MKE Elevate
Community Health Improvement Plan (CHIP)
Reengagement and Evaluation Report

2020-2021
Acknowledgements

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Inclusive & Fair Society-Eliminate Racism
Positive Mental Health

Table of Contents

Letter from the Commissioner ................................................................................................................. 3
Executive Summary ...................................................................................................................................... 4
MKE Elevate Overview ................................................................................................................................. 5
Economic Security Reengagement and Evaluation .................................................................................. 7
Inclusive & Fair Society – Eliminate Racism Reengagement and Evaluation ........................................ 15
Positive Mental Health Reengagement and Evaluation ........................................................................... 21
MKE Elevate Process Evaluation ................................................................................................................ 27
Recommendations ........................................................................................................................................ 28
References ................................................................................................................................................... 29

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Letter from the Commissioner

Dear Partners,

In 2016, the City of Milwaukee Health Department, joined by former Mayor Tom Barrett launched a comprehensive, community-driven process to develop MKE Elevate; a roadmap to identify, address and resolve the health disparities in Milwaukee.

Since 1867, the Milwaukee Health Department has worked to equitably improve and protect the health of all who live, learn, work, play and worship in the city of Milwaukee. The MKE Elevate Community Health Improvement Plan continues the work of our mission, with its focus on crime and neighborhood safety, economic security, an inclusive & fair society, eliminate racism, and improve positive mental health.

For the past five years, the Milwaukee Health Department has continued to work with our community partners to review health data, assess needs and resources of the community, identify evidence-based policies and programs, and develop action plans.

In March of 2020, COVID-19 deeply transformed the work of the Milwaukee Health Department, our daily lives and society. The pandemic has exacerbated the health disparities Milwaukee faces and has further highlighted the critical need to implement the work identified in the MKE Elevate plan. We face a critical point in time as we recover from the pandemic and dedicate resources to racial justice.

I am grateful for the work of the Milwaukee Health Department staff, partners, Steering Committee and Action Team members. As a city we must collectively address health disparities and racial justice. This report demonstrates the strength of our partnerships and importance of collaboration. I look forward to continuing this vital work, formally addressing racial justice and reducing health disparities in the City of Milwaukee.

Sincerely,

Kirsten Johnson, MPH, CPH, CHES
Commissioner of Health
Milwaukee Health Department
Executive Summary

The City of Milwaukee Health Department’s Community Health Improvement Plan (CHIP), entitled MKE Elevate, was implemented from 2017-2021. MKE Elevate’s planning process was comprehensive, community-driven and identified a shared vision of Safe and Health Neighborhoods to be achieved through three priority action areas:

- Economic Security
- Inclusive and Fair Society – Eliminate Racism
- Positive Mental Health

MKE Elevate articulates the Milwaukee community's vision to simultaneously capitalize on the city's strengths in an inclusive way and focus community efforts around the three priority areas. Governed by a Steering Committee and implemented through strategies assigned to Implementation Partners and Action Team members, the MKE Elevate CHIP strived for system-level change by aligning the goals, priorities, objectives, and values of Milwaukee community stakeholders.

From 2018-2020 there was a lapse in engagement from MHD to our CHIP partners. Further, the COVID-19 pandemic affected the process through internal staff vacancies, partner agency turnover, pivoting MHD operations to COVID response, and exacerbated health disparities experienced by our community. A reengagement effort was initiated in 2020, and through reestablishing partnerships, MHD reengaged with 100% of Implementation Partners listed in the original plan.

This CHIP Reengagement and Evaluation Report reflects on the progress made in the last five years by comparing population health data related to the three priority areas, presenting the status reported by Implementation Partners of the strategies listed within the plan, identifying major assets and accomplishments from our Implementation Partners, and spotlighting a community partner who embodies the CHIP’s vision of Safe and Healthy Neighborhoods through their work within a priority action area.

The MHD CHIP process aims to be inclusive, participatory, and community-driven. We are so grateful for the dedication of our Implementation Partners, Action Teams and Steering Committee members, and anyone who took the time to participate in this process. We have only just begun our work on eliminating health and racial disparities to promote and protect economic security, shape an inclusive and fair society – by eliminating racism, and support positive mental health for our city.
**MKE Elevate Overview**

**Planning Process**
The Wisconsin Way Model provided a framework for the planning process of MKE Elevate. By working together, community members can have a significant impact on improving health in the community through a continuous cycle of assessment, implementation and evaluation. A stakeholder analysis was conducted, which helped the planning team identify key stakeholder groups from across the local public health system. To ensure that the plan reflected what was most important to the community, multiple ways to inform the process were provided. The following inputs were used to inform the selection of priorities: Community Feedback on CHA, Priority Issues Survey, Photo Campaign, Forces of Change Assessments, Identification of Action Areas Meeting, Current Initiative Survey, and Priority Action Team Meetings.

**Vision and Priority Action Areas**
The CHIP is intended to serve as a vision for the health of the community and a framework for individuals and organizations to leverage resources, build partnerships, and identify their own priorities and strategies that can align with these efforts and help elevate the health of the Milwaukee community. The MKE Elevate CHIP was designed to complement and build upon other guiding documents, plans, initiatives, and coalitions already in place to improve the health of the Milwaukee community.

After the planning process, MKE Elevate identified its vision: To Support Safe and Healthy Neighborhoods. In support of this vision, MKE Elevate combined resident input with insight from key stakeholder interviews and meetings to identify three Priority Action Areas that not only address community-identified concerns, but also significantly influence safety and health:

1. Economic Security
2. Inclusive & Fair Society—Eliminate Racism
3. Positive Mental Health

*In 2020, MHD made the statement to add Eliminate Racism to Inclusive & Fair Society*

**MHD’s Role in CHIP Implementation Process**
According to The National Association of City/County Health Officers (NACCHO), “A community health improvement process looks outside of the performance of an individual organization serving a specific segment of a community to the way in which the activities of many organizations contribute to community health improvement.” The Milwaukee Health Department acts as a facilitator to the work already being done by community organizations. MKE Elevate highlights organizations’ work and provides training and technical assistance in priority action area implementation. MHD implements strategies as an implementation partner where defined in the CHIP.
MKE Elevate Reengagement

Staff vacancies, administrative changes, and the COVID-19 pandemic all caused a lapse in engagement and implementation for the MKE Elevate CHIP from 2018-2020. In 2020, a Public Health Strategist role dedicated to implementing and managing the progress of the CHIP was filled to ensure continuity of operations for the community health improvement work. Further in 2020, MHD received funding to build out the Health Strategy team with 3 more Public Health Strategist roles whose positions focus on the priority areas of the CHIP. Building out this team will further increase the distribution of leadership for internal staff capacity to lead the CHIP work. The CHIP is one of the documents that guides Milwaukee’s vision of how we want to improve our community and the ways in which we can do so. The CHIP is also a requirement for MHD to move toward becoming an accredited local health department.

In the reengagement process from 2020-2021, numerous activities were implemented to reengage the community, determine implementation status and report out on progress, and to improve continuity of operations to eliminate future disruptions in implementation.

The following were reengagement activities from 2020-2021:

- Updated webpage and social media accounts
- Distributed and evaluated re-engagement surveys sent to Implementation Partners
- Re-engaged the Steering Committee
- Re-established the e-mail listserv
- Held re-engagement webinar in November 2020
- Held quarterly Action Team meetings in 2021
- Presented on the reengagement and implementation progress to community stakeholders

Evaluation

The evaluation phase of MKE Elevate occurred concurrently with the reengagement of the implementation phase. The Action Teams and Steering Committee were unable to establish an evaluation plan and an implementation plan before the lapse in engagement, so during reengagement, the MHD team reached out to Implementation Partners listed in the CHIP to determine the progress of the strategies they were assigned within the plan using the following metrics:

- We have completed our work on this strategy
- We have made progress on this strategy, but may need assistance in completing it
- We have not made progress on this strategy, but we are interested in re-engaging in this work
- We are no longer working on this strategy

Through the reengagement process, MHD made contact and determined implementation progress for 100% of Implementation Partners. The action step tracking in the following sections of this report are a visual representation of the progress made by Implementation Partners despite a lapse in engagement with MHD. Moving into the redevelopment of the CHIP in 2022, MHD has a detailed evaluation plan drafted and will receive final approval from the Steering Committee ahead of the 2022-2027 plan’s publication.
## Economic Security

### Population Health Indicators

<table>
<thead>
<tr>
<th>System Level Indicator of Economic Security</th>
<th>Baseline Data (year)</th>
<th>Current Data (year)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Food Insecurity Rate</strong>&lt;sup&gt;2&lt;/sup&gt;</td>
<td>Percentage of population in Milwaukee County that experienced food insecurity at some point during the year.</td>
<td>15.4% (2017)</td>
</tr>
<tr>
<td><strong>Households that are Asset Limited, Income Constrained, Employed (ALICE)</strong>&lt;sup&gt;3&lt;/sup&gt;</td>
<td>Percentage of households in the city of Milwaukee that are Asset Limited, Income Constrained, Employed comprising households with income above the Federal Poverty Level but below the basic cost of living.</td>
<td>28.8% (2018)</td>
</tr>
<tr>
<td><strong>Homeownership</strong>&lt;sup&gt;4&lt;/sup&gt;</td>
<td>Percentage of all housing units (i.e. occupied and unoccupied) in the city of Milwaukee that are occupied by homeowners.</td>
<td>37.4% (2013-2017)</td>
</tr>
<tr>
<td><strong>Renters Spending 30% or More of Household Income on Rent</strong>&lt;sup&gt;5&lt;/sup&gt;</td>
<td>Percentage of renters in the city of Milwaukee who are spending 30% or more of their household income on rent. Rental costs are comprised of rent and utilities (electricity, gas, other fuels, water and sewer).</td>
<td>55.1% (2013-2017)</td>
</tr>
<tr>
<td><strong>Enrollment in High Quality Early Childhood Care</strong>&lt;sup&gt;6&lt;/sup&gt;</td>
<td>Percentage of Wisconsin Shares children in Milwaukee attending high-quality (4 or 5 star) center by race/ethnicity. Wisconsin Shares child care subsidy program supports eligible families by funding a portion of the cost of child care.</td>
<td>Asian: 8%</td>
</tr>
<tr>
<td></td>
<td>Black: 9%</td>
<td>Black: 14%</td>
</tr>
<tr>
<td></td>
<td>Latinx: 29%</td>
<td>Latinx: 28%</td>
</tr>
<tr>
<td></td>
<td>Unspecified: unknown</td>
<td>Unspecified: 14%</td>
</tr>
<tr>
<td><strong>Low-income, Low Access to Food</strong>&lt;sup&gt;7&lt;/sup&gt;</td>
<td>Population count in Milwaukee County of low-income residents beyond 1 mile for urban areas or 10 miles for rural areas from a supermarket.</td>
<td>24,600 (2015)</td>
</tr>
</tbody>
</table>
## Action Step Tracking

### Economic Security

<table>
<thead>
<tr>
<th>Goal 1: Improve access to basic human needs such as healthy &amp; affordable food, and safe &amp; affordable housing</th>
<th>2020-2021</th>
</tr>
</thead>
<tbody>
<tr>
<td>Progress has been made or work has been completed on this strategy</td>
<td>Progress has not been made on this strategy but there is interest in re-engaging in the work</td>
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</table>

#### 1.1 Create a local, sustainable food system and increase demand for healthy food

- **i.** Develop a citywide food system policy and action agenda
  - Environmental Collaboration Office (ECO)
  - Milwaukee Food Council

- **ii.** Continue Healthy Eating and Active Living Environment (HEALE) projects
  - American Heart Association
  - American Cancer Society
  - Feeding America

- **iii.** Support Nutrition and Quality Council to provide education to food pantry employees about healthy food donation and preparation
  - Feeding America

- **iv.** Improve health education to increase demand for fresh and healthy food
  - Environmental Collaboration Office (ECO)

- **v.** Strengthen emergency food system that ensures nutritious food
  - Milwaukee Food Council

#### 1.2 Foster economic development of businesses that sell healthy food in underserved neighborhoods

- **i.** Establish a Food Trust Model in Milwaukee creating a flexible city fund to address food access
  - American Heart Association

- **ii.** Develop other retail outlets as sources of fresh food
  - Environmental Collaboration Office (ECO)
  - City of Milwaukee Licensing Division

#### 1.3 Increase farmers’ market, community, and individual garden utilization

- **i.** Expand awareness of use of SNAP funds at farmers’ markets
  - Milwaukee Farmers Market Coalition

- **ii.** Expand acceptance of EBT benefits at all farmers’ markets
  - Milwaukee Food Council
| 1.4 Increase safe housing environments |  |  |  |
|--------------------------------------|-----------------|-----------------|
| i. Provide free home repairs to low-income homeowners | Community First | Department of Neighborhood Services |
| ii. Provide weatherization products and energy conservation | Community First |  |
| iii. Support City’s sale of tax foreclosed properties to low income residents | Department of City Development |  |
| iv. Support the City’s landlord training program | Department of Neighborhood Services | Department of City Development |
| v. Maintain Strong Homes Loan Program to assist low and moderate income homeowners with needed repairs | Department of City Development |  |
| vi. Maintain Compliance Loan Program offering qualified homeowners interest-free, deferred payment loans to repair code violations | Department of Neighborhood Services |  |

| 1.5 Promote fair housing policies |  |  |  |
|-----------------------------------|-----------------|-----------------|
| i. Advocate for anti-eviction policies for pregnant women | Milwaukee Lifecourse Initiative for Healthy Families (LIHF)* |  |

**Goal 2:** Improve access to and quality of education

<table>
<thead>
<tr>
<th>Progress has been made or work has been completed on this strategy</th>
<th>Progress has not been made on this strategy but there is interest in re-engaging in the work</th>
<th>Partner is no longer working on this strategy</th>
<th>Implementation Partner(s)</th>
</tr>
</thead>
<tbody>
<tr>
<td>2020-2021</td>
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</tbody>
</table>

**2.1 Advocate for a sustainable funding model that supports high-quality early childhood education**

| i. Reduce the State-imposed per-pupil revenue gap that exists between pupils in Milwaukee Public Schools and students in surrounding communities to ensure equal revenue per pupil across Wisconsin | Milwaukee Public Schools |  |  |
ii. Advocate for full funding for all-day 4K programming by allowing school districts to count each child in all-day K4 programming as a full 1.0 FTE of funding

iii. Advocate for funding for K3 programming

iv. Advocate for an increase in the amount of State funding to meet the growing costs of bilingual education

Milwaukee Public Schools

2.2 Improve family environments and quality of early learning to foster healthy child development

i. Promote early childhood home visitation and positive parenting programs

ii. Strengthen preschool enrichment with family engagement

iii. RefundCreate Family Resource Centers in MPS schools and neighborhood centers

Office of Violence Prevention (OVP)

2.3 Increase and encourage positive youth engagement

i. Strengthen quality and coordination of mentorship and after school/summer programs

ii. Bolster school-based violence and trauma prevention and community schools’ initiatives

Office of Violence Prevention (OVP)

Goal 3: Improve access to employment that provides family-supporting wages and benefits

<table>
<thead>
<tr>
<th>Progress</th>
<th>Progress</th>
<th>Partner</th>
<th>Implementation Partners who Reported</th>
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<tbody>
<tr>
<td>has made or work has been completed on this strategy</td>
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<td>is no longer working on this strategy</td>
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2020-2021

3.1 Develop and promote neighborhood businesses that hire local residents

i. Continue to refine sector strategies and coordinate business services to support employers

ii. Use new and existing financing resources to expand business development and spur job creation

Employ Milwaukee

Office of Violence Prevention (OVP)

Transform Milwaukee Plan*
iii. Make neighborhoods more desirable for housing and business development by reducing the number of foreclosed and vacant properties

iv. Increase job training, skill enhancement, and educational opportunities by fostering partnerships between state agencies and nonprofit community groups

v. Create incentives and improve employer readiness to hire and retain those facing accessibility barriers and remove barriers for jobs

vi. Create opportunities for local entrepreneurship and economic development

3.2 Increase access to and awareness of job training, skill enhancement, and educational opportunities

i. Collaborate to implement cross-program strategies to ensure there are “no wrong doors” for job seekers who navigate the talent development system

ii. Continue and expand Employ Milwaukee’s Youth Workforce Investment Activities

iii. Work with system partners to align workforce development and education programs and resources

iv. Support minimal level of proficiencies necessary to allow individuals to be successful in job training programs

v. Continue and expand workforce development partnerships as well as internship, job shadowing, summer job programs for high school and college students
| vi. Develop ladders of advancement for Milwaukee youth and Milwaukee entrepreneurs | Milwaukee Earn & Learn Program | Milwaukee Police Department |
| vii. Advocate for the expansion of the State of Wisconsin transitional jobs program | Environmental Collaboration Office (ECO) |
| viii. Increase coordination of youth job programs to link higher need youth to subsidized jobs and supportive services (strengthen employability and earn income concurrently) | Department of City Development |
| ix. Integrate financial education with employment services to improve economic opportunities for low to moderate income communities | Office of Violence Prevention (OVP) |

### 3.3 Advocate for local and state policies that increase wages and benefits

i. Strategies to be determined by action team | Office of Violence Prevention (OVP) |

### 3.4 Expand financial literacy and security education

ii. Strategies to be determined by action team | Alliance for Economic Inclusion |

*Initiative was no longer funded in 2021 at time of reporting*
Developed Tenant’s Rights training called "Rent for Success" to help renters become aware of their rights and how to avoid some bad renting practices.

Launched "FeedtheNeedMKE," a meal home delivery program.

20+ talent programs focused on intensive career services, training for in-demand occupations and placement with high-road employers.

Administered $400,000 in educational and facility/capital grants to reduce food inaccess areas.

Programming prioritized the five pillars of stability: Housing, Education, Employment, Health Care and Caring Connections.

Expanded produce incentives at Milwaukee area farmer’s markets & expanded Fondy’s SNAP Market Match program to 4 additional markets.

Me2 program supports energy efficiency & improvements to residential housing stock and HOME GR/OWN works with neighborhoods to build pocket parks & community orchards while enhancing neighborhood leadership.

Created a Nutrition Insecurity Screening Tool based on feedback from Community Listening Sessions - built in resource referral to the tool to decrease food insecurity in Milwaukee.
Implementation Partner Spotlight: Feeding America Eastern Wisconsin

MKE Elevate CHIP’s Economic Security Implementation Partner spotlight is Feeding America Eastern Wisconsin (FAEW). During the COVID-19 pandemic, FAEW significantly increased the accessibility of healthy and safe food, while building the capacity of their food network. Nearly 50% of the food Feeding America now distributes is produce. Since the beginning of the pandemic they have invested nearly a million dollars in infrastructure upgrades of the agency network to increase their ability to distribute perishable foods. FAEW has increased their direct service food distribution model to be able to serve clients directly. Between March and June of 2020, compared to the same time period in 2019, FAEW distributed 6 million more pounds of food directly to clients. In 2019 FAEW distributed 26M pounds of food - in 2020, they distributed approximately 54 million pounds of food! Thank you, Feeding America Eastern Wisconsin, for advancing equity by eliminating food insecurity and healthy food access disparities in our community.
**Inclusive & Fair Society – Eliminate Racism**

**Population Health Indicators**

<table>
<thead>
<tr>
<th>System Level Indicator of Inclusive &amp; Fair Society – Eliminate Racism</th>
<th>Baseline Data (year)</th>
<th>Current Data (year)</th>
</tr>
</thead>
</table>
| Part 1 Crimes \(^8, ^9\)
  Total number of Homicide, Rape and Aggravated Assault offenses by number of victims, and Robbery, Burglary, Theft – Larceny, Auto Theft and Arson by number of incidents in the City of Milwaukee. | 32,688 (2015)  
31,712 (2016) | 26,586 (2020)  
33,633 (2021) |
| Experienced Four Adverse Childhood Experiences (ACE) \(^10\)
  Percentage of adults in Milwaukee County who responded to having experienced four adverse childhood experiences in their life, by Socioeconomic Status (SES). | Low SES: 28%  
High SES: 17% (2015-2017) | Low SES: 31%  
High SES: 14% (2016-2018) |
| Index of Dissimilarity \(^11\)
  Index measures whether one particular group is distributed across census tracts in the same way as another group in the cities of Milwaukee and Waukesha. A high value (out of 100) indicates the two groups tend to live in different tracts. A value of 60 or above is considered very high – it means 60% (or more) of the members of one group would need to move census tracts in order to be equally distributed. | White-Black/Black-White: 70.1  
Black-Hispanic/Hispanic-Black: 75 (2020) |
| Isolation Index \(^11\)
  Percentage of same-group populations in the Milwaukee census tracts where the average member of a racial/ethnic group lives. Closer to zero is a very small group that is quite dispersed and closer to 100 is a group where members are entirely isolated from other groups. | White-White: 62.2  
Black-Black: 71.9  
Hispanic-Hispanic: 50  
Black-Black: 69.3  
Hispanic-Hispanic: 49.1  
Asian-Asian: 10.6 (2020) |
## Inclusive & Fair Society – Eliminate Racism

### Goal 1: Promote equitable laws and practices

<table>
<thead>
<tr>
<th>Goal 1.1 Advocate for the requirement to conduct an equity review as part of the legislative process</th>
<th>2020-2021</th>
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<tbody>
<tr>
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</tr>
<tr>
<td><strong>1.1 Advocate for the requirement to conduct an equity review as part of the legislative process</strong></td>
<td>Implementation Partners who Reported</td>
</tr>
<tr>
<td>i. Explore the feasibility of adopting a Health in All Policies approach for the City of Milwaukee</td>
<td>Milwaukee Health Department</td>
</tr>
<tr>
<td>ii. Develop a rubric for evaluating policies on fair housing practices</td>
<td>Metropolitan Milwaukee Fair Housing Council</td>
</tr>
<tr>
<td>iii. Promote the creation of a racial equity impact assessment at the city and county level</td>
<td>Milwaukee Lifecourse Initiative for Healthy Families (LIHF)*</td>
</tr>
</tbody>
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### Goal 2: Enhance community connectedness

<table>
<thead>
<tr>
<th>Goal 2.1 Expand implicit bias and micro-aggression reduction and de-escalation tactics training for first responders, including law enforcement and crisis intervention service providers</th>
<th>2020-2021</th>
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</thead>
<tbody>
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</tr>
<tr>
<td><strong>Goal 2: Enhance community connectedness</strong></td>
<td>Implementation Partners who Reported</td>
</tr>
<tr>
<td>i. Continue and expand practice of training all police officers on Fair and Impartial Policing and Procedural Justice</td>
<td>Office of Violence Prevention (OVP) Milwaukee Police Department</td>
</tr>
<tr>
<td>ii. Conduct trainings for City of Milwaukee employees to learn about health and racial equity</td>
<td>Office of Violence Prevention (OVP)</td>
</tr>
<tr>
<td>iii. Potentially expand to Milwaukee Public School Employees</td>
<td>Office of Violence Prevention (OVP)</td>
</tr>
</tbody>
</table>
### 2.1 Increase community conversations and healing sessions

<table>
<thead>
<tr>
<th>i. Use creative placemaking to establish places where all residents can interact</th>
<th></th>
<th>Department of City Development</th>
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<tbody>
<tr>
<td>ii. Continue and consider expanding Sankofa, Celebrando, and Community Health Worker forums that bring individuals together with positive health messages</td>
<td></td>
<td>American Cancer Society</td>
</tr>
<tr>
<td>iii. Continue and consider expanding Hate at Home workshops</td>
<td></td>
<td>Metropolitan Milwaukee Fair Housing Council</td>
</tr>
<tr>
<td>iv. Continue to host police and resident listening sessions</td>
<td></td>
<td>Zeidler Group</td>
</tr>
<tr>
<td>v. Create and promote community events and safe transportation routes in neighborhoods most impacted by violence</td>
<td></td>
<td>Office of Violence Prevention (OVP)</td>
</tr>
</tbody>
</table>

### 2.2 Provide increased opportunities for government-community partnerships and trust building

| i. Increase the number of public meetings and/or hearings occurring in the community |  | Department of City Development |

### 2.3 Increase opportunities for neighborhood beautification projects

| i. Expand resources available for Bloom and Groom |  | Department of City Development |
| ii. Continue to use City vacant lots for community gardens |  | Department of City Development |

### Goal 3: Strengthen and enhance neighborhood and civic leadership

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<tr>
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<th>Partner is no longer working on this strategy</th>
<th>Implementation Partners who Reported</th>
</tr>
</thead>
</table>

#### 3.1 Build community member capacity for civic leadership
<table>
<thead>
<tr>
<th>i. Support the growth of affinity groups that engage young Milwaukeeans in civic life</th>
<th></th>
<th>Department of City Development</th>
</tr>
</thead>
<tbody>
<tr>
<td>ii. Explore the feasibility of creating a community advisory board for the City of Milwaukee Health Department</td>
<td></td>
<td>Milwaukee Health Department</td>
</tr>
<tr>
<td>iii. Continue Building Neighborhood Capacity program</td>
<td></td>
<td>Milwaukee Christian Center</td>
</tr>
<tr>
<td>iv. Educate community members to be neighborhood advocates</td>
<td></td>
<td>Sixteenth Street Community Health Center</td>
</tr>
<tr>
<td>v. Expand efforts to build neighborhood and resident organizing and advocacy capacity</td>
<td></td>
<td>Office of Violence Prevention (OVP)</td>
</tr>
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### 3.2 Reduce barriers to voter registration and casting ballots

<table>
<thead>
<tr>
<th>i. Continue and expand pre-election registration and voter education activities in communities that have been historically un- or under-represented in voting</th>
<th></th>
<th>Election Commission</th>
</tr>
</thead>
<tbody>
<tr>
<td>ii. Continue and expand partnerships to make voter registration more accessible</td>
<td></td>
<td>Election Commission</td>
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<tr>
<td></td>
<td></td>
<td>Milwaukee Health Department</td>
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<td></td>
<td></td>
<td>Milwaukee Public Libraries</td>
</tr>
</tbody>
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*Initiative was no longer funded in 2021 at time of reporting*
Major Accomplishments and Assets

Continued to make gains on their 2017 Equity and Inclusion priorities:
1. Inclusive all areas of our staffing for programs, leadership and Board of Directors.
2. Create Inclusive environments
3. Diversify Vendors / Providers
4. Begin community engagement and reconciliation efforts on issues that disproportionately affect historically traumatized populations.

The Election Commission greatly expanded community partnerships to conduct voter outreach and education by dedicating grant funds to voter education activities and updating outreach materials.

Pivoted to continue to do outreach in safe ways through the pandemic.

In July 2020 launched Opportunity MKE, a housing mobility program to assist families living in high poverty neighborhoods find housing in low-poverty and high-opportunity neighborhoods.
Implementation Partner Spotlight: Department of City Development

In 2020, the City of Milwaukee Department of City Development (DCD) Planning Division utilized the Government Alliance on Race and Equity (GARE) Racial Equity toolkit to identify and proactively reduce barriers for residents, particularly residents of color, to participate in DCD’s neighborhood planning efforts. In 2021, they drafted the “Breaking Down Barriers to Participation in Neighborhood Planning: Implementation Plan.” The plan identifies practices that DCD Planning already carries out that have been successful in reducing barriers to participation for communities of color and also commits the Department to take additional action steps to overcome stakeholder and community identified barriers to participation. DCD Planning’s efforts began before the COVID-19 pandemic, which further exacerbated racial and ethnic disparities caused by social, economic and health disparities, and DCD remains committed to more meaningfully incorporate the voices of communities of color who have too often been underrepresented or unheard in the past. Early implementation actions in 2021 included establishing a Community Council to guide the Downtown Plan update, development of the EngageMKE online engagement platform, and updating the City Plan Commission bylaws to provide expanded notification to neighborhood residents during the rezoning process.
## Positive Mental Health

### Population Health Indicators

<table>
<thead>
<tr>
<th>System Level Indicator of Positive Mental Health</th>
<th>Baseline Data (year)</th>
<th>Current Data (year)</th>
</tr>
</thead>
</table>
| **Ongoing, High Intensity Mental Health Service Need**<sup>12</sup>  
*Service need is the overall clinical assessment of service needs in Milwaukee County and is intended to provide a frame of reference and an indication of expected need, as well as overall assessment of a participant’s service needs.* | 2,367 people served (2016)  
3,360 people served (2020) |
| **BIPOC Receiving Crisis Mental Health Services Compared to State Population Makeup**<sup>13</sup>  
*Percentage of people in Wisconsin who identified as Black, Indigenous, and people of color*<sup>*</sup> receiving crisis services compared to the BIPOC makeup in the state of Wisconsin. | 28.9% received crisis services  
18.2% of the WI population (2013-2017) |  |
| **BIPOC Receiving Crisis Services Compared to Non-Acute Mental Health Services**<sup>13</sup>  
*Count of individuals per 1,000 in the state of Wisconsin who identified as Black, Indigenous, and people of color*<sup>*</sup> who received crisis mental health services compared to non-acute, community-based mental health services. ** | BIPOC: 4.9 individuals per 1,000 received crisis services  
Non-BIPOC: 0.2 individuals per 1,000 received crisis services (2013-2017) |  |
| **Count of Opioid Deaths**<sup>14</sup>  
The count for all opioid deaths in Milwaukee County. | 288 (2016)  
301 (2017) | 326 (2019)  
424 (2020) |
| **Child Experienced Bullying in Past Year**<sup>15</sup>  
*Percentage of children in Milwaukee County who have experienced bullying in the past year.* | 14% (2015) | 16% (2018) |

*To fall within the Black, Indigenous, and people of color category an individual must have identified as either a nonwhite race (Black or African American, American Indian or Alaska Native, two or more races, Native Hawaiian or Pacific Islander, or Asian) or Hispanic or Latinx identity.  
**Non-acute mental health services include Community Support Programs, Comprehensive Community Services, Community Recovery Services, residential services, partial day services, court services, medication management, intake assessment, case management, outpatient services, supportive services, and some other mental health services not listed above. Non-acute mental health services exclude crisis intervention or emergency outpatient, emergency detention, and inpatient services.
### Action Step Tracking

#### Positive Mental Health

<table>
<thead>
<tr>
<th>Goal 1: Improve access to mental health services</th>
<th>2020-2021</th>
<th>Progress has not been made on this strategy but there is interest in re-engaging in the work</th>
<th>Partner is no longer working on this strategy</th>
<th>Implementation Partners who Reported</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.1 Build community capacity to provide mental health and addiction/substance abuse services</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>i. Reduce barriers to access mental health and substance use disorder treatment services</td>
<td>Progress has been made or work has been completed on this strategy</td>
<td>Milwaukee County Behavioral Health Division</td>
<td></td>
<td></td>
</tr>
<tr>
<td>ii. Increase coordination and utilization of City of Milwaukee and Milwaukee County programs, including Homeless Outreach Team, Crisis Intervention Team, Crisis Assessment Response Team, Medicine Disposal and Collection, Mobile Urgent Treatment Team</td>
<td></td>
<td></td>
<td></td>
<td>Office of Violence Prevention (OVP) Milwaukee Police Department</td>
</tr>
<tr>
<td>iii. Support the Milwaukee Coalition for Children's Mental Health Plan to improve children's mental health in Milwaukee</td>
<td></td>
<td></td>
<td></td>
<td>Milwaukee Coalition for Children's Mental Health</td>
</tr>
<tr>
<td>iv. Advocate for increased Medicaid reimbursement for targeted behavioral health services</td>
<td></td>
<td></td>
<td></td>
<td>Milwaukee Health Care Partnership</td>
</tr>
<tr>
<td>v. Support the development and implementation of Access HUBs.</td>
<td></td>
<td></td>
<td></td>
<td>Milwaukee Health Care Partnership</td>
</tr>
<tr>
<td>vi. Expand enrollment in the Comprehensive Community Services Benefit</td>
<td></td>
<td></td>
<td></td>
<td>Milwaukee Health Care Partnership</td>
</tr>
<tr>
<td>vii.</td>
<td>Expand psychiatric telemedicine including teleconsultation for children and pre- and post-partum women</td>
<td>Milwaukee Health Care Partnership</td>
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<tr>
<td>viii.</td>
<td>Increase capacity and number of addiction/substance abuse service providers</td>
<td>Milwaukee Health Care Partnership</td>
<td></td>
<td></td>
</tr>
<tr>
<td>ix.</td>
<td>Promote the integration of primary care clinics with integrated behavioral health</td>
<td>Milwaukee Health Care Partnership</td>
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<td></td>
</tr>
<tr>
<td>x.</td>
<td>Support mental and physical preparedness for pregnancy</td>
<td>Milwaukee Lifecourse Initiative for Healthy Families (LIHF)*</td>
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<td></td>
</tr>
</tbody>
</table>

1.2 Improve care coordination between service providers and community members

| i. | Increase care coordination capacity of community health workers | UniteMKE/UniteWI |
| ii. | Engage community health workers and parent peers to support families with young children in navigating culturally appropriate, family-directed services to meet their needs with dignity | Milwaukee Coalition for Children's Mental Health |
| iii. | Enhance the Milwaukee Police Department Homeless Outreach Team that works to identify individuals in need and engage in outreach | Milwaukee Police Department |

<table>
<thead>
<tr>
<th>Goal 2: Improve mental health perception and reduce stigma</th>
<th>Progress has been made or work has been completed on this strategy</th>
<th>Progress has not been made on this strategy but there is interest in re-engaging in the work</th>
<th>Partner is no longer working on this strategy</th>
<th>Implementation Partners who Reported</th>
</tr>
</thead>
<tbody>
<tr>
<td>2.1 Develop campaigns and educational activities that increase community awareness and knowledge of mental health and addiction/substance abuse</td>
<td>2020-2021</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>i. Continue and expand stigma-reduction public education presentations by persons with lived experience</td>
<td></td>
<td>NAMI Southeast Wisconsin</td>
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</tr>
<tr>
<td>ii. Expand Milwaukee Behavioral Health Division's efforts to reduce stigma around mental health and substance abuse</td>
<td></td>
<td>Milwaukee County Behavioral Health Division</td>
<td></td>
<td></td>
</tr>
<tr>
<td>iii. Expand creative visual arts experiences for youth and their families around stigma reduction</td>
<td></td>
<td>Milwaukee Coalition for Children’s Mental Health</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

2.2 Identify and support peer-to-peer community ambassadors to educate others about mental health and addiction/substance abuse

| i. Specific strategies to be determined by action team |  | Milwaukee Coalition for Children’s Mental Health |

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### Goal 3: Become a trauma-informed city

<table>
<thead>
<tr>
<th>Progress has been made or work has been completed on this strategy</th>
<th>Progress has not been made on this strategy but there is interest in re-engaging in the work</th>
<th>Partner is no longer working on this strategy</th>
<th>Implementation Partners who Reported</th>
</tr>
</thead>
</table>

#### 3.1 Provide Trauma 101 or trauma-informed service delivery training for community organizations, residents and city government employees

<table>
<thead>
<tr>
<th>i. Train all City of Milwaukee Health Department staff who provide direct services in trauma-informed care</th>
<th></th>
<th>Milwaukee Health Department</th>
</tr>
</thead>
<tbody>
<tr>
<td>ii. Continue practice of training all police officers on Fair and Impartial policing and Procedural Justice</td>
<td></td>
<td>Milwaukee Police Department</td>
</tr>
<tr>
<td>iii. Train all Milwaukee County Department of Health and Human Services staff in trauma-informed care</td>
<td></td>
<td>Milwaukee County Behavioral Health Division</td>
</tr>
<tr>
<td>iv. Train community organizations and residents in trauma-informed care</td>
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<td>SaintA</td>
</tr>
<tr>
<td>v. Adopt a trauma-informed approach to violence prevention in Milwaukee, across sectors, institutions and partners that acknowledge trauma and encourage trauma-sensitive approaches to violence prevention</td>
<td></td>
<td>Office of Violence Prevention (OVP)</td>
</tr>
<tr>
<td>vi. Promote and implement police practice that is trauma-informed and reduces elements of bias across government departments and other sectors, including education and youth serving organizations</td>
<td></td>
<td>Office of Violence Prevention (OVP)</td>
</tr>
<tr>
<td>vii. Offer ongoing, collaborative opportunities for training and capacity-building for organizational partners and community stakeholders to better understand best and promising practices in preventing violence and reducing trauma</td>
<td></td>
<td>Office of Violence Prevention (OVP)</td>
</tr>
<tr>
<td>viii. Offer training to providers, professionals, and first responders to better identify, engage, assess, and support youth and families who have experienced trauma</td>
<td></td>
<td>Office of Violence Prevention (OVP)</td>
</tr>
<tr>
<td>ix. Use validated assessment strategies to determine which social services are trauma informed, culturally responsive and useful for youth and families</td>
<td></td>
<td>Office of Violence Prevention (OVP)</td>
</tr>
</tbody>
</table>

*Initiative was no longer funded in 2021 at time of reporting*
Major Accomplishments and Assets

Trained nearly 60,000 participants from a variety of sectors on trauma informed care, equity & inclusion, and self-care & regulation for caregivers

Working with MPS to replace urban "hardscape" with trees and green space, which increases outdoor physical activity and ultimately, mental health

Implementation Partner Spotlight: UniteWI

UniteWI trains and develops Community Health Workers (CHWs), who are trusted and acquainted service providers of the communities they serve. Through community partnerships, care coordination, and culturally congruent care, UniteWI CHWs have been working to minimize costs while improving outcomes for the residents in our community, especially our Black and brown communities. CHWs often are a trusted source of information for people who are suspicious of medical systems because of historic racism and other factors that make health care less accessible. During the pandemic, the CHWs became frontline workers in that they were able to provide not only connection to clinical and medical services, but mental health techniques, tools, and care coordination with providers as well. UniteWI secured Medicaid contracting during the pandemic to increase the capacity of their community partnerships through reimbursement in order to address the Social Determinants of Health and increase the number of trained CHWs to respond to community needs. The CHWs further increased care coordination in Milwaukee by making referrals to appropriate mental health services following an assessment. Thank you UniteWI for your CHWs' commitment to assuring optimal health outcomes and positive mental health for all of our community members!
MKE Elevate Process Evaluation

What went well –

*Provided a framework for addressing the determinants of health – MKE Elevate created a plan that was aligned with other major citywide and foundational health department plans, and with the interests and priorities of community partners, through an inclusive and community-engaged process. The priority action areas and strategies developed and implemented in this plan have served as an important stepping stone to addressing basic needs and social structures that determine health status in Milwaukee, and help move MHD’s work further upstream and towards creating systems that promote health.

*Engaged non-traditional partners (i.e. MPD, DCD, MPS, DNS) in other city departments and across sectors to align work with health-promoting strategies

*Developed and implemented actionable strategies to center equity and eliminate racism.

What didn’t go well--

*Lack of implementation/lapse in leadership - From 2018- May 2020,

*Limited partner engagement – With limited staff capacity, a two year lapse in engagement, and competing demands from the COVID-19 pandemic response and other priorities, our efforts to maintain partner engagement and recruit new action team members were limited. Many implementation partners and steering team members were unable to participate in meetings throughout 2020-2021, and partners noted a lack of clear expectations and roles for partners to participate in the plan’s activities.

*Lack of evaluation and data collection - An evaluation plan was never developed and implemented for the MKE Elevate Plan for the 2017-2022 cycle, and data on strategies and outcomes was not systematically collected.

How did the outcomes of the project meet our expectations?

*Most strategies were implemented and demonstrated an impact on Milwaukee residents, especially in economic security, even though action teams weren’t re-engaged until 2020

Limitations to the evaluation:

*Because evaluation plan was not developed or measured at the outset, we have limited ability to identify and compare key outcomes

*Specific impacts of individual strategies were not tracked or measured

*Data available from 2020 on has to be read with the acknowledgement of COVID and limited services/operations

*Most available data sources are updated on a delay of at least one year and annually so it is difficult to measure changes
Recommendations

Possible actions to improve the MKE Elevate CHIP implementation process

<table>
<thead>
<tr>
<th>Cost</th>
<th>Difficulty</th>
<th>Low</th>
<th>Medium</th>
<th>High</th>
</tr>
</thead>
<tbody>
<tr>
<td>No/Low</td>
<td>Create MOU and Charter for Action Team and Steering Committee members**</td>
<td>Publish annual report with implementation tracking and progress updates*</td>
<td>Increase meaningful partnerships over time**</td>
<td></td>
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<tr>
<td>Medium</td>
<td>Create, coordinate or contract for Training and Technical Assistance (T/TA) for CHIP participants**</td>
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<tr>
<td>High</td>
<td>Hire external consultant group to co-create implementation and evaluation plan***</td>
<td></td>
<td>Initiate a Collaborative Data Dashboard among all CHIP partners with systems level data***</td>
<td></td>
</tr>
</tbody>
</table>

Expected Improvement:
***Substantial
**Moderate
*Minimal

**Recommendation #1:** Create MOU and Charter for Action Team and Steering Committee members

Justification:
- Clearly laying out the expectations, responsibilities, and levels of engagement for both Action Team members and Steering Committee members will reduce levels of uncertainty between the organizations’ and MHD’s roles within the CHIP implementation process

**Recommendation #2:** Initiate a Collaborative Data Dashboard among all CHIP partners with systems level data

Justification:
- Instead of changing the goals, objectives, and strategies within the CHIP to meet the quality and availability of current data to measure change, collaboratively collecting individual and system-level change data with community partners will develop the data we need to support impactful change (Collective impact data SSIR)
- Data guides shared decision making on mutual values – by aligning priorities, goals, and values of the Milwaukee community through data collection, it is possible to track progress and utilize data to its full potential for meaningful impact
References


Notes
In some instances, the titles of plans, coalitions, projects, or organizations have changed since the initial publication of the CHIP in 2017. We have updated some of these names in this report, so there may be discrepancies to the original report.