

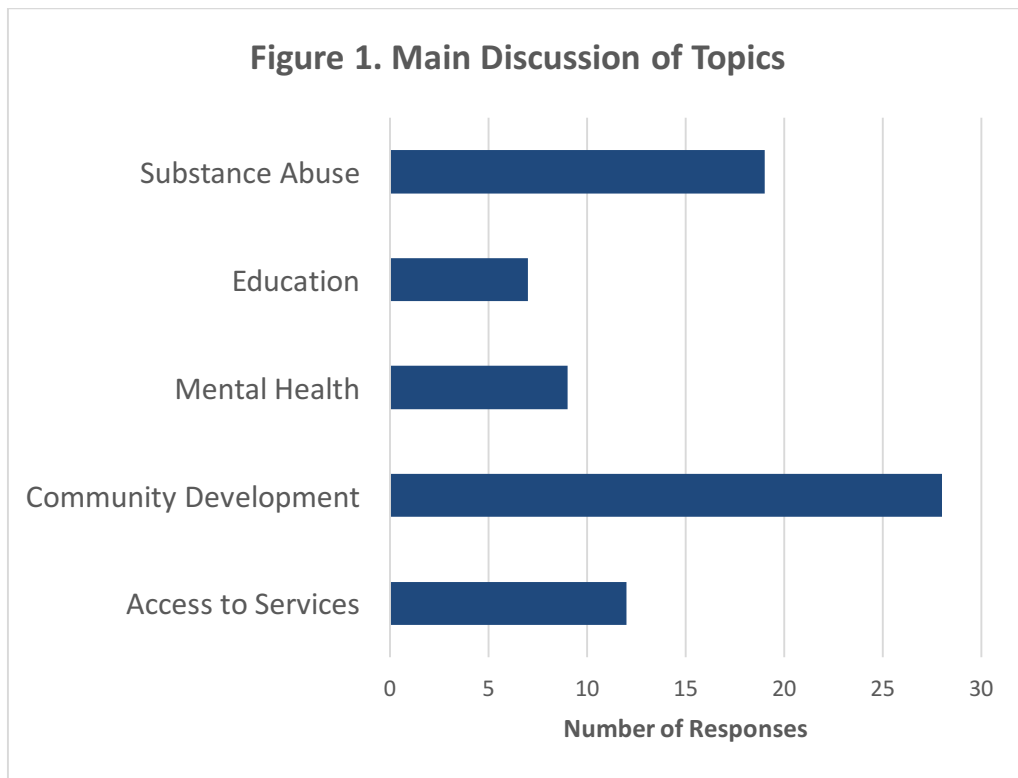


At the Johnson City meeting there were 9 attendees sitting around 2 tables. Data were captured using the World Café approach to large group discussion, which yields a set of notes taken by table moderators during small group discussions taking place over multiple rounds. For the purpose of the Community 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.

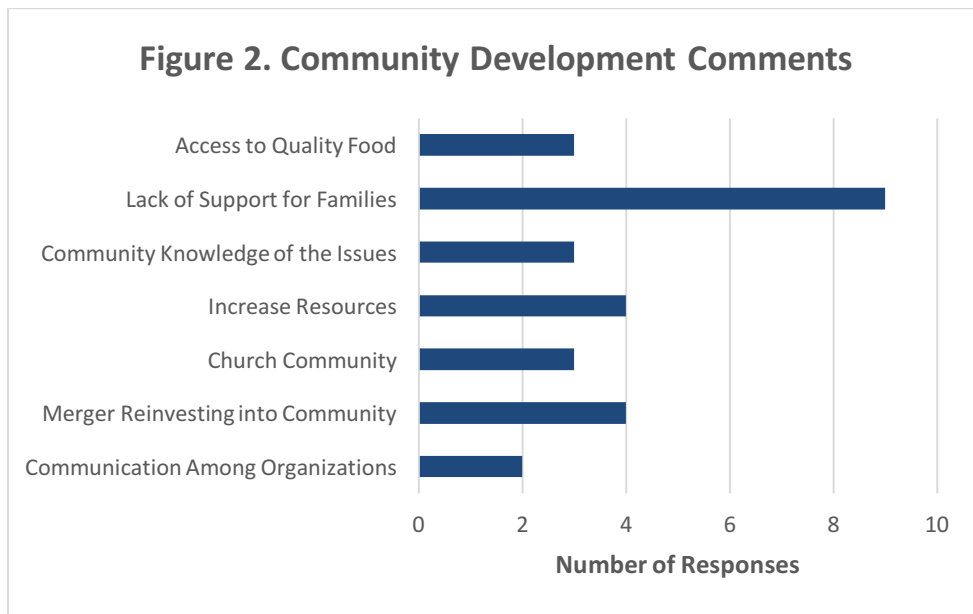
**Main Topics of Discussion**

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

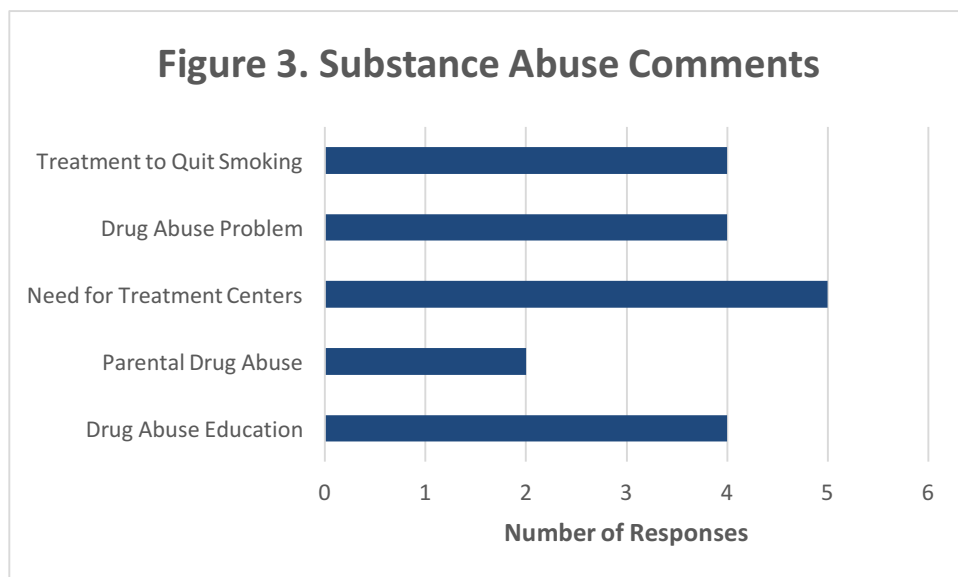
- Substance Abuse
- Education
- Mental Health
- Community Development
- Access to Services



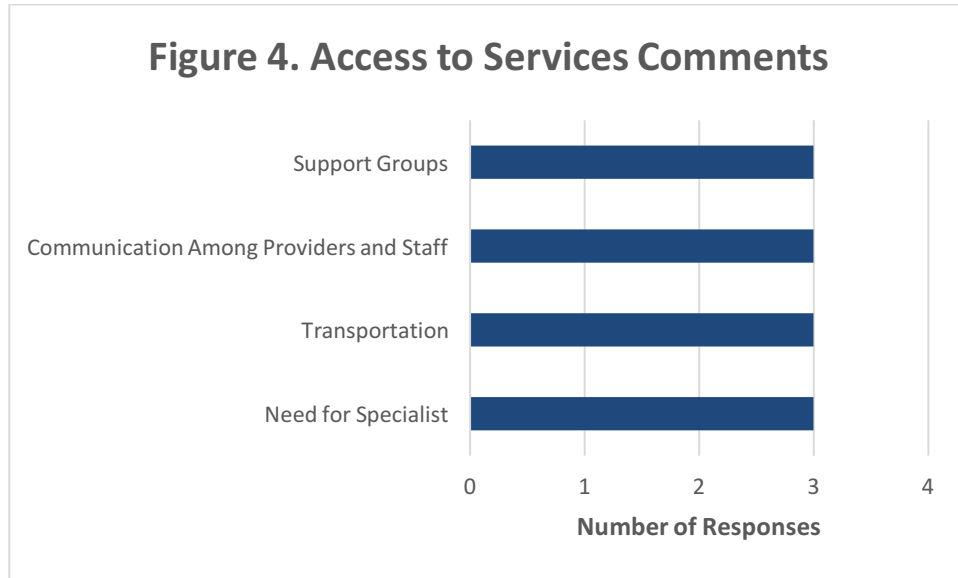
**Community Development** was the most talked about topic during the discussion. In order to identify specific categories within the discussion around community development, comments were broken out and considered individually. Topics under community development included access to quality food, lack of support for families, community knowledge of the issues, increasing resources, the need for church communities, concerns about the merger investing in to the community and communication among organizations. Figure 2 illustrates the Comment distribution within this topic.



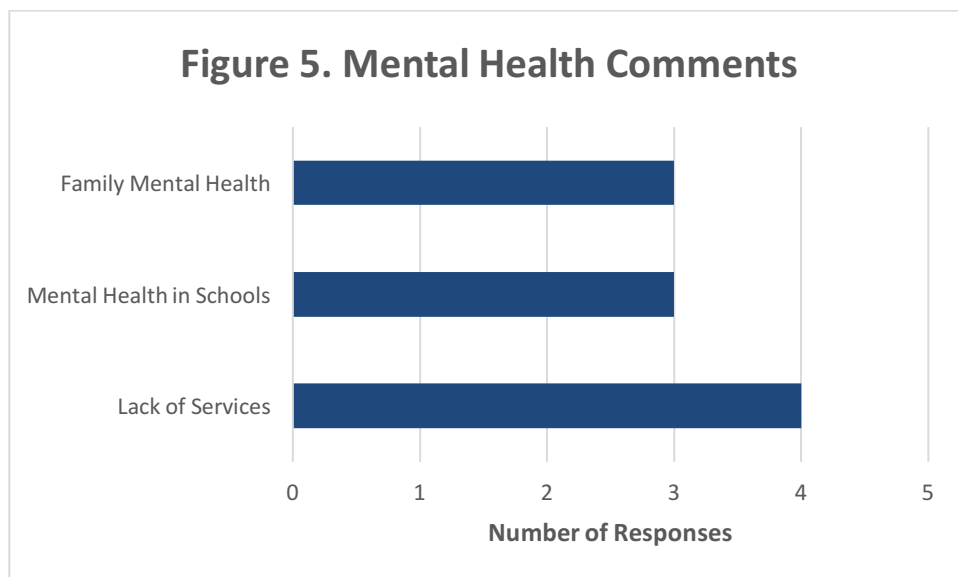
**Substance Abuse** was the second largest topic of concern among the attendees. Focus areas within this topic included: the need for treatments to help quit smoking, the recognition of the drug abuse problem, need for treatment centers, parental drug abuse and the need for drug abuse education. Figure 3 shows the distribution of Comments around these categories.



**Access to Services** was a broad topic that was prevalent within every major discussion topic. Subgroups within the topic were the need for support groups for chronic conditions, transportation, the need for specialist and communication among hospital providers and staff. Participants indicated the need MSHA to accept BCBS and communication among nurses and doctors when new patients are admitted. Figure 4 displays Comment frequencies within the 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, need for mental health services in schools and family mental health services. Many felt there was a need for education and services to be provided in schools regarding mental health. Figure 5 displays Comment frequencies for this discussion topic



**Education** is a broad topic that was prevalent within every major discussion topic. Subgroups within the topic were the need for training for teachers, health education and the need for formal education. Participants indicated the need for teachers to be trained on health issues and medications children may be taking. Figure 6 displays Comment frequencies within the subgroups.

