



HEALTH
IMPROVEMENT ORGANIZATION
FOUNDED BY ALLEGIANCE HEALTH

Community Action Plan



Together, we're taking the next step toward a healthier Jackson.



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Executive Summary

Dear Partners,

It is with great excitement and anticipation that we present the first Health Improvement Organization Community Action Plan for your review. This plan was created thanks to the work of many dedicated individuals and agencies in Jackson County.

I would like to thank our many contributors for all of their time, expertise, patience and enthusiasm throughout this endeavor. A huge “thank you” to the leadership of Allegiance Health for putting action behind the mission; without the dedicated staff and resources of the health system to support this work we could have never come so far. Also greatly appreciated is the collaborative, visionary and community-minded leadership of the United Way of Jackson County and the Jackson County Health Department in support of this ambitious effort to organize and align local health improvement efforts. It is this type of community spirit that makes our goals for Jackson County achievable. Special thanks to all of our Coordinating Council participants for their many hours of brainstorming, review and discussion, and to Jaye Clement, Kara Beer, and our intern Shaina Rose, who helped turn our ideas and research into this document.

I hope you will take the time to review this plan in detail and think about how your organization can play a role in carrying out this important work to:

1. Improve the knowledge, attitudes and beliefs of Jackson County related to emotional health, physical activity, nutrition and smoke-free lifestyles
2. Reduce the obesity rate among Jackson County residents to be at or lower than the state average
3. Reduce exposure to cigarette smoke in Jackson County
4. Improve the capacity/ability for Jackson residents to address mental health issues including stress, depression and other psychologically based illnesses

Your support, interest and encouragement are greatly appreciated. On behalf of the HIO Coordinating Council, “thank you” in advance for your dedication to improving the quality of life in Jackson. We look forward to stronger partnerships, thriving communities and measurable impact to health outcomes throughout Jackson County.

Sincerely,



Amy Schultz, MD, MPH
Director, Allegiance Prevention and Community Health

About the Health Improvement Organization (HIO)

Over the past two years, community partners in Jackson County have engaged in an intensive health assessment and planning process through a local collaborative: the Health Improvement Organization Coordinating Council (HIO CC). The HIO CC is a multi-disciplinary stakeholder's group led by Allegiance Health with representation from local government, public health, health care, health and human service agencies, and nonprofits, school districts, health plans, mental health, employers and the faith community. The HIO CC functions as the community stakeholder's group of Allegiance Health's Health Improvement Organization Board Committee, the strategic planning committee for Jackson County's Healthy Community initiative, and the planning committee for the United Way of Jackson County's Community Solutions Team on Health. This coordination of efforts across community leaders in health allows for unprecedented alignment of goals and resources, as well as the creation of a strong community platform for advocacy.

The Plan/Process

The HIO Coordinating Council's work over the past two years has culminated in the creation of a Community Action Plan, which includes goals, objectives and strategies to address physical activity, nutrition, tobacco and depression in Jackson County based on the following data-driven processes:

- Collection and review of data on local disease and risk prevalence, access barriers, health experience and disparities
- Evaluation of existing strategies, gaps and best practice approaches
- Input from target populations on acceptability of proposed strategies

The first Community Health Assessment was conducted from November 2007 to March 2008 in order to collect information on the health status of Jackson County. Over 1,000 Jackson County residents 18 years of age and older responded to a 180 question survey asking about their health status, insurance coverage, personal health habits and health care experiences. Below are some selected findings from the first assessment. Additional findings are presented throughout the document.

- About 50 percent of Jackson County residents report inadequate sidewalks or bike lanes
- Only 17 percent of Jackson residents consume at least 5 fruits and vegetable a day
- More than 1 in 4 Jackson residents is a smoker
- Depression was more common among Jackson County residents with other health problems, such as high blood pressure, high cholesterol, heart disease, stroke, cancer, diabetes, asthma, or allergies

The HIO CC reviewed the data from the assessment, identified priority health issues, and created a plan detailing ways organizations and community members can address these issues to better the health of our County. This included feedback from several community-based focus groups that targeted parents, students, teachers, clergy, government officials, employers and other community residents.

The overarching tactics that the Community Action Plan relies upon include evidence-based activities to:

- Enhance media attention and public recognition of healthy lifestyle practices
- Improve access to healthy foods and safe, attractive, affordable places for activity through supportive policies and physical environment changes
- Provide social support and services that promote consistent screening, referral and supportive relationships for physical activity, nutrition, mental health and smoking behavior change

Over the past several years, Jackson County has demonstrated considerable success in launching collaborative community-wide health initiatives that have created sustainable improvement processes with impressive results. Examples include the Coordinated School Health Council, Teen Pregnancy Prevention Initiative/Prenatal Task Force, Jackson Business Leaders for Health, Project Access and 2-1-1. The HIO plan intends to build upon this success to support implementation of health initiatives that have been prioritized as part of a significant community-wide engagement and an established infrastructure to support longevity.

Continued Support

Due to strong alignment of community health goals based on a collaborative process, leadership across Jackson's health and human service continuum are committed to the successful implementation of our community health plan. Allegiance Health, the Jackson County Health Department and the United Way of Jackson County have each devoted significant human and/or financial resources to this process to date and are committed to sustenance of these efforts over the long term. Implementation of the plan is meant to be achieved through the cumulative activities of our various stakeholder groups working on specific strategic facets of the plan depending on their various strengths, resources, areas of expertise and target populations. Informal agreements in the form of partner "handshakes" will be used to identify and catalog each specific organization's corresponding activities and partner engagement will be assessed annually.

In addition to leveraging existing community assets, collaborative grant seeking will be a key focus in implementation of HIO CC activities. Several collaborative grant opportunities have already been identified/pursued, and it is anticipated that these opportunities will only increase over the next several years.

One potential future vision of our collaboration is to build trust, alignment and accountability through our experience with the HIO CC process to ultimately evolve to a "Community Balanced Scorecard" (CBSC) model, where metrics and activities are formally aligned across organizations to achieve success as a community.

Your role

The Community Action Plan presented in this booklet is the result of research and planning done by the partners that make up the HIO CC. The strategies chosen to tackle these goals are based on research and evidence of best practices, but there is no single way to accomplish them. The activities that will take place in the community will be decided by the organizations and individuals that choose to participate. As an organization or community member, we hope you will review the information and consider the following questions:

- What goals and objectives are the most important to you or your organization?
- What unique resources do you or your organization bring to the community that could help to accomplish these goals?
- How can you build support for the plan in your organization or community?
- What steps can you take toward helping to achieve a healthier Jackson?

Current Health Improvement Organization Partners

Allegiance Behavioral Health
Allegiance Faith Community Nursing
Allegiance Prevention and Community Health
American Red Cross - South Central Michigan Chapter
AWARE Shelter
Catholic Charities of Jackson County
Center for Family Health
City of Jackson Human Relations Commission
Community Action Agency
Consumers Energy
disAbility Connections
Fitness Council of Jackson
Food System Economic Partnership
Great Lakes Industry, Inc.
Health Plan of Michigan
Jackson Area Manufacturers Association
Jackson County Administration
Jackson County Chamber of Commerce
Jackson County Department on Aging
Jackson County Health Department
Jackson County Intermediate School District
Jackson County Substance Abuse Prevention Coalition
Jackson Community College
Jackson Public Schools
Jackson Tobacco Reduction Coalition
LifeWays
Michigan Prisoner ReEntry Initiative
Michigan State University Extension
Segue, Inc.
United Way of Jackson County

Strategic Action Plan

Goal One *Improve the knowledge, attitudes and beliefs of residents of Jackson County related to emotional health, physical activity, nutrition and smoke-free lifestyles.*

The focus of this goal reflects a desire to improve the health literacy of Jackson residents related to public health messages, improve local perception of opportunities to participate in healthy lifestyles and increase residents' self-efficacy and belief that they can achieve health improvement.



- About 16 percent of Jackson County residents report some difficulty finding a place to exercise
- Almost two-thirds of Jackson County residents report never or only sometimes considering food labels when purchasing foods
- Close to 25 percent of Jackson County residents would feel embarrassed to seek mental health services.

Objectives

1. Increase to 60 percent the proportion of Jackson adults who have a positive perception of Jackson residents' access to opportunities for active living.
2. Increase to 55 percent the proportion of Jackson adults who have a positive perception of Jackson residents' access to opportunities for healthy eating.
3. Establish baseline and increase by at least 10 percent:
 - The proportion of Jackson adults who understand the guidelines for recommended physical activity and nutrition
 - The proportion of Jackson adults who recognize the harmful effects of smoking and secondhand smoke
 - The proportion of Jackson adults who recognize the symptoms of mental distress and identify healthy coping mechanisms

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Healthy People 2010 by the U.S. Department of Health and Human Services, health literacy is defined as "the degree to which individuals have the capacity to obtain, process, and understand basic health information and services needed to make appropriate health decisions."

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or limited health literacy can impact the relationship between a patient and healthcare provider, a patient's understanding of diagnosis and treatment, prescription adherence and general health status.

Strategy 1: The creation of a social marketing campaign in the Jackson community to promote nutrition, active living, emotional health and smoke-free lifestyles.

The first step in implementation of this strategy is the public release of the plan created by the HIO CC, to introduce the components of the plan to local businesses and organizations. Following a public release of the plan, the HIO will use a coordinated brand/campaign to promote consumer-directed norming messages related to the key health areas. The campaign will promote these healthy lifestyle messages in audiovisual ads, print ads and web-based media, as well as integrating them into existing local communications such as newspapers, newsletters, etc.

Additional activities included in the campaign will be development and implementation of maps and signage/labeling (i.e., point of decision prompts in menus or groceries stores) and using coordinated branding to increase publicity and visibility around existing events and opportunities for healthy living in Jackson County. One mechanism for this will be to create an HIO 'seal of approval' that locations or entities can display to signify endorsement of products and activities that are health-friendly. Lastly, a community-wide competition will use a point reward system (with discounts to participating healthy vendors) to provide recognition and rewards for participation in healthy activities.

In addition to the creation of a social marketing campaign, other activities that will contribute toward achievement of these objectives include:

Strategy 2: The provision of training to area organizations on healthy fundraisers and implementing healthy lifestyle support and self-management programs, including parenting, stress management, tobacco, walking clubs, cooking classes, etc.

This strategy will focus on expanding the capacity of local organizations, such as employers, schools, churches, WIC, child care settings, medical providers etc., to implement activities (including healthy fundraisers and support groups) that promote healthy lifestyles within their target populations. Examples of existing programs that can be leveraged or expanded toward this end include the Stanford Chronic Disease Self-Management Program (CDSMP or PATH), Kaiser's Quit Tobacco Program and the Rec-Connect physical activity program for WIC recipients.

Strategy 3: Provide training to lay health workers to provide word of mouth peer education/support.

This strategy will focus on developing outreach systems that promote "word of mouth" education among less formal social networks through neighborhood-based approaches. Examples of this type of outreach include the use of community volunteers/advocates/health workers and dissemination of messages/information through neighborhood associations, barber shops, food banks, etc.



Community Guide to Preventive Services is a resource developed by the Centers for Disease Control and Prevention. A panel of experts scientifically reviews interventions designed to improve health and prevent disease in communities. By recommending interventions that have been found to be effective, The Community Guide promotes the use of cost-effective interventions that have been tested and found to work in a variety of settings and populations. The CDC's Community Guide to Preventive Services recommends community-wide campaigns that involve many community sectors, include highly visible, broad-based, multi-component strategies (e.g., social support, risk factor screening or health education), and address other cardiovascular disease risk factors, particularly diet and smoking as an effective approach to promote physical activity.

Goal 2 *Reduce the obesity rate among Jackson County residents to be at or lower than the state average.*

Seven out of ten Jackson residents are overweight or obese, and 58 percent of Jackson County residents are currently trying to lose or keep from gaining weight. The health consequences of obesity can include heart disease, type 2 diabetes, high blood pressure and osteoarthritis.

Relevant Community Health Assessment statistics:

- One-third of Jackson County residents meet recommendation for moderate physical activity
- One-fourth of Jackson County residents meet recommendation for vigorous physical activity
- Only 17 percent of Jackson residents consume at least 5 fruits and vegetable a day
- Seventeen percent of Jackson residents report participation in worksite wellness programs

Objective: *Increase to 40 percent the proportion of adults who meet federal recommendations for physical activity.*

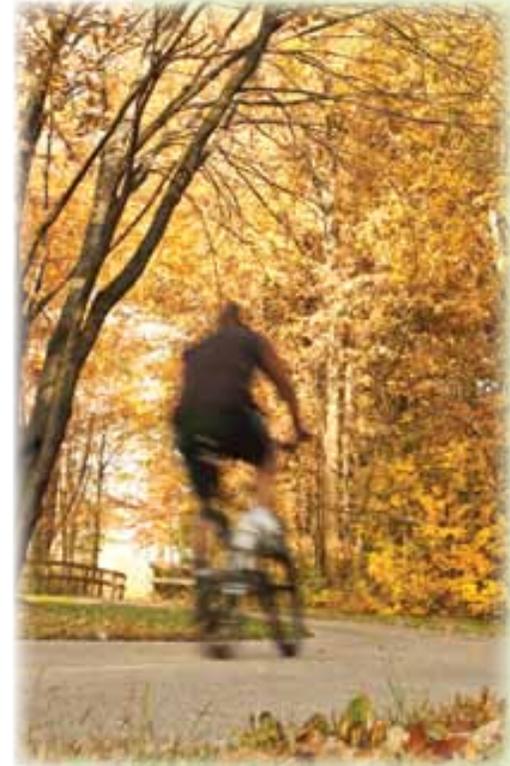
The Community Guide has concluded that when combined with informational outreach (as described in the previous section); efforts to increase access to places for physical activity can be very effective in increasing physical activity. The strategies under this objective include specific activities that our community can take to advance outreach and access locally, such as increasing walk-ability, access to trails and promoting existing resources and facilities.

Strategy 1: Advocate favorable non-motorized transportation plans and policies (e.g., Complete Streets) with Commissioners, developers and transportation authorities.

Complete Streets is a nation-wide initiative encouraging local governments to create policies that formalize a community's commitment to all users of the road. Complete Streets policies restructure how cities plan, design and maintain streets so they are safe for walkers, bicyclists and other non-motorized vehicle users.

Strategy 2: Enhance access and connections between bike lanes and trails to provide cross-community and neighborhood accessible non-motorized routes.

Well-developed infrastructure to support walking is an important element of the built environment and is associated with physical activity in adults and children. There is substantial evidence that the more walkable a community is, the more trips individuals will take by foot or bicycle. Walkability is affected by the proximity of destinations, the connectivity of routes, and the design and maintenance of routes and paths. Studies estimate that individuals in highly walkable areas average 1 - 2 extra walking trips per week compared to individuals in areas with low walkability.



The Community Guide has found evidence to support the effectiveness of implementing community-scale and street-scale urban design and land use policies to promote physical activity, including design components to improve street lighting, infrastructure projects to increase safety of pedestrian street crossings and the use of traffic calming approaches such as speed humps and traffic circles. The CDC's Community Strategies to Prevent Obesity in the United States recommends that local governments incorporate a policy for designing and operating streets with safe access for all users which includes at least one element suggested by the National Complete Streets Coalition.

Similarly, enhancing infrastructure supporting bicycling includes creating bike lanes, shared-use paths and routes on existing and new roads; and providing bike racks in the vicinity of commercial and other public spaces. By promoting and implementing local non-motorized transportation plans, such as trail connectedness plans, physical activity in the Jackson area will be more accessible and sustainable.

Strategy 3: Advocacy for and implementation of policies to open school athletic facilities to the public after hours (gyms, tracks, etc.).



The CDC recommends tracking the percentage of public schools that allow the use of their athletic facilities by the general public during non-school hours. Opening school facilities to the public on evenings and weekends has emerged as a way to increase access to safe and convenient places for physical activity in communities. Even communities that are underserved or face financial challenges have schools available locally. Rather than creating new avenues to increase physical activity, communities nationwide are exploring options to allow the public access to school gyms, playgrounds and tracks.

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are an example of shared-use paths that are created parallel to active or abandoned railroad lines. Rail-trails are popular for walking, running, biking, in-line skating, wheelchair and other uses because railroad beds have gradual grades and turns. There are currently more than 1,400 rail-trails, with at least one in every state. The Falling Waters Trails is a 10.4 mile paved rail-trail in Jackson County. Stretching from Concord to Jackson, the Falling Waters Trail is a major component of the Jackson County Regional Trail plan.

Strategy 4: Expansion of the use of Safe Routes to Schools and walking school buses in Jackson area school districts.

Safe Routes to School is a federal program that makes it safe, convenient and fun for children to walk or bicycle to school. Walking and biking to school can be an easy and fun way for students to increase their amount of physical activity throughout the week.

To accomplish this strategy in Jackson County, the benefits of the Safe Routes to school program need to be brought to the attention of local government and school districts, and advocacy for improvements indicated by a local needs assessment must be supported. Some of the needed changes may include paving roads, widening road shoulders, installing traffic signals and other traffic calming measures. This strategy also requires strong community support and parent/neighborhood volunteers.

Strategy 5: Build, strengthen and maintain social networks (i.e., buddy systems, walking/biking groups) that provide supportive relationships for physical activity behavior change.

The Community Guide shows strong evidence that social support systems in a community setting are an effective way to get people to be more physically active. Whether the support is highly structured or less formal, those with a source of social support are more likely to participate in physical activity than individuals without such support.

Social support systems for physical activity are effective in communities, worksites, and school settings. Men and women, people with a sedentary lifestyle and those who are already physically active realize benefits from social support systems.

The community competition described under Goal One, Strategy 1 will promote group activities.



“walking school bus” is a group of children walking to school with one or more adults. Similar to a walking school bus is a bicycle train, in which one or more adults supervise a group of children riding their bikes to school.



study by Safe Routes to School examined the number of students at Northeast and Frost Elementary Schools that live within walking distance to school (1.5 miles away or less). During the 2006 - 2007 school year, there were 230 students at Frost that could walk or bike to school, and only 60 that did. Only 40 students walked or rode their bikes to Northeast, even though 172 students could have.

Strategy 6: Provide tools and competency training to support consistent screening and effective referrals for patients and families in need of services for prevention/lifestyle management.

This strategy, which will be suggested for many of the objectives throughout this plan, involves expanding the capacity of local providers to consistently implement screening and referrals as recommended by the United States Preventive Service Task Force (USPSTF). The USPSTF recommends that clinicians screen all adult patients for obesity and offer intensive counseling and behavioral interventions to promote sustained weight loss for obese adults.

One mechanism to support this could be integration of templates that support standard protocols for screening and referral into the Jackson Community Medical Record. Integrating protocols and workflow into the electronic medical record used by many of our Jackson primary care offices will increase the likelihood that patients in need will be identified and offered assistance. In addition, providing training and support to providers on successful behavior change interventions such as the 5 A's (Ask, Advise, Assess, Assist, Arrange) of disease self-management and motivational interviewing can increase the effectiveness of these interactions when they occur. Lastly, tools and educational handouts (such as Exercise Prescriptions) will be provided for distribution to reinforce provider messages.

Objective: Increase to 21 percent the proportion of Jackson adults who meet federal recommendations for fruit and vegetable intake (at least 5 servings per day).

Food systems can be defined broadly to include the foundations for food production, the social aspects of consumption, and relevant government and other policies, as well as the actual growing, processing and distributing of substances that result in foods that people consume. Healthfulness of a local food system refers to the available foods containing appropriate nutrients in proper amounts to enable community members to eat balanced diets that include ample amounts of fiber and other substances important for health. Families living in low-income and minority neighborhoods often have less access to healthier food and beverage choices, particularly in underserved areas. Strategies to increase healthy consumption must include a focus on building and strengthening our local community food system.

Despite growing enthusiasm and activity in this area, currently the community food agendas and activities in Jackson County are diverse and somewhat disjointed. Development of coordinated and sustained action in many of the areas described in this section will require assessment and communication of the current state of community food improvement efforts in Jackson County, and creation of a consolidated local network to organize and support combined approaches.



United States Preventive Services Task Force (USPSTF) is sponsored by the Agency for Healthcare Research and Quality. By conducting rigorous and impartial assessments of the scientific evidence behind clinical interventions, the USPSTF provides recommendations about which preventative services should be routinely incorporated into primary medical practice.



Motivational interviewing (MI) is a "directive, client-centered counseling style for eliciting behavior change by helping clients to explore and resolve ambivalence." There is a growing body of evidence to suggest that MI in a clinical setting may improve patients' likelihood and efficacy of behavior change.



Strategy 7: Expand retail offerings of fresh produce through grocery stores and convenience stores in areas of need.

Residents in certain geographic areas of Jackson County are less likely to report access to fresh and affordable produce.

Supermarkets and full-service grocery stores typically have a larger selection of healthy food (e.g., fruits and vegetables) at lower prices compared with smaller grocery stores and convenience stores.



Research has shown four ways in which grocery store based interventions can potentially increase fruit and vegetable consumption:

1. Point of purchase signage and information
2. Reduced prices and coupons
3. Increased availability, variety and convenience
4. Promotion and advertising

However, research suggests that low-income, minority and rural communities have fewer supermarkets as compared with more affluent areas. Strategies to improve the affordability of healthier foods and beverages in lower accessibility areas include lowering prices of healthier foods and beverages and providing discount coupons, vouchers, and bonuses; and reducing costs of fresh foods by purchasing food directly from local farmers (i.e., through farmer's markets).

Financial incentives to food retailers, such as tax benefits and discounts, loans, loan guarantees and grants to cover start-up and investment costs can be offered to encourage opening new retail outlets in areas with limited shopping options. Additionally, incentives to integrate healthier food options into existing corner and convenience stores will increase access to underserved populations. One activity in this area will be to advocate for Michigan Public Act 231.

The

NuVal nutritional scoring system is new food labeling system that ranks the nutritional value of food items on a scale of 1 to 100. A mathematical formula that takes over 30 nutrients into consideration scores foods. The more nutritious the food, the higher the score given. By placing these scores on store price tags, consumers with limited knowledge about nutrition and food labels have a great opportunity to make healthy food choices.

Michigan

Public Act 231 is a tax incentive for food retailers in low-income and rural communities to expand the offerings of healthy food options. Qualified retail food establishments that expand, improve or open in underserved areas may request that those improvements not be taxed for up to 10 years. To be eligible for the incentive, the property must meet criteria relating to the types of products sold and be located in a qualified underserved area.

Strategy 8: Expand food pantry offerings of fresh produce throughout the community.

The Fresh Food Initiative (FFI) is a program delivered through the Food Bank of South Central Michigan. Active in several counties, FFI brings fresh produce, dairy products and other grocery items to low-income neighborhoods. Thanks to the efforts of the Neighbors in Need collaboration, FFI was first brought to Jackson County in 2009. The Salvation Army volunteered to facilitate delivery sites, and additional support and funding was provided by the United Way of Jackson County and community partners. During the 2009 distributions, which spanned an eight week period, close to 60,000 pounds of fresh food were distributed to about 2,300 families. The average cost per pound of the food was only four cents.

Funding was secured to host two FFI sites in Jackson County in the summer of 2010. The two sites, the Salvation Army and Parma Elementary, will distribute food for 16 weeks and 12 weeks respectively. The Fresh Food Initiative is a model example for how to increase fresh food offerings for Jackson County residents in need.

An activity that may compliment this strategy is to provide education to consumers about the storage and preparation of produce. Programs nationwide have shown that faith based-settings, WIC offices and parent education programs are promising venues for education about the preparation of fresh produce.

Strategy 9: Promote land use policies, practices and systems that support community gardens.

Community gardens can bring great benefit to a neighborhood. Community gardens increase access to fresh produce for underserved populations, increase sense of community, promote physical activity and improve the appearance of the community.

Local governments across the country are nurturing community gardens in a variety of ways:

- Some cities provide financial support for community gardens; others inventory municipal land to determine where vacant public lots may be available
- Some others operate their own community garden programs
- Local governments also can adopt land use laws—specifically comprehensive plan policies and zoning codes—to help create and preserve community gardens. The National Policy and Legal Analysis Network to Prevent Childhood Obesity (NPLAN) has developed a policy package that includes model language that can be incorporated into local land use guidelines

There is a great deal of enthusiasm and interest locally for the development of neighborhood, community and school gardens. Currently there are at least 11 active community gardens in Jackson. The city of Jackson has designated about 80 vacant lots suitable for community gardens. Individuals interested in starting a garden on



one of these lots can apply with the city and pay a modest deposit for the growing season. There are also programs like The Big Seed that serve to spark interest in urban gardening among local residents.

To support the growth and development of community gardens locally, an assessment of the current impact of and barriers to community gardening will be useful in choosing a next step.

Strategy 10: Promote land use policies, practices, and systems that support farmers' markets.

Like community gardens, local farmers' markets provide fresh produce to community residents. They can also support small farmers, serve as community gathering places, and revitalize community centers and downtown areas. NPLAN has created a set of complementary model land use policies to help communities create more opportunities for farmers' markets and ensure their long-term viability.

Studies have shown that farmers' markets that partner with human service agencies can increase the use of farmers' markets by low income and elderly populations through promotion and incentive programs.



Strategy 11: Increase healthy options on local restaurant menus.

It was estimated in 2008 that Americans consumed on average 32 percent of their calories away from the home. Food served at restaurants and fast-food chains are typically higher in calories and lower in nutritional value than foods prepared at home.

NPLAN has developed a model menu labeling law to guide state and local governments that would like to require certain kinds of restaurants in their area to disclose various nutrition information to their customers.

Some researchers now believe that simply providing information to consumers in the form of menu labeling may not be enough to lead to healthy food choices when eating away from home.

Making it easier to order healthy food by designing more menu items to meet nutritional standards may 'nudge' consumers toward more healthy choices. Just offering caloric and fat content information on existing menu items may not persuade consumers to make healthy choices if they must order items differently to make them healthier. During a focus group with Jackson community members to identify local needs, there was interest in educating restaurant owners and consumers about how to make healthier choices.

Objective: Increase by at least 10 percent the proportion of students that meet nutrition and physical activity guidelines in participating schools.

Strategy 12: Advocate for state-wide minimum standards for physical education and nutrition curriculum in all grade levels.

The SPLASH (Shaping Positive Lifestyles and Attitudes through School Health) program of Michigan brings nutrition and physical education to schools in which 50 percent or more of students qualify for the free or reduced price lunch program. SPLASH has reached 240 schools in the state, and has shown positive changes in students' attitudes, knowledge and behavior regarding health education.

A partner in SPLASH is the Michigan Model for Health. The Michigan Model is a nationally recognized, research based curriculum that delivers a comprehensive health curriculum in schools from kindergarten through twelfth grade. Schools participating in SPLASH are required to document implementation of Michigan Model health curriculum in order to participate in the SPLASH incentive program. However, currently only about half of Jackson schools qualify for SPLASH. In order to obtain a baseline and increase the number of schools delivering the Michigan Model curriculum, efforts must expand beyond the SPLASH schools to document and recognize all schools for implementing this much needed health education. ,

The Michigan Model is an effective health education curriculum. Creating state-wide standards would ensure that all Michigan students can benefit from an evidence based, comprehensive school health curriculum.

Strategy 13: Assist local school districts in institution of community-wide policies for nutritional content of school offerings.

Schools are a key venue for increasing the availability of healthier foods and beverages for children. Research has demonstrated an association between the availability of fruits and vegetables and increased consumption. Given that secondary school students obtain 35 to 40 percent of their energy intake at school, policies regulating the nutrition standards of food sold on school grounds could have a profound impact on the health of students. The CDC's Strategies to Prevent Obesity includes a recommendation to apply nutrition standards that are consistent with the Dietary Guidelines for Americans to all food sold on public school campuses during the school day.

Several Jackson area schools are taking part in the Mi Products, My Michigan, Mi School Lunch Program. This program offers a 5-day school lunch menu consisting of healthy products grown and produced locally. By using a locally produced menu several times during the school year, children are introduced to the variety of foods that can be produced in Michigan. In May 2010, 400 Michigan schools participated in the program coinciding with the fifth annual National Farm-to-Cafeteria Conference in Detroit. Citation: Feldscher, K. (2010, May 20). Jackson-area schools taking part in school lunch program that touts foods produced in Michigan.



The

he coordinated school health program model was developed by the CDC to allow schools to serve as an important link in the well-being of young people. The model consists of eight components: health education, physical education, health services, nutrition services, family/community involvement, health promotion for staff, healthy school environment, and counseling, psychological, and social services. Jackson County developed a Coordinated School Health Council in 2005 that is made up of local stakeholders working to support the health and success of Jackson youth.

Strategy 14: The integration of healthy lifestyle curriculum on nutrition and physical activity into existing lesson plans in participating schools.

Some experts have argued that meeting the academic requirements of the No Child Left Behind Act has forced US school districts around the country to choose between physical activity and academic activity. Traditional school-based nutrition and physical activity programs are often resource- and time-intensive and compete with teaching. More school-based health-promotion programs are needed that enable schools to fulfill their primary academic mission while promoting and supporting healthy behaviors and messages.

Integrating health messages into existing curricula is a key component of the Teacher Enrichment Initiatives (TEI) at the University of Texas Health Science Center at San Antonio. TEI's ultimate goal is to improve the health literacy of school age students to make health education more effective.

TEI believes that to improve the health literacy of students, teachers of all subject matters need to be health teachers. This means that teachers of core subject areas such as math, science and social studies are trained in basic techniques and information for infusing health messages into their course material. By making every teacher a health teacher, school-wide health education efforts are more comprehensive.

Programs such as "ABC for Fitness" and "PE-Nut" have been developed to incorporate nutrition messages into core curriculum and classroom activity breaks throughout the day to provide short bursts of physical activity. Locally, teachers trained in the Michigan Model for Health Curriculum are provided with a cross-walk that demonstrates which health lessons match up well with which core academic subjects. Further training on how to integrate these lessons, as well as opportunities to learn from other teacher's success stories, may be other ways to strengthen local capacity to deliver such integrated approaches.

Strategy 15: Support the creation and implementation of school staff wellness programs to support staff in modeling healthy nutrition and physical activity behaviors on school grounds.

Health promotion for staff is a key focus of the Coordinated School Health approach. Opportunities for school staff to improve their health status include activities such as health assessments, health education and health-related fitness activities. These opportunities encourage school staff to pursue a healthy lifestyle that contributes to their improved health status, improved morale and a greater personal commitment to the school's overall coordinated health program. This personal commitment often transfers into greater commitment to the health of students and creates positive role modeling. Health promotion activities have improved productivity, decreased absenteeism and reduced health insurance costs.



health programs have been shown to have a positive impact on the academic success of children. Hunger, chronic illness, and substance abuse are health factors that can have a negative impact on school performance. Classroom concentration, school attendance, grades, and test scores are all negatively impacted by health-risk behaviors such as physical inactivity, substance abuse and violence.



The HealthMPowers school-based health program in Georgia created an activity for students called “Catch a Teacher Being Healthy.” During a two week period students watched for their teachers to perform healthy behaviors and recorded the behavior on a chart in the classroom.

In Madison County, Ohio, a Wellness Committee was formed at London Elementary School. Among the activities planned by the committee is a weight loss competition for staff, incentives to be physically active during the work day, and special days to incorporate physical activity into classroom lesson plans. Staff participating in wellness programs are encouraged to post their progress and activities on their doors in order to keep students interested. The infrastructure to implement similar strategies already exists within the Coordinated School Health Council’s School Wellness Teams.

Objective: *Increase to 25 percent the proportion of employees in Jackson who report participation in worksite wellness initiatives.*

Strategy 16: Work with employers to implement worksite health promotion programs.

The Community Guide found strong evidence to recommend worksite programs as a way to prevent and reduce obesity. Programs designed to improve diet and physical activity behavior have shown effectiveness in reducing weight among employees who participate. These worksite programs can involve educational components, behavioral and social strategies (such as social support systems, counseling, and rewards), as well as policy and environmental approaches (increasing access to healthy food options and opportunities for physical activity).

Preliminary action items for this strategy involve the development of a set of toolkits to guide local employers (particularly those in small businesses) in assessing their current state with regard to healthy practices and policies and provide them with a “roadmap” of evidence-based strategies and resources to support continuous improvement in these areas.

As an off-shoot of the HIO, the Jackson Business Leaders for Health collaborative started in 2007 (then known as the CEO Roundtable) as a group of impassioned Jackson business leaders who recognized the important role of business leaders in advancement of health improvement efforts, and quickly grew to a cohort of 40 local employers. This collaborative will be instrumental in the oversight of employer tool development.

Strategy 17: Promote policies and provide education on worksite practices that support healthy lifestyles.

There are a number of workplace policies that have been shown to promote staff wellness, including obesity reduction. Increasing availability of healthy food options can be accomplished through changes in vending machine offerings or cafeteria options. On-site facilities for physical activity and group walking breaks can increase access to physical activity for employees. Additionally, policy options that promote staff wellness can include health insurance changes and discounts on health club membership.

The toolkit described in the previous strategy will include assessment and resource guides related to policy changes as well as program offerings that are beneficial in improving employee health. It will also include a series of educational workshops for employer leaders to educate and engage them around policy-level issues affecting access to fresh produce and opportunities for safe physical activity.



Community Guide has found point of decision prompts to be an effective way to increase the use of stairs in a variety of settings. For instance, workplaces that place signage by elevators and escalators about the health benefits of taking the stairs and reminding about a simple way to become more active experience increased stair usage. There is additional evidence to suggest that tailoring these messages to a specific population and enhancing stairwells with color, decoration or music will further increase the usage of stairs in a building.

Goal 3 *Reduce exposure to cigarette smoke in Jackson County.*

Smoking cigarettes has devastating effects on the health of those who choose to smoke, as well as individuals who passively inhale secondhand smoke. The smoke produced by the end of cigarette, pipe, or cigar that is inhaled as secondhand smoke has thousands of chemical substances, several of which are known to cause cancer in humans and animals. For individuals with asthma, exposure to cigarette smoke can trigger asthma episodes and increase the severity of attacks. Additionally, smokers have an increased risk of heart disease and stroke compared to non-smokers.

Relevant Community Health Assessment statistics:

- More than 1 in 4 Jackson residents is a smoker
- The smoking rate is higher in Jackson than for the State of Michigan
- Almost half of the women that deliver babies at Allegiance Health report smoking during the three months prior to pregnancy
- Lung cancer deaths are higher for Jackson than for the State of Michigan

Objective: *Decrease by 10 percent the proportion of students that report having smoked cigarettes in the past 30 days in targeted pilot schools.*



Strategy 1: Support implementation of Most Teens Don't Campaign in school settings.

Most Teens Don't is a social marketing campaign to affect social norming by informing students and adults in Jackson County about the smart choices that most teenagers are making in terms of risky behaviors. Covering topics like marijuana, alcohol, sex and bullying, Most Teens Don't uses media messaging as well as student ambassadors to get the message out in their schools.

Strategy 2: Integration of healthy lifestyle curriculum on tobacco prevention into existing lesson plans (piloted in select schools).

In addition to the positive results captured from the Michigan Model for Health, which is a comprehensive school health education program, several studies of substance abuse prevention curriculums have shown decreases in the uptake of smoking and an increase in knowledge relating to the risks of cigarette smoking.

Strategy 3: School staff wellness programs to support staff on modeling healthy tobacco-free behaviors in school grounds (piloted in select schools).

There is evidence to suggest that the decisions young people make with regards to tobacco use is influenced by the role modeling of adults and peers. The more that students see adults smoking in public places, the more students believe that smoking is acceptable. By banning smoking on all school grounds and encouraging school staff to model healthy behaviors, youth will have one less role model of unhealthy behaviors.

Objective: *Establish baseline and increase by 5 the number of schools with policies and protocols for tobacco use violations that include standard referral to treatment programs.*

Strategy 4: Build local capacity for teen-specific tobacco interventions, develop referral systems for use in school settings, integrate school based treatment protocols (piloted in select schools) and advocate for all school districts to adopt standard policies.

A study of Florida High Schools and Middle Schools found that school tobacco policy enforcement strategies were more likely to be punitive in nature than rehabilitative. For students who are caught smoking in these schools, there is punishment without any guidance for how to quit or a referral toward resources.

Not On Tobacco is a school-based smoking cessation program that incorporates training on self-management and stimulus control, social skills and social influence, stress management, and relapse prevention. Additionally, the program offers techniques on how to manage nicotine withdrawal, weight and family/peer pressure.

Objective: *One hundred percent of Jackson County's tobacco vendors will receive compliance education to prevent the sale of tobacco products to minors.*

Strategy 5: Educate tobacco vendors on laws and consequences and monitor ongoing compliance.

In 2001, Suffolk County, New York mandated a Tobacco Vendor Education Program for all licensed tobacco vendors in the county. Under the mandate, all licensed tobacco vendors receive education about the public health implication of experimenting with tobacco during childhood and the strict penalties for selling tobacco to minors. By educating vendors about the implications of tobacco use, the county hoped to motivate tobacco vendors to help keep tobacco out of the hands of minors. From 2000 to 2009, the proportion of the county's tobacco vendors found to be in compliance with the law rose from 86 to 98 percent. The National Association of County and City Health Officials (NACCHO) deemed this a promising practice for tobacco control.



Synar Amendment of 1992 requires that states enact and enforce laws to prevent minors from purchasing tobacco products. In Jackson County these Synar activities are the only checks done on tobacco vendors relating to sales to minors. Of the approximately 150 vendors in the county, 4 – 12 are chosen each year by the state to be checked. These checks carry no fine for vendors who are found to not be in compliance. Additional funding and support will be required before a more comprehensive check system to establish a community baseline on vendor compliance is possible.



The Centers for Disease Control and Prevention has identified six elements for a comprehensive tobacco control program. Among these elements is enforcement of existing laws through compliance checks. In 2002 the Southwest Utah Public Health Department implemented a Tobacco Control Compliance Check Program. Vendors participating in the program receive education about how to be compliant with regulations, and are evaluated quarterly for compliance. In 2001 the tobacco buy rate for minors in the program's coverage area was over 20 percent. Since the program was implemented, the tobacco buy rate for minors is now at less than 4 percent. NACCHO has deemed this a model practice for tobacco control.

Objective: *Increase to 70 percent the proportion of smokers who report receiving advice from their provider to quit.*

Strategy 6: Provide tools and competency training to support consistent screening and effective referrals for patients and families in need of services for prevention/lifestyle management.

The United States Preventive Service Task Force recommends that clinicians ask all adult patients about tobacco use and provide tobacco cessation information and interventions when appropriate. The 2008 Update to the Treating Tobacco Use and Dependence Clinical Guidelines states "it is essential that clinicians and health care delivery systems consistently identify and document tobacco use status and treat every tobacco user seen in a health care setting." According to the guidelines, at least 70 percent of smokers see a physician each year, and almost one third see a dentist. Other smokers see physician assistants, nurse practitioners, nurses, physical and occupational therapists, pharmacists, counselors, and other clinicians. Therefore, virtually all clinicians are in a position to intervene with patients who use tobacco. Moreover, 70 percent of smokers report wanting to quit. Finally, smokers cite a physician's advice to quit as an important motivator for attempting to stop smoking.

Based on the community health assessment results, Jackson residents consider their health care providers to be the greatest influence on their health decisions. These data suggest that most smokers are interested in quitting, clinicians and health systems are in frequent contact with smokers, and clinicians have high credibility with smokers.

However, among respondents of the community health assessment, 31 percent of smokers in Jackson did not recall having been advised by their doctor to quit smoking in the past year.

Equipping clinicians with a brief intervention such as the 5 A's model can help them be prepared to intervene with all tobacco users:

- Ask
- Advise
- Assess
- Assist
- Arrange

It is important for a clinician to ask the patient if he or she uses tobacco, advise him or her to quit, and assess willingness to make a quit attempt. These interventions need to be delivered to each tobacco user, regardless of his or her willingness to quit. If the patient is willing to quit, the clinician should assist him or her in making a quit attempt by offering medication and providing or referring for counseling or additional treatment, and arrange for follow up.

One action step to improve consistency of screening and intervention is to integrate a standard protocol for assessment and referral into the Jackson Community Medical Record. By integrating a screening and referral system into electronic medical records, it is possible to increase the number of tobacco users who receive advice from their clinicians.

Objective: *Establish baseline and reduce by 25 percent the proportion of Jackson adults who report environmental exposure to secondhand smoke.*

Strategy 7: Provide support for businesses to become compliant with new smoke-free legislation.

On December 10, 2009, the State of Michigan passed legislation titled the Dr. Ron Davis Smoke Free Air Law to preserve and improve the health, comfort, and environment of the people of the state by limiting exposure to secondhand smoke. This law which was signed by Governor Jennifer Granholm on December 18, 2009 went into effect on May 1, 2010. The law requires all worksites and food service establishments to be smoke-free.

The Jackson County Health Department Environmental Health Division is responsible for enforcing the law through regular restaurant inspections and based on written complaints received. Compliance with the law will result from ongoing education regarding the law, and continued surveillance by the community with regards to compliance including any written complaints that may be necessary. Without community involvement and support, businesses, particularly restaurants may feel unequal treatment is occurring and will be less likely to comply.

Strategy 8: Publicly recognize smoke-free establishments.

Public recognition of smoke-free establishments will be included in the social marketing campaign described in Goal One. The HIO would like to give a "health seal of approval" to establishments that have enacted smoke-free policies. This will show the public that health is a priority to the establishment.



5 A's is a behavior change model designed for self-management of chronic disease. The model's change concepts are: assess, advise, agree, assist, and arrange. For each concept there are suggested strategies at the patient level, for the office environment and at the community/policy level.

Strategy 9: Advocate with establishments not regulated by law to become smoke-free (target parks, 24/7 policies for schools, and housing units).

Michigan law does not require certain open-air facilities, such as public parks, or home-based businesses with fewer than 2 employees to be smoke-free. Such entities have autonomy in deciding whether to establish such policies. Community advocacy will be critical in influencing decision makers to choose healthier policies independent of mandates.

The HIO encourages these establishments to voluntarily enact smoke-free policies. There are numerous benefits to banning smoking in outdoor areas such as parks and sports facilities. These include a reduction of the environmental impact of smoking, including littered cigarette butts and exposure to secondhand smoke, and less modeling of the smoking behavior for children.

Exposure to secondhand smoke is particularly damaging to children, and poses additional risks for children and adults with asthma. For individuals living in multi-family housing complexes, it is difficult to limit and control exposure to secondhand smoke. In addition to the health benefits of making multi-unit housing complexes smoke-free, the economic benefits include less cleaning and maintenance costs, and reduced risk of apartment fires.

While many schools currently have smoke-free policies, these policies do not always apply to after-school sporting events. This strategy will include advocacy for a 24/7 smoke-free policy that covers the entire district. The Michigan State Board of Education recommends that school districts implement tobacco-free schools policies that ban all tobacco use in all school-related situations, 24 hours a day, 7 days a week, and 365 days a year. The policy recommended by the State Board includes prohibiting tobacco advertising or promotion, identifies the responsibility of the school administrator to implement and enforce the policy, encourages and helps students and staff to quit using tobacco, builds on existing local Board of Education health policies, and prohibits all use of tobacco. Prohibiting all use of tobacco means that the use of tobacco products will be prohibited in all school related situations, by any one, at any time, or any location.



Goal 4 *Improve the capacity of Jackson residents to recognize and address emotional health issues including stress, depression and other psychologically based illnesses.*

Mental health is used to describe an individual's level of cognitive or emotional well-being. Maintaining a positive state of mind is known to enable a person to function effectively within society and improve physical health. Individuals who have good mental health are well-adjusted to society, are able to relate well to others and feel satisfactory with their role in society. Breakdown of mental health can cause serious problems among individuals within their relationships, physical health and job.



Relevant Community Health Assessment statistics:

- More than 1 out of 4 Jackson County residents reported feeling nervous and stressed out in the past 30 days
- About 1 in 7 Jackson County residents have had depression
- Depression was more common among Jackson County residents with other health problems like high blood pressure, high cholesterol, heart disease, stroke, cancer, diabetes, asthma or allergies
- Only 52 percent of CHA respondents reported that they would 'definitely' seek help for a mental health problem

Objective: *Increase to 60 percent the proportion of Jackson adults who would "definitely" seek help for a mental health problem.*

Strategy 1: Provide training/toolkits to schools, churches, and worksites on ways to recognize and address mental health issues.

This strategy focuses on increasing the capacity of teachers, employers and church leaders to recognize signs and symptoms of emotional health problems in their populations and build skills/tools to assist them in connecting to appropriate resources. An example would be "Mental Health First Aid" training, which focuses on educating the public on how to support someone in a mental health crisis situation or who is developing a mental disorder. A study of mental health first aid in a workplace setting found that participants had greater confidence in providing help to others, greater likelihood of advising people to seek professional help, improved concordance with health professionals about treatments, and decreased stigmatizing attitudes.

Schools and church staff and volunteers can benefit from mental health first aid training. Given the amount of time that students spend in schools, and the role of clergy members in one's life, these individuals can be important gatekeepers to the mental health support system.

Strategy 2: Provide tools and competency training to support consistent screening and effective referrals for patients and families in need of services for prevention/lifestyle management.

There is a high level of interest in the Jackson area on the part of primary health care stakeholders, including members of our Behavioral Health Summit, to improve care for depression in primary care. The groups are interested in both depression-specific support and integrated chronic care management linked to a shared electronic health record such as Jackson Community Medical Record (JCMR). By integrating standard screening tools (such as the PHQ-2 and PHQ-9) into JCMR and creating a case management supported referral and follow up system, we can increase both the early identification and appropriate treatment of depression in primary care patients.

PHQ-2 and PHQ-9 are sets of depression screening questions based on the major criteria for diagnosing depression. These questions can be self-administered or administered by a clinician. These scales allow for the easy diagnosis and tracking of patient symptoms, are shorter than other depression rating symptoms, and have been well documented and validated for use in a variety of populations.

Objective: *Establish baseline and reduce by 10 percent the proportion of students in targeted pilot schools who report being bullied at school.*

Strategy 3: Support implementation of Most Teens Don't Campaign in school settings.

Most Teens Don't is a social marketing campaign to inform students and adults in Jackson County about the smart choices that most teenagers are making in terms of risky behaviors. Covering topics like marijuana, alcohol, sex and bullying, Most Teens Don't uses media messaging as well as student ambassadors to get the message out in their schools.



Strategy 4: Integrate healthy lifestyle curriculum into existing lesson plans and train educators to deliver (in limited number of pilot schools)

As described in Goal 2, this strategy will improve the overall health education goals of schools by integrating health related messages, including a focus on healthy emotional development into core curriculum.

Strategy 5: School staff wellness programs to support staff in modeling healthy emotional health behaviors on school grounds (piloted in select schools).

Workplace performance is affected by situations and events that occur outside the workplace. Employee Assistance Programs (EAP) are designed to address workplace productivity issues by assisting employees with personal concerns. EAPs can address concerns related to health, marriage, family, finances, substance abuse, emotional problems, and other factors that can affect work performance.

Children spend a large portion of their day in school. By making an EAP available for school staff, students will benefit from the positive emotional health displayed by teachers.

Objective: Establish baseline and increase by 25 percent the number of employers whose worksites adopt practices and policies that support an environment of healthy communication and interaction in the workplace.

Strategy 6: Worksite wellness policies that promote healthy living (e.g., allowing stress relief breaks, workplace meditation, lunch time walking clubs, etc.).

Healthy Work Environments, provided by the Michigan Department of Community Health, has compiled recommendations of worksite health promotion policies. These are ongoing, sustainable policies that will promote a healthier work environment and a healthier workforce. Recommended policies include offering flexible work hours to promote physical activity during the day, support of walking breaks or walk and talk meetings, and the provision of employee assistance programs.

The workplace toolkits described under Goal 2, Strategy 16 will include one that is specific to emotional health improvement.



The Nurtured Heart Approach is a curriculum designed to “motivate, challenge and inspire students, and it feeds on the premise that teachers must educate the heart of their students first and their minds second.” Specifically designed as a way to help children with ADHD and behavioral problems flourish, the Nurtured Heart Approach has been well received by school districts and education programs that have implemented it. Schools that have used the curriculum have seen reduced numbers of disciplinary problems among all students, reduced need for diagnostic assessment and medication services, and increased respect between staff and students.



While the following two goals are not accompanied by objectives and corresponding strategies, they remain highly relevant to the health and well-being of Jackson residents. The HIO is committed to providing support and collaborating with others to ensure these goals are also achieved.

Goal 5 *Support existing community-wide action plans to address teen pregnancy prevention, infant mortality and substance abuse.*

The issues of teen pregnancy, infant mortality and substance abuse are highly important public health issues. Teenage parents encounter numerous issues, including disrupted and incomplete education, poverty and increased health care needs. Children born to teen mothers are more likely to endure similar challenges. Infant mortality is often used as a measure of a community's overall health and well-being because it reflects multiple, complex and inter-related issues such as a community's environmental conditions, access to health care, social/living conditions and poverty rates. Recently released data identifies alcohol, tobacco, marijuana and methamphetamine usage in Jackson County as a problem. Preventing substance abuse is a cost-effective, common sense approach that contributes to better health and improved quality of life for all.



Relevant statistics:

- The 2008 teen pregnancy rate for Jackson County was 66.7 per 1,000 live infant births compared to 54.1 for the state of Michigan, according to the Michigan Department of Community Health.
- 26.7 percent of Jackson County residents smoke compared to 21.1 percent for the state of Michigan according to the HIO Community Health Assessment.
- Jackson's 2004-2008 infant mortality rate is 8.4 deaths per 1,000 live births compared to 7.6 in Michigan overall according to the Michigan Department of Community Health.
- In 2007 46 percent (252) of their narcotic and drug arrests were for marijuana per the City of Jackson Police.

Goal 6 *Improve the community capacity to secure federal, state and foundational funding to leverage existing resources toward health improvement.*

Allegiance Health, United Way of Jackson County and the Jackson County Health Department aligned resources and support in an unprecedented manner to develop and implement this plan. However, to continue the momentum and see this plan to completion, more resources will be necessary to help fund our local partners and programs. One of the most effective strategies for soliciting grant support will include in-depth analysis and evaluation of our community's success in the areas outlined by the Community Action Plan.

Local Health and Wellness Resources.

Agency Name	Description of services provided	Address	Contact information
Information and Referral Line			
Jackson County Information and Referral Line- 2-1-1	Call this number for information about referrals to any health and human service agencies in Jackson County.	LifeWays Building 1200 N. West Avenue Jackson, MI 49202	2-1-1 Call center direct line: 866-561-2500 www.centralmichigan211.org
Outdoor Activities			
Jackson County Parks	This website describes the locations of, and features of the parks maintained by Jackson County.		http://www.co.jackson.mi.us/parks/parks.asp
Jackson City Parks, Playground, and other outdoor activities	Visit the Jackson County Visitor's and Convention Bureau for information about State parks in the Jackson area, Jackson City parks and playground, and other great local outdoor activities.	141 S. Jackson St., (Downtown Jackson)	http://www.visitjacksonmi.com/thin/gstodo/outdoor/ 517-764-4440 or 800-245-5282 (517) 740-8444
The Big Seed	Last year the Jackson Community Gardeners and partners hosted a PORTABLE GARDEN GIVE AWAY in May, and gave 300 small or portable gardens to families in our city. This year we are calling our party The BIG SEED. We want to encourage families to join us and TRY to grow something eatable this summer. This year's BIG SEED will be centered around BEANS. (May 2010)		
Rails to Trails Conservancy	Creating a nationwide network of trails from former rail lines and connecting corridors to build healthier places for healthier people. (Jackson's Falling Waters Trail is a Rail-Trail)		http://www.railstotrails.org/
Safe Routes to School	Safe Routes to School (SR2S) is an international movement—and now a federal program—to make it safe, convenient and fun for children to bicycle and walk to school. When routes are safe, walking or biking to and from school is an easy way to get the regular physical activity children need for good health. Safe Routes to School initiatives also help ease traffic jams and air pollution, unite neighborhoods and contribute to students' readiness to learn in school.		http://www.saferoutesmichigan.org/

Agency Name	Description of services provided	Address	Contact information
Farmer's Markets and U-Pick Farms			
Adams Farm Market	Roadside market with sweet corn, fruits, vegetables and started plants.	10701 Adams Rd. Clark Lake, MI 49234 I-94 Exit 142 US-127 South to Liberty Road. Right on Liberty. Right on Adams Rd.	517-529-4268
Childs Berry Farm	U-pick strawberry operation in Jackson County and a big producer of sweet corn.	8325 Bowerman Rd. Horton, MI 49246 I-94 Exit 136 M-60 toward Spring Arbor. Merge onto M-60 West. Left on Moscow Rd. Right on Tripp Rd. Right on Bowerman.	517-563-8569
Grand River Market (Kuhl's Bell Tower)	More than a dozen booths with fruit, vegetables, baked goods, flowers, plants, and crafts. Open Tuesday, Friday, and Saturday starting in spring through Thanksgiving.	117 Louis Glick Highway Jackson, MI 49201 I-94 Exit 139 South on Cooper. Right on Louis Glick Highway.	
The Green Market of Jackson	The Green Market of Jackson is a sustainable farmers market at Allegiance Health Campus. All vendors use sustainable practices which means no chemical pesticides, insecticides or antibiotics used in their farming practices. We try to work with nature to produce the best fresh food we can for you and your families. (May-October) Wed. 2:30-6:00 pm	parking lot at S.State St. & E. Michigan Ave Jackson, MI 49201	517-812-7057 http://www.localharvest.org/farmers-markets/M37031
Hearthstone Farm Market	Open mid-July to Oct.31, 10am-6pm daily, Sunday 1pm-5pm. Homegrown fruits and vegetables. U-pick pumpkins patch and Fall Fest weekends in October.	3215 Chapel Rd. Spring Arbor, MI 49283 I-94 Exits 130,133,136 7 miles SW of exit 136 on M-60 to Chapel, 1 mile north	517-750-2696
Indian Brook Farms	Enjoy the true farm experience of picking your own pumpkin and catching your own fish. It's a great day outdoors for the entire family! Indian Brook Farms offers a complete farm market, greenhouse, fish hatchery, educational tours, picnics, parties, wagon rides and much more. See nature at its best. Open May 1 - October 31 9:00 a.m. to 6:00 p.m.	5883 W. Michigan Ave. Jackson, MI 49201 I-94 Exit 136	517-750-2743 http://www.indianbrookfarms.com/

Agency Name	Description of services provided	Address	Contact information
Farmer's Markets and U-Pick Farms, continued Lyle Curtis Farm	One of the largest growers of sweet corn and garden vegetables.	10990 Austin Rd. Napoleon Township, MI 49261 I-94 Exit 142 US-127 South to M-50 Exit. East on M-50 to Austin Rd.	517-536-4158
Page Avenue Farm Market	Wide variety of fruits and vegetables.	3233 Page Avenue Leoni Township, MI 49254 I-94 Exit 142 US-127 South to Page Avenue. Left on Page Avenue.	517-787-2722
Pregitzer Farm Market LLC	Our goal is to provide high quality fresh produce. "Like having your own garden without the work" Summertime favorites, Michigan grown watermelon and sweet corn combined with the Fall fun of hayrides to the kids pumpkin patch, also family friendly corn maze and petting zoo.	6840 Territorial Rd Munith, MI 49259 I-94 Exit 139 N of Jackson, 15 miles on M-106 to Bunkerhill Rd., N 1.3 miles, right on Territorial Rd. on corner.	517-769-2768
Sodt's Berry Farm	U-pick strawberries, blueberries, asparagus and a roadside market.	7403 Blackman Rd. Jackson, MI 49201 I-94 Exit 136 60 toward Spring Arbor to Michigan Ave. Right on Michigan Ave. Right on Blackman.	517-782-8933

Agency Name	Description of services provided	Address	Contact information
<p>Exercise/Nutrition Women, Infants, and Children Program- JCHD</p>	<p>The WIC program provides food coupons and nutrition counseling for pregnant women, infants, and children under age 5</p>	<p>Jackson County Health Department 1715 Lansing Ave. Jackson, MI 49202</p>	<p>517-788-4484 http://www.co.jackson.mi.us/hd/</p>
<p>YMCA Jackson</p>	<p>A community health and recreation organization. Programs include swimming, youth sports, group exercise programs for all age groups.</p>	<p>127 West Wesley Jackson, MI 49201</p>	<p>517-782-0537 www.jacksonymca.org</p>
<p>Maternal and Infant Support Services</p>	<p>The MIHP program can help with transportation issues, prenatal health education, breastfeeding support, tobacco use, alcohol or other drug use, pregnancy planning, and nutrition guidance. Medicaid users may qualify for free services.</p>	<p>Jackson County Health Department or Center for Family Health</p>	<p>JCHD: 517-788-4619 to make an appointment or 517-788-4420 for more info CFH: 517-784-9356 517-990-9798</p>
<p>Rec-Connect</p>	<p>Through a partnership between the Fitness Council of Jackson, Jackson Recreation Department and Jackson County Health Department, Jackson WIC (Women, Infants and Children Program) recipients can learn more about physical activity opportunities within their community. Monthly physical activity displays are posted in the WIC clinic. Information about the Jackson Recreation Department offerings and additional opportunities in the community for no-cost and low-cost physical activity are also distributed to the clients. In addition, WIC clients can participate in bi-monthly group demonstrations such as Bike Right for Moms, Staying Fit 4 Life, Walk Fit, Parent/Child Tumbling and Parent/Child Yoga.</p>		
<p>Fresh Food Initiative, Foodbank of South Central Michigan</p>	<p>The Fresh Food Initiative (FFI) distributions are an effective, efficient way to get fresh produce, dairy products and other grocery items into low-income neighborhoods. Typically, there are 3,000 to 5,000 lbs. of wholesome food, on skids, brought into such neighborhoods from the Food Bank during each FFI drop-off. Working hand-in-hand with volunteer teams, the food is then unloaded, and under the supervision of volunteer crews, distributed to needy residents. Since 1999 more than 6,797,668 lbs. of food have been distributed.</p>		<p>http://www.foodbankofscm.org/ProgramsAndServices/Fresh%20Food%20Initiative.aspx</p>

Agency Name	Description of services provided	Address	Contact information
<p>Exercise/Nutrition, continued</p> <p>Fitness Council of Jackson</p>	<p>The Fitness Council was founded in 1982 (originally called the Jackson County Wellness Committee) to promote events that improved the health and well-being of Jackson community members. Through the past three decades the Fitness Council has held a variety of events from health fairs to running races and supported local physical education teachers through the Physical Educators' Network.</p>		<p>http://www.fitnesscouncil.org/</p>
<p>Women's Health Center, Allegiance Health</p>	<p>The Allegiance Women's Health Center is Jackson's premiere women's health facility. Featuring clinical services, such as digital mammograms, osteoporosis screenings, clinical breast exams, health and educational classes and private sessions with a registered nurse, also offering relaxation services such as massage, facials, skin care and waxing. Provides access to personal training consultations, exercise classes and nutrition counseling with a registered nurse in a private or group setting.</p>	<p>3305 Spring Arbor Rd Jackson, MI 49203</p> <p>Mon-Wed: 7 a.m. - 5:15 p.m. Thur: 7 a.m. - 8 p.m. Sat: 8 a.m. - noon</p>	<p>(517) 768-4377</p>

Agency Name	Description of services provided	Address	Contact information
Smoking Education/Prevention-Cessation Prenatal Smoking Cessation Program	A free service to help pregnant women interested in quitting smoking given by a certified Tobacco Treatment Specialist.	Jackson County Health Department 1715 Lansing Ave Suite 221	517-768-2131 http://www.co.jackson.mi.us/hd/
Allegiance Health Smoking Cessation Program	You don't have to quit alone. Our trained counselors can offer assistance every step of the way, including assessment, behavior management, addiction education, education on medications that increase success rates and relapse prevention.	Allegiance Health Wellness Center/Professional Building 1100 E. Michigan Ave. Jackson, MI 49201	(517) 788-4707
The Jackson Tobacco Reduction Coalition	<p>The Jackson Tobacco Reduction Coalition seeks to improve the health of the citizens of Jackson County by encouraging the reduction of tobacco use through education, prevention, and empowerment.</p> <p>The Jackson Tobacco Reduction Coalition is a group of individuals representing local agencies, organizations, businesses and at large community members interested in the reduction of tobacco use in Jackson County, Michigan. Through this reduction in tobacco use, we hope to improve the health of Jackson County residents.</p>		http://www.co.jackson.mi.us/hd/tobacco.htm
Most Teens Don't	Most Teens Don't is a campaign to help teenagers and adults in Jackson County know the REAL facts! When it comes to risky behavior such as tobacco, marijuana, alcohol, sex and bullying, MOST TEENS are making smart choices.		http://mostteensdont.com/
Jackson County Substance Abuse Prevention Coalition (JCSAPC)	The JCSAPC is a collaborative body of community members that convenes regularly to address the issue of substance abuse prevention needs for Jackson County.	536 N. Jackson St. Jackson, MI 49201	(517) 796-5133

Agency Name	Description of services provided	Address	Contact information
Stress and Coping/Counseling Mental Health First Aid Training, provided by LifeWays	Mental Health First Aid is a 12-hour training certification course, delivered by certified instructors over two days. Attendance is required during both days to receive certification. Space is limited to the first 25 registered participants. A comprehensive 136-page participant manual will be provided. In addition to several breaks, a 45-minute lunch break (on your own) will be held at around noon each day. Provides individual and family counseling	330 W. Michigan Ave. Jackson, MI 49201	517-780-3332 http://www.lifewaysmco.com/?pageid=6348
Family Service and Children's Aid	24-hour a day, 7 days a week assessment services for people experiencing emotional, psychological and chemical dependency problems.	205 N. East Ave. Jackson, MI 49201	517-787-7920 www.strong-families.org
Allegiance Health Access Center	Manages services for Medicaid recipients or uninsured. Services managed include serious mental illness (adults), serious emotional disturbance (children), developmental disabilities (adults/children), and substance abuse (Medicaid only).	1200 N. West Ave Jackson, MI 49202	517-789-5971 or 800-531-3728 www.allegiancehealth.org
LifeWays	Provides individual and family counseling. Sliding fee/most insurances accepted.	407 S. Mechanic Jackson, MI 49201	517-780-3332 www.lifewaysmco.org
Catholic Charities	24 hour telephone support, information and referral service, emergency crisis and intervention, Medicaid and non-insured accepted. Provides information on support groups.	1200 N. West Ave Jackson, MI 49202	517-782-2551 www.cjax.org
Community Connections	Foote Hospital Support group for those who have experienced the loss of a pregnancy or infant	205 N. East Jackson, MI 49201	517-789-1200 1-800-284-8288
Pregnancy and Infant Loss support group	Providing affordable counseling and educational services based on the Whole-Person concept of body, mind and spirit through professionals committed to Christ.	602 W. Michigan Ave., Jackson, Michigan 49201	517-796-6437
Dove Counseling	Provides counseling and support to children and adults affected by domestic violence and/or sexual assault, including crisis support, 24-hour counseling, emergency shelter, legal advocacy and more.	432 Wildwood Ave Jackson, MI 49201	517-783-5334 www.dovecounseling.org
Crossroads Psychotherapy			517-787-2251
AWARE Shelter		706 West Michigan Jackson, MI 49201	517-783-2861

Agency Name	Description of services provided	Address	Contact information
<p>Access to care Healthy Kids Medicaid Insurance</p>	<p>Provides basic health care and preventative services at no cost to uninsured Michigan children age 19 and under and pregnant women of any age who meet income guidelines.</p>	<p>Jackson County Health Department 1715 Lansing Ave. Jackson, MI</p>	<p>Apply online from home or at the health department: https://healthcare4mi.com/michild-web/ or call 1-888-988-6300 or 517-768-1660</p>
<p>MI Child Health Insurance</p>	<p>Provides basic health care and preventative services, at a cost of \$5/month per family, to uninsured Michigan children age 19 and under who meet guidelines</p>	<p>Jackson County Health Department 1715 Lansing Ave. Jackson, MI</p>	<p>Apply online from home or at the health department: https://healthcare4mi.com/michild-web/ or call 1-888-988-6300 or 517-768-1660</p>
<p>Prescription Discount Plan</p>	<p>Program of the health department, provides a discounted price on most prescription drugs at the pharmacy. Available to any Jackson County resident that does not have prescription drug coverage, regardless of age or income. Can also be eligible if you have an insurance plan and are paying a deductible.</p>	<p>Jackson County Health Department 1715 Lansing Ave. Jackson, MI</p>	<p>517-841-0621 or Apply online at http://www.co.jackson.mi.us/hd/jcpdp.htm</p>
<p>Project Access</p>	<p>Community partnership that provides coordinated health care to the uninsured adults in Jackson County (this is not health insurance). This program creates a system that provides health care to low-income individuals who do not have coverage and do not qualify for public assistance. Enrollees in the Project Access program will see primary physicians as well as many other health care services they need at no or minimal cost. Must complete application.</p>	<p>Applications can be picked up at: 1. United Way (536 N. Jackson) 2. Community Connections (1200 N. West Ave.) 3. Jackson County Community Foundation (1 Jackson Square Suite 110A) 4. Center for Family Health (2200 Springport Rd.)</p>	<p>517-789-1211 or Toll-free: 1-800-561-2500</p>
<p>Medical Office - The Center for Family Health</p>	<p>Pediatric services include: Well Child Exams, Immunizations, Hearing and Vision Screening, Lead Testing, Sick Visits, ADHD Assessments Family Practice/Internal Medicine services include: Adult Physicals and Well Child Exams, Immunizations, Sick Office Visits, Chronic Disease Management, HgbA1C Testing, Depression Screening, Diabetic Foot Exams</p>	<p>2200 Springport Road Jackson, MI 49202 8 a.m. - 9 p.m. Mon - Thur 8 a.m. - 5 p.m. Fri 8 a.m. - 12 p.m. Sat</p>	<p>(517)784-9356</p>

Agency Name	Description of services provided	Address	Contact information
<p>Access to care, continued</p> <p>Dental Office – The Center for Family Health</p>	<p>The Center for Family Health Dental Office provides a variety of dental services for children and adults age 18 to 20: Cleanings, Examinations, X-rays, Fillings, Fluoride Treatments, Extractions, Night Guards, Athletic Mouth Guards, Root Canals, Some Crown Preparations</p>	<p>817 West High Street Jackson, MI 49203</p> <p>8 a.m. - 7 p.m. Mon 8 a.m. - 5 p.m. Tues 8 a.m. - 6 p.m. Wed 8 a.m. - 5 p.m. Thurs 8 a.m. - 5 p.m. Fri</p>	<p>(517)784-9385</p>
<p>Northeast Health Center - The Center for Family Health</p>	<p>School-based health center offering Medical, Dental and Behavioral Health services.</p>	<p>Northeast Elementary School 1024 Fleming Ave Jackson, MI 49202</p> <p>8 a.m. - 4:30 p.m. Monday - Friday</p>	<p>(517)787-4361</p>
<p>Teen Health Center at Parkside - The Center for Family Health</p>	<p>School-based health center offering Medical, Dental and Behavioral Health services.</p>	<p>Middle School at Parkside 2400 Fourth Street Jackson, MI 49203</p> <p>7:30 a.m. - 4:30 p.m. Monday- Friday</p>	<p>(517)788-6812</p>
<p>Rose City Office - The Center for Family Health</p>	<p>Pediatric services include: Well Child Exams, Immunizations, Hearing and Vision Screening, Lead Testing, Sick Visits, ADHD Assessments</p> <p>Family Practice/Internal Medicine services include: Adult Physicals and Well Child Exams, Immunizations, Sick Office Visits, Chronic Disease Management, HgbA1C Testing, Depression Screening, Diabetic Foot Exams</p>	<p>300 West Washington Street Suite 060 Jackson, MI 49201</p> <p>8 a.m. - 5 p.m. Monday-Friday</p>	<p>(517)787-5970</p>
<p>Women's Health Center - The Center for Family Health</p>	<p>The Center offers full obstetric and gynecological care services: Free Pregnancy testing, Counseling, Normal or High Risk Pregnancies, Plan First! and Family Planning Services, Emergency Contraception, Prenatal Care and Delivery Services, Postpartum Care, Annual Exams, Pap and Breast Screening, Gynecological Services, Depression Screening, Colposcopies, STD Diagnosis, Counseling and Treatment, Breast and Cervical Cancer Control Program</p>	<p>2200 Springport Road Jackson, MI 49202</p> <p>8 a.m. - 6 p.m. Mon 8 a.m. - 5 p.m. Tues 8 a.m. - 5 p.m. Wed 8 a.m. - 8 p.m. Thur 8 a.m. - 5 p.m. Fri</p>	<p>(517)784-9356</p>

References

U.S. Department of Health and Human Services. Healthy People 2010: Understanding and Improving Health. 2nd ed. Washington, DC: U.S. Government Printing Office, November 2000.

Guide to Community Preventive Services. Campaigns and informational approaches to increase physical activity: community-wide campaigns. www.thecommunityguide.org/pa/campaigns/community.html.

Guide to Community Preventive Services. Environmental and policy approaches to increase physical activity: creation of or enhanced access to places for physical activity combined with informational outreach activities. www.thecommunityguide.org/pa/environmental-policy/improvingaccess.html.

National Complete Streets Coalition. Complete the Streets. Retrieved from <http://www.completestreets.org/webdocs/cs-brochure-policy.pdf>

Sallis, J.F., Frank, L.D., Saelens, B.E., & Kraft, M.K. (2004) Active transportation and physical activity: Opportunities for collaboration on transportation and public health research. *Transportation Research Part A*, 38, 249-268.

Guide to Community Preventive Services. Environmental and policy approaches: street-scale urban design and land use policies & practices www.thecommunityguide.org/pa/environmental-policy/streetscale.html.

Centers for Disease Control and Prevention. Recommended Community Strategies and Measurements to Prevent Obesity in the United States. *MMWR* 2009;58(No. RR-7).

Rails-to-Trails Conservancy. <http://www.railstotrails.org/ourWork/trailBasics/FAQs.html>

Falling Waters Trail. <http://www.traillink.com/trail/falling-waters-trail.aspx>

Centers for Disease Control and Prevention. Recommended Community Strategies and Measurements to Prevent Obesity in the United States. *MMWR* 2009;58(No. RR-7).

Public Health Law and Policy. Opening School Grounds to the Community After Hours: A Toolkit for Increasing Physical Activity Through Joint Use Agreements. Retrieved from http://www.phlpnet.org/healthy-planning/products/joint_use_toolkit

Safe Routes to School. <http://www.saferoutesmichigan.org/>

Safe Routes to School Jackson. <http://www.saferoutespartnership.org/state/5043/michigan>

Guide to Community Preventive Services. Behavioral and social approaches to increase physical activity: social support interventions in community settings. www.thecommunityguide.org/pa/behavioral-social/community.html.

Screening for Obesity in Adults, Topic Page. December 2003. U.S. Preventive Services Task Force. Agency for Healthcare Research and Quality, Rockville, MD. <http://www.ahrq.gov/clinic/uspstf/uspsobes.htm>

Krist, A.H., Woolf, S.H., Frazier, C.O., Johnson, R.E., Rothemich, S.F., Wilson, D.B., Devers, K.J., & Kerns, J. W. (2008). An electronic linkage system for health behavior counseling: Effect on the delivery of the 5A's. *American Journal of Preventive Medicine*, 35(5S), S350-S358.

Rollnick, S. & Miller, W. (1995). What is motivational interviewing? *Behavioural and Cognitive Psychotherapy*, 23, 325-334.

Resnicow, K., Davis, R., & Rollnick, S. (2006) Motivational interviewing for pediatric obesity: Conceptual Issues and evidence review. *Journal of the American Dietetic Association*, 106(12), 2024-2033.

References, continued

NuVal. <http://www.nuval.com/>

Glanz, K. & Yaroch, A.L. (2004) Strategies for increasing fruit and vegetable intake in grocery stores and communities: Policy, pricing, and environmental change. *Preventive Medicine*, 39, S75-S80

Healthy Kids, Healthy Michigan. Increasing Access to Healthy Foods: Michigan's New Property Tax Incentive for Retail Food Establishments (Public Act 231 of 2008). Retrieved from http://www.michigan.gov/documents/mda/FINALPA231FactSheet_290187_7.pdf

Twiss, J., Dickinson, J., Duma, S., Kleinman, T., Paulsen, H., & Rilveria, L. (2003) Community gardens: Lessons learned from California healthy cities and communities. *American Journal of Public Health*, 93(9), 1435-1438.

Balsam, A., Webber, D., & Oehlke, B. (1994) The farmer's market coupon program for low-income elders. *Journal of Nutrition for the Elderly*. 13(4), 35-42.

Story, M., Kaphingst, K.M., Robinson-O'Brien, R., & Glanz, K. (2008) Creating healthy food and eating environments: Policy and environmental approaches. *Annual Review of Public Health*, 29, 253-272.
Retrieved from <http://dhs.wisconsin.gov/hw2020/health/nutrition/healthyfoodeating.pdf>

National Policy and Legal Analysis Network to Prevent Childhood Obesity. Model menu labeling ordinance. <http://nplanonline.org>

Downs, J.S., Loewenstein, G., & Wisdom, J. (2009) Strategies for promoting healthier food choices. *American Economic Review: Papers and Proceedings*. 99(2), 1-10.

SPLASH (Shaping Positive Lifestyles and Attitudes through School Health). <http://www.health-splash.org/>

Michigan Model for Health. <http://www.emc.cmich.edu/mm/>

CDC, Coordinated School Health Program. <http://www.cdc.gov/HealthyYouth/CSHP/>

French, S.A., Story, M., Fulkerson, J.A., & Gerlach, A.F. (2003) Food environment in secondary schools: A la carte, vending machines, and food policies and practices. *American Journal of Public Health*, 93(7), 1161-1167.

National Center for Chronic Disease Prevention and Health Promotion (2010). Student Health and Academic Achievement. Retrieved from http://www.cdc.gov/HealthyYouth/health_and_academics/index.htm

Toeppwerwien, M.A., Pruski, L.A., Blalock, C.L., Lemelle, O.R., & Lichtenstein, M.J. (2008) Getting the word out: Teaching middle-school children about cardiovascular disease. *Journal of Clinical Lipidology*, 2(3), 179-188.

HealthMPowers. <http://www.healthmpowers.org/>

Zurbrick, K. (2009, February 21). Healthy schools: Teachers model healthy behaviors for students. Columbus Messenger. Retrieved from <http://www.columbusmessenger.com/NC/0/5703.html>

Guide to Community Preventive Services. Worksite programs to control overweight and obesity. www.thecommunityguide.org/obesity/workprograms.html.

Guide to Community Preventive Services. Environmental and policy approaches to physical activity: point-of-decision prompts to encourage use of stairs. www.thecommunityguide.org/pa/environmental-policy/podp.html.

Most Teens Don't. <http://www.mostteensdont.com>

Tar Wars, Tobacco Free Education for Kids. <http://www.tarwars.org/online/tarwars/home.html>

References, continued

Too Good for Drugs. http://www.nrepp.samhsa.gov/programfulldetails.asp?PROGRAM_ID=215#outcomes

Alesci, N.L., Forster, J.L., & Blain, T. (2003). Smoking visibility, perceived acceptability, and frequency in various locations among youth and adults. *Preventive Medicine, 36*(3), 272-281.

Tubman, J.G. & Vento, R.S. (2001). Principal and teacher reports of strategies to enforce anti-tobacco policies in Florida middle and high schools. *Journal of School Health, 71*(6), 229-235.

Not On Tobacco. <http://www.notontobacco.com/index.php>

National Association of County and City Health Officials. Tobacco Vendor Education Program, Suffolk County Department of Health Services. <http://www.naccho.org/topics/modelpractices/database/practice.cfm?practiceID=273>

Centers for Disease Control and Prevention. *Best Practices for Comprehensive Tobacco Control Programs—August 1999*. Atlanta GA: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, Office on Smoking and Health, August 1999.

National Association of County and City Health Officials. Tobacco Control Compliance Check Program, Southwest Utah Public Health Department. <http://www.naccho.org/topics/modelpractices/database/practice.cfm?PracticeID=140>

Substance Abuse and Mental Health Services Administration, Synar program.
Retrieved from <http://prevention.samhsa.gov/tobacco/ftsheets.aspx>

Dexheimer, J.W., Talbot, T.R., Sanders, D.L., Rosenbloom, S.T., & Aronsky, D. (2008). Prompting clinicians about preventive care measures: A systematic review of randomized controlled trials. *Journal of the American Medical Informatics Association, 15*(3), 311-320.

Institute for Healthcare Improvement. 5 A's Behavior Change Model.
<http://www.ihl.org/NR/rdonlyes/1D622508-E3CA-44BA-8DD5-CC8786AFE9B4/2154/5AsBehaviorChangeModel.pdf>

Michigan Department of Community Health (2010). Michigan smoke free law, frequently asked questions.
Retrieved from http://www.michigan.gov/documents/mdch/FAQMISmokeFreeFINAL_5.20.10_321926_7.pdf

Michigan State Board of Education. Policy on 24/7 tobacco-free schools. Retrieved from
http://www.mi.gov/documents/Tobacco_Free_Schools_Policy_129976_7.pdf

Kitchener, B.A. & Jorm, F.A. (2004) Mental health first aid training in a workplace setting: A randomized controlled trial. *BMC Psychiatry, 4*(23)

Impact, Evidence based depression care. Retrieved from <http://impact-uw.org/tools/phq9.html>

Michigan Department of Community Health. About healthy work environments. <http://mihealthtools.org/work/Default.asp?tab>AboutEnvirons>

Gillespie, A.H., Smith, L.E. (2008). Food decision-making framework: Connecting sustainable food systems to health and well-being. *Journal of Hunger & Environmental Nutrition, 3*(2), 328-246.

Jackson Citizen Patriot. Retrieved from http://www.mlive.com/news/jackson/index.ssf/2010/05/jackson-area_schools_taking_pa.html.

Citation: The Nurtured Heart Approach. Retrieved from <http://difficultchild.com/sp-bin/spirit?PAGE=27&CATALOG=5>



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