2019 Annual Report **CUPH Center for Urban Population Health** Data-driven. Evidence-based. Community-engaged.



CUPH Center for Urban Population Health

Data-driven. Evidence-based. Community-engaged.

OUR MISSION

Advancing population health research and education to improve the health of urban communities.

OUR VISION

To be a destination where researchers can lead innovative, community-connected urban population health research and education.

OUR PRINCIPLES AND VALUES

- Promoting a **population health framework** as a unifying approach for addressing health determinants, interventions, and outcomes
- Forging equitable and sustainable partnerships with community and academic experts from diverse organizations, backgrounds, and disciplines
- Creating an environment of innovation
- Using research to **impact** effective policies, programs, and practices
- Fostering knowledge transfer through clinical and community-based learning
- Reducing health disparities
- Delivering exceptional value by integrating the best available resources and methodologies to address key issues with integrity, objectivity, and responsiveness

The Center for Urban Population Health is a partnership among the UW School of Medicine and Public Health, UW-Milwaukee and Advocate Aurora Research Institute. Founded in 2001, we are approaching our 20th anniversary.





C Aurora Research Institute™

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ANNUAL REPORT 3

Greetings from the Center for Urban Population Health!

Dear Colleagues:

Thank you for another productive year in support of the Center for Urban Population Health (CUPH) mission of advancing population health research and education to improve the health of urban communities.

Our mission of advancing population health research and education is more relevant than ever today. Although this annual report highlights activities in 2019, it is being released during the coronavirus pandemic. One of our primary focuses as a Center is on health disparities, and in the greater Milwaukee area, we see health disparities in who is most affected by the virus. In an April 2020 report prepared by the Center for Economic Development at the University of Wisconsin-Milwaukee, African Americans are disproportionately affected in comparison to whites in contracting the virus and dying from it. As a result, our Center strengthens its resolve to reduce and eliminate health disparities.

In the pages that follow, several of our 2019 projects are highlighted as is the unfortunate Milwaukee history that has led to the need for these projects to address disparities in health. In addition, the following events and activities were part of our Center work in 2019.

Team Science Spark Session: In October 2019, we hosted a Team Science Spark Session to bring together research faculty, investigators, and staff from our three core partners: Advocate Aurora Health/Aurora Research Institute, the University of Wisconsin-Milwaukee , and the University of Wisconsin School of Medicine and Public Health. In the three topic areas of healthy aging, maternal and child health, and substance use, researchers came together to meet each other through speed networking. Paired researchers each had a few minutes to talk about their research and what they were looking for in a partner before rotating to the next person to see what research connections or sparks might be made. In total, we had over 60 individuals attend this well received event.

Healthy Aging Roundtable: In addition to the Team Science Spark Session, we also hosted a Healthy Aging Roundtable for researchers, community program directors, and advocates to meet and greet each other. The roundtable focused on the work of Dr. Helen Barrie, a healthy aging scholar visiting from the University of Adelaide in Australia. Dr. Barrie's work examines the influence of the built environment on the health and wellbeing of older adults. In particular, the Men's Sheds Model was discussed as a research-based program to address social isolation among older men. The Men's Sheds Model is being disseminated and evaluated here in the US.

Projects with Faculty, Investigators, and Staff: In

2019, we also saw increased growth in the number of grants submitted and projects started in partnership with



faculty, investigators, and staff from our three core partners. One of these included a grant submitted to the National Institutes of Health on lead filter usage among residents, another, a proposal on Mindful Climate Action for health and resiliency in disadvantaged populations, and a project proposal submitted to an endowment to support a Transitions Clinic for individuals recently released from the criminal justice system.

As the Center strives to fulfill its mission in 2020, we presently are working on several COVID-19 grant applications and projects, including one with the African American Breastfeeding Network.

Please enjoy our 2019 annual report, and please feel free to check out our updated website at <u>https://www.cuph.org/.</u>

Sincerely,

Lis Berger

Lisa Berger, PhD

Center for Economic Development (April 2020). Milwaukee's Coronavirus Racial Divide: A Report on the Early Stages of COVID-19 Spread in Milwaukee County. Milwaukee, WI: College of Letters and Science, University of Wisconsin-Milwaukee. <u>https://uwm.edu/ced/wpcontent/uploads/sites/431/2020/04/COVID-report-final-version.pdf</u>

What does it mean to *Live Well?*

Living well is a common goal. It's complex. We all define it differently; it usually includes physical and mental health as well as overall quality of life.

Health starts *where one lives, studies, works and plays*. Yes, health care is important; it is estimated to contribute to about 20% of our health and wellness. The vast majority lies in the other determinants. Regardless of how one defines living well or health, we all don't experience it the same. We all don't have the same opportunity to experience health and wellbeing equally.

Health Disparity vs Health Inequity

All health indicators represent differences across health outcomes, but in order to understand certain disparities, it is important to understand the history that led to these disparities. All health inequities are health disparities, but not all health disparities are health inequities.

Though sometimes used interchangeably, disparity and inequity have different definitions. According to MN Department of Health: health disparities are differences in health status and mortality rates across population groups, which can sometimes be expected, such as cancer rates in the elderly versus children; health inequities are differences in health status and mortality rates across population groups that are systemic, avoidable, unfair, and unjust, such as breast cancer mortality for black women versus white women.ⁱ

History Matters

Health inequities are systemic, meaning specific programs and policies have perpetuated these injustices. An article in <u>WisContext</u> explains that banks in Milwaukee denied loans to people of color in the 1930s. The article further states that banks, the government, and real estate agencies purposefully denied African American families opportunities for loans and housing. These actions are known as redlining and prevented African American families from home ownership, creating segregated neighborhoods throughout Milwaukee.ⁱⁱ



Minority families were forced into neighborhoods with declining housing stock, putting these communities at a higher risk for environmental health issues. Due to neighborhood location, access to quality medical care and education is also strained for African American communities. Being denied loans to buy homes also prevented the accumulation of generational wealth for many African American families.ⁱⁱ

Visit full article and interactive map.

Redlining Negatively Impacts Health

Redlining negatively impacted the health of communities and these health outcomes are still seen today. Families that experienced redlining were more likely to be renters of poor housing stock. Poor housing stock in older homes means that environmental health risks such as deteriorating lead-based paint are exposed. Therefore, families that were impacted by redlining were more likely to face health risks such as <u>lead</u> <u>poisoning.</u>ⁱⁱⁱ

A <u>recent study</u> from the University of Wisconsin-Milwaukee showed an association between child blood lead levels and firearm violence.^{iv} This progression demonstrates that forcing certain communities into poor neighborhoods with deteriorating housing stock leads to negative health effects that can impact communities for generations.

Wealth Affects Health Equity

One of the biggest barriers to health equity faced by communities who experienced redlining is a lack of generational wealth. Because families were denied loans to buy homes, these families were unable to accumulate equity in the form of wealth. Without owning property, families did not pass on equity to their children or their children's children.

The <u>Robert Wood Johnson Foundation</u> states that wealth is essential for health equity. Purposeful government policies and systems prevented certain communities from obtaining generational wealth. Though there are disparities in income between African Americans and white communities, the disparities in inherited wealth are far starker.^v

Individuals with higher wealth have lower rates of chronic disease and longer lives.^{vi} Additionally, the <u>report states</u> these individuals have better health outcomes, including "lower mortality, higher life expectancy, and decreased risks of obesity, smoking, hypertension, and asthma."^{vi} Overall, generational wealth is essential for health equity in all communities. Wealth allows communities to have more access to opportunities such as education and health care. These opportunities help shape the health of families and generations to come.

Understanding the history and its effects on health and well-being is critical. It provides greater context for the determinants of health and serves to prioritize health issues, develop health policy and shape effective health programs.

The Center and its affiliates are actively partnering to **identify**, **design**, **implement and measure** the many aspects that contribute to **living well**. Following projects highlight examples of our collective work in these areas.

UW Population Health Fellow, Maddie Johnson, contributed to the research and writing of this section.



Segregated By Design is a movie based on the Richard Rothstein book, The Color of Law: A Forgotten History of How our Government Segregated America. The film examines the forgotten history of how our federal, state and local governments unconstitutionally segregated every major metropolitan area in America through law and policy.

References

^{i.} <u>http://www.health.state.mn.us/</u> <u>divs/che/reports/</u> <u>ahe_leg_report_020114.pdf -</u>

^{ii.}<u>https://www.wiscontext.org/</u> <u>how-redlining-continues-shape-</u> <u>racial-segregation-milwaukee</u>

^{iii.}https://www.childtrends.org/ redlining-left-many-communities -color-exposed-lead

^{iv.}<u>https://</u> www.sciencedirect.com/science/ article/pii/S001393511930619X</u>

*<u>https://www.brookings.edu/ blog/up-front/2020/02/27/ examining-the-black-whitewealth-gap/</u>

^{vi.}<u>https://www.rwjf.org/en/</u> <u>library/research/2018/09/wealth</u> <u>-matters-for-health-equity.html</u>



Improving neighborhood life expectancy

Advocate Aurora Health recently announced that it would commit \$50 million over the next five years in Illinois and Wisconsin to help lessen economic, racial and environmental disparities.

The health system said it would partner with community-development financial institutions in initiatives such as small and diverse business development and affordable housing as well as support community health centers and food centers.

The investments, which will begin next year, will focus on low-income communities with lower life expectancy.

"By our very nature, hospitals and health systems are anchor institutions in the neighborhoods we serve, and the well-being of our communities will always be an institutional priority," Cristy Garcia-Thomas, Advocate Aurora Health chief external affairs officer, said in a statement.

Advocate Aurora Health is a member of the Healthcare Anchor Network, a network of 45 health care systems designed to improve the communities they serve. This network announced 13 other member organizations had made similar pledges to community improvement initiatives by health providers in the U.S.

"There is a known correlation between income and health status of communities," said Jim Skogsbergh, Advocate Aurora Health president and CEO. "That's why we're focused on empowering the people and neighborhoods we're so privileged to serve and opening new doors that help distressed communities to join the economic mainstream. Putting our resources to use in a way that addresses the root causes of inequity and provides a gateway to prosperity is a testament to our commitment to helping people live well both within and beyond our walls."

AAH partnered with the Center to create a baseline study of the life expectancy at birth for the counties (zip code level) served by Advocate Aurora Health. This baseline study will allow AAH to prioritize neighborhoods for investments and track improvement over time. The report and interactive map will be published soon at aah.org.

Partners:

- Advocate Aurora Health
- State of Wisconsin Department of Health Services
- Illinois Department of Public Health
- Alameda County Public Health Department
- City of Milwaukee Health Department
- UW School of Medicine and Public Health

Funding: Advocate Aurora Health



Milwaukee Partnership Schools Project

A large body of evidence links education with health. In a <u>Robert Wood Johnson Foundation</u> <u>brief</u>, three major interrelated pathways are examined through which educational attainment is linked with health: health knowledge and behaviors; employment and income; and social and psychological factors.

The Center understands how critical the linkages are between education and health and has recently expanded its portfolio to include researchers and projects that seek to understand and improve education and therefore the future health of our communities.

The Milwaukee Partnership Schools Project is a collaborative effort between Milwaukee Public Schools (MPS), City Year Milwaukee, and the Boys & Girls Club of Greater Milwaukee.

It provides a coordinated set of supports to improve outcomes for students at four MPS schools. The initiative began during the 2015-16 school year. Intended outcomes include academic growth, improved school culture, and increased social and emotional skills. An external evaluation conducted by the Wisconsin Evaluation Collaborative at the University of Wisconsin-Madison in August 2019 reported improved school culture with declines in both the percentage of students at Partnership schools with at least one office disciplinary referral (ODR) and the average number of ODRs by students who had at least one.

The evaluation also included an analysis of the STAR exam and found an increasingly positive effect the longer that students remained enrolled in Partnership schools, particularly in math. The Center provides collaboration leadership for the Milwaukee Partnership Schools Project including communication, collaboration, vision, accountability, and facilitation.

This work includes a field guide, an educational institute, and ongoing meetings to build the elements needed for success. These elements include; identifying priorities, determining tactics, setting and tracking benchmarks, and building backbone support.

Partners

- Milwaukee Public Schools
- City Year Milwaukee
- Boys & Girls Clubs of Greater Milwaukee
- UW-Milwaukee

Funding: TOSA foundation



Breastfeeding Employer Supported Time

Steps to Supporting Women in the Workplace

has been increasing worksite lactation support for low-income women through its programming. The African American Breastfeeding Network (AABN) reaches employers and employees in the targeted industries in Milwaukee County through an awareness campaign to promote the Reasonable Breaktime for Nursing Mothers Provision. AABN also engages employers to create, refine and/or implement supportive lactation practices in the workplace.

Engagement and Reach

Serve Marketing created an ad campaign in the form of digital billboards that were at 20 bus shelter locations and in transit buses and shared on media coverage for a few days.

Educational materials for businesses were developed including a brochure and a door hanger that covered information on the benefits of breastfeeding and the law requiring businesses to offer space and time for mothers to breastfeed at work. These materials had additional resources and contact information listed on them in case employers would have additional questions about the materials. After receiving feedback from African American women about the business education materials, they were mailed to businesses in Milwaukee County.

The Work Continues

AABN continues to host the Community Breastfeeding Gathering monthly, with part of the gathering focusing on returning to work and school. Mothers learn how to talk with their employer about breastfeeding at work and how to gauge support from supervisors, colleagues, and the community. AABN provides mothers with support on how to navigate returning to work and breastfeeding; this support includes (1) case management; (2) speaking with their employer; and (3) offering resources to that employer.

The interdisciplinary teams and collective impact model that was developed to support dissemination has and will continue to be utilized to disseminate program materials.

The Center has had a long-standing academic partner relationship with AABN for this and other projects seeking to improve breastfeeding.

Partners:

- African American Breastfeeding Network
- Serve Marketing
- Lifecourse Initiative for Healthy Families
- UW-Milwaukee

Funding: Wisconsin Partnership Program



Improving rivers to be swimmable, fishable, livable

<u>Research suggests</u> that even 20 minutes in an urban park helps lower stress-hormone levels. Evidence has also linked stress to worsening or increasing the risk of conditions like obesity, heart disease, Alzheimer's disease, diabetes, depression, gastrointestinal problems, and asthma.

The Community Rivers Project (CRP) of **Riveredge Nature Center** brings communities together to inspire, engage, and inform them about protecting the health of the Milwaukee River watershed.

Through recreational and educational programming, residents gain appreciation for the importance of watershed health and learn positive land management practices.

Since starting in 2017 in the Village of Newburg, CRP has expanded its reach throughout the Milwaukee River Upper Watershed, now including the Villages of Saukville and Grafton and expanding to Fredonia and Kewaskum during the summer of 2020. In addition to these communities, partners include the Institute of Museum and Library Services, Wisconsin Department of Natural Resources, Milwaukee Riverkeeper, Wisconsin Coastal Management Program, Fund for Lake Michigan, Sweetwater, Milwaukee Metropolitan Sewerage District, Ozaukee County, and Washington County.

CUPH provides evaluation support for this complex, evolving initiative. Ultimately, the goal is to increase the health of the Milwaukee River watershed, so that the water is swimmable, fishable, and livable for everyone.

Toward that end, the project has connected with an ever-increasing number of residents. Through a community asset approach, residents are now leading programs to inspire and educate peers about positive land management practices, while Riveredge staff help to connect watershed-focused individuals and organizations to each other to increase coordination and impact.

Partners

- Riveredge Nature Center
- Villages of Newburg, Saukville and Grafton
- UW-Milwaukee
- See article for full list



Bringing access to the barbershop

"I tell all my barbers that everyone who sits in your chair is not there by chance, and if you can help them in any way, then do it." Gee's owner Gaulien "Gee" Smith

The Gees Wellness Clinic is a barbershop initiative that builds on the trust and strength of the barbershop among African American men. This critical, cultural asset has an opportunity to bridge client needs with the many assets that exist in Milwaukee related to health and social services. This initiative meets men where they are and support those who need assistance connecting to appropriate primary and behavioral health homes and/or social service providers and resources.

This project was co-created with Anthem and Gee's Barbershop. The barbers refer their clients to a Wellness Gee'nius who provides an assessment and enrolls them into the program. The Wellness Gee'niuses are staffed by Anthem staff.

It's "an opportunity to be a beacon of awareness," said Anthony Woods, Medicaid plan president at Anthem Blue Cross and Blue Shield. The initiative is possible through a strong partnership with the following organizations:

- Advocate Aurora Health
- City of Milwaukee Health Department
- Covering Wisconsin
- Froedtert & Medical College of WI
- Hayat Pharmacy
- Goodwill
- The Life Center
- MATC
- Milwaukee Health Services, Inc.
- Progressive Community Health Centers
- Pete's Food Market
- Vivent (Formerly ARCW)

The project is funded by Anthem's Social Determinants of Heath grant.

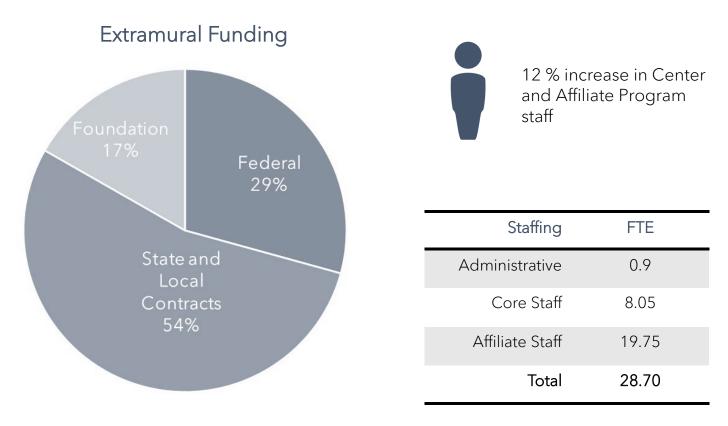
The initiative has been supported through a UWSMPH partnership with the Center for Community Engagement and Healthcare Partnerships and the following programs:

- Life Course Initiative for Healthy Families
- All of Us Research Program
- Wisconsin Alzheimer's Institute, Regional Milwaukee Office

Center for Urban Population Health provides evaluation.

By the Numbers 2019

The return on the Center's mission and joint partnerships translates into a healthy and sustainable Center and significant financial support to local initiatives.



Across 27 projects.



\$360,000 invested in 2019 from founding institutions, Aurora Research Institute, UW-Milwaukee and UW School of Medicine and Public Health

\$2,184,131 grants and contracts awarded in 2019 to Center faculty and staff

For every \$1 invested, we have returned 6.1 times in extramural funding.

Human Capacity 2019

LEADERSHIP



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Professor and Associate Dean for Public Health and Community Engagement, UW School of Medicine & Public Health

Our staff and faculty have joined the Center because of their desire to use their talents, skills, and expertise in partnership with providers, community leaders, organizations and residents in identifying, testing and evaluating solutions to the challenges that prevent communities from realizing their full health potential.

2019 Faculty & Staff

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Center Scientists & Affiliates with Active Projects | 2019

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Claudia VanKoningsveld, WISDOM (Wisconsin's Interfaith Coalition)

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Aleksandra Zgierska, MD, PHD, UW School of Medicine and Public Health

Selected Publications and Presentations 2019

Publications

Arizmendez NP, Kotovicz F, **Kram JJF, Baumgardner DJ.** Multimodal local opioid prescribing intervention outcomes in chronic noncancer pain management. J Am Board Fam Med 2019;32:559-566.

Baumgardner DJ. Defining patient-oriented research for the average person (and potential research partner). J Patient Cent Res Rev 2019;6:4-6.

Baumgardner DJ. Social isolation among families caring for children with disabilities. J Patient Cent Res Rev 2019;6:229-232.

Baumgardner DJ. Suffering in silence: is gastroparesis underdiagnosed? J Patient Cent Res Rev 2019;6:133-134.

Beck, B., **Zusevics, K.L**, & Dorsey, E. (2019). Why urban teens turn to guns: urban teens' own words on gun violence. Public health, 177, 66-70.

Behrens JA, **Greer DM, Kram JJF**, Schmit EJ, Forgie MM, Salvo NP. Management of the third stage of labor in second trimester deliveries: how long is too long? Eur J Obstet Gynecol 2019;232:22-29.

Berger, L. K., Blair, K., & Hein, C. (2019). Basic computer skills and computer preferences of inner-city hospitalized medical patients: Implications for webbased alcohol screening and brief intervention. Social Work in Health Care, 58, 382-391. doi: 10.1080/00981389.2019.1575942

Burns JR, Kram JJF, Xiong V, Stark Casadont JM, Mullen TA, Conway N, Baumgardner DJ. Utilization of acupuncture services in the emergency department setting: a quality improvement study. J Patient Cent Res Rev 2019;6:172-178.

Doyle J, Abraham S, Feeney L, **Reimer S,** Finkelstein A (2019) Clinical decision support for high-cost imaging: A randomized clinical trial. PLoS ONE 14(3): e0213373. https://doi.org/10.1371/ journal.pone.0213373 **Green-Harris G**, Coley SL, Koscik RL, **Norris NC**, **Houston SL**, Sager MA, Johnson SC and Edwards DF (2019) Addressing Disparities in Alzheimer's Disease and African-American Participation in Research: An Asset-Based Community Development Approach. Front. Aging Neurosci. 11:125. doi: 10.3389/ fnagi.2019.00125

St. Clair MC, Sundberg G, **Kram JJF**. Incorporating home visits in a primary care residency clinic: the patient and physician experience. J Patient Cent Res Rev 2019;6:203-209.

Zusevics, K. L., Kaemmermer, N., **Lang, J.**, Link, J., & Dot. (2019). A Unique Approach to Quality Improvement within the Stroke System of Care Utilizing Developmental Evaluation. Accepted for publication in Health Promotion Practice.

Presentations

Blackwell, D., Ward, J., & **Zusevics, K.L.** (2019). Community Doula Initiative: Addressing Maternal and Infant Mortality Disparities through Community-Building and Community Voice. Poster presentation at the 2019 Women's Health and Health Equity Research Lecture and Symposium. Madison, WI.

Burns J (presenter), Kram JJF, Xiong V, Stark Casadont J, Mullen T, Conway N, **Baumgardner DJ**. ED acupuncture: feasibility, acceptability, and impact on pain. Poster presentation. 2019 American Pain Society's Scientific Meeting, April 3-6, 2019, Milwaukee, WI.

Fitch, J., **Zusevics, K. L**., Dickert, S., Parker, J., & Flower, M. (2019). Public Health Solutions To Gun Violence. Workshop presentation at the National Association of Social Workers - Wisconsin Chapter. Milwaukee, WI.

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Khan A, **Klumph M**, Macias Tejada JA, Malone M. Delirium consultative clinic: an innovative model of care to prevent cascade of problems after delirium. Presidential poster session presentation. 2019 Annual Scientific Meeting of the American Geriatrics Society, May 2-4, 2019, Portland, OR.

Kram JJF (presenter), Smaida S, Calderon Torres W, Ohly S, **Baumgardner DJ**. Specialty Access for the Uninsured Program (SAUP): system costs before and after enrollment. Poster presentation. North American Primary Care Research Group 47th Annual Meeting, November 16-20, 2019, Toronto, Ontario, Canada.

Lemke M, Knox K, Buelow M, Umhoefer-Wittry T, Suri P. Integrating wellness into your classroom with simple student-led techniques: lessons from TRIUMPH. University of Wisconsin Madison School of Medicine and Public Health's Medical Education Day, May 17, 2019, Madison, WI.

Macias Tejada JA, Klumph M, Heslin K, Le Gros CR, Khan A, Wardynski M, Malone M. HELP: a quality improvement project of a delirium prevention program. Poster presentation. 2019 Annual Scientific Meeting of the American Geriatrics Society, May 2-4, 2019, Portland, OR.

Nezami B (presenter), Peterson LM, **Klumph M**, Reindl L, **Kram JJF**, Singh M, Kramer DJ. Impact of obesity on ventilator-associated events. Oral presentation. Society of Critical Care Medicine. February 17-20, 2019, San Diego, CA.

Smaida SA, Calderon Torres W, **Kram JJF**, Tong M, Ohly S, **Baumgardner DJ** (presenter). Characteristics of patients in the Specialty Access for the Uninsured Program (SAUP). Health Care Systems Research Network Conference, April 8-10, 2019, Portland, OR.

Toberna CP, William HM, **Baumgardner DJ (presenter)**, **Kram JJF, Heslin K.** Epidemiologic survey of Legionella antigen tests in Eastern Wisconsin, USA. Poster presentation. North American Primary Care Research Group 47th Annual Meeting, November 16-20, 2019, Toronto, Ontario, Canada. White, H., **Zusevics, K. L., & Lang, J**.,(2019). Improving Children's Mental Health Through School And Community Partnerships. Poster presentation at the 2019 Advancing Behavioral Health Summit. Wisconsin Dells, WI.

White, H., **Zusevics, K. L., Lang, J.**, Hartley, J., & Ali, L. (2019). A Collaborative Approach to Assessment and Data Collection: The Social Emotional Learning Landscape in Racine Unified School District. Poster presentation at the 2019 Social and Emotional Learning Exchange, Chicago, IL.

2019 Community Reports

Bunyer, M. and Berger, L. (2019) Finding Your Best Self Workshop Evaluation Study

Bunyer, M. and Berger, L. (2019) Matrix Model Workshop Evaluation Study - Key Supervisors

Bunyer, M. and Berger, L. (2019) Matrix Model Workshop Evaluation Study - Staff

Bunyer, M. and Berger, L. (2019) TANF AODA Consumer Demographics & Outcomes Analysis

Bunyer, M. and Berger, L. (2019) TANF AODA Program 2018 Annual Evaluation Report

Corbett, M. and Bunyer, M. (2019) NIATx Collaborative Attendee Survey Results

Corbett, M. and Bunyer, M. (2019) NIATx Storyboard Marketplace Checklist Results

Palmersheim KA, Zusevics K. L. (2019). Wisconsin Tobacco Facts: Consumption, Mortality, and Morbidity. Milwaukee, WI: University of Wisconsin-Milwaukee, Center for Urban Population Health; 2019 (March).

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