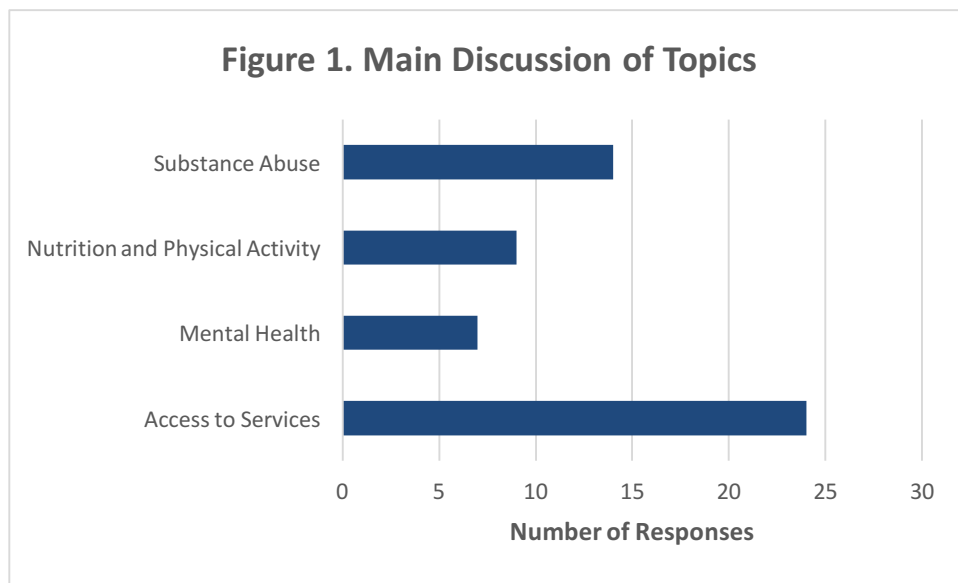


At the Duffield meeting there were 10 attendees sitting around 2 tables. Data were captured using the World Café approach to large group discussion, which yields a set of notes taken by table moderators during small group discussions taking place over multiple rounds. For the purpose of the Community Health Roundtable Meetings, participants were asked to address in their conversations the question, “**What can you do to improve health in the community?**” At the end of two rounds of small group discussion, notes were collected from the table moderators, or “Table Hosts”, to be used for a final large group discussion to allow for further comment and clarification. These notes have been collated and analyzed with the results presented below.

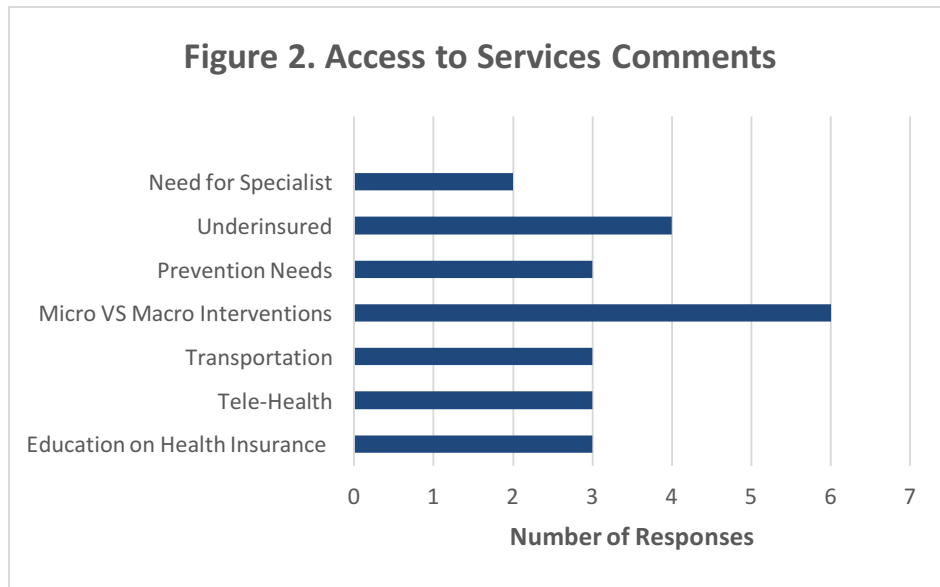
Main Topics of Discussion

These are major categories of discussion among the participants, within which several sub-categories were identified.

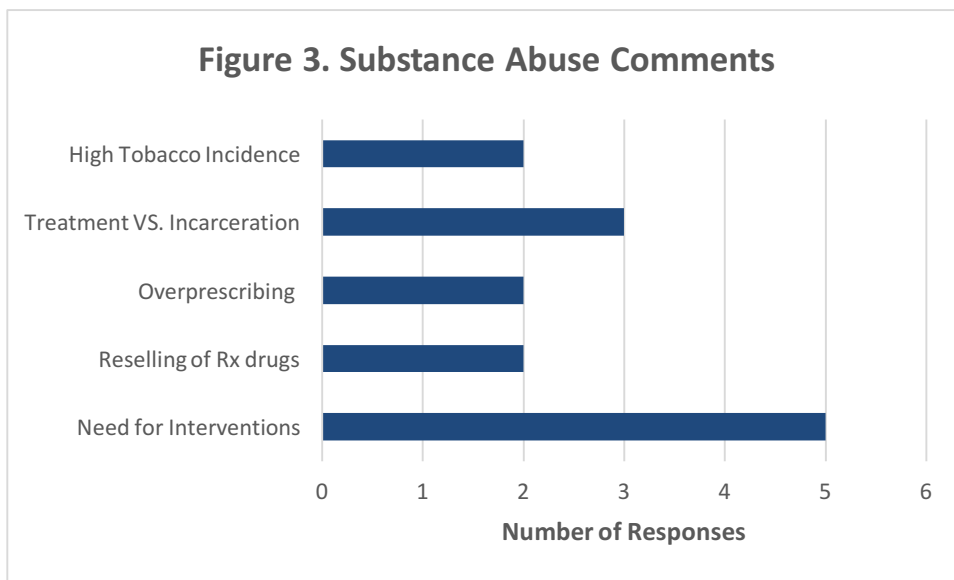
- Mental Health
- Substance Abuse
- Nutrition and Physical Activity
- Access to Services



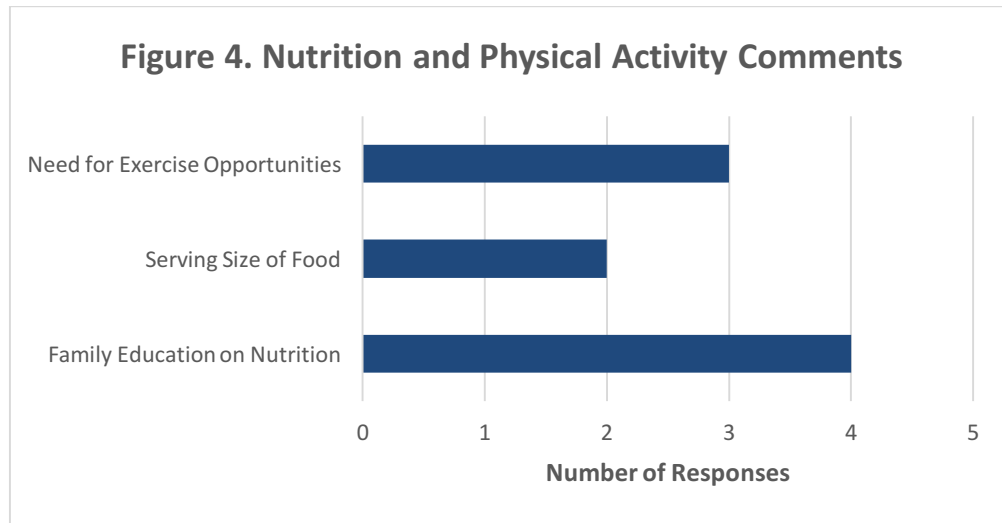
Access to Services was the most talked about topic during the discussion. In order to identify specific categories within the discussion around access, comments were broken out and considered individually. Topics under access to services included the problem of underinsured individuals, prevention needs, increased specialist, Micro and Macro Intervention options, transportation, tele-health and education no health insurance. Micro and Macro Interventions included comments around individual interventions causing cumulative costs, underserved populations and integrating strategies through community focus. Figure 2 illustrates the Comment distribution within this topic.



Substance Abuse was the second largest topic of concern among the attendees. Focus areas within this topic included: high tobacco incidence, reselling of prescription drugs, overprescribing, treatment options before incarceration and the need for interventions. Figure 3 shows the distribution of Comments around these categories.



Nutrition and Physical Activity was a prominent concern among the meeting participants. Folks indicated a need for education in the schools around nutrition and for the family as well as the need for convenience and increased availability of exercise opportunities. Sub-categories developed for this summary analysis need for exercise opportunities, serving size of food and family education on nutrition. Figure 4 displays Comment frequencies for these subgroups.



Mental Health comments were considered separately from substance abuse in order to identify specific mental health needs within the community. The discussion around mental health dealt with lack of access to resources, mental health not being a priority, and culture and policy change. Many felt there was a lack of adolescent mental health care and inpatient facilities. Figure 5 displays Comment frequencies for this discussion topic.

