water bodies are protected is extremely important." - Environmental Key Informant Group

Air Pollution in Walworth County

While the common air pollutant, particulate matter (PM) has decreased over the past two decades, Walworth County still averages **higher levels of PM** than both the state of Wisconsin and the United States.³⁴ PM is a common air pollutant caused from vehicle exhaust and power plants. When these pollutants react with the sun and water vapor in the atmosphere, they can irritate the respiratory system.

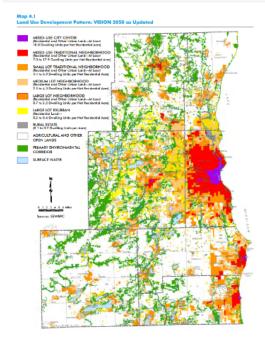


To learn more about the link between air pollution and asthma, click here.

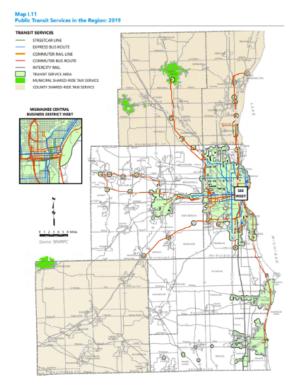
Learn more: Air & Water Quality

How does land use affect health?

To the right is a map showing the Land Use Development Pattern plan created by the Southeastern Wisconsin Regional Planning Commission (SEWRPC). Land use can impact our health and our community's health since it can have an impact on water quality, local air quality, safety, traffic patterns, physical activity and much more.



Source: SEWRPC Vision 2020 Plan³⁵



This map shows current public transit services for the southeastern region of Wisconsin. Walworth County and Whitewater have shared-ride taxi services. Source: SEWRPC Vision 2020 Plan³⁵

How does transportation affect health?

Transportation was highlighted as a key issue in both the Community Health survey as well as many key informant and focus group interviews.^{23,24}

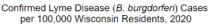
- 77% of survey respondents said that their community does not have access to a variety of transportation options.²³
- 57% of survey respondents said that the transportation options in their community were not affordable.²³

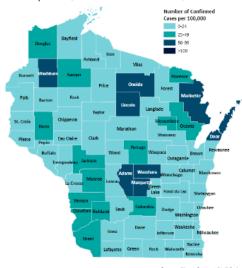
"Transportation is difficult in general, but especially during emergencies. Ambulances are so expensive. You need a driver's license and registration to get a car which greatly impacts undocumented residents." - Hispanic Community Members Focus Group

Learn more: Transportation

Vector Borne Disease

Vector borne diseases are human illnesses that are carried by mosquitos, ticks, parasites, or fleas. Lyme disease is the most common vector borne disease in Wisconsin and the state has a higher number of cases than the rest of the US. In 2019, Walworth County had 13.5 cases per 100,000 people, compared to the Wisconsin average of 37.7 per 100,000 people.³⁶





Learn more about Lyme Disease here.

For more information on Communicable Diseases, please visit the Health tab at the top of your screen.

Economic Stability

A person's income, their cost of living, their socioeconomic status, housing stability, and food security all play a role in their health. People with steady employment are less likely to live in poverty and more likely to be healthy, but many people have trouble finding and keeping a job. People with disabilities, injuries, or conditions like arthritis may be especially limited in their ability to work. In addition, many people with steady work still do not earn enough to afford the things they need to stay healthy.

Poverty inhibits one's ability to pay for healthcare services and to meet basic living needs, such as food and shelter, which are essential to health.

These issues do not just affect people living below the poverty line. Your income and economic status directly affect the quality and quantity of food



you can purchase for your family, the quality of housing you can afford, the quality of childcare you can afford, the ability to prioritize physical activity, and the ability to prioritize mental health to name a few.

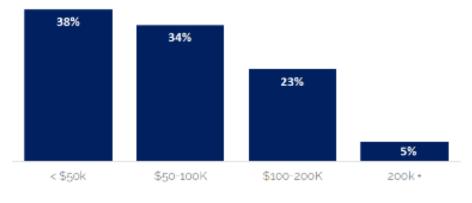
How does income affect health?

Income is an important determinant of health, providing economic stability and allowing individuals and families to thrive. From the 2021 Community Health Survey:

- 61% of respondents are able to save money at the end of every month.²³
- **59%** of respondents would be able to cover their household expenses if they were without income for 3 months.²³
- Finances were noted as the top source of stress among respondents.²³

Respondents also mentioned low wages & income inequality as some of the biggest problems in Walworth County. The median household income is \$63,549 while the per capita income is \$35,09.³⁷

Household Income



Source: Census Reporter

Cost of Living in Walworth County

Household Survival Budget, Walworth County, 2018			
	SINGLE ADULT	2 ADULTS, 1 INFANT, 1 preschooler	
Monthly Costs			
Housing	\$542	\$849	
Child Care	\$-	\$1,342	
Food	\$258	\$780	
Transportation	\$326	\$795	
Health Care	\$214	\$699	
Technology	55	\$75	
Miscellaneous	\$165	\$534	
Taxes	\$256	\$795	
Monthly Total	\$1,816	\$5,869	
ANNUAL TOTAL	\$21,792	\$70,428	
Hourly Wage*	\$10.90	\$35.21	

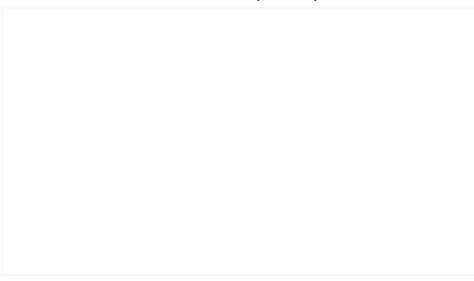
Nage working full-time required to support this budget r ALICE Survival Budget Sources, see the 2020 Metho Residents of Walworth County need to make a higher hourly wage than the rest of the state (\$10.81) to afford to live here.³⁸ The rising cost of living was frequently discussed in the Community Health Survey & focus groups.^{23,24}

How does employment affect

health?

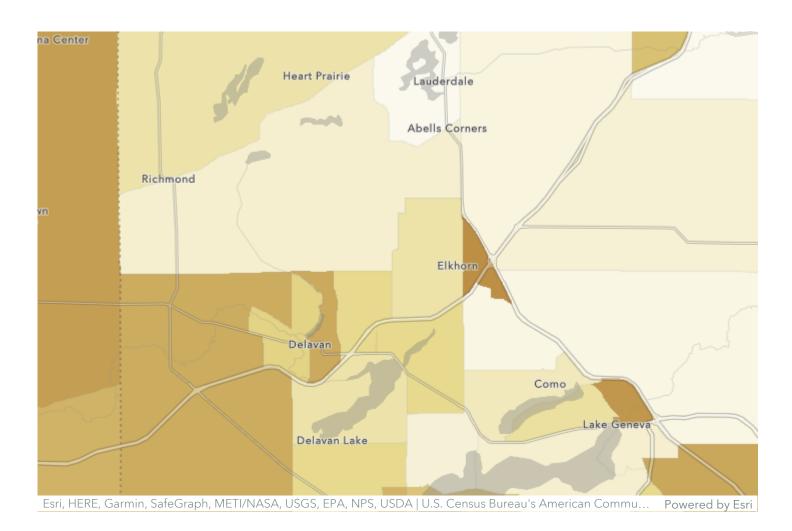
"People cobble together multiple part-time jobs instead of having one good job." -Community Health Survey Respondent

The COVID-19 pandemic caused a significant spike in unemployment in Walworth County, much like the rest of Wisconsin & the nation. Despite the unemployment rate falling to pre-pandemic levels in 2021, many employers and organizations that participated in focus groups noted staffing shortages as some of their largest challenges.²⁴



Source: US Bureau of Labor Statistics³⁹

Learn more: Income & Employment



How does **poverty** affect health?

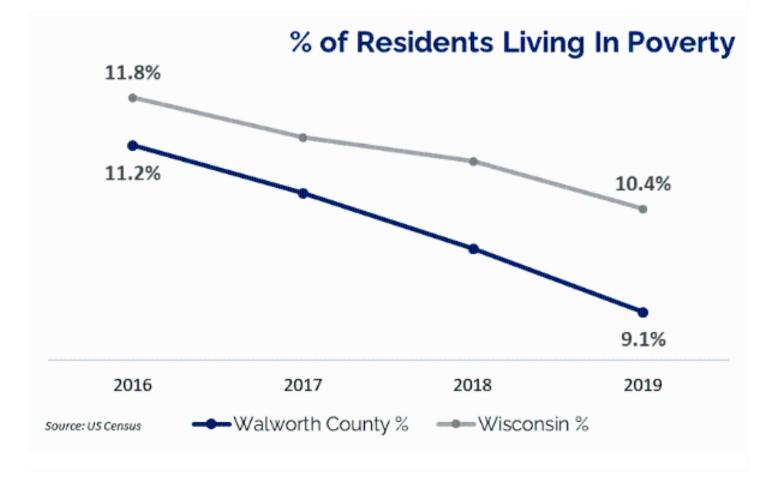
In Walworth County, 9.1% of people live below poverty line.⁴⁰

Poverty by Census Tract

Poverty differs greatly by location within the county. Whitewater has some of the highest poverty rates in the county, ranging from 40%-70% in certain census tracts in that area.⁴¹

Click on any of the census tracts to view more.

Learn more: Poverty



Poverty Over Time

While Walworth County's poverty rate has decreased since 2016 & remains lower than the state average, this only tells part of the story.40

While our poverty rate has been falling, our ALICE population has quickly risen. ALICE stands for Asset Limited, Income Constrained, Employed - households that earn more than the Federal Poverty Level, but less than the basic cost of living for the county.³⁸

Learn more: ALICE Households

Social & Community Context

Social connectedness is a sense of belonging to a group, family, or community. It's about the relationships people have with each other and their engagement with the broader community. Social connection is an integral component of health and well-being.

A socially connected community is a place where **everyone feels like they belong**. It is where people know their neighbors and everyone has the proper support to get involved, build relationships and contribute to the creation of strong social networks. It is a place where spaces exist for people to gather with friends and neighbors. People's relationships & interactions with family, friends, co-workers and community members can have a major impact on their health & well-being. Positive relationships at home, work, community can help reduce negative health impacts.



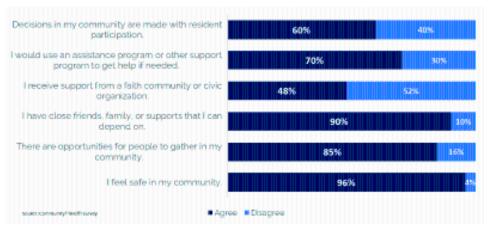
Source: Public Health England⁴²

How does social & community connection affect health?

"I feel like not many people feel truly connected to the community (as a town, city, county, etc.) and that creates barriers. It is hard to learn about resources and opportunities and advance communities in a positive direction if there is no community buy-in." - *Community Health Survey respondent*

Community Health Survey respondents identified lack of social and community connection as issues for Walworth County.²³ While most residents feel they have family & friends to rely on, they do not feel a broader connection and engagement to their community.

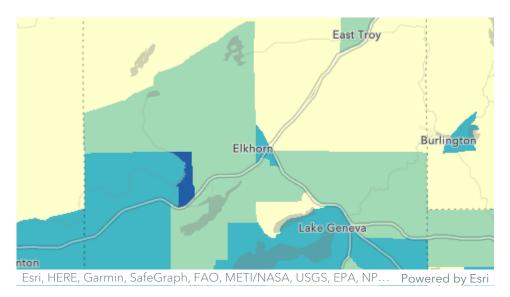
Walworth County Community Health Assessment



Social Vulnerability

The CDC's Social Vulnerability Index (SVI) refers to a community's capacity to prepare and respond to the stress of hazardous events ranging from natural disasters to human-caused threats & is a very common method for measuring resilience. The SVI groups 15 factors, including data on economic status, education, family characteristics, housing, language ability, ethnicity, and vehicle access.⁴³

The map below shows social vulnerability index by census tract in Walworth County. Darker blue areas have a higher level of vulnerability



Where are the most socially vulnerable populations in the U.S.? (Source; CDC/ATSDR⁴³)

Walkability

Walworth County has a low walkability index due to the rural nature of the county. However, even within the cities, only small portions are ranked as walkable. This factors significantly into our community's transportation barriers. The areas in orange are the least walkable. Areas in green are the most walkable.

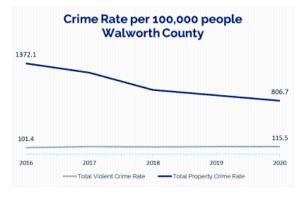


National Walkability Index44

Learn more: Social Connection

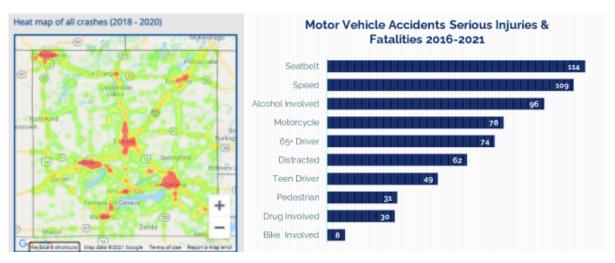
How does safety affect health?

Walworth County's crime rate is lower than the rest of Wisconsin. The property crime rate has decreased since 2016 and the violent crime rate has remained relatively stable.⁴⁵⁻⁴⁶ Violence can cause injury and lead to premature death.



Source: FBI46

Feeling safe in your community, whether that be walking on the sidewalk or driving in your car to the grocery store, is extremely important in feeling connected to your community and feeling comfortable going about day to day activities. Safety and violence can affect both physical and mental health as well as connection to ones' community.

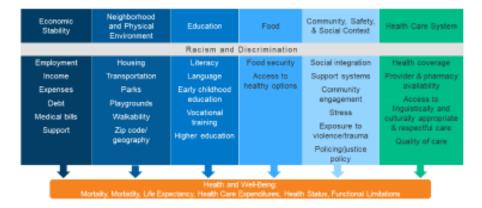


Sources: WI Department of Transportation⁴⁷

Learn more: Safety

How do racism and discrimination affect health?

Racism has been declared **a public health crisis** by the CDC, American Public Health Association, and various other organizations. Racism and discrimination negatively affect mental and physical health through chronic stress, in addition to affecting where one lives, learns, works, worships, and plays referred to as the social determinants of health.



Health Disparities are Driven by Social and Economic Inequities



From the Walworth County Community Health Survey:

- **17%** said they and/or someone in their household experiences discrimination in their community.
- Of those who said they experience discrimination, the most common types experienced were based on race/ethnicity (39%), age (36%), and gender (29%).
- The most common situations for discrimination were in public places (53%), with neighbors (28%), and at work (28%).
- 47% of Hispanic/Latinx respondents and 29% of respondents with a disability reported that they or someone in their household experiences discrimination.²³

"In Whitewater, the majority of students in many schools are Latino/Hispanic, yet no one on the Common Council, School Board, Plan Board, etc. is Latino/Hispanic. Our leadership does not reflect who we are. It is our future and we need to embrace that." -Community Health Survey Respondent

Education

Education typically leads to better jobs, more money and many other benefits, including better health insurance, which leads to better access to quality health care. Higher earnings also allow workers to afford homes in safer neighborhoods as well as healthier diets.

Research indicates poorer health outcomes for those with poor reading skills. Low literacy is linked to a decreased likelihood of having health screenings and preventative services, higher risk of hospitalization, and poorer health status.⁴⁹



Source: Colorado Consumer Health Initiative⁵⁰

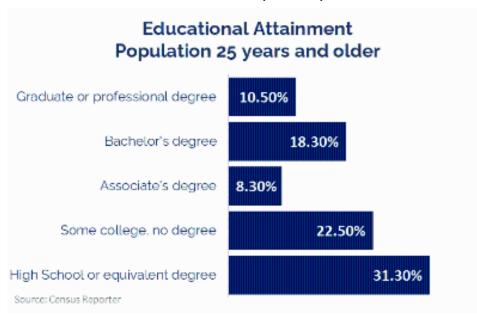
Lower educational levels among a community puts residents at risk of low health literacy levels. Health literacy is the degree to which a patient understands basic health information such as following instructions from a health care provider, managing an illness, or taking medication properly.

Children from low-income families, children with disabilities, and children who routinely experience forms of social discrimination, like bullying, are more likely to struggle with math and reading.

How does education affect health?

Education can create opportunities for better health through increasing income, creating healthy behaviors, and improving social-emotional well-being.

- 16% of Walworth County residents lack basic English literacy skills.⁵¹
- **25%** lack basic numeracy skills.⁵¹
- 91% of residents over the age of 25 have a high school diploma or equivalent.⁵²



Learn more: Education

Schools in Walworth County

"We have excellent schools with dedicated staff and school boards." - Community Health Survey respondent

Average On-Track to Graduation Score All Districts: 87.3% (percentage of students expected to finish K-12 education)⁵³

According to the Community Health Survey, respondents identified schools in Walworth County as a strength in the community. Respondents thought that schools are **safe**, **provide high quality education, and play a large role in the community**.²³

In focus groups with high school students, youth felt that schools are starting to recognize the importance of mental health, but expressed a need for more mental health and suicide prevention resources in their schools. Within schools, youth also want more affordable food options/ free lunches, more connection to counselors and school resources, and better security.²⁴

Summary

Thank you to all the community members and community partners that contributed to the Community Health Assessment. The Community Health Improvement Plan will be published in Summer 2022.

References



For questions or comments, contact us at walcoph@co.walworth.wi.us or 262-741-3200.

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Walworth County Community Health Improvement Plan 2016-2020

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Walworth County Department of Health and Human Services Division of Public Health W4051 County Rd NN PO Box 1005 Elkhorn, WI 53121

Phone: (262) 741-3140 Fax: (262) 741-3757 Email: <u>walcoph@co.walworth.wi.us</u> Website: <u>www.co.walworth.wi.us</u>

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Key Stakeholders Group

Elizabeth Aldred Director Health and Human Services

Shawn Davenport Clinics Director Mercy Health Systems

Gregory Gerber Public Health Medical Advisor

Richard Gruber Director Mercy Health Systems

Nicole Heinrich Supervisor Behavioral Health Health and Human Services Curtis Marshall Community Health Educator WI Department of Health Services

Bridget Monahan Community Health Fort Health Care System

Ken Monroe County Board Supervisor Health and Human Service Board

Yolanda Pena FoodWise Walworth County Coordinator UW-Extension Anne Prince Supervisor Aging and Disability Resource Center Health and Human Services

Nancy Russell County Board Chair Walworth County

Terese Rutkowski Public Health Supervisor, WIC Health and Human Services

Holly Schmidtke VP Nursing/Chief Nursing Officer Aurora Health Systems Sandy Wagie-Troemel Citizen Representative Health and Human Services Board

Robert Williams Deputy Director Health and Human Services

William Wurcherer Citizen Representative Health and Human Services Board

Planning Committee

Erica Bergstrom Environmental Health Specialist Health and Human Services Janis Ellefsen Public Health Officer Health and Human Services Julie Phelps Consultant JRA Associates Beth Walsh Public Health Supervisor, Nursing Health and Human Services

Organizations

Aram Public Library Delavan, WI

Aurora Health Care

Delavan Darien School District Delavan, WI

Elkhorn Area Schools Elkhorn, WI Geneva Lakes Family YMCA Lake Geneva, WI

Inspiration Ministries

Williams Bay, WI

Mercy Health Systems

Whitewater Unified School District Whitewater, WI

Walworth County Health and Human Services Staff

Laura Borek Public Health Clerk

Adriana Cano Public Health Clerk

Daniel Clausen Public Health Dietitian

Bill FitzGerald-Fleck Public Health Nurse

Katie Friebergs Intern Andrew Jodarski Public Health Nurse

Elizabeth Kresen Seal-a-Smile

Terese Rutkowski Public Health Supervisor, WIC

Hollynd Schmidt Public Health Nurse Theresa Seidl Public Health Nutritionist

Sue Speciale WIC Clerk

Patty Stritesky WIC Clerk

Paula Strom Public Health Nurse Gonzolo Vega WIC Interpreter

Ashley Vickers Public Health Specialist

Chace Wolff Seal-a-Smile Coordinator

Juliet Young Secretary-Confidential

Community Participants

Abby Adams Lakeland Little Learners

Jodi Alwin Transitions Home Health

Cathy Anderson Walworth County Economic Development Alliance

Katie Behl Walworth County Courts

Donna Bjorge Mercy Health System

Richard Boniak George Williams College

Sarah Boss United Way Walworth County

Elisa Brandt Luther Memorial Church

David Bretl Walworth County Administration

Gina Carver Walworth County Medical Examiner

Cameron Clapper City of Whitewater

Jim Dayton Janesville Gazette

Hillary DeBlois Atrium Health and Senior Living

Justin Deubel Leadership Walworth

Bob Dillman Geneva Family Dentistry

Stephanie Galica George Williams College

Katherine Gaulke WAFCC

Rita Geilfuss Elkhorn Area School District Michelle Genthe Rock-Walworth Head Start

Sarah Halberg Delavan Darien School District

Robert Hall Walworth County Sheriff's Office

Kate Harrod Aurora Health Care

Sonia Hill Walworth County Health and Human Services

Deb Huebscher Atrium Health and Senior Living

Jessica James Atrium Health and Senior Living

Bernie Janiszewski Lakeland Healthcare Center

Alison Kestol-Bauer CFS Head Start

Lacy Kirwan Holton Manor

Carmen Lazzaroni Safe Families

Heidi Lloyd Association for the Prevention of Violence

Monica Los Planned Parenthood WI

Shauna Lyon Mercy Health Systems

Juliana Manske Franklin Public Health

Kat MacKay AIDS Resource Center of Wisconsin

Sean Marquis Mercy Health System

Diane Michalek Community Member Mike Michalek Community Member

Lindsey Mikrut Geneva Lakes Family YMCA

Melissa Miller University of Wisconsin Whitewater

Michelle Minton Delavan Darien High School

Carol Mischler Rock-Walworth Head Start

Beth Narayanan Twin Barns Project

Vijay Narayanan Twin Barns Project

Sara Nichols Open Arms Free Clinic

Blaine Oborn City of Lake Geneva

Karen Oglesby Aurora Health Care

Craig Pape Inspiration Ministries

Adrianne Paschke Community Member

Marc Perry Community Action

Ted Peters Geneva Lake Environmental

Mark Ruosch Village of Sharon Emily Schumacher Badger High School

Jacquiline Sieracki Kenosha-Racine-Walworth Tobacco Coalition

Cori Tucker Community Health Systems WI

Vick Vasudeva iDental Racine

Millie Veto 4C Counseling

Courtney Wadsworth Aurora Health Care

Vicki Wahler Gateway Technical College

Dennis West Beacon News

Anne Witte Gateway Technical College

Pattie Woods Parent Connections

Mary Ellen Wright Elkhorn Area School District

Kim Zellmer Planned Parenthood

Wendy Zimmerman Elkhorn Area School District

John Zinzow Walworth County Economic Development Alliance

Aaron Zorn Safe Families



IMPROVING HEALTH IN WALWORTH COUNTY

Many factors impact the health of our community: genetics, physical environment, and social and economic status. It is a difficult task to take on measuring and improving the health of the community, but none the less, one that a group of community members and organizations took on with leadership from Walworth County Division of Public Health. Over the course of 10 months the 2016 Community Health Assessment and 2016-2020 Community Health Improvement Plan were developed.

In the 2016 County Health Rankings and Roadmaps, Walworth County ranked 50th out of 72 counties in health factors. This is based on weighted scores for health behaviors, clinical care, social and economic factors and the physical environment. In 2006, we 20th ranked in health behaviors. This decline did not go unnoticed by our stakeholders or our county board. To improve the County's health ranking within the State is included in the County's Long Range Plans.



ASSESSING THE HEALTH OF WALWORTH COUNTY

The Mobilizing for Action through Planning and Partnerships (MAPP) model was modified in order to identify issues across the full spectrum of health in Walworth County. The four assessments from this process were utilized: Community Themes and Strengths, Local Public Health System Assessment, Forces of Change Assessment, and the Community Health Status Assessment.

Health is multidimensional and complex. Direct community involvement

Why do a CHA and

CHIP2

- Provides meaning, purpose, and connection
- Allows communities to build support, action, and influence
- Creates more responsive policies and practices

HIGHLIGHTS

- 1. Alcohol, Tobacco, and Other Drugs
 - + Walworth County experiences higher than the state average for binge drinking
 - + Opioid and other drug use are on the rise
 - + Work plans for this priority focus on educating children early, increasing use of employee assistance programs, and increasing community awareness of the problem
- 2. Oral Health
 - + Over a quarter of county residents haven't had a recent dental visit
 - + There is a dental provider shortage
 - + Work plans for this priority focus on increasing access to care, promoting community water fluoridation, and increasing preventative behaviors
- 3. Depression and Suicide
 - + There are more self-inflicted injury deaths and hospitalizations now than there were before 2006
 - + Nearly 10% of high school students have seriously considered suicide
 - + Work plans for this priority area focus on increasing knowledge of symptoms of depression, providing safe ways to ask for help, and increasing community awareness
- 4. Healthy Eating and Active Living
 - + Overweight and obesity continue to be on the rise
 - + Weight management activities are the number one thing people do to be healthier, and what they want to do to be healthier
 - + Work plans for this priority area focus on increasing availability of healthy foods, highlighting physical activity opportunities, and making the healthy choice the easy choice

NEXT STEPS

Setting goals does not change our outcomes. It is only through the efforts of you, our residents that improvements happen. We need every person in the county to make choices that will positively impact the health of our communities. Eat more fruits and vegetables. Walk instead of drive to the store. Add 30 minutes of physical activity to your day. Drink responsibly. Stop smoking. Have those open discussions with our children about drugs, being sad, and suicide.

We are so fortunate to call Walworth County our home. It is a beautiful community with much to offer our residents; the lakes, Kettle Moraine State Park, golf courses, convention centers, Yerkes Observatory, two universities, two healthcare systems and hospitals, involved church groups,

4-H and the Y and Boys and Girls Club, and good schools and clean air. Most importantly, Walworth County has wonderful, selfless and giving people who want to be more than 50th of 72 counties.

Please join us in these efforts. Be part of the plan and movement to improve the health of our county. Make a change in your own life. Get involved, and by 2020 we really will see everyone in Walworth County living better, longer.



Detailed Community Health Improvement Plan Process

Improving Health in Walworth County

Health! It is something in society we hear about frequently but that is difficult to define. We know it's something we want and also something that is deeply personal. Health is not just the absence of disease, but a whole spectrum of wellness that considers physical, social, mental, emotional, spiritual, and environmental impacts. The complexity of individual health makes improving the health of the community as a whole a much harder task. One that a group of dedicated stakeholders from Walworth County and surrounding communities decided to tackle in 2016, as they conducted the state mandated Community Health Assessment (CHA) and Community Health Improvement Plan (CHIP) process.

Under the guidance of the Walworth County Division of Public Health, the key stakeholders group, composed of members of health care agencies, policy makers, health and human services representatives, and community representatives, met to oversee and direct the process.



The key stakeholders began by setting a mission and vision for the work to be conducted. The group considered what it would take to improve health in Walworth County, and what the county could look like in the future if the CHIP is successful. During

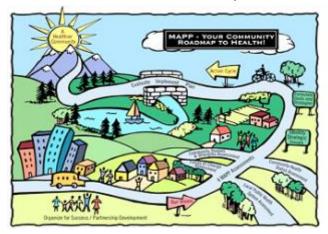
discussions it was determined that the full spectrum of health should be considered. This theme continued throughout the process.

Mission: Connecting communities to improve health where we live, learn, work, and play.

Vision: Everyone living better, longer.

After careful consideration the group adopted as our mission statement, "Connecting communities to improve health where we live, learn, work, and play." Our vision for the future of Walworth County is, "Everyone living better, longer."

With guidance from the planning team in Public Health, the key stakeholders group selected an approved framework measuring and evaluating health status. They elected to use a modified version of the National Association of City and County Health Officials (NACCHO) approved Mobilizing for Action through Planning and Partnerships (MAPP) tool to develop assessments that would be most effective in Walworth County



MAPP is a recommended structure for assessing a community's health status and needs. The method utilizes a series of different assessments to help develop a "big picture" understanding of the community's health.

Based on the steps outlined in MAPP and the County's previous CHIP, the key stakeholders group set a tentative timeline for completion, which was then modified as availability constraints required, providing the final timeline (below). The process of assessment commenced in February 2016, followed by plan implementation in September 2016, and ended with plan publication in December 2016.



Figure: MAPP Process Diagram

					<u> </u>							
	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Dec
	2015	2015	2015	2016	2016	2016	2016	2016	2016	2016	2016	2016
Hold initial planning meetings												
Develop process plan												
Create steering committee												
Survey												
Hold focus groups												
Hold community meeting												
Assess data												
Hold 2nd community meeting												
Complete Improvement Plan												

Walworth County Community Health Improvement Process Timeline

The MAPP process uses a series of four assessments, variations of which were completed in the Walworth County Community Health Assessment. Full details may be found in the accompanying publication to this, the 2016 Walworth County Community Health Assessment.

Community Themes and Strengths Assessment

The first survey in the MAPP process is the *Community Themes and Strengths Assessment*. This was modified by the key stakeholders group to consist of a community-wide survey and focus group interviews with minority populations in the community. The community wide survey focused on determining how the community percieves our health status. It consisted of questions like, "What are health concerns for you or your family?" and "What is one thing that prevents you from being healthier?" Copies of the survey and focus group questions may be found in the *2016 Walworth County Community Health Assessment*.

Highlights of the Community Survey*

The majority of residents feel that they are healthy

Many people were concerned with weight management and relating factors like access to healthy food and family friendly physical activity

A majority of Hispanic/Latino residents expressed concerns about diabetes

Depression and stress management were brought up as both things that keep people from being healthy and problem areas they see in the county

Alcohol use was identified as the number one risky behavior in the county

*For more information and full results of the Community Survey and Focus Groups check out the 2016 Walworth County Community Health Assessment

<u>Highlights of the Focus Groups</u>

What do you like about living here?

 Small community, the lake, accessibility for the disabled, diversity of services, the fair

<u>What are your concerns about the</u> <u>community?</u>

 Economic stability, over development, culture of lack of commitment, lack of activities, lack of services, lack of quality housing

<u>What are the biggest health problems</u> facing the county?

• Drugs and alcohol, affordable healthy food, weight, school quality

What are the biggest risky behaviors in the county?

Drugs, lack of parenting

What can we improve?

 Affordability of physical activity, access to services, healthy foods

Local Public Health System Assessment

The second step in the MAPP process is the *Local Public Health System Assessment*. This assessment was completed informally by the planning committee and in initial meetings with the key stakeholders. We identified key partners that must be included in the process.

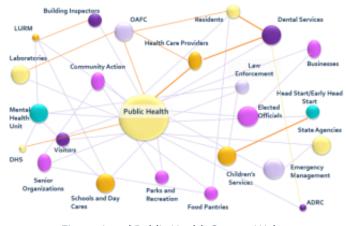


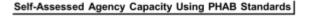
Figure: Local Public Health System Web

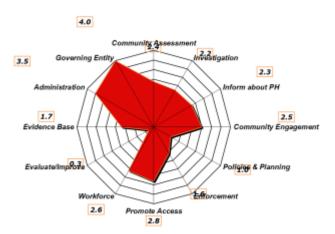
The partners were identified into two distinct groups; the key stakeholders and the community at large. The key stakeholders represent the parts of the local public health system that are directly invested in public health, have the political position to effect change, and/or are essential to have present in the community health improvement process in order for CHIP success. These groups include the local hospital systems, county and local government representatives, Health and Human Services board members, and representatives from the major programs at Health and Human Services including Aging and Disability Resources, Behavioral Health, Administration, and Public Health.



The second group identified in the process was called the community group. This included special interest groups, local non-profit agencies, businesses, and other community members. These are groups who have special interest in one aspect of community health, have previously participated in community or public health initiatives, have limited availability to participate in the CHIP process, or were identified by the planning committee or key stakeholders group as having the ability to impact community health status.

The final phase of the local public health system assessment involved the local public health department completing selfа assessment designed to determine the public health system's ability to meet the domains outlined by the Public Health Accreditation Board, the first ten of which cover the essential public health services. At the time of publication this assessment is still ongoing. Early results indicate strengths in governing body communication and division administration. Identified weaknesses include policy and planning strategies, and monitoring and evaluating program guality and progress.







Community Health Status Assessment

The *Community Health Status Assessment* in Walworth County was completed through the data review of multiple existing data sources. Data sources were categorized into topics based on the outline provided by the County Health Rankings, a national system that compares county health statues within each state. Data was analyzed from local hospital assessments, state and national databases, and locally collected data. Full details of this assessment may be found in the 2016 Walworth County Community Health Assessment.

Ra	County Health Rankings & Roadmaps Building a Culture of Health, County by County			DU BY AS IR VI BN WS SW PC ON FO MI
			FACTORS ALL RANK	SC DN CH MR SH DR
Rank 🔻	County	Rank 🔻	County	PE BU TR JA WR WN CA MA
1	Ozaukee (OZ)	1	Ozaukee (OZ)	VE MQ GL FD SE
2	Calumet (CA)	2	Waukesha (WU)	CR RI SA CO DO WH OZ
3	St. Croix (SC)	3	Dane (DA)	IO DA JE WU ME
4	Pierce (PI)	4	Calumet (CA)	GR LA GE RO WA RA
5	Pepin (PE)	5	St. Croix (SC)	
6	Waukesha (WU)	6	La Crosse (LC)	KE Dank 1.18 Dank 10.36 Dank 37.54 Dank 55.70
7	Washington (WH)	7	Washington (WH)	
8	Jefferson (JE)	8	Outagamie (OU)	
9	Buffalo (BU)	9	Sheboygan (SE)	BY BY
10	Richland (RI)	10	Door (DR)	
11	Dane (DA)	11	Kewaunee (KW)	BN WS SW
12	Portage (PR)	12	Green (GE)	PC ON FO
13	Kewaunee (KW)	13	Jefferson (JE)	
14	Lafayette (LA)	14	Oneida (ON)	
15	La Crosse (LC)	15	Marathon (MR)	
41	Winnebago (WN)	48	Taylor (TA)	
42	Manitowoc (MA)	49	Monroe (MO)	WR WN CA MA
43	Walworth (WA)	50	Walworth (WA)	MQ SGL FD SE
44	Clark (CL)	51	Florence (FL)	VE RI SA CO DO WH OZ
45	Jackson (JA)	52	Crawford (CR)	GR 10 DA JE WU ME
				KE

Rank 1-18 📕 Rank 19-36 📕 Rank 37-54 📕 Rank 55-72

Forces of Change Assessment

The final assessment of the MAPP process, the *Forces of Change Assessment*, was completed by the key stakeholders during the health issue prioritization meeting. It identified strengths of the community, opportunities, and barriers to success. The key stakeholders utilized these findings to prioritize health issues for the improvement plan.

Forces of Change	Threats Posed	Opportunities Created
Aging Population	Transportation demands Increased health care needs Increase chronic/aging diseases	Expanded/new programs Expand in home assistance Jobs
Diverse Population	Underserved	New communication strategies Bilingual job opportunities
Drugs and Alcohol	Crime Damaged families Traffic incidents Poor Health outcomes	Multi-sector intervention strategies Prevention education
Dental Care	Underinsured/high deductible Dentists don't serve MA	Alternative dental care models Statewide resources/examples
Advancing Technology	Jobs eliminated Convenience not in-person Lack of access hurts programs Phone use while driving	New outreach/education Improved data collection Target typically difficult populations
Changes in funding and regulations	Programs can't be supported	New programs Grant opportunities
Industrial Changes	Environmental quality	Policy change Jobs Increased economy
Lower Birth Rate	Decreased demand for services	Family based services
Obesity	Chronic diseases	Community environment changes
Health Care	Changes in services Availability of public health	Prevention focus
Family Dynamics	Discrimination	Change program needs

For more information on the health of Walworth County make sure to check out the 2016 Walworth County Community Health Assessment.

Below are the highlights from the 2016 Walworth County Community Health Assessment. For full details on the findings of the assessment check it out.

Overall Health Status

- + The majority of residents feel that they are healthy
- We rank 43rd out of 72 counties in Wisconsin for how long and how well we live
- We rank 50th out of 72 counties for things that impact our health like behaviors, access to care, social and economic status, and the environment

Health Outcomes and Quality of Life

- + Cancers and diseases of the heart are the main causes of death
- + Walworth County has a slightly higher infant mortality rate than similar counties
- + 30% of high school students report experiencing depression like symptoms
- + Walworth County's rate of suicide is slightly above the state average
- + Sexually transmitted disease rates continue to increase annually with over 300 cases per year

Health Behaviors

- + Overweight and obesity have steadily increased
- Many residents in the county don't know where they'll get their next meal
- + Electronic smoking is on the rise
- + Drug use in high school students has decreased
- + 22% of high school students report texting while driving

<u>Clinical Care</u>

- 7% of residents use Medicaid/Badger Care to pay for health care
- + There are more uninsured children in the County than the state average

- 1 out of 5 residents haven't had the dental care they need
- There aren't enough doctors that care for mental health needs

Social and Economic Status

- + The median household income has decreased since 2010
- + Unemployment has decreased to 5.7%
- + 16% of children live in poverty
- + 31% of families living below the poverty level are single mother households

Physical Environment

- + There is a lack of affordable, safe housing
- + Water quality is the number one environmental concern
- + Childhood lead poisoning continues to be an issue in the county

Special Populations

- Hispanic and Latino residents experience higher rates of diabetes, overweight, and problems accessing oral health care
- Low-income residents experience housing quality and affordability problems
- + Veterans groups report concern over access to services and depression/suicide
- Disabled residents report difficulty accessing facilities, especially outdoor recreational areas



The Planning Committee

Once all the data from surveys and focus groups were collected, the Public Health planning committee met to analyze the information. They specifically looked at issues that were identified by multiple sources as areas of concern in the community. The following were determined to be the top ten (10) problems affecting the overall health of Walworth County residents:

- 1. Physical activity and obesity
- 2. Drugs
- 3. Alcohol
- 4. Depression/suicide
- 5. Healthy foods at reasonable cost
- 6. Housing
- 7. Diabetes
- 8. Transportation
- 9. Smoking
- 10. Dental



The Key Stakeholders

The 10 overarching themes were presented to the key stakeholders for review and discussion. There was much debate, but all agreed that 10 priorities would be too overwhelming to bring to a larger community group.

The stakeholders were tasked with either eliminating or combining the initiatives, leaving 3 - 4 top priorities to be addressed by the community. To do this, they were asked to think about the following questions: What can be combined? What can we work on or what is beyond the scope of our CHIP? Can we effect

change over the next five (5) years? What forces of change can you identify that may help or hinder the success of our plan?

A lengthy discussion ensued with the end results being:

- 1. Eliminate transportation, as it is being addressed by the Walworth County Transportation Coordination Committee.
- 2. Eliminate housing, which should be addressed by the municipalities and is too complex an issue for CHIP.
- 3. Combine physical activity and obesity with healthy foods at reasonable cost. Diabetes would also be addressed within this group. Healthier eating and increased activities can improve diabetes outcomes.
- 4. Drugs, alcohol and smoking were grouped together and will be addressed as "addictive behaviors".
- 5. Depression / suicide
- 6. Dental care

It was determined that each priority should address the aging and Hispanic populations and also include an environmental component. Each work plan should also look at addressing the health behaviors that contribute to the health outcome instead of attempting to address the health outcome directly.

Identified Health Priorities

- 1. Addictive Behaviors
- 2. Depression and Suicide
- 3. Oral Health
- 4. Healthy Eating, Active Living

The Community Group

Planning Committee and Key The Stakeholders agreed early in the process that the only chance our CHIP strategies have for success and sustainability is if they are community driven. The process must be led and coordinated by community members who must believe in and actively pursue changes that will improve our health and environment. With that in mind, a list of community members was drafted and invitations were sent to more than 100 individuals and community partners. The public was invited via newspaper media and our county webpage. There were two meetings held with this group, in June and August 2016.

The first meeting welcomed 63 attendees representing Walworth County from multiple perspectives including: county administrators, policy-makers, colleges, medical providers, non-profit organizations, elementary and high schools, churches, residents, the press, and local and state health and human services. The group was presented a broad summary of the data and brought up-to-date on the process of how the stakeholders arrived at the four priorities.



Those present were asked to participate in moving the process forward by joining one of four workgroups, addressing one priority over the next five years. Since the priorities are broad categories, the work plans required narrowing the categories into specific goals.

As the workgroups formed and began their discussions they were asked to choose a leader, exchange contact information, and plan a next meeting. They were charged with creating a work plan that: narrows the problem; creates SMART (Specific, Measurable, Attainable, Realistic, Timely) goals; has initiatives that are evidenced-based and align with state and national priorities; and identify additional community partners. The workgroups were asked to be prepared to present the plans at the next community meeting in August.



The August meeting was a celebration! We celebrated the work accomplished to date and the kick-off of our CHIP moving forward. The work groups presented thoughtful and achievable plans that were supported and approved by the stakeholders. It was evident that much work had gone into the plans and those involved were enthused about working together to improve the overall health and wellness of Walworth County residents.



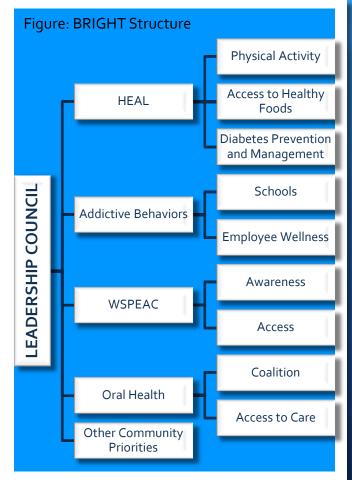
Health Improvement: A Path Forward

The beauty of CHIP is that it is not a static thing, that once completed sits on a shelf until someone asks to see it. CHIP is a dynamic, moving, growing, changing initiative driven by community forces. CHIP gives us a map, but like on any road trip, we as a community can choose which paths to follow, which pitfalls to avoid, and what alternative routes to take around road blocks.

To assist in keeping this fluid plan moving efficiently, a new county wellness coalition has been formed: Building Resources with Innovation, Growing Healthier Together (BRIGHT). BRIGHT is composed of members of stakeholders the kev group, and representatives from community health priority areas and major health care systems.



As the workgroups execute, evaluate, and revise their work plans, BRIGHT will provide oversight and report on the groups' progress. They will help the community join together to change the status of health in Walworth County.



But we can't do it alone. We need your help. Work plans developed by the workgroups may be found on the next pages. We invite you to review the plans, and then get involved. For CHIP to continue to be strong and successful, we require support and enthusiasm from all residents and community partners. To get involved please contact our office, so that together we can say we are no longer the 43rd healthiest county in the state and can see everyone living longer, better.



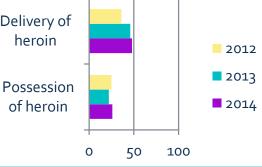
Work Plan Highlights

Community Health Priority #1: Addictive Behaviors

Background Alcohol Use The Cost of Excessive Alcohol Use in Walworth Between 2011 and 2015 alcohol was County involved in 11% of traffic injuries What We Pay For in Millions Annual economic cost of excessive and 39% of traffic fatalities.² alcohol use in Walworth County \$12.4 \$112.9 Million Between 2010 and 2015 the total Health Care Or number of OWI arrests decreased \$1,103.98 per resident from 881 to 499 and the number of in 2011. Lost OWI convictions from 838 to 605.3 Binge drinking is responsible for \$81.5 Productivity **76% of this cost** but **Revenue** The number of high school females Other generated from alcohol purchases binge drinking has tripled since 2014 covers for less than **1%** of the and is double the rate for males.⁶ societal costs. \$19.0 **Tobacco Use** Electronic Smoking Current Smokers (Past 30 Days)¹ 2 in every 25 high school students use 30 e-cigarettes. 20 10 6% of County adults use smokeless tobacco and 3% use electronic cigarettes. 0 2009 2003 2005 2011 2014 64% of current smokers have been trying to quit Walworth • Ozaukee for a year. **Drug Use** Heroin related deaths have **doubled** since 2013. Delivery of Walworth County is number **1** in **clandestine** lab heroin seizures.

Average age of drug offenders is 31.

12.3% of students have taken a prescription drug without a prescription.

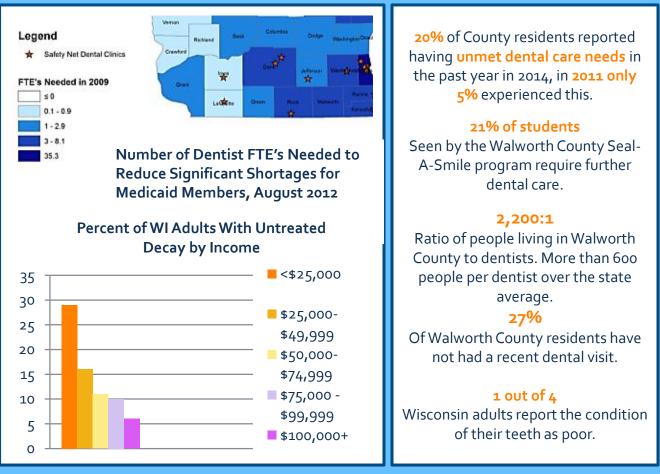


Goal: To improve the health and wellbeing of Walworth County residents by decreasing addictive behaviors surrounding alcohol, tobacco, and prescription and illegal drug use.

Short Term Measures: Decrease the number of 8 th grade students engaging in alcohol, tobacco and drug use by 25%. Decrease the level of workplace absenteeism by 20%. Decrease the number of adults that binge drink to <20%.	Long Term Measures: Decrease the number of deaths attributed to accidental overdose of alcohol or drugs from 20 annually to 10 by 2020. Change the county culture with regards to alcohol use through county and municipal policies .
	to be used with elementary school students n addictive behaviors and teach prevention and n at least 3 school districts by 2020.
 Background on Strategy: 1. Data Source: Youth Risk Behavioral Survey 2. Evidence Base: Promising Practice 3. Policy Change: No 	 Activities: 1. Survey Students 2. Work with schools 3. Train community members in curriculum 4. Develop student/family assistance programs
Objective 2: Increase employee use of employee and increasing productivity.	ee assistance programs, decreasing absenteeism
 Background on Strategy: 1. Data Source: Local Survey of EAP Use 2. Evidence Base: None 3. Policy Change: No 	 Activities: 1. Survey Businesses 2. Work with businesses to provide/increase available resources in EAP's for addictive behaviors
• •	ess of the scope of the problem and resources ot of addiction from a moral failing to a chronic
 Background on Strategy: 1. Data Source: None 2. Evidence Base: Promising Practice 3. Policy Change: No 	 Activities: 1. Develop and implement an awareness campaign 2. Identify gaps in services 3. Decrease gaps in services
Lead Organizations: Walworth County: Administration, Health and Human Services, Medical Examiner's Office Walworth County Economic Development Alliance Delavan Darien School District	Alignment with State/National Priorities: Healthiest WI 2020: Alcohol and Other Drug Use; Tobacco Use and Exposure Healthy People 2020: Substance Abuse; Tobacco Use National Prevention Strategy: Tobacco Free Living, Preventing Drug Abuse and Excessive Alcohol Use

Community Health Priority #2: Oral Health

Background



Goal: To increase access to oral healthcare in Walworth County for the uninsured and underinsured residents of Walworth County.

Short Term Measures:

By December 31, 2018, 10% of the members of the local Wisconsin Dental Society (Burlington WDA) will have participated in a coordinated effort to treat uninsured and/or underinsured Walworth County Residents.

Long Term Measures:

By December 31, 2020, the percentage of Walworth County residents with unmet dental care will decrease from 20% to at least 5%.

By December 31, 2020 the percentage of students seen by the Walworth County Seal-a-Smile program with untreated decay will be decreased to at least 15%.

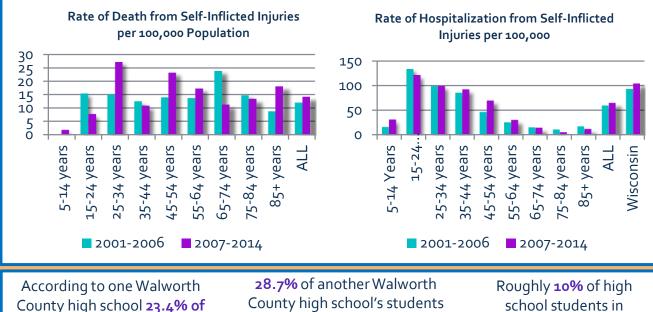
By December 31, 2020, the number of municipalities adjusting their water to the optimal level of fluoride will be increased to 85%.

Objective 1: Develop a dental coalition to address access to oral health care in Walworth County.

 Background on Strategy: Source: Evidence based practices for effective community coalitions, Center for prevention research and development Evidence Base: Evidence based Policy Change: No 	 Activities: Recruit members to the dental coalition Identify member roles and responsibilities Develop action plan and timeline for coalition activities
Objective 2: Increase capacity for dental provider	rs to care for target population.
 Background on Strategy: 1. Data Source: What works for health: Rural training in medical education 2. Evidence Base: Scientifically supported 3. Policy Change: Yes 	 Activities: 1. Develop partnership agreements 2. Develop program for grad-student position in public health dentistry 3. Secure funding 4. Hire provider
Objective 3: Increase the number of municipal water to the optimum level of fluor	lities and waterworks facilities that adjust their ide.
 Background on Strategy: 1. Data Source: What works for health: Community Water Fluoridation 2. Evidence Base: Scientifically supported 3. Policy Change: Yes 	 Activities: 1. Assess status of public water programs for fluoridation 2. Work with city and state governments to influence policy change 3. Provide community education campaign
Objective 4: Enhance community education of p	oositive oral practices.
 Background on Strategy: 1. Data Source: Wisconsin roadmap to Improving Oral Health 2. Evidence Base: None 3. Policy Change: No 	 Activities: 1. Campaign on early dental development 2. Campaign on maintaining good oral health 3. Campaign on preventing oral health disease
Lead Organizations: Open Arms Free Clinic Inspiration Ministries Walworth County Division of Public Health	Alignment with State/National Priorities: Healthiest WI 2020: Oral Health objective 1,2 Healthy People 2020: Oral Health: 7, 13, 17 National Prevention Strategy: #5, reduce barriers to accessing care

Community Health Priority #3: Depression and Suicide

Background



their female students report seriously considering attempting suicide in the past year, and 6.2% of their male students.⁶ County high school's students reported feeling so sad or hopeless almost every day for two or more weeks that they stopped doing some usual activities during the last year.⁶ Roughly **10%** of high school students in Walworth County reported having **made a plan** about how they would attempt suicide in the previous year.⁶

Goal: Walworth County will support suicide prevention and depression treatment by connecting residents with a range of mental health resources.

Short Term Measures:

By January 31, 2017 the number of participants in the Walworth Suicide Prevention, Education, & Awareness Coalition (WSPEAC) will increase by at least 10.

By December 31, 2017 the number of residents utilizing Crisis Intervention Services related to depression/suicide will increase by 20%.

By May 31, 2018 the knowledge base in the area of suicide and depression will increase by 100 community members.

Long Term Measures:

By the end of 2020, the number of schools in Walworth County that utilize an evidence-based suicide prevention program will increase to 100% of middle and high schools.

By December 31, 2020 the number of suicides in Walworth County will be reduced by 30% to less than 10 annually, with 0 teen suicides..

By December 31, 2020 the number of students reporting seriously considering attempting suicide will be reduced by at least 2%.

Objective 1: By January 31, 2017 WSPEAC will increase the number of partners to 20 active participants.

	Activities: 1. Add community groups systematically including schools, medical providers, law enforcement, faith-based, and volunteer organizations
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Objective 2: By May 31, 2018, five community organizations will receive presentations about depression, suicide and prevention, raising awareness about the problem and resources for help. This will include information on how depression manifests itself in different populations based on age and heritage such as teens, elderly, adults in both the Anglo and Hispanic populations.

Background on Strategy:

- 1. Source: Suicide Prevention Resource Center
- Evidence Base: National Registry of Evidence-Based Practices and Program (NREPP), sponsored by Substance Abuse and Mental Health Service Administration (SAMSHA)
 Policy Change: Yes

Activities:

- 1. Collect data
- 2. Select evidence-based practices and implement
- 3. Measure and evaluate results
- 4. Adjust presentation and projects
- **Objective 3:** By May 31, 2018, five of the schools located in Walworth County will have implemented an evidence-based program in the area of suicide prevention and depression education for students in grades 6 through 12.

Background on Strategy:

- 1. Source: Suicide Prevention Research Center
- 2. Evidence Base: National Registry of Evidence-Based Practices and Program (NREPP), sponsored by Substance Abuse and Mental Health Service Administration (SAMSHA)
- 3. Policy Change: Yes



Activities:

- 1. Invite all school districts in Walworth County to join WSPEAC
- 2. Identify evidence based programs
- 3. Establish log of currently used evidence based program in schools
- 4. Publish findings
- 5. Educate districts on the Youth Behavior Risk Survey
- 6. Provide opportunities for product review of programs to school districts and determine if recommendation is warranted

Objective 4: Develop a public media campaign about suicide prevention, depression awareness and options for help that addresses multiple age groups, ethnicities and cultures to reach diverse residents of Walworth County.

Background on Strategy:

- 1. Source: Suicide Prevention Research Center, National Suicide Prevention Strategy
- 2. Evidence Base: Promising Practice
- 3. Policy Change: Yes

Activities:

- 1. Develop a campaign
- Develop and implement train the trainer initiative on Question, Persuade, Refer (QPR)
- 3. Train community members
- 4. Facilitate presentations
- 5. Collect and analyze data

Lead Organizations: Walworth Suicide Prevention, Education, & Awareness Coalition Walworth County Health and Human Services Elkhorn Area School District

Alignment with State/National Priorities: Healthiest WI 2020: Injury and Violence Prevent Suicide Wisconsin Healthy People 2020: Adolescent Health National Prevention Strategy:

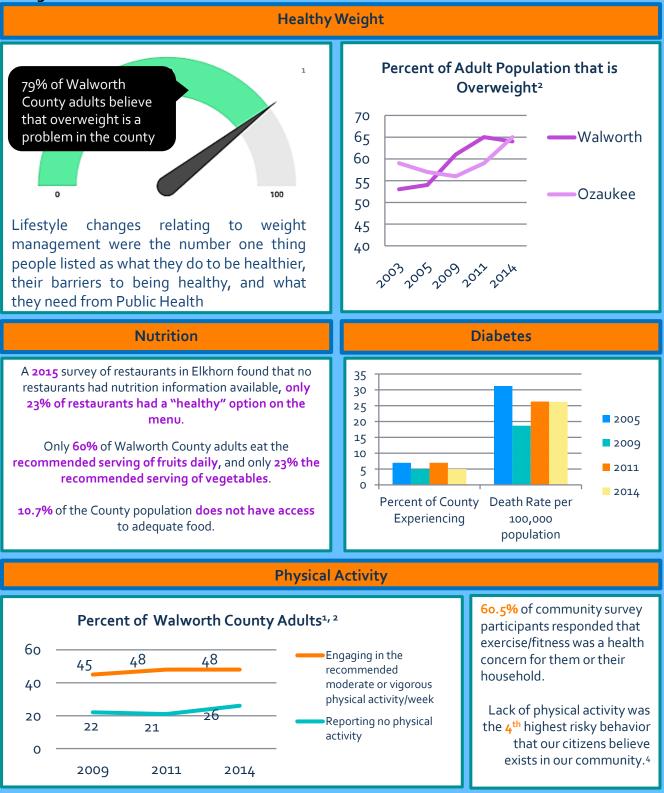






Community Health Priority #4: Healthy Eating, Active Living

Background



Goal: To improve health, fitness, and the quality of life for residents of Walworth County through daily physical activity and positive nutritional behaviors.

Long Term Measures: Increase the percentage of residents who consider Walworth County to be healthy or very healthy from 28.2% to 31% by 2020. Increase the percentage of the Hispanic/Latino
population in Walworth County with a healthy BMI from 31.2% to 34%.
Decrease the percent of the population classified as obese from 25% to 24% by 2020.
Decrease the percent of the Hispanic/Latino population reporting diabetes as a health concern for the community from 100% to less than 75%.

Objective 1: Increase accessibility to culturally competent diabetes education in at least 5 of the municipalities in Walworth County by December 1, 2020.

Background on Strategy:

- 1. Source: What Works for Health-Policies and Programs to improve Wisconsin's Health
- 2. Evidence Base: Some Evidence
- 3. Policy Change: No

Activities:

- 1. Research diabetic education programs
- 2. Train volunteers from area churches
- 3. Initiate education program at churches
- 4. Expand program to other community groups

Objective 2: By 2020, at least one school in each school district will meet the standards of enhanced physical education programs.

Background on Strategy:	Activities:
1. Source: What Works for Health,	1. Establish current status of physical
Community Guide Enhanced Physical	education
Education Programs	2. Meet with school districts
2. Evidence Base: Scientifically Supported	3. Encourage improvements in physical
3. Policy Change: Yes	education classes

Objective 3: Create or promote at least one new opportunity for physical activity for individuals under the age of 18 in 5 municipalities in Walworth County.

Background on Strategy:

- 1. Source: What Works For Health
- 2. Evidence Base: Scientifically Supported
- 3. Policy Change: No

Activities:

- 1. Implement UNICEF Kid Power Program
- 2. Collaborate with community partners
- 3. Provide education opportunities on reducing screen time and alternate activities

Objective 4: Create or promote at least one new opportunity for physical activity for adults in 5 municipalities in Walworth County.

Background on Strategy:

- 1. Source: What Works for Health
- 2. Evidence Base: Scientifically Supported
- 3. Policy Change: No

Activities:

- 1. Inventory available fitness programs
- 2. Work with existing partners to increase availability/accessibility to programs
- 3. Publish free exercise opportunities
- 4. Work with schools to allow access to fitness facilities
- 5. Promote knowledge of available physical activity opportunities



Objective 5: Increase access to healthy food by creating 6 additional school gardens in Walworth County by 2020.

Background on Strategy:

- Wisconsin Obesity Prevention 1. Source: Program: Nutrition, Physical Activity, and **Obesity State Plan**
- 2. Evidence Base: Scientifically Supported
- 3. Policy Change: Yes

Activities:

- 1. Meet with schools to determine current status
- 2. Identify and apply for funding
- 3. Collaborate with local stakeholders to establish gardens
- 4. Collaborate with partners to incorporate farm to table

Objective 6: By 2020 introduce a Point-of-Purchase nutrition campaign at convenience stores, restaurants, or grocery stores in the major municipalities of Walworth County.

Background on Strategy:

- 1. Source: County Health Rankings: Taking Action, What Works for Health
- 2. Evidence Base: Some Evidence
- 3. Policy Change: Yes

Activities:

- 1. Investigate the Food Trust Toolkit or other campaigns
- 2. Identify incorporation of incentives
- 3. Meet with targeted businesses
- 4. Provide support to participating businesses

Lead Organizations:

University of Wisconsin-Whitewater University of Wisconsin-Extension Twin Barns LLC

Alignment with State/National Priorities: Healthiest WI 2020:

Chronic Disease Prevention and Management Objectives 1, 2, and 3, Adequate, Appropriate and Safe Food and Nutrition Objectives 1 and 2

Healthy People 2020: D1-5, D14, PA 1, 2, PA3, 4, 8, 13, 14, NSW 2, 12, 13, 14, 15

National Prevention Strategy: Recommendations 1-4



Detailed Work Plans

Addictive Behaviors Implementation Plan Date Created: 7/14/16 Date Reviewed/Updated: 8/10/2016

PRIORITY AREA: Addictive Behaviors

GOAL:

To improve health and wellbeing of Walworth County residents by decreasing addictive behaviors surrounding alcohol, tobacco, and prescription and illegal drug use.

PERFORMANCE MEASURES						
How We Will Know We are Making a Difference						
Short Term Indicators	Source	Frequency				
Decrease the number of 8 th grade students engaging in alcohol, tobacco and drug	Youth Risk Behavior					
use by 25%	Survey					
Decrease the level of workplace absenteeism due to drugs, alcohol and tobacco						
use by 20%						
Decrease the number of adults that binge drink to < 20% by 2020						
Long Term Indicators	Source	Frequency				
Decrease the number of deaths attributed to accidental overdose of alcohol or	Wisconsin Vital					
drugs from 20 in 2015 to 10 in 2030	Statistics, Medical					
	Examiner records					
Change the county culture with regards to alcohol use through county and						
municipal policies.						

OBJECTIVE #1 Create and implement curriculum to be used with elementary school students starting in 3rd grade to educate on addictive behaviors and teach prevention and coping skills. Implement program in at least 3 school districts by 2020.

BACKGROUND ON STRATEGY

Source: Youth Risk Behavioral Survey.

Evidence Base:

Policy Change (Y/N): N

ACTION PLAN

Activity	Target	Resources	Lead Person/	Anticipated	Progress
	Date	Required	Organization	Product or	Notes
				Result	
Survey 2016-2018 8 th grade	1/31/17	Staff time, travel	Cathy Anderson, School	Baseline levels of	
students		Access to	districts	awareness	
		students			
Work with local schools to	1/31/17	Staff time, travel	Gina Carver, School	Game plan going	
research an evidence based			district staff	forward	
curriculum to be					
utilized/adapted					

Incorporate community	1/31/18	Community	Gina Carver, school	Increased
members, departments, and		members' time	districts	awareness of
associations into local		to present;		issues of addictive
elementary school health classes		printing costs for		behavior in
to teach prevention and coping		handouts;		elementary school
skills – ex. Law enforcement,		availability of		children
medical examiner's office, public		class time		
health,				
Work with school districts to	1/31/18	Community time	Cathy Anderson, school	Investigate need,
develop student/family		to present; staff	districts	determine
assistance program, similar to		time and travel;		existing resources
Wheatland School in Kenosha		use of intern;		
County		school district		
		resources		

OBJECTIVE #2: Increase employee use of employee assistance programs, decreasing absenteeism and increasing productivity

BACKGROUND ON STRATEGY

Source:

Evidence Base:

Policy Change (Y/N):

ACTION PLAN

available,

Activity	Target	Resources	Lead Person/	Anticipated	Progress
	Date	Required	Organization	Product or	Notes
				Result	
Survey area businesses on EAP	6/1/17	Staff time, travel	Cathy Anderson	Baseline EAP	
usage				usage numbers	
Present programs to 15 area	6/1/201	Staff time, travel	Cathy Anderson,	Increase use of	
businesses to increase education	8		WCEDA	EAP programs	
of their workforce regarding					
addictive behaviors and					
resources including their EAP					

OBJECTIVE #3: Increase community – wide awareness of the scope of the problem and the resources available to help, changing the perception of addiction from a moral failing to a chronic brain disease. BACKGROUND ON STRATEGY Source: Evidence Base: Policy Change (Y/N): **ACTION PLAN** Lead Person/ Activity Target Resources Anticipated Progress Date Required Organization Product or Notes Result Gather data on the scope of the Staff Time 1/31/17 problem, and resources

Create and begin	3/30/17	Staff time		
implementation of a plan to				
increase awareness of the				
societal costs and consequences				
of addictive behaviors around				
drug, alcohol and tobacco use				
Identify gaps in services for	6/30/17	Staff time		
Walworth County residents				
Publicize data utilizing multiple	6/30/17	Staff time,		
media outlets and methods,		money for		
including social media		advertising,		
		printing, etc		
Decrease gaps in services for	2020			
Walworth County residents				

ALIGNI	ALIGNMENT WITH STATE/NATIONAL PRIORITIES					
Obj #	Healthiest Wisconsin 2020	Healthy People 2020	National Prevention Strategy			
1	Alcohol and other drug use; tobacco use and exposure	Substance abuse; tobacco use	Tobacco Free Living; Preventing Drug Abuse and Excessive Alcohol			
			Use			
2	Alcohol and other drug use; tobacco use and exposure	Substance abuse; tobacco use	Tobacco Free Living; Preventing Drug Abuse and Excessive Alcohol Use			
3	Alcohol and other drug use; tobacco use and exposure	Substance abuse; tobacco use	Tobacco Free Living; Preventing Drug Abuse and Excessive Alcohol Use			

DESCRIBE PLANS FOR SUSTAINING ACTION

New participants from a wide variety of disciplines will be recruited to the group. Organizations involved in the group are seeking out funding from grants and other sources to help support group efforts.

Oral Health Implementation Plan

Date Created: 7/25/2016 Date Reviewed/Updated: 8/24/16

PRIORITY AREA: Oral Health Care

GOAL: Increase access to oral health care in Walworth County TARGET POPULATION: Uninsured and under-insured residents of Walworth County

PERFORMANCE MEASURES

How We Will Know We are Making a Difference

Short Term Indicators	Source	Frequency
By December 31, 2018, 10% of the members of the local Wisconsin Dental Society (Burlington WDA) will have participated in a coordinated effort to treat uninsured and/or underinsured Walworth County Residents.	WDA Survey	Annual
Long Term Indicators	Source	Frequency
By December 31, 2020, decrease the percentage of Walworth County residents living in poverty of having unmet dental care from 20% to 5%	Aurora Community Survey	Annual
By December 31, 2020 the percentage of students seen by the Walworth County Seal-a-Smile program with untreated decay will be decreased to at least 15% from 25% in 2016	WC Seal-a-Smile reports	Annual
By December 31, 2020, the number of municipalities treating their water to the optimal level of fluoride will be increased to 85% (4 additional systems)	WI Fluoridation Census	Annual

OBJECTIVE #1: Develop a dental coalition to address access to oral health care in Walworth County

BACKGROUND ON STRATEGY: Currently, there is no coordinated access point or care system in Walworth County for individuals who are uninsured or underinsured to receive dental care. By developing a steering committee of stakeholders to address the gaps and barriers for vulnerable populations, the committee will be equipped to create solutions for coordinated mechanism of care. Source: Evidence Based Practices for Effective Community Coalitions, Center for Prevention Research & Development Evidence Base: Y Policy Change (Y/N): N

ACTION PLAN

Activity	Target	Resources	Lead Person/	Anticipated	Progress
	Date	Required	Organization	Product or Result	Notes
Recruit Members: private dentists, educators, county reps, parents, students, agencies, faith leaders	Start: 10/2016	 space & time for meetings 	Sara Nichols, Open Arms Free Clinic & Chace Wolf, Walworth County Seal-A- Smile	10 members committed	

Identify roles & Responsibilities			
Develop Action plan - to include task & timeline for the following objectives			

OBJECTIVE #2: Increase capacity for dental providers to care for target population

BACKGROUND ON STRATEGY: There are two locations with a total of FOUR (4) dental operatories that are underutilized (at Open Arms Free Clinic and Inspiration Ministries). By partnering with Marquette Dental School and seeking funding from public and private sources, we would create a loan forgiveness program for new graduates to develop a pipeline of providers to serve the target population at the two locations.

Source: What Works for Health: Rural training in medical education

Evidence Base: Y, Scientifically Supported Policy Change (Y/N): Y

ACTION PLAN

Activity	Target Date	Resources Required	Lead Person/ Organization	Anticipated Product or Result	Progress Notes
Develop capacity building partnership agreements	12/2019	- contacts, space & time	Sara Nichols, Open Arms Free Clinic & Chace Wolf, Walworth County Seal-A- Smile	Partnership Agreement	
Develop the program for grad student position in public health dentistry					
Secure funding		 governance approval, grants 		- Funding Awarded	
Hire provider	12/2020			- Provider hired 2yr placement	

OBJECTIVE #3: Increase the number of municipalities and waterworks facilities that adjust their water to the optimum level of fluoride.

BACKGROUND ON STRATEGY: With the growing number of students needing treatment as screened through the Seal-A-Smile program, the discontinuation of the community fluoridation programs have already been witnessed. The US Public Health Service recommends that community drinking water contain .7 ppm of fluoride. There is strong evidence that community water fluoridation cost-effectively prevents cavities across socio-economic groups. Effects are strongest in low income communities and in communities with poor oral hygiene and limited access to oral health care. Source: What Works for Health: Community Water Fluoridation Evidence Base: Y, Scientifically Supported

Policy Change (Y/N): Y

ACTION PLAN	ACTION PLAN				
Activity	Target Date	Resources Required	Lead Person/ Organization	Anticipated Product or Result	Progress Notes
Assess public water department programs for fluoridation	1/2017	state/ county data	Oral Health Coalition	identified town/cities with population over 1,000 without fluoride in water	
Influence policy change: – community level – municipality level	start: 1/2017 by: 12/2020	marketing, printing, time & energy to meet with key stakeholders	Chace Wolf to coordinate city and state action committees, Wisconsin Oral Health Coalition	Municipalities obtain the equipment to implement and monitor fluoride. Community Posters, community presentations to city counsels, etc.	
Community Education campaign to promote fluoride. Collaborating with dentists and medical community to educate the benefits of fluoride.		Identify vulnerable living areas (i.e. mobile parks or areas of private wells)	Erica Bergstrom, County Public Health		

OBJECTIVE #4: Enhance Community Education of positive oral health practices

BACKGROUND ON STRATEGY: The oral disease burden in Wisconsin can be reduced through early education and preventive services. In addition, access to preventive and treatment services would reduce morbidity and mortality, and reduce the severity of oral disease, leading to better overall health. Improved overall health status would result in better nutrition, improved school/work attendance and performance, and enhanced interpersonal relationships. It also would facilitate the search for, and attainment of, work.

Source: Wisconsin Roadmap to Improving Oral Health

Evidence Base: N

Policy Change (Y/N): N

Activity	Target Date	Resources Required	Lead Person/ Organization	Anticipated Product or Result	Progress Notes
Best practices for Early dental development - i.e. bottles & babies, no juice, no bottles in bed	1/2017	printed materials, time & energy	Teresa Rutkowski- WIC	Parents will understand best practices	

Best practices for Maintaining good oral health - i.e. brushing and flossing teeth	1/2017	printed materials, time & energy	Chace Wolf - Seal A Smile, Michelle Genthe - Head Start	Parents and children will understand best practices
Public Awareness Campaign	12/2020	printed materials, time & energy	Oral health Coalition	Public community centers will have info and resources on how to prevent oral health disease.

ALIGN	ALIGNMENT WITH STATE/NATIONAL PRIORITIES					
Obj #	Healthiest Wisconsin 2020	Healthy People 2020	National Prevention Strategy			
1		OH-7 Increase the proportion of children, adolescents, and adults who used the oral health care system in the past year	Recommendations: (#5) Reduce barriers to accessing clinical and community preventive services, especially among populations at greatest risk.			
2	Oral Health Objective 2: By 2020, assure appropriate access to effective and adequate oral health delivery systems , utilizing a diverse and adequate workforce, for populations of differing races, ethnicities, sexual identities and orientations, gender identities, and educational or economic status and those with disabilities.	OH-17 Increase health agencies that have a dental public health program directed by a dental professional with public health training				
3		OH-13 Increase the proportion of the US population served by community water systems with optimally <i>fluoridated water</i>				
4	Oral Health Objective 1: By 2020, assure access to ongoing oral health education and comprehensive prevention, screening and early intervention, and treatment of dental disease in order to promote healthy behaviors and improve and maintain oral health					

DESCRIBE PLANS FOR SUSTAINING ACTION

- 1. Develop a coalition with diverse stakeholders who have a passion and motivation for change
- 2. Determine roles and responsibilities to address: Data collection, direct service coordination, advocacy, funding, membership, etc.
- 3. Partnership agreements
- 4. Municipality / government relations

Depression/Suicide Implementation Plan

Date Created: June 30, 2016 Date Reviewed/Updated: August 31, 2016

PRIORITY AREA:

Depression & Suicide

GOAL:

Walworth County will support suicide prevention and depression treatment by connecting residents with a range of mental health resources.

PERFORMANCE MEASURES		
How We Will Know We are Making a Difference		-
Short Term Indicators	Source	Frequency
Between Sept. 1, 2016 and Feb. 28, 2017, six months of data will be collected to	Crisis Intervention	End of 3
form a baseline of current usage of WCDHHS Crisis Intervention Services related to	Hotline Data	months;
suicide and depression. This will be followed by 6 months of promotion of crisis		end of 6
services.		
By Jan. 31, 2017 the number of participants actively working to implement this	WSPEAC and	
work plan will increase by at least 10 (from 10 to 20), in part by a merger with	community	
WSPEAC-the Walworth Suicide Prevention, Education & Awareness Coalition. The	contacts	
two groups will go forward as one under the WSPEAC name. Additional members		
will be sought.		
By Dec. 31, 2017 the number of Walworth County residents utilizing Crisis	Crisis Intervention	Annually
Intervention Services related to depression/suicide will increase by 20 percent.	Hotline Data	
By May 31, 2018 the knowledge base in the area of suicide and depression will	Pre and Post Data	Before &
increase by 100 community members.	Collection Tools	after each
		training
Long Term Indicators	Source	Frequency
By December 31 2020, the average number of suicides completed in Walworth	Vital Records Death	Annually
County will decrease by 30% or 10 or fewer per year, with zero teen suicides.	Certificates	
By December 31, 2020 the number of students reporting seriously considering	YRBS	Annually
attempting suicide will be reduced by at least 2%.		
By December 31, 2020 the number of schools in Walworth County that utilize an	Survey	Annual
evidence-based suicide prevention program will increase. Goal: To increase each		survey &
year until 100 percent participation of middle and high schools is reached by the		compile for
end of 5 years.		5 years
By Dec. 31, 2020 the knowledge base in the area of suicide and depression will	Pre and Post Data	Annually
continue to be monitored and trainings will be held to keep the number of trained	Collection Tools	
community members to 100 or more.		

OBJECTIVE #1:

By January 31, 2017, the Walworth County Suicide/Depression Prevention Work Group (which will soon merge with and take the name of WSPEAC) will increase the number of partners to 20 active participants.

BACKGROUND ON STRATEGY

Source: WC Suicide/Depression Work Group & Suicide Prevention Resource Center (SPRC)

Evidence Base:

Policy Change (Y/N): Y

Activity	Target	Resources	Lead Person/	Anticipated	Progress
	Date	Required	Organization	Product or Result	Notes
Add Walworth Suicide Prevention, Education & Awareness Coalition—WSPEAC as a partner through group merger.	9/30/16	Location and date schedule for next meeting	Heidi Lloyd, APFV Ann Witte, WSPEAC & Gateway Technical College	Firm up plans & adopt strategy to avoid duplication of efforts.	Work group & WSPEAC met jointly 7/26. All on board to merge. Next meeting Aug. 23, 2016
Add County Crisis Intervention team	9/30/16	Time commitment to discuss plan	Sonia Hill, DHHS	Have buy-in to use Crisis Team as key emergency contact & data collection	
Add School Districts	9/30/2016	Position paper	Rita Geilfuss / Elkhorn Area School District	Letter explaining need, goals, desired participation	
Add Medical Providers	11/30/201 6	Completed Power Point	WSPEAC	Add partner(s) to depression/suicid e prevention effort	
Add Counseling Centers	11/30/201 6	Completed Power Point	WSPEAC	Add partner(s) to depression/suicid e prevention effort	
Add Law Enforcement Agencies	11/30/201 6	Completed Power Point	WSPEAC	Add partner(s) to depression/suicid e prevention effort	
Add Community Volunteer Organizations	1/31/2017	Completed Power Point	WSPEAC	Add partner(s) to depression/suicid e prevention effort	
Add Faith-based organizations, from churches to agencies such as Catholic Charities & Lutheran Social Services	1/31/2017	Completed Power Point	WSPEAC	Add partner(s) to depression/suicid e prevention effort	

OBJECTIVE #2:

By May 31, 2018, five community organizations will receive presentations about depression, suicide and prevention, raising awareness about the problem and resources for help. This will include information on how depression manifests itself in different populations based on age and heritage such as teens, elderly, adults in both the Anglo and Hispanic populations.

BACKGROUND ON STRATEGY

Source: WC Suicide/Depression Work Group & Suicide Prevention Resource Center (SPRC)

Evidence Base: National Registry of Evidence-Based Practices and Programs (NREPP), sponsored by Substance Abuse and Mental Health Service Administration (SAMSHA)

Policy Change (Y/N): Y

ACTION PLAN					
Activity	Target Date	Resources Required	Lead Person/ Organization	Anticipated Product or Result	Progress Notes
Collect data regarding usage of resources in Walworth County for suicide/depression between 9/1/2016 and 2/28/2017 to form a six-month baseline.	9/1/2016 through 2/28/2017	Info from DHHS via Community Health Assessment 2016 and other sources	Maureen Callahan & WSPEAC	Summary document	Good start with info given to work group on first night from DHHS
Research evidence-based suicide prevention programs	10/31/2016	Research via Internet, health journals, media, etc.	WSPEAC	Listing of viable programs for Walworth County	
Engage People with Life Experience & Select Program	1/31/2017	Assign committee of professionals to evaluate	WSPEAC	Best solution chosen for Walworth County for a coordinated group effort	
Develop a diverse & effective community presentation, using an existing program or creating one using existing & local materials to supplement.	5/31/2017	Technology to facilitate training format	WSPEAC	Materials ready to take the message to the community	
Train speakers to make presentations, including a mental health provider	6/30/2017	Community presentation completed and in hand	WSPEAC	Trained panel of qualified speakers including someone to address mental health questions	
Create Pre-Training Survey	6/30/2017	Survey Monkey account & survey set- up	WSPEAC	Tool set to determine current knowledge base	
Develop Implementation Plan	7/30/2017	Experienced scheduler	WSPEAC	Calendar and tool created to solicit presentation dates	
Create Post-Training Survey	7/30/2017	Survey Monkey account & survey set- up	WSPEAC	Tool set to determine post-training knowledge base	
Implement FIRST program	9/31/2017	Tech resources available	WSPEAC	Incremental increases in trained professionals	
Administer Post-Training Survey	10/15/2017	Survey Monkey account & survey set- up	WSPEAC	Raw data available	
Evaluate Program Effectiveness & Adjust Presentation if needed	1/30/2018	Group member with analytical experience or access to same	WSPEAC	Stats compiled: Did training improve knowledge of depression/suicide and treatment options?	

OBJECTIVE #3:

By May 31, 2018, five of the schools located in Walworth County will have implemented an evidence-based program in the area of suicide prevention and depression education for students in grades 6 through 12.

BACKGROUND ON STRATEGY

Source: Suicide Prevention Resource Center (SPRC)

Evidence Base: National Registry of Evidence-Based Practices and Programs (NREPP), sponsored by Substance Abuse and Mental Health Service Administration (SAMSHA)

Policy Change (Y/N): Y

ACTION PLAN					
Activity	Target	Resources	Lead Person/	Anticipated	Progress
	Date	Required	Organization	Product or	Notes
				Result	
Invite all School Districts within	9/30/20	Contact list of	Rita Geilfuss / Elkhorn	Attendance at	
Walworth County to participate	16	school policy-	Area School District	Suicide/Depressio	
in the Suicide/Depression Work		makers &		n Work Group	
Group.		implementers		meeting	
Research existing evidence-	10/28/2	Contact list of	Rita Geilfuss / Elkhorn	List Serve of active	
based suicide	016	faculty/staff who	Area School District &	school staff	
prevention/depression programs		implement	WSPEAC	created; locally	
appropriate for schools		programs now		used programs	
				indentified	
Survey all Walworth County	11/30/2	Subscription to	Rita Geilfuss / Elkhorn	Body of data:	
Schools for current utilization of	016	web-based tool:	Area School District &	where suicide/	
a program		Survey Monkey	WSPEAC	depression	
				education occurs	
				and how, plus	
				perceived	
				effectiveness	
Analyze Data	12/31/2	Group member	Rita Geilfuss / Elkhorn	Summary	
	016	with analytical	Area School District &	document of	
		experience or	WSPEAC	trends	
		access to same			
Provide Statistics to School	1/31/20	Person to write	Rita Geilfuss / Elkhorn	All schools know	
Districts	17	introduction/stat	Area School District &	status	
		us of project	Heidi Lloyd, APFV		
Introduce districts to Youth	1/31/20	Qualified	Rita Geilfuss / Elkhorn	All schools have	
Behavior Risk Survey (YBRS)	17	spokesperson to	Area School District &	access to a proven	
		explain	WSPEAC	data collection	
				tool	
Provide opportunities for	2/28/20	Compilation of	Rita Geilfuss / Elkhorn	Schools identify a	
product review of programs to	17	product	Area School District &	program that will	
school districts and determine if		summaries &	WSPEAC	match their needs	
recommendation is warranted		review			

OBJECTIVE #4:

Develop a public media campaign about suicide prevention, depression awareness and options for help that addresses multiple age groups, ethnicities and cultures to reach diverse residents of Walworth County. By May 31, 2020, one hundred community members will be trained in an evidence-based suicide prevention program.

BACKGROUND ON STRATEGY

Source: WC Suicide/Depression Work Group & Suicide Prevention Resource Center (SPRC) Evidence Base:

Policy Change (Y/N): Y

Activity	Target Date	Resources Required	Lead Person/ Organization	Anticipated Product or Result	Progress Notes
Develop campaign to get the message out: Am I depressed? If so, how can I get help? Implement in phases with a push to call Crisis Intervention and increase awareness of other mental health resources.	Phase 1 Ready on 3/1/2017 (after 6-mo baseline). Phase 2 9/1/2017	Safe messaging strategy & examples	WSPEAC	Specific strategies by age group, heritage, preferred type of media, etc. Key component: cultural competence.	
Develop and implement a QPR strategic plan to train the trainers. QPR = Questions, Persuade, Refer.	12/31/20 17	Training through QPR Institute	Christine Hanson, PhD, & WSPEAC	Strategic Plan approved	
Solicit Audiences for training	1/30/201 8	Contacts, chamber lists	WSPEAC	Increased awareness of presentation potential	
Promote Events	3/31/201 8	Publicity info & relationships plus list of contacts	WSPEAC	Increased awareness there is a problem but a work group is helping find solutions	
Facilitate two presentations by May 31, 2018 and two by Oct. 31, 2018 to reach the goal of 100 trained community members by May 31, 2020	5/31/201 8 and 10/31/20 18	Presentation available in format that meets needs of individual groups	WSPEAC	Increased community awareness of depression/suicid e problem, people to advocate for help for those affected, and referrals to appropriate resources	
Collect Post-Presentation Feedback for each group, analyze it and make adjustments, if needed, to increase the effectiveness of presentations.	6/30/201 8 and 11/20/20 18	Survey Monkey account & survey set-up and/or hard- copy surveys, depending on group	WSPEAC	Tool for continual improvement of presentations	

ALIGNMENT WITH STATE/NATIONAL PRIORITIES					
Obj #	Healthiest Wisconsin 2020 Healthy People 2020 National Prevention Strategy				
1	Prevent Suicide Wisconsin	Adolescent Health			
2					
3					

DESCRIBE PLANS FOR SUSTAINING ACTION

Group will continue to meet, promote awareness and prevention, and sponsor activities related to goals.

Healthy Eating, Active Living Implementation Plan

Date Created: July 1, 2016 Date Reviewed/Updated: 8/26/2016

PRIORITY AREA: Healthy Eating and Active Living

GOAL: To improve health, fitness, and quality of life for the residents of Walworth County through daily physical activity and positive nutritional behaviors.

Performance Measures

How We Will Know We are Making a Difference		
Short Term Indicators	Source	Frequency
Decrease the percentage of adults engaging in no physical activity from 26% to 23%	Aurora Community Health	Every 3
by 2018.	<u>Survey</u>	years
Increase the percentage of adults who engage in the recommended moderate or	Aurora Community Health	Every 3
vigorous physical activity per week from 48% to 51% by 2020.	<u>Survey</u>	years
Increase the percentage of population with adequate access to locations for physical activity from 60-64%.	<u>County Health Rankings</u>	Annually
Improve the food environment index score from 8.1 to 8.7 in Walworth County by	Aurora Community Health	Every 3
2019.	<u>Survey</u>	years
Decrease the percentage of Walworth County residents experiencing food insecurity	Aurora Community Health	Every 3
to 8% by 2019.	<u>Survey</u>	years
Improve the number of adults eating 2 or more servings of fruits from 60% to 63%	Aurora Community Health	Every 3
by 2020.	<u>Survey</u>	years
Improve the number of adults eating 3 or more servings of vegetables from 23% to	Aurora Community Health	Every 3
25% by 2020.	<u>Survey</u>	years
Increase the number of schools with school gardens in Walworth County from 3 to 9	Assessment from HEAL	By 2020
by 2020.	subcommittee	
Long Term Indicators	Source	Frequency
Increase the percentage of residents who consider Walworth county to healthy or	Aurora Community Health	Every 3
very healthy from 28.2% to 31% by 2020.	<u>Survey</u>	years
Increase the percentage of the Hispanic/ Latino population in Walworth County with	Wisconsin Department of	Every 3
a healthy BMI from 31.2% to 34%.	Health Services. WISH System	years
Decrease the percent of the population classified as obese from 25% to 24% by	County Health Rankings	Annually
2020.		
Decrease the percent of the Hispanic/Latino population reporting diabetes as a	Walworth County Community	Every 5
health concern for the community from 100% to at least less than 75%	Health Survey	years

Objective 1: Increase accessibility to culturally competent diabetes education in at least 5 of the municipalities in Walworth County by December 1, 2020. BACKGROUND ON STRATEGY Source: What Works for Health- Policies and Programs to Improve Wisconsin's health Evidence Base: Some Evidence

Policy Change (Y/N): No

ACTION PLAN					
Activity	Target	Resources Required	Lead Person/	Anticipated Product	Progress Notes
	Date		Organization	or Result	
Collaborate with churches in	1/1/2017	Time for meetings/	Valerie to work	Guidance for group to	
Milwaukee who have initiated		possible travel	with County Health	proceed with	
diabetic education programs to			Prevention grant	implementation of	
learn steps taken and what helped				similar educational	
to foster successful programs.				opportunities.	
Outreach to county churches	3/1/2017	buy-in from local church	Valerie to work	Collaboration with	
specifically with high percentage of		members	with County Health	community churches	
Hispanic/ Latino members to			Prevention grant	to initiate education	
discuss implementation of				programs	
program, need to volunteers to					
lead groups					
Training of volunteers from	6/1/2017	Volunteer from local	Valerie to work	Creation of competent	
churches to lead education groups		healthcare of county	with County Health	group leaders within	
		health department to	Prevention grant	communities	
		provide education to			
		volunteer group leaders			
Initiate one church/community	1/1/2018	Fully trained leaders,	Valerie to work	Quality improvement	
based education program		adequate participant	with County Health	process on class prior	
		numbers	Prevention grant	to implementation in	
				other locations	
Discussion with local parks and rec	3/1/2018	Volunteer from local	Melissa will	Creation of competent	
departments regarding inclusion of		healthcare of county	oversee	group leaders within	
free diabetic education classes		health department to	collaboration with	communities	
geared toward Hispanic/ Latino		provide education to	Parks and Rec		
population.		volunteer group leaders	departments		
Collaborate with Delavan-Darien	06/2019	Time, buy in from key	Valerie to	Increase in knowledge	
Community Alliance to ensure		stakeholders at the	coordinate with	of positive nutritional	
culturally competent diabetes		DDCA	Delavan-Darien	behaviors	
education is included on the			Community		
resource website			Alliance		

Objective 2: By 2020, at least one school in each school district will meet the standards of enhanced physical education programs.

BACKGROUND ON STRATEGY

Source: What Works for Health- Policies and Programs to Improve Wisconsin's health, The Community Guide Enhanced Physical Education Programs

Evidence Base: Scientifically Supported

Policy Change (Y/N): Yes

ACTION PLAN					
Activity	Target	Resources Required	Lead Person/	Anticipated Product	Progress Notes
	Date		Organization	or Result	
Investigate current physical	1/1/2017	Time of group	Melissa will work	Knowledge of quality	
education programs within variety		member,	with county school	of current physical	
of county schools.		transportation,	district	education programs to	
		availability and	representatives	determine if changes	
		willingness of schools		can be made to	
		to meet with group		improve these	
		member		programs to help	
				children and	
				adolescents reach	
				adequate levels of	
				physical education	

Meeting of group members to review current PE programs and compare to outline of Enhanced physical education programs (http://www.thecommunityguide. org/pa/behavioral- social/schoolbased-pe.html).	1/1/17	Time of group members	Melissa will work with county school district representatives	Better knowledge of changes needed to meet standards of Enhanced school based education programs.	
Collaborate with districts and encourage changes that would help schools meet standards of Enhanced physical education programs	1/1/2018	Time of group member(s), willingness of school district to implement changes to physical activity programs, policy changes (?)	Melissa will work with county school district representatives	Improved physical education programs	

Objective 3: Create or promote at least one new opportunity for physical activity for individuals under the age of 18 in 5 municipalities in Walworth County.

BACKGROUND ON STRATEGY

Source: What Works for Health- Policies and Programs to Improve Wisconsin's health

Evidence Base: Scientifically Supported

Policy Change (Y/N): No

ACTION PLAN					
Activity	Target Date	Resources	Lead Person/	Anticipated Product	Progress Notes
		Required	Organization	or Result	
Implementation of Unicef kid	1/1/2018	Financial,	Collaboration with	Increased physical	
power program with school		collaboration with	Elkhorn Youth	activity of children	
districts or community programs		Unicef and	Center	involved with program	
that target high risk children		communities			
Collaborate with local churches	1/1/17	Time of group	Collaboration with	Knowledge of current	
and park and rec departments to		member and	local park and rec	availabilities for	
inventory what programs are		cooperation/	departments	physical activity to	
available at what cost and how		willingness of		individuals under age	
they can be expanded to be more		community		18 to guide how	
inclusive		organizations		programs can be	
				expanded to be more	
				inclusive	
Collaborate with churches and	1/1/18	Time of group	Collaboration with	More inclusive/	
parks and rec departments to		member and	local park and rec	accessible programs to	
implement changes to make		cooperation/	departments	allow individuals under	
activities more inclusive		willingness of		18 to increase physical	
		community		activity	
		organizations,			
		financial (?)			
Provide education regarding	Create plan	Time, financial,	Collaborate with	Decreased use of	
recommendations of limited	by 6/1/17 and	coordination with	Lake Geneva YMCA	screen time for	
screen times for individuals under	implement	stakeholders		individuals under 18	
18 and provide ideas for alternate	throughout				
activities					

Objective 4: Create or promote at least one new opportunity for physical activity for adults in 5 municipalities in Walworth County.

BACKGROUND ON STRATEGY

Source: What Works for Health- Policies and Programs to Improve Wisconsin's health

Evidence Base: Scientifically Supported

Policy Change (Y/N): No

Activity	Target	Resources Required	Lead Person/	Anticipated Product	Progress Notes
	Date		Organization	or Result	
Take inventory of fitness programs in county including cost.	1/1/17	Time of group member	Melissa Miller	Assessment of what resources are available to guide implementation of new opportunities or make existing opportunities more accessible.	
Work with existing programs to include more opportunities and increase accessibility to programs.	1/1/18	Time of group, willingness of community organizations, financial (?)	Melissa Miller with work with YMCA and Parks and Rec	Increase accessibility to physical opportunities for adults to increase time spent being physically active amongst adults	
Creation of electronic and paper copies of walking paths, parks, dog parks, and bike trails in county	1/1/17	Time, financial	Collaborate with Delavan-Darien Community Alliance	Product that will increase knowledge of available resources in county	
Distribute copies (paper) and information regarding electronic format of above document county wide by working with libraries, stores, restaurants, community events.	1/1/18	Time, collaboration and connection with community stakeholders.	Collaborate with Delavan-Darien Community Alliance and Home Health Care	Increased knowledge amongst the community regarding accessibility to physical fitness and increase percentage if individuals engaging in physical activity.	
Take inventory of how many schools offer open access to community members to fitness facilities (track, weight room, pool) in county	1/1/17	Time	Melissa Miller	Knowledge of resources currently available to community to	
Work with schools who currently allow access to fitness facilities to expand access (hours, days, etc.) and those who do not allow access currently to allow access to community members	1/1/18	Buy-in from school boards, administrators	Melissa Miller	Increased accessibility to physical fitness facilities	
Provide community members with knowledge of available physical fitness facilities	3/1/18	Time, financial	Melissa Miller and Delavan-Darien Community Alliance	Increased access/utilization of physical fitness facilities	

Objective 5: Increase access to healthy food by creating 6 additional school gardens in Walworth County by 2020.

BACKGROUND ON STRATEGY

Source: Wisconsin Obesity Prevention Program: Nutrition, Physical Activity, and Obesity State Plan Evidence Base: <u>School fruit & vegetable gardens</u> are a scientifically supported intervention. Policy Change (Y/N): Work with school districts to add to curriculum and programming.

ACTION PLAN

Activity	Target Date	Resources Required	Lead Person/ Organization	Anticipated Product or Result	Progress Notes
Meet with local schools and UW- Extension to determine interest and current activities.	10/1/2016	Stakeholders from UW Extension and local schools	Valerie Vargas	Increased collaboration to start school gardens	
Investigate and apply for funding opportunities to purchase supplies for the school gardens.	1/1/17	Time	Valerie Vargas and UW – Extension	Funding to begin school gardens	
Collaborate with local school stakeholders to establish school gardens	06/2020	Collaboration with local schools	UW – Extension, local school leaders	Increased consumption of healthy food and exposure to healthy food	
Collaborate with local school and farmers to promote the use of locally grown food in schools.	06/2020	Collaboration with local schools	Twin Barns Project, UW-Extension, UW-Sustainability Office	Increased consumption of healthy food and exposure to healthy food	

Objective 6: By 2020 introduce a Point-of-Purchase nutrition campaign at convenience stores, restaurants, or grocery stores in the major municipalities of Walworth County.

BACKGROUND ON STRATEGY

Source: http://www.countyhealthrankings.org/policies/point-purchase-prompts-healthy-foods

Evidence Base:

Policy Change (Y/N): Yes

Activity	Target Date	Resources Required	Lead Person/ Organization	Anticipated Product or Result	Progress Notes
Investigate <u>The Food Trust toolkit</u> and other Point of Purchase campaigns to determine which is best suited for Walworth County	06/2017	Time	UW-Whitewater Wellness staff	Determination of a point of purchase campaign	
Investigate possible incentives that would encourage participation in the program	06/2017	Time	UW-Whitewater Wellness staff	Determination whether incentives would be an option	

Meet with convenience stores, restaurants, and grocery store owners to discuss barriers to having healthy options and encourage participation in the nutrition campaign.	06/2017	Engagement from local store owners	UW-Whitewater Wellness staff, local restaurant and business owners	Multiple store owners will choose to participate in the program	
Provide support to convenience stores, restaurants, and grocery store owners in continuing the campaign	06/2020	Time	UW-Whitewater Wellness staff, local restaurant and business owners	Store owners will continue their participation in the program.	

ALIGN	ALIGNMENT WITH STATE/NATIONAL PRIORITIES						
Obj #	Healthiest Wisconsin 2020	Healthy People 2020	National Prevention Strategy				
1	Chronic disease prevention and	D1-5 and D14					
	management Objective 2 and 3						
2	Physical activity Objective 1 and 2	PA 1,2	Recommendations 1-3				
3,4	Physical activity Objective 1	PA 3,4,8,13,14	Recommendation 1,3				
5,6	Adequate, Appropriate and Safe	NWS-2, NWS-14	Recommendation 1-4				
	Food and Nutrition Objective 1						
5	Adequate, Appropriate and Safe	NWS-12, NWS-13, NWS-15,	Recommendation 1-4				
	Food and Nutrition Objective 2						

DESCRIBE PLANS FOR SUSTAINING ACTION

Activities involve community members and organizations, and policy change which allows for sustainability. HEAL objectives will be incorporated into the BRIGHT group. New participants will be recruited into the group, growing the size of the network, and new leaders will be selected every year, allowing for group sustainability without burnout.

