



Community Health Needs Assessment 2025-2027

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## WELCOME TO THE COMMUNITY HEALTH NEEDS ASSESSMENT



Sauk Prairie Healthcare (SPH) is pleased to present the 2025-2027 Community Health Needs Assessment (CHNA). A CHNA entails collecting demographic and health statistics of Sauk Prairie Healthcare's community, discussing issues with community leaders and organizations, and prioritizing the unmet health needs of area residents. The goal of this report is to provide residents with a deeper understanding of the health needs in their community, as well as help guide SPH in its community health planning efforts and development of an implementation strategy to address the needs described in this document. A plan to address the health needs of the community and implementing this plan based on the findings shared here will result in our Community Health Improvement

Implementation Plan (CHIIP) which will be finalized by March 2025.

This document represents Sauk Prairie Healthcare's formal commitment to improving the health of our community. This commitment extends to the wonderful partnerships we have with residents and organizations throughout our service area. We are thankful for the engagement and collaboration of many organizations including Sauk Prairie Healthcare Foundation, Sauk County Health & Wellness Coalition, Sauk County Health Department, Prairie Clinic, S.C., the school districts of Lodi, River Valley, Sauk Prairie, and Wisconsin Heights, local and county law enforcement agencies, area fire departments, area ambulance services, Northwest Dane Senior Services, Reach Out Lodi, Sauk Prairie Wellness Movement, Sauk Prairie Chamber of Commerce, area nursing homes, members of the clergy, the cities and villages of Arena, Black Earth, Mazomanie, Merrimac, Lodi, Plain, Sauk City, Prairie du Sac, and Spring Green, and many other organizations and individuals.

How do we make a difference in the health of the community we serve? We know that we cannot single-handedly address all unmet healthcare needs of the community, so you will see this CHNA identifies needs SPH can impact directly – Behavioral Health, Chronic Conditions, and Substance Misuse/Abuse- by working directly with patients. However, there are other unmet needs that affect health outcomes – Dependent Care, Social Isolation, and Accessible Housing – requiring SPH to work alongside many others to support efforts to address those needs.

Together, we have the power to create a healthier, more vibrant community. This CHNA is more than a report—it's a call to action for every resident, organization, and leader in our area. Addressing the health challenges outlined in this document requires the collaboration, passion, and ingenuity of our entire community. Whether through supporting a neighbor, volunteering with local initiatives, or engaging in conversations about solutions, everyone has a role to play in shaping a brighter, healthier future.

Sauk Prairie Healthcare is proud to stand with you in this journey. By combining our collective resources, knowledge, and determination, we can address the unmet needs of our community and lay the foundation for long-term health and wellness. Let's work together to build a community where everyone has the opportunity to thrive—because our strength lies in our shared commitment to each other.

Yours in good health,

Shawn Lerch, FACHE
Chief Executive Officer
Sauk Prairie Healthcare

## **EXECUTIVE SUMMARY**

## **Key Priorities**

Sauk Prairie Healthcare determined priorities for the 2025-2027 CHNA and CHIIP. Priorities SPH can directly address through programming and clinical partnerships are:

- Mental Health access to services, training and education, reducing stigma
- Chronic medical conditions help patients avoid and address preventable medical problems
- Substance Misuse use and abuse of alcohol, drugs, nicotine

The following priorities cannot be addressed directly by SPH, but we do have the capacity to support the efforts of leaders in the communities we serve:

- Dependent Care access to affordable alternatives for the care of children and elderly adults
- Social Isolation isolation caused by the lack of family and friends or geographic and/or transportation inaccessibility
- Housing that is safe, and people can afford

### Mental Health

Mental health has been a top priority in each of SPH's Community Health Needs Assessments (CHNAs) due to its extensive impact on individuals and society. Around 20% of Americans experience mental illness annually, with about 5.5% having serious mental conditions, such as schizophrenia or severe depression. In Wisconsin, approximately 22% of adults report mental health conditions, with significant consequences for their ability to manage stress and daily responsibilities. Mental health conditions affect approximately 25.6% of adults in Sauk County, with poor mental health days reported at rates higher than the state average.

Untreated mental health issues impose a \$193 billion annual economic burden in the U.S. due to lost earnings alone. Societal impacts are extensive: mental illness contributes to 25-30% of homelessness, 60% of incarcerated populations, and is a leading cause of suicide, which claims over 48,000 lives annually in the U.S. Furthermore, the shortage of mental health providers exacerbates these issues; Wisconsin has over 100 mental health professional shortage areas, with ratios of one provider for every 570 individuals in some regions, compared to a national average of 1:350.

Community survey data indicates that 62% of respondents consider mental health to be the most important community problem. Community focus groups highlighted the limited access to mental health providers, and the groups often linked social isolation as a cause and/or compounding factor in the prevalence of mental health issues.

Community suggestions focus on increasing mental health services, education to reduce stigma, and accessible therapy options for diverse populations.

## **Chronic Medical Conditions**

Chronic diseases such as obesity, hypertension, and diabetes are significant health concerns. Locally, 37% of adults in Sauk County are obese, slightly above Wisconsin (34%) and the national average (34%). Hypertension affects 18% of Sauk County residents, comparable to the state rate but higher than the national average of 17.3%. Diabetes rates in Sauk County are consistent with Wisconsin (6.9%) but require improved management, as only 16% of diabetics locally have their A1C levels under control. Nationwide, chronic diseases account for 7 of the top 10 causes of death, emphasizing the need for preventive care, health screenings, and education at the state and local levels.

### **Substance Misuse**

Substance misuse is a critical concern, with 22.4% of adults in Sauk County engaging in binge drinking, higher than both the state (21.1%) and national (16.6%) rates. Wisconsin's culture of heavy drinking contributes to health risks, including alcohol-attributable deaths and motor vehicle accidents; 34% of Sauk County's crash deaths involved alcohol, similar to the state (35%) but significantly higher than the national rate (26%). Youth alcohol use is prevalent, with 26% of local high school students currently drinking. Tobacco use among adults in Sauk County (18.7%) exceeds the state average (17.7%) and national average (15.5%). Of rising concern is the adolescent use of nicotine delivery devices such as pouches which have replaced vaping as the common way to ingest nicotine. Strategies to address substance misuse include prevention programs, increasing access to treatment, and education targeting youth.

## Dependent Care

Dependent care challenges include the availability of affordable childcare and eldercare. In Wisconsin, the average cost of childcare is \$12,597 annually per child, making it one of the least affordable states for childcare, with costs exceeding 25% of the median household income for many families. Nationally, eldercare needs are rising due to an aging population, with 16% of the U.S. population aged 65+ in 2020, projected to grow to 20% by 2030. Locally, Sauk County reports a lack of quality childcare programs and in-home eldercare support. Great strides have taken place in Sauk Prairie with the construction of the Sauk Prairie Early Learning Center, but challenges to access affordable childcare will continue. Proposed solutions suggested in focus groups include partnerships with HeadStart, expanded eldercare services, and transportation assistance for dependents.

### Social Isolation

Social isolation significantly impacts health outcomes, especially for seniors and rural residents. In Sauk County, seniors represent 18% of the population, mirroring Wisconsin's aging demographics. Social isolation is linked to increased risks of depression, anxiety, and chronic illness. Nationally, an estimated 1 in 4 adults aged 65+ is socially isolated, contributing to healthcare costs of \$6.7 billion annually. Locally, barriers such as transportation access and limited community events exacerbate isolation. Recommendations include organizing more community events, enhancing transportation options, and creating volunteer programs to foster social engagement.

## Safe and Affordable Housing

Affordable housing remains a critical issue, with 27.6% of Sauk County households spending more than 30% of their income on housing, slightly higher than Wisconsin (26.5%). Nationally, over 37 million households are cost-burdened by housing, with low-income families disproportionately affected. In Sauk County, seniors and low-income residents face long waitlists for supported housing, while inadequate infrastructure in areas like Bluffview worsens health and safety conditions. Proposed actions include incentivizing affordable housing development, improving housing coalitions, and securing funding to address infrastructure deficiencies.

## **Setting Priorities**

As part of the CHNA requirement, hospitals are required to evaluate the needs that are identified and validated through the data analysis. In order to do so, hospitals must establish specific criteria that will be used to assess each of the identified community needs.

Based on internal prioritization, the top-ranking priorities establish the areas of focus for

the Community Health Improvement Implementation Plan.

Upon completion of primary data collection, the Sauk County Data Council met to analyze the community health survey, community conversations, and key informant interview responses and quantitative primary and secondary data.

Based on the input and research described throughout this document, key community health priorities were selected based on the criteria below:

- Magnitude: how many people are affected?
- Severity: how bad is it?
- **Time Trend**: is it getting better or worse?
- Comparisons: how do we compare to the state, etc.?
- **Disparities**: are some groups impacted more?
- Community Readiness: is it feasible to achieve success?

### Collaboration is Key



Sauk Prairie Healthcare is proud to be a partner of the Sauk County Health and Wellness Coalition which has been working together for more than 13 years. Through the collaborative efforts of our steering committee partners – Sauk County Health Department, SSM Health St. Clare Hospital, Reedsburg Area Medical Center, Ho-Chunk Nation – data collection, information sharing, and priority setting activities were leveraged and applied to each member's CHNA. An extensive list of individuals and organizations who participated with our coalition are listed in the Appendix.

Since the adoption of the 2019-2021 CHNA, the Sauk Prairie Intergovernmental Planning Commission (consisting of representatives from the Town of Prairie du Sac and Villages of Sauk City and Prairie du Sac) worked to recognize our health priorities and incorporate them into the Sauk Prairie Comprehensive Plan (Link to SP Comprehensive Plan see pages 25-27). This action was a critical step in demonstrating that community leadership is invested in improving the health of residents. SPH anticipates working with other municipalities to incorporate the 2025-2027 health priorities into their Comprehensive Plans.

The **Health & Wellness Steering Committee** considered the Social Determinants of Health (SDoH) when developing the community health survey and identifying priority areas. These social

determinants can
either contribute to
poor
health outcomes or
support a healthy
community
including Access to
Care, Education,
Community
Support, Economic
Stability and
the Built
Environment.



## SOCIAL DETERMINANTS OF HEALTH

The Role of Social Determinants in Promoting Health and Health Equity

# Social Determinants of Health

Economic Stability	Neighborhood and Physical Environment	Education	Food	Community and Social Context	Health Care System
Employment Income Expenses Debt Medical bills Support	Housing Transportation Safety Parks Playgrounds Walkability Zip code / geography	Literacy Language Early childhood education Vocational training Higher education	Hunger Access to healthy options	Social integration Support systems Community engagement Discrimination Stress	Health coverage  Provider availability  Provider linguistic and cultural competency  Quality of care

### **Health Outcomes**

Mortality, Morbidity, Life Expectancy, Health Care Expenditures, Health Status, Functional Limitations



Social determinants of health (SDOH) are the conditions in which people are born, grow, live, work and age that shape health. Improving the health of a community requires that we recognize the importance of SDOHs and their impact on the health delivery system.

The Kaiser Family Foundation offers the following construct for describing SDOHi:

- Social determinants of health include factors like socioeconomic status, education, neighborhood and physical environment, employment, and social support networks, as well as access to health care. Addressing social determinants of health is important for improving health and reducing longstanding disparities in health and health care.
- There are a growing number of initiatives to address social determinants of health within and outside of the health care system. Outside of the health care system, initiatives seek to shape policies and practices in non-health sectors in ways that promote health and health equity. For example, the availability and accessibility of public transportation affects access to employment, affordable healthy foods, health care, and other important drivers of health and wellness. Nutrition programs and policies can also promote health, for example, by supporting healthier corner stores in low-income communities, farm to school programs and community and school gardens, and through broader efforts to support the production and consumption of healthy foods. The provision of early childhood education to children in low-income families and communities of color helps to reduce achievement gaps, improve the health of low-income students, and promote health equity.
- Within the health care system, there are multi-payer federal and state initiatives as well as Medicaid-specific initiatives focused on addressing social needs. These include models under the Center for Medicare and Medicaid Innovation, Medicaid delivery system and payment reform initiatives, and options under Medicaid. Managed care plans and providers also are engaged in activities to identify and address social needs. For example, 19 states required Medicaid managed care plans to screen for and/or provide referrals for social needs in 2017, and a recent survey of Medicaid managed care plans found that almost all (91%) responding plans reported activities to address social determinants of health.

## ABOUT SAUK PRAIRIE HEALTHCARE

Sauk Prairie Healthcare (SPH), founded in 1956, is an independent, not-for-profit association model 501(c)(3) corporation headquartered in Prairie du Sac, Wisconsin. SPH is locally governed by an 11-member board of community members. SPH operates five primary care clinics, three surgical specialty clinics (orthopedics, general surgery, and urology), several specialty services (wound care, diabetes management, sleep center, audiology, cardiac and pulmonary rehabilitation) an outpatient rehabilitation and wellness facility, and a 36-bed acute care hospital. In 2014, SPH opened its new hospital facility on a new campus where there are also multispecialty clinics operated by SSM-Dean Healthcare and the University of Wisconsin Hospital & Clinics, and a single-specialty clinic operated by Prairie Clinic, S.C., (OB/Gyn) and Associated Podiatrists.

## **About Our Community**

## Service Area

For market analysis purposes, Sauk Prairie Healthcare defines its primary service area as a 12-zip code area covering 700 square miles in which approximately 43,000 people





reside. For purposes of this CHNA, a very similar boundary is used, but it is defined by the boundaries of the Lodi, Sauk Prairie, Wisconsin Heights, and River Valley school districts instead of zip code boundaries. The population of this area is 41,522. Although the differences between the two definitions in minimal, residents tend to identify with their school district, so for qualitative research, we prefer using the school district boundaries instead of zip code and county lines. However, in almost all cases throughout this report, due to population-based reporting limitations, goals must be set, and data must be reported at the county level.

## Demographic Snapshot

### Population

The population of the PSA is anticipated to increase by 4.8% over the next 5 years and the median age, now at 44 years (up from 42 years three years ago), is expected to increase slightly by 1.7%. This indicates an aging population.

Current Demographics	SPH PSA	Sauk County	Columbia County	Wisconsin
Total Population	42,491	66,132	58,504	5,923,854
Households Count	18,183	27,483	24,263	2,478,353
Male Population Count	21,728	33,327	30,109	2,976,549
Female Population Count	20,763	32,805	28,395	2,947,305
Median Age	44	42	43	41
Median Household Income	89,305	73,607	81,787	74,830
Per Capita Income	51,973	42,765	46,194	45,110
Unemployment Rate	2.1%	2.5%	2.8%	3.2%

## Age Groups

The median age of the service area is 42 years while the State of WI is 41 years. Compared to the State, the Sauk Prairie Healthcare service area is slightly overrepresented in both the middle age (45-54) and the older age categories (55-64 and 65+). SPH's population is also slightly underrepresented in the young adult (20-24) and adult population (25-34) as compared with the State of Wisconsin.

Current Age Segmentation	SPH PSA	Sauk County	Columbia County	Wisconsin
Pop age 0-4	4.2%	4.8%	4.5%	4.8%
Pop age 5-9	5.1%	5.5%	4.9%	5.3%
Pop age 10-14	5.5%	5.9%	5.3%	5.6%
Pop age 15-19	5.4%	5.5%	5.4%	6.0%
Pop age 20-24	4.8%	5.6%	5.4%	7.1%
Pop age 25-29	5.2%	5.8%	5.8%	6.4%
Pop age 30-34	5.8%	6.0%	6.1%	6.3%
Pop age 35-39	6.6%	6.6%	6.8%	6.5%
Pop age 40-44	7.4%	6.8%	6.8%	6.5%
Pop age 45-49	6.5%	5.8%	6.0%	5.8%
Pop age 50-54	7.2%	6.7%	7.2%	6.4%
Pop age 55-59	8.0%	7.3%	8.1%	7.1%
Pop age 60-64	8.3%	7.9%	8.2%	7.6%
Pop age 65-69	7.3%	6.7%	7.1%	6.6%
Pop age 70-74	5.7%	5.5%	5.2%	5.0%
Pop age 75-79	3.3%	3.5%	3.4%	3.2%
Pop age 80-84	1.7%	2.1%	2.0%	2.0%
Pop age 85+	1.9%	2.1%	1.8%	1.9%

## Education

High school graduation rates are comparable to comparison areas and exceed the State rate. The percent of population with bachelor or graduate is higher than Sauk and Columbia Counties.

Population Segmentation by Education	SPH PSA	Sauk County	Columbia County	Wisconsin
Pop 25+	31,853	48,124	43,584	4,219,273
Pop 25+ less than 9th grade	1.2%	2.5%	1.8%	2.4%
Pop 25+ 9th-12th grade no				
diploma	3.4%	5.1%	3.7%	4.2%
Pop 25+ HS graduate	31.3%	32.9%	32.4%	29.7%
Pop 25+ college no diploma	19.9%	20.2%	24.1%	19.3%
Pop 25+ Associate degree	12.8%	13.0%	12.8%	11.4%
Pop 25+ Bachelor's degree	21.7%	18.7%	17.2%	21.9%
Pop 25+ graduate or prof				
school degree	9.8%	7.7%	8.0%	11.3%

### Race/Ethnicity

There is little racial and ethnic diversity compared to the Wisconsin and the United States. The estimated population that is of Hispanic, Latino, or Spanish origin in the report area is 1,827. This represents 4.3% of the total report area population, which is significantly less than the state rate of 7.8%. Census data indicates the projected change in the racial composition of the PSA within the next five years will not change.

Current Population Segmentation by Race	SPH PSA	Sauk County	Columbia County	Wisconsin
White	93.4%	90.9%	92.0%	80.8%
Black	1.0%	1.5%	2.6%	6.9%
American Indian/Alaskan Native	0.3%	0.8%	0.4%	0.6%
Asian	0.8%	0.7%	0.9%	4.2%
Hawaiian/Pacific Islander	0.0%	0.0%	0.0%	0.0%
Other Race	1.2%	2.3%	1.0%	2.5%
Multirace	3.2%	3.8%	3.2%	4.9%
Hispanic	4.3%	6.5%	4.3%	7.8%
Non-Hispanic	95.7%	93.5%	95.7%	92.2%

#### Income

Household and per capital income is relatively high and the unemployment rate is comparatively low. The per capita income for the report area is \$51,973. This includes all reported income from wages and salaries as well as income from self-employment, interest or dividends, public assistance, retirement, and other sources. The per capita income in this report area is the average (mean) income computed for every man, woman, and child in the specified area. The SPH service area has a per capita income that exceeds the state. However, considerable disparity is when the per capita income is compared by ethnicity. Data indicates that the Hispanic/Latino population has per capita income approximately 20% less that of the Non-Hispanic/Latino population.

## ASSESSING THE HEALTH OF OUR COMMUNITY

## **Data Sources**

Several sources of data, both primary and secondary, were used to produce this report. The primary data used in this report came from Sauk County Health & Wellness Coalition Survey 2024 and a series of Community Conversations and Key Informant Interviews conducted in January and February 2024. Important secondary data sources include the Wisconsin County Health Rankings, Centers for Disease Control and Prevention, 2020 US Census and the latest American Community Survey which includes up-to-date, publicly available data for approximately 100 community indicators. The following is a description of the data sources and summary findings from each source.

## **Community Survey**

To collect primary data, we used an online survey that was available from February 5, 2024, to May 1, 2024. The confidential and anonymous survey asked respondents to think about their community and identify community problems and community strengths. Respondents were also asked to answer demographic questions. The survey instrument is available in Appendix B.

The survey was advertised to our entire community by way of local newspaper press releases. Online advertisements ran on the websites of all three county healthcare systems as well as Public Health's websites and included the corresponding entities social media sites. Radio interviews on Magnum Radio Group stations, press releases to the school districts, internal communications within the coalition entities, and local entities such as churches and libraries assisted by distributing information. Cards advertising the survey were created and handed out at local entities including libraries, local businesses, churches, mental health offices, and pharmacies. A targeted mailing list was purchased, and a survey card sent to residents in low internet areas.



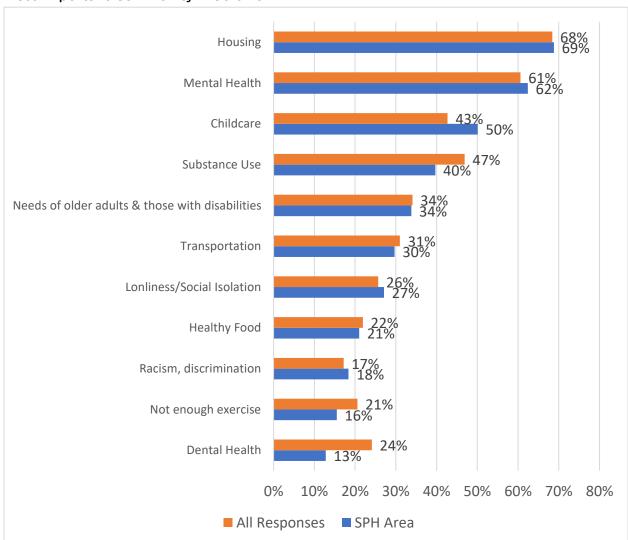
### How representative was our survey?

An important source of primary data for this assessment was a survey that was distributed throughout Sauk County and communities in other counties served by the hospitals in the Sauk County Health & Wellness Steering Committee's Data Council. The survey captured responses from 1,106 respondents, of which 346 surveys were completed by residents of the SPH primary service area. Generally speaking, there were few significant differences between the findings from the SPH-specific responses and the survey group as a whole.

Below is a description of the survey respondents (for all respondents) and the associated underand over-representation. Survey results were not weighted to accommodate the under/over representation.

Over-	Survey	2023	Under-Represented in the Survey
Represented on	Respondents	Census	
the Survey		Quick Facts	
Women	77%	50%	Men
Adults ages 18-64	72%	57.8%	Only 1% of survey respondents were
			youth
Higher Educational	50% with Bachelor	27.1%	No High School degree, High School
Attainment	degree or higher		degree as highest education
White alone, not	91%	88.9%	Hispanic, American Indian, Black, 2 or
Hispanic or Latino			More Races

## **Most Important Community Problems**



## Community Conversations and Key Informant Meetings

Key informant meetings and community conversations were conducted with members of area communities in order to hear personal perspectives on:

- 1. What makes a healthy community?
- 2. What would make the community a healthier place?
- 3. What strengths can we build on to make the community healthier?

After all the key informant meetings were held, all participants who were invited, even if they didn't attend the session, received the findings from all communities as were given the opportunity to raise questions and provide feedback. The list of meetings held in 2024 appear in the Appendix.

### **Community Input Session Common Themes**

Eight input sessions were held with 60 community members between January 29 - February 22 at the locations throughout the primary service area. Participants represented community "key informants", and one group consisted of participants in the 6:8 Circles program.

Access to Healthcare: Across all community input sessions, there is a consistent theme of the importance of accessible healthcare services, including mental health resources and primary care physicians.

Concerns include wait times for appointments and the need for more specialized services.

**Social Support and Connection:** Communities emphasize the importance of social interaction, volunteerism, and neighborly support in promoting overall health and well-being. There is a desire for more community events and programs that facilitate socialization and combat social isolation.

**Housing Affordability and Accessibility:** Many communities express concerns about affordable housing options, particularly for the elderly and those with disabilities. Lack of inventory and waitlists for supported housing are common issues.

**Nutrition and Food Access:** Access to nutritious food and education on healthy eating are highlighted as essential components of community health. Suggestions include community gardens, cooking classes, and programs to address food insecurity, especially among students.

Mental Health and Substance Abuse: There is a need for increased access to mental health services and resources, as well as support for addiction and substance abuse issues. Communities also recognize the importance of addressing social determinants of mental health, such as social isolation and economic stressors.

**Transportation:** Transportation barriers, including lack of access to reliable vehicles and public transportation, are identified as challenges in accessing healthcare, employment, and community resources.

**Community Engagement and Collaboration:** Collaboration between healthcare providers, community organizations, schools, and local government is seen as crucial for addressing community health needs effectively. There is a call for better communication and coordination among stakeholders.

**Youth and Family Support**: Concerns about the well-being of youth and families are prevalent, including access to childcare, support for parenting, and addressing issues such as bullying, vaping and screen time.

## Specific Ideas for Sauk Prairie Healthcare's Community Heath Improvement Implementation Plan

**Expanded Access to Healthcare:** Address wait times for appointments, consider implementing walk-in clinics or urgent care hours, and explore options for Saturday hours to accommodate working families.

**Enhanced Mental Health Services:** Invest in mental health resources, including expanding behavioral health services and providing support for addiction treatment. Consider mobile clinics or telehealth options to increase accessibility.

**Community Outreach and Engagement:** Increase efforts to engage with the community and address specific needs identified, such as dental care and eye care. Improve communication about available services and resources.

**Partnerships and Collaboration:** Strengthen partnerships with community organizations, schools, and local government to address broader social determinants of health and promote community well-being.

**Addressing Demographic Changes:** Prepare for demographic shifts, such as an aging population, by expanding medical services and resources tailored to the needs of older residents. Also, focus on attracting younger residents to the community.

**Innovation and Adaptation:** Embrace digital strategies, such as online scheduling and telemedicine, to improve access and convenience for patients. Consider innovative approaches to address specific community needs, such as providing education on healthy living and nutrition.

Patient-Centered Care: Prioritize patient needs and preferences, ensuring that services are accessible, inclusive, and responsive to the diverse needs of the community. Consider implementing concierge services or other personalized care options.

## **Ethnographic Study**

### **Ethnographic Study Summary**

Ten in-depth interviews were held with primary care clinic patients from SPH primary care clinic communities in January and February 2024. Interviewees represented a broad array of backgrounds and life stages. The following are high level takeaways from those interviews.

**Nutrition**: A significant topic of health involves several aspects of healthy eating—accessing, storing, and preparing healthy food. Challenges include the limited availability of nutritious food options within a short drive, as most residents take weekly trips to larger groceries stores in larger towns. This bulk-buying model poses a barrier to purchasing fresh, healthy food and, for some, requires a significant investment of time. Additionally, the portion size and time constraints faced by individuals living alone or busy families make it difficult to prepare nutritious meals.

**Leveraging Social Connections Through Movement and Exercise:** People who engage in outdoor activities or exercise often do so in social settings, such as fishing, hiking with friends, biking, going to a park, or attending swim aerobics classes.

**Integration of Behavioral and Mental Health:** When asked what it means to be "healthy," participants rarely mentioned behavioral or mental health. Yet about half reported struggles with stress, anxiety, or trauma, and were already using mental health services.

Insurance Access and Navigation: Interview participants often based their health decisions on their insurance coverage but found it confusing and difficult to navigate what is covered, the types of services or appointments they can make, and what they can talk about at what appointment. Without the gift of time to read through online resources, make calls, and understand the language of their policy documents, people may be missing key health services to support their whole person's health.

**Overall Experience:** Overall patient experiences highlights addressed broader insights such as patients' reliance on specialists outside of SPH, technology as a barrier, and re-imagining health education to support behavioral change.

## **County Health Rankings**

## **Key Findings**

- Sauk County is faring about the same as the average county in Wisconsin for Health Factors, and better than the average county in the nation.
- Sauk County has a slightly higher rate of obesity (37%) compared to Wisconsin (34%) and the nation (34%).
- Access to Exercise Opportunities is 74% in Sauk County compared to 84% in Wisconsin and the nation.
- The ratio of dentists to total population is worse (1,460:1) than Wisconsin and the nation (1,360:1).
- The ratio of population served by a single mental health provider is 510:1, compared to Wisconsin at 400:1 and the nation at 320:1.
- In Sauk County, 34% of motor vehicle crash deaths involved alcohol compared to 35% in Wisconsin and 26% nationwide.

## **American Community Survey**

### **Key Findings**

- More than one-quarter (27.63%) of Sauk County households are "Cost Burdened" in which housing costs exceed 30% of income. Wisconsin is (2.6%).
- The annual rate of property crimes in Sauk County per 100,000 population is 2,401.70 compared to the State rate of 1,982.70.
- As of 2020, 93.07% of the population had access to high speed (>25MBPS) compared to 96.97% for Wisconsin.
- Sauk County has 9.68 liquor stores per 100,000 population compared to the State rate of 7.46.
- Sauk County has 93.58 fast food establishments per 100,000 population compared to the State rate of 66.50.

- Nearly one in five (18.7%) adults in Sauk County are smokers compared to the State average of 17.7%.
- The age-adjusted death rate (per 100,000 population) from cancer is 168.9 while the State rate is 154.2.
- The age-adjusted death rate (per 100,000 population) from coronary heart disease is 102.8 while the State rate is 87.0.
- The age-adjusted death rate (per 100,000 population) from stroke is 41.3 while the State rate is 33.6.

## Medical Insurance

Little variation in the distribution in type of medical insurance exists between the Sauk Prairie Healthcare service area and the surrounding areas.

	SPH	Sauk	Columbia	
Medical Insurance Source	PSA	County	County	Wisconsin
From a union	3.3%	3.0%	3.2%	3.0%
From a place of work	54.8%	53.3%	54.6%	54.4%
From a fraternal or other membership group	0.6%	0.6%	0.6%	0.6%
State or national healthcare exchange	5.9%	5.9%	5.9%	5.8%
Other government source	6.8%	7.1%	7.1%	6.9%
Through an agent representing one company	4.5%	4.8%	4.6%	4.5%
Agent (broker) representing more than one				
company	6.3%	6.3%	6.2%	5.7%
Mail advertising or Phone contact (no agent)	1.2%	1.1%	1.2%	1.1%
Through the Internet	3.9%	3.8%	3.9%	3.8%
Medical Insurance - Kind of Policy: HMO				
(Health Maintenance Organization)	18.1%	17.8%	18.4%	18.4%
Medicaid - Type of Policy	7.9%	8.4%	8.2%	8.5%
Medicare - Type of Policy	24.0%	24.8%	24.6%	23.3%

## Prevalence of Ailments

High prevalence ailments often require professional support, as opposed to self-care, include Anxiety/Panic, Depression, Back Pain, Acid Reflux, High Cholesterol, Obesity, and High Blood Pressure.

Prevalence of Ailments	SPH PSA	Sauk County	Columbia County	Wisconsin
Acne	9.8%	9.8%	9.7%	10.4%
ADD/ADHD	3.0%	3.1%	3.2%	3.3%
Allergy/Hay Fever	19.8%	19.9%	19.9%	19.4%
Anxiety/Panic	<mark>14.0%</mark>	<mark>14.4%</mark>	<mark>14.5%</mark>	<mark>14.5%</mark>
Arthritis/Rheumatoid Arthritis (RA)	4.5%	4.6%	4.5%	4.2%
Arthritis/Osteoarthritis	8.8%	9.0%	9.1%	8.6%
Asthma	5.5%	5.6%	5.6%	5.7%
Athlete's Foot	3.2%	3.3%	3.3%	3.2%
Backache/Back Pain	<mark>25.3%</mark>	<mark>25.4%</mark>	<mark>25.5%</mark>	<mark>24.7%</mark>
Bipolar Disorder	1.3%	1.4%	1.4%	1.4%
Cancer	2.7%	2.7%	2.8%	2.5%
Chronic Bronchitis	0.6%	0.8%	0.7%	0.7%

Prevalence of Ailments Chronic/Severe Pain Cold Sores	PSA	County	County	
			County	Wisconsin
Cold Soros	3.0%	3.4%	3.2%	3.2%
	5.2%	5.1%	5.2%	5.0%
Constipation	8.8%	8.9%	9.1%	8.8%
Dandruff/Dry Scalp	6.8%	6.8%	7.1%	7.0%
Depression	<mark>11.4%</mark>	<mark>12.1%</mark>	<mark>12.0%</mark>	<mark>12.0%</mark>
Diabetes (Insulin Dependent)	1.2%	1.3%	1.2%	1.2%
Diabetes (Non-Insulin Dependent)	6.9%	7.0%	7.1%	6.9%
Dry Eyes	11.2%	11.4%	11.6%	11.5%
Eczema/Skin Itch/Rash	6.7%	6.6%	6.8%	6.9%
Emphysema	0.3%	0.4%	0.3%	0.4%
Epilepsy/Seizures	0.4%	0.4%	0.4%	0.5%
Erectile Dysfunction (ED) (men only)	4.2%	4.4%	4.0%	4.1%
Fibromyalgia	1.6%	1.8%	1.7%	1.6%
Flu	2.8%	3.0%	2.8%	2.9%
Gout	1.5%	1.6%	1.6%	1.5%
Hair Loss	4.7%	4.5%	4.7%	4.8%
Hearing Loss	4.2%	4.3%	4.4%	4.0%
Heart Attack/Heart Disease	2.7%	2.7%	2.8%	2.4%
Heartburn/Acid Reflux	17.3%	17.6%	17.5%	16.7%
Hepatitis	0.2%	0.2%	0.2%	0.2%
High Cholesterol	15.8%	15.8%	15.8%	14.7%
Hypertension/High Blood Pressure	18.1%	18.0%	18.0%	17.3%
Insomnia	7.6%	7.9%	7.8%	7.9%
Irritable Bowel Syndrome (IBS)	3.2%	3.3%	3.1%	3.2%
Kidney Ailments	1.3%	1.4%	1.4%	1.3%
Macular Degeneration	1.0%	1.0%	1.0%	0.9%
Menopause/Hormone Replacement	1.076	1.076	1.070	0.970
(women only)	2.5%	2.6%	2.7%	2.5%
Migraine Headaches	7.6%	7.8%	7.7%	7.7%
Multiple Sclerosis (MS)	0.3%	0.3%	0.3%	0.3%
Muscle Strain/Sprain	6.5%	6.6%	6.6%	6.5%
Nail Fungus	3.7%	3.7%	3.8%	3.8%
		12.9%	3.8% 12.9%	
Obesity/Overweight	12.7%		1.9%	12.7%
Osteoporosis Oversetive Bladder	1.9% 2.1%	1.9%		1.9% 2.2%
Overactive Bladder		2.2%	2.1%	
Prostate (men only)	1.1%	1.1%	1.1%	1.1%
Psoriasis	1.8%	1.9%	1.8%	1.8%
Restless Legs Syndrome	3.1%	3.2%	3.3%	3.1%
Rosacea or Skin Disease	1.5%	1.5%	1.4%	1.4%
Sinus Congestion/Headache	13.8%	13.9%	13.6%	13.0%
Sleep Apnea	6.6%	6.8%	6.6%	6.4%
Snoring	7.8%	7.7%	7.8%	7.6%
Urinary Tract Infection (UTI)	3.6%	3.7%	3.7%	3.8%
Wrinkles	6.4%	6.5%	6.5%	6.0%
Yeast Infection (women only)	2.6%	2.6%	2.4%	2.6%
Sc	ource: Applied	l Geographic So	lutions Consumer E	Behavior Survey

## **Health Attitudes and Behaviors**

Data from the SPH Primary Service Area are consistent with geographic comparators.

Health Attitudes and Behaviors	SPH PSA	Sauk County	Columbia County	Wisconsin
Visited A Doctor in the Past Year	82.6%	82.1%	82.7%	81.7%
I go to the doctor regularly for check-ups (Strongly Agree)	53.8%	53.4%	53.9%	53.0%
I go to the doctor regularly for check-ups (Agree Somewhat)	23.0%	23.0%	22.9%	23.3%
I go to the doctor regularly for check-ups (Disagree Somewhat)	12.3%	12.1%	12.2%	12.2%
I go to the doctor regularly for check-ups (Strongly Disagree)	10.9%	11.5%	11.1%	11.4%
I only go to the doctor when I'm very ill (Strongly Agree)	21.6%	21.8%	21.5%	21.6%
I only go to the doctor when I'm very ill (Agree Somewhat)	29.8%	30.4%	29.8%	30.3%
I only go to the doctor when I'm very ill (Disagree Somewhat)	23.4%	23.0%	23.3%	23.4%
I only go to the doctor when I'm very ill (Strongly Disagree)	25.2%	24.7%	25.3%	24.7%
I take medicine as soon as I don't feel well (Strongly Agree)	7.6%	7.9%	7.6%	8.3%
I take medicine as soon as I don't feel well (Agree Somewhat)	27.6%	27.6%	27.7%	27.8%
I take medicine as soon as I don't feel well (Disagree Somewhat)	39.6%	39.6%	39.7%	39.4%
I take medicine as soon as I don't feel well (Strongly Disagree)	25.2%	24.9%	25.0%	24.5%
Medication has improved the quality of my life (Strongly Agree)	25.4%	25.9%	25.8%	25.2%
Medication has improved the quality of my life (Agree Somewhat)	41.9%	41.5%	41.2%	41.4%
Medication has improved the quality of my life (Disagree Somewhat)	19.5%	19.2%	19.7%	19.7%
Medication has improved the quality of my life (Strongly Disagree)	13.2%	13.4%	13.3%	13.7%
I follow a regular exercise routine (Strongly Agree)	30.6%	29.7%	30.4%	30.8%
I follow a regular exercise routine (Agree Somewhat)	37.2%	37.4%	36.9%	37.3%
I follow a regular exercise routine (Disagree Somewhat)	22.1%	22.5%	22.5%	22.0%
I follow a regular exercise routine (Strongly Disagree)	10.1%	10.4%	10.3%	10.0%
My medical conditions limit my lifestyle somewhat (Strongly Agree)	9.6%	10.4%	9.6%	9.9%
My medical conditions limit my lifestyle somewhat (Agree Somewhat)	23.5%	23.8%	24.0%	23.4%
My medical conditions limit my lifestyle somewhat (Disagree Somewhat)	20.1%	19.8%	19.9%	19.8%
My medical conditions limit my lifestyle somewhat (Strongly Disagree)	46.8%	45.9%	46.5%	46.9%
	Source: Appli	ed Geographic :	Solutions Consume	r Behavior Survey

## **Primary Care Measures**

The SPH Primary Care Clinics track several measures of clinical quality in an effort to encourage patients to take an active role in improving or maintaining their health. Below are high priority measures we are currently tracking. In all cases, success will be measured by improving these ratios:

60% of 2024 Sauk County CHA Survey respondents selected Mental Health as a community problem that we should work to improve, making it the 2nd most selected community problem for the County and the SPH PSA.

Measure	Percent Complete
Had an Annual Wellness Visit	76%
Had Colon Cancer Screening done	89%
Percent of Diabetics with A1C <7	16%
Percent of Diabetics with A1C test	35%
Percent of Patients with Hypertension <140/90	47%
Percent of Eligible Patients Completing a Mammogram	12%
	Source: SPH Internal Data

## The following data reflect Sauk County-level data as compiled by the Sauk County Health Department.

## Quality of Life

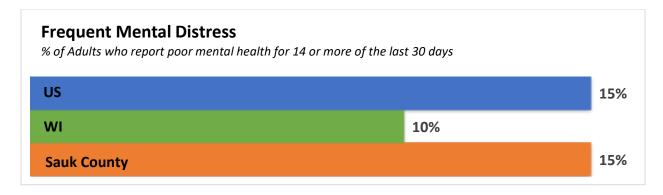
Quality of Life represents the well-being of a community. It underscores the importance of physical, mental, social, and emotional health from birth to adulthood. Quality of life data tells us about how people perceive their health. It tells us whether they feel healthy and satisfied. Quality of Life measures include self-reported physical and mental wellness.

### Mental Health

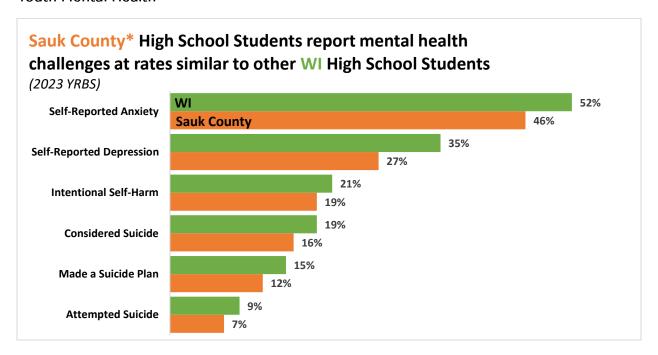
Mental health includes our emotional, psychological, and social well-being. It affects how we think, feel, and act, and helps determine how we handle stress, relate to others, and make choices<sup>ii</sup>.

#### Adult Mental Health

An estimated 25.6% of Sauk County adults have ever been told by a health professional that they had depression<sup>iii</sup>, higher than the national average of 23.2%. 15% of Sauk County Adults report 14 or more days of Poor Mental Health each month, higher than the state rate<sup>iv</sup>.



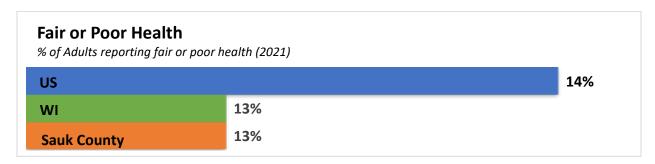
## Youth Mental Health vi



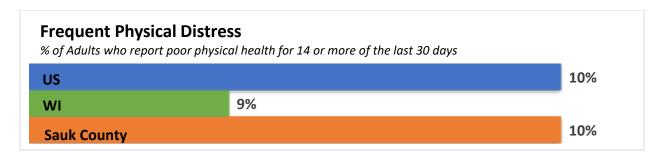
\*Data in this chart does not include Sauk Prairie, Lodi, or Wisconsin Heights schools.

## **Physical Health**

13% of Sauk County Adults report that they consider themselves in fair or poor health<sup>vii</sup>.

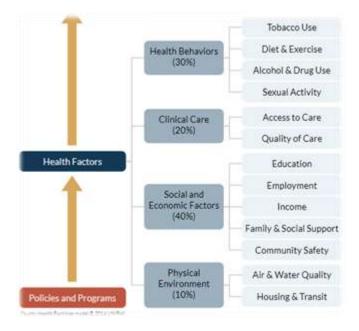


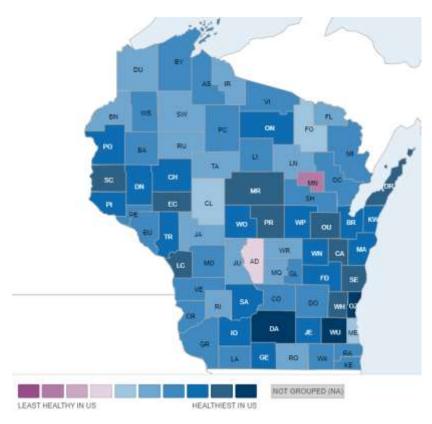
10% of Sauk County Adults report 14 or more days of Poor Physical Health each month<sup>viii</sup>.



## **HEALTH FACTORS**

Health Factors represent those things we can improve to live longer and healthier lives. These include Health Behaviors, Clinical Care, Social & Economic Factors, and Physical Environment. They are indicators of the future health of our communities.





Sauk County is faring about the same as the average county in Wisconsin for Health Factors, and better than the average county in the nation. Sauk County ranked 28th out of 72 WI Counties in Health Factors<sup>ix</sup>.

## **HEALTH BEHAVIORS**



Health behaviors are actions individuals take that affect their health. They include actions that lead to improved health, such as eating well and being physically active, and actions that increase one's risk of disease, such as smoking, excessive alcohol intake, and risky sexual behavior.

## Alcohol, Tobacco, and Other Drug Use

## Alcohol Use in Sauk County

Alcohol is the most commonly used addictive substance in WI<sup>x</sup>. Wisconsin's strong culture of excessive alcohol use makes it challenging to address this issue. 63.1% of WI adults report Alcohol Use in the past month, much higher than the national rate of 52.2%. There is a long list of health risks related to drinking alcohol, including increased cancer risks, heart disease, liver

46% of 2024 Sauk County CHA Survey respondents selected Alcohol, Commercial Tobacco (Nicotine), Vaping & Other Drug as a community problem that we should work to improve, making it the 3rd most selected community problem, but 4th most selected in the SPH.

disease, alcohol use disorder, unintentional injuries, and motor vehicle crashes.

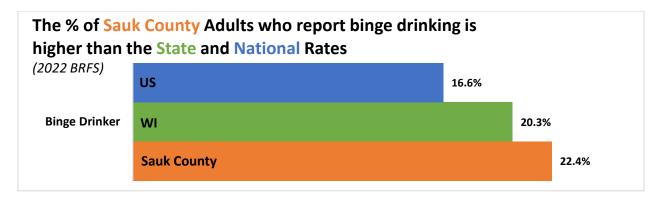
Binge drinking is defined as having four or more drinks (women) or five or more drinks (men) on one occasion. Most people who binge drink are not dependent on alcohol, however, people who binge drink are at higher risk for serious health effects from alcohol<sup>xi</sup>. While binge drinking is more common in adults, teenagers also engage in drinking behaviors. Alcohol affects young people more powerfully than it does adults, and drinking before the brain and body are fully developed can have dangerous effects. Talking to teens about alcohol and modeling safe drinking habits can play a major role in shaping teens' attitudes around alcohol<sup>xii</sup>.

## Sauk County Alcohol Data:

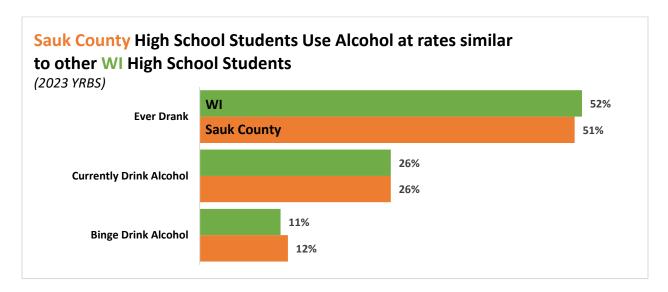
- 279 establishments have a Liquor License, a ratio of 233 people per license<sup>xiii</sup>
- 22.4% of Sauk County Adults report binge drinking, higher than the state and national rates<sup>xiv,xv</sup>
- Sauk County High School Students Use Alcohol at rates similar to other WI High School Students<sup>xvi,xvii</sup>:
  - 52% report ever drinking alcohol
  - 26% report currently drink alcohol
  - o 12% report binge drinking

- In 2023, there were 526 chronic-alcohol related emergency room visits and 341 inpatient hospitalizations\*\*viii
- There were 44 alcohol-attributable deaths in 2022xix
- From 2017-2021, 34% of motor vehicle crash deaths involved alcohol<sup>xx</sup>

## Adult Binge Drinking xxi, xxii



## Youth Alcohol Use xxiii, xxiv



## Commercial Tobacco (Smoking & Vaping) in Sauk County

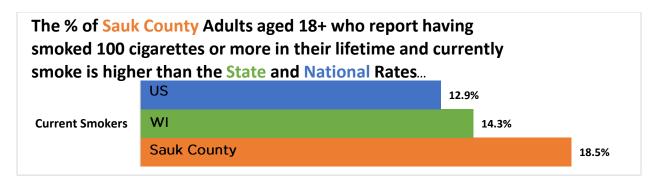
Note: Tobacco in this report refers to commercial tobacco, not traditional Native

American/Indigenous tobacco.

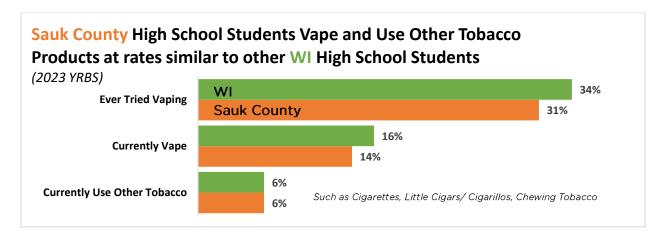
Commercial tobacco and nicotine products are a leading cause of preventable death and disease. Smoking can cause cancer, heart disease and stroke, lung diseases, Type 2 diabetes, and chronic obstructive pulmonary disease. Tobacco is also changing to ecigarettes (vapes), little cigars/cigarillos, smokeless products, and flavorings, many of which appeal to youth\*\*×××.



### Adult Smoking xxvi, xxvii



### Youth Tobacco Use xxviii, xxix

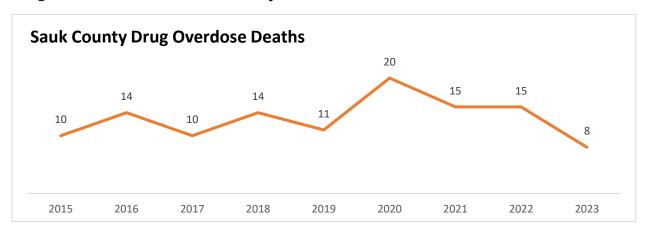


## Other Drug Use

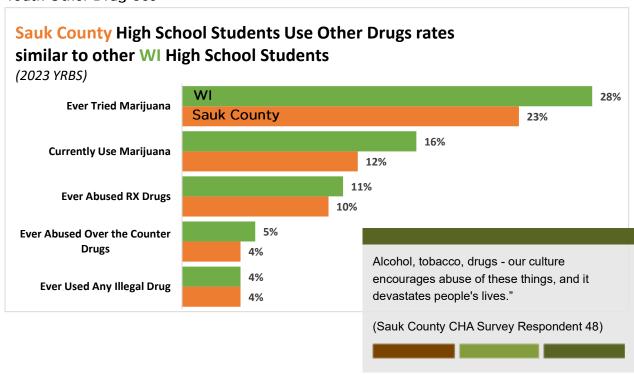
Drug overdose deaths are a national public health emergency. Naloxone can reverse opioid overdoses and prevent death. Increasing access to naloxone and to evidence-based treatments

for substance use disorder can help reduce overdose deaths. For information on Naloxone Training, visit <a href="https://www.co.sauk.wi.us/publichealth/you-and-naloxone-can-save-life">https://www.co.sauk.wi.us/publichealth/you-and-naloxone-can-save-life</a>.

Drug Overdose Deaths in Sauk County declined in 2023xxx



Youth Other Drug Use xxxi, xxxii



Partnership for Prevention (P4P) works to reduce youth substance use in Sauk County. To learn more, visit <a href="https://p4psauk.org/">https://p4psauk.org/</a>.

Support People and Empower Recovery (SUPER) works to create a safe, inclusive, and supportive Sauk County community where everyone can recover and thrive. To learn more, visit <a href="https://www.facebook.com/saukSUPER">https://www.facebook.com/saukSUPER</a>.

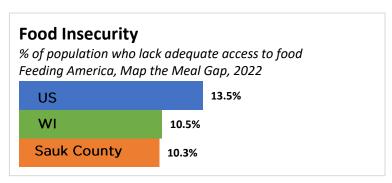
## Diet & Exercise

Balanced nutrition and physical activity are essential for health. Poor nutrition can hinder growth and development, while excessive calorie consumption can lead to obesity, especially when paired with too little physical activity. Inadequate physical activity also contributes to increased risk of conditions such as coronary heart disease, diabetes, and some cancers\*\*xxiii.

"Healthy foods are hard to get and expensive, costs of foods are growing and out pacing wage increases, heck even cheap, unhealthy foods are getting expensive."

(Sauk County CHA Survey Respondent 731)

## Food Insecurity



Everyone need nutritious food to be healthy. Food insecurity is the lack of access to enough food for an active, healthy life. Key drivers of food insecurity include unemployment, poverty, and financial instability. Food insecurity measures If people had a constant food supply over the past year. Food insecurity also considers the

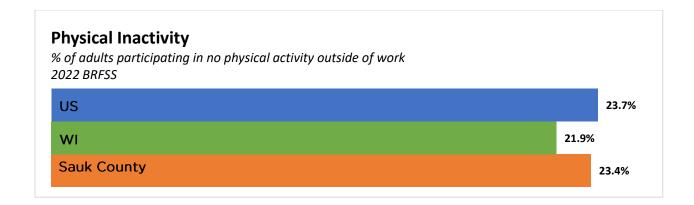
ability to provide balanced meals, including fruits and vegetables. In 2022, 10.3% of Sauk County's population (6,740 people) were food insecure, xxxiv similar to the state rate and better than the national rate.

## Physical Inactivity XXXV, XXXVI

22% of 2024 Sauk County CHA Survey respondents selected Healthy Food and 20% selected People don't get enough exercises as community problems that we should work to improve.

Only 9% of Sauk County CHA Survey respondents selected Food options as something they like best about their community.

Physical inactivity is linked to increased risk of health conditions such as Type 2 diabetes, cancer, stroke, hypertension, cardiovascular disease, and shortened life expectancy. Physical activity is associated with improved sleep, cognitive ability, bone and musculoskeletal health, and reduced risk of dementia. Physical activity, in addition to diet, is important for the prevention of obesity\*\*xxvii\*. Sauk County's physical inactivity rate (23.4% of adults with no physical activity outside of work) is similar to the state and national rates.



"It's not something new that almost everyone needs more exercise. More people are becoming obese and need to exercise and the illnesses that go along with obesity are also on the rise. There are not enough places for people to go where they can get exercise in our area for free or a low price. There are a lot of gyms in our area, but they are too expensive for many and others don't feel comfortable going to a gym. It would be nice to see local groups that maybe get together for walks, runs, aerobics in the park, etc.; maybe something that could be set up as a free and open to the public once a week event."

(Sauk County CHA Survey Respondent 895)

"Exercise -- Half of the gyms in the area are for elitists -- the top members of the community. The cost,

"Exercise -- Half of the gyms in the area are for elitists -- the top members of the community. The cost, environment, vibes, etc., are so unwelcoming to the average person at those places. More options for solid gym spaces with 24-hour access would be great."

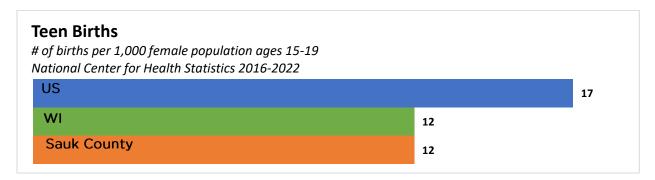
(Sauk County CHA Survey Respondent 389)

## Sexual Activity

High risk sexual practices such as unsafe sex and higher numbers of lifetime sexual partners can lead to sexually transmitted infections (STIs) and unplanned pregnancies, which can affect immediate and long-term health as well as the economic and social well-being of individuals, families, and communities\*\*xxxviii.

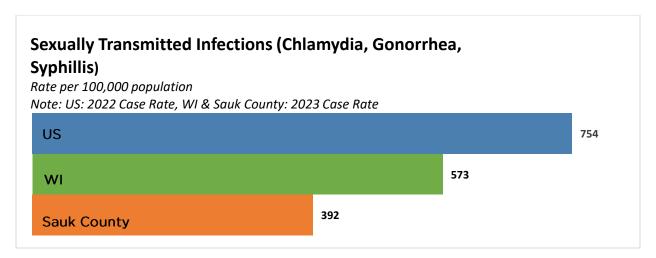
## Teen Birthsxxxix

Early childbearing during teenage years has been associated with adverse health outcomes for the mother-child unit, the impacts of which can extend to partners, other family members, and the community. Sauk County's Teen Birth rate (12 births per 1,000 female population ages 15-19) is the same as the state average, and lower than the national average.



## Sexually Transmitted Infections (STIs) XI,XII

STIs are associated with an increased risk of cervical cancer, infertility, and premature death. Sauk County's STI rates (392 per 100,000 population) is lower than state and national rates.



## CLINICAL CAREXIII

Clinical Care is anything relating to the direct medical treatment or testing of patients.
Access to affordable, quality health care can

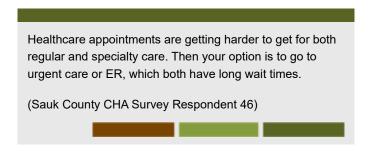


prevent disease and lead to earlier disease detection. Community members are living longer lives because of breakthroughs in clinical care, such as advancements in vaccinations, surgical procedures, and preventative screenings.

### Access to Care

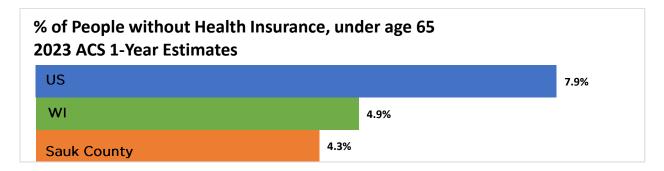
Access to affordable, quality health care is important to physical, social, and mental health. Health insurance helps individuals and families access needed primary care, specialists, and emergency care, but does not ensure access on its own—it is also necessary for providers to offer affordable care, be available to treat patients, and be in relatively close proximity to patients. Together, health insurance, local care options, and a usual source of care help to ensure access to health care. Having access to care allows individuals to enter the health care system, find care easily and locally, pay for care, and get their health needs met.

### Uninsured xliii



Lack of health insurance coverage is a significant barrier to accessing needed health care and to maintaining financial security. A report from the Kaiser Family Foundation on access to healthcare found that "Going without coverage can have serious health consequences for the uninsured because they receive less

preventative care, and delayed care often results in serious illness or other health problems. Being uninsured can also have serious financial consequences, with many unable to pay their medical bills, resulting in medical debt."xliv In Sauk County, 4.3% of people under age 65 do not have Health Insurance.

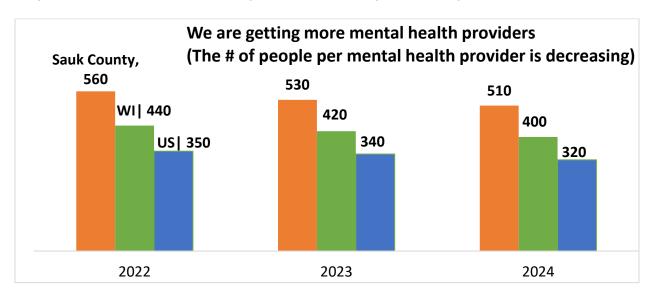


## Primary Care Physicians XIV

Access to health care requires not only financial coverage, but also access to providers. Sufficient availability of primary care physicians is essential for preventive and primary care and, when needed, referrals to appropriate specialty care. In Sauk County, there was one primary care physician per 1,000 people. This is better than the state and national ratios.

#### Mental Health Providers xivi

While the number of Mental Health Providers in Sauk County is increasing, some people still encounter challenges in accessing mental health services. Finding a provider that accepts your insurance, being able to afford out of pocket costs, needing to travel out of area to be seen, and long wait lists were all mentioned by 2024 Sauk County CHA survey takers.



### **Dentists**

Untreated dental disease can lead to serious health effects including pain, infection, and tooth loss. Although lack of sufficient providers is only one barrier to accessing oral health care, much of the country suffers from shortages. In Sauk County, there was 1 dentist per 1,460 people<sup>x|v|i|</sup>. This is worse than the state and national ratios. There also is a shortage of dentists that accept Badgercare, resulting in many Sauk County residents needing to travel long distances to see a Dentist.

24% of 2024 Sauk County CHA Survey respondents selected Dental Health as a community problem that we should work to improve.

When we look at the responses by Race/Ethnicity, 40% of the respondents that are People of Color selected Dental Health as a community problem that we should work to improve.

This tells us that Access to Dental Care is not the same for all groups of people in Sauk County.

"We're having to leave and drive a distance for dental care as nowhere in our town is covered by our insurance."

(Sauk County CHA Survey Respondent 370)

"The number of dentists who accept patients with Medical Assistance has been perpetually insufficient. This makes it very challenging for both families and individuals to seek dental care in both in an emergency as well as preventatively. The reimbursement rate to dentists from MA needs to be greatly increased."

(Sauk County CHA Survey Respondent 492)

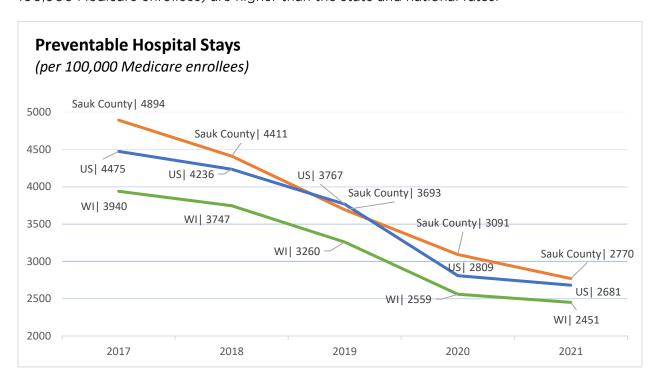
### Quality of Care

29% of 2024 Sauk County CHA Survey respondents selected Health care services as something they like best about their community.

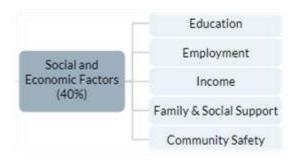
High quality health care is timely, safe, effective, and affordable—the right care for the right person at the right time. High quality care in inpatient and outpatient settings can help protect and improve health and reduce the likelihood of receiving unnecessary or inappropriate care.

## Preventable Hospital Stays XIVIII

Hospitalization for ambulatory-care sensitive conditions, diagnoses usually treatable in outpatient settings, suggests that quality outpatient care was not accessible. This measure may also represent a tendency to overuse emergency rooms and urgent care as a main source of care. While Sauk County is improving in this measure, our rates of preventable stays (2,770 per 100,000 Medicare enrollees) are higher than the state and national rates.



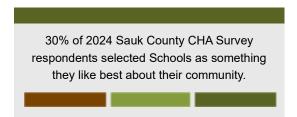
## **SOCIAL & ECONOMIC FACTORS**

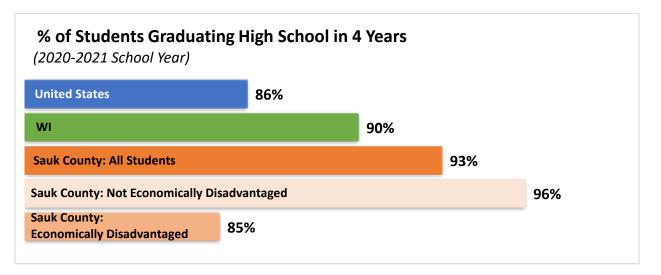


Social and economic factors-- such as education, employment, income, family and social supports, and community safety significantly affect how well and how long we live. They account for 40% of health outcomes- they are our largest influencers of health. Social and economic factors affect our ability to make healthy choices, afford medical care and housing, manage stress, and more.

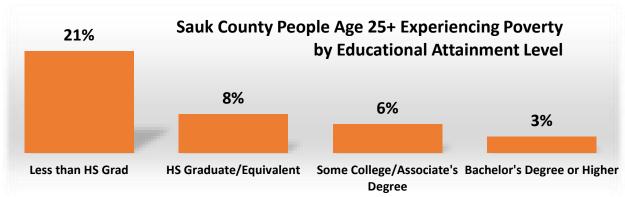
## Education

At 93%, Sauk County's High School Graduation rate is good, above both the National and State averages<sup>xlix</sup>. However, this rate is significantly lower for economically disadvantaged students (85%)<sup>1</sup>.





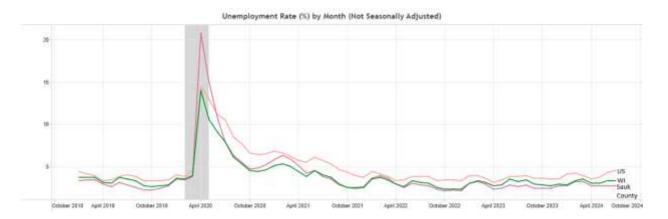
Poverty Rates are tied to Education levels. As a person's educational attainment level goes up, their chances of living in poverty goes down<sup>||</sup>.



## **Employment**

Unemployment in Sauk County generally is comparable to the rest of Wisconsin. In July 2024, the unemployment rate in Sauk County was 2.7%, lower than both the National and State Unemployment Rates<sup>III</sup>.

Only 15% of 2024 Sauk County CHA Survey respondents selected Employment Opportunities as something they like best about their community.



## **Economic Stability**

Some people in Sauk County are struggling and can't afford basic needs like healthy food, healthcare, and housing. The poverty rate in Sauk County in 2023 was 9.1% (an estimated 5,929 people), lower than National and State rates<sup>(iii)</sup>.

People with steady jobs are less likely to live in poverty and more likely to be healthy. People with disabilities, injuries, or chronic conditions may be especially limited in their ability to work<sup>liv</sup>. An estimated 1,345 Sauk County Residents are Working Poor, employed with income below the poverty level<sup>lv</sup>.

### ALICE: Asset Limited, Income Constrained, Employed



1 in 3 Sauk County Households were below the ALICE thresholds in 2022. We all know people who are ALICE: Asset Limited, Income Constrained, Employed, meaning they earn more than Federal Poverty Level, but less than the basic cost of living for the area they live in. These households can struggle to keep up with rising costs of housing, childcare, food, transportation, health care, and other household essentials.

In Sauk County, 33% of households were below the ALICE threshold (24% ALICE households and 9% households in Poverty)<sup>Ivi</sup>. That means 1 in 3 Sauk County households struggle to the afford the essentials.

#### Financial hardship is not evenly distributed in Sauk County

The percentage of household below the ALICE threshold varies by race and ethnicity. In Sauk County, American Indian/Alaska Native households (85%), 2+ Races households (46%), and Hispanic households (42%) are more likely to be ALICE than others<sup>[vii]</sup>.

# BLUFFVIEW NEIGHBORHOOD COMMUNITY NEEDS ASSESSMENT SUMMARY

Sauk Prairie Healthcare hosted three meetings involving 25 key informants to identify the needs and identify potential actions designed to support the community health needs of the Bluffview neighborhood located on Hwy 12 across the road from the Sauk Prairie Recreation Area. The proposed action plan will be revisited as part of the Community Health Improvement Implementation Plan. Some community leaders who were involved in the development of this plan focused on the top priority of addressing infrastructure issues within the neighborhood. Since most of the roads and property are owned by a single owner, there is little ability to access funding for improvements.

#### Goals:

- Identify and prioritize the community needs of the Bluffview neighborhood.
- Develop solution-oriented actions to address the high priority needs.

Category	Issue Statement(s) What is the problem?	Proposed Actions	Action Team
Housing	Provide stable and affordable housing for those living in the community	<ol> <li>Apply for fire numbers on behalf of the apartment property owner</li> <li>Provide a community liaison to help residents navigate housing issues</li> </ol>	
Transportation	Lack of reliable and flexible transportation leads to missed appointments, lack of healthy food shopping, and/or poor job attendance	Make the Ride Happen program could possibly help in Bluffview	Colin Mitchell Ken Carlson Sauk County
Childcare/ Eldercare	Childcare: How can quality childcare be provided to kids who are not in school? Eldercare: Unsure	<ol> <li>Partner with HeadStart to bring program to Bluffview and take kids to Tower Rock School for 4k</li> <li>Provide a late bus at middle and high school so those students can participate in afterschool sports and clubs</li> </ol>	
Nutrition	There is lack of healthy and affordable food within the Bluffview Community	<ol> <li>The food pantry now providers deliveries to Bluffview.</li> <li>The school now has a food pantry within and provides food during school breaks</li> <li>Open a grocery store in the community</li> </ol>	

Category	Issue Statement(s) What is the problem?	Proposed Actions	Action Team
Health Access: Medical/ Dental/ Mental	Lack of health access within the community	Provide mobile dental clinics     Provide Good Neighbor Clinic access within the community or more days/hours of availability	Ken Carlson Sauk County Health Dept. Colin Mitchel
Employment	Employment is limited due transportation requirements, documentation,		
Infrastructure: Roads/ Parks/ Water/ Electric/ Technology- Connectivity	Improve roads, green spaces, and lighting. Property owners are responsible for maintenance including parks, roads, trees, lights, etc. They refuse to hire those to do this maintenance.	1. Coordinate National Guard to assist with a voluntary tree cleanup. *  2. Research legal action against property owners to force them to maintain the community as per the original developer agreement (which was written to be in perpetuity)  *Tywana did get Rocky Sylvester with the National Guard to spend approximately 5 hrs to clean up large trees, but they could not manage finishing the cleanup.	Tywana German Jeff Wright Robin Meier
Education/ Training	Unsure	Group determined more information is needed to determine if or what is the issue with education.	

#### Other Issues to Consider

During Key Informant interviews conducted by SPH and Coalition partners, the recurring issue regarding the lack of transportation available to those populations in need was brought to the surface. Specific issues cited include difficulty getting to and from medical and dental visits, grocery shopping, traveling to and from work, and the ability to attend social activities.

This issue was not identified by SPH and the Coalition as a community health priority, rather it is considered an issue that affects each of the stated priority areas of each organization. To the degree possible, Transportation will be addressed as a key component of our Community Health Improvement Implementation Plan (CHIIP).

#### **INFORMATION GAPS**

#### That limit Sauk Prairie Healthcare's ability to assess all of the community needs

Sauk Prairie Healthcare observes that, while some health status indicators for the areas we serve are better than average, they may still represent problems that are highly prevalent, place a heavy burden on our population and might be worsening or fall short of benchmarks.

In addition, aggregate health data for the entire population often masks the impact on a particular subset group. There may be an information gap from the input that was received from

the Hispanic population. The Sauk County Health & Wellness Coalition found connecting with this population extremely challenging. SPH will work with local coalitions to obtain input for how to better serve these communities. Improving communication among all agencies, services, and community organizations was a desire expressed at each of the Key Informant meetings we held. As a result, SPH will commit to coordinating bi-annual coalition meetings in each of the communities (school districts) we serve. This approach will be used in Sauk Prairie with the Sauk Prairie Wellness Movement.



#### MAKING CHNA WIDELY AVAILABLE TO THE PUBLIC

Upon approval by the Sauk Prairie Healthcare Board of Directors, this document will be made available through a variety of communication channels including: <a href="mailto:posting-on-the-Sauk Prairie-Healthcare">posting-on-the-Sauk Prairie-Healthcare</a> (<a href="mailto:mailto:posting-on-the-Sauk Prairie-Healthcare">mailto:mail

#### **APPFNDIX**

## **Appendix A: Community Meetings**

#### Lodi, WI - Community Input Summary

February 6, 2024, 4-5:30PM February 6, 2024, 6-7:30PM 13 participants

#### Collaboration and Communication:

- Good communication among schools, organizations, and clinics is essential.
- Collaboration among different entities within the community is highlighted as a strength.

#### Accessibility and Walkability:

Access to events and walkability within the community are important factors for health.

#### Mental, Physical, and Social Needs:

- There's a focus on addressing mental health needs, including anxiety, depression, and isolation.
- Connecting individuals to resources and creating friendly and familiar leadership structures are emphasized.

#### Aging Population:

 There's a growing need to cater to the elderly population, including creating an "aging-friendly" community and raising dementia awareness.

#### Substance Use and Misuse:

- Issues such as vaping and caffeine abuse among youth are highlighted.
- Concerns about substance misuse, including the use of fentanyl, are expressed.

#### **Chronic Conditions:**

- Access to nutritious food, especially for the elderly, is a concern.
- Suggestions include implementing affordable and nutritious meal delivery programs and providing education on cooking skills.

#### Housing:

- Lack of available housing, particularly low-income housing, is identified as a challenge.
- Some individuals struggle with housing insecurity, and there's a need for affordable options.

#### **Healthcare Services:**

- Issues related to healthcare services include wait times, costs, and communication about charges.
- Suggestions include improving interoperability of electronic health records, better communication about charges, and expanding service hours, particularly on Saturdays.

#### Specific actions proposed by the focus group participants include:

- Creating community awareness and initiatives to address the needs of the aging population, including dementia awareness.
- Implementing mental health support programs for children and adolescents, including counseling services.
- Providing education on nutrition and cooking skills, especially for young individuals.

- Advocating for affordable housing options and addressing housing insecurity.
- Improving healthcare services by enhancing communication about charges, expanding service hours, and increasing access to specialists like gerontologists.
- Addressing substance misuse through education and community resources.

#### Plain, WI - Community Input Summary

February 5, 2024 6 participants

#### Access to Healthcare:

- Easy access to medical care within the town is essential for community health.
- Services such as physical therapy and imaging that align with community needs are valued.
- Concerns about funding and the need for volunteers for emergency medical services (EMS) are highlighted.

#### Community Engagement:

• Events and functions that bring people together, like the Strassenfest, are important for community cohesion and health.

#### Transportation:

Ride-sharing initiatives and support from churches for transportation are noted as beneficial.

#### Housing:

- Availability of lots but a lack of inventory of houses on the market is mentioned.
- There's a need for housing options suitable for the elderly.

#### Connectivity and Technology:

Improvements in connectivity and technology are noted, including good cell phone coverage.

#### Social Isolation:

• Suggestions include more library events and classes to combat social isolation, especially among the elderly.

#### Substance Use/Abuse:

 Substance abuse is reported as relatively low, possibly due to limited access to drugs and a relatively low unemployment rate.

#### Mental Health:

• Concerns about mental health, particularly anxiety related to cell phone usage, are raised.

#### **Expectations from Healthcare Services:**

- Community members expect accessibility, trustworthiness, and aging services from healthcare providers like Sauk Prairie Healthcare (SPH).
- Suggestions include improvements in scheduling appointments and better navigation assistance through health portals.

#### Reputation and Service Quality:

• Issues such as long ER waits and incorrect diagnoses in the ER are noted.

#### **Unaddressed Needs:**

• Participants were asked if there were any unaddressed issues or services they would like to see but did not provide specific responses at this time.

Overall, the community emphasizes the importance of accessible healthcare, community
engagement, transportation options, housing availability, and addressing social isolation and
mental health concerns. They also seek improved service quality and better communication with
healthcare providers.

#### River Valley Community Input Session:

February 22, 2024 10 participants

#### **Community Interaction and Support:**

- Opportunities for diverse interactions and collaborations are seen as vital for community health.
- A sense of support and neighborly assistance is valued.
- Volunteerism and community engagement are emphasized (Asset Based Community Development ABCD).

#### Local Healthcare Services:

 Accessible and affordable local healthcare services are considered crucial for community wellbeing.

#### Food Security and Nutrition:

- Efforts to improve food security include the presence of grocery stores, supporting restaurants, food trucks, farmers markets, food pantries, and community gardens.
- Providing resources such as cooking and food classes, especially during winter months, is important.

#### Social Isolation and Mental Health:

- Strategies to combat social isolation include community gardening initiatives like Convivium Gardens (Dubuque, IA) and neighbor-to-neighbor support.
- Mental health needs are highlighted, with a call for case managers, advocates, and affordable dental and eye care services.

#### Housing:

- There is a need for safe and affordable housing, particularly for seniors, with long waitlists for supported housing.
- Calls for funding support for housing coalitions and efforts to attract developers and investment are noted.

#### Schools and Mental Health:

- The presence of School Resource Officers (SROs) in schools is seen positively for addressing issues like bullying and raising awareness of resources.
- Schools are facing challenges addressing food insecurity among students and ensuring access to resources, especially during summer breaks.

#### **Healthcare Services and Access:**

- Sauk Prairie Healthcare (SPH) is perceived positively for its ability to provide timely appointments.
- Requests for expanded services, urgent care hours, Saturday hours, and more affordable healthcare options, particularly for dental and eye care, are made.

#### Demographic Changes:

 Anticipated demographic changes, including an aging population and efforts to attract younger residents, are noted.

Plateauing student families highlight the need for ongoing support in the education system.

#### Specific actions proposed by focus group participants include:

- Increasing community engagement and volunteerism through ABCD initiatives.
- Expanding access to local healthcare services, including dental and eye care, and advocating for affordable options.
- Addressing food insecurity through various initiatives such as community gardens and food assistance programs.
- Enhancing mental health support, including case management and advocacy services.
- Collaborating with schools to address student needs, including food insecurity and access to resources.
- Investing in safe and affordable housing options, particularly for seniors, and attracting developers and funding support.

#### Sauk Prairie Community Input Session

January 29, 2024 February 22, 2024 29 participants

# Community Engagement and Well-being:

- Access to outdoor spaces, parks, and recreational facilities for physical activities and socialization are important for community health.
- Availability of programs and social opportunities,



- including peer support groups, life skills training, and access to natural resources, contribute to well-being.
- Strong school districts with low student-teacher ratios, extracurricular activities, and support for learning disabilities are valued.

#### **Housing and Social Support:**

- Challenges related to affordable housing, transportation, and homelessness are identified.
- Concerns about in-home safety, especially for elders, and the need for support services are highlighted.

#### Mental Health and Social Isolation:

- Access to mental health resources, including trauma education, individual and group therapy, and support for various demographics such as veterans and families of addicts, is crucial.
- Reducing social isolation through community events, volunteer opportunities, church groups, and relationship-building initiatives is emphasized.

#### Substance Use and Addiction:

• Addressing substance use and addiction through treatment programs like the CARE program at Good Neighbor Clinic and community support services is essential.

#### Healthcare Access and Education:

- Improving access to healthcare services, including mental health resources and preventive care, is identified as a priority.
- Educating the community on when and how to seek help for mental health issues and reducing barriers to accessing treatment are key concerns.

#### Community Collaboration and Education:

- Collaborative efforts between healthcare providers, community organizations, and educational institutions are seen as vital for addressing health needs effectively.
- Education on topics such as financial literacy, disability awareness, and trauma prevention is suggested to empower individuals and families.

#### Specific actions proposed by focus group participants include:

- Increasing access to mental health resources through trauma education and support services tailored to specific demographics, such as veterans and families of addicts.
- Implementing community-wide initiatives to reduce social isolation, including organizing events, establishing support groups, and promoting volunteer opportunities.
- Improving housing affordability and safety measures, especially for vulnerable populations like the elderly and Soc Sec recipients.
- Enhancing healthcare access and education through programs aimed at preventive care, reducing barriers to treatment, and providing respectful and comprehensive support for mental health issues and addiction.
- Collaborating with community partners, including schools, churches, and local businesses, to address health disparities and promote well-being through education, resources, and support services

### Wisconsin Heights Community Input Summary

January 30, 2024 9 participants

#### Community Well-being and Engagement:

- A healthy community is characterized by a sense of belonging, acceptance, and diversity.
- Access to resources such as mental health services, fitness centers, and community events promotes well-being and socialization.
- Engaging populations that feel marginalized or on the outside is a priority.

#### Housing and Food Insecurity:

- Issues of affordable housing, particularly middle-income housing and accessible housing for the elderly and disabled, are highlighted.
- Limited options for grocery stores and transportation challenges exacerbate food insecurity.

#### Substance Use and Mental Health:

- Support and recovery resources for substance use disorders, including peer-to-peer support and grief support groups, are needed.
- Mental health issues and self-medication are often linked to social isolation and should be addressed through accessible services and support networks.

#### Physical Activity and Childcare:

- Access to outdoor recreation spaces, trails, and community events promotes healthy living and socialization.
- There is a significant need for daycare and childcare services in the area.

#### Population Changes and Trends:

• Population changes in the next 5-10 years are expected to follow standard trends, with potential shifts in healthcare utilization patterns.

#### Perception of Healthcare Services:

- Sauk Prairie Healthcare (SPH) is generally perceived positively, with a reputation for orthopedics, maternity care, wellness services, and access to healthcare.
- Shortcomings include limited accessibility to specialists, long wait times for certain services, and a lack of acute mental health care in clinics.

#### **Future Directions for Healthcare Services:**

- Anticipated changes in healthcare delivery include improved access to care, possibly through mobile clinics, and expanded preventative care services.
- There is a need for better digital connectivity and strategies to address acute mental health issues.

#### Specific actions proposed by focus group participants include:

- Enhancing access to mental health resources and substance use disorder treatment through peer support programs, grief support groups, and improved access to clinical providers.
- Addressing housing and food insecurity issues through incentives for builders, transportation solutions, and nutrition education programs.
- Promoting physical activity and socialization through community events, outdoor recreation spaces, and support for childcare services.
- Improving healthcare services by addressing wait times for specialists, enhancing acute mental
  health care options, and implementing a digital strategy for better connectivity and access to
  care.

# Appendix B: Community Health Survey Questions

Public Health Sauk County and local hospitals want to hear from you: what is going well in your community and what needs improvement? Your answers will help us improve community health. This survey will take about 5 minutes to complete and will be open through May 1, 2024. All responses are confidential and anonymous. Thank you for sharing your thoughts with us!

- 1. Think about your community: where you live, learn, work, and play. What are the biggest problems? Choose up to 5 problems in your community that we should work to improve.
  - Dental health
  - Mental health
  - Housing
  - Healthy food
  - Transportation
  - Childcare
  - Racism, discrimination
  - Alcohol, commercial tobacco (nicotine), vaping & other drug use
  - Loneliness, social isolation
  - Needs of older adults & those with disabilities
  - People don't get enough exercise
  - Other:
- 2. Please tell us more about the problems you selected above. Explain what makes them challenges in your community and share your ideas to help solve them:
- 3. Still thinking about your community: what do you like best about it? Select up to 5.
  - Accepting of people of all identities
  - Affordable place to live
  - Air and water quality
  - Close to family and friends
  - Culture
  - Commute time, traffic
  - Employment opportunities
  - Food options
  - Health care services
  - Parks, trails, recreation opportunities
  - Safety
  - Schools
  - Services for youth
  - Services for older adults
  - Size/location
  - Other:

We want to hear from a wide variety of community members. Please answer the following questions about vou.

- 4. What city do you live in?
- 5. What is your home zip code?

- 6. How old are you (in years)?
- 7. What is your current housing situation?
  - Rent
  - Own
  - Homeless
  - Prefer not to say
  - Other
- 8. How many adults live in your household (include yourself if you are 18 or older)?
- 9. How many children (under 18) live in your household (include yourself if you are under 18)?
- 10. Which language do you mostly speak?
- 11. If another language is spoken in your home, what is it?
- 12. Which best describes your gender?
  - Woman
  - Man
  - Non-Binary
  - Transgender
  - None of these describe me, and I want to describe myself as:
  - Prefer not to say
- 13. Which best describes your sexual orientation?
  - Straight or heterosexual
  - Lesbian or Gay
  - Bisexual
  - Asexual
  - None of these describe me, and I want to describe myself as:
  - Prefer not to say
- 14. Which best describes you? (choose all that apply):
  - American Indian/Alaskan Native (ex. Ho-Chunk, Ojibwe, Sioux, etc.)
  - Black/African American
  - East Asian (ex. Chinese, Japanese, Korean, etc.)
  - Hispanic / Latinx (ex. Colombian, Mexican, Puerto Rican, etc.)
  - Middle Eastern/North African (ex. Egyptian, Iranian, Syrian, etc.)
  - Native Hawaiian/Other Pacific Islander (ex. Filipino, Guamanian, Samoan, etc.)
  - South Asian (ex. Asian Indian, Pakistani, Nepalese, etc.)
  - Southeast Asian (ex. Cambodian, Hmong, Vietnamese, etc.)
  - White/Caucasian
  - A race/ethnicity not listed (please specify):
  - Prefer not to say
- 15. Estimated Household Income (how much money all adult household members earn):
  - Less than \$10,000
  - \$10,000 \$14,999
  - \$15,000 \$24,999
  - \$25,000 \$34,999
  - \$35,000 \$49,999
  - \$50,000 -\$74,999

- \$75,000 \$99,999
- \$100,000 \$149,999
- \$150,000 \$199,999
- \$200,000 or more
- Prefer not to say
- 16. Highest level of schooling completed:
  - Some high school
  - High school diploma or GED
  - Some college, no degree
  - Trade/technical/vocational degree/certificate
  - Associate degree
  - Bachelor's degree
  - Master's degree
  - Doctorate or Professional degree
  - Other:
  - Prefer not to say

# Appendix C: References & Secondary Data Sources

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