Key Informant Interview Report

A summary of Key Informant Interviews

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Introduction

Every three years, Healthy Sheboygan County, a community-based initiative seeking to make positive changes in the health status of Sheboygan County residents, partners with local hospital systems and non-governmental organizations to assess the community’s health needs and create a recommended set of health-related topics to prioritize over the next few years. This report is one of several summaries that illustrates the information gathered during the Community Health Needs Assessment (CHNA) process. The Key Informant Interview report includes viewpoints from a range of providers, policy-makers, community leaders, local experts, and Sheboygan County residents (hereafter referred to as “Key Informants” and/or “Informants”). While other data collection efforts focus on quantitative data collection and analysis, random sampling techniques, and reaching out to Sheboygan County residents directly, this report attempts to incorporate qualitative data from leaders in the community who represent organizations that are deemed to, “have a pulse on the community”, by way of serving or engaging with sizable portions of Sheboygan County’s inhabitants. Though the Sheboygan County Division of Public Health facilitated the process of data collection and report creation, the following partner organizations participated in conducting the actual interviews: Advocate-Aurora Health Care, Holy Sisters Hospital Systems St. Nicholas Hospital, Lakeshore Community Health Care, Froedtert Health, Sheboygan County Health & Human Services - Division of Public Health, The United Way of Sheboygan County, and The University of Wisconsin Extension - Sheboygan County.

Methods

The groups mentioned in the previous section convened to determine which organizations ought to participate in the interviews. Forty-five Key Informants were identified and invited to participate in an interview. Of the 45 Informants that were contacted, 38 agreed to be interviewed for this report. Additionally, some interviews contained input from multiple individuals; a complete list of participating Informants can be found in Appendix A. These interviews occurred between March, 2023 and June, 2023. Interviews were conducted via an online platform (Zoom, Google Meet, Microsoft Teams, etc.) and guided by a set of scripted powerpoint slides (see Appendix C) that attempted to capture responses from the following questions:

- From a list of pre-selected health-related topics derived from the Wisconsin State Health Plan, please choose and rank-order up to five health-related issues in your community.
- For each of the five health issues identified, please answer the following:
  - What are some existing strategies to address this health issue - what is working well?
  - What are the barriers/challenges to addressing this issue - what could we do differently?
  - What additional strategies are needed to address this issue?
  - Who are the key groups in the community that we could partner with to improve community health?
○ Is there a subgroup or population where we could target our efforts? (Ex.: age, gender, race, ethnicity, income level, disabled, neighborhoods, etc.)

If a subgroup is identified:
○ How could we target our efforts towards this subgroup?

The interviewees were provided with an informed consent that asked for permission to share their answers with the Healthy Sheboygan County Steering Committee for the purpose of completing a Community Health Needs Assessment. Their interviews were recorded and transcribed, resulting in approximately 325 pages of Key Informant responses, a more than five-fold increase in the amount of content obtained for the 2020 CHNA Key Informant Interview report. The following report presents the results of the 2023 Sheboygan County Key Informant interviews.

The beginning of this report summarizes the focus area rankings, including a table that illustrates which topics were most frequently ranked as a ‘top five health need’, as well as how often each health issue was cited as the most important health-related issue to prioritize. The following section illuminates general themes that permeated the health issues and were present across several, if not most, of the topics discussed. After identifying general themes, the majority of this report is focused on the health issue summaries, a synopsis of each health issue that was discussed. Although interviewers did not specifically ask our Key Informants any direct questions pertaining to the COVID-19 pandemic, their responses often included mention of the pandemic and how it influenced the current health-landscape of not only our county, but the state, nation, and world as well. Mentions of “Covid”, “COVID-19”, and/or “the pandemic” were aggregated and presented as general sentiments pertaining to the recent COVID-19 pandemic, after the issue summaries. The report concludes with a number of appendices, including connection webs. Located in Appendix D, the connection webs exist to show the connectedness of our community around certain health focus areas. The closer to the center of the diagram an organization is, the more frequently it was mentioned by the Key Informants during their interviews.

Limitations
Despite our aim to include a comprehensive representation of Sheboygan County through the identification and inclusion of Key Informants, the authors acknowledge that the views and opinions displayed in this report come from a handful of key community leaders and may not be representative of the general population. Additionally, Informants were not chosen through a random sampling process and therefore any extrapolations of the comments contained within this report ought to be considered with caution and within the context of other CHNA data components. Another limitation of this report is the variety of interviewers; because there were interviewers from multiple organizations and a standard training wasn’t explicitly delivered, interviewer bias may have played a role in some Informants responses (ex. Interviewer asking leading questions or focusing on personal relationships to the interviewee, etc.).
Focus Area Ranking

During the 2023 Community Health Needs Assessment cycle, there were 38 Key Informants who volunteered their time to answer questions regarding the top health-related issues impacting Sheboygan County. They were asked to choose up to five issues from a list of 15 issues that were from the State Health Plan. In the event where a Key Informant desired to provide feedback on an unlisted health-related topic, an “Other” option was provided. The following table depicts the results from the Key Informant rankings, including the top five most frequently discussed health topics as well as how often each health topic was listed as the top health-related issue to prioritize in the county. Note that some Informants mentioned items in groups, an example is Alcohol often being looped in with Substance Use and Abuse. If this was the case, both Alcohol AND Substance Use and Abuse received the same ranking; because of this, there may be more “points” distributed amongst the topics than what would be expected based on the number of interviews conducted.

<table>
<thead>
<tr>
<th>Health-Related Topic</th>
<th>Top 5</th>
<th>Ranked First</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mental Health</td>
<td>35</td>
<td>24</td>
</tr>
<tr>
<td>Substance Use and Abuse</td>
<td>27</td>
<td>3</td>
</tr>
<tr>
<td>Adverse Childhood Experiences</td>
<td>16</td>
<td>0</td>
</tr>
<tr>
<td>Access</td>
<td>15</td>
<td>8</td>
</tr>
<tr>
<td>Alcohol</td>
<td>15</td>
<td>0</td>
</tr>
<tr>
<td>Nutrition</td>
<td>12</td>
<td>0</td>
</tr>
<tr>
<td>Chronic Disease</td>
<td>9</td>
<td>2</td>
</tr>
<tr>
<td>Growth and Development</td>
<td>7</td>
<td>0</td>
</tr>
<tr>
<td>Reproductive and Sexual Health</td>
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<td>2</td>
</tr>
<tr>
<td>Oral Health</td>
<td>2</td>
<td>0</td>
</tr>
<tr>
<td>Physical Activity</td>
<td>2</td>
<td>1</td>
</tr>
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<td>Communicable Disease</td>
<td>2</td>
<td>0</td>
</tr>
<tr>
<td>Injury and Violence</td>
<td>2</td>
<td>0</td>
</tr>
<tr>
<td>Tobacco</td>
<td>2</td>
<td>0</td>
</tr>
<tr>
<td>Environmental and Occupational</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>Housing</td>
<td>1</td>
<td>0</td>
</tr>
</tbody>
</table>
Top Five Health Issues

The health-related issues that Sheboygan County’s Key Informants most consistently ranked as their top five were:

1. Mental Health
2. Substance Use and Abuse
3. Access*
4. Alcohol
5. Adverse Childhood Experiences (ACEs)

The table below contains the top five health focus areas identified by Sheboygan County Key Informants beginning in 2017. Mental Health and Substance Use and Abuse (which could include Alcohol) have been leading health priorities in the county for the last several years. Access (to health services) has consistently been a top health focus area and Adverse Childhood Experiences is beginning to become one as well.

### Historical Perspective

<table>
<thead>
<tr>
<th>Top 5 Health Focus Areas</th>
<th>2017</th>
<th>2020</th>
<th>2023</th>
</tr>
</thead>
<tbody>
<tr>
<td>#1</td>
<td>Mental Health</td>
<td>Mental Health</td>
<td>Mental Health</td>
</tr>
<tr>
<td>#2</td>
<td>Alcohol and Other Drug Use</td>
<td>Substance Use and Abuse</td>
<td>Substance Use and Abuse</td>
</tr>
<tr>
<td>#3</td>
<td>Nutrition</td>
<td>Access to Health Care</td>
<td>Access</td>
</tr>
<tr>
<td>#4</td>
<td>Chronic Disease Management and Prevention</td>
<td>Adverse Childhood Experiences</td>
<td>Alcohol Use</td>
</tr>
<tr>
<td>#5</td>
<td>Access to Health Services</td>
<td>Alcohol Abuse</td>
<td>Adverse Childhood Experiences</td>
</tr>
</tbody>
</table>

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 Sheboygan County are marked with this lighthouse symbol:

*Previously, Access was discussed in terms of ‘Access to health care’. In 2023, interviewers did not clarify ‘Access to health care’ and let the Key Informants interpret the topic how they preferred.*
General Themes

In the three years since the last Key Informant Interview report was compiled, the health focus areas, pulled from the State Health Plan, have not changed. As was the case with last cycle’s report, Informants were able to identify ‘Other’ health topics of importance. While most Key Informants discussed health topics that were listed out from the State Health Plan, one Informant made mention of Housing as a top health issue facing Sheboygan County.

Access was listed as a top health focus area on its own, but was also discussed at length as it pertained to many other topic areas (e.g., access to mental health services, access to affordable childcare, access to health care, etc.). Another theme around the topic of Access was that it was historically posed to Informants as ‘Access to Health Care’. This cycle, however, our interviewers did not specify the health care component and just listed ‘Access’ as a topic area that was open to interpretation by the Informants.

Another theme that was woven into many Key Informants’ responses was the influence that the COVID-19 pandemic had. Its widespread impact was often cited as exacerbating the health challenges that Sheboygan County was already facing. Conversely, several Informants discussed the positives that came out of the pandemic, such as a more technologically-oriented society and a decrease in the stigma associated with mental health.

A general lack of resources was frequently mentioned by Informants. A common gap was in the mental health field, specifically among youth; one Key Informant stated it might take months from the time a child is in crisis until an appointment becomes available to see a mental health professional. In a similar vein, several Informants mentioned a lack of workers available to fill vacancies, whether these be for dental hygienists, mental health therapists, or social workers. Informants described many resources available in the community, but also noted that options were limited. This notion was often expressed in a manner that recognized what was currently available in terms of community services, but also made note of the current options not necessarily being able to meet the ongoing demand in Sheboygan County. Because of the challenges discussed, another popular theme was the consequences of limited resources. This included long waiting times for many services that could result in an exacerbation of the initial issue.

Other general themes that cropped up during the Key Informant interviews included the recognition that Alcohol has been, and most likely will continue to be, a challenging topic to address in Sheboygan County. The normalization of Alcohol consumption and the culture surrounding it, have made this a particularly nuanced health area to navigate. For example, children are exposed to parental consumption at an early age, reinforcing its role as a customary fixture of the county and Wisconsin as a whole. Another theme was the desire to increase education around the topics discussed. Many Informants mentioned a lack of awareness as a major inhibiting factor to addressing the health issues discussed. Finally, several Informants noted a need for additional language services in the county. This includes more bilingual mental health providers, more
messaging in languages other than English (as it pertains to any health area), and more substance use support groups that operate in languages such as Spanish or Hmong.

Health Issue Summaries

Mental Health

Thirty-five Key Informants listed Mental Health as a top ranked health issue for Sheboygan County. These individuals represent economic, religious, youth, assistance, education, cultural, healthcare, mental health, and government organizations. Twenty-four of the 35 Key Informants ranked Mental Health as the top health issue in Sheboygan County. Mental Health was often discussed in the context of access (to mental health services), but was also seen as a topic that pertains to all aspects of wellbeing; a foundational component to wellness. Mental Health was frequently associated with Substance Use and Abuse and discussed from a perspective of targeting our county’s youth population. This health topic was the highest ranked issue and has been a top health issue in the community for at least the last four CHNA’s (starting in 2014) including the 2023 CHNA.

Existing Strategies

While there were many Key Informants who identified mental health as a top health priority for the county, a handful of themes were mentioned frequently, including: focusing efforts on addressing mental health in our youth population in the hopes of mitigating future mental health crises, the collaborative efforts of our community’s partners to lean into one another for a synergistic impact, and the reduction of stigma around mental health in order to break the generational cycle of poor mental health maintenance. Telehealth appointments and other mental health apps were seen as prime methods for increasing access to mental health services, reducing the wait time associated with in-person therapy appointments, and offering cheaper alternatives. Conversely, one Key Informant mentioned the reestablishment of in-person therapy appointments as a major win, especially coming out of the COVID-19 pandemic. Advocate-Aurora’s onsite behavioral health unit that operates at all hours and Lakeshore Community Health Care’s drop-in center, were both cited as strategies that are working well to address mental health. Several Key Informants mentioned that the county has both a broad offering of resources that are accessible and available to the community including LGBTQ+ specific support groups and opportunities to embrace employers in the county as a channel for providing staff with education on topics that pertain to mental wellbeing, including empathy. From a historical perspective, one Key Informant noted that over the last 5-10 years, Sheboygan County has seen a major increase in the amount of mental health resources and services being offered; this effort was precipitated by a strong sense of community collaboration/connectedness and includes offerings such as Rogers Behavioral Health, the Sheriff's Crisis Intervention Team, and the Health and Human Services’ Mental Health & Substance Abuse Treatment Center’s 24-hour Mobile Crisis Unit. In addition to Rogers Behavioral Health, several Key Informants mentioned the following organizations as successful strategies for addressing mental health in the community: Mental Health America, Catholic Charities, Lakeshore Community Health Care, and the United Way of
Sheboygan County. Additional themes that were commonly reported by Key Informants were the wide variety of services offered through varying avenues including private providers, county programs hosted by the Department of Health and Human Services, and through the county healthcare systems. This breadth of offerings, in tandem with the collaborative spirit and solid foundation hosted by Healthy Sheboygan County’s Positive Mental Health Coalition are not only creating awareness around mental health in the community, but providing solutions for addressing it through a collective impact model. Several Key Informants mentioned a number of organizations that host emotional literacy training for youth and their families, as well as more broad training for individuals working within the field of mental health to ensure that everyone is, “speaking the same language”. The PATH (Providing Access to Healing) program was frequently commended for its impact on addressing youth mental health. Other strategies suggested included: providing access to services for veterans via a partnership with the Veterans Health Administration medical centers and clinics, encouraging peer to peer support/mentoring models, the fact that Sheboygan County has at least some multilingual resources pertaining to mental health, the expansion of services offered at the county’s institutions of higher education, and a number of group homes in the county that support individuals transitioning from a commitment into the community.

**Barriers/Challenges**

Several barriers and challenges were provided by the majority of the Key Informants such as a lack of mental health professionals, specifically for children and non-English speaking community members, very long wait times to be seen by a provider, and general mental health stigma and shame which prevents individuals from seeking care. Other challenges identified include a lack of transportation resources, especially for rural communities, difficulty paying for mental health care and medications, lack of affordable housing, lack of childcare options for individuals seeking treatment, and the lack of mental health education and prevention resources. Additional challenges given by individual Key Informants include increased mental health needs from the COVID-19 pandemic, mental health needs not being identified or diagnosed, resources that cannot be used by individuals without phone or internet access, potential cultural barriers on how mental health is perceived, and a decrease in options for severely mentally ill individuals.

**Needed Strategies**

Many Key Informants feel that more education and awareness on mental health should be implemented; not only for the general public, but also for mental health professionals and law enforcement. This should include implementing more complete mental health education within our schools, continuing education for mental health and law enforcement professionals with a focus on de-escalation tactics and crisis management, and additional education within our workplaces. Other strategies include increasing transportation options, meeting families where they are as opposed to offering information that must be sought out, collaborating with other communities for creating solutions, and more intentional collaboration between local providers and organizations to provide more comprehensive care. Additional strategies suggested by Key Informants include implementing mentoring programs for youth and within workplaces, working to decrease the barriers that slow
down the process of provider certification, increasing access to services for uninsured individuals, advocating for more funding that would increase the number of providers and resources, increasing culturally sensitive and bilingual services, implementing local neighborhood social workers to work directly with community members, working with local colleges and universities to recruit more mental health professionals to our community, and opening a local independent living center in Sheboygan County.

**Key Community Partners to Improve Health**

When asked which key groups in the community we could partner with to improve mental health, a majority of the Informants listed a few organizations consistently, including: Mental Health America, Lakeshore Community Health Care, Rogers Behavioral Health, and the United Way of Sheboygan County’s PATH (Providing Access To Healthing) program. Sheboygan County Health and Human Services, especially their Public Health and Behavioral Health divisions, Catholic Charities, local law enforcement agencies, Generations, Uptown Social, and Above and Beyond Children’s Museum were additional key groups that our respondents mentioned. Key Informants also frequently suggested schools (teachers especially), afterschool programs, youth athletic coaches, Boys and Girls Club, Big Brothers Big Sisters, Love Inc., LGBTQ Alliance, The Salvation Army, Mobile Crisis, and the Aging and Disability Resource Center. Other less frequently mentioned key community partners include the Sheboygan County Economic Development Corporation, Healthy Sheboygan County, various religious organizations in the county, our physicians and healthcare providers, early childhood educators, the State of Wisconsin, the Housing Coalition, Lakeland University, the University of Wisconsin - Green Bay, Pathways, Partners for Community Development, large employers within the county, Nourish Farms (from the perspective of encouraging outdoor activities and proper nutrition), local municipality leaders like the mayor, and local transit groups such as Shoreline Metro.

**Subgroups/Populations Where Efforts Could be Targeted and How Efforts Can be Targeted**

As was the case with key community groups to partner with, our Key Informants repeatedly listed a handful of subgroups to target with the most popular being youth and adolescents, followed by low-income individuals or those experiencing low socioeconomic status, and unhoused individuals. Other subgroups mentioned include rural county residents, elderly individuals, those with limited education, men (specifically middle-aged men as their risk of suicide is greater), and those who identify as part of the LGBTQ+ population (there was specific mention of transgender individuals who are going through a transition). Parents, for fear of losing custody of their children by admitting mental health challenges and those who care for children with disabilities, non-English speaking individuals and, more specifically, those who speak Spanish or are of Hispanic/LatinX descent, those who live with disabilities or have functional needs, and children with high ACE (Adverse Childhood Experience) scores were other groups suggested by the Key Informants. Several Informants mentioned that mental health is a topic that has the propensity to impact everyone in the community regardless of age, gender, sexual orientation, race/ethnicity, income level, etc. Less frequently mentioned groups include specific neighborhoods where access to mental health services might be a challenge, cultural groups (especially cultural student groups belonging to Sheboygan County’s higher education institutions), individuals
within the workforce, and those county residents with a history of self-harm who may require more specific services.

When asked how we might be able to best target our efforts towards the subgroups identified above, Key Informants provided the following recommendations: promoting a culture of acceptance and empathy - especially for youth who are experiencing identity crises - continuing to encourage collaborative partnerships among service providers in the county, focusing on early outreach to specific groups with the hopes of preventing the escalation of minor mental health occurrences to crises, and focusing on schools as an avenue to prioritize youth mental health. Additional suggestions include ensuring appropriate resources are available in spaces where these targeted subgroups frequently congregate, increasing community awareness, addressing mental health from a systems-change perspective rather than treating individuals, targeting low-income individuals through policy-change (creating both affordable and accessible opportunities to receive mental health care for all county residents), and focusing on unhoused populations by strengthening partnerships with local organizations such as the Salvation Army, Safe Harbor, Bridgeway Home, and the Sheboygan County Food Bank. Neighborhood-centered events - like block parties, were suggested as methods for fostering a sense of belonging in terms of geospatial community - in addition to encouraging schools to provide safe spaces for youth LGBTQ+ students to engage, providing mental health messaging and resources that are both linguistically and culturally appropriate, and leaning into pre-existing organizations that are already addressing this health topic, like Mental Health America.

Substance Use and Abuse

Twenty-seven Key Informants listed Substance Use and Abuse as a top ranked health issue for Sheboygan County. These individuals represent economic, religious, youth, assistance, education, cultural, healthcare, mental health, and government organizations. Two of the 27 Key Informants ranked Substance Use and Abuse as the top health issue in Sheboygan County. This health issue topic was often discussed in the context of Alcohol, with minor mentions of marijuana and opioids. Substance Use and Abuse was frequently associated with Mental Health. This health topic was the second highest ranked issue; it has been identified as a top health issue in the community for at least the last decade.

Existing Strategies

Commonly mentioned strategies that are currently working well to address substance use and abuse in Sheboygan County include Alcohol/Narcotics Anonymous groups, early education programming (Second Step) that encourages safe choices, Health and Human Services and the ‘buffet’ of offerings that clients have access to, and our county’s methadone clinic. In addition to Narcan becoming more widely available, Healthy Sheboygan County’s Responsible Substance Use Coalition, Samaritan’s Hand, Rogers Behavioral Health, and a variety of sober living facilities in the county, including Pathways to a Better Life, were all listed as strategies
that are currently employed and working well. Along with a supportive community, Key Informants believe that there are ample treatment/detox options available for residents who are in need of assistance. Despite tackling the issue from different perspectives, the following groups/organizations were discussed by our Informants: the Salvation Army, Boys and Girls Club, Big Brothers Big Sisters, the 1907 Club, Rightway, Lighthouse Recovery, and local schools. Several Informants mentioned law enforcement’s involvement via a variety of educational programming and their ability to offer Vivitrol to interested individuals. Multiple Informants mentioned that the Drug Treatment Court was a successful strategy to employ within the county, as is the Veterans Treatment Court. There was plenty of discussion surrounding educational efforts targeting younger residents through family-centered programs that provide resources to parents who are dealing with substance use issues including Sheboygan Human Rights Association’s Early Head Start program. Sheboygan’s local higher education institutions, in addition to maintaining a drug and alcohol free campus, feel confident that they have the ability to connect students who are seeking assistance with community resources.

**Barriers and Challenges**

One of the major challenges to addressing the issue of substance use and abuse in the county is the cultural acceptance; many Key Informants mentioned that substance use, including alcohol, is often intertwined with community events, therefore promoting a culture of consumption that can be challenging to navigate as someone seeking a sober lifestyle. One Key Informant stated that this cultural agenda doesn’t lend itself to generating awareness around available treatment. Other prominent themes that surfaced as barriers included the entanglement of substance use and abuse with mental health (which oftentimes inappropriately results in incarceration rather than treatment), the high cost of treatment, and the lack of resources that are aimed at addressing adolescent substance use. Obstacles surrounding sober living facilities include lack of capacity in terms of facilities and workforce, an insufficient number of treatment options for individuals whose first language isn’t English, and an inflexibility that limits occupational opportunity while participating in the programs. Key Informants also mentioned preventative programming in schools is prohibitively expensive, substances are easily accessible due to the proximity of states with legal THC products (which has resulted in a major increase in usage amongst college-aged individuals), lack of reliable transportation to access treatment, and an inability to locate affordable childcare for parents who want to attend sober living programs (either short- or long-term). The stigma around substance use and a lack of motivation on behalf of the impacted individual were listed as barriers to addressing substance use. Additionally, long wait times seem to result in patients not following up on treatment and even when individuals do participate in treatment, it is often seen as a short-term solution to a long-term problem. Insufficient and inflexible funding streams, a lack of residency that excludes an individual’s ability to access sober living services, the relatively new impact of fentanyl-laced products, and a lack of wraparound services that are supposed to assist an individual’s transition from a correctional facility back into society by focusing on housing and employment. An over-reliance on our detention systems as a primary location for detoxification and a ‘clunky’ recovery system
that enacts unnecessary barriers to achieving sobriety were two additional challenges that our Key Informants brought forward.

**Needed Strategies**

When asked about what additional strategies are needed to address substance use and abuse, Key Informants suggested the following: stronger penalties for driving under the influence, partnering with local rideshare organizations to coordinate safe ways of getting home after consuming and/or to and from treatment programs, encouraging more businesses that serve alcohol to offer more non-alcoholic options, increasing access to Narcan within the community, and focusing on increasing education/awareness around responsible substance use through schools as a preventative platform, and leaning into the incorporation of those with lived experiences as educators. One Key Informant mentioned the need to create educational tools that are specific to fentanyl. Increasing inpatient treatment options, finding ways to destigmatize substance use, partnering with other counties to increase access to services from a geographic perspective, expanding the eligibility criteria for those interested in providing peer-to-peer recovery support and increasing the amount of treatment offerings in languages other than English were also mentioned as ways to address substance use. Informants also suggested checking children’s Halloween candy for drugs, creating a repository for providers that clearly lays out appropriate referral trajectories for clients, providing employers with the trainings and tools they need to educate their employees around responsible substance use, abstinence, encouraging policy-makers to focus on evidence-based policies around substance use, enhancing the capacity of the Medication-Assisted Treatment Program, and creating new programs that don’t replicate current offerings, but provide complimentary services to round out what is available in the county (one example being a youth-focused program that helps adolescents with substance use challenges, or who have family members that are dealing with those issues). A major theme that permeated many interviews was the need to create interventions that simultaneously address substance use and mental health. Partnerships with the YMCA, Samaritan’s Hand, and the faith-based groups in the county were suggested as novel ways to engage residents looking to address their relationship to substance use. As is common in many of the health topic areas, additional education, specifically around the social, financial, and physical aspects of substance use, and creating awareness about existing avenues for sobriety were mentioned.

**Key Community Partners to Improve Health**

The following are some of the key groups in the community that we could partner with to improve community health as it pertains to substance use: legal cannabis retailers in the county, our local law enforcement agencies, Samaritan’s Hand, Rogers Behavioral Health, Stepping Stone, the Economic Development Corps’ Safety, Health, Environment, and Risk Management (SHERM) group, middle and high schools (including their resource officers), the Sheboygan Housing Coalition, student groups on college campuses (especially the Greek Communities), Advocate Aurora, Lighthouse Recovery, Healthy Sheboygan County’s Responsible Substance Use coalition, physicians, emergency room staff, Sheboygan County Health and Human services, including the Division of Public Health, nonprofits focused on substance use, Pathways, religious
organizations, and youth focused groups like D.A.R.E (Drug Abuse Resistance Education) and M.A.D.D. (Mothers Against Drunk Driving). Additional groups include Lakeshore Community Health Care and Mental Health America.

**Subgroups/Populations Where Efforts Could be Targeted and How Efforts Can be Targeted**

The most commonly mentioned subgroups to target included youth and young adults, although many Key Informants reinforced the notion that substance use and abuse is a community-wide issue. Other subgroups mentioned were unhoused individuals, those with low incomes, residents with disabilities, and various neighborhoods within the community, even though none were explicitly identified. Different Key Informants mentioned varying age groups (under 18, 20-40 year olds, 60-80 year olds, etc) as subgroups, further reinforcing the idea that this is a community-wide challenge that has the potential to impact all residents. One Key Informant stated that we ought to address this issue from a whole-community framing, so as to promote inclusivity and remove stigmatization. Informants more often identified men as a population to target over women, specifically men in their twenties. One Informant suggested veterans as a group to target, but noted that within that population, race, ethnicity, and gender were not necessarily relevant.

In order to address substance use and abuse, particularly as it pertains to the subpopulations mentioned above, Key Informants in the community suggested: community fundraisers aimed at increasing awareness, hosting additional resource fairs, enhanced marketing tactics directed at vulnerable populations, leaning into peer support programming (especially for teens and young adults), promoting activities to adolescents that would be an alternative to substance use and imbue a sense of productivity, needle exchange programs, mobile intervention programs, alcohol-specific substance use education, and creating more effective marketing campaigns to raise awareness about substance use and how to navigate treatment for those interested.

**Adverse Childhood Experiences**

Sixteen Key Informants listed Adverse Childhood Experiences (ACEs) as a top ranked health issue for Sheboygan County. These individuals represent government, law enforcement, cultural and religious groups, nonprofit, healthcare, youth, and education organizations. None of the Key Informants ranked ACEs as the top health issue in Sheboygan County.

**Existing Strategies**

Local professionals are undergoing training to identify ACEs and offer motivational interviewing, while local organizations are educating both their staff and the communities they serve to ensure a comprehensive understanding of ACEs. Overall, many Key Informants consider the professional community in Sheboygan County as having a high awareness of ACEs.
Barriers and Challenges

Many Key Informants mentioned that while professionals are aware of and educated on ACEs, more work needs to be done on outreach and education of the general public to increase awareness and prevention of adverse childhood experiences. This includes awareness and education on the importance of the first six years of a child’s life. In order to prevent generational trauma from recurring, more work also needs to be done to assist individuals in need and provide them with resources to end the cycle of generational trauma. Another barrier is the lack of stable, safe housing which is creating more adverse childhood experiences for youth. Other contributing challenges include child care access and affordability, child care center employee retention, lack of education in schools and corporate professional settings, and long waitlists for child care.

Needed Strategies

Key Informants shared strategies for tackling adverse childhood experiences in our community. These ideas encompass investing in additional counselors and social workers within schools, enhancing community education about the prevalence of ACEs, and implementing wraparound, coordinated care by providers for both children and adults to prevent individuals from reliving their trauma multiple times. Some Key Informants also mentioned the idea of embedding social workers directly into community neighborhoods, which is a program that Sheboygan County Health and Human Services is scheduled to launch in 2023, and ensuring ACE assessments are included for patients in all kinds of healthcare settings. Not only is there a need to provide services for people with past adverse childhood experiences, but there is also an emerging need to find new strategies to prevent them from occurring in children. These strategies should include continuing to encourage local schools to participate in regular Youth Behavior Risk Surveys (YRBS) and providing education and resources to all parents in the community, particularly new parents, that includes a meal and childcare option to increase attendance. Some Key Informants also pointed out that adverse childhood experiences occur everywhere. Our strategies can include working collaboratively with other communities by sharing ideas and initiatives.

Key Community Partners to Improve Health

Health and Human Services, housing, Child Advocacy Center, school professionals, law enforcement, the religious community, health systems, private providers, child protective services, foster parents, Birth to 3, Family Connections, Family Resource Center, Community Partnership for Children, Mental Health America, Court Appointed Special Advocates, and youth organizations such as Big Brothers Big Sisters and the Boys and Girls Club were all identified as partners to be involved in these efforts.

Subgroups/Populations Where Efforts Could be Targeted and How Efforts Can be Targeted

Many Key Informants agreed that adverse childhood experiences affect everyone regardless of income or race/ethnicity. However, some target groups were identified as the most vulnerable, including young people, certain sections of the City of Sheboygan where cultural and language barriers exist, the rural community, the economically disadvantaged, and all parents/caregivers. Targeted efforts include engaging parents through
schools, including education in corporate wellness initiatives, meeting people where they are, and providing childcare during educational opportunities.

**Access**

Fifteen Key Informants listed Access as a top ranked health focus area for Sheboygan County. These individuals represent government, law enforcement, cultural and religious organizations, nonprofit, health care, youth, and economic organizations. Eight of the Key Informants ranked Access as the top health focus area in Sheboygan County. Note that Access was not specifically discussed in a manner that pertained to health care only; Key Informants’ discussions overlapped with Oral Health, Health Care, Mental Health, and Substance Use and Abuse.

**Existing Strategies**

The state offers family planning insurance that can be used along with other health insurance policies. Since the pandemic, the number of telehealth options and virtual office visits for health care and mental health have increased. There is a dental clinic that is a part of Lakeshore Technical College that sees Badger Care patients as a part of their dental assistant education program, with Lakeshore Community Health Care also providing dental care for uninsured populations. There is a known healthcare provider with experience in caring for the LGBTQ+ community, and a local LGBTQ+ resource guide is being developed. Since 2021, Public Health began to employ bilingual Community Health Workers who work directly with community members to reduce barriers. County leaders have begun to use American Rescue Plan Act (ARPA) dollars to improve access in the community. Sheboygan County has an established Treatment Court. Many providers offer interpretation services to non-English speaking patients and there are also some direct bilingual services available. Mental health services are provided in local schools through the Providing Access to Healing (PATH) program, Rogers Behavioral Health now has a Sheboygan location, and Lakeshore Community Health Care is continually expanding their workforce and services. Meals on Wheels provides nutritious food to vulnerable populations, along with local organizations providing regular community meals and food pantries.

**Barriers and Challenges**

Many Key Informants mentioned the cost of services and care as a major barrier for residents to access health care. This includes the actual cost of health, mental health, and dental care, the cost of health insurance, co-payments, and deductibles. Many people do not have health insurance or the coverage they have doesn’t meet all of their needs and they cannot afford to pay for services out-of-pocket. Medicaid and Medicare have their own barriers to accessing health care. Another common challenge is the difficulty of getting to appointments due to a lack of transportation, especially for patients in rural parts of the county where transportation can be more problematic. Other barriers to access are lack of provider capacity, leading to long waitlists for care, issues with technology literacy, and lack of providers who serve patients in languages other
than English. Another barrier to accessing care is that people aren’t aware of all the services and programs that they might qualify for. Finally, some Key Informants share that poor communication between organizations can be a barrier to care.

**Needed Strategies**

Key Informants provided suggestions for enhancing access to care. These suggestions included tackling funding challenges to expand transportation choices, attracting workers (including bilingual individuals) to reduce waiting times in provider roles, and offering ongoing education and resources to ensure effective patient care. Key Informants additionally noted the importance of raising awareness about the resources and information accessible through 2-1-1. They highlighted the need for expanded stable housing choices for families dealing with mental health issues, advocated for enhanced early interventions for families, and emphasized the significance of collaboration with local lawmakers to keep them informed about community needs. Several Key Informants believed that to increase access to services, we need to meet community members where they are instead of waiting for them to seek out services.

**Key Community Partners to Improve Health**

Hospitals, healthcare providers (including dental and behavioral health), healthcare systems, local employers, public libraries, the county’s Aging and Disability Resource Center, long-term care facilities, caregivers, Lakeshore Community Health Care, community centers, Mental Health America, United Way, Division of Public Health, local government, Meals on Wheels, Food Bank, Catholic Charities, Love Inc, Hmong Association, Partners for Community Development, nonprofit organizations, 2-1-1, public transit, and schools were identified as important groups to partner with as this issue is addressed.

**Subgroups/Populations Where Efforts Could be Targeted and How Efforts Can be Targeted**

The most commonly named subpopulations listed by our Key Informants included uninsured/underinsured individuals, rural communities, young population (under 18), disabled, non-English speaking populations, and the elderly. Several of the Key Informants mentioned targeting these subpopulations by meeting them where they already are, and working closely with specific cultures/groups to accommodate their needs and create safe spaces.

**Alcohol**

Fifteen Key Informants listed Alcohol as a top ranked health issue for Sheboygan County. These individuals represent government, law enforcement, nonprofit, education, healthcare, youth, and economic organizations. None of the Key Informants ranked Alcohol as the top health issue in Sheboygan County.

**Existing Strategies**

Veterans can now receive substance abuse treatment plans through the Department of Veterans Affairs. There are various sobriety support groups within the community that meet on a regular basis. These groups are
known within the substance use community by word of mouth. There are several sober living programs in the county that community members can utilize. Advocate Aurora Healthcare has an alcohol detox program where individuals can detox safely. Non-alcoholic "Mocktails" are becoming more popular for individuals who want to maintain social connections when going out but want to abstain from drinking alcohol. Within the last decade, local tavern owners, through the Tavern Safety Coalition, have participated in educational opportunities to become more responsible for their customers. Within the county, multiple treatment and recovery options collaborate to offer comprehensive services, though they are not all centralized in one location.

**Barriers and Challenges**

One barrier cited by many is the cultural norms and acceptance of alcohol consumption in Sheboygan County and Wisconsin as a whole. The region has a rich cultural heritage, with a prevalence of bars and microbreweries. Alcohol is a frequent presence at community gatherings, and there's a widespread acceptance of drinking. Children grow up observing their parents and families consuming alcohol. Due to this acceptance, there may be a misunderstanding about what “normal” drinking looks like, versus heavy or binge drinking. Somewhat related, the sale and promotion of alcohol generates substantial revenue, and alcohol producers, retailers, and the Tavern League can exert influence over legislators. Some Key Informants suggested there is a need for more education starting in the schools to develop awareness of how unhealthy excessive drinking is, and the consequences of addiction that could develop as an adult. They feel there should be more early intervention focused on the reasons people are drinking, underlying stress and trauma, and the potentially hidden nature of problematic behaviors. In terms of treatment and related services, Key Informants cited some barriers such as a lack of bilingual Alcoholics Anonymous groups and bilingual health care providers, long wait times for providers in the community, lack of transportation especially for individuals that reside in rural areas, lack of Medicaid funding for residential treatment, ineffective detox programs, lack of engagement in long-term sobriety/recovery, and a lack of county support and options for people with chronic issues.

**Needed Strategies**

Key Informants suggested the need for widespread school, parent, and community education about the consequences of alcohol use, and efforts to change attitudes toward alcohol use away from acceptance and toward addressing factors related to heavy consumption. Some suggested creating education centered around the high cost of consumption, chronic medical conditions that alcohol abuse can cause, and how alcohol abuse can affect other aspects of one's life such as personal relationships, employment, and incarceration. Key Informants suggested the need to have more accessible treatment options, more continuing education for licensed bartenders to prevent overserving, more support groups and non-12-step program options, more sober housing options, and detox and inpatient programs. Other suggestions are to implement more robust designated/safe driver programs, work with local breweries to supply more non-alcoholic beer, offer resource fairs to providers, and encourage behavioral changes over the long-term.
Key Community Partners to Improve Health

Treatment providers such as Alcohol and Other Drug Abuse (AODA) counselors, Wisconsin Recovery Community Organization (WIRCO), support groups, healthcare providers, inpatient behavioral health units, hospitals, detox centers, Samaritan’s Hands, Pathways to a Better Life, Stepping Stones, Sheboygan County Health and Human Services, and Alcoholics Anonymous should be included. Law enforcement, schools, school nurses, interpreters to connect with non-English speaking groups, the Tavern League, sites of higher education, churches and faith communities, transportation companies, media outlets, and families should also be included in this work.

Subgroups/Populations Where Efforts Could be Targeted and How Efforts Can be Targeted

Many Key Informants believed this was widespread across the general population. One suggestion is to help everyone understand the issue better and put general awareness and prevention measures in place, with added focus given to low income populations and people with disabilities to develop healthier coping mechanisms.

One Key Informant also suggested focusing on prevention by educating children to understand what healthy and unhealthy alcohol use looks like. Lastly, Informants suggested working with those who serve low-income populations, the Aging and Disability Resource Center, and our local school systems to target educational campaigns.

Nutrition

Twelve Key Informants listed Nutrition as a top ranked health issue for Sheboygan County. These individuals represent economic, religious, youth, assistance, education, cultural, mental health, and government organizations. None of the 12 Key Informants ranked Nutrition as the top health issue in Sheboygan County. This health issue topic was often discussed in tandem with Physical Activity and frequently directed towards our county’s youth population.

Existing Strategies

Major existing strategies that aim to address nutrition within Sheboygan County are the school-based curricula highlighting the importance of nutrition, as well as partnering with local food-focused nonprofits, like Nourish Farms, to bring a hands-on component to the classroom. The local Farmer’s Markets, especially with their Foodshare matching program, provide affordable access to fresh fruits and vegetables. The Sheboygan County Food Bank, Fresh Meals on Wheels, and Health and Human Services’ Women, Infants, and Children program are all seen as community assets regarding nutrition. Additional strategies include voucher programs that increase access to healthy, nutrient-dense foods for seniors, Community Cafes, various food pantries, and partnerships between healthcare systems and local college campuses. There was also mention of our county’s wellness initiative and the Activity and Nutrition coalition that works to address this issue, especially through educational avenues. An employer’s ability to offer a wellness program that includes not only incentives for
activity, but for healthy eating too, was noted as another example of what is currently working well within Sheboygan County.

**Barriers and Challenges**

Although food is supplied to youth in school settings, multiple Key Informants noted that it can be challenging to provide enough, citing that children “need something more substantive”; finding the balance between foods that are both appealing and nutrient-dense was also a noted difficulty. Another barrier to addressing nutrition is the challenge of providing consistent meals to youth, especially when school is not in session. The high cost of food, especially for low-income individuals and families, and a lack of available funding to support the entities that are addressing this health issue were frequently-cited barriers. One Key Informant made mention of the impacts that the COVID-19 pandemic has had on this issue, stating that some of the efforts/partnerships that were halted during the pandemic are now in a state of disjointment; another issue associated with the pandemic is the reduction in FoodShare benefits as the public health emergency ended. A lack of education around the consequences of malnutrition, insufficient access to affordable infant formula, dietary restrictions, stringent federal requirements (for food assistance programs), and static diets that lack diversity were listed as additional barriers. A culture of convenience that promotes the consumption of fast, easy, often highly processed foods instead of fresh, healthier options was listed as a challenge in Sheboygan County. It was noted that this culture is driven by low prices, efficiency, and the widespread accessibility of fast foods.

**Needed Strategies**

Multiple Key Informants provided additional strategies rooted in the provision of affordable housing with space to grow fresh fruits and vegetables and reimagining the use of space within our county to prioritize the production of affordable/accessible foods. Cross-sectoral collaborations between community partners like schools, in addition to closing the referral loop of clients, were other strategies recommended by our Informants. Many individuals also noted a need for increased education with a lens of prevention and long term impacts - as they pertain to proper nutrition - as well as education on how to properly prepare fresh ingredients for a healthy meal. Increasing access to grocery stores by way of affordable and reliable transportation, providing lunches to school children during the summer months, developing a mobile food pantry, and approaching this issue among Sheboygan County residents through a lens of cultural understanding, were all additional strategies offered for promoting healthy nutrition.

**Key Community Partners to Improve Health**

Key community groups that we could partner with to address nutrition in Sheboygan County include: employers (via their wellness initiatives), Nourish Farms, healthcare providers, schools - including before and after school programming - the Sheboygan County Food Bank and other food pantries, Meals on Wheels, Healthy Sheboygan County’s Activity and Nutrition coalition (SCAN), local college student groups that focus on wellbeing, the University of Wisconsin, local food producers, the Sheboygan County Interfaith Organization’s
Farmer's Market, local grocery stores and restaurants who are willing to donate leftover foods, dietitians, and local nutrition coaches.

**Subgroups/Populations Where Efforts Could be Targeted and How Efforts Can be Targeted**

More than one Informant mentioned that nutrition is a universally applicable health topic that permeates every corner of our county's population. However, Key Informants also listed the following subgroups/populations where we could target our efforts: Black American population, Hispanic/LatinX population, seniors, low-income individuals, economically disadvantaged college students, individuals who experience language barriers in the community, families with young children, college students in general, youth/adolescents, and neighborhoods that don't have access to healthy food options nearby.

Strategies to target the subgroups identified in the previous section include partnering with cultural organizations such as the Hmong Mutual Assistance Association, the Black American Community Outreach group, and Hispanic/Spanish-speaking groups. To address language barriers as it pertains to nutrition, Informants suggested partnering with Lakeshore Technical College's 'English as a Second Language' program and also increasing access to interpreters/translation services. Additional strategies include continuing to educate and promote positive messages around nutrition and healthy behaviors, partnering with schools and providing spaces for college students to interact and learn about nutrition from peers, reframing healthy food options in a manner that promotes 'fun', and lastly, encouraging education and providing meals to students when school is not in session.

**Chronic Disease**

Nine Key Informants listed Chronic Disease as a top ranked health issue for Sheboygan County. These individuals represent government, nonprofit, health care, community assistance, and mental health organizations. Two of the Key Informants ranked Chronic Disease as the top health issue in Sheboygan County, with the remaining seven Informants ranking the issue in the top three.

**Existing Strategies**

Partnerships between medical providers and hospice organizations to offer palliative care to patients, health promotion classes offered through senior centers, and the Sheboygan County YMCA offering programs to clients with a focus on tailored support in addressing chronic disease are all current strategies for improving chronic disease in the county. The Sheboygan County Children and Family Resource Unit and the Children's Long-term Support Unit specifically address chronic conditions through their programs and acknowledge that the county's Birth to Three program is beneficial in identifying chronic disease early in children and determining ways to provide support moving forward. Additionally, Meals on Wheels' ability to tailor meals to meet the dietary needs of their clients is another example of chronic disease management. Public Health offers training on chronic disease and prevention, ranging from Tuberculosis to COVID. One Key Informant noted that employer-promoted disease management programs exist, as well as effective, employer-based outreach.
programs. Lakeshore Community Health Care is seen as a successful strategy in managing chronic disease by their willingness to treat low-income patients. Prescription-assistance and financial-assistance programs are seen as existing strategies, as well as our healthcare systems embedding social workers and caseworkers in their staffing pattern with an emphasis on facilitating patients’ ability to manage their chronic diseases.

Barriers and Challenges
Key Informants identified fear of discovering chronic disease as a major barrier to accessing treatment and care management. Several also mentioned the cost of prescriptions, and medical care in general, as deterrents for seeking care related to chronic diseases. Due to a lack of providers specializing in chronic disease management, multiple Informants mentioned that access to care was a barrier that was exacerbated by long wait times and having to travel long distances to receive care. A lack of follow-up from healthcare providers after discharge was seen as a hurdle to overcome, specifically for individuals without housing or who have a low income. Language barriers, understaffed disease management programs, coexisting diagnoses with mental health disorders, and a general lack of education around chronic disease management were all listed as barriers to addressing this health issue. Inadequate housing environments (e.g., lacking the necessary skills, appliances and tools, not having an adequate kitchen) was identified as a factor inhibiting the management of chronic disease through the preparation of healthy meals and proper nutrition.

Needed Strategies
The dominant theme from Key Informants regarding additional strategies to address chronic disease in the community was increasing education; specifically aimed towards educating the youth on how to cultivate healthy habits early on in an attempt to avoid chronic disease development later in life. One suggestion was to leverage employers as conduits for chronic disease management and prevention. Another common theme was to increase service networks to offer more access to specialists in the hopes that it will reduce the length of wait lists. Several Key Informants also mentioned that increasing the volume of staff for programs operating to prevent/mitigate chronic disease would be a helpful strategy, specifically prioritizing the hiring of bilingual staff members. Another Key Informant mentioned providing a platform for creating awareness about chronic disease in the community and what some of the more common chronic diseases are, such as diabetes. Multiple Informants mentioned nutrition as a strategy for preventing chronic disease, both in terms of providing access to healthy options for low income individuals as well as general education around the health benefits of proper nutrition. Community outreach around chronic disease, regular visits to primary care providers, increased funding for prescriptions, and a focus on providing reliable and timely transportation were also noted as strategies for addressing this health issue.

Key Community Partners to Improve Health
Several Informants indicated that the medical field would be a primary partner for improving community health around chronic disease. This includes: pediatricians, primary care providers, physicians, and entire healthcare systems including Prevea, Advocate Aurora, and Lakeshore Community Health Care. Sheboygan County
Health and Human Services, Public Health, local school systems and colleges, the Hmong Mutual Assistance Association, Healthy Meals on Wheels of Sheboygan County, Well County, Wellness Council of Wisconsin, Road Runners Club of America, the American Heart Association, Alzheimer's Association, the American Lung Association, Nourish Farms, and senior centers, including Generations and Uptown Social, were all identified as key community partners for addressing chronic disease in Sheboygan County.

**Subgroups/Populations Where Efforts Could be Targeted and How Efforts Can be Targeted**

Multiple Key Informants mentioned that individuals in their 20s and 30s were primary subgroups to target while other Informants identified those who are in the 40s and 50s as being in need of specific efforts. Elderly individuals, those who are homebound, and older men in their 40s were additional subgroups identified. Black/African American populations, individuals who are unhoused and or have low incomes were included. One Key Informant mentioned individuals with developmental disabilities who are capable of living on their own would benefit from targeted efforts to manage and prevent chronic disease.

One Key Informant mentioned “meeting them where they're at” as a strategy for managing chronic disease in the identified subgroups. One example is Lakeshore Community Health Care and the relationship they have with low-income individuals. Promoting resources through religious organizations or other social groups was another strategy mentioned. Holding resource fairs to get information and education out to the identified populations and focusing on topics like healthy nutrition and proper insulin use were other strategies mentioned. Leaning into partnerships with doctors, bars, gyms/fitness centers, and employers to reach younger individuals who may not prioritize visits with their primary care providers was also suggested. Providing resources within low income housing complexes to increase awareness of available services, and increasing the breadth of services offered, were both additional strategies mentioned for addressing chronic disease. Another Key Informant prioritized the provision of services to individuals in their homes, rather than external sites where transportation may be a challenge to accessing care or resources.

**Growth and Development**

Seven Key Informants listed Growth and Development as a top ranked health issue for Sheboygan County. These individuals represent healthcare, youth, nonprofit, economic, and government organizations. None of the seven Informants listed Growth and Development as the top health issue in the county. While the majority of Informants discussed this topic in terms of child and adolescent Growth and Development, one Informant examined this topic through a lens of economic Growth and Development.

**Existing Strategies**

Several Key Informants provided the following list of programs in the county that positively address growth and development: Birth to Three, Community Partnership for Children, Parents as Teachers, Sheboygan Area School District’s 4K program, Women Infants and Children, and myriad other programs that are housed within the Department of Health and Human Services. Additionally, one Key Informant mentioned that specific youth
programs in the county ensure that mentors are trained in child development and understand how to appropriately support the children they work with. Other existing strategies that are working well to address growth and development include proactively creating opportunities for families focusing on elementary academic achievement and child development, providing 1:1 parent education through a video-based curriculum, engaging with occupational therapists and speech language pathologists for early identification of potential growth and developmental needs in educational settings, and ensuring that parents are aware of and participate in well-child visits. The one Key Informant who discussed growth and development from an economic perspective provided the following feedback pertaining to what is working well in the community - launching a new initiative, the Community Enhancement Fund, with the purpose of providing public spaces to congregate and enhance quality of life through walking trails and other amenities that promote health living; having a large number of family owned businesses that are committed to the community.

**Barriers and Challenges**

One major theme that arose from the Key Informant interviews, as it pertains to growth and development, was the role that Social Determinants of Health (SDoH) play. Examples of SDoH barriers include a lack of unsafe housing and affordable, reliable transportation, especially to pediatrician visits, which have long waitlists and often result in short visits. Childcare was another frequently-cited barrier in terms of high cost and a lack of qualified personnel. Another theme that popped up was parents and their willingness to engage with growth and development. More specifically, a lack of parental education and an inability to reconcile that their child(ren) might be in need of alternative childcare accommodations or additional attention in school settings. Additional barriers and challenges include cultural barriers that preclude the discussion of normal growth and development, single-parent households where a child remains in childcare settings for a significant portion of the day, lack of buy-in from community organizations that don't prioritize growth and development, lack of volunteers to operate growth and development programs, inexperienced individuals attempting to dictate developmental programs in school settings, and parental mindsets equating to 'ignorance is bliss', when it comes to identifying developmental needs. The one Informant who discussed this topic from an economic perspective mentioned a lack of affordable housing as a barrier. They also mentioned that many housing units currently available are unsafe due to landlord neglect. They stated that the implementation of economic projects needs to have an overarching strategy when it comes to a robust grant program implementation. A final economic barrier to growth and development was a deficiency in supporting local corporations that invest in our community.

**Needed Strategies**

The seven Key Informants identified the following additional strategies needed to address the health issue in Sheboygan County: continuing to support the Head Start program, increasing access to childcare services in tandem with staying current on medical and dental visits, increasing the breadth of bilingual services offered, focusing attention of prenatal education for expecting parents and how to follow up if developmental concerns become salient, Play is Healing and other community-wide initiatives. Education was a popular strategy,
especially as it pertained to parents and staff who work with newborns or children with disabilities, and how they might differ from traditional development trajectories. Encouraging collaborative community opportunities for children to engage in social-emotional development in settings outside of school with a focus on intentional, synergistic interventions. Other strategies mentioned include: focusing on demonstrating positive parent-child interaction as a method for educating new parents, creating more opportunities to access quality childcare, physicians, counseling for families/parents, and reaching out to other counties to see what methods and tools they are using to address growth and development within their communities. The one Key Informant who chose to discuss growth and development from an economic perspective mentioned the need to build additional single-family homes at a price point that is affordable as well as introducing a new down payment assistance program.

**Key Community Partners to Improve Health**

Key groups in the community that we could partner with to improve growth and development include: the Family Court system, Sheboygan County Health and Human Services, Birth to Three program, Head Start, Family Connections, United Way of Sheboygan County, Family Resource Center, Community Partnership for Children, local pediatricians and other hospital staff, and the Welcome Baby Program. Additional partners range from our schools, the Public Health Department and churches to Mental Health America, Rogers Behavioral Health, counselors and other family-focused organizations. From the perspective of economic growth and development, Habitat for Humanity and Partners for Community Development were listed as key groups in the community to partner with.

**Subgroups/Populations Where Efforts Could be Targeted and How Efforts Can be Targeted**

Many Informants held the sentiment that growth and development applies to all populations within the community, however, the following list includes subgroups that might benefit from additional attention and resources: single-parent households, low-income families, youth in general (specifically as a result of the COVID-19 pandemic), families who have experienced generational challenges as it pertains to growth and development, economically disadvantaged schools and neighborhoods, younger parents, minorities and other marginalized groups, and individuals with developmental disabilities. Additionally, the one individual who discussed growth and development from an economic perspective mentioned the ALICE (Asset-Limited Income-Constrained, Employed) population as a subgroup on which to focus our efforts.

Schools were commonly mentioned avenues for targeting some of the identified subgroups; specifically, prioritizing rural schools and encouraging partnerships between schools and health care systems with a focus on primary care physician relationships. Other strategies included hosting resource fairs within the community, integrating growth and development into our everyday lives instead of hosting ‘appreciation weeks’ or ‘5K fundraisers’ only, marketing the importance of family in a child’s life, and collaborative community programs that combine resources from multiple groups working to address growth and development. Finally, the one Key
Informant who provided feedback as it pertains to economic growth and development mentioned a need to expand rent-to-own policies and promote a housing tax credit program.

**Reproductive and Sexual Health**

Three Key Informants listed Reproductive and Sexual Health as a top ranked health issue for Sheboygan County. These individuals represent healthcare providers and cultural organizations. One of these Key Informants ranked Reproductive and Sexual Health as the top health issue in Sheboygan County. Worth noting is that two of the Key Informants represent healthcare organizations that specifically address Reproductive and Sexual Health.

**Existing Strategies**

When it comes to existing strategies to address reproductive and sexual health in Sheboygan County, Planned Parenthood’s presence was noted as a key resource due to the provision of reliable, affirming, and accessible care. They are nationally connected and able to cater to specific reproductive and sexual health needs of individuals who may have difficulties finding appropriate care within other medical institutions in the county. Other existing strategies include community education around birth control, proper prophylactic use, and communicating available resources/services. Another Key Informant reiterated that Planned Parenthood is able to lean into its network to provide services at satellite locations if the services are not available at the Sheboygan location. Multiple Informants mentioned effective outreach campaigns, free STI and pregnancy testing is available in the county and the organizations that offer it can provide opportunities for individuals without reliable healthcare to discuss their sexual health with trained medical professionals. Partnerships between different reproductive and sexual health organizations was noted as another positive strategy for addressing this health issue in the county.

**Barriers and Challenges**

Multiple Key Informants noted a lack of basic knowledge and understanding around reproductive and sexual health in general. Additionally, several individuals cited stigma around this health issue as a major barrier, inhibiting clients from being honest about their sexual health and participating in follow up care when needed. Losing access to abortion care in the state of Wisconsin was identified as a challenge, forcing potential patients to seek care out of state. Addressing stereotypes regarding sexual health, especially within the LGBTQ+ community and providing accurate information/equitable access to reproductive and sexual health services for specific subpopulations was cited as a barrier to addressing this health issue. Lastly, there appear to be a lack of LGBTQ+ specific resources available, resulting in further disenfranchisement within this community.

**Needed Strategies**

Additional strategies to address reproductive and sexual health in Sheboygan County include reestablishing access to abortion care, providing vasectomies locally, and continuing to provide family planning insurance.
Additionally, there is a need to provide safe and empathetic allyship within the county's healthcare systems, specifically as it pertains to clients who identify as belonging to the LGBTQ+ community. Ensuring that young people are provided with fact-based science and education when it comes to sexual health, especially given the current climate regarding curriculum in educational settings, was another strategy mentioned. A final strategy for addressing this issue is the prioritization of an equitable approach to addressing the varying reproductive and sexual health needs of our diverse population and recognizing the intersectionality that race and gender create within this health issue.

**Key Community Partners to Improve Health**

The key groups or organizations in the community that play a role in addressing reproductive and sexual health include Planned Parenthood of Wisconsin, Sheboygan County Health and Human Services, and occasionally other counties when patient cases transcend jurisdictional boundaries.

**Subgroups/Populations Where Efforts Could be Targeted and How Efforts Can be Targeted**

Key Informants noted younger individuals (middle and high school-aged children), those with lower income levels, and specific subgroups that belong to the greater LGBTQ+ community as groups that might be most in need of targeted efforts regarding reproductive and sexual health.

Specific to younger individuals, efforts to address this subgroup include prioritizing adequate materials for sexual education programs within schools that facilitate students’ ability to ask questions comfortably.

**Oral Health**

Two Key Informants listed Oral Health as a top ranked health issue for Sheboygan County. These individuals represent youth and religious organizations. Neither of these Key Informants ranked Oral Health as the top health issue in Sheboygan County. Note that one Informant discussed Oral Health in tandem with another health issue, Access.

**Existing Strategies**

Existing strategies to address oral health in Sheboygan County include improved access to dental care via Lakeshore Community Health Care and the dental clinic run by Lakeshore Technical College where hygienists partner with schools to provide dental care.

**Barriers and Challenges**

Access to dental care for youth who are on BadgerCare was seen as a barrier to addressing oral health. Additionally, locating transportation to dental appointments was determined as a limiting factor. Another issue identified was the lack of providers who are willing to work with low-income populations and accept BadgerCare.
Needed Strategies
Neither of the Key Informants who identified this issue provided additional strategies to address oral health in our county.

Key Community Partners to Improve Health
Key community organizations or partners for addressing oral health include: schools, senior service groups, Lakeshore Technical College, and Lakeshore Community Health Care.

Subgroups/Populations Where Efforts Could be Targeted and How Efforts Can be Targeted
In order to reduce the negative impact of an inability to access dental care, children, seniors, and individuals with lower incomes who may not have insurance were identified as groups where targeted efforts ought to be applied.

Neither Key Informant identified ways we could target our efforts for the identified subgroups.

Physical Activity
Two Key Informants listed Physical Activity as a top ranked health issue for Sheboygan County. These individuals represent government and community organizations. One of these Key Informants ranked Physical Activity as the top health issue in Sheboygan County. Although they did not rank Physical Activity as a top health issue facing the community, several Informants mentioned the topic during their interviews and their responses typically referred to Physical Activity as an inextricably linked component to wellbeing that is often tied together with nutrition.

Existing Strategies
Existing strategies to address physical activity in Sheboygan County include encouragement from medical professionals to integrate physical activity into their daily lives and an abundance of organizations throughout the community for individuals to engage with. Some of them, like the YMCA of Sheboygan County, offer scholarships to make memberships affordable and accessible to all. Other existing strategies include schools incorporating physical activity into the daily routine by replacing motorized transportation with walking and the recreation department deploying programs within educational settings. Planet Fitness and Anytime Fitness are noted as resources to improve physical activity within the community.

Barriers and Challenges
Despite there being an abundance of fitness centers in Sheboygan County, one challenge to addressing physical activity is the financial requirement to join a fitness center or participate in a community event (registration fees, etc.). Individual considerations such as making time to exercise and finding personal motivation to engage in physical activity were listed as challenges. Persuading youth to exercise has been another challenge in promoting a healthy lifestyle rooted in physical activity, especially as elite sport teams dominate the landscape of youth athletics.
Needed Strategies

Additional strategies to improve and promote physical activity within the county include fostering a community where access to an array of physical activity opportunities is available to all residents and providing specific opportunities for youth to play sports in a recreational, non-competitive fashion. Additional strategies include more aggressive recommendations from healthcare professionals, creating space for different physical activity/outdoor recreation organizations to come together and promote a united front when it comes to getting active, partnering with schools, and providing opportunities for entire families to get active together (family swim classes, gym programs, etc.). Reduced membership fees, encouraging free community classes, installing exercise equipment in low-income housing complexes, and providing educational programming in schools that demonstrates the importance of physical activity in creating healthy lifestyle habits were also suggested as additional strategies. Some Key Informants suggest encouraging employers to provide incentives for staying active and tailoring marketing campaigns to populations whose profession does not require physical activity as strategies to address physical activity.

Key Community Partners to Improve Health

Key groups in the community that are addressing physical activity include: local fitness centers and gyms, schools, daycare centers, and afterschool programs for youth.

Subgroups/Populations Where Efforts Could be Targeted and How Efforts Can be Targeted

One Key Informant indicated that the Hispanic/LatinX population in Sheboygan County would benefit from targeted efforts on increasing physical activity, especially Hispanic/LatinX children. Teens were another subgroup identified because of their electronic use that seemed to increase due to the COVID-19 pandemic. Low-income individuals were another population to prioritize as well as individuals in their 30s or 40s who are settling into sedentary lifestyles and prioritizing the health of their children or parents, rather than themselves.

Key Informants suggested additional strategies for the targeted subpopulations that include free community fitness classes, access to exercise equipment in low-income housing complexes, providing information on physical activity in multiple languages, leaning into partnerships with schools to convey information, and a focus on participatory, non-competitive sporting activities.

Communicable Disease

Two Key Informants listed Communicable Disease as a top ranked health issue for Sheboygan County. These individuals represent organizations that primarily operate under the umbrella of service provision, one from a healthcare standpoint, and the other from a social services perspective. Neither of these Key Informants ranked Communicable Disease as the top health issue in Sheboygan County. Note that one Informant discussed Communicable Disease in the context of sexually transmitted infections and the other respondent more closely aligned their responses under the context of the COVID-19 pandemic.
Existing Strategies
The Sheboygan County Division of Public Health was noted as a successful strategy in combating communicable disease. Specifically, their preference for collaboration with state and national partners in addition to working with local hospital systems during times of increased disease activity. Sheboygan County’s federally qualified healthcare center, Lakeshore Community Health Care, was also noted as a strategy for addressing communicable diseases. While the COVID-19 pandemic was challenging overall, the awareness of Public Health and the role they play in disease mitigation was discussed as a success. Another positive strategy identified is the presence of Planned Parenthood of Wisconsin within the county. By offering expanded STI testing to include diseases such as syphilis, they are able to cater to more residents and do so in a manner that evokes comfort and compassion while prioritizing the patients’ needs.

Barriers and Challenges
Although the COVID-19 Public Health Emergency Declaration has ended, the presence of Sars-CoV-2 is still a barrier for Sheboygan County with residents continuing to contract the disease and some of them ending up in need of medical attention. Another barrier specific to COVID-19 is the lack of public intrigue, leading to less attention and an inability to provide appropriate recommendations to the general public, as well as public skepticism with regard to vaccinations for a plethora of communicable diseases. Other major challenges surrounding communicable disease, but specifically COVID-19, are combatting mis/dis-information and struggling to find effective approaches to engage with different communities. One barrier specific to sexually transmitted infections is a lack of education regarding preventative measures, like condoms and birth control, and the repercussions that follow from misuse.

Needed Strategies
Key Informants suggested exploring alternative methods to reach different subpopulations within Sheboygan County with a focus of building trust. Communities perceive local government in different ways and trust-building with these subpopulations is seen as a major strategy for reducing the impact of communicable diseases in the future. Another strategy for addressing the barriers is to combat misinformation, specifically within cultural groups or individuals that might be more susceptible to it.

Key Community Partners to Improve Health
Key groups or community partners include the United Way of Sheboygan County, schools and the department of education, and various community centers where classes can help with sexual health and wellbeing.

Subgroups/Populations Where Efforts Could be Targeted and How Efforts Can be Targeted
One Key Informant indicated that Black American residents of Sheboygan County may benefit from more targeted approaches to decreasing communicable disease. Justification for prioritizing this community was identified as historical mistrust with healthcare institutions. Another Key Informant indicated young people and individuals with lower incomes as populations where targeted efforts would be helpful.
Neither Informant identified methods or strategies to target the subgroups that differed from their previous responses.

**Injury and Violence**

Two Key Informants listed Injury and Violence as a top ranked health issue for Sheboygan County. These individuals represent cultural and government organizations. Neither of these Key Informants ranked Injury and Violence as the top health issue in Sheboygan County. Note that one Informant discussed Injury and Violence as a ‘Tier Two’ health issue and provided high level comments about the issue rather than specifically addressing each question.

**Existing Strategies**

Due to the explosive and hard to predict nature of violence, one Key Informant noted that this health issue is challenging to anticipate and therefore difficult to implement preventative strategies.

**Barriers and Challenges**

One Key Informant noted that a barrier or challenge to addressing injury and violence is the inability to prevent that behavior without the knowledge that it would occur. The other Key Informant spoke specifically to barriers and challenges facing the LGBTQ+ community. Challenges for this community include a lack of local data on the rates of violence and abuse, corrective violence against queer, cis women who identify as lesbian or bisexual, and disproportionately high rates of violence against trans and gender-nonconforming individuals. A final challenge noted was the intersectionality of this health issue with intimate partner violence and sexual and reproductive violence, especially within the LGBTQ+ community.

**Needed Strategies**

Additional strategies to address injury in violence were focused on reducing the negative impacts after the event has occurred; specifically, providing support to the individual, their family, and loved ones after experiencing traumatic events including meeting with physicians and mental health providers.

**Key Community Partners to Improve Health**

Key partners in the community include primary care doctors, pastors/religious organizations, grief groups, mental health professionals, and treatment providers.

**Subgroups/Populations Where Efforts Could be Targeted and How Efforts Can be Targeted**

Subgroups or populations who could benefit from targeted efforts include the LGBTQ+ community and individuals in their 20s and 30s, although one Key Informant indicated that injury and violence affects everyone. Neither Key Informant identified ways we could target our efforts for the identified subgroups.
**Tobacco**

Two Key Informants ranked Tobacco Use as a top health issue for Sheboygan County. The individuals represent organizations in cultural and educational settings. Tobacco Use was discussed as a parallel to Alcohol consumption in terms of social context and recognized a distinction between cigarette use and ‘vape pens that contain nicotine’. Neither Key Informant ranked Tobacco Use as the top health issue for Sheboygan County.

**Existing Strategies**

Although one Key Informant failed to indicate any existing strategies that are successful in reducing tobacco use, the other respondent indicated that providing information about the effects of nicotine and its addictive properties in settings where young adults live and/or congregate was a positive approach. Additionally, commercials promoting real-life examples of the negative impacts of nicotine addiction were seen as beneficial. Education and awareness were noted as successful strategies in curbing tobacco use among county residents, particularly young adults.

**Barriers and Challenges**

Similarly to the first question, one Key Informant did not provide a response identifying barriers or challenges to addressing tobacco use as a health issue. The main barrier to addressing this issue was the impact of tobacco’s addictive properties. Tobacco use, at least in higher education settings, is often seen as a coping mechanism and there don’t appear to be sufficient external resources available that the affected population can connect with.

**Needed Strategies**

Both Key Informants indicated that educating and providing information to those using tobacco products is the most appropriate method for reducing usage. Providing accurate information on the long-term effects of tobacco use was cited as a useful tool. Tobacco use was also tied to mental health - managing stress and anxiety may have preventative impacts on an individual’s decision to use tobacco, especially as a coping mechanism.

**Key Community Partners to Improve Health**

One Key Informant determined that, despite its social nature, smoking (tobacco products) is an individual choice and reiterated that sharing information with users is the most effective avenue for decreasing usage. The other respondent indicated that leaders within education systems are prime partners for disseminating necessary information regarding tobacco. Having a captive audience allows these leaders to ensure that relevant information is delivered to those at risk.

**Subgroups/Populations Where Efforts Could be Targeted and How Efforts Can be Targeted**

The only subgroup or population that was identified for targeted efforts was college students.
By leveraging their platform during prime events, such as student orientation, leaders in education have the undivided attention of students and can use that time to provide information and educate them on the health impacts of tobacco use as well as provide resources for cessation.

**Environmental and Occupational**

One Key Informant listed Environmental and Occupational Health as a top ranked health issue for Sheboygan County. The individual represents an organization that primarily operates from a religious-nonprofit perspective. This respondent did not rank Environmental and Occupational Health as the top health issue in Sheboygan County.

**Existing Strategies**
Providing signage within health institutions, businesses, and places of employment that include multiple languages is seen as a positive strategy for creating an inclusive environment. Another existing strategy is distributing content and formatting communications in languages other than English.

**Barriers and Challenges**
A lack of bilingual services, especially for those who speak Spanish, was seen as a major barrier/challenge to addressing environmental and occupational wellbeing. Language barriers were identified as a major hurdle for immigrants looking to incorporate themselves into the community.

**Needed Strategies**
One additional strategy, specifically pertaining to occupational health, would be to provide adequate benefits, especially health insurance, and fair incomes to immigrants who are seeking employment opportunities. Providing employees with optimal working conditions as a tool to reduce the need for reliance upon health insurance was noted as a key strategy that could be considered.

**Key Community Partners to Improve Health**
The John Michael Kohler Arts Center was listed as a key community partner for improving community health. Although no other specific community partners or organizations were identified by name, the Key Informant noted that community resources, particularly local libraries and workplaces were potential partners.

**Subgroups/Populations Where Efforts Could be Targeted and How Efforts Can be Targeted**
Although no specific subgroups were identified, the Key Informant mentioned that individuals who are currently within the ages of employment (18 to 65 year olds), those of Hispanic ethnicity, those experiencing low income levels, and ‘neighborhoods’ would stand to benefit most from targeted efforts addressing environmental and occupational health in Sheboygan County.

Community incorporation was listed as the single most important method for targeting the previously identified subgroups. This could result in an improved social support system, something that the Key Informant deemed
crucial for immigrants who have recently relocated. Immigrants often face challenges pertaining to mental health, depression, and adjustment problems when inserting themselves into a new space; a welcoming community, eager to generate connections, can improve social support and ultimately help by improving mental health.

**COVID-19 Pandemic**

While none of the Key Informants were explicitly asked questions pertaining to the recent COVID-19 pandemic, it was inevitable that at least some of their responses would contain commentary about the impacts of the pandemic. Twenty-four Key Informants made mention of COVID-19/"the pandemic" during their interviews. The following is a brief summary of the major repercussions for the pandemic as well as some ‘silver linings’ that occurred as a result of the pandemic.

**Mental Health Challenges and Developmental Setbacks:** Key Informants noted that the COVID-19 pandemic brought about isolation for all ages, but was especially challenging for older individuals living in long term care facilities. These residents may have been unable to interact with loved ones during a time when social support was especially needed. This also resulted in a fair amount of grief for families who were unable to connect with elderly friends and families before passing away. The isolation caused by the pandemic was also said to have produced developmental setbacks for many youth and adolescents. One Key Informant mentioned that teens are experiencing severe social anxiety, and younger children are much more easily excitable or ‘squirrely’ in social settings than what is typically the case. Another Informant noted that individuals in their twenties were heavily impacted by the isolation during an age range where social interactions are not only commonplace, but integral to the critical developmental establishment of interdependent supports outside of one’s family unit during emerging adulthood. Another challenge induced by the pandemic was the lack of mandated reporting abilities. Since children weren’t in public settings, usual mandated reporting was not occurring and children weren’t necessarily being directed to the appropriate resources and services. The pandemic seriously disrupted normal mental health service administration, resulting in many individuals being unable to continue receiving mental health treatment. A final repercussion of the pandemic of mental health was the substantial impact of either creating new Adverse Childhood Experiences or exacerbating ones already existing.

**Disruption and Fragmentation of Assistance Programs and Services:** One major challenge that resulted from the pandemic was the disjointed sense of community initiatives due to the Healthy Sheboygan County group having to focus on pandemic-related efforts. Another consequence of the pandemic was mass retirement of healthcare staff, leaving a need for qualified workers in its wake. Due to the nature of a pandemic, some Key Informants mentioned the challenge of accessing medical care for instances other than disease mitigation. Several nonprofit organizations in the county mentioned that their ability to engage in community outreach was halted as a result of the pandemic, resulting in an increased need to restart those efforts. Food insecurity was another topic that Key Informants noted disruption within; specifically, the increased cost of food
and the reduction of available resources (e.g., FoodShare benefits that were increased during the pandemic are now reverting to pre-pandemic levels, and children’s school lunches no longer being universally free).

**Miscellaneous Impacts of the COVID-19 Pandemic:** One Key Informant noted that the pandemic resulted in residents dramatically reducing their time spent being physically active; with a shift to virtual options, teens were especially impacted by this in terms of excessive weight gain. Another Informant noted that there was an increase in substance use and abuse during the pandemic as a result of mental health struggles stemming from a lack of social engagements. Individuals who work in professions that rely heavily on in-person interactions (service industry workers, those who operate within the tourism industry, etc.) were economically impacted in a negative manner by the pandemic due to strict regulations and closures. A final repercussion of the pandemic mentioned was the, "palpable, general untrust of medicine".

**Silver Linings and Lessons Learned:** One benefit from the pandemic was that it encouraged society to become more comfortable using and implementing technology. Examples include telecommuting, telehealth, etc., all of which impart more flexibility for individuals in their daily lives. A Key Informant mentioned that Public Health performed well during the crisis and was able to effectively communicate with the public, as well as with the necessary parties, to preserve the health of Sheboygan County. Covid created an awareness of the need for resources that wasn’t necessarily salient before; this has encouraged a push to start addressing the services/resource gaps in the county. State and federal relief funds were also seen as positives resulting from the pandemic, especially in terms of providing free school lunches to youth, creating new positions like Community Health Workers, and even allowing new programs to formulate, the Neighborhood Support Program being one of them. The pandemic helped decrease stigma around mental health since so many individuals were experiencing challenges themselves. Techniques that were utilized to promote vaccine uptake among rural county residents was seen as an effective communications strategy that people would like to see mapped onto other health topics. The final benefit provided by the COVID-19 pandemic was that it fostered a more communal mindset to addressing societal issues rather than the previous, individualistic ways of thinking.
### A. Key Informant List

<table>
<thead>
<tr>
<th>Key Informant</th>
<th>Title</th>
<th>Organization</th>
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</thead>
<tbody>
<tr>
<td>Alayne Krause</td>
<td>County Administrator</td>
<td>Sheboygan County</td>
</tr>
<tr>
<td>Allison Thompson</td>
<td>CEO</td>
<td>Fresh Meals on Wheels of Sheboygan County</td>
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<tr>
<td>Amanda Freiberg / Krysta Berger</td>
<td>Case Manager / Social Services Director</td>
<td>The Salvation Army</td>
</tr>
<tr>
<td>Brian Doudna</td>
<td>Executive Director</td>
<td>Sheboygan County Economic Development Corporation</td>
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<tr>
<td>Carolynn Lee</td>
<td>Chair, Founding Member</td>
<td>Sheboygan LGBTQ Alliance</td>
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<tr>
<td>Christina Singh</td>
<td>CEO</td>
<td>Boys and Girls Clubs of Sheboygan County</td>
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<tr>
<td>Christopher Domagalski</td>
<td>Police Chief</td>
<td>City of Sheboygan Police Department</td>
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<tr>
<td>Christopher Nehring</td>
<td>Medical Examiner</td>
<td>Sheboygan County</td>
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<tr>
<td>Cory Roessler</td>
<td>Sheriff</td>
<td>Sheboygan County</td>
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<tr>
<td>David Simon Jr.</td>
<td>Vice President for Campus Life and Dean for Students</td>
<td>Lakeland University</td>
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<tr>
<td>Deidre Martinez</td>
<td>CEO</td>
<td>Sheboygan County Chamber of Commerce</td>
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<tr>
<td>Denise Wittstock</td>
<td>CEO</td>
<td>Big Brothers Big Sisters WI Shoreline, Inc.</td>
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<tr>
<td>Jacky Drewry / Liz Hildrebrandt</td>
<td>CEO / Nurse Manager</td>
<td>Anchor of Hope</td>
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<tr>
<td>Julie Preder</td>
<td>Executive Director</td>
<td>Mental Health America Lakeshore</td>
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<tr>
<td>Karin Kirchmeier</td>
<td>Executive Director</td>
<td>Partners for Community Development</td>
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<tr>
<td>Lisa Stephan</td>
<td>Executive Director</td>
<td>Sheboygan County Interfaith Organization</td>
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<tr>
<td>Lucy Angulo</td>
<td>Behavioral Health Therapist</td>
<td>Catholic Charities</td>
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<tr>
<td>Lyric Glynn</td>
<td>Supportive Housing Program Director</td>
<td>Lakeshore Community Action Program</td>
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<tr>
<td>Matt Strittmater</td>
<td>Department Director</td>
<td>Sheboygan County Department of Health and Human Services</td>
</tr>
<tr>
<td>Name</td>
<td>Title</td>
<td>Organization</td>
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<tr>
<td>Michelle Boeldt</td>
<td>Service Coordinator</td>
<td>Sheboygan Housing Authority</td>
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<tr>
<td>Patrick Boyle</td>
<td>Executive Director</td>
<td>Sheboygan County Food Bank</td>
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<tr>
<td>Tandra Sbrocco</td>
<td>Executive Director</td>
<td>Love INC of Sheboygan County</td>
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<tr>
<td>Todd Richter</td>
<td>Director</td>
<td>Sheboygan County Veterans Service Office</td>
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<tr>
<td>Trisha Erpelding</td>
<td>Executive Director</td>
<td>Family Resource Center of Sheboygan County</td>
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<tr>
<td>Zoie Hawpetoss</td>
<td>Certified Reproductive Healthcare Assistant</td>
<td>Planned Parenthood of Wisconsin</td>
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<tr>
<td>Dione Knop</td>
<td>Outreach Representative</td>
<td>Rogers Behavioral Health</td>
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<tr>
<td>Theresa Christen-Liebig</td>
<td>Executive Director</td>
<td>Sheboygan Human Rights Association, Inc.</td>
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<tr>
<td>Mike Trimberger</td>
<td>District Administrator</td>
<td>School District of Random Lake</td>
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<tr>
<td>Colleen Steinbruecker</td>
<td>Executive Director</td>
<td>Family Connections, Inc</td>
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<tr>
<td>Gina Covelli</td>
<td>Director of Community Impact</td>
<td>United Way of Sheboygan County</td>
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<tr>
<td>Brant Murray-McKelvey</td>
<td>Children's Long Term Support and Services</td>
<td>Sheboygan County Children and Family Resource Unit and Children's Long Term Support</td>
</tr>
<tr>
<td>Amy Sowls</td>
<td>Coordinator</td>
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<tr>
<td>Jason Ledermann / Lori</td>
<td>Student Services and Special Education</td>
<td>Sheboygan Area School District</td>
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<tr>
<td>Hamilton</td>
<td>Director / District Lead School Nurse</td>
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<tr>
<td>Donna Wendlandt</td>
<td>President</td>
<td>Sheboygan County YMCA</td>
</tr>
<tr>
<td>Cher Lue Yang</td>
<td>Board of Directors, Treasurer</td>
<td>Hmong Mutual Assistance Association</td>
</tr>
<tr>
<td>Paul Carlsen</td>
<td>President</td>
<td>Lakeshore Technical College</td>
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<tr>
<td>Charmaine Conrad</td>
<td>Chief Growth Strategy and Development</td>
<td>Sharon S. Richardson Community Hospice</td>
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<tr>
<td></td>
<td>Officer</td>
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<tr>
<td>Brittany Freund</td>
<td>Social Worker Case Manager</td>
<td>Lakeshore Community Health Care</td>
</tr>
<tr>
<td>Michelle Acevedo</td>
<td>ADRC and Operations Manager</td>
<td>Sheboygan County Aging and Disability Resource Center</td>
</tr>
</tbody>
</table>
B. Populations Served

Key Informant Organizations by Communities they Serve

General

Sheboygan County Health and Human Services, Sheboygan County Sheriff's Office, Lakeshore Technical College, Sheboygan County Medical Examiner, Sheboygan County, Sheboygan County Veterans Service Office, Sheboygan County Chamber of Commerce, Love INC. of Sheboygan County, Sheboygan LGBTQ Alliance, Big Brothers Big Sisters Shoreline Inc., Family Resource Center of Sheboygan County, Sheboygan County Economic Development Corporation, Catholic Charities, Fresh Meals on Wheels of Sheboygan County, City of Sheboygan Police Department, Mental Health America Lakeshore, Lakeland University, Rogers Behavioral Health, Family Connections, Sheboygan Area School District, United Way of Sheboygan County, Sheboygan County YMCA, Sheboygan County Aging and Disability Resource Center, Sharon S. Richardson Community Hospice, Lakeshore Community Health Care

Medically Underserved

Planned Parenthood of Wisconsin, Anchor of Hope, Sheboygan County Medical Examiner, Sheboygan County, Sheboygan County Veterans Service Office, Sheboygan County Chamber of Commerce, Sheboygan LGBTQ Alliance, Salvation Army of Sheboygan, Sheboygan County Interfaith Organization, Family Resource Center of Sheboygan County, Fresh Meals on Wheels of Sheboygan County, City of Sheboygan Police Department, Mental Health America Lakeshore, Lakeland University, Rogers Behavioral Health, Sheboygan County Children and Family Resource Unit and Children's Long Term Support, Sheboygan Area School District, United Way of Sheboygan County, Sheboygan County YMCA, Sheboygan County Aging and Disability Resource Center, Sharon S. Richardson Community Hospice, Lakeshore Community Health Care

Minority

Sheboygan County Health and Human Services, Planned Parenthood of Wisconsin, Anchor of Hope, Lakeshore Technical College, Sheboygan County Medical Examiner, Sheboygan County, Sheboygan County Veterans Service Office, Sheboygan County Chamber of Commerce, Sheboygan LGBTQ Alliance, Salvation Army of Sheboygan, Big Brothers Big Sisters Shoreline Inc., Boys and Girls Club of Sheboygan County, Family Resource Center of Sheboygan County, Catholic Charities, Fresh Meals on Wheels of Sheboygan County, City of Sheboygan Police Department, Lakeshore Community Action Program, Mental Health America Lakeshore, Lakeland University, Hmong Mutual Assistance Association, Rogers Behavioral Health, Sheboygan County Children and Family Resource Unit and Children's Long Term Support, Sheboygan Area School District, United Way of Sheboygan County, Sheboygan County YMCA, Sheboygan County Aging and Disability Resource Center, Sharon S. Richardson Community Hospice, Lakeshore Community Health Care

Low-income

Sheboygan County Health and Human Services, Planned Parenthood of Wisconsin, Anchor of Hope, Lakeshore Technical College, Sheboygan County Medical Examiner, Sheboygan County, Sheboygan County Veterans Service Office, Sheboygan County Chamber of Commerce, Love INC. of Sheboygan County, Sheboygan County, Sheboygan LGBTQ Alliance, Salvation Army of Sheboygan, Sheboygan County Interfaith Organization, Big Brothers Big Sisters Shoreline Inc., Boys and Girls Club of Sheboygan County, Family Resource Center of Sheboygan County, Partners for Community Development, Catholic Charities, Fresh Meals on Wheels of Sheboygan County, Sheboygan Housing Authority, City of Sheboygan Police
Department, Lakeshore Community Action Program, Mental Health America Lakeshore, Lakeland University, Hmong Mutual Assistance Association, Rogers Behavioral Health, Sheboygan Human Rights Association, Inc., Family Connections, Sheboygan County Children and Family Resource Unit and Children's Long Term Support, Sheboygan Area School District, United Way of Sheboygan County, Sheboygan County YMCA, Sheboygan County Aging and Disability Resource Center, Sharon S. Richardson Community Hospice, Lakeshore Community Health Care

Youth

Sheboygan County Health and Human Services, Planned Parenthood of Wisconsin, Anchor of Hope, Lakeshore Technical College, Sheboygan County Medical Examiner, Sheboygan County, Sheboygan County Veterans Service Office, Sheboygan County Chamber of Commerce, Sheboygan LGBTQ Alliance, Sheboygan County Interfaith Organization, Big Brothers Big Sisters Shoreline Inc., Boys and Girls Club of Sheboygan County, Family Resource Center of Sheboygan County, Fresh Meals on Wheels of Sheboygan County, City of Sheboygan Police Department, Mental Health America Lakeshore, Lakeland University, Rogers Behavioral Health, Sheboygan Human Rights Association, Inc., School District of Random Lake, Family Connections, Sheboygan County Children and Family Resource Unit and Children's Long Term Support, Sheboygan Area School District, United Way of Sheboygan County, Sheboygan County YMCA, Sheboygan County Aging and Disability Resource Center, Sharon S. Richardson Community Hospice, Lakeshore Community Health Care
2023 Community Health Needs Assessment

Key Informant Interview

Please remember to record this interview for transcriptional purposes.
Informed consent

Do you agree with the following statement:

"I give my permission for my answers to these questions to be shared within the organization who interviewed me and with the Health Sheboygan County CHNA Steering Committee for the purpose of completing a Community Health Needs Assessment. I understand that, my comments will be combined with up to 30 other interviews and will not be tied specifically to me or my organization. These comments will be used to develop the summary report for my county; people within the health care system will keep the completed version of this tool and may refer to it for clarification. I understand that my name and organization will be listed within the summary of those who provided an interview."

Please state your...

- Name
- Title
- Organization
- Zip Code

And identify which of the following communities you target or serve (indicate all that apply):

- General
- Medically underserved
- Minority
- Low-income
- Youth
Reaching the communities you serve

In tandem with this Key Informant Interview, Healthy Sheboygan County is distributing an online survey to learn more about how our county’s residents perceive health in their community.

With the aim of increasing response rates and ensuring representation from a broad and diverse spectrum of individuals, please share what do you think would be the best way to reach the community members you work with or serve.

Major Health Related Issues in Your Community

Of the following focus areas from the State Health Plan, please rank order the top 3 to 5 major health-related issues in your community:

- Access
- Adverse childhood experiences (ACEs)
- Alcohol
- Chronic disease
- Communicable disease
- Environmental and occupational
- Growth and development
- Injury and violence
- Mental health
- Nutrition
- Oral health
- Physical activity
- Reproductive & sexual health
- Substance use and abuse
- Tobacco
- Other (please specify): __________________
For the **first** health issue identified, please answer the following:

1. **Existing strategies to address this health issue** – What is working well?
2. **What are the barriers/challenges to addressing this issue** – What could we do differently?
3. **What additional strategies are needed to address this issue?**
4. **Who are the key groups in the community that we could partner with to improve community health?**
5. **Is there a subgroup or population where we could target our efforts?** (Ex: age, gender, race, ethnicity, income level, disabled, neighborhoods, etc.)

If a subgroup is identified:
6. **How could we target our efforts towards this subgroup?**

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**Thank you!**

Your participation in this interview, and the insights you provided, will help us prioritize the issues affecting our community’s health and how we can work together to improve it.

You will receive a copy of the final Key Informant Report following the completion of data collection and analysis.
D. Top 5 Health Focus Area ‘Connection Webs’

The connection webs exist to show the connectedness of our community around certain health focus areas. The closer to the center of the diagram an organization is, the more frequently it was mentioned by the Key Informants during their interviews. For example, around the topic of Mental Health, United Way of Sheboygan County was mentioned many times, the Salvation Army was mentioned several times, and the Uptown Social was mentioned once or twice.

D.1. Mental Health Connection Web
D.2. Substance Use and Abuse / Alcohol Connection Web
D.3. Access Connection Web

Access to Health Care

Sheboygan County Aging & Disability Resource Center
Boys and Girls Club of Sheboygan County
Rogers Behavioral Health
Fresh Meals on Wheels
Sheboygan County Health & Human Services/Public Health
Salvation Army of Sheboygan
Mead Public Library
Medical Providers
Hmong Mutual Assistance Association
Love, INC of Sheboygan County
Partners for Community Development
United Way of Sheboygan County
Healthy Sheboygan County
Lakeshore Community Health Care
Mental Health America Lakeshore
Schools
Catholic Charities
Acuity Insurance
Businesses/Employers
Kohler Company
D.4. Adverse Childhood Experiences (ACEs) Connection Web
D.5. Chronic Disease Connection Web

- American Heart Association
- Colleges and Universities
- Schools
- Well County - Wellness Council of WI
- Prevea
- Aurora Health Care
- Lakeshore Community Health Care
- Medical Providers/Physicians
- American Lung Association
- Road Runners Club of America
- Alzheimer's Association
- Hmong Mutual Assistance Association
- Sheboygan County Children & Family Resource Unit and Children's Long Term Support
- Sheboygan County Health & Human Services/Public Health
- Nourish

Central Circle: Chronic Disease