



Healthy Relationship Promotion Action Team COACH HWLI Site Visit-Minutes

Thursday, August 8th, 10-11:30pm

Eau Claire City-County Health Department

Room G009

Present: TJ Atkins, Emily Carlson, Sarah Driever, Abby Hinz, Gina Schemenauer, Annette Truitt, and Kaylee Lyons.

1. Community Health Improvement Plan- Root Cause Analysis

- a. Alan and Maria reviewed the social ecological model and how that impacts our life. They gave an overview of the root cause analysis process. First step is to develop a problem statement. Then we will write down why this is a problem in our community. We will organize by theme. This information will help us determine the data indicators we will choose to work on, as well as offer ideas on strategies we want to move forward.
- b. Developed a problem statement that is overarching our action team data. Can be positive, neutral, negative.**
 - i. Everyone is positively impacted by a lifetime of healthy relationships.
 1. This is important for healthy communities.
 - ii. Additional discussion on this sentence about adding language to reflect disparate populations, barriers, etc. Discussion included:
 1. race, gender, SES, minority groups, youth, resiliency, ACE's
 2. access to broader systems, who gets access?
 3. Immigration status
 4. Stigma
 - iii. Rewrote sentence to include additional factors that were discussed.
 1. When we teach skills and provide resources for healthy relationships now, we create safer, healthier communities for everyone in the future.
 - a. Think about how this sentence fits within the social ecological circle. Group members wrote but why's for this sentence. Placed them under each circle: individual, Family and social networks, Organizations and institutions, and communities and systems.
 - b. Group reviewed all the post-its and added additional thoughts.
 - c. Group then reorganized the post-it's into themes. They also discussed what is happening around the issues (thing we do/things being done) and what we want to continue to expand on (things to grow).

Policy (lack of consistency power)- shifting the conversation from treatment to prevention

- Public policies
- Not considered priority by all policy makers/ all school to institutionalize HR into policy/ curriculum
- Not seen as “public issue”
- Policies and programs are reactive and only address the symptom of an issue
- Need to be the “man with the microphone” to shift/frame narrative
- Lack of education
- “that’s not my problem” idea
- Things already happening: safe dates or similar EB
- Could incorporate into school policy, change power dynamic in policy influences
- Institutional healthy relationship education into curriculum (district wellness policy)

Social norms enforced by media

- Relational bullying
- Teen dating culture- peer pressure for unhealthy behaviors
- Social media impact
- Drama sells but also it’s relatable
- Social media romances an unhealthy relationship
- Media- how portrays socials,
- Glorified negative relationship in tv, movies, books,

Things we do: health holidays

Things to grow: continue to get ahead of holidays so we have perspective, grow our messaging, take positive spin

Lack of community resources

- Community needs more mental health and AODA services
- Unhealthy relationship creates other problems such as abuse, violence, neglect
- Insurance access vs. free resources (overloaded)
- Community resources
- Lack of integration of systems

Things being done: toolkit

Lack of school resource

- Not enough support for community folks to talk about these topics
 - limited school resources- adult/student relationships
 - Resources are not available for everyone

Things to grow: toolkit, safe dates

Skills and Awareness

- Little to no support network
- What is safe for you?
- Recognizing there is additional work
- Relatable because it's not easy being healthy in all relationships and it takes intentional effort and skills
- Some people don't have the knowledge of skills to have a healthy relationship

Things being done: toolkit

Things to grow: conversations at home and in community

Need for intersecting lens

- Stigma of asking for help/admitting here is a problem
- Language limitations,
- Cultural and gender norms
- What is safe for you
- Things being done: diverse coalition
- Expand our own lens- looking at diverse populations in our community/acknowledging other experiences

Things to being done: youth advisory group

Things to grow: continue growing youth voice involved

Models and Mentors for future relationships

- Not everyone has positive role models
- Negative family dynamics
- Not equal access to examples of stable healthy relationships
- Unhealthy modeling of relationships
- Family violence- lack of positive relationships
- People who are raised by families who don't have these skills. And they get stuck in a pattern and the cycle continues
- Everyone can model healthy behaviors and create teachable moments (coaches, faith teachers)
- Recognition of healthy/unhealthy behaviors- it's not easy!
- Important conversations aren't happening consistently at each developmental stage

Things being done: toolkit

- iv. Group discussed low hanging fruit of what would be easiest to accomplish from the list above.
 1. Low Hanging Fruit:
 - a. Adding health holidays to agenda
 - b. Conversations at home and in community
 - c. Master conversations and then can figure out who to talk to
- v. To select the top three data indicators, each group member was given three votes.

1. Top three data indicators selected included
 - a. *Bullying: high school*
 - b. *Sexual health: high school*
 - c. *Protective Factors*

You can find all minutes and agendas on our website located at www.ehealthycommunities.org.