

**SPECIAL ORDERS SESSION
WINNEBAGO COUNTY BOARD OF SUPERVISORS
(ZOOM MEETING)
TUESDAY, SEPTEMBER 1, 2020
6:00 P.M.**

To join this Zoom Meeting via video, use this link:
<https://us02web.zoom.us/j/84586136393>

To join this meeting by telephone (312) 626-6799 and enter the Meeting ID: 845 8613 6393

At this meeting, the following will be presented to the Board for its consideration:

- *Roll Call
- *Pledge of Allegiance
- *Invocation
- *Adopt agenda

Time will be allowed for persons present to express their opinion on any resolution or ordinance that appears on the agenda, as well as, any matter over which this body has jurisdiction.

- Reports from Committees, Commissions and Boards
 - County Board Chairman's Report
1. Internet Crimes Against Children – Investigator Mike Sewall, Winnebago County Sheriff's Office; and Sheriff John Matz
 2. Overview of the Winnebago Waterways Lake Management Plan – Jessica Schultz & Korin Doering, Fox-Wolf Watershed Alliance
 3. Health Equity in Winnebago County – Doug Gieryn, Public Health Director; Niki Euhardy, Health Department

Respectfully submitted,
Susan T. Ertmer
Winnebago County Clerk
(920) 232-3432

Upon request, provisions will be made for people with disabilities.

(Times provided are estimates. Any item on the agenda may be taken up by the Board after 6:00 P.M.)

RECREATIONAL ANGLING IN
THE LAKES BRINGS IN OVER

**\$297
MILLION
ANNUALLY**
TO A FIVE COUNTY REGION*

*VALUES FROM 2006 STUDY WERE ADJUSTED
TO REFLECT EQUIVALENT BUYING POWER IN 2019

OVER
200,000
PEOPLE
RELY ON LAKE
WINNEBAGO FOR
THEIR DRINKING
WATER SUPPLY

THE LAKE
SYSTEM HOLDS
17%
OF WISCONSIN'S
SURFACE WATER

MORE THAN
2,000,000
PEOPLE
LIVE WITHIN 75 MILES
OF THE LAKES



WINNEBAGO WATERWAYS RECOVERY

An introduction to the Winnebago Waterways Lake Plan that aims to improve and protect the Winnebago Lakes

WINNEBAGO LAKES

- 1 Poygan
- 2 Winneconne
- 3 Butte des Morts
- 4 Winnebago

VISION

The lakes, rivers, streams and wetlands of the Winnebago Waterways Recovery Area are treasured resources that provide value to our community and are deserving of immediate and active large-scale restoration, coordinated management and ongoing protection for generations to come.

GOALS



WATER QUALITY

Increase the health of our lands and waterways to ensure our lakes, rivers and streams are fishable, swimmable and aesthetically enjoyable.



HABITAT, FISHERY, & WILDLIFE

Restore and protect habitat to support self-sustaining populations of fish and wildlife.



RECREATION

Increase use and enjoyment of the waterways



OUTREACH & ENGAGEMENT

Build an engaged community supportive of recovery efforts and ongoing protection of our waterways.



LAKE POYGAN



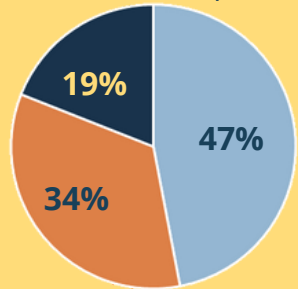
14,024
acres

11 ft.
maximum
depth

5.8 ft.
average depth

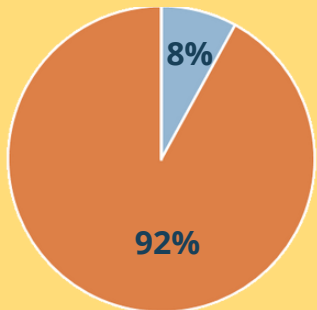
Submerged Aquatic Plant Density at 59 sites

locations where plants were found (X on map)



Low Moderate High

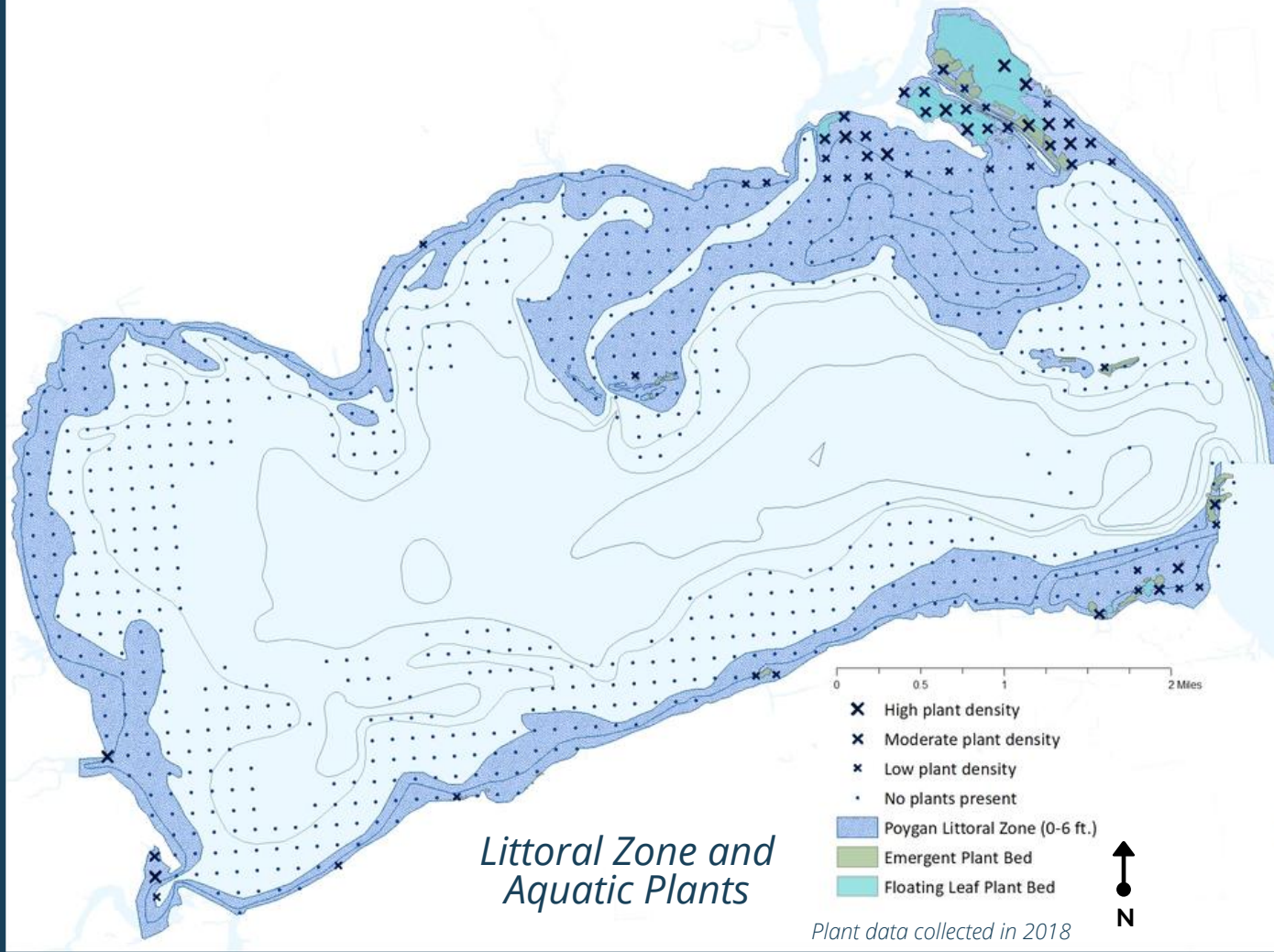
Dominant Sediment Type Littoral Zone



Sand Muck Rock

43 miles
total shoreline
distance

3 miles
of shoreline are
actively eroding



8
verified
invasive
species

33%
of the lake
area is
littoral
(where light
reaches bottom)

2%
of lake area
contains
emergent or
floating leaf
plant beds

9%
of 986
locations
sampled in the
lake had
plants present

29
different
aquatic
plant
species

**1 every
4 miles**
Average
occurrence of
in-lake shallow
woody habitat



LAKE WINNECONNE



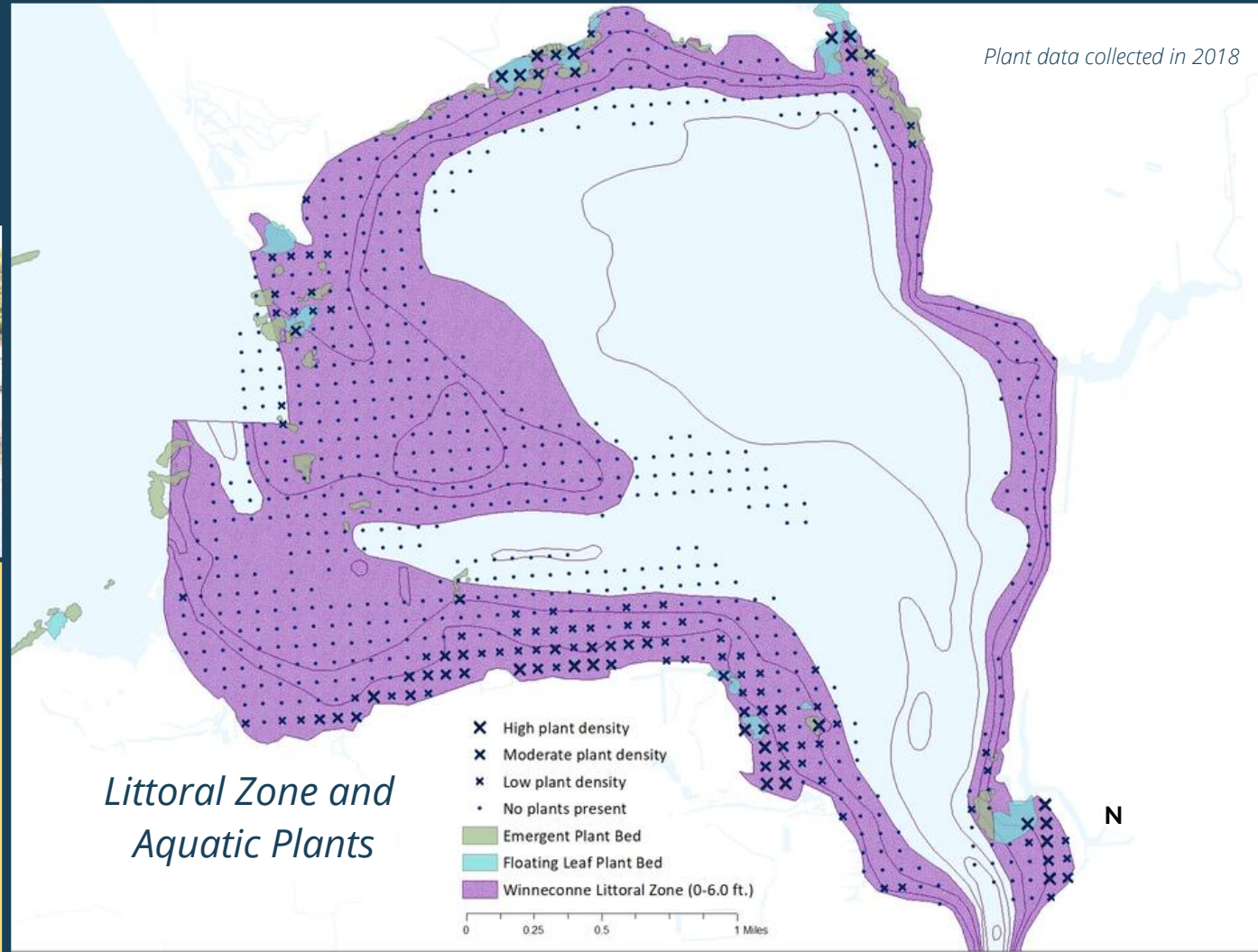
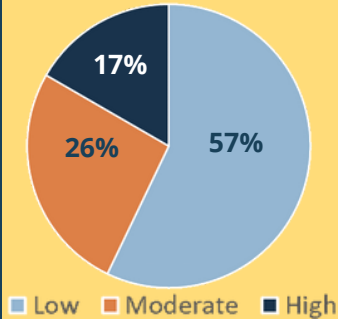
4,553
acres

9 ft.
maximum depth

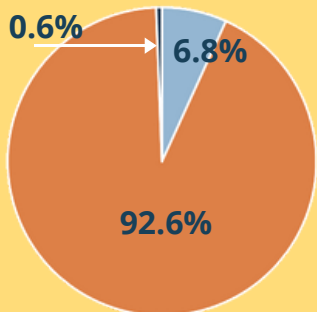
5.3 ft.
average depth

Submerged Aquatic Plant Density at 124 sites

locations where plants were found (X on map)



Dominant Sediment Type Littoral Zone



24 miles

total shoreline distance

~3 miles

of shoreline are actively eroding

9

verified invasive species

52%

of the lake area is littoral (where light reaches bottom)

3%

of lake area contains emergent or floating leaf plant beds

15%

of 798 locations sampled in the lake had plants present

33

different aquatic plant species

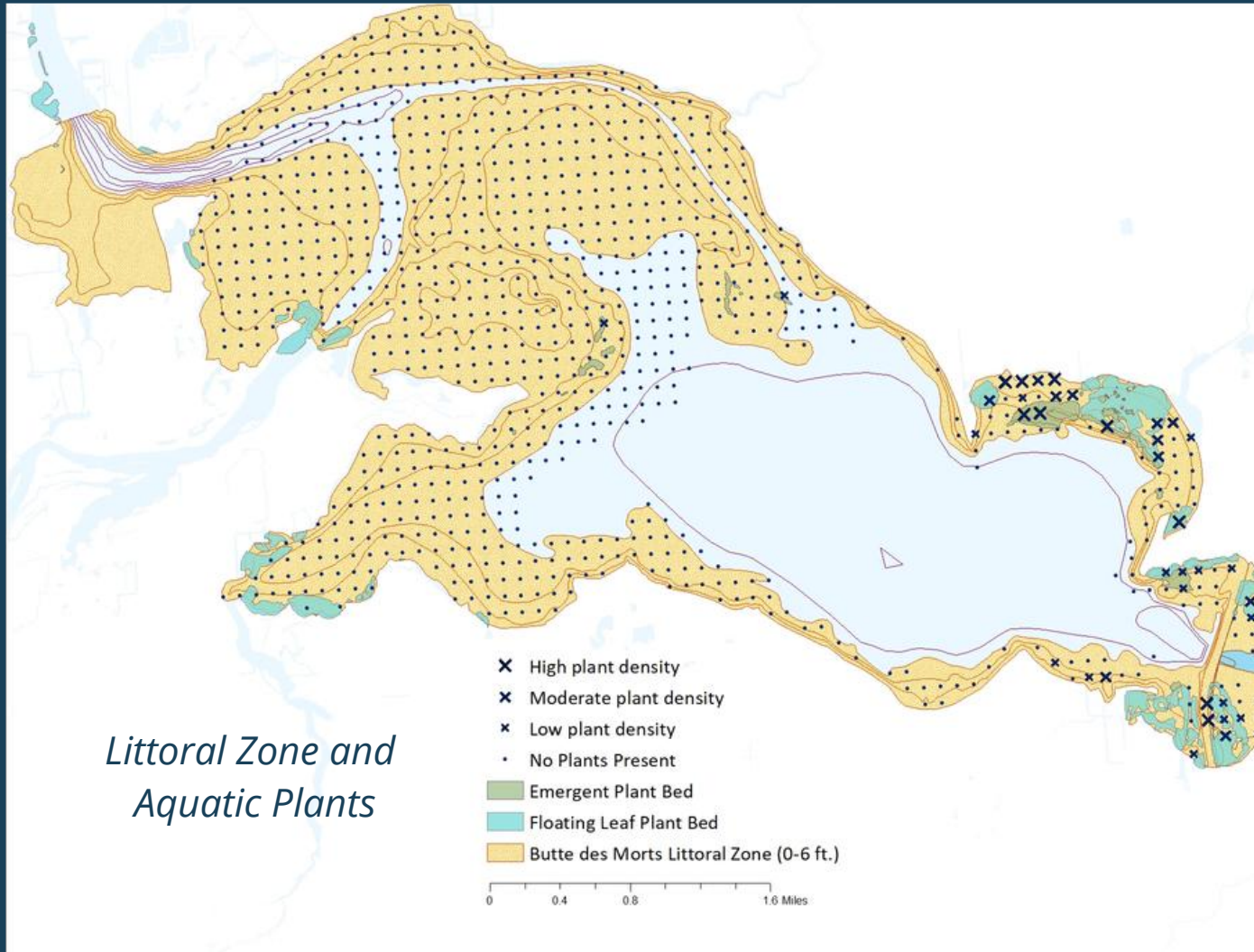
1 every 6 miles

Average occurrence of in-lake shallow woody habitat



■ Sand ■ Muck ■ Rock

LAKE BUTTE DES MORTS



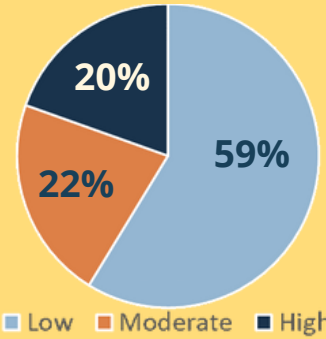
8,581
acres

9 ft.
maximum
depth

5.1 ft.
average depth

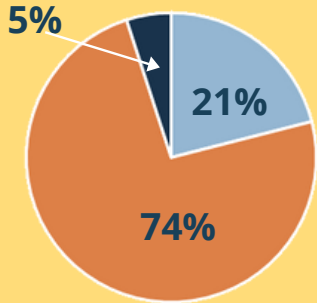
Submerged Aquatic Plant Density at 99 sites

locations where plants were found (X on map)



Low Moderate High

Dominant Sediment Type Littoral Zone



Sand Muck Rock

53 miles
total shoreline
distance

~6 miles
of shoreline are
actively eroding

10
verified
invasive
species

73%
of the lake
area is
littoral
(where light
reaches bottom)

4%
of lake area
contains
emergent or
floating leaf
plant beds

10%
of 970
locations
sampled in the
lake had
plants present

22
different
aquatic
plant
species

**1 every
26 miles**
Average
occurrence of
in-lake shallow
woody habitat



LAKE WINNEBAGO

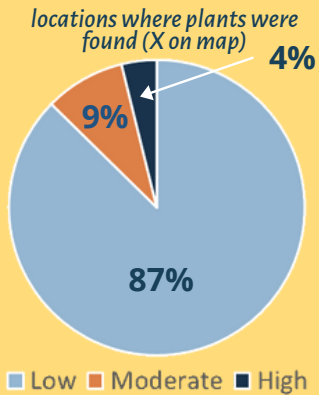


131,939
acres

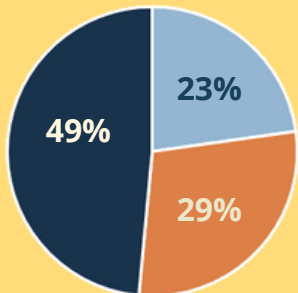
21 ft.
maximum
depth

14.9 ft.
average depth

Submerged Aquatic Plant Density at 182 sites



Dominant Sediment Type Littoral Zone



111 miles
total shoreline
distance

~5 miles
of shoreline are
actively eroding*

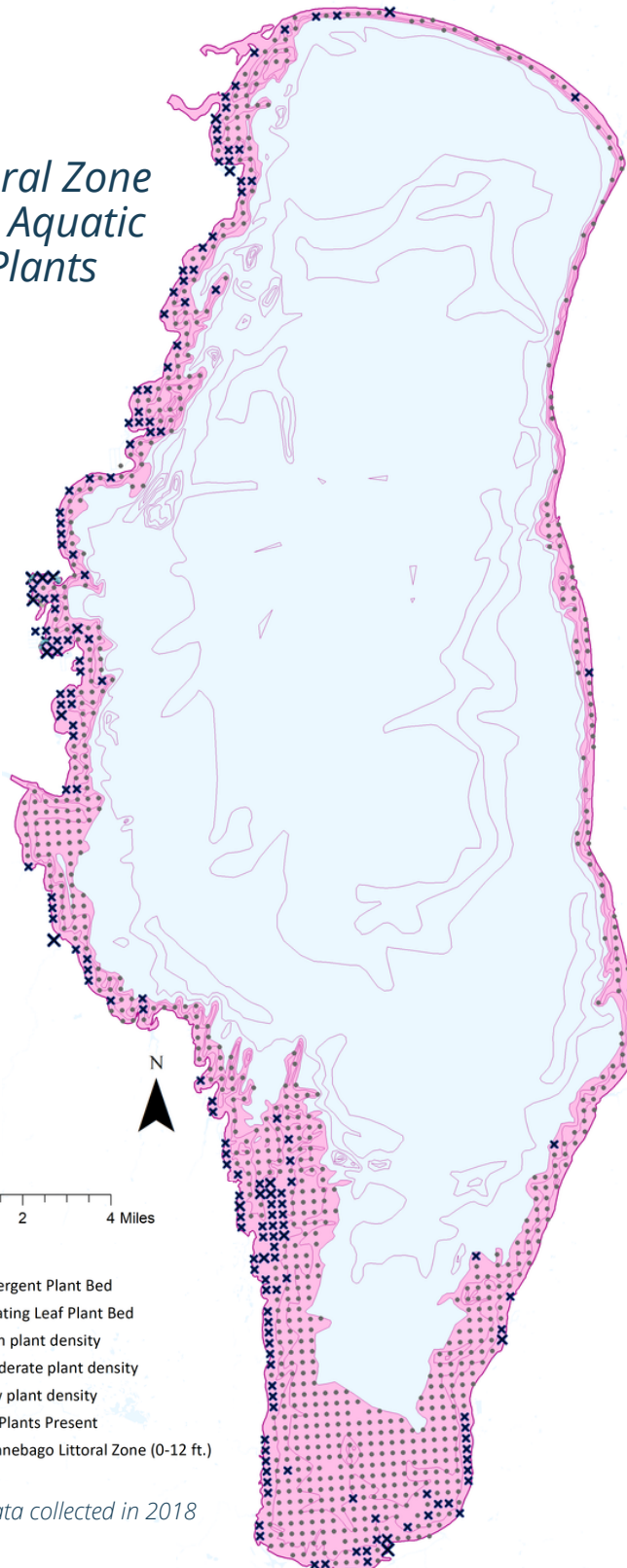
*does not include shorelines in Calumet County

Littoral Zone and Aquatic Plants

0 1 2 4 Miles

- Emergent Plant Bed
- Floating Leaf Plant Bed
- × High plant density
- × Moderate plant density
- Low plant density
- No Plants Present
- Winnebago Littoral Zone (0-12 ft.)

Plant data collected in 2018



10

verified
invasive
species

28%

of the lake area
is littoral
(where light reaches bottom)

17%

of 1,063 locations
sampled in the lake
had plants present

<1%

of lake area contains
emergent or floating
leaf plant beds

26

different
aquatic plant
species

**1 every
3 miles**

Average occurrence
of in-lake shallow
woody habitat
(not including Calumet County)



WATER QUALITY

Water quality (WQ) describes the desired conditions of a body of water. Lakes not meeting those conditions are listed as impaired.

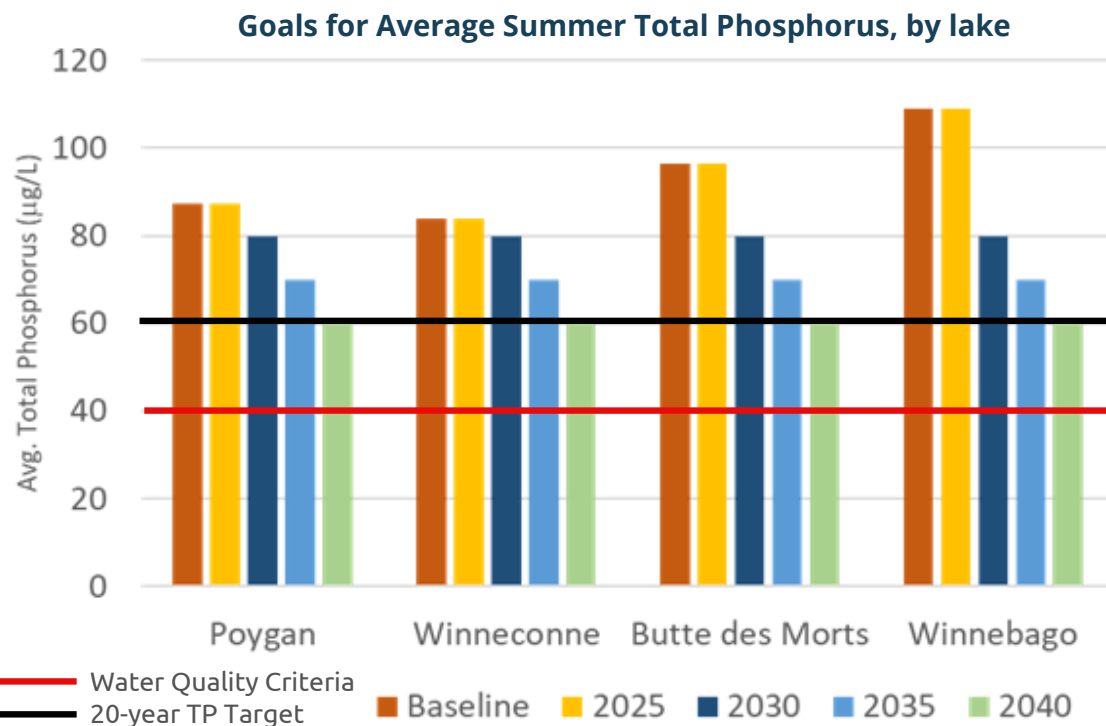
OVERALL WQ STATUS: **POOR**

While the Winnebago Lakes truly are an incredible resource, they are showing signs of stress. All four lakes are listed as impaired for total phosphorus, suspended solids, and excessive algae growth. Major drivers of these impairments include the artificial water level regime of the impounded system and nutrient and sediment pollution from agricultural and urban land uses, point-source pollution, internal nutrient loading, and shoreline practices. Impacts from these drivers are compounded by the impacts of climate change. As a result, the Lakes are borderline hypereutrophic – an unnatural state marked by excessive algae blooms and low water clarity.

The graph to the right provides an example of the severity of the impairments. All four lakes greatly exceed the impairment listing threshold for Total Phosphorus (red line). Baseline represents the most current available data.



The four lakes currently do not meet Wisconsin's water quality criteria for aquatic life or recreational uses.



To assess progress over time, in-lake water quality benchmarks are:

2020: Begin implementation

2025: Maintain or improve water quality from baseline values

2030: In-lake summer TP at or below 80 µg/L

2035: In-lake summer TP at or below 70 µg/L

2040: In-lake summer TP at or below 60 µg/L

*Because the recovery area only represents a portion of the entire Fox-Wolf drainage basin that is contributing pollution to the Winnebago Lakes, the 20-year target for TP in the lake plan is 60 µg/L and not the delisting criterion of 40 µg/L. Substantial efforts will also be needed outside of the recovery area in order for the total phosphorus concentration in the Lakes to ultimately be decreased to 40 µg/L.

Reaching the milestones outlined in this plan by 2040 should shift conditions in the Winnebago Lakes, resulting in:

- Less algae (no algae scums)
- More aquatic plants
- Better water clarity (although still murky)

EXTERNAL LOADING *of phosphorus and sediment*

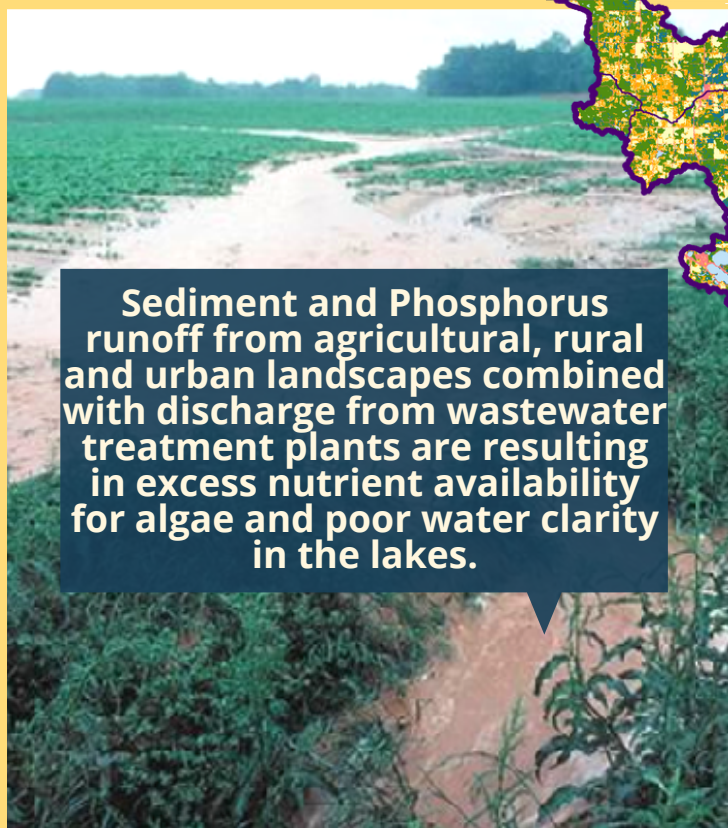
What happens on Land is reflected in our Water.

We all have a part to play in improving our waterways:

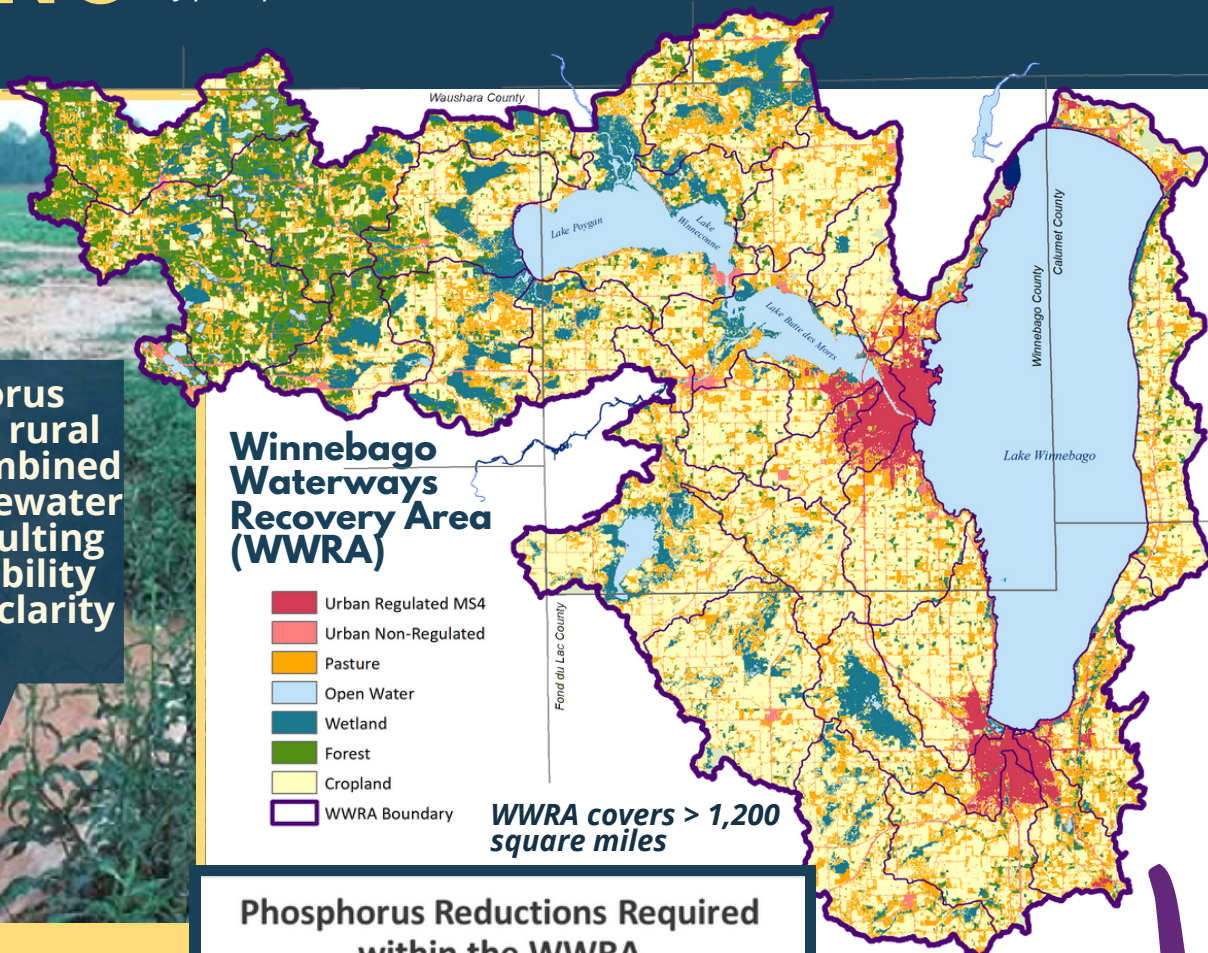
Interseed cover crop into corn to increase soil health and reduce runoff

Restore your shore with native plants to reduce erosion and slow runoff

Sweep grass clipping to keep them out of stormdrain



Sediment and Phosphorus runoff from agricultural, rural and urban landscapes combined with discharge from wastewater treatment plants are resulting in excess nutrient availability for algae and poor water clarity in the lakes.

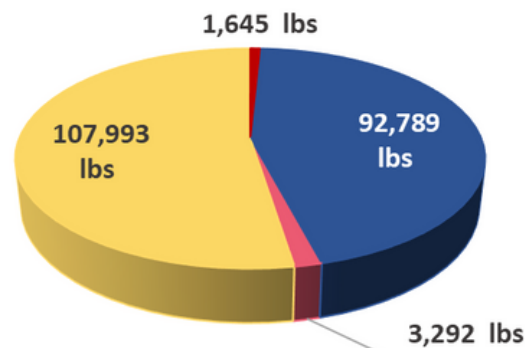


Goal: Reduce Phosphorus loading from WWRA by 79%

Priority Recommendations:

- Increase storage capacity on the landscape to reduce runoff volume by:
 - *Installing Agricultural Runoff Treatment Systems (ARTS)*
 - *Increasing quantity and quality of wetlands*
- Improve soil health to increase infiltration and improve runoff quality by:
 - *Utilizing cover crop and no-till systems*
- Increase available technical and agronomy support staff at County Land Conservation Departments to design and install practices, support farmers through transition and verify practices are performing as intended.
- Reduce shoreline and streambank erosion through restoration
- Support permitted wastewater treatment plants and communities with urban stormwater permits as they work to meet increased permit requirements.

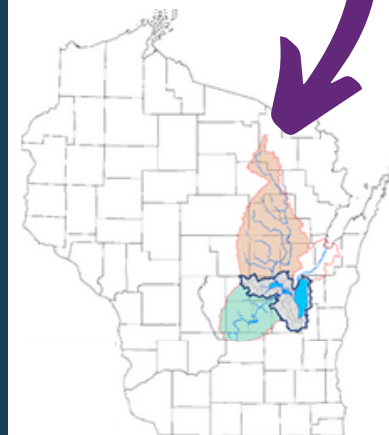
Phosphorus Reductions Required within the WWRA



- Regulated MS4 (*urban stormwater*)
- Wastewater Individual Permit (*industrial/municipal*)
- Urban, non-regulated (*not including septic*)
- Agriculture

Reductions required derived from WDNR's Upper Fox/Wolf Total Maximum Daily Load Report

The WWRA is part of the larger Fox-Wolf Basin



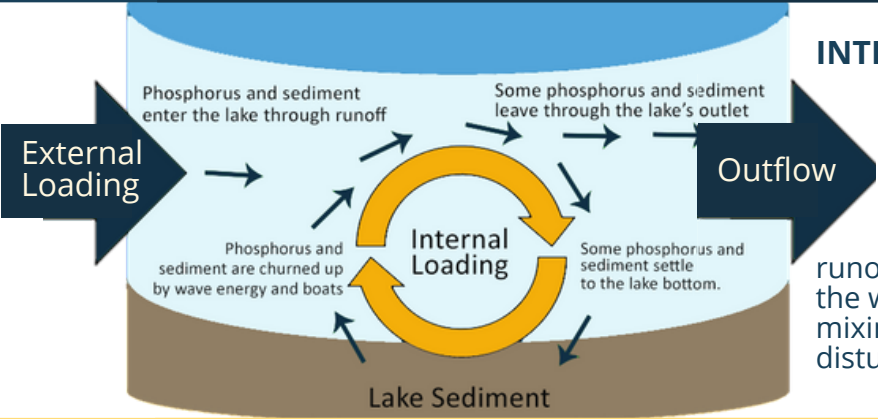
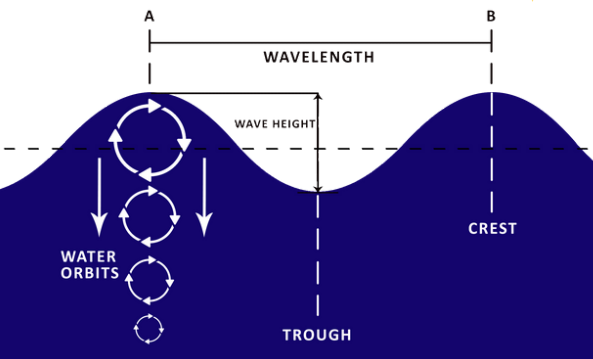
INTERNAL LOADING of phosphorus and sediment

The bottom of the shallow lakes is another source of phosphorus that can fuel blue-green algae blooms.

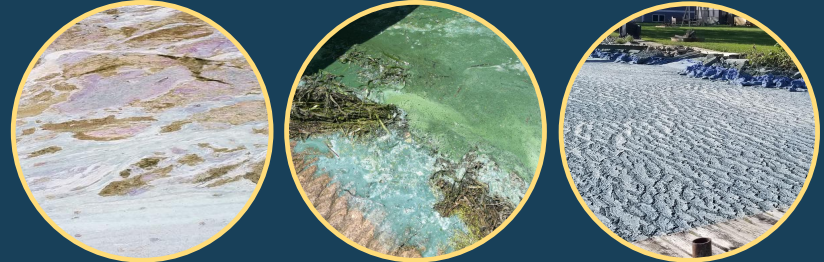


Large surface areas + unobstructed distance + strong, sustained wind = **High Energy Waves**

As waves get larger, they are able to exert energy at greater depths. Boat propellers and boat wakes can also disturb the lake bottom.



INTERNAL LOADING: Phosphorus and sediments that have built up in the lake bottom after years of excess nutrient rich runoff are resuspended in the water due to extensive mixing from waves or disturbance from boats.



Internal loading also fuels algal blooms and reduces water clarity. To see faster improvements in water quality, internal loading must be also reduced.



Aquatic plants are essential to water quality because they anchor sediment, reduce wave energy, protect the shorelines from erosion, and compete with blue-green algae for phosphorus.



- Goal: Reduce internal loading by 25% in 10 years.**
- Priority Recommendations:**
- Increase aquatic plants to stabilize sediments by:
 - Implementing a water level strategy that allows for plant establishment and growth.
 - Building breakwalls to create calm areas conducive to plant growth.
 - Increase public support of aquatic plants through education and localized management plans to address isolated areas of nuisance plants.
 - Decrease wave energy in the lakes by installing breakwalls.

While increased vegetation is a primary goal of the lake plan, it's recognized that dense vegetation growth in some areas can impede navigation. These areas may need active management. When managing plants in a lake, the priority should be to minimize damage to beneficial vegetation. The best way to do this is to develop a site-specific aquatic plant management plan.



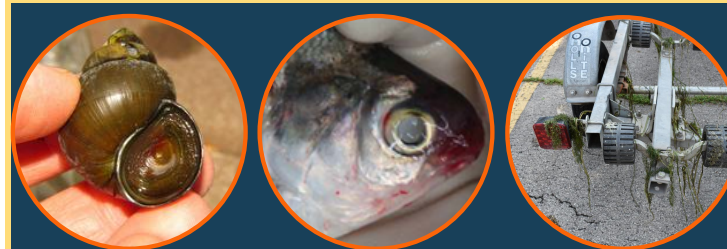
Aquatic Invasive Species (AIS)

AIS are non-native plants, animals, and pathogens that are likely to cause economic, environmental, or human harm and live in water or wetlands.

While there are over a dozen AIS currently found in the Winnebago Lakes, there are many more that have not been introduced. Prevention is the best way to fight AIS because once AIS are established in a lake it is often impossible to eradicate and costly to manage.

Priority Recommendations:

- 1.) Prevent the spread of AIS through coordinated outreach and education including Clean Boats, Clean Waters, Adopt-a-Launch, and other initiatives.
- 2.) Identify and respond rapidly to introductions through monitoring programs.
- 3.) Manage nuisance AIS.



Boaters and lake users can do their part by not moving plants, live animals, or water away from a lake or river.



Habitat

Habitat loss in the lakes and in the surrounding watershed has been extensive. Aquatic plants grow in limited areas and there are currently miles of actively eroding shoreline. The habitat communities important to the system continue to be threatened by development, poor water quality, invasive species, and climate change.

Active, strategic management and coordination of the system is needed to efficiently utilize limited resources.

Priority Recommendations:

- 1.) Increase the amount of aquatic plant habitat through water level management, areas protected by breakwalls, and water quality improvements.
- 2.) Increase the diversity of in-lake habitat types through the installation of woody debris, breakwalls, and submerged reefs.
- 3.) Increase quality and quantity of wetland and grassland acres.



Recreation

Improving the Winnebago Lakes for recreation is essential for supporting the region's tourism and sustaining long-held family traditions. Poor water quality, invasive species, nuisance plant growth in isolated areas, and concerns about boating safety threaten these recreational opportunities.

Priority Recommendations:

- 1.) Improve water quality to reduce the number of days that severe blue-green algae blooms impact lake recreation.
- 2.) Improve recreational navigation and safety by expanding navigation buoy coverage and improving buoy maintenance.
- 3.) Increase the number of lake access points for boating, paddle sports, and shoreline fishing.
- 4.) Increase facilities at access points such as restrooms, overnight mooring, etc.
- 5.) Increase availability of information about recreational access and use for the lakes.



WATER QUALITY RECOVERY TARGETS SUMMARY

Numeric targets were established to assess progress towards recovery:

- By 2025:**
 - Increase the frequency of occurrence of submerged, rooted vegetation on all four Winnebago Lakes by **40%** and increase emergent and floating-leaf plant bed acres by **5%**.
 - Reduce external total phosphorus (TP) load by **28%**; no net increase in internal loading

The water quality impacts of these efforts are not anticipated to result in a noticeable water quality improvement, but will set the stage for reaching future water quality goals.

- By 2030:**
 - Reduce in-lake internal TP loading by **25%**
 - Reduce external load of TP by an **additional 33%** (for a total of 61% reduction from baseline)

These reductions are anticipated to result in In-lake average summer TP concentrations measuring at or below 80 ug/L.

- By 2035:**
 - No measurable increase in internal TP loading from 2030 targets.
 - Reduce external loading of TP by an **additional 13%** from WWRA baseline load estimates (for a total of 74% reduction from baseline).

These reductions are anticipated to result in In-lake average summer TP concentrations measuring at or below 70 ug/L.

- By 2040:**
 - Reduce external TP loading from the WWRA by an additional **5%** from WWRA baseline load estimates.
 - Reductions in the WWRA should total **79%** from estimated baseline loading from the 20 year management period.

These reductions are anticipated to result in In-lake average summer TP concentrations measuring at or below 60 ug/L.



REGIONAL COORDINATION

The Winnebago Waterways Program facilitates active and collaborative implementation of the recovery plan. This includes facilitating regional capacity building and partnerships, serving as a technical resource, developing projects, educating people on lake topics, and tracking implementation of the plan.

This initiative, led by the Fox-Wolf Watershed Alliance and partially funded by three counties, is supported by numerous partners including area organizations, residents, property owners, local governments, lake users, and area businesses.

An important recommendation in the lake plan is to maintain and grow the Winnebago Waterways Program to ensure ongoing adaptive management of coordinated recovery efforts in the Winnebago Waterways region.

Recovery has already begun!

It is important to recognize all of the hard work and efforts already being made by residents, farmers, non-profit organizations, businesses, municipalities, counties, agencies, and other stakeholders to improve soil health and water quality in the watershed and in the lakes. Such activities vary widely, ranging from shoreline, agricultural, forestry and urban stormwater best management practices to in-lake habitat restorations. Existing efforts should be built upon and utilized as examples of what can be accomplished as implementation of the plan moves forward.



MONITORING, TRACKING & REPORTING

Installed best management practices will be tracked for each management topic. Water quality and aquatic plant monitoring will be utilized to measure progress towards water quality targets.

A summary of plan implementation progress will be made available annually to agencies and partners who have an active or potential role in future implementation including elected officials and the public.

FUNDING PARTNERS

This report was funded through the Winnebago Waterways Intergovernmental Cooperative Agreement of Calumet, Winnebago, and Fond du Lac Counties as well as Wisconsin Department of Natural Resources Surface Water Grants for Lake Management Planning and funding from the Great Lakes Restoration Initiative through the United States Environmental Protection Agency. Professional and volunteer time from several organizations and individuals provided additional support for the project.



Questions? Comments?

Email us: wwinfo@fwwa.org
Visit us: www.winnebagowaterways.org
You can also follow us on Facebook!!



PLAN ADOPTION

The development of the Winnebago Waterways Lake Management Plan brought together partners from local governments, conservation organizations, the scientific and regulatory communities with watershed residents, shoreline property owners and lake users to create a unified vision for the Lakes. The plan itself provides a framework for moving forward and serves as a pathway to secure additional funding to increase the amount of conservation efforts currently happening in the system.

Now is the time to capitalize on the momentum built during the planning effort to restore and protect the resources that we rely upon and to ensure they are able to provide the same resources for future generations.

The Community surrounding the Winnebago Waterways must come together to prioritize the restoration and protection of the Lakes. Organizations, municipalities, businesses, and individuals will be asked to adopt the plan and implement the recommendations.

**FIND THE FULL PLAN HERE:
WWW.WINNEBAGOWATERWAYS.ORG**



HEALTH EQUITY IN WINNEBAGO COUNTY

2020



Public Health
Prevent. Promote. Protect.

**Winnebago County
Health Department**

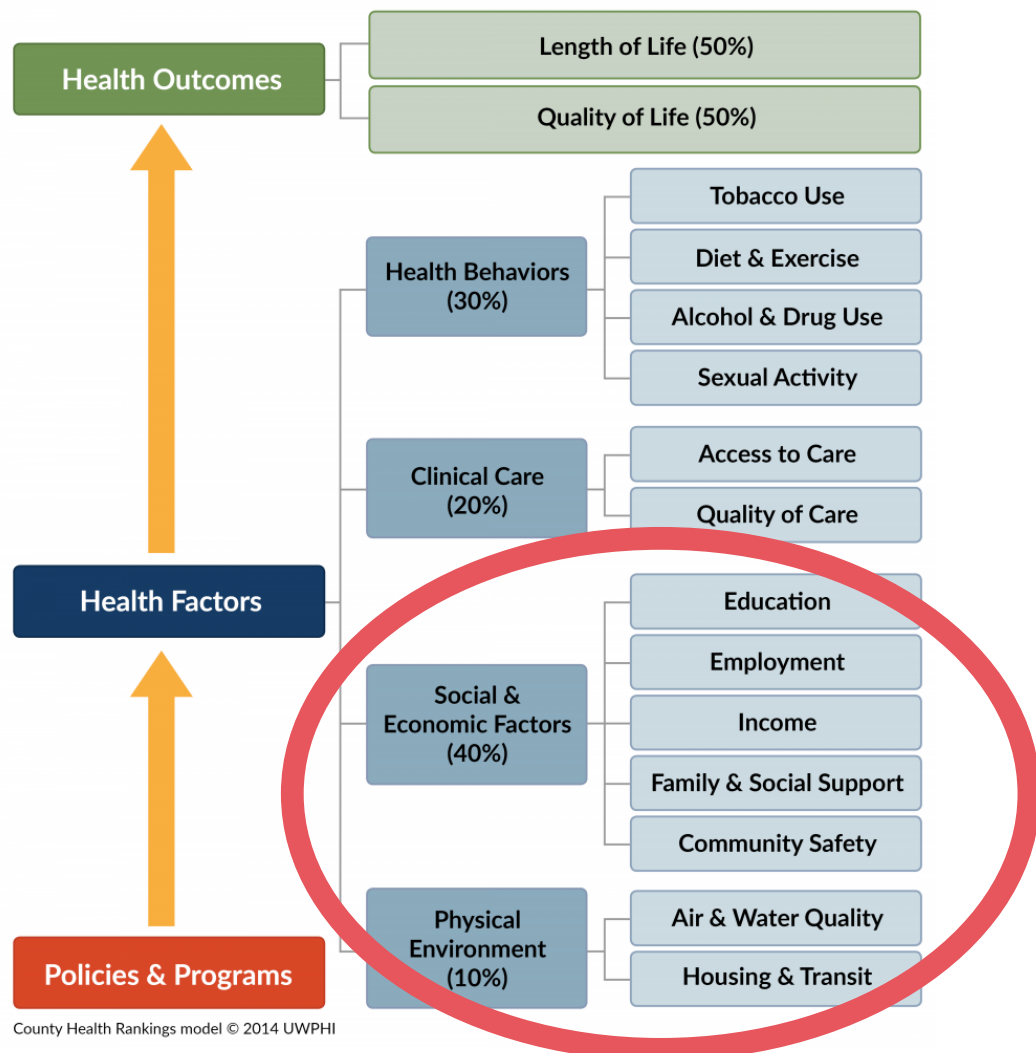
Definitions

- **Equity:** The just and fair inclusion into a society in which all can participate, prosper and reach their full potential. Everyone gets what they need, recognizing that each person has a unique experience and starts from a unique place.
- **Health:** A state of complete physical, mental, and social well-being and not merely the absence of disease or infirmity (WHO, 1948).
- **Health disparities:** Differences in health status and mortality rates across population groups. By itself, disparity does not address the chain of events that produce it.
- **Health equity:** Everyone has a fair and just opportunity to be as healthy as possible. This requires removing obstacles to health such as poverty and discrimination, and their consequences, including powerlessness and lack of access to good jobs with fair pay, quality education and housing, safe environments, and health care.
- **Health inequities:** Differences in population health status and mortality rates that are systemic, avoidable, unfair, and unjust. These differences follow the larger patterns of inequality that exist in society.
- **Institutional bias:** Policies, practices, and procedures that work to the benefit of members of the dominant group at the detriment of members of the non-dominant groups.
- **Race:** A social construct utilized throughout history to assign value and give rights to human beings.
- **Racism:** A system of advantage based on race that unfairly disadvantages some individuals and communities and undermines the realization of the full potential of the whole society through the waste of human resources.
- **Root causes of health inequity:** Underlying social inequalities that create different living conditions.
- **Social determinants of health:** Conditions in which people are born, grow, live, work, and age that influence health, such as your zip code, income, education, race, ethnicity, gender, sexual orientation, etc.
- **Structural racism:** A system in which public policies, institutional practices, economic decisions, cultural representations, and other norms work to keep people of color from having equal access to opportunity, information, resources, and power.

WHAT IMPACTS HEALTH?

Our health is determined in large part by access to social and economic opportunities like where we live and how much money we make; the resources and supports available in our homes, neighborhoods, and communities; the quality of our schools; the safety of our neighborhoods; and the cleanliness of our water, food, and air. For some individuals and groups in our community, the essential elements for a healthy life are readily available, while others face barriers to health because opportunities are significantly limited. **No one's health should be compromised because of who they are or where they live.**

50%
of health outcomes
are determined by social,
economic, & environmental
factors

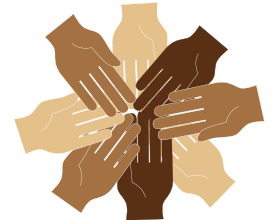


WHY HEALTH EQUITY MATTERS

Across Winnebago County there are **significant differences** in health outcomes from one zip code to the next and among racial, ethnic, and socioeconomic groups.

Health inequities emerge when some individuals and groups gain more than others from having consistently better access to opportunities and resources over the course of their lives and the generations before them. For example, people of color and those living in poverty have consistently faced barriers to opportunity and good health due to a history of unfair laws, policies, and practices.

Differences in opportunity do not arise on their own or because of the actions of individuals alone. Often, they are the result of policies and practices at many levels that have created barriers to good health, such as residential segregation, unfair bank lending practices, school funding based on property taxes, and discriminatory policing and prison sentencing. The collective effect is that a fair and just opportunity to live a long and healthy life does not exist for everyone.



Data show there are fewer opportunities and resources for health among groups that have been historically marginalized, including people of color, people living in poverty, people with physical and mental disabilities, people who identify as LGBTQ, and women.

Increasing opportunities for individuals and groups facing the greatest disparities in our community will make our entire community healthier. **When everyone has the opportunity to live their healthiest lives, we are all better off.**

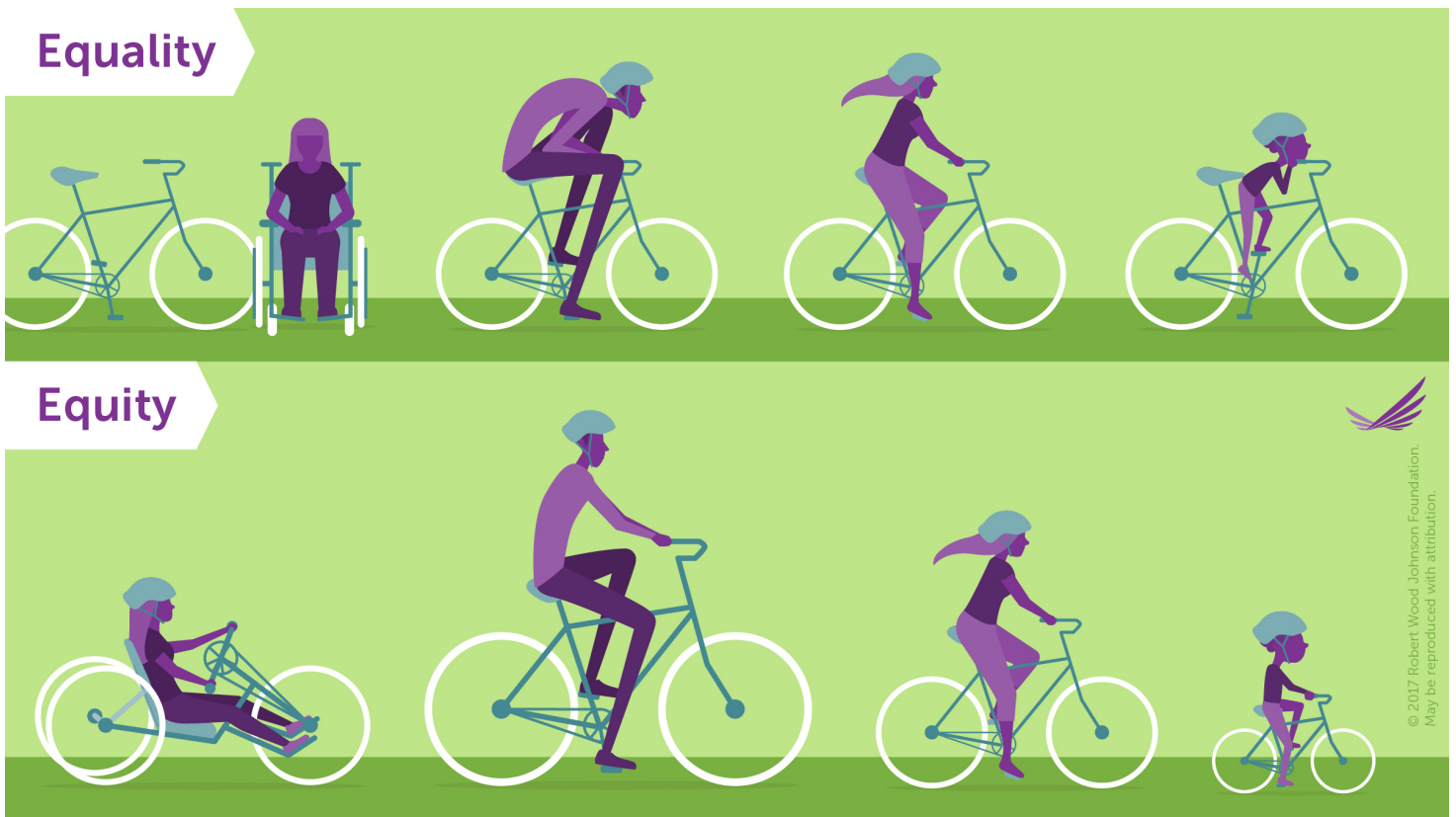
This report explores data* on differences in health outcomes and determinants of health in Winnebago County that can help us identify where action is needed to advance equity in our communities.

**All data is for Winnebago County unless alone otherwise noted.*

health equity



everyone has a fair and just opportunity to be as healthy as possible



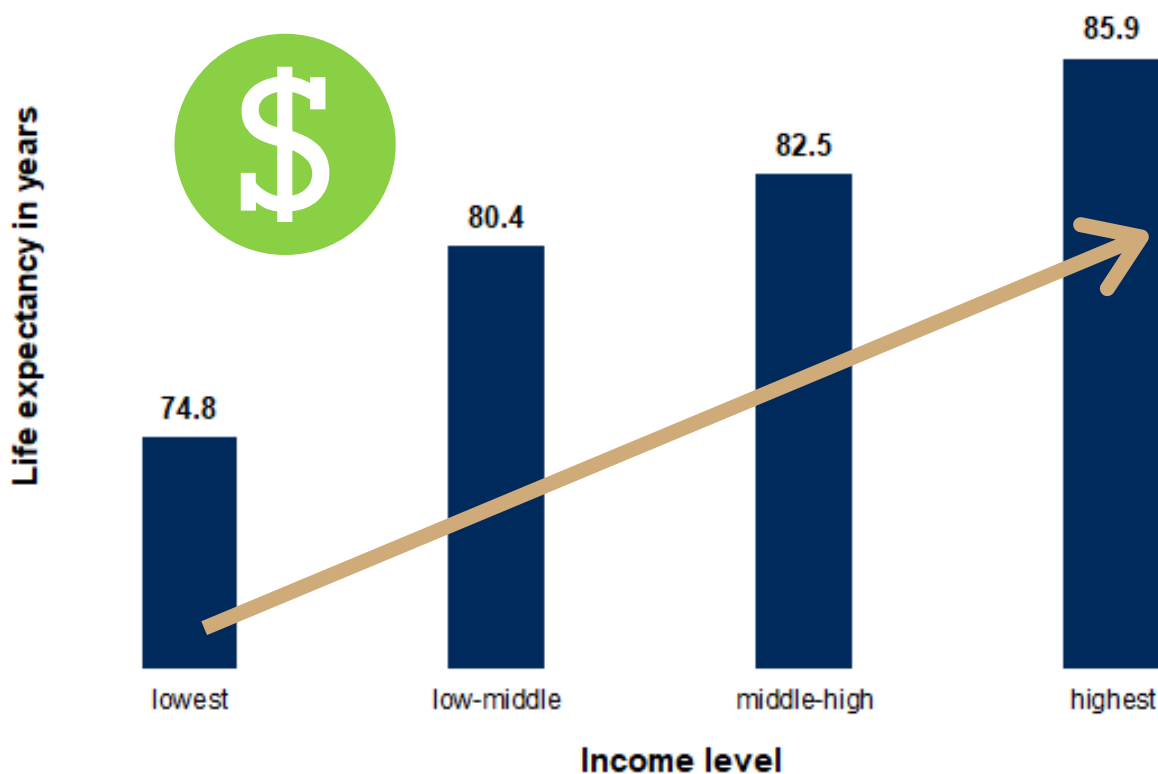
equity requires finding solutions that work for varying needs - a one size fits all approach does not always work well for everyone

How much money you make impacts how long you'll live

Evidence shows a strong relationship between income and life expectancy, the average years a person can expect to live. A higher income increases people's ability to access the essential elements needed for a healthy life such as safe living conditions, healthy foods, quality healthcare, and education. Income inequality is increasingly linked to disparities in life expectancy, and the U.S. has some of the worst income-based disparities in the world.

The graph below shows male life expectancy increases as income increases in Winnebago County. Males with the lowest income level are, on average, **dying 11 years earlier** than males with the highest income level.

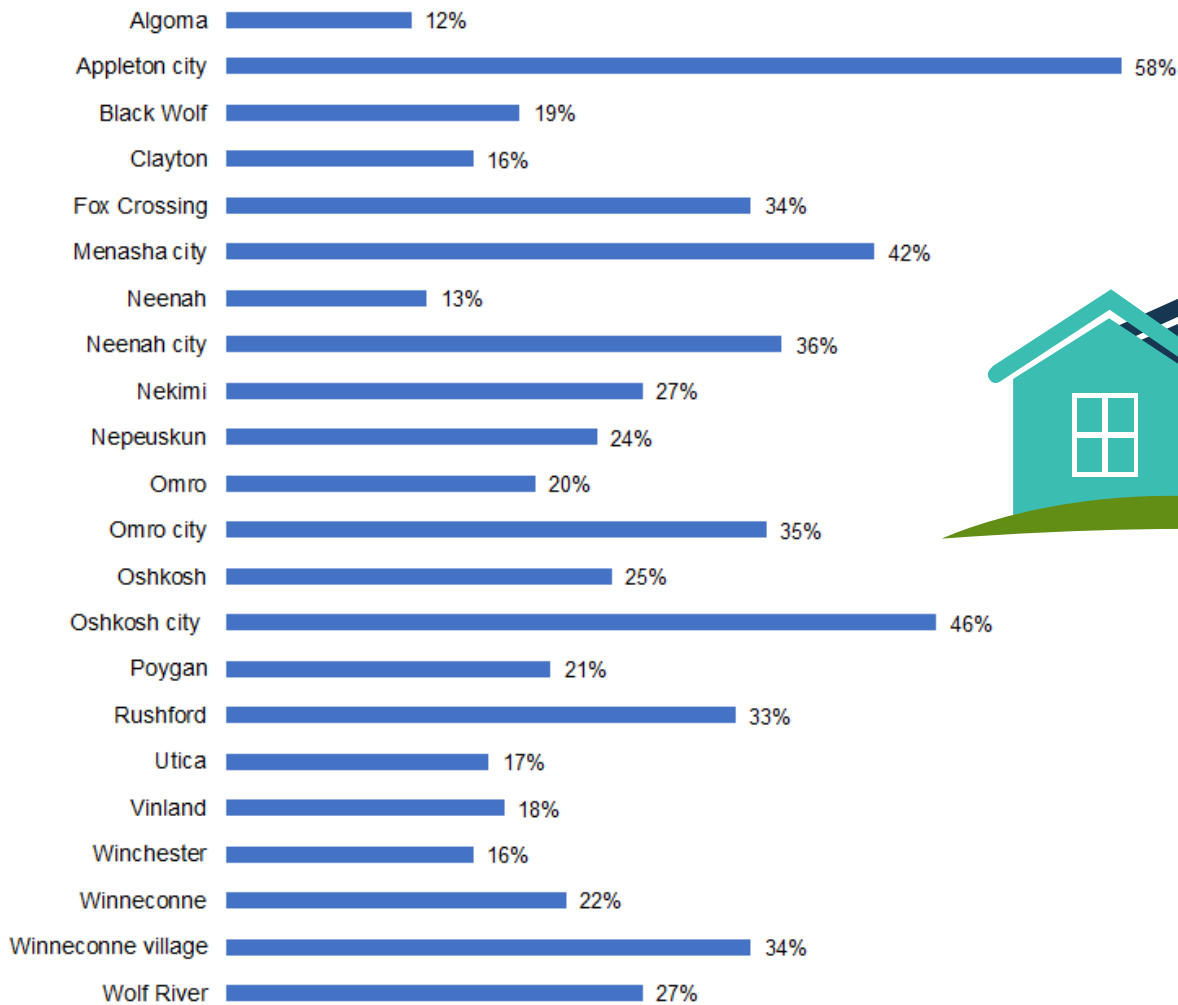
Male life expectancy increases as income level increases



The percent of households facing financial hardship vary by municipality

ALICE is an acronym for **A**sset **L**imited, **I**ncome **C**onstrained, **E**mployed - and describes households that earn more than the Federal Poverty Level, but less than the basic cost of living for the county. The ALICE Threshold is the average income that a household needs to afford the basic necessities including housing, child care, food, transportation, health care, and a smartphone in Winnebago County. Combined, the number of ALICE and poverty households equals the total population struggling to afford basic needs.

In Winnebago County overall, 21% of households are ALICE households and 11% of households are living in poverty. Combined, ALICE and poverty households total 32%, which means nearly **1 in 3 households are struggling to afford basic necessities**. The figure below shows the percentage of ALICE households and poverty households across the different municipalities within the county. *(The percentages shown are only for those households that lie within Winnebago County - 707 households in City of Appleton and 6578 in City of Menasha.)*



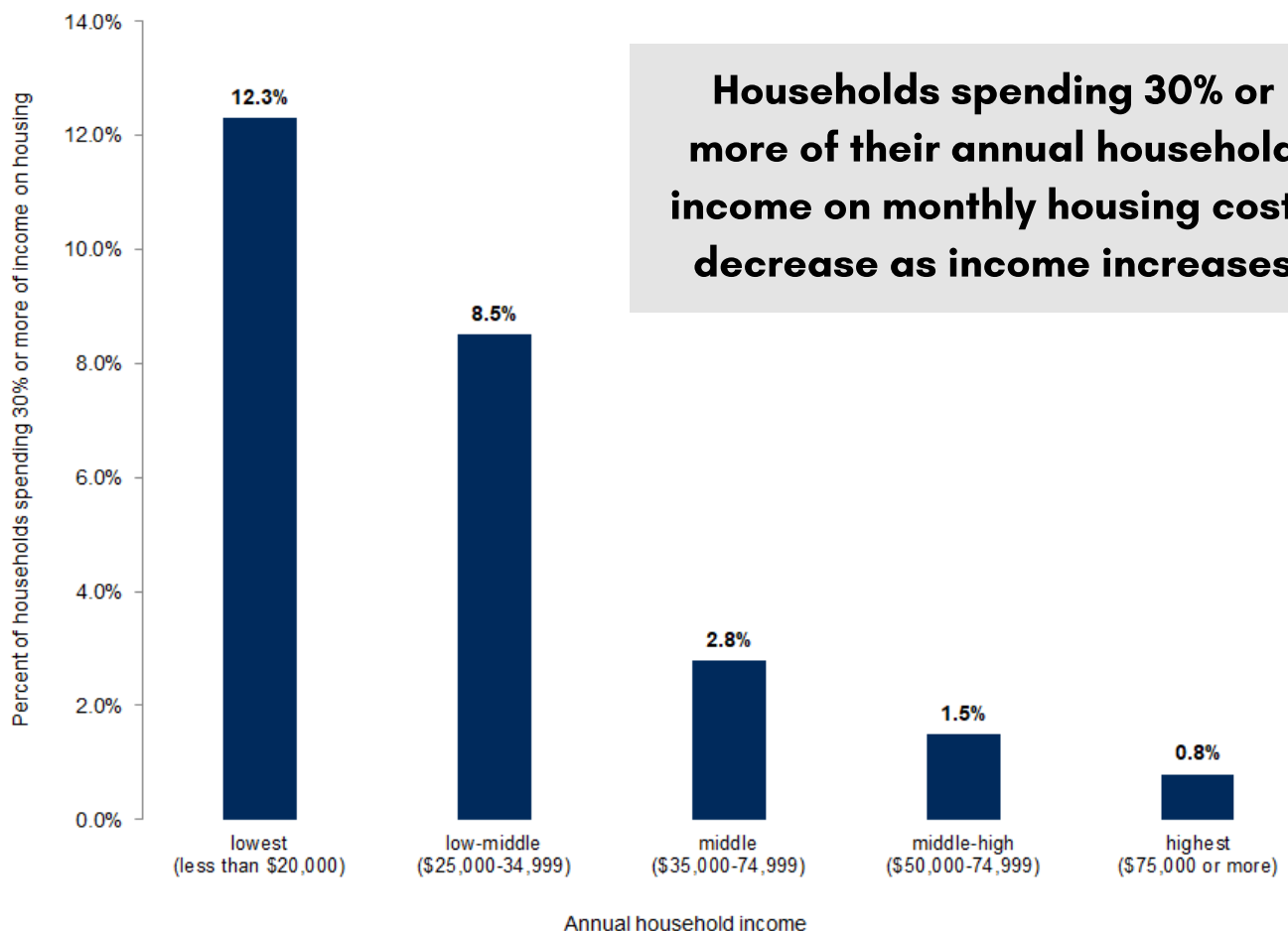
Percent of ALICE & Poverty Households

Data: ALICE Report, 2016

Housing affordability impacts health outcomes

Housing is essential to health as it fulfills a basic human need for shelter; however, the cost of housing also impacts health. The federal government considers housing to be affordable if a family spends no more than 30 percent of its income on housing costs, including utilities. A lack of affordable housing can limit people's ability to meet other basic needs and force them to make difficult choices between paying for rent, utilities, food, transportation, prescription medications, healthcare, etc. Unaffordable housing often causes financial strain which has been linked to negative health outcomes including anxiety, depression, toxic stress, malnutrition, diabetes, and many other chronic conditions.

The graph below shows among households in Winnebago County, the **households with the lowest income are 12 times more likely to be paying 30 percent or more of their income on housing costs** than households with the highest income. The availability of affordable housing shapes people's choices about where they live, often leaving families with lower incomes in low-quality housing in neighborhoods with higher rates of poverty and crime, and fewer health promoting resources such as parks, walking/biking paths, social activities, etc.

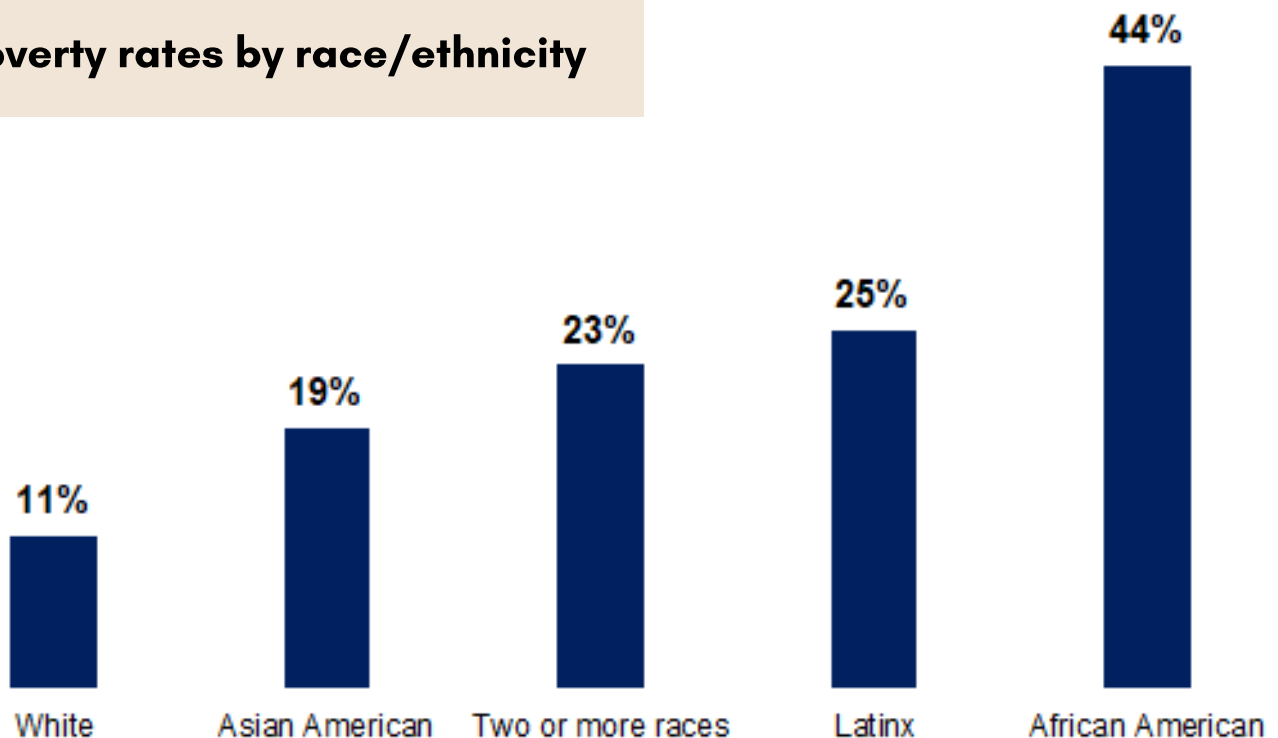


Poverty rates differ by race & ethnicity

A long history of discrimination and structural racism has contributed to the wealth gap among people in America. Race-based unfair treatment built into institutions, policies, and practices - such as residential segregation in impoverished neighborhoods, discrimination in bank lending to residents of largely minority neighborhoods, unfair hiring practices, and discriminatory policing and sentencing practices - continues to play a major role in wealth inequality between people of color and white people in the United States as well as locally within Winnebago County.

The graph below shows differences in the poverty rate by racial and ethnic groups in Winnebago County. Overall in Winnebago County, white people are less impacted by poverty than people of color.

Poverty rates by race/ethnicity

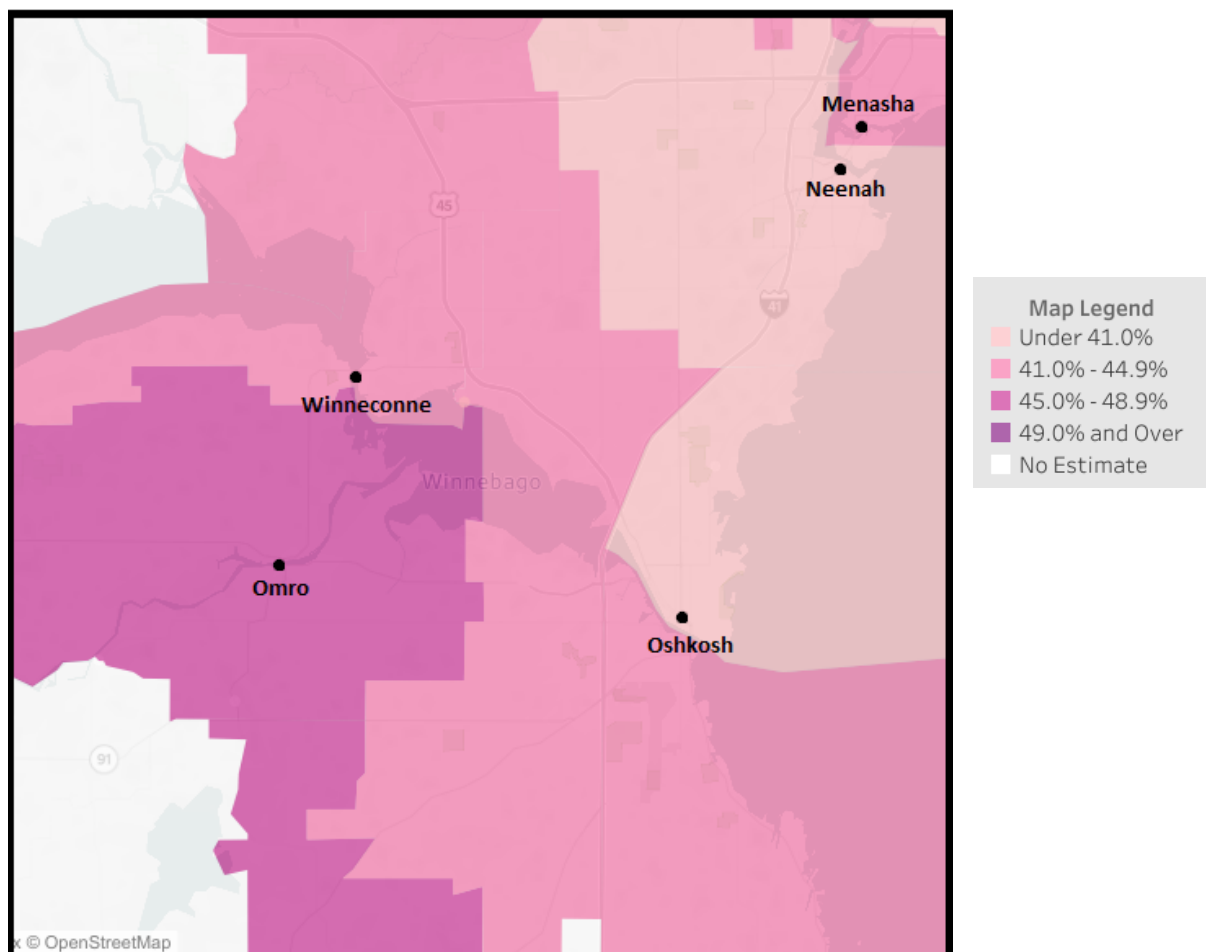


Obesity rates by zip code: Place matters

Obesity rates vary across Winnebago County and within communities. **Neighborhood conditions play a big part in our ability to maintain a healthy weight.** Some neighborhoods have great options for healthy living - like easily accessible parks, recreation opportunities, and places to buy or grow healthy foods. Other neighborhoods have limited transportation and housing options, a lack of job opportunities, few or no places to buy affordable, healthy food, and few safe places to be physically active. Where we live has a big impact on our opportunities to maintain a healthy weight, and the choices we make about our health depend upon the options we have available to us.

The map below shows the obesity rates in Winnebago County by zip code. The darker shaded areas represent higher obesity rates compared to the lighter shaded areas which represent lower obesity rates. No color means there is no estimate based on available data for that area.

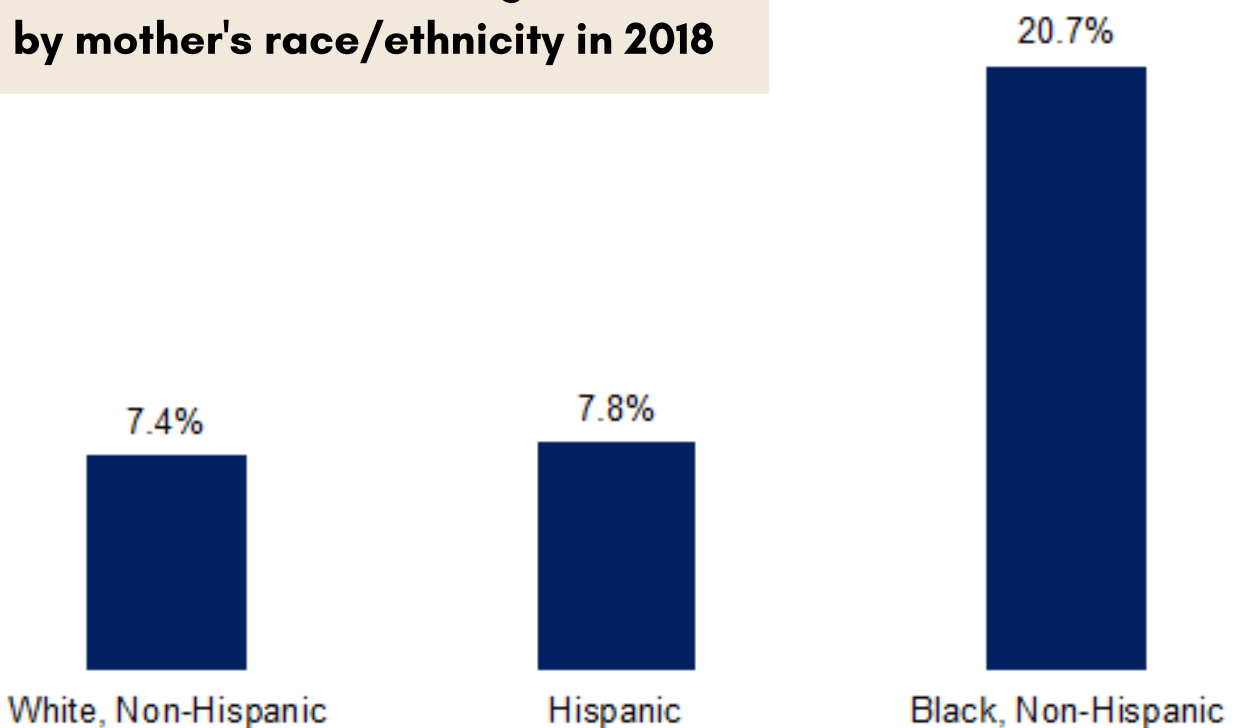
Obesity rates by zip code



Birth outcomes differ by race & ethnicity

Certain health conditions, social and economic factors, and behaviors can increase the risk of mothers having low birth weight babies. Low birth weight babies are those that weigh less than five pounds eight ounces at time of birth. Some low birth weight babies grow up to be healthy children and adults, while others may develop serious health problems that require treatment and result in lasting negative impacts. The graph below shows the percentage of low birth weight babies born to Black mothers is almost two times higher than the percentage of low birth weight babies born to White mothers in Winnebago County. **This significant racial disparity can be attributed to social determinants** like income, racism, toxic stress, and lack of access to healthcare, resources, and opportunities.

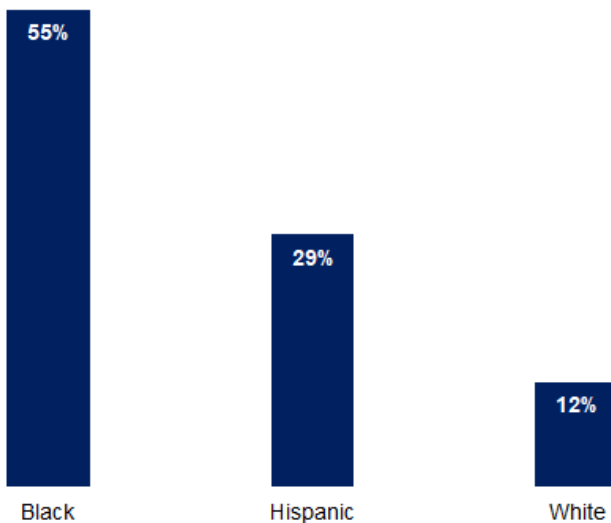
Percent of low birth weight babies by mother's race/ethnicity in 2018



Inequities impact children

Parents' wealth shapes their children's educational, economic, and social opportunities, which in turn shapes their health throughout life. Both poor health and economic disadvantage can compound over a person's lifetime and across generations. Challenges young children face today and into adulthood can reflect their parents' lack of opportunities.

Poverty rates among children by race/ethnicity

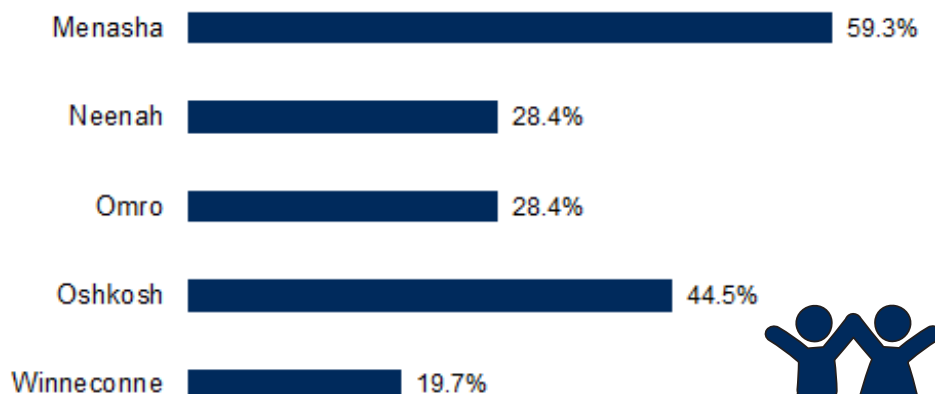


The graph to the left shows significant differences in the percentage of children living in poverty by racial and ethnic groups in Winnebago County, which can be linked to unequal access to opportunities and resources.

Data: County Health Rankings, 2017

The graph to the right shows the percentage of elementary students in Winnebago County school districts who are considered economically disadvantaged and therefore eligible for free and reduced lunch.

Economic disadvantage varies by place among elementary students



So what can we do?

Moving toward equity: We're all in this together

Disparities among one group impact our entire community. We need to work together and strengthen our community by expanding opportunities to be healthy. When people make decisions about their health – or the health of their children – **their choices depend on the options available.**

Thriving, healthy communities are rooted in the determinants of equity. The roots of the tree below are the conditions all of us need to reach our full potential and be as healthy as possible. Creating these conditions can reduce gaps in health outcomes and make our entire community healthier. Investing in individuals and groups facing the greatest disparities in our community will **ultimately benefit everyone in Winnebago County.**



Everyone should have the opportunity to be healthy, live up to their full potential, and participate fully in society.

healthy society = healthy people





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Health Equity at Winnebago County Health Department

One of the most important things health departments can do to help those facing disparities stay healthy is to promote health equity so everyone has access to the opportunities and resources they need to lead a healthy life – no matter who they are, where they live, or how much money they make.

WCHD has an internal Health Equity Team focused on building equity into the infrastructure of our organization and creating an internal culture that supports health equity. We are prioritizing health equity by focusing our efforts to remove barriers and create opportunities so all people can be as healthy as possible.

WCHD Health Equity Team's Vision

Health outcomes for residents in Winnebago County will not be determined by social identity or socially determined group status such as, but not limited to, ability, gender identity, geography, income, or race.

We can't do this work alone. Join us!

We need to work together as a community to advocate for policies and programs that will increase opportunities and reduce inequities in Winnebago County.

Resources

- Braveman P, Acker J, Proctor D, Gillman A, McGeary KA, Mallya G. Wealth Matters for Health Equity. Princeton, NJ: Robert Wood Johnson Foundation, 2018.
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- County Health Rankings & Roadmaps. 2019. <https://www.countyhealthrankings.org/explore-health-rankings>
- “Health, Income, And Poverty: Where We Are And What Could Help,” Health Affairs Health Policy Brief, October 4, 2018.
- King County. Building Equity & Opportunity, 2015.
- Portrait of Promise: The California Statewide Plan to Promote Health and Mental Health Equity. Sacramento, CA: California Department of Public Health, Office of Health Equity; August 2015.
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<https://www.rwjf.org/en/library/research/2017/05/what-is-health-equity-.html>
- United Way. ALICE: A study of Financial Hardship in Wisconsin. 2018.
- University of Wisconsin Population Health Institute. County Health Rankings State Report 2019.
- U.S. Census Bureau. 2013-2017 American Community Survey 5-Year Estimates.
- WI DHS. WISH (Wisconsin Interactive Statistics on Health) Query System.
<https://www.dhs.wisconsin.gov/wish/index.htm>
- Wisconsin Health Atlas. Obesity by Place. <https://www.wihealthatlas.org/obesity/place>

Questions? Contact us!

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Racism is a Public Health Crisis in Wisconsin

Background

Years of work led by grassroots groups, community-based organizations, government agencies, academic leaders, and many others have laid a strong foundation to address racial inequities in Wisconsin. In October 2017, the Mobilizing Action Toward Community Health (MATCH) Group, of the University of Wisconsin Population Health Institute, convened statewide partners at the inaugural Healthiest State Agenda Setting Meeting. The convening supported the collective identification of six statewide health equity priorities, one of which was to declare racism a public health emergency. In May 2018, the [Wisconsin Public Health Association \(WPHA\) passed a resolution](#) declaring that racism is a public health crisis in Wisconsin and committed to taking action. Building on this work, several partner organizations have worked together to transfer the WPHA resolution content to this Racism is a Public Health Crisis Sign-on. The goal is for organizations and individuals to [sign-on to the declaration](#) and commit to actions that are tailored to their specific contexts.

Visit the [Racism is a Public Health Crisis in Wisconsin page](#) for more information about this effort, to view the [current list of organizational signers](#), and to [sign-on](#).

Declaration

(See the [WPHA Resolution](#) for full declaration and citations.)

We agree that Racism is a Public Health Crisis and commit to take urgent action because:

- Race is a social construction with no biological basis.
- Racism is a social system with multiple dimensions: individual racism is internalized or interpersonal and systemic racism is institutional or structural, and is a system of structuring opportunity and assigning value based on the social interpretation of how one looks, that unfairly disadvantages some individuals and communities, unfairly advantages other individuals and communities, and saps the strength of the whole society through the waste of human resources.
- Racism causes persistent racial discrimination in housing, education, employment and criminal justice, and an emerging body of research demonstrates that racism is a social determinant of health.
- More than 100 studies have linked racism to worse health outcomes.
- In Wisconsin, the highest excess death rates exist for African Americans and Native Americans at every stage in the life course and our infant mortality rate for infants of non-Hispanic black women is the highest in the nation.
- The American Public Health Association (APHA) launched a National Campaign Against Racism.
- Healthiest Wisconsin 2020 states that, "Wisconsin must address persistent disparities in health outcomes and the social, economic, educational and environmental inequities that contribute to them."
- Public health's responsibilities to address racism include reshaping our discourse and agenda so that we all actively engage in racial justice work.
- While there is no epidemiological definition of "crisis," the health impact of racism clearly rises to the definition proposed by Galea: "The problem must affect large numbers of people, it must threaten health over the long-term, and it must require the adoption of large scale solutions."

Take Action

As an organization or coalition, in order to address racism as a public health crisis, we will:

- Publicly assert that racism is a public health crisis affecting our entire society. Conduct an assessment of internal policy and procedures to ensure racial equity is a core element of our work.
- Work to create an equity and justice oriented organization, with staff, and/or other stakeholders identifying specific activities to increase diversity and to incorporate anti-racism principles within leadership, staffing, and contracting.
- Incorporate educational efforts to address and dismantle racism, expand understanding of racism, and how racism affects individual and population health.
- Provide tools to engage actively and authentically with communities of color. Advocate for relevant policies that improve health in communities of color, and support local, state, and federal initiatives that advance social justice, while also encouraging individual advocacy to dismantle systematic racism.
- Work to build alliances and partnerships with other appropriate organizations that are confronting racism and encourage partners and/or stakeholders to recognize racism as a public health crisis.
- Allocate adequate financial and human resources to accomplish all selected activities.
- Other _____.

As an individual, in order to address racism as a public health crisis, I will:

- Engage in ongoing individual self-assessment, reflection, and acknowledgement regarding the role I play and the role I can play.
- Share this information with my friends and colleagues.
- Examine my networks and identify with whom I can work to create change with direct actions.
- Seek out additional training to build an individual growth and learning plan.
- Take the declaration to my organization.
- Commit to self-work and self-care.
- Other _____.

Questions about this effort? Please contact healthieststatewi@wisc.edu.



**Mobilizing Action Toward
Community Health (MATCH)**
University of Wisconsin Population Health Institute
SCHOOL OF MEDICINE AND PUBLIC HEALTH

June 22, 2020