Land Acknowledgment Statement

The UW Population Health Institute occupies Ho-Chunk Land, a place their nation has called Teejop (Day-JOPE) since time immemorial. In 1832, the Ho-Chunk were forced to surrender this territory. Decades of ethnic cleansing followed when both the federal and state government repeatedly, but unsuccessfully, sought to forcibly remove the Ho-Chunk people from Wisconsin.

This history of colonization informs our shared future of building partnerships that prioritize respect and meaningful engagement. The staff of the institute respects the inherent sovereignty of the Ho-Chunk Nation, along with the eleven other First Nations of Wisconsin.

We carry this land acknowledgment into our work to operationalize our values by considering the many legacies of violence, erasure, displacement, migration, and settlement. We carry these truths as we work to make positive change. Please join us in uncovering these truths every day.
What is Health Equity?

“What health equity is defined as the absence of unfair and avoidable or remediable differences in health among population groups defined socially, economically, demographically or geographically.”

– World Health Organization

Power: The Capacity to Act

“We can define power as the capacity to act, individually and collectively. Power at the social and institutional level can be understood as the capacity to distribute and access resources, the capacity to shape agendas and the capacity to define the narrative or worldview.”

– 2020 Health Equity Training Modules from the University of Wisconsin Population Health Institute’s Mobilizing Action Toward Community Health (MATCH)
Greetings,

Together, we weathered many storms in 2020. The School of Medicine and Public Health is grateful for the opportunity to work alongside local, state and national leaders to advance a just recovery. Our vision is for healthy people and communities, where everyone thrives.

The Population Health Institute is demonstrating critical leadership in these unprecedented times. Building upon its strong foundation, including its origins within our Department of Population Health Sciences, the institute is expanding partnerships and networks as it catalyzes innovation. Our commitment to supporting the creation of equitable conditions for everyone to be healthy remains strong. We know that courage and collaboration are keys to success.

On Wisconsin.

Sincerely,

Robert N. Golden, MD
Dean, School of Medicine and Public Health
Vice Chancellor for Medical Affairs
University of Wisconsin-Madison

Dear colleagues and partners,

I am proud to share the University of Wisconsin Population Health Institute’s 2020 annual report. In it, we not only highlight our accomplishments and contributions during this most challenging year, but also illustrate how these activities advance the objectives, vision and priorities outlined in our strategic plan.

This report is structured around the institute’s four strategic goals: Population Health and Equity Research; Partnerships for Action; Advancing a Health and Racial Equity Narrative; and Racial Equity Innovation. Together, they underscore our commitment to translate research about population health for use in policy and practice and to address the ways in which the distribution and unethical use of power results in systematic differences in how long and how well people live.

This is at the heart of health equity. Only by identifying and dismantling the systems, policies and practices that create and maintain stark imbalances in power can we catalyze the emergence and implementation of transformative solutions.

This pandemic has not only reminded us of how much we need one another, but also of how much we can accomplish together. Thank you for your partnerships, your expertise and your support as we work together to advance knowledge, practice, policy and systems change.

Sheri Johnson, PhD
Director, Population Health Institute
Associate Professor (CHS), Department of Population Health Sciences
University of Wisconsin School of Medicine and Public Health
The University of Wisconsin Population Health Institute

Translating Research for Policy and Practice

Since 2005, the University of Wisconsin Population Health Institute has collaborated with partners at the local, state and national level to help communities identify, evaluate, track and shape the many factors that influence people’s health and wellbeing.

Originally housed within the Department of Population Health Sciences, we continue to leverage the expertise of faculty and students.

By providing evidence-informed strategies, actionable data and other resources tailored to myriad sectors, we equip people with the best possible tools and resources to build equitable systems, structures and policies.

By valuing partnerships and facilitating the exchange of expertise about health between and among those within the university and our many partners, we expand our understanding of what drives health equity.

And by shifting narrative and sharing stories that name what works — and what is needed — to ensure everyone’s wellbeing, we support nationwide efforts that improve health and advance our understanding of what it takes to achieve health equity.

We believe that only by working together toward a world in which we value one another and honor our connectedness will we achieve the healthiest possible conditions for all of us.
Vision

We work toward a world in which we value each other, honor our connectedness and build communities where everyone can thrive.

Mission

We accelerate the capacity to create equitable conditions for everyone to be healthy by advancing knowledge, practice, policy and systems change across sectors.

Values

- **Collaboration**: Build and sustain diverse partnerships that prioritize respect, mutual benefit and meaningful engagement
- **Integrity**: Ensure that we are honest, accountable and responsible with the power we have
- **Excellence**: Aim high, seek feedback and continually improve
- **Innovation**: Create, test, refine and promote new ideas and approaches at the leading edge
- **Inclusion**: Ensure work has a wide reach, is meaningful, accessible and impactful
- **Courage**: Seek diverse perspectives and experiences that challenge our assumptions and worldviews, recognize systemic harms, and commit to making positive change, even when it is uncomfortable
Strategic Priorities

I. Population Health and Equity Research
We advance the field with a Population Health and Equity Research Agenda (PHERA) that brings science, evidence and conceptual frameworks into a new era by bringing community priorities to the forefront and by addressing the complexity of historical context, power dynamics and identities in shaping health and equity.

II. Partnerships for Action
We build, strengthen and align our partnerships to advance strategies that shape new narratives and action, and increase collective accountability.

III. Advancing a Health and Racial Equity Narrative
We cultivate strong narratives and strategic communications to name what it takes to achieve health and racial equity.

IV. Health and Racial Equity Innovation
We commit to becoming a racially equitable and inclusive organization, joining and supporting other organizations on their journey.

Programs

County Health Rankings & Roadmaps
The County Health Rankings & Roadmaps program helps communities use data and identify solutions that create conditions for people to be healthy in their homes, schools, workplaces and neighborhoods. Ranking the health of nearly every county in the nation, the County Health Rankings illustrate what we know when it comes to what is making people sick or healthy. The Roadmaps show what we can do to create healthier places to live, learn, work and play. The Robert Wood Johnson Foundation funds the UW Population Health Institute to bring this program to towns, cities and counties across the nation.

Evaluation Research
Evaluation Research partners with community, tribal, county and state governmental agencies to develop, implement and evaluate local and state programs in public health and human services. The team also collaborates with national researchers, practitioners, and faculty and staff within the University of Wisconsin on evaluation research projects. The team’s evaluators can advise on and implement a broad range of applied research methods, from qualitative and descriptive techniques to complex experimental and quasi-experimental trials. We also engage in rigorous intervention research design and evaluation. Our portfolio of evaluation projects reflects the full range of systems and health factors that contribute to population health and wellbeing.

Evidence-Based Health Policy Project
The Evidence-Based Health Policy Project historically has worked to connect research and expertise from the university and community into the health-policymaking process at the Wisconsin State Capitol. Significant staffing and partnership changes occurred at the end of 2019 and through the first half of 2020. These changes resulted in a pause of traditional programming and revisioning of the project’s approach.

We pivoted our focus to COVID-19 in 2020, and utilized our strong partnerships and reputation to support a more explicit focus on research and practice evidence to inform policies intended to advance health and racial equity across sectors. We developed a “Just Recovery for Racial Equity” policy brief that summarizes evidence to support a just and equitable recovery from COVID-19.
The brief outlines evidence-informed policies and practices and provides background and context for the need to center racial equity in a just recovery so that communities can be more resilient in the face of health-based emergencies and help all Wisconsinites to thrive. This work is expected to set the stage for long-term community resilience during recovery.

**Mobilizing Action Toward Community Health (MATCH)**

MATCH collaborates with partners around the state to support and catalyze community-driven efforts that address root causes of health inequities. Through training, engaged research and development, and strategic alliances, we take shared action in areas such as criminal justice, community development and housing. Working at multiple levels, we partner with diverse leaders, including those in public health, planning, community organizing, research and philanthropy.

**Robert Wood Johnson Foundation (RWJF) Culture of Health Prize**

The RWJF Culture of Health Prize honors and elevates U.S. communities that are working at the forefront of advancing health, opportunity and equity for all. When we celebrate communities’ successes, affirm their direction, inspire other local places and provide ideas about what’s possible, we help ensure that all people have a fair and just opportunity to live their healthiest lives possible. Leaders from the Prize-winning communities have opportunities to connect with other national and local leaders working to build a Culture of Health.

**Partnerships**

Our collaborations — some funded, some in-kind and some simply collegial — include partners in the public, private and nonprofit sectors. Along with other departments and centers in the university, we work with community members, government agencies, businesses, advocates and organizations at the national, state and local level to advance health for all.

In 2020 the UW Population Health Institute collaborated with more than 200 partners. See Appendix B for more information.

**Growing for Impact**

Over the last decade, the UW Population Health Institute’s budget has more than doubled, from less than $5 million in 2010 to approximately $13 million in 2020. As investors in our mission, our funding partners are integral to ensuring the health and wellbeing of all by advancing evidence-informed research for both policy and practice.

**Calendar Year 2020 Funding Sources**

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<tr>
<th>Funding Source</th>
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<td>Robert Wood Johnson Foundation</td>
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<td>State Agencies</td>
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This graph summarizes each funding source as a percentage of the institute’s total budget. See Appendix A for a list of select grants.
By the Numbers

400+ Health Strategies in What Works for Health (WWFH)

44 RWJF Culture of Health Prize Communities

200 Community Partners and Partner Organizations

82 Programs/Grants

13 Fellows Wisconsin Population Health Service Fellowship Program

125 Institute Staff

7128 County Health Rankings & Roadmaps Webinar Attendees

1.65M+ Online Views of County Health Rankings Media Coverage and Almost 128,000 Social Media Shares

98+463 98 Organizations and 463 Individuals Signed on to the Declaration that Racism is a Public Health Crisis in Wisconsin.
Community Resilience and Response Task Force: Equity in COVID-19 Response

Every Wisconsinite deserves a fair opportunity to be healthy. Our recovery from the pandemic will only be effective if it addresses the inequities that existed before COVID-19. This includes the distributions of wealth, power and influence by geography, social class, race and ethnicity that have led to inequities in the social determinants of health.

In 2020, the UW Population Health Institute provided leadership and integral staff support to the Community Resilience and Response Task Force (CRRTF) — a collaboration with the Wisconsin Department of Health Services, the UW–Madison Division of Extension and the Governor’s Office. CRRTF was established to integrate community resilience, equity and mental health across Wisconsin’s COVID-19 response.

CRRTF’s work included connecting communities, organizations and networks to public health expertise, resources and support. CRRTF aimed to set the stage for more resilient post-COVID-19 Wisconsin communities through promoting policy and practice decisions and interventions that support every community in reaching its full health potential. The work was centered in the belief that those who face the greatest adverse health impacts should be involved in designing strategies to address them.

CRRTF embedded community resilience and equity in the response by utilizing a Sector Support Process. This process engaged key stakeholders across Wisconsin to identify (1) needs and assets in the community, (2) strategies to address the needs and (3) ways to hold each other accountable.

CRRTF prioritized key sectors and communities for this work based on inequities that would likely occur due to the nature of the COVID-19 pandemic, including:

- Populations living in congregate settings, such as those incarcerated, in long-term care, assisted living and community-based care
- Residents with unmet and/or accessibility needs related to transportation, food, housing, language access, civic participation and information channels (for example: populations in rural areas facing geographic inequities, spiritual leaders and communities, individuals and families facing interpersonal violence or mental/behavioral health issues and individuals with disabilities)
- Critical services workforces, such as those in law enforcement, first responders, community health workers, migrant workers and other locally identified essential workforces

Recognizing that health inequities existed prior to COVID-19 as symptoms of structural racism and historical disinvestment from communities, CRRTF worked to support communities in making equitable policy and practice decisions that addressed these structures and set the stage for post-COVID-19 resilience. For a snapshot of the work and resources provided to key sectors, see the CRRTF Sector Support Summary.

Working together across sectors, we have the resources, knowledge and power to create more equitable communities where everyone has a fair opportunity to be healthy.
Eight Years Leading the RWJF Culture of Health Prize

The UW Population Health Institute has collaborated with the Robert Wood Johnson Foundation (RWJF) on the RWJF Culture of Health Prize since its inception in 2013. For the first time in eight years and due to COVID-19, the selection of the 2020 winners was postponed until 2021. Considering this delay, the institute stepped up its efforts to build community with the 44 past Prize winners in several ways:

- By co-hosting a two-day national virtual convening, Community Conversations for Transformative Times, featuring local leaders across the nation speaking to timely topics including: addressing systemic racism; responding to and recovering from COVID-19; and how young leaders are changing their communities.
- By supporting community leaders in building their national networks through monthly virtual meetings and regular communication. Through our facilitation efforts, leaders across the country provided support for one another through the pandemic, sharing real-time issues and potential solutions related to COVID-19. A summary of those exchanges resulted in the article, “What It Looks Like to Build a Culture of Health During COVID-19,” and pointed to the importance of leveraging cross-sector partners for rapid adaptive solutions, standing up community-wide responses and ensuring access to essential resources for all.
- By producing and disseminating a report on the 2019 RWJF Culture of Health Prize-winning communities and how they are advancing equity. Highlights from this report include communities ensuring opportunities for residents to influence solutions, maximizing environmental resources to increase sustainability and economic vitality, and addressing racism and historical trauma to foster inclusion and cultural resilience.
- By partnering with Project Evident, a national organization working to harness the power of evidence to drive greater outcomes, to offer a series of trainings and individualized consulting for past Prize-winning communities.
- By supporting local leaders’ participation in and the design of an assessment with Community Science to learn how applying for or winning the Prize fits into a community’s trajectory of addressing health, opportunity and equity.
What Works For Health: An Online Tool

What Works for Health (WWFH), part of the County Health Rankings & Roadmaps program, is an easy-to-use online tool to help communities find policies, programs and systems changes that are effective in altering the factors that make communities healthier places. By sharing strategies that are tested for effectiveness and shown to work, WWFH helps communities identify policies and programs that align to community priorities.

More than 400 policies and programs are searchable by keyword (e.g., mental health, nutrition), topic (e.g., education, community safety), decision maker (e.g., government, business) or evidence rating. When combined with the County Health Rankings & Roadmaps information, this resource provides a snapshot of a county’s current health and information on strategies that can be used to advance overall health in communities.

10 Years of County Health Rankings & Roadmaps

The UW Population Health Institute has published the Wisconsin County Health Rankings since 2003. In 2010, the institute began collaborating with the Robert Wood Johnson Foundation to produce the national County Health Rankings for the majority of counties in all 50 states. The Key Findings Report, County Snapshots and resources for taking action are available at www.countyhealthrankings.org.
The University of Wisconsin Population Health Institute has existed in various organizational forms since 1984, adopting our current name as the University of Wisconsin Population Health Institute in 2005. We are part of the growing academic medical center (AMC) ecosystem of population health departments, and a member of a national network of non-profit organizations dedicated to advancing public health practice.

Our ties to the Department of Population Health Sciences, and all the assets across the University of Wisconsin, are essential to our success. Led by a team of experts well-recognized in their field, the University of Wisconsin Population Health Institute is committed to integrity and excellence. With a bold spirit of courage, innovation and inclusion, we advance knowledge, practice, policy and systems change across sectors of population health.
Organizational Chart

Below is our organizational chart. See Appendix C for the complete list of UW Population Health Institute staff.
Community Advisory Board

The UW Population Health Institute Community Advisory Board comprises individuals from health care, public health, state government, business, environmental advocacy, community-based organizations, education and other sectors. Meeting three times per year, the board guides the work of the institute and provides feedback on its programs and publications.

Laila Azam
Clinical Assistant Professor of Public Health Studies
Carroll University

Tim Bartholow
Vice President and Chief Medical Officer
WEA Trust

Eric Borgerding
President and CEO
Wisconsin Hospital Association, Inc.

Michael DeGere
Vice President
Population Health Management at SSM Health Wisconsin

Kurt Eggebrecht
Health Officer
Appleton City Health Department

Nate Gilliam
Organizer
Wisconsin Federation of Nurses and Health Professionals

LaTonya Johnson
Senator
Wisconsin State Senate

Debra Kolste
Representative
Wisconsin State Assembly

Jeanette Kowalik
Commissioner of Health
Milwaukee Health Department

Kathy Loppnow
Health Occupation Education Director
Wisconsin Technical College System

Gregory Nycz
Director
Family Health Center of Marshfield

Walter Orzechowski
Executive Director
Southwestern Wisconsin Community Action Program

Andrea Palm
Secretary-Designee
Wisconsin Department of Health Services

Lisa Peyton-Caire
President
The Foundation for Black Women’s Wellness

Christopher Queram
President and CEO
Wisconsin Collaborative for Healthcare Quality

Mark Redsten
President and CEO
Clean Wisconsin

Jessie Rodriguez
Representative
Wisconsin State Assembly

Ayaz Samadani
Family Physician
SSM Health Dean Medical Group

Tim Size
Executive Director
Rural Wisconsin Health Co-op

Patrick Testin
Senator
Wisconsin State Senate

Jesi Wang
President and CEO
MetaStar, Inc.

Executive Committee

The UW Population Health Institute Executive Committee provides guidance to the director on the institute’s performance by, for example, reviewing goals and objectives and evaluating accomplishments throughout this annual report.

Maureen Durkin, PhD, DrPH
Chair, Department of Population Health Sciences
Professor of Population Health Sciences and Pediatrics
UW School of Medicine and Public Health

Jonathan Jaffery, MD
Chief Population Health Officer
President, UW Health Accountable Care Organization

Tom Oliver, PhD, MHA
Professor, Department of Population Health Sciences
UW School of Medicine and Public Health
Patrick Remington, MD, MPH  
Professor Emeritus, Department of Population Health Sciences  
Director, Preventive Medicine Residency Program  
UW School of Medicine and Public Health  

Maureen Smith, MD, MPH, PhD  
Professor, Departments of Population Health Sciences and Family Medicine and Community Health  
Director, Health Innovation Program  
Director, Community-Academic Partnerships Core, UW Institute for Clinical and Translational Research  
UW School of Medicine and Public Health  

Barbara (Bobbi) Wolfe, PhD  
Richard A. Easterlin Professor of Economics, Population Health Sciences and Public Affairs  
UW La Follette School of Public Affairs  

Susan Zahner, DrPH, MPH, FAAN  
Associate Dean for Faculty Affairs  
Vilas Distinguished Achievement Professor  
UW School of Nursing  

**Affiliated Faculty**

Faculty who are designated as “affiliated” collaborate on funded projects or collaborate to extend the teaching, research or service mission of the UW Population Health Institute.

Jennifer Edgoose, MD, MPH  
Associate Professor, Department of Family Medicine and Community Health  
UW School of Medicine and Public Health  
Affiliation: Navigator Evaluation and Diversity and Inclusion Advocates Evaluation  

Deborah Ehrenthal, MD, MPH, FACP  
Associate Professor and Lifecourse Initiative for Healthy Families Endowed Chair  
Departments of Population Health Sciences and Obstetrics and Gynecology  
UW School of Medicine and Public Health  
Affiliations: Preceptor, Population Health Service Fellowship  

David Kindig, MD, PhD  
Emeritus Professor, Department of Population Health Sciences  
Emeritus Vice-Chancellor, Health Sciences  
UW School of Medicine and Public Health  
Affiliation: Making Wisconsin the Healthiest State Project  

Jane Mahoney, MD  
Professor, Department of Medicine  
UW School of Medicine and Public Health  
Affiliation: Community-Academic Aging Research Network Evaluation  

Kristen Malecki, PhD, MPH  
Associate Professor, Department of Population Health Sciences  
UW School of Medicine and Public Health  
Affiliation: Breast Cancer and the Environment Research Program  

D. Paul Moberg, PhD  
Research Professor, Department of Population Health Sciences  
UW School of Medicine and Public Health  
Affiliation: Evaluation Research  

Tom Oliver, PhD, MHA  
Professor, Department of Population Health Sciences  
UW School of Medicine and Public Health  
Affiliation: Principal Investigator, Population Health Service Fellowship  

Patrick Remington, MD, MPH  
Professor Emeritus, Department of Population Health Sciences  
Director, Preventive Medicine Residency Program  
UW School of Medicine and Public Health  
Affiliation: Principal Investigator, Population Health Service Fellowship  

Joel Rogers, PhD, JD  
Sewell-Bascom Professor of Law, Political Science, Public Affairs, and Sociology  
Director, Center on Wisconsin Strategy  
Affiliation: Legacy Communities Alliance for Health  

Maureen Smith, MD, MPH, PhD  
Professor, Departments of Population Health Sciences and Family Medicine and Community Health  
Director, Health Innovation Program  
Director, Community-Academic Partnerships Core, UW Institute for Clinical and Translational Research  
UW School of Medicine and Public Health  
Affiliation: Neighborhood Health Partnership  

Geof Swain, MD, MPH  
Former Medical Director (retired), City of Milwaukee Health Department  
Professor Emeritus, Department of Family Medicine and Community Health  
UW School of Medicine and Public Health  
Affiliation: Population Health Service Fellowship  

Amy Trentham-Dietz, PhD  
Professor, Department of Population Health Sciences  
Program Leader, Cancer Control Program, Carbone Cancer Center  
UW School of Medicine and Public Health  
Affiliation: Breast Cancer and the Environment Research Program
We advance the field with a Population Health and Equity Research Agenda (PHERA) that brings science, evidence and conceptual frameworks into a new era by bringing community priorities to the forefront and by addressing the complexity of historical context, power dynamics and identities in shaping health and equity.

For nearly four decades, the UW Population Health Institute has produced scholarship and practice on conceptual frameworks. Together, we are considering what frameworks and data platforms we want to build in order to better reflect community priorities.

Our research agenda expands the way that we understand and curate evidence and positions the institute to bring community priorities to the forefront. And through our narrative work we identify ways to address complex factors that shape health and equity.
Signature Program

2020 County Health Rankings & Roadmaps Reports

Each year, nearly every county in all 50 states is ranked for the many factors that influence health, including educational attainment, employment, housing, transportation and more. The 2020 Rankings highlight how health outcomes and health factors differ among neighboring counties within each state and illustrate how opportunities for health differ among population groups within counties.

Reports of key findings, first released in 2010, the County Health Rankings & Roadmaps’ national findings illustrate trends and long-standing drivers of population health and equity. Recent reports have featured counties that are among the least healthy and urged action to reshape community conditions; for example, addressing discriminatory laws and policies that underlie current opportunities for health. By pairing data with this context, the key findings help us work together to address the impacts of racism and discrimination.

Ongoing Research

Literacy Link

Literacy Link: Building Evidence for Early Intervention to Disrupt Intergenerational Disadvantage Caused by Incarceration is a pilot program of the UW–Madison Division of Extension. It brings evidence-informed literacy and learning opportunities to young children with parents or family members impacted by incarceration. Evaluation Research is providing Literacy Link with evaluation and strategic consulting.

From Punishment to Restoration

The UW Population Health Institute leads the study, From Punishment to Restoration: Building a Base of Leaders Impacted by Incarceration to Advance Just and Healthy Communities, a grant from the Robert Wood Johnson Foundation.

As part of an enduring partnership with EX-incarcerated People Organizing (EXPO), WISDOM and researchers at the UW Population Health Institute, this project reviews the base-building methodologies led by EXPO from 2012–2019. Through this research, the institute lives its values around equity through centering the voices and leadership of those most impacted by the incarceration system. The research examines the process, infrastructure and relationship building methodologies used to develop and sustain EXPO and how the experiences of justice-involved individuals have shaped base-building methodologies. The project advances engaged scholarship that grows our understanding of the culture and contextual dimensions of engaging, developing and mobilizing community leaders with criminal histories. It begins to uncover base-building methodologies that can shift structural targets for policy and systems change to focus more systematically on cultivating conditions that restore communities. This work was highlighted in a local media story.

Census to Census Project

The institute is collaborating with the City of Madison on the evaluation of the Census to Census Project — a 10-year, in-depth evaluation of the impact of the city’s innovative investment strategy to support racial equity and inclusion and increased economic and overall wellbeing for current residents of a specific geographic area.

The primary goal of the evaluation is to understand the effect that these investments have on the current residents, with the goal of stemming displacement and gentrification and then applying learnings from this project to other similar investment strategies throughout the city. The project uses a participatory action evaluation methodology that prioritizes the current residents of South Madison as central decision-makers in the development and implementation of the evaluation study, as well as allocation of Tax Incremental Financing (TIF) investments made midway through the study.
Publications

**Leading Health Indicators**
Johnson S, Gold MR, Baciu A.
*Rethinking the leading health indicators for Healthy People 2030.* JAMA Health Forum. Published online May 20, 2020.

UW Population Health Institute director Sheri Johnson served on the committee that proposed a new set of Leading Health Indicators (LHIs) in alignment with the Health People 2030 framework. The proposed LHIs are intended to reflect a balanced set of factors that contribute to overall health and drive equity. As such, the proposed indicators go beyond specific diseases to include social determinants of health and other structural factors. While selecting a limited set of LHIs for the nation is challenging, the National Academies committee sought to provide forward-thinking indicators that aligned with the Healthy People 2030 framework: equity, wellbeing along the lifespan and broad engagement.

**A Health Equity Mindset**
Johnson S, Golden RN.

Sheri Johnson, director of the UW Population Health Institute, and Robert Golden, dean of the UW School of Medicine and Public Health, acknowledge the challenges of reducing health inequities and commit to implementing solutions that will create healthy and safe communities for all.

**Generating Subcounty Health Data Products**
Nguyen TQ, Michaels IH, Bustamante-Zamora D, et al.

In partnership with groups in New York, California, and Montana, scholars in the UW Population Health Institute explored practice-relevant research regarding ways to approach the conceptual development, analysis and presentation, and positioning for sustainability of local data that can shine a light on health inequities. This research highlights key considerations for practitioners working to disaggregate data within counties as a means to effectively explore and evaluate health data that can inform action.

**Impact Of Community Resource Program**
Bryant A, Walsh-Felz A, Jacklitz, Lindberg, S.

As part of the UW School of Medicine and Public Health Shapiro Summer Research Program in 2018, and in collaboration with the UW Population Health Institute and the Center for Patient Partnerships (CPP), medical student Alex Bryant, a volunteer with the Community Resources Navigator Program, evaluated the impact of the program related to patient needs and patient trust. The evaluation showed that the program helped participants feel valued and strengthened their relationships with their provider. As a result of conducting the evaluation, and collaboration among multiple UW entities, this endeavor also supported expanding a medical student's research repertoire by incorporating qualitative methods as a rich way to learn about clinical interactions and to provide program feedback. This paper is part of a larger collaboration between the institute and CPP to evaluate the effectiveness of the Community Resource Navigator Program as a service to address patient wellbeing and the impact of the program for students on experiential learning.

**The 2019 Behavioral Health Gaps Report for the State of Wisconsin**

The Bureau of Prevention, Treatment and Recovery in the Wisconsin Department of Health Services (DHS) commissioned a Behavioral Health Gaps Study to conduct a multi-method assessment of the gaps and needs in the behavioral health service system for individuals with mental health and Substance Use Disorder needs.

While previous assessments relied on existing data from state and federal data systems to assess the gaps and needs, the Behavioral Health Gaps Study collected the knowledge and experience of stakeholders.

These included public and private providers, advocates and consumers, including those from a variety of historically underserved populations.
Strategic Priority II: Partnerships for Action

We build, strengthen and align our partnerships to advance strategies that shape new narratives and action, and increase collective accountability.

By building, aligning and strengthening our existing partnerships, the UW Population Health Institute is shaping new narratives and actions together, augmenting our accountability to community priorities.

In turn, as our credibility and legitimacy in the field of population health and equity grows, we embrace the opportunity to encourage the accountability of others who join our efforts.
COVID-19 Response and Recovery

Community Resilience and Response Task Force Sector Engagement

As part of its COVID-19 Rapid Response and Just Recovery efforts, the Community Resilience and Response Task Force (CRRTF), led by the UW Population Health Institute, worked in collaboration with the Wisconsin Department of Health Services, UW–Madison Division of Extension and the Governor’s Office to engage partners across over a dozen sectors across the state to create and disseminate stakeholder-specific tools and resources to embed equity in COVID-19 response and Just Recovery Efforts in Wisconsin. (See p. 9 for more information about CRRTF.) The following resources are being used by diverse sectors across the state as well as some national partners.

- **Community Resilience, Equity and Mental Health Considerations in Rapid Response**
  Provided in English, Spanish and Hmong, this decision assistance tool is designed to lead to strategies to prevent or mitigate adverse impacts and unintended consequences on marginalized populations in rapid response effort.

- **Stakeholder Engagement in Rapid Response**
  Provided in English, Spanish and Hmong, this tool is designed to identify key stakeholders to engage when implementing specific action, policies and guidance.

- **CRRTF provided the public with sector-specific resources** to help communities provide support for and address concerns from the following sectors: spiritual advisors, law enforcement and first responders, community health care workers, incarcerated populations, mental and behavioral health professionals, domestic and interpersonal violence advocates, migrant workers, rural residents, communities of color and long-term care providers.

Testimony for “The Disproportionate Impact of COVID-19 on Communities of Color”

The UW Population Health Institute submitted written testimony to the U.S. House of Representatives Ways and Means Committee for a hearing titled “The Disproportionate Impact of COVID-19 on Communities of Color.” The COVID-19 pandemic is heaping untold suffering across communities, especially communities of color. We cannot thrive as a nation when the factors that contribute to good health are available to some and denied to others. COVID-19 exploits structural racism, leading to a disproportionate impact on communities of color. We must marshal our collective resources to alleviate the disproportionate burden of COVID-19.

County Health Rankings & Roadmaps Webinar Series

During summer of 2020, County Health Rankings & Roadmaps hosted a special series of five webinars on the ways that communities are responding to COVID-19. A total of 2,602 participants attended the five webinars.

The webinars gave community leaders the opportunity to examine together the inequities exacerbated by the pandemic and to explore evidence-informed strategies to advance equity during the crisis and also during the time of recovery and healing. The series shined a light on the social and economic dimensions of the pandemic and provided historical context to help explain, for example, where and why COVID-19 hotspots emerged. It also provided a forum for impacted communities to share their stories and their innovative solutions with others.
Rural Health Partnerships

Thrive Rural

Thrive Rural aims to create a shared vision and understanding about what it will take for communities and Native Nations across the rural United States to be healthy places where everyone belongs, lives with dignity and thrives.

An effort of the Aspen Institute Community Strategies Group in partnership with the UW Population Health Institute, with support from the Robert Wood Johnson Foundation, Thrive Rural intentionally brings into focus the convergence of racial, economic and geographic inequity in rural America.

Thrive Rural advances a more connected, cohesive and influential “rural field” dedicated to eliminating concentrated poverty, segregation of opportunity and the negative effects of structural racism and economic restructuring — with the objective of promoting positive gains and more equitable outcomes in and for rural places, especially among low-wealth people and Black, Indigenous and other people of color. By bridging health with community and economic development, we can connect the shared aims, reality and prospects of rural America with all of America.

Partnership for Rural Health in Wisconsin

The partnership between the UW Population Health Institute, the Rural Wisconsin Health Cooperative and UW–Madison Division of Extension, focuses on building evidence for innovative collaborations between rural health care organizations and local economic development stakeholders, and applying an evidence-informed Health in All Policies (HiAP) approach to policy development.

MATCH Training Hub

The Mobilizing Action Toward Community Health (MATCH) Training Hub accelerates statewide capacity to create equitable conditions for everyone to be healthy by providing training, coaching and technical assistance to the public health workforce and other communities in Wisconsin. The hub’s programming, resources and tools are designed to 1) integrate equity into systems and processes internally and with partners and 2) engage in continuous learning and quality improvement.

• MATCH Community Training Projects provide community leaders, public health practitioners and coalitions with training, coaching and technical assistance that are tailored to specific partner needs. In 2020, MATCH collaborated with partner organizations and expanded training services with the aim of helping them change practice, focus priorities and create conditions for shifting power and supporting shared action on root causes of health and equity.

• MATCH Workforce Training Programs help Wisconsin’s public health workforce foster critical competencies in public health and leadership. In 2020, these training programs leveraged the assets of UW–Madison to train, recruit and mentor public health professionals with key health equity skills and knowledge: Wisconsin Population Health Service Fellowship Program; Community Health Worker Engagement; COVID-19 Response Corps; and Region V Public Health.
Evaluation Projects

Pathways to Recovery (a Madison and Dane County Initiative)
The Madison Police Department received a three-year grant to improve public safety and health in Madison and Dane County by diverting individuals with Substance Use Disorder from the criminal justice system through a framework of treatment referral and engagement. The Pathways to Recovery initiative will include proactive naloxone distribution, outreach with quick responses to incidents at the emergency room and the creation of safe stations at fire stations and other public facilities to provide assistance to individuals seeking help. The evaluation includes technical assistance with program development, evaluation plan development and implementation, the use of evaluation results for program improvement and a summary of evaluation results. The grant is funded by the Bureau of Justice Assistance from 2019–2022.

Emergency COVID-19 Project
The Emergency COVID-19 Project is a 16-month project that provides direct treatment services to individuals with Serious Mental Illness (SMI), individuals with Substance Use Disorder (SUD), and individuals with co-occurring SMI and SUD who are impacted by the COVID-19 pandemic. The Emergency COVID-19 Project will also provide direct treatment support to individuals with needs less than SMI, as well as for health care professionals directly impacted by COVID-19, including first responders and professionals working to support others through this crisis. The Emergency COVID-19 Project will incorporate a variety of strategies to provide treatment and support to individuals impacted by the COVID-19 pandemic and will be implemented at several sites throughout Wisconsin. The UW Population Health Institute will provide technical assistance to support the implementation of the strategies, as well as monitoring and evaluation to document program activities. The project is funded by the U.S. Department of Health and Human Services Substance Abuse and Mental Health Services Administration (SAMHSA).

Saint Paul Mental Health Response Team
The Saint Paul Police Department and the Ramsey County Urgent Care for Adult Mental Health Crisis Program received a three-year grant to implement a Mental Health Response Team serving the city of St. Paul, Minnesota. The Mental Health Response Team will use a co-responder model to connect individuals with mental health issues to services as a way to divert people from the cycle of incarceration. The evaluation includes technical assistance with program development, evaluation plan implementation and assistance with data infrastructure. The grant is funded by the Bureau of Justice Assistance from 2019–2021.
True to our objective to “translate research for policy and practice,” the UW Population Health Institute invests in and cultivates both rigorous, scientific research and strategies to apply that research into policy and practice.

Public narrative ultimately shapes what policy changes are possible and helps influence the organizational structures that inform decision making in public health. Shifting the public narrative is therefore an important step toward creating a more just society that promotes health, safety and equity. The long-term process of shifting narrative includes identifying toxic narratives that create barriers to health and health policy, and developing transformational narratives that lift up the values that build more equitable communities. Transformational narratives have the power to provide a new vision for health in Wisconsin and gain public support for policies that impact the social determinants of health.

The Wisconsin Healthiest State Initiative Narrative Workgroup, convened by Mobilizing Action Toward Community Health (MATCH), in collaboration with the nonprofit organizations FrameWorks Institute and Human Impact Partners identified the below narratives.

Toxic narratives that create barriers to health equity work include:

• “We are powerless to transform society to achieve health for all.”
• “Better health is about investing in medical advances and providing services.”
• “Individuals make or break their health and wealth.”

Transformational narratives that can be used to shift toxic narratives include:

• “All people have inherent dignity and autonomy.”
• “Everyone deserves a just opportunity to thrive.”
• “In Wisconsin, we take care of each other.”

By broadening the capacity of public health entities throughout the state to shift the narrative, we can take steps toward lasting change for health equity.
In order to advance health equity in Wisconsin’s COVID-19 response and recovery efforts, the Community Response and Resilience Task Force (CRRTF) authored and disseminated a suite of messaging resources that build on the foundation of a transformative narrative about health and health equity in Wisconsin. These resources provide communities with guidance when communicating about pandemic-related topics with a health equity lens. Resources included talking points to use when considering issues relevant to specific groups, such as residents in rural areas and immigrant communities. Talking points were collaboratively developed with feedback from key stakeholders representing groups most impacted by the topic. Resources were provided in English, Spanish and Hmong. Sample talking points from these resources and the transformative narrative have informed pandemic communications from local health departments in Wisconsin and have been observed in the governor’s public remarks.

By further disseminating talking points that lift up a transformative narrative, the task force helped shape a new vision for health in Wisconsin and gained support for COVID-19 policies and practices that center equity.

CRRTF also authored the document Key Definitions: Building Shared Language to serve as a grounding in shared language across tools being used to embed equity in rapid response efforts during COVID-19. The document explains the difference between terms such as “equity” and “equality,” and defines terms such as “power,” “resilience” and “stakeholders,” when it comes to health equity.

“The COVID-19 pandemic is heaping untold suffering across communities and exposing the longstanding structures, policies and systems that have produced unfair differences in how long and well people live. We must not look away. Rather, we must marshal our collective resources to create a future that leverages existing knowledge, accelerates implementation and catalyzes necessary innovations. The UW Population Health Institute pledges to ‘use what we have to do what we can’ in this time of upheaval, uncertainty and loss.”

Director Sheri Johnson
UW Population Health Institute
Data Don’t Speak for Themselves
Joyner H, Little O.


In early 2020, as more and more states began rolling out COVID-19 data disaggregated by race and ethnicity, the institute quickly recognized the importance of calling attention to how this data was being reported and interpreted.

A resulting article cautioned that reporting raw data on its own is not enough — how information is reported and presented affects public opinion and public health responses — and emphasized the importance of including context and explanation when reporting data on racial/ethnic disparities.

After the article was posted on the institute’s newly developed COVID-19 webpage and cited in written testimony to the U.S. House of Representatives Ways and Means Committee for the hearing on “The Disproportionate Impact of COVID-19 on Communities of Color,” policymakers took note. The article also received interest from the media.

Local Data for Action
Skalitzky E, Joyner H, Weymouth L.


This study describes the process the Wisconsin Health Atlas followed to disseminate tailored school wellness policy data reports and interactive dashboards to school districts throughout the state and the results of the statewide dissemination efforts.

Prioritizing the translation of research to practice, the process included collaborating with key stakeholders and partners to provide formative feedback on the dissemination activities.

The electronic and hard copy reports were disseminated to 232 districts through email and U.S. mail. Each district received a tailored report featuring an executive summary, local data for action, personalized policy recommendations, best practices and a unique code to enter into interactive data dashboards to explore additional local, regional and state-level data.

2019 RWJF Culture of Health Prize-Winning Communities: Highlights, Themes and Actions Toward Equity
Acker A, Carroll C, Johnson S, Little O, Schulten E.

2019 RWJF Culture of Health Prize-Winning Communities: Highlights, themes and actions toward equity. UW Population Health Institute, 2020.

In 2020, the UW Population Health Institute released a report to highlight common themes across the 2019 Robert Wood Johnson Foundation (RWJF) Culture of Health Prize winners with a focus on:

• What strategies are communities using to address social and economic conditions that build a Culture of Health?

• How are leaders, partners and residents working together in comprehensive ways to influence health and equity?

This report describes cross-cutting themes and specific examples from the five 2019 Prize winners — located across the country — to raise awareness about the different strategies and approaches they are using to improve essential community conditions and how they are working collectively to ensure all residents have a fair and just opportunity for health.
We commit to becoming a racially equitable, inclusive organization, joining and supporting other organizations on their journey.

Racism fundamentally shapes our economic, social and physical environments. Sweeping change is needed. Addressing the root causes of poor health requires that we question the systems, policies and practices that create and maintain stark imbalances in power and racial inequities.

As an organization committed to advancing health equity, the UW Population Health Institute continually identifies, challenges and dismantles the structures of our own organization that uphold systems counter to these goals. And we must support others in doing the same.

We all live in a world poisoned by systems of oppression. Learning the truth about our history and taking actions toward healing is the only way to create fair and just conditions for everyone to reach their full potential.
Racism is a Public Health Crisis Declaration

We continue our work to establish racism as a public health crisis in Wisconsin and develop opportunities for action for organizations throughout Wisconsin and beyond.

Years of work led by grassroots groups, community-based organizations, government agencies, academic leaders and many others have laid a strong foundation to address racial inequities in Wisconsin.

In October 2017, Mobilizing Action Toward Community Health (MATCH) convened statewide partners at the inaugural Healthiest State Agenda Setting Meeting. The convening supported the collective identification of six statewide health equity priorities, one of which was to declare racism a public health emergency.

In May 2018, the Wisconsin Public Health Association (WPHA) passed a resolution declaring that racism is a public health crisis in Wisconsin and committed to taking action.

Building on this work, in 2020 several partner organizations have worked together to transfer the WPHA resolution content to this Racism is a Public Health Crisis Sign-On. The goal is for organizations and individuals to sign on to the declaration and commit to actions that are tailored to their specific contexts. When organizations and individuals sign on to the declaration they also commit to actions that are tailored to their specific contexts.

In 2020, 98 organizations and 463 individuals signed on to the declaration. Signers now extend far beyond the state, from New York to California.

Several outlets have reported on this declaration, including The Pew Charitable Trusts and PBS Wisconsin.

Online Resources

The Racism is a Public Health Crisis website provides resources that can support an organization in signing on to the declaration, as well as resources organized into categories based on the action steps listed in the declaration. These include an Action Toolkit; Self-Care Resources for Black, Indigenous and people of color (BIPOC); and a Community of Practice for individuals and organizations who have signed on to the Racism is a Public Health Crisis Declaration.

Pre-conference Session

In November 2020, MATCH partnered with the Wisconsin Institute for Public Policy and Service to deliver a pre-conference session, “Racism is a Public Health Crisis... and what we can do about it” at the 2020 Toward One WI Inclusivity Conference. Approximately 350 attendees participated in the pre-conference session.
COVID-19

Just Recovery Briefs

The Community Resilience and Response Task Force (CRRTF) connected communities, organizations and networks to public health expertise, resources and support about infectious disease management, prioritizing sectors based on inequities that would likely occur due to the nature of the COVID-19 pandemic.

The below briefs provide information, background and context to help communities better understand and integrate issues of equity in their COVID-19 recovery plans.

- **A Just Recovery for Wisconsin: An Overview of Opportunities** provides background and context for centering equity in a just recovery from COVID-19 in Wisconsin.
- **A Just Recovery for Racial Equity in Wisconsin** provides information on racial disparities and outlines key areas for centering racial equity in COVID-19 recovery efforts.
- **A Just Recovery for Rural Equity in Wisconsin** provides information on rural disparities and outlines key areas for centering rural equity in COVID-19 recovery efforts.

Regarding worker health, the Healthy Workers, Thriving Wisconsin report provided communities with a rapid health impact assessment to analyze policies on paid sick leave, workers’ compensation changes and direct payments and their impact on worker health in COVID-19 spread.

Full Report | Executive Summary

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Internal Health Equity Innovation Efforts

Six Lines of Effort

The institute’s Health Equity Innovation team outlined six priority lines of effort.

These efforts provide a unified approach to all of the institute’s health equity work and enhance its capacities, scholarly contributions and organizational accountability.

These efforts are: Internal Capacity Building; Evaluation and Organizational Assessment; Policy and Practice Change for Equity and Inclusion; Narrative Development; Framework Development; and Scholarship and Research Agenda. Working groups have been assigned to each area.

Academic Lodge

As part of our internal capacity building effort, the institute developed an Academic Lodge as one means of decolonizing our methods and being more inclusive, socially-just and equity-focused in the ways we conduct public health practice and evaluation research with Indigenous communities and Native Nations.

Since November 2020, staff has participated in workshops aimed to build culturally responsive research and evaluation capacities, skills and relationships with Native Nations and Indigenous communities.

Designed in collaboration with the Wisconsin Center for Education Research’s Wisconsin Evaluation Collaborative (WEC), these virtual monthly academic lodges encourage authentic and participatory engagement.

Guided by WEC’s Nicole Bowman-Farrell (Lunaape/Mohican), PhD, and others, we work in solidarity as we unlearn, learn and relearn how to do equitable, socially just and culturally responsive work together.

As humans and scholars guided by the principles of the medicine wheel and nii eelaangoomaatiit (being in good relations with one another), this collective effort is helping us develop culturally responsive evaluation strategies that include data sovereignty, traditional ways of knowing and more.
Appendices

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Appendix A: Select Grants

The UW Population Health Institute’s funding partners are integral to ensuring the health and wellbeing of all by advancing evidence-informed research for both policy and practice. Below are representative projects from our funding categories.

### National, State, Tribal and Community Organizations

**Great Lakes Inter-Tribal Council, Inc.**
- Family Foundations Home Visiting Program
- Healthy Start
- Tribal Personal Responsibility Education Program

**Southwestern Wisconsin Community Action Program**
- Improving Behavioral Health Evaluation

**Marshfield Clinic Research Foundation**
- National Children’s Center Evaluation

**Wisconsin Council on Medical Education and Workforce**
- Medical Education and Workforce Facilitation

**Wisconsin Department of Health Services**
- COVID-19 Response Contract
- Wisconsin Overdose Data to Action
- Centers for Disease Control and Prevention (CDC) Maternal Mortality Review
- Fit Families – Supplemental Nutrition Assistance Program Education
- Chronic Disease Integration and Coordinated Prevention and Health Promotion
- Mental Health Program Evaluation
- Substance Abuse Prevention
- Project Youth Extension Service
- Partnership for Success
- Tobacco Prevention and Control Program
- Adolescent Health Evaluation
- Medication Assisted Treatment Prescription Drug and Opioid Addiction
- Prescription Drug Overdose Program
- Building Resilience Against Climate Effects
- Injury and Violence Prevention
- Office of Health Informatics Opioid Program
- Strategic Prevention Framework for Prescription Drugs
- Prescription Drug/Opioid Overdose-Related Deaths Prevention Project

### Local Agencies

**Adams-Friendship School District**
- Advancing Wellness and Resilience in Education
- Breaking Down Student Barriers

**Ashland County Health and Human Services**
- Advancing Wellness and Resilience in Education
- Ashland County Drug Treatment Court

**Dane County**
- Treatment Alternatives and Diversion (TAD) Pretrial Opiate Diversion

### Federal Agencies

**Centers for Disease Control and Prevention (CDC)**
- CDC Prevention Research Centers

**Robert Wood Johnson Foundation**
- County Health Rankings & Roadmaps/RWJF Culture of Health Prize

### Higher Education – Other

**University of Michigan**
- Community-based training

### UW School of Medicine and Public Health

**UW Affiliated – Foundations and Programs**

**Wisconsin Partnership Program**
- Evidence-Based Health Policy Project
- Making Wisconsin the Healthiest State
- Wisconsin Population Health Service Fellowship Program
- Southeastern Wisconsin Screening, Brief Intervention, and Referral to Treatment

**UW Institute for Clinical Translational Research**
- Institute for Clinical Translational Research Program Evaluation

**UW–Madison Division of Extension**
- Wisconsin Healthiest State Summit
Appendix B: Partners

Institute staff members regularly engage with colleagues and partners in programs, applied research, program evaluation, committees, consulting, proposal development and other activities. These partnerships include entities in the public and private sectors, as well as in other departments and centers throughout the university.

County Health Rankings & Roadmaps Partners

500 Cities
America’s Health Rankings
American Cancer Society
American Communities Project
Burness
Center for Creative Leadership
City Health Dashboard
Community Initiatives
Forum One
Healthy Places by Design
Human Impact Partners
Georgia Health Policy Center
Institute for Healthcare Improvement/100 Million Healthier Lives
Measure of America
National 4-H Council
National Association of City and County Health Officials (NACCHO)
National Association of Counties
National Network of Public Health Institutes
NeighborWorks America
New Jersey Health Initiatives (NJHI)
Pew Charitable Trusts Health Impact Project
PolicyLink
Prosperity Now
RTI International
Robert Wood Johnson Foundation (RWJF)
UnidosUS
United Way Worldwide
University of Chicago Center Spatial Data Science
Visible Network Labs

Evaluation Research Partners

Administration for Children and Families
AIDS Resource Center of Wisconsin
Alzheimer’s & Dementia Alliance of Wisconsin
Asset Builders
Baylor University, Department of Public Health
Bureau of Justice Assistance (BJA)
Centers for Disease Control and Prevention
Chippewa Falls Area Unified School District
Community Action, Inc.
Community Advocates Public Policy Institute
Dane County District Attorney’s Office
Dane County Health Council
Eau Claire City-County Health Department
Foundation for Black Women’s Wellness
Great Lakes Inter-Tribal Council
Great Rivers HUB
Green Tier Legacy Communities
Healthfirst
Health Care Education and Training
Health Resources & Services Administration
Ho-Chunk Nation
School District of La Crosse
Lakeland Area Consortium
City of Madison Police Department
Marshfield Clinic Research Institute
Medical College of Wisconsin
National Cancer Institute
National Children’s Center for Rural and Agricultural Health and Safety
National Institute of Environmental Health Sciences
Neighborhood House of Milwaukee
Neu-Life Community Development
Public Health Madison & Dane County
Racine Family YMCA
Sawyer County Public Health
Silver Spring Neighborhood Center
Southwestern Wisconsin Community Action Program (SWCAP)
State of Wisconsin Women Infant and Children (WIC)
City of Saint Paul Police Department
Substance Abuse and Mental Health Services Administration (SAMHSA)
UniteWI
United Community Center
United States Department of Agriculture
United Way of Dane County
UW Health
Vanderbilt University, Department of Human and Organizational Development
William S. Middleton Memorial Veterans Hospital-Radiology Department

Subsidiary Institutions

Bureau of Justice Assistance (BJA)
Centers for Disease Control and Prevention
Chippewa Falls Area Unified School District
Community Action, Inc.
Community Advocates Public Policy Institute
Dane County District Attorney’s Office
Dane County Health Council
Eau Claire City-County Health Department
Foundation for Black Women’s Wellness
Great Lakes Inter-Tribal Council
Great Rivers HUB
Green Tier Legacy Communities
Healthfirst
Health Care Education and Training
Health Resources & Services Administration
Ho-Chunk Nation
School District of La Crosse
Lakeland Area Consortium
City of Madison Police Department
Marshfield Clinic Research Institute
Medical College of Wisconsin
National Cancer Institute
National Children’s Center for Rural and Agricultural Health and Safety
National Institute of Environmental Health Sciences
Neighborhood House of Milwaukee
Neu-Life Community Development
Public Health Madison & Dane County
Racine Family YMCA
Sawyer County Public Health
Silver Spring Neighborhood Center
Southwestern Wisconsin Community Action Program (SWCAP)
State of Wisconsin Women Infant and Children (WIC)
City of Saint Paul Police Department
Substance Abuse and Mental Health Services Administration (SAMHSA)
UniteWI
United Community Center
United States Department of Agriculture
United Way of Dane County
UW Health
Vanderbilt University, Department of Human and Organizational Development
William S. Middleton Memorial Veterans Hospital-Radiology Department
Appendix B: Partners

Mobilizing Action Toward Community Health (MATCH) Partners

1000 Friends of Wisconsin
Aging and Disability Resource Center of Adams, Green Lake and Waushara Counties
Aspen Institute Community Strategies Group
Barron County Health & Human Services
Bellin Health Systems
Center for Resilient Cities
Center for Urban Population Health
Centro Hispano
Conservation Law Foundation
Chippewa County Health Department
Chrysalis
City of Greenfield Health Department
City of Milwaukee Health Department
Community Table Eau Claire
Dane County Office of Energy & Climate Change
Data You Can Use
Department of Justice
Division of Public Health (State of Wisconsin Department of Health Services)
Division of Public Health Violence and Injury Prevention
Division of Public Health Community Conversations
Division of Public Health Maternal and Child Health Program
Eau Claire City-County Health Department
End Child Poverty Campaign
Ex-incarcerated People Organizing (EXPO)
Family and Youth Institute
Forward Community Investments
Foundation for Black Women’s Wellness
FrameWorks Institute
Government Alliance on Race & Equity (GARE)
Government of Dane County
Great Rivers HUB
Greenfield Fire Department
Greenfield Public Library
Green Tier Legacy Communities
Juneau County Sheriff’s Office
Kids Forward
LEAP Forward Internship Program — Madison Metropolitan School District
League of Wisconsin Municipalities
Marshfield Clinic Health System
Menikânaehkem Community Rebuilders
Milwaukee Area Health Education Center (AHEC)
Milwaukee Area Technical College
Milwaukee County, Office of the County Executive
Milwaukee Muslim Women’s Coalition
Milwaukee VA Medical Center
Movement Voter Project
Muslim Community and Health Center
Pepin County Health Department
Pierce County Health Department
Price County Health Department
Public Health Madison & Dane County
Region V Public Health Training Center
Richland County Health & Human Services Public Health
Rock County Public Health Department
Rural Wisconsin Health Cooperative
St. Croix County Health & Human Services
UniteMKE
Waushara County Health Department
Weight of the Fox Valley
West Allis Health Department
Wisconsin Area Health Education Centers
Wisconsin Association of Local Health Departments and Boards (WALHDAB)
Wisconsin Counties Association
Wisconsin Department of Health Services
Wisconsin Department of Health Services Chronic Disease Prevention Program
Wisconsin Department of Health Services Radon Program
Wisconsin Institute for Public Policy and Service (WIPPS)
Wisconsin Partners
Wisconsin Public Health Association
Wisconsin Public Health Research Network
Wisconsin Tobacco Prevention and Control Program
WISDOM
Wood County Health Department
Robert Wood Johnson Foundation (RWJF) Culture of Health Prize Partners

Burness
Byrd’s Nest, LLC
Colorado Health Foundation
Community Science
Forum One
Frontline Solutions
Greater Kansas City Chamber of Commerce
Healthy Places by Design
Living Cities
MMS Education
Mountain Area Health Education Center
NeighborWorks America
Notah Begay III (NB3) Foundation
Praxis Project
Project Evident
Robert Wood Johnson Foundation (RWJF)
Tandeka, LLC
Trust for America’s Health
United Way of the Columbia Gorge
UPROSE

UW Collaborating Entities

Applied Population Lab
Carbone Cancer Center
Center for Patient Partnerships
Center for Urban Population Health
COWS (formerly Center on Wisconsin Strategy)
Collaborative Center for Health Equity
Community-Academic Aging Research Network
Department of Family Medicine and Community Health, Office of Community Health
Diversity and Inclusion Advocates (DIA) Program
Division of Extension, Institute for Health & Well-Being
Division of Extension, Institute of Human Development & Relationships
Extension Waushara County
Health Disparities Research Scholars Program
Health Innovation Program
Institute for Clinical and Translational Research (ICTR)
Institute for Research on Poverty
Native American Center for Health Professions
Neighborhood Health Partnerships
Nelson Institute for Environmental Studies
Prevention Research Center
Recruitment Initiative for Student Employees (RISE)
School of Human Ecology, Center for Community & Nonprofit Studies (CommNS)
School of Social Work
Survey of the Health of Wisconsin (SHOW)
Survey Center
UWell Partnership Council
UniverCity Alliance
Wisconsin Alzheimer’s Institute
Wisconsin Center for Education Research, Wisconsin Evaluation Collaborative (WEC)
Wisconsin Partnership Program
Wisconsin Public Health Research Network

UW Population Health Institute Partners

Aspen Institute
Federal Reserve Bank of Chicago
University of California, Riverside
Appendix C: UW Population Health Institute Staff

**UW Population Health Institute Administration**

Sheri Johnson, Director  
Marjory Givens, Associate Director  
Bridget Catlin, Senior Scientist  
Ann McCall, Wisconsin Department of Health Services (DHS) Research Manager  
Dave Kindig, Professor Emeritus  
Kara Pagano, Administrative Coordinator  
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**County Health Rankings & Roadmaps**

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Keith Gennuso, Research Team Director, Data and Science  
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Aliana Havrilla, Action Learning Coach  
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Bomi Kim Hirsch, Evidence Analyst  
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Kate Kingery, Deputy Director, Community Transformation  
Kim Linsenmayer, Deputy Director, Operations  
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Molly Murphy, Community Scientist  
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Hannah Olson-Williams, Graduate Student Project Assistant  
Eunice Park, Graduate Student Project Assistant  
Justin Rivas, Community Network Strategist  
Jennifer Robinson, IT Support  
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Janae Goodrich, Associate Researcher  
Caleb Hogeterp, Associate Research Specialist  
Kaety Jacobs, Research Specialist  
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Sainath Suryanarayanan, Assistant Scientist  
Erin Taber, Associate Research Specialist  
Abra Vigna, Action Researcher and Evaluator  
Aria Walsh-Felz, Assistant Researcher  
Lindsay Weymouth, Assistant Scientist  
Troy Williams, Graduate Student Project Assistant

**Mobilizing Action Toward Community Health (MATCH)**

Paula Tran Inzio, MATCH Director  
Salma Abadin, Action Researcher and Evaluator  
Yasamin Aftahi, COVID-19 Policy Research Coordinator  
Selma Aly, Community Coach  
Kristi Anderson, Network Development Lead and Community Coach
Appendix C: UW Population Health Institute Staff

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Molly Clark-Barol, Graduate Student Project Assistant
Jessi Corcoran, Narrative and Resource Development Coordinator
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Marcia Morales, Community Health Worker Outreach Specialist
Raymond Neal, Community Coach
Carleigh Olson, Policy Training and Technical Assistance Coordinator
Alisa Pykett, Action Researcher and Evaluator
Maria Schirmer Dewitt, Community Coach
Sweta Shrestha, Fellowship Program Manager
Mallory Swenson, Graduate Student Project Assistant
Alan Talaga, Healthy Wisconsin Leadership Institute (HWLI) COACH Program Lead, Community Coach
Abra Vigna, Action Researcher and Evaluator
Lesley Wolf, Community Training Manager

Robert Wood Johnson Foundation (RWJF) Culture of Health Prize

Carrie Carroll, Director
Angela Acker, Program Manager
Olivia Little, Translational Researcher
Erin Schulten, Program Manager

Wisconsin Population Health Service Fellows and Placement Sites

2019–2021
Amelia Harju, Wood County Health Department
Elizabeth Dorsey, UW-Madison Division of Extension Institute for Health and Well-Being
Matthew Scanlin, Bureau of Communicable Diseases, Wisconsin Department of Health Services
Melissa Siedl, Milwaukee City Public Health Department
Mireille Perzan, Office of Health Informatics, Wisconsin Department of Health Services
Tseten Yangdron, Bureau of Environmental and Occupational Health, Wisconsin Department of Health Services

2020–2022
Ben Andert, Bureau of Community Health Promotion, Wisconsin Department of Health Services
Taylor Davis, Public Health Madison & Dane County
Emily Dejka, Eau Claire City - County Health Department
Brie Godin, Office of Preparedness and Emergency Health Care, Wisconsin Division of Public Health
Emily Lynch, Office of Policy and Practice Alignment, Wisconsin Division of Public Health and Department of Justice
Amanda Richman, Office of Health Strategy in the Policy, Innovation and Engagement Branch, City of Milwaukee Health Department
Kong Xiong, Maternal and Child Health Unit, Wisconsin Division of Public Health

Staff Based at the Wisconsin Department of Health Services

The Population Health Institute has a long history of collaborating with the Wisconsin Department of Health Services to hire and support staff for public health efforts.

Paige Andrews, Violence and Injury Prevention Strategic Planner
Thomas Bentley, Population Health Researcher
Lisa Bullard-Cawthorne, Overdose Data to Action Program Planning Coordinator
Tim Connor, Mental Health Programs Evaluator
Cecilia Culp, Substance Abuse Prevention Specialist
Katherine Drewiske, Late Adolescent Health Consultant
Mariah Geiger, Early Adolescent Health Consultant
Hannah Gjertson, Maternal Mortality Review Coordinator
Pamela Imm, Injury and Violence Prevention Epidemiologist
Nancy Michaud, Tobacco Prevention and Control Program Youth Access Program Coordinator
Emily Morian-Lozano, Maternal Mortality Review Epidemiologist
Karen Morris, Maternal Mortality Review Record Abstractor
Ronald Prince, Overdose Data to Action Epidemiologist

Diksha Ramnani, Syndromic Surveillance Data Analyst
Spencer Straub, Tobacco Prevention and Control Program Media and Communications Coordinator
Betsy Swenson, Overdose Data to Action Community Outreach Consultant
Jennifer Tranmer, Overdose Data to Action Communications Specialist
Kathryn VerPlanck, Data Quality Specialist
Rachel Welsh, HIV Care Services Coordinator
Troy Williams, Overdose Data to Action Community Outreach Consultant
Ricardo Wynn, HIV Capacity Building Coordinator
Appendix D: Select Publications and Events

Select Publications


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**Select Events**

Inzeo, PT, Aly, S, Anderson, K. “Racism is a public health crisis…and what we can do about it” [Pre-Conference Session]. Toward One Wisconsin Inclusivity Conference; November, 2020; virtual.

Little, O. “Operationalizing equity: How are communities creating conditions that promote better health and opportunity for all?” Interdisciplinary Association for Population Health Research annual conference; September, 2020; virtual.

Wolf L, Neal R, Talaga A. “From roots to results: a qualitative case study of the evolution of a public health leadership institute building capacity in collaborating for equity and justice;” Toward One Wisconsin Inclusivity conference; November, 2020; virtual.

**Community of Practice Sessions: “Racism is a Public Health Crisis Declaration”**

These sessions supported local decision-makers and signers to share lessons and challenges related to advancing racial equity and in particular, the contexts of advancing racial equity during COVID-19.

- June 29: “Strategizing around statewide policies”
- July 13: “Strategizing around organizational action”
- July 27: “Strategizing around individual action”
- August 20: “Spotlight on organizational action with UW Health”
- September 21: “Spotlight on community action with Kenosha County”
- October 21: “Spotlight on policy change with Blue Cross-Blue Shield of Minnesota”

“Racism is a Public Health Crisis: What does this mean and opportunities for action” to UW Madison Campus Wellness Initiative, October 9, 2020.

This session described why racism is a public health crisis, how the dual public health crises of racism and COVID-19 are furthering harm, and opportunities for action.

“Racism is a Public Health Crisis ...and what we can do about it” Pre-conference on Racial Equity, November 11, 2020, in partnership with Wisconsin Institute for Public Policy and Service for the Toward One WI Conference Session.


This session described why racism is a public health crisis, how the dual public health crises of racism and COVID-19 are furthering harm, and opportunities for action for scholars.

**2020 County Health Rankings & Roadmaps Webinars**

- March 23: “Making the most of the 2020 County Health Rankings”

**Take Action Series**

- January 28: “Why the census matters to health equity”
- June 16: “Health and wealth: Using data to address income inequality”
- September 22: “Spotlight on rural: Local efforts at the intersection of health and housing”
- October 12: “Building equity into your network of partners”
- November 17: “Using law and policy to create equitable communities”
- December 15: “Resident engagement to achieve racial equity”

**Special In-Depth Topics**

- January 23: “Building resident engagement in the delta region”
- August 25: “Green communities and equitable economic development: Improving wellbeing through sustainability, broad inclusivity and innovative collaboration”

**COVID-19 Series**

- May 21: “Exploring guaranteed income as a strategy to address income inequality”
- August 13: “Responding to crisis in the Latino population with an equity lens”

**Putting County Health Rankings into Action**

- May 12: “Place Matters”

**Rankings 101**

- April 7: “County Health Rankings & Roadmaps”
Contact

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