

2011-2015

Community Health Improvement Plan



Community Health Needs Assessment Team

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A Thank-You to Our Healthy Community Coalition Steering Committee

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Washington County Healthy Community Organizational Chart



Washington County Health Community Mission and Vision Statement

Vision: *Washington County Healthy Communities: helping individuals reach their highest potential for health.*

Mission: *To promote and foster healthy communities through collaboration and shared responsibility.*



Washington County Healthy Communities Steering Committee Charter Statement

***Vision: Washington County Healthy Communities: Helping Individuals Reach
Their Highest Potential for Health***

***Mission: To Promote and Foster Healthy Communities through Collaboration
and Shared Responsibility***

Purpose - Steering Committee members share in the responsibility of:

- Representing the broad interests of Washington County residents.
- Organizing for the success of the planning and 5 year implementation process of the Washington County Community Health Plan.
- Developing and sustaining partner and community ownership of the Community Health Plan.
- Being a spokesperson in promoting the five-year Community Health Plan.
- Determining measures for evaluating the impact of the health plan.
- Developing a shared vision of the health of Washington County and its people 5 to 10 years into the future.
- Supporting workgroups and/or coalitions that are developed to implement aspects of the plan.
- Committing resources to support the planning, implementation and evaluation of the plan.
- Assessing and making recommendations for program enhancements.
- Recognizing and celebrating community accomplishments.

Participants - Steering Committee Member Composition May Include, but not limited to:

- Education
- Social Services
- Health Care Provider
- Elected Official
- Foundation or Committee Board Member
- Interested Citizen
- Youth
- Media
- Public Health

Meeting Frequency - Quarterly meetings

Established: 1/2011



Overview

The Process: How Did We Get Here?

In the spring of 2010, the Washington County Community Health Needs Assessment process began by developing and distributing the Healthy Community Coalition Survey. Over 300 county residents gave their input on the health issues that affect the people who live in Washington County.

In May of 2010, the Community Health Needs Assessment team was formed, with members consisting of a broad array of community stakeholders. Their purpose was to review the Healthy Community Coalition Survey results and review local and state health data. As a result of reviewing the data, county strengths, resources, and needs were identified.

After considering the results of the county-wide survey, the local and state data, and county strengths and resources, the Community Health Needs Assessment team identified the following health priorities for Washington County:

Health Priority One: Obesity, focusing on

- Nutrition
- Physical Activity
- Built Environments

Health Priority Two: Adolescent Health, focusing on

- Suicide Prevention
- Bullying
- Teen Pregnancy & STD Prevention

Local Discussions of Key Findings by Topic

The Community Health Needs Assessment team addressed all of the topics highlighted below and would like to share a summary of each stakeholder discussion after the data presentation. Even though some health topics were not selected as priorities for this Community Health Improvement Plan, they will continue to have an effect on the health of the citizens of Washington County. Continued community efforts addressing the priorities that have not been chosen are important to continuing toward a healthier Washington County.

Summary: Local Discussions of Key Findings by Topic

Health Indicator Topics Reviewed**	What is Being Done	What Needs to be Done
Social/Economic Factors	<ul style="list-style-type: none"> • Abundance of faith-based organizations to offer support • Government programming for assistance 	<ul style="list-style-type: none"> • More high-paying jobs • Collaboration to bring services to the people • Economic development locally
Physical Activity/Nutrition	<ul style="list-style-type: none"> • Trail systems • City, county and state parks • Swimming pools • Athletic programs for kids • Farmers markets 	<ul style="list-style-type: none"> • Health education • P.E. class for all students • Access to Dieticians • Developing partnerships • Improve dietary habits • Access to low cost/free options for physical activity • Increase physical activity options
Access to Care	<ul style="list-style-type: none"> • Mental Health Center • Hawk-i • Local hospital/clinics 	<ul style="list-style-type: none"> • More mental health services for the youth, where youth congregate • Increase in dental providers accepting Title 19
Adolescent Health	<ul style="list-style-type: none"> • Planned Parenthood • Olweus bullying program • FLASH program • Parents as Teachers program • Home visitation program for new moms 	<ul style="list-style-type: none"> • Parenting classes • Teen pregnancy prevention • Peer support groups • Bullying awareness and prevention • Suicide awareness and prevention • Increased access to Planned Parenthood programs

Summary: Local Discussions of Key Findings by Topic...continued

Health Indicator Topics Reviewed**	What is Being Done	What Needs to be Done
Injury Prevention	<ul style="list-style-type: none"> • Farm safety programs at ISU extension • AgriSafe program • Kid’s safety- ISU extension & FFA • Bullying program 	<ul style="list-style-type: none"> • Interventions aimed at childcare & the workplace • Substance abuse interventions
Environmental Health	<ul style="list-style-type: none"> • Map of trails • Radon testing • County trail plan • “Silver Cord” program for high school students 	<ul style="list-style-type: none"> • Connectivity of trails • Identify barriers to recreation facilities • Access to trail information • Resource sharing • Education on parks & usage
Addictive Behaviors	<ul style="list-style-type: none"> • SAFE coalition • MECCA services • SADD & JEL chapters • Faith-based support • Community mental health services 	<ul style="list-style-type: none"> • Adolescent services • Education in schools • Explore partnerships • Pharmaceutical drug disposal program • Information sharing to clinics and health care providers
Acute & Communicable Disease	<ul style="list-style-type: none"> • Flu vaccines at public health and workplaces • Disease incidence is low 	<ul style="list-style-type: none"> • Resources for Radon Mitigation • Continued public education on prevention of communicable diseases

*Highlighted topics signify the chosen priorities.

**Local, state and federal data is available for each health indicator listed above. Please contact Washington County Public Health to access the data used during the needs assessment process.



The Process: What's Next?

The Community Health Improvement Plan is a partnership among individuals, agencies, and organizations dedicated to improving the health of Washington County citizens. The Community Health Improvement Plan will be a 5 year, community-driven initiative. Two task forces will form and work together to identify goals and strategies for each of the health priorities listed above.

The Benefits of a Community Health Improvement Plan:

There are many benefits to a Community Health Improvement Plan. The benefits include:

- A plan raises awareness in the community of the health status of its residents- what we are doing well and where we need to focus more attention.
- A plan enhances a sense of shared community responsibility to address unmet health needs.
- A plan develops a coordinated, community-wide effort directed at a few top health priorities.
- A plan creates new, innovative strategies that fit the unique needs and assets of Washington County.

Washington County: Who We Are

- **Demographics:** Population – 21,457 (2005 estimate). Estimated race distribution of Washington County residents in 2005: 98.6% White, 0.5% Black or African American, 3.8% Hispanic, 0.2% American Indian, 0.3% Asian/Pacific Island.
- **Socioeconomic characteristics:** Average family income in 2000 for a White family was \$45,866, for a Black family was \$39,583, and for a Hispanic family was \$30,096. In 2008, 7.6% of Washington County citizens had incomes at or below the poverty level.
- In 2008, 30% of mothers utilized the WIC (Women/Infants/Children) program.
- For the 2009-2010 school year, the percent of students eligible for free or reduced lunch ranged from 17% to 50%, depending on the school district.
- The unemployment rate increased 0.6% from May 2009 to May 2010. The unemployment rate was 4.6% in 2009 and 5.2% in 2010.



Health Priority 1 Obesity: Nutrition, Physical Activity, & Built Environment

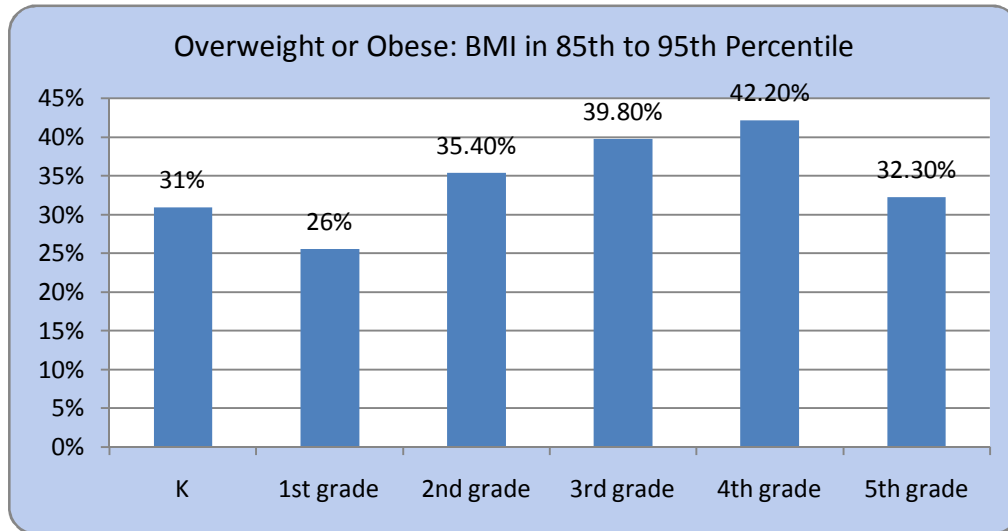
Background and Supporting Data: The obesity epidemic is one of the most important health challenges facing Washington County, the state of Iowa, and the nation. Obesity is defined as excess body fat. Nationally, one in every three children ages 2-19 is overweight or obese. (White House Task Force, 2010). An alarming one third of all children born in the United States in 2000 are expected to develop diabetes during their lifetime. (White House Task Force, 2010). And it is estimated that the current generation may be on track to have a shorter lifespan than their parents. In Iowa, the number of adults (over 18 years old) who are overweight or obese has increased by 36% over the last 10 years. (Iowans Fit for Life, 2009). (See graph #1). In a sample of Iowa children in 2005, 37.7% were either at risk for being overweight or were overweight. (Iowans Fit for Life). In the Mid-Prairie school district in Washington County, the percentage of overweight or obese students is similar to the Iowa trend. (See graph #2). An alarming 42% of fourth graders in Washington County are either overweight or obese. (Iowa Youth Survey, 2008). Obesity is costly, as it reduces productivity, increases the risk for chronic disease, and drives up medical expenses. Obesity leads to an increased risk for chronic illness, such as Diabetes, heart disease, stroke, hypertension, and some cancers. Truly, we face an obesity crisis in our county, our state, and our nation.

GRAPH 1: IOWA-- OVERWEIGHT & OBESITY RATES FOR ADULTS BY GENDER, 2008

	IOWA %	US %
Male	71.4%	69.0%
Female	51.0%	52.2%



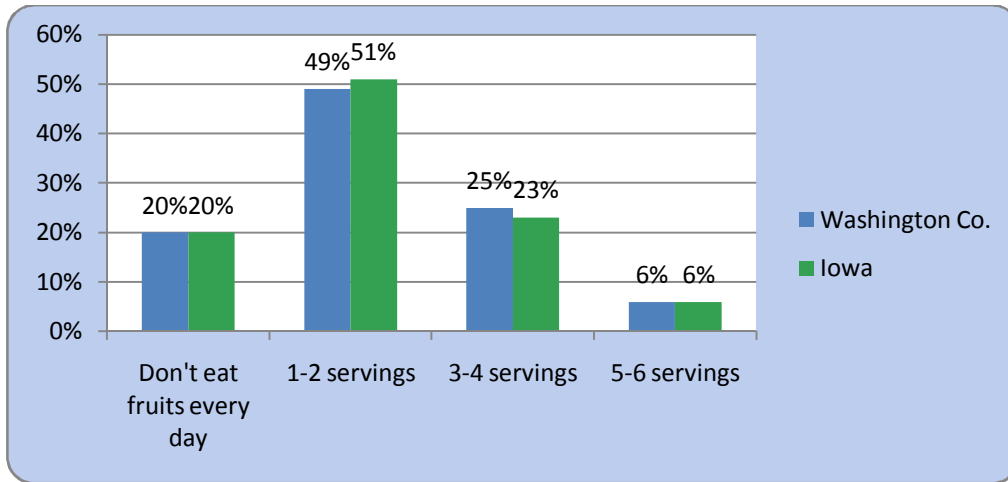
GRAPH 2: MID-PRAIRIE SCHOOLS: STUDENT BMI (BODY MASS INDEX)



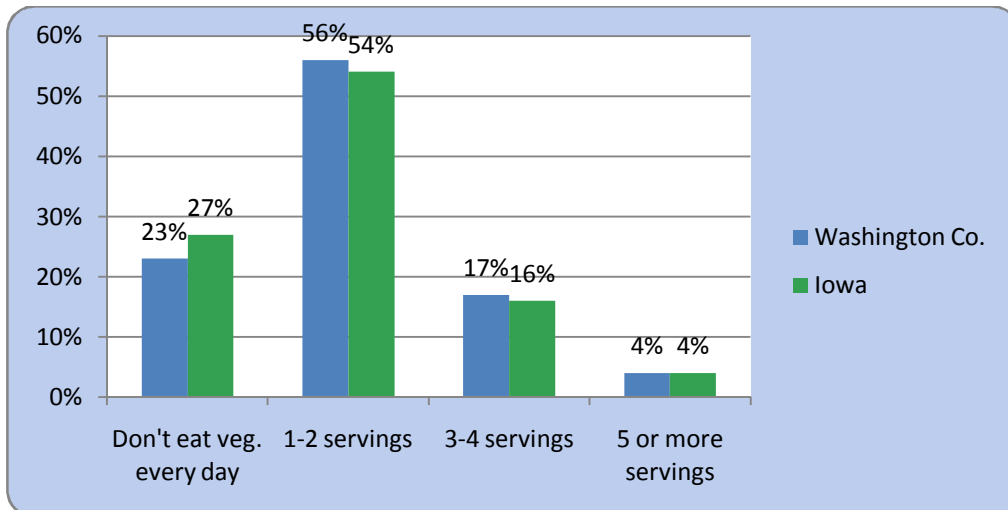
Nutrition The pace of modern life has quickened, affecting *what* and *where* we eat. Americans now consume more fast-food and sugar-sweetened beverages, eat outside the home more frequently, and spend less time eating family meals. (White House Task Force, 2010). Currently, American children and adolescents eat far fewer quantities of fruits and vegetables than recommended in the *Dietary Guidelines*. (White House Task Force, 2010). On average, U.S. children consumed only 64% of the recommended level of fruit and 46% of the recommended level of vegetables in 2003-2004. (White House Task Force). Washington County students, (grades 6, 8, and 11) consume very few servings of fruits. Approximately 70% of Washington County students consume 2 servings of fruit or less per day. (Iowa Youth Survey, 2008). (See graph #3). Approximately 75% of Washington County students consume 2 servings of vegetables or less per day. (See graph#4).



GRAPH 3: WASHINGTON CO: SERVINGS OF FRUIT CONSUMED PER DAY BY STUDENTS



GRAPH 4: WASHINGTON CO.: SERVINGS OF VEGETABLES PER DAY BY STUDENTS

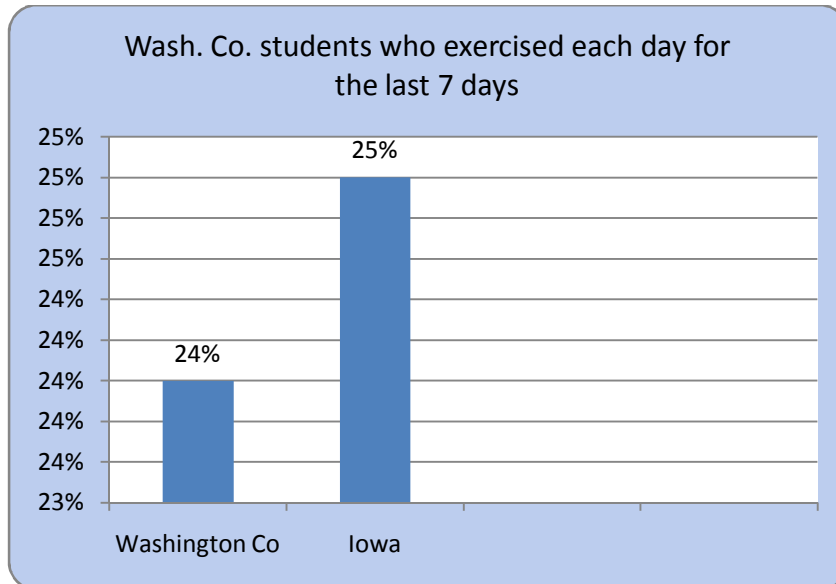


Physical Activity Physical activity is an essential component of a healthy lifestyle. Physical activity helps control weight, builds muscle, reduces fat, and contributes to a healthy-functioning cardiovascular system. Physical activity is related to improvements in mental health, as well. A recent study showed that adolescents now spend more than 7 hours per day watching television, DVDs, movies, or using a computer or a mobile device such as a cell phone



or MP3 player. (White House Task Force, 2010). Older adolescents are less likely to be physically active, compared to younger children. Twenty-four percent of Washington County students report that they exercise each day. This data nearly matches the rate that Iowa students, in general, exercise. (See graph #5).

GRAPH 5: WASHINGTON COUNTY STUDENTS WHO EXERCISED EACH DAY



Built environments “Environment” refers to our daily surroundings. It includes workplace environments, school environments, and the built environment. The built environment consists of all man-made structures, including transportation, streets, schools, office buildings, houses, trails, and parks. The Task Force on Community Preventive Services recommends the creation of, or enhanced access to, places for physical activity. The task force conducted a systematic review and found strong evidence that creating or enhancing access to places for physical activity was effective in getting people to exercise more. (CDC, 2010.) It is generally agreed by public health officials that our environments need to be altered to reduce unhealthy options and highlight healthy options.



Goal:

**WASHINGTON COUNTY RESIDENTS WILL ACHIEVE AND MAINTAIN
HEALTHY WEIGHT**


Objective 1: By Dec.31, 2011, Washington County will demonstrate a collaborative initiative that addresses obesity in Washington County.

Suggested Strategies:

- Create a task force to bring together county citizens and stakeholders.
- Utilize joint planning to create an annual “work plan” or Action Plan.
- Explore the feasibility of establishing a partnership with a 501(c)3 status organization.
- Pursue grant funding to create and sustain new initiatives.
- Commit to utilize interventions that have been “proven to be successful” or evidence-based practices.
- Use mass media to raise awareness of obesity prevention strategies and to disseminate messages promoting optimal nutrition and the benefits of physical activity.



- Utilize surveillance and monitoring of Body Mass Index (BMI) to establish baseline data, assess progress, and measure success.
- Promote and develop wellness policies to sustain change at the systems and organizational level.
- Advocate for environments that support healthier lifestyle choices .

 **Objective 2:** By December 31, 2015, at least 4 new initiatives will be implemented to improve the nutrition of Washington County residents.

Suggested Strategies

- Create policies to increase access to healthy food choices in local schools and workplaces.
- Provide educational opportunities on healthy eating.
- Create student-led gardens.
- Develop tools and resources for workplaces to implement breastfeeding- friendly policies.
- Celebrate workplaces that support breastfeeding.
- Advocate for and support policies that are consistent with the Baby-Friendly Hospital © initiative.
- Create policies with local concession stands to provide a “better for you” snack option.
- Establish partnerships with local growers to implement new, school-based initiatives that increase availability of fresh produce at schools.
- Conduct a nutrition assessment of a local restaurant, grocery store, or convenience store. Assess the feasibility of using the NEMS tool.


 **Objective 3:** By December 31, 2015, at least 3 new initiatives will be implemented to promote daily physical activity for Washington County residents.

Suggested Strategies

- Create and implement policies that limit screen time in licensed childcare facilities.
- Develop an awareness campaign to educate parents/caretakers about the hazards of inactivity due to screen time.
- Conduct a county-wide “TV Turn-Off Challenge” to educate citizens and facilitate changes in personal behavior.



- Create and implement a district- wide policy supporting daily physical education classes at Washington County schools.
- Create partnerships to support the purchase of necessary physical education equipment.
- Increase access to physical activity opportunities in the community.
- Develop a central repository of physical activity resources.
- Assess the feasibility of implementing Safe Route to Schools in one community.
- Promote Lighten Up Iowa to Washington County residents.

 **Objective 4:** By December 31, 2011, collaborate with the Washington County Trails Council to implement 2 new strategies to increase the “walkability”/”bikability” of Washington County.

Suggested Strategies

- Assess county trail usage via electronic monitoring equipment.
- Promote trail connectivity from one community to another.
- Implement public awareness campaign, featuring free or low cost recreation options.
- Promote Bike to Work Week to Washington County residents.



Health Priority 2 Adolescent Health:

Teen Pregnancy & Sexually Transmitted Diseases, Bullying and Suicide Prevention

Background and Supporting Data: The health and well-being of Washington County teens has a major impact on the overall social and economic health of our community. Today's teens are tomorrow's workforce, parents, and leaders, and their future is shaped by the opportunities we create for them today. Most parents make significant personal investments in their children's future. Yet as a society, we are not making the investments necessary to ensure the health and well-being of all of our youth.

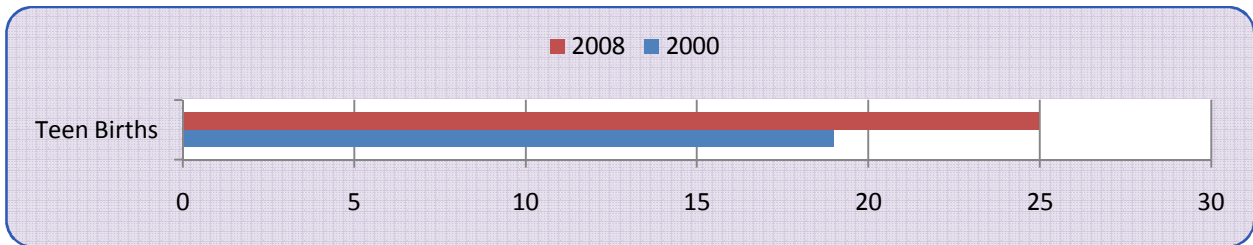
Each year in the United States, about three-quarters of a million adolescents younger than 20 years become pregnant, resulting in the highest adolescent pregnancy rate of any developed nation (Guttmacher Institute 2006). Seventy-eight percent of these pregnancies are unplanned, and these early, unplanned pregnancies carry great costs, both social and economic, for the individual and for society (Henshaw 2001). Of the 15 million new cases of sexually transmitted disease (STD) in the United States each year, one-fourth occurs in teenagers (CDC 2000). Compared to older adults, adolescents and young adults (ages 10-24) are at higher risk for acquiring STDs because they are more likely to have multiple sexual partners, engage in unprotected intercourse, and may have higher risk partners (CDC 2001).

One of the unfortunate experiences that mark many childhoods is bullying. According to the American Academy of Child and Adolescent Psychiatry, close to half of all children are bullied at some point while they are at primary or secondary school. At least 10 percent of children are bullied regularly. Bullying is a truly serious problem in schools around the country, and it can be rather harmful, long term, to children. It teaches them to take a certain view of what is normal in relationships with other people, and it can also damage their own self-image in ways that can affect them for life. Children who are bullied can be stunted emotionally and socially, as well as see their schoolwork suffer. In some cases, serious depression and attempted suicide can result from being bullied (www.bullyingstatistics.org).

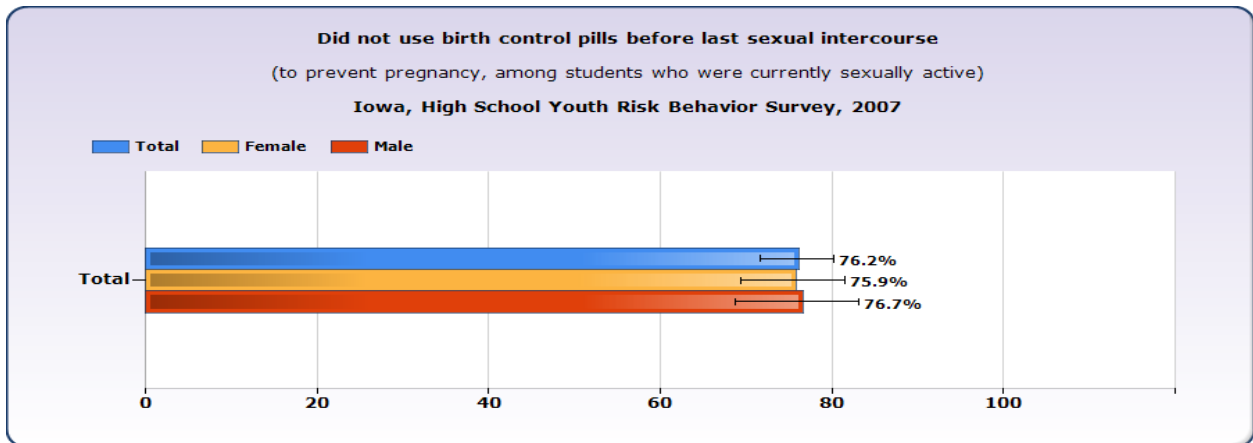


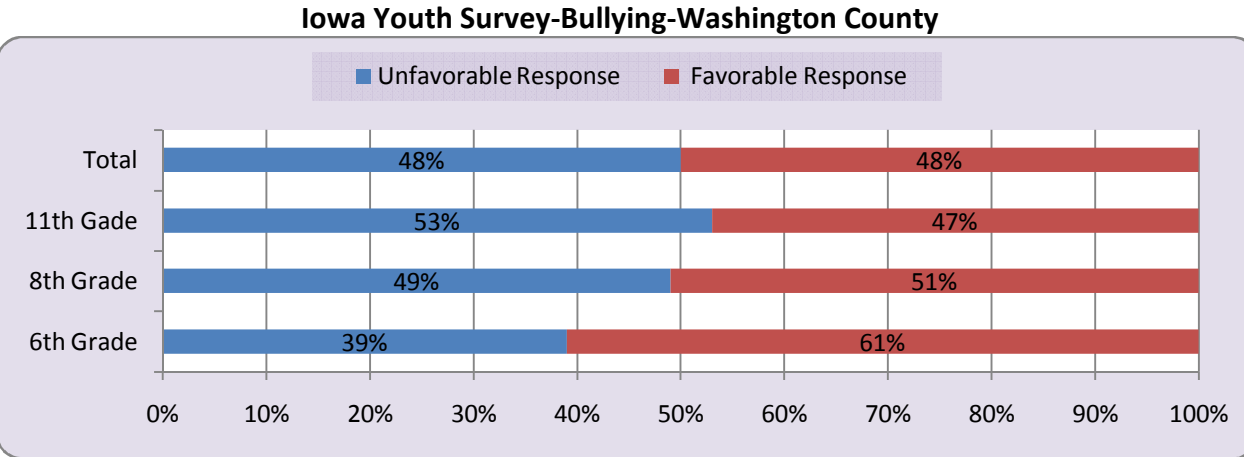
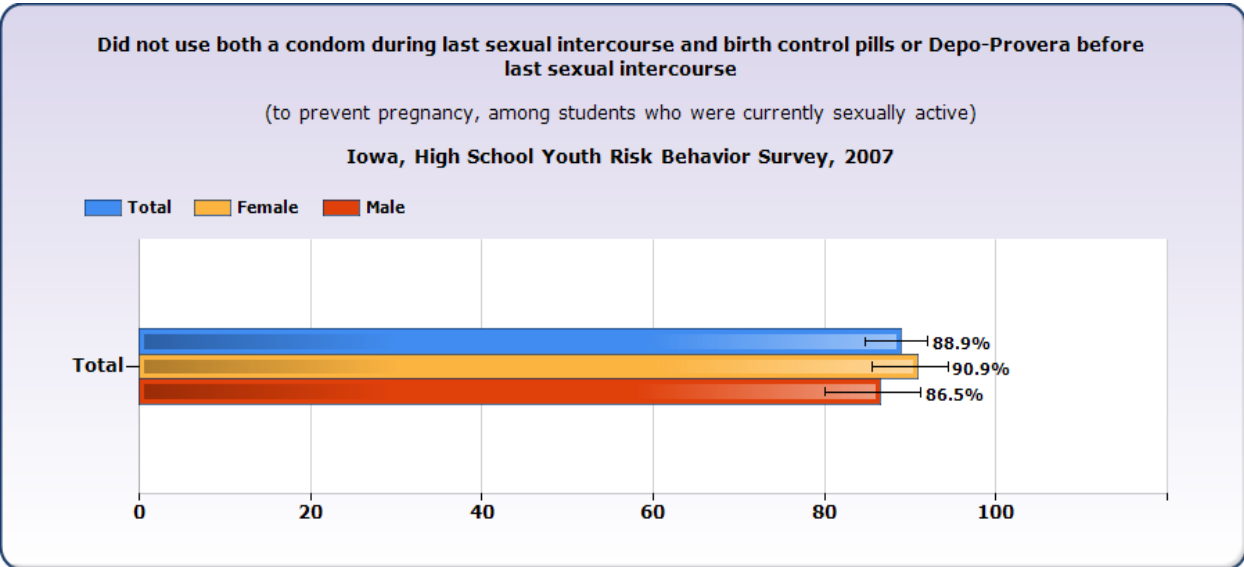
According to the National Institute of Mental Health, scientific evidence has shown that almost all people who take their own lives have a diagnosable mental or substance abuse disorder, and the majority has more than one disorder. In other words, the feelings that often lead to suicide are **highly** treatable. Now the eighth-leading cause of death overall in the U.S. and the third-leading cause of death for young people between the ages of 15 and 24 years, suicide has become the subject of much recent focus (National Alliance on Mental Illness).

Washington County Teen Births



According to Iowa Kids Count 2008, Washington County had a documented 35.9% increase in Teen Births from 2000 to 2008.

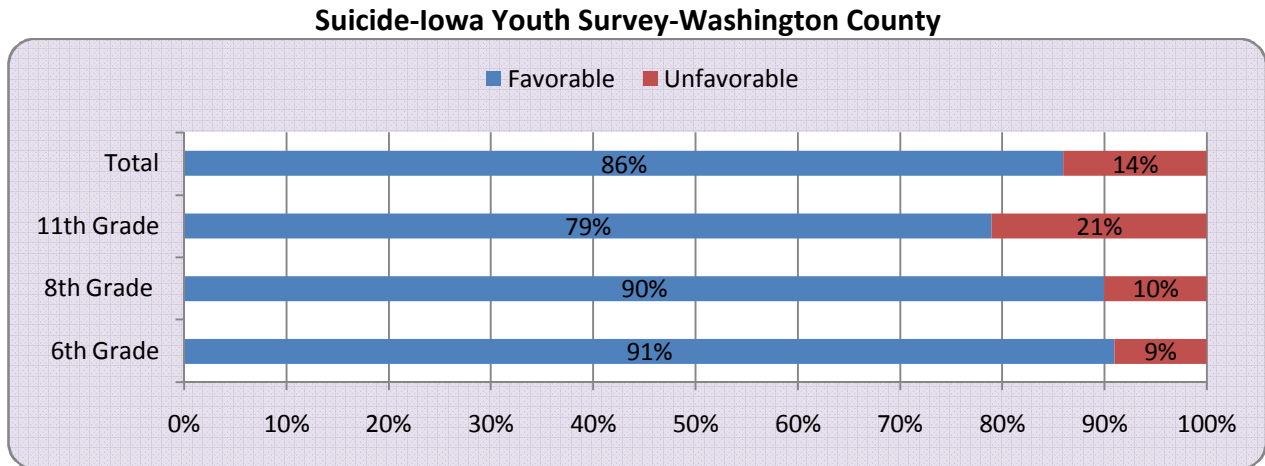




When students were asked: In the last 30 days, how many times have you been bullied at school in the ways listed: I was called names, was made fun of, or teased in a harmful way; other students left me out on purpose, excluded me from their group of friends, or completely ignored me; I was hit, kicked, pushed or shoved around, or locked indoors; other students told lies, spread false rumors about me, and tried to make others dislike me; I was made fun of because of my race or color; I was made fun of because of my religion; other students made sexual jokes, comments or gestures that hurt my feelings; I have received a threatening or hurtful message from another student in an email, on a website, on a cell phone, from a pager text messaging, in an internet chat room, or in instant messaging. **Responses:** "0 times" is



coded as favorable and any response indicating one or more times of being bullied is coded as unfavorable.



When students were asked: In the last 12 months, did you make a plan about how you would attempt suicide? Have you ever tried to kill yourself? **Response:** “No” is coded as favorable and “yes” is coded as unfavorable.

Goal:

RESIDENTS OF WASHINGTON COUNTY WILL SUPPORT AND PROMOTE HEALTHY BEHAVIORS AS IT RELATES TO ADOLESCENT HEALTH

Objective 1: By December 31st 2011, Washington County will demonstrate a collaborative initiative that results in an enhancement of adolescent health

Suggested Strategies:

- Create a healthy youth task force and bring together interested citizens to improve coordination of adolescent health resources.
- Assure youth representation on the developed taskforce.





- Encourage joint planning to create annuals task force action plans.
- Explore the feasibility of establishing a partnership with a 501(c)3 status organization.
- Pursue grant funding to create and sustain community-wide initiatives related to adolescent health.
- Utilize proven programs and practices for successful adolescent health outcomes.
- Promote consistent adolescent health prevention messages via local media venues

Objective 2: By December 31, 2015, Washington County will adopt four new initiatives that promote protective factors among youth to decrease teen pregnancy and sexually transmitted diseases.

Suggested Strategies:

- Implement service learning programs that include volunteer opportunities with time built into the activity for reflection and learning.
- Explore the feasibility of establishing mentoring programs
- Implement on-going after school activities that are linked with community resources (schools, churches, synagogues, etc.) to engage youth.
- Provide supervised volunteer community service opportunities/activities for youth.
- Implement programs that promote abstinence from substance abuse
- Implement child/parent connectedness educational programs
- Implement programs designed to improve access and/or provide comprehensive sexuality education.
- Assure that the teens have received instruction in technically /medically accurate and up to date basic reproductive health (e.g., growth, development and maturation).
- Provide case management services to coordinate the variety of services that pregnant or parenting teens need and work with teen mothers to prevent subsequent pregnancies and encourage school completion.

Objective 3: By December 31, 2015, At least 4 Washington County educational institutions or child care organizations will develop and implement a bullying prevention policy



Suggested Strategies:

- Inventory educational institutions and child care organizations current policies/practices that promote an all-inclusive bullying prevention program.
- Develop tools and resources for educational institutions and child care organizations encouraging bullying prevention strategies.
- Promote and encourage the concept of shared responsibility between parents and schools assuring an environment characterized by firm limits against unacceptable behavior as well as warmth, positive interest and involvement with adults.
- Increase awareness and knowledge of problems related to bullying as well as dispel myths about the causes of bullying.
- Engage youth in discussions about solutions to bullying.
- Promote training and continuing education in bullying prevention strategies for educators, faith-based community representatives, parents and health professionals.



Objective 4: By December 31, 2015, Washington County adolescents who state that they have made a plan or attempted suicide will decrease by 50%.

Suggested Strategies:

- Implement programs that build problem solving and conflict resolution skills
- Promote public awareness that suicide is preventable
- Implement programs that promote abstinence from substance abuse
- Expand awareness of and enhance resources in Washington County for suicide prevention programs and mental/substance abuse assessment and treatment.
- Develop and implement strategies to reduce the stigma associated with mental illness, substance abuse, suicidal behavior and accessing services.
- Develop and implement effective training programs for community members on how to recognize, respond to and refer people showing signs of suicide risk.
- Develop and implement programs that restrict the access to highly lethal methods of suicide.

Community Health Plan Resources

- ❖ CDC: Guide to Community Preventive Services, last updated 3/30/10.
- ❖ Iowa Department of Public Health, "Obesity in Iowa: A Statewide Epidemic. "





- ❖ Iowans Fit for Life, Iowa's Comprehensive Nutrition and Physical Activity Plan, retrieved online 7-6-10.
- ❖ White House Task Force on Childhood Obesity: Report to the President, "Solving the Problem of Childhood Obesity within a Generation." 2010.
- ❖ World Health Organization, "Obesity and Overweight", Fact sheet No. 311, Sept. 2006.
- ❖ United States Preventive Services Task Force
- ❖ American Academy of Pediatrics
- ❖ IDPH: Blue Cornerstone, 2010
- ❖ Trailnet: Healthy, Active, & Vibrant Community Toolbox, 2009
- ❖ White House Task Force on Obesity, 2010
- ❖ CDC: Healthy Communities
- ❖ Trailnet: Healthy, Active, & Vibrant Community Toolbox. 2009
- ❖ CDC: Recommended Community Strategies, 2009
- ❖ Iowans Fit for Life: Iowa's Comprehensive Nutrition and Physical Activity Plan
- ❖ CDC: Recommended Community Strategies
- ❖ CDC: Task Force on Community Preventive Strategies
- ❖ CDC: Places for Physical Activity: An Action Guide, 2008.
- ❖ Oneida County Community Health Plan 2007-2011.
- ❖ Iowa Youth Survey, 2008.
- ❖ Minnesota Department of Health
<http://www.health.state.mn.us/divs/fh/mch/fhv/strategies/tppinterventions.html>
- ❖ The Community Guide: What Works to Promote Health www.thecommunityguide.org
- ❖ Improving the Health of Adolescents and Young Adults: A Guide for States and Communities
<http://www.cdc.gov/healthyyouth/AdolescentHealth/Guide/order.htm>
- ❖ U.S. Department of Health and Human Services: Take Action Against Bullying
<http://mentalhealth.samhsa.gov/publications/allpubs/bullying/SVP-0056.pdf>
- ❖ The Surgeon General's Call to Action to Prevent Suicide, 1999
<http://www.surgeongeneral.gov/library/calltoaction/calltoaction.pdf>