

# Community Health Assessment

Health Equity Alliance of Rock County  
2021



December 30th, 2021

Prepared by the Rock County Public Health Department



# Acknowledgements

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We would like to extend our sincere appreciation to all Health Equity Alliance of Rock County members and those who participated in Community Conversations and key informant interviews.

## ***HEAR Members:***

Aging and Disability Resource Center of Rock County	Rock County Children's Family Resource Center
Alzheimer's Association	Rock County Council on Aging
American Heart Association	Rock County Human Services Department
Beloit Area Community Health Center	Rock County Public Health Department
Beloit Health System	Rock-Walworth Comprehensive Family Services Head Start/Early Head Start
Beloit Library	School District of Beloit
Beloit NAACP	School District of Janesville
Building a Safer Evansville (BASE)	Second Harvest Food Bank
City of Beloit	South Central Wisconsin Area Health Education Center
City of Janesville	Southwest Wisconsin Workforce Development Board
Community Action, Inc.	SSM Health
Edgerton Hospital	United Way Blackhawk Region
HealthNet of Rock County	University of Wisconsin Division of Extension
Hedberg Public Library	Vivent Health
Inclusa, Inc.	Youth 2 Youth 4 Change
Janesville Community Center	YMCA of Northern Rock County
Janesville Mobilizing 4 Change	YWCA Rock County
Mercyhealth	
Nutrition and Health Associates/ Women, Infants and Children (WIC)	

## ***Community Conversation Participants:***

Beloit Area Community Health Center  
Beloit community  
Black and African American Beloit fathers  
Community Action, Inc.  
Fresh Start students  
Council on Aging seniors  
Edgerton community youth  
Health Equity Alliance of Rock County  
House of Mercy  
KANDU caretakers  
Milton Chamber of Commerce  
Rock County Child Protective Services  
Rock & Walworth County Head Start/Early Head Start  
YMCA senior members  
Youth 2 Youth students  
Youth Justice Program  
Youth Services coordinators

## ***Key Informant Interviews:***

Representatives interviewed from the following sectors: local businesses, schools and higher learning institutions, hospitals and clinics, elected leaders, law enforcement, fire and EMS, faith organizations, social services, and community members who have been historically marginalized.

# Executive Summary

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This Community Health Assessment (CHA) represents a point-in-time view of the health of Rock County. This document is intended to serve as a guide for the development of the Community Health Improvement Plan (CHIP). This assessment can also serve as a resource for informing community understanding of how certain factors, including the Social Determinants of Health, impact the health status of some community members more than others.

We know that the differences in health status we see throughout Rock County are unjust and rooted in inequities in the current and historic distribution of resources. To raise awareness of health disparities and inequities, this report includes several “Health Equity Spotlights” that are intended to describe the adverse effects of structural barriers to accessing resources. While we are striving for health equity, we recognize that this document being available only in English represents a challenge to achieving equitable information sharing.



This assessment was developed through the Health Equity Alliance of Rock County (HEAR). HEAR is a collection of over 100 individuals, representing diverse sectors of the community, who gather to collectively identify and implement strategies to help Rock County reach its full health potential. We are grateful for the contributions that Rock County residents made to ensure that this assessment was a reflection of the community. These contributions occurred through completion of online surveys (i.e. CHA Survey, Local Public Health Systems Assessment, Forces of Change Assessment), participation in Community Conversations, and/or participation in key informant interviews.

Our sincere hope is that this assessment serves as a tool for organizations serving Rock County to identify how they can influence the health of our community. Whether these efforts include utilizing the provided data to strengthen existing programs or addressing policies and systems that contribute to Rock County’s health inequities, we are confident this assessment can help improve health outcomes within our community.

From the assessment and a process of prioritization, Mental Health and Access to Care have been identified as the topics for the CHIP. Addressing Mental Health and Access to Care will require collective action to improve both topics at the individual level and at the population level through addressing systems, policies, and environments. We look forward to improving the health of Rock County together.

*Health Equity Alliance of Rock County Advisory Committee*

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**To learn more about health disparities and inequities in Rock County, find the Health Equity Spotlight sections throughout the report using this icon.**



# Population and Community Profile

Rock County is centrally located in the southern part of Wisconsin near the Illinois-Wisconsin border. Rock County encompasses the following cities in its region: Beloit, Brodhead (partial), Clinton, Edgerton (partial), Evansville, Footville, Fulton, Hanover, Janesville, Johnstown, Magnolia, Milton, Newark, Orfordville, Tiffany, and Union. Throughout the County are a combination of beautiful parks, a statewide trail commemorating Wisconsin's geologic history, and the Rock River. While Rock County has many historic neighborhoods where families and businesses reside, multiple economic developments are providing spaces for modern homes and new businesses to thrive.

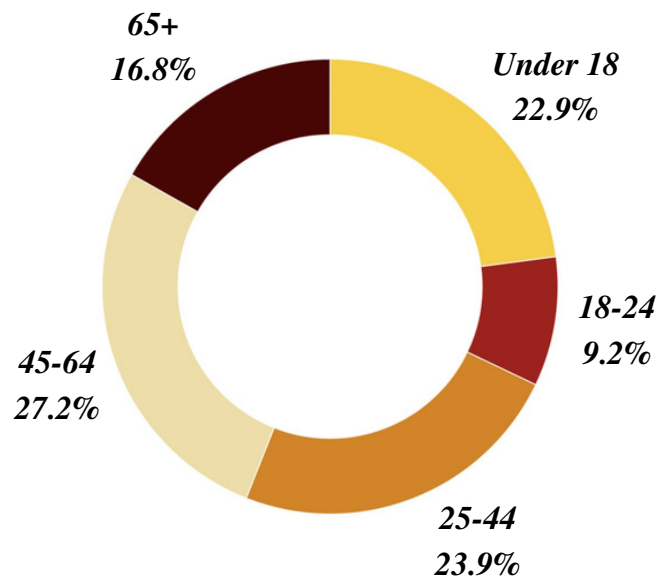


Figure 1. Rock County Age Distribution

Rock County's population of over 160,000 people makes it the 9th largest county in Wisconsin.<sup>1</sup> While Rock County is slightly less diverse in race and ethnicity than Wisconsin and the United States (U.S.), the County has seen increases in rates of Black or African American, Asian, Hispanic and Latinx, and American Indian and Alaska Native populations across the last decade. The White population makes up the majority of Rock County's population at 82.3%.<sup>1</sup>

As a whole, Rock County has higher rates of poverty than Wisconsin and the U.S. with 12.3% of the population living under the poverty threshold.<sup>1</sup> Though poverty is a complex issue with many contributing factors, health, education, and employment status are often good indicators of an area's poverty rate. In terms of health, Rock County has a higher rate of individuals under 65 years old without health insurance and a higher rate of people living with a disability than the U.S.<sup>1</sup> Additionally, Rock County has a significantly lower proportion of its population with a Bachelor's degree or higher. Currently, 22.1% of Rock County has attained a degree from higher education while 30.1% and 32.1% of Wisconsin and the U.S., respectively, have achieved this level of education.<sup>1</sup> Unemployment rates in Rock County and Wisconsin are lower than the U.S. rate at 3.4%.<sup>1</sup>

## Why Place Matters:

The places people live affect a wide range of health outcomes and largely determine what resources and opportunities are available.

Health outcomes, both positive and negative, are greatly shaped by accessibility of simple health needs such as quality food, reliable healthcare providers, and safe recreational areas. Place also determines availability of resources that can improve or harm health such as schools, living wage jobs, or quality of available housing. An environment that can meet the needs of those who live there is essential in improving overall quality of life, and preventing negative health outcomes.

**Table 1. Rock County Demographics<sup>1</sup>**

Demographic Category	Demographic Factor	Rock County	Wisconsin	United States
Population	Total Population	163,354	5,822,434	328,239,523
Age	Persons under 5 years	6.0%	5.7%	6.0%
	Persons under 18 years	22.9%	21.8%	22.3%
	Persons 65 years and over	16.8%	17.5%	16.5%
Race and Ethnicity	American Indian & Alaska Native alone	0.6%	1.2%	1.3%
	Asian alone	1.3%	3.0%	5.9%
	Black or African American alone	5.3%	6.7%	13.4%
	Hispanic or Latino	9.1%	7.1%	18.5%
	Two or more races	2.5%	2.0%	2.8%
	White alone, not Hispanic or Latino	82.3%	80.9%	60.1%
	White	90.3%	87.0%	76.3%
Health	With a disability, under age 65	10.0%	8.0%	8.6%
	Person without health insurance, under age 65 years	7.1%	6.8%	10.2%
Languages Spoken at Home	English Only	91.9%	91.3%	78.4%
	Spanish	6.1%	4.6%	13.4%
	Other Indo-European Languages	1.1%	1.9%	3.7%
Education	High school graduate or higher, percent of persons age 25 years+,	90.8%	92.2%	88.0%
	Bachelor's degree or higher, percent of persons age 25 years+	22.1%	30.1%	32.1%
Employment	Unemployment rate (September, 2021)	3.4%	3.4%	4.8%
Economy	In civilian labor force, total, percent of population age 16+	65.5%	66.4%	63.0%
Poverty	Persons in poverty	12.3%	10.4%	10.5%



# Health Equity Alliance of Rock County

The Health Equity Alliance of Rock County is a multisector coalition comprised of health systems, community-based organizations, government agencies, and community residents working to improve the health of Rock County. HEAR is currently comprised of over 100 community representatives that serve as part of the general body or advisory committee. The Rock County Public Health Department serves as the facilitator of HEAR and provides a HEAR Coordinator who guides the Alliance with the help of the HEAR advisory committee. To support ongoing community involvement in Rock County's health and wellness initiatives, HEAR purposefully engages with diverse groups of people throughout the County in order to assess health needs, set health priorities, and support health-focused programming. The Alliance recognizes that health disparities and inequities disproportionately impact certain members of Rock County. HEAR is committed to addressing health disparities and inequities to ensure that every Rock County resident reaches their full health potential.

While often used interchangeably, disparities and inequities are distinct terms that refer to different health circumstances. Disparities are simply differences in health status or mortality rates across population groups. Inequities are differences in health status or mortality rates across population groups that are systemic, avoidable or unjust, and are rooted in how resources have been, and continue to be, distributed.<sup>2</sup> Health disparities are often driven by inequities.<sup>2</sup> Disparities and inequities are also detailed in Rock County's 2021 Race to Equity report available through the following link: <https://rebrand.ly/RCRaceToEquity>



*HEAR General Body Meeting 10.14.21*

# Methodology

Rock County’s CHA includes a variety of methods to integrate both qualitative and quantitative data. HEAR worked from February 2021 to November 2021 to design and distribute the assessment components, conduct interviews, analyze results, and write this final report. HEAR utilized a modified Mobilizing for Action through Planning and Partnerships (MAPP) process for the completion of this CHA through utilization of existing partnerships and the existing vision. The MAPP process contains six phases and four separate assessments.<sup>3</sup>

*Table 2. MAPP Implementation Process*

MAPP Phase	Implementation
Phase 1: Organizing and Engaging Partners	HEAR served as the existing community partnership for the CHA and CHIP. HEAR was formed in 2016 and includes 110 members who represent diverse sectors of Rock County. HEAR’s advisory committee served as the steering committee for the CHA and CHIP and includes representatives from health care, non-profit organizations, and public health.
Phase 2: Visioning	HEAR’s existing mission and vision guided the CHA/CHIP process. <b>Mission:</b> HEAR is committed to health equity, through community collaboration, to ensure that Rock County reaches its full health potential. <b>Vision:</b> Rock County is a healthier place to live, work, learn, play, and grow.
Phase 3: The Four Assessments	The <b>Community Themes and Strengths Assessment</b> was completed through Community Conversations and key informant interviews. HEAR also collected data through a community survey with a focus on the impact of Social Determinants of Health on people’s overall health.  The <b>Local Public Health System Assessment</b> was conducted through a survey sent to HEAR members.  The <b>Community Health Status Assessment</b> was conducted through a review of secondary data and was also informed by the community survey.  The <b>Forces of Change Assessment</b> was conducted through a survey of HEAR members.
Phase 4: Identify Strategic Issues	Priorities for the CHIP were selected through a survey sent to HEAR members. HEAR members were also asked to share the survey with people who participated in Community Conversations and key informant interviews.
Phase 5: Formulate Goals and Strategies	All phases of the MAPP process will be implemented and documented through the CHIP.
Phase 6: Action Cycle	



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## **Community Health Assessment Survey**

The Community Health Assessment Survey is a 31-question online assessment developed to assess the health of Rock County residents. With a special focus on the Social Determinants of Health, the survey aimed to identify potential gaps in health equity.

## **Community Conversations**

Community Conversations are small, informal focus groups designed to gain insight on a particular topic. To supplement the CHA Survey, groups of stakeholders were invited to share their thoughts on Rock County's health. Community Conversation questions were developed with the goal of learning about challenges to good health, barriers to healthcare, and potential changes that could improve the overall health of Rock County. Each focus group contained a facilitator, a note-taker, and 15 participants at most.

## **Key Informant Interviews**

Key informant interviews are in-depth interviews with an individual selected for their knowledge on a subject.<sup>4</sup> Key stakeholders who live or work in Rock County were identified to complete a one-on-one interview to describe their perspective on various aspects of Rock County as a whole.

## **Secondary Data**

A robust assessment of available secondary sources was conducted. Secondary data was gathered from state and national resources to supplement the primary data gathered through the CHA Survey, Community Conversations, and key informant interviews. The secondary data sources represent the highest quality and most up-to-date information on population demographics, health conditions, and overall health trends. All secondary data included throughout this report is utilized to provide a greater context to Rock County's current health trends.

## **Forces of Change Assessment**

A Forces of Change (FOC) Assessment focuses on identifying forces such as legislation, technology, and other imminent changes that affect a community and its public health systems.<sup>5</sup> This assessment answers the questions: "What is occurring or might occur that affects the health of our community or the local public health system?" and "What specific threats or opportunities are generated by these occurrences?"<sup>5</sup>

## **Local Public Health Systems Assessment**

A Local Public Health Systems Assessment (LPHSA) focuses on all the organizations that contribute to the public's health. This assessment answers the questions: "What are the components, activities, competencies, and capacities of our local public health system?" and "How are the 10 Essential Public Health Services being provided to our community?"<sup>5</sup> This tool is valuable for identifying areas for system improvement to ensure a strong system is in place for effective delivery of day-to-day public health services.<sup>5</sup> Individual stakeholders from multiple sectors within HEAR were identified to complete the assessment via email as an online survey.

*All of the methodology tools can be found in the appendices.*

# Results

## Community Health Assessment Survey

A total of 1,030 responses were collected on the Community Health Assessment Survey. Full results of the survey are available through the following link: <https://rebrand.ly/RCSurveyResults>

## Community Conversations

Community Conversations were hosted with groups from various communities throughout Rock County. A total of 17 Community Conversations were held with 14 groups. When asked about the challenges and barriers to good health in Rock County, the majority of conversations noted issues with public transportation, access to healthcare or mental health services, substance use issues, and lack of insurance.



Figure 2. Challenges and Barriers Identified in Community Conversations

## Key Informant Interviews

Key informant interviews were held with individuals who live or work in Rock County. In total, 22 community stakeholders from various sectors of Rock County’s population participated in one-on-one interviews. When asked what assets are available in the community, interviewees often mentioned nonprofit organizations (e.g. Community Action Inc., ECHO, YWCA Rock County), schools, hospitals, and general recreational areas. When asked about Rock County’s health concerns, interviewees frequently noted that access to healthcare, poor mental health, COVID-19, substance use, and a lack of insurance coverage were threats to the health of Rock County.

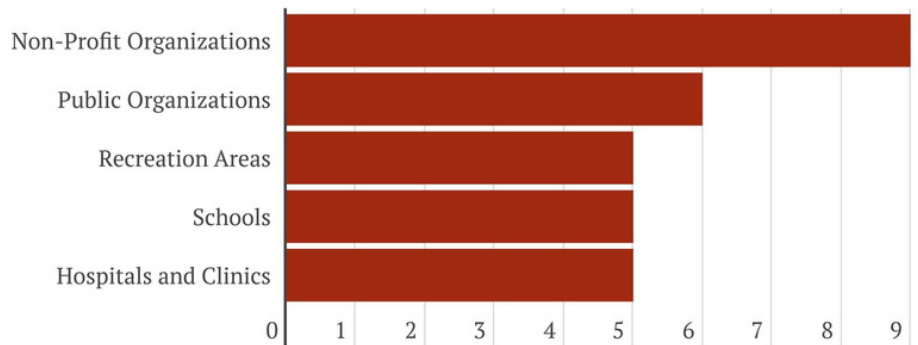


Figure 3. Community Assets Identified in Key Informant Interviews

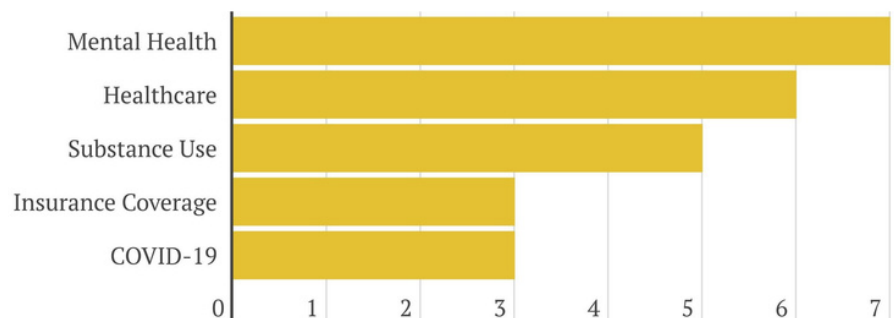


Figure 4. Community Threats Identified in Key Informant Interviews

## Forces of Change

A total of 23 FOC were identified through an online assessment. The Forces of Change represented themes related to the COVID-19 pandemic, the built environment, healthcare access, substance use, and health conditions. The assessment included opportunities created by the identified FOC as well as opportunities to address the FOC. In total, the FOC online survey received nine responses.

<u>Forces of Change</u>		
Addiction	Healthcare costs	Vaping
Public Health Accreditation Standards and Measures	Legislation limiting the authority of Public Health Officers	Removal of alcohol license quota for Janesville
HealthNet expansion	General Motors closure	Climate Change
Redevelopment in Beloit and Janesville	Tobacco 21 policy	WIC Food Package Report
Marijuana legalization in Michigan and Illinois	Racism declared a public health crisis	Chronic disease burden
Mental health	Healthcare workforce recruitment and retention	Growing community partnerships
Obesity	Population relocation from Chicago	Casino in Beloit
COVID-19 pandemic		Affordable housing

Figure 5. Rock County's Identified Forces of Change

## Local Public Health Systems Assessment

The LPHSA gave stakeholders the opportunity to score the delivery of the 10 Essential Public Health Services on a five-point scale ranked from "No Activity" to "Optimal Activity" (see below). Respondents were asked to rank each essential service with regard to their perception of how well the service is addressed in Rock County's local public health system. In total, the LPHSA online survey received nine responses.

- Optimal Activity ★★★★★
- Significant Activity ★★★★
- Moderate Activity ★★★
- Minimal Activity ★★
- No Activity ★

Respondents also reported strengths and areas of improvement for each essential service that can be found in Appendix I.

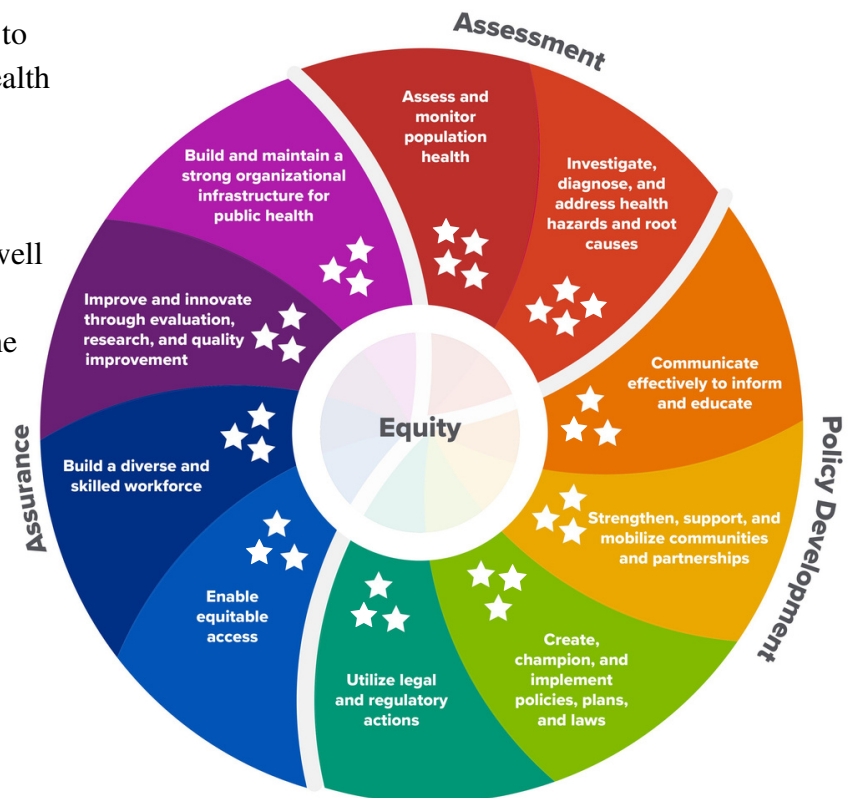


Figure 6. CDC's 10 Essential Public Health Services



# Social Determinants of Health

The Social Determinants of Health are the conditions and the environments where people are born, live, learn, work, play, worship, and age that affect a wide range of health, functioning, and quality of life outcomes or risks.<sup>6</sup> The Social Determinants of Health have a major impact on people’s health and can contribute significantly to health disparities and inequities. Common Social Determinants of Health include education, job opportunities, income, racism, safe housing, access to nutritious foods, access to recreation areas, and quality healthcare.<sup>6</sup>

Each of the following Social Determinant of Health sections describe a determinant based on data from the CHA Survey, Community Conversations, key informant interviews, and secondary data sources. Each Social Determinant of Health section also includes a Health Equity Spotlight that highlights disparities and inequities in Rock County based on each determinant.

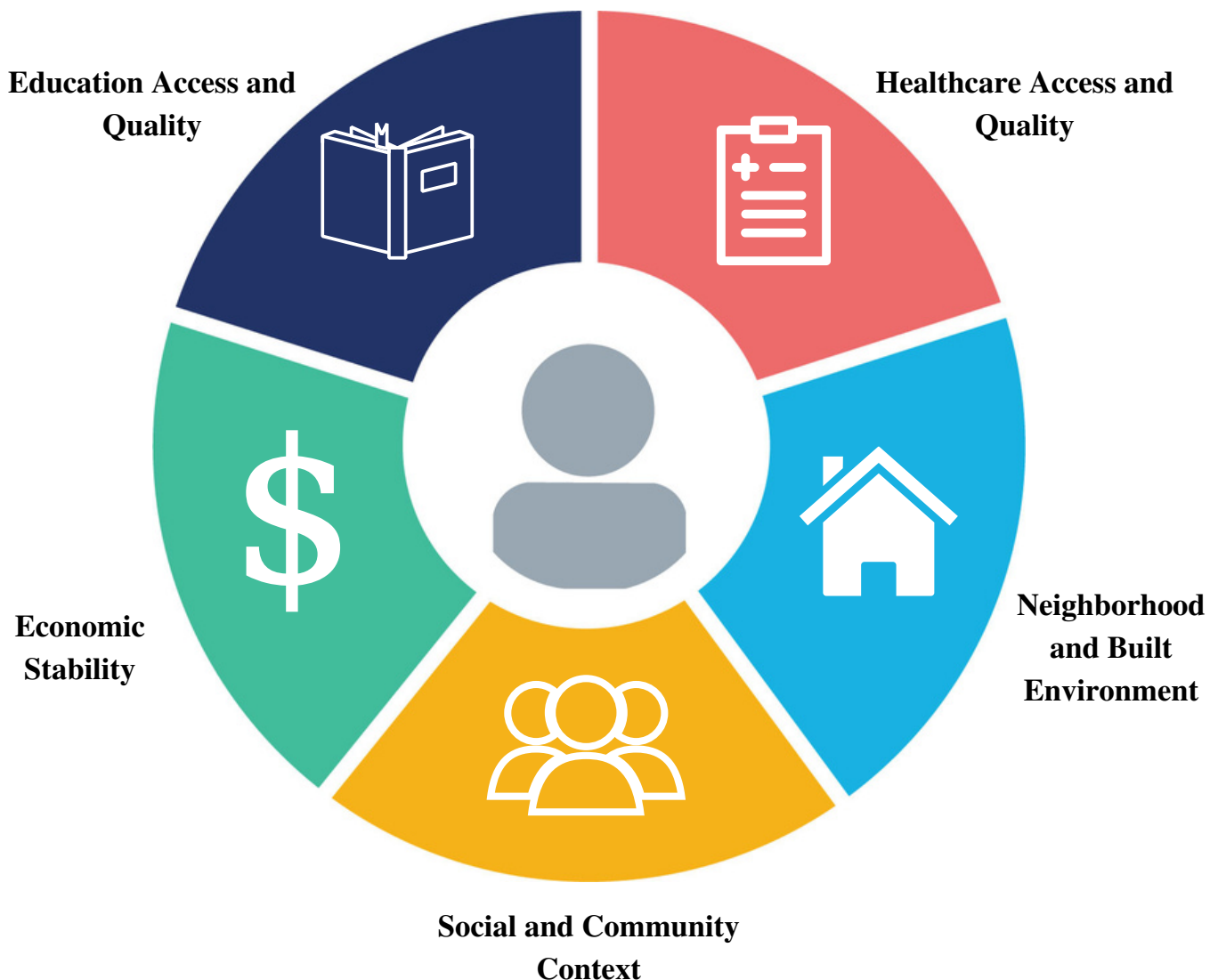


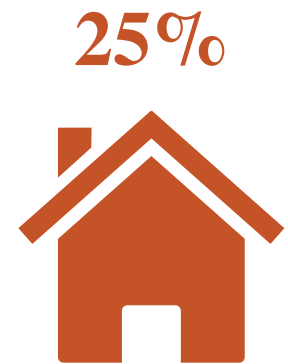
Figure 7. CDC Social Determinant of Health Domains

# Economic Stability

Economic stability and health are heavily intertwined. Economic stability determines someone’s ability to access essential health resources such as quality food, safe housing, and healthcare services. Poverty, a key indicator of economic instability, has a significant negative impact on many areas of health as it can prevent someone from accessing essential health-promoting resources. Currently, about one in ten people in the U.S. live in poverty and are not able to afford many of the essential products and services they need to promote good health.<sup>7</sup>



**Percent of Rock County Households that live below the FPL**

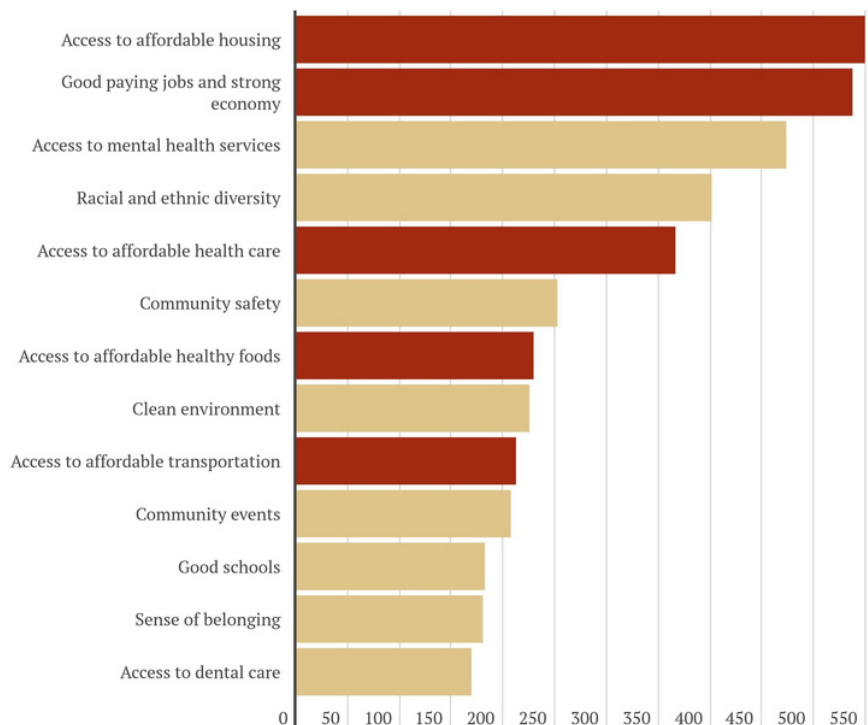


**Percent of Rock County Households that live above the FPL but do not make enough to meet daily needs**

*The FPL for a family of three is \$21,960 and, \$26,500 for a family of four<sup>9</sup>*

Poverty is associated with adverse health outcomes including shorter life expectancy, high infant mortality rates, and higher death rates for many chronic diseases.<sup>8</sup> A standard indicator used to measure poverty thresholds is the Federal Poverty Level (FPL). The FPL is primarily used to determine eligibility for certain programs and benefits such as savings on health insurance.<sup>9</sup> However, FPL is also a good indicator for economic stability at the national, state, and local levels.<sup>9</sup> In Rock County, 11% of residents live below the FPL. Additionally, about 25% of Rock County residents live above the FPL but do not make enough to afford basic daily needs including food, housing, and transportation.<sup>10</sup>

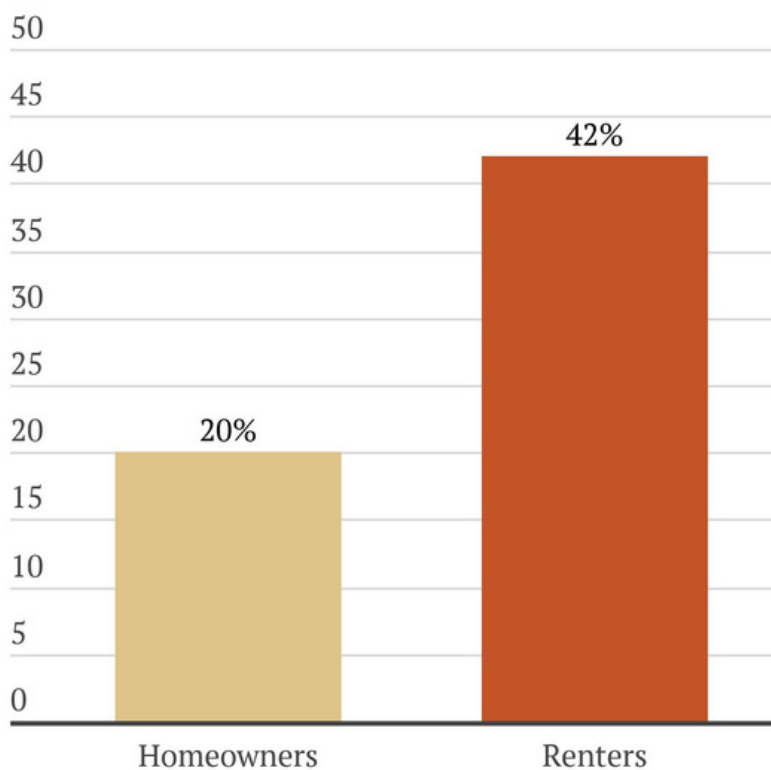
Rock County residents stressed the need for affordable services or amenities on the CHA Survey. Five of Rock County’s top ten areas of improvement identified by CHA Survey participants were focused on jobs and affordability of essential needs. The top two areas of improvement, access to affordable housing and good paying jobs, were identified by over half of the CHA Survey respondents. Problems like lack of access to affordable housing and health care, food insecurity, and lack of well-paying jobs are also widespread throughout Wisconsin and the U.S.<sup>11,12</sup>



**Figure 8. Top Needs of Rock County Identified by CHA Survey Participants**

One of the largest contributors to poverty is unemployment. Unemployment is associated with many mental and physical adverse health outcomes.<sup>13</sup> Those who are unemployed are at higher risk of mental health issues like depression, anxiety, and low self-esteem, along with physical health issues such as cardiovascular disease.<sup>13</sup> As of September, 2021, the U.S. unemployment rate was 4.8%.<sup>14</sup> Rock County's and Wisconsin's current unemployment rate is lower than the national average at 3.4%.<sup>14,15,16</sup>

Housing costs are one of many factors that greatly affect economic stability. For both those who rent or own their home, housing is a significant expense that can lead to financial stress. A common indicator of the impact of housing costs on overall economic stability is cost burden. Households are considered to be cost-burdened and severely cost-burdened if they spend more than 30% and 50% of their income on housing, respectively.<sup>17</sup> Housing availability due to cost is a prominent issue among those with low incomes. Extremely low-income households, or households with incomes at or below the FPL, experience high rates of cost burden. Cost burden issues are further worsened among the renting population. Currently, there are almost 11 million renter households in the U.S. with extremely low incomes, 70% of which are severely housing cost-burdened.<sup>18</sup> Among Rock County residents, 20% of homeowners and 42% of renters are considered cost-burdened.<sup>19</sup>



*Figure 9. Percent of Rock County Homeowners and Renters Spending 30% or More of their Income on Housing - 2013 to 2017*

### Health Equity Spotlight



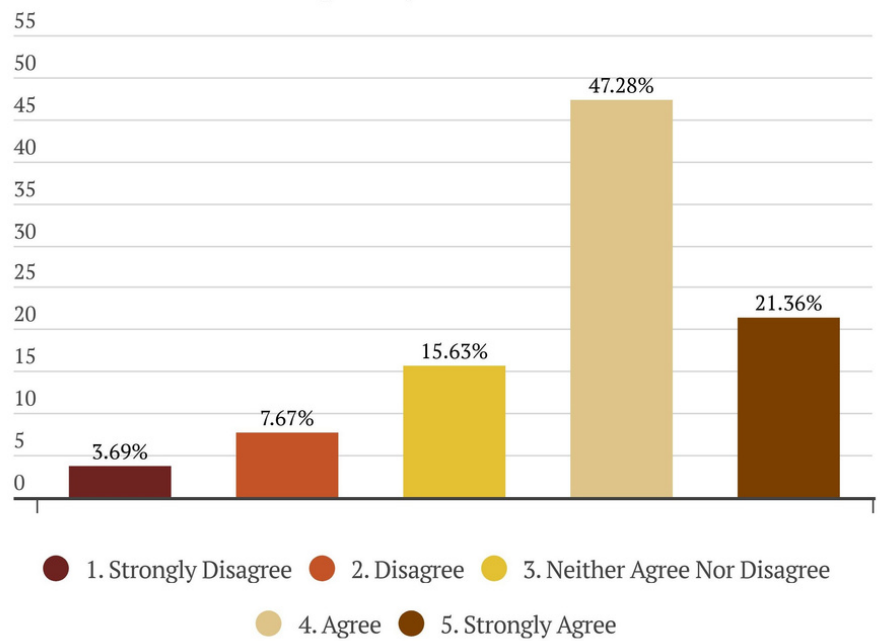
Quality employment is a key determinant in accessing resources that improve health such as health insurance, healthy foods, and safe housing. However, people experience inequitable access to consistent, well-paying employment at the local, state, and national level.

Black or African Americans are unemployed or are employed at low-paying occupations at higher rates than other races or ethnicities as a result of structural racism, implicit biases in the workplace, and inequities in wages.<sup>20,21</sup> Among CHA Survey participants, almost 70% of Black or African American respondents indicated there are not well-paying jobs in the community. Comparatively, only 35% of White respondents indicated the same.



# Education Access and Quality

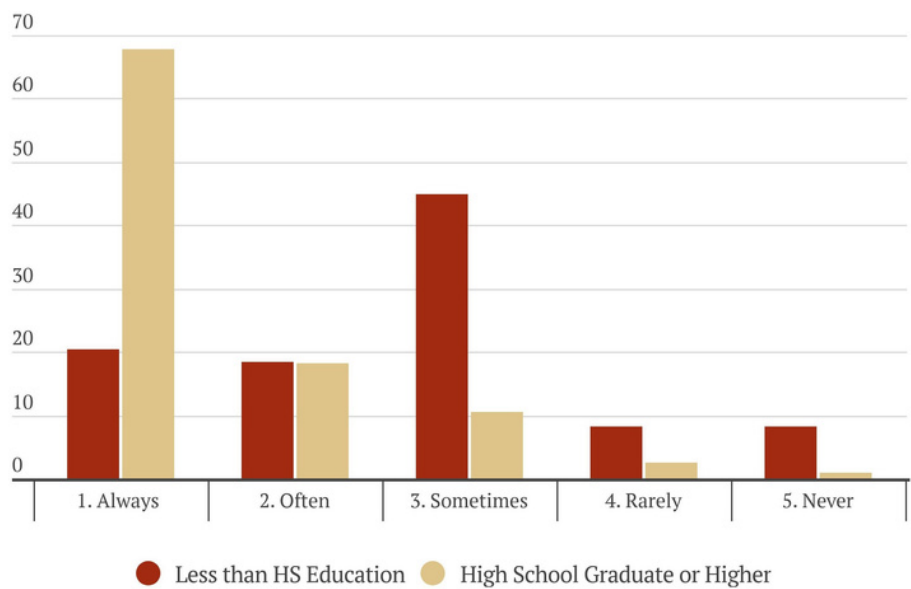
Education is the foundation for many opportunities in life, including good health. Education is often a key factor in determining someone’s ability to afford amenities (e.g. housing, healthy food, healthcare) that can improve health and well-being.<sup>22</sup> Unfortunately, many barriers exist in both access to education and receiving quality education particularly for those living in poverty, people of color, and people with disabilities.<sup>23</sup> Common educational barriers include a lack of resources, lack of translation/language services, poor school funding, non-inclusive school environments, or poor quality schooling.<sup>24,25</sup>



**Figure 10. CHA Survey Participants Self-Reported Availability of High Quality Education for Children in Rock County - 2021**

In Rock County, CHA Survey participants indicated that schools are one of the top strengths in the community. Almost 70% of CHA Survey respondents believe that children in their community have access to high-quality education.

Generally, those with higher educational attainment live longer, healthier lives than those with fewer years of schooling.<sup>26</sup> While the relationship between educational attainment and health is complex with a variety of contributing factors, higher education is often associated with positive economic, behavioral, and social factors that lead to good health.<sup>27</sup> Among CHA Survey participants, those with an educational attainment of less than a high school diploma frequently indicated difficulties in getting needed health services, and a lack of health insurance more often than those with higher education levels.



**Figure 11. CHA Survey Participants Self-Reported Availability of Health Services in Rock County by Educational Attainment - 2021**

Though CHA Survey participants generally believe that Rock County schools provide quality education, Community Conversation participants frequently expressed concerns about health-related education and health literacy. Health literacy can be defined as the degree to which someone has the capacity to obtain, process, and understand basic health information in order to make informed and appropriate health decisions.<sup>28</sup> Low health literacy is often an indicator of poor education and can lead to adverse effects including poor adherence to medication use, higher medical costs, and less access to quality health care services.<sup>29</sup>

While completion of high school has not traditionally been viewed as a public health topic, ties between health outcomes and educational attainment have pushed this topic to the forefront of public health concerns.<sup>22,30</sup> Though high school graduation rates have increased throughout the last decade, the percentage of students who are unable to finish high school is still of concern.<sup>31</sup> Students who are unable to finish high school often experience unemployment, incarceration and poor mental health at higher rates than those who receive a high school diploma.<sup>22,32</sup> Similar trends are seen at the college or university level in that those who are unable to finish their degree experience higher rates of unemployment than those who receive a college degree.<sup>33</sup>

### Health Equity Spotlight



Educational attainment is often considered a result of personal behavior and intelligence. However, access to high quality education is not always available. Access to education can be limited by factors such as structural racism, and conditions caused by poverty that lead people to forgo educational attainment for other basic needs.<sup>34</sup> Many CHA Survey respondents expressed that Rock County offers high quality education. However, respondents who identified as Black or African American frequently indicated that their children did not have access to high quality education, potentially due to inequities deeply rooted in the U.S. educational system.

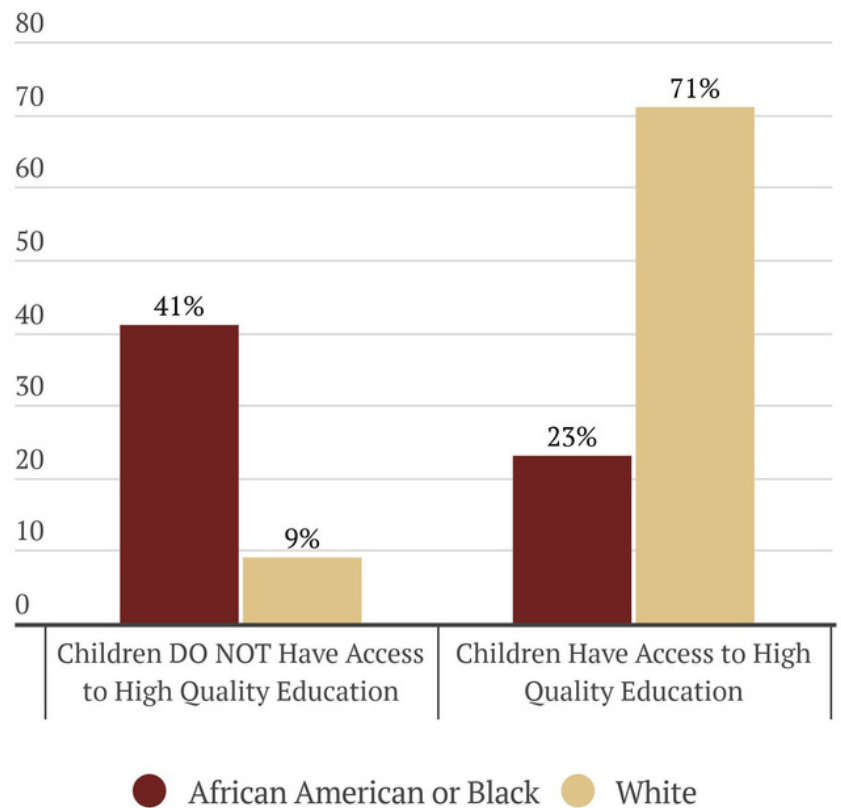
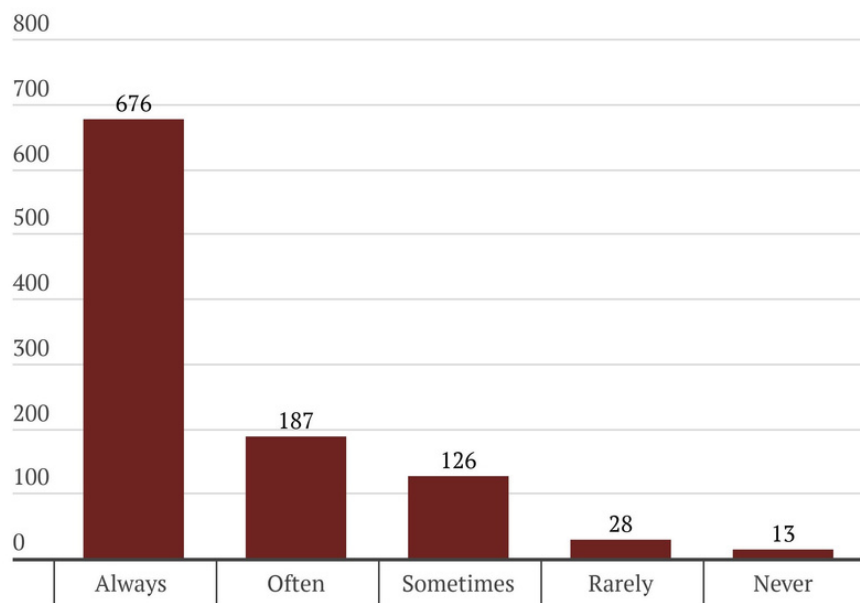


Figure 12. CHA Survey Participants Self-Reported Availability of High Quality Education for Children in Rock County by Race - 2021

# Healthcare Access and Quality

Access to healthcare generally means an individual is able to access timely health services to achieve the best health outcomes possible.<sup>35</sup> Healthcare access is determined by healthcare coverage, timeliness of the available services, and the availability of the workforce providing healthcare services.<sup>35</sup> These key components of healthcare access impact many of the factors that can promote good health such as service affordability, and receiving quality or routine care.



*Figure 13. CHA Survey Participants Self-Reported Availability of Health Services in Rock County - 2021*

Healthcare access as a barrier to good health was indicated as an issue in Rock County through each mode of data collection (CHA Survey, Community Conversations, key informant interviews). Along with being identified as a top five area for improvement on the CHA Survey, healthcare access was of primary concern among many Community Conversation participants. Access to care topics like insurance coverage, affordability of care, and provider availability were frequently mentioned when asked about concerns in Rock County communities. Despite concerns among Community Conversation participants, the majority of CHA Survey respondents indicated that their households are able to access the health services they need.

As one of the largest determinants in accessing healthcare services, a lack of health insurance often prevents individuals from receiving needed care. Those without insurance have less access to care, receive poorer quality care, and experience worse health outcomes than those with insurance.<sup>36</sup> Those without insurance also receive less preventative care, potentially leading to major health conditions or chronic diseases.<sup>37</sup> In Rock County, 7% of adults under the age of 65 are uninsured.<sup>38</sup> While there are many reasons as to why someone may not have health insurance, many people who are uninsured cite high costs of insurance as the main reason they lack coverage.<sup>37</sup>

Nationally, health insurance coverage has significantly increased due to expansion of the Medicaid program under the Affordable Care Act (ACA). Medicaid currently provides health coverage to over 75 million Americans, including eligible low-income adults, children, pregnant women, elderly adults and people with disabilities.<sup>39</sup> Expansion of the Medicaid program, however, is optional and decided at the state level. Wisconsin is one of 12 states in the U.S. that has not adopted and implemented the expanded Medicaid program.<sup>40</sup> An estimated 175,000 additional Wisconsin residents would be covered under the program if the state accepted expansion.<sup>41</sup>



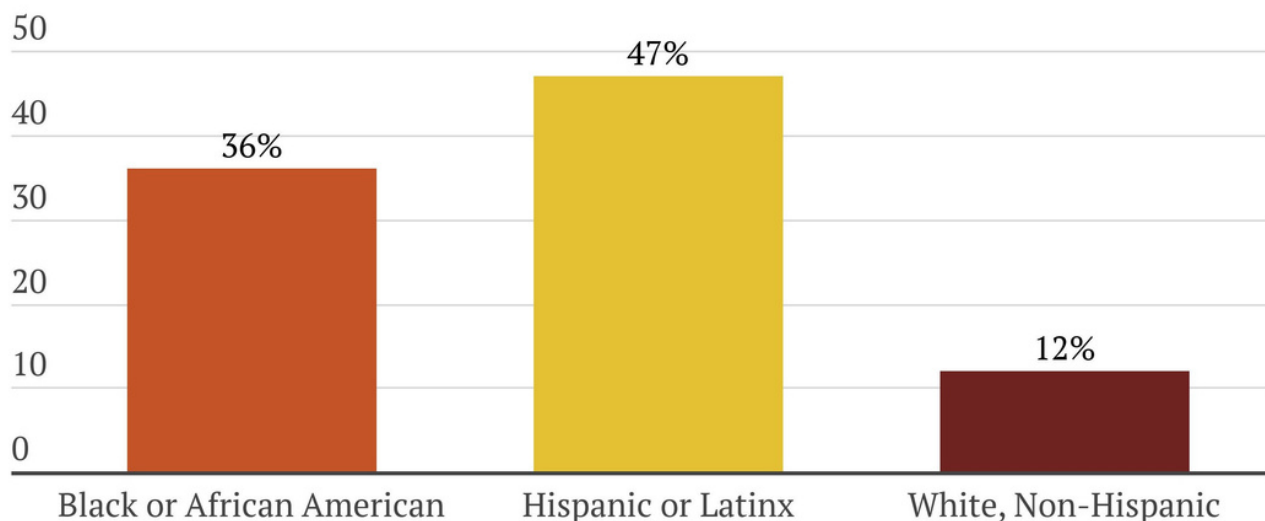
Another common barrier in accessing quality health care services is low availability of healthcare resources. A Health Professional Shortage Area (HPSA), or any area with a significant shortage of healthcare providers, is commonly used to identify shortages in medical, dental, or mental health services.<sup>42</sup> The U.S. is currently facing a severe physician shortage that may worsen in the next decade. It is estimated that the U.S. may see a shortage between 37,000 and 120,000 physicians by early 2030 with shortfalls in primary and specialty care.<sup>43</sup> Wisconsin has 105 HPSA designations throughout the state, affecting over one million Wisconsin residents.<sup>42</sup> Among those affected in Wisconsin are Rock County residents. Rock County has a shortage of medical professionals at 48.7 primary care physicians per 100,000 residents.<sup>44</sup> This rate is lower than both the state at 78.7 and the nation at 75.7 primary care physicians per 100,000 residents.<sup>44</sup>

### Health Equity Spotlight



Seeing a healthcare provider for routine care is easier for those with health insurance, sick leave, and an established primary care physician. However, others may struggle to receive healthcare as a result of income, employment, language barriers, and health literacy.<sup>45</sup>

Additionally, some may not trust healthcare providers due to historical trauma and discrimination that still persists in healthcare settings to this day.<sup>45</sup> Among CHA Survey respondents, more than one in three Black or African American and nearly half of the Hispanic and Latinx respondents indicated that they sometimes or rarely were able to get the health services they need. Additionally, 13% of Black or African American respondents indicated they have not felt welcome when seeking healthcare services and 11% of Hispanic and Latinx respondents indicated they struggle to access healthcare services due to language barriers.



*Figure 14. Percent of CHA Survey Participants Reporting Difficulties in Obtaining Health Services by Race and Ethnicity - 2021*

# Neighborhood & Built Environment

Neighborhoods and the built environments where people live can have significant impacts on health and well-being. On the individual level, social and built environment conditions can affect health as much as positive or negative health behaviors. The built environment includes all the man-made, physical attributes of a surrounding area including conditions that affect walkability, access to recreation, availability of health promoting resources (e.g. healthy food, healthcare services), and undesirable amenities (e.g. fast food, liquor stores).<sup>46</sup>

A key determinant of promoting healthy behaviors through neighborhoods and built environments is quality neighborhood design. Neighborhood design that promotes a healthy lifestyle through accessible amenities such as parks, public transportation, and grocery stores can improve health and well-being.<sup>47</sup> Of particular importance in improving health is access to areas for exercise like parks and gyms. Regular physical activity has been shown to reduce the risk of chronic diseases like obesity, diabetes, heart disease, cancer, and even depression and anxiety.<sup>48</sup> Almost 90% of Rock County residents live within a short distance of a park, gym, or other location that provides an opportunity to be physically active, ranking Rock County 9th in Wisconsin for best access to exercise opportunities.<sup>38</sup>

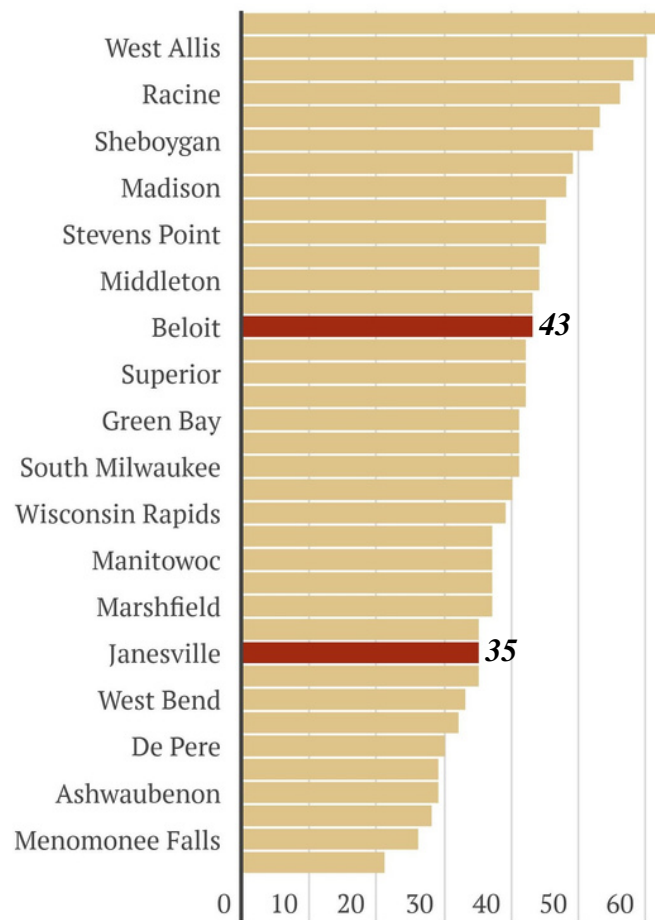


Figure 15. Walkability of Wisconsin Cities by City - 2021

Though Rock County residents have great access to areas of physical activity, some residents may have varied ability to get physical activity outside of recreational areas. A key indicator used to measure a community's access to amenities is walkability. Walkability, or how friendly an area is to walking, is scored based on the availability of walking routes and destinations accessible on foot.<sup>49</sup> Higher neighborhood walkability scores have been associated with health benefits including reductions in chronic disease, lower risk of disability, reduced air pollution, and positive impacts on mental health.<sup>50</sup> Two of Rock County's largest cities, Janesville and Beloit, have low walkability scores. Beloit and Janesville have walkability scores of 43 and 35, respectively (score out of 100). These scores place each city in what is classified as a "car-dependent" category, or an area where most errands require a car.<sup>49</sup>

Another key factor that plays a significant role in neighborhoods and built environments is quality housing. Substandard housing, or housing that poses a risk to the health, safety or physical well-being of its occupants, can lead to adverse health effects such as infectious and chronic disease, injuries, poor childhood development, and poor mental health.<sup>51</sup>

Common indicators of substandard housing include high housing costs, overcrowded housing, lack of kitchen facilities, and lack of plumbing facilities.<sup>19</sup> Substandard housing issues can apply to both owned homes and rental properties. In Rock County, one in seven owner occupied homes have at least one of the previously listed indicators.<sup>19</sup> Those who rent in Rock County are also at a great risk of substandard housing with one in four Rock County rental properties having one of the previously listed indicators.<sup>19</sup>



Figure 16. Proportion of Rock County owner occupied homes with an indicator of substandard housing - 2013 to 2017



Figure 17. Proportion of Rock County rental properties with an indicator of substandard housing - 2013 to 2017

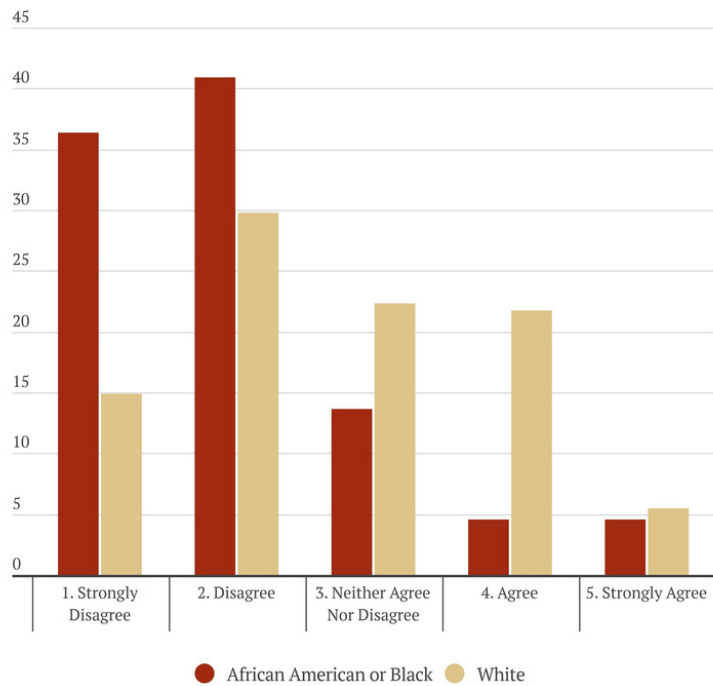


Figure 18. CHA Survey Participants Self-Reported Availability of Safe and Affordable Housing in Rock County by Race - 2021

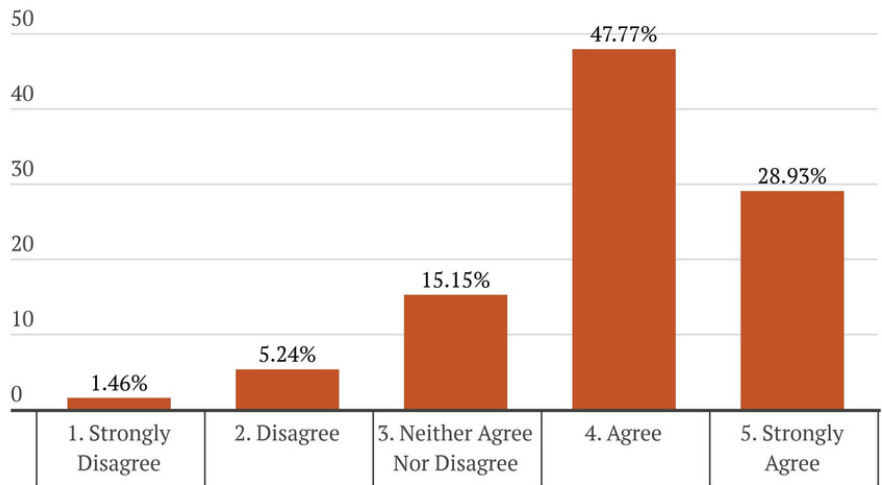
## Health Equity Spotlight



Safe and affordable housing is essential for promoting overall health. However, for some, safe and affordable housing is unattainable. Substandard housing and exposure to the harmful effects associated with poor quality homes affects people of color disproportionately as a result of structural racism such as redlining, implicit bias, and disparities in income or employment.<sup>52</sup> Among CHA Survey respondents, Black or African Americans were more likely to indicate that there is not sufficient safe and affordable housing in Rock County than White respondents.

# Social and Community Context

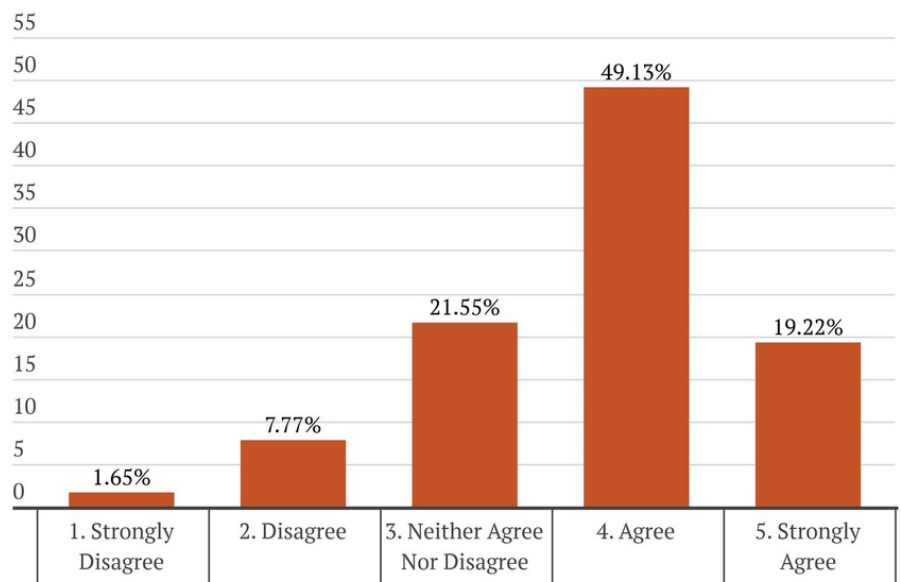
Social and community context refers to the settings in which people live and work, and the relationships formed in these settings.<sup>53</sup> People’s relationships and interactions with family, friends, neighbors, coworkers, and their community can have major impacts on both mental and physical health.<sup>54</sup> Having positive relationships at home, work, and in the community where someone resides can help reduce risk of anxiety and depression, raise self-esteem, and even improve the immune system.<sup>55</sup>



**Figure 19. CHA Survey Participants Self-Reported Friendliness with their Neighbors in Rock County - 2021**

CHA Survey participants responded very positively to the social and community context-focused questions. The majority of participants indicated they are friendly with their neighbors, and they feel safe in their community. Additionally, most participants indicated there are places to gather in the community, and there is a sense of belonging in their community. Feeling a sense of belonging is often associated with better health and can reduce the risks of adverse health effects associated with social isolation.<sup>56,57</sup>

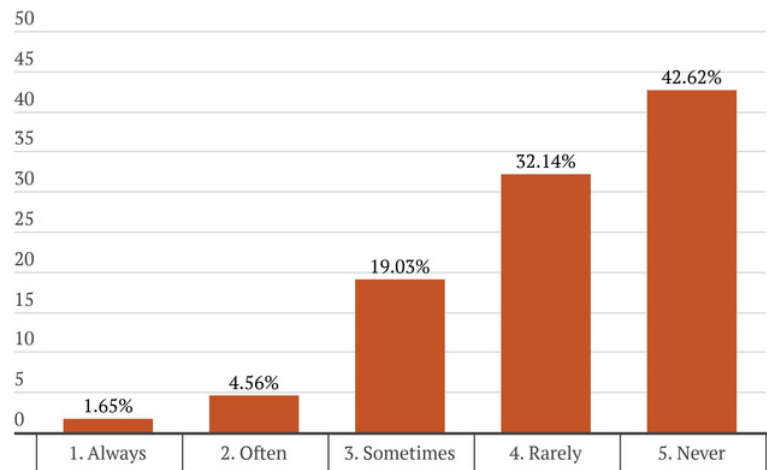
Loneliness and social isolation have been associated with adverse health outcomes including depression, anxiety, dementia, and suicide.<sup>56</sup> While everyone is susceptible to feelings of loneliness and social isolation, certain groups are at higher risks than others. In particular, older adults are at an increased risk of loneliness and social isolation as they are more likely to experience factors such as living alone, losing family or friends, and living with chronic illness.<sup>56</sup> Nearly one-fourth of U.S. adults age 65 and older are considered to be socially isolated and 43% feel lonely on a regular basis.<sup>56,58</sup> Immigrants and members of the lesbian, gay, bisexual, transgender, and queer (LGBTQ+) community are also at high risk of experiencing loneliness and social isolation.<sup>56</sup>



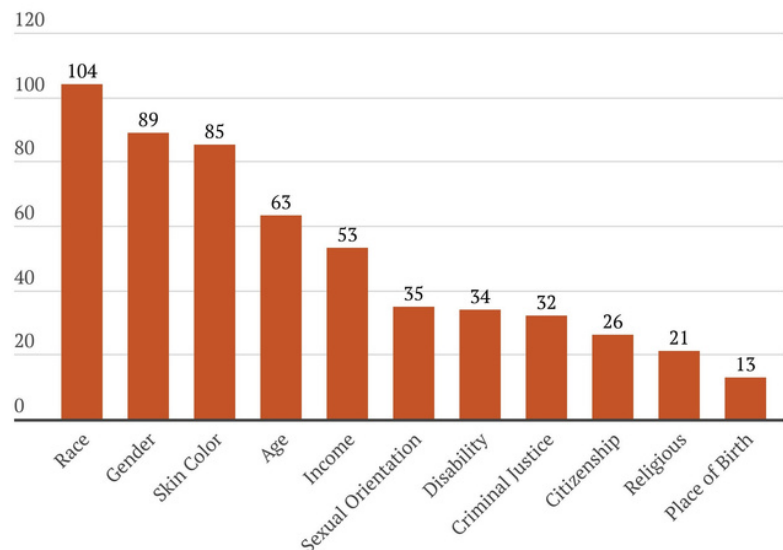
**Figure 20. CHA Survey Participants Self-Reported Feeling of Belonging in their Community - 2021**



While there are many opportunities for improving social connection, behaviors such as discrimination can impact someone’s sense of connection or belonging to their community. Discrimination, or the unjust treatment of someone based on race, age, or sex, is a widespread issue that can cause severe adverse physical and mental health impacts.<sup>59</sup> Over half of CHA Survey participants reported having experienced discrimination in their community. The most common types of discrimination experienced by survey participants included racial discrimination, discrimination by gender, and discrimination by age. Additionally, participants reported experiencing discrimination in various situations including work, when shopping or eating at restaurants, at school, when applying for jobs, and when receiving healthcare services.



**Figure 21. CHA Survey Participants Self-Reported Discrimination Experiences in their Community - 2021**



**Figure 22. CHA Survey Participants Self-Reported Discrimination Experiences in their Community by Discrimination Type - 2021**

## Health Equity Spotlight



Though a community should provide opportunities for connection to each of its members, some groups experience racism, discrimination, harassment, or violence that can limit opportunities for social support. When asked about gathering spaces in their respective communities, 59% of Black or African American respondents indicated they agreed that there were places for them to connect with others like them in Rock County. Comparatively, 83% of Hispanic and Latinx and 85% of White respondents indicated there were places for them to gather and connect with others like them in their communities. When asked about connections with neighbors on the CHA Survey, 73% of Hispanic and Latinx and Black or African American respondents agreed they are friendly with their neighbors, while 77% of White respondents indicated the same.

# Priority Health Topics

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The priority health topic sections on the following pages represent a variety of health topics related to the overall picture of health and well-being of Rock County residents. Each priority health topic was identified and selected based on its connection to the primary and secondary data collected to create this report. Each section describes a priority health topic based on data from the CHA Survey, Community Conversations, key informant interviews, and secondary data sources. Similar to the prior pages on the Social Determinants of Health, each priority health topic section also includes a Health Equity Spotlight that highlights health disparities and inequities in Rock County based on each health topic.

Though this Community Health Assessment does not contain an exhaustive list, the priority health topics encompass the main conditions that affect Rock County residents and have therefore been included.

**Communicable  
Disease**

**Chronic Disease and  
Injury Prevention**

**Oral Health**

**Mental Health**

**Nutrition and  
Physical Activity**

**Reproductive Health**

**Substance Use**

**Maternal, Child and  
Family Health**

**Environmental Health  
Hazards**

# Communicable Disease

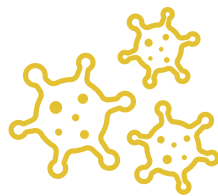
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Communicable diseases are broadly defined as infectious or transmissible diseases that result from an infection.<sup>60</sup> Communicable diseases are caused by biological agents such as viruses, bacteria, and fungi and can spread through a variety of methods including direct person to person contact, contact with contaminated surfaces or objects, bites from insects or animals, and airborne particles.<sup>60</sup> Severity of infection, as well as spread of infection, varies depending on the disease and the overall health of the person who has the disease.<sup>60</sup>

COVID-19 is currently on the forefront of communicable disease issues. COVID-19 emerged in late 2019 and quickly spread throughout the world earning the title of pandemic. Globally, as of December 21st, 2021, there have been over 270 million confirmed COVID-19 cases and over 5 million COVID-19-related deaths.<sup>61</sup>

COVID-19 has impacted nearly every facet of daily life and continues to have adverse effects on communities around the world, including Rock County. As of December 21st, 2021, over 24,000 Rock County residents have contracted COVID-19 and more than 240 residents have died as a result of the virus.

Many communicable diseases, including COVID-19, can be controlled and limited with vaccinations. It is estimated that vaccinations prevent 2-3 million deaths worldwide every year from diseases such as diphtheria, tetanus, pertussis, influenza, and measles.<sup>62</sup> Vaccinations have proven to be a valuable tool in the fight against the COVID-19 pandemic. Emerging in late 2020, COVID-19 vaccines are available throughout the country. In the U.S. over 200 million people have been fully vaccinated for COVID-19 with 72% of the population receiving at least one dose.<sup>63</sup> Rock County's COVID-19 vaccination rate, while slightly lower than the national average, is encouraging and continuing to increase. As of December 21st, 2021, over 58% of Rock County's total population has been fully vaccinated against COVID-19.



**24,000+**

**Rock County residents have contracted COVID-19**



**1,300+**

**Rock County residents have been hospitalized due to COVID-19**



**94,000+**

**Rock County residents have completed the COVID-19 vaccine series**

COVID-19 has disproportionately affected people of color throughout the course of the pandemic.<sup>64</sup> Health disparities and inequities that put people of color at higher risk of getting sick and dying from COVID-19 include discrimination, occupation, healthcare access, education, and housing. Additionally, people of color are also at higher risk of COVID-19 as a result of language barriers and mistrust in healthcare due to historical trauma and malpractice.<sup>64-65</sup>

### Health Equity Spotlight



Rock County's Hispanic and Latinx community has been disproportionately impacted by the COVID-19 pandemic as a result of inequities such as healthcare access, language barriers, and employment.<sup>64</sup> More than 26% of Hispanic and Latinx Rock County residents who have been tested for COVID-19 throughout the course of the pandemic have tested positive for the virus. Comparatively, only 17% of non-Hispanic and Latinx residents have tested positive. Additionally, fewer Hispanic and Latinx residents have received the COVID-19 vaccine since becoming widely available to the public. In Rock County 42.5% of Hispanic and Latinx residents have gotten at least one dose of the COVID-19 vaccine, compared to 55% of non-Hispanic and Latinx residents.

Young children are very vulnerable to a number of communicable diseases in the first few years of life. Child vaccination rates in Rock County are lower than in other areas of Wisconsin and the U.S. A common indicator used to track childhood vaccination levels is the 4:3:1:3:3:1:4 series. The 4:3:1:3:3:1:4 series refers to the number of vaccinations recommended for children before turning 2 years old.<sup>66</sup> This vaccine series protects against infection from various diseases including tetanus, diphtheria, pertussis, polio, and measles.<sup>66</sup> As of 2020, Rock County's 4:3:1:3:3:1:4 vaccination rate was 62.5%.<sup>67</sup> When compared with Wisconsin or the Southern Wisconsin Region, Rock County had considerably lower rates of 4:3:1:3:3:1:4 vaccination completion across the last decade.<sup>67</sup>

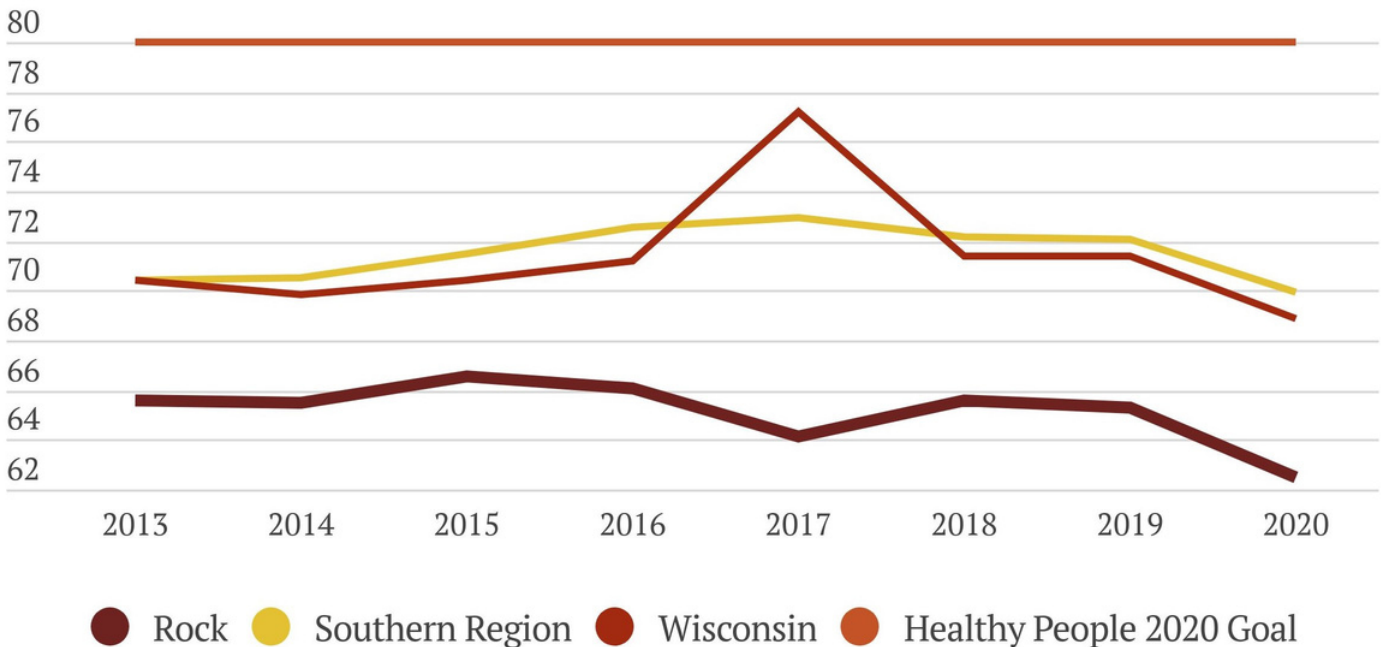
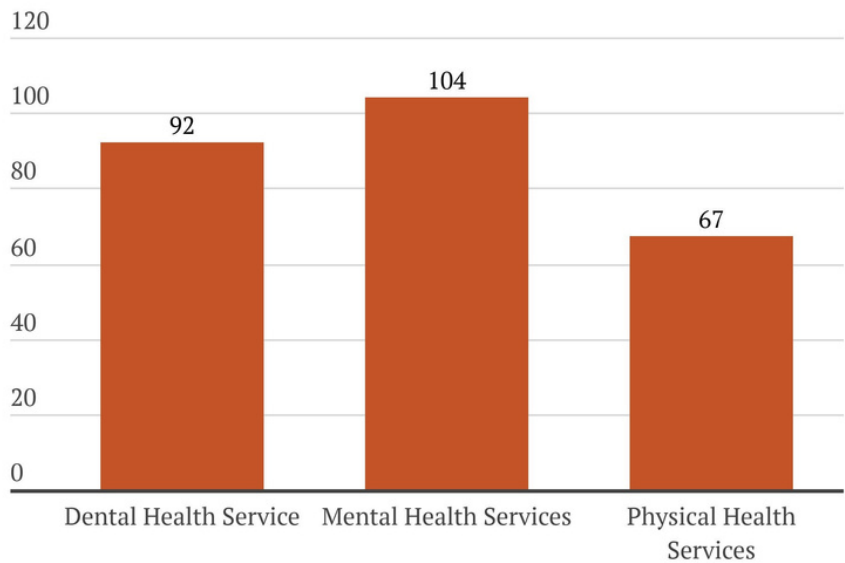


Figure 23. Percent of Children who Completed 4:3:1:3:3:1:4 Vaccination Series by Age 2 in Wisconsin - 2020



# Mental Health

Mental health is an essential part of overall health that includes emotional, psychological, and social well-being. Mental health can be determined by a range of factors and often affects how individuals cope with stress, relate to others, and make choices.<sup>68</sup> Mental health was a topic of concern among Rock County residents through every mode of data collection. Specifically, Rock County residents were concerned with lack of access to treatment, mental health stigma, and the impact of mental health on substance use and the homeless population.



*Figure 24. Number of CHA Survey Participants Reporting Difficulties in Obtaining Health Services by Service Type - 2021*

Access to mental health treatment was of particular concern among Community Conversation participants. Participants noted that access to treatment is often challenging due to cost and a lack of providers in Rock County. Rock County has approximately 166 mental health providers per 100,000 residents, which is lower than Wisconsin (189 per 100,000) and the U.S. (203 per 100,000).<sup>44</sup>

Rock County residents also expressed concerns about the impact of mental health on rural populations, especially agricultural communities. While the prevalence of mental illness may be similar between rural and urban residents, rural residents face significant challenges in the accessibility, availability, and acceptability of receiving mental health treatment.<sup>69</sup> Mental health stigma, or negative attitudes and discrimination based on mental health, is very prominent in both urban and rural areas. However, stigma may be worse in rural areas where it is difficult to maintain privacy when seeking care.<sup>70</sup>



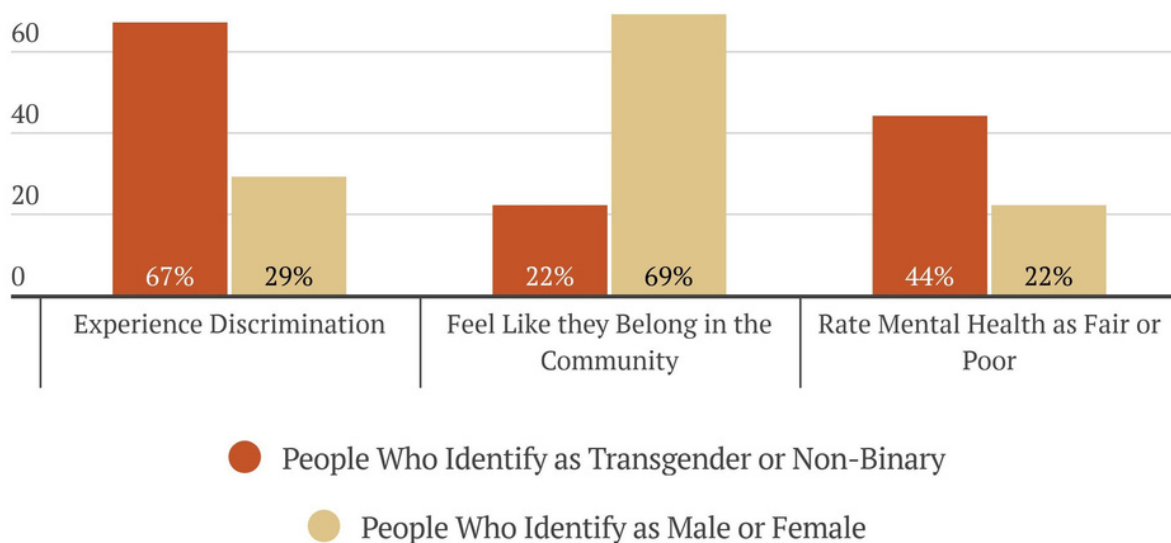
**Number of mental health providers per 100,000 people in Rock County**

Another concern identified in Community Conversations was the criminalization of mental health. Due to scarce mental health resources, law enforcement officers are often called to assist with mental health crises. Efforts have been made by Rock County law enforcement to improve responses to mental health crises through Crisis Intervention Training (CIT) and Mental Health Awareness Flags (MHAF). Mental Health Awareness Flags are visual indicators in the Rock County law enforcement management system that alert an officer if an individual may have symptoms of a mental illness, providing the officer with additional information to respond appropriately.<sup>71</sup>

### Health Equity Spotlight



Mental health is a complex topic that can be influenced by social factors including acceptance, support, stigma, and stereotypes.<sup>72</sup> Some Rock County residents are more likely to be treated poorly or lack needed social support based on their gender identity or sexual orientation. Nearly 60% of CHA Survey respondents who identify as lesbian, gay, or bisexual reported experiencing discrimination sometimes, often, or always in the community. Among respondents who identify as transgender or non-binary, 67% reported experiencing discrimination and 44% reported their mental health status as fair or poor. Additionally, only 22% of respondents who identify as transgender or non-binary indicated they felt like they belong in the community. When treated differently based on sexual orientation or gender identity, members of the LGBTQ+ community may be at a higher risk of poor mental health.



**Figure 25. CHA Survey Participants Self-Reported Feeling of Discrimination, Feeling of Belonging, and Mental Health Status by Gender Identity - 2021**

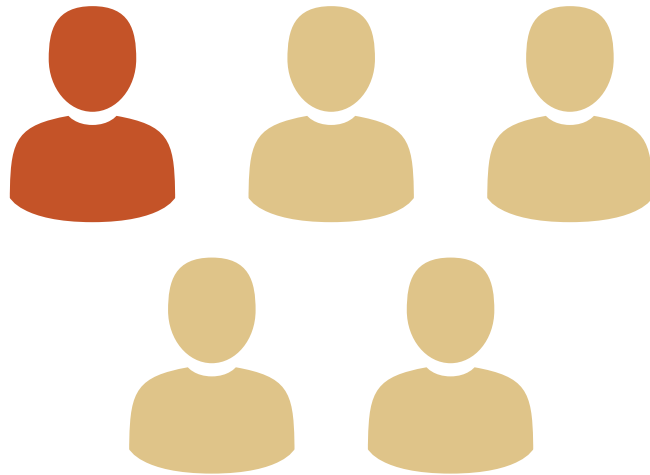
Despite concerns about mental health among participants in key informant interviews and Community Conversations, CHA Survey participants generally provided positive feedback on their mental health status. Over 75% of CHA Survey participants rated their mental health as excellent, very good or good. Only 3.88% of survey participants rated their mental health as poor. The majority of CHA Survey respondents also reported feeling a sense of belonging in their community. A sense of belonging is one of many factors that positively influences mental health.<sup>73</sup>

Many individuals who are diagnosed with mental health disorders also experience substance use disorders (SUD). It is estimated that upwards of half of people with mental illness also suffer from SUD. Common mental health issues that are highly associated with SUD include anxiety, depression, bipolar disorder, and attention deficit hyperactivity disorder (ADHD).<sup>74</sup> Those who experience mental illness and SUD are at higher risk of suicide or overdose.<sup>75</sup>

# Substance Use

Substance abuse refers to the excessive use of drugs or alcohol that causes significant harm to the individual. Substance abuse can include legal drugs, such as alcohol or prescription medications, and illegal drugs (i.e. heroin, methamphetamine, etc.).<sup>76</sup> Excessive drug or alcohol use can lead to social, emotional, and psychological problems among both the drug user and their family and friends.

Rock County residents have concerns that drug and alcohol use may be escalating throughout the County. Of particular concern is the increase in electronic cigarette (e-cigarette) use among teenagers and young adults. One in five Rock County high school students are currently using an e-cigarette product and nearly half have tried one.<sup>77</sup> Many Rock County students do not believe that e-cigarettes are harmful to their health. Almost 40% of Rock County students report that e-cigarette use has low or no risk to a person's health.<sup>77</sup> Unfortunately, e-cigarettes are not the only substance of concern in Rock County.



*Figure 26. Proportion of Rock County High School Students Using E-Cigarettes - 2019*

Binge drinking is often described as the most common, costly, and deadly pattern of excessive alcohol use in the U.S.<sup>78</sup> Binge drinking is commonly defined as drinking that bring a person's blood alcohol concentration to .08 g/dl or above through 5 drinks for men and 4 drinks for women in 2 hours.<sup>78</sup> Binge drinking is most common among adults age 25-34 with about 25% of this group reporting binge drinking in the previous 30 days.<sup>79</sup>

While binge drinking is more common in adults, teenagers also participate in risky drinking behaviors. Nationally, about 17% of high school students grades 9-12 reported binge drinking in the previous 30 days.<sup>78</sup> In Rock County, one in eight (12.5%) high school students reported binge drinking in this same time frame.<sup>77</sup> While Rock County's rates of binge drinking may not exceed national averages, Rock County residents are concerned that there is an alcohol culture in the region that promotes drinking.



*Figure 27. Proportion of Rock County High School Students Binge Drinking - 2019*

Despite extensive efforts to reduce the impact of opioids in Rock County, the opioid epidemic remains an issue. Similar to many regions throughout the country, Rock County has experienced increases in opioid-involved deaths in recent years. From 2010 to 2019, Rock County's opioid death rates more than tripled.<sup>80</sup>

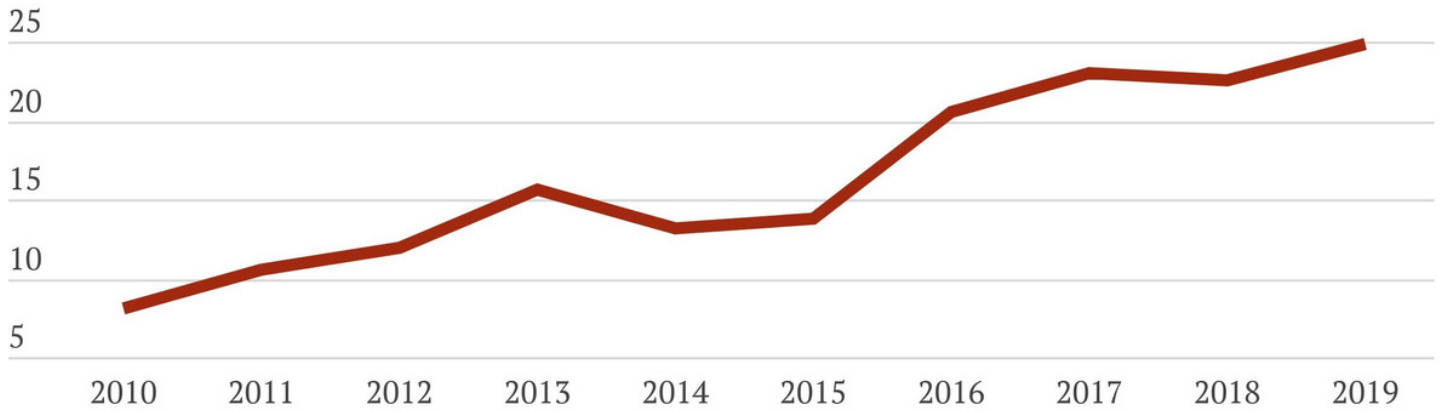


Figure 28. Opioid Overdose Death Rate per 100,000 Population in Rock County - 2010 to 2019

**Health Equity Spotlight**



People who identify as LGBTQ+ are at greater risk of social stigma, discrimination, harassment, and violence than those who identify as heterosexual-cisgender.<sup>81</sup> As a result, members of the LGBTQ+ community are at an increased risk of various behavioral health issues, including substance use.<sup>82</sup>

In Rock County, LGBT students reported binge drinking at higher rates than heterosexual-cisgender students.<sup>77</sup> Fifteen percent of LGBT students reported binge drinking in the previous 30 days.<sup>77</sup> In comparison, only 11% of heterosexual-cisgender students reported binge drinking in the same time frame.<sup>77</sup>

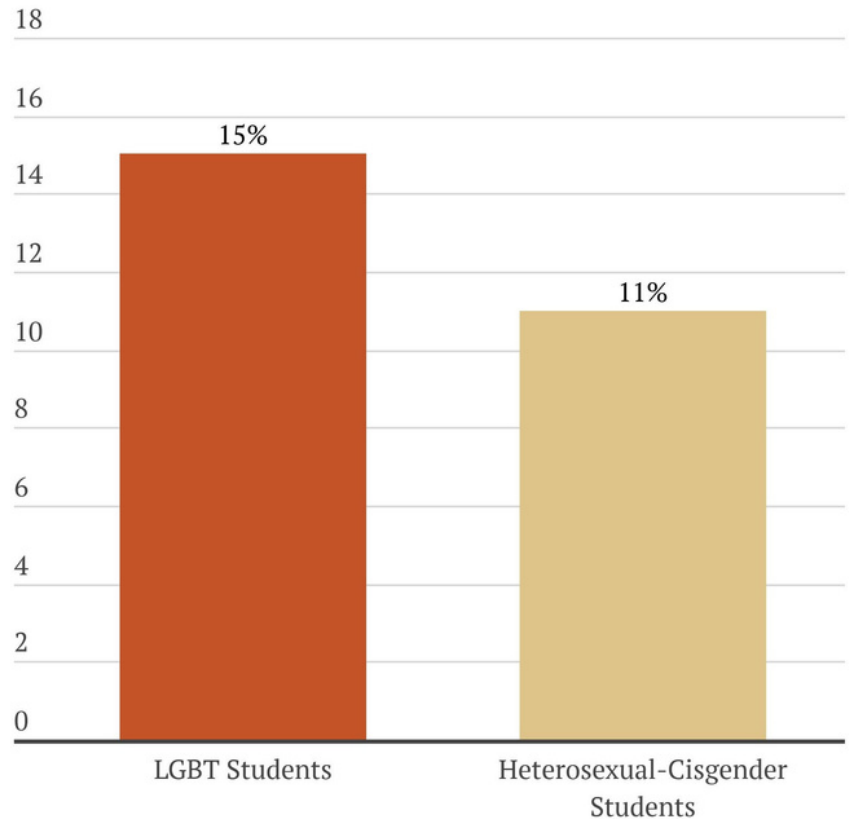


Figure 29. Percent of Rock County Students Binge Drinking by Sexual Orientation - 2019

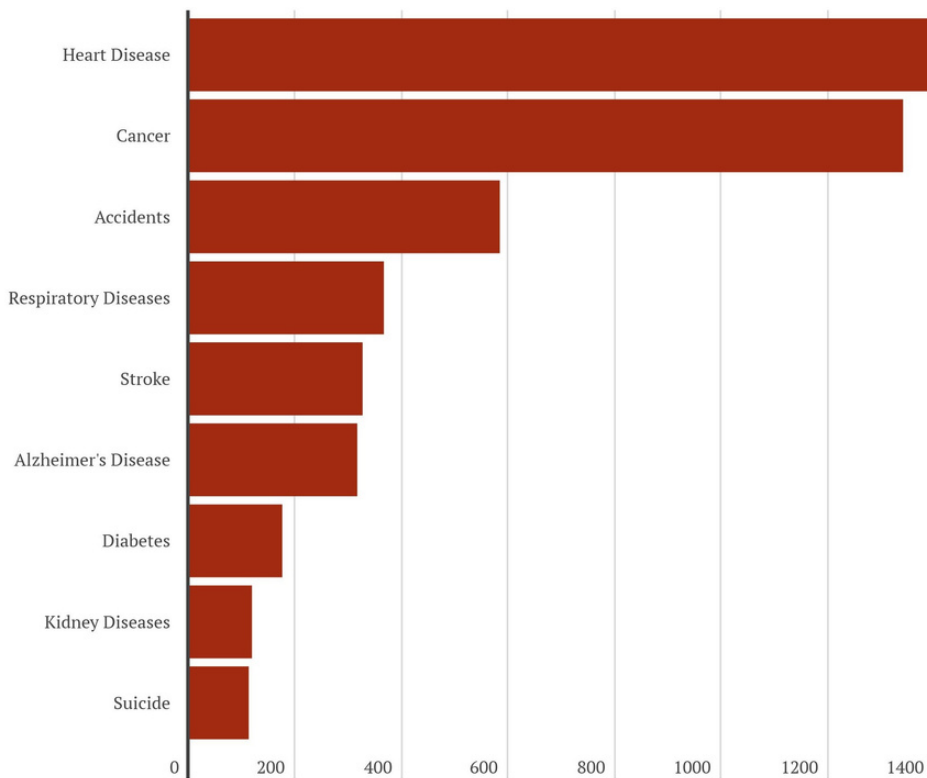


# Chronic Disease & Injury Prevention

Chronic diseases are persistent, long-lasting conditions that require ongoing medical attention and often negatively impact an individual's quality of life.<sup>83</sup> Many chronic diseases are caused by behaviors such as tobacco use, poor nutrition, lack of physical activity, and excessive alcohol use.<sup>83</sup> Major chronic diseases include cancer, heart disease, stroke (cerebrovascular disease), and diabetes. Currently, 60% of adults in the U.S. have at least one chronic disease and 40% have two or more.<sup>83</sup>

In the U.S, seven of the top ten leading causes of death are chronic diseases.<sup>84</sup> Rock County follows a similar trend in that seven of the County's top ten and four of the top five leading causes of death are chronic diseases.<sup>80</sup> The leading cause of death in Rock County from 2017-2020 was heart disease, followed by cancer, accidents (unintentional injuries), respiratory diseases, and strokes.<sup>80</sup>

Obesity is associated with many of the leading causes of death in Rock County including diabetes, heart disease, stroke, and some forms of cancer. Currently, 37% of Rock County adults are overweight or obese.<sup>38</sup> Among all Wisconsin counties, Rock County has the eighth highest rate of obesity. While many predisposing factors and behaviors can contribute to obesity, obesity is also driven by health disparities and inequities rooted in unemployment, access to care resources, and food insecurity.<sup>85,86</sup>



*Figure 30. Leading Causes of Death per 100,000 population in Rock County - 2017 to 2020*

Another top area of improvement identified in the CHA Survey was the need for improved access to affordable healthcare. Thirty-five percent of CHA Survey respondents indicated that access to affordable health care is a needed area of improvement in Rock County. Lack of health insurance and affordable care is associated with lower rates of preventive care, delays in necessary care, or lack of care altogether.<sup>87</sup> For those living with chronic disease(s), delays in care or a lack of care due to healthcare costs can lead to long-term disease and disability.<sup>87</sup>

While chronic diseases make up the majority of the leading causes of death in Rock County, injuries also play a role in contributing to mortality. Two of the top ten leading causes of death in Rock County are unintentional injuries and intentional self-harm.<sup>80</sup> Whether an injury is minor or life-threatening, it can cause significant trauma to an individual. Injuries are grouped into two categories: intentional and unintentional. Intentional injuries are generally less common than unintentional injuries and include domestic or intimate partner violence, sexual assault, and suicide.<sup>88</sup> Unintentional injuries can include falls, motor vehicle traffic deaths, poisoning, and drowning.<sup>89</sup> Intentional injuries are caused by purposeful human action while unintentional injuries are generally not sought out by the individual and not deliberate.<sup>88,89</sup>

Though unintentional injuries are more common than intentional injuries, Rock County residents frequently expressed concerns of violent crime spiking throughout the region. Violent crime includes intentional acts such as assault, domestic violence, or homicide.<sup>90</sup> Among Wisconsin counties, Rock County has the eighth highest violent crime rate at 231 violent crimes per 100,000 people.<sup>38,91</sup> Of particular concern among Rock County residents are domestic violence and abuse of youth and teenagers.

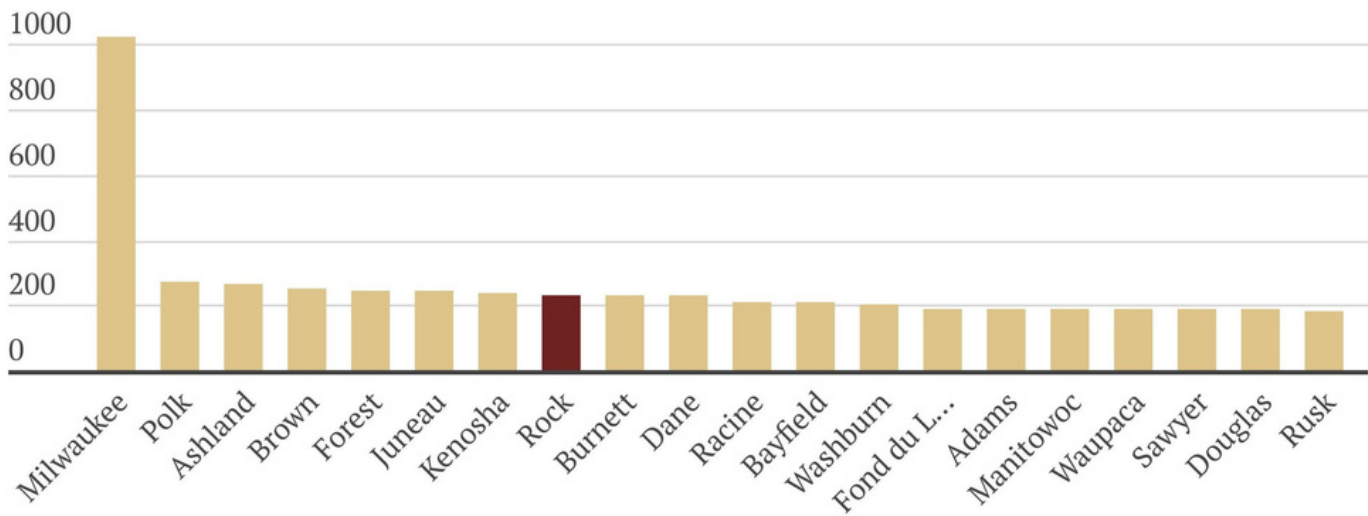


Figure 31. Violent Crime Rate per 100,000 Population by Wisconsin County - 2014 to 2016

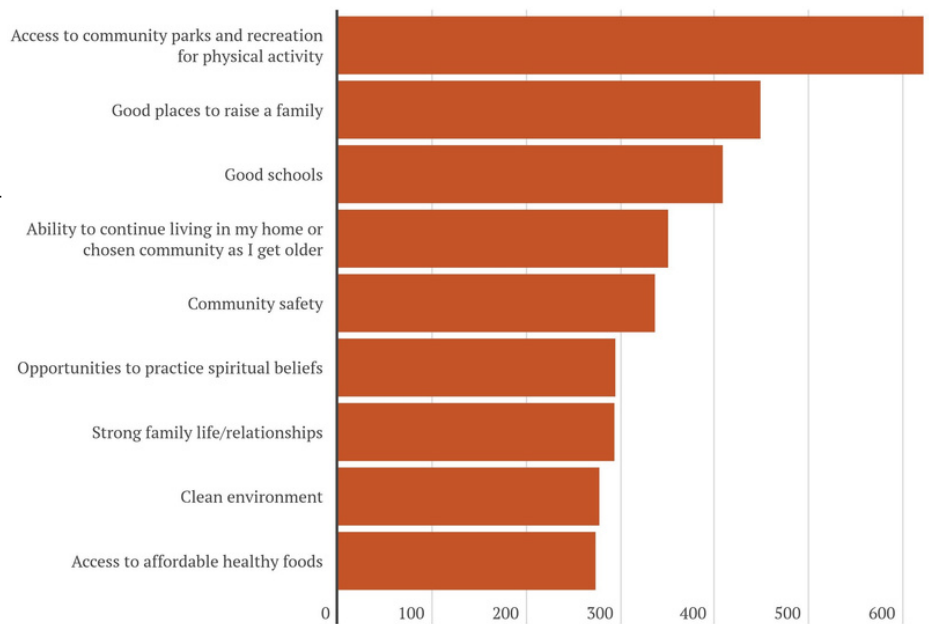
### Health Equity Spotlight



Years of potential life lost (YPLL) is an estimate of the average time a person would have lived if they had not died prematurely.<sup>92</sup> Historically, Black or African Americans have experienced more YPLL than White populations and other racial or ethnic groups in the U.S. due to inequities such as income, education, environmental hazards, or access to healthcare.<sup>93</sup> Among Rock County residents, Black or African Americans have a significantly higher YPLL at 13,300 YPLL per 100,000 people than White (7300 YPLL) and Hispanic and Latinx (3800 YPLL) populations.<sup>38</sup>

# Nutrition & Physical Activity

Quality nutrition and physical activity are widely viewed as essential health behaviors that can improve both physical and psychological health and well-being.<sup>94</sup> Physical activity is commonly defined as all movement for leisure, transport, work, or recreation and has numerous benefits that can help improve confidence, help maintain a healthy weight, and strengthen bones and muscles.<sup>95,96</sup> As one of the main risk factors for preventable chronic diseases, a lack of physical activity can contribute significantly to poor health outcomes.<sup>97</sup>

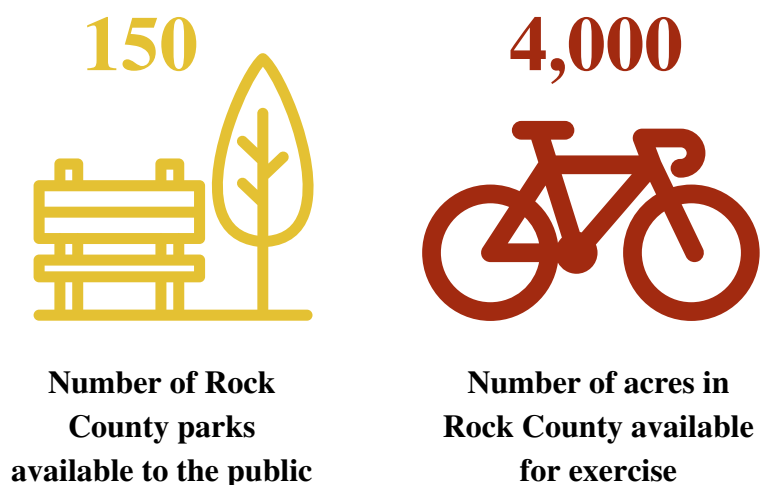


*Figure 32. Top Strengths of Rock County Identified by CHA Survey Participants*

Physical inactivity can increase the risk of developing chronic diseases such as cardiovascular disease, obesity, high blood pressure, and various cancers.<sup>97</sup> Many Rock County residents do not get the recommended levels of physical activity that can help prevent adverse health outcomes. Almost one in four Rock County adults and 20% of children do not engage in any level of physical activity.<sup>38</sup> In Wisconsin, only 55% of adults age 18 and older get the recommended level of physical activity and 35% exceed the recommended level.<sup>98</sup>

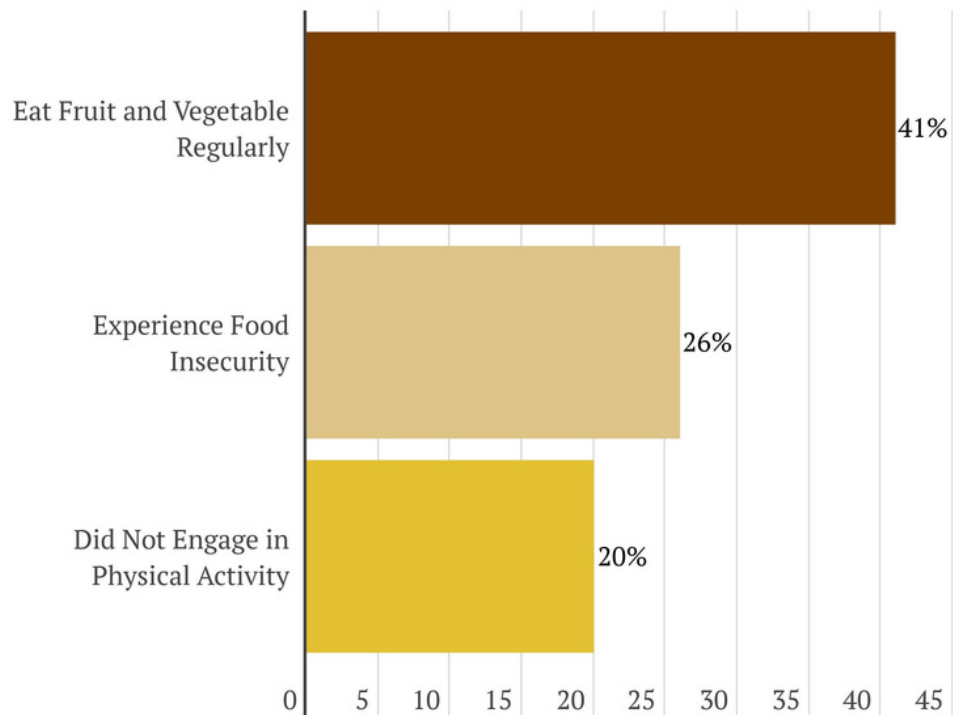
Personal and environmental barriers such as a lack of time, motivation, or access to recreation areas, can contribute to physical inactivity.<sup>99</sup> While many areas around Rock County struggle with low access to areas for exercise, Rock County residents identified access to parks and recreation locations as a top strength of the County. There are 150 parks and over 4,000 acres of space for exercise and recreation activities in Rock County.

Along with physical activity, nutrition also has a crucial impact on health and well-being. Generally, those who eat healthier tend to live longer and are at a lower risk for many chronic conditions including heart disease, type 2 diabetes, obesity, and cardiovascular disease.<sup>100</sup> Nationally, 40% and 21% of adults report consuming fruits and vegetables less than once daily, respectively.<sup>101</sup> Among Wisconsin adults, 39% report consuming fruits less than once daily, and 22% report consuming vegetables less than once daily.<sup>102</sup>



Developing healthy behaviors, such as healthy eating and regular exercise during adolescence and childhood, is important in promoting healthy habits later in life.<sup>103</sup> Only 24% of children age six to 17 get the current recommendation of 60 minutes of physical activity every day.<sup>104</sup> Among Wisconsin youth, physical inactivity and poor nutrition are of major concern. Only 41% of Wisconsin high school students eat fruit or vegetables regularly.<sup>77</sup> Additionally, 20% do not engage in regular physical activity, and over a quarter experience food insecurity.<sup>77</sup>

Access to healthy foods is a primary barrier to good nutrition. Food insecurity, or a lack of consistent access to enough food, affects nearly 37 million people in the U.S.<sup>105,106</sup> Rock County residents stressed the need for better access to affordable healthy foods on the CHA Survey. While many CHA Survey respondents reported having frequent access to healthy foods, 22% of participants reported that access to affordable healthy foods was still a top area of improvement for Rock County.



*Figure 33. Percent of Self-Reported Health Behaviors Among Wisconsin High School Students - 2019*

### Health Equity Spotlight



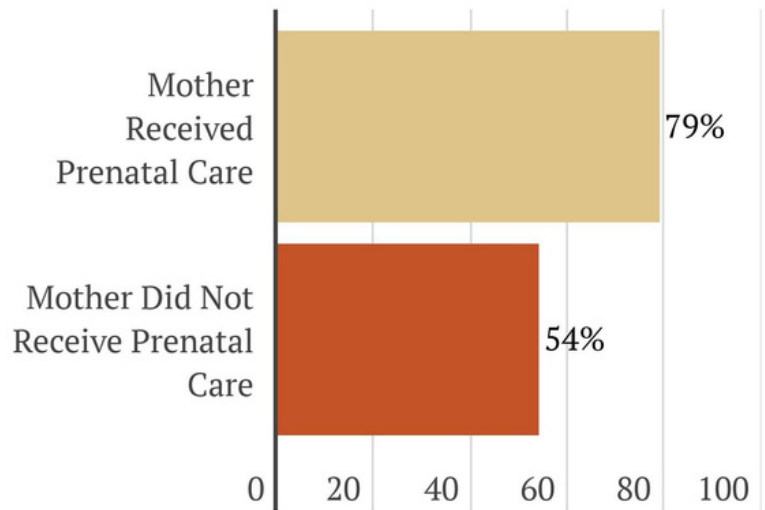
Food insecurity impacts people of all ethnicities and demographic backgrounds, however, some groups are more susceptible than others. Specifically, people of color have been disproportionately affected by food insecurity for decades as a result of structural racism and inequitable systems like housing, employment, earnings, credit, healthcare, and the criminal justice system.<sup>107</sup> From 2001 through 2016, Black or African American and Hispanic and Latinx households on average had at least twice the rate of food insecurity as compared to White households in the U.S.<sup>107</sup> American Indian and Alaska Native households experience similar trends in that 25% of American Indian and Alaska Natives households remain consistently food insecure and are twice as likely as White populations to remain food insecure in the U.S.<sup>107</sup>



# Maternal, Child, and Family Health

Maternal, Child, and Family Health focuses on the health of women, infants, and children before, during and after pregnancy.<sup>108</sup> Maternal, Child, and Family Health focuses on a variety of health topics including prenatal care, preterm birth, sudden infant death syndrome prevention, maternal mental health, childhood nutrition, adverse childhood experiences (ACEs), and infant and maternal mortality prevention.<sup>109</sup>

Prenatal care, or any care received while a woman is pregnant, can have a significant impact on both maternal and child health.<sup>110</sup> Prenatal care can help reduce the risk of pregnancy and birth complications, and also reduce the fetus's and infant's risk of various health conditions.<sup>110</sup> In the U.S., Infants whose mothers did not receive prenatal care are three times more likely to have a low birth weight and five times more likely to die in infancy.<sup>111</sup> Prenatal care may also have an effect on breastfeeding. In Rock County, mothers who received prenatal care were more likely to breastfeed than mothers who did not receive prenatal care.<sup>80</sup>

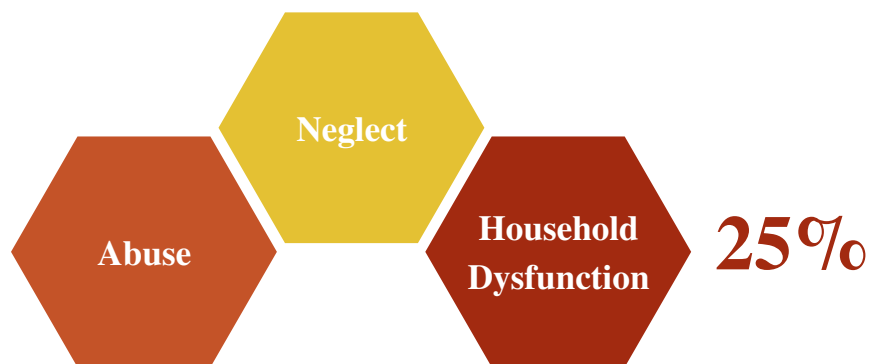


*Figure 34. Percent of Infants Breastfed Based on Maternal Receipt of Prenatal Care in Rock County - 2016 to 2020*

Adverse childhood experiences are potentially traumatic events that occur during childhood from ages 0-17.<sup>112</sup> ACEs include abuse (physical, emotional, and sexual), neglect (physical and emotional), and household dysfunction (substance abuse, divorce, domestic violence, incarceration and mental illness).<sup>112</sup> Generally, as the number of reported ACEs increases, the risk for mental, physical, and behavioral challenges later in life increases as well.<sup>113</sup> Recent estimates suggest that anywhere between 30-45% of children experience at least one ACE.<sup>114</sup> However, children of different races and ethnicities do not experience ACEs equally. Black or African American and Hispanic and Latinx children experience ACEs more frequently than average with 61% of Black or African American and 51% of Hispanic and Latinx children experiencing at least one ACE.<sup>114</sup>

Among all 72 Wisconsin counties, Rock County has the highest proportion of people reporting four or more ACEs at one in four people.<sup>115</sup>

ACEs were also a common theme seen throughout key informant interviews and Community Conversations with participants frequently expressing concerns about mental health, domestic abuse, child abuse, and substance abuse.



**Percent of Rock County Residents who Report Experiencing 4 or more ACEs**

Despite widespread quality medical care, the U.S. has alarmingly high rates of infant mortality. Infant mortality, or death of an infant before his or her first birthday, is an important indicator of the overall health of a community.<sup>116</sup> In 2018, almost 21,000 infants died in the U.S. as a result of birth defects, injuries, sudden infant death syndrome, and preterm birth or maternal pregnancy complications.<sup>116</sup> Rock County’s infant mortality rate is 4.2 deaths per 1,000 live births, significantly lower than Wisconsin and U.S. averages of 5.85, and 5.9, respectively.<sup>38,117,118</sup>

### Health Equity Spotlight



**Black or African American children are disproportionately impacted by poor pregnancy outcomes such as low birthweights and infant mortality as a result of lack of access to care, structural racism, and discrimination.<sup>119</sup> From 2014 to 2018, 14% of Black or African American babies born in Rock County were born at low birthweight, a severe risk factor for many health problems.<sup>38,117</sup>**

**Comparatively, only 7% of the Hispanic and Latinx and White babies born in Rock County during this same time frame were born at low birthweight. Black or African Americans also experience higher rates of infant mortality.<sup>38,117</sup> In Rock County, the Black or African American infant mortality rate from 2014 to 2018 was 16.8 per 1,000 live births, over double the rate of Rock County Hispanic and Latinx and White populations.<sup>80</sup>**

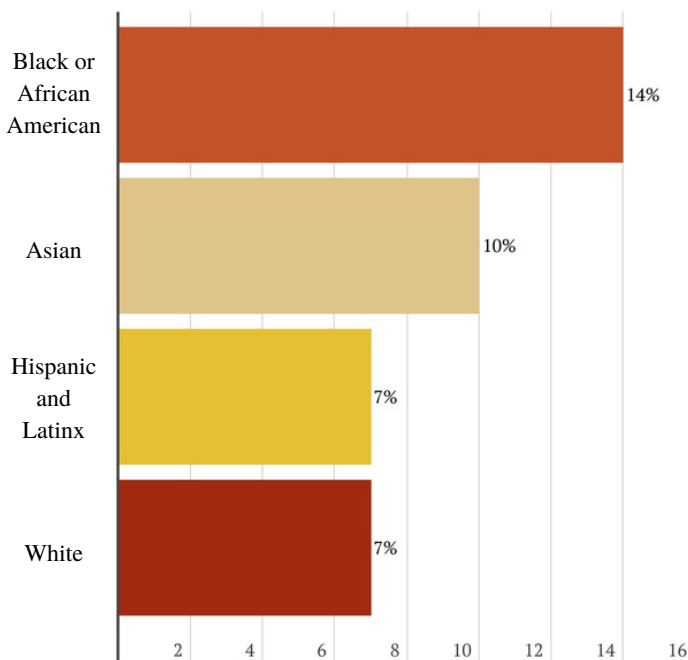


Figure 35. Rock County Low Birthweight Percentages by Race and Ethnicity - 2014 to 2018

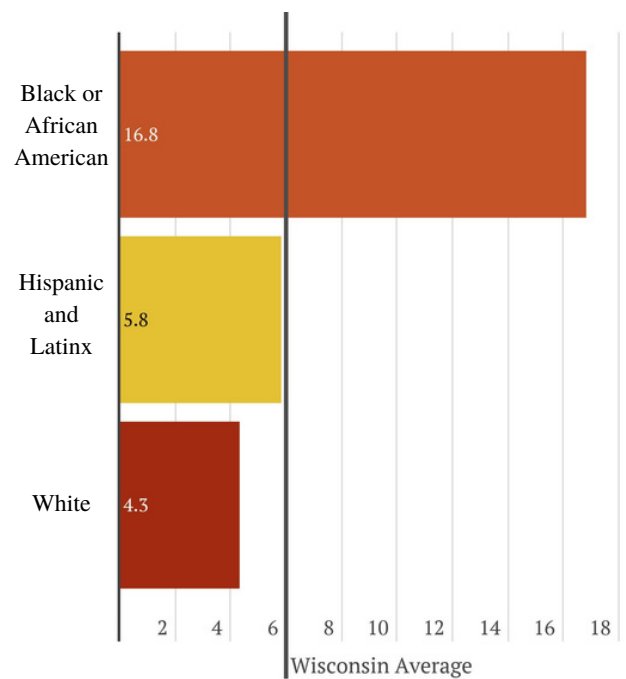


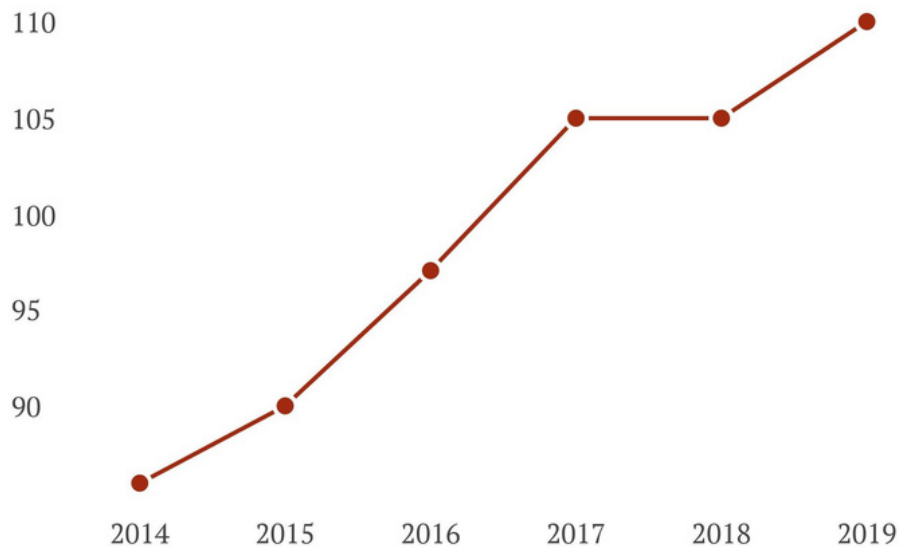
Figure 36. Rock County Infant Mortality Rates by Race and Ethnicity - 2014 to 2018

# Oral Health

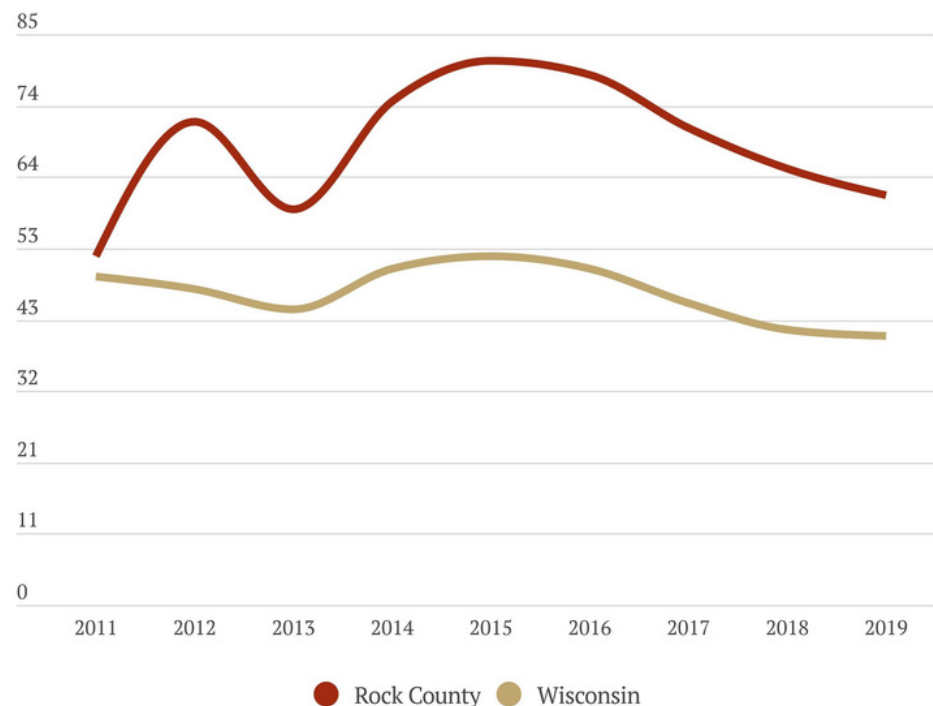
Oral health refers to the overall health of the teeth, gums, and the entire facial system that allows one to smile, speak and chew.<sup>120</sup> Common oral health conditions include cavities (tooth decay), gum disease, and oral cancer.<sup>120</sup> Oral health and overall health are often linked as many oral health diseases share risk factors with diseases such as cardiovascular disease, cancer, diabetes, and respiratory diseases.<sup>120</sup> Common risk factors for oral health diseases include alcohol consumption, tobacco use, and unhealthy diets with high sugars.<sup>120</sup>

Access to oral health services is a key component to maintaining oral health and is often measured by the number of dentists in a community. The number of dental providers in Rock County has increased significantly from 87 in 2014 to 111 in 2019.<sup>38</sup> However, some members of the community report that access to dental care is still very limited. Common barriers to receiving dental care include a shortage of dentists, low health literacy, financial hardships, and lack of insurance coverage.<sup>121</sup>

Rock County also has high rates of emergency department visits for oral health issues, potentially indicating a lack of regular access to dental services among Rock County residents. When compared to Wisconsin, Rock County averages over 20 more emergency department visits per 10,000 people for non-traumatic oral health issues.<sup>122</sup>



**Figure 37. Number of Dental Providers in Rock County - 2014 to 2019**



**Figure 38. Rate of Emergency Department Visits for Oral Health Issues in Rock County per 10,000 people - 2021**

Health Equity Spotlight



In Rock County, adults age 65 or older reported a lack of dental insurance at a higher percentage than their younger counterparts. Of the CHA Survey respondents, 38% of residents age 65 and older reported not having dental insurance. Comparatively, only 10% of CHA Survey respondents under age 65 reported not having dental insurance. Nationally, many older adults age 65 or older do not have dental insurance as a result of losing coverage after retiring and a lack of coverage under Medicare.<sup>123</sup> Currently, Medicare does not cover most dental care or dental procedures, leaving many older adults without access to affordable dental services.<sup>124</sup>

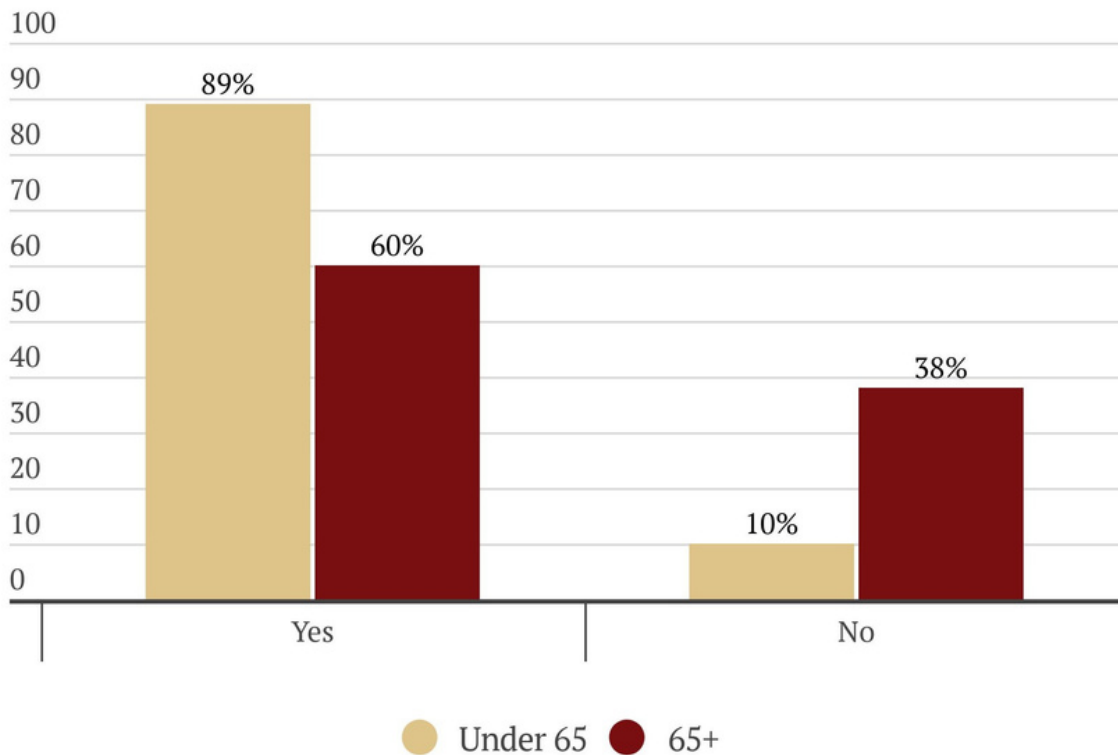


Figure 39. Percent of CHA Survey Participants with Dental Insurance by Age Group - 2021

Though a majority (85%) of CHA Survey respondents reported having dental insurance, community members still expressed concerns about dental coverage access due to insurance coverage. Specifically, for those with Badger Care, a health care coverage program for low-income Wisconsin residents, dental providers throughout Rock County may not accept their coverage due to low reimbursement rates.<sup>125</sup>

While access to affordable dental services may be limited in Rock County, the Wisconsin Department of Health Services is working to promote and improve oral health for Rock County and all of Wisconsin’s citizens through the Oral Health Program. The Oral Health Program aims to increase oral health resources throughout the state through policy development, technical assistance, needs assessments, training, and education.<sup>126</sup> Currently, there are two free or low-cost dental clinics in Rock County in Beloit and Janesville.<sup>126</sup>

# Reproductive Health

Reproductive and sexual health is a crucial component of health and well-being for both men and women. Reproductive and sexual health encompasses a variety of topics including sexually transmitted infections (STIs), pregnancy, and contraception.<sup>127</sup> Improving reproductive and sexual health can help improve maternal, child, and family health outcomes, address longstanding health disparities, and reduce rates of infectious disease and infertility.<sup>127</sup>

A STI is an infection passed from one person to another through sexual contact.<sup>128</sup> Among the most common STIs in the U.S. is chlamydia. There were over 1.8 million cases of reported chlamydia in 2019 in the U.S. Chlamydia is also the most common STI in Rock County.<sup>129</sup> Rock County ranks fourth highest in the number of new chlamydia cases diagnosed per 100,000 people among all Wisconsin counties.<sup>38</sup> Chlamydia can be easily prevented and treated. However, if left untreated, chlamydia can cause serious and permanent damage to a woman's reproductive system.<sup>130</sup>

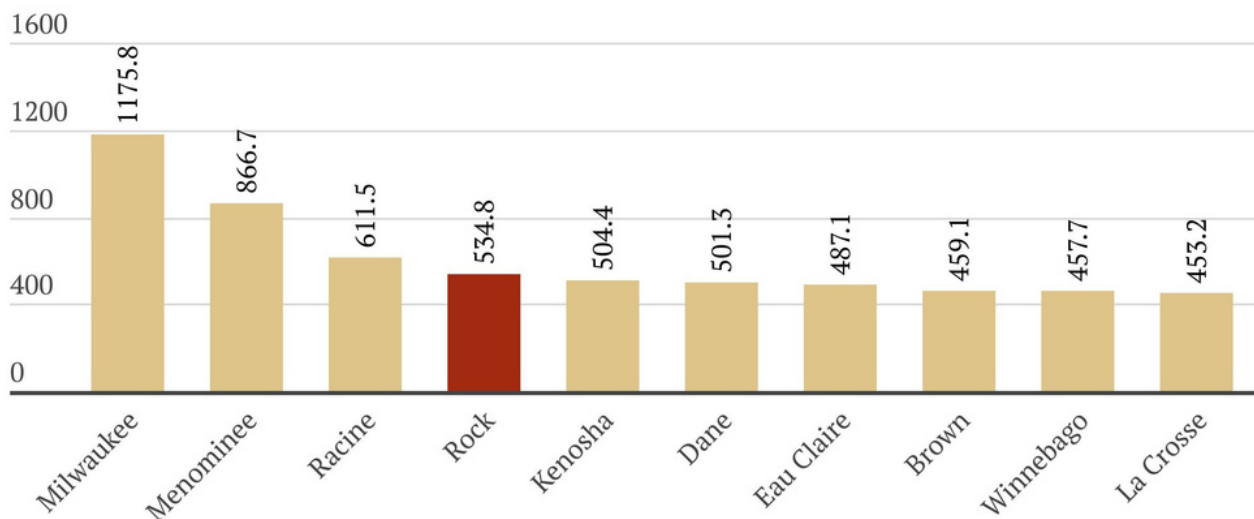



Figure 40. Rate of New Chlamydia Infections Per 100,000 Population by Wisconsin County - 2018


Transmission of STIs is driven by unprotected sex and other high-risk sexual behaviors such as having sexual intercourse with multiple partners, or engaging in sexual intercourse while under the influence of a substance (e.g. alcohol, legal or illicit drugs).<sup>131</sup> While STIs impact every age group and race and ethnicity, STI rates among youth and adolescent populations is of particular concern. Youth and adolescent populations are more likely to engage in high-risk sexual behavior and are less likely to access sexual health services.<sup>132</sup> Among Rock County high school students who reported being sexually active, about half reported condom use and 10% reported using no form of birth control.<sup>77</sup>

**50%**



**Percent of Rock County high school students using condoms**

**10%**



**Percent of Rock County high school students who do not use birth control**

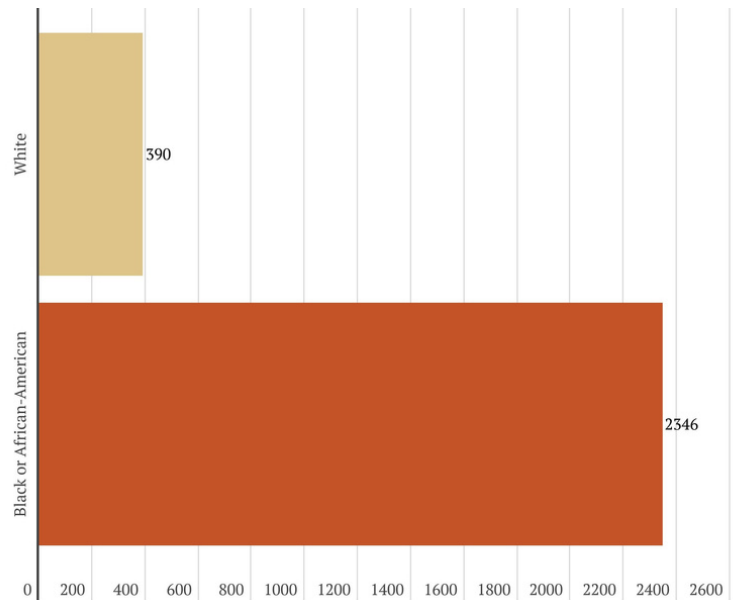


**Health Equity Spotlight**



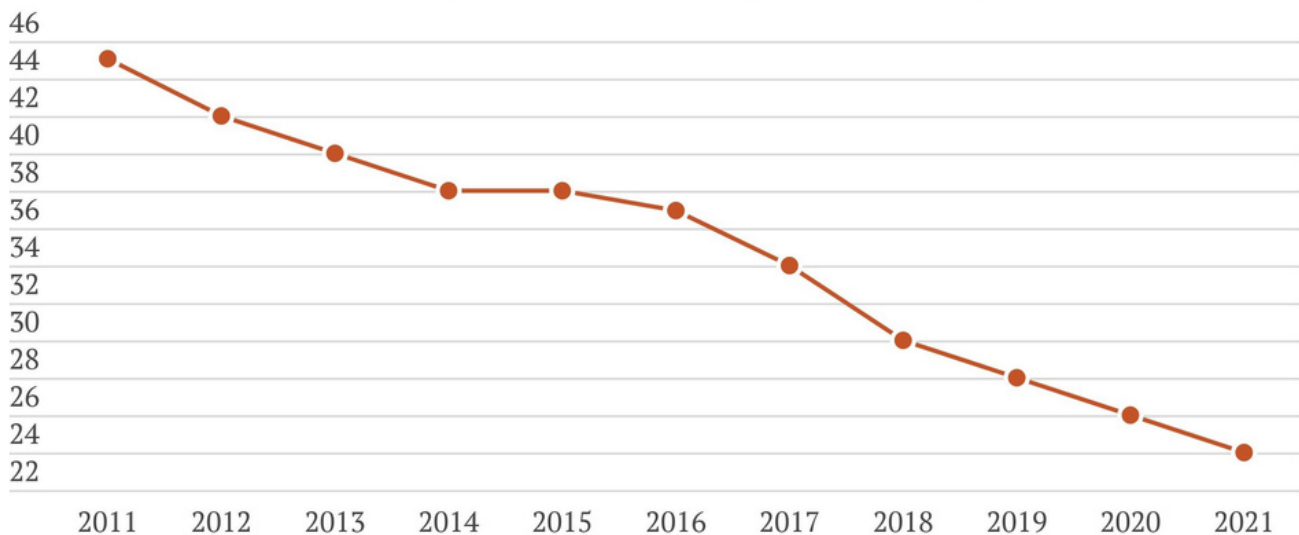
**Inequities in access to reproductive health care services, robust sexual education, and birth control/contraceptive availability drive disparities in reproductive health outcomes.<sup>133</sup>**

**Communities of color, those who live in poverty, and those who identify as LGBTQ+ are disproportionately impacted by negative reproductive health outcomes such as STIs.<sup>133,134</sup> In Rock County, Black or African Americans have higher rates of chlamydia as a result of the previously listed health inequities.<sup>135</sup>**



*Figure 41. Rate of New Chlamydia Infections per 100,000 People in Rock County by Race - 2019*

Teenage pregnancy, or any pregnancy that occurs for a woman under the age of 20, can have severe consequences for both the mother and the child.<sup>136</sup> Children born to teenage mothers are more likely to be born pre-term, have lower birth weight, and experience higher newborn mortality.<sup>136</sup> Additionally, teenage mothers often experience higher rates of post-partum depression and are less likely to initiate breastfeeding.<sup>136</sup> Rock County’s teen birth rate has fallen significantly for over a decade from 44 births per 1,000 females ages 15-19 in 2011 to 24 births per 1,000 females in 2021.<sup>38</sup> However, Rock County currently has the sixth highest teen pregnancy rate in Wisconsin.<sup>38</sup> It is important to note that disparities among teen pregnancy are also prevalent among different racial or ethnic groups. In particular, birth rates among Hispanic and Latinx teens and Black or African American teens are more than two times higher than White teen rates.<sup>137</sup>



*Figure 42. Birth Rate per 1,000 Female Population Ages 15-19 in Rock County - 2011 to 2021*

# Environmental Health Hazards

Environmental health refers to human health and well-being that is impacted by the environment.<sup>138</sup> The environment encompasses the air people breathe, all consumable foods and water, and the places where people live, work and play.<sup>138</sup> Environmental hazards include air contaminants, radiation, pesticides, toxic waste, extreme temperatures or weather events, and disease-causing microorganisms.<sup>138</sup> Environmental pollutants can cause many health problems such as respiratory diseases, heart disease, and various types of cancer.<sup>139</sup> Monitoring key environmental pollutants is crucial in protecting the public from adverse environmental health effects.

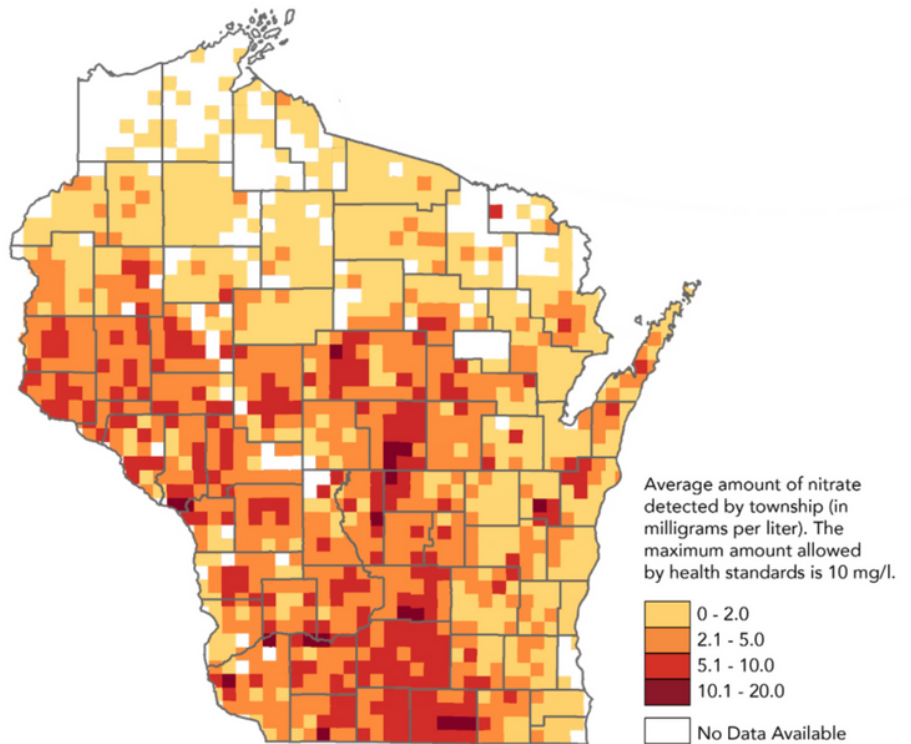
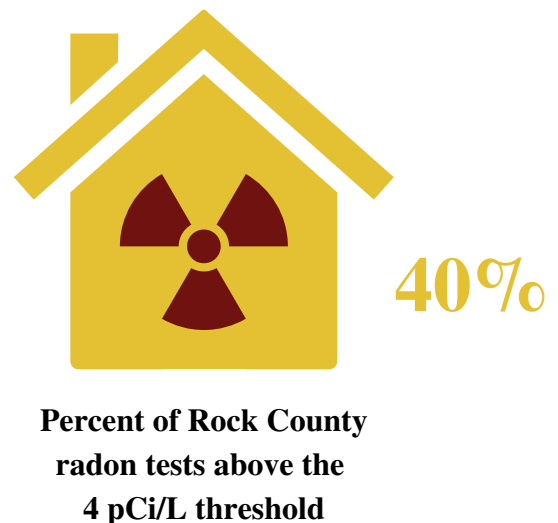


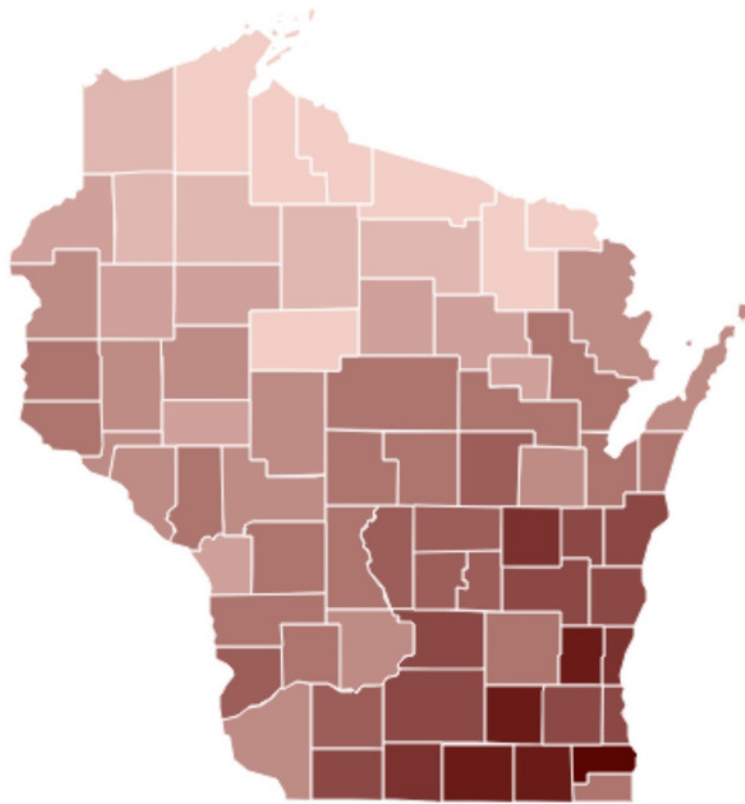
Figure 43. Nitrate in Wisconsin Drinking Water by County - 2013

Nitrate, an environmental pollutant commonly found in drinking water, is a naturally formed compound that can be dangerous in high levels.<sup>140</sup> Nitrate is typically found in surface or groundwater, and a variety of vegetables at levels that do not generally cause health problems.<sup>140</sup> However, nitrate frequently contaminates private wells as a result of improper well construction, well location, overuse of chemical fertilizers, or improper disposal of human and animal waste.<sup>140</sup> In Rock County, private wells are a common source of drinking water for residents and many of the wells throughout the County contain high levels of nitrate.<sup>141</sup>

Another environmental pollutant of particular concern in Rock County is radon. Radon is a colorless, tasteless and odorless gas that is the leading cause of lung cancer among non-smokers.<sup>142,143</sup> Radon is generally found in soil and air, but can also be found in certain building materials, and water.<sup>142</sup> The average indoor radon level in the U.S. is estimated to be 1.3 picocuries per liter or pCi/L.<sup>144</sup> While any level of radon poses some health risks, it is highly recommended that mitigation strategies are implemented at levels of 4 pCi/L and higher.<sup>144</sup> Rock County has high percentages of radon tests with results above the 4 pCi/L threshold. In 2020, 40% of radon test results in Rock County were over the threshold, while only 35% of Wisconsin's tests yielded similar results.<sup>145</sup>



Rock County also has high levels of air pollution. A common indicator of air quality is the presence of fine particulate matter (PM).<sup>146</sup> Particulate matter is a mixture of microscopic solids and liquids found in the air that can cause serious health problems when inhaled.<sup>146</sup> Both short and long-term exposure to air pollution can cause a variety of adverse health outcomes including respiratory infections, heart disease and lung cancer.<sup>147</sup> Rock County currently has the third highest daily average PM level in Wisconsin, leading to poorer air quality than most counties in Wisconsin.<sup>38</sup>



Good Air Quality

Bad Air Quality

Figure 44. Air Pollution Levels in Wisconsin by County - 2021

### Health Equity Spotlight



Children from low-income households are at an increased risk of lead exposure.<sup>148</sup> Exposures to lead during childhood can have harmful effects on a child's development that often have long lasting impacts. Lead poisoning in children has been linked to brain and nervous system damage, slowed growth and development, learning and behavior problems, and hearing and speech problems.

While Rock County has seen decreases in the rates of children who test positive for lead poisoning in recent years, the County still sees relatively high rates compared to the Wisconsin average of about one in 30 (3.3%) children. About one in 14 (7.5%) Rock County children age zero to six test positive for lead poisoning, the fifth highest rate throughout Wisconsin.<sup>122</sup>



# Community Assets and Resources

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While the prior pages have highlighted health topics of concern in Rock County, it is also important to mention Rock County's assets and resources that can be mobilized to address health concerns and support community health and wellness needs. With four hospitals, several health systems, a Federally Qualified Health Center and a Free & Charitable Clinic, Rock County has the medical capacity to meet the healthcare needs of most of its citizens. Additionally, health insurance is available through some employers, the ACA Marketplace, Medicare and multiple Medicaid programs.

For those in need of mental health care or substance abuse services, Rock County has many options for treatment and support. Locally, many residents have access to mental health and substance abuse counseling providers, peer support specialists, recovery programs and support groups, recovery housing, Rock County Human Services programming, and Medication Assisted Treatment (MAT) providers. Rock County also has several prevention coalitions working to address youth mental health and substance abuse. Other support for youth includes Rock County school counselors, social workers, faith groups and other youth group leaders.

Along with healthcare resources, Rock County also has many public recreational areas such as public parks with access to picnic tables, fire pits, grills and other amenities. There are also trails throughout the County including the Ice Age Trail, part of a National Scenic Trail located entirely within Wisconsin. Additionally, Rock County residents are able to rent recreational equipment throughout the year to access cross-country skiing, various lakes, and baseball diamonds.

Rock County strives to be inclusive for all ages, ethnicities, and identities. The County has many nonprofit organizations working to support various groups including youth and seniors, the LGBTQ+ community, and different races and ethnicities. Rock County's nonprofit sector addresses a variety of concerns including social welfare, chronic disease, substance use education, veterans, and youth services.



# Conclusion & Next Steps

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Through collaboration with over 100 individuals representing diverse sectors of the community, this Community Health Assessment has led to the identification of two health priorities: Mental Health and Access to Care.

This report will be maintained throughout the development and implementation of the CHIP to ensure current data and health trends are driving decision-making related to the allocation of resources to improve the health of Rock County. The frequency of updating the data will be dependent upon the secondary data sources utilized to inform this report. Generally, secondary data is updated on different schedules depending on the entity responsible for the collection and analysis of the data. As information sources are updated, the new data will be analyzed and incorporated to supplement this assessment. At a minimum, an annual review of secondary data sources will be conducted to determine if there have been changes. Additionally, as CHA priorities are selected and work begins on the CHIP, data will be collected to measure progress on reaching the goals and objectives of the plan.

This report has captured the various CHA processes and the information generated at each step which will be used to inform CHIP implementation. The CHIP offers the opportunity for community partners to collaborate and make meaningful improvements in access to care and mental health for all of Rock County.

## Contact Us

Please email [HEARCoordinator@co.rock.wi.us](mailto:HEARCoordinator@co.rock.wi.us) with any questions about Rock County's 2021 Community Health Assessment.



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Term	Definition
Cisgender	Denoting or relating to a person whose sense of personal identity and gender corresponds with their birth sex
Health	A state of complete physical, mental, and social well-being and not merely the absence of disease
Health Disparities	Differences in health status and mortality rates across population groups, which can sometimes be expected, such as cancer rates in the elderly versus children
Health Inequities	Differences in health status and mortality rates across population groups that are systemic, avoidable, unfair, unjust, and rooted in past and current policies and systems
Implicit Bias	A bias or prejudice that is present but not consciously held or recognized
Picocurie	Common unit for measuring amount of radioactivity
Postpartum	The period that begins following childbirth
Primary Data	Data that is collected through interviews, surveys, and experiments
Qualitative Data	Data that concerns subjective characteristics and opinions – things that cannot be expressed as a number
Quantitative Data	Data that can be counted, measured, and expressed using numbers
Racism	Prejudice or discrimination directed against a person or people (interpersonal) on basis of their membership in a particular racial or ethnic group, typically one that is a minority or marginalized
Redlining	Unethical and unlawful discriminatory practice of systematic denial of services to a certain race or ethnic group
Secondary Data	Data that has already been collected through primary sources and made readily available for use
Structural Racism	A system in which public policies, institutional practices, cultural representations, and other norms work in various ways to perpetuate racial group inequity

# Rock County Community Health Survey

Where you live is an important part of your health. What are your thoughts about the health of your community?

The Health Equity Alliance of Rock County (HEAR) wants to hear from you about what is going well in your community and what needs improvement. Your response to this survey will help us develop local solutions for health issues that you believe are important. The survey will take about 10 minutes to complete. All responses will be confidential and anonymous. We will only share combined results from the survey.

This year's survey has a special focus on addressing the social determinants of health (SDoH). These are the conditions in which people are born, grow, live, work and age that shape health. Social determinants of health include factors like income/financial status, education, neighborhood and physical environment, employment, and social support networks, as well as access to health care. Addressing social determinants of health is important for improving health outcomes and reducing longstanding health problems in our communities.

For more information about Social Determinants of Health please visit the following website:  
<https://www.healthypeople.gov/2020/topics-objectives/topic/social-determinants-of-health>

Thank you for your participation!



\*Required

Think about your community: where you live, learn, work, and play.

The questions in this section help us better understand which Social Determinants of Health are affecting our communities in Rock County.

1. Please choose the best response to reflect your opinion.\*

	Strongly Agree	Agree	Neither Agree Nor Disagree	Disagree	Strongly Disagree	Not Applicable or Not Sure
I am friendly with most of my neighbors.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
There are places for people like me to gather in my community (such as places of worship, community centers, events, libraries and/or parks).	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I feel safe in my community.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Children in my community have access to high quality education.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
There are enough safe and affordable houses and apartments in my community.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Strongly Agree    Agree    Neither Agree  
Nor Disagree    Disagree    Strongly Disagree    Not Applicable  
or Not Sure

I feel like I belong in my community.

I trust the public service providers in my community such as public health, law enforcement and emergency services.

Decisions for the community are made with resident participation.

My community has enough good-paying jobs.

My community is a good place to raise children.

2. My household has transportation that we can depend on to meet our daily needs. This may include a car or truck, bike, bus, taxi, etc.\*

- Always             Rarely
- Often                 Never
- Sometimes

3. Everyone in my household can get the health services we want and need including physical, mental and dental health services.\*

- Always             Rarely  
 Often               Never  
 Sometimes

4. What types of health services are difficult to get for your household members?

- Dental Health Services  
 Mental Health Services  
 Physical Health Services

5. Why is getting these health services a challenge for your household members? Please select all that apply.

- Healthcare services are too expensive and/or the deductible or copay is too high.  
 Healthcare providers do not accept my health insurance.  
 I do not have health insurance.  
 We can't get an appointment an/or waitlists are too long.  
 We don't feel welcome.  
 We don't know how to find the healthcare providers we need.  
 We have language and/or cultural barriers.  
 We have schedule problems (when we are available, healthcare services are closed).  
 We have transportation problems.  
 Other \_\_\_\_\_

6. I can get healthy food for my family.\*

- Always             Rarely  
 Often               Never  
 Sometimes

7. Why is getting healthy food a challenge for you? Please select all that apply.

- Food pantries and other sources of free food are not available in my community.
- Healthy food is not available in my community.
- Healthy food is too expensive in my community.
- I don't have the time to buy or prepare healthy food.
- I don't know how to find food pantries and other sources of free food.
- I have schedule problems in accessing stores with healthy foods.
- I have transportation problems.
- The store I go to does not take EBT/QUEST/FoodShare.
- The store I go to does not take WIC.
- Other \_\_\_\_\_

8. I or someone in my household experiences discrimination in my community.\*

- Always                       Rarely
- Often                               Never
- Sometimes

9. What types of discrimination have you or your household members experiences in your community?  
Please select all that apply.

- Age
- Citizenship Status
- Criminal Justice Background
- Disability Status
- Gender
- Income or Socioeconomic Status
- Place of Birth
- Race
- Religion
- Sexual Orientation
- Skin Color
- Other \_\_\_\_\_

10. In what situations have you or your household members experienced discrimination in your community?

- |  |   |
|--|---|
| <input type="checkbox"/> At a place of worship                           | <input type="checkbox"/> When interacting with government agencies        |
| <input type="checkbox"/> At school                                       | <input type="checkbox"/> When interacting with law enforcement            |
| <input type="checkbox"/> At work   | <input type="checkbox"/> When looking for housing to rent or buy          |
| <input type="checkbox"/> In my home                                      | <input type="checkbox"/> When receiving healthcare services               |
| <input type="checkbox"/> In public places such as parks, libraries, etc. | <input type="checkbox"/> When shopping at stores or eating at restaurants |
| <input type="checkbox"/> When applying for a job                         | <input type="checkbox"/> Other _____                                      |

11. What do you think are the top FIVE STRENGTHS of your community right now?\*

*Please choose only 5 responses and select the ones you believe your community is doing really well.*

- |   |   |
|---|---|
| <input type="checkbox"/> Ability to continue living in my home or chosen community as I get older       | <input type="checkbox"/> Community safety   |
| <input type="checkbox"/> Access to dental care  | <input type="checkbox"/> Community spaces such as businesses, parks and schools are inclusive to people of all identities |
| <input type="checkbox"/> Access to mental health services   | <input type="checkbox"/> Good paying jobs and strong economy  |
| <input type="checkbox"/> Access to affordable health care   | <input type="checkbox"/> Good places to raise a family  |
| <input type="checkbox"/> Access to affordable healthy foods   | <input type="checkbox"/> Good schools   |
| <input type="checkbox"/> Access to affordable housing   | <input type="checkbox"/> Opportunities to practice spiritual beliefs  |
| <input type="checkbox"/> Access to affordable transportation  | <input type="checkbox"/> Racial and ethnic diversity  |
| <input type="checkbox"/> Access to community parks and other recreation locations for physical activity | <input type="checkbox"/> Sense of belonging   |
| <input type="checkbox"/> Clean environment  | <input type="checkbox"/> Strong family life/relationships   |
| <input type="checkbox"/> Community events   | <input type="checkbox"/> Other _____  |



12. What do you think are the top FIVE AREAS FOR IMPROVEMENT in your community?\*

*Please choose only 5 responses and select the ones you believe your community needs to be doing better or should be focusing on. Your response to this question will help us determine what health priorities will be in Rock County over the next few years.*

- |   |   |
|---|---|
| <input type="checkbox"/> Ability to continue living in my home or chosen community as I get older       | <input type="checkbox"/> Community safety   |
| <input type="checkbox"/> Access to dental care  | <input type="checkbox"/> Community spaces such as businesses, parks and schools are inclusive to people of all identities |
| <input type="checkbox"/> Access to mental health services   | <input type="checkbox"/> Good paying jobs and strong economy  |
| <input type="checkbox"/> Access to affordable health care   | <input type="checkbox"/> Good places to raise a family  |
| <input type="checkbox"/> Access to affordable healthy foods   | <input type="checkbox"/> Good schools   |
| <input type="checkbox"/> Access to affordable housing   | <input type="checkbox"/> Opportunities to practice spiritual beliefs  |
| <input type="checkbox"/> Access to affordable transportation  | <input type="checkbox"/> Racial and ethnic diversity  |
| <input type="checkbox"/> Access to community parks and other recreation locations for physical activity | <input type="checkbox"/> Sense of belonging   |
| <input type="checkbox"/> Clean environment  | <input type="checkbox"/> Strong family life/relationships   |
| <input type="checkbox"/> Community events   | <input type="checkbox"/> Other _____  |

13. In your opinion, what would make your community a healthier place to live, work and play?

*Enter your answer*

Now we will ask a little more about you.

The following questions help us better understand our community members. You may choose not to answer any questions and all responses will be confidential and anonymous. We will only share combined results.

14. Would you say that, in general, your health is:

- Excellent       Fair  
 Very good       Poor  
 Good

15. Thinking about your mental health, which includes stress, depression, anxiety, and problems with emotions, how would you rate your mental health?

- Excellent       Fair  
 Very good       Poor  
 Good

16. Do you currently have health insurance?

- Yes  
 No

17. Do you currently have dental insurance?

- Yes  
 No

18. What is your gender?

*Examples: male, female, non-binary, transgender*

*Enter your answer*

19. What is your sexual orientation?

*Examples: lesbian, gay, heterosexual/straight, bisexual, asexual*

*Enter your answer*

20. With which categories do you identify? (choose all that apply)

- |   |  |
|---|--|
| <input type="checkbox"/> African American or Black        | <input type="checkbox"/> Native Hawaiian or other Pacific Islander |
| <input type="checkbox"/> American Indian or Alaska Native | <input type="checkbox"/> Southeast Asian                           |
| <input type="checkbox"/> Asian Indian                     | <input type="checkbox"/> White                                     |
| <input type="checkbox"/> East Asian                       | <input type="checkbox"/> A category not listed                     |
| <input type="checkbox"/> Hispanic or Latinx               | <input type="checkbox"/> Other _____                               |
| <input type="checkbox"/> Middle Eastern or North African  |  |

21. What languages do you speak at home?

<i>Enter your answer</i>
--------------------------

22. What is your age group?

- |                                   |                                |
|-----------------------------------|--------------------------------|
| <input type="checkbox"/> Under 18 | <input type="checkbox"/> 45-54 |
| <input type="checkbox"/> 18-24    | <input type="checkbox"/> 55-64 |
| <input type="checkbox"/> 25-34    | <input type="checkbox"/> 65-74 |
| <input type="checkbox"/> 35-44    | <input type="checkbox"/> 75+   |

23. What is the highest grade or year of school you completed?

- |  |   |
|--|---|
| <input type="radio"/> Less than 9th grade              | <input type="radio"/> Some college credit, no degree  |
| <input type="radio"/> 9-12 grade, no diploma           | <input type="radio"/> Associate's Degree              |
| <input type="radio"/> High School graduate or GED      | <input type="radio"/> Bachelor's Degree               |
| <input type="radio"/> Trade/Technical Training Program | <input type="radio"/> Graduate or Professional Degree |

24. What is your employment status? (choose all that apply)

- Employed, full-time (includes self-employed)  Student
- Employed, part-time (includes self-employed)  Retired
- Out of work for more than 1 year  Veteran
- Out of work for less than 1 year  Unable to work
- Caregiver

25. How would you describe your current financial situation? (choose all that apply)

- I don't have enough money to pay the bills to meet household needs.
- Money is a major stressor in my life.
- I live paycheck to paycheck.
- I am financially secure and meet my and my family's needs.
- I have enough money to live comfortably without stress.

26. Do you consider yourself to be a person with a disability?

- Yes
- No

27. Please select any type of disabilities that apply to you:

- Autism
- Hearing
- Intellectual/Developmental/Cognitive
- Mental Health
- Speech
- Vision
- A disability not listed
- Other \_\_\_\_\_

28. How many adults (age 18 and over) live in your household?

- 1
- 2
- 3
- 4
- 5
- More than 5

29. How many children under the age of 18 live in your household?

- 0
- 1
- 2
- 3
- 4
- 5
- More than 5

30. What is your zip code in Rock County?

*Enter your answer*

31. Is there anything else you would like to share that was not covered on this survey?

*Enter your answer*



# Community Conversations Questionnaire

**Have you heard of the Community Health Assessment?**

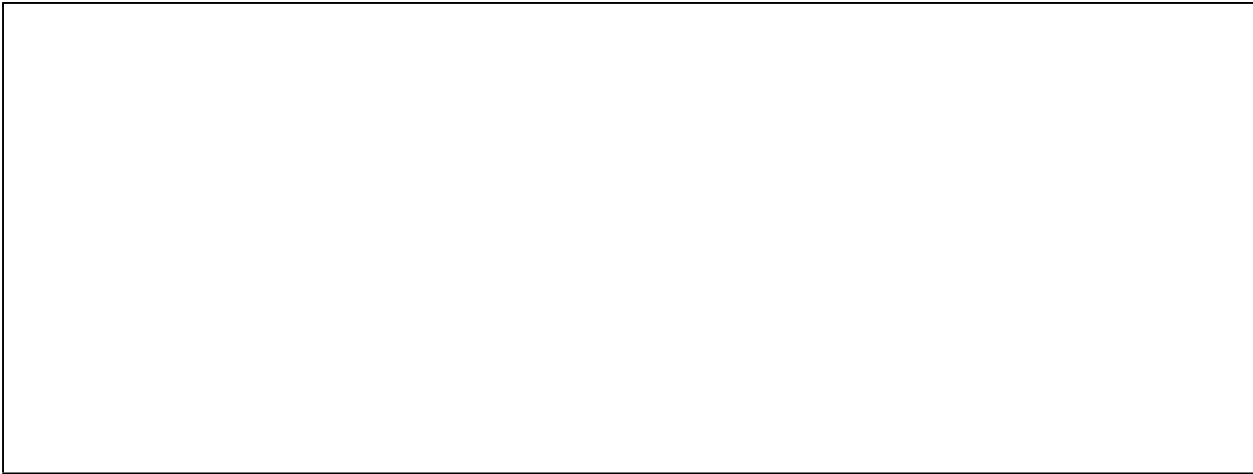
Yes

No

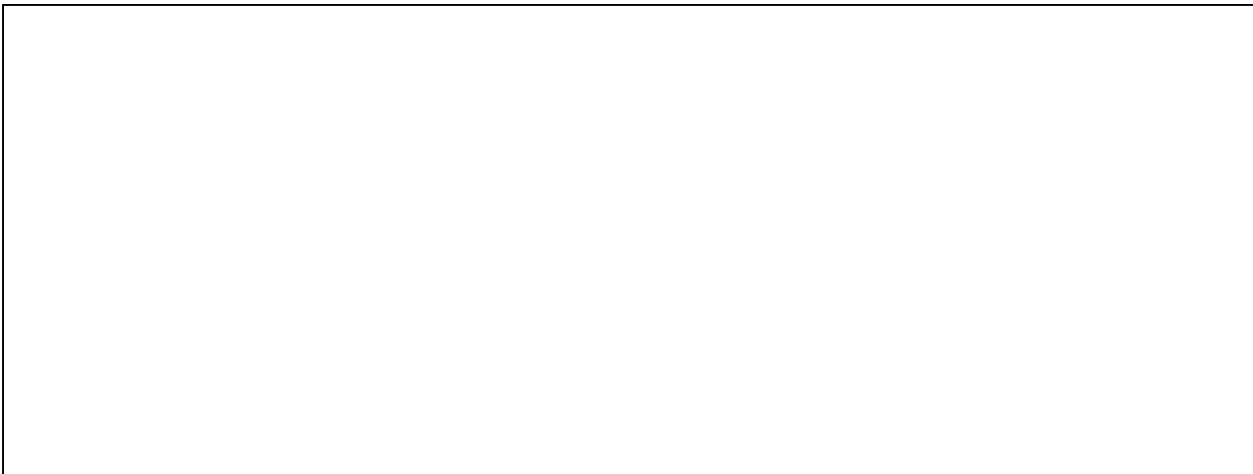
**Question 1.** What do you see as the top three health challenges for people in your community? And Why?

**Question 2.** What are the barriers to good health in your community?

**Question 3.** What do you think are some of the changes related to health and healthcare that could be made in your community?



**Question 4.** What do you like most about living in your community?



# Key Informant Interview Questionnaire

HEAR Member Name:

Date of Completion:

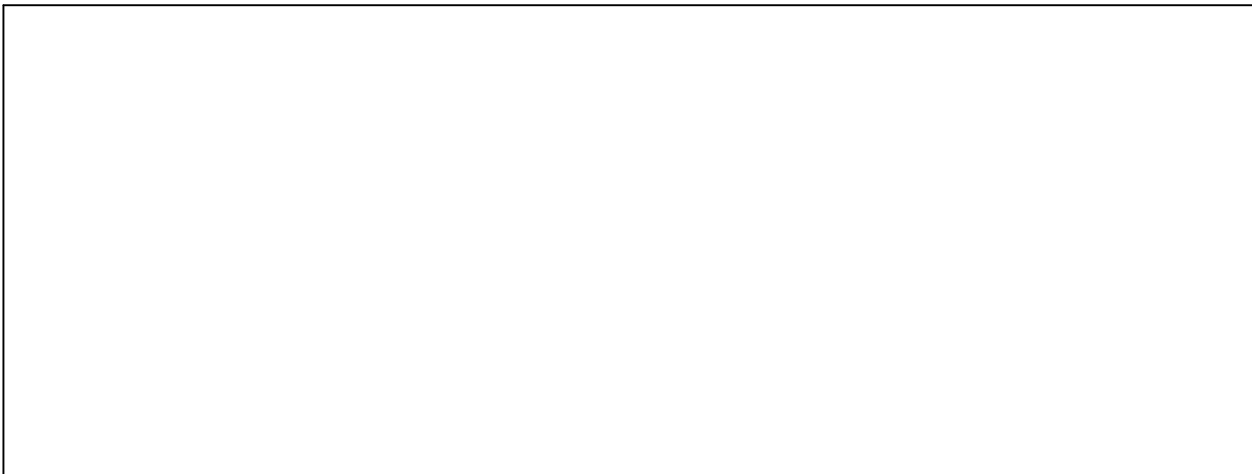
1. In your time living in Rock County how have you seen it change?

2. What are your concerns about health in the community as a Rock County Resident?

3. Why are you concerned about your responses to Question 2 above?



4. Why are these issues important to you?



5. What are the assets in the community?



# Secondary Data Sources Table

Data Source	Description	Link
Behavioral Risk Factor Surveillance System	The Behavioral Risk Factor Surveillance System (BRFSS) is the nation’s premier system of health-related telephone surveys that collect state data about U.S. residents regarding their health-related risk behaviors, chronic health conditions, and use of preventive services.	<a href="https://www.cdc.gov/brfss/index.html">https://www.cdc.gov/brfss/index.html</a>
Comprehensive Housing Affordability Strategy	The "CHAS" data (Comprehensive Housing Affordability Strategy), demonstrate the extent of housing problems and housing needs, particularly for low income households.	<a href="https://www.huduser.gov/portal/datasets/cp.html">https://www.huduser.gov/portal/datasets/cp.html</a>
County Health Rankings	The CHR&R program provides data, evidence, guidance, and examples to build awareness of the multiple factors that influence health and support community leaders working to improve health and increase health equity.	<a href="https://www.countyhealthrankings.org/app/wisconsin/2021/rankings/rock/county/outcomes/overall/snapshot">https://www.countyhealthrankings.org/app/wisconsin/2021/rankings/rock/county/outcomes/overall/snapshot</a>
Environmental Public Health Tracking	Wisconsin Environmental Public Health Tracking is your source for environmental health data in Wisconsin.	<a href="https://www.dhs.wisconsin.gov/epht/index.htm">https://www.dhs.wisconsin.gov/epht/index.htm</a>
ESSENCE Syndromic Surveillance	Web-based disease surveillance information system developed to alert health authorities of infectious disease outbreaks, including possible bioterrorism attacks.	<a href="https://essence.syndromicsurveillance.org/nssp_essence/serve/Login">https://essence.syndromicsurveillance.org/nssp_essence/serve/Login</a>
FBI Uniform Crime Reporting	The Uniform Crime Reporting (UCR) Program generates reliable statistics for use in law enforcement. It also provides information for students of criminal justice, researchers, the media, and the public.	<a href="https://www.fbi.gov/services/cjis/ucr">https://www.fbi.gov/services/cjis/ucr</a>
National Center for Education Statistics	The National Center for Education Statistics (NCES) collects, analyzes, and reports complete statistics on the condition of American education.	<a href="https://nces.ed.gov/">https://nces.ed.gov/</a>
National Center for Health Statistics	The Natality online databases report counts of live births occurring within the United States to U.S. residents.	<a href="https://wonder.cdc.gov/">https://wonder.cdc.gov/</a>

Data Source	Description	Link
United Way ALICE Report	United For ALICE is a driver of innovation, shining a light on the challenges ALICE households face and seeking collaborative solutions.	<a href="https://www.unitedforalice.org/">https://www.unitedforalice.org/</a>
US Census Bureau	The US Census Bureau provides demographic data at varying geographic levels across the US.	<a href="#">US Census Bureau</a>
Walkscore	Walkscore is a publicly available metric that rates the walkability of communities.	<a href="https://www.walkscore.com/">https://www.walkscore.com/</a>
WI Well Water Quality Viewer	The WI Well Water Quality Interactive Viewer was created as an educational tool to help people better understand Wisconsin's groundwater resources that many of us rely on for our drinking water.	<a href="https://www.uwsp.edu/cnr-ap/watershed/Pages/WellWaterViewer.aspx">https://www.uwsp.edu/cnr-ap/watershed/Pages/WellWaterViewer.aspx</a>
Wisconsin Child Abuse and Neglect Prevention Board	The Wisconsin Child Abuse and Neglect Prevention Board is committed to mobilizing research and practices that prevent the occurrence of child maltreatment.	<a href="https://preventionboard.wi.gov/Pages/Homepage.aspx">https://preventionboard.wi.gov/Pages/Homepage.aspx</a>
Wisconsin Department of Health Services	The Department of Health Services (DHS) is one of the largest and most diverse state agencies in Wisconsin.	<a href="https://www.dhs.wisconsin.gov/publications/p00415b-2019-rock.pdf">https://www.dhs.wisconsin.gov/publications/p00415b-2019-rock.pdf</a>
Wisconsin Electronic Disease Surveillance System	WEDSS is a secure, web-based system designed to facilitate reporting, investigation, and surveillance of communicable diseases in Wisconsin.	<a href="https://www.dhs.wisconsin.gov/wiphin/wedss.htm">https://www.dhs.wisconsin.gov/wiphin/wedss.htm</a>
Wisconsin Interactive Statistics on Health (WISH)	WISH allows policy makers, health professionals, and the public to submit questions (requests for data) and receive answers (tables) over the Internet.	<a href="https://www.dhs.wisconsin.gov/wish/index.htm">https://www.dhs.wisconsin.gov/wish/index.htm</a>
Wisconsin Youth Risk Behavior Survey	The Wisconsin Youth Risk Behavior Survey (YRBS) is conducted as part of a national effort by the U.S. Centers for Disease Control and Prevention to monitor health-risk behaviors of the nation's high school students.	<a href="https://dpi.wi.gov/spw/yrbs">https://dpi.wi.gov/spw/yrbs</a>



### **What are Forces of Change?**

Forces of Change are trends, events, and factors that have, or could potentially have, an impact on health status or the public health system. The Public Health System includes all organizations (for example non-profits, health care systems, governmental public health entities) that are focused on the health and wellbeing of the population.

Forces of Change can be social, economic, political, technological, environmental, scientific, legal, and/or ethical. The impact of Forces of Change can be at the neighborhood, municipality/town, county, state, national, or inter-national level. Forces of Change could present both threats and opportunities.

### **Examples of Forces of Change:**

- Natural disaster, redevelopment and/or significant new infrastructure being developed.
- Changes to local, state or national laws recently adopted or under construction.
- Population demographic and/or geographic trends.
- Opening or closure of large employers and/or community organizations.

### **Why is it important to consider Forces of Change in the Community Health Assessment process?**

Assessing Forces of Change allows us to:

- Consider the context of health outcomes
- Incorporate strategic activities that address threats and/or opportunities created by Forces of Change into the Community Health Improvement Plan (CHIP).

### **Overview of the Process**

1. Set aside ~30 minutes to brainstorm possible Forces of Change for Rock County.
2. Document the Force of Change on the following page.
3. For each Force of Change listed, identify the impacted area, opportunities, and threats
  - a. The impacted area could be a specific area of Rock County, the county as a whole, the state, of the nation.

All surveys collected will be incorporated into a master list of Forces of Change that will be shared with HEAR at a monthly meeting. The master list will also be incorporated into the Community Health Assessment.

### **Questions to consider when thinking about Forces of Change**

The following questions can be used as a guide to identify Forces of Change:

- What has occurred recently that may impact our community and/or public health system?
- What is being planned and/or considered at a local, county, or state level that might impact our community?
- What are characteristics of Rock County that may pose an opportunity or a threat?

1. Force of Change

Force of Change: \_\_\_\_\_

Impacted Area(s): \_\_\_\_\_

Opportunity 1: \_\_\_\_\_

Opportunity 2: \_\_\_\_\_

Opportunity 3: \_\_\_\_\_

Opportunity 4: \_\_\_\_\_

Threat 1: \_\_\_\_\_

Threat 2: \_\_\_\_\_

Threat 3: \_\_\_\_\_

Threat 4: \_\_\_\_\_

2. Force of Change

Force of Change: \_\_\_\_\_

Impacted Area(s): \_\_\_\_\_

Opportunity 1: \_\_\_\_\_

Opportunity 2: \_\_\_\_\_

Opportunity 3: \_\_\_\_\_

Opportunity 4: \_\_\_\_\_

Threat 1: \_\_\_\_\_

Threat 2: \_\_\_\_\_

Threat 3: \_\_\_\_\_

Threat 4: \_\_\_\_\_

3. Force of Change

Force of Change: \_\_\_\_\_

Impacted Area(s): \_\_\_\_\_

Opportunity 1: \_\_\_\_\_

Opportunity 2: \_\_\_\_\_

Opportunity 3: \_\_\_\_\_

Opportunity 4: \_\_\_\_\_

Threat 1: \_\_\_\_\_

Threat 2: \_\_\_\_\_

Threat 3: \_\_\_\_\_

Threat 4: \_\_\_\_\_

4. Force of Change

Force of Change: \_\_\_\_\_

Impacted Area(s): \_\_\_\_\_

Opportunity 1: \_\_\_\_\_

Opportunity 2: \_\_\_\_\_

Opportunity 3: \_\_\_\_\_

Opportunity 4: \_\_\_\_\_

Threat 1: \_\_\_\_\_

Threat 2: \_\_\_\_\_

Threat 3: \_\_\_\_\_

Threat 4: \_\_\_\_\_

5. Force of Change

Force of Change: \_\_\_\_\_

Impacted Area(s): \_\_\_\_\_

Opportunity 1: \_\_\_\_\_

Opportunity 2: \_\_\_\_\_

Opportunity 3: \_\_\_\_\_

Opportunity 4: \_\_\_\_\_

Threat 1: \_\_\_\_\_

Threat 2: \_\_\_\_\_

Threat 3: \_\_\_\_\_

Threat 4: \_\_\_\_\_

6. Force of Change

Force of Change: \_\_\_\_\_

Impacted Area(s): \_\_\_\_\_

Opportunity 1: \_\_\_\_\_

Opportunity 2: \_\_\_\_\_

Opportunity 3: \_\_\_\_\_

Opportunity 4: \_\_\_\_\_

Threat 1: \_\_\_\_\_

Threat 2: \_\_\_\_\_

Threat 3: \_\_\_\_\_

Threat 4: \_\_\_\_\_

# Forces of Change Results Table

Note: Where more than one similar opportunity or threat was provided, a + denotes how many times the idea was reported.

Force of Change	Opportunities*	Threats
COVID-19 Pandemic	<p>Increase vaccination rates</p> <p>Teleworking and work/life balance</p> <p>Meetings and events have been offered virtually, which might improve participation</p> <p>More awareness of communicable diseases and measures to prevent illness</p> <p>Bring more partners together+</p> <p>Assess gaps in equity+</p> <p>Increased funding available to address infrastructure and goals of HEAR+++</p> <p>Possibility of increasing broadband, which could make remote learning and remote work more accessible</p> <p>Increase living wages+</p> <p>Push for tech colleges/education</p> <p>Push for career planning assistance</p>	<p>New case surges that risk overrunning available hospital resources</p> <p>Increased unemployment and economic instability++++++</p> <p>Social isolation; loneliness; suicide</p> <p>Housing instability</p> <p>Disruption in education with unknown long-term impacts</p> <p>Distrust in government and future vaccines ++</p> <p>Resources might be directed based on political will, rather than need and return on investment</p> <p>Challenges of transitioning off unemployment benefits</p>
<b>Health Care Access and Quality Related Forces of Change</b>		
Healthcare workforce recruitment and retention	Recruit a diverse group of health care workers to the area	<p>Access to appropriate medical care will continue to be a struggle without adequate provider availability</p> <p>Lack of diversity within workforce</p>

Force of Change	Opportunities*	Threats
Cost of medical care, dental care, mental health care	Awareness and resources Training and support person to assist each person on how to navigate the insurance and billing No hidden costs. Open billing before procedure Platform to “shop” best deal for care	People will not seek out care  People with insurance pay more to cover costs of those that don’t have insurance  Length of time to see a specialist of doctor for care
HealthNet expansion	Expanded dental care Expanded behavioral health	
Loss of employment related to GM closure years back		Inconsistent health care coverage
<b>Social and Community Context Related Forces of Change</b>		
Racism declared a public health crisis	Addressing the impact of racism on health  Awareness of the impact of racism on health outcomes among local policy makers +	Politicization of issue
Growing community partnerships	Shared vision - successful programs work together Increase sustainability Increase funding opportunities	Leadership buy-in Lack of organization capacity Burnout/staff turnover
<b>Neighborhood and Built Environment Related Forces of Change</b>		
Affordable Housing	Reduce those who lose homes due to COVID unemployment Invest in increasing access to low-income housing Policy change for affordable housing	Increase in homeless population due to unaffordable housing Landlords/banks have power to evict COVID policies are expiring for unpaid housing costs
Population relocation from Chicago		Bringing in drug/gang issues

Force of Change	Opportunities*	Threats
Beloit Casino	Bringing in more jobs+ Increased tourism	More crime with more traffic+ Possibility of increased gambling addiction
Removal of alcohol license quota for Janesville	Possible concentration of alcohol-selling establishments Educate about the health and safety around alcohol quotas	Health and safety harms caused by excess drinking
Redevelopment of Beloit and Janesville	More affordable housing Communities are more attractive to larger employers	Redevelopment displacing people with lower incomes
Climate Change	Refocus on health equity re: impact of climate change Education about impacts	Health and safety regarding extreme weather events Impact on resources like water and food supply
<b>Health Topic Related Forces of Change</b>		
Chronic disease burden	Added upstream determinants of health that contribute to chronic disease (e.g. healthy foods, physical activity)	Increased mortality Reduced employment
Addiction	Increase access to treatment for substance use disorders Prevent new onset substance use disorders through education	Increased mortality Reduced employment
Marijuana legal in Michigan and Illinois	Education Tax revenue	Get into the wrong hands Marketing young audiences Lasting impact on health No motivation - creates a domino effect - we end up paying for it
Vaping among youth	Education Partnerships with schools	Damages health/lungs Gateway drug for other substances Cost

Force of Change	Opportunities*	Threats
Tobacco 21 Policy	<p>Less tobacco use among people under 21 years of age</p> <p>Possibility of improved birth outcomes</p> <p>Possibility of decreased rates of chronic health conditions</p>	Possibility of increased use of other substances
Mental Health	<p>Partnership together</p> <p>Reduce stigma</p> <p>Education, outreach</p> <p>Offer people hope</p>	<p>Suicide</p> <p>Impacts on all areas of life and extends to family and friends</p> <p>Lost revenue-missed days work</p> <p>Need to treat source of problem - not just medicate</p>
Obesity	<p>Incorporate total wellness</p> <p>Update worksite wellness environments and programs across county</p> <p>Restaurants - healthier options; food deserts</p> <p>Offer healthy lunches and snacks at school, work through policy change</p>	<p>Chronic diseases</p> <p>Lost work revenue</p> <p>Cost for care affects everyone</p>
<b>Other Forces of Change</b>		
WIC Food Package Report	<p>Possible increase in WIC food benefit - potentially leading to increased program participation</p> <p>Possible changes that make food package more culturally appropriate</p>	Changes to food package could decrease participation
Public Health Accreditation Standards and Measures 2022	Focus on health equity	
Legislation limiting the authority of Health Officers		Increased spread of communicable diseases

\*Opportunities reflect both opportunities created by the force of change and opportunities to address the force of change identified.



# Local Public Health System Assessment

## Why?

This is a valuable tool for identifying areas for system improvement, strengthening local partnerships, and assuring that a strong system is in place for effective delivery of day-to-day public health services and response to public health emergencies. The Public Health System includes all organizations (for example non-profits, health care systems, governmental public health entities) that are focused on the health and wellbeing of the population.

## Overview of the Process

1. Set aside ~30 minutes to review the updated 10 essential services
2. For each Essential Service listed, score the impacted area on its performance measure (explained below)
  - a. Optional: A place has also been included to list any strengths or opportunities you see within each essential service

## Performance measure:

### Optimal Activity

(76–100%) Greater than 75% of the activity described within the question is met.

### Significant Activity

(51–75%) Greater than 50% but no more than 75% of the activity described within the question is met.

### Moderate Activity

(26–50%) Greater than 25% but no more than 50% of the activity described within the question is met.

### Minimal Activity

(1–25%) Greater than zero but no more than 25% of the activity described within the question is met.

### No Activity

(0%) 0% or absolutely no activity.

All surveys collected will be incorporated into a document that will be shared with HEAR at a monthly meeting. The results will also be incorporated into the Community Health Assessment.

## Questions to consider when thinking about scoring the 10 Essential Services

- What is going on in our community?
- Do we know how healthy we are?
- What are characteristics of Rock County that may pose an opportunity or a threat?

1. Assess and monitor population health status, factors that influence health, and community needs and assets.

None	Minimal	Moderate	Significant	Optimal	N/A
★	★	★	★	★	○

2. Identify any strengths or opportunities you have seen in our community in this service.

Strength \_\_\_\_\_  
Opportunity \_\_\_\_\_

3. Investigate, diagnose and address health problems and hazards affecting the population.

None	Minimal	Moderate	Significant	Optimal	N/A
★	★	★	★	★	○

4. Identify any strengths or opportunities you have seen in our community in this service.

Strength \_\_\_\_\_  
Opportunity \_\_\_\_\_

5. Communicate effectively to inform and educate people about health, factors that influence it and how to improve it.

None	Minimal	Moderate	Significant	Optimal	N/A
★	★	★	★	★	○

6. Identify any strengths or opportunities you have seen in our community in this service.

Strength \_\_\_\_\_  
Opportunity \_\_\_\_\_

7. Strengthen, support, and mobilize communities and partnerships to improve health.

None      Minimal      Moderate      Significant      Optimal      N/A

★      ★      ★      ★      ★      ○

8. Identify any strengths or opportunities you have seen in our community in this service.

Strength \_\_\_\_\_

Opportunity \_\_\_\_\_

9. Create, champion and implement policies, plans and laws that impact health.

None      Minimal      Moderate      Significant      Optimal      N/A

★      ★      ★      ★      ★      ○

10. Identify any strengths or opportunities you have seen in our community in this service.

Strength \_\_\_\_\_

Opportunity \_\_\_\_\_

11. Utilize legal and regulator actions designed to improve and protect the public's health.

None      Minimal      Moderate      Significant      Optimal      N/A

★      ★      ★      ★      ★      ○

12. Identify any strengths or opportunities you have seen in our community in this service.

Strength \_\_\_\_\_

Opportunity \_\_\_\_\_

13. Assure an effective system that enables equitable access to the individual services and care needed to be healthy.

None      Minimal      Moderate      Significant      Optimal      N/A

★      ★      ★      ★      ★      ○

14. Identify any strengths or opportunities you have seen in our community in this service.

Strength \_\_\_\_\_

Opportunity \_\_\_\_\_

15. Build and support a diverse and skilled public health workforce.

None      Minimal      Moderate      Significant      Optimal      N/A



16. Identify any strengths or opportunities you have seen in our community in this service.

Strength \_\_\_\_\_

Opportunity \_\_\_\_\_

17. Improve and innovate public health functions through ongoing evaluation, research, and continuous quality improvement.

None      Minimal      Moderate      Significant      Optimal      N/A



18. Identify any strengths or opportunities you have seen in our community in this service.

Strength \_\_\_\_\_

Opportunity \_\_\_\_\_

19. Build and maintain a strong organization infrastructure for public health.

None      Minimal      Moderate      Significant      Optimal      N/A



20. Identify any strengths or opportunities you have seen in our community in this service.

Strength \_\_\_\_\_

Opportunity \_\_\_\_\_

# Local Public Health System Assessment Results Table

Essential Service	Average Rating	Strengths	Opportunities
<p><b>Essential Service #1</b> Assess and monitor population health status, factors that influence health, and community needs and assets</p>	3.7	<p>COVID-19 Response</p> <p>HEAR Committee</p> <p>Data Tracking</p> <p>Previous CHA</p> <p>RCPHD</p> <p>Community Health Center</p>	<p>Collaboration</p> <p>Data sharing</p> <p>Reporting frequency</p> <p>Resource expansion</p>
<p><b>Essential Service #2</b> Investigate, diagnose and address health problems and hazards affecting the population</p>	3.7	<p>Pandemic Response</p> <p>Epidemiological Data</p> <p>Community Health Assessment</p>	<p>Health inequities</p> <p>Disputing misinformation</p> <p>Public Health 3.0</p>
<p><b>Essential Service #3</b> Communicate effectively to inform and educate people about health, factors that influence it and how to improve it</p>	2.9	<p>Community Partnerships</p> <p>Spanish Resources</p> <p>Various Communication Channels</p>	<p>Targeted outreach</p> <p>Cultural competency</p> <p>Generational differences</p> <p>Pandemic updates</p>
<p><b>Essential Service #4</b> Strengthen, support, and mobilize communities and partnerships to improve health</p>	3.4	<p>Vaccine Advisory Committee</p> <p>Multisector Partnerships</p> <p>Coordination of Pandemic Resources</p>	<p>Diverse partnerships</p> <p>Business involvement</p> <p>HEAR Committee</p>
<p><b>Essential Service #5</b> Create, champion and implement policies, plans and laws that impact health</p>	2.6	<p>COVID-19 Mandates</p> <p>Past Wellness &amp; Breastfeeding Initiatives</p> <p>Rock County Bike Path</p>	

Essential Service	Average Rating	Strengths	Opportunities
<p><b>Essential Service #6</b> Utilize legal and regulatory actions designed to improve and protect the public’s health</p>	2.6	Environmental health	<p>Oversight of policies</p> <p>Pandemic response</p>
<p><b>Essential Service #7</b> Assure an effective system that enables equitable access to the individual services and care needed to be healthy</p>	2.7	<p>HEAR</p> <p>Multiple hospital systems</p> <p>Connecting population to services</p> <p>Leadership involvement</p>	<p>Spanish communications</p> <p>Health literacy</p> <p>Equity</p> <p>Data sharing</p>
<p><b>Essential Service #8</b> Build and support a diverse and skilled public health workforce</p>	3.0	<p>Dedication of Workforce</p> <p>AHEC Office</p> <p>Multiple Colleges</p>	<p>Mental health provider shortage</p> <p>Diversity</p> <p>Public health training</p>
<p><b>Essential Service #9</b> Improve and innovate public health functions through ongoing evaluation, research, and continuous quality improvement</p>	3.3	<p>Linking public health research and practice</p> <p>HEAR</p> <p>Research</p>	<p>Quality improvement initiatives</p> <p>Centralized resources</p> <p>Ongoing data collection</p> <p>Dental tracking</p>
<p><b>Essential Service #10</b> Build and maintain a strong organization infrastructure for public health</p>	3.1	<p>New Health Officer</p> <p>Organizational improvements</p> <p>Active area providers</p> <p>Robust information and technology services</p>	<p>Equitable allocation of resources</p> <p>Central leadership</p> <p>Dissemination of involvement opportunities, assessment and training</p>