Ozaukee County Health Needs Assessment

A summary of key informant interviews

2019

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Introduction

This report presents a summary of public health priorities for Ozaukee County, as identified in 2019 by a range of providers, policy-makers, and other local experts and community members (“key informants”). These findings are a critical supplement to the Ozaukee County Community Health Survey conducted through a partnership between the Washington Ozaukee Public Health Department, Ascension Wisconsin, Aurora Health Care, Children’s Hospital of Wisconsin, and Froedtert & the Medical College of Wisconsin. The Community Health Needs Assessment incorporates input from persons representing the broad interests of the community served, and from those who possess special knowledge of or expertise in public health.

Key informants in Ozaukee County were identified by the Washington Ozaukee Public Health Department, Ascension Wisconsin, Aurora Health Care, Children’s Hospital of Wisconsin, and Froedtert & the Medical College of Wisconsin. These organizations also invited the informants to participate and conducted the interviews from June to September 2019. The interviewers used a standard interview script that included the following elements:

- Ranking of up to five public health issues, based on the focus areas presented in Wisconsin’s State Health Plan, that are the most important issues for the County; and
- For those five public health issues:
  - Existing strategies to address the issue
  - Barriers and challenges to addressing the issue
  - Additional strategies needed
  - Key groups in the community that hospitals should partner with to improve community health
  - Identification of subgroups or subpopulations where efforts could be targeted
  - Ways efforts can be targeted toward each subgroup or subpopulation

All informants were made aware that participation was voluntary and that responses would be shared with the Center for Urban Population Health for analysis and reporting. Based on the summaries provided to the Center for Urban Population Health, this report presents the results of the 2019 key informant interviews for Ozaukee County.

The report first presents a summary of the health issue rankings, including a list of the five issues which were ranked most frequently by respondents. The next section describes the themes that presented themselves across the top ranked health topics. Finally, summaries of the strategies, barriers, partners, and potential targeted subpopulations described by participants are provided as well.
**Limitations:** Twenty-six key informant interviews were conducted with 29 respondents in Ozaukee County. Some interviews incorporated the views of more than one person from an agency or organization. The report relies on the opinions and experiences of a limited number of experts identified as having the community’s pulse. However, responses may not be representative of the overall perception of community strengths and needs. It is possible that the results would have been substantially different if a different set of informants had been interviewed. Results should be interpreted with caution and in conjunction with other Ozaukee County data (e.g., community health survey and secondary data reports).

**A. Focus Area Ranking**

In 26 interviews, a total of 29 key informants were asked to rank up to 5 of the major health-related issues in their county from a list of 15 focus areas identified in the State Health Plan. (See Appendix A for the full list of informants). Key informants were also able to write in other health issue areas if they believed they were top health issues for the county. The table below presents the results, including a summary of the number of times an issue was mentioned as a top five health issue, and the number of times an informant ranked the issue as the most important health issue. Importantly, not every informant ranked five issues, not every informant provided rankings within their top selections, and not every key informant discussed all of the issues they rated in their top five. In interviews with more than one participant, only one set of rankings was provided. The results in the table below reflect the 26 rankings.

<table>
<thead>
<tr>
<th>Health Focus Area</th>
<th>Top 5</th>
<th>Number 1</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mental Health</td>
<td>22</td>
<td>14</td>
</tr>
<tr>
<td>Substance Use &amp; Abuse</td>
<td>19</td>
<td>4</td>
</tr>
<tr>
<td>Access to Health Care</td>
<td>12</td>
<td>2</td>
</tr>
<tr>
<td>Alcohol Abuse</td>
<td>10</td>
<td>2</td>
</tr>
<tr>
<td>Adverse Childhood Experiences (ACEs)</td>
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<td>2</td>
</tr>
<tr>
<td>Oral Health</td>
<td>6</td>
<td>1</td>
</tr>
<tr>
<td>Nutrition</td>
<td>6</td>
<td>0</td>
</tr>
<tr>
<td>Chronic Disease</td>
<td>5</td>
<td>1</td>
</tr>
<tr>
<td>Tobacco Use and Exposure</td>
<td>4</td>
<td>0</td>
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<tr>
<td>Reproductive and Sexual Health</td>
<td>3</td>
<td>0</td>
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<tr>
<td>Injury and Violence</td>
<td>3</td>
<td>0</td>
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<tr>
<td>Physical Activity</td>
<td>3</td>
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<tr>
<td>Healthy Growth and Development</td>
<td>2</td>
<td>0</td>
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<tr>
<td>Communicable Disease</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>Environmental and Occupational Health</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>
Three key informants wrote in and ranked among their top five these other health issues: obesity, Alzheimer’s disease and dementia, and middle and high school aged adolescents’ “mental health, stress and anxiety, social acceptance, and risks of impulsivity.” Each of these received only one vote, and none were ranked as the respondent’s top health issue for the county.

**B. Top Five Health Issues**

The five health issues ranked most consistently as top five health issues for the County were:

1. Mental Health
2. Substance Use & Abuse
3. Access to Health Care
4. Alcohol Abuse
5. Adverse Childhood Experiences (ACEs)

Summaries of themes for each issue are presented below in the order listed in the table above. As a guide, issues ranked as the top five priorities for Ozaukee County are marked with this thermometer symbol:

**C. General Themes**

It is important to note that since the last release of this report in 2016, the report has changed slightly. In 2016, the rankings and perspectives of 17 key informants were included in the report, compared to 29 key informants in 2019. The five top-ranked health focus areas have remained similar, though there are a few changes. In 2016, the top issues were: 1. Alcohol and Other Drug Use, 2. Mental Health, 3. Chronic Disease Prevention and Management, 4. Access to Health Services, and 5. Nutrition. In 2019, Alcohol and Substance Use and Abuse were separated into two different health focus areas, though both remained ranked in among the top five, as did Mental Health and Access to Health Care. Adverse Childhood Experiences was added to the list of health focus areas for the 2019 report, and emerged as a top health priority for participants. In 2019, Nutrition and Chronic Disease were ranked seventh and eighth respectively.

Some general themes emerged across health issue areas in 2019. Access to health care and to services was a cross-cutting theme related to almost every other health focus area, but especially Mental Health, Substance Use and Abuse, Alcohol Abuse, Nutrition, and Oral Health. Though the county has many great providers and services, it is clear that not everyone has the opportunity to utilize them. Common issues related to access are lack of transportation to get to services, lack of affordable options, insurance-related barriers (e.g., low Medicaid reimbursement for certain services, people cannot afford
co-payments or high deductibles), lack of appointments outside of traditional office hours, waiting lists to access services, and services that are not accessible for people with disabilities or those who do not speak English. Across health issues it was also noted that the northern part of the county has fewer services than other parts of the county.

Across health focus areas, key informants frequently named children and youth as a subgroup that may benefit from targeted efforts. This also highlights the importance of schools and school districts in reaching children and their families with education about a variety of health topics. It was also noted that children are underserved in some health areas. For example, there is a shortage of child psychiatrists to manage mental health conditions and illnesses. Older adults were also frequently named as a population that may need special attention. This is a growing segment of the population and key informants noted the need for more geriatricians and specialty care providers for older adults, a focus on Medicare and supplemental insurance coverage, and the opportunity for senior centers, senior living sites, and the Aging and Disability Resource Center to focus on the needs of this population. Finally, people with disabilities were mentioned as a subgroup requiring specific attention across health focus areas. Key informants noted the importance of making sure everything from exercise and cooking classes to dental appointments are accessible to children and adults with disabilities, including invisible disabilities and sensory issues.

Across health focus areas, key informants mentioned many partners across sectors who are working to improve the county's health, from school districts and law enforcement, to county agencies and business partners. Key informants mentioned many strong, successful collaborations and coalitions working on multiple health focus areas. Informants also noted the need to keep working on collaborating more, strengthening and sustaining partnerships and collaborations, and understanding what other organizations or sectors are doing to avoid duplicating services or competing for scarce resources.

D. Issue Summaries

Mental Health

Twenty-two key informants’ interview rankings included Mental Health as a top five health issue, and 14 of these ranked it as the top health focus area for Ozaukee County.

Existing Strategies: Key informants noted there are a lot of good service providers and resources in the county. Places like COPE, Just Listen, JCC Mequon, Ozaukee Family Services, Ozaukee Community Therapies, and NAMI (National Alliance on Mental Illness) Ozaukee County were named as important resources in the county. In schools, there are social-emotional coaches, meetings with students to
provide referrals to outside counseling, and relational aggression and suicide prevention. One key informant explained that INVEST Mental Health is a community-based coalition in Ozaukee County comprised of multiple community partners who are working to improve mental health in the community. The coalition launched “Cultivate” which is a movement to make communities more mental health friendly. Port Washington and Saukville serve as the pilot communities for Cultivate. Several activities have been underway including: Cultivate Wellness in Our Parks—a six-week wellness program to promote physical and mental wellness, a community depression screening, Change Direction- a marketing campaign to raise awareness of mental health issues, Cultivate Mental Wellness, a community conversation series focused on mental health, and mental health trainings including Crisis Intervention Training (CIT) training for law enforcement. They also explained that the Port Washington-Saukville School District has demonstrated a commitment to mental health by providing a full-time psychologist in each school and performing mental health screenings with students to determine appropriate treatment and support, and Ozaukee Community Therapies will have 25 school-based mental health clinics in the fall of 2019. The health department also utilizes the support of UW-Milwaukee nursing students to help create marketing and content for the Cultivate website. One key informant noted that Ozaukee County’s non-profits that focus on mental health do a great job with minimal resources. Another key informant talked about Mental Health First Aid within schools, noting a goal to train all employees and has been receiving requests to present at state and national conferences. NAMI provides families with advocacy, education, and support. Ozaukee County Human Services offers crisis counselors. On Center serves as a drop-in safe space.

**Barriers and Challenges:** Key informants named some barriers and challenges to improving mental health such as lack of health insurance or low reimbursement rates, high deductibles, and co-payments, a lack of access to services and appointments outside of traditional business hours, long waiting lists to see some types of providers, and some families are reluctant to take referrals for their children to mental health services or seek services themselves because of the stigma or negative perception of mental health issues. There is a general lack of knowledge about mental health issues and mental illness, and people may understand one illness but not have any knowledge of other illnesses or issues. Sometimes people are pressured to take medications without exploring other options or complementary treatments. On a structural level, lack of funding was named as a challenge. For example, one key informant noted the health department has very limited funds to support the work of its coalitions. Community-based organizations and non-profit service providers also struggle in this area. Many organizations continue to work in silos throughout the county and are not fully aware of what others are doing. INVEST Mental Health coalition is making efforts to identify community resources for mental health, but is challenged by the lack of transparency and responsiveness of some partners. Additionally, there are no inpatient facilities in Ozaukee County. One key informant noted that many services seem to be driven by cost, not necessarily by need. The lack of resources significantly hinders peoples’ abilities to find mental health services.

**Needed Strategies:** Key informants recommended making resources available at times outside of conventional business hours, providing more education for health care providers about resources in the
community and a list to refer to, providing parent education, implementing a stigma-reduction campaign, increasing awareness of resources in the community, increasing funding to the county to work on mental health and related issues and sustain current work, working with colleagues to increase the number of people going to school to become mental health providers and attracting them to work in the county, hosting community conversations to decrease stigma and increase awareness, investing in earlier identification, intervention, and prevention at younger ages, investing in peer-to-peer training, developing an overall behavioral health strategy for the county, and building community capacity to implement such a strategy. The health department would like to expand the Cultivate initiative in other communities, but additional staff may be required to make this possible. It is also important for this initiative and any other initiatives to be co-led by community partners. Community partners should do better to engage with and learn from one another in order to avoid duplication of services. There are some very strong collaborations in the community, but more collaboration is always needed. Community partners should work together to identify strategies that will contribute to systems change, rather than one-time programming that has minimal impact. Key informants also suggested more Crisis Intervention Training. Focus more attention on senior citizens and their struggles as they age and have medical issues, loneliness, isolation, and loss of independence. Hire more geriatricians who work in mental health. Advocate for legislation that allows licensed professional counselors to bill Medicare.

Key Community Partners to Improve Health: Health systems, hospitals, health care providers, mental health providers, community organizations like Just Listen, Starting Point, Ozaukee Family Services, and Northshore Center, organizations serving new mothers, parents, school districts, veterans, the health department, NAMI Ozaukee County, Ozaukee Community Therapies, Advocates of Ozaukee, Ozaukee County Human Services, libraries, faith-based communities, business leaders, local city/village government, service groups, RedGEN, Aging and Disability Resource Center, EMS, Cultivate, COPE, United Way of Northern Ozaukee, long term care facilities, and adult protective services are the partners key informants named to work on mental health in the county.

Subgroups/populations where efforts could be targeted and how efforts can be targeted: Many key informants believed this is an issue that requires everyone’s engagement. Everyone can be educated in relevant resources and services to refer to, the symptoms to be aware of in themselves, their families, friends, and neighbors, and appropriate ways to seek help when needed. Key informants also provided specific subpopulations to focus on such as teen athletes who feel high pressure to succeed and may be using unhealthy coping mechanisms, and lesbian, gay, bisexual, trans, queer (LGBTQ) and gender questioning students. Post-partum moms may need extra support and efforts could be made to reach women in the hospital or at post-partum appointments. Youth in general, young adults, families, Latinx, Russian, and Asian communities and families, veterans, low-income populations, and seniors were mentioned as special populations who may need more attention. One key informant mentioned the importance of inviting members of these groups to be participants in making decisions about how to address these issues because it is important for them to have a voice in what is happening to them. It was suggested that low-income populations can be reached at food pantries, jail, schools, county offices, and non-profits working with populations at risk for mental illness. Business leaders should be
engaged to bring education and resources to their employees and to promote these in the community. The aging and elderly population is going through significant life changes, loneliness and isolation, diminishing freedom and independence, fear of dementia diagnosis, and might need help adjusting and easing the burden. Veterans and those who have mental illness can be reached through outreach to the Veterans Administration or other veterans’ groups. There is a need to focus on early intervention with children to change outcomes later in life.

Substance Use and Abuse

Nineteen informants included Substance Use and Abuse in their top health issues for the county, with four rating it the top issue for the county. Many of these key informants noted there is overlap in the strategies, barriers and challenges, and partnerships used to address Substance Use and Abuse and Alcohol Abuse, and to a lesser extent, Tobacco Use and Exposure. Some also noted the necessity of addressing potential underlying Mental Health issues when addressing Substance Use and Abuse. Additionally, some of the commonly noted barriers and challenges to addressing Substance Abuse are issues of access, particularly a lack of treatment facilities, support groups, and services, and lack of transportation to those that do exist, particularly in more rural and northern areas of the county.

Existing Strategies: There are a variety of strategies in place to address Substance Use and Abuse in the county across different sectors. A behavioral health specialist is staffing the ED in Advocate Aurora Health’s hospital. Schools are providing education on this topic, social emotional coaching, and health classes. Schools are also active in prevention and engaging in activities like Red Ribbon Week. When someone is incarcerated, they receive information regarding services for substance use resources upon their release and the police and justice system are aware of resources, but they have to get arrested to find out about the services and resources. The county has developed a heroin toolkit. There is a strong desire from stakeholders and community partners to work collaboratively. There are medication collection drop boxes and Drug Take Back Day events. An AODA gap analysis was conducted to inform initiatives. Peer specialists and recovery coaches are recognized as an important part of recovery. There are great self-help groups that exist currently. Those agencies can be very useful and helpful to those who actively seek it. Other strategies discussed include: Narcan availability, mental health professionals, forums, and literature, a Vivitrol program, Hidden in Plain Sight, community awareness of these issues, and parents being educated about warning signs.

Barriers and Challenges: Some barriers to addressing this problem noted by key informants are a lack of collaboration across the county, limited access to treatment services due to the high cost, few providers, low rates of reimbursement with Medicaid, lack of residential treatment programs in the county, limited resources for women, limited resources in the northern part of the county, lack of transportation, lack of appointments available outside of traditional business hours, and lack of awareness of resources that do exist. Stigma also exist around substance abuse, admitting behavior is problematic, and seeking
treatment. Educating students and parents can be difficult if parents are in denial that children are experimenting with drugs and education curricula are out of date. Substance use and mental illness are frequently co-occurring and need to be addressed together. It is hard to prevent drugs are coming through the county on I-43. Prescription drugs pose a challenge because people don’t understand the dangers or how quickly they can become dependent and pain relievers are sometimes over-prescribed.

**Needed Strategies:** Key informants suggested an increase in the availability of resources, educating providers on resources in the community, and creating a list for reference, drug impairment training for educational professionals, education for school staff on trends that law enforcement is seeing, more support groups, more services in northern Ozaukee County, more transportation options, programs that people could walk to that are embedded in their community, a large campaign to reduce the stigma associated with addiction and treatment, adopting a holistic approach to addressing mental health and substance abuse together, more support in jails with a plan for integration into the community, involvement from businesses as employees are trying to get help and work at the same time, increased support and community awareness of substance use and resources, establishing a sober living house for women, prioritizing best practice initiatives that other communities have found to be effective, drug treatment court, adopting additional harm reduction strategies, implementing evidence-based alcohol, tobacco, and other drug abuse (ATODA) programming and curriculum within school districts, increased funding and resources allocated toward affordable treatment options, administer Youth Risk Behavior Survey in Ozaukee County for better local data, more medication assisted treatment providers (suboxone), and home visiting support for young families. Additional suggestions include strengthening prevention efforts, invest more money in prevention programs, decreasing duplication of services by government and non-profits, promoting resources for people who are struggling before they are in the category of full dependence, combine efforts with other coalitions (INVEST mental health), implementing a drug court, and increasing access to affordable Narcan for EMS and law enforcement.

**Key Community Partners to Improve Health:** Respondents identified health systems, community groups and organizations like Just Listen, Ozaukee Family Services, and Starting Point, law enforcement (supporting the work, not punitive), businesses, schools, food pantries, chambers of commerce, faith communities, mental health providers, county government, youth and parents, the health department, WIC, the court system, NAMI Ozaukee, EMS, lobbying/civic advocacy groups, treatment providers, Family Resource Center in Grafton, Narcotics Anonymous groups/sites, individuals in recovery, and pharmacists as key partners to improve health.

**Subgroups/populations where efforts could be targeted and how efforts can be targeted:** Key informants suggested working with teachers in science and health classes to educate students about the effects of substance use. Parents, youth, and young adults all need to be educated on how to identify substance use and abuse. It was also suggested there should also be more family-friendly sober activities for parents and kids to engage in. Families can also be reached where they are already gathered, such as at churches, youth groups, and community activities. Everyone in the county should be educated on the issue to challenge the stigma and change the community perception. It is important to target businesses to bring awareness and education into workplaces to let employees know what resources are
available in the community (i.e. post flyers in the lunch room, send mass emails to employees letting them know about resources they can access without having their employer know). Provide social service providers with training on how to work with families and children who have substance abuse issues or have family members with issues. Low-income residents can be reached at food pantries by posting information about resources in the community. Provide services and transportation to those who live in the northern or more rural parts of Ozaukee County.

**Access to Health Care**

Twelve key informants ranked Access to Health Care as a top-five health priority for the county, with two of them rating it as their top priority.

*Existing Strategies:* Some services are available to fill gaps in health care for people who are un-insured or under-insured and to help people access services they need such as the Huiras Family Ozaukee Community Clinic, case managers in the emergency department to make sure patients have a primary care provider when they are discharged, travelling mammogram machines, clinical care managers for seniors, Interfaith Caregivers of Ozaukee County provides transportation access to get to appointments, and Ozaukee Family Services, county Human Services, and the county Veterans Services Officer help to connect people to the services they need. In terms of prevention, the Washington Ozaukee Public Health Department provides health education, immunizations, and addresses needs identified by research. Health systems are also doing health education. Key informants mentioned community resources such as NAMI (the National Alliance on Mental Illness) Ozaukee, 211, and the Sober Ride program through the Tavern League. They also discussed law enforcement staff and the Sheriff’s office engaging in Crisis Intervention Training (CIT).

*Barriers and Challenges:* Barriers and challenges to accessing health care include long waiting lists for appointments, providers turning away patients who are uninsured and cannot pay, lack of money to pay for co-payments, high costs of health insurance, high deductibles, clinics and pharmacies are open limited hours, lack of free clinics in the area, lack of transparency in health care prices, increase in the costs of care for seniors, especially with supplemental coverage needed for prescriptions, oral health, home health, foot care, and eye care, Medicaid reimbursement rates are very low for some services, lack of child care may keep some people from attending appointments, and there are transportation difficulties with getting to appointments. One key informant suggested a need to focus on making sure patients have a primary care provider when they are discharged from a hospital. One potential challenge discussed is health care providers’ discomfort interacting with and treating people with disabilities. There are challenges with communication between primary care providers, specialists, and patients. It is difficult to access treatment for alcohol and other drug abuse issues due to lack of facilities, long waiting lists, and the stigma associated with addiction. It is also hard to find counselors,
child psychiatrists, and mental health providers in general. People also may not know about services that are available or don’t know where to go to access services.

**Needed Strategies:** Key informant provided these suggestions for increasing access to health care from prevention to treatment, such as increase case manager hours in emergency departments, find ways to partner with private transportation organizations, plan for how school districts can refer students and parents to help (without favoring one health system or service over another), increase the availability of family counseling, increase awareness of Impact 211 as a resource to direct people to services, bring more people to the table to partner to fill the gaps, offer more flexible clinic schedules, establish a free clinic or a traveling free clinic, engage in advocacy at the national, state, and local levels to resolve health access issues, invest in early assessment of individuals health needs, invest in a community paramedic program, engage in prevention education on exercise and healthy eating, promote awareness of hospitals’ financial assistance programs, establish better care coordination for patients with co-occurring disorders or needs, invest in providing mental health first aid for adults and youth, establish school-based clinics, and focus on minimizing premature hospital discharges to minimize readmissions.

**Key Community Partners to Improve Health:** Health care systems, the county health department, local government, free clinics, schools, the business community, pharmacies, transportation providers, schools and colleges who train health professionals and related workforce development, non-profits who serve young families, low-income populations, and seniors, county Human Services, senior centers, local agencies serving adults with disabilities (Portal, Inc.), county Veterans Services, and Interfaith Caregivers were suggested as community partners who can play a role in improving access to health care in the county.

**Subgroups/populations where efforts could be targeted and how efforts can be targeted:** Those most in need were identified as low-income populations, the aging and elderly, residents of the northern portion of the county, the homeless or those experiencing housing instability, young families, adults with disabilities, people who do not have a driver license or have a suspended license, people living with mental illness, and frequent users of the emergency departments. Suggestions for closing gaps in access for these groups include education to clients and their families about services that exist, better coordination of care, expanding Nurse Practitioner liaison program, reaching people through the courts, food pantries, workforce development services, Human Services, and through schools. It was suggested that hospitals could be more of a pillar by investing time and money to support mental health in the community, for example. For adults with disabilities, one key informant suggested creating a committee across health care professions, providers, and patients and their families to determine what the needs are, what priorities should be, and determine outreach methods to address those needs across. Finally, it was recommended that resource directories and 211 should be better promoted.
Alcohol Abuse

Ten informants’ rankings included Alcohol Abuse as a top health issue for the county, with two rating it their top priority area.

Existing Strategies: Currently there is a behavioral health specialist staffing the Advocate Aurora emergency department, making referrals to COPE, health classes are offered, great self-help groups are offered, ignition interlock devices are a great preventive tool to reduce vehicle crashes, law enforcement focusing on traffic stops and arresting intoxicated drivers, there has been local media coverage about the impact of drunk driving and an increase in criminal charges related to driving while intoxicated. Prevention efforts are provided by the Ozaukee County Sheriff’s Department, schools, and non-profits in the county that have a mission to serve this issue.

Barriers and Challenges: Some key informants noted the challenge of the cultural acceptance of alcohol consumption and how ever present it is at social gatherings and community functions, along with the stigma of admitting to problematic alcohol consumption and a desire to seek help. Additionally, there are limited resources for treatment, few Alcoholics Anonymous meetings in the county, limited resources for women (e.g. no sober housing for women), limited resources in the northern part of the county, the expense of residential treatment, and a lack of transportation is a barrier (there aren’t always Uber or Lyft drivers available in all parts of the county). State law is lax on drivers who drive under the influence. People who have higher socioeconomic status can cover up their behavior by paying off tickets. Lobbying on behalf of the Tavern League is a challenge. Employees might be reluctant to admit to a problem or seek treatment for fear of losing their job.

Needed Strategies: Key informants suggested increasing the availability of resources, educating health care providers about resources in the community, and having a list for reference. Other ideas included having more transportation options, both to prevent drunk driving, and to transport people to support groups and treatment resources. It was also noted that it is important to have treatment options and resources embedded in the community where people already are and that are easy to get to as a way to make accessing assistance easier at locations like community centers and libraries where people go for many reasons. A more complex suggestion is creating cultural change to de-normalize alcohol consumption. There is a need for more resources and treatment options in the northern part of the county. The county needs a sober living house for women. Wrist bands at festivals can be used to identify people who are of drinking age. Businesses need to get involved, offering employee assistance programs for people who are trying to get help and work at the same time. One key informant recommended less duplication of services by government and non-profits and a more unified approach in the county. One strategy offered is to partner with law enforcement to provide early identification of alcohol abuse and assess those who violate the law by engaging in alcohol-related crimes. Another suggestion is stricter punishments for driving while intoxicated.
Key Community Partners to Improve Health: Health systems, schools, business, law enforcement, local municipalities, county government, county Human Services, the health department, the court system, food pantries, community groups and organizations like Family Sharing, Just Listen, and Starting Point, providers of services to women, children, and families, organizations that work with legislators such as Moms Against Drunk Driving and groups that fight against alcohol related crimes, lobbying and civic advocacy groups, Tavern League, and individuals in recovery were identified as the key partners to address alcohol abuse in the county.

Subgroups/populations where efforts could be targeted and how efforts can be targeted: Youth and teens could be reached through programming within the schools and working with the sports coaches. Focus on the economically disadvantaged, because those who are wealthy have more access to better treatment services. Key informants noted that a focus on prevention is especially important and investing in early treatment and preventive measures could easily reduce alcohol abuse in the community. The northern part of the county needs more resources.

Adverse Childhood Experiences (ACEs)

Adverse Childhood Experiences (ACEs) was ranked as a top health issue by six key informants, and two of those ranked it their top issue for the county.

Existing Strategies: Awareness, prevention, and early intervention were named as existing strategies to address ACEs, including educating children through caregivers, timely intervention once they learn about ACE in a child, more referral time for intervention, and current support for other community forensic investigation interviewers. School staff are current through all DPI trauma modules (1-6). Increased awareness of ACEs, impact, and prevalence as service providers are becoming more aware and people are more sensitive when it’s on their radar. Key informants also mentioned educating staff on trauma informed care and counselors working with individual students to share coping strategies.

Barriers and Challenges: Key informants noted difficulty making timely referrals, low awareness in the community in general, not enough police education, lack of general resources, mandatory reporters having reservations about reporting, the stigma around trauma, a lack of understanding what trauma actually is, and a false perception that ACEs don’t exist due to high economic status, but families of high income and education still have issues. Key informants also shared that some community organizations aren’t working together, are siloed, or are hesitant to collaborate. There is a challenge with confidentiality when school staff make a referral to CPS, then there doesn’t seem to be as much follow-up back to the school.

Needed Strategies: More law enforcement collaboration, more engagement in the schools and with families, resilience education and training, parent education, continued education for school staff,
collaboration between government entities for understanding, educate community service people to work together and understand the importance of it, engage non-profit and for-profit sectors to work together, widen education to all Ozaukee staff and community partners, and creating a Trauma informed community were suggested as potential strategies to address ACEs in the county.

**Key Community Partners to Improve Health:** School districts, law enforcement, health systems, Department of Justice, student support service teams in schools, anyone who works with children, local government, Kettle Moraine Counseling, Northshore Clinic, Comprehensive Counseling, Child Protective Services, Ozaukee Family Services, local churches, Birth to Three, and organizations that provide parenting classes are the key partners recommended by key informants.

**Subgroups/populations where efforts could be targeted and how efforts can be targeted:** One key informant suggested focusing on youth and domestic violence, drug-endangered children, and youth affected by sexual exploitation. These children can be served by increasing access to resources for frontline workers, such as increased use of evidence-based materials or curricula, and in school setting, teaching kids about ACEs, how common they are, and how they may be impacted by ACEs. It was noted that schools are very important to this effort.

### Oral Health

Six respondents’ rankings included Oral Health as a top health issue for the county, with one of them ranking it as their top priority area.

**Existing Strategies:** If people have dental insurance or money to pay out-of-pocket for services and can get to appointments, there are providers to serve them. Key informants’ examples of existing strategies mostly focused on the ways people are able to access dental care without insurance, and such services are limited. The examples provided are some free clinics, including the Seton Dental Clinic in Milwaukee (especially with referrals through Ascension), Seton’s mobile dental clinic, cleanings offered by the Marquette School of Dentistry clinic, dentists who will provide services to patients with Medicaid, and some local dentists who will do pro bono dental work.

**Barriers and Challenges:** The most frequently named barrier is lack of access to services due to a lack of providers who will take patients who have Medicaid insurance due to low reimbursement rates, the high cost of dental care, lack of providers for people who do not have insurance or money to pay out-of-pocket costs, long waiting lists to get appointments, and lack of transportation to get to appointments. One key informant focused on the pediatric need, noting there are a significant number of kids who have never gone to the dentist, “bottle rot” is a problem for young children, there are kids who lose teeth because of domestic violence, and kids who don’t have toothbrushes or other basic needs being met.
Needed Strategies: Key informants recognized the need to increase access to services. Some suggestions to accomplish this include expanding the services of the mobile dental clinic, creating a county fund to subsidize dentists to get more dentists to see patients with Medicaid, expand what is working in Washington County to Ozaukee County, change policy to increase reimbursement through Medicaid, and investing in a transportation service. One key informant noted it would be important to design a dental clinic that is accessible to the needs of patients with disabilities, including those with sensory needs. Another area of focus should be prevention, with more education for children and parents about the importance of oral health and hygiene.

Key Community Partners to Improve Health: Health care systems, dentists, dental associations, Marquette University, Albrecht Free Clinic, Washington County free dental clinic, non-profits that support individuals with disabilities and young children, schools, food pantries, business leaders, Portal, Inc., Rotary in Port Washington, United Way of Northern Ozaukee, Aging and Disability Resource Center of Ozaukee County, Child Protective Services, and county government were named as key partners to improve oral health in the county.

Subgroups/populations where efforts could be targeted and how efforts can be targeted: Low-income people and neighborhoods in Port Washington and north, young families, people with disabilities, young kids, and children and adults with disabilities were some specific populations named for targeted outreach through Portal, Inc., Balance, Inc., Ozaukee County Aging and Disability Resource Center and Human Services, the Rotary, and United Way. Advertising at food pantries, grocery stores, discount stores, and immigrant farms was offered as a way to reach some of these vulnerable populations. One key informant noted there is a need for a county-level plan to address these needs overall.

Nutrition

Six respondents’ rankings included Nutrition as a top health issue for the county. Key informants discussed topics related to healthy food access, nutrition education, and breastfeeding.

Existing Strategies: My Plate, Harvest of the Month program, community gardens, farmers markets, food pantries, nutrition classes at the YMCA, a grant for a farm to table program at the schools, improved quality of convenience meal options, strong community awareness of this issue, and strong collaboration among community organizations were named as strategies in place to address nutrition in the county. One key informant explained how the WIC (Women, Infants, and Children) Nutrition Program works through the Washington Ozaukee Public Health Department: “WIC’s target audience includes pregnant, post-partum, and breastfeeding women, infants, and children under five years old who meet income and nutrition risk requirements.” They offer individual nutrition counseling, individual breastfeeding support, education, and referrals, referrals to other agencies, access to healthy foods and formula at local vendors, access to fresh, locally grown fruits and vegetables at farmers’ market and farm stands, and access to breastfeeding supplies. WIC has transitioned to a more discrete electronic benefits card to make transactions more private and they have been making strides to remove barriers.
by offering early or late clinic appointments, offering phone or online-based nutrition education contacts, and offering options for alternates to come in their place for appointments.

**Barriers and Challenges:** Key informants named many individual-level barriers to improved nutrition, including lack of time, cost of food and limited financial resources, difficulty cooking recipes for one, anxiety about trying new foods, and not knowing what to do with certain food items, limited cooking skills, limited access to grocery stores and lack of transportation to get there, ease of access to convenience foods, stigma around accessing nutrition assistance programs and food pantries, and a general lack of education about nutrition. The health department is allotted a limited amount of resources and funding for nutrition programs. The WIC population struggles with exclusivity and duration of breastfeeding rates. More work needs to be done in prenatal education on baby behavior, supporting women as they return to work, and referrals for breastfeeding support. We are a food reduction society, many of the unhealthy foods are stimulant heavy (fat, sugar, etc.), how food reacts with the body education, understanding the biomechanical impact of people in general and those who are going through addiction, food shame. Programs like FoodShare include unhealthy foods in card purchase abilities, but essentials such as toilet paper are not included in purchase abilities. Food pantries have a difficult time getting fresh food and fruits, and most of the food donated is at the end of its shelf life or is not safe for consumption.

**Needed Strategies:** Increased access to healthy food options, teaching kids about gardening and healthy cooking, cooking classes that teach simple, but healthy recipes with limited ingredients, education for people with disabilities, financial resources to create an accessible preparation kitchen for class purposes at Portal, Inc. guided by a nutritionist and a chef, educational classes tailored to health care needs like diabetes, heart health, allergies and sensitivities, and work to improve systems change and food systems were identified as strategies that could improve nutrition in the county. The local WIC office is working on building partnerships and providing outreach to engage the part of the population who likely qualifies for WIC services but does not participate.

**Key Community Partners to Improve Health:** School districts, grocery stores, local restaurants, food pantries, farmers, Portal, Inc., Concordia University School of Health Professions, Cardinal Stritch special education program, health care systems, local government, the health department, WIC Program, YMCA, Aging and Disability Resource Center, Wellspring, United Way, UW-Extension Agriculture program, Hispanic community centers, chambers of commerce, low-income housing groups, Ozaukee County Human Services, day care providers, churches, parent groups, Boys and Girls Club, Ozaukee County Dairy Promotion, community gardening groups, 4-H, and nutritionists were all named as key partners to improve health related to food and nutrition.

**Subgroups/populations where efforts could be targeted and how efforts can be targeted:** Adults with disabilities, senior citizens, and people with low-income levels can be reached through Portal, Inc., Ozaukee County Aging and Disability Resource Center, and low-income housing locations. Parents, youth, Latinx communities, and veterans may also need tailored outreach. Residents who may qualify for WIC need to be pregnant, post-partum, or breastfeeding women with infants and children under 5
years old who meet income and nutrition risk requirements and could potentially be reached through child care providers and workplaces. The elderly population and retirees who don’t have access to good food were also identified as a group with specific needs: find ways to provide transportation for them to access food or find strategies to get food to them.

**Chronic Disease**

Five respondents’ rankings included Chronic Disease as a top health issue for the county, with one of them selecting it as their top issue.

*Existing Strategies:* Related to managing chronic conditions, making sure patients have a primary care provider when they are discharged from the emergency department, a chronic disease case manager for day hours, hospital management of chronic diseases with specialty providers, transitional care management, telehealth programs, and Ascension is working with uninsured patients to obtain financial assistance and establish them with a primary care provider. For prevention of chronic disease, the Balance program at the YMCA, the diabetes prevention program (DPP), the Ascension clinic provides baseline labs for uninsured patients, education classes for older adults, and the health department is starting an obesity committee and more education about physical activity and nutrition.

*Barriers and Challenges:* Some of the barriers and challenges are issues of access such as lack of transportation to appointments, lack of health insurance, high co-payments and deductibles even with insurance, language barriers between patients and providers or health systems, and clinic hours can be difficult to access when they overlap with work schedules. Some challenges have to do with health care processes, such as confirming patients being discharged have a primary care provider, inexperienced staff at all levels of care, lack of care coordination, medication reconciliations are incorrect on transferred patients, short stays in hospitals and observation status causes transfers out too quickly and then people are readmitted, and lack of proper follow up leading to challenges getting patient to come back. Challenges related to prevention program include lack of funding or staffing to operate the programs and difficulty filling the classes or groups. Other challenges include cultural norms where a “quick fix” is preferable to sustained healthy habits and there exists some stigma around having certain chronic illnesses.

*Needed Strategies:* At the health care systems-level, an increase in hours a case manager is available in the emergency department at the hospital would be helpful, collaboration meetings across levels of care, quality assurance in hospitals, growing Nurse Practitioner programs for senior care facilities, making appointments more accessible by finding transportation solutions and expanding clinic hours, offering sliding fee scale payment options, and expanding patient education efforts. One respondent suggested outreach efforts to older adults need to be increased. At the community level, it was suggested there could be more community education, including messaging at meal sites, restaurants, grocery stores

*Key Community Partners to Improve Health:* Health care systems and health care providers, including those training in health professions, insurance companies, health care quality departments, county
health department, free clinics, senior centers, YMCA, schools, Aging and Disability Resource Center, Caregiver Connection, and the Alzheimer’s Association are key partners related to chronic disease prevention and management.

**Subgroups/populations where efforts could be targeted and how efforts can be targeted:** Key informants suggested the following groups may need targeted outreach related to chronic disease prevention and management: low-income populations, older adults, especially those who are isolated, adults aged 30 to 50 years, cardiac patients, long-term care patients, immigrants, and disabled young adults. It was suggested these groups could be reached broadly through communication from schools, newspapers, community centers and senior centers, communication from the public health department, and the Aging and Disability Resource Center. Particularly vulnerable groups may benefit from support groups, prevention education, speakers on chronic disease topics, and education about services available at low to no cost.

**Tobacco Use and Exposure**

Four key informants included Tobacco Use and Exposure as a top health issue for the county.

**Existing Strategies:** School districts are active in prevention education and the FACT youth tobacco awareness group has been implemented in schools. Other strategies include quit lines, medication, Wisconsin Wins program tactics, resources from American Lung Association, tobacco and vaping education, formation of the Tobacco-Free Suburban Milwaukee and Ozaukee coalition, policies to create smoke-free campuses at local businesses, seminars at schools like the Homestead High School Vaping Awareness Event, and law enforcement action.

**Barriers and Challenges:** There is a lack of awareness of the problem and of resources to support quitting. There is social stigma around these issues in the county. Nicotine and tobacco are very addictive and dangerous for youth. There is still a lack of knowledge about vaping and a perception that it is safer than smoking cigarettes. Tobacco products are very accessible and there is much marketing of these products, especially to youth. The lack of smoke and odor makes vaping harder to detect than cigarettes. There aren’t ordinances about vaping indoors in the county.

**Needed Strategies:** There were several suggestions about strategies that could address tobacco use in the county including adopting a nationwide campaign to focus against vaping, introducing an ordinance or policy against vaping in workplaces and schools, passing a law to increase the age of legal tobacco use and sale to 21 years, increasing parent education on vaping, increasing public awareness of free resources, increasing tax on all tobacco/nicotine products, implementing smoking cessation challenges amongst businesses (e.g. a challenge for the new year to get people to quit), and implementing an additional insurance charge to disincentivize smoking.
Key Community Partners to Improve Health: Chambers of commerce, festivals planners, schools and student groups, faith communities, primary care providers, hospital and health care systems, insurance companies, organizations like the American Lung Association and American Cancer Society, and the health department are key partners to improve health.

Subgroups/populations where efforts could be targeted and how efforts can be targeted: Key informants recommended addressing children and youth, particularly middle school aged and younger, with education. One suggestion was to educate parents as well. One suggestion was to go where the people are, such as churches, Relay for Life, youth sports events, and Young Life. Another suggestion was to do lunch and learns with staff in health care settings regarding smoking cessation. Another suggestion was to reach out to the business community and develop strategies to disincentivize tobacco use in workplaces, for example with tobacco-free campus policies.

Reproductive and Sexual Health

Three rankings included Reproductive and Sexual Health as a top health issue for the county.

Existing Strategies: At the county level, the health department recently established the Washington Ozaukee Coalition for Sexual Wellness in response to the 2018 Youth Risk Behavior Survey (YRBS) data from six Washington County high schools that showed a significant percentage of students reported not using condoms or birth control with sexual intercourse. While data reported were only for Washington County, the coalition has membership from both Washington and Ozaukee Counties. The health department and coalition are also reviewing sexually transmitted infection (STI) rates in Ozaukee County and are working to identify how to publicly share the data. There are several community agencies working to provide prevention education and awareness in schools and in the community, which may include a variety of lessons including healthy relationships, sexual violence, consent, and STIs. At the individual level, parent conversations are occurring, primary care providers are taking sexual histories, there are school-based and faith-based sex education courses, and Advocates of Ozaukee offers education about sexual health, abuse, teen dating, and violence.

Barriers and Challenges: Reproductive and sexual health is a very controversial and politicized topic for our community members and some community partners and can be uncomfortable to discuss. There is a lack of knowledge and misinformation. Sharing of data is also a barrier. It is challenging to get some schools to share the Human Growth & Development curriculum and until recently, it was a challenge to get schools on board to implement the YRBS due to fear of how the data will be shared.

Needed Strategies: The Coalition for Sexual Wellness is taking small steps to open up this topic and partners are working together to develop goals and strategies to address sexual health moving forward. There need to be continued efforts to share the importance of the work to address sexual health, especially for adolescents and teens, to share data and be transparent about how it will be shared so there is a better understanding of STIs, to create educational and awareness campaigns, and build
relationships with partners and community members who are resistant to talking about sexual health. It was also suggested there need to be more frequent parent conversations, normalized discussion of sexual wellness, and better sexuality education curriculum in schools.

**Key Community Partners to Improve Health**: Ozaukee County school districts, health systems and primary care providers, the county health department, youth-serving organizations like the Boys & Girls Club, after school programs, Lakeshore Regional Children’s Advocacy Center, Advocates of Ozaukee, Ozaukee Family Services, Ozaukee Community Therapies, forensic nurses, Friends, Inc., faith-based organizations, LGBTQ community/representatives, the Washington Ozaukee Coalition for Sexual Wellness and parents were named as important partners to improve health in this area.

**Subgroups/populations where efforts could be targeted and how efforts can be targeted**: Key informants recommended a focus on youth with regard to comprehensive sexuality education, awareness raising campaigns, and human papilloma virus vaccines, and suggested youth need to be reached with positive messages via their parents and families, faith communities, and health care providers. Parents of school-aged children also need to be reached with information about how to talk to their children about healthy sexuality. Other populations who may need tailored information are LGBTQ (lesbian, gay, bisexual, trans, and queer) youth, and parochial schools and their students.

**Injury and Violence**

Three key informants included Injury and Violence as a top health issue for the county. Key informants discussed a variety of topics related to injuries and violence, including violent crime, sexual assault, child abuse, and intimate partner violence.

**Existing Strategies**: Key informants discussed sexual assault nurse examiner (SANE) processes at health systems, forensic interviews, increased involvement in reporting of Child Protective Services, education provided in schools and by Advocates of Ozaukee, including topics of dating violence, sexual assault, and bullying.

**Barriers and Challenges**: Key informants suggested there is a lack of acknowledgement of injury and violence as issues in Ozaukee County, as well as a broader lack of acknowledgement of these as public health issues. Some other barriers named by key informants include: no sexual assault kits (SANE programs) in Ozaukee County, the stigma around these issues, health information privacy policies, lack of funding, lack of law enforcement staffing, and issues with traffic crashes and speeding.

**Needed Strategies**: Community conversations to increase awareness, prioritize issues, increase education, and support to law enforcement that services are available, better communication between health systems, and more proactive response to child abuse and injuries before there is a death. Project Crash, controlling alcohol and tobacco transactions, and installing child safety seats were also offered as strategies that could improve health related to injuries and violence.
**Key Community Partners to Improve Health:** Health care providers, local government, medical examiners, law enforcement, schools and school boards, civic groups, community and business leaders, Advocates of Ozaukee, faith communities, and child death review committees were named as important partners in Ozaukee County.

**Subgroups/populations where efforts could be targeted and how efforts can be targeted:** Drug-endangered children, refugee or ESL families and communities, and families with adults who have mental health challenges may need more targeted outreach to get information. It was also suggested juveniles may need more targeted education about human trafficking.

**Physical Activity**

Three key informants ranked Physical Activity as a top five health priority area for Ozaukee County.

**Existing Strategies:** Generally, there are gym classes in schools, county parks, organized sports, the YMCA, and swimming and walking programs. Specifically for people with disabilities, the YMCA offers adaptive classes for children and seniors, Form and Fitness has an athletic trainer that is excellent with adults with disabilities, and Special Olympics offers a soft opportunity for competitive sports. One key informant elaborated on specific ways the county prioritizes physical activity: Walk to School Day, Summer of Cycling, Cycling Without Age, and Eat & Move Well is a successful action team comprised of numerous community partners across sectors that focuses on increasing physical activity in the county.

**Barriers and Challenges:** At the individual level, some general challenges include lack of time to engage in activities, the financial costs of equipment, participation, and membership, lack of knowledge about how to use equipment or what exercises are beneficial, online resources that cost money, and lack of transportation to get to activities or facilities. Specific to adults and children with disabilities, sometimes equipment is not accessible for individuals with more physical disabilities, staff and other club members may not be comfortable with people with disabilities, and transportation limitations. At the county level, there is a lack of funding to support coalition work, improve infrastructure, and expand transportation services as well as walking and biking trails.

**Needed Strategies:** In general there is a need for education about easy options for how to be physically active at home, emphasizing the importance of physical activity at a younger age, promoting the benefits of small increases in physical activity, and encouraging businesses to look at how they can encourage their employees to be more physically active (e.g. subsidizing gym memberships). One key informant suggested there is a desire to have exercise classes that are integrative as well as adaptive so people of all abilities can exercise together. Perhaps this could be achieved at the beginners’ level of exercise for ease with adaptability, pace, comfort level, and confidence for all participants. At the county and program level there is a need to identify funding for programs and infrastructure to be expanded throughout the county and to ensure sustainability. Adopting a health equity toolkit was one suggestion. Increased collaboration between community resources and strengthening of existing
collaborations. A bike and pedestrian plan or Complete Streets initiative would help to ensure that there are safe walking and biking routes for residents.

**Key Community Partners to Improve Health:** YMCA, fitness clubs, senior groups and senior centers, the health department, school districts, larger businesses, Ozaukee County Parks, Recreation, & Culture, Portal, Inc., Concordia University, Cardinal Stritch, Marquette University, Aging and Disability Resource Center, Boys and Girls Club, local police departments, local government and policy makers, and chambers of commerce were identified as key partners in this area.

*Subgroups/populations where efforts could be targeted and how efforts can be targeted:* Adults with disabilities (including neurological disorders), veterans, and senior citizens. These groups can be reached through Portal, Inc., the Veterans Administration, and senior centers and senior housing complexes, respectively. Other populations who may need targeted outreach are Latinx communities, low income families, and youth. One key informant added: “Although there is a strong collaboration already, we can always increase collaboration and partnerships on efforts.”

**Healthy Growth and Development**

Two key informants included Healthy Growth and Development as a top health priority for the county and one of them discussed this issue in their interview.

**Existing Strategies:** Public Health is doing the best they can with the resources they have, and health systems are providing education materials.

**Barriers and Challenges:** Lack of transportation for families to get to medical appointments, lack of health insurance coverage for children, financial barriers, problems accessing nutritious foods, and a disconnect between patrol and investigators in law enforcement were named as barriers and challenges to improving health.

**Needed Strategies:** Increased access to transportation and help getting children to their medical appointments, community education, more nurses in schools, increased education for patrol law enforcement, and increased awareness of these issues in general were offered as suggestions.

**Key Community Partners to Improve Health:** Schools, public health, transportation providers or ride sharing services, and libraries hosting community talks.

*Subgroups/populations where efforts could be targeted and how efforts can be targeted:* One vulnerable population are children impacted by trauma and mental health issues. Education should be provided to the people who have contact with those children.
Other Health Issues

Key informants were able to write-in other health issues they wanted to rank as top-five issues for the county.

Mental health among Middle and High Schoolers

One key informant wrote “Middle and High School mental health: stress and anxiety, social acceptance, and risks of impulsivity.” They noted that school presentations are available on these topics and school counselors are available to provide referrals. Some barriers and challenges of note include lack of availability of positive peer mentors and professional counselors, peer pressure and negative, aggressive, emotionally and socially-charged peer interactions, especially with social media, the competitiveness of sports and academics, access to guns and drugs, stress and anxiety, and sexual identity trends. They recommended youth support groups and coping strategy workshops are potential strategies to address this, and should include some that are conference or retreat-like. They also suggested peer mentors and professional mental health counselors need to be more readily available to youth within schools. They believe youth ages 12-18 may be most in need or interventions in schools.

Alzheimer’s and Dementia

One key informant included Alzheimer’s and Dementia in their rankings. Current strategies to address this issue include a Dementia Specialist at the county Aging and Disability Resource Center, awareness programs, walks, caregiver series, and coffees offered by the Alzheimer’s Association, an Emergency Department Gerontologist at Ascension, and State dementia programs. Noted challenges and barriers to addressing this issue include care centers often having their hands tied for care. They need patients to come to them in stable condition, without need for chemical or physical sedation to control behaviors. A crisis team is not equipped to deal with behaviors. Additional funding and staff power are needed to address the needs of individuals who often require one-on-one care, which is expensive for facilities that often do not have that level of staffing. Inpatient access to mental health specialists are needed for this population. Hospitals need education about care center regulations. There is a need to re-think elder care and advocate for better rates for care center reimbursement. Dementia specialists, mental health professionals, geriatricians, and affected patients and their families are the key groups to partner to improve health related to Alzheimer’s and dementia. Elderly with dementia and their families may benefit from targeted outreach through home visits, or visits to care centers where they live, support groups for families, speakers, and meetings at hospitals to coordinate care better for these individuals.

Obesity

One key informant ranked Obesity in their top-five. They identified programs at recreation departments, schools’ promotion of physical activity, and health systems’ focus on population health measures as strategies in place to improve health. Some identified barriers and challenges include the nature of obesity as a personal issue where people don’t want to admit to being overweight.
Additionally, businesses are afraid to tell employees they are overweight due to legal and liability issues. They recommended wellness initiatives in businesses and health plans, and schools balancing education and physical activity time as potential ways to improve health. Key partners to work together on this issue are schools, YMCA, parks and recreation departments, health clubs and related organizations, and insurance companies. One subpopulation that may need extra attention are seniors, with a focus of staying independent and healthy so they can age in place. Seniors can be best reached at senior centers.

**Communicable Disease**

Communicable Disease was ranked as a top five health issue by one key informant, though they did not provide examples of existing strategies, barriers and challenges, needed strategies, key partners, and affected subpopulations.

**Environmental and Occupational Health**

None of the key informants ranked Environmental and Occupational Health as a top five health issue for Ozaukee County. Existing strategies, barriers and challenges, needed strategies, key partners, and affected subpopulations were not discussed.
## Appendix A. Interview Participants for Ozaukee County

### Key Informant Interview Participants
Twenty-nine individuals participated in 26 key informant interviews about our community’s most pressing health needs. The organizations listed here include many that serve low-income, minority, and medically underserved populations. They represent an array of perspectives from communities that include, but are not limited to: the elderly, youth, individuals with disabilities, rural and agricultural communities, survivors of domestic and sexual violence, and those living with mental illness and substance abuse.

<table>
<thead>
<tr>
<th>Name</th>
<th>Title</th>
<th>Organization</th>
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<tbody>
<tr>
<td>Barbara Bates-Nelson</td>
<td>Executive Director</td>
<td>United Way of Northern Ozaukee</td>
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<tr>
<td>Nicole Bulow</td>
<td>Executive Director</td>
<td>Big Brothers Big Sisters of Ozaukee County</td>
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<tr>
<td>Cathy Cero-Jaeger</td>
<td>Board Member</td>
<td>Washington Ozaukee Board of Health</td>
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<tr>
<td>Kirsten Coenen</td>
<td>Branch Director</td>
<td>Feith Family Ozaukee YMCA</td>
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<tr>
<td>Mike Cosgrove</td>
<td>Executive Director</td>
<td>Saukville Chamber of Commerce</td>
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<tr>
<td>Kay-Ella Dee</td>
<td>Director</td>
<td>Aging and Disability Resource Center (ADRC) of Ozaukee County</td>
</tr>
<tr>
<td>Amanda Didier</td>
<td>Executive Director</td>
<td>Lakeshore Regional Child Advocacy Center</td>
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<tr>
<td>Maggie Dobson</td>
<td>Executive Director</td>
<td>Cedarburg Chamber of Commerce</td>
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<tr>
<td>Liza Drake</td>
<td>Director</td>
<td>Ozaukee County Department of Human Services</td>
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<tr>
<td>Melissa Drews</td>
<td>Program Director</td>
<td>Starting Point</td>
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<tr>
<td>Rachel Fellenz</td>
<td>Executive Director of Student Services</td>
<td>Mequon-Thiensville School District</td>
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<tr>
<td>Barbara Fischer</td>
<td>Executive Director</td>
<td>Advocates of Ozaukee</td>
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<tr>
<td>Mark Gierach</td>
<td>Executive Director</td>
<td>Saukville Community Food Pantry</td>
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<tr>
<td>Lindsay Graycarek</td>
<td>Patrol Sergeant</td>
<td>Mequon Police Department</td>
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<tr>
<td>James Johnson</td>
<td>Sheriff</td>
<td>Ozaukee County Sheriff’s Office</td>
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<tr>
<td>Matthew Joynt</td>
<td>Superintendent of Schools</td>
<td>Mequon-Thiensville School District</td>
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<tr>
<td>Pam King</td>
<td>Executive Director</td>
<td>Grafton Area Chamber of Commerce</td>
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<tr>
<td>Amanda Kohal</td>
<td>Campus Administrator</td>
<td>Lasata Senior Living Campus</td>
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<tr>
<td>Mary Helen Luzinski</td>
<td>President</td>
<td>NAMI Ozaukee</td>
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<tr>
<td>Bailey Murph</td>
<td>Public Health Strategist Senior</td>
<td>Washington Ozaukee Public Health Department</td>
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<tr>
<td>Jeff Nelson</td>
<td>Superintendent</td>
<td>Grafton School District</td>
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<td>Erin Perez</td>
<td>Clinic Director</td>
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<tr>
<td>Kathy Rismeyer</td>
<td>Director of Social Services</td>
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<td>Kathleen Schilling</td>
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<td>Deb Steele</td>
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<tr>
<td>Sharon Streff</td>
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<tr>
<td>Carole Stuebe</td>
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<td>Portal, Inc.</td>
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<tr>
<td>Michael Weber</td>
<td>Superintendent</td>
<td>Port Washington- Saukville School District</td>
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<tr>
<td>Steven Zils</td>
<td>Emergency Medicine Physician</td>
<td>Advocate Aurora Health</td>
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