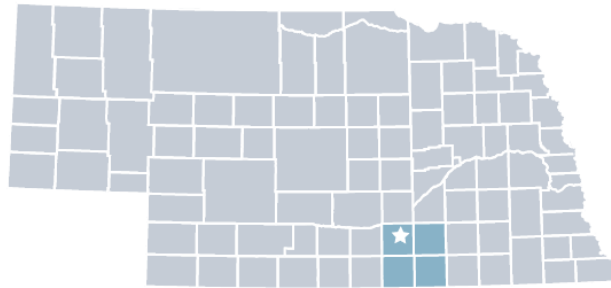




SOUTH HEARTLAND DISTRICT HEALTH DEPARTMENT

"Healthy People in Healthy Communities."



ADAMS, CLAY, NUCKOLLS, WEBSTER

Our Priorities

South Heartland District Health Department (SHDHD) created an internal team to coordinate communications: risk information (disease outbreaks, environmental concerns); activities advancing CHIP priorities (e.g., mental wellness initiatives); and monthly health observances (e.g., Radon Action Month). The team includes a front line to the director and various program areas: health literacy specialists; bilingual community health workers; and specialists in various methods of communication. **Line-of-sight:** Strategic plan goal to Advocate the "Why" of Public Health. **Outputs:** Bi-monthly audience-specific newsletters (e.g., older adults); residents' stories; and 8 closed-circuit TVs in public venues pushing out public health messages/events. **Outcomes:** Action & Behavior Change. National Diabetes Awareness Month told the story of a local man whose risk for diabetes fell when he took SHDHD's diabetes prevention program (DPP). **Results:** Registrations for the next class and the rural hospital wanted to offer online DPP classes.



Michele Bever, PhD, MPH

Health Director

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22 employees | population 44,955

www.southheartlandhealth.ne.gov

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Nationally Accredited

MATERNAL, CHILD, & FAMILY HEALTH

What we do: SHDHD encouraged clinics to use the PHQ 4 Youth depression screening during school/sports physicals; supported provider awareness of teen suicide ideation; and promoted the 988 crisis line resource.

Why we do it: In a 2021 survey of SHDHD 12th graders, 45.7% reported being depressed during the past year. Early identification and treatment interventions for depression lead to better outcomes.

COMMUNICABLE DISEASE CONTROL

What we do: In FY2023, the 4-county district had 1,095 confirmed, probable, or suspected cases of reportable diseases other than COVID-19. We responded to 39 facility outbreaks of COVID-19 and 6 facility outbreaks of non-COVID-19 illnesses. Early detection and timely intervention of infectious diseases helps reduce transmission and has a direct impact on the health of our communities. Preventing disease spread helps increase safety.

ACCESS TO & LINKAGE WITH CLINICAL CARE

What we do: SHDHD increased the percent of women 50-74 reporting "up-to-date" on breast cancer screenings. Collaborating with local health providers, we help uninsured/underinsured women access this service.

Why we do it: Out-of-pocket costs for mammogram readings are impeding access to breast cancer screening for low-income minority women in the district.

CHRONIC DISEASE & INJURY PREVENTION


What we do: Hastings was selected as one of two sites in Nebraska to work with UNMC/Nebraska Medicine on improving diabetes care, education, and prevention. A local coalition is leading community efforts.

Why we do it: Diabetes is a silent killer. Our goal is to increase the number of residents who know their risk score and get screened for diabetes. The Smart Hub website promotes diabetes screenings, eating healthy, and being active.


ENVIRONMENTAL PUBLIC HEALTH

What we do: SHDHD's radon communications plan, featuring a local resident's story and targeted messages, increased awareness about radon exposure in homes and the importance of testing for radon. 46 radon kits were sold, a 240% increase from last year.


Why we do it: Radon is a cancer-causing gas that can't be seen, smelled, or tasted and it is common in our health district.




2 area clinics
increased depression screenings for youth 12-18




1,095
investigations of reportable diseases (other than COVID-19)



Breast cancer screening of 18 uninsured/underinsured women



75% of SHDHD adults are
at risk for diabetes or prediabetes



240%
increase in radon kit sales from last year

SOUTH HEARTLAND DISTRICT HEALTH DEPARTMENT (SHDHD)

ADAMS CLAY NUCKOLLS WEBSTER

Minority population: **13.7%**



Hispanic American Indian Black Asian Hawaiian/Pacific Islander

8% of residents speak languages other than English
Common Languages: Spanish & Somali

Minority Health Initiative (MHI)



MHI eligible residents: **6,702**



Funds Received FY 2022-2023: **\$41,369**

Strategies & Outcomes

SHDHD facilitated six minority advisory group (AG) meetings, assuring progress on action plan objectives to reduce barriers to care. The AG includes minority community members and representatives from 6 partner organizations. SHDHD supported the AG members in hosting 6 educational events for Hispanic community members on topics such as healthy blood pressure and gardening. SHDHD's bilingual community health worker (CHW) shared AG outcomes and recommendations with the Access to Care Steering Committee in October and April. Our team continues to build our health literacy and language access skills to better serve all communities. We participate in the Public Health Language Access Network (PHLAN) and SHDHD's website includes a Spanish tab.

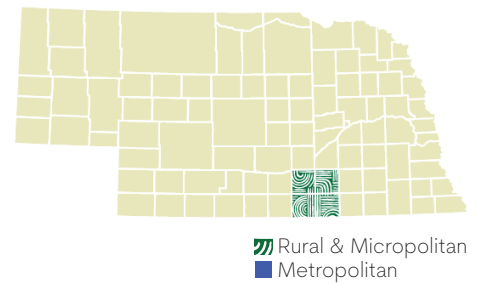
Other work helping all communities thrive

In addition to paying careful attention to health literacy to make health and safety accessible to all, we are assessing the effectiveness of information-sharing with Hispanic/Latino residents. SHDHD is finding out whether, how, and where people learned about COVID-19 during the pandemic. Our minority AG is considering their roles and which trusted settings/people should be in place to improve communication going forward.

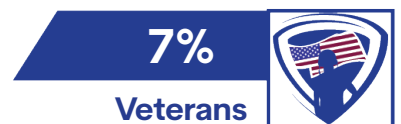
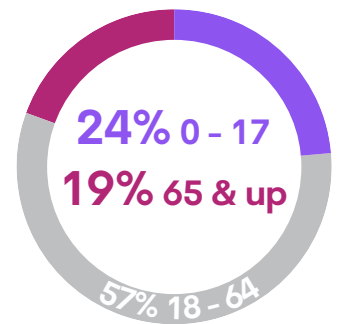
Other Demographics:

Based on total population: 44,955

4 Rural counties:



Ages:



www.southheartlandhealth.ne.gov

Michele Bever | Director | michele.bever@shdhd.ne.gov



We speak English, Hindi, Telugu, Punjabi, Bengali, & Spanish!