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Land Acknowledgment Statement

The University of Wisconsin 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 shapes our commitment to 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 11 other First Nations of Wisconsin. We carry this land acknowledgment into our actions by considering the many legacies of violence, erasure, displacement, migration, and settlement as a lens in our work.

Messages from Dean Golden and Director Johnson



Greetings,

The School of Medicine and Public Health continues to prioritize partnerships in our research, education, and

service missions. Our work is strengthened through engagement in bi-directional, mutually beneficial relationships across sectors, geographies, and identities.

The Population Health Institute has been key in building trustworthiness through intentional, evidence informed strategies which spark innovation and long term impact. Many of the Institute's local, state, and national translational research and practice initiatives are informed by the priorities of communities and local leaders who are most knowledgeable about the obstacles and the assets that can be leveraged to accelerate progress in achieving health equity.

We are committed to nurturing understanding and collaborative action to assure that people and places have what they need to thrive. The Population Health Institute is one of the entities leading the way forward.

On Wisconsin.

Sincerely,

Robert N. Golden, MD

Dean, University of Wisconsin School of Medicine and Public Health

Vice Chancellor for Medical Affairs, University of Wisconsin–Madison

obet N Goller, MD



Sheri Johnson, PhD

Dear colleagues and partners,
We are grateful for the
opportunity to serve the people
of Wisconsin and the nation. Our
partnerships with experts across

disciplines and sectors, including those with first-hand experience of unfair, systematic obstacles to health, are critical to maintaining credibility and legitimacy. We know that the utility of our research and practice tools depends on our ability to earn, build and sustain trust.

We hope this report sparks imagination of what's possible and fuels a collective commitment to action across the multiple determinants of health and equity. We are committed to deepening our capacity to engage in transformational research and practice that contributes to a world where people and places have what they need to thrive.

X

Sheri Johnson, PhD

Director, UW Population Health Institute
Professor (CHS) Department of Population Health
Sciences

University of Wisconsin School of Medicine and Public Health



About the University of Wisconsin Population Health Institute



What is Health Equity?

"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)













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 well-being.

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 well-being, 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.



University of Wisconsin Population Health Institute UNIVERSITY OF WISCONSIN SCHOOL OF MEDICINE AND PUBLIC HEALTH









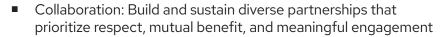
We work toward a world in which we value each other, honor our connectedness, and build communities where everyone can thrive.



Mission

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





- 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 Action Areas: 2021–2024



I. Population Health and Equity Research

We advance the field with a Population Health and Equity Research Agenda 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. Motivate Investors to Advance the Equitable **Stewardship of Resources**

We motivate a broad range of investors to advance the equitable stewardship of their resources by committing to challenging the status quo of grantmaking and investment while broadening our resource streams to accommodate the risks.



III. Partnerships for Action

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



IV. Health and Racial Equity Narrative

We cultivate strong narratives and strategic communications to name what it takes to achieve health and racial equity.



V. Organizational Capacity Building

We commit to becoming a racially equitable and inclusive organization, joining and supporting other organizations on their journey.



Programs

Evaluation and Engaged Research

The Evaluation and Engaged Research team 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 on engaged research projects with national researchers, practitioners, and University of Wisconsin faculty and staff. 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. Team members 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 well-being, including:

- Behavioral health prevention and treatment
- · Child and family health promotion programs
- Community health promotion
- Policy and systems change evaluation projects

Evaluation and Engaged Research projects highlighted in this report include:

- Supporting the Wisconsin Department of Health Services' statewide rollout of the Behavioral Health Crisis Support 988 Hotline
- Providing evaluation, training, and technical support to the Great Lakes Inter-Tribal Council in their Tribal Personal Responsibility Education Program
- Partnering to design and implement plans to address gun violence and sexual violence in downtown Madison with the Isthmus Safety Initiative
- Working with the City of Madison to assess impacts of tax financing plans, monitor gentrification, and reduce displacement of BIPOC communities in the South Madison Reinvestment Strategy for Equity project

Visit our website for a full portfolio of projects.



Members of the Evaluation Team

DHS Staffing Program

The University of Wisconsin Population Health Institute has a long history of partnering with the Wisconsin Department of Health Services (DHS) on public health efforts. Collaborations include contracts to support: DHS-based staffing, evaluation services, statewide health equity initiatives, training and technical assistance, and DHS-based Population Health Services Fellowships. The institute created a DHS Program manager position to build infrastructure to support partnerships and contracts, with a focus on staffing contracts. The institute's investment in the DHS program manager role has led to improvements and growth in this partnership.

Mobilizing Action Toward Community Health (MATCH)

The institute's MATCH unit aims to change practice, focus priorities, and shift power to support shared action across Wisconsin and the United States. MATCH helps organizations and community partners identify what it takes for everyone to have a fair chance to be healthy in their homes, schools, workplaces, and neighborhoods. Through training and technical assistance, workforce development, and collaborative partnerships, MATCH helps organizations and community partners build capacity.

MATCH programs include:

Workforce Development

The Wisconsin Population Health Service Fellowship is a two-year service and training program designed for early career public health professionals. The program places recent graduates and emerging public health professionals in organizations across the state to help tackle some of the most pressing public health challenges, while building their professional skills and experience as future public health leaders.

Since 2004, the program has recruited and deployed 97 post-graduate professionals to work for 74 distinct public health and community-based organizations throughout the state. Among the last five cohorts of graduating fellows, 80 percent have continued working in Wisconsin's public health workforce. The program continues to expand its partnerships with new placement sites.

MATCH designed the **COVID-19 Response Corps (RC)** in partnership with the Wisconsin Division of Public Health with two goals in mind: First, to implement



a Response Corps program that placed COVID-19 response staff across the state and, second, to support statewide COVID-19 response and recovery through alignment, training, and capacity building. In 2022, three RC members were placed in local health departments, and one member worked on COVID-19 response statewide.

RC program staff hosted four virtual immersions in 2022. Immersions are free, statewide webinars that focus on topics through the lens of COVID-19 response and recovery, and equity. Topics included community engagement, communications, and community and workforce resilience. In 2022, an average of 72 participants attended the virtual immersions. In addition, RC partnered with the Wisconsin Association of Local Health Departments and Boards to lead and administer a partnership to improve communication and alignment across local health departments and key public health staff and partners. This work included convening statewide workgroups around three topics: funding, workforce, and legal authority.

Training and Technical Assistance

Through its grant program, Mobilizing Communities for a Just Response, the Wisconsin Department of Health Services (DHS) provided funding to community organizations across Wisconsin to help address health disparities related to COVID-19 by expanding community capacity to advance health equity. DHS partnered with MATCH to provide grantees with training and technical assistance through a curriculum focused on policy systems and environmental change, power building, and strategic communications.

The Envision Community Health Worker (CHW) Training and Technical Assistance Center is a

collaboration of CHWs and CHW allies. With financial and administrative support from DHS through funding from the Centers for Disease Control and Prevention (CDC), the collaboration elevates the role of CHWs. Envision provides nationwide training and technical assistance to organizations funded through CDC's Community Health Workers for COVID Response and Resilient Communities initiative. The Envision team provides monthly COVID-19 webinars, specialized training, and a learning collaborative on CHW financial sustainability.

Community Partnership Initiatives

The Just Recovery for Racial Equity (JRRE) initiative is a partnership between the UW Population Health Institute, the Wisconsin Department of Health Services, and the Office of the Governor of Wisconsin. The goal of this initiative is to support community partners working toward mitigation and recovery from COVID-19. JRRE awarded grants to community leaders and organizations across the state. A Community Advisory Team (CAT) designed and led the competitive proposal process and grantee selection efforts. Together with the CAT, JRRE program staff successfully advocated for more equitable and accessible funding processes. Selected in late 2021, grantees' projects ran throughout 2022. More than \$1.7 million was awarded to community partners throughout Wisconsin through 25 community grants (awards >\$5000) and 48 mini-grants (awards <\$5000). Projects focused on topics such as civic engagement, mental health, power-building, and building social connections. In addition to funding these projects, JRRE conducted training sessions for applicants and grantees to help them build their capacity for grant writing, evaluation, and data literacy.





MATCH All Staff retreat, November 2022



County Health Rankings & Roadmaps (CHR&R)

County Health Rankings & Roadmaps is a program of the University of Wisconsin Population Health Institute, with support from the Robert Wood Johnson Foundation. Its work is rooted in a commitment to health equity — the idea that everyone deserves a fair and just opportunity to be as healthy as possible. CHR&R produces data, evidence, guidance, and examples that raise awareness about the many factors that influence health. It also supports community leaders working to improve health and increase health equity. CHR&R does this by translating and communicating complex data and evidence-informed strategies into accessible models, reports, and tools to help leaders identify the factors that make their communities healthy, and to inspire and support them in their efforts.

CHR&R Tools and Resources

CHR&R designed each of the below tools and resources to help people understand the factors that influence the health of their community and to provide strategies for them to create healthier places to live, learn, work, and play.

County Health Rankings

Released each year, the County Health Rankings provide a snapshot of a community's health. People across the U.S. use the County Health Rankings to investigate, discuss, and understand the health of their community and garner support for local health and equity initiatives from government agencies, health care providers, community organizations, business leaders, policymakers, and the public.

In April 2022, CHR&R released the <u>2022 County Health Rankings data</u> with new measures focusing on living wage, the gender pay gap, childcare cost burden, childcare centers, and school funding adequacy.

What Works for Health (WWFH)

What Works for Health is a searchable database of more than 400 evidence-informed strategies, policies, and programs designed to advance health and health equity. WWFH also includes curated lists of strategies related to specific topics, such as racial wealth building. In 2022, WWFH replaced its former "Impact on Disparities" feature with an equity analysis framework. The equity analysis includes a revised disparity rating along with a summary of related supporting evidence, and relevant historical background. It also includes questions about equity to consider before implementing strategies, and equity-focused resources to help communities implement the strategies. To date,

CHR&R has added the equity analysis to about 40 strategies – including living wage laws, community land trusts, and college access programs.

National Findings Report

The 2022 National Findings Report featured the theme of "advancing a just recovery for economic security and health," and described opportunities to ensure economic security and health for all through a living wage, fair pay for women, accessible childcare, and well-resourced schools. Within each of these areas, the report included descriptions of key findings, evidence-informed strategies to advance equity, and examples of communities taking action to improve health and equity.

National Webinars & Podcast Series

Each month CHR&R hosts webinars that showcase promising approaches and real-world examples from communities and organizations throughout the U.S. During the interactive discussion groups that follow, participants engage with peers from across the country to share their experiences with implementing local health equity strategies. The webinars focus on a range of topics and are often a part of a suite of related CHR&R resources. New in 2022 CHR&R launched its first podcast. The podcast, titled In Solidarity: Connecting Power, Place, and Health, features interviews with authors, activists, and scientists about social solidarity, shared power, and health.

Health Equity Narrative Infrastructure (HENIP)

CHR&R continues the institute's collaborative partnership with Human Impact Partners through the Health Equity Narrative Infrastructure Project. HENIP aims to grow the field of equity actors by strengthening the narrative infrastructure of organizations that have begun to align and/or mobilize in their understanding and use of narrative strategy. This initiative raises awareness of narrative as a form of power and the role that narrative plays in advancing structural change and health equity.





Our Work



The UW Population Health Institute's vision, mission, values, and strategic action areas guide all of our efforts.



Making Wisconsin the Healthiest State

Established in 2004, the Making Wisconsin the Healthiest State Project (HS) has served a full range of public health audiences with innovative data-to-action tools and programs that emphasize the social determinants of health. The project catalyzed many larger initiatives including County Health Rankings and Roadmaps, which serves the nation with data and solutions to help improve health and equity for nearly every county. After 19 years of innovation and service, funding for the project ended. The HS project established an award-winning foundation of data-to-action resources for Wisconsin and the nation.

In 2022, the HS team worked with partners to disseminate the 2021 Wisconsin Population Health and Equity Report Card. Improvements to two public health data-to-action tools were completed, and 29 communities in the Wisconsin Healthy Communities Designation program were convened to guide, support, and celebrate work that improves health and equity throughout the state.

Wisconsin Healthy Communities Designation Program

Twenty-nine Wisconsin communities participated in the Wisconsin Healthy Communities Designation (HCD) program in 2022. Launched in 2018, this program has supported communities statewide to influence health with a focus on equity, multisector partnerships, and sustainable solutions. Communities are awarded the designation within three tiers: gold, silver, and bronze. Designations are given to communities that are early in their broad health improvement efforts, as well as those with more advanced, comprehensive, and long-lasting efforts. Six guiding principles determine the designations:



- Defining health broadly
- Committing to sustainable and comprehensive long-term solutions
- · Creating conditions that give everyone a fair and just opportunity to reach their best possible health
- Harnessing the collective power of leaders, partners, and community members
- · Securing and making the most of available resources, including dollars, people, power
- Measuring and sharing progress and results

In 2022, the HS team delivered several trainings on datato-action tools and strategies. These trainings helped communities understand how to use data to shape reports and narratives, as well as in policy and equitable decision-making.

In September, designees gathered in Oshkosh, WI to share their work, learn from one another, and explore potential partnerships. David Zuckerman of the Healthcare Anchor Network delivered the keynote address, which focused on economic development as a health equity tool.

<u>Read more</u> about the HS project, including a portrait of the City of Greenfield Health Department's path as a designee and how the project has inspired them to strengthen health equity planning.



Healthy Community Designee City of Greenfield's Health and Fire departments partner in efforts to improve health and equity in the city.

Data Tools Streamlined with Added Equity Focus

In 2022, the HS team upgraded two Wisconsin community health improvement web-based research tools. "Improving Wisconsin's Health" and "What Works for Health Wisconsin" (WWFH WI) were <u>combined</u> and updated. These resources support shared understanding and better communication about what shapes health, and facilitate decision-making to improve health and equity.

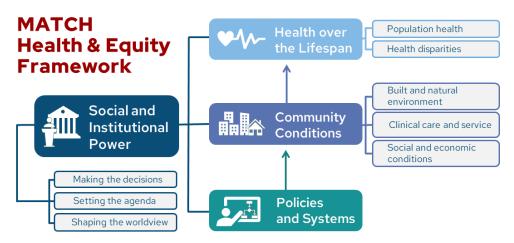


Improving Wisconsin's Health

This <u>database</u> curates current statewide community health needs assessments and community health improvement plans, and is searchable by county or by health priority areas. Users can search health issues that are most important to communities across the state and identify other communities that are also working on that priority.

What Works for Health Wisconsin

This database curates evidence-informed policies, programs, and system changes that will improve the variety of factors that affect health — alongside guidance for communities to help select and implement them. Solutions are based on a model of population health that emphasizes the many factors that can make communities healthier places to live, learn, work, and play. Research analysts review and assess research to rate the effectiveness of a broad variety of strategies (e.g., policies, programs, systems, and environmental changes) that can affect health.



MATCH Health & Equity Framework Model

Dissemination of the Wisconsin Population Health and Equity Report Card

In spring 2022, the Healthiest State team released the <u>2021 Wisconsin Population Health and Equity Report Card</u>. The Report Card builds on the institute's Mobilizing Action Toward Community Health Framework for Health Equity, which highlights the role of social and institutional power in health and health inequities. This undertaking inspired new partnerships with the Wisconsin Department of Health Services and the Governor's Health Equity Council, and illustrates progress in the institute's strategic action areas.

"From the beginning the Healthiest State Project has included periodic Report Cards on Wisconsin's health, under the premise that you can't manage or improve what you can't measure. This work not only contributes to accountability in the state but also features methods [that] others around the country can use."

-Dr. David Kindig, MD, PhD, Founding Director, Making Wisconsin the Healthiest State Project



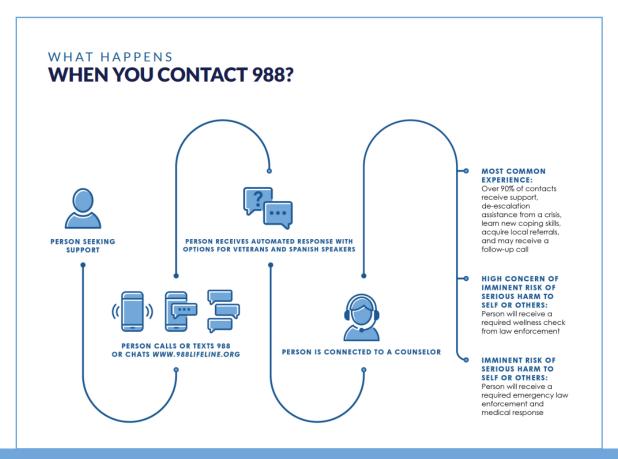
Evaluation Services for Behavioral Health Crisis Support Line

Beginning in April 2022, the University of Wisconsin Population Health Institute partnered with the Wisconsin Department of Health Services and Family Services of Northeast Wisconsin to support the <u>rollout of 988</u> in Wisconsin.

As of July 16, 2022, anyone in the United States can call or text 988, or use an online chat tool, to access the National Suicide Prevention Lifeline. 988 operates nationwide as an option for people experiencing a behavioral health crisis.

Funded by the Substance Abuse and Mental Health Services Administration, project partners work together to improve state and territory responses to 988 calls. These efforts include recruiting and hiring a behavioral health workforce to staff local 988/Lifeline centers and training them to respond, intervene, and provide follow-up to individuals experiencing a behavioral health crisis. Project partners work to unify the response to 988 calls by engaging Lifeline crises centers and ensuring these centers have the staff and support structure needed for 988 to succeed.

In 2022, institute staff supported local efforts by providing reports on key performance indicators to local and national stakeholders. They also assisted with annual goal setting and use of data for continuous quality improvement.





FOR MORE INFO: WWW.DHS.WISCONSIN.GOV/988



New Media, New Conversations: In Solidarity Podcast

The University of Wisconsin Population Health Institute branched out into new platforms with the 2022 launch of the County Health Rankings & Roadmaps (CHR&R) podcast series, *In Solidarity: Connecting Power, Place, and Health*. The podcast was produced by the CHR&R communications team.

In a complex, modern society, we are deeply connected in ways that often go unnoticed. Podcast hosts <u>Ericka Burroughs-Girardi</u> and <u>Beth Silver</u> explore these connections in interviews with some of our country's brightest minds and biggest thinkers.

In April 2022, *In Solidarity* released a six-episode series titled *Unjust and Unfair:* Consequences of a Racial Wealth Divide. The team followed this with a three-episode series, *Undervalued and Underpaid:* The Gender Pay Gap's Connection to Our Health, in October 2022.

Below are short synopses of the first series. Please visit the website for complete descriptions.

Unjust and Unfair: Consequences of a Racial Wealth Divide

Listen here

Episode: Introduction

Introducing *In Solidarity: Connecting Power, Place and Health.* In this episode, hosts Burroughs-Girardi and Silver introduce the series and explore how our lives and fates are interconnected.

Episode 1 From Public Goods to Private and Profitable Property

Author Donald Cohen explores society's shift away from things that were once considered sacred public goods (e.g., public schools, transportation, infrastructure, and investment in all communities) and how we can return to a mindset of social solidarity.

Episode 2 Staggering Statistics on the Racial Wealth Divide

CHR&R scientist Dr. Christine Muganda discusses the many ways wealth influences opportunities for employment, housing, health care, and education – all of which contribute to health inequities.

Episode 3 A History of Wealth Inequities

Dr. Dalton Conley examines the massive racial wealth divide and explores a race-neutral solution to close the gap.

Episode 4 Reparations: A Solution to the Racial Wealth Divide

Dr. Andre Perry, senior fellow with the Brookings Institution and scholar-in-residence at American University, argues that reparations are not only the solution to bridging the racial wealth divide, but also the morally right thing to do.

Episode 5 Solutions to the Racial Wealth Divide

Joined by our colleague Michael Stevenson, team leader for Evidence and Policy Analysis at CHR&R, we explore several evidence-informed solutions that support wealth building.

Episode 6 Case Study: The Atlanta Wealth Building Initiative

Latresa McLawhorn Ryan, executive director of The Atlanta Wealth Building Initiative, helps us reimagine the economic conditions in communities of color through community wealth building strategies that leverage ideas, people, and capital.

Also released:

Undervalued and Underpaid: The Gender Pay Gap's Connection to Our Health Listen here





New Podcast Series: Population Health: The Unfinished Journey

Emeritus Professor and founding member of the UW Population Health Institute, David Kindig, MD, PhD, shares his 50-year academic and policy journey in this series produced and shared through the Interdisciplinary Association for Population Health Science. Dr. Kindig was interviewed by Sanne Magnan MD, PhD, and the conversation includes many stories, anecdotes, and takeaways. The podcasts are found here.

Episode 1: Once Upon a Time

Episode 2: The Story Behind the Book

"Purchasing Population Health"

Episode 3: What Is Population Health?

Episode 4: The Lonely Years

Episode 5: Picking Up Steam

Episode 6: It's All About the Money

Episode 7: Health Equity: Finding Common

Ground

Episode 8: Health Equity: Crucial and

Complicated

Episode 9: Looking Forward in the Unfinished

Journey



David Kindig

UNCONVENTIONAL WISDOM

THE HEALTH CARE SYSTEM SHOULD PRODUCE HEALTH

Parhaps the title of this article seems obvious. Aren't health care providers and patients always working toward the goal of producing health? The answer is yes — and no. Clearly, most individual providers and institutions have this objective, and many times they achieve it. The nature of the professionals work diligently and compassionately towards improving health. However, health care expenditures are not control, consuming more than 12 percent of our ration's wealth with the potential to approach 20 percent by

wealth with the potential to approach 20 percent by the end of the decade. But there is little proof that these rapidly increasing expenditures have improved the overall health of Americans, and a growing body of evidence suggests that many medical procedures are not appropriate for certain patients.

"We must make decisions about the boundaries of health care and other social services that contribute to quality of life."

For some illnesses like influenza or uncomplicated promotine interests in a minority of anomphicated preumonia or even some types of cancer, a complete cure is the desired goal. For many chronic illnesses like diabetes, heart disease, or Alzheimer's disease, the goal is to increase or maintain the natiant could be falled.

the desired goal. For many chronic linesses like diadeves, heart disease, or Maintein Sdessee, the goal is to increase or maintain the patient's quality of life.

Our society has not concentrated on these broader and more elusive goals for several reasons. Our professional socialization, financial incentives, and legal system implicitly, if not explicitly, assume that more health services will produce better health. Patients often unwittingly conspire with providers in this cultural norm that "more is better."

How would a new system that focused on health itself, rather than services, be organized? No ideal model exists. Coming closest are the HMOs — organizations based in large group practices that provide all health care for an enrolled population for a fixed monthly fee. Because they stand to profit only if they can provide care more efficiently, they take on the difficult task of deciding which services produce quality care at the lowest cost.

Imagine if a significant part of a health organization's income was tied to the improvement of their patients' health

d functional status. In addition to curing illness, the orga-

and functional status. In addition to curing illness, the organizations would be expected, for example, to decrease the number of low-birth-weight babies, to decrease the number of days of employment lost to illness, and to limit hospitalizations and expensive diagnostic procedures to those known to be health promoting. Such incentives would unleash the same capitalistic creativity towards health that currently exists for health services.

This is a complex task. We need clearer and more precise definitions of health and functional status, and we need valid and cost-effective measures that can be applied to diverse populations. We must make decisions about the boundaries of health care and other social services that contribute to quality of life — and appropriate financial incentives that will sensitively lead to this result. And finally, we need a program of universal access to such organizations for the uninsured and an integrated delivery system.

Many will say that such framatic changes are impossible While it will not be easy, I believe that research over the next decade, some of which is being done at the UW School of Medicine, will allow for such a paradigm shift.

I believe we must work toward this re-definition of the outcome as health rather than health services. Failure to do so will result in continuously increasing expenditures for services that will not improve health, and in draconian cost containment and rationing schemes that will likely harm patients, providers, and the existing quality of our health care system.

By David A. Kindig, MD, PhD, Professor of Preventive Medicine

SEPTEMBER / OCTOBER 1992 25



Strategic Action Area I: Population Health and Equity Research











We advance the field with a Population Health and Equity Research Agenda 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.





The Wisconsin Population Health and Equity Report Card: Informing and Catalyzing Action

In early 2022, the University of Wisconsin Population Health Institute released the <u>2021 Wisconsin Population</u> Health and Equity Report Card to a statewide audience of practitioners, partners, news media, and the public.

Wisconsin received a grade of C for overall health. That grade dropped to a D or F when health disparities among different populations (for example, based on geography, racial and ethnic groups, or education) were taken into account. The take away: not all Wisconsinites have the opportunity to live long and well.

Rooted in the institute's Mobilizing Action Toward Community Health (MATCH) Framework for Health Equity, the Report Card highlights the role of social and institutional power in health and health inequities. It examines who makes decisions, sets agendas, and shapes worldviews — particularly when it comes to health outcomes related to five main issues:

- Ensuring access to quality health care
- Expanding safe and affordable housing
- Increasing economic resources for children and families
- Expanding broadband infrastructure
- Increasing civic engagement

The attention to power shifts the focus from individual behavior to our collective capacity to design and implement policies and systems that shape the community conditions that influence health.

While Wisconsin gets an overall health grade of C, measurable differences exist among population groups across the state in length and quality of life. A strong and growing body of research shows that these differences in health outcomes are the result of community conditions and policies and systems that shape health and opportunity. The neighborhoods we live in – along with past and present housing, education, and employment policies – create opportunities for some, but roadblocks for others.

The UW Population Health Institute released earlier Reports Cards in 2007, 2010, 2013, and 2016. The Report Card is a call to action to better understand the health of our communities and implement strategies to create conditions that allow all people to have a fair and just chance to lead the healthiest lives possible.

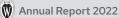
The 2021 Report Card incorporates a range of information and resources. These include quantitative data about how long and how well people live in Wisconsin and about the disparities that exist among

	Mortality	Fair or Poor Health
Wisconsin's Health Grades	С	С
Adjusted for: Rural/Urban Disparities	D	С
Adjusted for: Racial/Ethnic Disparities	D	D Re
Adjusted for: Educational Disparities	F	F

Wisconsin Health Grades: Disparity.

From 2021 Wisconsin Population Health and Equity Report Card





groups and places. Accompanying these data are stories and other content that provide context and illustrate the factors that impact overall health and equity. Finally, the report puts forth evidence-informed policies and practices that can address unfair, avoidable, and systematic differences.

The Report Card underscores the institute's commitment to translate research about population health for use in policy and practice. Evidence from the 2016 Health of Wisconsin Report Card was used to justify the creation of the Governor's Health Equity Council in 2019.

In the release of the Governor's Health Equity Council's recommendations, the 2021 Wisconsin Population Health and Equity Report Card was cited to illustrate the persistent health disparities in the state and to propose solutions for improving health and equity. The 2021 report was developed in collaboration with the Wisconsin Department of Health Services State Health Improvement Plan team.

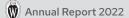
Dissemination with Statewide Media

Report card findings were shared broadly throughout the state. More than twenty news outlets picked up the story. Findings were also widely shared through an online toolkit, email campaigns, and on social media.



Spectrum News interview with Institute Director Sheri Johnson, April 2022.





The Tribal Personal Responsibility Education Program

The Tribal Personal Responsibility Education Program (PREP) is a five-year project that provides culturally responsive sexual health education to youth aged 10–19 in five of Wisconsin's 11 federally-recognized tribal communities. The Great Lakes Inter-Tribal Council (GLITC) received the grant for this project and contracted the University of Wisconsin Population Health Institute to serve as the local evaluator.

The institute's evaluation team is developing evaluation protocols and data collection tools, providing training and technical assistance, and working with local communities to shape quality improvement efforts that are community-informed and culturally responsive.

The evaluation team approaches this work with three values at the forefront: respect, reciprocity, and relationships. Recognizing the inherent sovereignty of Wisconsin's tribal nations, they worked closely with the Ho-Chunk Institutional Review Board (IRB) when submitting the formal IRB application. As part of this role, the team notifies Nations of planned Needs Assessment activities, seeks feedback and approval for conducting them, and shares the Needs Assessment findings with them. The project received positive feedback from the Ho-Chunk IRB and obtained approval to move forward with Needs Assessment activities without any requested modifications.



At left, UW-Madison senior Sagen Quale assists Aaron Bird Bear, tribal relations director in the Office of University Relations, in raising the Ho-Chunk Nation flag in honor of Indigenous Peoples Day. Quale is a citizen of the Red Cliff Band of Lake Superior Chippewa Indians and environmental chair of the Native American student organization Wunk Sheek.





Select Publications

Voting and Civic Engagement Rights are Eroding: What Does It Mean for Health and Equity?

Pollock, E. A., Givens, M. L., & Johnson, S. P.

Article in Health Affairs

In this short viewpoint, the authors explore civil rights past and present, the erosion of our democracy, and the implications for health and equity. The article is a call-to-action to mobilize the health field around voting and civic engagement.



Coordinating Centers as a Strategy for Accelerating Cancer Epidemiology Consortia: Best Practices

Trentham-Dietz, A., Bird, J. E., Gangnon, R. E., Lindberg, S. M., Madison, T., Malecki, K. M. C. Shull, J. D., Vredeveld, C., & Rolland, B.

Article: Current Epidemiology Reports

This review highlights six best practices for cancer epidemiology coordinating centers to facilitate the success of a research consortium. This paper provides concrete examples of how research consortia can implement anti-racist and inclusive approaches to enhance research collaboration, engage communities and advocates in setting research agendas, and promote equitable stewardship of resources.

Third Spaces and Opioid Use Within Black Communities of Dane County: a Qualitative Secondary Data Analysis

Williams, T. M. & Francis, C. D.

Article in Journal of Community Practice

This study utilizes data initially collected by evaluators at Wisconsin's Department of Health Services to create a secondary data analysis to investigate the opioid use and misuse among Black residents of Dane County. It analyzes conversations of Black women, men, and youth throughout Dane County as they discuss the role of social infrastructure — specifically third spaces —as a contributing factor to drug abuse. Black Third Spaces are defined as recreational, impermanent, and community-based spaces that provide emotional and psychological support to Black people.

Interviewees reveal that opioid use in Black communities throughout Dane County is exceptionally complex and involves multiple systems and structures that reach far beyond individuals' choices and behaviors, which are often alluded to as the root of drug abuse.

The first-hand accounts depict the impact of being denied access to spaces and how the absence of social infrastructure has impacted their lives. The results of this study help support arguments for easily accessible social, economic, and political resources in Black communities to reduce opioid abuse.

Troy Williams on Madison WORT FM

Radio Interview



Troy Williams



Strategic Action Area II:

Motivate Investors to Advance the Equitable Stewardship of Resources



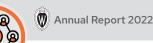








We motivate a broad range of investors to advance the equitable stewardship of their resources by committing to challenging the status quo of grantmaking and investment while broadening our resource streams to accommodate the risks.

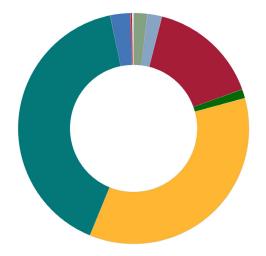


2022 Annual Budget

The UW Population Health Institute's annual budget continues to increase. In 2022, the institute's budget was \$18.2 million, up from \$13 million in 2021, and it has more than tripled since 2005. In 2022 alone, the institute was awarded 67 new or renewal contracts or grants, half of which were awarded by the Wisconsin Department of Health Services.

As shown on the pie chart below, the institute's two largest funders remained the same in 2022.

- The Robert Wood Johnson Foundation continues to support the County Health Rankings & Roadmaps program.
- Wisconsin state agencies make up the second largest funding source for the institute. Among these agencies, the Wisconsin Department of Health Services (DHS) continues to be the institute's lead funder, providing more than \$6 million in 2022.



Innovation in Funding for Communities

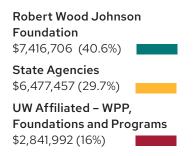
In 2022, the institute was proud to pilot new funding approaches through the Just Recovery for Racial Equity (JRRE) initiative, a partnership with the Governor's Office and DHS. JRRE awarded more than \$1.74 million to Wisconsin communities for mitigation and recovery from COVID-19. The institute worked closely with DHS and within university administration to pilot a more equitable and accessible process for funding community partners.

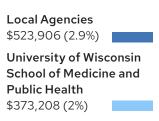
Needed Support

Major investments have the potential to instigate transformative change within the institute, the UW School of Medicine and Public Health, and among our many partners. Unrestricted flexible funding would allow us to:

- Ensure we have the capacity and flexibility to take on the kinds of risks that innovation requires
- Better leverage and align with collaborative partners
- Provide the infrastructure and administrative support that groundbreaking projects need to succeed
- Strengthen our organizational culture through leadership development and by honing our own equity and inclusion efforts

We invite you join forces with the institute to collectively ensure that every community working to improve health and health equity is able to access the required data, training, and technical assistance it seeks.









Strategic Action Area III: Partnerships for Action











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





Isthmus Safety Initiative

The institute's Evaluation and Engaged Research team worked alongside multiple community partners to design and implement a community-driven action plan to address gun violence and sexual violence in downtown Madison. These partners include the City of Madison Community Development Division, Madison Police Department, Public Health Madison & Dane County, Downtown Madison, Inc., and Capitol Neighborhoods, Inc., among several others.

Centering around the voices of those most impacted by violent crime in Madison, advisory council members developed a community-driven action plan, which the Bureau of Justice Assistance approved. The action plan has three data-driven components: increasing lighting in one gun violence hotspot, training bar staff to effectively intervene in order to prevent sexual violence and gun violence escalation, and deploying Safety Navigators to serve as mobile resources for entertainment district patrons. The city will improve lighting and other environmental factors in a parking lot in the center of the violence hotspot. The Dane County Rape Crisis Center and Focused Interruption will train

bar owners and bartenders in bystander interruption. And Safety Navigators will be present during peak times on nights and weekends to assist individuals in need of support. The latter will be hired and managed by Public Health Madison & Dane County as part of their violence prevention plan.

The institute worked with the community advisory board to design implementation of the action plan components. The group took part in a <u>data collection</u> <u>event</u> in downtown Madison to gather feedback about safety perceptions and ways to address safety issues. Project staff are collaborating with partners to design an evaluation plan. Funded by the Bureau of Justice Assistance, implementation activities will continue through at least fall of 2023.

The Wisconsin State Journal featured a comprehensive article describing the participatory action research methods developed by institute staff Abra Vigna and Janae Goodrich.

South Madison Reinvestment Strategy for Equity

In 2022, The City of Madison hired the institute's Evaluation and Engaged Research team to assess impacts of tax increment financing that will be implemented with the new community-informed South Madison Neighborhood Plan. The research team will assess the impacts over ten years. Using a community-engaged action research approach, the team monitors impacts on gentrification, BIPOC wealth building, and BIPOC entrepreneurship.

In 2022, project staff led intensive data collection across South Madison, knocking on more than 600 doors to conduct 221 in-person interviews with the neighborhood's residents. During this initial round of data collection they spoke with nine percent of the residents in the area, lifting the voices of many who were unable to engage with the city's planning efforts.

These findings will continue to shape the area's city-led development efforts. Each summer until 2032, staff will conduct intensive data collection to monitor the ongoing impacts of this development and recommend changes to the city's strategies.



Jeremy McClain from Evaluation and Engaged Research meets with residents while conducting data collection in South Madison





Strengthening the Public Health Workforce:

Wisconsin Population Health Service Fellows Serve in Organizations Statewide

The Wisconsin Population Health Service Fellowship is a two-year service and training program for early career public health professionals. Recent graduates and emerging public health professionals are placed in organizations across the state to tackle pressing public health challenges and build professional experience as future public health leaders. The fellowship trains the next generation of public health leaders with cutting-edge skills and systems thinking, and instills commitment to collaboration and health equity. Since 2004 the program has recruited and deployed 97 post-graduate professionals to work for 74 distinct public health and community-based organizations throughout the state.

In 2022, fellows led strategic planning for both local and state health departments, created and implemented community health improvement plans, and facilitated conversations to inform state health assessments. Regarding COVID-19 response and recovery, fellows have facilitated stakeholder engagement and communication outreach, created educational resources for immigrant and refugee communities, and assisted a statewide vaccine taskforce. Fellows have also contributed to program planning and implementation efforts, coordinated childhood lead testing in more than 100 tribal schools across Minnesota and Wisconsin, piloted doula services for low-income mothers, created a violence prevention plan for Dane County, and designed communities of practice for substance use reduction.

Linked <u>here</u> is a Wisconsin Partnership Program article highlighting the work of some of our recent fellows in Wisconsin.

Featured Fellows:

Erik Ohlrogge joined the Great Lakes Inter-Tribal Epidemiology Center in Lac Du Flambeau, WI. There his work has spanned topics of public health governance, healthy equity, and data. Erik has supported data equity through partnerships, data quality and evaluation, and technical assistance.

Emily Dejka supports the Eau Claire City-County Health Department, where she has worked on COVID-19 testing availability, communication changes in COVID guidance, and starting the department's mobile vaccination team. Since completing her fellowship in July 2022, Emily has continued her path there as a public health specialist.

"The Fellowship Program set me up with a foundation of health equity in public health that I will build on for the rest of my career."

– Emily Dejka, former Wisconsin Public Health Service Fellow

Amanda Dailey works at the City of Milwaukee Health Department as part of the Health Strategy Team in the Policy, Innovation, and Engagement Department. Her work focuses on the community health assessment. She also works at the Center for Urban Population Health, where she has focused on the national research program "All of Us."

Fellowship orientation July 2022





Select Publications

Public Health Training Centers' Support for Community Health Workers: Case Studies of Needs Assessment, Training, and Student Field Placement Initiatives

Lederer, A. M., Barrett, K. T., Shorter, C., Kenefick, H. W., Kulik, P. K. G., Morales, M., Reinschmidt, K. M., & Shrestha, S.

Article in the Journal of Public Health & Management Practice

The authors showcase three Public Health Training Centers' recent Community Health Worker (CHW) initiatives, sharing lessons learned and helping organizations initiate or strengthen CHW partnerships that ensure a strong and sustained CHW workforce and improve community health outcomes.



Authors and institute staff members Sweta Shrestha and Marcia Morales





Strategic Action Area IV: Health and Racial Equity Narrative











We cultivate strong narratives and strategic communications to name what it takes to achieve health equity.





The Health Equity Narrative Infrastructure Project (HENIP)

The ability to influence narratives is a form of power. Narratives undergird all of our work. They inform strategy, movements, cultures, partnerships, decision-making, and agendas. As organizing tools, narratives can shift public consciousness and open possibilities for structural changes.

New Partners, New Narratives

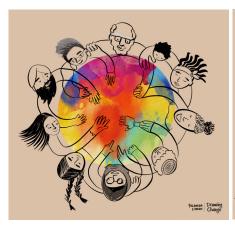
The University of Wisconsin Population Health Institute identified the need to build a narrative infrastructure within the field of health equity. In collaboration with Human Impact Partners, institute staff created the Health Equity Narrative Infrastructure Project (HENIP) to build a collective of organizations seeking to shift their work — and our world — away from the dominant narratives that have long impeded progress and toward new, more inclusive ideas and worldviews that support health and social justice.

In 2022, HENIP expanded its narrative community to more than 350 people and more than 50 local, state, and national organizations and communities. HENIP helped participants to disseminate and embed transformative narratives in their own work and to lead similar conversations with their own staff, boards, and other allies. Transformative narratives offer up an alternative set of values of what is possible to collectively accelerate racial and health equity and structural change.

Many of these communities and organizations are now using transformative narratives to shift conversations around health equity issues, build partnerships, and identify next steps. Participating state health departments and organizations, for example, have applied transformative narratives when developing strategic health improvement plans, policy briefs, and collective action. A faith-based coalition has begun applying transformative narratives to frame communications and advance equity. National organizations have partnered with HENIP to share these narratives with their networks and grantee programs. Seventy-two representatives from 19 unique state teams were trained in narrative power and applying narratives as dissemination and communication agents.

What is Narrative?

Narrative is made up of values-based meta-stories about how and why the world operates that have the ability to shape public consciousness, including our collective senses of responsibility and possibility.







Illustrations by Yolanda Liman.



Focus on Rural Health Equity

Expanding Approaches to Rural Health Equity

Bringing issues of rural health equity to the forefront of state and national conversations is fundamental to the mission of the University of Wisconsin Population Health Institute.

One in five Americans live in rural areas and one in four rural residents are people of color. Rural residents experience higher rates of disease and earlier death than those living in suburban and urban parts of the country. The COVID-19 pandemic worsened inequities that lead to poor health outcomes in rural areas. To rebuild vibrant communities and achieve better health for everyone, local leaders must embrace equity, leverage the gifts of their diverse residents, and utilize their rich regional assets. To that end, the institute's focus on rural health initiatives gained promising momentum in 2022.

Institute Partners Develop the Thrive Rural Framework

The Thrive Rural Health Framework was created by Aspen Institute Community Strategies Group (CSG) in partnership with the institute. Current and future sources of water, energy, and food are inherently rural, and people raised in rural communities provide essential leadership and workforce for both rural and urban America.

With this vision in mind, the <u>Thrive Rural Framework</u> is a new online tool designed to help leaders identify assets, implement strategies, and measure their progress toward advancing rural prosperity, health, and well-being in their own communities. Critically, the framework confronts, and seeks to address, the reality that people in rural communities and Native nations face unique types of systemic racism, place-based marginalization, and class discrimination.

The framework seamlessly weaves current community innovations and tested approaches for working together on issues to achieve equitable rural prosperity – from health and economic development to environmental stewardship and civic engagement. The framework uses an asset-based approach to support local and system changes to build prosperous rural communities.

Webinar Series: Rural America's Opportunity for Equity

In October and November 2022, County Health Rankings & Roadmaps hosted a webinar series, titled Rural America's Opportunity for Equity, which explored strategies to achieve better health in rural communities.

In the first webinar, Andrew Volmert from the FrameWorks Institute shared new research to support rural leaders' communication strategies regarding equity and justice.

The following month, the institute's Associate Director Marjory Givens joined Chris Estes of the Aspen Institute Community Strategies Group to introduce the Thrive Rural Health Framework. Following each webinar, County Health Rankings & Roadmaps hosted a one-hour interactive virtual discussion.





Reproductive Healthcare: An Intersectional Component of Healthy Rural Communities

In June 2022, rural health disparities took on a new sense of urgency when the U.S. Supreme Court released its decision in Dobbs v. Jackson. Following her participation in the Aspen Ideas Festival, the institute's Associate Director Marjory Givens <u>published a blog post</u> that explores the many ways that rural health outcomes intersect with a community's access to reproductive health care.

Citing the County Health Rankings & Roadmaps 2022 National Findings Report, Givens highlights the many barriers that women and families face in rural communities. Stating, "we fail to achieve health and equity in our communities when women, children, and families...cannot reach their fullest potential," Givens suggests proven ways to dismantle these barriers, including improving access to reproductive health care, remediating inadequate childcare services, and nurturing employment opportunities in rural settings that offer fair wages and family-supporting benefits.

Expanding the Conversation: How "Rural" is Defined and Why it Matters in Health and Equity Research

Measuring health and equity by place, along the rural to urban spectrum, is an essential part of population health research. Still, there is not one definition for what classifies a community as rural. In fact, the Rural Aperture Project's, "Defining rural America: The consequences of how we count," points out that there are more than a dozen federal definitions of the word, and these definitions often disagree about what places should be considered rural.

Greg Nycz, executive director of Family Health Center of Marshfield, Inc., in rural Northern Wisconsin, and a member of the institute advisory board, co-authored a blog post with the institute. In it Nycz describes real case examples of dental care, geography, and water supply to elucidate key challenges. He urges researchers to consider multiple definitions of "rural," and to consult multiple sources of data accordingly.





Strategic Action Area V:

Organizational Capacity Building











We commit to becoming a racially equitable, inclusive organization, joining and supporting other organizations on their journey.



Internal Capacity Building

Learning Together: A Visit to Oak Creek, Wisconsin

The University of Wisconsin Population Health Institute's 2022 "Workation Day" provided opportunities for approximately 40 staff to learn about the Sikh community in Oak Creek, and the ways the community has come together to commemorate the 10th anniversary of the mass shooting that tragically occurred at the Gurdwara (Sikh temple).

Sikh community leaders shared information about their culture and faith, and how they have worked with Oak Creek governmental agencies to build understanding and increase equity and inclusion in the community. Institute staff toured the new Sikh book collection at the Oak Creek public library and learned how the Sikh community and library staff worked together to create new resources for everyone.

The 2022 Workation Day was organized by the institute's Assistant Director Wajiha Akhtar, who developed training prior to the visit on the history of South Asian colonization and partition, the history of Sikhs in the United States, and the impacts on these communities post-9/11.



The UW Population Health Institute's "Workation Day" is an annual all-day outing for institute staff modeled on the Wisconsin Idea Tour.



Institute staff browse the Sikh book collection at Oak Creek Public Library.





Screening of The Color of Care

In September 2022, the University of Wisconsin Population Health Institute joined the Master of Public Health program to present a screening of The Color of Care documentary for all School of Medicine and Public Health staff, faculty, and students; ninety-one attended the screening.

About the Film

<u>The Color of Care</u> chronicles how people of color suffer from systemically substandard health care. COVID-19 exposed what they have long understood and experienced: They do not receive the same quality of care. The film traces the origins of racial health disparities to practices that began during slavery and continue today. Using moving personal testimony, expert interviews, and disturbing data, the film reveals the impact of racism on health, serving as an urgent warning of what must be done to save lives.



Bias Habit-Breaking Training for Institute Staff

Evidence Based Approaches to Reducing Bias

In December 2022, UW Population Health Institute staff participated in the Empowering People to Break the Bias Habit training, led by Dr. William Cox. The training was the first and remains the only intervention that has been shown experimentally to produce long-term changes in bias. This training was built on more than 30 years of research on the prejudice habit model, which introduced the very notion of "implicit bias" or "unintentional bias".

The bias habit-breaking training translates this work into an empowerment-based training that treats bias reduction as a process of "breaking the bias habit." This requires motivation to overcome bias, awareness of different ways bias manifests and is perpetuated, evidence-based tools to effectively reduce bias, and effort over time to retrain bias habits

The training equips people with tools to recognize and address bias. Experiments have shown that people who have completed the training are significantly more likely to speak up against bias and confront bias in the world around them, up to at least 2–3 years post-training.





Appendices



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The UW Population Health Institute

Marjory Givens

UW Population Health
Institute
Associate Director
County Health Rankings
& Roadmaps
Co-Director





Sheri Johnson

UW Population Health Institute Director County Health Rankings & Roadmaps Principal Investigator

Wajiha Akhtar

UW Population
Health Institute
Assistant Director;
Interim Fellowship
Director
Mobilizing
Action Toward
Community
Health (MATCH)
Interim Co-Director



Leadership Team



Carrie Carroll

RWJF Culture of Health Prize Program Director Mobilizing Action Toward Community Health (MATCH) Interim Director; Senior Strategic Initiatives Consultant



County Health Rankings & Roadmaps Co-Director



Angela Allen

Mobilizing Action
Toward Community
Health (MATCH)
Director







Appendix A: Who We Are

UW Population Health Leadership

Sheri Johnson, Director

Marjory Givens, Associate Director

Wajiha Akhtar, Assistant Director

Angela Allen, Mobilizing Action Toward Community Health

(MATCH) Program Director

Carrie Carroll, RWJF Culture of Health Prize Program

 ${\sf Director; Interim\ MATCH\ Director; Senior\ Strategic\ Initiatives}$

Consultant

Sara Lindberg, Evaluation and Engaged Research

Program Director

Bethany Rogerson, County Health Rankings & Roadmaps

Co-Director

Senior Advisors

Paula Tran, Senior Health Equity Advisor

County Health Rankings & Roadmaps

Marjory Givens, Program Co-Director

Bethany Rogerson, Program Co-Director

Sheri Johnson, Principal Investigator

Angela Acker, Narrative Infrastructure Team Leader

Jed Amurao, Narrative Infrastructure Specialist

Tricia Ballweg, Administrative Program Specialist

Kate Barnes, Data Analyst

Elizabeth Blomberg, Research and Analytics Scientist

Molly Burdine, Data Analyst

Ericka Burroughs-Girardi, Senior Outreach Specialist

Ben Case, Evidence Analyst

Kiersten Frobom, Senior Evidence Analyst

Lindsay Garber, Strategic Dissemination Team Leader

Amanda Gatewood, Special Operations Director,

Data and Science

Keith Gennuso, Population Health Research Team Leader

Gillian Giglierano, Project Assistant

Kim Gilhuly, Translational Research Advisor

Lael Grigg, Senior Evidence Analyst

Jonathan Heller, Senior Health Equity Fellow

Bomi Kim Hirsch, Research and Evidence Scientist

Jessica Hoffelder, Spatial Data Analyst

Thomas Jaime, Communications Specialist

Kate Kingery, Senior Sustainability Leader

Ksenia Kostelanetz, Graduate Research Assistant

James Lloyd, Program Technology Coordinator

Plumer Lovelace III, Operations Team Leader

Ganhua Lu, Data Analyst

Christine Muganda, Data and Analytics Team Leader

Molly Murphy, Community Scientist

Suryadewi Nugraheni, Research and Analytics Scientist

Hannah Olson-Williams, Project Assistant

Eunice Park, Project Assistant

Naiya Patel, Evidence Analyst

Jennifer Robinson, IT Support

Matt Rodock, Assistant Researcher

Jessica Rubenstein, Senior Evidence Analyst

Nicholas Schmuhl, Research and Analytics Scientist

Erin Schulten, Program Manager

Beth Silver, Communications, Outreach, and Engagement

Team Leader

Jessica Solcz, Senior Evidence Analyst

 $\label{thm:michael Stevenson} \mbox{Michael Stevenson, Evidence and Policy Analysis Team}$

Leader

Everett Trechter, Analytics Strategist

Cathy Vos, Administrative Specialist

Colleen Wick, Outreach Specialist

Molly Wirz, User Experience Architect

Evaluation and Engaged Research

Sara Lindberg, Program Director

Salma Abadin, Action Researcher and Evaluator

Simone Alhagri, Evaluation Researcher

Rachel Amos, Evaluation Researcher

Sara Busarow, Evaluation Researcher

Nancy Crull, Evaluation Project Assistant

Victoria Faust, Action Researcher and Evaluator

Liz Feder, Evaluation Scientist

Janae Goodrich, Evaluation Researcher

Vanessa Hernandez, Evaluation Research Specialist

Caleb Hogeterp, Evaluation Research Specialist

Hilary Joyner, Evaluation Researcher

Kylie Lafayette, Evaluation Research Specialist

Cleo Yothsackda Le, Evaluation Project Assistant

Sarah Linnan, Evaluation Researcher

Olivia Little, Translational Scientist

Miranda Manzanares, Evaluation Researcher

Jeremy McClain, Evaluation Research Specialist

Kelsey Melah, Evaluation Project Assistant

Emily Merkel, Evaluation Project Assistant

D. Paul Moberg, Evaluation Scientist

Felipe Mesa Morales, Evaluation Project Assistant

Jennifer Núñez, Evaluation Scientist

Mary Kate O'Leary, Action Researcher and Evaluator

Alisa Pykett, Action Researcher and Evaluator

Andrea Raygor, Evaluation Researcher

Cassie Sesto, Evaluation Project Assistant

Erin Taber Shelton, Evaluation Research Specialist

Shukhvir Singh, Evaluation Project Assistant

Erin Skalitzky, Evaluation Researcher

Abra Vigna, Action Researcher and Evaluator

Aria Walsh-Felz, Evaluation Researcher

Lindsay Weymouth, Evaluation Scientist

Troy Williams, Action Researcher and Evaluator Laetitia Zeba, Evaluation Research Specialist





Mobilizing Action Toward Community Health (MATCH)

Angie Allen, Program Director
Carrie Carroll, Interim Program Director
Wajiha Akhtar, Interim Program Co-Director
Ann McCall, Interim Program Co-Director
Yasamin Aftahi, Envision Outreach Coordinator
Monique Allen, Envision CHW Community of Practice Lead
Selma Aly, Community Coach
Alan Avila, Programs Coordinator
Lola Awoyinka, Racial Equity Initiative Planning Coordinator
Sara Elise Bristol, Envision CHW Sustainability Lead
Felicia Fairfield, Community Coach
Emily Hyde, Program Manager

Andrea Jones, Policy Technical Assistance Coordinator Hmongshee Khang, Envision CHW Training Coordinator Gina Larsen, Communications Specialist McKenzie Liegel, Community Coach

Nancy Michaud, Youth Access Program Coordinator Marcia Morales, CHW Outreach Specialist

Raymond Neal, Community Coach Sherri Ohly, Envision Co-Director

Carleigh Olson, Policy Training and Technical Assistance Coordinator

Margaret Opperman, Fellowship Student Assistant
Hersh Pareek, MATCH Student Assistant
Gabriella Pott, MATCH MCH Student Assistant
Courtney Raatz, Envision Operations Coordinator
Annie Rosemurgy, Narrative Coordinator
Sweta Shrestha, Fellowship Program Manager
Alan Talaga, Policy Systems and Environmental Change
Training Lead, Community Coach
Ashley Voss, Web Design and Resource Coordinator
Karina Ward, Community Coach
Soraya Willems-Neal, Special Projects Coordinator
Lesley Wolf, Interim Community Training Lead; Envision

Operations

Co-Director

Wajiha Akhtar, Institute Assistant Director Maegan David, Office Management Student Assistant Phoebe Frenette, Multimedia Designer Ethan Kastenschmidt, Operations Fiscal Assistant David Lujan, Operations Fiscal Assistant Ann McCall, DHS Program Manager; Interim Fiscal and Contract Lead Kara Pagano, Administrative Specialist

Kara Pagano, Administrative Specialist Zach Rusch, Research Manager Kayla Tollefson, Financial Coordinator

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.

Liz Adams, Substance Use Prevention Coordinator Lisa Bullard-Cawthorne, Overdose Data to Action Program Planning Coordinator

Tim Connor, Mental Health Programs Evaluator
Katherine Drewiske, Late Adolescent Health Consultant
Hannah Gjertson, Maternal Mortality Program Coordinator
Pamela Imm, Injury and Violence Prevention Epidemiologist
Lataysha James, Community Outreach Consultant
Ruth Koepke, Syndromic Surveillance Data Analyst
Emily Morian-Lozano, Maternal Mortality Review
Epidemiologist

Karen Morris, Maternal Mortality Review Record Abstractor Ronald Prince, Overdose Data-to-Action Epidemiologist Noelia Sayavedra, Opioid Harm Prevention Evaluation Consultant

Maggie Smith, Early Adolescent Health Consultant Jennifer Tranmer, Overdose Data-to-Action Communications Specialist

Rachel Welsh, HIV Care Services Coordinator Sara Wieczorek, Overdose Death Record Abstractor Mary Wienkers, Maternal Mortality Review Program Coordinator

Ricardo Wynn, HIV Capacity Building Coordinator

Wisconsin Population Health Service Fellows and Placement Sites

2021-2023

Amanda Dailey, City of Milwaukee Health Department and Center for Urban Population Health Coriann Dorgay, Wood County Health Department Angela Han, Extension Institute for Health & Well-Being, UW-Madison

Mary Kusch, Bureau of Environmental and Occupational Health, Wisconsin Division of Public Health Julia Nagy, Wisconsin Department of Health Services Erik Ohlrogge, Great Lakes Inter-Tribal Epidemiology Center Mariana Pasturczak, Bureau of Aging and Disability Resources, Wisconsin Department of Health Services

2022-2024

Methany Eltigani, City Milwaukee Health Department Caitlin McCrory, City of Milwaukee Health Department and the Wisconsin Division of Public Health, Bureau of Communicable Diseases

Stefanie Bugasch Scopoline, Wisconsin Department of Health Services Chronic Disease Prevention Program Mariam Sylla, Public Health Madison & Dane County Jade Zachery, Office of Population Health, Community Health Improvement, UW Health Grant Zastoupil, Eau Claire City-County Health Department

COVID-19 Response Corps

Manjari Ojha, Public Health Madison & Dane County Reiauna Taylor, Green County Health Department Jessica Wang, UW Population Health Institute Andrew Weiss, Sheboygan County Health and Human Services Department





Advisory Board

The UW Population Health Institute 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

Board of Directors Striving to Improve Health for All (SIHA)

Tim Bartholow

Vice President and Chief Medical Officer WEA Trust

Eric Borgerding

President and CEO Wisconsin Hospital Association

Sue Conley

Representative Wisconsin State Assembly

Danielle Cook

Education Director-Health Sciences Wisconsin Technical College System

Michael DeGere

Vice President, Chief Medical Officer Holy Family Memorial

Nate Gilliam

Director of Organizing and Policy Analysis Milwaukee Freedom Fund

Dylan Bizhikiins Jennings

Associate Director of the Sigurd Olson Environmental Institute Northland College

Kirsten Johnson

Commissioner of Health City of Milwaukee

LaTonya Johnson

Senator

Wisconsin State Senate

Gregory Nycz

Director

Family Health Center of Marshfield

Walter Orzechowski

Executive Director

Southwestern Wisconsin Community Action Program

Lisa Peyton-Caire

President and CEO

The Foundation for Black Women's Wellness

Mark Redsten

President and CEO Clean Wisconsin

Michelle Robinson

Director, Office of Health Equity WI Department of Health Services

Jessie Rodriguez

Representative

Wisconsin State Assembly

Gabrielle Rude

President and CEO

Wisconsin Collaborative for Healthcare Quality

Ayaz Samadani

Family Physician

SSM Health Dean Medical Group

Tim Size

Executive Director

Rural Wisconsin Health Cooperative

Patrick Testin

Senator

Wisconsin State Senate

Jesi Wang

Chief Executive Officer

MetaStar, Inc.





Remembering Paul Moberg

David Paul Moberg (Paul) died April 27, 2022. Colleagues at University of Wisconsin Population Health Institute remember Paul fondly as a mentor, leader, and distinguished researcher. Paul's prolific career in program evaluation and applied prevention research positively impacted every corner of Wisconsin.

Paul was hired as the associate director of the Center for Health Policy and Program Evaluation (CHPPE) in 1986. He spent the next 20 years leading CHPPE and building its evaluation portfolio and statewide reputation. Under Paul's leadership, CHPPE conducted evaluation and applied research of public health, behavioral health, and human service programs, with particular emphasis on Wisconsin-specific issues. CHPPE developed strong relationships with state agencies, tribal organizations, and local programs. The results of these collaborations have benefited children, families, senior citizens, human service and medical professionals, and individuals involved in the criminal justice system. In 2005, CHPPE merged with the Wisconsin Public Health and Policy Institute to become the UW Population Health Institute. Paul served as the institute's deputy director and, until 2011, as program director of the Evaluation and Engaged Research team. During leadership transitions, he would assume the role of the institute's interim director. While Paul formally retired from these roles in 2011, he continued to pursue research projects and mentor others until the very end. Paul made lifelong professional contributions with colleagues who shared his passion for public health, especially in the field of substance use prevention, intervention, and treatment.

We honor Paul's memory through our work to develop and evaluate interventions and promote evidence-based approaches to policy and practice.





Executive Committee

The UW Population Health Institute Executive Committee meets annually to provide guidance and approve the 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, UW Health 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 A. 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–Madison School of Public Affairs

Susan Zahner, DrPH, MPH, FAAN

Associate Dean for Faculty Affairs Vilas Distinguished Achievement Professor UW–Madison 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

Professor (CHS), Department of Family Medicine and Community Health UW School of Medicine and Public Health Affiliation: Diversity and Inclusion Advocates Evaluation

Connie Flanagan, PhD

Professor Emerita, Women, Family, and Community UW School of Human Ecology Affiliation: Building students' environmental knowledge

Affiliation: Building students' environmental knowledge and engagement with local government through civic science

Tiffany Green, PhD

Assistant Professor, Departments of Population Health Sciences and Obstetrics and Gynecology UW School of Medicine and Public Health Affiliation: Connect Rx Evaluation

David Kindig, MD, PhD

Emeritus Professor, Department of Population Health Sciences

UW School of Medicine and Public Health Affiliation: Making Wisconsin the Healthiest State Project

Jane Mahoney, MD

Professor, Department of Medicine Geriatrics Faculty 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, Survey of the Health of Wisconsin

Tom Oliver, PhD, MHA

Professor, Department of Population Health Sciences UW School of Medicine and Public Health Affiliation: Principal Investigator, Wisconsin 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: Wisconsin Population Health Service Fellowship

Joel Rogers, PhD, JD

 $\label{eq:professor} \mbox{Professor of Law, Political Science, Public Affairs, and Sociology}$

UW-Madison Law School

Affiliation: Legacy Communities Alliance for Health, UniverCity Alliance

Maureen Smith, MD, MPH, PhD

Professor, Departments of Population Health Sciences and Family Medicine and Community Health UW School of Medicine and Public Health Affiliation: Neighborhood Health Partnership

Geof Swain, MD, MPH

Emeritus Professor, Department of Family Medicine and Community Health UW School of Medicine and Public Health

Affiliation: Wisconsin Population Health Service Fellowship

Amy Trentham-Dietz, PhD

Professor, Department of Population Health Sciences Associate Director of Population Science, Carbone Cancer Center, UW School of Medicine and Public Health Affiliation: Breast Cancer and the Environment Research Program





Appendix B: Select Grants

The UW Population Health Institute's funding partners are integral to ensuring the health and well-being 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

Aspen Institute

Rural Learning and Coordination

Child Abuse and Neglect Prevention Board

Evaluation Services for Family Resource Center Pilot

Community Advocates Public Policy Institute

• Strategic Prevention Framework 2020–2022

Great Lakes Inter-Tribal Council, Inc.

- Family Foundations Home Visiting Program
- Tribal Personal Responsibility Education Program

HealthFirst

Fit Families 2020–2022

Lac du Flambeau Nation

Strategic Prevention Framework 2020–2022

Wisconsin Department of Health Services – Federal source

- CDC Comprehensive Suicide Prevention
- CDC WI Overdose Data to Action
- COVID-19 Response Corps
- Emergency COVID-19 Project 2020–2022
- Envision Community Health Worker Training Center
- Improving the Health of Americans Through Prevention and Management of Diabetes and Heart Disease and Stroke
- Innovative State and Local Public Health Strategies to Prevent and Manage Diabetes and Heart Disease and Stroke
- · Just Recovery for Racial Equity
- Maternal Mortality Review
- Mental Health Evaluation
- Office of Health Informatics
- Prescription Drug/Opioid Overdose Project
- Rape Prevention & Education Program
- State Opioid Response
- Strategic Prevention Framework Partnerships for Success Program
- Tobacco Prevention and Control Program
- Mobilizing Communities for Just Response Grantee Training and Technical Assistance
- Wisconsin Personal Responsibility Education Program
- Sexual Risk Avoidance Education Program
- Youth Treatment Implementation

Wisconsin Department of Public Instruction

- Wisconsin Council on Medical Education and Workforce
- Medical Education and Workforce Facilitation
- Project AWARE
- Team Nutrition

WISDOM

 From Punishment to Restoration: Reimagining Criminal Justice to Improve the Health of Wisconsin's Families and Communities

Local Agencies

City of Madison

- · Census to Census
- · Community-Based Crime Reduction Program
- Pathways to Recovery Madison & Dane County

Dane County

- Treatment Alternatives and Diversion Pretrial Opiate Diversion
- Mental Health Court Feasibility Study

Juneau County

· Juneau County Pathways to Recovery Initiative

Rusk County

Rusk County Drug and Alcohol Court

Robert Wood Johnson Foundation

- County Health Rankings & Roadmaps
- Culture of Health Prize

UW Affiliated – Foundations and Programs

Office of the Vice Chancellor of Graduate Research and Education

Connect RX

Wisconsin Partnership Program

- Making Wisconsin the Healthiest State
- Evaluating COVID-19 Response Efforts in Milwaukee County
- Wisconsin Population Health Service Fellowship Program
- Well Black Woman Institute Foundation for Black Women's Wellness
- Race to Equity Kids Forward

Higher Education - Other

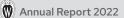
George Washington University

American Communities 2020–2022

University of Michigan

• Region V- Public Health Training Center





Appendix C: 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

American Cancer Society

American Communities Project

American Heart Association

American Medical Association

America's Health Rankings

Association of State and Territorial Health Officials

Berkeley Media Studies Group

Bright Research Group

Burness

City Health Dashboard

Community Partnerships for Health Equity

Forum One

FrameWorks Institute

Georgia Health Policy Center

Health Resources in Action

Healthy Democracy, Healthy People

Healthy Places by Design

Human Impact Partners

Massachusetts Institute of Technology Lab on Regional

Michigan Public Health Institute

Innovation and Spatial Analysis

Narrative Initiative

National 4-H Council

National Association of City and County Health Officials

National Association of Counties

National Network of Public Health Institutes

National Organization of State Offices of Rural Health

NeighborWorks America

New Jersey Health Initiatives

Othering & Belonging Institute

Pew Charitable Trusts Health Impact Project

PLACES Project

PolicyLink

Population Health Improvement Partners

Praxis Project

Prosperity Now

UnidosUS

United Way Worldwide

University of Chicago Center Spatial Data Science

Visible Network Labs

Vot-ER

YMCA of the USA

Evaluation and Engaged Research

Baylor University, Department of Public Health

Capitol Neighborhoods, Inc.

Center for Urban Population Health

Child Abuse and Neglect Prevention Board

Chippewa Falls Area Unified School District

City of Madison Community Development Division

City of Madison Fire Department

City of Madison Police Department

City of Saint Paul Police Department

Community Action, Inc.

Community Advocates Public Policy Institute

Dane County Department of Human Services

Dane County District Attorney's Office

Dane County Health Council

Downtown Madison, Inc.

EQT By Design

Family Services of Northeast Wisconsin

Foundation for Black Women's Wellness

Great Lakes Inter-Tribal Council

Great Rivers HUB

Green Tier Legacy Communities

Healthfirst

Health Care Education and Training

Juneau County Sheriff's Office

Kids Forward

Lac du Flambeau Band of Lake Superior Chippewa Indians

Lakeland Area Consortium

Medical College of Wisconsin

Neu-Life Community Development

Newcap, Inc.

Providers and Teens Communicating for Health

Public Allies

Public Health Madison & Dane County

RISE Wisconsin

Rural Wisconsin Health Cooperative

Rusk County Drug and Alcohol Court

School District of La Crosse

Southwestern Wisconsin Community Action Program

State of Wisconsin Women Infant and Children

Supporting Families Together Association

UBUNTU Research & Evaluation

United Community Center United Way of Dane County

UniteWI

UW Health

Vanderbilt University, Department of Human and

Organizational Development

William S. Middleton Memorial Veterans Hospital

Department of Radiology

Wisconsin Alliance for Women's Health

Wisconsin Association of Sober Housing

Wisconsin Department of Health Services

Wisconsin Department of Justice

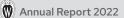
Wisconsin Department of Public Instruction

Wisconsin Department of Transportation

WISDOM

Wyman





Mobilizing Action Toward Community Health (MATCH)

100 Black Men of Madison, Inc.

African Heritage, Inc.

Angelic Assistance Community Care

Arizona Community Health Worker Network

Arizona State University

Be Well Madison

Center for Community Health Alignment at the University of

South Carolina

Center for Urban Population Health

Centro Hispano Cia Siab, Inc.

City of Milwaukee Health Department

City on a Hill

Community Health Worker Common Indicators Project

Community Health Worker Core Consensus Project

CORE El Centro/ Mujeres con Poder Eau Claire City County Health Department

ESTHER Ex Fabula

FaithWorks Ministries

Forest County Potawatomi

Foundation for Black Women's Wellness

FREE EXPO

Great Lakes Inter-Tribal Epidemiology Center

Great Rivers United Way

Green County Health Department

Harambee Village

Healing Intergenerational Roots Wellness Institute

Hmong American Center

Hmong American Friendship Association Indianhead Community Action Agency Kenosha Area Family & Aging Services

Kenosha County Public Health

Literacy Green Bay

Louisiana Community Health Worker Institute/Center for

Healthcare Value and Equity

Louisiana Community Health Worker Network

Maroon Calabash Metcalfe Park

Milwaukee Center for Independence

Milwaukee County, Office of the County Executive

Milwaukee Turners

Mosaicos Cultural Enrichment Corporation

National Association of Community Health Workers

NEW Hmong Professionals North Shore Health Department

Partners in Health

Personal Development Center

Public Allies Wisconsin

Public Health Madison & Dane County Region V Public Health Training Center Riverworks Development Corporation Rock County Public Health Department

Rooted MKE

Rural Wisconsin Health Cooperative Sawyer County Health Department Sheboygan County Health Department

Today Not Tomorrow

UBUNTU Research and Evaluation

United Way St. Croix Valley

University of South Carolina Center for Community Health

Alignment

UW Health

Waking Women Healing Institute

Walworth County Health Department

Washington State Department of Health

Wisconsin Alliance for Women's Health

Wisconsin Association of Local Health Departments

and Boards

Wisconsin Black Historical Society/Museum

Wisconsin Department of Health Services

Wisconsin Department of Justice

Wisconsin Institute for Healthy Aging

Wisconsin Pharmacy Association

Wisconsin Public Health Association

Wood County Health Department

YWCA Greater Green Bay

YWCA Madison

Additional UW Population Health Institute Partners

Aspen Institute Community Strategies Group

Governor's Health Equity Council

National Network of Public Health Institutes

UW Collaborating Entities

Applied Population Lab

Carbone Cancer Center

Center for Healthy Minds - Healthy Minds @Work

Center for Patient Partnerships

Center for Urban Population Health

COWS (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 Program

Division of Extension, Institute for Health & Well-Being

Division of Extension, Institute of Human Development &

Relationships

Division of Extension, University of Wisconsin-Madison

Health Innovation Program

Institute for Clinical and Translational Research

Institute for Research on Poverty

LEAP Forward

Native American Center for Health Professions

Neighborhood Health Partnerships

Nelson Institute for Environmental Studies

Prevention Research Center

School of Human Ecology

School of Nursing

School of Social Work

Survey Center

Survey of the Health of Wisconsin

UniverCity Alliance

Wisconsin Alzheimer's Institute

Wisconsin Center for Education Research

Evaluation Collaborative

Wisconsin Public Health Research Network





Appendix D: Select Publications and Events

Select Publications

Givens, M. (2022). <u>Reproductive healthcare: An intersectional component of healthy rural communities</u>. Commentary, Aspen Institute.

Goodrich, J., Linnan, S., Walsh-Felz, A., Skalitzsky, E., Hogeterp, C., Melah, K. (2022). <u>Emergency COVID-19</u> <u>grant GPRA Report</u>. Report, University of Wisconsin Population Institute.

Goodrich, J., Taber, E. (2022). Pathways to recovery Madison and Dane County preliminary evaluation report. Commentary, University of Wisconsin Population Institute.

Kindig, D. (2022). <u>The promise of population health: A scenario for the next two decades</u>. *NAM Perspectives*. Commentary, National Academy of Medicine.

Kindig, D. and Magnan, S. (2022). <u>Population Health</u>
<u>- The unfinished journey</u>. Webinar series, Improving the Health of Populations through Science and Innovation (IAPHS).

Kindig, D., and Mullahy, J. (2022). <u>Can the population</u> <u>health "fantasy equation" be solved? Does it need to be?</u>. Commentary, *Health Affairs Forefront*.

Lederer, A., Barret, K., Shorter, C., Kenefick, H., Kulik, P., Morales, M., Reinschmidt, K., Shrestha S. (2022). <u>Public health training centers' support for community health workers: Case studies of needs assessment, training, and student field placement initiatives.</u> *Journal of Public Health Management and Practice.* 28(5), S212–S222.

Morales, M., Shrestha, S. (2022). <u>Public health</u> training centers partner with community health worker organizations to train and support the CHW workforce. *JPHMP Direct*. Commentary, Journal of Public Health Management and Practice.

Olson-Williams, H., Gennuso, K.P., Givens, K.L., Kindig, D.A. (2022). <u>Grading and reporting health and health disparities: an update from 2010</u>. *Preventing Chronic Disease*.

Pollock, E. A., Givens, M.L., Johnson, S.P. (2022). <u>Voting</u> and civic engagement rights are eroding: What does it mean for health and equity? Commentary, *Health Affairs Forefront*.

Trentham-Dietz, A., Bird, J.E., Gangnon, R.E., Lindberg, S.M., Madison, T., Malecki, K.M.C., Shull, J.D., Vredveld, C., Rolland, B. (2022). <u>Coordinating centers as a strategy for accelerating cancer epidemiology consortia: Best practices</u>. *Current Epidemiology Reports*, 9(1), 1-9.

Williams, T., Francis, C. (2022). <u>Third spaces and opioid use within Black communities of Dane County: a qualitative secondary data analysis</u>. *Journal of Community Practice*, *30*(3), 332–350.

Select Events

Making Wisconsin the Healthiest State Program Presentations & Conferences

Abadin, S., Nagy, J., Northrop, M. (May 2022). Leveraging the state health plan to advance policy, systems, and environment change in Wisconsin. Oral Presentation, Wisconsin Public Health Association Annual Conference.

Sesto, C., Park, E., Abadin, S. (June 2022). **Using data** and reports to shape narratives that reflect the social determinants of health and equity. Oral Presentation, Healthy Communities Designation Data-to-Action Training Series.

Frobom, K. (Sept. 2022). **Using evidence-based resources: What Works for Health.** Oral Presentation, Mobilizing Communities for a Just Response (MC4JR).

O'Leary, M. (Oct. 2022). **Data in policymaking.** Oral presentation, Healthy Communities Designation Datato-Action Training Series.

Frobom, K. (Nov. 2022). Advancing health equity with evidence: What Works for Health. Oral Presentation, Healthy Communities Designation Data-to-Action Training Series.

Abadin, S., Frobom, K. (Dec. 2022). State health priorities and strategies: Improving Wisconsin's health. Oral Presentation, Wisconsin Hospitals: Community Benefits and Community Health Impacts Leaders Group.







Presentations at Wisconsin Public Health Association's Annual Meeting (May 24–26, 2022)

Abadin S., Nagy J. Leveraging the state health plan to advance policy, systems, and environmental change in Wisconsin.

Kusch, M. Environmental health capacity project.

Richman, A. Implementation of an antiracist and equity-driven strategic plan.

Neal, R. Communities of practice: the power of thinking together.

Nuñez, J. Enhancing the public health benefits of family support through Family Resource Center infrastructure development.

O'Leary. M. K. Collaborating for A Just Recovery: A community-led grantmaking process.

Richman, A. Advancing health equity in your planning process.

Vigna, A. Equity evaluation: from assessment to action steps.

National Academies of Sciences Engineering and Medicine

Dr. Sheri Johnson (Sept. 2022). Served on the planning committee and moderated Exploring the Power of Youth Leadership in Creating Conditions for Health and Equity

Dr. Marjory Givens (May 2022). Presented <u>Harnessing</u> Data for Research on Structural Racism

UW Population Health Institute COVID-19 Response Corps Virtual Immersions

Developing strategies and tools for effective communication in the times of COVID-19 (March 2022)

Presenters: Dr. Malia Jones, Dr. Amanda Simanek, and Dr. Jen Dowd, Dear Pandemic; Jessi Corcoran, Human Impact Partners

Participants discussed communicating the nuances of science, common communication challenges, and learned how to develop public health and equity messages with transformative narratives.

Authentic community engagement and COVID-19 (June 2022)

Presenters: Lesley Wolf and McKenzie Liegel, institute staff; Lena Walker, Community Health Worker (CHW), Ho-Chunk Nation Community Health; Marisela Olivas and CherPao Vang, CHWs, Sheboygan County Health and Human Services; Jessica Kimber, Division of Public Health, Chronic Disease Prevention Program; Tony Gonzales, CHW, H2N

Participants built skills to authentically engage communities, and learned about the role of Community Health Workers as part of the public health workforce and COVID-19 response.

Unpacking resilience: Exploring community resilience and the impacts of COVID-19 (Nov. 2022)

Presenters: Dr. Bobby Milstein and Ms. Brooke Muya, ReThink Health; Jason Larsen, Nelly Veliz, and Lindsey Purl, St. Clare Health Mission; Hmongshee Khang, Olga Meza, and Dr. Corina Norrbom, H2N; Tia Murray, Harambe Village Doulas

Participants learned about ReThink Health's model of community stewardship for thriving together and gained an understanding of how local Wisconsin communities create resiliency during and in recovery from the pandemic.







Webinars

2022 County Health Rankings & Roadmaps Webinars

https://www.countyhealthrankings.org/online-and-on-air/webinars

Exploring the connection between racial healing and health. (Jan. 2022)

Reimagining a public health system to build an equitable tomorrow. (Feb. 2022)

Getting ready for the 2022 County Health Rankings Release. (March 2022)

Why wealth matters to your health. (May 2022)

Closing the racial wealth gap with innovative solutions. (June 2022)

Making social connections for community health. (July 2022)

Healing trauma for better health. (Aug. 2022)

The connection between the gender pay gap and health. (Sept. 2022)

Messaging equity and justice for better health. (Oct. 2022)

Creating prosperous rural communities. (Nov. 2022)

Pursuing environmental justice and equity. (Dec. 2022)



Ericka Burroughs-Girardi, host of the County Health Rankings & Roadmaps Webinars

Envision Webinars

https://envisionequity.org/webinars

CHW vaccine and COVID resources you've been looking for! (Jan. 2022)

Using CHW common indicators in your 2109 evaluation. (Feb. 2022)

Coping with COVID. (Feb. 2022)

CCR 2109 rapid assessment results. (March 2022)

CHW documentation and referral systems. (March 2022)

CHW onboarding. (April 2022)

Support for COVID response and Resilient Communities (CCR) work. (May 2022)

Telling stories successfully. (July 2022)

Long COVID: Focusing on the long-term effects COVID-19 has on CHW work and communities CHWs serve. (Aug. 2022)

For the culture? How can we lead (rather than lag) with Culturally Responsive and Equitable Evaluation? (Sept. 2022)

Living in a world of COVID – What is the CHW role in the pandemic now, and what do COVID-19 community conversations look like? (Oct. 2022)

Promoting CHW self-care. (Dec. 2022)

Making Wisconsin the Healthiest State Webinars

Sesto, C., Abadin, A., Park, E. (June 2022). Using data and reports to shape narratives that reflect the social determinants of health and equity.

O'Leary, M. K. (Oct. 2022). Using data for policymaking. Frobom, K. (Nov. 2022). Data-to-Action: Advancing health equity with evidence.







Contact

Mailing Address:

University of Wisconsin Population Health Institute UW School of Medicine and Public Health WARF Building 6th floor 610 Walnut Street Madison, WI 53726

Website: http://uwphi.pophealth.wisc.edu Phone: 608-263-6294

> Fax: 608-262-6404 Email: UWPHI@med.wisc.edu Twitter: @UWiscPHI

LinkedIn: University of Wisconsin Population Health Institute

