

In collaboration with:





2020-2022 Juneau County Community Health Improvement Plan

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Acknowledgements

The Central Wisconsin Health Partnership

To better meet the needs of the community, the Juneau County Community Health Improvement Plan was developed in collaboration with the Central Wisconsin Health Partnership (CWHP). The CWHP is a consortium covering a six-county region, including Adams, Green Lake, Juneau, Marquette, Waupaca, and Waushara counties. The partnership includes county human services and public health departments, a federally qualified health center, and other interested healthcare advocates and providers in the region.

The partnership worked together to complete the 2016 Community Health Assessment and as a result, identified key areas that needed improvement in all six counties. Addressing these health priority areas in a regional Community Health Improvement Plan allows for better sharing of ideas and resources to determine best practices for improving the health of the individual counties and the entire region.

The Juneau County Health Department, in partnership with Mile Bluff Medical Center, held a community forum in February 2019 to collect community input on current health priorities. Community members and organizations were invited in, and priorities were updated to reflect this midpoint assessment.

Our Community Partners

Collaboration with community members, along with the Central Wisconsin Health Partnership, is vital for the development and implementation of the Community Health Improvement Plan. We would like to thank all the county citizens and partners for attending meetings, providing data, completing surveys, and sharing their concerns and ideas on how to improve the health of Juneau County. This document would not be complete without the input received from community members.

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- Substance Abuse Free Environment (SAFE) in Juneau County Coalition
- Juneau County Child Death Review Team
- Juneau County Suicide Prevention Coalition
- AmeriCorps Farm to School
- Women, Infants and Children (WIC)
- Fit Families
- Nurse Family Partnership Program
- Breastfeeding Peer Counselor Program
- Farmers Market Nutrition Program
- All Juneau County School Districts
- Mile Bluff Medical Center
- Juneau County Economic Development Corporation
- University of Wisconsin-Extension



Executive Summary

Where we live, learn, work, and play affects our health. Regularly, local health departments are required to assess the health needs of the communities they serve and develop a plan to address those needs. The 2020-2022 Community Health Improvement Plan provides the framework for improving the health of Juneau County. It also helps to create a shared vision between the Health Department and community partners so that together we can create positive, measureable change in our communities.

The Juneau County Community Health Improvement Plan is unique in the fact that it was written in collaboration the Central Wisconsin Health Partnership (CWHP) with regional goals and objectives. Mental Health and alcohol, tobacco and other drug abuse (ATOD) are top health concerns for many neighboring rural counties, which drives the need for change beyond the community and county levels. As a result, the goals and objectives under the Mental Health and ATOD priority areas will be addressed regionally through the work of the CWHP, as well as locally by community partners and coalitions. The county specific priority areas, Health Equity, Obesity, Nutrition & Physical Activity and Healthy Aging, will be addressed primarily at the county level through the Health Department and community partners and organizations.

Select goals and objectives listed under each priority area were strategically chosen to align with the State of Wisconsin Health Improvement Plan. By aligning with the state plan, we will not only help improve the health of our county, but we will also be able to help advance the efforts being made to make Wisconsin the healthiest state to live. A wide range of strategies to improve health outcomes is included for each priority area to give community partners the opportunity to implement the strategies that will work best for their organization.



Community Health Improvement Process



Statutes have required communities throughout Wisconsin to develop and implement local health plans to address health conditions affecting their residents. This process has been referred to as

improvement process. The community

health improvement process has two major phases: 1) the Community Health Assessment (CHA) and 2) the Community Health Improvement Plan (CHIP). These two processes work together to assess the unique needs of the community and allows communities to work collaboratively to address the identified health needs.

The Take Action Cycle

The six counties in the Central Wisconsin Health Partnership began the community health improvement process in 2015 when the Community Health Assessment was started. The overall health improvement planning process follows the Wisconsin Guidebook on Improving Health of Local Communities. This framework is built on the Take Action Cycle Model developed by County Health Rankings and Roadmaps. The following information outlines each step of the process.

CHA Timeline

April 2016-

Secondary data gathering, community outreach

June-August 2016-

Health surveys, key informant interviews, focus groups conducted

November 2016-

Complete CHA, present to coalitions and Board of Health

February 2019-

Community forum held to update health priorities

-May 2016

Primary and secondary data analysis, review additional data, consolidate data

-September 2016

Community forum held to select health priorities

-January-February 2019

Assess progress in priority areas and core data measures



Assess Needs and Resources

The Community Health Assessment is a collaborative process of systematically collecting and analyzing health data to examine the health status of the community, as well as identify priority health concerns for the population. The 2016 Community Health Assessment was completed in collaboration with the Central Wisconsin Health Partnership as a regional assessment with county specific data. The data for the health assessment was drawn from multiple primary data sources such as communicable disease reports, death records, local provider numbers, hospital admissions, and the Youth Risk Behavior Survey. Secondary data from sources such as County Health Rankings, Wisconsin Department of Health and Human Services, and the U.S. Census Bureau were analyzed as well. This data, along with community input gathered from focus groups, surveys, and key informant interviews, was used by people attending the community forums held on September 19th, 2016 and February 26th, 2019 to determine the health needs of the county.

The 2019 forum was attended by 39 individuals representing a broad group of county stakeholders including: schools; faith-based; community organizations; employers and business; medical, dental and mental health providers; citizens; government; and media. The midpoint forum is held to better coordinate the Juneau County Community Health Improvement Plan with Mile Bluff Medical Center's community needs assessment planning and implementation.

Based on the secondary data provided, (presentations from local stakeholders, key informant summaries, and the community health needs assessment survey results) people attending the forum agreed to the following health priorities through a nominal group process using the following criteria:

- 1. The magnitude of the problem
- 2. The severity of the problem
- 3. If there was a high need among a vulnerable population (health equity)
- 4. The community's capacity and/or willingness to act on the problem

Chosen health priorities adopted in February 2019 are:

- 1. Alcohol, Tobacco, and Other Drugs (ATOD)
- 2. Physical Activity, Nutrition and Obesity
- 3. Mental Health
- 4. Healthy Aging
- 5. Health Equity



Choose Effective Policies and Programs

Effective, evidence-based or best practice strategies are instrumental in meeting the identified goals and objectives for each priority area. The steering committee worked to identify a variety of potential strategies to align with each goal and objective for the priority areas. The steering committee used a variety of different databases, such as "What Works for Health" and "The Community Guide," to search for evidence-based and best practice strategies for the different priority areas. The final selection of the potential strategies included in this document was based on numerous factors such as



evidence, community resources, health equity and community input and readiness. More information about the chosen strategies can be found under the goal page for each priority area.

Act on What's Important

Each of the six CWHP counties will be responsible for determining what program and policy implementation looks like in their own county. Although there are regional goals and objectives that the group will work on collaboratively, each county has unique strengths and challenges that must be considered when implementing health improvement strategies. Each county, along with their coalitions and community members, will define what they want to achieve under each priority area and how they will achieve it.

Measure Success

Measurable goals have been identified for each priority area to show impact and track progress. Objectives under each goal will be measured through short-term indicators that will be monitored and updated annually. To achieve these objectives, several strategies may be implemented. These strategies will be monitored through

the performance management of the coalitions and community partners who will complete the activities. Measuring every



level of the plan will allow for accountability and for the monitoring of the effectiveness of the selected strategies throughout the three-year plan.

Work Together

Everyone has a key role to play when it comes to improving the health of a community. As part of the community health improvement process, a variety of community members and key stakeholder agencies were engaged throughout the community health assessment and improvement planning process. Community member input was gathered in the form of community surveys and key informant interviews during the "Assessing Needs and Resources Phase" of the Take Action Cycle and again in the "Choose Effective Policies and Programs" phase. Community input was the primary driver for determining the health priorities and strategies detailed in this document. Key policy makers, including members of the Juneau County Board of Health, were also engaged and updated throughout the health assessment and improvement planning process. Community Health Assessment findings were shared with these key policy makers and they were asked to support health improvement efforts at the local and state levels. Finally, it is the hope of the Central Wisconsin Health Partnership that by working together on developing a regional health improvement plan, coordinated efforts can be established to improve health across county lines in Central Wisconsin.

Communicate

Communication is an ongoing part of the Take Action Cycle and is vital to ensuring that key stakeholders and policymakers are kept updated on the community health improvement process and progress toward goals and objectives.

The Juneau County Health Department reports progress to the public for each of the priority areas via annual reports, website updates, and community forums.



2016 Community Health Assessment Key Findings

The following sections provides a review of the key findings from the 2016 Community Health Assessment. The full Juneau County report can be found on the Juneau County Public Health website.

Demographics and Determinants of Health

Juneau County is located in Central Wisconsin as serves as a home to approximately 26,224 residents, according to the 2016 Census Bureau Estimates. The varying demographic and socioeconomic status of Juneau County residents contributes to health vulnerabilities and disparities in certain populations, including the following:



· · · · · Age Composition

The population in Juneau County and the other CWHP counties is aging. Currently, 19.5% of Juneau County residents are over age 65. That number is expected to increase to 30% by the year 2030. With an aging population comes a unique set of challenges, such as social isolation and shifting health needs of the community.



Average Annual Wage



The average wage for those in CWHP counties is \$35,000 annually. This is over \$10,000 dollars less than the Wisconsin average. Having a lower income is linked to poorer health outcomes.

Educational Attainment



CWHP counties have a lower number of adults with any form of formal education past high school. This measure is important to consider as the relationship between higher education and improved health outcomes is well know.



Access to Care

Access to healthcare services is critical to good health outcomes. Access to care includes measures such as uninsured rates and local care options. The majority of CWHP counties all have fewer health, dental, and mental health care providers per 1,000 people when compared to the state average.



2016 Community Health Assessment Key Findings

The following sections provides a review of the key findings from the 2016 Community Health Assessment. The full Juneau County report can be found on the Juneau County Public Health website.

CWHP Health Snapshot

ADULT SMOKING RATE



27%

Tobacco use is linked to a variety of chronic diseases. The smoking rate among CWHP adults is higher than the Wisconsin state average.

HEART DISEASE





Heart disease is the leading cause of death in all CWHP counties.

EXCESSIVE DRINKING



23%

Similar to the state average, CWHP counties have an adult excessive drinking rate that nearly doubles that of top U.S. performers.



OBESITY RATES

31%

The average adult obesity rate for the six CWHP counties, which is higher than the state average at 29%.

Juneau County Key Informant Interview Results

Community Strengths

- · Timely access to health care
- Improvement in high school graduation rates
- · Increased walking and biking paths
- Knowledge of the importance of vaccinations
- · Access to many different outdoor activities
- · Access to fresh food and farmer's markets

Community Challenges

- High prevalence of fast food and limited healthy restaurants
- Increasing rates of obesity and poor nutrition
- High prevalence of tobacco and alcohol use
- Limited access to dental care and mental health services
- High incidence of poverty
- Shortage of support programs for a variety of residents
- · Lack of affordable food at grocery stores
- Poor economic stability
- Many residents struggle to meet basic needs



Highlighted Accomplishments from 2016-2018 CHIP

Alcohol & Other Drug Abuse

- Expanded permanent drug disposal sites to 6 throughout the county
- Mile Bluff Medical Center updated their opioid prescribing policy to match CDC guidelines
- Launched the county's alcohol compliance check program in 2018
- Received Drug Free Communities grant funding for five years starting October 2018
- Distributed over 200 prescription lock boxes

Mental Health

- Two Health Department staff trained in Question, Persuade, Refer (QPR)
- Mettie Spiess, from A World
 Without Suicide, spoke to over 800
 Mauston School District Students
- Participated in 6 community outreach events
- Juneau County has an active Child Death Review Team
- Host annual Suicide Prevention
 Walk and Survivors of Suicide
 Event

Health in all Policies

Tobacco

- Mauston FACT youth led 30+ peer-to-peer educational activities
- Juneau County Housing Authority, Mauston Housing Authority, & Lemonweir Villas adopted smokefree housing policies
- Hosted two presentations on the connections of tobacco use and behavioral health conditions
- Conducted 10 presentations on ecigarettes and other tobacco products

Obesity, Nutrition & Physical Activity

- Farm to School program expanded from 2 school districts to all 5
- Completed nutrition education in 10 classrooms
- Harvest of the Month tastings started in all five school districts
- 60+ children annually participate in Fit Families by setting goals for nutrition and physical activity
- 60+ older adults annually participate in the evidence-based Strong Bodies



2020-2022 Health Priority Areas

- 1. Mental Health
- 2. Alcohol, Tobacco, and Other Drug (ATOD) Abuse
- 3. Obesity, Nutrition, and Physical Activity
- 4. Healthy Aging
- 5. Health Equity

Defining Goals, Objectives, and Strategies

To help create a shared vision among stakeholders, community members, and partners, each priority area has identified goals, objectives, and strategies listed to help guide the work being done. Measurement is important to help assure progress is being made towards community health goals and objectives. Data gaps exist in some priority areas and work is needed address these gaps.

GOALS

The priority area goals are broad statements that provide the long-term vision to guide program objectives and strategies. The goals for the mental health and ATOD priority areas have been adopted by all six CWHP counties in an effort to help create regional change in Central Wisconsin. Goals will be monitored using the long-term indicators that are listed under each priority area.

OBJECTIVES

In addition to each goal, there are identified objectives to further refine community priorities and activities. The main difference is that the objectives are more specific, measurable, and



identify a timeline for completion. The objectives are set with the intention to help reach the goals. Objectives will be monitored using the short-term indicators listed.



STRATEGIES

For each objective listed under the priority areas, there is a list of potential evidence-based strategies that can be implemented to help meet those objectives. A variety of strategies are listed for each objective to allow community coalitions and stakeholders the flexibility to adopt and implement the strategies that will work best for them.

The list of potential strategies included with each goal and objective is not an exhaustive list. More information on evidence-based strategies that improve health can be found using the resources listed below:

- Guide to Community Preventive Services http://www.thecommunityguide.org/
- Healthy People 2020 Evidence-Based Resource Tool http://healthypeople.gov/2020/implement/EBR.aspx
- Winnable Battles
 http://www.cdc.gov/winnablebattles/
- Health.gov
 http://www.health.gov/
- What Works for Health (County Health Rankings)
 http://www.countyhealthrankings.org/roadmaps/what-works-for-health
- National Registry of Evidence-based Programs and Practices (SAMHSA) http://nrepp.samhsa.gov/



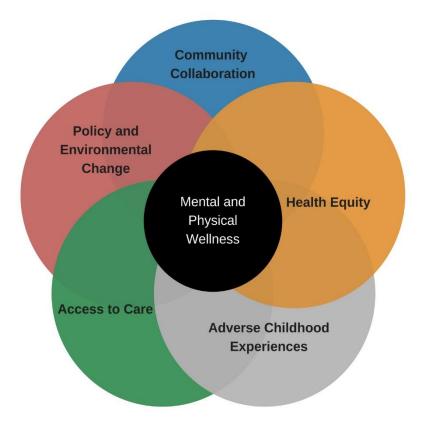
Overarching Themes

During the process of selecting health priority areas for the CHIP, cross-cutting themes were identified that have an impact on all aspects of health. These themes expanded beyond the scope of just one health priority area. For this reason, CWHP counties decided to select five overarching themes to focus on while choosing goals, objectives, and strategies to guide our work. These overarching themes include: Access to Care, Adverse Childhood Experiences (ACEs), Health Equity, Community

Collaboration, and Policy, Systems and Environmental Change. These themes have been chosen to work on in conjunction with the identified health priorities in each CWHP county.

Access to Care

Having adequate access to health care services is an important part of promoting and maintaining health, prevention of disease, and reducing unnecessary disability and death. Access to health care has a direct impact on an individual's overall physical, social, and mental health status and quality of life.



Access to health services includes entry into the health care system (usually through insurance coverage), accessing a specific location where health care services are provided (geographic location), and finding a health care provider the patient can trust and communicate with. When considering access to health care, it is important to also include oral health care and obtaining necessary prescription drugs (Healthy People 2020).



Adverse Childhood Experiences

Our health is not determined by our genetics alone. The choices we make, environment in which we live, and our experiences all play a part in our health. The positive and negative experiences we have during childhood have a lasting effect on our health and well-being, even into adulthood. Adverse childhood experiences (ACEs) are potentially traumatic events that can have negative, lasting effects on health and well-being. These experiences range from physical, emotional, or sexual abuse, to parental divorce or the incarceration of a parent or guardian (Child Trends, 2014). The negative health effects of ACEs can be lessened when people have a strong support system and the skills to successfully cope with life's many challenges. This is called resilience, and it's something children learn best when they've been given the following positive supports:

- Caring relationships with parents, teachers, counselors, or other adults actively involved in child's life
- Good peer relationships
- Positive disposition
- Positive coping style
- Good social skills

Building resilience is a lifelong process. Even in adulthood, learning how to adapt to change and recover from setbacks can mean thoughtfully considering behavior and attitudes, learning from the past and finding healthy ways to cope with daily stress (ACEs, Wisconsin Department of Health Services).

Healthy Equity

Healthy People 2020 defines health equity as the "attainment of the highest level of health for all people." It means that efforts are put in place to ensure that all people have full and equal access to opportunities that enable them to lead healthy lives, despite race, ethnicity, gender, or socioeconomic status. Everyone deserves a fair chance to lead a healthy life. No one should be denied this chance because of who they are or their socio-economic opportunities. Approximately 40% of factors that influence health, according to the University of Wisconsin Population Health Institute, are social and economic in nature. Focusing on health equity in our work will allow people in CWHP counties to have a better quality of life no matter where they live, work, learn, and play.



Community Collaboration

Collaboration is the focus of our work in public health. The community issues that we work to solve and emerging problems that our communities face can't easily be solved by one group alone. We rely on working together with community members, agencies, organizations, and individuals to solve community issues together. As we work together, we increase the capacity of our communities to make changes that improve outcomes while learning to communicate effectively as a team. We are all in this together.

Policy, Systems and Environmental Change

Policy, systems and environmental (PSE) change is a new way of thinking about how to improve health in our communities. For a long time, many health programs have focused on individual behaviors with the assumption that if you teach people what will make them healthy, they will find a way to make those changes. Now we understand that health is not just about individual choices. It's not enough just to know how to be healthy – we need to have practical, readily available options around us. This is where PSE change comes into play. PSE change is a way to modify the environments around us to make healthy choices easier, more practical, and available to all members of our communities. By changing laws and shaping physical landscapes, a big impact can be made in a short amount of time with fewer resources used. When we change policies, systems and/or environments, communities are better able to work together to tackle issues, such as addiction and chronic disease.



Priority Area: Mental Health

Mental health can be defined as a state of well-being in which every individual realizes his or her own potential, can cope with the normal stressors of daily life, and is able to make a contribution to his or her community (WHO-4). Health is a state of complete physical, mental, and social well-being and not merely the absence of disease. Mental health is influenced by many different determinants such as poverty, stressful work environment, discrimination, poor physical health, and an unhealthy life style (WHO-4). Children are an especially vulnerable population that is at risk for potentially being negatively impacted by parents or family members suffering from mental illness. When children experience adverse childhood events (ACEs), they are more likely to experience poor mental health later in life and often suffer from illnesses such as depression and anxiety. Treating mental illness can be quite challenging, especially in rural areas. Limited access of mental health services, social isolation, and fear of stigmatization are factors that make treating mental illness challenging. Individuals who suffer from mental illness are at an increased risk for suicidal thoughts, ideations, and attempts (NAMI). Enhancing protective factors can help create a more resilient and supportive community and create a foundation of emotional well-being from the earliest stages of life.

Snapshot of Juneau County

0.91

per 1,000 people

Juneau County only has about **0.91 mental health** providers for every **1,000** residents.

Source: 2018 County Health Rankings

#3

Mental Health was the third top health concern by the 2016 Key Informant Respondents with reference to anxiety and depression in both youth and adults.

Source: 2016 Community Health Needs
Assessment

42

In 2018, there were 42 emergency detentions, chapters, and involuntary hospitalizations in Juneau County. Source: Department of Health and

Human Services



Juneau County has a higher than average suicide rate at **20.1 per 100,000 people**

Source: 2016 Community Health Needs Assessment



GOAL:

Improve mental health and decrease suicide rates in Juneau County.'

OBJECTIVE 1: By December 31st, 2020, increase community awareness of suicide prevention efforts and support services.

Build community resilience by expanding messages of suicide prevention protective factors

Expand Suicide Prevention Coalition membership to include a broad range of community stakeholders

Increase participation in annual suicide prevention walk

Conduct and analyze a community partner suicide prevention survey

OBJECTIVE 2: By December 31st, 2022, increase access to behavioral health services in Juneau County.

Support innovative and evidence-based ways to expand access to behavioral health services, including technologies (such as smartphone apps and telehealth) and peer-led or other non-clinical support services

Increase youth engagement in suicide prevention efforts within school districts and the community at large

Promote a systematic "Zero Suicide" approach to suicide prevention in health and behavioral health care organizations

OBJECTIVE 3: By December 31st, 2022, increase and enhance community protective factors.

Create a community center to encourage social connectedness and behavioral health services
Review all deaths by suicide annually and compile prevention recommendations
Reduce access to lethal means through drug take back events and safe medication and firearms storage
Promote coalition membership, protective factors and gatekeeper trainings at community supper events

OTHER COMMUNITY STRATEGIES

Trauma Informed Care Training Social cohesion and connectedness Recreational and social clubs Adverse Childhood Experiences (ACEs) Trainings Community Conversations on Mental Health Topics Support Groups

¹ Measured by emergency room visits and hospitailization related to mental health/suicide on Wisconsin Interactive Statistics on Health (WISH) annually



Priority Area: Alcohol, Tobacco, and Other Drug (ATOD) Abuse

Alcohol, tobacco, and other drug (ATOD) abuse creates a significant burden on both the state and Juneau County. With the recent introduction of e-cigarettes, the continued culture of excessive drinking, and the constant fear of opioid overdose, poor health outcomes and increased loss of lives is an ongoing obstacle. In Juneau County, 16% of all deaths are smoking related, and even though cigarette smoking has reached an all-time low, there has been a significant increase of the use of e-cigarettes, especially among youth. Data from the 2018 Wisconsin Youth Tobacco Survey showed current e-cigarette use jumped 154% among high school students from 2014-2018. Looking at other addictive substances, alcohol and other drug abuse was the #1 overall health concern in the 2016 key informant survey. 2018 County Health Rankings put Juneau County's excessive drinking rate at 25% and alcohol impaired drinking deaths at 36%. Additionally, the Juneau County Coroner reported a 300% increase in accidental overdoses from 2013-2017, with half being caused by alcohol. ATOD abuse can be harmful to individual and community health. It interrupts lives and introduces trauma and other health concerns, placing a heavy burden on Juneau County residents.

1

Tobacco use remains the single most preventable cause of death and disease in the U.S.



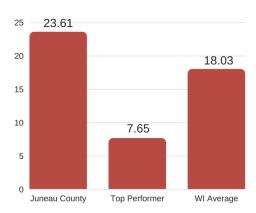
In 2016, almost 3 out of 5 Juneau County Residents agreed or strongly agreed to knowing people who partake in unhealthy alcohol use and behaviors such as drinking and driving, drinking while pregnant, and underage drinking.

Source: Community Health Needs
Assessment Survey



In Juneau County, **over 1 in 5** pregnant mothers smoked during their pregnancy which is nearly 10% greater than the state average.

Source: County Health Rankings



Juneau County is ranked 3rd in the state for the highest dosage of opioid RXs per capita, at 23.61, compared to the state's best performer at 7.43.

Source: WI PDMP, Quarter 4 of 2018



GOAL:

Decrease alcohol, tobacco, and other drug misuse and abuse in Juneau County '

OBJECTIVE 1: By December 31st, 2020, 100% of Juneau County alcohol retailers will be in compliance with state statute and not sell alcohol products to minors.²

Educate retailers on how to properly check an ID

Establish and offer Responsible Beverage Server (RBS) Training to all Juneau County alcohol retailers

Conduct compliance checks twice a year with law enforcement, following best practices

Follow up with each retailer with compliance check results and provide resources for training staff

Share results with municipalities that have alcohol license point system

Publicly acknowledge and thank retailers who keep youth safe by refusing underage sales

OBJECTIVE 2: By December 31st, 2021, all five Juneau County school districts will adopt and enforce a comprehensive tobacco and nicotine free campus policy. ³

Conduct meetings with school leaders about tobacco/nicotine free policies

Conduct presentations with parents and teachers on the variety of tobacco and nictoine products that youth are using

Assist school boards in updating their school tobacco/nicotine free policies

Assist schools in enforcement of policy that supports restorative justice and cessation of to bacco/nicotine products

Ensure schools have appropriate signage to notify students, staff, and visitors of policy

OBJECTIVE 3: By December 31st, 2022, the number of opioid-related emergency room (ER) visits will decrease from 12 ER visits per 100,000 to 8 per 100,000. ⁴

Implement county wide educational campaign

Host at least 6 drug take back events each year

Provide secure in-home prescription drug boxes to residents

Provide trainings to county dentists on the Prescription Drug Monitoring Program (PDMP)

Support the adoption of opiate prescribing guidelines based on CDC recommendations

ADDITIONAL COMMUNITY STRATEGIES

Drug Treatment Court
Naloxone Education and Distribution
SBIRT (Screening, Brief Intervention, and Referral to Treatment)

Alcohol Access Restrictions in Public Places Protect Clean Air in Public Spaces Including Vaping Wisconsin Nicotine Treatment Integration Project Smoke-Free Multi-Unit Housing

- ¹ Measured by reported 30 day use in Youth Risk Behavioral Survey on odd number years
- ² Measured by Juneau County Compliance Checks conducted annually by SAFE in Juneau County and Juneau County Sheriff's Office
- Measured by South Central Wisconsin Tobacco Free Coalition annually
- ⁴ Measured by WI DHS Opioid Direct Reports annually



Priority Area: Obesity, Nutrition, and Physical Activity

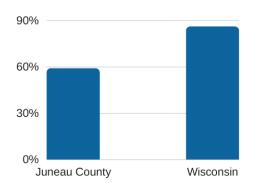
Obesity is an important risk factor in many chronic conditions, including heart disease, diabetes, stroke, depression, and certain types of cancers. These conditions can have a significant impact on length and quality of life as well as lifetime healthcare costs to individuals and the community. The rate of obesity in Juneau County has continued to increase. Obesity and other chronic conditions can be prevented through healthy diet and regular exercise.

Snapshot of Juneau County



More than two out of three Juneau County

residents are obese or overweight Source: 2018 County Health Rankings and WISH data query



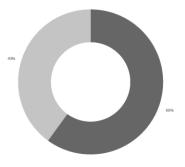
59% of Juneau County residents have access to exercise opportunities compared with 86% of Wisconsin residents overall

Source: 2018 County Health Rankings



Heart disease is the second leading cause of death (after cancer) in Juneau County.

Source: Wisconsin Dept. of Health Services, Division of Public Health, Office of Health Informatics. Wisconsin Interactive Statistics on Health (WISH) data query system, https://www.dhs.wisconsin.gov/wish/index.htm, Mortality Module, accessed 1/8/2019.



60% of Juneau County residents reported knowing someone who eats fast food at least 3x per week.

Source: 2016 Juneau County Community Health Survey



GOAL:

Increase physical activity and improve healthy nutrition in Juneau County residents.¹

OBJECTIVE 1: By December 31st, 2022, breastfeeding initiation rates will increase from 76% to 80%.²

Support the availability of Breastfeeding Peer Counselor services to Juneau County moms Businesses will adopt breastfeeding friendly practices
Increase the awareness of and active participation in Coffective

OBJECTIVE 2: By December 31st, 2022, Juneau County residents will have more access to healthy, affordable foods. ³

Create a GIS map and baseline assessment of residents' access to healthy, affordable foods Launch a gleaning initiative with at least one local farmer

Partner farmers with WIC to offer pre-bundled produce for farmer's market benefits at clinics

Grocers sell healthy foods at affordable prices

OBJECTIVE 3: By December 31st, 2022, increase access to exercise opportunities for Juneau County residents from 63% to 65%.

At least two school districts will adopt active recess practices
At least one municipality will launch a complete street initiative
Juneau County community spaces will be utilized for affordable community fitness programs

OTHER COMMUNITY STRATEGIES

Additional Grocery Stores
Employer Gym Incentives
Safe Route to Schools Programs
Worksite Wellness Initiatives

Increase Community Supported Agriculture (CSA) Programs Universal Free School Breakfast Farm to School Programming School & Community Gardens

- Measured by obesity rate from County Health Rankings annually
- Measured by infants breastfed from the Wisconsin Interactive Statistics on Health (WISH) annually
- Measured by Juneau County GIS assessment annually
- ⁴ Measured by access to exercise opportunities from County Health Rankings annually



Priority Area: Healthy Aging

Over 20% of the population of the state of Wisconsin is over the age of 60, another 14.4% is over the age of 65, 6.7% of individuals are over the age of 75, and 2.1% of individuals are over the age of 85. Juneau County has a greater percentage of elderly than statewide averages for Wisconsin (19.5% vs. 16.1%). This population continues to increase as greater numbers of retirees move into the area. With an aging population comes a unique set of challenges, such as social isolation and shifting health needs of the community. As individuals age, the risk for co-morbid health conditions increases. In addition, preventing falls and improving health literacy related to medication compliance, for example, are very important for the elderly.

U.S. Census Bureau

Snapshot of Juneau

County

1.7 million

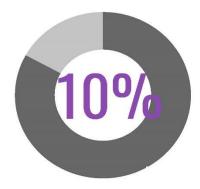
Americans die of chronic disease each year. 80% of older people have at least one chronic condition - 50% have at least two.



In Juneau County, **1 in 5** persons is over the age of 65. (19.5%)

2/3 of all deaths

Four conditions: heart disease, cancer, stroke and diabetes.
Source: Wisconsin Institute of Health Aging



of Juneau County residents over 65 have diagnosed dementia.



Almost half of the hospitalizations in Juneau County are persons age 65 and older (42%)

Source Wisconsin Public Health Profiles 2018/Juneau County, Office of Health Informatics, WDHS



GOAL:

Create an environment that supports healthy aging in Juneau County.

OBJECTIVE 1: By December 31st, 2022, 10 organizations will complete Dementia Friendly trainings.

Juneau County will host a local Dementia Conference

Key healthcare systems and clinics will offer continuing education opportunities for their providers on dementia

A Dementia Caregiver Support Group with be established

OBJECTIVE 2: Transportation

Conduct an asset assessment and mapping activity of public transportation

Develop a Coordinated Care Model with key stakeholders of existing public transportation options and a plan for development

Municipalities will increase the availability of bike racks in their community

Juneau County partners will map safe walking/biking routes to essential services

Review and implement recommended best practices in the Juneau County Bicycle and Pedestrian Plan to improve multi-modal transportation options

OBJECTIVE 3: Social Cohesion

Memory Cafes will be hosted monthly for those with Dementia and their caregivers

Juneau County will establish a community center that features resources and activities for seniors

Community partners will expand the number of affordable older adult exercise classes available

Fall prevention programs/interventions will be offered

Expand the availability of affordable continuing education opportunities

Businesses and community organizations will offer meaningful volunteer and employment opportunities to older adults

OTHER COMMUNITY STRATEGIES

Medication Take Back with Meals on Wheels Increase walkability of communities

Accessible, affordable, adaptive housing



Priority Area: Health Equity

Healthy People 2020 defines health equity as the "attainment of the highest level of health for all people." It means that efforts are put in place to ensure that all people have full and equal access to opportunities that enable them to lead healthy lives, despite race, ethnicity, gender or socioeconomic status. Everyone deserves a fair chance to lead a healthy life. No one should be denied this chance because of who they are or their socio-economic opportunities. According to the University of Wisconsin Population Health Institute, approximately 40% of factors that influence health are social and economic in nature. Focusing on health equity in our work will allow all residents of CWHP counties to have an equal opportunity to live longer and healthier lives.

Snapshot of Juneau County



Fewer than 1 in 3 (29%) of Juneau County fourth graders living in poverty are considered proficient at reading compared to 43% of their peers who are not living in poverty.

Source: Wisconsin Department of Public Instruction WISEdata 2017-2018 \$8,900

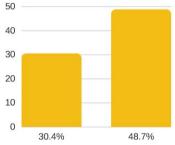
The average household income in Juneau County is \$8,900 less than the state average

Source: 2018 County Health Rankings



21% of children in Juneau County are living in poverty compared to the Wisconsin average of 16%.

Source: 2018 County Health Rankings



Not Economically Disadvantaged

Economically disadvantaged high school seniors in a Juneau County school district were less likely to enroll in post-secondary education compared to their non-economically disadvantaged peers.

Source: Wisconsin Department of Public Instruction WISEdata 2016-2017



Economically Disadvantaged

GOAL:

Foster community changes that support every resident in Juneau County having a fair and just opportunity to be as healthy as possible.

OBJECTIVE 1: By December 31st, 2020, five non-public health stakeholders will be able to identify how environmental and social factors impact health.

Create media pieces quarterly to educate the public on the connection between social/environmental factors and health Partner with non-public health community agencies to host community conversations on the social determinants of health Create and distribute educational resources to explain the connection between social factors and health Update Juneau County agency websites to include health equity information

OBJECTIVE 2: By December 31st, 2021, Juneau County will establish a coalition to collectively address the social determinants of health.

Host a Health Summit in partnership with the Growing in Health and Wellness Coalition by March 30, 2020
Conduct at least 15 one-on-one meetings with community members each year
Coordinate at least 2 training opportunities on health equity and social determinants of health
Partner with residents to identify a social determinant of health for the Growing in Health and Wellness Coalition to focus on
Complete a community asset and power mapping activity with county agencies

OBJECTIVE 3: By December 31st, 2022, three organizations in Juneau County will adopt a Health in All Policies operational framework.

Meet with organizational leadership about Health in All Policies framework

Host trainings for organizational staff on social factors that impact health

Host community conversations to garner feedback and input from clients impacted by agency programming

Create and disseminate a toolkit to assess unintended consequences and undue burden of organizational policies and procedures on community partners and clients

OTHER COMMUNITY STRATEGIES

Community Conversations
Building Youth Leadership
Strong Coalitions
Funding to Support Cross-Cutting Projects

Affordable Housing
Staff Retention Initiatives
Economic Development Initiative:



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