# **2015 Community Health**Improvement Plan









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Riverside, Iowa

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### What is a Health Improvement Plan?

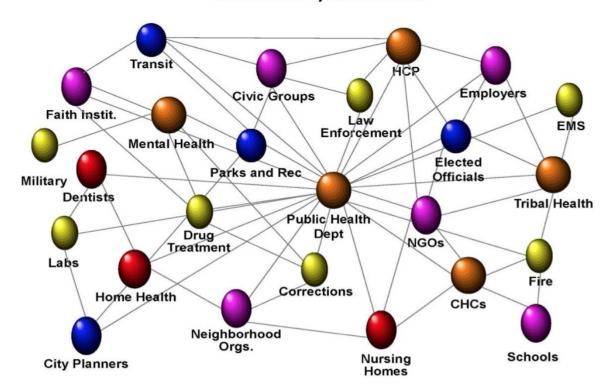


The Health Improvemet Plan is a guide that the local public health department is required to construct every five years and consists of basic steps and tools for improving the major health needs of a community. The plan not only helps assess a community's overall health but also identifies specific areas of strength and where we need to focus more attention in order to get healthier. Guided by local discussions, surveys and the latest research, this plan establishes a foundation for community-wide efforts both now and in the future.

# How to use this guide

This plan has been constructed so that anyone interested in health will be able to reference the recommendations and evidence-based strategies written within. By collecting the latest pertinent literature on a variety of subjects that relate to Washington County's health needs, this plan should serve as a go-to reference to any coordinated, community-wide efforts directed at the health priorities. Inside are three important, community-selected, health-related topics affecting Washington County; the process for choosing the topics; an overview of the latest nationwide research and recommendations for future projects.

### **Public Health System Partners**



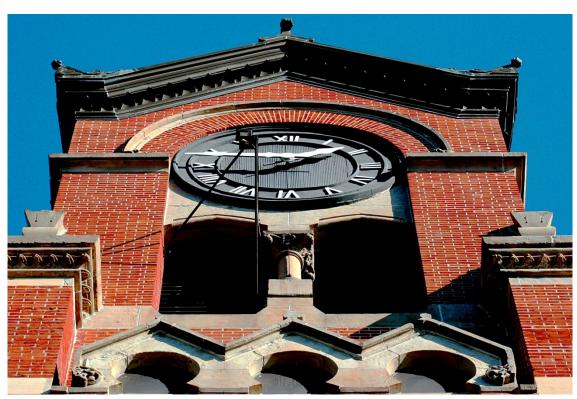




**Washington County** 

### Washington County: Who are we?

Founded in 1838, Washington County is located in southeastern Iowa and in 2013 had a population of 22,015. Encompassing 571 mi<sup>2</sup>, the county (seen left) has a population that is 92.1% white, 5.2% Hispanic, 0.9% African American, 0.5% Asian and 0.3% American Indian. The median income for 2009–2013 was \$54,554. Washington County is included in the Iowa City Metropolitan Statistical Area.



Washington County Courthouse, Washington, Iowa

# Our vision at Washington County Public Health

It is important to develop a vision early in the CHNA and HIP processes. A vision is a future-focused statement that helps in framing goals, objectives and strategies and can inspire a group of community members about their project's destination, outcome and end product.

"Washington County residents partnering to create a future vision of health for our community."



### A THANK YOU TO THE COMMUNITY HEALTH NEEDS ASSESSMENT TEAM

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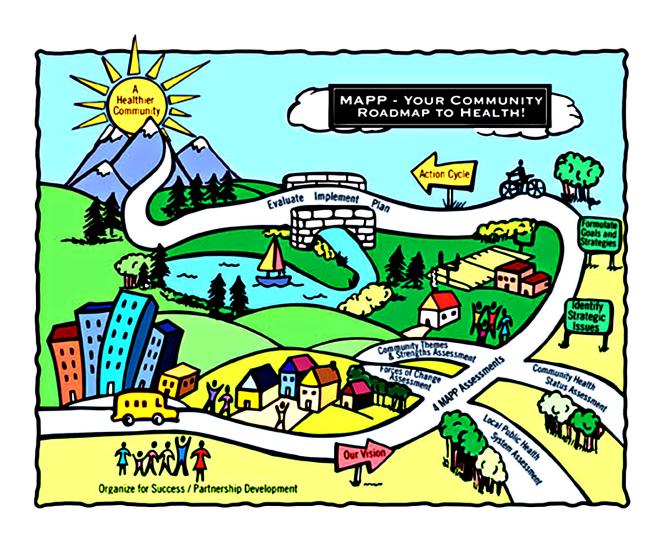
Lake Darling, near Brighton, Iowa



# Strategy Development

Every five years the Iowa Department of Public Health and the local public health department are required by the state to lead the Community Health Needs Assessment for our county. The process requires community members to get involved in making decisions about improving their health. Involvement of and support from the many areas of the community significantly improve and strengthen the local planning process. In order to guide this method, we used the **MAPP Framework**—Mobilizinng for Action through Planning and Partnerships.

MAPP consists of six phases, usually consisting of organizing, visioning, assessments, strategic issues, goals/strageties and an action cycle. These phases ultimately lead to the building of community partnerships in order to work in collaboration with a variety of organizations and people. Through these partnerships, everyone can discuss and help agree upon a shared community vision, areas of need, existing strengths and strategies for achieving their goals.





# Meetings, Topic Selection

During the months of June and July 2015, Washington County Public Health partnered with over 40 organizations and community members to conduct the Washington County Community Health Needs Assessment. During a series of three meetings, a wide variety of health-related topics were discussed including health lifestyles, disease prevention, injury

Chosen topics:

Mental Health

Physical Activity

Access to Healthy Food

prevention, elder care, mental health care and environmental health. At the conclusion of the third meeting, the community members voted on the top three health priorities on which to focus for the next five years. The top three priorities were Physical Activity Throughout Life, Nutrition & Food Systems and Access to Mental Health Care.



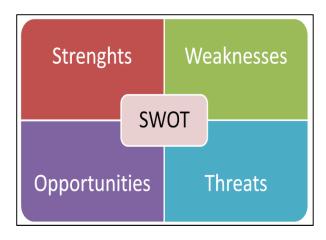
Historic downtown, Brighton, Iowa



# Theories & Models Used

# Strengths, Weaknesses, Opportunities, Threats (SWOT Analysis)

The SWOT Anaylsis tool was used to spur discussion in our stakeholder meetings and ultimately guide participants toward the selection of health topics. Assessing strengths, weaknesses, opportunities and threats allows us to consider both the external and internal environments surrounding a situation, enabling us to make the most informed decisions. Strengths and



weaknesses describe the current foundation upon which to build (internal), and opportunities and threats describe the issues in the environment that could influence a situation (external). Assessing all four is a simple, practical, clear-to-understand way of directing efforts and increasing efficiency.



### **Social Ecological Model**

The Social Ecological Model helps us to identify the different levels of influence in our lives that can affect health (the social determinants). From the center of the model outward, the levels include sources from within ourself, between people, from the places we work/go to school, the community in which we live and the overarching public policies from local and national governments.

#### Ten Essential Services of Public Health

The Ten Essential Services serve as a framework for any number of community activities, public health services or potential interventions. They all fall within the three fundamental purposes of public health: assessment, policy development and assurance. These services represent the building blocks for the Community Health Needs Assessment and Health Improvement Plan.





# Health Priority:

# Mental Health

### The Current Situation

Access to mental health is a topic that affects many counties and states across the U.S. Based on Washington County's Community Health Needs Assessment and meetings with community members and stakeholders, nearly 60% felt that access to mental health should be the top priority for future efforts.

Nationally, though, mental health has been talked about more and more frequently in the last few years. In 2007, a survey conducted by the CDC and the Substance Abuse & Mental Health Services Administration (SAMHSA) found that 78% of adults with mental health symptoms and 89% of adults without symptoms agreed that treatment can help people with mental illness lead normal lives. However, while 57% of those adults without symptoms said that people are caring and sympathetic to those with mental illness, only 25% of adults with mental health symptoms felt the same way (CDC Weekly Guide, 2010).

As a result, the CDC reported that a greater emphasis needed to be placed on public education and reducing barriers for those who seek treatment or are receiving it.

Here in Iowa, the state's Department of Public Health recently included access to mental health as a topic in its statewide Health Improvement Plan. Specific objectives listed within include increasing access to services and support for individuals experiencing mental health crises

"Mental health includes our emotional, psychological, and social well-being. It affects how we think, feel, and act. It also helps determine how we handle stress, relate to others, and make choices. Mental health is important at every stage of life, from childhood and adolescence through adulthood."

- One in five American adults experienced a mental health issue
- One in ten young people experienced a period of major depression
- One in 25 Americans lived with a serious mental illness, such as schizophrenia, bipolar disorder, or major depression

"Suicide is the 10th leading cause of death in the United States. It accounts for the loss of more than 41,000 American lives each year, more than double the number of lives lost to homicide."

—SAMHSA, 2013



and reducing jail bed usage by mental health sufferers by 25% (IDPH, 2015).

When the topic was discussed in meetings with community members in Washington County (using SWOT Analysis as a guide), the current situation was assessed in regards to existing access as well as barriers.

Strengths in Washington County include a new, recently-opened drop-in support center, the local ER staff including some mental health professionals and an overall support from the community for mental health services.

A lack of providers, the loss of a high number of mental health beds throughout Iowa and having fewer than 20 beds in regional crisis homes were all included in the list of weaknesses and threats, while having the ability to facilitate training for more mental health professionals for mental health first aid and mental health prevention was offered as an opportunity.

**Potential Waypoints** 

- Educating the public
- Educating professionals on existing systems
- Decreasing stigma
- Linking professionals to resources

"We all hear the statistics that an estimated 1 in 5 adults suffer from a diagnosable mental disorder in a given year. What we need to hear is that mental health does not discriminate. It may affect each of us in a different capacity but I think we can all agree that it has a significant impact on the overall health of our communities, whether that be emotionally, physically, socially or financially. Building a community that has an awareness and understanding that together we can make a difference in people lives and in turn our communities, by providing the tools needed to begin looking at it as a journey to recovery. Access to those tools through the mental health services is imperative to improving the lives of the people, their families and the community that we live in and coincides with mission of Washington County with the Southeast Iowa Link (SEIL) Mental Health and Disability Services to design services that are welcoming, engaging and integrated to individuals and families with multiple complex issues." -Bobbie Wulf, Washington County Mental Health and

Disability Services Director



# **Suggested Strategies**

#### Interpersonal

 Host an "Ask the Doctor" educational session either at a school or a public event

### Organizational

- Send home pamphlets for parents on mental health awareness
- Plan a veterans' event, seeking input from VA Hospitals (possibly lowa City's)

### Community

 Take part in Mental Illness Awareness Week (MIAW) as organized by the National Alliance on Mental Illness (NAMI) and World Psychiatric Association (WPA)

- Involve churches/their sermons
- Host a public movie night, screening something related to mental illness, followed by a public discussion
- Have a public candlelight vigil for those in our lives affected by mental illness
- Donate books to the school/local library on mental health/mental illness awareness

### Policy

 Organize a proclamation to be signed by the mayor, either establishing a MIAW in Washington County or just in support of mental health

# Spotlight on Success

In a 2011 study (whose results were just published this year), a team in Germany assembled a telemedicine-based plan to extend the reach of mental health care in rural and underserved areas. The basis of their plan was to have reminder phone calls and text messages sent to patients who were seeking treatment for mental health-related reasons. These would occur over the six months immediately following their initial appointment.

In the first month after treatment, a nurse would call the patient once per week, then once per month. In these calls, a questionnaire would be given to assess the severity of the mental health condition on that day, the number of contacts the patient has had with physicians since the last call, how many times that person has been in the hospital since the last call and general health questions. The second part of the call would be more free-flowing, asking about special or unusual things that have happened since the last call and setting a goal until the next call. The third part would deal with making sure medications had been taken appropriately and how well it's working. Finally, the patient would get a chance to talk about whatever they chose at the end.

In part of the study group, patients received all of the above in addition to once-per-week text messages checking on individual goals and behaviors ("Did you take the bus today?" or "Did the appointment with your boss go well?"). This allows nurses, based on the results of the texts, to determine whether an increase in phone calls is needed.

Based on the questionnaire results, researchers found that those who received calls were scoring better on the nurses' assessments over the phone at the end of the six month intervention than those who received neither calls nor texts. They specifically found strong effects in those patients diagnosed with anxiety and depression compared to the control group, showing them that telemedicine provides a viable option for helping to improve outcomes in mental health patients without requiring more appointments and sessions.

van den Berg, N., Grabe, H.J., Baumeister, S.E., Freyberger, H.J. & Hoffmann, W. (2015). A telephone- and text-message based telemedical care concept for patients with mental health disorders—Results of a randomized controlled trial. *Psychotherapy and Psychosomatics, 84*(2).



# Access to Healthy Foods

### The Current Situation

The complex issue of overweight and obesity has been affecting much of the nation like an epidemic. Every single state has seen its levels of obesity increase in recent years, and it's costing the U.S. healthcare system upwards of \$300 billion annually (BRFSS, 2014).

As of 2014, two thirds of all adults in Iowa are considered overweight or obese, and nearly a third of all children are, too, according to the Behavioral Risk Factor Surveillance System results. This is above the national average. Moreover, the numbers of people receiving financial assistance for food has increased an alarming 247% since 2000. (BRFSS, 2014) (BRFSS, 2013).

This has also meant an increase in the number of children receiving Free & Reduced Lunch, such that two schools in the Washington County area now provide the discounts to over 50% of their student populations. One school even exceeds 75%.

These numbers coincide with a decrease in fruit and vegetable consumption—two reliable hallmarks of a healthy diet. According to the Iowa Youth Survey, nearly half of all sixth, eighth and eleventh grade students in Washington County consume fruits once per day or less. The same goes for vegetable consumption.

"Improving access to healthy foods has been identified as a key strategy for obesity prevention and control by many national organizations including the Institute of Medicine, the Centers for Disease Control and Prevention, and the American Heart Association. It is part of a comprehensive approach to prevention and control, particularly in lowincome and underserved communities where access is limited, and compliments other prevention and control strategies that involve individual and family change efforts."

—Gittelsohn et al., 2015

"The primary modifiable causes of obesity are poor nutrition and physical inactivity. Young children, who generally rely on their parents for food choice and physical activity opportunities, need a family environment that promotes good nutrition and encourages safe exercise and physical activity."

—Evans, 2007



In the SWOT discussions with Washington County community members, the existence of Operation Backpack (where, at two local elementary schools, backpacks are filled with food on Fridays for food-insecure students), the completion of a food systems assessment and the prevalence of organic foods in and around Washington County were all identified as strengths.

Opportunities included food insecurity solutions and outlets to sell locally-grown fruits and vegetables. Increasing home food-delivery services was also mentioned as well as having a more robust/weekly farmers' market. A community garden was also discussed as well as the potential health benefits of a healthier lifestyle. However, not many weaknesses and threats were discussed aside from the statistical data from the surveys.

### **Potential Waypoints**

 Convene a coalition consisting of individuals who previously participated in the County Food Assessment along with grocers, ISU Extension, Academia, non-profits, media, youth and other interested parties to determine the best way to proceed in Washington County. "Life lessons are learned at an early age, so it is important to teach kids how to eat and live healthy at an early age. With this approach, kids will learn habits that they will continue through a lifetime."

- Dave Hoffman, Principal of Lincoln Upper Elementary

"It is important that students understand what nutrients their bodies require to be healthy and where they can get these nutrients. Students also need to understand how we care for the soil effects the nutrients available in our foods."

- Jane O'Leary Principal of Ainsworth Elementary

"1 in 4 children in our community are food insecure, meaning they are unable to access enough food on a daily basis and generally do not know where their next meal will come from. Students in 6 schools in our County receive food through the Backpack Program."

- RenElla Crawford, HACAP Director



### Suggested Strategies

#### Individual

- Educational classes (on a healthy diet, food preparation, reading food labels, etc.)
- Providing meals cooked during classes, cooking utensils, pedometers, etc.

### Interpersonal/Organizational

- Getting children involved
  - Incorporate fruit/vegetable breaks in the school day
  - Let them help at farmers' markets (handing out receipts, bagging produce, greeting people, weighing items, etc.)
- Tours through local grocery stores/farms/wholesalers

### Organizational

Free samples/recipes of healthy items

# Spotlight on Success

A 2011 study found success using a combination of farmers' markets, vouchers for healthy food (to be used at the markets) and involvement from the community's youth. Called "The Veggie Project," the goal was to increase the availability of fruits and vegetables to people who lived in a place with few healthy food providers (like grocery stores).

Utilizing the farmers' markets that the community already had, the team worked out a deal to allow vendors to accept \$5 vouchers that the team would distribute. The coupons were given to anyone willing to answer a survey about their personal experiences trying to find healthy food to eat, what difficulties they had, etc. They could finish a maximum of four surveys for a total of \$20 over time.

A Youth Leader Board was also organized to get the kids in the community involved. The board focused on an educational program (teaching kids about how and where

- Coupons to be redeemed for healthy foods/at farmers' markets
- Reorganizing store shelves to put greater emphasis on healthy foods
- Adjusting prices of healthy foods, even for a week at a time to encourage purchasing

### Community

 Posters, fliers, signage around town (needs to be in conjunction with other interventions)

healthy food is grown, nutritional aspects of fruits and vegetables and how to overcome barriers that might stop people from accessing healthy foods), on running the farmers' market (set-up, pricing, marketing, food sales and clean-up), and they were also taken on field trips to local supermarkets and gardens.

In the ensuing farmers' markets, those using vouchers made more purchases than those not using them, and they spent more money overall, as well. Voucher-users were more likely to become repeat customers at the markets, and the youth who used the coupons made more purchase transactions than adults.

The Youth Leader Board was seen as being very positive by the community, increasing children's knowledge about accessibility, availability and affordability of healthy foods. They also reported learning about new types of produce, how to eat healthier and how to change their dietary behaviors.

Freedman, D.A., Bell, B.A. & Collins, L.V. (2011). The Veggie Project: A case study of a multi-component farmers' market intervention. J Primary Prevent, 32: 213-224.



# Health Priority:

# Physical Activity

### The Current Situation

Physical activity is another issue facing many of the rural areas in the United States, contributing to a number of other health topics. Studies have found that a large percentage of the US population does not get the recommended levels of physical activity in a week, as recommended by the Surgeon General (at least 30 minutes of moderate-intensity activity on most, if not all, days of the week). Given how physical activity is intertwined with overall health, it becomes an important and worthy area of focus for future interventions. (McGinn et al., 2007)

Even in children and adolescents, obesity levels have tripled in the past three decades—a number not too dissimilar from the rates of adults. Because of this, increases in chronic diseases and other complications are expected in the population, adding a great burden to the healthcare system and making it imperative that attention be paid to the situation (Carroll-Scott et al., 2014).

In the state of Iowa, over 28% of adults engage in no leisure-time physical activity in their daily lives, and less than a third of all children get daily physical activity. This puts Iowa right in the middle of the list of states when it comes to physical activity levels (BRFSS, 2014). It is better than the national average, though, when it comes to the number of adults who get no leisure-time physical activity (22.6% compared to 32.6% nationally) (BRFSS, 2014).

"Physical activity
environments are places
where people can be
physically active. Of most
interest are places that can
be designed to support daily
activities, such as parks,
sidewalks, trails, schools,
workplaces, playgrounds,
child care settings, and
private recreation facilities."
—Sallis & Glanz, 2009

"In order to promote physical activity in youth it is important that young people are provided with the opportunities to be active within their surrounding social and physical environment."

—Collins et al., 2012

"Obesity prevalence among US children and adolescents has tripled in the past three decades. Consequently, dramatic increases in chronic disease incidence are expected, particularly among populations already experiencing health disparities."

—Carroll-Scott et al., 2014



Washington County, in particular, fares slightly better than the state averages, with 33% of children active every day. However, on top of that, only 30% of sixth, eighth and eleventh graders are physically active up to three days a week, and 37% are active 4–6 days.

Much of the basis of discussion in community meetings dealt with opportunities in the county for boosting and improving ways to achieve physical activity, whether it be through the already-existing environment or new ideas.

Some of the opportunities that were put forth included making sidewalks safer, increasing biking and walking options and making better use of existing spaces.

### Potential Waypoints

 Convene a commission by engaging elected officials, government organizations, schools, media, parents, nonprofits, and academia to collaborate on creating opportunities that will have a measurable impact on the public's physical activities. The commission will identify and define physical activity projects that interface with all of the cities' Comprehensive Plans. "It is essential for people to have indoor and outdoor spaces where they can walk or be physically active. That is why I have volunteered to serve on both the trail committee and the Recreation Center committee in Kalona. Including physical activity in our daily lives has a positive impact on our health."

- Larry Kern, Kalona resident

"I emphasize to people that daily physical activity is an essential nutrient for our body--every bit as important as any vitamin or mineral. Our bodies are innately programmed to thrive--to express health at a very high level. That health is expressed when the body has everything it needs physically, biochemically, and emotionally and when it is coordinated by a nervous system that is functioning without interference. Daily physical activity--ideally a lot of it ranging throughout the day from light to vigorous, is one of the things we need to give our bodies if we want truly vibrant health."

> -Dr. Chris Grier , Bright Futures Chiropractic, Kalona



# **Suggested Strategies**

#### Individual

Classes (for children, adults, seniors, general public)

### Interpersonal

- Give incentives to people in activity groups (pedometers, jump-ropes, tshirts, water bottles, raffle tickets, etc.
- Clubs, music, disc golf, martial arts, drum circles, yoga, PE-like games, 5k event

### Community

- Putting up better signage around existing park spaces
- More signs/interesting sights along walking/biking trails (either for mileage, facts, etc.)

- Figure out what parts of the built environment around town do people use most or underutilize
- Encourage cycling
  - More bike racks
  - Bicycle maintenance classes, spring tune-ups, safety checks
  - Biking groups, cycling "taster" sessions, bike breakfasts
  - Advanced stop lines at intersections, designated bike lanes, better signage to watch out for bikers
- Encourage walking
  - Better utilization/upkeep of trails
  - Walking groups
  - More separation between trail and road
- Provide walking/biking maps

### Spotlight on Success

People living in a housing development in Seattle, Washington, were surveyed to find out what they liked most about their communities and how well the assets of the community helped or hindered them in their ability to get enough physical activity in their day. These included things like inadequate crosswalks, walking trails, the presence of large open spaces and large, old trees.

The study also found that not many residents were too familiar with the benefits of walking and didn't realize the opportunities their existing communities had to encourage physical activity.

They organized local walking advocacy groups where group leaders would lead participants in stretches and would time the walk to help everyone make sure they were reaching their physical activity and walking guidelines (as recommended by the CDC).

Walkers would receive t-shirts, pedometers and other prizes for meeting their individual walking goals—thus helping to boost numbers. Phone call reminders were also made ahead of the groups, and other incentives like raffle tickets also helped boost attendance.

At the same time, they also focused on improving walking routes to schools, organized tea and coffee groups to encourage social support and connection, improved access to places by providing walking maps and walking information and also made the environment safer for pedestrians to walk.

The program was found to be quite successful in increasing participants' walking times per day (64.6 to 108.8 minutes), whether they walked for errands or exercise. More also reached their goals for weekly physical activity and reported that their general health (both physical and mental) improved.

### In Closing

The work of public health is ongoing and constantly changing. There is no simple answer for what determines people's health, so why should the *solutions* to health problems be anything other than complex? As a result, public health entities cannot work alone, *separate* from the community's residents. Instead, there must be a dynamic interaction between the two, always adapting and learning from one another, working together to make the community they share a better, healthier place. The work of those who focus on public health will never really be done, and this document serves as a testament to that. We urge you to use this plan throughout the next five years and beyond so that everyone in 2020 can look back and say that we all made a difference to the health of Washington County's residents.

