

BOARD OF HEALTH AGENDA
June 22, 2022, 5:15 PM
County Courthouse, Room 302 (Ground Floor)

Board of Health 2020-2024 Goals:

Maintain Health Department's fiscal stability

Support and advocate for public health priorities

Review new and changing community/Health Dept priorities

Ongoing Board of Health improvements

Health Department Mission:

Promoting health and safety for all Eau Claire communities

Health Department Vision:

ECCCHD will be a leader in assuring healthy people in healthy communities

1. Call to Order. Welcome Guests. Order of the Agenda. Request to pull items from Consent Agenda – 5 minutes
2. Public Comment-*The Board of Health and Eau Claire City-County Health Department welcome you. Statements pertinent to agenda items may be made by attendees during the public comment section. We do ask that statements are limited to three minutes per person. Written comments may also be provided.*
minutes
For those wishing to make written public comment regarding an agenda item, you must e-mail Gina Holt at gina.holt@co.eau-claire.wi.us at least 90 minutes prior to the start of the meeting. Your email will be shared with the Board of Health. If you wish to make a verbal comment, please attend the meeting in person and you will be called on during the public comment session.
3. Consent Agenda (Action Required-approved for full content)-5 minutes
 - a. Approval of minutes from May 25, 2022, meeting-enclosed
4. Health Department monthly report-enclosed – 5 minutes
5. WPHA WALHDAB legislative update-enclosed – 5 minutes
6. Advocacy Training -materials to be sent prior to meeting -120 minutes
7. Requests from Board members for future agenda items to be given consideration-5 minutes
8. Next business meeting – July 27, 2022
9. Adjourn

PLEASE NOTE: Due to requirements contained in the Wisconsin Open Meetings Law, only those matters placed on this agenda may be considered by the Board of Health at this meeting. If any member of the public desires that the Board of Health consider a matter not included on this agenda, he or she should contact a Board of Health Member or the Health Department Director to have the matter considered for placement on a future Board of Health agenda. Upon reasonable notice, efforts will be made to accommodate the needs of disabled individuals through sign language interpreters or other auxiliary aids. For additional information or to request the service, contact the County ADA Coordinator at 839-4710, (FAX) 839-4854, (TDD) 839-4735 or by writing to the ADA Coordinator, Personnel Department, Eau Claire County Courthouse, 721 Oxford Avenue, Eau Claire, WI 54703.

**May 25, 2022, Board of Health Meeting
County Courthouse, Room G-302**

The Board of Health convened in open session at 5:20 pm
The meeting was called to order by Mery Price

**Board Members Present
Quorum is reached**

Mery Price
Jennifer Eddy
Emily Berge
Mark Kaeding
Terry Miskulin
Kimberly Cronk

Board Members Absent:

Don Bodeau
True Vue

Staff Members Present:

Lieske Giese
Hannah Artz

Welcome and introduction of new Board of Health member Kimberly Cronk

Order of Agenda Request to pull items from Consent Agenda

- None

Public Comment:

- None

Consent Agenda

- Approval of minutes from April 27, 2022, meeting
- Approval of Grant/Contract Related Budget Adjustments

Motion to approve Consent Agenda: Jennifer Eddy

2nd Motion: Mark Kaeding

Motion Carried: Yes (unanimous vote)

Business Item

- Approval of 2022-2023 influenza vaccination fee
 - This is for the influenza season starting in the fall.
 - The target population will be for those that have barriers to getting the flu vaccine.

Motion to approve 2022-2023 Influenza vaccination fee as presented by Health Department

staff: Mark Kaeding

2nd Motion: Terry Miskulin

Motion Carried: Yes (unanimous vote)

- Approval of Western Wisconsin Public Health Readiness Consortium (WWPHRC) additional funding and carryover
 - This is the first year that the Health Department has been the fiscal agent for the consortium.
 - The state approved carryforward dollars not spent; it is a short turnaround time to spend out.
 - The counties worked together to decide how the money would be spent.
 - There are a few Counties that are in the process of joining the WWPHRC for next year.

Motion to approve Western Wisconsin Public Health Readiness Consortium additional funding and carryover as presented by Health Department staff: Jennifer Eddy

2nd Motion: Kimberly Cronk

Motion Carried: Yes (unanimous vote)

- c. Approval of Approval of Mobilizing Community for a Just Response funding
- This project will advance health equity by building on the success and lessons learned from the Community Health Equity Workgroup.
 - Part of what we want to look at is sustainable funding. This position is posted as a grant funded position for one year.
 - The position was posted as a Public Health Specialist which does have a degree requirement.

Motion to approve Mobilization for a Just Response funding as presented by Health Department staff: Emily Berge

2nd Motion: Terry Miskulin

Motion Carried: Yes (unanimous vote)

Other policy and informational items from staff for the Board

- a. COVID-19 update [Coronavirus and COVID-19 Information Hub \(arcgis.com\)](https://arcgis.com)
- The situation report continues to be available weekly.
 - The COVID community levels throughout the state increased.
 - If the community level was to move to red the health department would recommend masking indoors.
 - The Health Department received a large supply of home testing and are working on how to distribute them to those that need them throughout the community. We are coordinating with other entities on distributing the tests.
 - Lab based testing capacity throughout the community has gone down. The Health Department is offering PCR testing for those in need.
 - The CDC changed some recommendations for booster shots.
- Board member discussion on how to move forward with the COVID19 update during BOH meetings.
- Updates around anything that could be policy related.
 - The situation report is written, and helpful, so continuing verbal updates is helpful as it is an internal dialogue.
 - There isn't a need to repeat the situation report but continuing to hit the highlights is helpful.
- b. Director/Health Officer Report
- Accreditation annual report was submitted, and feedback was attached to the report.
 - Service Recognition:
 - Lori Reynolds, Office Associate, 5 years
 - Phillip Schumacher, Environmental Health Specialist, 10 years
- c. Review and Discuss 2023 Budget Development Process
- 2023 Budget timeline was shared.
 - In July the draft budget is brought to the board for review and approval.
 - In August Health Department fees will be brought to the board for review and approval.
 - Part of the upcoming year priorities is having wages at the department that support staff as best as possible.
 - Some level of funding to support staff with the trauma and difficulty that the last few years have brought.

- We saw enormous value in our ability to have retirees having adequate opportunity to train their replacement.
- Most of the department fees are related to the regulation and licensing program. Due to COVID discounts had been offered for the two years.

Board of health budget discussion:

- As childcare bubbles up as an issue, having options to help employees looking for quality childcare. This applies to the community as well.
 - Prioritizing the most vulnerable in the community should be a focus. Focusing on housing and equity.
 - Wage increases and ways to increase staff satisfaction is important.
 - The ability to recruit new hires is so important. Being competitive and not becoming behind with wages and benefits.
 - Addressing harm and not being part of policies that utilize violence to prevent violence. Investing in community relationships.
 - Space issues may be something to look at for the 2023 budget.
- d. Health Department Program Presentation Discussion
- Having a spotlight on a program would be informative.
 - Inviting staff to acknowledge great work that has been done to shine light on amazing work.
 - Present highlights linking prevention and outcomes into the presentation.
 - Perhaps a video update from staff would be a resource.
 - Is there something that could be sent out in advance, in the packet, that could be a reminder of what different programs are doing.

Board member informational items

- a. Advocacy training update
- b. Public Health Policy/Advocacy
- Legislative tracker did not change since last month.
 - Health Equity Council recommendations.
 - Advocacy training will take place on June 22, 2022, at the normally scheduled June meeting. There will be a short business section followed by the training, which is anticipated to run from 5:30-7:30 pm. Reading material will be sent prior to the meeting.
- c. Standing committee updates
- City Council: [City Council Agendas | City of Eau Claire, Wisconsin \(eauclairewi.gov\)](https://eauclairewi.gov)
Water bottling plant, annexation, and alcohol licenses were discussed at the most recent meeting. Council had a work session on virtual meetings. Hybrid options is something that Council is looking into it.
 - County Board: [2022 Meeting Agendas & Minutes | Eau Claire County \(eau-claire.wi.us\)](https://eau-claire.wi.us)
There are a lot of new County Board members who are orienting. Strategic planning discussions are happening.
 - Ground Water Advisory Committee: [Groundwater Advisory | Eau Claire County \(eau-claire.wi.us\)](https://eau-claire.wi.us)
Greg Leonard is retiring, and they will be filling his position.
 - ARPA County Funding: [ARPA Committee | Eau Claire County \(eau-claire.wi.us\)](https://eau-claire.wi.us)
The County community application process is closed, and the notice of awards will be going out. The applicants for smaller dollar amounts were awarded. The applicants for the larger dollar amounts are being reviewed.

d. Board Evaluation discussion

- Board members answered most of the questions as satisfied.
- If there are other things that come up and there are things that board members would like to talk about or change, please bring those up to Merrey Price.

Requests from Board members for future agenda items to be given consideration

- a. None made

Next scheduled BOH meeting is June 22, 2022, at 5:15 p.m.

Merrey Price adjourned the meeting at 7:05 p.m.

DRAFT

Board of Health Meeting 06/22/2022

Agenda Item 4.b

Eau Claire City-County Health Department Report to the Board of Health

COVID-19 Antigen Tests

In May 2022, the state health department announced a program in which local and tribal health departments could order COVID-19 antigen kits to administer or distribute to community organizations/members as self-tests. They asked that those taking part “prioritize entities that provide services for populations that are at an increased risk for pandemic vulnerability from COVID-19 or for populations that have experienced inequity or adversity”.

Over the past month, the Eau Claire City-County Health Department ordered 800 testing kits and distributed 720 of those throughout the county. Some have gone to individuals at the Health Department for other resources, like visiting the Family Planning Clinic or requesting a PCR COVID-19 test. However, the majority of these have gone to community organizations to give out through their programming. These organizations include the ADRC, the Family Resource Center, The Community Table, Bolton Refuge House, the Black and Brown Womyn Power Coalition, three locations in Augusta, the Eau Claire Area Hmong Mutual Assistance Association, and Family Promise of the Chippewa Valley. Throughout June, the department will continue to order and distribute antigen test kits to additional community organization and at summer events.

Mental Health Matters - Mindfulness

Memorial High School was one of the schools (in addition to Cadott and Bloomer School Districts, Chippewa Valley High School, and Northstar Middle School) who partnered with Mental Health Matters to receive mindfulness training and coaching with staff. This [news story](#) illustrates how the introduction of mindfulness leads to fantastic things.

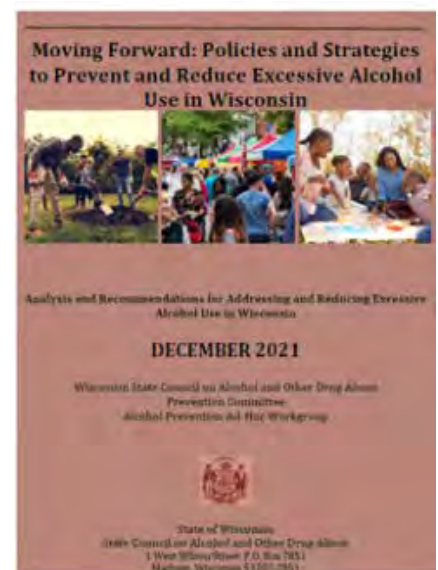
Mental Health Matters will host a *Mindfulness Day for Educators* on June 16. It is an opportunity to bring staff from each of the previously listed schools together and is a step toward creating a community of practice where school staff from across the Chippewa Valley can exchange mindfulness successes, challenges, and mutual support.

SCAODA Report

The Wisconsin State Council on Alcohol and Other Drug Abuse (SCAODA) released [Moving Forward: Policies and Strategies to Prevent and Reduce Excessive Alcohol Use in Wisconsin](#) in late March. This report provides 61 recommendations for local government; state government/state agencies; civic, community, educational and religious organizations; healthcare systems and providers; and the alcohol industry to implement to reduce the harmful effects of alcohol in Wisconsin. Wisconsin ranks the highest in the nation for excessive alcohol. The Alliance for Substance Misuse Prevention has shared this report with our coalition members and partners and will continue to review ways to work together to implement recommendations. See [SCAODA Report and Recommendations Overview \(mcw.edu\)](#) for a summary of the report.

FDA Menthol Ban

On April 28, 2022, the [FDA Proposed Rules Prohibiting Menthol Cigarettes and Flavored Cigars](#). These proposed product standards would prohibit menthol



flavoring in cigarettes, and all characterizing flavors (other than tobacco) in cigars. Once finalized, these changes will:

- reduce the appeal of cigarettes, particularly to youth and young adults; and
- improve the health and reduce the mortality risk of current menthol cigarette smokers by decreasing cigarette consumption and increasing the likelihood of cessation

The public can provide comments on these proposed rules, which the FDA will review as it considers future action. The FDA will convene [public listening sessions](#) on June 13 and June 15 to expand direct engagement with the public, including affected communities. This FDA [Fact Sheet](#) provides an overview of proposed changes, impact, and next steps.

Alliance for Substance Misuse Prevention: Lunch & Learn Presentation

The Alliance for Substance Misuse Prevention held its first Lunch & Learn presentation on May 5th. The Alliance plans to host bi-monthly lunchtime learning opportunities for coalition and community members to learn about various topics related to substance misuse. The first session was *What Do You Know About Opioids* presented by Health Department staff Sarah Dillivan-Pospisil and Elizabeth Hagen as part of their Overdose Data to Action grant. Six coalition and community members attended this hour-long presentation.

National Prescription Drug Take-Back

The National Prescription Drug Take-Back event was held on Saturday, April 30th in Altoona at the Police Department and in Eau Claire at Marshfield Medical Center – Eau Claire Medical Offices. About 160 pounds of medication was collected between the two locations and 2,200 pounds collected through the permanent drop-off sites (Altoona Police Department, Augusta City Hall, Fall Creek Village Hall, and Eau Claire County Government Center). Wisconsin collected 59,840 pounds of medication and Eau Claire County contributed 2,360 to the total. By safely disposing medication protects our water supply and prevents medications from being accidentally ingested, stolen, or misused.



Pictures from the event: A new outdoor banner, *Medication Drop-Off Today*, was purchased to show community members where to safely dispose of their medications. A standing banner was created to provide education on the importance of medication disposal. The last picture is a box of medication collected during the event.

Overdose Data to Action

Wisconsin Attorney General Josh Kaul and State Representative Jodi Emerson were in Eau Claire on Thursday, April 28th for a press conference. The Eau Claire County Sheriff's Office and the Eau Claire City-County Health Department were invited to speak to bring awareness to the Spring National Prescription Drug Take-Back Day. Captain Cory Schalinske spoke about the dangers of opioid use in our community and Sarah Dillivan-Pospisil shared information on the permanent medication drop-off locations in the county and the What Do You Know About Opioids workshop.



Overdose Data to Action

A new tab was created on the Alliance for Substance Misuse Prevention website (www.GetInvolvedASAP.org), *Opioid Learning Opportunities*. Our newly developed workshop, *What Do You Know About Opioids* will be presented virtually and in-person through August throughout the county. The tab provides information on when the workshop will be offered and how to register.

In the workshop, education is provided on opioids, information on Narcan (a medicine used to reverse an opioid overdose), where to get fentanyl test strips locally (a tool used to detect the presence of fentanyl in drugs), and where to safely dispose of medication in Eau Claire County. Each participant will receive a medication deactivation bag and other tools. In-person workshops will include a Narcan training.

Alliance for Substance Abuse Prevention

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Preventing Alcohol, Tobacco and Other Drug Misuse

The Alliance mobilizes Eau Claire County residents to prevent alcohol, tobacco, and other drug misuse. As a result, residents improve the lives of children, youth, and adults through local activism. The Alliance hopes to see a community culture free from alcohol, tobacco, and other drug misuse.

About Us >

Opioid Learning Opportunities v

What Do You Know About Opioids?

Opioids range from prescription medications to illegal drugs such as heroin and fentanyl. 70% of people who misuse prescription opioids got their first pill from someone they know. Attend a workshop to learn more about opioids and opioid use in Eau Claire County. We will:



Overdose Data to Action Community Prevention Grant (OD2A)

An in-person *What Do You Know About Opioids* workshop was conducted in Altoona for community members. This was our third workshop totally 36 participants with more presentations scheduled through August. Information on training opportunities can be found on at www.GetInvolvedASAP.org by clicking on the *What Do You Know About Opioids* Tab.

Participants are asked to complete a knowledge and evaluation survey after the workshop, 93% of participants strongly agreed with the overall satisfaction of the workshop. Participants reported an increase of knowledge in the following areas, all increases were statistically significant:

- I know how to safely store my opioid medicine
- I understand what opioids use looks like in Eau Claire County
- I know where I can safely dispose of my unused opioid medicine
- I can recognize if someone is experiencing an opioid overdose
- I know what to do if someone is experiencing an overdose



A safe medication presentation was provided during the Home Safety Event at Prairie Ridge Early Learning. The presentation covered how to safely store and dispose of medication to prevent an accidental poisoning. According to the 2021 Wisconsin Poison Center Annual Report, pain medication was listed as one of the top three substances involved in poisonings in 2020 for ages 5 and younger, 6 to 19, and ages 20 and older. After the presentation, families stopped by our table and picked up a medication lockbox or lockbag, at-home medication deactivation bag, collapsible pet bowls, and handouts. We were invited back to speak in the fall about this topic.



Two banners were installed in Altoona at 10th Street Park and Cinder City Park through the Fall to encourage community residents to lock up their medications.



State Opioid Response

We received 600 at-home medication deactivation bags and 300 medication lockboxes awarded through the State Opioid Response grant.

The purpose of at-home medication deactivation bag strategy is to offer an option to conveniently, safely, and responsibly dispose of unused and expired medications to reduce the potential for diversion.

The purpose of providing medication lockboxes throughout the county is to provide a tool to safely secure medications in homes to prevent diversion of medications for nonmedical purposes.

These items will be distributed through the *What Do You Know About Opioids* workshop and throughout the county through various events and with the help of partners through September.

Narcan Direct Program

Narcan is an opioid antagonist, meaning it can restore breathing in a person experiencing an opioid overdose. The Eau Claire City-County Health Department can distribute the nasal-spray formulation of Narcan as a participant in the WI DHS Narcan Direct Program. McKinley Charter School and the Village of Fall Creek Police Department received training and Narcan.

Mock Car Crashes

Eau Claire County SAFE (Students Advocating for Excellence) chapters at Memorial, North, Regis, Altoona, Fall Creek, and Augusta all hosted mock car crashes in May. These were all hosted in partnership with Mayo Clinic Health Systems, local police and fire departments and the community. Mock car crashes help bring awareness the dangers of impaired or distracted driving and support safe driving. Pictured here are the SAFE students from Memorial the day of their mock car crash.



Clinical Services

June is Pride month. Pride month began in 1970, one year after police raided the Stonewall Inn, a gay bar in New York. Pride was modeled after the civil rights movement and the women's rights movement. Pride month is when LGBTQ+ communities come together and celebrate the freedom to be themselves. Eau Claire Pride was held in Phoenix Park on Saturday, June 11th, 2022. Abby and Janel, public health nurses represented the EC Health Department at Pride. They handed out condoms and Family Planning Clinic swag including lip balm, stress balls, poppers, fanny packs, stickers and clinic information. Even though it was raining on and off, EC Pride had an amazing turnout. Many people young and old of all walks of life were there celebrating each other.

Monkeypox

CDC is tracking multiple cases of monkeypox that have been reported in several countries that don't normally report monkeypox, including the United States. [2022 U.S. Map & Case Count | Monkeypox | Poxvirus | CDC](#) CDC is urging healthcare providers in the U.S. to be alert for patients who have rash illnesses [consistent with monkeypox](#). CDC is working with state and local health officials to identify people who may have been in contact with individuals who have tested positive for monkeypox, so they can monitor their health.

The health department communicable disease team is monitoring this situation and connecting with regional, state, and federal conversations. We are also connecting with healthcare partners to keep them informed. Monkeypox is rare and does not spread easily between people without close contact. The threat of monkeypox to the general U.S. population remains **LOW**. More information is available at: [Monkeypox | Poxvirus | CDC](#)

EPA releases Drinking Water Health Advisories for PFAS

Please see attached for update on release of new water health advisories which are pertinent to drinking water situation in Eau Claire.

Bureau of Environmental and Occupational Health

EPA Releases Drinking Water Health Advisories for Four Per- and Polyfluoroalkyl Substances (PFAS)



Today, the U.S. EPA released [drinking water health advisories](#) for four per- and polyfluoroalkyl substances (PFAS): GenX, PFBS, PFOA, and PFOS.

What is an EPA drinking water health advisory?

EPA health advisories are non-regulatory, technical information designed to describe levels of contaminants in drinking water below which adverse health effects are not expected to occur. They are intended to protect all people over a lifetime of exposure.

Why did EPA issue these advisories?

EPA issued this information in recognition of the current state of the science, which continues to indicate that PFAS can pose a risk to human health at very low concentrations in drinking water. In particular, EPA released interim updated health advisories for PFOA and PFOS in acknowledgement that their 2016 health advisories of 70 parts per trillion (ppt) for these compounds are not adequately protective based on current science.

What are the new advisories?

Interim updated health advisories

- PFOA: 0.004 parts per trillion (ppt) or nanograms per liter (ng/L)
- PFOS: 0.02 ppt

Perfluorooctanoic acid (PFOA) and perfluorooctane sulfonate (PFOS) are two of the most widely used and studied chemicals in the PFAS group. PFOA and PFOS have been replaced in the United States with other PFAS in recent years.

Final advisories

- GenX: 10 ppt
- PFBS: 2,000 ppt

In chemical and product manufacturing, GenX chemicals are considered a replacement for PFOA, and perfluorobutane sulfonate (PFBS) is considered a replacement for PFOS.

How do these numbers compare to DHS recommended health advisories?

Notably, these advisories are lower than health advisory levels for these compounds developed and used by DHS over the last few years to guide public health recommendations at PFAS sites around the state. Additionally, the interim updated advisories for PFOA and PFOS are lower than can be detected using current standardized lab methods for PFAS.

How is DHS responding to these new proposed values?

DHS, along with the Department of Natural Resources (DNR), is carefully reviewing the technical information and justification used to develop these guidelines. While our health advisories remain unchanged at this time, these new federal advisories may lead to reconsideration of them. We recognize that these developments may raise a lot of questions around our ongoing efforts to address PFAS contamination in the state. We remain committed to ensuring public health is protected from harmful levels of PFAS in drinking water and will prioritize this review accordingly.

Want to know more?

We will continue to keep you updated on the outcome of our review and any further developments at the Federal level.

- View and download our [message map](#) in the event you receive inquiries.
- Visit [EPA's website](#) for more information on these new health advisories.
- View [EPA's PFAS Strategic Roadmap](#) to learn more about their commitments to action.
- Visit [our website](#) to learn more about PFAS and view current DHS recommended health advisories for PFAS.
- Email the [Bureau of Environmental and Occupational Health](#) or call us at 608-266-1120 if you have any questions about this information.

Please do not reply to this email message. If you have a question, please email the [Bureau of Environmental and Occupational Health](#) or call us at 608-266-1120.



EXECUTIVE ORDER #168

Relating to a Special Session of the Legislature to Protect Reproductive Rights and Healthcare Access

WHEREAS, Wisconsin is among several states across the country with an existing criminal statute that criminalizes nearly all abortions, including a criminal ban on abortions in instances of rape and incest or where the health of the mother is at risk;

WHEREAS, this archaic law dating back to 1849, while currently unenforceable, could once again be used to limit reproductive healthcare privacy and freedom based on the potential repeal of *Roe v. Wade* and other related cases that have been settled law for decades;

WHEREAS, the protections that people in this state have relied upon for nearly 50 years are in peril, and without swift action, so many people—our neighbors, parents, families, and friends—could soon be unable to access the healthcare they need and deserve;

WHEREAS, every single Wisconsinite should be able to get the healthcare they need when they need it, including having the opportunity to make deeply personal decisions about their reproductive health in consultation with their family, faith, and doctor, and without interference by politicians;

WHEREAS, licensed healthcare professionals should be able to provide appropriate, evidence-based medical advice to patients making reproductive healthcare decisions without fear of intimidation or criminal prosecution, and politicians should not interfere with the relationship between a patient and their doctor; and

WHEREAS, in light of the imminent possibility the rights upon which Wisconsinites have relied for decades could be jeopardized by a forthcoming court ruling, the Wisconsin State Legislature must immediately pass the Abortion Rights Preservation Act to protect access to reproductive rights and healthcare in the state of Wisconsin.

NOW, THEREFORE, I, TONY EVERS, Governor of the State of Wisconsin, by the authority vested in me by the Constitution and the Laws of the State, specifically Article IV, Section 11 and Article V, Section 4 of the Wisconsin Constitution, hereby require the convening of a special session of the Legislature at the Capitol in the City of Madison, to commence at 12:00 pm on June 22, 2022, solely to consider and act upon LRB-6340/1 and LRB-6342/1, relating to eliminating certain abortion prohibitions.

IN TESTIMONY WHEREOF, I have hereunto set my hand and caused the Great seal of the State of Wisconsin to be affixed. Done in the City of Milwaukee this eighth day of June in the year of two thousand twenty-two.

TONY EVERS
Governor

By the Governor:

DOUGLAS LA FOLLETTE
Secretary of State

2022 RESOLUTION: Comprehensive Sexuality Education is a Necessity for Wisconsin Schools

Adopted at the Annual Business Meeting on May 24, 2022.

WHEREAS, there are numerous types of sexual education being taught in Wisconsin schools that vary in accuracy, emphasis, and effectiveness, and lead to misunderstandings within the adolescent population throughout the lifespan; and

WHEREAS, consistent and inclusive Comprehensive Sexuality Education (CSE) is needed in Wisconsin schools, including elementary, middle, and high school, to support the rights of young people's knowledge of their own sexual health and identity development; and

WHEREAS, CSE is developmentally and age appropriate, medically accurate, inclusive of diverse identities and experiences, and culturally inclusive; and

WHEREAS, CSE is curriculum based, following a written curriculum with learning objectives delivered in a clear and structured manner; and

WHEREAS, CSE is incremental, starting at an early age with foundational content and skills and with new information building on previous learning; and

WHEREAS, providing CSE in Wisconsin schools will contribute to improved mental health, decrease the rate of sexually transmitted infections (STIs) and unintended pregnancy⁴, decrease the perpetration of sexual violence, and decrease the number of suicide attempts and completions⁵; and

WHEREAS, CSE includes information about reproductive development, contraception for preventing unintended pregnancy, barrier protection to prevent STIs, and information about choosing abstinence; and

WHEREAS, CSE includes topics otherwise not included in school curricula, such as healthy sexual and nonsexual relationships, violence prevention, mental health, communication, positive development of self, the right to consent, gender identity and expression, and healthy decision making; and

WHEREAS, in 2010, Wisconsin passed the Healthy Youth Act, which defined and required evidence-based, medically accurate and age-appropriate information about sexual and reproductive health be shared; along with requiring information on contraception. This was repealed and replaced in 2012 with the current Human Growth and Development Statute 118.019, which removed definitions for medical accuracy and age-appropriate materials, and established a health education program that emphasizes abstinence-only-until-marriage; and

WHEREAS, abstinence-only-until-marriage programs are proven to be ineffective, failing to delay sexual initiation or reduce sexual risk behaviors⁶; and

WHEREAS, abstinence-only-until-marriage programs violate young people’s human rights, withholds medically accurate information, stigmatizes, reinforces harmful gender stereotypes, and undermines public health⁷; and

WHEREAS, in the US, the majority of young people choose to engage in sexual intercourse by the time they graduate high school including 19% of students in America reporting having had sexual intercourse by 9th grade, 34% of students by 10th grade, 47% by 11th grade, and 57% of students by 12th grade⁸; and

WHEREAS, Wisconsin Statute 48.981(2m) established an exception to reporting requirements from health care providers in order to protect health care rights of Wisconsin youth. It states that the purpose of this statute is to allow children to obtain confidential health care services. Health care services is defined in the statute as family planning services, as defined in s. 253.07 (1) (b), 1995 stats., contraception, pregnancy testing, obstetrical health care or screening, screening, diagnosis, and treatment for a STIs and HIV.

WHEREAS, CSE is inclusive of all young people and young people have the right to learn about their sexual and reproductive health and rights, especially youth with disabilities, BIPOC youth, and LGBTQ+ youth who face disproportionately high rates of sexual violence; and

WHEREAS, CSE can contribute to preventing violence by providing safe and inclusive spaces, empowering young people to make decisions that influence their health, and creating a culture of consent; and

WHEREAS, providing CSE in all Wisconsin schools will contribute to the reduction of medical costs related to unintended pregnancy and STI treatment, as well as contributing to reducing to mental health care costs; and

WHEREAS, 1 in 3 women and 1 in 6 men will experience contact sexual violence in their lifetime⁹; sexual assault is a costly public health problem totaling in more than \$122,000 per victim and nearly \$3.1 trillion to the economy over the lifetimes of all victims; and moreover, the burden of sexual violence goes well beyond the direct impact to victims and is a preventable traumatic experience that impacts us all¹⁰⁻¹¹; and while CSE cannot prevent all sexual violence, it is an effective measure in preventing it; and

WHEREAS, CSE is supported by the Centers for Disease Control¹², American Academy of Pediatrics¹³, American Public Health Association¹⁴, American College of Obstetricians and Gynecologists⁴, Planned Parenthood¹⁵, and Sexuality Information and Education Council of the United States¹⁶.

THEREFORE, BE IT RESOLVED that Wisconsin Public Health Association supports:

- The development of state and local policies that support comprehensive and culturally sensitive sexuality education as a requirement in Wisconsin schools.
- Replacing all abstinence-only-until-marriage curricula with CSE curricula in Wisconsin schools.

- Implementation of comprehensive, inclusive sexual education and the benefits it provides including delay of sexual initiation, positive youth development, affirmative consent, STI prevention, violence prevention, suicide prevention, and promotion of healthy relationships.
- Sexuality education topics that include but are not limited to: puberty, adolescent development, anatomy, physiology, sexual orientation, gender identity, gender expression, contraception, pregnancy, reproduction, STIs and HIV (prevention, transmission, treatment), reproductive rights to sexual health care, healthy relationships, right to consent, family engagement, and interpersonal violence prevention.
- Implementation of National School Health Education Academic Standards as recommended by the American Public Health Association (APHA).
- Community-centered CSE efforts including access and input from local health care providers and encouraging adolescent advocacy within health care settings.
- Increased funding for CSE in Wisconsin schools including state appropriations and federal funds for Teen Pregnancy Prevention Program (TPPP) and Personal Responsibility Education Program (PREP).
- Convening a group of stakeholders, which may include, state and local education experts, state and local public health experts, community-based organizations, health care providers, parents and guardians, and young people, to support the development of a best-practice policy example for CSE policy initiatives in Wisconsin K-12 school districts.
- Supporting the development and implementation of a database that collects information about school's health and wellbeing policies

NOW BE IT FURTHER RESOLVED that Wisconsin Public Health Association Opposes:

- Abstinence-only-until marriage curricula and programs and any other program which fails to meet the needs of young people by stigmatizing sex, assuming values (i.e., religion) excluding people with disabilities, BIPOC, and LGBTQ+ youth, and/or reinforcing harmful gender norms and stereotypes.
- Funding that promotes and sustains abstinence-only-until-marriage programs in Wisconsin.

Language Acknowledgements and Clarifications

1. **Wisconsin schools:** Refers to school-aged (kindergarten to twelfth grade) youth who have the opportunity for exposure to comprehensive sexual education throughout the lifespan that is age and developmentally appropriate.
2. **Young people, adolescent, or youth:** In this resolution these terms are used interchangeably; however, comprehensive sexuality education should begin in early childhood and continue through a person's lifespan.

3. **Comprehensive sexuality education (CSE):** According to the American College of Obstetricians and Gynecologists, CSE should be medically accurate, evidence-based, and age-appropriate, and should include the benefits of delaying sexual intercourse, while also providing information about normal reproductive development, contraception (including long-acting reversible contraception methods) to prevent unintended pregnancy, as well as barrier protection to prevent sexually transmitted infections (STIs). Programs should not only focus on reproductive development (including abnormalities in development), prevention of STIs, and unintended pregnancy, but also teach about forms of sexual expression, healthy sexual and nonsexual relationships, gender identity and sexual orientation and questioning, communication, recognizing and preventing sexual violence, consent, and decision making.¹ The field of health education and corresponding literature uses the term *comprehensive sexuality education*, though it is often referred to simply as “sex ed.”
4. **BIPOC youth:** Black, Indigenous, and People of Color, acknowledging that not all people of color face equal levels of injustice.²
5. **Gender stereotypes and norms:** According to Gender Equality Law Center, an overgeneralization of characteristics, differences and attributes of a certain group based on their gender. Gender stereotypes create widely accepted biases about certain characteristics or traits and perpetuate the notion that each gender and associated behaviors are binary.³ Within this context, harmful stereotypes and norms may include separating by sex for sexuality education lessons, emphasis on childcare skills for female participants, linking masculinity with a desire for sex, and an assumption that heterosexual marriage before children is an assumed value of all participants.
6. **Personal Responsibility Education Program (PREP) and Teen Pregnancy Prevention Programs (TPPP):** Teen pregnancy prevention programs supported by federal legislation and appropriations.

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2021-2022

LEGISLATIVE PRIORITIES

Together, WPHA and WALHDAB represent over 1,200 public health professionals in communities across Wisconsin, striving to prevent, promote, and protect the residents of the state.

About Public Health

Over the last century, public health advancements have dramatically increased life expectancy through vaccination, infectious disease control, and chronic disease prevention. Health outcomes are primarily driven by the social and economic conditions in which we live, work, play, pray, grow up, and grow old. That's why public health is increasing its emphasis on education, income and employment, housing, and other "social determinants of health."

Legislative Priorities

Preserve public health statutory authority for control of communicable diseases and other public health threats.



Build and retain public health infrastructure through increased and more flexible public health funding.

Dedicate funding for core public health services.

Allocate \$36 million per year, over and above what is currently budgeted for public health.

Direct at least half the new allocation (\$18 million) to local health departments.

Address Racism as a Public Health Crisis.

Support legislation that promotes and fosters diversity, equity, and inclusion, so that all people are treated fairly and respectfully and can attain their full health potential.



Policy Priorities

Criminal Justice Reform

- Increase treatment alternatives and diversion program (TAD) funding for mental health and substance abuse issues.
- Increase funding allocated to counties for juvenile justice services.

Income Stability and Employment

- Support and expand Paid Family Leave.
- Increase Earned Income Tax Credit and move from one-time to monthly payments.
- Establish tax credit for family caregivers.
- Increase workforce training/transitional jobs.

Early Childhood

- Fully fund School Breakfast Program.

Housing

- Expand low-income housing tax credits for developers and rental assistance vouchers for renters.
- Fund abatement for lead paint, soil and pipes.

Support Best Practice Public Health Policy and Effective Programming

Each local health department in Wisconsin is charged to identify its community's health priorities. Planning processes include representatives from healthcare, for-profit businesses, community-based non-profit organizations, other community groups, and intergovernmental departments. Specific priorities vary across the state (e.g. soil contaminants, alcohol, tobacco or other drug prevention, preventable injury, mental health, etc.), but there is also much common ground across the state. Support public health to effectively address these priorities accomplish these goals.



About WPHA

The Wisconsin Public Health Association is the largest statewide association of public health professionals in Wisconsin. Established in 1948, WPHA exists to improve, promote and protect health in Wisconsin. WPHA strives to be diverse in its constituency, rich in partnerships and valued for its policy recommendations and best practices. WPHA is the collective voice for public health in Wisconsin.

About WALHDAB

The Wisconsin Association of Local Health Departments and Boards is the statewide leader and voice for local governmental public health. WALHDAB was founded in 1991 to serve local health departments and boards of health.

Investing in public health will provide us the opportunity to be healthy where we live, work, learn and play.

Help the state recover from the human and economic trauma. The pandemic exposed longstanding financial inadequacies in Wisconsin's public health infrastructure. As we navigate the waning months of the pandemic, we need to begin charting our course for recovery that includes addressing neglected chronic underfunding and strategic investments for the future.



BOOST PUBLIC HEALTH INFRASTRUCTURE FOR HEALTHY COMMUNITIES

\$18 MILLION

Dedicated State Funding for Local Health Departments

- Provide block grants to support public health infrastructure and fund state mandates which are supported by county and municipal levies.
- Allow for this funding to be flexible for increased alignment with their community's needs to maximize impact statewide.
- Take into account factors with allocation formula for distribution more effectively and equitably.

Committed state funding provided directly to local public health departments would enable communities to implement public health strategies more effectively and equitably.

Examples where local health departments could utilize this dedicated funding is:

- Increase community health services, like cancer screenings, substance abuse prevention, and mental health services
- Invest in programs to protect against water, air quality, and other environmental health hazards
- Develop preparedness response strategies to guarantee the capacity to respond quickly to public health emergencies
- Communicate important, accurate data and information to the public in a timely manner
- Improve quality and performance through utilization of best practices to develop public health workforce and achieve outcome goals
- Reduce disparities and advance health equity

It would also allow local health departments to administer the nearly two-dozen unfunded mandates the state has placed on local health departments.

Supporting a strong public health infrastructure is paramount with the continuing occurrences of natural disasters, increased substance use, and an increase in both infectious and chronic diseases.

Investments in public health programs represent around 10% of all health care spending in most countries, yet its impact can be substantial. An investment of \$10 per person per year in evidence-based programs in local communities that are proven to increase physical activity, improve nutrition, and prevent smoking or other tobacco use could save the country more than \$16 billion annually within five years, according to the Robert Wood Johnson Foundation. This is a potential savings of \$5.60 for every \$1 invested.

However, Wisconsin is not investing in taking advantage of these savings. According to The Trust for America's Health, Wisconsin state funding for public health is \$17.40 per person per year—\$36 per person per year is the national average.

Facing this fact and knowing the detrimental effects of chronically underfunding public health, we respectfully urge you to make ongoing public health funding a top priority in the 2021-23 biennial budget.

WPHA & WALHDAB also support these two categorical funding mechanisms for direct support to local health departments and community based organizations:

\$10 MILLION

for Communicable Disease Grants

- Build on state funding to local and tribal health departments.
- Communicable Diseases can lead to a loss in productivity, increase costs, and place employees on extended sick leave.
- Limited resources are provided though threats are increasing. Wisconsin provides surveillance and follow up for a numerous amount of disease, including Zika, Lyme Disease, Hepatitis C, Influenza, Tuberculosis, and Elizabethkingia.

\$30 MILLION

for Health Equity Grants

- The pandemic exposed many ways in which some Wisconsinites across both rural and urban areas have more difficulty accessing health resources. Support for community organizations to implement community health worker models could help address those issues and advance health equity.
- Promote health equity for community organizations to implement community health worker care models.
- Community organizations, and local/tribal health departments to hire health equity strategists and implement health equity action plans.

SUPPORT INCREASED INVESTMENT IN EXISTING PUBLIC HEALTH PROGRAMS ADMINISTERED BY THE DEPARTMENT OF HEALTH SERVICES

The Department of Health Services is an equal partner in a strong public health coalition. We strongly recommend supporting the following initiatives in Governor Evers' budget proposal:

Windows Plus Lead Exposure Prevention Program

Provide \$961,800 in 2021-22 and \$1,054,800 in 2022-23

Lead Screening and Outreach Grants

Provide \$50,000 annually to increase a grant for lead screening and outreach activities

Expand Eligibility for Birth to 3 Program

Provide \$3,300,000 in 2021-22 and \$6,600,000 in 2022-23

Black Women and Infants' Health

Provide \$3,500,000 annually to fund grants to address Black women's health and infant and maternal mortality.

Tobacco and Vaping Prevention

Increase funding by \$2,000,000 in 2021-22 to fund a new public health campaign aimed at preventing initiation of tobacco and vapor product use.

Community Health Benefit

Provide \$1,000,000 in 2021-22 and \$24,500,000 in 2022-23 to fund a new MA benefit.

Postpartum Eligibility Extension

Provide \$20,948,600 in 2022-23 to reflect the estimated cost of extending benefits for MA eligible pregnant women until the last day of the month.

Community Health Workers

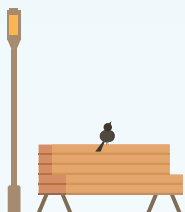
Provide \$14,232,000 in 2022-23 to fund coverage of community health worker services under MA.

Medication-assisted Treatment Reimbursement

Provide \$3,632,800 in 2021-22 and \$7,265,500 in 2022-23 to increase reimbursement rates for medication-assisted treatment (MAT) services for individuals with substance use disorder.

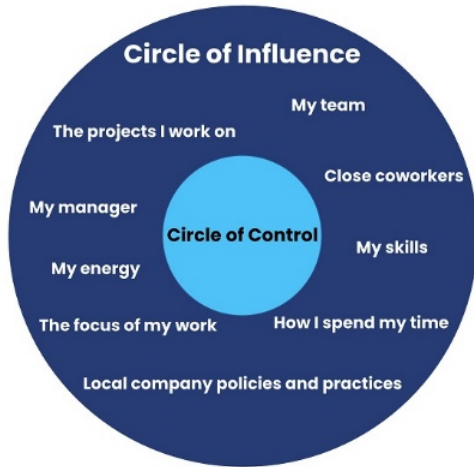
A comprehensive recovery strategy needs to include robust investments in public health. For more information, please do not hesitate to contact our government affairs consultants Tim Hoven (414-305-211) or Erik Kanter (608) 310-8833.

All people deserve the opportunity to live in a state that creates conditions for everyone to be healthy. Public policy should strive toward the elimination of health disparities.



WALHDAB
Public Health In Action

Wisconsin Association of Local Health Departments and Boards



My Circle of Influence

Who might you build more of a relationship with?

Who is in the decision-makers circle?

Are there people that are in both circles?

What pressures might there be on the decision maker?

Elevator Pitch

1. Know your audience – who has the power to make the decision?
2. Prepare – what do you know about the person you are talking to?
3. What do they want? How can you identify with them?
4. Approach – the single thought or sentence that will best lead to your objective
5. Hook
6. The Ask

Exercise

Pick someone who can make a decision to support public health.

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____

Exercise drawn from, “How to get your point across in 30 seconds or less,” by Milo O. Frank

Step 1: Create a goal

Maps can be done around a problem, a person, or an institution. Establish a specific goal for an effective process that highlights opportunities for change.

Questions to consider:

- Is this goal attainable?
- Are root causes being addressed?
- Are the Populations of Focus involved in this process?

Step 2: Identify individuals and institutions

Identify key decision-making individuals and institutions. Consider the decision maker's and the coalition's relationships and spheres of influence.

Questions to consider:

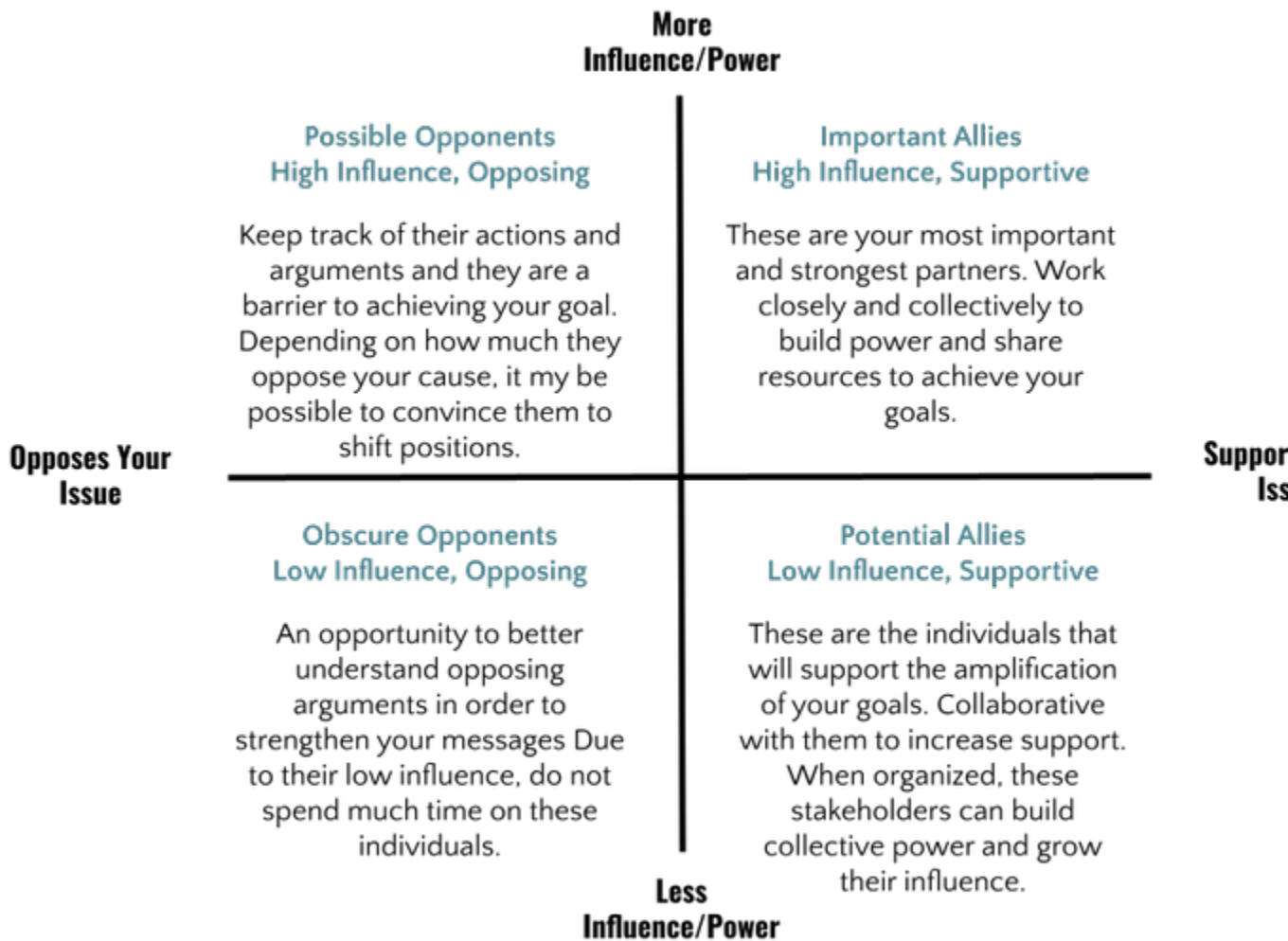
- Who is the individual and institution that have the power to make the decision?
- What are their spheres of influence? Who do they have relationships with?
- What are the coalition's spheres of influence? What relationships does the coalition have?
- Is there anyone working in direct opposition? Is there an opportunity to build relationships to shift beliefs?

Decision Maker(s)	Influencers	Who is impacted?	Opposers
Individual(s) and/or institutions who have the positional power to make a decision on your challenge/goal <ul style="list-style-type: none"> • They have direct influence • Lawmakers/elected officials • Directors 	Individual(s) and/or institutions who have influence over your objective and/or decision makers <ul style="list-style-type: none"> • These folks may have deep relationships with the decision maker(s) 	Individual(s) and/or communities directly affected by the issue, inequities, constituents. <ul style="list-style-type: none"> • These folks are included in the problem identification and the actions towards solutions 	Individual(s) and/or institutions that are currently or will actively work against you. <ul style="list-style-type: none"> • Who is in direct opposition? • How are they actively working against you?

Step 3: Map individuals and institutions

Map the individuals and institutions identified in Step 2 on a four-quadrant power map. Focus on the positions of the individuals and institutions relative to each other rather than the exact placement on the map.

1. Start with individuals in the coalition
2. Next, map the decision-makers
3. After that, map the decision maker's spheres of influence
4. Next, map the coalition's spheres of influence
5. Finally, map the opposition



Step 4: Draw relational lines

Determine the relationships between the individuals and institutions mapped in Step 3. Draw lines to connect them. Some individuals and institutions will have many connections while others may not. A decision-maker may not have many relational lines running to them, nonetheless, they are critical and hold a lot of power and influence to achieve the goal.

Write down questions that come up or gaps in knowledge that need further research. This will be important information when thinking about the next steps.

Step 5: Prioritize relationships

Circle the individuals and institutions the coalition would like to build relationships with. Prioritize the individuals with the most power and influence (y-axis) as well as the individuals with the most relational lines connected to them.

Questions to consider:

- Who are the individuals and institutions with the most influence and what are their connections to the decision-makers?
- What relationships (one-on-ones) is the coalition going to prioritize?
- What is the coalition's collective power at this moment? How will the prioritized relationships help build the power of the coalition?
- Was this process exhaustive? Are there any lingering thoughts, individuals, institutions, and relationships that were not mapped?
- What questions and gaps came up? What information is needed to develop the next steps?

Step 6: Establish Next Steps

Generate the next steps the coalition will take. Strategies will emerge at every step of the power mapping process, take note of them for this step. Ensure that there is consensus among the coalition and that there is a shared responsibility for the next steps.

- [Coalition Structure](#)
- [Recruiting Members](#)
- [Engaging Members](#)
- [Communication](#)
- [Additional Resources](#)

Use the resources here to fine-tune and shape your coalition.

- [Sample Coalition Structure](#)
- Coalition By-Law Examples ([CAHL](#) , [Southwest Alliance](#) , and [W3TFL](#)).
- Learn some ins and outs with the [Effectively Convening Your Coalition Tip Sheet](#).
- [One on One Packet - NYC Organizing Support Center](#)
- [One-on-One Worksheet](#)
- [Sector Planning and Engagement Pyramid](#)
- [Coalition Member Engagement Worksheet](#)