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OVERVIEW

The Oneida County Health Department partnered with Catalyst at the University of Wisconsin-Stout to conduct a community health needs assessment for Forest, Oneida, and Vilas counties. These community health departments serve the community to promote and protect the health of the entire community by focusing on disease prevention, education, outreach, and to promote access to healthcare services. The purpose of the community health assessment was to investigate and define the factors that impact the health of the community, and to assess the degree to which there are adequate resources to address those factors. This report summarizes the findings.

METHODOLOGY

The 2023 Community Health Assessment for Forest, Oneida, and Vilas counties was administered over a 4-month period and included a survey (administered electronically and via pen/paper), a series of focus groups, and several stakeholder interviews.

The survey was administered over a 4-month period starting in mid-November 2022. For the electronic survey, an anonymous survey link was posted using QR codes on flyers in each of the three counties and was shared using multiple social media platforms. Paper surveys were distributed at various partner organizations throughout the three counties. Participation was incentivized with the chance to win one of several \$25 gift cards. There was a total of 1,133 participants that completed the survey.

Focus groups were held in Forest, Oneida, and Vilas counties during a one-week period in late January 2023. Participants were recruited using specialized outreach to a variety of sub populations. The focus group questions were meant to gain a deeper understanding of community health needs. There was a total of 9 focus groups held, which were equally distributed across each of the three counties, with a total of 81 participants. Focus group discussion was recorded, then transcribed and combined for data analysis.

Additional feedback was collected from key stakeholders in each of the three counties. Stakeholders included leaders of local organizations including schools, law enforcement, health care providers, employers, food pantries, and other prominent organizations meant to support community health. The stakeholder questions were meant to reflect a deeper understanding of ways in which the community needs to be supported. There was a total of 35 stakeholders who provided feedback.

Data from the survey, focus groups, and stake holder interviews were analyzed and the results are presented below.

SURVEY RESULTS

Table 1 compares our sample against the actual population estimates in Forest, Oneida, and Vilas counties. The biggest discrepancy lies in the male to female ratio. Table 1 displays the demographic breakdown of the target and sample populations, showing the degree to which our sample represented the target population.

TABLE 1: BASIC DEMOGRAPHIC COMPARISON

	FOREST	ONEIDA	VILAS	TARGET POPULATION	SAMPLE POPULATION
TOTAL POP	9258	38259	23520	71037	1133
MALE	51.60%	50.80%	51.50%	51.30%	27.80%
FEMALE	48.40%	49.20%	48.50%	48.70%	71.40%
WHITE	80.30%	95.90%	86.90%	87.70%	87.30%
ASIAN	0.30%	0.50%	0.60%	0.47%	0.90%
AFRICAN AMERICAN/BLACK	1.30%	0.70%	0.40%	0.80%	3.00%
NATIVE HAWAIIAN/PACIFIC ISLANDER	0.10%	0.00%	0.00%	0.03%	1.20%
AMERICAN INDIAN/ALASKA NATIVE	14.70%	1.30%	10.50%	8.83%	4.00%
TWO OR MORE RACES	3.30%	1.60%	1.60%	2.17%	1.40%
HISPANIC OR LATINO	2.90%	1.80%	2.70%	2.47%	5.90%

Participants were asked "What county do you live and/or work in?" Option choices included Forest, Oneida, and Vilas counties. The number and percentage of respondents who selected each county is shown in Table 2 and Figure 1. Oneida county had the most residents (n=506), followed by Forest (n=381) and Vilas (n=246) counties.

TABLE 2: COUNTY OF RESIDENCE

COUNTY	N (%)	
FOREST	381 (33.6%)	
ONEIDA	506 (44.7%)	
VILAS	246 (21.7%)	



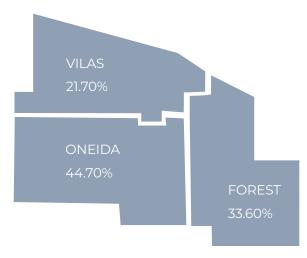
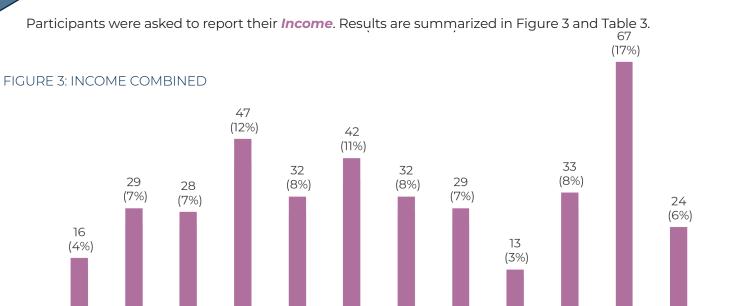


FIGURE 2: DEMOGRAPHICS

SEXUAL ORIENTATION	Rank	N (%)
STRAIGHT/HETEROSEXUAL		923 (83.5%)
PREFER NOT TO ANSWER		79 (7.1%)
ASEXUAL		35 (3.2%)
BISEXUAL		33 (3.0%)
GAY		14 (1.3%)
LESBIAN		8 (0.7%)
SELF-IDENTIFY		8 (0.7%)
QUEER		3 (0.3%)
PANSEXUAL		2 (0.2%)
LANGUAGE		
ENGLISH		1119 (98.3%)
SPANISH		16 (1.4%)
HMONG		1 (0.1%)
MANDARIN		1 (0.1%)
AGE		
26-40		313 (27.9%)
41-55		268 (23.9%)
56-65		209 (18.7%)
66-75		142 (12.7%)
18-25		112 (10%)
OVER 75		70 (6.3%)
UNDER 18		6 (0.5%)
MARITAL STATUS		
MARRIED		712 (63.7%)
SINGLE/NEVER MARRIED		185 (16.5%)
DIVORCED		95 (8.5%)
WIDOWED		70 (6.3%)
LIVE WITH PARTNER		56 (5.0%)
ANNUAL HOUSEHOLD INCOME		
Less than \$10,000		20 (2.5%)
\$10,000 to \$19,999		37 (4.6%)
\$20,000 to \$29,999		59 (7.4%)
\$30,000 to \$39,999		65 (7.1%)
\$40,000 to \$49,999		77 (9.6%)
\$50,000 to \$59,999		77 (9.6%)
\$60,000 to \$69,999		71 (8.85%)
\$70,000 to \$79,999		85 (10.6%)

FIGURE 2: DEMOGRAPHICS

\$80,000 to \$89,999	57 (7.11%)
\$90,000 to \$99,999	25 (3.12%)
\$100,000 to \$149,999	185 (23.1%)
\$150,000 or more	44 (5.5%)
EDUCATION LEVEL	
BACHELOR'S DEGREE	301 (26.9%)
ASSOCIATE DEGREE	231 (20.6%)
SOME COLLEGE, NO DEGREE	225 (20.1%)
HS DIPLOMA OR GED	174 (15.5%)
MASTER'S DEGREE	129 (11.5%)
HIGH SCHOOL- NO DIPLOMA	29 (2.6%)
ADVANCED DEGREE	25 (2.2%)
8TH GRADE OR LESS	5 (0.4%)
EMPLOYMENT STATUS	
I WORK	739 (66.2%)
I DO NOT WORK	47 (4.2%)
RETIRED	197 (17.7%)
OTHER	38 (3.4%)
MILITARY	1 (0.1%)
HOMEMAKER	37 (3.3%)
DISABLED	24 (2.2%)
STUDENT	17 (1.5%)
UNEMPLOYED	16 (1.4%)
NUMBER OF JOBS	
1JOB	649 (58.8%)
2JOBS	142 (12.9%)
3JOBS	23 (2.1%)
4 OR MORE JOBS	6 (0.5%)
NUMBER OF PEOPLE IN MY HOUSEHOLD	
UNDER AGE 18	
NONE	658 (59.1%)
1	211 (19.0%)
2	156 (14.0%)
3	58 (5.2%)
4	21 (1.9%)
5 OR MORE	9 (0.8%)



\$19,999 TABLE 3: INCOME SEGMENTED BY COUNTY

\$29,999

\$39,999

\$49,999

\$10,000

	FOREST	ONEIDA	VILAS	COMBINED
LESS THAN 10,000	4 (1.6%)	11 (2.9%)	5 (2.7%)	20 (2.5%)
10,000 TO 19,999	14 (5.7%)	18 (4.8%)	4 (2.2%)	36 (4.5%)
20,000 TO 29,999	21 (8.5%)	28 (7.5%)	10 (5.5%)	59 (7.4%)
30,000 TO 39,999	22 (8.9%)	30 (8.0%)	13 (7.1%)	65 (8.1%)
40,000 TO 49,999	21 (8.5%)	36 (9.7%)	20 (10.9%)	77 (9.6%)
50,000 TO 59,999	20 (8.1%)	35 (9.4%)	22 (12.0%)	77 (9.6%)
60,000 TO 79,999	24 (9.8%)	31 (8.3%)	16 (8.7%)	71 (8.9%)
70,000 TO 79,000	25 (10.2%)	43 (11.5%)	17 (9.3%)	85 (10.6%)
80,000 TO 89,999	18 (7.3%)	30 (8.0%)	9 (4.9%)	57 (7.1%)
90,000 TO 99,999	11 (4.5%)	9 (2.4%)	5 (2.7%)	25 (3.1%)
100000 TO 149000	47 (19.1%)	66 (17.7%)	39 (21.3%)	152 (19.0%)
150000 OR MORE	19 (7.7%)	36 (9.7%)	23 (12.6%)	78 (9.7%)

Less than \$10,000 to \$20,000 to \$30,000 to \$40,000 to \$50,000 to \$60,000 to \$70,000 to \$80,000 to \$90,000 to \$100,000 to \$150,000 or

\$69,999

\$79,999

\$89,999

\$99,999

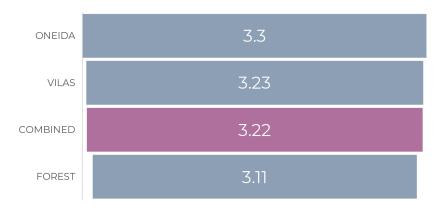
\$59,999

Participants were asked 'How would you rate the overall health of the county you selected?' The question was based on a scale of 1-5, where 1=Very unhealthy, and 5=Very healthy. Perceived health by county is shown in Table 4 and Figure 4 below.

TABLE 4: OVERALL COUNTY HEALTH

	VERY UNHEALTHY	UNHEALTHY	SOMEWHAT HEALTHY	HEALTHY	VERY HEALTHY	M (SD)
FOREST	11 (2.9%)	68 (18.2%)	182 (48.8%)	92 (24.7%)	20 (5.4%)	3.11 (.87)
ONEIDA	4 (0.8%)	47 (9.5%)	274 (55.2%)	139 (28%)	32 (6.5%)	3.30 (.76)
VILAS	0 (0%)	35 (14.8%)	122 (51.5%)	70 (29.5%)	10 (4.2%)	3.23 (.75)
COMBINED	15 (1.4%)	150 (13.6%)	578 (52.3%)	301 (27.2%)	62 (5.6%)	3.22 (.79)

FIGURE 4. OVERALL COUNTY HEALTH



Participants were asked to rate the degree to which they agreed with the following statements regarding the health of their community. Questions are based on a 5-point scale, where 1=**Strongly disagree** and 5=**Strongly agree**. The results for the statements are shown in Table 5. below.

TABLE 5: COMMUNITY HEALTH STATEMENTS

	FOREST M (SD)	ONEIDA M (SD)	VILAS M (SD)	COMBINED M (SD)
I HAVE ACCESS TO INTERNET	4.15 (1.12)	4.21 (1.10)	4.01 (1.20)	4.15 (1.13)
THERE ARE PLACES FOR PEOPLE TO COME TOGETHER IN MY COMMUNITY (SUCH AS PLACES OF WORSHIP, COMMUNITY CENTERS, LIBRARIES, AND/OR PARKS)	4.16 (1.07)	4.09 (1.01)	4.13 (1.03)	4.12 (1.03)
I FEEL SAFE IN MY COMMUNITY	3.98 (.99)	4.07 (0.95)	4.14 (0.98)	4.06 (.97)
I CAN GENERALLY MANAGE THE NORMAL STRESSES OF LIFE	4.02 (.98)	3.93 (1.04)	4.07 (.97)	3.99 (1.01)
I HAVE ENOUGH MONEY TO PAY FOR MY BASIC NEEDS	3.89 (1.19)	3.77 (1.29)	3.86 (1.14)	3.83 (1.22)
I FEEL LIKE I BELONG IN MY COMMUNITY	3.97 (1.02)	3.69 (1.04)	3.80 (1.09)	3.81 (1.05)
MY COMMUNITY SUPPORTS THE NEEDS OF ELDERLY PEOPLE	3.49 (1.11)	3.57 (1.05)	3.59 (1.13)	3.55 (1.09)
THERE ARE OPPORTUNITIES FOR YOUTH TO EXPLORE INTERESTS AND PARTICIPATE IN POSITIVE ACTIVITIES	3.51 (1.16)	3.37 (1.14)	3.46 (1.16)	3.44 (1.15)
MY COMMUNITY SUPPORTS THE NEEDS OF PEOPLE WITH DISABILITIES	3.33 (1.07)	3.40 (1.07)	3.32 (1.06)	3.36 (1.07)
PEOPLE ARE TREATED RESPECTFULLY, REGARDLESS OF RACE, CULTURE, RELIGION, GENDER, SEXUAL ORIENTATION, INCOME LEVEL, DISABILITY, OR AGE	3.18 (1.22)	3.22 (1.21)	3.26 (1.20)	3.21 (1.21)
MY COMMUNITY HAS ACCESS TO A VARIETY OF TRANSPORTATION OPTIONS (SUCH AS PUBLIC BUSES, TAXIS, BIKES, BIKE LANES, TRAILS, AND SIDEWALKS	2.52 (1.28)	3.01 (1.30)	2.96 (1.34)	2.84 (1.32)
HOUSES AND APARTMENTS IN MY COMMUNITY ARE AFFORDABLE AND LIVABLE	2.72 (1.16)	2.35 (1.21)	2.41 (1.26)	2.49 (1.21)

Participants were asked to select which items they believed to be the Top 5 strengths were in their community. Results for the statements are shown in Table 6. Questions are based on a 5-point scale, where 1=Strongly disagree and 5= Strongly agree. The three highest rated combined strengths were clean environment (air, water; 59%), access to community parks and green spaces (48%), and opportunity to practice spiritual beliefs (42%), respectively.

TABLE 6: TOP 5 STRENGTHS

IADLE 6. TOP 3 STRENGTHS				
RESPONSE OPTIONS	FOREST M (%)	ONEIDA M (%)	VILAS M (%)	COMBINED M (%)
CLEAN ENVIRONMENT (AIR, WATER)	254 (66.7%)	260 (51.4%)	153 (62.2%)	667 (58.6%)
ACCESS TO COMMUNITY PARKS AND GREEN SPACES	183 (48.0%)	241 (47.6%)	124 (50.4%)	548 (48.2%)
OPPORTUNITIES TO PRACTICE SPIRITUAL BELIEFS	161 (42.3%)	221 (43.7%)	96 (39.0%)	478 (42%)
ABILITY TO CONTINUE LIVING IN MY HOME OR CHOSEN COMMUNITY AS I GET OLDER	158 (41.5%)	178 (35.2%)	77 (31.3%)	413 (36.3%)
GOOD SCHOOLS	96 (25.2%)	189 (37.4%)	119 (48.4%)	404 (35.5%)
COMMUNITY SAFETY	112 (29.4%)	194 (38.3%)	91 (37.0%)	397 (34.9%)
SENSE OF BELONGING	139 (36.5%)	122 (24.1%)	78 (31.7%)	339 (29.8%)
COMMUNITY SPACES ARE INCLUSIVE TO PEOPLE OF ALL IDENTITIES	109 (28.6%)	131 (25.9%)	48 (19.5%)	288 (25.3%)
ACCESS TO AFFORDABLE HEALTH CARE (FAMILY DOCTOR)	79 (20.7%)	111 (21.9%)	51 (20.7%)	241 (21.2%)
ACCESS TO AFFORDABLE HEALTHY FOODS	37 (9.7%)	131 (25.9%)	52 (21.1%)	220 (19.3%)
ROAD SAFETY	66 (17.3%)	90 (17.8%)	57 (23.2%)	213 (18.7%)
POSITIVE TEEN/YOUTH/FAMILY ACTIVITIES	57 (15.0%)	57 (11.3%)	21 (8.5%)	135 (11.9%)
ELDERLY CARE OPTIONS	22 (5.8%)	68 (13.4%)	29 (11.8%)	119 (10.5%)
COMMUNITY SUPPORT GROUPS	30 (7.9%)	55 (10.9%)	30 (12.2%)	115 (10.1%)
GOOD JOBS AND STRONG ECONOMY	28 (7.3%)	53 (10.5%)	16 (6.5%)	97 (8.5%)
ACCESS TO SAFE AND AFFORDABLE HOUSING	34 (8.9%)	29 (5.7%)	30 (12.2%)	93 (8.2%)
RACIAL AND ETHNIC DIVERSITY	46 (12.1%)	29 (5.7%)	23 (9.3%)	98 (8.6)
ACCESS TO AFFORDABLE TRANSPORTATION	21 (5.5%)	49 (9.7%)	18 (7.3%)	88 (7.7%)
ACCESS TO AFFORDABLE MENTAL HEALTH SERVICES	22 (5.8%)	25 (4.9%)	15 (6.1%)	62 (5.4%)
SERVICES FOR DISABLED INDIVIDUALS	12 (3.1%)	31 (6.1%)	12 (4.9%)	55 (4.8%)
ACCESS TO AFFORDABLE CHILD CARE	17 (4.5%)	15 (3.0%)	12 (4.9%)	44 (3.9%)
OTHER	11 (2.9%)	16 (3.2%)	11 (4.5%)	38 (3.3%)
	*	*	*	

Participants that selected Other strengths were prompted to write community strengths not listed. There were 17 comments that did not fit within a category above. A summary of themed responses for the three counties combined is shown in Table 7. below. Data could not be divided by county due to low number of responses.

TABLE 7: OTHER COMMUNITY STRENGTHS (COMBINED)

ТНЕМЕ	
SEASONAL OUTDOOR ACTIVITIES	
RURAL AREA / LOW POPULATION	
TOURISM	
COMMUNITY	

Participants were asked to rank which items they believed to be the Top 5 areas for growth were in their community. Results for the statements are shown in Table 8. Values in the table represent the number of times a response option was selected. The three highest rated areas for improvement combined across the three counties were Access to safe and affordable housing (50%), access to affordable health care (37%), and access to affordable healthy foods (37%), respectively.

TABLE 8: TOP 5 AREAS FOR IMPROVEMENT

RESPONSE OPTIONS	FOREST N (%)	ONEIDA N (%)	VILAS N (%)	COMBINED N (%)
ACCESS TO SAFE AND AFFORDABLE HOUSING	146 (38.3%)	290 (57.3%)	132 (53.7%)	568 (49.9%)
ACCESS TO AFFORDABLE HEALTH CARE (FAMILY DOCTOR)	108 (28.3%)	189 (37.4%)	128 (52.0%)	425 (37.3%)
ACCESS TO AFFORDABLE HEALTHY FOODS	177 (46.5%)	153 (30.2%)	90 (36.6%)	420 (36.9%)
ACCESS TO AFFORDABLE CHILDCARE	132 (34.6%)	202 (39.9%)	85 (34.6%)	419 (36.8%)
ACCESS TO AFFORDABLE MENTAL HEALTH SERVICES	145 (38.1%)	177 (35.0%)	91 (37.0%)	413 (36.3%)
GOOD JOBS AND STRONG ECONOMY	131 (34.4%)	168 (33.2%)	80 (32.5%)	379 (33.3%)
ACCESS TO AFFORDABLE TRANSPORTATION	99 (26.0%)	135 (26.7%)	79 (32.1%)	313 (27.5%)
ELDERLY CARE OPTIONS	126 (33.1%)	106 (20.9%)	71 (28.9%)	303 (26.6%)
RACIAL AND ETHNIC DIVERSITY	70 (18.4%)	137 (27.1%)	60 (24.4%)	267 (23.5%)
POSITIVE TEEN/YOUTH/FAMILY ACTIVITIES	96 (25.2%)	116 (22.9%)	43 (17.5%)	255 (22.4%)
GOOD SCHOOLS	115 (30.2%)	88 (17.4%)	33 (13.4%)	236 (20.7%)
ABILITY TO CONTINUE LIVING IN MY HOME OR CHOSEN COMMUNITY AS I GET OLDER	63 (16.5%)	85 (16.8%)	54 (22.0%)	202 (17.8%)
ROAD SAFETY	55 (14.4%)	102 (20.2%)	35 (14.2%)	192 (16.9%)
SERVICES FOR DISABLED INDIVIDUALS	55 (14.4%)	66 (13.0%)	22 (8.9%)	143 (12.6%)
SENSE OF BELONGING	47 (12.3%)	49 (9.7%)	28 (11.4%)	124 (10.9%)
CLEAN ENVIRONMENT (AIR, WATER)	33 (8.7%)	66 (13.0%)	16 (6.5%)	115 (10.1%)

RESPONSE OPTIONS	FOREST N (%)	ONEIDA N (%)	VILAS N (%)	COMBINED N (%)
COMMUNITY SUPPORT GROUPS	50 (13.1%)	44 (8.7%)	19 (7.7%)	113 (9.9%)
ACCESS TO COMMUNITY PARKS AND GREEN SPACES	36 (9.4%)	39 (7.7%)	30 (12.2%)	105 (9.2%)
COMMUNITY SAFETY	35 (9.2%)	43 (8.5%)	16 (6.5%)	94 (8.3%)
COMMUNITY SPACES ARE INCLUSIVE TO PEOPLE OF ALL IDENTITIES	17 (4.5%)	54 (10.7%)	12 (4.9%)	83 (7.3%)
OPPORTUNITIES TO PRACTICE SPIRITUAL BELIEFS	19 (5.0%)	17 (3.4%)	22 (8.9%)	58 (5.1%)
OTHER	9 (2.4%)	19 (3.8%)	10 (4.1%)	38 (3.3%)

Participants that selected *Other* areas for improvement were prompted to write their responses. There were 14 other comments that did not fit within a category above. A summary of the responses combined by all three counties is shown in Table 9 below.

TABLE 9: OTHER COMMUNITY AREAS FOR IMPROVEMENT (COMBINED)

THEME
BUSINESS ISSUES (MORE DEVELOPMENT NEEDED, FIX EMPLOYMENT ISSUES, OPEN MORE HOURS/DAYS)
INCREASED DENTAL AND AODA SERVICES
BETTER SERVICES (POSTAL DELIVERY, INTERNET)

Participants were asked to describe what would make their community a healthier place to live in. A summary of themed responses is shown in Table 10. below.

TABLE 10: FACTORS TO MAKE THE COMMUNITY A BETTER PLACE

QUESTION: IN YOUR OPINION, WHAT WOULD MAKE OUR COMMUNITY A HEALTHIER PLACE TO LIVE IN?					
THEME	FOREST	EXAMPLES			
MORE VARIETY OF STORES	13 (6%)	8 (2%)	6 (3%)	27 (3%)	AFFORDABLE GROCERY STORE MORE DIVERSITY IN TYPES OF RESTAURANTS IN AREA LESS FAST FOOD AND MORE DELI TYPE AND GOOD RESTAURANTS.

QUESTION: IN YOUR COMMUNITY A HEAL					
THEME	FOREST	ONEIDA	VILAS	COMBINED	EXAMPLES
HEALTHIER AFFORDABLE FOOD OPTIONS IN GROCERY STORES AND RESTAURANTS	45 (19%)	32 (9%)	16 (9%)	93 (12%)	PROVIDE A GROCERY STORE THAT OFFERS HEALTHY OPTIONS. WE ONLY HAVE A FAMILY DOLLAR IN OUR LOCAL TOWN, AND IT IS CONVENIENT BUT OFFERS NOTHING HEALTHY MAKING HEALTHY FOOD MORE AFFORDABLE AND INCREASING WAGES SO PEOPLE AREN'T STRUGGLING TO SURVIVE AND THEREBY UNABLE TO AFFORD HEALTHY FOOD. BETTER FOOD QUALITY AT RESTAURANTS. BAR AND GRILL FOOD AND FAST FOOD ARE LIMITING AND AS I GET OLDER, I WANT HEALTHY OPTIONS THAT ARE AFFORDABLE
COMMUNITY SERVICES AND RESOURCES	23 (10%)	29 (8%)	18 (10%)	70 (9%)	BETTER COMMUNICATION OF WHAT THINGS THERE ARE IN OUR AREA FOR HEALTH, DISABILITIES, AND ELDERLY PRIORITIZATION = MEANING OFFERING CLASSES (AFFORDABLE) ON HOW TO ACHIEVE A MORE STRUCTURED LIFE; ESPECIALLY FOR YOUNGER MOMS. SUPPORT SERVICES THAT ARE STAFFED AND FUNDED AT AN ADEQUATE LEVEL, WHICH ARE ABLE TO PROVIDE THE NEEDED RESOURCES THE COMMUNITY REQUIRES. MORE INTERNET SERVICES

QUESTION: IN YOUR COMMUNITY A HEAL	OPINION, W				
THEME	FOREST	ONEIDA	VILAS	COMBINED	EXAMPLES
					MORE OPTIONS FOR TRANSPORTATION FOR THOSE WHO CAN LONGER DRIVE. SYSTEMATIC ALTERNATIVE TRANSPORTATION
PUBLIC TRANSPORTATION / DISTANCE TO APPOINTMENTS AND STORES	21 (9%)	27 (7%)	19 (10%)	67 (9%)	THERE NEEDS TO BE A PUBLIC TRANSPORTATION SYSTEM FOR SOME OF THE REMOTE AREAS IN VILAS COUNTY. BIKE TRAILS DO NOT COUNT, IF YOU HAVE A 70-YEAR-OLD PERSON THAT NEEDS A WAY TO GET TO MINOCQUA IN THE WINTER. EVEN IN THE SUMMER! YOU CAN'T EXPECT SOME OF THE OLDER OR DISABLED POPULATION TO USE THE BIKE TRAILS. INVEST SOME OF THAT MONEY ON A PUBLIC TRANSPORTATION SYSTEM WITH REGULAR, TIMED ROUTES MULTIPLE TIMES A DAY THROUGHOUT NORTHERN WISCONSIN.
INCREASED ACCESS TO QUALITY AFFORDABLE HEALTH CARE (DOCTORS & DENTIST)	24 (10%)	56 (15%)	52 (29%)	132 (17%)	BETTER ACCESS TO HEALTHCARE THAT IS AFFORDABLE WE NEED AN ACTUAL HEALTH CARE SYSTEM INSTEAD OF SICK CARE. HEALTH PROVIDERS/COMMUNITY PROGRAMS SHOULD STRESS AND TEACH HEALTHY LIFESTYLES INSTEAD OF PUSHING DRUGS AS THE ANSWER TO EVERY SYMPTOM/CONDITION. WE NEED ACCESS TO MORE SPECIALTY SERVICES AND PRIMARY CARE PROVIDERS IN OUR AREA. PROVIDERS ARE HARD TO KEEP IN THIS AREA AND ARE ESPECIAL TO BE ABLE TO PROVIDE QUALITY HEALTHCARE IN THIS AREA. THIS IS A GREAT NEED FOR OUR COMMUNITY.
INCREASED ACCESS TO HEALTH CARE FACILITIES (LOCATION)	7 (3%)	13 (3%)	15 (8%)	35 (4%)	WE NEED A CLINIC IN LAONA SATELLITE HEALTH SERVICES IN SURROUNDING COMMUNITIES. THREE LAKES/SUGAR CAMP DOES NOT HAVE ITS OWN CLINIC. A HOSPITAL THAT CAN PROVIDE

QUESTION: IN YOUR COMMUNITY A HEAL					
THEME	FOREST	ONEIDA	VILAS	COMBINED	EXAMPLES
LEGAL SYSTEM ISSUES	12 (5%)	14 (4%)	6 (3%)	32 (4%)	MORE SUPPORT FOR POLICE-THEY'RE SO OVERWHELMED THEY DON'T EVEN HAVE TIME TO PROSECUTE THEFT STOP ROAD RAGE IN THE CITYENFORCE THE SPEED LIMITS AND TICKET RECKLESS DRIVERS. IMPLEMENTING STRICTER POLICIES ON USING DANGEROUS CHEMICALS.
ALCOHOL AND OTHER DRUGS	39 (17%)	29 (8%)	14 (8%)	82 (10%)	SEVERAL OF THE COMMUNITY EVENTS INVOLVE ALCOHOL, I WOULD LIKE TO SEE MORE FAMILY EVENTS WITHOUT ALCOHOL. REDUCE SUBSTANCE USE AMONG ALL AGES. REMOVING THE DRUGS FROM THE COMMUNITY (METHAMPHETAMINE, FENTANYL ESPECIALLY)
INCREASE ACCESS TO, AVAILABILITY OF AFFORDABLE INDOOR AND OUTDOOR RECREATION	53 (23%)	61 (16%)	26 (14%)	140 (18%)	MORE OPTIONS FOR TEENS TO OCCUPY THEIR FREE TIME IN MORE POSITIVE SETTINGS WITH GROUPS IN GATHERING PLACES FOR CONSTRUCTIVE ACTIVITIES WHILE MAKING IT FUN FOR ALL YOUTH. RESEARCH GRANTS FOR PARK & RECREATIONS TO BE ABLE TO AFFORD TO UPGRADE PLAYGROUND EQUIPMENT. BRING MORE 5K RUNS, HEALTHY WALKING EVENTS, MORE PROGRAMS FOR OLDER ADULTS TO PARTICIPATE IN. MORE BIKE TRAILS, WALKING TRAILS, AFFORDABLE EXERCISE PROGRAMS OFFERED AFTER 5:00PM TO ALLOW THOSE THAT ARE STILL IN THE WORKFORCE TO STAY PHYSICALLY ACTIVE

QUESTION: IN YOUR COMMUNITY A HEAL	OPINION, W				
THEME	FOREST	ONEIDA	VILAS	COMBINED	EXAMPLES
ACCESS TO AFFORDABLE STRUCTURES DESIGNED TO INCREASE COMMUNITY FOR ALL AGES	13 (5%)	22 (6%)	10 (6%)	45 (6%)	AN AFFORDABLE COMMUNITY-BASED CENTER OPEN TO THE PUBLIC FOR EXERCISE, ABILITY TO MEET OTHERS FOR ADULT AGED COMPANIONSHIP. MORE OPPORTUNITIES FOR THE YOUTH TO GO TO A HEALTHY ENVIRONMENT FOR OUTSIDE OF SCHOOL ACTIVITIES SUCH AS A RECREATIONAL CENTER BESIDES THE YMCA PLACES WHERE PEOPLE COULD WALK INDOORS DURING WINTERS AND PLACES FOR TEENS TO SOCIALIZE IN POSITIVE WAYS.
BETTER ROADS, PARKS, AND WALKING PATHS	19 (8%)	48 (13%)	9 (5%)	76 (10%)	CLEANING THE GARBAGE OFF THE SIDE OF THE ROAD AND CLEANER MORE TAKEN CARE OF PARKS. INFRASTRUCTURE IMPROVEMENTS TO INCREASE CONNECTIVITY OF WALKING AND BIKING TRAILS. PARKS THAT HAVE EXERCISE CIRCUITS FOR DISABLED AND ELDERLY TO GET OUTSIDE AND GET EXERCISE IN A SAFE ENVIRONMENT.
MORE AFFORDABLE, HIGHER QUALITY HOUSING	19 (8%)	76 (20%)	30 (17%)	125 (16%)	AFFORDABLE HOUSING FOR YOUNG FAMILIES WE DESPERATELY NEED SAFE, LIVABLE, AFFORDABLE HOUSING. AFFORDABLE HOUSING TO SERVE PEOPLE WITH INCOMES SUCH AS THOSE IN THE RETAIL, FOOD SERVICE, AND HOSPITALITY INDUSTRIES.
BETTER WAGES AND BENEFITS	21 (9%)	33 (9%)	8 (4%)	62 (8%)	BRINGING IN INDUSTRIES TO CREATE HIGHER-PAYING JOBS. HIGHER PAYING JOBS WOULD CREATE A STRONGER ECONOMY WHICH WOULD HELP ALL OTHER ASPECTS OF THE COMMUNITY. EMPLOYMENT WITH INSURANCE BENEFITS THAT DO NOT HAVE SUCH A HIGH DEDUCTIBLE.

QUESTION: IN YOUR COMMUNITY A HEAL	OPINION, W THIER PLAC	/HAT WOUL	.D MAKE OU N?	JR	
THEME	FOREST	ONEIDA	VILAS	COMBINED	EXAMPLES
					IF ALL OF THE COMMUNITIES COLLABORATED AND WORKED TOGETHER (CRANDON, LAONA, WABENO, FOREST COUNTY POTAWTOMI, MOLE LAKE). COMBINING RESOURCES AND WORKING TOGETHER TO PROVIDE OPPORTUNITY AND ACCESS TO ALL.
SAFER COMMUNITY	21 (9%)	65 (17%)	22 (12%)	108 (14%)	RESIDENTS WORKING TOGETHER TO MAKE OUR COMMUNITY A HEALTHIER PLACE TO LIVE
					A HEALTHY COMMUNITY IS A RE- INNOVATION SYSTEM OF SOCIAL GOVERNANCE, AND A CARRIER SPACE FOR EPIDEMIC PREVENTION AND CONTROL, URBAN RENEWAL, AND URBAN GOVERNANCE
					GET THE WATER IN LAONA FIXED IS THE BIGGEST ONE!!!!! YOU CAN'T DRINK IT
SAFE AND CLEAN ENVIRONMENT (AIR AND WATER)	11 (5%)	42 (11%)	10 (6%)	63 (8%)	ENFORCE LAWS/ REQUIREMENTS THAT PROTECT THE ENVIRONMENT FROM AIR, WATER & NOISE POLLUTION, INVASIVE SPECIES, OVERDEVELOPMENT OF SHORELINES AND FORESTED LANDS, DESTRUCTION OF WILDLIFE HABITAT.
					OPEN SPACES, CLEAN ENVIRONMENT, NOT CROWDED, FRIENDLY HELPFUL RESIDENTS
					INCREASE INCLUSION IN OUR COMMUNITIES
EQUITY, DIVERSITY, AND INCLUSION, ACCEPTANCE	17 (7%)	30 (8%)	8 (4%)	55 (7%)	IF PEOPLE WERE MORE ACCEPTING OF PEOPLE'S DIFFERENCES WHETHER IT BE RACE, GENDER, LGBTQIA+, RELIGION OR WHATEVER IT MAY BE. IF YOU ARE PART OF THE MINORITY IN THIS TOWN YOU ARE NOT ACCEPTED AND DO NOT FEEL SAFE. IT IS SCARY AND UNFAIR.
					BETTER RACIAL AND ETHNICITY AWARENESS

QUESTION: IN YOUR COMMUNITY A HEAL	OPINION, W				
THEME	FOREST	ONEIDA	VILAS	COMBINED	EXAMPLES
EDUCATION	11 (5%)	14 (4%)	3 (2%)	28 (4%)	BETTER SCHOOLS SCHOOLS AND PROGRAMS FOR KIDS. PROVIDING FOR THE CHILDREN, AND EDUCATING THEM TO BE CRITICAL THINKERS, WILL BE WHAT MAKES AMERICA A BRIGHTER PLACE FOR ALL PEOPLE. IMPROVED EDUCATION
EXPANDED HOUSING AND SERVICES FOR ELDERLY/ DISABLED	31 (13%)	20 (5%)	24 (13%)	75 (10%)	ACCESS TO BETTER CHOICES FOR HOUSING FOR ELDERLY. SINCE WE NO LONGER HAVE A NURSING HOME MAYBE MORE ASSISTED LIVING OPTIONS. I LOVE IT HERE BUT WORRY ABOUT LEAVING MY HOME SOMEDAY. ROBUST/ACTIVE ASSISTED LIVING OPTIONS FOR SENIORS. SERVICES FOR ASSISTED LIVING AND INDIVIDUALS WITH DISABILITIES.
MENTAL HEALTH CARE SERVICES AND FACILITIES	19 (8%)	38 (10%)	12 (7%)	69 (9%)	MORE PROGRAMS TO ADDRESS THE MENTAL HEALTH CRISIS THE BIGGEST STRUGGLE IN OUR COMMUNITY AND THE COUNTRY IN GENERAL IS ACCESS TO MENTAL HEALTH CARE. IF SOMEONE IS STRUGGLING WITH SEVERE MENTAL ILLNESS, OFTEN THERE ARE NO BEDS AVAILABLE IN RHINELANDER AND THEY HAVE TO TRAVEL TO OTHER FACILITIES ACROSS THE STATE (AND MOST OF THE TIME THEY HAVE NO BEDS EITHER), AND PATIENTS END UP SITTING IN ERS FOR WAY TOO LONG. WE NEED TO FOCUS ON MENTAL HEALTH AND STABILITY IN OUR AREA. MORE ACCESS TO MENTAL HEALTH SERVICES FOR ALL RANGES OF MENTAL HEALTH ILLNESS DEGREES AND FOR ALL AGE GROUPS.

QUESTION: IN YOUR COMMUNITY A HEAL	OPINION, W				
THEME	FOREST	ONEIDA	VILAS	COMBINED	EXAMPLES
ACCESS TO AFFORDABLE CHILD CARE		16 (4%)	4 (2%)	30 (4%)	BETTER CHILDCARE. THERE ARE BARELY ANY OPTIONS FOR YOUNG, WORKING PARENTS. THEY RELY ON FAMILY MEMBERS JUST SO THEY CAN WORK AND LIVE. PUT UP A DAYCARE. HAVE A DAYCARE AT THE SCHOOL. OUR COMMUNITY CANNOT GROW AND PROSPER IF THERE ARE NOT THE RESOURCES HERE FOR YOUNG FAMILIES TO DO SO.
	10 (4%)				BETTER ACCESS FOR PEOPLE TO FIND GOOD CHILDCARE FOR WORKING FAMILIES! THERE ARE VERY FEW CHILDCARE CENTERS AND EVEN LESS BEFORE/AFTER SCHOOL CHILDCARE RESOURCES. IF THESE TWO THINGS WERE BETTER, WE COULD ATTRACT A LOT MORE WORKING FAMILIES TO FILL SO MANY JOB OPENINGS. IT WILL BE HARD TO GROW AS A COMMUNITY WITHOUT THOSE THINGS!
					CHILDCARE.
SUSTAINABILITY 4 (2%	4 (2%)	. (2%) 11 (3%)	5 (3%)	20 (3%)	BUILDING REACHABLE PUBLIC TRANSPORTATION TO REDUCE RELIANCE ON MOTORS. ACCESS TO HEALTHIER FOOD OPTIONS, LIKE A COMMUNITY GREENHOUSE PROGRAMS TO SUPPORT SELF- SUFFICIENCY, TEACHING SKILLS LIKE GARDENING AND FORAGING.
				MORE FARM TO TABLE OPPORTUNITIES AND FOCUS ON TO AFFORDABLE TRUE NUTRITION- NOT THIS LOW FAT, HIGH CARB GARBAGE.	
OTHER COMMENTS THAT DID NOT FIT INTO A THEME	22 (9%) 46 (12%)	24 130%)	92 (12%)	A SMALL HOTEL/MOTEL WHERE PEOPLE CAN STAY WOULD HELP SUPPORT THE LOCAL RESTAURANTS AND BUSINESSES AND HOPEFULLY FILL THE EMPTY BUILDINGS. LESS POLITICS	
					NOTHING. INDIVIDUAL PEOPLE HAVE TO WANT TO BE HEALTHIER. NO ONE CAN DO IT FOR ANYONE ELSE.

Participants were asked to rate their level of physical health. This question corresponds to a 5-point scale where 1= **Very unhealthy** and 5= **Very healthy**. Results are shown in Table 11 and Figure 5 below.

FIGURE 5. PHYSICAL HEALTH RATINGS

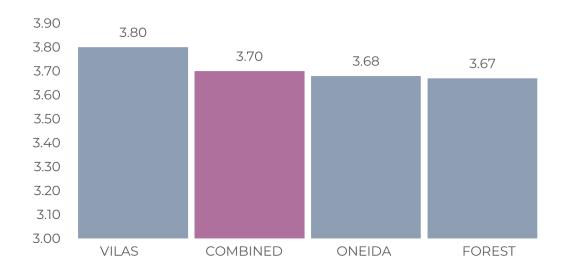


TABLE 11: PHYSICAL HEALTH RATING

	VERY UNHEALTHY	UNHEALTHY	SOMEWHAT HEALTHY	HEALTHY	VERY HEALTHY	M (SD)
FOREST	2 (0.5%)	19 (5.1%)	119 (32.2%)	186 (50.3%)	44 (11.9%)	3.67 (0.79)
ONEIDA	3 (0.6%)	26 (5.2%)	171 (34.5%)	230 (46.4%)	66 (13.3%)	3.68 (0.77)
VILAS	1 (0.4%)	14 (5.8%)	63 (26.0%)	118 (48.8%)	46 (19.0%)	3.80 (0.83)
COMBINED	6 (0.5%)	59 (5.3%)	353 (31.9%)	534 (48.2%)	156 (14.1%)	3.70 (0.79)

Participants were asked 'How has your physical health changed overall since COVID?' Results are shown in Table 12. below.

TABLE 12: CHANGE IN MENTAL HEALTH DUE TO COVID

	BETTER	WORSE	ABOUT THE SAME	M (SD)
FOREST	36 (9.7%)	93 (25.0%)	243 (65.3%)	2.15 (0.57)
ONEIDA	47 (9.5%)	141 (28.4%)	308 (62.1%)	2.19 (0.59)
VILAS	30 (12.5%)	57 (23.8%)	153 (63.8%)	2.11 (0.59)
COMBINED	113 (10.2%)	291 (26.3%)	704 (63.5%)	2.16 (0.58)

Participants were asked to consider their level of concern with various health related statements. This item was measured using three response options: 1= *Not worried*, 2= *Worried*, and 3= *No opinion*. Responses of those that chose 2 = *Worried* are shown in Table 13 below. In all three counties, respondents were most worried about participating in any form of daily exercise.

TABLE 13: PERSONAL HEALTH CONCERNS

HEALTH CONCERNS	FOREST N (%)	ONEIDA N (%)	VILAS N (%)	COMBINED N (%)
PARTICIPATING IN ANY FORM OF DAILY EXERCISE	115 (30.7%)	158 (31.7%)	78 (32.4%)	351 (31.5%)
CONSUMING HEALTHY NUTRITIOUS FOODS	113 (30.1%)	145 (29.1%)	78 (32.2%)	336 (30.1%)
MY OWN CHRONIC DISEASE	77 (20.8%)	123 (24.9%)	63 (26.1%)	263 (23.8%)
MY OWN MENTAL HEALTH ISSUES	73 (19.6%)	131 (26.3%)	50 (20.7%)	254 (22.8%)
MY OWN DISABILITY	43 (11.6%)	87 (17.4%)	44 (18.2%)	174 (15.7%)
SMOKING CIGARETTES OR USING COMMERCIAL TOBACCO	51 (13.6%)	79 (15.9%)	43 (17.8%)	173 (15.5%)
MY OWN ALCOHOL USE	29 (7.8%)	55 (11.0%)	32 (13.3%)	116 (10.4%)
USING SUBSTANCES	26 (7.0%)	56 (11.3%)	30 (12.6%)	112 (9.8%)
ENGAGING IN SEXUAL BEHAVIORS THAT CAN LEAD TO AN STI, HIV, OR AN UNPLANNED PREGNANCY	21 (5.7%)	44 (8.8%)	30 (12.4%)	95 (8.6%)
OTHER	4 (3.8%)	18 (13.1%)	12 (16.9%)	34 (10.9%)

Participants who selected they were concerned with *Other* health issues were prompted to provide a qualitative response. There were only seven comments submitted which included: *Water PFAS (4)*, *being alone as I age*, *winter inactivity, and slipping and falling*.

Participants were asked: 'Do you feel safe at home or in our community?' Responses correspond to a 5-point scale (1=Yes, 2= No, I experience spouse or partner violence, 3= No, I experience neighborhood violence or crime, 4= No, there are harmful conditions in my home, 5= No, other). Response frequencies are shown in Table 14 below.

TABLE 14: SAFETY IN COMMUNITY

	FOREST N (%)	ONEIDA N (%)	VILAS N (%)	COMBINED N (%)
YES	349 (92.3%)	452 (89.9%)	222 (91.7%)	1023 (91.1%)
NO, I EXPERIENCE SPOUSE OR PARTNER VIOLENCE	2 (0.5%)	11 (2.2%)	4 (1.7%)	17 (1.5%)
NO, I EXPERIENCE NEIGHBORHOOD VIOLENCE OR CRIME	10 (2.6%)	18 (3.6%)	7 (2.9%)	35 (3.1%)
NO, THERE ARE HARMFUL CONDITIONS IN MY HOME	4 (1.1%)	4 (0.8%)	0 (0.0%)	8 (0.7%)
NO, OTHER.	13 (3.4%)	18 (3.6%)	9 (3.7%)	40 (3.6%)

Participants who selected **No, other** were prompted to provide a qualitative response. A total of 35 responses were recorded across all counties. The results for the statements are shown in Table 15 below.

TABLE 15: "OTHER" RESPONSES TO SAFETY IN COMMUNITY

FOREST	ONEIDA	VILAS	COMBINED
DRUGS IN THE COMMUNITY	COMMUNITY ISSUES (NEIGHBORS, SEX OFFENDERS, POLITICAL TENSIONS)	CRIME (DRUGS, GUNS)	CRIME (DRUGS, GUNS, VIOLENCE)
COMMUNITY ISSUES (NEIGHBORS, RACIAL TENSIONS)	CRIME (DRUGS, GUNS, VIOLENCE)		COMMUNITY ISSUES (NEIGHBORS, SEX OFFENDERS, RACIAL / POLITICAL TENSIONS)
GENERAL FEELING OF BEING UNSAFE	GENERAL FEELING OF BEING UNSAFE		GENERAL FEELING OF BEING UNSAFE

Participants were asked to rate the degree to which they agreed with various statements relating to healthy living. Questions are based on a 5-point scale, where 1=**Strongly disagree** and 5= **Strongly agree**. The results for the statements are shown in Table 16 below.

TABLE 16: HEALTHY LIVING CONDITIONS

	FOREST M (SD)	ONEIDA M (SD)	VILAS M (SD)	COMBINED M (SD)
TOO MANY FAST-FOOD OPTIONS	2.5 (1.17)	3.43 (1.02)	3.21 (1.04)	3.07 (1.15)
LACK OF TIME/OTHER PRIORITIES	3.39 (0.97)	3.43 (0.97)	3.32 (1.00)	3.39 (0.98)
COST OF HEALTHY FOODS	3.93 (1.05)	3.92 (0.95)	3.90 (1.02)	3.92 (1.0)
LACK OF PUBLIC PARKS/RECREATION SPACE	2.75 (1.06)	2.69 (1.10)	2.43 (1.10)	2.65 (1.10)
LACK OF ACCESS TO HEALTHY FOODS	3.47 (1.18)	3.14 (1.13)	3.05 (1.19)	3.23 (1.17)

Participants were asked to indicate which health conditions they were told they have by a health care provider. Frequency of responses are shown in Table 17 below.

TABLE 17: PERSONAL HEALTH CONDITIONS

CONDITION	FOREST N (%)	ONEIDA N (%)	VILAS N (%)	COMBINED N (%)
OVERWEIGHT OR OBESITY	142 (37.3%)	180 (35.6%)	82 (33.3%)	404 (35.5%)
ANXIETY	119 (31.2%)	157 (31.0%)	56 (22.8%)	332 (29.2%)
HYPERTENSION OR HIGH BLOOD PRESSURE	100 (26.2%)	140 (27.7%)	62 (25.2%)	302 (26.5%)
DEPRESSION	99 (26.0%)	139 (27.5%)	42 (17.1%)	280 (24.6%)

CONDITION	FOREST N (%)	ONEIDA N (%)	VILAS N (%)	COMBINED N (%)
NONE	90 (23.6%)	97 (19.2%)	70 (28.5%)	257 (22.6%)
HIGH CHOLESTEROL	88 (23.1%)	107 (21.1%)	55 (22.4%)	250 (22.0%)
DIABETES OR HIGH BLOOD SUGAR	44 (11.5%)	73 (14.4%)	28 (11.4%)	145 (12.7%)
PTSD	33 (8.7%)	45 (8.9%)	11 (4.5%)	89 (7.8%)
ADULT-ONSET ASTHMA	24 (6.3%)	46 (9.1%)	16 (6.5%)	86 (7.6%)
CANCER	23 (6.0%)	37 (7.3%)	18 (7.3%)	78 (6.9%)
OTHER	22 (5.8%)	28 (5.5%)	11 (4.5%)	61 (5.4%)
ADD OR ADHD	23 (6.0%)	36 (7.1%)	7 (2.8%)	66 (5.8)
CHRONIC OBSTRUCTIVE PULMONARY DISEASE (COPD)	10 (2.6%)	16 (3.2%)	11 (4.5%)	37 (3.3%)
ANGINA OR CORONARY ARTERY DISEASE	9 (2.4%)	16 (3.2%)	6 (2.4%)	31 (2.7%)
MEMORY LOSS	6 (1.6%)	15 (3.0%)	10 (4.1%)	31 (2.7%)
OTHER MENTAL ILLNESS	11 (2.9%)	16 (3.2%)	2 (0.8%)	29 (2.5%)
CONGESTIVE HEART FAILURE	5 (1.3%)	17 (3.4%)	4 (1.6%)	26 (2.3%)
DEMENTIA	0 (0.0%)	2 (0.4%)	2 (0.8%)	4 (0.4%)

Participants who indicated they have been diagnosed with a type of Cancer were prompted to describe which type of Cancer they have. A summary of qualitative responses is shown in Table 18 below.

TABLE 18: TYPES OF CANCER CITED BY THOSE WHO INDICATED THEY HAD CANCER

COUNTY	THEMES
FOREST	SKIN (4), UTERINE (2), BREAST (1), PROSTATE (1), THYROID (1), BLADDER (1)
ONEIDA	BREAST (5), PROSTATE (2), SKIN (2), KIDNEY (2), UTERINE (3), THYROID (1), BLADDER (1), OVARIAN (1), CERVICAL (1), TESTICULAR (1)
VILAS	PROSTATE (3), SKIN (2), BREAST (2), THYROID (1), MESOTHELIOMA (1), NON-HODGKINS LYMPHOMA (1), OVARIAN (1)
COMBINED	SKIN (7), BREAST (6), PROSTATE (4), UTERINE (3), THYROID (2), BLADDER (2), KIDNEY (2), MESOTHELIOMA (1), NON-HODGKINS LYMPHOMA (1), OVARIAN (1), CERVICAL (1), TESTICULAR (1)

Participants that selected *Other* were also asked to describe health conditions they have been diagnosed with that were not listed. Forty-seven other diseases/disorders were listed. Of those, *arthritis* was the most listed with eight responses. The only other disease/disorder that was listed more than once was *Lyme's disease*.

Participants were asked to indicate which type(s) of disability they have. Frequency of responses is shown in Table 19 below.

TABLE 19: PERSONAL DISABILITY

DISABILILTY TYPE	FOREST N (%)	ONEIDA N (%)	VILAS N (%)	COMBINED N (%)
MENTAL HEALTH	28 (7.3%)	56 (11.1%)	16 (6.5%)	100 (8.8%)
VISION	34 (8.9%)	47 (9.3%)	16 (6.5%)	97 (8.5%)
HEARING	30 (7.9%)	39 (7.7%)	21 (8.5%)	90 (7.9%)
MOBILITY	28 (7.3%)	38 (7.5%)	21 (8.5%)	87 (7.6%)
INTELLECTUAL/LEARNING	8 (2.1%)	15 (3.0%)	8 (3.3%)	31 (2.7%)
CHEMICAL/ENVIRONMENTAL SENSITIVITY	5 (1.3%)	17 (3.4%)	7 (2.8%)	29 (2.5%)
NEURODIVERSITY	5 (1.3%)	17 (3.4%)	5 (2.0%)	27 (2.4%)
AUTISM SPECTRUM	4 (1.0%)	13 (2.6%)	3 (1.2%)	20 (1.8%)
COGNITIVE	3 (0.8%)	3 (0.6%)	5 (2.0%)	11 (1.0%)
DEVELOPMENTAL	2 (0.5%)	4 (0.8%)	4 (1.6%)	10 (0.9%)
SPEECH	4 (1.0%)	3 (0.6%)	1 (0.4%)	8 (0.7%)
OTHER	10 (2.6%)	20 (4.0%)	8 (3.3%)	38 (3.3%)
I DO NOT HAVE A DISABILITY	251 (65.9%)	310 (61.3%)	171 (69.5%)	732 (3.3%)

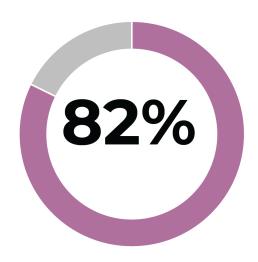
Participants who indicated they had an *Other* disability were prompted to describe which type of disability they have. Thirty other disabilities were listed. A summary of qualitative responses is provided in Table 20 below.

TABLE 20: OTHER DISABILITIES

COUNTY	THEMES
FOREST	ARTHRITIS (3), CROHN'S DISEASE (2), OTHER DEGENERATIVE DISEASES
ONEIDA	AUTOIMMUNE, ARTHRITIS, DEGENERATIVE DISEASES, AND SPINAL ISSUES
VILAS	CHRONIC PAIN & NEUROPATHY (6)
COMBINED	CHRONIC PAIN & NEUROPATHY, ARTHRITIS, CROHN'S AND OTHER DEGENERATIVE DISEASES

Participants were asked if they have an annual medical checkup. Response options were coded as 1=Yes, 2= No, too expensive, 3= No, I don't have a primary doctor, 4= No, appointment wait time, 5= No, other. Responses are shown in Table 21 and Figure 6 below.

FIGURE 6: ANNUAL CHECKUP



REPORT RECEIVING AN ANNUAL MEDICAL CHECKUP

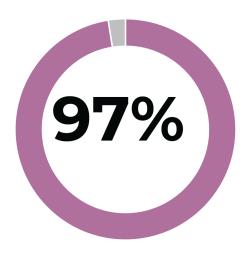
TABLE 21: ANNUAL MEDICAL CHECKUP

	YES N(%)	NO, TOO EXPENSIVE N (%)	NO, I DON'T HAVE A PRIMARY DOCTOR N (%)	NO, APPOINTMENT WAIT TIME N (%)	NO, OTHER N (%)
FOREST	332 (88.8%)	10 (2.7%)	16 (4.3%)	6 (1.6%)	10 (2.6%)
ONEIDA	404 (81.3%)	34 (6.8%)	33 (6.6%)	14 (2.8%)	12 (2.4%)
VILAS	201 (83.4%)	15 (6.2%)	15 (6.2%)	6 (2.5%)	4 (1.7%)
COMBINED	937 (82.3%)	59 (5.2%)	64 (5.6%)	26 (2.3%)	26 (2.3%)

Participants that selected *Other* were prompted to describe why they do not have an annual checkup. Ten responses were recorded. Due to the low responses, no themes were identified but overall responses included: *no doctor availability, no time to get a check-up, go only when needed, and get a check-up every other year.*

Participants were asked if they have health insurance. Responses indicated **Yes** and **No**, and whether insurance is affordable and meets their needs. Frequency of responses are shown in Table 22 and Figure 7 below.

FIGURE 7: HEALTH INSURANCE



REPORT HAVING HEALTH INSURANCE

TABLE 22: DO YOU HAVE HEALTH INSURANCE?

	FOREST N (%)	ONEIDA N (%)	VILAS N (%)	COMBINED N (%)
YES, IT MEETS MY NEEDS AND IS AFFORDABLE	270 (71.4%)	317 (63.1%)	156 (65.0%)	743 (65.3%)
YES, BUT IT DOES NOT MEET MY NEEDS	32 (8.5%)	51 (10.2%)	22 (9.2%)	105 (9.2%)
YES, BUT IT IS NOT AFFORDABLE	59 (15.6%)	93 (18.5%)	33 (13.8%)	185 (16.3%)
YES, BUT IT IS NOT AFFORDABLE AND DOES NOT MEET MY NEEDS	10 (2.6%)	30 (6.0%)	19 (7.9%)	59 (5.2%)
I DO NOT HAVE HEALTH INSURANCE	7 (1.9%)	11 (2.2%)	10 (4.2%)	28 (2.5%)

Participants that selected *I do not have health insurance* were asked to indicate the reasons that they do not have insurance. Frequency of responses are shown in Table 23.

TABLE 23: REASONS FOR NOT HAVING HEALTH INSURANCE

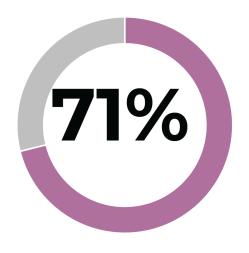
	FOREST N (%)	ONEIDA N (%)	VILAS N (%)	COMBINED N (%)
TOO EXPENSIVE	4 (1.0%)	6 (1.2%)	6 (2.4%)	16 (1.4%)
DO NOT QUALIFY FOR MEDICAL ASSISTANCE (MEDICAID)	1 (0.3%)	4 (0.8%)	5 (2.0%)	10 (0.9%)
WORK DOES NOT OFFER IT	1 (0.3%)	3 (0.6%)	5 (2.0%)	9 (0.8%)
NOT QUALIFIED FOR PLAN OFFERED AT WORK	0 (0.0%)	4 (0.8%)	5 (2.0%)	9 (0.8%)
DO NOT KNOW WHERE/HOW TO SIGN UP FOR HEALTH INSURANCE	1 (0.3%)	3 (0.6%)	4 (1.6%)	8 (0.7%)
I FEEL LIKE I DO NOT NEED IT	2 (0.5%)	1 (0.2%)	0 (0.0%)	3 (0.3%)
NA/ I HAVE INSURANCE	1 (0.3%)	0 (0.0%)	1 (0.4%)	2 (0.2%)
OTHER	0 (0.0%)	1 (0.2%)	1 (0.4%)	2 (0.2%)

TOO EXPENSIVE was the #1 reason cited for not having health insurance.

Participants who selected *Other* reasons were asked to describe why they do not have health insurance. Only one response was received indicating the respondent is part of a medical sharing organization.

Participants were asked if they have at least one dental checkup annually. Frequency of responses are shown in Table 24 and Figure 8 below.

FIGURE 8: ANNUAL DENTAL CHECKUP



REPORT RECEIVING AN ANNUAL DENTAL CHECKUP

TABLE 24: DO YOU HAVE AT LEAST AN ANNUAL DENTAL CHECKUP?

RESPONSE	FOREST N (%)	ONEIDA N (%)	VILAS N (%)	COMBINED N (%)
YES	276 (73.2%)	355 (71.1%)	178 (74.5%)	809 (71.1%)
NO, IT IS TOO EXPENSIVE	36 (9.5%)	63 (12.6%)	23 (9.6%)	122 (10.7%)
NO, I DON'T HAVE A PRIMARY DENTIST	33 (8.8%)	47 (9.4%)	23 (9.6%)	103 (9.1%)
NO, I DON'T HAVE TIME/ MISS APPOINTMENTS	10 (2.7%)	14 (2.8%)	6 (2.5%)	30 (2.6%)
NO, OTHER REASON	22 (5.8%)	20 (4.0%)	9 (3.8%)	51 (4.5%)

Participants that selected **No, other reason** were asked to describe other reasons that they do not have annual dental checkups. Thirty-four responses were received. Across all three counties, the same themes emerged: **No / limited dental appointment availability** or the respondent **has dentures / has implants so no need to see a dentist**.

Participants were asked if they have dental insurance. Response items captured whether or not they had insurance, and whether the insurance was affordable and met their needs. Responses are shown in Table 25 below.

TABLE 25: DENTAL INSURANCE

RESPONSE	FOREST N (%)	ONEIDA N (%)	VILAS N (%)	COMBINED N (%)
YES, IT MEETS MY NEEDS AND IS AFFORDABLE	212 (56.4%)	251 (50.1%)	120 (50.0%)	583 (51.2%)
YES, BUT IT DOES NOT MEET MY NEEDS	50 (13.3%)	77 (15.4%)	28 (11.7%)	155 (13.6%)
YES, BUT IT IS NOT AFFORDABLE	22 (5.9%)	39 (7.8%)	13 (5.4%)	74 (6.5%)
YES, BUT IT IS NOT AFFORDABLE AND DOES NOT MEET MY NEEDS	17 (4.5%)	18 (3.6%)	7 (2.9%)	42 (3.7%)
I DO NOT HAVE HEALTH INSURANCE	75 (19.9%)	116 (23.2%)	72 (30.0%)	263 (23.1%)

Participants who indicated they did not have dental insurance were asked why. Responses are shown in Table 26 below.

TABLE 26: REASONS FOR NOT HAVING DENTAL INSURANCE

	FOREST N (%)	ONEIDA N (%)	VILAS N (%)	COMBINED N (%)
TOO EXPENSIVE	34 (8.9%)	68 (13.4%)	42 (17.1%)	144 (12.7%)
I FEEL LIKE I DO NOT NEED IT	15 (3.9%)	24 (4.7%)	11 (4.5%)	50 (4.4%)
WORK DOES NOT OFFER IT	12 (3.1%)	17 (3.4%)	17 (6.9%)	46 (4.0%)

	FOREST N (%)	ONEIDA N (%)	VILAS N (%)	COMBINED N (%)
DO NOT QUALIFY FOR MEDICAL ASSISTANCE (MEDICAID)	10 (2.6%)	19 (3.8%)	10 (4.1%)	39 (3.4%)
NOT QUALIFIED FOR PLAN OFFERED AT WORK	2 (0.5%)	13 (2.6%)	14 (5.7%)	29 (2.5%)
DO NOT KNOW WHERE/HOW TO SIGN UP FOR HEALTH INSURANCE	2 (0.5%)	11 (2.2%)	5 (2.0%)	18 (1.6%)
OTHER	8 (2.1%)	16 (3.2%)	7 (2.8%)	31 (2.7%)

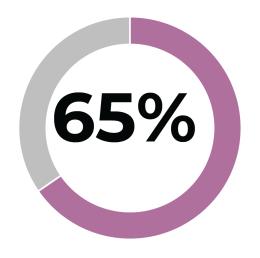
Participants that selected *Other* were asked to describe other reasons that they do not have annual dental checkups. Eighteen responses were received. Not enough comments were received per county to conduct qualitative analysis. Most comments cited either *cost or the lack of need for dental care*. Qualitative responses are summarized in Table 27.

TABLE 27: 'OTHER' REASONS FOR NOT HAVING DENTAL INSURANCE (COMBINED)

THEME
USE FSA / PAY OUT OF POCKET
INSURANCE DOESN'T PROVIDE ENOUGH COVERAGE FOR THE COST
SELF / FAMILY WORK AT DENTIST
WEAR DENTURES

Participants were asked if they have access to a mental health care provider when necessary (e.g. counselor / social worker / therapist / etc.). The results are presented in Table 28 and Figure 9.

FIGURE 9: MENTAL HEALTH CARE PROVIDER



REPORT HAVING ACCESS TO MENTAL HEALTH CARE PROVIDER

TABLE 28: ACCESS TO MENTAL HEALTH CARE PROVIDER

	FOREST N (%)	ONEIDA N (%)	VILAS N (%)	COMBINED N (%)
YES	241 (65.7%)	332 (67.2%)	144 (61.0%)	717 (65.4%)
NO	126 (34.3%)	162 (32.8%)	92 (39.0%)	380 (34.6%)

Participants who indicated they did not have access to a mental health provider were asked why not. Frequency of responses are presented in Table 29. The biggest reasons participants don't have access to a mental health care provider were *long waiting lists* and *not knowing where to get help*.

TABLE 29: REASONS FOR NO MENTAL HEALTH CARE PROVIDER

	FOREST N (%)	ONEIDA N (%)	VILAS N (%)	COMBINED N (%)
TOO LONG OF A WAIT LIST	51 (13.4%)	69 (13.6%)	40 (16.3%)	160 (14.1%)
DON'T KNOW WHERE TO GET HELP FROM	42 (11.0%)	39 (7.7%)	34 (13.8%)	115 (10.1%)
NO TIME	30 (7.9%)	31 (6.1%)	18 (7.3%)	79 (6.9%)
NOT COVERED BY INSURANCE	13 (3.4%)	30 (5.9%)	12 (4.9%)	55 (4.8%)
NO INSURANCE	5 (1.3%)	12 (2.5%)	15 (6.1%)	32 (2.8%)
STIGMA	14 (3.7%)	10 (2.0%)	4 (1.6%)	28 (2.5%)
OTHER	21 (5.5%)	35 (6.9%)	22 (8.9%)	78 (6.9%)

TOO LONG OF A WAITLIST was cited as #1 reason for not having a mental health care provider.

Participants were asked to rate their own mental health on a scale of 5-point scale where 1=*Very unhealthy* and 5= *Very healthy*. The results are summarized in Table 30.

TABLE 30: PERSONAL MENTAL HEALTH RATING

	VERY UNHEALTHY	UNHEALTHY	SOMEWHAT HEALTHY	HEALTHY	VERY HEALTHY	M (SD)
FOREST	7 (1.9%)	22 (5.9%)	132 (35.1%)	152 (40.4%)	63 (16.8%)	2.36 (0.89)
ONEIDA	4 (0.8%)	36 (7.2%)	176 (35.3%)	193 (38.7%)	90 (18.0%)	2.34 (0.88)
VILAS	0 (0.0%)	12 (5.0%)	77 (32.2%)	95 (39.7%)	55 (23.0%)	2.19 (0.85)
COMBINED	11 (1.0%)	70 (6.2%)	385 (33.8%)	440 (38.7%)	208 (18.3%)	2.31 (0.88)

Participants were asked 'Are you aware of mental health resources in our community?' The results are presented in Table 31 below.

TABLE 31: AWARENESS OF MENTAL HEALTH RESOURCES

	FOREST	ONEIDA	VILAS	COMBINED
YES	227 (60.9%)	343 (69.0%)	143 (59.1%)	713 (62.7%)
NO	146 (39.1%)	154 (31.0%)	99 (40.9%)	399 (37%)

Participants were asked 'How many times per week do you feel isolated or alone?' Frequency of responses are presented in Table 32.

TABLE 32: OCCURENCE OF FEELINGS OF ISOLATION

	0 TIMES	1 TIME	2-3 TIMES	4-5 TIMES	6-7 TIMES	M (SD)
FOREST	204 (54.3%)	77 (20.5%)	64 (17.0%)	19 (5.1%)	12 (3.2%)	2.74 (1.99)
ONEIDA	249 (49.8%)	94 (18.8%)	95 (19.0%)	41 (8.2%)	21 (4.2%)	2.99 (2.09)
VILAS	148 (61.2%)	46 (19.0%)	32 (13.2%)	8 (3.3%)	8 (3.3%)	2.46 (1.93)
COMBINED	601 (52.8%)	217 (19.1%)	191 (16.8%)	68 (6.0%)	41 (3.6%)	2.79 (2.03)

Participants were asked to report how many days they, or a member of their household, experienced mental health problems that interfere with usual daily activities within the past month. Frequency of responses are summarized below in Table 33 (personal/myself) and Table 34 (family or friend).

TABLE 33: OCCURRENCE OF MENTAL HEALTH ISSUES (PERSONAL/MYSELF)

	0 DAYS	1-7 DAYS	8-14 DAYS	15-21 DAYS	22-28 DAYS	29-31 DAYS	M (SD)
FOREST	195 (52.7%)	116 (31.4%)	27 (7.3%)	16 (4.3%)	13 (3.5%)	3 (0.8%)	1.77 (1.08)
ONEIDA	262 (53.5%)	155 (31.6%)	42 (8.6%)	20 (4.1%)	7 (1.4%)	4 (0.8%)	1.71 (0.98)
VILAS	144 (60.5%)	70 (29.4%)	11 (4.6%)	5 (2.1%)	5 (2.1%)	3 (1.2%)	1.60 (0.98)
COMBINED	601 (52.8%)	341 (30.0%)	80 (7.0%)	41 (3.6%)	25 (2.2%)	10 (0.9%)	1.70 (1.02)

TABLE 34: OCCURENCE OF MENTAL HEALTH ISSUES (FAMILY OR FRIEND)

	0 DAYS	1-7 DAYS	8-14 DAYS	15-21 DAYS	22-28 DAYS	29-31 DAYS	M (SD)
FOREST	164 (48.5%)	106 (31.4%)	29 (8.6%)	20 (5.9%)	12 (3.6%)	7 (2.1%)	1.91 (1.21)
ONEIDA	209 (48.2%)	142 (32.7%)	32 (7.4%)	25 (5.8%)	11 (2.5%)	15 (3.5%)	1.92 (1.25)
VILAS	125 (56.6%)	68 (30.8%)	14 (6.3%)	3 (1.14%)	3 (1.14%)	8 (3.6%)	1.71 (1.14)
COMBINED	498 (43.8%)	316 (27.8%)	75 (6.6%)	48 (4.2%)	26 (2.3%)	30 (2.6%)	1.87 (1.21)

Participants were asked if there was a time where they wanted to seek help from a professional about emotional problems such as stress depression, excess worrying, etc. within the past 12 months. The results are presented in Table 35 below.

TABLE 35: WANTING TO SEEK HELP FOR EMOTIONAL PROBLEMS

	FOREST N (%)	ONEIDA N (%)	VILAS N (%)	COMBINED N (%)
YES	141 (37.5%)	206 (41.1%)	76 (31.3%)	423 (37.8%)
NO	235 (62.5%)	295 (58.9%)	167 (68.7%)	697 (62.2%)

Participants who responded that they wanted to seek help from a professional about emotional problems such as stress depression, excess worrying, etc. within the past 12 months were asked if they did seek help. Results are presented in Table 36.

TABLE 36: WANTED HELP, SOUGHT HELP FOR EMOTIONAL PROBLEMS

	FOREST N (%)	ONEIDA N (%)	VILAS N (%)	COMBINED N (%)
YES	73 (51.8%)	114 (55.6%)	34 (44.7%)	221 (52.4%)
NO	68 (48.2%)	91 (44.4%)	42 (55.3%)	201 (47.6%)

HALF of those who reported wanting to seek help for emotional problems, sought help.

Participants who responded that they wanted to seek help from a professional about emotional problems such as stress, depression, excess worrying, etc. within the past 12 months were asked if they did seek help. Those who responded that they did not seek help were asked why. Frequency of responses are presented in Table 37.

TABLE 37: REASONS FOR WANTING, BUT NOT SEEKING HELP FOR EMOTIONAL PROBLEMS

	FOREST N (%)	ONEIDA N (%)	VILAS N (%)	COMBINED N (%)
DON'T KNOW WHERE TO GET HELP FROM	31 (8.1%)	28 (5.5%)	8 (3.3%)	67 (5.9%)
TOO LONG OF A WAIT LIST	31 (8.1%)	37 (7.3%)	16 (6.5%)	84 (7.4%)
NOT COVERED BY MY TYPE OF INSURANCE	8 (2.1%)	23 (4.5%)	10 (4.1%)	41 (3.6%)
NO TIME	22 (5.8%)	35 (6.9%)	15 (6.1%)	72 (6.3%)
STIGMA	17 (4.5%)	12 (2.4%)	7 (2.8%)	36 (3.2%)
OTHER	8 (2.1%)	22 (4.3%)	12 (4.9%)	42 (3.7%)

Participants that selected *Other* were asked to describe what prevented them from seeking help. A total of 28 provided a response but most of those responses fit within the check boxes listed above. The ones that didn't included: *handled it myself with my friends / support* and *anxiety about the appointment / confidentiality*.

Participants were asked if they seriously thought about committing suicide within the past 12 months. The results are presented in Table 38.

TABLE 38: SERIOUSLY CONSIDERED SUICIDE

	FOREST N (%)	ONEIDA N (%)	VILAS N (%)	COMBINED N (%)
YES	24 (6.5%)	45 (8.9%)	18 (7.3%)	87 (7.9%)
NO	346 (90.8%)	443 (87.5%)	223 (90.7%)	1012 (92.1%)

Participants were asked about barriers to eating nutritious foods. Frequency of responses are summarized in Table 39.

TABLE 39: BARRIERS TO EATING NUTRITIOUS FOODS

	FOREST N (%)	ONEIDA N (%)	VILAS N (%)	COMBINED N (%)
IT IS TOO EXPENSIVE	191 (50.1%)	207 (40.9%)	110 (44.7%)	508 (44.6%)
NO BARRIERS KEEP ME FROM EATING NUTRITIOUS FOODS	111 (29.1%)	178 (35.2%)	90 (36.6%)	379 (33.3%)
IT SPOILS TOO FAST	80 (21%)	97 (19.2%)	40 (16.3%)	217 (19.1%)
I DON'T KNOW HOW TO PREPARE HEALTHY MEALS	47 (12.3%)	59 (11.7%)	18 (7.3%)	124 (10.9%)
IT DOESN'T TASTE GOOD	26 (6.8%)	44 (8.7%)	23 (9.3%)	93 (8.2%)
I DON'T KNOW WHAT FOODS ARE CONSIDERED HEALTHY	21 (5.5%)	41 (8.1%)	22 (8.9%)	84 (7.4%)
I DON'T HAVE ACCESS TO GROCERY STORES	38 (10.0%)	7 (1.4%)	5 (2.0%)	50 (4.4%)
I DON'T HAVE RELIABLE TRANSPORTATION TO GET GROCERIES	4 (1.0%)	5 (1.0%)	4 (1.6%)	13 (1.1%)
OTHER	32 (8.4%)	43 (8.5%)	16 (6.5%)	91 (8.0%)

Participants that selected *Other* were asked to describe what prevented them from eating nutritious foods. Seventy-four participants provided a response but most of those responses fit within the check boxes listed above (too expensive, no access to stores, spoils too fast). Three themes emerged from the remaining comments: *the amount of time it takes to prepare healthy foods (shopping & prep), lack of healthy options at stores and restaurants*, and *easier access to / people prefer unhealthy choices (sweets, carbs, salt)*.

Participant were asked if they receive food stamps or support from other food assistance programs. The results are summarized in Table 40 and Figure 10 below.

FIGURE 10: PERCENT RECIEVING FOOD ASSISTANCE



TABLE 40: FOOD ASSISTANCE PROGRAMS

ARE YOU ON FOOD ASSISTANCE PROGRAMS OR FOOD STAMPS?	FOREST N (%)	ONEIDA N (%)	VILAS N (%)	COMBINED N (%)
YES	56 (14.9%)	112 (22.4%)	33 (13.4%)	201 (18.0%)
NO	376 (85.1%)	388 (76.7%)	205 (83.3%)	913 (82.0%)

Participants were asked if they were aware of food assistance programs. Results are summarized in Table 41.

TABLE 41: FOOD ASSISTANCE PROGRAMS

ARE YOU AWARE OF RESOURCES TO ASSIST WITH FOOD SECURITY?	FOREST N (%)	ONEIDA N (%)	VILAS N (%)	COMBINED N (%)
YES	195 (52.1%)	329 (66.3%)	165 (68.5%)	689 (62.0%)
NO	179 (47.9%)	167 (33.7%)	76 (31.5%)	422 (38.0%)

Participants were asked to rate the degree to which they are concerned about the several social/economic factors. Response options were based on a 5-point scale where 1=*Not concerned at all* and 5= *Extremely concerned*. The results are provided in Table 42 below.

TABLE 42: SOCIAL AND ECONOMIC CONCERNS

	FOREST M (SD)	ONEIDA M (SD)	VILAS M (SD)	COMBINED M (SD)
AGING RELATED HEALTH CONCERNS	2.47 (1.08)	2.46 (1.10)	2.73 (1.09)	2.52 (1.09)
RACE/ETHNIC RELATIONS, IMMIGRATION, HARASSMENT, DISCRIMINATION	2.18 (1.20)	2.27 (1.26)	2.31 (1.33)	2.25 (1.26)
FAMILY ISSUES (DIVORCE, PARENTING)	2.00 (1.18)	2.01 (1.19)	2.08 (1.24)	2.02 (1.19)
CAREGIVER SUPPORT	2.10 (1.25)	2.18 (1.31)	2.25 (1.25)	2.17 (1.27)
CHILD CARE	2.26 (1.45)	2.19 (1.41)	2.22 (1.42)	2.22 (1.42)
NOT ENOUGH MONEY FOR HOUSING, HOUSEHOLD EXPENSES AND FOOD	2.30 (1.27)	2.49 (1.35)	2.40 (1.31)	2.41 (1.31)
SOCIAL OR COMMUNITY SUPPORT	2.15 (1.20)	2.14 (1.21)	2.17 (1.24)	2.15 (1.22)
VIOLENCE IN THE HOME OR THE COMMUNITY	1.83 (1.11)	1.89 (1.20)	1.95 (1.32)	1.88 (1.20)
OTHER	1.36 (1.01)	2.11 (1.52)	2.00 (1.47)	1.81 (1.38)

Participants that selected *Other* were asked to describe what *other social / economic factors they are* concerned about. Of the 23 responses provided, the only theme that emerged was *AODA issues (drunk drivers, drugs in the community)*.

Participants were asked to describe their current living situation. The results are presented in Table 43.

TABLE 43: LIVING SITUATION

	FOREST N (%)	ONEIDA N (%)	VILAS N (%)	COMBINED N (%)
I HAVE HOUSING AND I'M NOT WORRIED ABOUT LOSING IT	335 (89.1%)	421 (85.1%)	209 (86.7%)	965 (86.8%)
I HAVE HOUSING AND I'M WORRIED ABOUT LOSING IT	31 (8.2%)	58 (11.7%)	26 (10.8%)	115 (10.3%)
I DO NOT HAVE HOUSING (STAYING WITH OTHERS, IN A HOTEL, IN A SHELTER)	9 (2.4%)	15 (3.0%)	6 (2.5%)	30 (2.7%)
I DO NOT HAVE HOUSING (LIVING ON THE STREET, PARK, OR CAR.	1 (0.3%)	1 (0.2%)	0 (0.0%)	2 (0.2%)

Participants were asked to describe their current housing situation. Results are presented in Table 44.

TABLE 44: HOUSING SITUATION

	FOREST N (%)	ONEIDA N (%)	VILAS N (%)	COMBINED N (%)
OWN A HOUSE/TOWNHOME/CONDO	278 (74.3%)	348 (70%)	198 (81.8%)	824 (74.0%)
RENTING	54 (14.4%)	83 (16.7%)	20 (8.3%)	157 (14.1%)
STAYING WITH FAMILY/FRIENDS	28 (7.5%)	38 (7.6%)	18 (7.4%)	84 (7.5%)
HOMELESS	1 (0.3%)	6 (1.2%)	1 (0.4%)	8 (0.7%)
LIVING IN A MOTEL	1 (0.3%)	0 (0.0%)	0 (0.0%)	1 (0.1%)
TEMPORARY SHELTER	0 (0.0%)	7 (1.4%)	0 (0.0%)	7 (0.6%)
OUTSIDE/STREET	3 (0.8%)	4 (0.8%)	0 (0.0%)	7 (0.6%)
MOBILE HOME	3 (0.8%)	7 (1.4%)	2 (0.8%)	12 (1.1%)
CAR/CAMPER	1 (0.3%)	0 (0.0%)	1 (0.4%)	2 (0.2%)
OTHER	5 (1.3%)	4 (0.8%)	2 (.08%)	11 (1.0%)

Participants that selected *Other* were asked to describe their housing situation. No themes emerged as the handful of written-in responses were captured in the pre-selected options.

Participants were asked if their current housing situation met their needs. Results are summarized in Table 45 and Figure 11 below.

FIGURE 11: PERCENT THAT HAVE ADEQUATE HOUSING

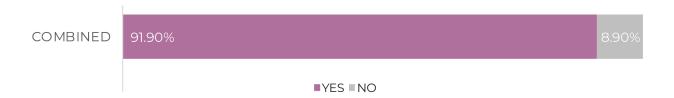


TABLE 45: DOES YOUR CURRENT HOUSING MEET YOUR NEEDS

	FOREST N (%)	ONEIDA N (%)	VILAS N (%)	COMBINED N (%)
YES	353 (93.4%)	439 (88.5%)	226 (93.0%)	1018 (91.1%)
NO	25 (6.6%)	57 (11.5%)	17 (7.0%)	99 (8.9%)

Participants who said their current housing situation does not meet their current housing needs were asked to explain why not. Frequency of responses are summarized in Table 46.

TABLE 46: REASONS HOUSING DOESN'T MEET CURRENT NEEDS

	FOREST N (%)	ONEIDA N (%)	VILAS N (%)	COMBINED N (%)
HEALTH CONCERNS	3 (0.8%)	8 (1.6%)	4 (1.6%)	15 (1.3%)
SAFETY CONCERNS	5 (1.3%)	11 (2.2%)	8 (3.3%)	24 (2.1%)
TOO SMALL	14 (3.7%)	29 (5.7%)	8 (3.3%)	51 (4.5%)
TOO BIG	1 (0.3%)	1 (0.2%)	0 (0.0%)	2 (0.2%)
TOO EXPENSIVE	8 (2.1%)	20 (4.0%)	9 (3.7%)	37 (3.3%)
OTHER	4 (1.0%)	11 (2.2%)	3 (1.2%)	18 (1.6%)

Participants that selected *Other* were asked to describe why their current housing doesn't meet their needs. Seventeen responses were provided. Three themes emerged: *repairs needed, current situation / temporary (shelter / with family or friends)*, and *amenities at the home doesn't suit resident's needs*.

Participants were asked if they were concerned about not having stable housing within the next 3 months? The results are presented in Table 47.

TABLE 47: STABLE HOUSING

	FOREST N (%)	ONEIDA N (%)	VILAS N (%)	COMBINED N (%)
YES	35 (9.5%)	66 (13.5%)	22 (9.1%)	123 (11.2%)
NO	332 (90.5%)	424 (86.5%)	220 (90.9%)	976 (88.8%)

Participants were asked to indicate whether their family receives housing assistance. Results are shown in Table 48.

TABLE 48: HOUSING ASSISTANCE

	FOREST N (%)	ONEIDA N (%)	VILAS N (%)	COMBINED N (%)
YES	32 (8.7%)	41 (8.5%)	21 (8.5%)	94 (8.6%)
NO	323 (88.0%)	429 (84.8%)	212 (86.2%)	964 (88.3%)
I DON'T KNOW	12 (3.3%)	13 (2.7%)	9 (3.7%)	34 (3.1%)

Participants were asked to indicate which housing issues or problems they have experienced in the past 12 months.. Frequency of responses are shown in Table 49.

TABLE 49: HOUSING ISSUES

	FOREST N (%)	ONEIDA N (%)	VILAS N (%)	COMBINED N (%)
MISSED MORTGAGE/RENTAL PAYMENTS	18 (4.7%)	41 (8.1%)	17 (6.9%)	76 (6.7%)
EVICTED	12 (3.1%)	10 (2.0%)	6 (2.4%)	28 (2.5%)
LOST HOME DUE TO FORECLOSURE OR FORCED SALE	9 (2.4%)	17 (3.4%)	9 (3.7%)	35 (3.1%)
STRUCTURAL/PLUMBING/ELECTRICAL/ HEATING PROBLEMS	62 (16.3%)	100 (19.8%)	49 (19.9%)	211 (18.5%)
MISSED HEAT, ELECTRICITY OR OTHER UTILITY BILLS	40 (10.5%)	54 (10.7%)	23 (9.3%)	117 (10.3%)
UNABLE TO MAKE REPAIRS DUE TO COSTS	57 (15.0%)	84 (16.6%)	47 (19.1%)	188 (16.5%)
I HAVE NOT EXPERIENCED ANY HOUSING PROBLEMS IN THE LAST YEAR	223 (58.5%)	263 (52.0%)	142 (57.7%)	628 (55.2%)
OTHER	15 (3.9%)	22 (4.3%)	10 (4.1%)	47 (4.1%)

Participants who indicated they experienced *Other housing problems / issues* were asked to elaborate. Twenty responses were unique from the check box list provided to respondents. Three themes emerged: *Unable to find contractors to conduct home repairs, safety issues within the home (black mold, routine maintenance needed), and an increase in rent and taxes.*

Participants were asked: 'What do you think our community could provide to help solve housing related issues?' Suggestions to improve housing related issues are shown in Table 50.

TABLE 50: SUGGESTIONS TO IMPROVE HOUSING RELATED ISSUES

QUESTION: WHAT DO YOU THINK OUR COMMUNITY COULD PROVIDE, TO HELP SOLVE HOUSING RELATED ISSUES? EXAMPLES ARE UNEDITED OTHER THAN TO REMOVE REFERENCES TO SPECIFIC NAMES OR TITLES					
THEME	FOREST	ONEIDA	VILAS	COMBINED	EXAMPLES
MORE AFFORDABLE HOUSING	40 (27%)	126 (44%)	56 (44%)	222 (40%)	PROVIDE MORE AFFORDABLE HOUSING RENT CONTROL WE DESPERATELY NEED MORE AFFORDABLE LOW TO MID INCOME HOUSING OPTIONS IF WE WANT TO REMEDY THE LACK OF AVAILABLE SKILLED WORKFORCE.

QUESTION: WHAT DO YOU THINK OUR COMMUNITY COULD PROVIDE, TO HELP SOLVE HOUSING RELATED ISSUES?

EXAMPLES ARE UNEDITED OTHER THAN TO REMOVE REFERENCES TO SPECIFIC NAMES OR TITLES						
THEME	FOREST	ONEIDA	VILAS	COMBINED	EXAMPLES	
MORE HOUSING NEEDED	48 (32%)	53 (19%)	18 (14%)	119 (21%)	BUILDING SINGLE AND/OR SINGLE-FAMILY UNITS. BUILD MID-LEVEL MULTI-FAMILY HOUSING. BUILD APARTMENTS. THERE IS NOT ENOUGH HOMES OR APARTMENTS FOR OUR GROWING COMMUNITIES	
LOW-INCOME / INCOME-BASED HOUSING NEEDED	13 (9%)	38 (13%)	15 (12%)	66 (12%)	WE COULD PROVIDE MORE LOW-INCOME APARTMENT BUILDING. ONES FOR LOW-INCOME INDIVIDUALS, NOT JUST FOR LOW INCOME FAMILIES. MORE AVAILABILITY OF HOMES THAT QUALIFY FOR SUBSIDIZED PROGRAMS, LOWER RENT OPTIONS NEED MORE AFFORDABLE HOUSING FOR LOWER INCOME FAMILIES/PEOPLE	
POLITICAL / LAW / GOVERNMENT ISSUES	8 (5%)	28 (10%)	7 (6%)	43 (8%)	REBATE PROGRAMS TAX INCENTIVES FOR ENERGY EFFICIENT BUILDING HOUSING SUPPLIES REMOVE REGULATORY BARRIERS AND ALLOW US TO BUILD MORE APARTMENTS AND HOUSES WHILE ALSO REDUCING THE COST AND TIME IT TAKES TO BUILD THEM. PREFERENTIAL HYDROPOWER POLICIES, BETTER SUPPORT POLICIES	
RESOURCE CENTER (ANSWER HOUSING QUESTIONS)	17 (11%)	37 (13%)	9 (7%)	63 (11%)	A GROUP OF PEOPLE TO ANSWER QUESTIONS (REPAIRS RESOURCES) INSTEAD OF ONLINE APPLICATIONS FOR HEATING ASSISTANCE HAVING A PERSON AVAILABLE TO HELP THAT IS IN-PERSON NOT OVER THE INTERNET OR HARD TO GET AHOLD OF ANYONE. MORE SUPPORT AND OPTIONS TO HELP PEOPLE THAT DON'T HAVE HOUSING.	

QUESTION: WHAT DO YOU THINK OUR COMMUNITY COULD PROVIDE, TO HELP SOLVE HOUSING RELATED ISSUES?

EXAMPLES ARE UNEDITED OTHER THAN TO REMOVE REFERENCES TO SPECIFIC NAMES OR TITLES					
THEME	FOREST	ONEIDA	VILAS	COMBINED	EXAMPLES
CONTRACTORS, LIMITED OPTIONS	7 (5%)	7 (5%) 8 (3%) 7 (6%)	7 (6%)	22 (4%)	IT WOULD BE HELPFUL TO HAVE ACCESS TO A LIST OF CONTRACTORS, SERVICE PROVIDERS WHO CAN HELP WITH HOME REPAIRS AND THE DISTANCE THEY ARE WILLING TO TRAVEL. HIRE SOME MAINTENANCE WORKERS
LIMITED OPTIONS					TO HELP SOMEONE REPAIR THE HOME CHEAPLY.
					REPAIR SERVICES OR GENERAL UPKEEP SERVICES
HELP WITH HOME REPAIRS, RENT 8 (5%)					HOUSING REPAIR ASSISTANCE, APPLIANCE ASSISTANCE-FURNACE- ELECTRICAL ETC. WINDOW/INSULATION/ ROOFING/SIDING ASSISTANCE
	8 (5%)	32 (11%)	16 (13%)	56 (10%)	A LOW COST/ VOLUNTEER SERVICE TO HELP PEOPLE FIX THING WITH HOME SUCH AS SEPTIC PLUMPING, ELECTRICAL, ROOFING
					MORE HOUSING, FUNDS FOR HOME MAINTENANCE, PROGRAMS TO UPGRADE DOORS, WINDOWS, ETC.
SYSTEMS AND					FIX UP SOME OF THE OLDER HOMES IN TOWN. TAKE ACTION TO CLEAN ALL YARDS IN TOWN. ADD SIDEWALKS THROUGHOUT THE COMMUNITY.
RESOURCES TO SUPPORT INFRASTRUCTURE	6 (4%)	6 (4%) 14 (5%)	5 (4%)	25 (4%)	WE NEED PEOPLE WHO ARE WILLING TO ACTUALLY INVEST IN AFFORDABLE HOUSING.
					CONTACT OWNERS OF UNOCCUPIED HOMES TO SEE IF THEY COULD BE MADE INTO AFFORDABLE RENTALS.
EXPANDED OPTIONS FOR THOSE WHO					PROVIDE MORE OPTIONS FOR INDIGENT AND DISPLACED FAMILIES. BETTER INTEGRATION OF RESOURCES
NEED SHORT TERM HOUSING ASSISTANCE	2 (1%)	7 (2%)	5 (4%)	14 (3%)	SHORT-TERM AFFORDABLE HOUSING WHILE WAITING FOR ASSISTANCE.
ASSISTANCE					TEMPORARY LIVING

QUESTION: WHAT DO YOU THINK OUR COMMUNITY COULD PROVIDE, TO HELP SOLVE HOUSING RELATED ISSUES?

EXAMPLES ARE UNEDITED OTHER THAN TO REMOVE REFERENCES TO SPECIFIC NAMES OR TITLES					
THEME	FOREST	ONEIDA	VILAS	COMBINED	EXAMPLES
TAX ISSUES	3 (2%)	5 (2%)	1 (1%)	9 (2%)	BETTER FIRE PROTECTION TO REDUCE PROPERTY TAXES. STABLE PROPERTY EVALUATIONS AND TAX BASE FOR LOW & MIDDLE CLASS RESIDENTS OFFER TAX INCENTIVES FOR LANDLORDS WHO PUT MONEY INTO UPGRADING THEIR HOUSES.
ELIMINATE VACATION RENTAL HOMES	1 (1%)	5 (2%)	7 (6%)	13 (2%)	FOR PEOPLE TO STOP SELLING HOUSES AND LAND UP HERE TO FLATLANDERS TO USE AS SECONDARY HOMES INSTEAD OF SELLING TO PEOPLE WHO HAVE CHILDREN TO KEEP OUR SCHOOLS OPEN. LESS VACATION RENTALS AND MORE HOUSING OPPORTUNITIES FOR LONG TERM RESIDENTS OF THE AREA PROHIBIT SOME SHORT-TERM RENTAL OF HOMES (FOR VACATIONERS) SO HOMES CAN BE RENTED BY THOSE WHO WILL WORK IN THE AREA.
EXPANDED HOUSING OPTIONS FOR ELDERLY/ DISABLED	17 (11%)	18 (10%)	8 (6%)	43 (8%)	BETTER HOUSING FOR DISABLED AND ELDERLY ASSISTED LIVING MORE HANDICAP ACCESSIBLE HOUSING MORE AFFORDABLE, SAFE HOUSING OPTIONS FOR THE ELDERLY POPULATION
BETTER WAGES AND BENEFITS	5 (3%)	9 (3%)	4 (3%)	18 (3%)	BETTER JOBS WITH BETTER BENEFITS MORE JOBS MORE AFFORDABLE, THE JOB MARKET IS LOW PAYING HERE
OTHER COMMENTS THAT DID NOT FIT INTO A THEME	10 (7%)	14 (5%)	6 (5%)	30 (5%)	GIVE ALL PEOPLE THE CHANCE ALL THE HOUSES ON OUR STREET NEED TO RUN HOSES OUTSIDE IN THE WINTER TO PREVENT FROZEN PIPES. LOTS OF WATER WASTE!!! BE MORE OPEN TO WHAT IS OUT THERE TO HELP PEOPLE

Participants were asked if they have reliable transportation. Responses are shown in Table 51 and Figure 12 below.

FIGURE 12: PERCENT WHO HAVE RELIABLE TRANSPORTATION



TABLE 51: RELIABLE TRANSPORTATION

	FOREST N (%)	ONEIDA N (%)	VILAS N (%)	COMBINED N (%)
YES	364 (96.6%)	462 (93.1%)	226 (93.0%)	1052 (94.3%)
NO	13 (3.4%)	34 (6.69%)	17 (7.0%)	64 (5.7%)

Participants that selected $\it No$ were asked to select the most appropriate response option corresponding to the reason which they do not have car insurance. Responses are shown in Table 52. below.

TABLE 52: REASONS FOR NOT HAVING RELIABLE TRANSPORTATION

	FOREST N (%)	ONEIDA N (%)	VILAS N (%)	COMBINED N (%)
DIFFICULTY PAYING FOR CAR SERVICE/ REPAIRS	7 (1.8%)	20 (4.0%)	10 (4.1%)	37 (3.3%)
DIFFICULTY PAYING FOR GASOLINE	6 (1.6%)	21 (4.2%)	7 (2.8%)	34 (3.0%)
DIFFICULTY PAYING FOR CAR INSURANCE	2 (0.5%)	17 (3.4%)	7 (2.8%)	26 (2.3%)
DIFFICULTY USING THE PUBLIC TRANSPORTATION SERVICE	4 (1.0%)	3 (0.6%)	4 (1.6%)	11 (1.0%)
DIFFICULTY PAYING FOR TRAFFIC FINES	1 (0.3%)	5 (1.0%)	4 (1.6%)	10 (0.9%)
SAFETY CONCERNS	6 (1.6%)	2 (0.4%)	1 (0.4%)	9 (0.8%)
HAVE A RIDE TO WORK/SCHOOL	1 (0.3%)	3 (0.6%)	3 (1.2%)	7 (0.6%)
OTHER	3 (0.8%)	7 (1.4%)	3 (1.2%)	13 (1.1%)

Participants that selected *Other* were asked to describe additional reasons for not having reliable transportation. Most comments were centered around *the cost of owing a vehicle* but a review of the comments did not identify any themes.

Participants were asked: 'Please rate the degree to which you're concerned about environmental health factors in our community.' Responses were based on a 5-point scale where 1=Not concerned at all and 5= Extremely concerned. Responses are shown in Table 53.

TABLE 53: CONCERN WITH ENVIRONMENTAL HEALTH FACTORS

	FOREST M (SD)	ONEIDA M (SD)	VILAS M (SD)	COMBINED M (SD)
UNCLEAN/UNSAFE DRINKING WATER (PFAS, LEAD, NITRATES, ARSENIC, BACTERIA)	1.88 (1.14)	2.73 (1.37)	2.26 (1.31)	2.34 (1.34)
RADON	1.82 (1.03)	2.14 (1.18)	2.13 (1.21)	2.03 (1.14)
MOSQUITO CARRIED DISEASES	2.08 (1.05)	2.35 (1.13)	2.40 (1.24)	2.27 (1.14)
TICKBORNE DISEASES	2.62 (1.14)	2.94 (1.17)	2.92 (1.17)	2.83 (1.17)
POOR AIR QUALITY	1.74 (1.12)	2.10 (1.25)	1.88 (1.24)	1.93 (1.22)
UNSAFE/UNCLEAN RIVER, CREEK, LAKE WATER	1.98 (1.18)	2.39 (1.30)	2.22 (1.30)	2.22 (1.27)
GROUNDWATER POLLUTANTS FROM AGRICULTURE	1.92 (1.17)	2.40 (1.26)	2.09 (1.29)	2.17 (1.25)
OLD OR FALLING SEPTIC SYSTEMS	2.03 (1.16)	2.26 (1.25)	2.23 (1.23)	2.18 (1.22)
LEAD-BASED PAINT HAZARDS	1.81 (1.12)	2.00 (1.21)	1.86 (1.19)	1.91 (1.18)
FOODBORNE ILLNESS OUTBREAKS/UNSAFE FOOD	1.95 (1.18)	2.06 (1.19)	2.10 (1.27)	2.03 (1.21)
OTHER	1.27 (.79)	2.02 (1.46)	2.00 (1.49)	1.74 (1.31)

Participants that selected *Other* were asked to describe additional environmental health factors they were concerned about. Only 11 comments were received so no themes were identified. Comments included *COVID-19*, *chronic wasting disease*, *alternative energy access*, *lead pipes*, and *mold*.

Participants were asked: 'Please rate the degree to which you're concerned about the physical environment in our community.' Response options were based on a 5-point scale where 1=Not concerned at all and 5= Extremely concerned. Responses are summarized in Table 54 below.

TABLE 54: PHYSICAL ENVIRONMENT

	FOREST M (SD)	ONEIDA M (SD)	VILAS M (SD)	COMBINED M (SD)
TRASH / LITTER IN PUBLIC AREAS	2.34 (1.12)	2.31 (1.08)	2.34 (1.20)	2.33 (1.12)
LACK OF HANDICAPPED ACCESSIBLE RESOURCES	2.24 (1.11)	2.15 (1.12)	2.18 (1.18)	2.19 (1.13)
LACK OF SIDEWALKS / WALKING PATHS	2.28 (1.25)	2.36 (1.24)	2.19 (1.21)	2.30 (1.24)
UNSAFE ROADS / HIGHWAYS	2.11 (1.26)	2.36 (1.21)	2.11 (1.22)	2.22 (1.23)
LACK OF BIKE LANES / BIKE PATHS	2.26 (1.25)	2.31 (1.28)	2.03 (1.27)	2.23 (1.27)
UNSAFE NEIGHBORHOODS / CRIME	2.11 (1.15)	2.02 (1.16)	1.86 (1.24)	2.02 (1.18)
LACK OF SAFE PLACES FOR RECREATION / PARKS	1.96 (1.17)	1.96 (1.16)	1.82 (1.20)	1.93 (1.17)
UNSAFE / ABANDONED BUILDINGS	1.98 (1.20)	2.00 (1.22)	1.89 (1.24)	1.97 (1.22)
OVERDEVELOPMENT / TOO MANY NEW BUILDINGS	1.55 (1.05)	1.96 (1.26)	2.10 (1.34)	1.85 (1.23)
OTHER	1.27 (0.84)	1.97 (1.44)	2.00 (1.46)	1.72 (1.31)

Participants that selected **Other** were asked to describe additional physical environment factors they were concerned about. Only a few comments were received so no themes were identified. Comments included **lack of bathrooms at parks and the lack of affordable housing**.

Participants were asked: 'How would you most like to receive information about health, events, programs, and services from the local health department and community partners?' Responses are shown in Table 55 below.

TABLE 55: INFORMATION PREFERENCES

	FOREST N (%)	ONEIDA N (%)	VILAS N (%)	COMBINED N (%)
LOCAL RADIO	58 (15.2%)	177 (35.0%)	98 (39.8%)	333 (29.3%)
PRINTED IN LOCAL NEWSPAPERS	173 (45.4%)	194 (38.3%)	111 (45.1%)	478 (42.0%)
ONLINE LOCAL NEWSPAPERS	58 (15.2%)	128 (25.3%)	51 (20.7%)	237 (20.8%)
THE LOCAL HEALTH DEPARTMENT WEBSITE	90 (23.6%)	164 (32.4%)	85 (34.6%)	339 (29.8%)
MAILED NEWSLETTER	120 (31.5%)	171 (33.8%)	95 (38.6%)	386 (33.9%)
THE LOCAL HEALTH DEPARTMENT FACEBOOK PAGE	191 (50.1%)	218 (43.1%)	96 (39.0%)	505 (44.4%)
OTHER	21 (5.5%)	33 (6.5%)	21 (8.5%)	75 (6.6%)

Those who selected *Other* were asked to describe ways that they would prefer to receive information that was not listed. Qualitative responses are shown in Table 56.

TABLE 56: OTHER PREFERRED METHODS OF RECEIVING INFORMATION

FOREST	ONEIDA	VILAS	COMBINED
BULLETINS @ GROUPS / MEETINGS (EX. CHURCH, SCHOOL, MEAL SITE)	PUBLIC BROADCAST (NEWS)	EMAIL	BULLETINS @ GROUPS / MEETINGS (EX. CHURCH, SCHOOL, LIBRARY, FOOD PANTRY)
PUBLIC BROADCAST (NEWS)	WORD OF MOUTH FROM FRIENDS / FAMILY	BULLETINS @ GROUPS / MEETINGS (EX. CHURCH, LIBRARY, FOOD PANTRY)	PUBLIC BROADCAST (NEWS)
WORD OF MOUTH FROM FRIENDS / FAMILY	EMAIL	WORD OF MOUTH FROM FRIENDS	EMAIL
			WORD OF MOUTH FROM FRIENDS / FAMILY

Participants were asked to provide their zip code. Table 57 provides a summary of zip codes, sorted by county.

TABLE 57: WHAT ZIP CODE DO YOU LIVE IN?

COUNTY	THEMES
FOREST	54103 (4.7%), 54511 (16.9%), 54520 (53.4%), 54541 (18.4%), 54566 (6.5%)
ONEIDA	54155 (6.5%), 54463 (2.8%), 54501 (62.4%), 54529 (2.8%), 54531 (2.1%), 54538 (1.6%), 54539 (3.5%), 54548 (9.2%), 54562 (4.8%), 54564 (1.4%), 54568 (3.9%)
VILAS	54512 (6.1%), 54519 (3.8%), 54521 (40.8%), 54538 (7.5%), 54540 (4.2%), 54545 (6.1%), 54554 (4.7%), 54557 (3.3%), 54557 (8.0%), 54560 (2.8%), 54561 (0.5%), 54568 (12.2%)

FOCUS GROUP RESULTS

Focus groups were held in Forest, Oneida, and Vilas counties during a one-week period in late January 2023. Participants were recruited using specialized outreach to a variety of sub populations. The focus group questions were meant to gain a deeper understanding of community health needs.

There was a total of 9 focus groups held, which were equally distributed across each of the three counties, with a total of 81 participants. Focus group discussions were recorded, then transcribed and combined for data analysis. Formal thematic analysis was used when analyzing qualitative data using QSR's NVivo. Two independent coders analyzed content to identify themes. Themes were then compared and a final set of themes were established. Finalized themes were used to code all response data. The two coders then reviewed codes line-by-line so that there was an inter-rater reliability of at least 90%. Responses below are for all counties combined. Results are split between counties in Appendicies B-D.

Participants were asked 'What concerns or issues in your life or lives of your loved ones make it hard to be healthy or live a healthy life?' Results are presented in Table 58.

TABLE 58: WHAT MAKES IT HARD TO LIVE A HEALTHY LIFE?

QUESTION 1: WHAT CONCERNS OR ISSUES IN YOUR LIFE OR LIVES OF YOUR LOVED ONES MAKE IT HARD TO BE HEALTHY OR LIVE A HEALTHY LIFE?

EXAMPLES ARE UNLEDITED OTTER THAN TO REMOVE REFERENCES TO SPECIFIC NAMES OR TITLES				
ТНЕМЕ	DEFINITION	# OF OCCURRENCES	EXAMPLES	
LACK OF ACCESS TO HEALTH/ DENTAL CARE	COMMENTS CITED THE LACK OF QUALITY HEALTH AND DENTAL CARE SERVICES.	49 (41.5%)	WE'RE LOSING GOOD QUALITY CARE FOR SENIORS. WELL, WE THAT WE HAVE A REVOLVING DOOR WITH DOCTORS. DOCTORS DO NOT STAY UP HERE AND NOW MOST PEOPLE SEE A NURSE PRACTITIONER BECAUSE THERE AREN'T ENOUGH DOCTORS. I HAVE ONE CONCERN, AND THAT IS OUR	
			HEALTH CARE SYSTEM UP HERE.	
COMMENTS CITED THE HIGH COST	COMMENTS CITED THE HIGH COST	25 (21.2%)	GROCERY PRICES ARE HIGH AND THIS MAKES IT HARD FOR PEOPLE TO BUY NUTRITIOUS AND HEALTHY FOODS	
ACCESSIBILITY OF HEALTHY	AND LIMITED ACCESSIBILITY TO		YOU CAN BUY A BIG MAC FOR LESS THAN YOU CAN BUY A CONTAINER OF FRUIT.	
FOOD	OBTAIN HEALTHY FOOD		TOO MANY OPPORTUNITIES TO NOT EAT HEALTHY. LOTS OF FAST-FOOD OPTIONS THAT ISN'T GOOD FOR US.	

QUESTION 1: WHAT CONCERNS OR ISSUES IN YOUR LIFE OR LIVES OF YOUR LOVED ONES MAKE IT HARD TO BE HEALTHY OR LIVE A HEALTHY LIFE?

THEME	DEFINITION	# OF OCCURRENCES	EXAMPLES
TRAVEL TIME TO APPOINTMENTS	COMMENTS CITED REFLECT THE DISTANCE REQUIRED TO FIND QUALITY	15 (12.7%)	HAVE TO DRIVE SO FAR TO GET MEDICAL TREATMENT. IF YOU NEED A SPECIALIST, YOU HAVE TO GO TO WAUSAU OR SOMEWHERE FAR. WOULD BE NICE TO HAVE MORE MEDICAL ASSISTANCE HERE. SO THERE'S NO INFRASTRUCTURE THAT THE COMMUNITY IS ESTABLISHED FOR TRANSPORTATION TO MEDICAL
	HEALTHCARE		APPOINTMENTS. AND HEALTHCARE IS A PROBLEM TOO. YEAH - TOO MUCH TRAVELING AND WHAT PEOPLE. THERE ARE DISABILITIES THAT CAN'T DRIVE.
LACK OF	COMMENTS CITED REFLECT THE LACK OF AVAILABLE RESOURCES FOR TEENS/CHILDREN	13 (11%)	WORK – 12-HOUR SHIFTS MAKE IT HARD (WORKING 6AM – 6PM) TO GO HOME AND COOK A HEALTHY DINNER OR TEACH KIDS HOW TO COOK.
RESOURCES TO TEACH HEALTHY BEHAVIORS FOR TEENS/ CHILDREN			WE DON'T HAVE PROFESSIONALS OR EXPERTISE IN LGBTQ ISSUES LIKE IDENTITY CRISIS AND THEN HOW TO DEAL WITH THE RELATIONSHIP AND THE SOCIETY STUFF
			THEY DON'T HAVE ENOUGH THINGS FOR THE YOUNG TEENAGERS TO DO. NOTHING TO KEEP THEM OCCUPIED AND STAYING HEALTHY. MORE RESOURCES NEEDED.
LIMITED	COMMENTS CITED	11 (9.3%)	HOURS OF GYMS. IF YOU WORK A NORMAL SHIFT, YOU CAN'T GET TO SOME OF THESE PLACES.
OPPORTUNITIES TO PRACTICE HEALTHY LIVING	REFLECT THE LIMITED ACCESSIBILITY TO OUTDOOR ACTIVITIES OR FITNESS CENTERS		WINTER ICY ROADS MAKE IT DIFFICULT TO WALK (TO WORK, FOR HEALTH, ETC.). HARD TO USE THE WALKING TRAIL IN THE WINTER.
	OR FITNESS CENTERS		YMCA IS SO COSTLY UNLESS YOU REALLY GO A LOT.
LACK OF ACCESS TO ELDERLY SUPPORT	COMMENTS CITED REFLECT THE LIMITED RESOURCES AVAILABLE FOR THE ELDERLY.	9 (7.6%)	COMMUNITY NEEDS TO BE MORE WELCOMING TO AND SUPPORTING OF THE SENIOR CITIZEN. NURSING HOME – USED TO HAVE ONE BUT
			DON'T HAVE ONE ANYMORE. START ADJUSTING ACCESSIBILITY FOR THE ELDERLY. THERE'S A LOT OF US. WE'RE GOING TO BE IN TROUBLE VERY SOON. PEOPLE WILL HAVE TO MOVE IF WE DON'T START PLANNING AND PROVIDING SUPPORT.

QUESTION 1: WHAT CONCERNS OR ISSUES IN YOUR LIFE OR LIVES OF YOUR LOVED ONES MAKE IT HARD TO BE HEALTHY OR LIVE A HEALTHY LIFE?

THEME	DEFINITION	# OF OCCURRENCES	EXAMPLES
INCREASED MENTAL HEALTH ISSUES AND STIGMA	COMMENTS CITED REFLECT THE DIFFICULTY OF FINDING MENTAL HEALTH PROVIDERS.	9 (7.6%)	SO EVEN IF YOU WERE ABLE TO FIND A PROVIDER AND THEY'RE ONLY AVAILABLE ONLINE, SOME PEOPLE, WHERE THEY LIVE IN A RURAL AREA DON'T HAVE INTERNET ACCESS THAT CAN SUPPORT THAT.
			IT'S OUR BEHAVIORAL HEALTH CENTER. THE ONLY REASON THAT SHE GOT INTO KOHLER FOR THERAPY AND PSYCHIATRY WAS BECAUSE SHE TRIED TO OVERDOSE AND END HER LIFE AND WENT TO THE ER AND THE ER REFERRED HER SO SHE GOT BUMPED UP ON THE LIST. IT SHOULDN'T TAKE THINGS TO GET TO THAT POINT FOR THESE KIDS TO GET HELP.
			MY DAUGHTER HAS BEEN ON A WAITING LIST FOR TWO YEARS FOR MENTAL HEALTH SUPPORT AND I THINK WE JUST HAVEN'T HEARD.
INCREASED	COMMENTS CITED REFLECT THE NEED FOR ACTIVITIES THAT DO NOT INVOLVE SUBSTANCES.	6 (5.1%)	SOCIAL NORMS OF GOING OUT AND DRINKING. IT ISN'T FOR EVERYONE, BUT IF YOU DON'T DO IT, YOU FEEL ISOLATED.
SOCIETAL PRESSURE TO USE SUBSTANCES			THEY HAD A NEW KID START SCHOOL AND HE MESSAGED MY DAUGHTER AND SAID WHAT IS THERE TO DO IN RHINELANDER? AND ALL FOUR OF MY DAUGHTERS FRIENDS SAT ON THE COUCH AND SAID DRINK AND DO DRUGS.
			INFLUENCE OF THE DRUG DEALERS.
DECIDE TO	COMMENTS CITED	6 (5.1%)	TELEHEALTH IS GOOD BUT SOMETIMES A FACE- TO-FACE NEEDS TO HAPPEN
PROMOTE EXISTING COMMUNITY PESOUPCES	REFLECT THE DESIRE TO PROMOTE AND ADVERTISE EXISTING		THERE WERE SO MANY THINGS THAT WERE OFFERED TO ME THAT I DIDN'T EVEN KNOW EXISTED.
	COMMUNITY RESOURCES		DOES ANYONE USE TELEHEALTH? AVAILABILITY OF THIS COULD HELP WITH APPTS.

QUESTION 1: WHAT CONCERNS OR ISSUES IN YOUR LIFE OR LIVES OF YOUR LOVED ONES MAKE IT HARD TO BE HEALTHY OR LIVE A HEALTHY LIFE?

EXAMPLES ARE UNEDITED OTHER THAN TO REMOVE REFERENCES TO SPECIFIC NAMES OR TITLES

ТНЕМЕ	DEFINITION	# OF OCCURRENCES	EXAMPLES
OTHER	COMMENTS CITED REFLECT THE INCREASING PRICES, THE NEED FOR MORE COMMUNITY PROGRAMS (SHARPS, HALFWAY HOUSE), AND THE HOUSE CODE ALLOWING HOUSES TO BE BUILT ON TOP OF EACH OTHER.	12 (10.2%)	IT'S A FINANCIAL BURDEN AROUND HERE. NOT MANY PLACES PAY GOOD SALARIES THEY'VE BEEN WORKING REALLY HARD ON TRYING TO GET A CLEAN NEEDLE STATION. AND THEY GET SHUT DOWN EVERY SINGLE TIME BECAUSE THEY'RE LIKE WHY WOULD WE ENABLE THAT? THERE'S SOMEWHAT OF A WHAT WE CALL A BUBBLE ON EACH HOUSE WHERE YOU INTERRUPT YOUR NEIGHBORS HOUSE.

Participants were asked 'Has there been a change in the health of people close to you in the last three to five years? If so, please explain/describe.' Responses are summarized in Table 59.

TABLE 59: CHANGES IN HELATH IN LAST 3-5 YEARS

QUESTION 2: HAS THERE BEEN A CHANGE IN THE HEALTH OF PEOPLE CLOSE TO YOU IN THE LAST THREE TO FIVE YEARS? IF SO, PLEASE EXPLAIN/DESCRIBE.

THEME	DEFINITION	# OF OCCURRENCES	EXAMPLES
LACK OF ACCESSIBLE HEALTHCARE	COMMENTS CITED REFLECT THE LACK LOCAL DOCTORS OR SERVICES AVAILABLE.	17 (15.7%)	DENTAL IS ABSOLUTELY HORRID UP HERE. YOU STILL CAN'T GET A DOCTOR UNLESS YOU TRAVEL, THAT'S THE ONLY WAY. THERE ISN'T ANYWHERE YOU CAN GET YOUR LAB TESTS DONE.
DECREASE QUALITY OF CARE	COMMENTS CITED REFLECT THE JUDGEMENT INDIVIDUALS RECEIVED BY HEALTHCARE PROVIDERS WHICH IMPACTED THE QUALITY OF CARE RECEIVED.	14 (12.9%)	THEY'RE JUST TIRED, THEY'RE OVERWORKED. THEY'RE JUST SORT OF ENDED. THEY DON'T HAVE GOOD ATTITUDES. I WAS DIAGNOSED WITH SEIZURES BECAUSE OF A TRAUMATIC BRAIN INJURY. AND AFTER MY THIRD PHONE CALL CALLING 911, THEY WERE LIKE, OH HE'S A DRUG ADDICT. I NEVER ONCE WAS TESTED FOR ANYTHING, THEY JUST ASSUMED THAT THEY THOUGHT I WAS DETOXING OFF OF ALCOHOL OR SOMETHING, WHICH WASN'T THE CASE. I THINK IT'S A LOT OF JUST THE FIRST INITIAL JUDGEMENTS THAT ARE BEING PASSED, THAT IS WHERE THE ISSUE LIES

QUESTION 2: HAS THERE BEEN A CHANGE IN THE HEALTH OF PEOPLE CLOSE TO YOU IN THE LAST THREE TO FIVE YEARS? IF SO, PLEASE EXPLAIN/DESCRIBE.

THEME	DEFINITION	# OF OCCURRENCES	EXAMPLES EXAMPLES
INCREASE IN HEALTH PROBLEMS	COMMENTS CITED REFLECT AN INCREASE OF MENTAL AND PHYSICAL ISSUES.	13 (12%)	A LOT OF CANCER IN OUR COMMUNITY. INCREASE IN TYPE I AND II DIABETES. ITS JUST PLAIN OLD DEPRESSION. EVERYBODY'S DEPRESSED.
LASTING COVID IMPACTS	COMMENTS CITED REFLECT THE LASTING IMPACTS OF COVID IN INDIVIDUALS LIVES AND IN THE HEALTHCARE SYSTEM.	11 (10.2%)	I WANT TO SAY THEY PROBABLY GOTTEN WORSE BECAUSE WITH COVID THEY LOST SO MANY PEOPLE IN THE HEALTHCARE FIELD. IT WAS INSANE. THE ER IS COMPLETELY SHORT STAFFED AND RIDICULOUS. SOCIAL ISOLATION OF SPECIFIC DEMOGRAPHICS (COVID BASED) COVID HAS AFFECTED EVERYONE AT SOME POINT.
INCREASED SUBSTANCE USE	COMMENTS CITED REFLECT THE INCREASE IN SUBSTANCE USE	7 (6.5%)	DRUG USE IN THE YOUTH IS HIGH. ODS HAPPENING IN SCHOOLS (MIDDLE AND HIGH SCHOOLS) VAPING HAS INCREASED DRIVING OUT ON ROUTE 8 AND YOU GET A WHIFF OF MARIJUANA FROM THE OTHER CAR ON THE ROAD
COST OF HOUSING CONCERNS	COMMENTS CITED REFLECT THE LACK OF HOUSING AVAILABLE DUE TO QUALITY AND PRICE.	7 (6.5%)	ALSO THE COST AND AVAILABILITY OF HOUSING. ESPECIALLY FOR PEOPLE WITH PETS. MOST OF THEM DON'T ALLOW THEM. THE RENT FOR A ONE OR TWO-BEDROOM HOUSE IS LIKE \$1500. AND THE PAY IS LIKE REALLY CRAP HERE. AND GOOD LUCK TRYING TO FIND AN APARTMENT. ESPECIALLY THERE IS NOTHING FOR LOW INCOME HOUSING, IT'S ALL FULL.
LACK OF INSURANCE COVERAGE	COMMENTS CITED REFLECT THE LIMITED HEALTHCARE AVAILABILITY DUE TO INSURANCE COVERAGE.	5 (4.6%)	DON'T BE A VET. YOU CAN'T GO TO THE DENTIST. THEY JUST DON'T COVER IT. A LOT OF OUR FOLKS WORK SEASONALLY. SO IF THAT'S THE CASE, THEN YOU'VE GOT TO PAY FOR THE DENTIST YOURSELF SO YOU KNOW IF YOU'RE ON BADGER CARE, THEN YOU'RE LIMITED. YOU KNOW I, I WISH YOU COULD JUST GO TO A DOCTOR'S OFFICE AND SAY, I. DON'T HAVE ANY INSURANCE. WHAT CAN YOU DO FOR ME?

QUESTION 2: HAS THERE BEEN A CHANGE IN THE HEALTH OF PEOPLE CLOSE TO YOU IN THE LAST THREE TO FIVE YEARS? IF SO, PLEASE EXPLAIN/DESCRIBE.

EXAMPLES ARE UNEDITED OTHER THAN TO REMOVE REFERENCES TO SPECIFIC NAMES OR TITLES

ТНЕМЕ	DEFINITION	# OF OCCURRENCES	EXAMPLES
			MORE PEOPLE HAVE MOVED UP HERE. WE'VE HAD A MAJOR INFLUX IN POPULATION.
INCREASE IN POPULATION SIZE	COMMENTS CITED REFLECT AN INCREASE IN POPULATION.	3 (2.7%)	THINGS LIKE YEAR TWO YEARS OR THREE YEARS AGO THEY HAD 300 NEW STUDENTS AT THE HIGH SCHOOL AND THOSE WEREN'T JUST KIDS COMING FROM MIDDLE SCHOOL TO HIGH SCHOOL.
			YEAH, THE POPULATION FIGURES GO UP OVER THE LAST TWO YEARS.
OTHER	COMMENTS THAT COULD NOT FIT INTO OTHER THEMES.	44 (40%)	EVERYTHING JUST TAKES MORE TIME. YOU KNOW, EVERYTHING'S ON DELAY.
			RESTAURANTS ARE ONLY OPEN ONE OR TWO DAYS A WEEK BECAUSE THEY CAN'T FIND HELP.
			I THINK WE DO A GOOD JOB OF KEEPING THE ROADS CLEAR.
			NOTHING.

Participants were asked 'What are the top three things that need to be improved in our community?' Responses are summarized in Table 60.

TABLE 60: TOP NEEDED IMPROVEMENTS

QUESTION 3: WHAT ARE THE TOP THREE THINGS THAT NEED TO BE IMPROVED IN OUR COMMUNITY? EXAMPLES ARE UNEDITED OTHER THAN TO REMOVE REFERENCES TO SPECIFIC NAMES OR TITLES				
THEME	DEFINITION	# OF OCCURRENCES	EXAMPLES	
HEALTHCARE ACCESSIBILITY	COMMENTS CITED REFLECT THE NEED FOR MORE PROVIDERS FOR ALL AGES.	33 (28%)	MENTAL HEALTH – THERE'S NOTHING IN OUR AREA.	
			NEED MORE DOCTORS AND APPOINTMENT TIMES.	
			ACCESSIBILITY FOR ELDERLY HEALTH CARE.	
RESOURCES FOR TEENS/CHILDREN	COMMENTS CITED REFLECT THE DESIRE FOR MORE SUPPORT GROUPS AND ACTIVITIES.	18 (15%)	I THINK THAT THE YOUNGER KIDS NEED WAY MORE STUFF THAT THAT IS GEARED TOWARDS THEM THAT THEY CAN GO TO.	
			KIDS NEED AN IEP TO GET EXTRA HELP, BUT EVEN IF THEY HAVE THAT, THEY DON'T NECESSARILY GET THE EXTRA HELP DUE TO LACK OF AIDES	
			AND MAYBE ALSO HAVE SUPPORT GROUPS FOR AUTISTIC PEOPLE.	

LESS AND LESS FAMILIES STAY IN OUR AREA

QUESTION 3: WHAT ARE THE TOP THREE THINGS THAT NEED TO BE IMPROVED IN OUR COMMUNITY? EXAMPLES ARE UNEDITED OTHER THAN TO REMOVE REFERENCES TO SPECIFIC NAMES OR TITLES # OF THEME DEFINITION **EXAMPLES OCCURRENCES** GET THE COMMUNITY MORE INVOLVED AND **COMMENTS CITED** MORE INTERESTED IN THE RESOURCES THAT REFLECT THE ARE AVAILABLE TO THEM. DESIRE TO GET **COMMUNITY** MORE INDIVIDUALS 18 (15%) BOARDS ARE ALSO LACKING MEMBERS **ENGAGEMENT INVOLVED IN RIGHT NOW** COMMUNITY MORE VOLUNTEERS ARE NEEDED WITH ALL **ACTIVITIES** THE THINGS GOING ON. FAMILY HOUSING - LACK OF, CONDITION COMMENTS CITED OF, AND AFFORDABILITY OF (SEVERAL REFLECT THE IMPACT COMMENTS ABOUT THIS) THAT INCREASES I DON'T SEE HOW ANYBODY'S GOING TO **AVAILABILITY AND** IN THE COST FOR 16 (13.3%) MAKE IT, YOU KNOW, UNLESS YOU HAVE COST FOOD, HOUSING, AND THREE JOBS. **TRANSPORTATION** PEOPLE NEED TO REALIZE THAT THEY WANT HAS IMPACTED THE TO MAKE HIGHER WAGES AND THAT'S WHAT COMMUNITY. DRIVES THE COSTS UP EVERYWHERE ELSE WHY CAN'T THE COUNTY PUT SOMETHING DIRECTLY IN THE NEWSPAPER WITH A FLYER COMMENTS CITED WITH AVAILABLE RESOURCES? REFLECT THE **PROMOTING AND** NEED FOR BETTER BETTER RESOURCE LISTS OF WHAT'S MARKETING OF COMMUNICATION 15 (13%) AVAILABLE TO US IN DIFFERENT SPECIALTY **RESOURCES** AND MARKETING AREAS. THAT PROMOTE BETTER MARKETING CAN HELP WITH THE **RESOURCES** COMMUNICATION TOO. USE EVENTS TO MARKET FOR THE NEXT EVENT(S) MORE THINGS FOR THE KIDS TO DO COMMENTS CITED MORE OUTDOOR ACTIVITIES, YOU KNOW, **INCREASE IN** REFLECT THE GET THEM OFF ON CELL PHONES. COMMUNITY **NEED FOR MORE** 13 (10.8%) I THINK THAT THE YOUNGER KIDS NEED **ACTIVITIES** COMMUNITY WAY MORE STUFF THAT THAT IS GEARED ACTIVITIES. TOWARDS THEM THAT THEY CAN GO TO LARGE SPANS OF NOTHING WHICH MAKES IT DIFFICULT TO SPREAD THE WORD ABOUT THINGS. **COMMENTS CITED** SOME PEOPLE RELY ON SOME SERVICES TOO REFLECT THE WISH MUCH (SHERIFF'S DEPARTMENT CALLED FOR FOR NEW AND **INCREASE** NON-CRITICAL THINGS WHEN THEY SHOULD MORE ORGANIZED 12 (10%) **INFRASTRUCTURE** BE CALLING ADRC INSTEAD). DEPARTMENTS **INFOSTRUCTURE** SHOULD IDENTIFY IF THEY'RE WORKING WITHIN THE ON THE SAME THINGS AND COMBINE AND COMMUNITY. WORK TOGETHER FOR A STRONGER AND FASTER OUTCOME.

QUESTION 3: WHAT ARE THE TOP THREE THINGS THAT NEED TO BE IMPROVED IN OUR COMMUNITY? EXAMPLES ARE UNEDITED OTHER THAN TO REMOVE REFERENCES TO SPECIFIC NAMES OR TITLES				
THEME	DEFINITION	# OF OCCURRENCES	EXAMPLES	
INCREASE RECOURSES FOCUSED ON HEALTHY LIVING	COMMENTS CITED REFLECT THE NEED FOR MORE ACCESSIBLE PROGRAMS TO PROMOTE HEALTHY LIVING.	10 (8.3%)	IS THE HEALTH DEPT ONLY FOR LOW-INCOME PEOPLE?	
			MORE PROGRAMS TO HELP LOSE WEIGHT AND BE HEALTHY	
			TEACH KIDS THE BASICS OF HOW TO COOK AND COOK HEALTHY	
			NEED TO MAKE THINGS FUN AND CHANGE WITH THE TIMES.	
OTHER	COMMENTS CITED REFLECT AN INCREASE IN ENVIRONMENTAL CONCERNS AND A NEED FOR CHANGE.	16 (13.3%)	WAKE WAVES JUST DESTROYS YOUR SHORELINE AND THEY'RE YELLING AT YOU ABOUT DON'T PUT THIS ON THE SHORELINE. DON'T DO THAT, ONLY DO THIS ON THE SHORE, BUT YET THEY DON'T BAN THESE WEIGHT BOATS AND THEY YOU KNOW.	
			THE AMOUNT OF GARBAGE ON SOME OF THESE SIDE ROADS AND STUFF LIKE THAT.	

Participants were asked 'What are the top three strengths of our community?' Responses are summarized in Table 61.

TABLE 61: TOP STRENGTHS

QUESTION 4: WHAT ARE THE TOP THREE STRENGTHS OF OUR COMMUNITY? EXAMPLES ARE UNEDITED OTHER THAN TO REMOVE REFERENCES TO SPECIFIC NAMES OR TITLES				
THEME	DEFINITION	# OF OCCURRENCES	EXAMPLES	
INFRASTRUCTURE AND SERVICES FC SE IN IN SE	COMMENTS FOCUSED ON THE SERVICES AND INFRASTRUCTURE IN THE AERA THAT SERVES A THRIVING COMMUNITY	20 (23%)	VARIETY OF GROCERY STORES GOOD PHYSICAL THERAPY SERVICES -	
			HEALTH & MOTION COMMUNITY CENTER AND THE CLASSES THEY OFFER AND THE POOL (MEMBERSHIP NEEDED)	
STRONG SENSE OF		18 (21%)	COMMUNITY – DIDN'T HAVE DAYCARE MY FIRST WEEK BACK TO WORK AND I HAD FRIENDS AND FAMILY ALL TAKE A DAY OFF TO HELP OUT.	
COMMUNITY			OVERALL, PEOPLE DO GENUINELY CARE ABOUT THE COMMUNITY.	
			AND THE HELP YOU GET FROM YOUR NEIGHBORS AND STUFF.	

QUESTION 4: WHAT ARE THE TOP THREE STRENGTHS OF OUR COMMUNITY?EXAMPLES ARE UNEDITED OTHER THAN TO REMOVE REFERENCES TO SPECIFIC NAMES OR TITLES

EXAMPLES ARE UNEDITED OTHER THAN TO REMOVE REFERENCES TO SPECIFIC NAMES OR TITLES				
ТНЕМЕ	DEFINITION	# OF OCCURRENCES	EXAMPLES	
TOURISM	COMMENTS CITED TOURISM AS A COMMUNITY STRENGTH.	11 (13%)	YOU KNOW BANBURY FEST, THAT TYPE OF THING IT BRINGS MONEY TOURIST INDUSTRY CARRIES OUR AREA TOURISM IS AWESOME.	
OUTDOORS	COMMENTS FOCUSED ON THE OUTDOORS, THE ENVIRONMENT, AND LIVING IN A RURAL SETTING.	8 (9%)	ATV TRAILS RURAL SETTING THERE'S A LOT OF RECREATIONAL THINGS FOR PEOPLE TO GET OUT. WE DO FAMILY THINGS YOU DON'T SEE THAT IN THE CITY AS MUCH THEY COME UP HERE TO DO. THAT, BUT EVEN US UP HERE, WE CAN DO IT A LOT. TAKE YOUR PICTURE, WE GET TO LIVE IT.	
FIRST RESPONDERS AND SERVICES	COMMENTS ADDRESSED COMMUNITY SERVICES INCLUDING: EMERGENCY MEDICAL SERVICES, POLICE AND FIRE SERVICES, SCHOOLS, ETC.	6 (7%)	WE HAVE A GOOD AMBULANCE SERVICE – THE CREWS ARE ON THE BALL. IF YOU NEED AN AMBULANCE YOU CAN GET ONE REAL QUICK. SCHOOL DISTRICT HAS BEEN EXCELLENT HELPING MY DAUGHTER MANAGE HER DIABETES. THE POLICE HERE ARE VERY UNDERSTANDING AND COMPASSIONATE WITH MENTAL HEALTH.	
ASSISTANCE	HOMELESS SHELTER, FOOD ASSISTANCE PROGRAMS, ENERGY ASSISTANCE, ETC.	5 (6%)	THE FOOD PANTRY OUT HERE IS PHENOMENAL, IT'S JUST IT'S AWESOME. HOMELESS SHELTER THE ENERGY ASSISTANCE IS AMAZING.	
TELEHEALTH	SEEKING HEALTH CARE SERVICES REMOTELY VIA ELECTONIC VIDEO CONFERENCE OR TELEPHONE	4 (5%)	TELEHEALTH IS GREAT. HELPS DO ONE IN- PERSON PER YEAR WITH SPECIALISTS AND TELEHEALTH THE OTHER TIMES. SAVES TIME AND MONEY. COVID REALLY INCREASED THIS, WHICH HAS BEEN AWESOME. SOME COMMUNITIES HAVE PUT KIOSKS IN (AT THE LIBRARY, THE SCHOOL, THE COURTHOUSE, ETC.) SO THOSE WITHOUT THEIR OWN COMPUTER CAN GO IN THEIR TOWN TO A KIOSK AND DO A TELEHEALTH VISIT. TELEHEALTH. GETTING MORE ANSWERS VIA SPIRUS TELEHEALTH WHEN MESSAGING WITH THEM VS. AN IN-PERSON VISIT.	

QUESTION 4: WHAT ARE THE TOP THREE STRENGTHS OF OUR COMMUNITY? EXAMPLES ARE UNEDITED OTHER THAN TO REMOVE REFERENCES TO SPECIFIC NAMES OR TITLES				
THEME DEFINITION # OF OCCURRENCES EXAMPLES				
OTHER	COMMENTS THAT DID NOT FIT INTO OTHER THEMES	14 (16%)	NO TRAFFIC THE CRIME ISN'T TOO HIGH. DIVERSITY – TWO DIFFERENT TRIBES LIVE IN OUR COUNTY. THINGS ARE SILOED, BUT THERE IS OPPORTUNITY THERE	

Participants were asked 'Looking ahead 10 or 20 years... If you had a magic wand, what would your community look like to make it easier for you to live a healthy life?' Responses are summarized in Table 62.

TABLE 62: IDEAL CHANGES IN THE NEXT 10-20 YEARS

QUESTION 5: LOOKING AHEAD 10 OR 20 YEARS IF YOU HAD A MAGIC WAND, WHAT WOULD YOUR
COMMUNITY LOOK LIKE TO MAKE IT EASIER FOR YOU TO LIVE A HEALTHY LIFE?
EVANDUES ADELINIEDITED OTHER THAN TO DEMOVE DEFERENCES TO SPECIFIC NAMES OR TITLES

THEME	DEFINITION	# OF OCCURRENCES	EXAMPLES EXAMPLES
HOUSING	COMMENTS FOCUSED ON AFFORDABLE HOUSING AND MORE HOUSING OPTIONS`	19 (19%)	YOU GOT THE COST OF HOUSING GOING UP. I MEAN AT THE END OF THE DAY, YOU GOT ENOUGH MONEY TO PUT IT IN YOUR GAS TANK TO GET TO WORK. AFFORDABLE NEWER APARTMENT COMPLEX WOULD BE HELPFUL – BUT INFRASTRUCTURE WOULDN'T HANDLE IT (WATER & SEWER)
			AFFORDABLE AND MORE HOUSING
COMMENTS FOCUSED ON MORE VARIETY VARIETY OF STORES, RESTAURANTS, AND SERVICES	FOCUSED ON MORE	16 (16%)	MORE THINGS TO DO THAT AREN'T HUNTING & FISHING TO HELP KEEP FAMILIES HERE TOO: THEATER, BOWLING ALLEY, DANCING, ADULT PROGRAMS, KID PROGRAMS (NOT SPORTS)
			RED CROSS PROGRAM WHERE PEOPLE CAN SHOP FOR THE HOMEBOUND
	16 (16%)	MORE TRANSPORTATION FOR PEOPLE OF ALL AGES. IF PEOPLE DON'T HAVE A CAR, YOU CAN'T GO ANYWHERE. THERE'S CITY TRANSIT AND ONE OTHER ORGANIZATION BUT YOU HAVE TO GIVE THEM 24-HOUR NOTICE TO GET PICKED UP. THERE ARE CABS, BUT THEY'RE PRETTY "GROSS".	

QUESTION 5: LOOKING AHEAD 10 OR 20 YEARS... IF YOU HAD A MAGIC WAND, WHAT WOULD YOUR COMMUNITY LOOK LIKE TO MAKE IT EASIER FOR YOU TO LIVE A HEALTHY LIFE?

THEME	DEFINITION	# OF OCCURRENCES	EXAMPLES
PROMOTE SERVICES	COMMENTS CITED SERVICES GO UNADVERTISED AND UNUSED, SUGGESTED	13 (13%)	BETTER COMMUNICATION AND OUTREACH ABOUT SERVICES AND RESOURCES. LET'S NOT FORCE PEOPLE TO GO TO FACEBOOK TO SEE ABOUT OUR EVENTS BECAUSE IT IS BAD FOR MENTAL HEALTH IN ITSELF
	BETTER MARKETING FOR SERVICES.		SCHOOL DISTRICTS NEED TO COMMUNICATE WITH EACH OTHER BETTER ABOUT PROGRAMS.
			IMPROVED AMBULANCE SERVICE.
			AVAILABILITY OF DOCTORS, NURSES AND THE WHOLE HEALTH CARE SYSTEM
HEALTH CARE	COMMENTS FOCUSED ON IMPROVED HEALTH CARE SERVICES.	9 (9%)	JUST UPGRADING FACILITIES IN GENERAL AND KNOW WHAT THE GROWTH THAT'S HAPPENED OVER THE LAST COUPLE OF YEARS. KIND OF ONCE AGAIN GOING BACK TO OUR TIME. BEFORE YOU KNOW THE HOSPITALS, THE EMERGENCY SERVICES SEEM TO, AND THAT'S NOT TO DO THAT ANY FAULT OF THEIR OWN. IT'S JUST A LOT TO KEEP UP WITH. YOU KNOW, WITH THIS GROWTH AND EVERYTHING.
			I THINK THERE SHOULD BE MORE OPTIONS FOR SAFE PLACES LIKE THE WOMEN'S SEXUAL ASSAULT.
SHELTERS	COMMENTS CALL FOR MORE DOMESTIC VIOLENCE SHELTERS, HOMELESS SHELTERS,	9 (9%)	MORE HOMELESS SHELTER OPTIONS. I'VE SAID I'VE SEEN A LOT OF PEOPLE SLEEPING IN LAUNDROMATS BECAUSE IT'S THE ONLY THING OPEN AT NIGHT, SO MAYBE ACCESSIBILITY THE OF THE HOMELESS SHELTER THAT IS IN TOWN NEEDS TO BE RELOOKED AT AS FAR AS SIZE. I WAS GOING TO SAY AND SLEEPING IN THE LAUNDROMAT IS NOT HELPING ANYBODY'S MENTAL HEALTH OR SUBSTANCE ABUSE ISSUES.
LONG -TERM CARE	COMMENTS FOCUSED ON NURSING HOMES, AN OTHER ELDERLY LIVING ASSISTANCE OPTIONS.	5 (5%)	NURSING HOME SENIOR LIVING CENTER ASSISTED LIVING

QUESTION 5: LOOKING AHEAD 10 OR 20 YEARS... IF YOU HAD A MAGIC WAND, WHAT WOULD YOUR COMMUNITY LOOK LIKE TO MAKE IT EASIER FOR YOU TO LIVE A HEALTHY LIFE?

THEME	DEFINITION	# OF OCCURRENCES	EXAMPLES EXAMPLES
OUTDOORS	COMMENTS CALLED FOR BETTER ACCESSIBLE OUTDOOR SPACES, IMPROVED CONNECTIVITY OF OUTDOOR PATHWAYS AND BIKE LANES.	4 (4%)	KEEP HIKING TRAILS IN GOOD SHAPE (LIKE THEY ARE NOW) NEED MORE NATURE WALKS AND A WAY TO MAKE IT EASIER IN THE WINTER WALKING TRAIL FROM WEST TO EAST SIDES OF TOWN CONNECT. MARKED CROSSWALKS, ACCESSIBLE, AND A BIKE LANE
INFRASTRUCTURE	COMMENTS CALLED FOR BETTER INFRASTRUCTURE, SPECIFICALLY BETTER ROADS AND BUILDINGS.	4 (4%)	BETTER TRANSPORTATION RAILROAD OPENED BACK UP FOR SHIPPING AND WOULD REMOVE TRUCKS OFF THE ROAD (FOR WOOD AND PULP SPECIFICALLY) PLACES TO PARK.
BETTER WAGES	COMMENTS FOCUSED ON BETTER WAGES TO ATTRACT YOUNG WORKERS, MORE INDUSTRY	4 (4%)	INDUSTRY – GOOD PAYING JOBS TO KEEP FAMILIES HERE. GET POLITICIANS INVOLVED, GOVERNMENT CONTRACTS. EVERYTHING HAS TO BE MADE SOMEWHERE IN AMERICA. WE CAN HAVE INDUSTRY HERE, BUT NEW INDUSTRY GOES SOUTH. BRING INDUSTRY HERE. PAY TEACHERS AND CHILDCARE PROVIDERS MORE. YES, THEIR BENEFITS MIGHT BE A LITTLE BETTER, BUT IT TAKES A SPECIAL KIND OF PERSON TO BE IN THESE PROFESSIONS SO THEY SHOULD BE REWARDED BETTER WAGE JOBS (TO HELP KEEP YOUNG FAMILIES)
HEALTH CONCERNS	ENVIRONMENTAL HEALTH CONCERNS, WATER.	4 (4%)	ONE THING I WANT TO ADD IS THE DRINKABLE WATER, THE QUALITY OF WATER HERE IS A BIG ISSUE TO YOU. I DON'T KNOW IF YOU HEARD OF THE PFAS AND I'VE BEEN FOLLOWING THIS FOR SEVERAL YEARS AND I WAS HOPING TO HAVE MORE DISCUSSION. MY WATER WAS REALLY HARD AND THEY HAD TO PUT A WATER SOFTENER IN AND THEN ON TOP OF THAT BECAUSE THE WATER'S STILL VERY LEADY, I ALSO HAVE A FILTER ON TOP OF THAT COMING OUT OF MY FAUCET.

QUESTION 5: LOOKING AHEAD 10 OR 20 YEARS... IF YOU HAD A MAGIC WAND, WHAT WOULD YOUR COMMUNITY LOOK LIKE TO MAKE IT EASIER FOR YOU TO LIVE A HEALTHY LIFE?

THEME	DEFINITION	# OF OCCURRENCES	EXAMPLES
SUSTAINABILITY	COMMENTS FOCUSED ON BEING MORE LOCALLY INDEPENDENT AND SUSTAINABLE, BUILDING TRADITION.	4 (4%)	BRING FARMS/FARMING BACK BE MORE LOCALLY DEPENDENT / RELIANT / SUSTAINABLE - IN ALL ASPECTS (FOOD, GOODS) - HOMESTEADING, INCREASE LOCAL PRODUCE, BUY MORE LOCALLY (INSTEAD OF AMAZON). FARMERS MARKETS EXIST IN THE SUMMER, AND THEY SELL OUT QUICKLY
OTHER	COMMENTS THAT DID NOT FIT INTO OTHER THEMES.	16 (16%)	LESS MEETINGS (LIKE THE BOARDS) TO TRY TO GET MORE PEOPLE INVOLVED. ACCEPTANCE FOR MORE SUBGROUPS OF PEOPLE, ALL PEOPLE. MORE OPEN MINDEDNESS. YOU HIT THE NAIL ON THE HEAD WHEN YOU SAID THE BABY BOOMERS ARE RETIRING BACK HERE. THEY STARTED HERE, AND ALSO WANTED TO ESCAPE THE NORTHWOODS, SEE WHAT THE BIG CITIES ARE LIKE. GET A TASTE OF IT AND REALIZED THIS IS HEAVEN. LIFE ISN'T ABOUT ALL OF THE STIMULATION THAT'S OUT IN THOSE BIG CITIES. IT'S MORE OF WHAT NATURE AND GOD OFFERS HERE IN THE NORTHWOODS.

KEY INFORMANT INTERVIEW RESULTS

Interviews were held with key stakeholders in Forest, Oneida, and Vilas counties including members of local law enforcement, health care professionals, AODA and mental health specialists and others. The purpose of the interviews were to gain a deeper understanding of ways in which the community needs to be supported.

The key informant interviews identified common themes across three counties. In Vilas County, the themes were food insecurity, mental/behavioral health, ADOA (especially youth vaping), aging population, lack of local support for older adults, and lack of healthcare resources. In Forest County, the themes were accessibility to resources/community assistance with resources, access to medical care, mental health and AODA, activity and nutrition, and transportation needs. In Oneida County, the themes were access to affordable mental health and ADOA services, isolation, access to transportation and healthcare, affordable housing, lack of strong economy/jobs, affordable childcare services, and lack of community members' energy/momentum for change. Themes for each county and the original questions are listed below.

KEY INFORMANT INTERVIEW QUESTIONS

- 1. How does your agency contribute to the health and well-being of the community?
- 2. What is working well for the population you serve to help overcome their challenges and barriers? How can we leverage this in the future?
- 3. What do you feel your clients would indicate as their most pressing health concerns?
- 4. What are the most important barriers or challenges of the population you serve to being healthy?
- 5. Over the past five years, do you think the health of the population you serve has changed? If so, in what ways has it changed, and what do you think are the contributing factors driving those changes?
- 6. In your opinion, what actions that need to be taken to address the health issues for the population you serve? AND/OR Where do you think there is momentum or community energy? Where is there community readiness to address issues?
- 7. In what ways does the population you serve have unique challenges or barriers to health compared with the general population in our counties?

Vilas County Common Themes are the following:

- ♦ Food (insecurities & cost/affordability)
- Mental Health/Behavioral Health
- ♦ ADOA (esp. youth vaping)
- Aging population/Older adults
- ♦ Lack of local support for older adults
- ♦ Lack of healthcare resources (including specialties & mental health)

Forest County Common Themes:

- Accessibility to resources/community assistance with resources
- ♦ Access to medical care (Distance to facilities, lack of options in the county, lack of transportation)
- Mental Health and AODA
- Activity and Nutrition (especially healthy eating)
- ♦ Transportation needs

Oneida County Common Themes:

- Access to affordable Mental Health services/ increase in providers (in youth and adults)
- Access to affordable AODA services/ increase in providers
- ♦ Isolation
- Access to transportation services
- Access to affordable Health Care
- Access to affordable housing
- Lack of strong economy/jobs (staffing & well trained individuals)
- Access to affordable childcare services
- Lack of energy/momentum for community members to want change

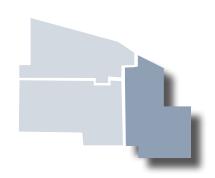
APPENDIX A: COUNTY DEMOGRAPHIC INFORMATION

	FOREST (N=381)	ONEIDA (N=506)	VILAS (N=246)	COMBINED (N=1133)
GENDER IDENTITY				
MALE	91 (28.1%)	108 (25.3%)	67 (32.4%)	266 (27.8%)
FEMALE	232 (71.6%)	315 (73.8%)	137 (66.2%)	684 (71.4%)
NON-CONFORMING	1 (0.3%)	2 (0.5%)	2 (1.0%)	5 (0.5%)
SELF-IDENTIFY	0 (0.0%)	2 (0.5%)	1 (0.5%)	3 (0.3%)
SEXUAL ORIENTATION				
ASEXUAL	15 (4.1%)	10 (2.0%)	10 (4.1%)	35 (3.2%)
BISEXUAL	11 (3.0%)	17 (3.4%)	5 (2.0%)	33 (3.0%)
GAY	3 (0.8%)	9 (1.8%)	2 (0.8%)	14 (1.3%)
LESBIAN	1 (0.3%)	6 (1.2%)	1 (0.4%)	8 (0.7%)
PANSEXUAL	1 (0.3%)	1 (0.2%)	0 (0.0%)	2 (0.2%)
QUEER	0 (0.0%)	3 (0.6%)	0 (0.0%)	3 (0.3%)
STRAIGHT/HETEROSEXUAL	312 (85.0%)	409 (82.8%)	202 (82.8%)	923 (83.5%)
SELF-IDENTIFY	1 (0.3%)	6 (1.2%)	1 (0.4%)	8 (0.7%)
PREFER NOT TO ANSWER	23 (6.3%)	33 (6.7%)	23 (9.4%)	79 (7.1%)
RACE/ETHNICITY				
WHITE	326 (86.9%)	451 (90.0%)	216 (88.5%)	993 (88.7%)
ASIAN	3 (0.8%)	4 (0.8%)	3 (1.2%)	10 (0.9%)
AFRICAN AMERICAN/ BLACK	8 (2.1%)	18 (3.6%)	8 (3.3%)	34 (3.0%)
NATIVE HAWAIIAN/OTHER PACIFIC ISLANDER	3 (0.8%)	8 (1.6%)	3 (1.2%)	14 (1.3%)
AMERICAN INDIAN/ ALASKAN NATIVE	28 (7.5%)	9 (1.8%)	9 (3.7%)	46 (4.1%)
TWO OR MORE RACES	6 (1.6%)	7 (1.4%)	3 (1.2%)	16 (1.4%)
HISPANIC/LATINO	17 (4.7%)	39 (8.0%)	8 (3.4%)	64 (5.9%)
LANGUAGE				
ENGLISH	376 (98.7%)	376 (98.7%)	245 (99.6%)	1119 (98.3%)
SPANISH	8 (2.1%)	8 (2.1%)	1 (0.4%)	16 (1.4%)
HMONG	1 (0.2%)	1 (0.2%)	0 (0.0%)	1 (0.1%)
MANDARIN	1 (0.2%)	1 (0.2%)	0 (0.0%)	1 (0.1%)

	FOREST	ONEIDA	VILAS	COMBINED
	(N=381)	(N=506)	(N=246)	(N=1133)
MARITAL STATUS				
SINGLE/NEVER MARRIED	65 (17.4%)	87 (17.4%)	33 (13.5%)	185 (16.5%)
MARRIED	240 (64.2%)	311 (62.3%)	161 (65.7%)	712 (63.7%)
DIVORCED	35 (9.4%)	43 (8.6%)	17 (6.9%)	95 (8.5%)
WIDOWED	15 (4.0%)	34 (6.8%)	21 (8.6%)	70 (6.3%)
LIVE WITH PARTNER	19 (5.1%)	24 (4.8%)	13 (5.3%)	56 (5.0%)
AGE				
UNDER 18	5 (1.3%)	1 (0.2%)	0 (0.0%)	6 (0.5%)
18-25	44 (11.8%)	39 (7.8%)	29 (11.8%)	112 (10%)
26-40	108 (28.9%)	157 (31.3%)	48 (19.6%)	313 (27.9%)
41-55	100 (26.7%)	108 (21.6%)	60 (24.5%)	268 (23.9%)
56-65	57 (15.0%)	95 (19.0%)	57 (23.3%)	209 (18.7%)
66-75	35 (9.4%)	68 (13.6%)	39 (15.9%)	142 (12.7%)
OVER 75	25 (6.7%)	33 (6.6%)	12 (4.9%)	70 (6.3%)
EDUCATION LEVEL				
8TH GRADE OR LESS	0 (0.0%)	5 (0.4%)	3 (1.2%)	5 (0.4%)
HIGH SCHOOL- NO DIPLOMA	11 (2.9%)	29 (2.6%)	5 (2.0%)	29 (2.6%)
HS DIPLOMA OR GED	72 (19.3%)	174 (15.5%)	25 (10.2%)	174 (15.5%)
SOME COLLEGE, NO DEGREE	72 (19.3%)	225 (20.1%)	60 (24.5%)	225 (20.1%)
ASSOCIATE DEGREE	94 (25.1%)	231 (20.6%)	41 (16.7%)	231 (20.6%)
BACHELOR'S DEGREE	71 (19.0%)	301 (26.9%)	81 (33.1%)	301 (26.9%)
MASTER'S DEGREE	50 (13.4%)	129 (11.5%)	24 (9.8%)	129 (11.5%)
ADVANCED DEGREE	4 (1.1%)	25 (2.2%)	6 (2.4%)	25 (2.2%)
EMPLOYMENT STATUS				
I DO NOT WORK	10 (2.7%)	27 (5.4%)	10 (4.1%)	47 (4.2%)
I WORK	268 (71.1%)	301 (60.7%)	170 (70.0%)	739 (66.2%)
UNEMPLOYED	1 (0.3%)	10 (2.0%)	5 (2.1%)	16 (1.4%)
RETIRED	62 (16.4%)	93 (18.8%)	42 (17.3%)	197 (17.7%)
STUDENT	7 (1.9%)	8 (1.6%)	2 (0.8%)	17 (1.5%)
MILITARY	0 (0.0%)	0 (0.0%)	1 (0.4%)	1 (0.1%)
HOMEMAKER	9 (2.4%)	24 (4.8%)	4 (1.6%)	37 (3.3%)
DISABLED	7 (1.9%)	15 (3.0%)	2 (0.8%)	24 (2.2%)
OTHER	13 (3.4%)	18 (3.6%)	7 (2.9%)	38 (3.4%)

	FOREST (N=381)	ONEIDA (N=506)	VILAS (N=246)	COMBINED (N=1133)	
NUMBER OF JOBS					
SINGLE/NEVER MARRIED	219 (59.2%)	272 (55.5%)	158 (64.8%)	649 (58.8%)	
MARRIED	65 (17.6%)	56 (11.4%)	21 (8.6%)	142 (12.9%)	
DIVORCED	6 (1.6%)	5 (1.0%)	12 (4.9%)	23 (2.1%)	
WIDOWED	2 (0.5%)	3 (0.6%)	1 (0.4%)	6 (0.5%)	
NUMBER OF PEOPLE IN MY HOU	ISEHOLD UNDER	R 18			
NONE	206 (55.5%)	303 (60.7%)	149 (61.3%)		
1	69 (18.6%)	95 (19.0 %)	47 (19.3%)	211 (19.0%)	
2	50 (13.5%)	74 (14.8%)	32 (13.2%)	156 (14.0%)	
3	31 (8.4%)	17 (3.4%)	10 (4.1%)	58 (5.2%)	
4	11 (3.0%)	8 (1.6%)	2 (0.8%)	21 (1.9%)	
5 OR MORE	4 (1.1%)	2 (0.4%)	3 (1.2%)	9 (0.8%)	

APPENDIX B: FOREST COUNTY THEME TABLES



QUESTION 1: FOREST - WHAT CONCERNS OR ISSUES IN YOUR LIFE OR LIVES OF YOUR LOVED ONES MAKE IT HARD TO BE HEALTHY OR LIVE A HEALTHY LIFE?

ТНЕМЕ	DEFINITION	# OF OCCURRENCES	EXAMPLES
ACCESSIBILITY / AVAILABILITY OF HEALTH CARE AND HOUSING	COMMENTS CITED THE NEED FOR MORE DOCTORS, DENTISTS, AND HOUSING OPTIONS.	9 (36%)	LACK OF MEDICAL. LACK OF HOUSING. THESE THINGS ARE NEEDED TO KEEP PEOPLE HERE AND KEEP THE COMMUNITY HEALTHY. HAVE TO DRIVE SO FAR TO GET MEDICAL TREATMENT. 200 BEDS (NURSING HOME) WERE SOLD AND I'VE HEARD ONCE YOU SELL THEM YOU CAN'T GET THEM BACK.
ACCESSIBILITY / AVAILABILITY OF ACTIVITIES	COMMENTS FOCUS ON THE NEED FOR MORE ACTIVITIES FOR ALL AGES.	7 (28%)	THEY DON'T HAVE ENOUGH THINGS FOR THE YOUNG TEENAGERS TO DO. NOTHING TO KEEP THEM OCCUPIED AND STAYING HEALTHY. WINTER ICY ROADS MAKE IT DIFFICULT TO WALK (TO WORK, FOR HEALTH, ETC.). HARD TO USE THE WALKING TRAIL IN THE WINTER NEED ADULT ACTIVITIES THAT DON'T INVOLVE BARS.
LOCATION / TRANSPORTATION	COMMENTS CITED THE NEED FOR CLOSER ACTIVITIES AND FACILITIES.	7 (28%)	DISTANCE TO GOOD MEDICAL HELP. ONE OF THE COSTS OF AN AGING AREA. THE COMMUNITY BUILDING IS GREAT TO GO WORKOUT AND SUCHBUT LIVING OUTSIDE OF CRANDON OR RHINELANDER MAKES IT DIFFICULT TO USE THAT FACILITY WITH FULL TIME JOBS, KIDS ACTIVITIES, AND OTHER PERSONAL LIFE SITUATIONS. NOT A LOT OF OPTIONS TO DO THAT DON'T INVOLVE DRINKING.

QUESTION 1: FOREST - WHAT CONCERNS OR ISSUES IN YOUR LIFE OR LIVES OF YOUR LOVED ONES MAKE IT HARD TO BE HEALTHY OR LIVE A HEALTHY LIFE?

ТНЕМЕ	DEFINITION	# OF OCCURRENCES	EXAMPLES
AFFORDABILITY / OPTIONS OF HEALTHY FOOD	COMMENTS FOCUSED ON THE NEED FOR MORE ACCESS TO HEALTHY FOOD AND THE NEED TO REDUCE THE COST FOR HEALTHY FOOD.	6 (25%)	SHOPPING LOCAL IS WANTED BUT TOO HARD TO DO WITH PRICES. GLUTEN FREE (OR OTHER DIET ISSUES) OPTIONS IN RESTAURANTS – DON'T EXIST. AFFORDABILITY OF FRESH FRUIT – STRAWBERRIES WERE \$9 ONE DAY.
ACCESSIBILITY FOR ELDERLY	COMMENTS CITED THE NEED FOR MORE LOCAL RESOURCES FOR THE ELDERLY	5 (20%)	NURSING HOME – USED TO HAVE ONE BUT DON'T HAVE ONE ANYMORE. START ADJUSTING ACCESSIBILITY FOR THE ELDERLY. THERE'S A LOT OF US. WE'RE GOING TO BE IN TROUBLE VERY SOON. PEOPLE WILL HAVE TO MOVE IF WE DON'T START PLANNING AND PROVIDING SUPPORT. DISTANCE TO GOOD MEDICAL HELP. ONE OF THE COSTS OF AN AGING AREA.
OTHER	COMMENTS THAT DID NOT FIT INTO OTHER THEMES.	3 (12%)	THERE IS SOME INFRASTRUCTURE – IT IS JUST VACANT. INFLUENCE OF THE DRUG DEALERS IN CRANDON AREA. BUILDINGS ARE QUESTIONABLE – BACKGROUND MEANS I PUT THINGS UNDER A MICROSCOPE.

QUESTION 2: FOREST - HAS THERE BEEN A CHANGE IN THE HEALTH OF PEOPLE CLOSE TO YOU IN THE LAST THREE TO FIVE YEARS? IF SO, PLEASE EXPLAIN/DESCRIBE.

EXAMPLES ARE UNEDITED OTHER THAN TO REMOVE REFERENCES TO SPECIFIC NAMES OR TITLES

THEME	DEFINITION	# OF OCCURRENCES	EXAMPLES
PHYSICAL / MENTAL HEALTH	COMMENTS CITED THE INCREASE IN HEALTH-RELATED CONCERNS.	8 (53%)	A LOT OF CANCER IN OUR COMMUNITY. ONEIDA COUNTY HAS HIGH CANCER RATES – WHOLE NORTHWOODS DOES. INCREASE IN TYPE I AND II DIABETES. SOCIAL ISOLATION OF SPECIFIC DEMOGRAPHICS (COVID BASED).
AODA	COMMENTS CITED AN INCREASE IN DRUG AND VAPING USE.	6 (40%)	DRUG USE IN THE YOUTH IS HIGH. ODS HAPPENING IN SCHOOLS (MIDDLE AND HIGH SCHOOLS). VAPING HAS INCREASED. DRIVING OUT ON ROUTE 8 AND YOU GET A WHIFF OF MARIJUANA FROM THE OTHER CAR ON THE ROAD.
OTHER	COMMENTS THAT DID NOT FIT INTO OTHER THEMES.	2 (13%)	GANGS IN THE SCHOOLS. TECHNOLOGICAL ADVANCES IN MEDICINE.

QUESTION 3: FOREST - WHAT ARE THE TOP THREE THINGS THAT NEED TO BE IMPROVED IN OUR COMMUNITY?

THEME	DEFINITION	# OF OCCURRENCES	EXAMPLES
BETTER / MORE SERVICES	COMMENTS FOCUS ON THE NEED FOR MORE PROVIDERS (HEALTHCARE/ DENTAL/MENTAL HEALTH) AND MORE	14 (26%)	ORGANIZED TRANSPORTATION (AS A GROUP DISCUSSED THIS NEW OPTION FOR FOREST COUNTY). LACK OF MEDICAL / DENTAL SOMETIMES STOPS OR SLOWS GETTING HELP FOR NEEDS.
SERVICES (CHILD AND ELDER CARE)		CHILDCARE ISN'T AVAILABLE IN OUR COMMUNITY THE WAY IT SHOULD BE.	
GET COMMUNITY MORE INVOLVED /CIVIC ENGAGEMENT COMMENTS FOCUSED ON MORE COMMUNITY ENGAGEMENT.			NEED TO MAKE THINGS FUN AND CHANGE WITH THE TIMES. LET THE YOUNGER ONES TAKE ON INITIATIVES AND TRY NEW THINGS AND SEE IF IT WORKS!
	10 (19%)	A LOT OF US WORK 2-3 JOBS SO THAT ALSO MAKES IT HARD TO VOLUNTEER.	
	LINGAGENIENT.		GET THE COMMUNITY MORE INVOLVED AND MORE INTERESTED IN THE RESOURCES THAT ARE AVAILABLE TO THEM.

QUESTION 3: FOREST - WHAT ARE THE TOP THREE THINGS THAT NEED TO BE IMPROVED IN OUR COMMUNITY?

THEME	DEFINITION	# OF OCCURRENCES	EXAMPLES EXAMPLES
ACCESSIBILITY / AFFORDABILITY OF HOUSING	COMMENTS CITED THE NEED FOR MORE HOUSING OPTIONS FOR FAMILIES, SENIORS, AND THE ELDERLY.	8 (15%)	THE LEGISLATURE NEEDS TO GET TOGETHER AND MAKE SURE A NURSING HOME HAPPENS HERE. FAMILY HOUSING – LACK OF, CONDITION OF, AND AFFORDABILITY OF (SEVERAL COMMENTS ABOUT THIS). SENIOR LIVING CENTER FOR EDUCATION AND PROGRAMS.
FIND A WAY TO KEEP YOUNG FAMILIES HERE	COMMENTS FOCUSED ON THE NEED FOR MORE INDUSTRY JOBS AND SMALL BUSINESSES.	7 (13%)	INDUSTRY & JOBS THAT WILL KEEP YOUNG FAMILIES HERE (SEVERAL COMMENTS ABOUT THIS). THERE ARE A TON OF EMPTY BUILDINGS - FILL THEM WITH BUSINESSES (MEDICAL, DENTAL, STORES, ETC.). MORE SMALL BUSINESSES (10 SMALL ONES VS. 1 BIG ONE).
COMMUNICATE / MARKET RESOURCES	COMMENTS CITED THE NEED TO COMBINE EFFORTS AND IMPROVE MARKETING OF RESOURCES.	6 (11%)	BETTER MARKETING CAN HELP WITH THE COMMUNICATION TOO. USE EVENTS TO MARKET FOR THE NEXT EVENT(S). COMMUNICATE RESOURCES BETTER BETWEEN DEPARTMENTS AND ALSO TO THE COMMUNITY. A LOT OF PEOPLE DON'T KNOW WHAT'S ALL OUT THERE. COUNTY AND TRIBAL INITIATIVES ALSO OVERLAP SO OPPORTUNITY TO COMBINE EFFORTS THERE TOO.
NEED MORE FOR THE COMMUNITY TO DO	COMMENTS FOCUSED ON THE NEED FOR MORE THINGS TO DO.	4 (8%)	IF KIDS DON'T PLAY SPORTS – THEY DON'T HAVE MUCH TO DO AFTER SCHOOL. NEED MORE THINGS TO DO. NEED A MOVIE THEATER.
OTHER	COMMENTS THAT DID NOT FIT INTO OTHER THEMES.	5 (9%)	DAIRY FARMS HAVE ALL BEEN ELIMINATED. COMPANIES WOULDN'T COME GET MILK ANYMORE IN THE AREA. BETTER GAS PRICES – WE PAY MORE DUE TO THE AREA BEING A TOURISM AREA. STOP LIGHTS (NOT ALL AGREED).

OTHER

NOT FIT INTO OTHER

THEMES.

QUESTION 4: FOREST - WHAT ARE THE TOP THREE STRENGTHS OF OUR COMMUNITY?

EXAMPLES ARE UNEDITED OTHER THAN TO REMOVE REFERENCES TO SPECIFIC NAMES OR TITLES. # OF THEME **DEFINITION EXAMPLES** OCCURRENCES WE HAVE A GOOD AMBULANCE SERVICE -THE CREWS ARE ON THE BALL.. LIBRARY DOES A GOOD JOB HOLDING COMMENTS FOCUS EVENTS IN THE SUMMER TIME FOR KIDS (BUT RESOURCES / ON THE VARIOUS 14 (48%) NEED BETTER MARKETING). **SERVICES RESOURCES THAT** \$10 SENIOR CITIZEN BUS TRANSPORTATION ARE AVAILABLE. - JUST STARTED 2 WEEKS AGO - THEY HAVE 4 DRIVERS NOW. THIS WILL BE A FANTASTIC RESOURCE FOR THAT POPULATION. HARD WORKERS. LOTS OF PEOPLE HAVE 2-3 JOBS. THERE IS ALWAYS A FUNDRAISER **COMMENTS CITE** GOING ON. HOW COMMUNITY STRONG THE LEGION - DOES A LOT FOR THE MEMBERS COME 10 (24%) COMMUNITY COMMUNITY. **TOGETHER TO ASSIST** LEGION POST DOES A LOT FOR THE EACH OTHER. COMMUNITY - FUNERAL SERVICES, SCHOLARSHIPS, FUNDRAISERS. TELEHEALTH WAS KNOWN OR USED BY COMMENTS MOST PARTICIPANTS. HIGHLIGHT MENTAL GOOD PHYSICAL THERAPY SERVICES -6 (21%) **HEALTH CARE** AND PHYSICAL **HEALTH & MOTION.** HEALTHCARE NEARBY AODA TREATMENT FACILITY (TRI PROGRAMS. COUNTY). ATV TRAILS - BIG DRAW FOR THE AREA / **COMMENTS CITED** TOURISM. THINGS TO DO THE THINGS THAT GET 4 (14%) OUTSIDE RURAL SETTING. PEOPLE OUTSIDE ENVIRONMENT. TOURIST INDUSTRY CARRIES OUR AREA. COMMENTS THAT DID NO TRAFFIC.

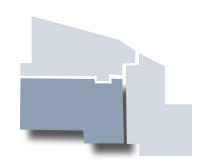
3 (10%)

STRONG K-12 EDUCATION.

L/AIVIPLLS ARE UNE	EXAMPLES ARE UNEDITED OTHER THAN TO REMOVE REFERENCES TO SPECIFIC NAMES OR TITLES				
ТНЕМЕ	DEFINITION	# OF OCCURRENCES	EXAMPLES		
			LONG-TERM CARE FACILITIES.		
ACCESSIBILITY / AFFORDABILITY OF HOUSING	COMMENTS CITED THE NEED FOR HOUSING OPTIONS.	8 (19%)	NEWER HOUSING – MOST OF THE HOUSES IN THE AREA ARE VERY OLD AND HAVE ISSUES SO PEOPLE DON'T WANT TO LIVE IN THESE HOUSES OR LIVE NEXT TO THESE HOUSES (IF THEIR HOUSE IS GOOD).		
			AFFORDABLE NEWER APARTMENT COMPLEX WOULD BE HELPFUL – BUT INFRASTRUCTURE WOULDN'T HANDLE IT (WATER & SEWER).		
FIND A WAY TO KEEP YOUNG FAMILIES HERE AND GET THEM MORE INVOLVED IN COMMUNITY	COMMENTS CITED THE NEED FOR INDUSTRY, BETTER PAYING JOBS, AND CHILDCARE OPTIONS.	7 (17%)	CHILD CARE (AFFORDABLE AND ACCESSIBLE) AND CHILD CARE CENTER. ONLY ONE CENTER FOR LOW INCOME. ALL INCOMES NEED CHILD CARE.		
			BETTER WAGE JOBS (TO HELP KEEP YOUNG FAMILIES).		
			EVERYTHING HAS TO BE MADE SOMEWHERE IN AMERICA. WE CAN HAVE INDUSTRY HERE, BUT NEW INDUSTRY GOES SOUTH. BRING INDUSTRY HERE.		
COMMUNICATE / MARKET PROGRAMS, RESOURCES & SERVICES	COMMENTS CITED A NEED FOR MORE ADVERTISING ABOUT EVENTS AND RESOURCES IN THE COMMUNITY.	6 (14%)	SCHOOL DISTRICTS NEED TO COMMUNICATE WITH EACH OTHER BETTER ABOUT PROGRAMS.		
			A NEW WEBSITE THAT MAKES SENSE – WELCOMING WHERE ALL RESOURCES AND SERVICES ARE ORGANIZED FOR THE ENTIRE COUNTY.		
			BETTER COMMUNICATION AND OUTREACH ABOUT SERVICES AND RESOURCES.		

EXAMPLES ARE UNEDITED OTHER THAN TO REMOVE REFERENCES TO SPECIFIC NAMES OR TITLES				
THEME	DEFINITION	# OF OCCURRENCES	EXAMPLES	
	COMMENTS CITED		IN APPLETON THEY'RE BUILDING MULTI- STORY BUILDINGS WHERE STORES ARE ON THE FIRST LEVEL AND APARTMENTS ABOVE. VERY CONVENIENT, WOULDN'T HAVE TO DRIVE.	
MORE / CHEAPER STORES & RESTAURANTS	THE NEED FOR CLOSER STORES AND	6 (14%)	MORE RESTAURANTS – CHAINS – ANYTHING THAT WOULD COME HERE.	
	RESTAURANTS.		RUBY'S PANTRY TYPE OF OPTION WHERE PEOPLE CAN FOR \$25, GET FRESH FRUITS & VEGETABLES & STAPLES (HEALTHY FOODS) EITHER DELIVERED TO THEIR HOUSE OR THEY CAN PICK UP.	
			TEACH OUR YOUTH - INCREASE 4H AND OTHER PROGRAMS THAT FOCUS ON LIVING SELF-RELIANT AND OFF THE LAND AGAIN.	
SUSTAINABILITY	COMMENTS CITED TO NEED TO MODERNIZE AND BECOME LOCALLY SUSTAINABLE.	5 (12%)	BE MORE LOCALLY DEPENDENT / RELIANT / SUSTAINABLE - IN ALL ASPECTS (FOOD, GOODS) - HOMESTEADING, INCREASE LOCAL PRODUCE, BUY MORE LOCALLY (INSTEAD OF AMAZON). FARMERS MARKETS EXIST IN THE SUMMER, AND THEY SELL OUT QUICKLY.	
			TECHNOLOGY OF TODAY CAN DO THINGS DIFFERENTLY. CAN'T KEEP DOING THINGS THE SAME OLD WAY (FARMING FOR EXAMPLE – CONTAINER FARMS).	
	COMMENTS FOCUSED ON THE NEED TO MAINTAIN AND ENHANCE THE WALKING TRAILS AND HAVE ADDITIONAL INDOOR ACTIVITIES.	4 (10%)	NEED MORE NATURE WALKS AND A WAY TO MAKE IT EASIER IN THE WINTER.	
ACCESSIBILITY OF / MORE INDOOR & OUTDOOR ACTIVITIES			MORE THINGS TO DO THAT AREN'T HUNTING & FISHING TO HELP KEEP FAMILIES HERE TOO: THEATER, BOWLING ALLEY, DANCING, ADULT PROGRAMS, KID PROGRAMS (NOT SPORTS).	
			WALKING TRAIL FROM WEST TO EAST SIDES OF TOWN CONNECT. MARKED CROSSWALKS, ACCESSIBLE, AND A BIKE LANE.	
OTHER	COMMENTS THAT DID	5 (12%)	BREAK DOWN THE SILO'S THAT HAVE BEEN BUILT TO OPEN COMMUNICATION WITHIN THE COUNTY.	
	NOT FIT INTO OTHER THEMES.		BETTER TRANSPORTATION. DO NOT NARROW THE HIGHWAYS GOING EAST OUT OF CRANDON.	

APPENDIX C: ONEIDA COUNTY THEME TABLES



QUESTION 1: ONEIDA - WHAT CONCERNS OR ISSUES IN YOUR LIFE OR LIVES OF YOUR LOVED ONES MAKE IT HARD TO BE HEALTHY OR LIVE A HEALTHY LIFE?

ТНЕМЕ	DEFINITION	# OF OCCURRENCES	EXAMPLES
	COMMENTS CITED		THE WAITING LIST TO GET INTO PLACES TO BE SEEN IS ASTRONOMICALLY RIDICULOUS. HEALTH CARE, SUBSTANCE ABUSE, KOHLER, ALL OF IT.
POOR COMMUNITY		20 (47%)	ACCESS TO DOCTORS, NOT JUST PAS. PAS ARE NOT DOCTORS.
CARE	HUMAN SERVICE PROVIDERS AND LOCATIONS.	20 (47%)	I KNOW IN ONEIDA COUNTY TOO, THEY'VE BEEN WORKING REALLY HARD ON TRYING TO GET A CLEAN NEEDLE STATION. AND THEY GET SHUT DOWN EVERY SINGLE TIME BECAUSE THEY'RE LIKE WHY WOULD WE ENABLE THAT?
	COMMENTS FOCUS ON THE NEED FOR REDUCE COST FOR HEALTHY FOOD AND PROGRAMING THAT EDUCATES INDIVIDUALS ABOUT HEALTHY LIVING	11 (26%)	COST OF HEALTHY LIVING AND EATING. IT'S A FINANCIAL BURDEN AROUND HERE. NOT MANY PLACES PAY GOOD SALARIES. PEOPLE CAN'T AFFORD TO LIVE AND EAT HEALTHY.
HEALTHY FOOD			YOU CAN BUY A BIG MAC FOR LESS THAN YOU CAN BUY A CONTAINER OF FRUIT.
			EDUCATION OF YOUNGER KIDS AND HOW TO COOK. PARENTS DON'T HAVE TIME TO TEACH THEIR KIDS HOW TO COOK.
ACTIVITIES	COMMENTS FOCUS ON THE NEED FOR MORE ACTIVITIES FOR COMMUNITY MEMBERS.	8 (19%)	THERE'S NOTHING ELSE REALLY AVAILABLE FOR SOCIALIZING AFTER HOURS THAT ISN'T ALCOHOL RELATED.
			A LOT OF PROGRAMS IN THE AREA ARE DURING WORK HOURS. HARD TO FIND THINGS OUTSIDE NORMAL WORKING HOURS
			I THINK HONESTLY THE KIDS WOULD BENEFIT FROM A PLACE OF THEIR OWN.

QUESTION 1: ONEIDA - WHAT CONCERNS OR ISSUES IN YOUR LIFE OR LIVES OF YOUR LOVED ONES MAKE IT HARD TO BE HEALTHY OR LIVE A HEALTHY LIFE?

THEME	DEFINITION	# OF OCCURRENCES	EXAMPLES
OTHER	COMMENTS THAT DID NOT FIT INTO OTHER THEMES.	6 (14%)	WINTER IS SO LONG HERE THAT SOMETIMES IT'S HARD TO GET OUTSIDE AND DO THINGS THAT ARE ENJOYABLE AS FAR AS EXERCISE, WALKING, THINGS LIKE THAT. I DON'T THINK THAT ONEIDA COUNTY PROMOTES ENOUGH RESOURCES THAT ARE ACTUALLY OUT THERE. NOBODY KNOWS HALF THE STUFF EXISTED. MORE TO DO HERE THAN OTHER LOCAL AREAS (CRANDON, PELICAN LAKE)

QUESTION 2: ONEIDA - HAS THERE BEEN A CHANGE IN THE HEALTH OF PEOPLE CLOSE TO YOU IN THE LAST THREE TO FIVE YEARS? IF SO, PLEASE EXPLAIN/DESCRIBE.

THEME	DEFINITION	# OF OCCURRENCES	EXAMPLES
HEALTHCARE ISSUES	COMMENTS CITED THE POOR QUALITY OF TREATMENT RECEIVED DUE TO THE BURNOUT OF STAFF.	7 (41%)	STIGMA FOR DRUG AND ALCOHOL USERS HAS GOTTEN WORSE. THEY (HEALTHCARE WORKERS) DON'T CARE ABOUT YOUR ISSUES AND DON'T WANT TO TREAT SOMEONE WHO IS USING.
			I DON'T KNOW IF CULTURALLY IT'S ACCEPTABLE TO JUST NOT BE COMPASSIONATE AND HAVE TERRIBLE BEDSIDE MANNER BECAUSE I'VE NOT HAD VERY GOOD EXPERIENCES AT ALL. SO THEN, YOU ADD SHORT STAFFING AND THAT'S SO YOU GET SOMEONE THAT'S ALREADY NOT THAT COMPASSIONATE AND THEN YOU GET THAT.
			HEALTH WORKERS ARE BURNOUT.
	COMMENTS FOCUS ON THE INCREASED COST FOR CARE AND THE LACK OF APPOINTMENT AVAILABILITY, SPECIALTY CARE OPTIONS AND LIMITED LOCATIONS	5 (29%)	QUALITY OF HEALTHCARE HAS REALLY DECLINED.
HEALTHCARE ISSUES			LACK OF SPECIALISTS HAS MADE IT MORE DIFFICULT (HUSBAND RECENTLY DIAGNOSED WITH RA BUT WAS DIFFICULT TO GET THAT DIAGNOSIS WITH SPECIALISTS AVAILABLE IN RHINELANDER)
			POLICY DRIVEN – BUT HOW EXPENSIVE NURSING HOMES ARE AND HOW MEDICARE FORCES LIQUIDATION PRIOR TO COVERING COSTS.
OTHER	COMMENTS THAT DID NOT FIT INTO OTHER THEMES.	5 (29%)	THE PRICES IN THE GROCERY STORES HAVE GONE WAY UP AND THE STOCK HAS GONE WAY DOWN AND THERE'S INTERRUPTIONS AND TIGHTENING.
			AND THE EDUCATION ON HOW TO GROW YOUR OWN HEALTHY FOOD WOULD BE A GOOD THING.
			INCREASE IN MENTAL HEALTH CHANGES, THAT WAS ALMOST IMMEDIATELY AFTER SHUT DOWN (WITHIN A MONTH).

QUESTION 3: ONEIDA - WHAT ARE THE TOP THREE THINGS THAT NEED TO BE IMPROVED IN OUR COMMUNITY?

ТНЕМЕ	DEFINITION	# OF OCCURRENCES	EXAMPLES EXAMPLES
COMMUNITY PROGRAMMING	COMMENTS FOCUS ON THE NEED TO BETTER THE ACCESSIBILITY OF INFORMATION ABOUT RESOURCES THROUGHOUT THE COMMUNITY.	11 (28%)	IS THE HEALTH DEPT ONLY FOR LOW-INCOME PEOPLE? WE'RE TAXPAYERS, WHY CAN'T WE ACCESS THOSE RESOURCES? CENTRALIZED KNOWLEDGE OF RESOURCES. ONEIDA COUNTY IS A HIGH ELDERLY POPULATION WHO WILL NOT BE ON THE INTERNET. HOW DO WE COMMUNICATE WITH THESE PEOPLE THAT ARE OFTEN ALSO STUCK IN THEIR HOMES?
HEALTHCARE ISSUES	COMMENTS CITED THE NEED FOR MORE HEALTHCARE INSURANCE PLANS, SPECIALTY CARE AND LOCATIONS.	10 (26%)	PEOPLE GOING TO THEIR HOMES VS. REHAB DUE TO LACK OF FACILITIES, COST, ETC. EAP MENTAL HEALTH SPECIALISTS – THROUGH LOCAL INSURANCE THERE ISN'T ANYONE AVAILABLE IN OUR AREA. INSURANCE AVAILABLE FOR UNEMPLOYED/ LAID OFF
SUPPORT GROUPS	COMMENTS CITED THE NEED FOR MORE SUPPORT GROUPS.	10 (26%)	WE ALWAYS HAVE AA AND NA, ALL THOSE SUPPORT GROUPS BUT I THINK THE COMMUNITY REALLY NEEDS AND OA, WHICH IS OVEREATERS ANONYMOUS. GOING TO THE BACK TO THE LBGT. I WOULD LIKE TO SEE SOMETHING MORE OUT THERE FOR SUPPORT GROUPS FOR PARENTS. A LOT MORE SUPPORT GROUPS
COMMUNITY INVOLVEMENT / ACTIVITIES (KIDS & ADULTS)	COMMENTS FOCUS ON THE NEED FOR MORE ACTIVITIES GEARED TOWARDS KIDS.	5 (13%)	SAFE PLACE FOR COMMUNITY INVOLVEMENT - SOME KIND OF STRUCTURE. THE MAYOR COULD HAVE EASILY OPENED UP A ROLLER RINK WITH AN ARCADE IN IT INSTEAD OF ANOTHER BAR THAT WE DIDN'T NEED. I THINK THAT THE YOUNGER KIDS NEED WAY MORE STUFF TO DO THAT IS GEARED TOWARDS THEM THAT THEY CAN GO TO.

QUESTION 3: ONEIDA - WHAT ARE THE TOP THREE THINGS THAT NEED TO BE IMPROVED IN OUR COMMUNITY?

THEME	DEFINITION	# OF	EXAMPLES
		OCCURRENCES	2.0 % % 2.20
			MORE AFFORDABLE HOUSING
	001414511500155		RENTAL / UTILITY ASSISTANCE
HOUSING	THE NEED FOR MORE HOUSING OPTIONS.	3 (8%)	LOTS OF PEOPLE LIVING IN THEIR HOMES WELL PAST WHEN THEY SHOULD BE BECAUSE THERE'S NO PLACE FOR THEM TO GO DUE TO THE NUMBER OF BEDS AND AFFORDABILITY.
OTHER	COMMENTS THAT DID NOT FIT INTO OTHER THEMES.	5 (13%)	TEACH KIDS THE BASICS OF HOW TO COOK AND COOK HEALTHY.
			CHILDCARE IS A BIG ISSUE. MOMS ARE TALKING ABOUT MAJOR ISSUES GETTING CHILDCARE AND A LOT END UP STAYING HOME BECAUSE THEY CAN'T FIND ANYTHING OR IS IT SO EXPENSIVE, THE WAGE THEY MAKE DIDN'T COVER THE CHILDCARE COST.
			PEOPLE NEED TO REALIZE THAT THEY WANT TO MAKE HIGHER WAGES AND THAT'S WHAT DRIVES THE COSTS UP EVERYWHERE ELSE. FOR YOU TO MAKE MORE, CHILDCARE, GOOD, SERVICES, ETC. COSTS NEED TO BE INCREASED AND THAT COMES BACK TO US TO PAY.

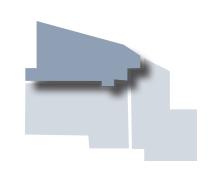
QUESTION 4: ONEIDA - WHAT ARE THE TOP THREE STRENGTHS OF OUR COMMUNITY?EXAMPLES ARE UNEDITED OTHER THAN TO REMOVE REFERENCES TO SPECIFIC NAMES OR TITLES

EXAMPLES ARE UNEDITED OTHER THAN TO REMOVE REFERENCES TO SPECIFIC NAMES OR TITLES				
ТНЕМЕ	DEFINITION	# OF OCCURRENCES	EXAMPLES	
HEALTH CARE	COMMENTS CITED VARIOUS RESOURCES THAT HAVE ASSISTED THE COMMUNITY MEMBERS WITH PHYSICAL AND MENTAL HEALTH.	7 (33%)	I FEEL VERY GRATEFUL, NOT ONLY THE COVID VACCINATION IS ALL FREE AND I CAN JUST BOOK MY APPOINTMENT THROUGH WALGREENS APP. AND ALSO THE MONKEYPOX VACCINATION THAT HAPPENED LAST YEAR. THE POLICE HERE ARE VERY UNDERSTANDING AND COMPASSIONATE WITH MENTAL HEALTH. TELEHEALTH. GETTING MORE ANSWERS VIA SPIRUS TELEHEALTH WHEN MESSAGING WITH THEM VS. AN IN-PERSON VISIT.	
COMMUNITY PROGRAMMING	COMMENT CITED THE NEED FOR INCREASED MARKETING ABOUT AVAILABLE RESOURCES.	5 (24%)	SILVER SNEAKERS WAS PRE-COVID BUT NOT SURE IT'S AROUND ANYMORE. IT SEEMS LIKE WE DO HAVE A LOTS OF RESOURCES, BUT THE KNOWLEDGE OF THOSE RESOURCES AND THEN THE ACCESSIBILITY IS REALLY CHALLENGING. THERE'S A LOT OUT THERE TO HELP OUR COMMUNITY (JUST NEED TO COMMUNICATE THE RESOURCES AND PROGRAMS AND MARKET IT EFFECTIVELY).	
ASSISTANCE	COMMENTS FOCUS VARIOUS ASSISTANT PROGRAMS	4 (19%)	THE FOOD PANTRY OUT HERE IS PHENOMENAL, IT'S JUST IT'S AWESOME. THE ENERGY ASSISTANCE IS AMAZING. THAT IS DEFINITELY HELPFUL. HOMELESS SHELTER.	
OTHER	COMMENTS THAT DID NOT FIT INTO OTHER THEMES.	3 (14%)	SAFETY OF COMMUNITY NUMBER OF PEOPLE THAT ARE WILLING TO HELP OTHERS (CHRISTMAS GIFTS, MEALS AT VARIOUS PLACES AROUND TOWN) PRINTPACK IS A GOOD PAYING COMPANY. GOOD TO HAVE THIS OPTION (AS WELL AS A FEW OTHERS) IN RHINELANDER.	

ТНЕМЕ	DEFINITION	# OF OCCURRENCES	EXAMPLES
MORE RESOURCES FOR COMMUNITY	COMMENTS CITED THE NEED FOR HOUSING OPTIONS.	6 (26%)	I THINK THERE SHOULD BE MORE OPTIONS FOR SAFE PLACES LIKE THE WOMEN'S SEXUAL ASSAULT.
			I'VE SAID I'VE SEEN A LOT OF PEOPLE SLEEPING IN LAUNDROMATS BECAUSE IT'S THE ONLY THING OPEN AT NIGHT, SO MAYBE ACCESSIBILITY THE OF THE HOMELESS SHELTER THAT IS IN TOWN NEEDS TO BE RELOOKED AT AS FAR AS SIZE.
			ANOTHER THING THAT'S REALLY GOOD IS ALL OF THE SUPPORT THAT THEY GIVE FOR REFIXING YOUR HOUSE AND DOING ALL THAT, IT'S GREAT.
BETTER ADVERTISING OF RESOURCES/ SERVICES	COMMENTS FOCUS ON THE NEED FOR INCREASED COMMUNICATE ABOUT RESOURCES THAT ARE AVAILABLE.	4 (17%)	USE THE TV AND/OR RADIO TO COMMUNICATE SERVICES & RESOURCES. WHAT HEALTH SERVICES ARE, WHERE PEOPLE CAN GO, ETC. (THE GROUP DID ACKNOWLEDGE THAT THE THINGS THEY WANT ARE MORE BIG CITYAND THEY KNOW THEY DON'T WANT BIG CITY LIVING.)
			80% OF COMMUNITY MAKES AT LEAST A WEEKLY TRIP TO WALMART – "ADVERTISE" THE RESOURCES/SERVICES THERE OR PUT FLYERS IN THE BAGS
			I AM REALLY FRUSTRATED THAT THINGS ARE GOING UP SO MUCH IN PRICE NOW TO FIX ANYTHING OR ANYTHING LIKE THAT, BUT THE COMMUNITY DOES HAVE A GOOD OUTREACH FOR YOU IF YOU NEED A HOT WATER TANK OR YOU NEED TO GET YOUR WATER SYSTEM FIGURED OUT BECAUSE IT'S TOO HARD OR WHATEVER.

EXAMPLES ARE UNE	EXAMPLES ARE UNEDITED OTHER THAN TO REMOVE REFERENCES TO SPECIFIC NAMES OR TITLES # 05				
THEME	DEFINITION	# OF OCCURRENCES	EXAMPLES		
			UPKEPT BUILDINGS AND ROADS SO LIVING STAYS NICE.		
SAFETY / INFRASTRUCTURE	COMMENTS CITED THE NEED TO MAINTAIN OR REBUILD INFRASTRUCTURE	4 (17%)	MORE TRANSPORTATION FOR PEOPLE OF ALL AGES. IF PEOPLE DON'T HAVE A CAR, YOU CAN'T GO ANYWHERE. THERE'S CITY TRANSIT AND ONE OTHER ORGANIZATION BUT YOU HAVE TO GIVE THEM 24-HOUR NOTICE TO GET PICKED UP. THERE ARE CABS, BUT THEY'RE PRETTY "GROSS".		
			ADDRESS ISSUES WITH PFAS IN CITY WATER.		
COMMUNITY - SUPPORTIVE PEOPLE	COMMENTS FOCUS ON THE NEED FOR ACCEPTANCE, INCLUSION AND CONNECTION WITH OTHERS.	3 (13%)	ACCEPTANCE FOR ALL PEOPLE. MORE OPEN MINDEDNESS. I THINK BOTH OF THAT COMES IN PART THROUGH CONNECTION, FACILITATING CONNECTION, HAVING ACTUAL COMMUNITY, WHICH WE HAVE A LOT OF MINOR COMMUNITIES BUT NOTHING COHESIVE.		
			LIFE ISN'T ABOUT ALL OF THE STIMULATION THAT'S OUT IN THOSE BIG CITIES. IT'S MORE OF WHAT NATURE AND GOD OFFERS HERE IN THE NORTHWOODS.		
			WHAT YOU SAID THAT'S ASPERGERS, LGBT, ALCOHOLIC, AND DRUG ADDICTION. ALL OF THOSE THINGS HAVE SUCH A NEGATIVE, INSTEAD OF LIFTING UP.		
		6 (26%)	PAY TEACHERS AND CHILDCARE PROVIDERS MORE. YES, THEIR BENEFITS MIGHT BE A LITTLE BETTER, BUT IT TAKES A SPECIAL KIND OF PERSON TO BE IN THESE PROFESSIONS SO THEY SHOULD BE REWARDED.		
			AVAILABILITY OF DOCTORS, NURSES AND THE WHOLE HEALTH CARE SYSTEM.		
OTHER	COMMENTS THAT DID NOT FIT INTO OTHER THEMES.		WE HAVE BEEN TRYING TO FIND A HOUSE TO BUY FOR SIX YEARS AND WE CAN'T DO IT BECAUSE AS SOON AS IT GOES ON THE MARKET IT'S SOLD BECAUSE ALL THESE BIG TIME PEOPLE ARE COMING IN AND BUYING UP ALL THE REAL ESTATE SO IT MAKES IT ALMOST IMPOSSIBLE FOR ANYONE ELSE, AND THEN IT JUST RAISES EVERYTHING ELSE UP. NOW OUR RENTS MORE, OR THIS IS MORE, EVERYTHING IS COSTING AN ASTRONOMICAL AMOUNT.		

APPENDIX D: VILAS COUNTY THEME TABLES



QUESTION 1: VILAS - WHAT CONCERNS OR ISSUES IN YOUR LIFE OR LIVES OF YOUR LOVED ONES MAKE IT HARD TO BE HEALTHY OR LIVE A HEALTHY LIFE?

ТНЕМЕ	DEFINITION	# OF OCCURRENCES	EXAMPLES
HEALTH CARE ISSUES	COMMENTS CITED THE LACK OF PROVIDERS, FACILITIES, AND LIMITED INSURANCE COVERAGE.	21 (50%)	DOCTORS DON'T CARE ABOUT THE ELDERLY. ANOTHER THING THAT'S THIS, ER HOSPITAL IS A BAND-AID HOSPITAL. AND ONLY A COUPLE FAMILY MEMBERS ARE ELIGIBLE FOR INSURANCE.
CONTINUITY OF HEALTH CARE	COMMENTS CITED THE HIGH TURNOVER OF PROVIDERS AND LACK OF APPOINTMENT AVAILABILITY.	10 (24%)	I'VE HAD LIKE 3 DOCTORS IN THE LAST TWO YEARS. AND A COUPLE OTHER FRIENDS I FOUND A LUMP ON MY BREAST. HAD IT CHECKED. AND THEY SAID, WELL, WE'LL WAIT. SIX MONTHS TO SEE. WHAT HAPPENS? I SAID YOU DON'T WAIT SIX MONTHS. YOU FIND SOMEWHERE ELSE TO GO, SO SHE ENDED UP GOING DOWN TO MARSHFIELD. AND THEY SAID, NO, YOU CAN'T WAIT, IT IS CANCER. LET'S DEAL WITH IT. WELL, IT'S NOT ONLY THE DOCTORS WE'RE LOSING. WE'RE LOSING GOOD QUALITY CARE FOR SENIOR SOFTWARE.
FOOD ISSUES	COMMENTS CITED THE HIGH COST OF HEALTHY FOOD AND LACK OF AVAILABILITY.	9 (21%)	ITS AFFORDABLE IF YOU WANT TO SPEND AN ARM AND A LEG FOR THE HEALTHY VEGETABLES. BUT HERE IN THE FOOD PANTRY. YOU GET A POUND OF HAMBURGER. IT'S SUPPOSED TO LAST TWO WEEKS, SO YOU CAN ONLY GO TWICE A MONTH TO GET ONE POUND OF HAMBURGER. FARMERS MARKETS ARE ONLY DURING SUMMER ON WEDNESDAY

QUESTION 1: VILAS - WHAT CONCERNS OR ISSUES IN YOUR LIFE OR LIVES OF YOUR LOVED ONES MAKE IT HARD TO BE HEALTHY OR LIVE A HEALTHY LIFE?

ТНЕМЕ	DEFINITION	# OF OCCURRENCES	EXAMPLES		
TRANSPORTATION ISSUES	COMMENTS CITED THE DISTANCE REQUIRED TO TRAVEL TO APPOINTMENTS.	7 (17%)	AND HEALTHCARE IS A PROBLEM TOO. YEAH - TOO MUCH TRAVELING. THERE ARE DISABILITIES THAT CAN'T DRIVE. AND THAT TO GET ACCESS FOR THEM.		
			SO THERE'S NO INFRASTRUCTURE THAT THE COMMUNITY IS ESTABLISHED FOR TRANSPORTATION LIKE TAXIS OR SOMETHING, NONE.		
			AND TO GET PROPER HEALTHCARE, YOU HAVE TO TRAVEL TO TIMBUKTU.		
OTHER	COMMENTS THAT DID NOT FIT INTO OTHER THEMES.	7 (17%)	LOW PAYING JOBS. ADDICTION		
			LACK OF SOCIAL SUPPORT NETWORKS.		

QUESTION 2: VILAS - HAS THERE BEEN A CHANGE IN THE HEALTH OF PEOPLE CLOSE TO YOU IN THE LAST THREE TO FIVE YEARS? IF SO, PLEASE EXPLAIN/DESCRIBE.

THEME	DEFINITION	# OF OCCURRENCES	EXAMPLES
			YOU CAN'T GET PROPER HEALTHCARE, THAT'S A BASIC INFRASTRUCTURE WE SHOULD HAVE.
HEALTH CARE	COMMENTS CITED		DENTAL IS ABSOLUTELY HORRID UP HERE
SYSTEM / DOCTORS	THE POOR QUALITY OF HEALTH AND DENTAL CARE.	8 (17%)	THEY'RE, THEY'RE JUST TIRED, THEY'RE OVERWORKED. THEY'RE JUST SORT OF ENDED. THEY DON'T HAVE GOOD ATTITUDES. SO YOU GO IN THERE. FOR HEALTHCARE AND THEYRE ANGRY, YOU KNOW IT'S LIKE. BUT YOU CAN'T BLAME THEM, YOU KNOW.
HOUSING ISSUES	THE COMMENTS FOCUSED ON THE LACK OF HOUSING AVAILABILITY AND THE HIGH PRICES.	7 (15%)	THE RENT FOR A ONE OR TWO-BEDROOM HOUSE IS LIKE \$1500. AND THE PAY IS LIKE REALLY CRAP HERE. AND GOOD LUCK TRYING TO FIND AN APARTMENT.
			ALSO THE COST AND AVAILABILITY OF HOUSING. ESPECIALLY FOR PEOPLE WITH PETS.
			WE NEED ANOTHER HOMELESS.
			ITS JUST PLAIN OLD DEPRESSION. EVERYBODY'S DEPRESSED
MENTAL HEALTH (DEPRESSION)	COMMENTS CITED THE INCREASE IN MENTAL HEALTH CONCERNS AND THE LACK OF FACILITIES.	6 (13%)	THEY NEED MORE ESTABLISHMENTS FOR LOONEY PEOPLE THAT CAN GO THERE INSTEAD OF WALKING THE STREETS AND END UP SHOOTING EVERYBODY AT THEIR LIKE WORK OR SCHOOL OR ANYWHERE YOU KNOW THOSE PEOPLE SHOULD BE LOCKED UP IN A LITTLE LOONEY BIN AND THEY SHOULD BE. WELL, WITH THE ADDICTION YOU KNOW WITH THE DRUGS THE PERSON HAS TO BE WILLING TO HELP THEIR SELF BEFORE ANYBODY BE ABLE TO HELP THEM. YOU KNOW THERE'S NOT THAT MUCH AROUND HERE FOR THAT.

QUESTION 2: VILAS - HAS THERE BEEN A CHANGE IN THE HEALTH OF PEOPLE CLOSE TO YOU IN THE LAST THREE TO FIVE YEARS? IF SO, PLEASE EXPLAIN/DESCRIBE.

EXAMPLES ARE UNEDITED OTHER THAN TO REMOVE REFERENCES TO SPECIFIC NAMES OR TITLES				
THEME	DEFINITION	# OF OCCURRENCES	EXAMPLES	
HEALTH CARE - LOCATION	COMMENTS CITED THE NEED FOR CLOSER HEALTHCARE AND DENTAL FACILITIES.	5 (11%)	HARD TO FIND A DOCTOR THAT'S CLOSE TO YOU. YOU GET YOUR BLOOD WORK UP HERE AT THE HOSPITAL AND THEN THEY GOT TO FAX IT TO YOUR DOCTOR IN MILWAUKEE. AND IT JUST GOT TO BE A NIGHTMARE. YOU COULD GO TO RHINELANDER OR TO LAC DU FLAMBO, WHICH IS A LONG WAYS TO GO AND AND I THINK THEY HAVE TROUBLE GETTING.	
HEALTH CARE - INSURANCE	COMMENTS CITED THE LACK OF INSURANCE COVERAGE FOR MEDICAL AND DENTAL CARE.	4 (8%)	VETS CAN'T GO TO THE DENTIST. DON'T BE A VET. YOU CAN'T GO TO THE DENTIST. THEY JUST DON'T COVER IT. SEASONALLY. SO IF THAT'S THE CASE, THEN YOU'VE GOT TO PAY FOR THE DENTIST YOURSELF SO YOU KNOW IF YOU'RE ON BADGER CARE, THEN YOU'RE LIMITED GET BACK ON THE WHEEL AND THEY'RE PROVIDING THEIR OWN INSURANCE, BUT THAT MEANS IF I HAVE TO GO SOMEWHERE ELSE IF I'M GOING TO TAKE A TRIP TO SOUTH DAKOTA OR WHATEVER, I GOT NO INSURANCE. IT'S ONLY HERE.	
HEALTH CARE - CONTINUITY	COMMENTS CITED THE LACK OF QUALITY HEALTHCARE.	4 (8%)	THESE DOCTORS ARE THEY LIMITED TO WHAT THEY CAN AND CAN'T DO, BECAUSE I DON'T KNOW IF PEOPLE KNOW, BUT THESE HOSPITALS AND DOCTORS OR BIG MEDICAL PLACES ARE ALL OWNED BY BIG PHARMACEUTICAL. SHE NEEDED MEDICAL CARE. HE TOOK HER TO THE ER OVER HERE. AT THE HOSPITAL AND THEY SAID WE CAN'T DO ANYTHING FOR YOU. YOU HAVE. TO GO TO RHINELANDER. TOOK HER TO RHINELANDER AND THEY SAID WE CAN'T DO ANYTHING FOR YOU. THEY SENT HER DOWN TO WESTON, BY THE TIME SHE GOT THERE IT WAS MUCH WORSE SO. WHY DON'T WE HAVE CARE UP HERE FOR THAT TYPE OF THING? IT'S A HOSPITAL, SHOULD THEY NOT BE ABLE TO TREAT US? MEDICAL CARE AND DOCTOR AVAILABILITY GOT WORSE	

QUESTION 2: VILAS - HAS THERE BEEN A CHANGE IN THE HEALTH OF PEOPLE CLOSE TO YOU IN THE LAST THREE TO FIVE YEARS? IF SO, PLEASE EXPLAIN/DESCRIBE.

THEME	DEFINITION	# OF OCCURRENCES	EXAMPLES EXAMPLES
	COMMENTS CITED		THERE'S SO MANY MORE PEOPLE UP HERE MAKING NEW APPOINTMENTS THAT WEREN'T HERE BEFORE AND NOW IT'S JUST I WANT TO SORT OF STAFF THAT THERE IS.
HEALTH CARE - MORE ACCESS	THE NEED FOR MORE PROVIDERS AND CLOSER FACILITIES.	4 (8%)	I'M HAVING A PROBLEM GETTING MEDICATIONS RIGHT NOW. I GOT TO GO ALL THE WAY TO ANOTHER COUNTY TO GET THEM.
			HARD TO GET A DOCTOR APPOINTMENT. YOU CAN'T EVEN GET IN ANYWHERE, YOU KNOW.
JOBS / WAGE /	COMMENTS FOCUSED ON NEED FOR MORE	. (22)	RESTAURANTS ARE ONLY OPEN ONE OR TWO DAYS A WEEK BECAUSE THEY CAN'T FIND HELP.
MONEY ISSUES	WORKERS AND HIGHER WAGES.	4 (8%)	YEAH, THAT'S THE STATE MOTTO: NOW HIRING.
			LOW PAYING JOBS.
	COMMENTS CITED THE INFLUX OF PEOPLE.	3 (6%)	WE'VE HAD A MAJOR INFLUX IN POPULATION.
POPULATION			THINGS LIKE YEAR TWO YEARS OR THREE YEARS AGO THEY HAD 300 NEW STUDENTS AT THE HIGH SCHOOL AND THOSE WEREN'T JUST KIDS COMING FROM MIDDLE SCHOOL TO HIGH SCHOOL.
	T LOT LL.		THERE'S SO MANY MORE PEOPLE UP HERE MAKING NEW APPOINTMENTS THAT WEREN'T HERE BEFORE AND NOW IT'S JUST I WANT TO SORT OF STAFF THAT THERE IS, SO LET'S. SEE NO WORRIES SURE.
			THE ROADS ARE A PROBLEM.
OTHER	COMMENTS THAT DID NOT FIT INTO OTHER THEMES.	8 (17%)	I DON'T THINK HEALTH SHOULD BE USED IN A POLITICAL ENVIRONMENT, PERIOD. SO THEY'RE WEAPONIZING HEALTHCARE.
			I WORK IN THE IC HEALTH SITE IN ABOUT 50% OF THE PEOPLE THAT COME IN REQUESTING A GAS CARD TO SEE A TO DOCTOR. IF IT'S IN THE MINUTES OF THE LAST BOARD MEETING, IT WAS 60%.

QUESTION 3: VILAS - WHAT ARE THE TOP THREE THINGS THAT NEED TO BE IMPROVED IN OUR COMMUNITY?EXAMPLES ARE UNEDITED OTHER THAN TO REMOVE REFERENCES TO SPECIFIC NAMES OR TITLES

	1	1	
ТНЕМЕ	DEFINITION	# OF OCCURRENCES	EXAMPLES
	COMMENTS		WE NEED MORE PEOPLE HELPING, MORE RESOURCES OUT THERE.
COMMUNITY SUPPORT/ RESOURCES	FOR BETTER COMMUNICATION ABOUT EVENTS AND	9 (31%)	THEY ALSO NEED MORE VOLUNTEERS, AND THEY'RE TRYING TO FIGURE OUT HOW TO GET PEOPLE TO VOLUNTEER
	RESOURCES		MARKETING THE RESOURCES WOULD BE PRETTY GOOD.
			LACK OF TREATMENT SERVICES FOR JAILED INMATES- THERE'S NOTHING TO HELP PEOPLE KEEP CLEAN ONCE THEY LEAVE JAIL
MENTAL HEALTH	COMMENTS FOCUSED ON THE NEED FOR MORE MENTAL HEALTH PROVIDERS.	7 (24%)	MENTAL HEALTH IS AN ISSUE AND THEN GETTING SERVICES. SOMETIMES YOU NEED MORE THAN JUST THE SOCIAL WORKER COUNSELOR.
			RIGHT NOW TO GO SEE A PSYCHIATRIST. IT'S LIMITED HERE. AND THEN TO GET IN. YOU'RE WAITING MONTHS.
	COMMENTS CITED THE NEED FOR MORE TREATMENT OPTIONS FOR PEOPLE WHO USE DRUGS.	7 (24%)	CRIME - IT SEEMS LIKE IF THEY GET BUSTED FOR DRUGS, THEY JUST GET A SLAP IN THE HAND AND LOCKED UP IN JAIL FOR A LITTLE BIT AND THEN GET LET OUT. THEN BACK ON THE HIGH HORSE.
ADDICTION / JAIL			RIGHT, LIKE I WANT SOMEONE TO HELP ME LEARN TO STAY SOBER LIKE I DID IT ALL ON MY OWN.
			IF YOU DON'T DO ANYTHING TO HELP DRUG ADDICTS, ALL THEY WANT TO DO IS CONTINUE TO USE THE DRUGS.

QUESTION 3: VILAS - WHAT ARE THE TOP THREE THINGS THAT NEED TO BE IMPROVED IN OUR COMMUNITY?EXAMPLES ARE UNEDITED OTHER THAN TO REMOVE REFERENCES TO SPECIFIC NAMES OR TITLES

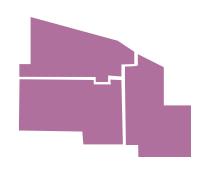
ТНЕМЕ	DEFINITION	# OF OCCURRENCES	EXAMPLES
	COMMENTS CITED THE NEED FOR MORE JOBS AND MORE VOLUNTEER POSITIONS TO BE PAID POSITIONS.		SO EVERYTHING UP HERE IS A LOT OF VOLUNTEER WORK. WHERE IN THE CITY, YOU KNOW, THESE ARE PAID POSITIONS
JOBS / WAGES		6 (21%)	VOLUNTEERS ALSO DON'T GET TREATED THE SAME AT ALL. THE PAID FIREFIGHTERS GET HEALTHCARE WHILE VOLUNTEERS DON'T.
			WHETHER IT'S PUKALL WHETHER IT'S MARSHFIELD CLINIC, WHATEVER IT MAY BE, I THINK EVERYBODY'S HURT FOR STAFF
	COMMENTS CITED THE NEED FOR AFFORDABLE HOUSING	5 (17%)	LOW INCOME HOUSING.
HOUSING			HOUSING AND MORE AFFORDABLE HOUSING
HOUSING			I THINK HOUSING IS A PROBLEM, BUT UNFORTUNATELY I DON'T THINK ANYONE BENEFITS FROM ASSISTANCE.
OTHER	COMMENTS THAT DID NOT FIT INTO OTHER THEMES.	4 (14%)	THE AMOUNT OF GARBAGE ON SOME OF THESE SIDE ROADS AND STUFF LIKE THAT.
			WAKE WAVES JUST DESTROYS YOUR SHORELINE AND THEY'RE YELLING AT YOU ABOUT DON'T PUT THIS ON THE SHORELINE.
			WE NEED GOOD IMPROVEMENTS IN THE FACILITIES AND THE PEOPLE, THE DOCTORS THAT ARE WORKING.

QUESTION 4: VILAS - WHAT ARE THE TOP THREE STRENGTHS OF OUR COMMUNITY?EXAMPLES ARE UNEDITED OTHER THAN TO REMOVE REFERENCES TO SPECIFIC NAME

EXAMPLES ARE UNEDITED OTHER THAN TO REMOVE REFERENCES TO SPECIFIC NAMES OR TITLES				
ТНЕМЕ	DEFINITION	# OF OCCURRENCES	EXAMPLES	
EVENTS / TOURISM	COMMENTS CITED THE RELIANCE ON EVENTS ON TOURISM.	10 (29%)	THE DERBY IS A REALLY GOOD DRAW HERE. FARMERS MARKET. TOURISM IS AWESOME.	
ENVIRONMENT / OUTDOOR ACTIVITIES	COMMENTS CITED VARIOUS RECREATIONAL ACTIVITIES.	8 (23%)	THERE'S A LOT OF RECREATIONAL THINGS FOR PEOPLE TO GET OUT CLEAN, CLEAN AIR CLEAN AIR. ONE OF THE THINGS THAT THEY DO WHEN OUR KIDS ARE IN HIGH SCHOOL IS CROSS COUNTRY SKIING AND FISHING AND ICE FISHING.	
RECESSION / COSTS	COMMENTS FOCUSED ON THE HIGH COST OF LIVING.	5 (14%)	YEAH, THERE'S A LOT OF PEOPLE THAT CAN'T EVEN AFFORD FOOD. AND THAT'S A LOT BECAUSE THEY'RE ASKING FOR ASSISTANCE AND EVERYTHING ELSE. GAS PRICES ARE UP. IF THAT WAS LOW DOWN, LOWER DOWN IT WOULD BE A LITTLE BIT EASIER. THE ELECTRIC AND NATURAL GAS THAT HAD WENT UP ALREADY. IT'S THE ALL-TIME HIGH THAT EVERYBODY'S PAYING THIS YEAR. YOU KNOW BETWEEN FOOD AND THAT, I DON'T SEE HOW ANYBODY'S GOING TO MAKE IT, YOU KNOW, UNLESS YOU HAVE THREE JOBS.	
COMMUNITY SUPPORT	COMMENTS FOCUSED ON COMMUNITY SPIRT AND CONNECTION.	5 (14%)	VERY HIGH LEVEL OF COMMUNITY SPIRIT. YOU KNOW BANBURY FEST, THAT TYPE OF THING YOU KNOW IT BRINGS MONEY INTO, YOU KNOW, LIKE THIS. PEOPLE DO GENUINELY CARE ABOUT THE COMMUNITY. GOOD AND HEALTHY FOR THE COMMUNITY TO WORK TOGETHER AS A TEAM TO ACHIEVE SUCCESS ESPECIALLY WHEN THERE'S A TRAGEDY	

EXAMPLES ARE UNEDITED OTHER THAN TO REMOVE REPERENCES TO SPECIFIC NAMES OR TITLES				
ТНЕМЕ	DEFINITION	# OF OCCURRENCES	EXAMPLES	
HOUSING	COMMENTS CITED THE NEED FOR MORE ACCESSIBLE HOUSING THAT IS MAINTAINED.		MORE RETIREMENT HOMES OR SENIOR CENTERS, STUFF LIKE THAT.	
		8 (40%)	MORE WHEELCHAIR ACCESSIBLE APARTMENTS, LIKE APARTMENTS OR CONDOS.	
			AFFORDABLE HOUSING.	
STORES	COMMENTS CITED THE NEED FOR A BIG BOX STORE AND THE REDUCTION IN THE COST OF FOOD.	4 (20%)	WALMART WE WANT A WALMART.	
			A BIG BOX STORE AND FEWER SPECIALTY STORES.	
			SO, COST CONTROL IS A MAJOR THING FOR ME.	
	COMMENTS THAT DID NOT FIT INTO OTHER THEMES.	8 (40%)	PLACES TO PARK.	
OTHER			LIKE A LOW KEY LIGHT, THAT'S A RETIRED SLOW PACED ENVIRONMENT	
			YEAH, BIGGER MEDICAL FACILITY AND CLINICAL AND THAT. SO THE SPECIALTY DOCTORS ARE HERE.	

APPENDIX E: COMBINED COUNTY THEME TABLES



QUESTION 1: WHAT CONCERNS OR ISSUES IN YOUR LIFE OR LIVES OF YOUR LOVED ONES MAKE IT HARD TO BE HEALTHY OR LIVE A HEALTHY LIFE?

ТНЕМЕ	DEFINITION	# OF OCCURRENCES	EXAMPLES
	COMMENTS CITED THE LACK OF QUALITY HEALTH AND DENTAL CARE SERVICES	49 (41.5%)	WE'RE LOSING GOOD QUALITY CARE FOR SENIORS.
LACK OF ACCESS TO HEALTH/ DENTAL CARE			WELL, WE THAT WE HAVE A REVOLVING DOOR WITH DOCTORS. DOCTORS DO NOT STAY UP HERE AND NOW MOST PEOPLE SEE A NURSE PRACTITIONER BECAUSE THERE AREN'T ENOUGH DOCTORS.
			I HAVE ONE CONCERN, AND THAT IS OUR HEALTH CARE SYSTEM UP HERE.
	COMMENTS CITED THE HIGH COST AND LIMITED ACCESSIBILITY TO OBTAIN HEALTHY FOOD	25 (21.2%)	GROCERY PRICES ARE HIGH AND THIS MAKES IT HARD FOR PEOPLE TO BUY NUTRITIOUS AND HEALTHY FOODS
COST AND ACCESSIBILITY OF HEALTHY FOOD			YOU CAN BUY A BIG MAC FOR LESS THAN YOU CAN BUY A CONTAINER OF FRUIT.
HEALIHY FOOD			TOO MANY OPPORTUNITIES TO NOT EAT HEALTHY. LOTS OF FAST-FOOD OPTIONS THAT ISN'T GOOD FOR US.
	DISTANCE REQUIRED	15 (12.7%)	HAVE TO DRIVE SO FAR TO GET MEDICAL TREATMENT. IF YOU NEED A SPECIALIST, YOU HAVE TO GO TO WAUSAU OR SOMEWHERE FAR. WOULD BE NICE TO HAVE MORE MEDICAL ASSISTANCE HERE.
TRAVEL TIME TO APPOINTMENTS			SO THERE'S NO INFRASTRUCTURE THAT THE COMMUNITY IS ESTABLISHED FOR TRANSPORTATION TO MEDICAL APPOINTMENTS.
			AND HEALTHCARE IS A PROBLEM TOO. YEAH - TOO MUCH TRAVELING AND WHAT PEOPLE. THERE ARE DISABILITIES THAT CAN'T DRIVE.

QUESTION 1: WHAT CONCERNS OR ISSUES IN YOUR LIFE OR LIVES OF YOUR LOVED ONES MAKE IT HARD TO BE HEALTHY OR LIVE A HEALTHY LIFE?

ТНЕМЕ	DEFINITION	# OF OCCURRENCES	EXAMPLES
LACK OF RESOURCES TO TEACH HEALTHY BEHAVIORS FOR TEENS/CHILDREN	COMMENTS CITED REFLECT THE LACK OF AVAILABLE RESOURCES FOR TEENS/CHILDREN	13 (11%)	WORK – 12-HOUR SHIFTS MAKE IT HARD (WORKING 6AM – 6PM) TO GO HOME AND COOK A HEALTHY DINNER OR TEACH KIDS HOW TO COOK.
			WE DON'T HAVE PROFESSIONALS OR EXPERTISE IN LGBTQ ISSUES LIKE IDENTITY CRISIS AND THEN HOW TO DEAL WITH THE RELATIONSHIP AND THE SOCIETY STUFF
			THEY DON'T HAVE ENOUGH THINGS FOR THE YOUNG TEENAGERS TO DO. NOTHING TO KEEP THEM OCCUPIED AND STAYING HEALTHY. MORE RESOURCES NEEDED.
LIMITED OPPORTUNITIES TO PRACTICE HEALTHY LIVING	COMMENTS CITED REFLECT THE LIMITED ACCESSIBILITY TO OUTDOOR ACTIVITIES OR FITNESS CENTERS	11 (9.3%)	HOURS OF GYMS. IF YOU WORK A NORMAL SHIFT, YOU CAN'T GET TO SOME OF THESE PLACES.
			WINTER ICY ROADS MAKE IT DIFFICULT TO WALK (TO WORK, FOR HEALTH, ETC.). HARD TO USE THE WALKING TRAIL IN THE WINTER.
			YMCA IS SO COSTLY UNLESS YOU REALLY GO A LOT.
LACK OF ACCESS TO ELDERLY SUPPORT		9 (7.6%)	COMMUNITY NEEDS TO BE MORE WELCOMING TO AND SUPPORTING OF THE SENIOR CITIZEN.
	COMMENTS CITED REFLECT THE LIMITED RESOURCES		NURSING HOME – USED TO HAVE ONE BUT DON'T HAVE ONE ANYMORE.
	AVAILABLE FOR THE ELDERLY.		START ADJUSTING ACCESSIBILITY FOR THE ELDERLY. THERE'S A LOT OF US. WE'RE GOING TO BE IN TROUBLE VERY SOON. PEOPLE WILL HAVE TO MOVE IF WE DON'T START PLANNING AND PROVIDING SUPPORT.

QUESTION 1: WHAT CONCERNS OR ISSUES IN YOUR LIFE OR LIVES OF YOUR LOVED ONES MAKE IT HARD TO BE HEALTHY OR LIVE A HEALTHY LIFE?

ТНЕМЕ	DEFINITION	# OF OCCURRENCES	EXAMPLES
	COMMENTS CITED REFLECT THE DIFFICULTY OF FINDING MENTAL HEALTH PROVIDERS.	9 (7.6%)	SO EVEN IF YOU WERE ABLE TO FIND A PROVIDER AND THEY'RE ONLY AVAILABLE ONLINE, SOME PEOPLE, WHERE THEY LIVE IN A RURAL AREA DON'T HAVE INTERNET ACCESS THAT CAN SUPPORT THAT.
INCREASED MENTAL HEALTH ISSUES AND STIGMA			IT'S OUR BEHAVIORAL HEALTH CENTER. THE ONLY REASON THAT SHE GOT INTO KOHLER FOR THERAPY AND PSYCHIATRY WAS BECAUSE SHE TRIED TO OVERDOSE AND END HER LIFE AND WENT TO THE ER AND THE ER REFERRED HER SO SHE GOT BUMPED UP ON THE LIST. IT SHOULDN'T TAKE THINGS TO GET TO THAT POINT FOR THESE KIDS TO GET HELP.
			MY DAUGHTER HAS BEEN ON A WAITING LIST FOR TWO YEARS FOR MENTAL HEALTH SUPPORT AND I THINK WE JUST HAVEN'T HEARD.
	COMMENTS CITED REFLECT THE NEED FOR ACTIVITIES THAT DO NOT INVOLVE SUBSTANCES.	6 (5.1%)	SOCIAL NORMS OF GOING OUT AND DRINKING. IT ISN'T FOR EVERYONE, BUT IF YOU DON'T DO IT, YOU FEEL ISOLATED.
INCREASED SOCIETAL PRESSURE TO USE SUBSTANCES			THEY HAD A NEW KID START SCHOOL AND HE MESSAGED MY DAUGHTER AND SAID WHAT IS THERE TO DO IN RHINELANDER? AND ALL FOUR OF MY DAUGHTERS FRIENDS SAT ON THE COUCH AND SAID DRINK AND DO DRUGS.
			INFLUENCE OF THE DRUG DEALERS.
	COMMENTS CITED REFLECT THE DESIRE TO PROMOTE AND ADVERTISE EXISTING COMMUNITY RESOURCES	6 (5.1%)	TELEHEALTH IS GOOD BUT SOMETIMES A FACE-TO-FACE NEEDS TO HAPPEN.
DESIRE TO PROMOTE EXISTING COMMUNITY			THERE WERE SO MANY THINGS THAT WERE OFFERED TO ME THAT I DIDN'T EVEN KNOW EXISTED.
RESOURCES			DOES ANYONE USE TELEHEALTH? AVAILABILITY OF THIS COULD HELP WITH APPTS.
	COMMENTS CITED REFLECT THE		IT'S A FINANCIAL BURDEN AROUND HERE. NOT MANY PLACES PAY GOOD SALARIES.
OTHER	INCREASING PRICES, THE NEED FOR MORE COMMUNITY PROGRAMS (SHARPS, HALFWAY HOUSE), AND ALLOWING HOUSES TO BE BUILT CLOSE TO EACH OTHER.	12 (10.2%)	THEY'VE BEEN WORKING REALLY HARD ON TRYING TO GET A CLEAN NEEDLE STATION. AND THEY GET SHUT DOWN EVERY SINGLE TIME BECAUSE THEY'RE LIKE WHY WOULD WE ENABLE THAT?
			THERE'S SOMEWHAT OF A WHAT WE CALL A BUBBLE ON EACH HOUSE WHERE YOU INTERRUPT YOUR NEIGHBORS HOUSE.

QUESTION 2: HAS THERE BEEN A CHANGE IN THE HEALTH OF PEOPLE CLOSE TO YOU IN THE LAST THREE TO FIVE YEARS? IF SO, PLEASE EXPLAIN/DESCRIBE.

THEME	DEFINITION	# OF OCCURRENCES	EXAMPLES
LACK OF ACCESSIBLE HEALTHCARE	COMMENTS CITED REFLECT THE LACK LOCAL DOCTORS OR	17 (15.7%)	DENTAL IS ABSOLUTELY HORRID UP HERE. YOU STILL CAN'T GET A DOCTOR UNLESS YOU TRAVEL, THAT'S THE ONLY WAY.
TIERETTIORICE	SERVICES AVAILABLE.		THERE ISN'T ANYWHERE YOU CAN GET YOUR LAB TESTS DONE.
	COMMENTS		THEY'RE JUST TIRED, THEY'RE OVERWORKED. THEY'RE JUST SORT OF ENDED. THEY DON'T HAVE GOOD ATTITUDES.
DECREASE QUALITY OF CARE INDIVIDUALS RECEIVED BY HEALTHCARE PROVIDERS WHE IMPACTED THE QUALITY OF CARE	THE JUDGEMENT INDIVIDUALS RECEIVED BY	14 (12.9%)	I WAS DIAGNOSED WITH SEIZURES BECAUSE OF A TRAUMATIC BRAIN INJURY. AND AFTER MY THIRD PHONE CALL CALLING 911, THEY WERE LIKE, OH HE'S A DRUG ADDICT. I NEVER ONCE WAS TESTED FOR ANYTHING, THEY JUST ASSUMED THAT THEY THOUGHT I WAS DETOXING OFF OF ALCOHOL OR SOMETHING, WHICH WASN'T THE CASE.
	RECEIVES.		I THINK IT'S A LOT OF JUST THE FIRST INITIAL JUDGEMENTS THAT ARE BEING PASSED.
INCREASE IN HEALTH PROBLEMS	COMMENTS CITED REFLECT AN INCREASE OF MENTAL AND PHYSICAL ISSUES.	13 (12%)	A LOT OF CANCER IN OUR COMMUNITY. INCREASE IN TYPE I AND II DIABETES. ITS JUST PLAIN OLD DEPRESSION. EVERYBODY'S DEPRESSED.
LASTING COVID IMPACTS	COMMENTS CITED REFLECT THE LASTING IMPACTS OF COVID IN INDIVIDUALS LIVES AND IN THE HEALTHCARE SYSTEM.	11 (10.2%)	I WANT TO SAY THEY PROBABLY GOTTEN WORSE BECAUSE WITH COVID THEY LOST SO MANY PEOPLE IN THE HEALTHCARE FIELD. IT WAS INSANE. THE ER IS COMPLETELY SHORT STAFFED AND RIDICULOUS. SOCIAL ISOLATION OF SPECIFIC DEMOGRAPHICS (COVID BASED). COVID HAS AFFECTED EVERYONE AT SOME POINT.

QUESTION 2: HAS THERE BEEN A CHANGE IN THE HEALTH OF PEOPLE CLOSE TO YOU IN THE LAST THREE TO FIVE YEARS? IF SO, PLEASE EXPLAIN/DESCRIBE.

ТНЕМЕ	DEFINITION	# OF OCCURRENCES	EXAMPLES
INCREASED SUBSTANCE USE	COMMENTS CITED REFLECT THE INCREASE IN SUBSTANCE USE	7 (6.5%)	DRUG USE IN THE YOUTH IS HIGH. ODS HAPPENING IN SCHOOLS (MIDDLE AND HIGH SCHOOLS). VAPING HAS INCREASED. DRIVING OUT ON ROUTE 8 AND YOU GET A WHIFF OF MARIJUANA FROM THE OTHER CAR ON THE ROAD.
LACK OF INSURANCE COVERAGE	COMMENTS CITED REFLECT THE LIMITED HEALTHCARE AVAILABILITY DUE TO INSURANCE COVERAGE.	5 (4.6%)	ALSO THE COST AND AVAILABILITY OF HOUSING. ESPECIALLY FOR PEOPLE WITH PETS. MOST OF THEM DON'T ALLOW THEM. THE RENT FOR A ONE OR TWO-BEDROOM HOUSE IS LIKE \$1500. AND THE PAY IS LIKE REALLY CRAP HERE. AND GOOD LUCK TRYING TO FIND AN APARTMENT. ESPECIALLY THERE IS NOTHING FOR LOW INCOME HOUSING, IT'S ALL FULL.
INCREASE IN POPULATION SIZE	COMMENTS CITED REFLECT AN INCREASE IN POPULATION.	3 (2.7%)	DON'T BE A VET. YOU CAN'T GO TO THE DENTIST. THEY JUST DON'T COVER IT. A LOT OF OUR FOLKS WORK SEASONALLY. SO IF THAT'S THE CASE, THEN YOU'VE GOT TO PAY FOR THE DENTIST YOURSELF SO YOU KNOW IF YOU'RE ON BADGER CARE, THEN YOU'RE LIMITED. YOU KNOW I, I WISH YOU COULD JUST GO TO A DOCTOR'S OFFICE AND SAY, I. DON'T HAVE ANY INSURANCE. WHAT CAN YOU DO FOR ME?
OTHER	COMMENTS THAT COULD NOT FIT INTO OTHER THEMES.	44 (40%)	EVERYTHING JUST TAKES MORE TIME. YOU KNOW, EVERYTHING'S ON DELAY. RESTAURANTS ARE ONLY OPEN ONE OR TWO DAYS A WEEK BECAUSE THEY CAN'T FIND HELP. I THINK WE DO A GOOD JOB OF KEEPING THE ROADS CLEAR. NOTHING.

QUESTION 3: WHAT ARE THE TOP THREE THINGS THAT NEED TO BE IMPROVED IN OUR COMMUNITY?EXAMPLES ARE UNEDITED OTHER THAN TO REMOVE REFERENCES TO SPECIFIC NAMES OR TITLES

EXAMPLES ARE UNEDITED OTHER THAN TO REMOVE REFERENCES TO SPECIFIC NAMES OR TITLES					
ТНЕМЕ	DEFINITION	# OF OCCURRENCES	EXAMPLES		
HEALTHCARE ACCESSIBILITY	COMMENTS CITED REFLECT THE LACK LOCAL DOCTORS OR SERVICES AVAILABLE.	33 (28%)	MENTAL HEALTH – THERE'S NOTHING IN OUR AREA. NEED MORE DOCTORS AND APPOINTMENT TIMES. ACCESSIBILITY FOR ELDERLY HEALTH CARE.		
RESOURCES FOR TEENS/ CHILDREN	COMMENTS CITED REFLECT THE DESIRE FOR MORE SUPPORT GROUPS AND ACTIVITIES.	18 (15%)	I THINK THAT THE YOUNGER KIDS NEED WAY MORE STUFF THAT THAT IS GEARED TOWARDS THEM THAT THEY CAN GO TO. KIDS NEED AN IEP TO GET EXTRA HELP, BUT EVEN IF THEY HAVE THAT, THEY DON'T NECESSARILY GET THE EXTRA HELP DUE TO LACK OF AIDES. AND MAYBE ALSO HAVE SUPPORT GROUPS FOR AUTISTIC PEOPLE.		
COMMUNITY ENGAGEMENT	COMMENTS CITED REFLECT THE DESIRE TO GET MORE INDIVIDUALS INVOLVED IN COMMUNITY ACTIVITIES	18 (15%)	GET THE COMMUNITY MORE INVOLVED AND MORE INTERESTED IN THE RESOURCES THAT ARE AVAILABLE TO THEM. BOARDS ARE ALSO LACKING MEMBERS RIGHT NOW. MORE VOLUNTEERS ARE NEEDED WITH ALL THE THINGS GOING ON.		
AVAILABILITY AND COST	COMMENTS CITED REFLECT THE IMPACT THAT INCREASES IN THE COST FOR FOOD, HOUSING, AND TRANSPORTATION HAS IMPACTED THE COMMUNITY.	16 (13.3%)	FAMILY HOUSING – LACK OF, CONDITION OF, AND AFFORDABILITY OF (SEVERAL COMMENTS ABOUT THIS). I DON'T SEE HOW ANYBODY'S GOING TO MAKE IT, YOU KNOW, UNLESS YOU HAVE THREE JOBS. PEOPLE NEED TO REALIZE THAT THEY WANT TO MAKE HIGHER WAGES AND THAT'S WHAT DRIVES THE COSTS UP EVERYWHERE ELSE.		

QUESTION 3: WHAT ARE THE TOP THREE THINGS THAT NEED TO BE IMPROVED IN OUR COMMUNITY?EXAMPLES ARE UNEDITED OTHER THAN TO REMOVE REFERENCES TO SPECIFIC NAMES OR TITLES

THEME	DEFINITION	# OF OCCURRENCES	EXAMPLES
PROMOTING AND MARKETING OF RESOURCES	COMMENTS CITED REFLECT THE NEED FOR BETTER COMMUNICATION AND MARKETING THAT PROMOTE RESOURCES	15 (13%)	WHY CAN'T THE COUNTY PUT SOMETHING DIRECTLY IN THE NEWSPAPER WITH A FLYER WITH AVAILABLE RESOURCES? BETTER RESOURCE LISTS OF WHAT'S AVAILABLE TO US IN DIFFERENT SPECIALTY AREAS. BETTER MARKETING CAN HELP WITH THE COMMUNICATION TOO. USE EVENTS TO MARKET FOR THE NEXT EVENT(S).
INCREASE IN COMMUNITY ACTIVITIES	COMMENTS CITED REFLECT THE NEED FOR MORE COMMUNITY ACTIVITIES.	13 (10.8%)	MORE THINGS FOR THE KIDS TO DO. MORE OUTDOOR ACTIVITIES, YOU KNOW, GET THEM OFF ON CELL PHONES. I THINK THAT THE YOUNGER KIDS NEED WAY MORE STUFF THAT THAT IS GEARED TOWARDS THEM THAT THEY CAN GO TO.
INCREASE INFRASTRUCTURE	COMMENTS CITED REFLECT THE WISH FOR NEW AND MORE ORGANIZED INFOSTRUCTURE WITHIN THE COMMUNITY.	12 (10%)	LARGE SPANS OF NOTHING WHICH MAKES IT DIFFICULT TO SPREAD THE WORD ABOUT THINGS. SOME PEOPLE RELY ON SOME SERVICES TOO MUCH (SHERIFF'S DEPARTMENT CALLED FOR NON-CRITICAL THINGS WHEN THEY SHOULD BE CALLING ADRC INSTEAD). DEPARTMENTS SHOULD IDENTIFY IF THEY'RE WORKING ON THE SAME THINGS AND COMBINE AND WORK TOGETHER FOR A STRONGER AND FASTER OUTCOME. LESS AND LESS FAMILIES STAY IN OUR AREA.

QUESTION 3: WHAT ARE THE TOP THREE THINGS THAT NEED TO BE IMPROVED IN OUR COMMUNITY? EXAMPLES ARE UNEDITED OTHER THAN TO REMOVE REFERENCES TO SPECIFIC NAMES OR TITLES

THEME	DEFINITION	# OF OCCURRENCES	EXAMPLES
INCREASE RECOURSES FOCUSED ON HEALTHY LIVING	COMMENTS CITED REFLECT THE NEED FOR MORE ACCESSIBLE PROGRAMS TO PROMOTE HEALTHY LIVING.	10 (8.3%)	IS THE HEALTH DEPT ONLY FOR LOW-INCOME PEOPLE? MORE PROGRAMS TO HELP LOSE WEIGHT AND BE HEALTHY. TEACH KIDS THE BASICS OF HOW TO COOK AND COOK HEALTHY.
OTHER	COMMENTS CITED REFLECT AN INCREASE IN ENVIRONMENTAL CONCERNS AND A NEED FOR CHANGE.	16 (13.3%)	NEED TO MAKE THINGS FUN AND CHANGE WITH THE TIMES. WAKE WAVES JUST DESTROYS YOUR SHORELINE AND THEY'RE YELLING AT YOU ABOUT DON'T PUT THIS ON THE SHORELINE. DON'T DO THAT, ONLY DO THIS ON THE SHORE, BUT YET THEY DON'T BAN THESE WEIGHT BOATS AND THEY YOU KNOW. THE AMOUNT OF GARBAGE ON SOME OF THESE SIDE ROADS AND STUFF LIKE THAT

QUESTION 4: WHAT ARE THE TOP THREE STRENGTHS OF OUR COMMUNITY? EXAMPLES ARE UNEDITED OTHER THAN TO REMOVE REFERENCES TO SPECIFIC NAMES OR TITLES

EXAMPLES ARE UNEDITED OTHER THAN TO REMOVE REFERENCES TO SPECIFIC NAMES OR TITLES				
THEME	DEFINITION	# OF OCCURRENCES	EXAMPLES	
	COMMENTS		VARIETY OF GROCERY STORES.	
INFRASTRUCTURE	FOCUSED ON THE SERVICES AND INFRASTRUCTURE	20 (28%)	GOOD PHYSICAL THERAPY SERVICES – HEALTH & MOTION.	
AND SERVICES	IN THE AERA THAT SERVES A THRIVING COMMUNITY		COMMUNITY CENTER AND THE CLASSES THEY OFFER AND THE POOL (MEMBERSHIP NEEDED).	
STRONG SENSE OF	COMMENTS FOCUSED ON COMMUNITY EVENTS,		COMMUNITY – DIDN'T HAVE DAYCARE MY FIRST WEEK BACK TO WORK AND I HAD FRIENDS AND FAMILY ALL TAKE A DAY OFF TO HELP OUT.	
COMMUNITY	VOLUNTEERS, AND A HIGH LEVEL OF	18 (25%)	OVERALL, PEOPLE DO GENUINELY CARE ABOUT THE COMMUNITY.	
	COMMUNITY SPIRIT.		AND THE HELP YOU GET FROM YOUR NEIGHBORS AND STUFF.	
TOURISM	COMMENTS CITED TOURISM AS A	77 (7504)	YOU KNOW BANBURY FEST, THAT TYPE OF THING IT BRINGS MONEY.	
IOURISM	COMMUNITY II (15%)	11 (15%)	TOURIST INDUSTRY CARRIES OUR AREA.	
	STRENGTH.		TOURISM IS AWESOME.	
			ATV TRAILS.	
	COMMENTS FOCUSED		RURAL SETTING.	
OUTDOORS	ON THE OUTDOORS, THE ENVIRONMENT, AND LIVING IN A RURAL SETTING.	8 (11%)	THERE'S A LOT OF RECREATIONAL THINGS FOR PEOPLE TO GET OUT. WE DO FAMILY THINGS YOU DON'T SEE THAT IN THE CITY AS MUCH THEY COME UP HERE TO DO. THAT, BUT EVEN US UP HERE, WE CAN DO IT A LOT. TAKE YOUR PICTURE, WE GET TO LIVE IT.	
FIRST RESPONDERS AND SERVICES	COMMENTS ADDRESSED COMMUNITY SERVICES INCLUDING: EMERGENCY MEDICAL SERVICES, POLICE AND FIRE SERVICES, SCHOOLS, ETC.	6 (8%)	WE HAVE A GOOD AMBULANCE SERVICE – THE CREWS ARE ON THE BALL. IF YOU NEED AN AMBULANCE YOU CAN GET ONE REAL QUICK. SCHOOL DISTRICT HAS BEEN EXCELLENT HELPING MY DAUGHTER MANAGE HER DIABETES. THE POLICE HERE ARE VERY UNDERSTANDING AND COMPASSIONATE WITH MENTAL HEALTH.	

QUESTION 4: WHAT ARE THE TOP THREE STRENGTHS OF OUR COMMUNITY? EXAMPLES ARE UNEDITED OTHER THAN TO REMOVE REFERENCES TO SPECIFIC NAMES OR TITLES.

EXAMPLES ARE UNEDITED OTHER THAN TO REMOVE REFERENCES TO SPECIFIC NAMES OR TITLES				
DEFINITION	# OF OCCURRENCES	EXAMPLES		
HOMELESS SHELTER, FOOD ASSISTANCE PROGRAMS, ENERGY ASSISTANCE, ETC.	5 (7%)	THE FOOD PANTRY OUT HERE IS PHENOMENAL, IT'S JUST IT'S AWESOME. HOMELESS SHELTER. THE ENERGY ASSISTANCE IS AMAZING.		
COMMENTS CITED		TELEHEALTH IS GREAT. HELPS DO ONE IN- PERSON PER YEAR WITH SPECIALISTS AND TELEHEALTH THE OTHER TIMES. SAVES TIME AND MONEY. COVID REALLY INCREASED THIS, WHICH HAS BEEN AWESOME.		
THE FLEXIBILITY	4 (6%)	SOME COMMUNITIES HAVE PUT KIOSKS IN (AT THE LIBRARY, THE SCHOOL, THE COURTHOUSE, ETC.) SO THOSE WITHOUT THEIR OWN COMPUTER CAN GO IN THEIR TOWN TO A KIOSK AND DO A TELEHEALTH VISIT.		
		TELEHEALTH. GETTING MORE ANSWERS VIA SPIRUS TELEHEALTH WHEN MESSAGING WITH THEM VS. AN IN-PERSON VISIT.		
		NO TRAFFIC.		
COMMENTS THAT DID		THE CRIME ISN'T TOO HIGH.		
NOT FIT INTO OTHER THEMES	14 (20%)	DIVERSITY – TWO DIFFERENT TRIBES LIVE IN OUR COUNTY. THINGS ARE SILOED, BUT THERE IS OPPORTUNITY THERE.		
	OMELESS SHELTER, OOD ASSISTANCE ROGRAMS, ENERGY SSISTANCE, ETC. OMMENTS CITED HE FLEXIBILITY HAT TELEHEALTH AS PROVIDED OMMUNITY HEMBERS OMMENTS THAT DID OT FIT INTO OTHER	DEFINITION # OF OCCURRENCES OMELESS SHELTER, OOD ASSISTANCE ROGRAMS, ENERGY SSISTANCE, ETC. OMMENTS CITED HE FLEXIBILITY HAT TELEHEALTH AS PROVIDED OMMUNITY IEMBERS OMMENTS THAT DID OT FIT INTO OTHER # OF OCCURRENCES 5 (7%) 4 (6%)		

THEME	DEFINITION	# OF OCCURRENCES	EXAMPLES	
HOUSING	COMMENTS FOCUSED ON AFFORDABLE HOUSING AND MORE HOUSING OPTIONS`	19 (19%)	YOU GOT THE COST OF HOUSING GOING UP. I MEAN AT THE END OF THE DAY, YOU GOT ENOUGH MONEY TO PUT IT IN YOUR GAS TANK TO GET TO WORK. AFFORDABLE NEWER APARTMENT COMPLEX WOULD BE HELPFUL – BUT INFRASTRUCTURE WOULDN'T HANDLE IT (WATER & SEWER). AFFORDABLE AND MORE HOUSING.	
VARIETY	COMMENTS FOCUSED ON MORE VARIETY OF STORES, RESTAURANTS, AND SERVICES	16 (16%)	MORE THINGS TO DO THAT AREN'T HUNTING & FISHING TO HELP KEEP FAMILIES HERE TOO: THEATER, BOWLING ALLEY, DANCING, ADULT PROGRAMS, KID PROGRAMS (NOT SPORTS). RED CROSS PROGRAM WHERE PEOPLE CAN SHOP FOR THE HOMEBOUND. MORE TRANSPORTATION FOR PEOPLE OF ALL AGES. IF PEOPLE DON'T HAVE A CAR, YOU CAN'T GO ANYWHERE. THERE'S CITY TRANSIT AND ONE OTHER ORGANIZATION BUT YOU HAVE TO GIVE THEM 24-HOUR NOTICE TO GET PICKED UP. THERE ARE CABS, BUT THEY'RE PRETTY "GROSS".	
PROMOTE SERVICES	COMMENTS CITED SERVICES GO UNADVERTISED AND UNUSED, SUGGESTED BETTER MARKETING FOR SERVICES.	13 (13%)	BETTER COMMUNICATION AND OUTREACH ABOUT SERVICES AND RESOURCES. LET'S NOT FORCE PEOPLE TO GO TO FACEBOOK TO SEE ABOUT OUR EVENTS BECAUSE IT IS BAD FOR MENTAL HEALTH IN ITSELF SCHOOL DISTRICTS NEED TO COMMUNICATE WITH EACH OTHER BETTER ABOUT PROGRAMS.	

THEME	DEFINITION	# OF OCCURRENCES	EXAMPLES
HEALTH CARE	COMMENTS FOCUSED ON IMPROVED HEALTH CARE SERVICES.	9 (9%)	IMPROVED AMBULANCE SERVICE. AVAILABILITY OF DOCTORS, NURSES AND THE WHOLE HEALTH CARE SYSTEM. JUST UPGRADING FACILITIES IN GENERAL AND KNOW WHAT THE GROWTH THAT'S HAPPENED OVER THE LAST COUPLE OF YEARS. KIND OF ONCE AGAIN GOING BACK TO OUR TIME. BEFORE YOU KNOW THE HOSPITALS, THE EMERGENCY SERVICES SEEM TO, AND THAT'S NOT TO DO THAT ANY FAULT OF THEIR OWN. IT'S JUST A LOT TO KEEP UP WITH. YOU KNOW, WITH THIS GROWTH AND EVERYTHING.
SHELTERS	COMMENTS CALL FOR MORE DOMESTIC VIOLENCE SHELTERS, HOMELESS SHELTERS,	9 (9%)	I THINK THERE SHOULD BE MORE OPTIONS FOR SAFE PLACES LIKE THE WOMEN'S SEXUAL ASSAULT. MORE HOMELESS SHELTER OPTIONS. I'VE SAID I'VE SEEN A LOT OF PEOPLE SLEEPING IN LAUNDROMATS BECAUSE IT'S THE ONLY THING OPEN AT NIGHT, SO MAYBE ACCESSIBILITY THE OF THE HOMELESS SHELTER THAT IS IN TOWN NEEDS TO BE RELOOKED AT AS FAR AS SIZE. I WAS GOING TO SAY AND SLEEPING IN THE LAUNDROMAT IS NOT HELPING ANYBODY'S MENTAL HEALTH OR SUBSTANCE ABUSE ISSUES.
LONG -TERM CARE	COMMENTS FOCUSED ON NURSING HOMES, AN OTHER ELDERLY LIVING ASSISTANCE OPTIONS.	5 (5%)	NURSING HOME. SENIOR LIVING CENTER. ASSISTED LIVING.
OUTDOORS	COMMENTS CALLED FOR BETTER ACCESSIBLE OUTDOOR SPACES, IMPROVED CONNECTIVITY OF OUTDOOR PATHWAYS AND BIKE LANES.	4 (4%)	KEEP HIKING TRAILS IN GOOD SHAPE (LIKE THEY ARE NOW). NEED MORE NATURE WALKS AND A WAY TO MAKE IT EASIER IN THE WINTER. WALKING TRAIL FROM WEST TO EAST SIDES OF TOWN CONNECT. MARKED CROSSWALKS, ACCESSIBLE, AND A BIKE LANE.

ТНЕМЕ	DEFINITION	# OF OCCURRENCES	EXAMPLES	
INFRASTRUCTURE	COMMENTS CALLED FOR BETTER INFRASTRUCTURE, SPECIFICALLY BETTER ROADS AND BUILDINGS.	4 (4%)	BETTER TRANSPORTATION. RAILROAD OPENED BACK UP FOR SHIPPING AND WOULD REMOVE TRUCKS OFF THE ROAD (FOR WOOD AND PULP SPECIFICALLY). PLACES TO PARK.	
BETTER WAGES	COMMENTS FOCUSED ON BETTER WAGES TO ATTRACT YOUNG WORKERS, MORE INDUSTRY	4 (4%)	INDUSTRY – GOOD PAYING JOBS TO KEEP FAMILIES HERE. GET POLITICIANS INVOLVED, GOVERNMENT CONTRACTS. EVERYTHING HAS TO BE MADE SOMEWHERE IN AMERICA. WE CAN HAVE INDUSTRY HERE, BUT NEW INDUSTRY GOES SOUTH. BRING INDUSTRY HERE. PAY TEACHERS AND CHILDCARE PROVIDERS MORE. YES, THEIR BENEFITS MIGHT BE A LITTLE BETTER, BUT IT TAKES A SPECIAL KIND OF PERSON TO BE IN THESE PROFESSIONS SO THEY SHOULD BE REWARDED BETTER WAGE JOBS (TO HELP KEEP YOUNG FAMILIES).	
HEALTH CONCERNS	ENVIRONMENTAL HEALTH CONCERNS, WATER.	4 (4%)	ONE THING I WANT TO ADD IS THE DRINKABLE WATER, THE QUALITY OF WATER HERE IS A BIG ISSUE TO YOU. I DON'T KNOW IF YOU HEARD OF THE PFAS AND I'VE BEEN FOLLOWING THIS FOR SEVERAL YEARS AND I WAS HOPING TO HAVE MORE DISCUSSION. MY WATER WAS REALLY HARD AND THEY HAD TO PUT A WATER SOFTENER IN AND THEN ON TOP OF THAT BECAUSE THE WATER'S STILL VERY LEADY, I ALSO HAVE A FILTER ON TOP OF THAT COMING OUT OF MY FAUCET.	

ТНЕМЕ	DEFINITION	# OF OCCURRENCES	EXAMPLES
SUSTAINABILITY	COMMENTS FOCUSED ON BEING MORE LOCALLY INDEPENDENT AND SUSTAINABLE, BUILDING TRADITION.	4 (4%)	BRING FARMS/FARMING BACK. BE MORE LOCALLY DEPENDENT / RELIANT / SUSTAINABLE - IN ALL ASPECTS (FOOD, GOODS) - HOMESTEADING, INCREASE LOCAL PRODUCE, BUY MORE LOCALLY (INSTEAD OF AMAZON). FARMERS MARKETS EXIST IN THE SUMMER, AND THEY SELL OUT QUICKLY.
OTHER	COMMENTS THAT DID NOT FIT INTO OTHER THEMES.	16 (16%)	LESS MEETINGS (LIKE THE BOARDS) TO TRY TO GET MORE PEOPLE INVOLVED. ACCEPTANCE FOR MORE SUBGROUPS OF PEOPLE, ALL PEOPLE. MORE OPEN MINDEDNESS. YOU HIT THE NAIL ON THE HEAD WHEN YOU SAID THE BABY BOOMERS ARE RETIRING BACK HERE. THEY STARTED HERE, AND ALSO WANTED TO ESCAPE THE NORTHWOODS, SEE WHAT THE BIG CITIES ARE LIKE. GET A TASTE OF IT AND REALIZED THIS IS HEAVEN. LIFE ISN'T ABOUT ALL OF THE STIMULATION THAT'S OUT IN THOSE BIG CITIES. IT'S MORE OF WHAT NATURE AND GOD OFFERS HERE IN THE NORTHWOODS.

APPENDIX F: COMMUNITY HEALTH SURVEY

2022 Community Health Assessment for Forest, Oneida, and Vilas Counties

The Forest, Oneida, and Vilas County Health Departments in partnership with Marshfield Clinic Health System and Aspirus Health are conducting a Community Health Assessment survey to better understand the health concerns and needs in our communities. We invite anyone that lives, works, learns, or plays in Forest, Oneida, and Vilas Counties to take this 10–15-minute survey.

The information obtained from the Community Health Assessment will be used in the development of an action plan to help each county reach its full health potential. Please remember your answers will not be linked to you in any way.

2. How would you rate the overall health of the county

1. What County do you live in?

2022 Community Health Assessment for Forest, Oneida, and Vilas Counties

□ Forest	you selected above?				
□ Oneida		Very healthy			
□ Vilas		Healthy			
☐ None of the above		Somewhat healthy			
		Unhealthy			
		Very unhealthy			
		very difficultity			
3. Please rate the degree to which you agree with	the followi	ng statements regar	ding our co	mmunity:	
	Strongly	Somewhat	Neutral	Somewhat	Strongly
	disagree	disagree	ricatiai	agree	agree
There are places for people to come together in my community (such as places of worship, community centers, libraries, and/or parks)					
I can generally manage the normal stresses of life					
I have enough money to pay for my basic needs					
People are treated respectfully, regardless of					
race, culture, religion, gender, sexual					
orientation, income level, disability, or age		Ш	Ц		ш
My community supports the needs of elderly					_
people					
My community has access to a variety of					
transportation options (such as public buses,					
taxis, bikes, bike lanes, trails, and sidewalks)					
I feel like I below a in your common with.					
I feel like I belong in my community					
I feel safe in my community					
My community supports the needs of people					
with disabilities					
I have access to internet					
		ш		Ц	
There are opportunities for youth to explore					
interests and participate in positive activities					
Houses and apartments in my community are					
affordable and livable					
	L				

2022 Community Health Assessment for Forest, Oneida, and Vilas Counties

4. \	What do you think are the top 5 strengths in our	5. V	What are the top 5 areas for improvement in our
com	nmunity? (Select 5)	con	nmunity? (Select 5)
	Ability to continue living in my home or chosen		Ability to continue living in my home or chosen
com	nmunity as I get older	con	nmunity as I get older
	Access to affordable health care (family doctor)		Access to affordable health care (family doctor)
	Access to affordable healthy foods		Access to affordable healthy foods
	Access to safe and affordable housing		Access to community parks and green spaces
	Access to affordable transportation		Access to safe and affordable housing
	Clean environment (clean air, clean water)		Access to affordable transportation
	Access to affordable childcare		Clean environment (clean air, clean water)
	Community safety		Access to affordable childcare
	Community spaces (such as businesses, parks,		Community safety
etc.) are inclusive to people of all identities		Community spaces (such as businesses, parks,
	Good jobs and strong economy	etc.) are inclusive to people of all identities
	Good schools		Good jobs and strong economy
	Opportunities to practice spiritual beliefs		Good schools
	Racial and ethnic diversity		Opportunities to practice spiritual beliefs
	Sense of belonging		Racial and ethnic diversity
	Access to affordable mental health services		Sense of belonging
	Road safety		Access to affordable mental health services
	Positive teen / youth / family activities		Road safety
	Community support groups		Positive teen / youth / family activities
	Elderly care options		Community support groups
	Services for disabled individuals		Elderly care options
	Other:		Services for disabled individuals
			Other:
6. Ir	n your opinion, what would make our community a hea	althie	r place to live in?
. .	landing the second seco		
_	How would you rate your own physical health?		
	Very healthy		
	Healthy		
	Somewhat healthy		
	Unhealthy		
	Very unhealthy		

8. Considering your own hea	alth. Are you worried about a	n. Are you worried about any of the following health related statements below				
	Not worried	Worried	No opinion			
Smoking cigarettes or using commercial tobacco						
My own alcohol use						
My own disability						
My own chronic disease						
Using substances (marijuana, meth, cocaine, misuse of prescription drugs						
My own mental health issues						
Consuming healthy nutritious foods						
Participating in any form of daily exercise						
Engaging in sexual behaviors (that can lead to an STI, HIV, or an unplanned pregnancy)						
Other:						
☐ No, there are harmful co	or partner violence orhood violence or crime					
□ No. Other:						

10. Please rate the degree to which you agree with the following regarding healthy living.

	Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly agree
Too many fast- food options					
Lack of time / other priorities					
Cost of healthy foods					
Lack of public parks / outdoor recreation space					
Lack of access to healthy foods					
all that apply) Adult-onset a Hypertension Overweight o Anxiety Depression Post-Traumat Cancer (Type: Angina or cor Congestive he Diabetes or h High choleste Chronic Obstr Memory loss Dementia Attention Def	or high blood press r obesity cic Stress Disorder (Pillness) conary artery disease eart failure igh blood sugar rol cuctive Pulmonary Discrete Pu	TSD)) isease (COPD) or Attention D)	☐ Mental he ☐ Intellectual ☐ Developm ☐ Cognitive ☐ Speech ☐ Vision ☐ Hearing ☐ Neurodive ☐ Autism spe ☐ A disability ☐ I do not ha 13. Do you have a ☐ Yes ☐ No, it is ☐ No, I do	rsity ectrum not listed (pleanan annual meditoo expensive n't have a prime kes too long to	ease describe):

14. Do you have health insurance	18. If you do not have dental insurance, please tell
☐ Yes, it meets my needs and is affordable	us why (Check all that apply):
☐ Yes, but it does not meet my needs	☐ Not applicable/ I have insurance
☐ Yes, but it is not affordable	☐ Too expensive
☐ Yes, but it is not affordable and does not meet	☐ Place I work at, does not offer it
my needs	☐ Not qualified for the plan offered at my work
☐ I do not have health insurance	☐ Do not qualify for medical assistance (Medicaid)
	☐ Do not know where/ how to sign up for health
15. If you do not have health insurance, please tell	insurance
us why: (Check all that apply)	☐ I feel like I do not need dental insurance
☐ Not applicable/ I have insurance	☐ Other:
☐ Too expensive	
☐ Place I work at, does not offer it	19 How has your mental health changed overall
☐ Not qualified for the plan offered at my work	since COVID?
☐ Do not qualify for medical assistance (Medicaid)	☐ Better
\square Do not know where/ how to sign up for health	☐ About the same
insurance	□ Worse
☐ I feel like I do not need health insurance	
□ Other:	20. Do you have access to a mental health care
	provider when necessary? (e.g., counselor / social
16. Do you have at least an annual dental checkup?	worker / therapist / etc.)
□ Yes	□ Yes
☐ No, it is too expensive	□ No
☐ No, I don't have a primary dentist	
☐ No, I don't have time/miss appointments	21. Why don't you have access to a mental health
□ No, other:	care provider? (Check all that apply)
	☐ Don't know where to get help from
17. Do you have dental insurance?	☐ Too long of a wait list
\square Yes, it meets my needs and is affordable	☐ No insurance
☐ Yes, but it does not meet my needs	☐ Not covered by my insurance
☐ Yes, but it is not affordable	☐ No time
$\hfill \square$ Yes, but it is not affordable and does not meet my	☐ Stigma
needs	☐ Other:
☐ I do not have dental insurance	
	22. How would you rate your own mental health?
	☐ Very healthy
	☐ Healthy
	☐ Somewhat healthy
	☐ Unhealthy
	☐ Very unhealthy

23. Are you aware	of mental hea	Ith resources in	our	24.	How many times	s per week do ye	ou feel isolated
community?				or a	alone?		
□ Yes					0 times per wee	ek	
□ No					1 time per weel	<	
					2-3 times per w	eek	
					4-5 times per w	eek	
					6-7 times per w	eek	
25. In an average n problems that inte				ember o	f your household	l experience me	ntal health
	0 days	1-7 days	8-1	4 days	15-21 days	22-28 days	29-31 days
Myself			[
Family member or friend			[
26. During the last where you wanted with emotional processess worrying, etc	to seek help oblems such a tc.? to seek profes ns such as dep	from a profession s stress depression sional help with	on,	foo	It is too expensi I don't have acc I don't have reli ceries It spoils too fast It doesn't taste	at apply) nat foods are cor w to prepare he ve less to grocery st able transportat good p me from eating	nsidered healthy althy meals cores ion to get
28. If you wanted t	o seek help w	ith emotional		31.	Are you on food	assistance prog	rams or food
problems such as d	lepression or	excess worrying,		sta	mps?		
what prevented yo	u from seekin	g help? (Check a	II		Yes		
that apply)					No		
☐ Don't know wh	nere to get hel	p from					
☐ Too long of a v	_			32.	Are you aware o	f resources to a	ssist with food
☐ Not covered by		nsurance			urity?		
□ No time	, , ,,				Yes		
☐ Stigma					No		
29. During the past think about commi		-					

33. Please rate the degree to which	you're concerned about the followin	g social / economic factors.
-------------------------------------	-------------------------------------	------------------------------

_			_	-	
	Not concerned at all	Slightly concerned	Concerned	Very concerned	Extremely concerned
Aging related health concerns					
Race / ethnic relations, immigration, harassment, discrimination					
Family issues (ex. divorce, parenting)					
Caregiver support					
Childcare					
Not enough money for housing, household expenses and food					
Social or community support					
Violence in the home or community					
Other:					
34. What is your current ☐ I have housing and I' ☐ I have housing and I' ☐ I do not have housin hotel, in a shelter) ☐ I do not have housin or car)	'm not worried 'm worried abo g (staying with	about losing it ut losing it others, in a	housing situa Own a ho Renting Staying w Homeles	ouse / townhome / co with family / friends s a motel ry shelter ' street ome nper	

36. Does your housing meet your needs? ☐ Yes ☐ No	41. What do you think our community could provide, to help solve housing related issues?
 37. If your housing does not meet your needs, why not (Check all that apply): Health concerns Safety concerns Too small 	
☐ Too big	
☐ Too expensive ☐ Other:	42. Do you have reliable transportation?☐ Yes☐ No
38. Are you concerned you may not have stable	
housing within the next 3 months? ☐ Yes ☐ No	43. Why don't you have reliable transportation? (Check all that apply) □ Difficulty paying for car insurance
39. Do you or your family receive housing	□ Difficulty paying for gasoline□ Difficulty paying for car service / repairs
assistance?	☐ Difficulty paying for traffic fines
□ Yes	☐ Have a ride to work/school
□ No	☐ Safety concerns
□ I don't know	□ Difficulty using the public transportation service□ Other:
40. Please mark any of the housing problems /	
issues you have experienced during the past 12	
months (Check all that apply):	
☐ Missed mortgage / rental payments	
☐ Evicted	
Lost home due to foreclosure or forced sale	
☐ Structural / plumbing / electrical / heating	
problems ☐ Missed heat, electricity, or other utility bills ☐ Unable to make repairs due to costs	
☐ I have not experienced any housing problems /	
issues in the past 12 months	
Other:	

44. Please rate the degree to which you're concerned about environmental health factors in our community.

	Not concerned at all	Slightly concerned	Concerned	Very concerned	Extremely concerned
Unclean / unsafe drinking water (PFAS, lead, nitrates, arsenic, bacteria)					
Radon					
Mosquito carried diseases					
Tick borne diseases					
Poor air quality					
Unsafe / unclean river, creek, lake water					
Groundwater pollutants from agriculture					
Old or failing septic systems					
Lead based paint hazards					
Food borne outbreaks / unsafe food					
Other:					

45. Please rate the degree to which v	you're concerned about the p	physical environment in our community.
TO. I ICASC TALL LITE ALETEC TO WITHCIT	you ic concerned about the p	my sicul citationniciti in our community.

Not concerned at all	Slightly concerned	Concerned	Very concerned	Extremely concerned
			П	
			Ц	
ribe yourself? le nale orming		☐ Asexual ☐ Bisexual ☐ Gay ☐ Lesbian ☐ Pansexua ☐ Queer ☐ Straight /	l heterosexual	n?
	you live in?	you live in? ribe yourself?	you live in? Asexual Bisexual Gay Lesbian Pansexua Queer Straight / orming Sexual ori	

☐ Prefer not to answer

		55.	What is your highest level of education?
			8th grade or less
49.	What is your age?		Some high school – no diploma
	Under 18		High school diploma or GED
	18-25		Some college, no degree
	26-40		Associate's degree / technical school
	41-55		Bachelor's degree
	56-65		Master's degree
	66-75		Advanced degree (e.g., Ph.D., M.D., etc.)
	Over 75		
		56.	What is your current employment status?
50.	Which of the following best describes your		I do not work
ethr	nicity?		Work # Hours per week - fill in:
	Hispanic / Latino		Unemployed
	Not Hispanic / Latino		Retired
			Student
51.	Which of the following best describes your		Military
race	9?		Homemaker
	White		Unable to work due to disability
	Asian		Other:
	Native Hawaiian & other Pacific Islander		
	African American / Black	57.	How many jobs do you work?
	American Indian or Alaska Native		1 job
	Tribe:		2 jobs
	Two or more races		3 jobs
	Other:		4 or more jobs
			I do not work
52 . '	What language(s) do you speak at home?		
	English	58.	How many people in your household are under
	Spanish	the	age of 18?
	Hmong		No one in my household is under 18
	Mandarin		1
	Other:		2
			3
53.	What is your current marital status?		4
	Single / never married		5
	Married		6
	Divorced		7 or more
	Widowed		
	Live with partner		
54. Y	What is your annual household income (before es)?		

59.	How would you most like to receive information					
abo	ut health, events, programs, and services from					
the	the local health department and community					
par	tners? (Check all that apply)					
	Local radio					
	Printed in local newspapers					
	Online local newspapers					
	The local health department website					
	Mailed newsletter					
	The local health department Facebook page					
	Other:					

Thank you for taking the time to provide your input. We appreciate your participation!

Please flip to the next page to view information about how to participate in our \$25 gift card drawing.

As an incentive for taking this survey, participants will be entered in a drawing for a \$25 gift card. You will need to tear out this page, fill it out, and mail it to the address provided to be eligible for the drawing. Your contact information will be separate from your survey response so that none of the information you provided on the survey will be linked to you.

First name:
Last name:
Phone number:
Email address:
Email address.
Preferred method of contact:
Freieneu memou or contact.

Mail to:

Catalyst at the University of Wisconsin – Stout c/o Community Health Survey 128 Bowman Hall 802 Broadway St. S. Menomonie, WI 54751

APPENDIX G: FOCUS GROUP PROTOCOL

FACILITATOR GROUND RULES/INTRODUCTION

Before we begin, I'd like to briefly go through some ground rules:

- 1. First, this conversation is confidential. Please keep what is said here, along with the names of who were here, private.
- 2. This conversation will be recorded (audio only) and transcribed for data collection purposes. Once the transcription has been completed, the recording will be deleted. All data will be reported in aggregate, so no names will be associated with any reports.
- 3. Your participation is completely voluntary. If you wish to end your participation, you should feel free to leave the meeting at any time.
- 4. Please speak one at a time. I may ask some of you to shorten your comments or conclude what you are saying so other people can speak.
- 5. We encourage everyone to speak freely, but please use respectful, professional language.
- 6. Any questions before we get started?

Most of the questions we have today will focus on the needs of people in our community. We ask that you include your own perspective in your response but to also think about the greater community.

First we'll start off with introductions. Please share your first name and one thing you like most about living in our community.

Next we'll cover five questions regarding healthy living in our community.

- 7. What concerns or issues in your life or lives of your loved ones make it hard to be healthy or live a healthy life?
- 8. Has there been a change in the health of people close to you in the last three to five years? If so, please explain/describe. a. Better or worse?
- 9. What are the top three things that need to be improved in our community?
- 10. What are the top three strengths of our community?
- 11. Looking ahead 10 or 20 years... If you had a magic wand, what would our community look like to make it easier for you to live a healthy life?
 - a. What would be in place?
 - b. What would you see?
 - c. What opportunities would be available?
 - d. What barriers would no longer be there?

Those are all of the questions we had for you today. Is there anything anyone would like to add, or didn't have a chance to say during the discussion?

Thank you again for your participation.

If you would like to serve on a coalition that helps meet the aims of this report, or have another comment on this assessment, please contact one of the participating health departments for more information.

Participating Health Departments:

Forest County Health Department

200 E. Madison St.

Crandon, WI 54520

Phone: 715-478-3371

Oneida County Health Department

100 West Keenan St.

Rhinelander, WI 54501

Phone: 715-369-6111

Vilas County Health Department

330 Court St.

Eagle River, WI 54521

Phone: 715-479-3656

