



2024-2025

Minority Health Initiative Annual Report



*Prevention, Access, and Community Engagement Powered by
Nebraska's Local Health Departments*



Compiled by the Nebraska Association of Local Health Directors (NALHD)
on behalf of the Nebraska Department of Health & Human Services
(DHHS) Office of Health Disparities.



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Table 1. Counties & People Served by Nebraska's Local Health Districts*

Nebraska Health Departments	District Population
Central District Health Department (CDHD) <i>Hall, Hamilton, and Merrick Counties (3)</i>	79,563
Dakota County Health Department (DCHD) <i>Dakota County (1)</i>	21,331
East Central District Health Department (ECDHD) <i>Boone, Colfax, Nance, and Platte Counties (4)</i>	53,607
Elkhorn Logan Valley Public Health Department (ELVPHD) <i>Burt, Cuming, Madison, and Stanton Counties (4)</i>	57,076
Four Corners Health Department (FCHD) <i>Butler, Polk, Seward, and York Counties (4)</i>	45,491
Lincoln-Lancaster County Health Department (LLCHD) <i>Lancaster County (1)</i>	323,673
Loup Basin Public Health Department (LBPHD) <i>Blaine, Custer, Garfield, Greely, Howard, Loup, Sherman, Valley, and Wheeler Counties (9)</i>	29,846
North Central District Health Department (NCDHD) <i>Antelope, Boyd, Brown, Cherry, Holt, Keya Paha, Knox, Pierce, and Rock Counties (9)</i>	44,254
Northeast Nebraska Public Health Department (NNPHD) <i>Cedar, Dixon, Thurston, and Wayne Counties (4)</i>	30,357
Panhandle Public Health District (PPHD) <i>Banner, Box Butte, Cheyenne, Dawes, Deuel, Garden, Grant, Kimball, Morrill, Scotts Bluff, Sheridan, and Sioux Counties (12)</i>	83,365
Public Health Solutions (PHS) <i>Fillmore, Gage, Jefferson, Saline, and Thayer Counties (5)</i>	53,932
Sarpy/Cass Health Department (SCHD) <i>Cass and Sarpy Counties (2)</i>	221,014
South Heartland District Health Department (SHDHD) <i>Adams, Clay, Nuckolls, and Webster Counties (4)</i>	44,592
Southeast District Health Department (SEDHD) <i>Chase, Dundy, Frontier, Furnas, Hayes, Hitchcock, Keith, Perkins, and Red Willow Counties (9)</i>	38,709
Southwest Nebraska Public Health Department (SWNPHD) <i>Johnson, Nemaha, Otoe, Pawnee, and Richardson Counties (5)</i>	37,757
Three Rivers Public Health Department (3RPHD) <i>Dodge, Saunders, and Washington Counties</i>	80,896
Two Rivers Public Health Department (TRPHD) <i>Buffalo, Dawson, Franklin, Gosper, Harlan, Kearney, and Phelps Counties (7)</i>	97,826
West Central District Health Department (WCDHD) <i>Arthur, Hooker, Lincoln, Logan, McPherson, and Thomas Counties (6)</i>	37,176

*Sources: US Census Bureau ACS 5-year 2019-2023

Understanding the Minority Health Initiative (MHI) Annual Report

+ Reporting Requirements

The 2001 Nebraska Legislature established the **Minority Health Initiative** (Neb. Rev. Stat. § 71-1628.07) to support efforts that address health disparities where at least five percent of the population identifies as a racial or ethnic minority, based on the most recent federal decennial census.

The statute directs the Nebraska Department of Health and Human Services (DHHS) to coordinate minority health initiatives in these areas that target, but are not limited to, the following priority health issues: infant mortality, cardiovascular disease, obesity, diabetes, and asthma.

Entities receiving MHI funds must submit annual reports highlighting activities supported by these funds during the prior fiscal year.

This report covers work performed by local health departments (LHDs) from **July 1, 2024, through June 30, 2025**. Individual LHD reports are submitted to the DHHS by October and included in the Department's submission to the Legislature by December 1, 2025.

+ Who's Included in This Report

As of June 30, 2025, 18 local health departments within Nebraska's first and third congressional districts were eligible to receive funds under the Minority Health Initiative (Neb. Rev. Stat. §§ 71-1628.07). These LHDs and their 92 covered counties are listed in Table 1.

Douglas County lies entirely in Nebraska's second congressional district. MHI-related activities in this district are the responsibility of designated community health centers.

+ Minority Health Initiative in Action

Nebraska's LHDs serve as their communities' chief health strategists, working across sectors to protect and improve the health and well-being of all Nebraskans. Through MHI funding, Nebraska's LHDs work with community partners to expand access, strengthen connections, and promote healthier futures for residents. Activities vary by department, but all reflect a shared commitment to using state resources efficiently while addressing priority health concerns.

This report highlights LHD activities in four focus areas:

- Improving Health & Wellness
- Supporting Families & Communities
- Strengthening Local Partnerships
- Expanding Access to Care

MHI Statewide Reach



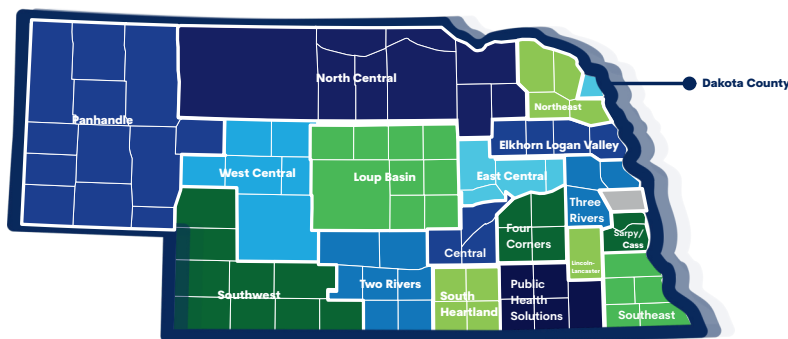
\$1,557,606
MHI Funds Distributed
Statewide FY24-25



265,486
MHI-eligible Residents

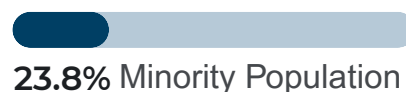


\$5.87
Per MHI-eligible Resident



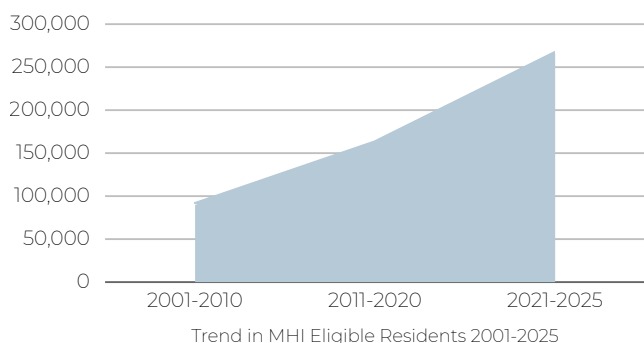
MHI investments extend across Nebraska, reaching nearly **one in four residents**. Over time, these funds have supported community efforts to address chronic disease, strengthen local partnerships, and reduce barriers to care.

Total NE Population: **1,965,926**

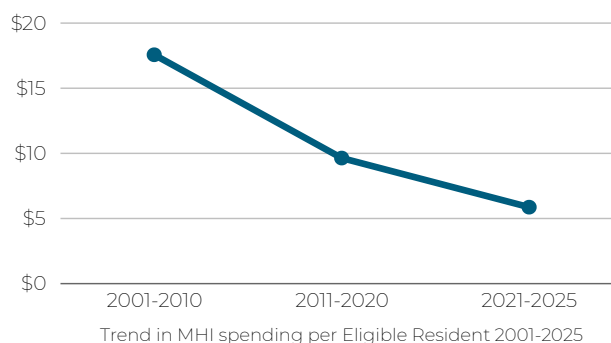


Trends in MHI Investment and Reach

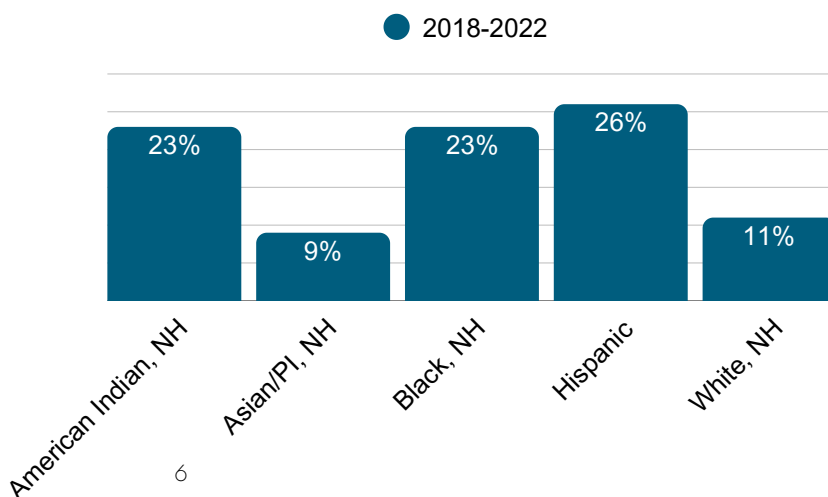
Nebraska's minority population grows each year.



Per capita MHI expenditures decrease each year.



Statewide, many Nebraskans continue to report fair or poor health, highlighting the importance of local prevention and support. For more information visit [Nebraska's Behavioral Risk Factor Surveillance System \(BRFSS\) Dashboard](#).



Central District Health Department (CDHD)

Hall, Hamilton, and Merrick Counties



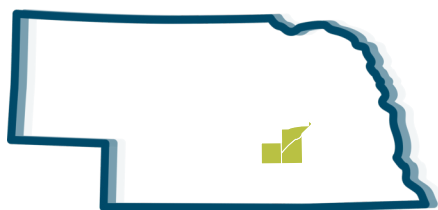
\$137,980

FY24-25 MHI Award



25,032

MHI-eligible Residents



DISTRICT PROFILE

Total Population **79,563**

29% ages 0-19

17% ages 65 & up



4.5%

Veteran Population



12.7%

Persons with disabilities



27%

Speak languages other than English

31.5% Minority Population



Central District
HEALTH DEPARTMENT



MHI WORK PLAN

CDHD used Minority Health Initiative funds to expand access to chronic disease self-management education and to strengthen community outreach. The plan focused on delivering Living Well with Chronic Conditions workshops, engaging local agencies to extend health education, and leveraging the Community Messaging platform to share timely, bilingual health information.

COMMUNITY IMPACT

Through MHI funding, CDHD gave residents practical tools to manage chronic disease, build stronger connections with local partners, and expand bilingual communication channels. These efforts improved individual health outcomes, strengthened community readiness, and demonstrated efficient use of resources.

HIGHLIGHTS

3,000+ Users Connected

The Community Messaging platform delivered timely, bilingual information directly to residents.

25 Agencies Engaged

Schools, chambers, and community groups partnered to expand outreach on priority health issues.

Building Skills for Healthier Living

Residents completed Living Well with Chronic Conditions, building skills to manage diabetes and related chronic disease.

Maximized Investment

By leveraging partners and technology, CDHD expanded access while keeping costs low.

cdhd.ne.gov

(308) 385-5175



We speak English & Spanish!

Dakota County Health Department (DCHD)

Dakota County



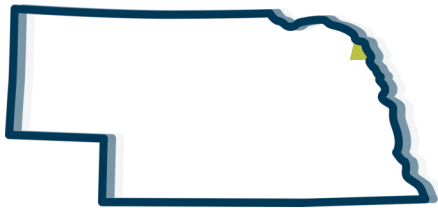
\$71,782

FY24-25 MHI Award



12,104

MHI-eligible Residents



DISTRICT PROFILE

Total Population **21,331**

31% ages 0-19
13% ages 65 & up



3.3%

Veteran Population



12%

Persons with disabilities



44.7%

Speak languages other than English

58.2% Minority Population



MHI WORK PLAN

DCHD aimed to improve chronic disease prevention, strengthen mental health partnerships, and expand outreach. Staff delivered Diabetes Prevention Program (DPP) classes and collaborated with Heartland Counseling to raise community awareness. They also launched an awareness campaign to destigmatize mental health issues and assisted families with Medicaid enrollment and access to preventive services.

COMMUNITY IMPACT

Through this plan, DCHD launched a mental health awareness campaign informed by a local focus group and started with a community photo event. The DPP provided residents with tools to manage their health, and collaboration with Heartland Counseling opened new referral opportunities for support. Outreach events connected families to resources and Medicaid assistance, breaking down stigma and enhancing access to necessary services.

HIGHLIGHTS

150 Residents Reached

Weekly DPP classes provided residents with education and tools for managing chronic disease.

Heartland Counseling Partnership

Regular collaboration improved referral pathways and expanded mental health support.

Community Members Engaged in Outreach

Residents joined networking and awareness efforts, strengthening local connections.

Ongoing Medicaid Support

157 families received assistance completing Medicaid applications, helping them access essential care and preventive services.

dakotacountyhealth.org

(402) 987-2164

East Central District Health Department (ECDHD)

Boone, Colfax, Nance, and Platte Counties



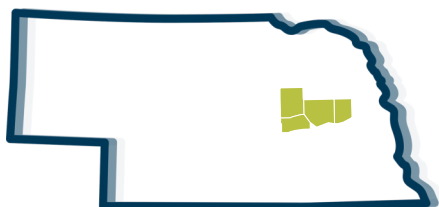
\$86,696

FY24-25 MHI Award



15,048

MHI-eligible Residents



DISTRICT PROFILE

Total Population **53,607**

29% ages 0-19

18% ages 65 & up



4.3%

Veteran Population



10.8%

Persons with disabilities



26.1%

Speak languages other
than English

28.1% Minority Population



MHI WORK PLAN

ECDHD's work plan focused on bringing health information and resources to residents in trusted community spaces: workplaces and schools. Partnerships with United Way, Good Neighbor, Central Hispano, and local businesses supported efforts to reduce stigma around mental health, and expand transportation and Medicaid access. By collaborating with these groups, ECDHD aimed to ensure that residents could access preventive care, screenings, and practical tools for healthier living.

COMMUNITY IMPACT

ECDHD promoted the United Way mental health campaign and hosted a women's group for Spanish speakers. At Columbus Hydraulics, 80 employees received bilingual information on mental health and diabetes-friendly meal planning. ECDHD also organized a Back to School Health Fair, offering preventive services in English and Spanish. Community Health Workers (CHW) continued to support residents with fresh produce distribution and health education.

HIGHLIGHTS

350 Students and Parents Reached

The Back to School Health Fair connected families to screenings and health resources.

Mental Health Campaign for Residents

150+ participants received materials and messaging to reduce stigma and promote access to care.

80 Workers Reached at Local Employer

Columbus Hydraulics employees received bilingual education on mental health and diabetes prevention.

40-100 Residents Served Weekly

CHWs distributed fresh produce and provided health education to families across the district.

Elkhorn Logan Valley Public Health Department (ELVPHD)

Burt, Cuming, Madison, and Stanton Counties



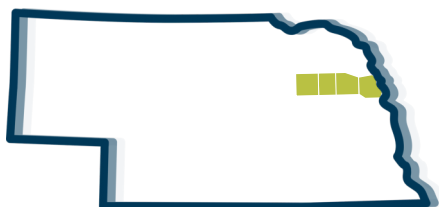
\$60,365

FY24-25 MHI Award



10,264

MHI-eligible Residents



DISTRICT PROFILE

Total Population **57,076**

27% ages 0-19

19% ages 65 & up



4.7%

Veteran Population



12.3%

Persons with disabilities



16.2%

Speak languages other than English

18%

Minority Population



MHI WORK PLAN

ELVPHD's work plan combined internal improvements and community programming. Through new and ongoing collaboration with community members and partnering organizations, strategies were developed to address the identified health needs of ELVPHD's minority populations. The Eating Smart, Being Active (ESBA) program continued across the four-county area, with pre- and post-tests measuring nutrition and physical activity progress.

COMMUNITY IMPACT

ELVPHD addressed community needs by offering accessible nutrition, physical activity, and mental health resources. Community outreach expanded through partnerships and events like the inaugural Partners in Prevention health fair. Targeted resource referrals helped residents overcome barriers such as food insecurity, transportation, and medical access, strengthening community ties and improving health outcomes district-wide.

HIGHLIGHTS

20+ Community Collaborations

Strong partnerships, including the University of Nebraska Medical Center, Nebraska Extension, and Northeast Community Action Partnership helped expand outreach and build community trust.

Partners in Prevention Inaugural Event

ELVPHD along with community partners planned and implemented 'Partners in Prevention' – a health fair event providing cancer screenings, immunizations, and preventive health education.

190 Individuals Connect to Resources

Through outreach and community events, 190 individuals were connected to essential resources such as medical care, transportation, healthy lifestyle education, and food security support.

elvphd.ne.gov
(402) 529-2233

Four Corners Health Department (FCHD)

Butler, Polk, Seward, and York Counties



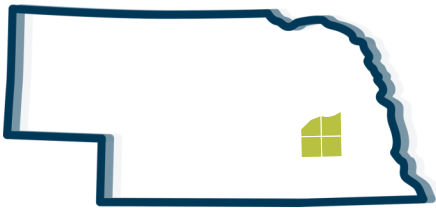
\$23,462

FY24-25 MHI Award



3,972

MHI-eligible Residents



DISTRICT PROFILE

Total Population **45,491**

27% ages 0-19

20% ages 65 & up



5.2%

Veteran Population



12.7%

Persons with disabilities



10%

Speak languages other than English

8.7% Minority Population



MHI WORK PLAN

FCHD's work plan is focused on workforce training and strengthening community connections. Staff planned to complete communication training, with pre- and post-tests to measure progress and ongoing discussions at staff meetings. FCHD planned to reduce language barriers and create a standard statement for use in programs and community presentations. These efforts ensure stronger, consistent communication and alignment between staff, partners, and residents.

COMMUNITY IMPACT

FCHD added a vision statement to support community engagement. Partnerships and local chambers supported outreach, including Spanish interpretation and resource sharing.

HIGHLIGHTS

16 Staff Members Trained

All staff completed a SWOT analysis and communication training, with pre- and post-tests.

Vision Statement Adoption

MHI leadership team brought a vision statement to the annual staff meeting and encouraged staff to adopt the statement when working in the community: presentations, programs, and outreach.

Coalition Partnerships Expanded

FCHD partnered with coalitions, chamber groups, and city leaders to strengthen engagement.

Stigma-Reduction Outreach

Educational resources were delivered to urgent care clinics and community partners to encourage more open conversations about health.

fourcorners.ne.gov

(402) 362-2621

Lincoln-Lancaster County Health Department (LLCHD)

City of Lincoln and Lancaster County



\$414,480

FY24-25 MHI Award



68,792

MHI-eligible Residents



DISTRICT PROFILE

Total Population **323,673**

26% ages 0-19

15% ages 65 & up



4.5%

Veteran Population



11.7%

Persons with disabilities



17.6%

Speak languages other than English

21.3% Minority Population



Lincoln-Lancaster County
Health Department



Nationally Accredited



MHI WORK PLAN

LLCHD collaborated with six cultural centers to deliver peer support, case management, and group education to improve residents' mental and physical health outcomes. LLCHD hosted a Health Summit to share Community Health Assessment findings and guide the next Community Health Improvement Plan. Workforce development and advisory groups will help shape outreach, awareness campaigns, and stigma-reduction strategies.

COMMUNITY IMPACT

LLCHD and six cultural centers delivered peer support, case management, and group education that reached nearly 5,000 residents. Multilingual materials and relevant campaigns reduced stigma and expanded mental and physical health awareness. Workforce development for bilingual staff and ongoing advisory groups ensured sustainable and responsive services.

HIGHLIGHTS

4,825 Residents Served

Clients accessed peer support, case management, and health education.

10+ Languages Provided

Multilingual materials and resources expanded access to mental and physical health services.

12 Bilingual Community Health Workers

Advocates delivered direct assistance and built trust in their communities.

Thousands Reached Through Events

Health fairs, panels, and outreach campaigns aimed to reduce stigma and promote prevention.

lincoln.ne.gov/health
(402) 441-8000

Loup Basin Public Health Department (LBPHD)

Blaine, Custer, Garfield, Greeley, Howard, Loup, Sherman, Valley, and Wheeler Counties



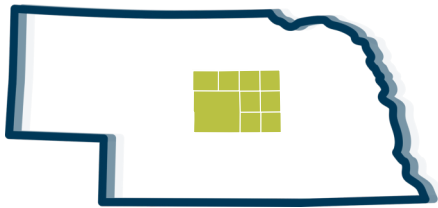
\$9,176

FY24-25 MHI Award



2,061

MHI-eligible Residents



DISTRICT PROFILE

Total Population **29,846**

25% ages 0-19

24% ages 65 & up



5.9%

Veteran Population



15%

Persons with disabilities



8.9%

Speak languages other than English

6.9% Minority Population



Loup Basin
PUBLIC HEALTH DEPARTMENT

MHI WORK PLAN

LBPHD strengthened connections with residents by visiting local businesses and gathering places, using flyers and community contacts to build trust and identify partners. Internally, staff will review assessment results and participate in training to ensure programs consistently address barriers and meet community needs.

COMMUNITY IMPACT

LBPHD engaged residents through surveys, expanded clinical services, and targeted outreach in underserved areas. A community needs survey with 177 participants and a clinical services survey with 2,379 responses highlighted local priorities. Four bimonthly clinics were implemented across the district to expand access to vaccinations, dental services, and preventive care, demonstrating strong participation and interest in improving health across the district.

HIGHLIGHTS

177 Residents Surveyed

Community needs survey gathered input to guide future programming.

2,379 Survey Responses

Clinical services survey reflected strong participation and highlighted areas for improvement.

Expanded Off-Site Clinics

Mobile and community-based clinics increased access to vaccinations, dental care, and preventive services.

High Engagement Achieved

Survey response rates and participation in services demonstrated strong community trust and interest.

North Central District Health Department (NCDHD)

Antelope, Boyd, Brown, Cherry, Holt, Keya Paha, Knox, Pierce, and Rock Counties



\$23,151

FY24-25 MHI Award



4,240

MHI-eligible Residents



DISTRICT PROFILE

Total Population **44,254**

27% ages 0-19

24% ages 65 & up



5.3%

Veteran Population



13.4%

Persons with disabilities



10%

Speak languages other than English

9.6% Minority Population



MHI WORK PLAN

NCDHD focused on building relationships with residents by connecting directly at local businesses and gathering places. Staff created contact lists and shared health information through flyers. The team worked to reduce barriers by updating language access tools, expanding translation support, and reviewing programs to ensure they meet the needs of our residents.

COMMUNITY IMPACT

NCDHD engaged with residents in trusted spaces, from classes and meetings to local schools and food pantries. Partnerships with organizations expanded access, while improvements in translation, transportation, and preventive care strengthened community systems.

HIGHLIGHTS

150 Residents Reached

Community members participated in events, trainings, and outreach with additional families through schools, food pantries, and local partners.

100+ Spanish Resources Distributed

Cards with diabetes information were provided to families at food pantries. Flyers for English learner programs were distributed through high schools.

10+ Organizational Partnerships

New and expanded collaborations with organizations like the Society of Care and Nebraska Indian Community College.

District-wide Prevention Efforts

Regular vaccine clinics and blood pressure check stations continued to provide accessible preventive care.

ncdhd.ne.gov
(402) 336-2406

Northeast Nebraska Public Health Department (NNPHD)

Cedar, Dixon, Thurston, and Wayne Counties



\$42,013

FY24-25 MHI Award



7,041

MHI-eligible Residents



DISTRICT PROFILE

Total Population **30,357**

31% ages 0-19

18% ages 65 & up



4.7%

Veteran Population



12.3%

Persons with disabilities



13.3%

Speak languages other
than English

23.2% Minority Population



MHI WORK PLAN

NNPHD partnered with tribal and community leaders to develop relevant public awareness campaigns and strengthen communication across the district. We engaged advisory councils and local partners in assessments, trainings, and outreach to identify community needs and guide services. Staff maintained collaboration with the Winnebago Public Health Department and ensured timely case investigations and follow-up with residents.

COMMUNITY IMPACT

Staff participated in the Winnebago Public Health Department's planning efforts and maintained strong relationships with local leaders. Outreach events, trainings, and advisory meetings supported new partnerships and raised awareness about regional health priorities, while case investigations and response systems remained timely and effective.

HIGHLIGHTS

6 Outreach Events Completed

Staff and partners shared information and resources directly with residents across the district.

90% Case Response Within 24 Hours

Case investigations were initiated promptly to ensure timely public health response.

Active Tribal Collaboration

NNPHD leadership participated in quarterly Winnebago CHA and CHIP meetings to align local efforts.

988 Training Provided

Staff and community partners received training on suicide prevention and crisis response to strengthen local support systems.

Panhandle Public Health District (PPHD)

Banner, Box Butte, Cheyenne, Dawes, Deuel, Garden, Grant, Kimball, Morrill, Scotts Bluff, Sheridan, and Sioux Counties



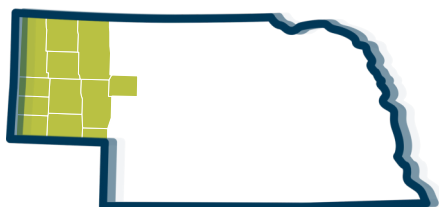
\$104,344

FY24-25 MHI Award



17,459

MHI-eligible Residents



DISTRICT PROFILE

Total Population **83,365**

25% ages 0-19

22% ages 65 & up



5.6%

Veteran Population



14.8%

Persons with disabilities



13%

Speak languages other than English

20.9% Minority Population



Panhandle

Public Health District



Nationally Accredited



MHI WORK PLAN

PPHD planned to expand interpreter training, translation services, and multilingual mental health education. The department supported trainings, school-based programs, and community events while building new tools like a dashboard. Partnerships with schools, health systems, and regional groups strengthened collaboration and advanced system-wide planning to expand outreach and improve access for residents.

COMMUNITY IMPACT

We expanded access to trainings that helped our communities better serve those who lacked access to services by bringing trainers to the Panhandle and helping offset costs. Providing access to gas vouchers reduced transportation barriers to healthcare. We increased language access in mental health and prevention resources by providing access to CredibleMind and BASE Education in Spanish.

HIGHLIGHTS

118 Community Members Engaged

Residents completed well-being assessments to identify local needs.

91 Travel Vouchers Provided

Gas cards helped individuals access mental health services and trainings.

7% Spanish Language Users

Users were able to access CredibleMind in their preferred language.

31 Partners Completed Assessment

Organizations joined PPHD in providing data to guide future planning that leverages organizational strengths.

Public Health Solutions (PHS)

Fillmore, Gage, Jefferson, Saline, and Thayer Counties



\$46,331

FY24-25 MHI Award



7,914

MHI Eligible Residents



DISTRICT PROFILE

Total Population **53,932**

26% ages 0-19

21% ages 65 & up



5.4%

Veteran Population



15.1%

Persons with disabilities



14.4%

Speak languages other than English

14.7% Minority Population



Public Health
Solutions



MHI WORK PLAN

PHS planned to strengthen local capacity by offering interpreter workshops, training staff, and coaching Community Health Workers (CHW) to expand referrals and support. The Partners for a Healthy Community steering group will use CDC's "Promoting Health" tool and other assessments to guide priorities, while clinical staff are trained to implement a Thrive Clinic model.

COMMUNITY IMPACT

PHS trained workforce and expanded Community Health Worker support. Workshops helped residents strengthen communication and responsiveness. CHWs documented 76 client screenings, with more than half receiving direct assistance. Coaching and mentoring systems began to build long-term capacity, even as staffing transitions shaped the year's work.

HIGHLIGHTS

4 Community Workshops Held

Training provided practical tools for residents and staff.

76 Clients Screened

Community health workers documented screenings and referrals, ensuring individuals were connected to needed services.

56% Received Direct Assistance

More than half of those screened were provided follow-up support or referrals to resources.

CHW Coaching System Launched

A framework for mentoring and skill-building began, strengthening workforce capacity for the future.

Sarpy/Cass Health Department (SCHD)

Sarpy and Cass Counties



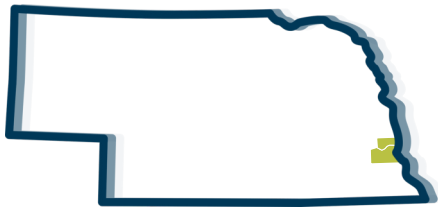
\$234,926

FY24-25 MHI Award



45,942

MHI-eligible Residents



DISTRICT PROFILE

Total Population **221,014**

29% ages 0-19

13% ages 65 & up



9.1%

Veteran Population



10.3%

Persons with disabilities



14%

Speak languages other than English

10.3% Minority Population



SARPY/CASS
Health Department

MHI WORK PLAN

SCHD planned to translate department materials to serve local families better. Staff will host formal and informal conversations with community partners to understand service challenges and guide program development. A health education campaign and community health assessment will inform strategies to improve physical and mental health, while staff training and updated policies will ensure consistent communication and support.

COMMUNITY IMPACT

SCHD expanded access to training, resources, and health campaigns while strengthening partnerships. Residents participated in suicide prevention workshops, chronic disease education, and listening sessions. A new well-being campaign reached families through billboards, surveys, and community conversations. Staff and partners collaborated to update policies and ensure services were responsive to local needs.

HIGHLIGHTS

74 Residents Completed Assessments

Community input helped identify challenges and informed service strategies.

36 Trained in Suicide Prevention

SafeTALK and ASIST workshops equipped community members and organizations with life-saving tools.

7 Billboards Posted

A mental well-being campaign reached residents across Sarpy and Cass counties.

464 Stores Surveyed

Nutrition and environmental data was collected to guide healthier community planning.

schd.ne.gov
(402) 339-4334

South Heartland District Health Department (SHDHD)

Adams, Clay, Nuckolls, and Webster Counties



\$39,320

FY24-25 MHI Award



6,552

MHI-eligible Residents



DISTRICT PROFILE

Total Population **44,592**

27% ages 0-19

20% ages 65 & up



5.5%

Veteran Population



13.3%

Persons with disabilities



13.5%

Speak languages other than English

14.7% Minority Population



SOUTH
HEARTLAND
DISTRICT



HEALTH
DEPARTMENT



Nationally Accredited



MHI WORK PLAN

For 2024-25, SHDHD planned to expand its health education hub with more videos, social media, and stories; strengthen communication with residents by building trusted relationships; and host up to nine community events. Advisory groups and partner coalitions would guide planning and CHA and other assessments would inform future priorities.

COMMUNITY IMPACT

Four educational events brought residents together around immunizations, cancer prevention, diabetes prevention, and health promotion. The community advisory group continued to provide leadership, while focus group surveys and assessments engaged residents in shaping local priorities. Public health messages were shared widely through schools, churches, worksites, and partner networks, reinforcing trusted communication pathways.

HIGHLIGHTS

4 Community Events Hosted

Residents participated in educational sessions on immunizations, cancer prevention, diabetes prevention, and health promotion.

Advisory Groups Sustained

Community advisory group met regularly to guide outreach and provide a community voice.

741 Survey Responses Collected

Of these, 17% were Hispanic/Latino respondents and 1 of 5 focus groups was conducted in Spanish to provide input on community health needs.

Public Health Flyers Shared Widely

Educational materials were distributed through schools, churches, worksites, and partners, ensuring broad access to information.

southheartlandhealth.ne.gov

(402) 462-6211

Southeast District Health Department (SEDHD)

Johnson, Nemaha, Otoe, Pawnee, and
Richardson Counties



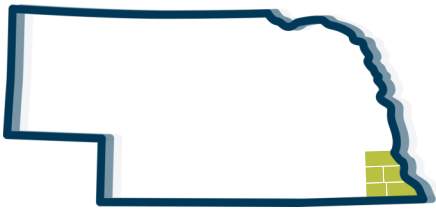
\$26,665

FY24-25 MHI Award



4,905

MHI-eligible Residents



DISTRICT PROFILE

Total Population **38,709**

25% ages 0-19

22% ages 65 & up



5.8%

Veteran Population



15.4%

Persons with disabilities



11.2%

Speak languages other
than English

12.7% Minority Population



MHI WORK PLAN

SEDHD planned to strengthen support for residents by using a social determinants of health screener to connect individuals with resources for transportation, medication, food, and mental health. Materials will be translated and made available through health literacy tools online. Quarterly work groups and new partnerships will help identify barriers and guide future outreach.

COMMUNITY IMPACT

Six work groups met regularly to address barriers and share resources. Our health screener connected residents to transportation, medication, food, and mental health support. Information was shared widely through events and outreach, helping residents access services more easily.

HIGHLIGHTS

6 Work Groups Created

Partners and staff met quarterly to address barriers and guide community engagement.

Screeners Distributed

Residents used the health screener to identify needs and receive referrals for support.

Free Vision Day Held

Residents received eye care services in a well-attended event that was celebrated as a success.

New Partnerships Formed

Connections with schools, advisory groups, and community leaders broadened access to services.

Southwest Nebraska Public Health Department (SWNPHD)

Chase, Dundy, Frontier, Furnas, Hayes, Hitchcock,
Keith, Perkins, and Red Willow Counties



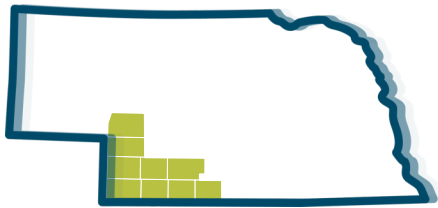
\$24,565

FY24-25 MHI Award



4,196

MHI-eligible Residents



DISTRICT PROFILE

Total Population **37,757**

25% ages 0-19

24% ages 65 & up



5.6%

Veteran Population



15.6%

Persons with disabilities



10%

Speak languages other
than English

11% Minority Population



**Southwest Nebraska
Public Health Department**

PREVENT • PROMOTE • PROTECT

MHI WORK PLAN

SWNPHD planned to expand preventive health services, increase bilingual communication, and partner with schools, rural worksites, and community groups to reach minority residents with education and resources that support healthier living.

COMMUNITY IMPACT

By offering bilingual health screenings, Healthy Cooking Classes, and translated CredibleMind resources, residents gained new tools to understand and improve their health. SWNPHD offered screenings for rural worksites. Participants learned healthier habits and received trusted services where they live and work.

HIGHLIGHTS

49 Residents Screened

Residents received bilingual cholesterol, glucose, and blood pressure checks at local worksites and in the community.

18 Workers Vaccinated

A workplace participated in an on-site flu shot clinic.

20 Residents Completed Classes

Residents joined Healthy Cooking Classes in Hayes County to learn nutritious meal preparation and lifestyle changes.

100% Partner Participation

Ag employers, rural hospitals and clinics, and other local agencies actively supported preventive health screenings and outreach to people in their communities.

swhealth.ne.gov

(308) 345-4223



We speak English & Spanish!

Three Rivers Public Health Department (3RPHD)

Dodge, Saunders, and Washington Counties



\$53,812

FY24-25 MHI Award



10,878

MHI-eligible Residents



DISTRICT PROFILE

Total Population **80,896**

27% ages 0-19

19% ages 65 & up



6%

Veteran Population



12.5%

Persons with disabilities



13.8%

Speak languages other than English

13.4% Minority Population



MHI WORK PLAN

3RPHD planned to expand chronic disease self-management by offering at least three Living Well courses and three community education events. We will work with its health coalition to implement evidence-based strategies, identify barriers to health, and include community voices in planning. Staff training in health literacy and data use will strengthen programs and services.

COMMUNITY IMPACT

Residents joined Living Well and Meta Salud courses, while "Walk and Talk" groups promoted fitness and social support. Health fairs expanded access to screenings, and new programs like a Budgeting Class and Cleaning Academy linked health with daily life skills. All staff completed health literacy and data use training, strengthening the department's capacity to serve the community. The impact of MHI is not just about health outcomes-it's about opening doors, building trust, and creating opportunities for long-term well-being in our community.

HIGHLIGHTS

17 Residents Completed Courses

A 13-week course provided practical strategies for healthier living.

21 Staff Trained

All staff completed Health Literacy 101 and data training to improve communication and decision-making.

100+ Residents Reached Through Fairs

Women's and Men's Health Fairs provided screenings, education, and resources.

New Life Skills Programs

Budgeting and Cleaning Academy courses connected families with tools to support financial stability and healthier homes.

threeriverspublichealth.org
(402) 727-5396

Two Rivers Public Health Department (TRPHD)

Buffalo, Dawson, Franklin, Gosper, Harlan, Kearney, and Phelps Counties



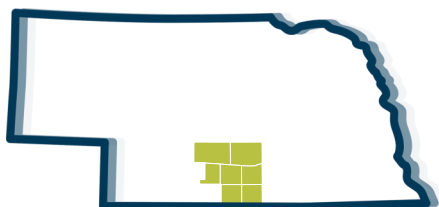
\$120,103

FY24-25 MHI Award



20,820

MHI-eligible Residents



DISTRICT PROFILE

Total Population **97,826**

18% ages 0-19

28% ages 65 & up



4.8%

Veteran Population



12.8%

Persons with disabilities



19.9%

Speak languages other than English

21.3% Minority Population



Nationally Accredited

MHI WORK PLAN

TRPHD planned to expand access to care by offering health education in multiple languages and supporting residents through community health workers. Efforts include building partnerships to reduce language barriers, connecting residents with transportation and telehealth options, and exploring online self-help resources. Staff training and advisory committees will guide future planning and outreach.

COMMUNITY IMPACT

Community health workers supported over 100 residents with referrals, screenings, and basic needs. Transportation barriers were reduced through RyDE vouchers, while new flyers and provider lists expanded communication. Staff participated in multiple trainings, ensuring services remain responsive and connected to community partners.

HIGHLIGHTS

38 Transportation Vouchers Distributed

Residents used RyDE tickets to reach health appointments and services.

100+ Residents Supported by CHWs

Community health workers assisted with referrals, screenings, and access to resources.

Educational Flyers Shared Twice a Year

Materials were distributed in multiple languages to reach more families.

11 Trainings Attended

Staff built knowledge through community of practice sessions and professional development.

West Central District Health Department (WCDHD)

Arthur, Hooker, Lincoln, Logan, McPherson, and Thomas Counties



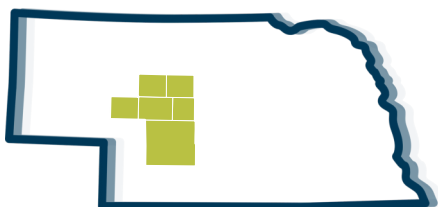
\$30,702

FY24-25 MHI Award



4,810

MHI-eligible Residents



DISTRICT PROFILE

Total Population **37,176**

25% ages 0-19

21% ages 65 & up



6.6%

Veteran Population



17.3%

Persons with disabilities



10%

Speak languages other than English

12.9% Minority Population



Nationally Accredited



MHI WORK PLAN

WCDHD planned to reduce language barriers by providing interpretation and translation services for at least 50 individuals each quarter, supported by trained staff and partner organizations. The department will expand its community health worker team, share survey results with partners, and provide monthly health literacy trainings. Data collection and partnerships will guide the next steps for wraparound services.

COMMUNITY IMPACT

WCDHD expanded interpretation and translation services, providing nearly 2,000 interactions to help residents access care in their preferred language. Staff led health literacy presentations and hosted workshops to connect daily operations with community priorities. New performance measures ensured progress was tracked and shared with partners.

HIGHLIGHTS

1,928 Interpretation Interactions

Residents received language assistance to connect with health services and resources.

6 Health Literacy Presentations

Community sessions built understanding and improved access to preventive care.

Workshops Connected Staff and Partners

Sessions focused on linking daily operations with identified community health needs.

Trusted CHWs and Interpreters

Community health workers and interpreters strengthened trust by providing consistent support.

wcdhd.org
(308) 696-1201