Walworth County Health Needs Assessment

A summary of key informant interviews

2020

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Introduction

This report presents a summary of public health priorities for Walworth 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 Walworth County Community Health Survey conducted through a partnership between the Aurora Health Care, Children’s Wisconsin, Fort HealthCare, Mercyhealth, and the Walworth County Division of Public Health. 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 Walworth County were identified by Aurora Health Care, Children’s Wisconsin, Fort HealthCare, Mercyhealth, and the Walworth County Division of Public Health. These organizations also invited the informants to participate and conducted the interviews from December 2019 to February 2020. 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 2020 key informant interviews for Walworth 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-seven key informant interviews were conducted with 29 respondents in Walworth 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 Walworth County data (e.g., community health survey and secondary data reports).

A. Focus Area Ranking

In 27 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 and not every informant provided rankings within their top selections. In interviews with more than one participant, only one set of rankings was provided. The results in the table below reflect the 27 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>16</td>
</tr>
<tr>
<td>Access to Health Care</td>
<td>19</td>
<td>4</td>
</tr>
<tr>
<td>Substance Use and Abuse</td>
<td>14</td>
<td>2</td>
</tr>
<tr>
<td>Oral Health</td>
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<td>2</td>
</tr>
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</tr>
<tr>
<td>Adverse Childhood Experiences</td>
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<td>1</td>
</tr>
<tr>
<td>Nutrition</td>
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<td>1</td>
</tr>
<tr>
<td>Chronic Disease</td>
<td>4</td>
<td>0</td>
</tr>
<tr>
<td>Physical Activity</td>
<td>4</td>
<td>0</td>
</tr>
<tr>
<td>Injury and Violence</td>
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<td>1</td>
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<tr>
<td>Tobacco Use and Exposure</td>
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<tr>
<td>Environmental and Occupational Health</td>
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<tr>
<td>Reproductive and Sexual Health</td>
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<td>0</td>
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<tr>
<td>Healthy Growth and Development</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>Communicable Disease</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

Eight key informants wrote in and ranked among their top five these other health issues: Senior services and care, chronic disease in specific populations, limited health insurance providers, vaping, affordable
medication, language barriers, childhood obesity, support for families/caregivers/survivors, and problems with Medicaid. Each of these received only one vote, and none were ranked as the respondent’s top health issue for the county. Discussion responses related to medication, insurance, and language barriers were thematically analyzed along with the responses related to Access to Health Care. The discussion of vaping in schools was analyzed along with the Tobacco Use and Exposure interviews. Chronic disease among specific populations was analyzed with the other Chronic Disease interviews. Nutrition and Childhood Obesity was analyzed with the other Nutrition interviews. The remaining issues are summarized at the end of the Issue Summaries section.

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. Access to Health Care
3. Substance Use and Abuse
4. Oral Health
5. Alcohol Abuse

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 Walworth County are marked with this thermometer symbol:

C. General Themes

Since the last release of this report in 2016, the health focus areas have changed slightly. Alcohol Abuse has been separated from Substance Use and Abuse, whereas they used to be ranked as one category. Adverse Childhood Experiences has been added as a focus area to be ranked. Finally, key informants are now able to write in and rank other health issues that are salient to them, but not present in the State Health Plan.

In 2016, 24 interviews were conducted with 25 key informants, which is only slightly fewer than this year’s report. Mental Health was the top issue in 2016 and remains such in 2020. Alcohol and Other Drug Use was ranked second in 2016, and both issues remain in the top five in 2020, ranked fifth and third respectively. Oral Health was ranked third in 2016 and is ranked fourth in 2020. Access to Health Services/Care was ranked fourth in 2016 and is ranked second in 2020. Finally, Chronic Disease Prevention and Management was ranked fifth in 2016 and has dropped to eighth in 2020.
In 2020, though Access to Health Care is ranked second, it was a major theme across health focus areas. Key informants talked about barriers to access across all of the top five health focus areas, as well as ACEs, Nutrition, Physical Activity, and Chronic Disease. Some of these access issues are related to the geography of the county. Parts of the county are quite rural and there are few transportation options to get people to services and appointments. Another issue key informants discussed across issues is a lack of providers, from psychiatrists, to counselors, to specialists, to nurse practitioners, to detox facilities, to dental providers that accept Medicaid. Key informants indicated there is a need to build a professional development pipeline to have people from Walworth County go into these fields or attract people from local technical schools, colleges, and universities to do their behavioral health internships, residencies, field placements, and other hands-on training in the county, and attract and retain providers and allied health professionals to build out the services where people need them. A final issue related to access that emerged across focus areas is the need for bilingual services and information. There is a large Latinx/Hispanic population in the county and key informants expressed the need for services in Spanish, as well as culturally sensitive providers and services that understand people may be reluctant to access services, may not have the ability to access health insurance, and may feel more comfortable with services in their language, rather than an interpreter.

D. Issue Summaries

Mental Health

Twenty-two key informants’ interview rankings included Mental Health as a top five health issue, and 16 ranked it number one. Themes from this topic overlap with other health issue areas like Access to Care, Substance Use and Abuse, and Adverse Childhood Experiences.

Existing Strategies: The county Department of Health and Human Services does well with community outreach and services and the crisis line, teen depression screening, crisis intervention training (CIT) for law enforcement, school-based behavioral health services, New Beginnings APFV provides free counseling in English and Spanish, integrating behavioral health into clinics in some health systems, crisis training provided by National Alliance on Mental Illness (NAMI) Walworth Inc. and free counseling services at Open Arms Free Clinic and at UW-Whitewater are some strategies in place to address mental health.

Barriers and Challenges: There aren’t enough services and providers to meet the needs, including psychiatrists, psychologists, and counselors. There are cost and insurance issues and low Medicaid reimbursement that prohibit people from accessing the services that do exist. There are wait times
for appointments, transportation difficulties getting to appointments, language barriers, stigma
around mental illness that makes it challenging for people to access care, denial that there is an
issue, it can be hard to reach those in need, and referral processes are not well defined and can be
hard to follow.

Needed Strategies: Communication between Health and Human Services and law enforcement
regarding mental health and substance abuse, bridging the gap between treating providers and
County government, better transportation to rural areas, screening people at their primary care
appointments, partnering with universities that offer behavioral health degrees and recruiting
students into the county for internships, recruiting and retaining this workforce, promoting public
education about mental illness and stigma reduction, and providing more Spanish-speaking
counselors are strategies needed to improve mental health in the county.

Key Community Partners to Improve Health: Health systems and health care providers, mental
health services providers, emergency services, schools, local government, county Health and Human
Services, law enforcement, Open Arms Free Clinic, Conexiones Latinas, non-profit organizations,
churches, social organizations, higher education institutions that are training the future behavioral
health workforce, local businesses, the YMCA, child care providers, transportation providers, NAMI
Walworth Inc., and organizations that provide services to seniors and people with disabilities are the
partners to work with to improve mental health in the county.

Subgroups/populations where efforts could be targeted and how efforts can be targeted: This issue
affects everyone, but it may be important to prioritize helping people who do not have access to
health care due to lack of insurance or inability to pay for services out-of-pocket. Work on reaching
children at schools and identifying issues early on and working with teens on healthy ways to relieve
stress. The Hispanic/Latino population may be less prone to seeking care and rely on friends and
family to refer them. Open Arms Free Clinic is hiring a bilingual therapist to see these patients.

Access to Health Care

Nineteen informants included Access to Health Care in their top-five health issues for the county
and four ranked it as their number one issue.

Existing Strategies: Collaborations across the county, a county-owned facility where hardly anyone is
turned away, Open Arms Free Clinic as a point of access for care, Lakeland School provides a safe
place where children will get appropriate and safe care and caregivers have some respite, using
more platforms to try to educate about services available, Walworth County VIP Transportation
makes it possible for people to access services, there are clinics in every community, school nursing,
behavioral health services in schools, telemedicine, extended hours of clinics and urgent care,
urgent care reservations, and more people having insurance coverage since the Affordable Care Act are the strategies that exist to help people access care.

**Barriers and Challenges:** Lack of providers, difficulty accessing transportation, far distances to travel for treatment, communities not having localized resources and having to travel to specialty appointments, lack of health insurance coverage, financial hardships and trouble navigating the health care system, high costs of medication, labs, x-rays, and specialty care, lack of respite or caregiving services, poor transitioning from youth to adult services for people with disabilities, lack of knowledge about services that do exist or how to access them, competition between service providers creates confusion about services, lack of Spanish-speaking staff and American Sign Language interpreters are major barriers to accessing care.

**Needed Strategies:** More providers, more transportation to services, child care for health care appointments, build a professional development pipeline and attract and retain health care providers in the area, extended clinic hours, better communication strategies, outreach or promotion of services that do exist, more interpreters and bilingual providers, and improved support to families navigating insurance systems are ideas to improve access to care.

**Key Community Partners to Improve Health:** Health care systems and providers, Open Arms Free Clinic, schools, the county Department of Health and Human Services, Alzheimer’s Association, MS Society, Leukemia and Lymphoma Society, businesses Employee Assistance Programs (EAP), local chambers of commerce, housing managers, local government, mobility managers for the county, child care providers, and churches were named as the key partners to work on this issue.

**Subgroups/populations where efforts could be targeted and how efforts can be targeted:** The Hispanic/Latino population needs Spanish interpretation if there are not services in Spanish and materials and resources in Spanish. They are also sometimes afraid to access services. They need to be met with trauma-informed and culturally sensitive services. Low-income and under insured or uninsured populations are vulnerable to going without care. Outreach to these groups should take place through organizations that work with low-income populations, schools, senior centers, churches, and community organizations.

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**Substance Use and Abuse**

Fourteen key informants ranked Substance Use and Abuse as a top-five health priority for the county, with two of them ranking it as their first health priority area.

**Existing Strategies:** The Drug Court, free treatment programs, strong stance from the district attorney’s office and law enforcement on these issues, the county’s Department of Health and Human Services’ programs for substance abuse and does community outreach, there is an overdose
fatality review team, the Walworth County Drug and Alcohol Coalition, a suboxone clinic, naloxone at Open Arms Free Clinics, and limits on pain medications provided by Open Arms Free Clinic are the strategies in place to address substance use and abuse.

**Barriers and Challenges:** Patients have to travel a distance to access treatment programs and support, the county lacks a detox facility, patients don’t have money to pay out of pocket for treatment services, long wait times at treatment providers, there are not enough mental health providers in the county, lack of support, peer mentors, and therapy for people who want to get clean are major barriers. The cultural norms around drinking, marijuana use, and other drug use are a challenge because it is normalized. People don’t understand the long-term effects of vaping with marijuana. Having marijuana legalized in Illinois means it is easy to access in Walworth County, and the lucrative nature of selling drugs makes it appealing to many people. There is some disagreement about the outcomes of the drug treatment courts. People who present in the criminal justice system with substance abuse issues often have many complex needs and are using to deal with other mental health, physical health, and family issues. Babies born with addictions go home with addicted parents and there aren’t enough foster parents for newborns.

**Needed Strategies:** Find ways to support people and help them get support they need before it escalates into a problem. Build a better foster care network with a shorter adoption timeline. Create more facilities offering mental health and substance abuse treatment programs and offer safe places for care and counseling. Establish a detox center in Walworth County. Provide prevention education in schools. Encourage workforce development in this area. The county needs more outpatient behavioral health services. Work on reducing stigma for people seeking help and use social media to educate and raise awareness of these issues.

**Key Community Partners to Improve Health:** The county’s Department of Health and Human Services, business owners, the criminal justice system, law enforcement, health care systems and providers, emergency medical services, pain management clinics, school districts, parent organizations, youth-serving organizations, substance abuse treatment providers from surrounding areas, churches, New Beginnings APFV, and the Walworth County Drug and Alcohol Coalition are the important partners in this work.

**Subgroups/populations where efforts could be targeted and how efforts can be targeted:** Some key informants suggested children and teens should be reached in school with prevention education, social media messaging, and applying lessons that worked with the tobacco fight. Young parents who have addiction should be reached in treatment programs. Immigrants may be afraid to seek help, especially from the government, and are more likely to be afraid of reporting things like drug abuse and violence for fear of deportation.
Oral Health

Ten informants’ rankings included Oral Health as a top-five health issue for the county, with two of them ranking it as their top health priority area for the county. The main concern about oral health is lack of access to dental services.

Existing Strategies: Open Arms Free Clinic is adding a dental clinic, the Seal-A-Smile program, a Division of Public Health study on fluoridation in community water are strategies in place to address oral health in the county.

Barriers and Challenges: A major barrier and challenge is a gap in oral health services. There are local dentists to provide care, but most do not accept Medicaid due to low reimbursement, so the Medicaid population cannot be served. Other barriers are lack of transportation to get to appointments, lack of information about resources and services, dentists are over scheduled and have a high no-show rate, oral health isn’t connected with other health care systems, and lack of fluoridation in some municipalities’ water.

Needed Strategies: It would be helpful if Medicaid reimbursement were higher so that providers would have an incentive to serve these patients. There should also be some education or collaboration with dentists about the need and the reasons many people cannot seek care, and perhaps coordination of dentists volunteering some of their time. There could be some coordinated transportation efforts to get people to appointments. There should be better integration of dentistry into health care, such as in emergency departments or offering telehealth services. There should be more work on prevention and oral hygiene, giving resources to people who do not have insurance, and bringing fluoride back to all municipal water system.

Key Community Partners to Improve Health: Local dentists, local schools that train dentists and hygienists, schools, school nurses, Division of Public Health, municipal councils, mayors, public works departments, United Way, and Open Arms Free Clinic are the key partners to work on this issue.

Subgroups/populations where efforts could be targeted and how efforts can be targeted: People who have low-income and/or Medicaid or no insurance (including undocumented people) and children were named as sub-populations who may need particular attention. Some ideas to reach people include providing everyone with free toothbrushes and toothpaste and teach proper oral hygiene. This could happen at health fairs and community events. School nurses and teachers could coordinate to identify children that need care and community institutions could collaborate to link these identified children and families to community organizations who can help them.
Alcohol Abuse

Alcohol Abuse was ranked as a top-five issue by eight key informants and the number one issue by one of them.

Existing Strategies: At the county level there is an alcohol and substance abuse program, treatment court, treatment in jail, and the Walworth County Drug and Alcohol Coalition. High schools have policies to deter students from drinking.

Barriers and Challenges: One of the main challenges is the cultural attitude of acceptance around alcohol consumption, its prevalence at events, and the ease of access to alcohol at every store, bar, gas station, restaurant, and social gathering place. There is stigma around sobriety and seeking treatment. There aren’t enough treatment options and many people don’t have the money to pay out of pocket for the services that do exist. There is no detox center in the county. Lack of enforcement of alcohol-related laws, lack of Spanish language services, and lack of transportation to services, and the intimidating location of Walworth County services are also barriers and challenges.

Needed Strategies: More education and awareness of the health effects of alcohol, more prevention education, cultural work to address norms about drinking in Wisconsin, changing laws around drinking and driving, decreasing the density of liquor licenses, establishing a detox center in the county, working on mental health, family dynamics and alcohol abuse together, integrating discussions and education about alcohol use into primary care with Screening, Brief Intervention, and Referral to Treatment (SBIRT), and planning for integration of behavioral health clinics into primary care clinic setting to have a more integrated system of treatment were suggested as strategies to address alcohol abuse.

Key Community Partners to Improve Health: Law enforcement, health care systems, Open Arms Free Clinic, substance abuse treatment centers in surrounding areas, the justice system, AODA treatment providers in the community, schools, faith communities, New Beginnings APFV, the local business community, the Tavern League, and Conexiones Latinas were named as the important partners to engage to work on this issue.

Subgroups/populations where efforts could be targeted and how efforts can be targeted: Seniors are one group who may need targeted prevention and treatment efforts. It is common for social gatherings at senior centers and care facilities to have happy hours and bars. This group could be reached through home health agencies, skilled nursing facilities, messaging from primary care providers, churches, and support groups. It is also important to reach young children to shape their attitudes around drinking early on. Children and parents should be reached with the same strategies used to decrease tobacco use and this issue needs to have more money behind it to address prevention. One key informant recommended targeting the Hispanic/Latino population, especially men in their early 20’s, by advertising and providing services in Spanish.
**Adverse Childhood Experiences (ACEs)**

Six respondents’ rankings included Adverse Childhood Experiences (ACEs) as a top health issue for the county. One of these ranked it as their top health priority area for the county.

**Existing Strategies:** There are programs in place to help parents such as Early Head Start, Love and Logic parenting skills class, offerings from the county’s Department of Health and Human Services, the Safe Families Program, community education offered through the Tree House, and therapists and counselors, including bilingual services offered through Health and Human Services. There are good connections between these programs, schools, law enforcement, attorneys, and doctors to direct parents where to go for help. There seems to be more general awareness of childhood trauma and its effects.

**Barriers and Challenges:** Some of the barriers and challenges to addressing ACEs were identified as domestic violence, parents who are overworked, overstressed, and under supported, the stressors of everyday life, fear of Child Protective Services getting involved, lack of access to education or awareness of programs, shortage of counseling staff, shortage of pediatric mental health providers, shortage of bilingual therapists and treatment, parents who are not taking care of their own mental health needs or addressing their own ACEs, and stigma and fear about asking for help.

**Needed Strategies:** Recruitment and retention of mental health staff, especially child psychiatrists and bilingual providers, work to normalize asking for help and talking about trauma, changing the perception of Child Protective Services, more discussion about childhood trauma and ACEs with parents, more trauma informed care education and working to build resilience in all ages, working with families who have disabilities, health problems, and substance abuse issues to address the whole situation, and having navigators in health care settings to help families get connected for all of their needs were some ideas shared by key informants.

**Key Community Partners to Improve Health:** Parenting groups, schools, Early Head Start, churches, child care providers, Women, Infants, and Children (WIC) program, county Department of Health and Human Services, and anyone who interacts with children and parents were named as the important partners to work on this issue.

**Subgroups/populations where efforts could be targeted and how efforts can be targeted:** Most key informants agreed that this issue affects all segments of the population. One suggested school districts should be targeted by offering educational presentations on this topic. Two key informants suggested there should be outreach tailored to the Hispanic community, especially the undocumented, because they may be afraid of having the county involved and have other barriers to accessing services, like language if Spanish-language services and providers are not there. It was suggested this community could be reached with a culturally sensitive approach and Spanish-speaking staff, and they can be reached at libraries, police departments, schools, health care settings, community fairs, and farmers markets. Other subpopulations were identified as being
especially vulnerable to ACEs, such as survivors of domestic violence, low-income populations, and homeless populations, but specific ideas for how to reach these groups were not provided.

**Nutrition**

Six respondents’ rankings included Nutrition as a top health issue for the county, including one key informant who ranked this as their number one health priority area. The key informants’ discussions focused mainly on food security, but also on healthy eating and nutrition education.

**Existing Strategies:** Nutrition education and nutrition assistance programs in the county like FoodWIse, Fit Families, the Women Infants and Children (WIC) program address this issue. Food pantries, lunch programs at schools and assisted living facilities, Meals on Wheels, and other senior programs and meal sites exist to provide healthy meals to people who might otherwise not have access to them.

**Barriers and Challenges:** Some challenges and barriers include lack of access to food, nutritious food, and full-service grocery stores for some residents in the county. Lack of transportation prevents some people from accessing healthier food options. Convenience stores and convenient, processed food options are often easier to access and prepare and less expensive. For food pantries, donations are processed, convenience items, there can be a lack of volunteers to run the programs, and patrons face transportation and housing problems. There is a general lack of awareness of what services or resources may exist in the community and sometimes people are reluctant to ask for help when they need it.

**Needed Strategies:** Key informants suggested there could be better nutrition education from a younger age at schools to help children learn to make healthy choices and avoid overeating and develop healthier social norms around eating. There should be stronger efforts to require children to eat balanced meals in schools. Community nutrition education, nutritionists at food pantries, healthy cooking classes and demonstrations, and making this kind of education easy to understand, fun, and accessible were other suggestions. There could be more education in the community about resources available to those who cannot afford enough food and more education around making nutritious donations to food pantries. Health care systems could get involved with food drives or encouraging employees to volunteer at pantries. There could be more grocery stores that sell healthy foods or a better system of transportation to connect people to food pantries, meal sites, and grocery stores that do exist in the county, especially for the homeless, low-income, and senior populations.

**Key Community Partners to Improve Health:** Convenience stores, commercial food sale businesses, food distributors and wholesalers, grocery stores, Feeding America, farms, local food pantries, schools, farmers markets, health care systems, the faith community, childcare providers, and other places where children and families go were identified as the key partners to work on this issue.
**Subgroups/populations where efforts could be targeted and how efforts can be targeted:** People with low or no income, people with disabilities, older adults, the homeless population, survivors of domestic violence, and children were identified as subpopulations who may be particularly vulnerable to food insecurity or poor nutrition. One idea offered is linking people to farmers markets, produce stands, and other places with nutritious options with transportation. One idea for reaching seniors, the homeless, and children is offering nutrition education programs at community organizations and senior centers. Another idea is to promote and support the work already being done by food pantries and spread the word about the services offered and qualifications to receive those services.

**Chronic Disease**

Four key informants’ rankings included Chronic Disease as a top health issue for the county. One of these four provided responses specifically about Parkinson’s Disease. Additionally, a fifth key informant wrote in and ranked chronic disease among people who are overweight, have no physical activity, lack a primary care provider, and have an underlying mental health condition as a specific top five health priority issue area for the county. They did not further discuss this topic, but it should be noted as a confluence of a few different health issue areas.

**Existing Strategies:** Open Arms Free Clinic is working to aid those who do not have health insurance or funds to pay for services. Advocate Aurora Health offers education and transitional care for chronic disease patients. Patients are also followed in the community by Aurora at Home and Senior Resource nurses. Regarding Parkinson’s Disease, the YMCA offers Rock Steady Boxing exercise classes that are adapted from boxing drills for this population.

**Barriers and Challenges:** There are structural-level issues like the high costs of health care and health insurance, lack of understanding of how the Affordable Care Act (ACA) Marketplace health plans work or how to apply for them, lack of understanding of how medical systems work, and lack of transportation to get to appointments. There are also individual-level issues like lack of motivation to make lifestyle changes or other personal reasons that lead to lack of compliance with a plan of care. For Parkinson’s Disease, there is a lack of awareness of the disease.

**Needed Strategies:** For prevention, there is a need for healthy lifestyle education, starting at an early age in elementary school. For chronic disease management among patients, more education about how to navigate and understand insurance, health systems, and how to decrease risk factors across the lifespan. Another suggestion is serving patients in more innovative ways, such as using a barbershop community health worker model. For Parkinson’s Disease there is a need for more awareness and for support for the family, including respite care, education, and assistance.
**Key Community Partners to Improve Health:** Health systems, the county Department of Health and Human Services including the Aging and Disability Resource Center, schools, and senior living communities are the key partners identified.

**Subgroups/populations where efforts could be targeted and how efforts can be targeted:** It was suggested that the senior population and people with disabilities could benefit from special outreach from Lutheran Social Services social workers, at senior living sites, and through health care providers asking the right questions at their annual check-up.

### Physical Activity

Four key informants’ rankings included Physical Activity as a top health issue for the county.

**Existing Strategies:** There are fitness classes and programs offered by the YMCA, UW-Extension, the county’s Department of Health and Human Services, and UW-Whitewater. These include Silver Sneakers for seniors, Physical Activity for Lifelong Success (PALS) for older adults who have not been very physically active, UW-Extension’s Strong Women program, and UW-Whitewater’s support for adaptive sports. Businesses are trying to make more incentive-based wellness programs for employees.

**Barriers and Challenges:** The cost of participation in programs, Wisconsin weather, sedentary lifestyles, personal lack of motivation or choice not to be active, lack of infrastructure for safe walking and biking, and lack of awareness of how to safely exercise with illness or pain are some barriers and challenges to improving the county’s physical activity levels.

**Needed Strategies:** There is room for more opportunities for exercise that meet the need of people at all ability levels. Schools should support inclusive physical activity and recreation programs. The built environment could be improved to make walking and biking easier and make transportation more accessible so people can participate in programs that do exist. Increased awareness of safe exercises people can do with illness or pain. There could be more low-cost physical activity options. There is room for more promotion of physical activity that is free or low-cost and social, like Yoga on the Square or walking clubs. Health care providers could write prescriptions for exercise and treat physical activity like medication. Fitness programs for older adults and disabled adults exist, but there may need to be more partnerships among organizations who serve older adults to perform better outreach to these populations. Adaptive and inclusive exercise opportunities should be incentivized.

**Key Community Partners to Improve Health:** Local businesses, schools and universities, health care systems, YMCA, fitness clubs, service and social organizations, and those who can raise awareness of programs and activities that do exist were named as partners to improve physical activity.
Subgroups/populations where efforts could be targeted and how efforts can be targeted:

It was suggested that the younger population should be reached because they are able to build healthy lifestyle habits through exercise. They could be reached at their annual check-ups with primary care providers and have discussions about exercise, healthy eating, and lifestyle. It was also suggested that people with disabilities may need more specialized outreach for programs that are accessible to them. Younger seniors are a group that may need extra outreach from programs and organizations that can keep them active before they lose the ability to participate. This population may be reached through retiree groups or human resources departments at large employers.

Injury and Violence

Three rankings included Injury and Violence as a top health issue for the county, with one of these ranking it as their top health priority area. These key informants focused their responses on domestic or family violence, sexual assault, and child abuse.

Existing Strategies: The county has strong organizations in place to address these issues through services, advocacy, violence prevention education, and healthy relationship and non-violent parenting education. Some examples provided include New Beginnings Association for the Prevention of Family Violence (APFV) and their relationships with UW-Whitewater, UW Extension, hospitals, clinics, law enforcement, and the justice system, and the Tree House.

Barriers and Challenges: Cultural norms about relationships for all demographics, community organizations as a whole do not recognize the rate of adverse childhood experiences and violence in the county, lack of time to provide education in the community, and lack of affordable housing stock makes it hard for people in dangerous or violent situations at home to leave and find a safer place to live that they can afford, especially with children.

Needed Strategies: There should be more education and awareness building in the community, including more time for these types of presentations, increased funding for the Tree House and organizations that do violence prevention work, more mental health providers to decrease wait times for appointments, and more education and training for health care providers and law enforcement about the difference between bruises and signs of abuse.

Key Community Partners to Improve Health: The County Department of Health and Human Services, hospital and health care systems, schools, the Tree House, law enforcement, and Child Protective Services were named as key partners to improve health.

Subgroups/populations where efforts could be targeted and how efforts can be targeted:

One group that might need special outreach are seniors and they could be reached with a senior advocate to do presentations or education sessions in retirement homes or senior centers, or through partnerships with the Aging and Disability Resource Center. Another subpopulation to focus efforts
toward may be the Hispanic population in the county. It was noted that they might be easier to reach through Facebook, and through other social media because it is easy to translate messages using technology and it is a fast and accessible way to reach most people. It was suggested there might be a need to reach women of all ages since they are a group most often affected by injury and violence, and it was noted that social media is a quick way to reach many people. Regarding child abuse and healthy parenting, efforts could be targeted to young adult parents who might be less experienced and need training on parenting issues and what good parent-child relationships look like. Lower income residents might need special outreach to know what resources they might qualify for. Programs and outreach effort should consider the deaf population and provide sign language interpreters. It was noted that people can get involved in fund raisers that support the Tree House to be aware of and support child abuse prevention and healthy families in the community.

**Tobacco Use and Exposure**

Three key informants included Tobacco Use and Exposure as a top health issue for the county. One additional key informant offered “vaping in schools” as a specific health issue they wrote-in and ranked in their top five. Their responses to this narrower, but related issue will be incorporated here.

**Existing Strategies:** Schools are education parents about vaping, schools are removing doors from restrooms, and the state is helping.

**Barriers and Challenges:** Vaping is difficult to address due to the size of the problem and the ease of accessing and hiding the products. Other barriers and challenges are the cultural acceptance of social tobacco use, lack of education about risks, teachers not receiving the right information, and difficulty enforcing laws and policies.

**Needed Strategies:** Schools need access to more resources and education, the general public needs more education and awareness, and getting the risk messaging to pre-teens and teens were suggestions for addressing this issue.

**Key Community Partners to Improve Health:** School leaders, churches, law enforcement, alcohol and other drug abuse (AODA) counselors, clinics, and New Beginnings APFV are the local entities who should be involved in improving health.

**Subgroups/populations where efforts could be targeted and how efforts can be targeted:** Respondents noted this issue affects all ages, income levels, genders, and ethnicities, and suggested it might be useful to focus intervention efforts towards teenagers and young adults.
Environmental and Occupational Health

One key informant included Environmental and Occupational Health as a top health issue for the county, particularly contaminants in home water supplies.

Existing Strategies: The county offers well testing programs to help homeowners test their well water supply for contaminants.

Barriers and Challenges: Two barriers are the cost of testing the water supply and lack of knowledge of the source or cause of contamination.

Needed Strategies: There should be a way to allow water testing for those who can't afford it. It was suggested that grants could be acquired to supplement testing costs. There needs to be an improved effort of research to identify the sources and causes of contaminants in drinking water to determine what actions can be taken to protect the drinking water supply.

Key Community Partners to Improve Health: Farmers, land developers, conservation groups, and zoning regulators should partner to work on these issues.

Subgroups/populations where efforts could be targeted and how efforts can be targeted: It was suggested rural farmers and families may be especially in need of support. No recommendations for reaching them were offered.

Reproductive and Sexual Health

One key informant ranked Reproductive and Sexual Health as a top health priority for the county.

Existing Strategies: Sexual health is currently taught, but in a limited way.

Barriers and Challenges: There is a barrier getting into the schools to address sexual health because parents want to limit what is discussed in schools, rather than offering a comprehensive sexual education.

Needed Strategies: Partnerships with administrators of school districts to address the necessity of a non-judgmental sexual health curriculum to decrease myths around sexual health. There should also be a public campaign to address the stigma around discussing sexual health and treatment for those who have sexually transmitted diseases.

Key Community Partners to Improve Health: Faith institutions, schools, and parent organizations should work together on this issue.

Subgroups/populations where efforts could be targeted and how efforts can be targeted: There should be special efforts to reach middle school students, high school students, and young adults ages 18-24. They should be reached at school, including college campuses and universities.
should be efforts to make it easier for these groups to be tested and treated for sexually transmitted diseases.

**Healthy Growth and Development**

One set of key informant interview rankings included Healthy Growth and Development as a top five health priority area for Walworth County, though they did not provide further discussion of existing strategies, barriers and challenges, needed strategies, key partners, or particular subpopulations where efforts could be targeted to address this issue.

**Communicable Disease**

Communicable Disease was not ranked as a top five health issue by key informants. Examples of existing strategies, barriers and challenges, needed strategies, key partners, and affected subpopulations were not provided.

**Other Issues**

One key informant wrote in *Senior Services and Care* as a top five health focus area for the county. They described barriers and challenges to addressing this issue: “In discussions with other local community senior living facility staff, it is becoming harder and harder for nursing homes to receive enough reimbursement to care for seniors. It is also extremely difficult for their facilities to find and maintain the staff needed to care for their residents.” They recommended the following to address this topic: “It may be beneficial to start a small group in the community that consists of members from all healthcare organizations and nursing home facilities, along with members of the county health to start some problem solving and discussions about what next steps could be taken by all attendees to address the care and senior services challenges and shortage in that area. These discussions/ideas could then be brought to the table of other leaders in the community, if they are unattainable by the group itself.”

One key informant wrote in *Support for Families/ Caregivers/ Survivors* as a top five health focus area for the county. They identified New Beginning APFV’s support groups for domestic violence and sexual assault as a strategy in place to address this issue. Challenges to addressing this issue include a lack of support groups for families, caregivers, partners, and survivors. They suggested there is a need for support for families with autism, loved ones of those affected by mental illness, and caregivers. The key partners to work on this issue are UW-Whitewater’s social work department, partners at the county, health care systems and providers, and anyone focused on family togetherness and connection.
One key informant wrote in **Problems with Medicaid** as a top five health focus area for the county. They described the issues that exist with Medicaid as it exists in Wisconsin: Wisconsin is not a Medicaid expansion state. To qualify for Medicaid, the income limit for all adults is 100% of poverty level. Childless adults then go to the Marketplace, which often results in a high deductible. Due to costs they often will not obtain insurance coverage. Challenges include maneuvering the Marketplace, paying high premiums, moving between insurance plans due to income fluctuations, and changing Medicaid rules, which can be difficult to understand. Also, children with BadgerCare can be denied if the parent can get insurance through their employer if they pay at least 80% of the premium regardless of the deductible. They suggested assistance navigating the system might be helpful.
Appendix A. Interview Participants for Walworth County

Key Informant Interview Participants
Twenty-nine individuals participated in 27 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>Elizabeth Aldred</td>
<td>Director</td>
<td>Walworth County Department of Health &amp; Human Services</td>
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<tr>
<td>Mia Anderson-Inman</td>
<td>Economic Support Supervisor</td>
<td>Walworth County Department of Health &amp; Human Services</td>
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<tr>
<td>Roberta Ashby</td>
<td>Pediatrician</td>
<td>Aurora Health Care</td>
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<tr>
<td>Patti Birks</td>
<td>Director of Nursing</td>
<td>Lakeland Health Care Center</td>
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<tr>
<td>Lisa Broll</td>
<td>Children and Families Division Manager</td>
<td>Walworth County Department of Health &amp; Human Services</td>
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<tr>
<td>Jodi Bronson</td>
<td>School Psychologist</td>
<td>Lakeland School</td>
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<tr>
<td>Gina Carver</td>
<td>Medical Examiner</td>
<td>Walworth County Medical Examiner’s Office</td>
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<tr>
<td>Chuck Cervenka</td>
<td>Pastor</td>
<td>Calvary Community Church</td>
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<tr>
<td>Joyce Dedrick</td>
<td>Nurse Practitioner, Center for Women’s Health</td>
<td>Fort HealthCare</td>
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<tr>
<td>Carmen Garces</td>
<td>Bilingual Advocate &amp; Counselor</td>
<td>New Beginnings APFV (Association for the Prevention of Family Violence)</td>
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<tr>
<td>Jeni Hallatt</td>
<td>Vice President</td>
<td>Mercyhealth</td>
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<tr>
<td>Sonia Hill</td>
<td>Crisis Intervention Supervisor</td>
<td>Walworth County Department of Health &amp; Human Services</td>
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<tr>
<td>Susan Hughes</td>
<td>Managing Director</td>
<td>Walworth County Food and Diaper Bank</td>
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<tr>
<td>Lisa Jensen</td>
<td>Community Health &amp; Wellness Manager, School Nurse Coordinator</td>
<td>Fort HealthCare</td>
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<tr>
<td>Randy Kohl</td>
<td>Long Term Care Manager</td>
<td>Walworth County Department of Health &amp; Human Services</td>
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<tr>
<td>Nancy Korth</td>
<td>VP of Nursing, Chief Nursing Officer</td>
<td>Advocate Aurora Health</td>
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<tr>
<td>Amanda Kostman</td>
<td>Outreach Specialist, Human Development &amp; Relationships Extension Educator</td>
<td>University of Wisconsin- Madison, Division of Extension, Walworth County</td>
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<tr>
<td>Mike Kramp</td>
<td>CEO/ Executive Director</td>
<td>Geneva Lakes Family YMCA</td>
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<tr>
<td>Lisa Krolow</td>
<td>FoodWise Coordinator</td>
<td>University of Wisconsin- Madison, Division of Extension, Walworth and Jefferson Counties</td>
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<tr>
<td>Mark Lewno</td>
<td>Manager of Pharmacy Operations</td>
<td>Advocate Aurora Health</td>
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<tr>
<td>Tracy Moate</td>
<td>School Administrator/ Director of Special Education</td>
<td>Lakeland School</td>
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<tr>
<td>Name</td>
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<tr>
<td>Carlo Nevicosi</td>
<td>Deputy Director</td>
<td>Walworth County Department of Health &amp; Human Services</td>
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<tr>
<td>Sara Nichols</td>
<td>Executive Director</td>
<td>Open Arms Free Clinic</td>
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<tr>
<td>Marc Perry</td>
<td>Director of Planning &amp; Development</td>
<td>Community Action Inc.</td>
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<tr>
<td>Kurt Picknell</td>
<td>Sheriff</td>
<td>Walworth County Sheriff's Office</td>
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<tr>
<td>Nancy Russell</td>
<td>Chair</td>
<td>Walworth County Board of Supervisors</td>
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<tr>
<td>Kristy Weinberg</td>
<td>Executive Director</td>
<td>Bethel House of Whitewater, Inc.</td>
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<td>Araceli Wence</td>
<td>Bilingual Advocate</td>
<td>New Beginnings APFV (Association for the Prevention of Family Violence)</td>
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<tr>
<td>Tina Winger</td>
<td>Director</td>
<td>The Tree House, Walworth County Child Advocacy Center, Children’s Hospital of Wisconsin</td>
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