

2019-2024

**DES MOINES VALLEY
PUBLIC HEALTH**
(COTTONWOOD AND
JACKSON COUNTIES)

DEVELOPED 2019

ADOPTED DECEMBER, 2019



COMMUNITY HEALTH IMPROVEMENT PLAN



Public Health
Prevent. Promote. Protect.

DVHHS Public Health Mission: Protect and Promote Health through Partnerships and Prevention



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CORE TEAM MEMBERS

2018-2020 Core Team Members

- Des Moines Valley Health and Human Services- Kelsey Andrews, Luke Ewald, Angela Naumann, Mary Bezdicek, Sonya Becker, Craig Myers, Jessica Matt, Lindsay Chapman
- DVHHS Board Members- Phil Nasby, Donna Gravely, Larry Anderson and Kevin Stevens
- Sanford Jackson- Jessica Grant
- Windom Area Health- Amber Hughes, Shelby Medina
- Sanford Westbrook- Gordon Kopperud
- Jackson County Schools- Alyssa Anderson
- Windom Area Schools- Caitlyn Gilbertson, Melissa Pletcher, Amy McNamera
- Mountain Lake Public Schools- Amy Hartzler
- Jackson County Sherriff's Department- Shawn Haken
- Alternative Learning Center- Rachel Cox

- Family Service Network- Katie Theisfeld, Angie Titus, Bonnie Traetow
- Cottonwood County Probation- Jenny Quade
- Other area partners- Janet Anderson, Courtney Newgard, Lori Thom

Welcoming partners to invite more members and join along the process

The development of this community health improvement plan was led by a core team, which would not have been possible without input and guidance from community members and partners identified in the Community Health Assessment.

Executive Summary

Minnesota community health boards have been required to engage in a community health improvement process since the Local Public Health Act of 1976. The Cottonwood and Jackson Community Health Improvement Plan is the culmination of a process led by the Des Moines Valley Health and Human Services Public Health Department (DVHHS). It is based on the results of a Community Health Needs Assessment conducted in 2018/2019 and seeks to improve the health of Cottonwood and Jackson County residents. Health data and community perceptions were reviewed and two priority health problems were chosen.

The top two most important community health issues identified were:

- 1) Mental Health
- 2) Youth Vaping and Substance Abuse

The plan outlines how DVHHS, partners and stakeholders will address these priority health issues over the next three to five years. Cottonwood and Jackson County residents and community leaders are encouraged to use this plan as a tool to propel positive health outcomes.

Cottonwood and Jackson County Snapshot

What does Cottonwood and Jackson County's look like?

**Cottonwood and Jackson County are primarily made up of rural farming communities.*

**The largest employers are manufacturing and meat packing facilities.*

**2017 Census data (from MDH county health tables)*

****Combined data for both counties****

Population: 21,241

Aging Population: *22.2% are 65 and older which is up 1.7% from 2011*

15.4% are 65 and older in the state of MN

Ethnicity/Race:

90% White (is a decrease by over 5% since 2011)

1.2% Black/African American (increase by 0.5% since 2011)

0.4% American Indian/Alaskan Native (slight increase from 2011)

2.8% Asian/Pacific Islander (slight increase from 2011)

5.8% Latino (increase of 1% since 2011)

Socioeconomic Demographic

30.6% of resident living at or below 200% of poverty (25.3% average for Minnesota)

8.7% of residents 25 years and older with less than or equal to high school education or equivalent (7.2% average for Minnesota).

From 2010 to 2018 free and reduced meal eligibility rates increased from 44.2% to 45.3%

Education

20.3% hold Bachelor's Degree's compared to the 34.8% average for Minnesota

Introduction

The Public Health Accreditation Board (PHAB) defines a community health improvement plan (CHIP) as “a long-term, systematic effort to address health problems on the basis of the results of assessment activities and the community health improvement process. This plan is used by health and other governmental education and human service agencies, in collaboration with community partners, to set priorities and coordinate and target resources. A CHIP is critical for developing policies and defining actions to target efforts that promote health. It should define the vision for the health of the community inclusively and should be done in a timely way.”

For the plan to be effective it requires thoughtful review of quantitative and qualitative health data along with input from community leaders, decision-makers, educators, health care professionals, service providers, community organizations and businesses. Input from over 250 of these community members were examined by the DVHHS Public Health Director, staff, community leadership team and DVHHS board members in order to identify the current and pressing top community health needs. To meet these needs, evidence-based strategies will be developed and implemented to address the local conditions contributing to or causing these health problems. While Public Health staff will serve as the cornerstone for driving the work, success lies in broad-based strategies that encompass the collaboration of many different community partners.

Health Inequities

A 2017 report published by the Minnesota Department of Health Office of Rural Health and Primary Care highlighted the many health disparities that rural residents in Minnesota face: lower education, higher poverty rates, fewer providers, higher obesity rates, more food deserts, higher smoking rates, and higher mortality rates. Rural adults are more likely to have a poorer health status and higher incidence of chronic disease. Rural residents also tend to be older, poorer and have fewer options for access to medical, dental, and mental providers.

In Jackson and Cottonwood Counties there is a higher rate of adult obesity, a higher rate of physical inactivity, and lower rate of access to exercise than the state average. You can also see in the above snapshot of Cottonwood and Jackson Counties that there is a higher percentage of people living at or below 200 percent of the poverty rate than the state average. The average income for households in both counties is almost \$20,000 lower than the state average.

Cottonwood and Jackson Counties also have an increasing rate of aging population and a growing diverse population. The teen birth rates for the two counties are above the state

average and in Cottonwood County there is a 44 per 1000 rate among Hispanic teens for birth rate. Children living in poverty are higher in Cottonwood County, which we see reflected by our (WIC) Women, Infant and Children numbers along with our free and reduced lunch rates.

Our tobacco rate among adults in our two counties is the same as the state average, but still has lots of work to be done with the rise of e-cigarettes. Alcohol impaired deaths is higher in Cottonwood County by almost double then the state rate.

In our two counties we also see a higher rate of heart disease and diabetes. With lower access to primary care providers, dental providers and mental health providers, make transportation a concern with people needing to travel many miles to see a specialist. Mental Health access in our two counties is very limited and hinders residents from seeking the care they may need or benefit from. Along with long travel distances to providers many of our residents face the difficulties of having reliable transportation to get to the providers.

Assets and Resources

Within the last ten years there have been many improvements in both counties to help reduce obesity rates and hypertension with the help of the Statewide Health Improvement Partnership and along with the Community Wellness Grant. Being in rural MN we have built some great partnerships and have been able to create walkable and bicycle friendly communities.

Another asset of the two counties is how closely the counties can work together. Being in Rural Minnesota the residents of the counties face the same challenges and are able to work together towards solutions. When gathering input from the residents of the counties it is apparent that we have lots of community events that bring people together and help give them a voice and an opportunity to connect with other people.

Some of the smaller communities while doing the assessment have grown with businesses and have new and more opportunities. Each county has farmer markets to access healthy options of food, have mapped trails and/or walking areas, and have a small grocery store or close access to food. Some other assets that people reported are listed below within the results.

Planning Process

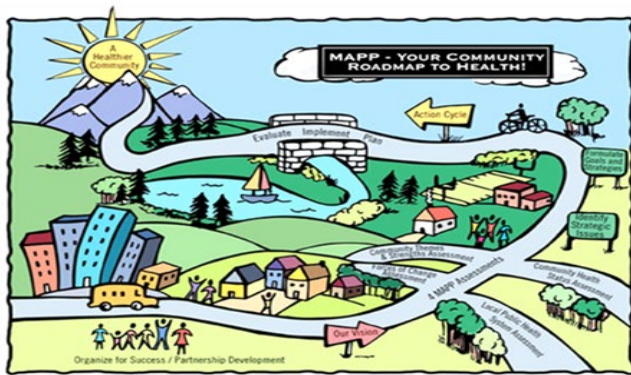
DVHHS Public Health completed a Community Health Assessment in 2018/2019 that included an analysis of demographic and economic profiles, quantitative and qualitative health status data and community survey results based on resident concerns about health issues and

quality of life. The Ten Essential Public Health Services and Mobilizing for Action through Planning and Partnerships Assessment were utilized during this process.

Mobilizing for Action through Planning and Partnerships (MAPP) is a community-driven strategic planning process for improving community health. The MAPP tool was developed by the National Association of County and City Health Officials (NACCHO) in cooperation with the Public Health Practice Program Office and Center for Disease Control and Prevention (CDC). The vision for implementing MAPP is: "Communities achieving improved health and quality of life by mobilizing partnerships and taking strategic action."

As we were gathering data and looking at the different data profiles that were out there we met with each hospital and talked with schools and community partners to insure everyone had the same data. We asked for input on health issues to gather data on and get more input on.

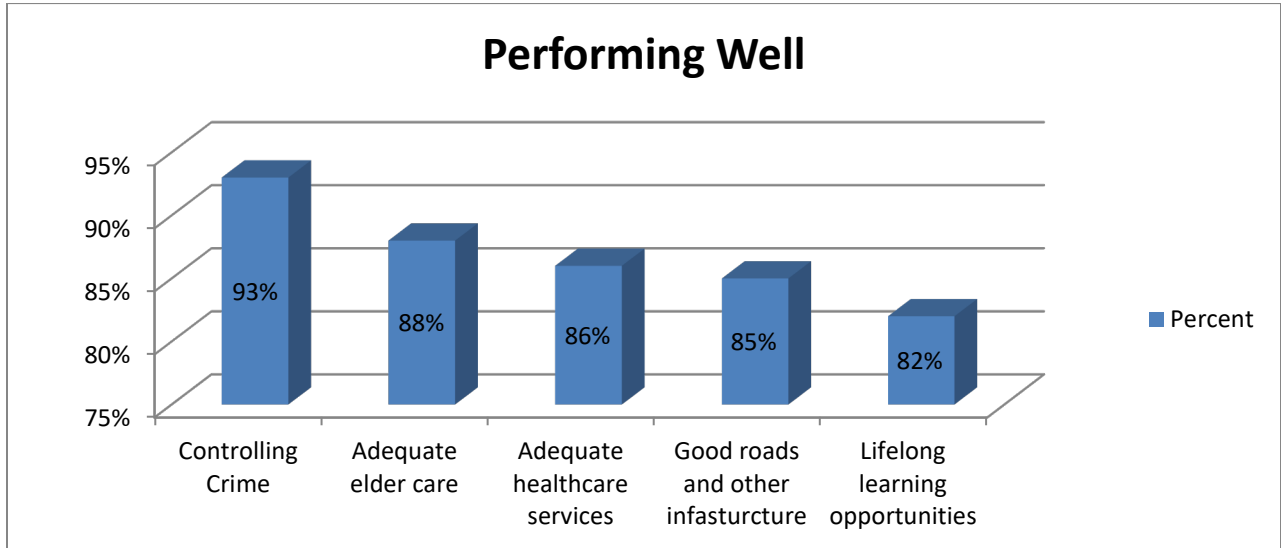
Along with looking at the data, we engaged the community by seeking their opinions on what they thought assets of the community were along with areas they would like to see improvement on. We did this by having a presence at the farm and home shows, the county fairs, increasing social media outreach, and radio outreach. We also connected with our partner hospitals to have a team approach.



Community Survey Results

Using the Healthy People 2020 approach to social determinants of health, five key areas (determinants) considered in the community assessment process (survey) included: Economic Stability, Education, Social and Community Context, health and Health Care and Neighborhood and Built Environment. Out of fifteen choices, respondents were asked the five things they liked most or that the community is performing well at. The top choices were: controlling

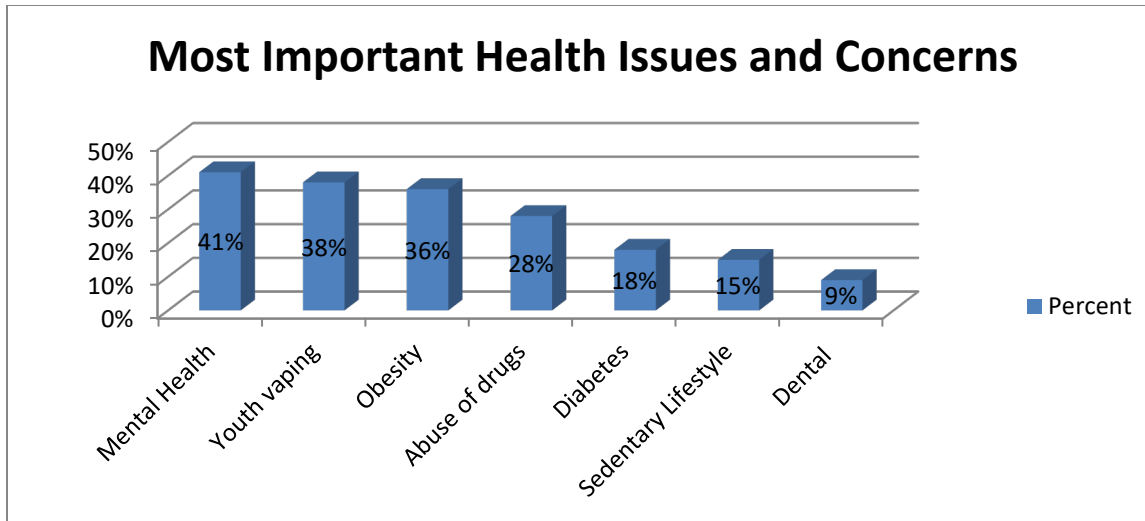
crime, adequate elder care, adequate healthcare services, good roads and other infrastructure, and lifelong learning opportunities.



Also 84% of those asked agreed that they were able to make a positive community impact. 86% of those asked agreed that residents are able to work together effectively. One benefit of living in rural areas of the state is that everyone seems to be able to come together to work on what needs to be done.

When asked the five most critical issues that people see in our area there were said to be: Healthcare, jobs, economic development, affordable housing, opioids and drug abuse, mental health, barriers due to race, and availability of childcare.

When surveyed on the most important health issues and concerns in the their county the top responses were: mental health, youth vaping, obesity, abuse of drugs, diabetes, and sedentary lifestyle.



When looking at the data collected some themes that came to the top were mental health, especially access to mental health. Some of the critical issues could then lead into causes of mental health concern, like not having a job, not having affordable housing, drug use, and having barriers to access. Another theme we came to was that as a whole the state has done lots of work to reduce tobacco use, which we have reduced tobacco use, but we have seen a switch to e-cigarette use, along with it affecting the youth. Using e-cigarettes and vaping can also lead to drug use and then lead to mental health issues.

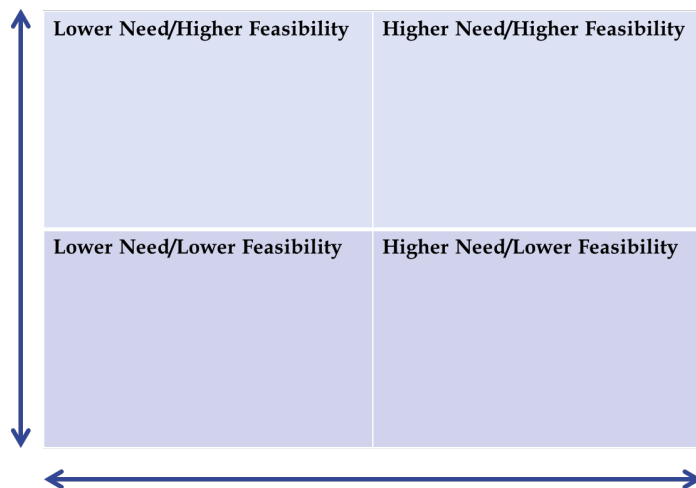
Once the data was collected from the community health assessment along with other data from the state we were able to meet with the team along with show the community what areas of concern came to the top along with what areas the community is doing well at. Knowing the importance of promoting the good things we have in our community to help build community strength and support. After we had a list of priority areas we gathered again for a meeting to prioritize and decide.

Prioritization Process

The DVHHS planning committee, along with the Public Health Director, DVHHS staff, community partners, and some community members examined the community health assessment findings in conjunction with the community health survey. We also looked at the Jackson Sanford Hospital Needs Assessment, Westbrook Sanford Hospital Needs Assessment, Windom Area Hospitals Carrot Health Data. Taking with each of the hospitals it was clear that Mental Health was a concern had by all and the data backed up the need to do something. The group then took all the data into consideration and then used a prioritization matrix to evaluate the health priorities based on actual need and the real ability to effect change in the particular area. The members who were not there were emailed to be able to give input. Since the prioritization we have added members and they were able to get caught up by reviewing data

and how the team came to the top 2 priorities of what the community should come together and work on.

Along with looking at the data we looked at how these issues affect people differently. Mental Health does not discriminate and so it was clear that working on this concern could help and affect a lot of residents in our counties. Not only trying to remove the stigma around mental health but then looking at access to mental health care tied in with transportation and how that can limit those who have lower income in accessing care and treatment. When looking at vaping especially with youth for some it can be those who are in poverty and are facing a multitude of many other issues at home. Youth vaping also may not be tied to anything beside peer pressure, but again it is affecting a vulnerable population our youth.



As a result of this evaluation and taking into account public input these ten issues were identified as the top health priorities in Cottonwood and Jackson Counties.

- -Mental Health
- -Youth vaping
- -Obesity
- -Substance Abuse
- -Diabetes
- -Sedantary Lifestyle
- -Dental
- -Transportation
- -Immunizations
- -Hypertension

Looking at the top ten we have decided to work on the top two with the help of our community partners. We have also decided to expand on youth vaping to make it youth vaping

and substance abuse. This way we can focus on vaping, tobacco use, and drug use.. We concluded this after looking at the School Student Health Survey and seeing how many students are dealing with lots of different issues that will have an affect on their futures. Once we finalized the list of the top ten and especially the top two we wanted to work on we sent our information and how we came to the decision to partners. We then asked for who wanted to continue to be at the table or if they could think of someone who needed to be at the table.

Priority Area #1 Mental Health Awareness

Looking at the survey done by Public Health, the Adult Health Survey, the Student Survey and talking with our hospital partners it was clear that mental health is an issue that can affect everyone, not just those suffering from a mental health issue. Not only does mental health affect adults but it affects youth and can affect their long term physical health as seen by Adverse Childhood Experience reports. Below is data gathered from the Student Surveys and then below that is the adults survey results. It is clear that access is an issue when it comes to Mental Health, we will strive to keep pushing for more providers and improved access, but our role as a team will be to promote mental health services and decrease the stigma.

Cottonwood County Student Survey Data

Jackson County Student Survey

I feel safe at home (disagree or strongly disagree)	5th Grade			2013	2016	2019
	2013	2016	2019			
	4%	1%	1.50%	1.20%	5%	3.30%
	8th Grade			2013	2016	2019
	3.10%	1%	4.50%	6.10%	6%	0
	9th Grade			2013	2016	2019
	3.50%	2%	3.90%	1.10%	1%	3%
	11th Grade			2013	2016	2019
	1.20%	1%	1.50%	3.50%	1%	1.40%
	5th Grade			2013	2016	2019
During the last 30 days how often have you been cyber bullied? (at least once)	15.80%	10.50%	20.10%	12.20%	32%	14.10%
	8th Grade					

	2013	2016	2019	2013	2016	2019
	13.50%	26.40%	16%	11.40%	8%	18.40%
	9th Grade					
	2013	2016	2019	2013	2016	2019
	10.50%	19.30%	15.80%	13.70%	11%	20.90%
	11th Grade					
	2013	2016	2019	2013	2016	2019
	9%	13.70%	12.80%	11.50%	13%	19.10%
Do you have any long-term mental health, behavioral or emotional problems? Long-term means lasting 6 months or more. (yes)	8th Grade					
	2013	2016	2019	2013	2016	2019
	10.10%	14.80%	15.90%	12.20%	20%	22.80%
	9th Grade					
	2013	2016	2019	2013	2016	2019
	10.70%	18.40%	20%	18%	11%	23.90%
	11th Grade					
	2013	2016	2019	2013	2016	2019
	9.70%	16.80%	19.90%	6.50%	18%	17.90%
Have you ever been treated for a mental health, emotional or behavioral problem? (Yes)	8th Grade					
	2013	2016	2019	2013	2016	2019
	11.50%	21.20%	19.50%	15.70%	17%	20%
	9th Grade					
	2013	2016	2019	2013	2016	2019
	7.60%	17.40%	17.60%	18.10%	16%	18.50%
	11th Grade					
	2013	2016	2019	2013	2016	2019
	9%	15.80%	22.40%	8.50%	21%	20.60%
Have you ever seriously considered attempting suicide? (yes)	8th Grade					
	2013	2016	2019	2013	2016	2019
	5.50%	12.70%	15.40%	10%	19%	17.60%
	9th Grade					
	2013	2016	2019	2013	2016	2019
	14.10%	17.80%	19.10%	14.60%	21%	18.60%
	11th Grade					
	2013	2016	2019	2013	2016	2019
	12.6	21.90%	26.80%	6.50%	16%	26.60%
Have you ever actually attempted suicide? (yes)	8th Grade					

2013	2016	2019	2013	2016	2019
0.90%	5.50%	5%	4.20%	6%	9%

9th Grade

2013	2016	2019	2013	2016	2019
9.40%	5%	10.60%	3.70%	8%	9.50%

11th Grade

2013	2016	2019	2013	2016	2019
5.60%	8.30%	5.90%	6%	9%	10.90%

Thinking back the last 30 days, how much do you agree or disagree with the following: I worry a lot. (agree or strongly agree)

5th Grade

2013	2016	2019	2013	2016	2019
29.70%	37%	37%	38.40%	39%	40.30%

I sometimes feel sad without knowing why (agree or strongly agree)

2013	2016	2019	2013	2016	2019
36.10%	50.60%	40.40%	49.60%	42%	48.60%

Adverse Childhood Experiences

Have any of your parents or guardians ever been in jail or prison? (yes)

8th Grade

2013	2016	2019	2013	2016	2019
18.50%	25.60%	20.00%	15.20%	26%	25%

9th Grade

2013	2016	2019	2013	2016	2019
24.50%	21.60%	19.90%	18.60%	28%	29.60%

11th Grade

2013	2016	2019	2013	2016	2019
16.80%	14.90%	25%	16%	22%	21.40%

(New in 2019) If you had or have a parent in jail did you live with a parent or guardian at the time they went to jail? (NO)

2019	2019	2019	2019	2019	2019
8th	9th	11th	8th	9th	11th
49.90%	37.30%	53.00%	31.00%	51.90%	52%

Do you live with anyone who drinks too much alcohol? (yes)

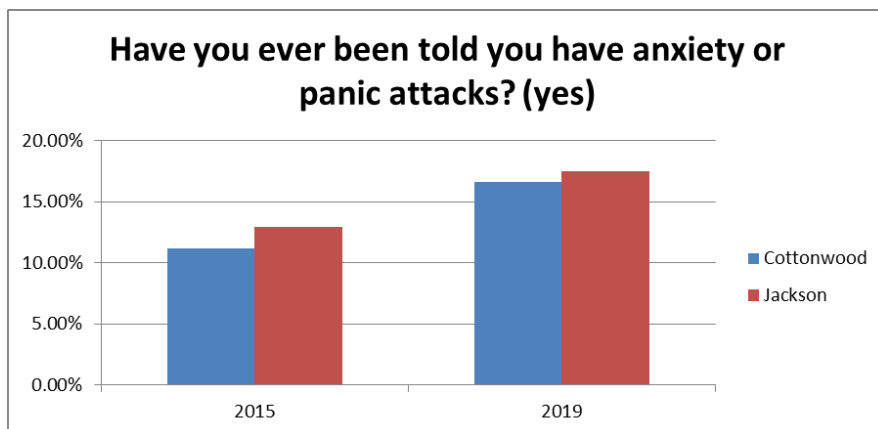
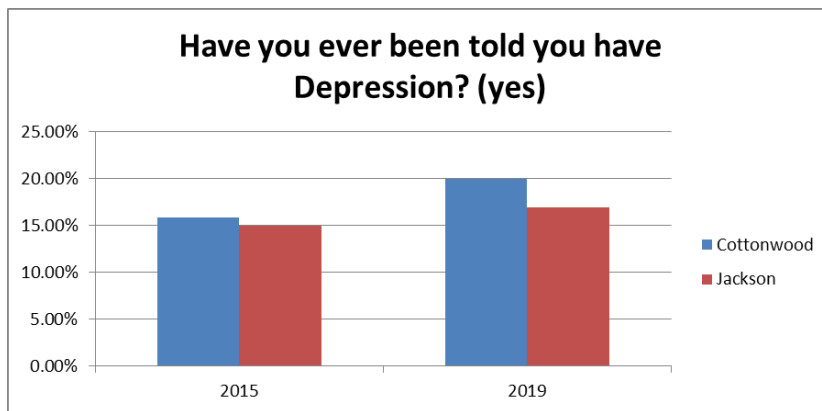
8th Grade

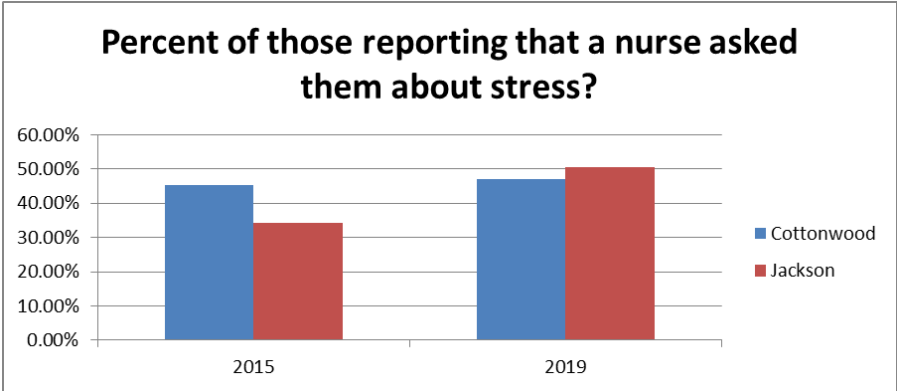
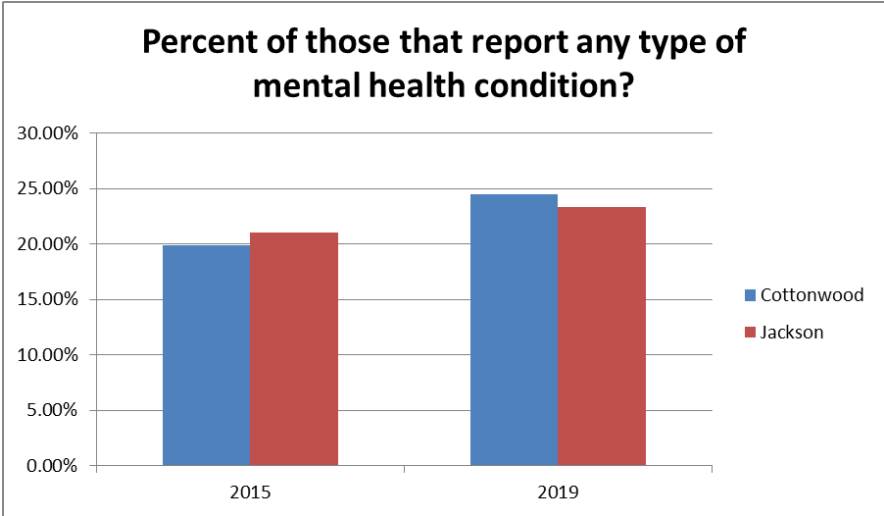
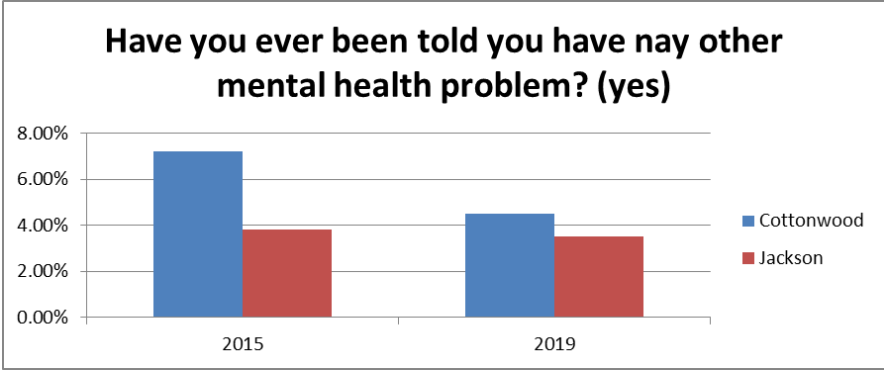
2013	2016	2019	2013	2016	2019
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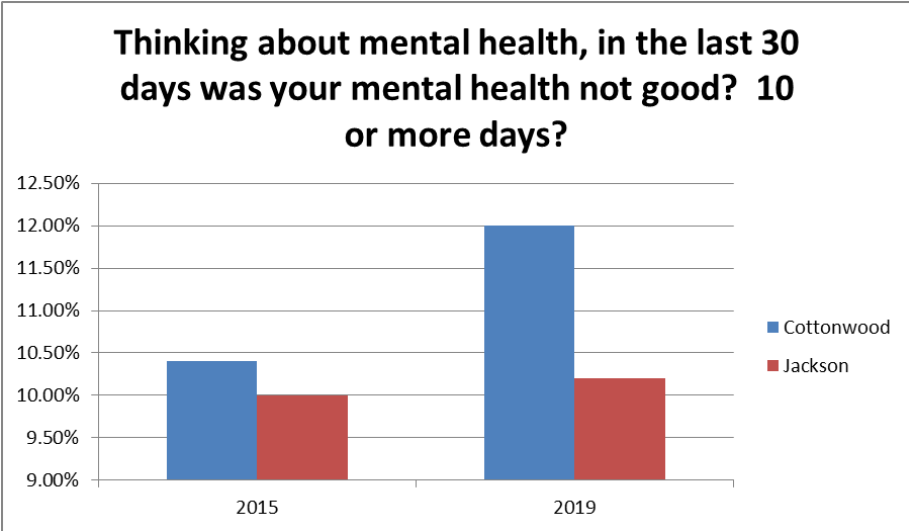
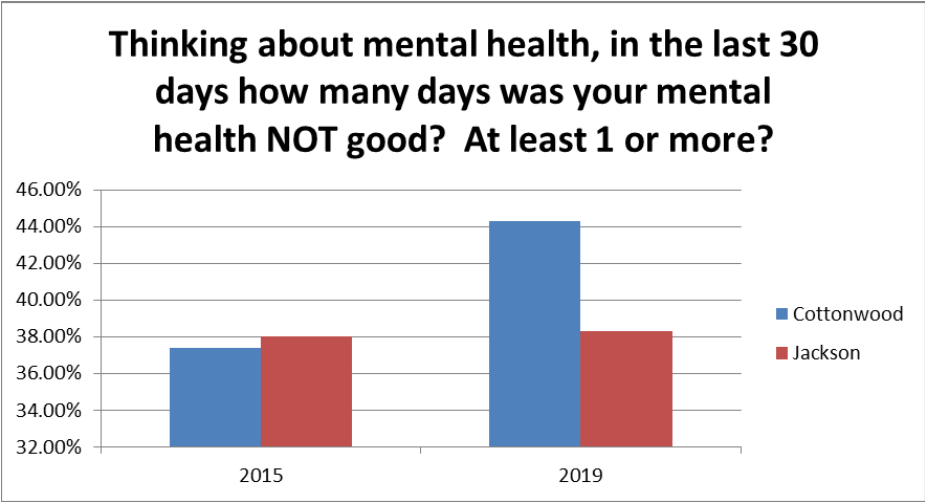
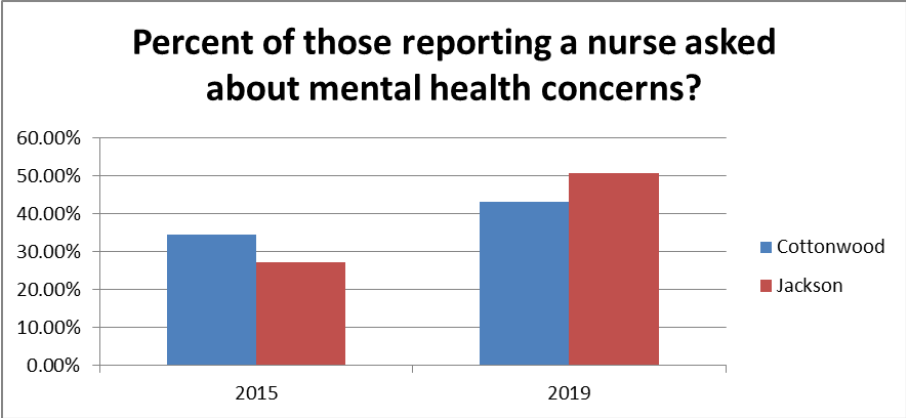
	9.30%	7.80%	8%	9.80%	11%	9.20%
	9th Grade					
	2013	2016	2019	2013	2016	2019
	10.90%	11.40%	7.70%	15.40%	8%	20.70%
	11th Grade					
	2013	2016	2019	2013	2016	2019
	14.20%	8.60%	14%	12%	10%	10.40%
Do you live with anyone who uses illegal drugs or abuses prescription drugs? (yes)						
	8th Grade					
	2013	2016	2019	2013	2016	2019
	2.30%	1%	2.50%	5.50%	0	1.10%
	9th Grade					
	2013	2016	2019	2013	2016	2019
	4.50%	4.90%	1.70%	2.80%	7%	7.50%
	11th Grade					
	2013	2016	2019	2013	2016	2019
	3.60%	1%	1%	4%	10%	6.90%
Does a parent or other adult in your home regularly swear at you, insult you or put you down? (yes)						
	8th Grade					
	2013	2016	2019	2013	2016	2019
	13.80%	12.70%	16.50%	10.10%	14%	15.50%
	9th Grade					
	2013	2016	2019	2013	2016	2019
	18.80%	12.40%	16.40%	13.30%	11%	17.80%
	11th Grade					
	2013	2016	2019	2013	2016	2019
	11%	10.40%	14.80%	12%	17%	17.30%
Has a parent or other adult in your home ever hit, beat, kicked or physically hurt you in any way? (yes)						
	8th Grade					
	2013	2016	2019	2013	2016	2019
	10%	11.50%	9.50%	8.50%	6%	7.50%
	9th Grade					
	2013	2016	2019	2013	2016	2019
	14.20%	13.60%	14.80%	8.70%	11%	9.50%
	11th Grade					
	2013	2016	2019	2013	2016	2019
	8%	12.80%	13.40%	9%	13%	10%
Have your parents or other adults in your home ever slapped, hit, kicked, punched or beat each other up? (yes)						
	8th Grade					

	2013	2016	2019	2013	2016	2019
	2.30%	9.40%	8%	6.50%	9%	6.30%
9th Grade						
	8.80%	6.20%	12.70%	5.40%	6%	7.50%
11th Grade						
	5.60%	6.10%	6.30%	6%	6%	2.90%
ACEs Score-short 2019 only: Percent of students with at least one ACE:	8th	9th	11th	8th	9th	11th
	54.40%	46.70%	49%	47.20%	53.90%	44.70%
ACEs Score-short 2019 only: Percent of students with two or more ACEs:						
	22%	24.60%	29.50%	27.30%	32.30%	25.10%

Data from the Adult Health Survey:







Top reasons for not seeking mental health care have remained the same from 2015-2019: nervous/afraid, not knowing where to go, and don't think it's serious enough.

Looking at the data and talking with partners it is clear that mental health is not improving, in fact it is continueing to grow as an issue and concern. There is a stigma around mental health that many people face and it is clear as a community we need to come together to help improve mental health in our counties.

Mental health can affect anyone but tends to magnify for those who are facing poverty. Finances tend to be a trigger of mental health and can end up leading to substance abuse as a way to deal, that can then affect the children of the household, it is a vicious cycle. Poverty leads to many health ailments so being able to help fight poverty can help imporve mental well being. Promoting services that can help people and families be successful.

Action Plan

Strategic Priority	Mental Health Awareness
Goal	Increase the mental health and emotional well-being of the residents in Cottonwood and Jackson counties by increasing the awareness of mental health and increasing the quality, availability, and effectviness of the mental health programs available.

Performance Measures: (How we will know we are making a difference?)

Short Term Indicators	Responsibility	Year
Formation of Mental Health Advisory Group	Core Team	2020
Partner with schools to work on mindfulness in the schools	Core Team	2020
Increased awareness of the programs available and what mental health is.	Core Team and DVHHS	2020
Long Term Indicators	Source	Frequency
Adult Health Survey	MDH/SHIP	Every 4 years (or do our own survey)
Student Survey	MDH/MDE	2022

Objective #1: To increase outreach to the community, by promoting mental health awareness and collaborating to advance suicide prevention and mental health promotion.

Measured: Number of outreach activities, task force goals, student survey, adult health survey, our own survey. Number of suicides called in and/or attempts.

Action Steps (Deliverables) with time frame	By When	Resources Needed	Lead Person	Status with Dates
Develop task force and meet	April 2020	Data, how to set smart goals,	Kelsey Andrews and Jessica Grant	Jackson Mental Health task force

quarterly. Develop goals of the task force at second meeting April 2020.		attainable goals.		met Feb 2020, Cottonwood met January 2020, meeting again in April. Continue to invite partners
Promote and execute the "Letter S" movie with partners and hold 2 events.	By the end of 2020	The movie, outreach material, partner buy in	Angela Naumann	
Have different radio ads (at least 6 rotating) every month for the next 2 years	Start April 2020 run through the end of 2021	Funds, people willing to record, evidence based materials	Kelsey Andrews, Angela Nauman	
Social Media Outreach (via: facebook, instagram, snap chat, Twitter, etc)	Start April 2020	Funds, materials that are evidence based	Angela Naumann	
CTC outreach in mailers sent to family (target 12+), and new moms.	Start May of 2020	Materials that are evidence based	Angela Naumann	
Develop survey that can be sent out by mail, social media, email, etc. to gauge awareness and knowledge	June 2020	Mail listing	Luke Ewald	
Partner with health plans to see how they can assist in access	June 2020	Contacts	Kelsey Andrews	
Implement Make it OK campaign	May 2020	Materials, funds	Angela Naumann	
Outreach events: do at least 5	End of 2020 and yearly after that.	Funds, material, outreach	Luke Ewald	One completed 2/29/2020

events a year between the 2 counties promoting mental health.		material		
Promote resources available to those who are facing difficult times (financial, family, medical, dental, etc.)	Now and continue monthly promotion	Material and knowledge	DVHHS	Continue

Objective #2: Implement Evidence Based Program for Family Home Visiting to target at risk families to help reduce Adverse Childhood Experiences.

Measured by: Out of home placement numbers, number of families enrolled in HFA and universal home visiting, and ACE's questions on the student survey.

Action Steps (Deliverables) with Time Frame	By When	Resources Needed	Lead Person	Status with Dates
Partner with Social Services to help decrease out of home placement by working with Family Home Visiting to get in the homes early.	Now	FHV to understand regulations of Child protection, child protection to understand what FHV is.	Kelsey Andrews and Jessica Matt	
Expand HFA home visiting program to be able to reach more families	June 2020	Trained staff	Kelsey Andrews	
Screen all pregnant moms in WIC to assess risks	Now	None	Kathy Voss/ Jessica Matt	
Educate to the public via social media, radio, mailings, flyers on what Adverse Childhood Experiences are.	June 2020	Evidence Based Materials, funds	Angela Naumann	

Promote parenting classes that are available to our FHV families and to the schools	Fall 2020	Flyers	FHV staff, schools, FSN	
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Objective #3: Work to prevent mental health and substance abuse by educating youth.

Measured by: Student Health Survey, input from teachers/staff

Action Steps (Deliverables) with Time Frame	By When	Resources Needed	Lead Person	Status with dates
Partner with schools and businesses to develop more and advertise for afterschool resources for youth.	December 2020	People, time, space, activities	Luke Ewald	
Promote and be part of Windom Area High monthly family engagement night for K-3 and expand to other districts	December 2020	Schools, space, time, food, money	Luke Ewald	
Partner with schools and church organizations to start a lunch buddies program and every school or something like this.	September 2020	Schools, churches	Luke Ewald, a contact from each school.	
Partner with schools to work on implementing Social Emotional Learning	Fall of 2020	Schools, SEL tool kit	Luke Ewald and school contacts	

Healthy People 2020 has a goal to: Improve mental health through prevention and by ensuring access to appropriate, quality mental health services. Some of the objectives they have include: Increase depression screening by Primary Care Providers, reduce the proportion of persons who experience major depressive episode, and to reduce suicide attempts by adolescents. The action plan laid out above strives to tie into the healthy people 2020 goals.

Healthy Minnesota 2022 has a priority that “The opportunity to be healthy is available everywhere and for everyone”. Promoting mental health and the available services will help people know what health care is available. This also leads to Local Public Health, the commissioners, and the citizens to talk with legislators about access to Mental Health and the need for mental health services in rural Minnesota. One of the conditions to have the opportunity to be healthy everywhere is having positive early life experiences, Public Health can promote this through our family home visiting program and engaging families early to help reduce ACEs.

Current Assets and Resources: Groups wanting to be involved and wanting to make a difference, Southwest Mental Health, lots of staff who have had some type of mental health training, early intervention and family home visiting programs, and community buy in.

Priority Area #2 Youth vaping and substance abuse

We took a long hard look at the 2013-2019 Student Survey that our schools completed and the data it showed and the picture it painted was alarming. The data is broken down by grade and county. Those that are highlighted are areas of concern compared to where the overall state fell.

Cottonwood County Student Survey				Jackson County Student Survey								
Have you ever been treated for an alcohol or drug problem? (yes)	8th Grade			2013			2016			2019		
	2013	2016	2019	2013	2016	2019	2013	2016	2019	2013	2016	2019
	1.10%	1%	2%	2.40%	9%	0						
	9th Grade			2013			2016			2019		
	2.30%	4%	0	1.70%	5%	3.10%						
	11th Grade			2013			2016			2019		
	2.40%	0	1	4%	0	4.30%						

During the last 30 days have you smoked any cigarettes? (Yes)	5th Grade					
	2013	2016	2019	2013	2016	2019
	0	0	0	1.20%	2%	1.60%
During the last 12 months have you had alcoholic beverages to drink such as beer, wine, wine coolers, and liquor? (yes)	5th Grade					
	2013	2016	2019	2013	2016	2019
	2.50%	5%	3%	3.20%	10%	3.20%
During the last 12 months have you used marijuana (pot, weed) or hashish (hash, hash oil)? (yes)	5th Grade					
	2013	2016	2019	2013	2016	2019
	4.60%	2.50%	1%	0	1%	0
Use of conventional tobacco products (cigarettes, cigars, smokeless tobacco) during the past 30 days. (Yes)	8th Grade					
		2016	2019		2016	2019
		3.40%	3%		14%	6.40%
	9th Grade					
		2016	2019		2016	2019
		12%	5%		7%	11.40%
	11th Grade					
		2016	2019		2016	2019
		9.90%	13.10%		16%	16.10%
	Use of any tobacco products, including e-cigarettes and hookah, during the past 30 days (yes)	8th Grade				
		2016	2019		2016	2019
		5.40%	5.50%		14%	10.80%
9th Grade						
		2016	2019		2016	2019
		12.50%	14.90%		9%	28%
11th Grade						
		2016	2019		2016	2019

13.90% 27%

18% 48.70%

Any alcohol, marijuana and/or other drug use during the past year (excluding tobacco) (used at least something)

8th Grade

2013 2016 2019
20.30% 20.80% 18.50%

2013 2016 2019
28.10% 15% 22.20%

9th Grade

2013 2016 2019
28.70% 32.80% 25.60%

2013 2016 2019
35% 37% 43.20%

11th Grade

2013 2016 2019
35% 36.90% 39.90%

2013 2016 2019
58.50% 51% 50%

During the last 30 days , on how many days did you use marijuana or hash? (at least 1)

8th Grade

2013 2016 2019
3.10% 3% 3%

2013 2016 2019
3.30% 9% 1.10%

9th Grade

2013 2016 2019
3.10% 2% 3.30%

2013 2016 2019
9.70% 8% 11.20%

11th Grade

2013 2016 2019
7.80% 8.80% 12%

2013 2016 2019
20.50% 10% 14.90%

New in 2019:

How much do you think people risk harming themselves physically or in other way by using a vape or e-cigarettes? (no or slight risk)	2019			2019		
	8th	9 th	11th	8th	9th	11th
Compared to....	37.50%	53.90%	54.40%	39.90%	46.70%	60%
Risk of harming themselves physically or in other way if they smoke one or more packs of cigarettes per day? (no or slight risk)	2019			2019		

	8th	9 th	11th	8th	9th	11th
	23.10%	26.60%	16.10%	26.90%	21.50%	30.90%
How wrong do your parents feel it would be for you to vape or use e-cigarettes? (wrong/very wrong)	2019			2019		
	8th	9 th	11th	8th	9th	11th
	94%	89%	88%	91%	92.40%	71.30%
During the last 30 days, on how many days did you vape or use an e-cigarette like JUUL, suorin, blu, VUSE, or logic? (at least 1)	2019			2019		
	8th	9 th	11th	8th	9th	11th
	4.50%	14.70%	24.60%	9.10%	26.40%	44.40%

Of those who vaped in the last 30 days 60-93% got vape or e-cigarette from a friend. (both counties)

This student data along with the rest of of the student survey was given to the group to look at and gathered input from the group along with personal stories from the school and parents. I left the mental health related questions to help with our mental health goals. One other statistic from one of our high school principals was that he confiscated over 24 vapes the school year of 2018-2019 at one school. We all could agree that there are many issues to look at when it comes to the youth in our schools.

Action Plan

Strategic Priority	Youth Vaping and Substance Abuse
Goal	Have an overall decrease of student risky behaviors by increasing education at the schools and awareness of the dangers of vaping.

Performace Measures: (How will we know we are making a difference?)

Short Term Indicators	Responsibility	Year
Coordinate and set bi-yearly	Kelsey Andrews, Angela	First check fall of 2020

meetings with the school administration and nurse to discuss what they are seeing.	Naumann, and school admin team.	
Develop and start “Student Against Destructive Decisions” group at each school.	Angela Naumann/ Luke Ewald, along with school personal	Start idea in spring of 2020, execute fall of 2020, check in with group every fall and spring.
Long Term Indicators	Source	Frequency
Student Survey Data	Minnesota Department of Health and Minnesota Department of Education	20200

Objective 1: Decrease the number of youth reporting smoking, drug use, and alcohol use to at least 2% below the state average by the 2022 student survey.

Measured: Survey results, will look at the 2019 data and then again at the 2022.

Action Steps (Deliverables) with Time Frame	By When	Resources Needed	Lead Person	Status with dates
Reach out to all Public Schools in our 2 counties before Winter break to see what substance abuse education they have.	9/30/2019, and yearly there after	Telephone number and contact person for schools.	Angela Naumann	12/01/2019 (completed for year)
Partner with Windom Area Health and connect with their curriculum before school starts in the fall.	8/30/2019, and yearly thereafter	curriculum	Angela Naumann/ Kelsey Andrews	10/1/2019 (completed for year)
Do facebook education twice a month over the next 5 years	10/30 and 4/1 (each year starting 2019).	Fun, edgy posts with good information.	Angela Naumann	continue
Partner with Child and Teen Checkup (CTC) to send information home to families enrolled in CTC by fall.	12/31/2019	Information to send	Kelsey Andrews/ Angela Naumann	continue

Work with schools to start a Students Against Destructive Behavior group at each area middle/high school. (include all groups of youth...not just honor roll students)	12/31/2020	State resources, funds for food to get started, materials, a lay out of an existing group.	Luke Ewald, Angela Naumann	
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Objective 2: Reduce the number of kids reporting vaping by 5% from the 2018/19 student survey to the 2021/22 survey.

Measurement: Student survey results

Action Steps (Deliverables) with Time Frame	By When	Resources Needed	Lead Person	Status with Dates
Partner with schools for education resources and tools (nurses)	9/01/2020	MDH tools and resources Youth focused content	Angela Nauman Luke Ewald	
Work with all area schools on policy development to decrease vaping use and the punishment tied to it.	9/1/2020	Public Law Center, school buy in	Luke Ewald	
Educate parents about vaping (what it is, what it looks like) at school open houses.	9/1/2020	MDH tools and resources	Luke Ewald	
Increase DVHHS's social media campaign on youth vaping (twice a month for the next 5 year).	10/30/2019	MDH tools and resources	Angela Nauman	continue

Connect with County Fairs and other outreach events (5 a year) to promote anti-youth vaping	1/1/2020	MDH tools and resouces, public health dollars.	Luke Ewald	Started, one event 2/29/2020
Work and promote state legislation to ban e-cigerattes and flavored tobacco products until passed.	9/30/2019	MDH tools, LPH tools and resources	Kelsey Andrews	Started (federally age increase)
Refer youth that are using vaping devices to the QUIT Line as needed. Partner with school nurses to also help refer each year educate on program.	1/1/2020	Quit Line	Luke Ewald	Nurses educated on, radio ads done.

Healthy People 2020 have a goal to: Reduce Substance Abuse to protect the health, safety, and quality of life for all especially children. Objective that fits into this priority listed by Healthy People 2020 is SA-2 Increase the proportion of adolescents never using substances. Our objectives listed with our goals strive to help reach the Healthy People 2020 goals and objectives.

Healthy Minnesota 2022 has a priority of “Place and systems are designed for health and well-being”. One of the key conditions is to have healthy surrounding. We are working towards this with partnering with the schools to promote and have policies that work towards eliminating vaping and youth risky behaviors. Another way we are working towards this Minnesota priority is talking with Minnesota and local legislators to pass policies to raise tobacco ages and restrict flavors.

These above action items work to help our youth live a healthy life. Youth and adolescents are a vulnerable population who need adults to help guide and shape their lives.

Current assets and resources: Engaged community and schools, federal policy passed raising age to purchase, and school policies in place to support youth.