



# Ascension Wisconsin Community Health Needs Assessment

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2020-2023

## Community Health Needs Assessment for Ascension Columbia St. Mary's Hospital Ozaukee An assessment of Ozaukee County

Ascension Columbia St. Mary's Hospital Ozaukee is located in Ozaukee County in southeastern Wisconsin. The community health needs assessment (CHNA) was conducted in 2019 and focused on the needs of individuals in Ozaukee County. Based on this CHNA process, Ascension Columbia St. Mary's Ozaukee will focus on the following priority health needs in 2020-2023:

- Access to Care
- Chronic Disease Prevention
- Mental Health

### Who We Are

Ascension Wisconsin ([ascension.org/wisconsin](https://ascension.org/wisconsin)) operates 24 hospital campuses, more than 100 related healthcare facilities and employs more than 1,300 primary and specialty care clinicians from Racine to Eagle River. Serving Wisconsin since 1848, Ascension is a faith-based healthcare organization committed to delivering compassionate, personalized care to all, with special attention to persons living in poverty and those most vulnerable. Ascension is one of the leading non-profit and Catholic health systems in the U.S., operating 2,600 sites of care – including 150 hospitals and more than 50 senior living facilities – in 20 states and the District of Columbia.

Our Mission as a Catholic healthcare system: Rooted in the loving ministry of Jesus as healer, we commit ourselves to serving all persons with special attention to those who are poor and vulnerable. Our Catholic health ministry is dedicated to spiritually-centered, holistic care which sustains and improves the health of individuals and communities. We are advocates for a compassionate and just society through our actions and our words.

Ascension is continuing the long and valued tradition of addressing the health of the people in our community, following in the footsteps of legacy Wheaton Franciscan Healthcare and legacy Columbia St. Mary's. This flows directly from our Catholic Identity. In addition to the community health improvement efforts guided by our CHNA process, we contribute to other needs through our broader community benefit program.

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### Our Community

For the purposes of the CHNA, Ascension Columbia St. Mary's Ozaukee focused on Ozaukee County. Our "community served" was defined as such because (a) most community health data are available at the county level; (b) many of our assessment partners define their service area at the county level; (c) most of our service area is in Ozaukee County; (d) many of our service lines span multiple campuses within Ozaukee County.

**Demographic Profile of Ozaukee County**

| Total Population – Ozaukee County          |  |        |       |            |
|--|--|--------|-------|------------|
|  |  | 2017   |       | State 2017 |
| Total Population                           |  | 87,817 |       | 5,763,217  |
| Total Population                           |  | N      | %     |            |
| White                                      |  | 82,705 | 94.2% | 85.9%      |
| Black or African American                  |  | 1,203  | 1.4%  | 6.3%       |
| Asian                                      |  | 1,796  | 2.0%  | 2.6%       |
| American Indian and Alaska Native          |  | 277    | 0.3%  | 0.9%       |
| Native Hawaiian and Other Pacific Islander |  | 35     | 0.0%  | 0.0%       |
| Some Other Race                            |  | 388    | 0.4%  | 1.9%       |
| Two or more races                          |  | 1,413  | 1.6%  | 2.3%       |
| Hispanic or Latino (of any race)           |  | 2,429  | 2.8%  | 6.6%       |
| Total Population                           |  |        |       |            |
| Male                                       |  | 43,131 | 49.1% | 49.7%      |
| Female                                     |  | 44,686 | 50.9% | 50.3%      |
| Total Population                           |  |        |       |            |
| 0-14                                       |  | 15,501 | 17.6% | 18.6%      |
| 15-44                                      |  | 29,684 | 33.7% | 38.2%      |
| 45-64                                      |  | 26,770 | 30.4% | 27.5%      |
| 65+  |  | 15,862 | 18.0% | 15.6%      |

Data source: US Census Bureau (2017). American Fact Finder. 2013-2017 American Community Survey 5-Year Estimates. Data accessed from

<https://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?src=CF> and

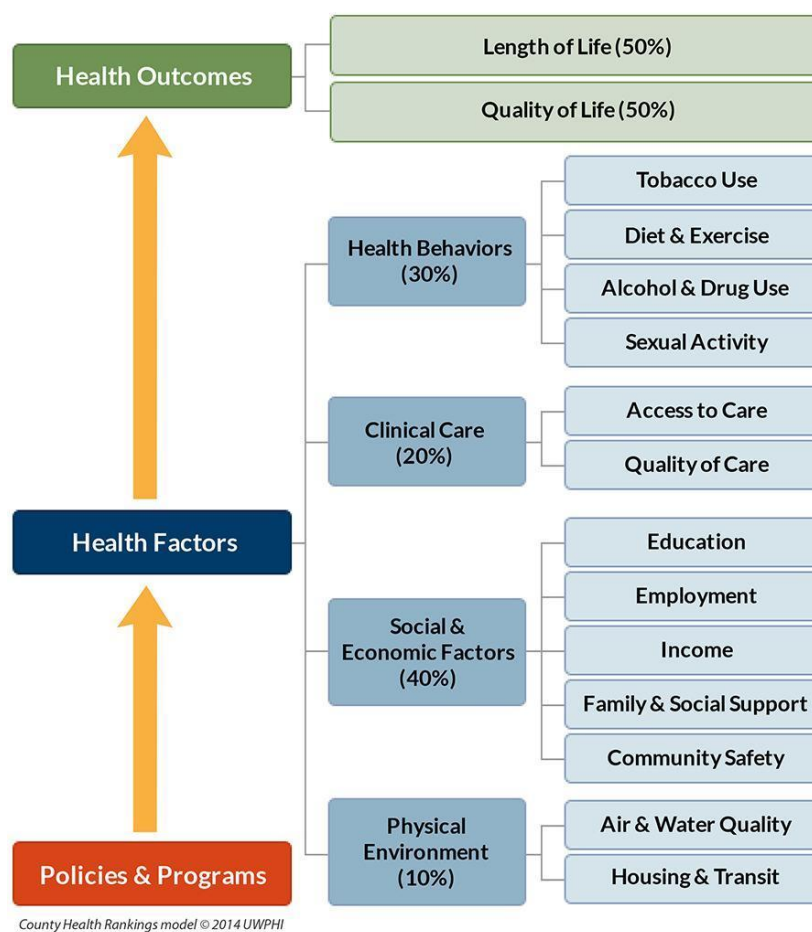
<https://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?src=CF> on December 19, 2019.

| Education level of adults 25 years or older                  | 2017     | State 2017 |
|--|----------|------------|
| Less than high school degree                                 | 3.9%     | 8.3%       |
| High school degree   | 20.9%    | 31.3%      |
| Some college/Associate degree                                | 27.5%    | 31.4%      |
| Bachelor's degree or higher                                  | 47.7%    | 29.1%      |
| <b>Percent of those ages 16 or older who are unemployed</b>  |          |            |
| Unemployment rate  | 3.0%     | 3.1%       |
| <b>Median Household Income (2017 dollars)</b>                |          |            |
| Median Income  | \$80,526 | \$56,759   |
| <b>Percent of all people below poverty in last 12 months</b> |          |            |
| Percent below poverty  | 5.9%     | 12.3%      |
| <b>Language spoken at home</b>                               |          |            |
| English  | 94.2%    | 91.3%      |
| Spanish  | 2.0%     | 4.6%       |
| Indo-European  | 2.5%     | 1.9%       |
| Asian and Pacific Island                                     | 0.9%     | 1.8%       |
| Other languages  | 0.3%     | 0.4%       |
| <b>Owner Occupied</b>  |          |            |
| Owner Occupied   | 75.2%    | 67.0%      |
| Renter Occupied  | 24.8%    | 33.0%      |

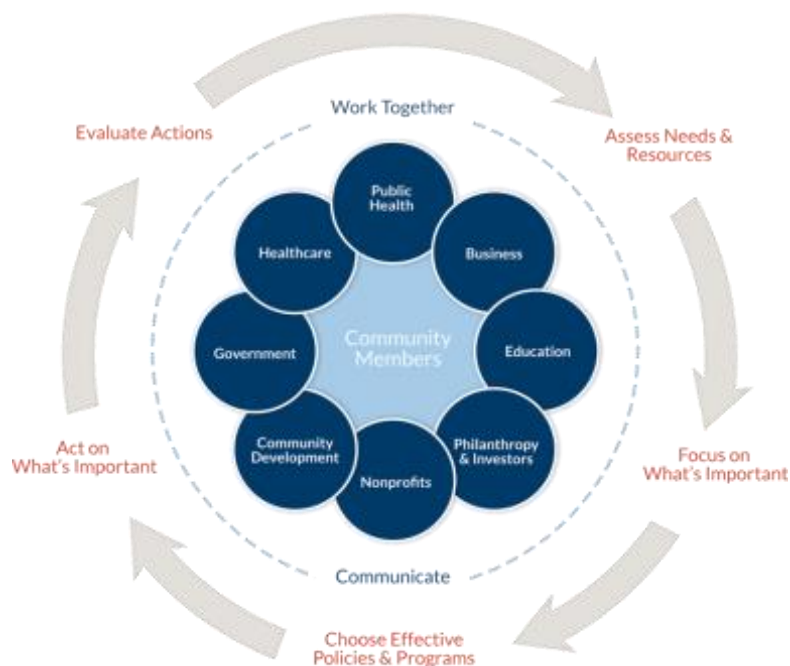
Data source: American Community Survey 2013-2017, 5-Year Estimates. Accessed at: <https://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?src=CF> on December 19, 2019.

## Our Community Health Improvement Approach

Ascension Wisconsin is committed to using national best practices in conducting the CHNA and implementing community health improvement strategies to assure our work has a positive, measurable impact on the health of the people in the communities we serve. Our approach relies on the model developed by the County Health Rankings and Roadmaps and the Robert Wood Johnson Foundation, utilizing the determinants of health model as the model for community health improvement.



In addition, we utilize the *Wisconsin Guidebook on Improving the Health of Local Communities*, developed with funding from the University of Wisconsin School of Medicine and Public Health from the Wisconsin Partnership Program. This guidebook builds on the County Health Rankings and Roadmaps' Action Center.



*County Health Rankings and Roadmaps*

Based on these resources, our community health improvement strategy rests on the following principles to make our communities a healthy place to live, learn, work and play:

- Work collaboratively to effectively address health issues
- Pay attention to the forces that shape health outcomes, including social and economic determinants
- Focus efforts on populations with a disparate health burden to increase health equity
- Emphasize the powerful impact of policy and system-based approaches on change
- Use strategies with the best evidence of effectiveness
- Identify and track specific, measurable performance indicators

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## Framework and Data Sources

Our community health needs assessment is conducted in collaboration with other health systems using a coordinated approach and standard model led by the Milwaukee Health Care Partnership (MHCP). Assessment partners in Ozaukee County included Ascension Wisconsin, Advocate Aurora Health, Children's Hospital of Wisconsin, Froedtert and Medical College of Wisconsin and Washington Ozaukee Health Department.

To assess the health needs of Ozaukee County, the MHCP took the following steps:

- **Community Health Survey:** A telephone survey of 200 residents was conducted by JKV Research, LLC, between July 15- October 31, 2019. The survey included questions about personal/family health and the respondent's perception of top health needs in the community. See Appendices for the Ozaukee County Community Health Survey Summary.
- **Secondary Data:** Community health data was compiled from a variety of public sources by the Center for Urban Population Health (CUPH).
- **Key Informant Interviews:** Interviews were conducted by members of the MHCP in Ozaukee County with key stakeholders. (Note: Those interviewed included the local health department and representatives of organizations that serve the elderly, youth, individuals with disabilities, survivors of domestic and sexual violence and those living with mental illness and substance abuse.) See Appendices for more information.

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## Voice of the Community

Ascension Wisconsin is committed to addressing community health needs collaboratively with local assessment partners. Ascension Wisconsin used the following methods to listen to community members' thoughts on the strengths and challenges of being a healthy community. These methods provided us with additional perspectives on how to select and address top health issues facing our communities.

### **Input from Community Members**

Key informants were identified, recruited and interviewed by the assessment partners. Interviews were conducted from June to September 2019.

The interview content included:

- Ranking of up to five public health issues, based on the focus areas presented in Wisconsin's State Health Plan, that are the most important issues for the County
- For those five public health issues, identify:
  - Existing strategies to address the issue
  - Barriers and challenges to address the issue
  - Additional strategies needed
  - Key groups in the community that hospitals should partner with to improve community health
  - Identification of subgroups or subpopulations to target efforts
  - Manner of targeting each subgroup or subpopulation

### **Input on the Previous CHNA**

No written comments were received regarding the previous CHNA.

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## Priorities for Action

### **Prioritization Process and Criteria**

The Ascension Columbia St. Mary's Ozaukee Community Health Improvement Plan (CHIP) co-leads along with a team of hospital leaders reviewed the data described above and a summary of the top needs were identified within each assessment source. On January 31, 2020, the hospital team participated in a facilitated decision-making process. Based on a set of criteria listed below, the team made a recommendation for the health priorities. That recommendation was presented to and approved by the hospital and system leadership on February 27, 2020.



**Prioritization Criteria:**

1. Scope of problem (e.g., burden, scope, severity, urgency)
2. Needs of residents who experience health disparities based on income and/or race and ethnicity
3. Feasibility (e.g., expertise, resources, available interventions)
4. Momentum/commitment
5. Alignment with current internal and external priorities

**Priorities Selected**

The following health issues were selected as the priorities:

- Access to Care
- Chronic Disease Prevention
- Mental Health

**Health Needs Not Selected for this Plan**

Ascension Wisconsin understands the importance of all the health needs of the community and is committed to actively participating in improving the health of the people in the communities we serve. For the purposes of this CHNA, we have chosen to focus our efforts on the priorities listed above.

The following health issues were not selected to be included in this plan for the reasons described below.

- Alcohol and Substance Use: This health issue will be incorporated into the mental health priority, with at least one alcohol and drug use strategy to be implemented. We also will continue to provide screening, counseling and follow-up care to address alcohol and drug use. We are committed to maintaining these services while remaining open to any emerging needs or opportunities in these areas.
- Adverse Childhood Experiences (ACEs) are potentially traumatic events that occur in childhood (0-17 years) and include parental substance and alcohol abuse. While this health issue was not selected as a priority, we will incorporate strategies for substance use into the mental health priority. We will continue to provide screening, counseling and follow-up care to children who experience ACEs.

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## Overview of Priorities

A description of each priority area, data highlights and relevant assets/resources are on the following pages.

## Access to Care

### Why it is Important

There are many aspects to having access to care. Coverage (having health insurance) is essential but does not ensure access to care. It is also necessary to have:

- Comprehensive coverage, including preventive services
- Providers who accept the individual's insurance
- Relatively close geographic location of providers to patients
- Services from a familiar and ongoing source

Having a familiar and ongoing source of primary care is associated with:

- Greater patient trust in the provider
- Good patient-provider communication
- Increased likelihood that the patient will receive appropriate care

And can lead to:

- Better health outcomes
- Fewer health disparities
- Lower healthcare costs

Additional barriers to care that may need to be addressed include:

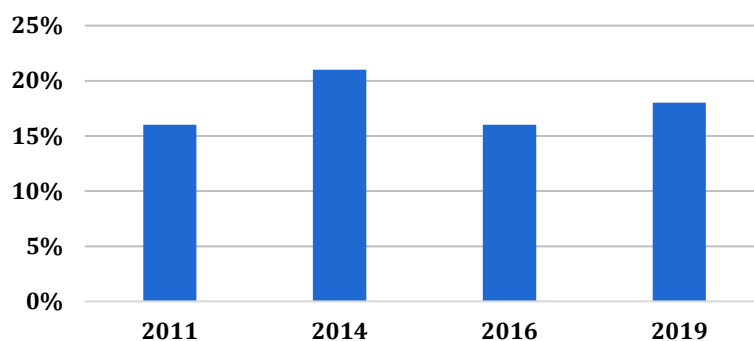
- Transportation to the provider's office
- Long waits to get an appointment
- Lack of knowledge about the importance of preventive care
- Low health literacy

Access to healthcare impacts:

- Overall physical, social and mental health status
- Prevention of disease and disability
- Detection and early treatment of health conditions
- Quality of life
- Preventable death
- Life expectancy

Source: Healthy People 2020

## Delayed/Did Not Seek Care Due to Cost



Data source: Ozaukee County Community Health Survey Report

### Data Highlights:

From Ozaukee County Community Health Survey:

- Eighteen percent of respondents reported they delayed/did not seek care due to cost
- Ten percent of respondents reported they did not receive their prescription due to cost
- Seven percent of respondents reported they did not receive needed mental healthcare due to cost

### Local Assets and Resources:

Key informants listed many organizations and services, such as free and community clinics. Additional resources include:

- Huiras Family Ozaukee Community Clinic
- Case managers in the emergency departments
- Mobile Mammography Unit
- Interfaith Caregivers of Ozaukee County
- Ozaukee County Human Services
- Veterans Services Officer
- Washington Ozaukee Public Health Department
- National Alliance on Mental Illness (NAMI) Ozaukee
- 211-a comprehensive source of locally curated social services

## Chronic Disease Prevention

### Why it is Important

Chronic diseases include heart disease, stroke, cancer, diabetes and asthma. They are very costly, but effective management can prevent more serious complications. More importantly, they can often be prevented through healthy diet, physical activity and eliminating tobacco use and substance abuse.

Regular physical activity in adults can lower the risk of:

- Early death
- Coronary heart disease
- Stroke
- High blood pressure
- Type 2 diabetes
- Breast and colon cancer
- Falls
- Depression

Physical activity in children and adolescents can:

- Improve bone health
- Improve cardio-respiratory and muscular fitness
- Decrease levels of body fat
- Reduce symptoms of depression

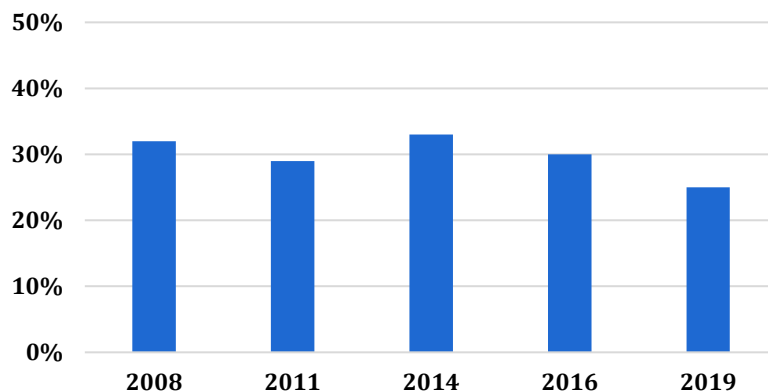
A healthy diet reduces risk of chronic diseases, some cancers, oral disease, malnutrition, anemia and others risk factors, diseases and illnesses.

At a healthy weight, one is less likely to develop chronic diseases or die at an earlier age.

Good nutrition in children is important to maintaining appropriate weight and healthy growth and development.

Source: Healthy People 2020

### Vegetable Intake 3+ Servings per Day



Data source: Ozaukee County Community Health Survey Report

### Data Highlights

From Ozaukee County Community Health Survey:

- Twenty-nine percent of respondents reported having high blood pressure
- Sixty-two percent of respondents reported they are overweight (BMI 30.0+)
- Sixty-one percent of respondents reported they consume the recommended daily servings of fruit

### Local Assets and Resources:

Key informants identified numerous community initiatives to address chronic disease, including:

- Diabetes Prevention Program
- YMCA Balance Program
- Huiras Family Ozaukee Community Clinic
- Telehealth programs
- Transitional Care Management

## Mental Health

### Why it is Important

Mental health can be defined as a state of successful mental function resulting in productive activities, fulfilling relationships and ability to adapt and cope with challenges. Mental health is essential to personal well-being, relationships and the ability to contribute to society.

Approximately 20 percent of the population experiences a mental health problem during any given year.<sup>1</sup>

Mental health issues are associated with increased rates of risk factors, such as smoking, physical inactivity, obesity and substance abuse. As a result, these physical health problems can lead to chronic disease, injury and disability.<sup>2</sup>

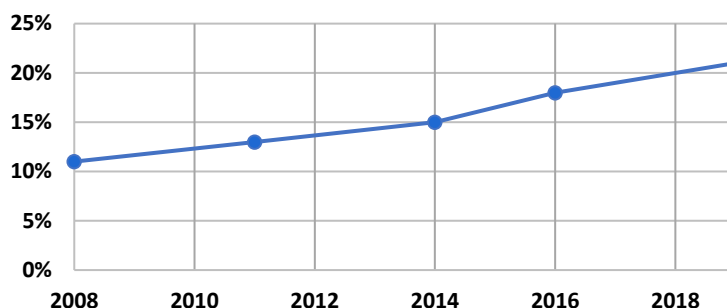
### Challenges in Ozaukee County

- Lack of health insurance
- High deductibles and/or co-payments
- Long waiting lists to access care
- Stigma surrounding mental health
- Lack of funding to support community initiatives
- Lack of resources in the community to address mental health concerns
- Lack of knowledge regarding mental health conditions

#### Sources:

National Institute for Mental Health  
Healthiest Wisconsin 2020; Healthy People 2020

### Treated for or Told Have a Mental Health Condition in Past 3 Years



Data source: Ozaukee County Community Health Survey Report

### Data Highlights

From Ozaukee County Community Health Survey:

- Six percent of survey respondents reported they seldom/never find meaning or purpose in daily life
- Four percent of survey respondents reported they considered suicide in the past year
- Twenty-eight percent of respondents reported a child in their household experienced some form of bullying in the past year
- Six percent of respondents reported a child in their household always/nearly always felt sad, unhappy or depressed in the past six months

### Local Assets and Resources:

Key informants identified numerous community initiatives to address mental health, including:

- COPE Services
- Cultivate
- Just Listen
- Jewish Community Center (JCC) Mequon
- Ozaukee Family Services
- Ozaukee Community Therapies
- National Alliance on Mental Illness (NAMI)
- Social-emotional coaches in the schools

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## Results of the Previous CHNA Process

Our previous CHNA process was completed in June 2017. The priority health issues selected and addressed were:

- Breast Health
- Fall Prevention
- Oral Health

An evaluation of the impact of our efforts to date to address these issues can be found in the Appendices.

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## Next Steps

Having identified the priority health needs to be addressed, next steps include:

- Collaborating with community partners
- Developing a three-year implementation strategy
- Creating a more specific annual action plan during each year of the implementation strategy
- Integrating the health priorities and implementation strategy into organizational strategic planning and resource investments and allocations

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## Approval

This community health needs assessment (CHNA) report was adopted by the Boards of Directors of Columbia St. Mary's Hospital Ozaukee, Inc., on April 22, 2020.

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## Public Comments/Feedback

We welcome feedback from community members on this plan. Please see our public website for the email address to submit comments.

# Appendices

## Appendix 1: Progress Report on Results of Previous CHNA Process

Ascension Wisconsin is committed to making a positive, measurable impact on the health of the people in the communities we serve. To that end, we evaluate the strategies we implement to address the health needs of the community.

We use a logic model, an approach that is nationally recognized for program evaluation. Logic models provide methods for documenting the following:

- **Inputs:** Resources needed to implement the strategies
- **Outputs:** Actions taken, the number of programs/tactics implemented and the number of people reached
- **Outcomes:** Measures of the impact of the programs/strategies (such as changes in learning, actions or conditions)

To be specific about the outcomes for which we will be accountable, we set SMART metrics – metrics that are Specific, Measurable, Achievable, Realistic and Time-related.

### Evaluation Schedule/Process

At the beginning of the three-year cycle:

- Establish SMART metrics for medium-term (three-year) outcome indicators for each strategy
- Establish SMART metrics for long-term (beyond three years) outcome indicators for each priority area

At the beginning of each fiscal year in the three-year CHNA cycle:

- Establish SMART metrics for short-term (fiscal year) outcome indicators for each strategy
- Establish action steps and output indicators for each strategy

At the end of each fiscal year:

- Report on results for short-term outcome and output indicators
- Describe accomplishments and analyze results

At the end of the three-year cycle:

- Report on results for medium-term outcome indicators for each strategy
- Describe and analyze results
- Incorporate results into next Community Health Needs Assessment

At the writing of this report, data is available for the first two years of the previous CHNA and is summarized below. Once final data is available, an evaluation report will be completed for the entire implementation period.

Health priorities identified in the preceding CHNA were:

- Breast Health
- Falls
- Oral Health

### **Breast Health**

- Results for Year One:
  - Engaged in breast health community outreach during ten community events. Outreach events provided women with breast health education, an opportunity to schedule a mammogram and information on community resources and mammogram screenings. Provided 161 mammograms in the community using the Mobile Mammography Unit. If a client missed an appointment or canceled a mammogram, the client was contacted and offered another appointment.
- Results for Year Two:
  - Continued to provide community outreach, breast health education and mammography screenings in the community. Attended numerous community events, providing mammograms to 133 women. Outreach targeted canning companies to inform migrant workers about mammogram screenings, providing breast health educational materials in English and Spanish.

### **Falls**

- Results for Year One:
  - Seniors are one population that is at high risk for falls. To help meet the needs of the community and provide exceptional patient care, the Emergency Department (ED) at Ascension Columbia St. Mary's Ozaukee has implemented a number of changes to reduce the risk of falls such as accessible railings for better mobility, stability, and balance, dimmable lighting, noise reducing tiles and calming visuals to lessen stress, and skid-free flooring to create more stable environment. In addition to the physical changes, associates and clinical staff have been educated on the unique needs of older patients. Every patient reporting to the ED for a fall receives patient/caregiver educational materials.
- Results for Year Two:
  - The ED continues to provide assessment and support for individuals at risk of falls. All patients reporting to the ED due to a fall receive a fall risk assessment using the Hendrich II fall scale. Additionally, individuals who are 65 and older are screened with the Identification of Seniors At Risk (ISAR) screening tool to assess functional status. The



ED nurse navigator evaluates high-risk patients for home health/outpatient physical therapy (PT) or inpatient rehab. The ED works to decrease barriers for patients receiving ongoing care by scheduling follow-up appointments with outpatient PT clinics. If a patient is homebound, referral is made to covered home care therapy services. Fall risk reduction education materials are given to all patients 65 and older in their senior discharge packet.

### **Oral Health**

- Results for Year One:
  - In partnership with several community organizations, the Ascension Mobile Dental Clinic provided dental care in the community. Temporarily located at the Huiras Family Ozaukee Community Clinic, the Ascension Mobile Dental Clinic treated more than 70 individuals at an outreach dental event.
- Results for Year Two:
  - The Ascension Mobile Dental Clinic again provided dental care while temporarily located at the Huiras Family Ozaukee Community Clinic. Sixty-two patients were seen. Individuals who were not able to be seen at the mobile dental clinic were referred to Ascension St. Elizabeth Ann Seton Dental Clinic for services.

## Appendix 2: Community Leaders/Stakeholders

Twenty-nine individuals participated in 26 key informant interviews about our community's most pressing health needs. Many organizations listed here serve low-income, minority and/or medically underserved populations. They represent an array of perspectives from communities that include, but are not limited to: the elderly, youth, individuals with disabilities, rural and agricultural communities, survivors of domestic and sexual violence and those living with mental illness and substance abuse.

| <b>Name</b>          | <b>Title</b>                           | <b>Organization</b>   |
|----------------------|--|---|
| Barbara Bates-Nelson | Executive Director                     | United Way of Northern Ozaukee                                |
| Nicole Bulow         | Executive Director                     | Big Brothers Big Sisters of Ozaukee County                    |
| Cathy Cero-Jaeger    | Board Member                           | Washington Ozaukee Board of Health                            |
| Kirsten Coenen       | Branch Director                        | Feith Family Ozaukee YMCA                                     |
| Mike Cosgrove        | Executive Director                     | Saukville Chamber of Commerce                                 |
| Kay-Ella Dee         | Director                               | Aging and Disability Resource Center (ADRC) of Ozaukee County |
| Amanda Didier        | Executive Director                     | Lakeshore Regional Child Advocacy Center                      |
| Maggie Dobson        | Executive Director                     | Cedarburg Chamber of Commerce                                 |
| Liza Drake           | Director                               | Ozaukee County Department of Human Services                   |
| Melissa Drews        | Program Director                       | Starting Point  |
| Rachel Fellenz       | Executive Director of Student Services | Mequon-Thiensville School District                            |
| Barbara Fischer      | Executive Director                     | Advocates of Ozaukee  |
| Mark Gierach         | Executive Director                     | Saukville Community Food Pantry                               |
| Lindsay Graycarek    | Patrol Sergeant                        | Mequon Police Department                                      |
| James Johnson        | Sheriff                                | Ozaukee County Sheriff's Office                               |
| Matthew Joynt        | Superintendent of Schools              | Mequon-Thiensville School District                            |
| Pam King             | Executive Director                     | Grafton Area Chamber of Commerce                              |
| Amanda Kohal         | Campus Administrator                   | Lasata Senior Living Campus                                   |
| Mary Helen Luzinski  | President                              | NAMI Ozaukee  |
| Bailey Murph         | Public Health Strategist Senior        | Washington Ozaukee Public Health Department                   |
| Jeff Nelson          | Superintendent                         | Grafton School District                                       |
| Erin Perez           | Clinic Director                        | Ozaukee Community Therapies                                   |
| Kathy Rismeyer       | Director of Social Services            | Lasata Senior Living Campus                                   |
| Kathleen Schilling   | Executive Director                     | Ozaukee Economic Development                                  |
| Deb Steele           | Director of Nursing                    | Lasata Senior Living Campus                                   |
| Sharon Streff        | Executive Director of Operations       | Ascension Columbia St. Mary's Hospital Ozaukee                |
| Carole Stuebe        | Executive Director                     | Portal, Inc.  |
| Michael Weber        | Superintendent                         | Port Washington-Saukville School District                     |
| Steven Zils          | Emergency Medicine Physician           | Advocate Aurora Health  |

## Appendix 3: Crosswalk Between This CHNA Report and 501(r) Requirements

| Required Content from Section 501(r) Rules  | Found in this Section   |
|---|---|
| Definition of the community served and how it was determined  | Our Community   |
| Description of the process and methods used to conduct the assessment: <ul style="list-style-type: none"> <li>• Data and other information used in the assessment</li> <li>• Methods of collecting and analyzing the data/information</li> <li>• Any parties collaborated with or contracted with</li> </ul>  | Framework and Data Sources                                      |
| Description of how the hospital solicited and accounted for input from persons who represent the broad interests of the community <ul style="list-style-type: none"> <li>• Summary of the input</li> <li>• How it was provided</li> <li>• Over what period of time</li> <li>• Names of organizations providing input</li> <li>• Include at least one governmental public health department</li> <li>• Summary of nature and extent of their input</li> <li>• Description of populations being represented (medically underserved, low-income, minority)</li> <li>• Note any written input received on the prior CHNA</li> </ul> | Voice of the Community  |
| Prioritized description of the significant health needs identified<br>Description of the process and criteria used in prioritizing  | Priorities for Action   |
| Description of potential resources identified to address the needs  | Overview of Priorities, Local Assets and Resources              |
| Evaluation of the impact of the actions taken since completing the last CHNA to address the significant health needs in that CHNA   | Appendix 1: Progress Report on Results of Previous CHNA Process |

## Appendix 4: Ozaukee County Community Health Survey Summary

This research provides valuable behavioral data, lifestyle habits, and the prevalence of risk factors and disease conditions of Ozaukee County residents. This summary was prepared by JKV Research, LLC for Ascension Wisconsin, Aurora Health Care, Children's Wisconsin, Froedtert & Medical College and Washington Ozaukee County Public Health Department. Please see the full report for complete data analysis.

|  | Ozaukee     |             |             |             |             | WI          | US          |
|--|-------------|-------------|-------------|-------------|-------------|-------------|-------------|
| <b>Overall Health</b>  | <u>2008</u> | <u>2011</u> | <u>2014</u> | <u>2016</u> | <u>2019</u> | <u>2018</u> | <u>2018</u> |
| Excellent/Very Good  | 60%         | 65%         | 57%         | 55%         | 55%         | 52%         | 51%         |
| Good   | 29%         | 25%         | 30%         | 29%         | 27%         | 33%         | 32%         |
| Fair or Poor   | 11%         | 11%         | 13%         | 16%         | 16%         | 15%         | 17%         |
| <b>Health Care Coverage</b>                                      | Ozaukee     |             |             |             |             | WI          | US          |
|  | <u>2008</u> | <u>2011</u> | <u>2014</u> | <u>2016</u> | <u>2019</u> | <u>2018</u> | <u>2018</u> |
| Not Covered  |             |             |             |             |             |             |             |
| Personally (Currently, 18 Years Old and Older) [HP2020 Goal: 0%] | 7%          | 6%          | 6%          | 2%          | 3%          | 10%         | 11%         |
| Personally (Currently, 18 to 64 Years Old) [HP2020 Goal: 0%]     | 9%          | 7%          | 7%          | 2%          | 4%          | 11%         | 13%         |
| Personally (Past Year, 18 and Older)                             | 11%         | 8%          | 12%         | 7%          | 5%          | NA          | NA          |
| Household Member (Past Year)                                     | 13%         | 11%         | 15%         | 7%          | 6%          | NA          | NA          |
| <b>Did Not Receive Care Needed in Past Year</b>                  | Ozaukee     |             |             |             |             | WI          | US          |
|  | <u>2008</u> | <u>2011</u> | <u>2014</u> | <u>2016</u> | <u>2019</u> | <u>2018</u> | <u>2018</u> |
| Delayed/Did Not Seek Care Due to Cost                            | --          | 16%         | 21%         | 16%         | 18%         | 10%         | 12%         |
| Unmet Need/Care in Household                                     |             |             |             |             |             |             |             |
| Prescription Medication Not Taken Due to Cost [HP2020 Goal: 3%]  | --          | 9%          | 11%         | 9%          | 10%         | NA          | NA          |
| Medical Care [HP2020 Goal: 4%]                                   | --          | 8%          | 11%         | 11%         | 8%          | NA          | NA          |
| Dental Care [HP2020 Goal: 5%]                                    | 10%         | 12%         | 14%         | 15%         | 10%         | NA          | NA          |
| Mental Health Care   | --          | 2%          | 3%          | 4%          | 7%          | NA          | NA          |
| <b>Health Information</b>  | Ozaukee     |             |             |             |             | WI          | US          |
|  | <u>2008</u> | <u>2011</u> | <u>2014</u> | <u>2016</u> | <u>2019</u> | <u>2018</u> | <u>2018</u> |
| Primary Source of Health Information                             |             |             |             |             |             |             |             |
| Doctor   | --          | 42%         | 43%         | 50%         | 52%         | NA          | NA          |
| Internet   | --          | 29%         | 33%         | 25%         | 23%         | NA          | NA          |
| Myself/Family Member in Health Care Field                        | --          | 6%          | 9%          | 7%          | 8%          | NA          | NA          |
| Family/Friends   | --          | 2%          | 2%          | 6%          | 5%          | NA          | NA          |
| Other Health Professional  | --          | 6%          | 3%          | 3%          | 3%          | NA          | NA          |
| <b>Health Services</b>   | Ozaukee     |             |             |             |             | WI          | US          |
|  | <u>2008</u> | <u>2011</u> | <u>2014</u> | <u>2016</u> | <u>2019</u> | <u>2018</u> | <u>2018</u> |
| Have a Primary Care Physician [HP2020 Goal: 84%]                 | --          | --          | --          | 93%         | 91%         | 81%         | 77%         |
| Primary Health Services  |             |             |             |             |             |             |             |
| Doctor/Nurse Practitioner's Office                               | 85%         | 81%         | 81%         | 75%         | 74%         | NA          | NA          |
| Urgent Care Center   | 1%          | 3%          | 5%          | 7%          | 14%         | NA          | NA          |
| Public Health Clinic/Com. Health Center                          | 4%          | 8%          | 5%          | 3%          | 4%          | NA          | NA          |
| Quickcare Clinic (Fastcare Clinic)                               | --          | --          | --          | 3%          | 2%          | NA          | NA          |
| Hospital Emergency Room  | 1%          | 1%          | 2%          | 6%          | 1%          | NA          | NA          |
| Worksite Clinic  | --          | --          | --          | 2%          | 1%          | NA          | NA          |
| Hospital Outpatient  | 2%          | 3%          | 1%          | 4%          | <1%         | NA          | NA          |
| No Usual Place   | 7%          | 3%          | 5%          | 2%          | 3%          | NA          | NA          |
| Advance Care Plan  | 39%         | 43%         | 49%         | 46%         | 47%         | NA          | NA          |
| <b>Vaccinations (65 and Older)</b>                               | Ozaukee     |             |             |             |             | WI          | US          |
|  | <u>2008</u> | <u>2011</u> | <u>2014</u> | <u>2016</u> | <u>2019</u> | <u>2018</u> | <u>2018</u> |
| Flu Vaccination (Past Year)                                      | 62%         | 73%         | 71%         | 78%         | 62%         | 46%         | 55%         |
| Pneumonia (Ever) [HP2020 Goal: 90%]                              | 71%         | 76%         | 76%         | 84%         | 79%         | 75%         | 74%         |

--Not asked. NA-WI and/or US data not available.

|  | Ozaukee |      |      |      |      | WI               | US               |
|--|---------|------|------|------|------|------------------|------------------|
| <b>Routine Procedures</b>  | 2008    | 2011 | 2014 | 2016 | 2019 | 2018             | 2018             |
| Routine Checkup (2 Years Ago or Less)                                  | 80%     | 85%  | 83%  | 88%  | 89%  | 87%              | 88%              |
| Cholesterol Test (4 Years Ago or Less) [HP2020 Goal: 82%]              | 74%     | 78%  | 80%  | 81%  | 83%  | 83% <sup>1</sup> | 86% <sup>1</sup> |
| Dental Checkup (Past Year) [HP2020 Goal: 49%]                          | 75%     | 74%  | 74%  | 79%  | 80%  | 71%              | 68%              |
| Eye Exam (Past Year)   | 42%     | 47%  | 49%  | 57%  | 54%  | NA               | NA               |
|  | Ozaukee |      |      |      |      | WI               | US               |
| <b>Tested for a Sexually Transmitted Infection in Lifetime</b>         | 2008    | 2011 | 2014 | 2016 | 2019 | 2018             | 2018             |
| Tested for a Sexually Transmitted Infection, including HIV             | --      | --   | --   | --   | 35%  | NA               | NA               |
|  | Ozaukee |      |      |      |      | WI               | US               |
| <b>Health Conditions in Past 3 Years</b>                               | 2008    | 2011 | 2014 | 2016 | 2019 | 2018             | 2018             |
| High Blood Pressure  | 20%     | 25%  | 32%  | 28%  | 29%  | NA               | NA               |
| Mental Health Condition  | 11%     | 13%  | 15%  | 18%  | 21%  | NA               | NA               |
| High Blood Cholesterol   | 22%     | 25%  | 25%  | 26%  | 20%  | NA               | NA               |
| Diabetes   | 9%      | 6%   | 7%   | 8%   | 8%   | NA               | NA               |
| Heart Disease/Condition  | 7%      | 5%   | 7%   | 11%  | 7%   | NA               | NA               |
| Asthma (Current)   | 5%      | 10%  | 11%  | 11%  | 11%  | 9%               | 10%              |
|  | Ozaukee |      |      |      |      | WI               | US               |
| <b>Condition Controlled Through Meds, Therapy or Lifestyle Changes</b> | 2008    | 2011 | 2014 | 2016 | 2019 | 2018             | 2018             |
| High Blood Pressure  | --      | 96%  | 91%  | 94%  | 97%  | NA               | NA               |
| Mental Health Condition  | --      | 82%  | 97%  | 85%  | 91%  | NA               | NA               |
| High Blood Cholesterol   | --      | 88%  | 92%  | 92%  | 94%  | NA               | NA               |
| Diabetes   | --      | 95%  | 87%  | 97%  | 94%  | NA               | NA               |
| Heart Disease/Condition  | --      | 100% | 96%  | 88%  | 93%  | NA               | NA               |
| Asthma (Current)   | --      | 95%  | 86%  | 95%  | 80%  | NA               | NA               |
|  | Ozaukee |      |      |      |      | WI               | US               |
| <b>Physical Activity</b>   | 2008    | 2011 | 2014 | 2016 | 2019 | 2009             | 2009             |
| Physical Activity/Week   | 43%     | 31%  | 40%  | 40%  | 41%  | NA               | NA               |
| Moderate Activity (5 Times/30 Min)                                     | 30%     | 36%  | 35%  | 30%  | 35%  | NA               | NA               |
| Vigorous Activity (3 Times/20 Min)                                     | 52%     | 49%  | 52%  | 49%  | 53%  | 53%              | 51%              |
|  | Ozaukee |      |      |      |      | WI               | US               |
| <b>Body Weight</b>   | 2008    | 2011 | 2014 | 2016 | 2019 | 2018             | 2018             |
| Overweight Status  | 56%     | 59%  | 65%  | 63%  | 62%  | 67%              | 66%              |
| At Least Overweight (BMI 25.0+) [HP2020 Goal: 66%]                     | 18%     | 20%  | 26%  | 26%  | 35%  | 32%              | 31%              |
| Obese (BMI 30.0+) [HP2020 Goal: 31%]                                   |         |      |      |      |      |                  |                  |
|  | Ozaukee |      |      |      |      | WI               | US               |
| <b>Nutrition and Food Security</b>                                     | 2008    | 2011 | 2014 | 2016 | 2019 | 2009             | 2009             |
| Fruit Intake (2+ Servings/Day)   | 71%     | 60%  | 64%  | 68%  | 61%  | NA               | NA               |
| Vegetable Intake (3+ Servings/Day)                                     | 32%     | 29%  | 33%  | 30%  | 25%  | NA               | NA               |
| At Least 5 Fruit/Vegetables/Day  | 44%     | 36%  | 40%  | 33%  | 35%  | 23%              | 23%              |
| Often Read Food Label/Nutritional Information for First Time Purchase  | --      | --   | --   | 53%  | 60%  | NA               | NA               |
| Household Went Hungry (Past Year)                                      | --      | --   | --   | 6%   | 4%   | NA               | NA               |
|  | Ozaukee |      |      |      |      | WI               | US               |
| <b>Colorectal Cancer Screenings (50 and Older)</b>                     | 2008    | 2011 | 2014 | 2016 | 2019 | 2018             | 2018             |
| Blood Stool Test (Within Past Year)                                    | --      | 21%  | 20%  | 9%   | 10%  | 7%               | 9%               |
| Sigmoidoscopy (Within Past 5 Years)                                    | 12%     | 15%  | 9%   | 5%   | 8%   | 3%               | 2%               |
| Colonoscopy (Within Past 10 Years)                                     | 61%     | 69%  | 66%  | 76%  | 72%  | 71%              | 64%              |
| One of the Screenings in Recommended Time Frame [HP2020 Goal: 71%]     | 63%     | 74%  | 76%  | 79%  | 76%  | 75%              | 70%              |

--Not asked. NA-WI and/or US data not available.

<sup>1</sup>WI and US data for cholesterol test is from 2017.

|   | Ozaukee     |             |             |             |             | WI              | US           |
|---|-------------|-------------|-------------|-------------|-------------|-----------------|--------------|
| <b>Women's Health</b>   | 2008        | 2011        | 2014        | 2016        | 2019        | 2018            | 2018         |
| Mammogram (50+; Within Past 2 Years)  | 78%         | 79%         | 79%         | 81%         | 78%         | 78%             | 78%          |
| Bone Density Scan (65 and Older)  | 74%         | 76%         | 80%         | 82%         | 86%         | NA              | NA           |
| Cervical Cancer Screening   |             |             |             |             |             |                 |              |
| Pap Smear (18 – 65; Within Past 3 Years) [HP2020 Goal: 93%]   | 78%         | 89%         | 85%         | 74%         | 84%         | 81%             | 80%          |
| HPV Test (18 – 65; Within Past 5 Years)   | --          | --          | 55%         | 47%         | 57%         | NA              | NA           |
| Screening in Recommended Time Frame (18-29: Pap Every 3 Years; 30 to 65: Pap and HPV Every 5 Years or Pap Only Every 3 Years) | --          | --          | 86%         | 85%         | 89%         | NA              | NA           |
|   | Ozaukee     |             |             |             |             | WI              | US           |
| <b>Tobacco Cigarette Smokers or Vapers</b>  | 2008        | 2011        | 2014        | 2016        | 2019        | 2018            | 2018         |
| Current Smokers [HP2020 Goal: 12%]  | 19%         | 16%         | 22%         | 16%         | 12%         | 17%             | 16%          |
| Current Vapers (Past Month)   | --          | --          | 11%         | 1%          | 4%          | 5% <sup>1</sup> | 4%           |
| Of Current Smokers/Vapers...  |             |             |             |             |             | 2005            | 2005         |
| Quit Smoking/Vaping 1 Day or More in Past Year Because Trying to Quit [HP2020 Goal Quit Smoking: 80%]                         | 52%         | 44%         | 47%         | 42%         | 60%         | 49%             | 56%          |
| Saw a Health Care Professional in Past Year and Advised to Quit Smoking/Vaping  | 57%         | 68%         | 91%         | 77%         | 72%         | NA              | NA           |
| <b>Exposure to Smoke/Vapor</b>  | Ozaukee     |             |             |             |             | WI <sup>2</sup> | US           |
|   | <u>2008</u> | <u>2011</u> | <u>2014</u> | <u>2016</u> | <u>2019</u> | <u>14-15</u>    | <u>14-15</u> |
| Smoking Policy at Home  | 79%         | 79%         | 85%         | 86%         | 88%         | 84%             | 87%          |
| Not Allowed Anywhere  | 10%         | 4%          | 3%          | 5%          | 3%          | NA              | NA           |
| Allowed in Some Places/At Some Times  | 2%          | 3%          | 1%          | <1%         | <1%         | NA              | NA           |
| Allowed Anywhere  | 9%          | 15%         | 11%         | 7%          | 9%          | NA              | NA           |
| No Rules Inside Home  | 23%         | 10%         | 11%         | 7%          | 7%          | NA              | NA           |
| Nonsmokers/Nonvapers Exposed to Second-Hand Smoke/Vapor in Past 7 Days [HP2020 Goal Nonsmokers: 34%]                          |             |             |             |             |             |                 |              |
|   | Ozaukee     |             |             |             |             | WI              | US           |
| <b>Other Tobacco Products in Past Month</b>   | 2008        | 2011        | 2014        | 2016        | 2019        | 2018            | 2018         |
| Smokeless Tobacco [HP2020 Goal: 0.2%]   | --          | --          | 5%          | 5%          | 7%          | 4%              | 4%           |
| Cigars, Cigarillos or Little Cigars   | --          | --          | 6%          | 5%          | 7%          | NA              | NA           |
|   | Ozaukee     |             |             |             |             | WI              | US           |
| <b>Alcohol Use in Past Month</b>  | <u>2008</u> | <u>2011</u> | <u>2014</u> | <u>2016</u> | <u>2019</u> | <u>2018</u>     | <u>2018</u>  |
| Binge Drinker* [HP2020 Goal 5+ Drinks: 24%]   | 19%         | 29%         | 35%         | 28%         | 40%         | 26%             | 16%          |
| Driver/Passenger When Driver Perhaps Had Too Much to Drink  | 1%          | 1%          | 2%          | 1%          | 3%          | NA              | NA           |
|   | Ozaukee     |             |             |             |             | WI              | US           |
| <b>Household Problems Associated With...</b>  | 2008        | 2011        | 2014        | 2016        | 2019        | 2018            | 2018         |
| Alcohol (Past Year)   | 2%          | 4%          | 6%          | 2%          | 4%          | NA              | NA           |
| Marijuana (Past Year)   | --          | 1%          | 5%          | 1%          | 2%          | NA              | NA           |
| Cocaine, Meth or Other Street Drugs (Past Year)   | --          | --          | --          | --          | <1%         | NA              | NA           |
| Heroin or Other Opioids (Past Year)   | --          | --          | --          | --          | <1%         | NA              | NA           |
|   | Ozaukee     |             |             |             |             | WI              | US           |
| <b>Personal Safety Issues in Past Year</b>  | <u>2008</u> | <u>2011</u> | <u>2014</u> | <u>2016</u> | <u>2019</u> | <u>2018</u>     | <u>2018</u>  |
| Afraid for Their Safety   | 5%          | 4%          | 7%          | 2%          | 4%          | NA              | NA           |
| Pushed, Kicked, Slapped, or Hit   | 2%          | 2%          | 5%          | 4%          | 3%          | NA              | NA           |
| At Least One of the Safety Issues   | 6%          | 5%          | 10%         | 6%          | 6%          | NA              | NA           |

--Not asked. NA-WI and/or US data not available. <sup>1</sup>Wisconsin current vapers is 2017 data. <sup>2</sup>Midwest data.

\*In 2008, binge drinking was defined as 5 or more drinks regardless of gender. Since 2011, binge drinking has been defined as 4 or more drinks for females and 5 or more drinks for males to account for metabolism differences.

|   | Ozaukee |      |      |      |      | WI   | US   |
|---|---------|------|------|------|------|------|------|
| <b>Times of Distress in Past Three Years</b>                                    | 2008    | 2011 | 2014 | 2016 | 2019 | 2018 | 2018 |
| Times of Distress and Someone in HH Looked for Community Support                | --      | --   | --   | 14%  | 20%  | NA   | NA   |
| Of Respondents Who Looked for Support   |         |      |      |      |      |      |      |
| Felt Somewhat/Slightly or Not at All Supported                                  | --      | --   | --   | 40%  | 33%  | NA   | NA   |
|   | Ozaukee |      |      |      |      | WI   | US   |
| <b>Mental Health Status</b>   | 2008    | 2011 | 2014 | 2016 | 2019 | 2018 | 2018 |
| Felt Sad, Blue or Depressed Always/Nearly Always (Past Month)                   | 5%      | 4%   | 4%   | 8%   | 5%   | NA   | NA   |
| Considered Suicide (Past Year)  | 3%      | 3%   | 3%   | 6%   | 4%   | NA   | NA   |
| Find Meaning & Purpose in Daily Life Seldom/Never                               | 5%      | 3%   | 7%   | 6%   | 6%   | NA   | NA   |
|   | Ozaukee |      |      |      |      | WI   | US   |
| <b>Children in Household</b>  | 2008    | 2011 | 2014 | 2016 | 2019 | 2018 | 2018 |
| Primary Health Care Doctor/Nurse Who Knows Child Well and Familiar with History | --      | 90%  | 88%  | 99%  | 93%  | NA   | NA   |
| Visited Primary Doctor/Nurse for Preventive Care (Past Year)                    | --      | 92%  | 89%  | 87%  | 91%  | NA   | NA   |
| Did Not Receive Care Needed (Past Year)   |         |      |      |      |      |      |      |
| Medical Care  | --      | 4%   | 6%   | 8%   | 0%   | NA   | NA   |
| Dental Care   | --      | 0%   | 6%   | 7%   | 3%   | NA   | NA   |
| Specialist  | --      | 0%   | 4%   | 4%   | 0%   | NA   | NA   |
| Current Asthma  | --      | 5%   | 9%   | 10%  | 9%   | NA   | NA   |
| Safe in Community/Neighborhood Seldom/Never                                     | --      | <1%  | 0%   | 0%   | 0%   | NA   | NA   |
| Children 5 to 17 Years Old*   |         |      |      |      |      |      |      |
| Fruit Intake (2+ Servings/Day)  | --      | 74%  | 79%  | 73%  | 70%  | NA   | NA   |
| Vegetable Intake (3+ Servings/Day)  | --      | 27%  | 41%  | 22%  | 24%  | NA   | NA   |
| 5+ Fruit/Vegetables per Day   | --      | 38%  | 55%  | 37%  | 42%  | NA   | NA   |
| Physical Activity (60 Min./5 or More Days/Week)                                 | --      | 52%  | 73%  | 67%  | 63%  | NA   | NA   |
| Unhappy, Sad or Depressed Always/Nearly Always (Past 6 Months)                  | --      | 0%   | 1%   | 4%   | 6%   | NA   | NA   |
| Experienced Some Form of Bullying (Past Year)                                   | --      | 8%   | 18%  | 14%  | 28%  | NA   | NA   |
| Verbally Bullied  | --      | 8%   | 18%  | 14%  | 25%  | NA   | NA   |
| Physically Bullied  | --      | 2%   | 3%   | 1%   | 2%   | NA   | NA   |
| Cyber Bullied   | --      | 3%   | 3%   | 0%   | 4%   | NA   | NA   |
|   | Ozaukee |      |      |      |      | WI   | US   |
| <b>Top County Health Issues</b>   | 2008    | 2011 | 2014 | 2016 | 2019 | 2018 | 2018 |
| Illegal Drug Use  | --      | --   | --   | 43%  | 40%  | NA   | NA   |
| Mental Health or Depression   | --      | --   | --   | 8%   | 20%  | NA   | NA   |
| Alcohol Use or Abuse  | --      | --   | --   | 13%  | 19%  | NA   | NA   |
| Chronic Diseases  | --      | --   | --   | 26%  | 18%  | NA   | NA   |
| Prescription or OTC Drug Abuse  | --      | --   | --   | 12%  | 15%  | NA   | NA   |
| Overweight or Obesity   | --      | --   | --   | 25%  | 15%  | NA   | NA   |
| Access to Health Care   | --      | --   | --   | 11%  | 15%  | NA   | NA   |
| Tobacco Use   | --      | --   | --   | 4%   | 11%  | NA   | NA   |
| Cancer  | --      | --   | --   | 15%  | 7%   | NA   | NA   |
| Access to Affordable Healthy Food   | --      | --   | --   | 3%   | 7%   | NA   | NA   |
| Environmental Issues  | --      | --   | --   | 6%   | 7%   | NA   | NA   |
| Affordable Health Care  | --      | --   | --   | 6%   | 6%   | NA   | NA   |
| Lack of Physical Activity   | --      | --   | --   | 4%   | 4%   | NA   | NA   |

--Not asked. NA-WI and/or US data not available.

\*In 2011, 2014 and 2016, the question was asked for children 8 to 17 years old.

### General Health

In 2019, 55% of respondents reported their health as excellent or very good; 16% reported fair or poor. Respondents with a high school education or less, in the bottom 60 percent household income bracket, who were unmarried, overweight, inactive or smokers were more likely to report fair or poor health. *From 2008 to 2019, there was a statistical increase in the overall percent of respondents who reported their health as fair or poor while from 2016 to 2019, there was no statistical change.*

### Health Care Coverage

In 2019, 3% of respondents reported they were not currently covered by health care insurance. Five percent of respondents reported they personally did not have health care insurance at least part of the time in the past year; respondents 18 to 34 years old, with a high school education or less, in the bottom 40 percent household income bracket or unmarried respondents were more likely to report this. Six percent of respondents reported someone in their household was not covered at least part of the time in the past year; respondents who were in the bottom 40 percent household income bracket or unmarried were more likely to report this. *From 2008 to 2019, the overall percent statistically decreased for respondents 18 and older or 18 to 64 years old who reported no current personal health care coverage while from 2016 to 2019, there was no statistical change. From 2008 to 2019, the overall percent statistically decreased for respondents who reported no personal health care insurance at least part of the time in the past year while from 2016 to 2019, there was no statistical change. From 2008 to 2019, the overall percent statistically decreased for respondents who reported someone in the household was not covered at least part of the time in the past year while from 2016 to 2019, there was no statistical change.*

In 2019, 18% of respondents reported they delayed or did not seek medical care because of a high deductible, high co-pay or because they did not have coverage for the care in the past year; respondents 35 to 44 years old or with a high school education or less were more likely to report this. Ten percent of respondents reported that someone in their household had not taken their prescribed medication due to prescription costs in the past year; unmarried respondents were more likely to report this. Eight percent of respondents reported there was a time in the past year someone in the household did not receive the medical care needed. Ten percent of respondents reported there was a time in the past year someone in the household did not receive the dental care needed; respondents who were in the bottom 40 percent household income bracket or unmarried were more likely to report this. Seven percent of respondents reported there was a time in the past year someone in the household did not receive the mental health care needed. *From 2011 to 2019, the overall percent statistically remained the same for respondents who reported in the past year they delayed or did not seek medical care because of a high deductible, high co-pay or because they did not have coverage for the medical care, as well as from 2016 to 2019. From 2011 to 2019, the overall percent statistically remained the same for respondents who reported someone in their household had not taken their prescribed medication due to prescription costs in the past year, as well as from 2016 to 2019. From 2011 to 2019, the overall percent statistically remained the same for respondents who reported unmet medical care in the past year, as well as from 2016 to 2019. From 2008 to 2019, the overall percent statistically remained the same for respondents who reported unmet dental care in the past year while from 2016 to 2019, there was a statistical decrease. From 2011 to 2019, the overall percent statistically increased for respondents who reported unmet mental health care in the past year while from 2016 to 2019, there was no statistical change.*

### Health Care Information

In 2019, 52% of respondents reported they contact a doctor when looking for health information or clarification while 23% reported they look on the Internet. Eight percent reported they were, or a family member was, in the health care field. Five percent reported family/friends while 3% reported other health professional. Respondents 65 and older or in the middle 20 percent household income bracket were more likely to report they contact a doctor. Respondents 45 to 54 years old or in the top 40 percent household income bracket were more likely to report the Internet as their source for health information. Respondents with a college education or married respondents were more likely to report themselves or a family member in the health care field. Respondents 18 to 34 years old, with a high school education or less, in the bottom 40 percent household income bracket or unmarried respondents were more likely to report family/friends. *From*



*2011 to 2019, there was a statistical increase in the overall percent of respondents who reported doctor as their source of health information/clarification while from 2016 to 2019, there was no statistical change. From 2011 to 2019, there was no statistical change in the overall percent of respondents who reported the Internet, myself/family member in the health care field, family/friends or other health professional as their source of health information/clarification, as well as from 2016 to 2019.*

### **Health Care Services**

In 2019, 91% of respondents reported they have a primary care physician they regularly see for check-ups and when they are sick; respondents 45 and older or in the top 40 percent household income bracket were more likely to report a primary care physician. Seventy-four percent of respondents reported their primary place for health services when they are sick was from a doctor's or nurse practitioner's office while 14% reported an urgent care center followed by 4% who reported a public health clinic/community health center for health services. One percent reported emergency room and less than one percent reported hospital outpatient department. Respondents 65 and older were more likely to report a doctor's or nurse practitioner's office as their primary health care when they are sick. Respondents who were female or 18 to 34 years old were more likely to report an urgent care center as their primary health care. Respondents 18 to 34 years old were more likely to report a public health clinic/community health center as their primary health care. Forty-seven percent of respondents had an advance care plan; respondents who were female, 65 and older or with a college education were more likely to report an advance care plan. *From 2016 to 2019, there was no statistical change in the overall percent of respondents who reported they have a primary care physician. From 2008 to 2019, there was a statistical decrease in the overall percent of respondents who reported their primary place for health services when they are sick was a doctor's/nurse practitioner's office while from 2016 to 2019, there was no statistical change. From 2008 to 2019, there was a statistical increase in the overall percent of respondents who reported their primary place for health services when they are sick was an urgent care center, as well as from 2016 to 2019. From 2008 to 2019, there was no statistical change in the overall percent of respondents who reported their primary place for health services when they are sick was a public health clinic/community health center, as well as from 2016 to 2019. From 2008 to 2019, there was no statistical change in the overall percent of respondents who reported their primary place for health services when they are sick was a hospital emergency room while from 2016 to 2019, there was a statistical decrease. From 2008 to 2019, there was a statistical decrease in the overall percent of respondents who reported their primary place for health services when they are sick was a hospital outpatient department, as well as from 2016 to 2019. From 2008 to 2019, there was a statistical increase in the overall percent of respondents with an advance care plan while from 2016 to 2019, there was no statistical change.*

### **Routine Procedures**

In 2019, 89% of respondents reported a routine medical checkup two years ago or less while 83% reported a cholesterol test four years ago or less. Eighty percent of respondents reported a visit to the dentist in the past year while 54% reported an eye exam in the past year. Respondents 45 and older, with a college education or unmarried respondents were more likely to report a routine checkup two years ago or less. Respondents 45 and older, with a college education or married respondents were more likely to report a cholesterol test four years ago or less. Respondents 35 to 54 years old, 65 and older, with a college education, in the top 60 percent household income bracket or married respondents were more likely to report a dental checkup in the past year. Respondents 65 and older or with a high school education or less were more likely to report an eye exam in the past year. *From 2008 to 2019, there was a statistical increase in the overall percent of respondents who reported a routine checkup two years ago or less, a cholesterol test four years ago or less or an eye exam in the past year while from 2016 to 2019, there was no statistical change. From 2008 to 2019, there was no statistical change in the overall percent of respondents who reported a dental checkup in the past year, as well as from 2016 to 2019.*

### **Vaccinations**

In 2019, 48% of respondents had a flu vaccination in the past year. Respondents 65 and older or with a college education were more likely to report a flu vaccination. Seventy-nine percent of respondents 65 and older had a pneumonia vaccination in their lifetime. *From 2008 to 2019, there was a statistical increase in the overall percent of respondents 18 and older who reported a flu vaccination in the past year while from 2016 to 2019, there was a statistical decrease. From 2008 to 2019, there was no statistical change in the overall percent of respondents 65 and older who reported a flu vaccination in the past year while from*

2016 to 2019, there was a statistical decrease. From 2008 to 2019, there was no statistical change in the overall percent of respondents 65 and older who had a pneumonia vaccination, as well as from 2016 to 2019.

### **Tested for a Sexually Transmitted Infection**

In 2019, 35% of respondents had been tested for a sexually transmitted infection, including HIV, the virus that causes AIDS; respondents who were female, 35 to 44 years old or with a college education were more likely to report this.

### **Health Conditions**

In 2019, out of six health conditions listed, the most often mentioned in the past three years was high blood pressure (29%), a mental health condition (21%) or high blood cholesterol (20%). Respondents who were male, 65 and older, with a high school education or less or overweight respondents were more likely to report high blood pressure. Respondents who were female, 18 to 34 years old, with a high school education or less, in the bottom 40 percent household income bracket or unmarried respondents were more likely to report a mental health condition. Respondents who were 65 and older, married, overweight or inactive were more likely to report high blood cholesterol. Eight percent of respondents reported diabetes; respondents 65 and older, with a high school education or less, in the bottom 60 percent household income bracket or overweight respondents were more likely to report this. Seven percent reported they were treated for, or told they had heart disease/condition in the past three years.

Respondents 65 and older or in the bottom 40 percent household income bracket were more likely to report heart disease/condition. Eleven percent reported current asthma; respondents 35 to 44 years old, with a high school education or less or married respondents were more likely to report current asthma. Of respondents who reported these health conditions, at least 90% reported the condition was controlled through medication, therapy or lifestyle changes except for asthma (80%). *From 2008 to 2019, there was a statistical increase in the overall percent of respondents who reported high blood pressure, a mental health condition or current asthma while from 2016 to 2019, there was no statistical change. From 2008 to 2019, there was no statistical change in the overall percent of respondents who reported high blood cholesterol while from 2016 to 2019, there was a statistical decrease. From 2008 to 2019, there was no statistical change in the overall percent of respondents who reported heart disease/condition or diabetes, as well as from 2016 to 2019.*

### **Times of Distress**

In 2019, 20% of respondents reported someone in their household experienced times of distress in the past three years and looked for community support; respondents who were in the bottom 40 percent household income bracket, unmarried or with children in the household were more likely to report this. Thirty-three percent of respondents who looked for community resource support reported they felt somewhat, slightly or not at all supported. *From 2016 to 2019, there was a statistical increase in the overall percent of respondents who reported someone in their household experienced times of distress in the past three years. From 2016 to 2019, there was no statistical change in the overall percent of respondents who reported they felt somewhat, slightly or not at all supported by the community resources.*

### **Mental Health Status**

In 2019, 5% of respondents reported they always or nearly always felt sad, blue or depressed in the past month; respondents 18 to 34 years old, with a high school education or less, in the bottom 40 percent household income bracket or unmarried respondents were more likely to report this. Four percent of respondents felt so overwhelmed they considered suicide in the past year; respondents 18 to 34 years old, with a high school education or less, in the bottom 40 percent household income bracket or unmarried respondents were more likely to report this. Six percent of respondents reported they seldom or never find meaning and purpose in daily life; respondents 18 to 34 years old, with a high school education or less, in the bottom 40 percent household income bracket or unmarried respondents were more likely to report this. *From 2008 to 2019, there was no statistical change in the overall percent of respondents who reported they always or nearly always felt sad, blue or depressed in the past month, they seldom or never find meaning and purpose in daily life or they considered suicide in the past year, as well as from 2016 to 2019.*

## **Physical Health**

In 2019, 41% of respondents did moderate physical activity five times a week for 30 minutes. Thirty-five percent of respondents did vigorous activity three times a week for 20 minutes. Combined, 53% met the recommended amount of physical activity; respondents who were not overweight were more likely to report this. *From 2008 to 2019, there was no statistical change in the overall percent of respondents who reported moderate physical activity five times a week for at least 30 minutes, as well as from 2016 to 2019. From 2008 to 2019, there was no statistical change in the overall percent of respondents who reported vigorous physical activity three times a week for at least 20 minutes, as well as from 2016 to 2019. From 2008 to 2019, there was no statistical change in the overall percent of respondents who met the recommended amount of physical activity, as well as from 2016 to 2019.*

In 2019, 62% of respondents were classified as at least overweight while 35% were obese. Respondents who were male, 55 to 64 years old, in the top 40 percent household income bracket, who were married or did an insufficient amount of physical activity were more likely to be classified as at least overweight. Respondents who were male, 35 to 44 years old or did not meet the recommended amount of physical activity were more likely to be obese. *From 2008 to 2019, there was no statistical change in the overall percent of respondents who were at least overweight, as well as from 2016 to 2019. From 2008 to 2019, there was a statistical increase in the overall percent of respondents who were obese, as well as from 2016 to 2019.*

## **Nutrition and Food Insecurity**

In 2019, 61% of respondents reported two or more servings of fruit while 25% reported three or more servings of vegetables on an average day. Respondents with a college education, who were not overweight or met the recommended amount of physical activity were more likely to report at least two servings of fruit. Respondents who were female, with a college education or who met the recommended amount of physical activity were more likely to report at least three servings of vegetables on an average day. Thirty-five percent of respondents reported five or more servings of fruit/vegetables on an average day; respondents with a college education, who were not overweight or met the recommended amount of physical activity were more likely to report this. Sixty percent of respondents reported when they buy a food product for the first time, they often read the food label or nutrition information; respondents with a college education or who met the recommended amount of physical activity were more likely to report this. Four percent of respondents reported their household went hungry because they couldn't afford enough food in the past year; respondents who were in the bottom 40 percent household income bracket or unmarried were more likely to report this. *From 2008 to 2019, there was a statistical decrease in the overall percent of respondents who reported at least two servings of fruit on an average day, as well as from 2016 to 2019. From 2008 to 2019, there was a statistical decrease in the overall percent of respondents who reported at least three servings of vegetables on an average day while from 2016 to 2019, there was no statistical change. From 2008 to 2019, there was a statistical decrease in the overall percent of respondents who reported at least five servings of fruit/vegetables while from 2016 to 2019, there was no statistical change. From 2016 to 2019, there was a statistical increase in the overall percent of respondents who reported when they buy a food product for the first time, they often read the food label or nutrition information. From 2016 to 2019, there was no statistical change in the overall percent of respondents who reported their household went hungry because they couldn't afford enough food in the past year.*

## **Women's Health**

In 2019, 78% of female respondents 50 and older reported a mammogram within the past two years. Eighty-six percent of female respondents 65 and older had a bone density scan. Eighty-four percent of female respondents 18 to 65 years old reported a pap smear within the past three years. Fifty-seven percent of respondents 18 to 65 years old reported an HPV test within the past five years. Eighty-nine percent of respondents reported they received a cervical cancer test in the time frame recommended (18 to 29 years old: pap smear within past three years; 30 to 65 years old: pap smear and HPV test within past five years or pap smear only within past three years). Respondents with a college education, in the top 40 percent household income bracket or married respondents were more likely to report a cervical cancer screen within the recommended time frame. *From 2008 to 2019, there was no statistical change in the overall percent of respondents 50 and older who reported a mammogram within the past two years, as well as from 2016 to 2019. From 2008 to 2019, there was no statistical change in the overall percent of respondents 65 and older who reported a bone density scan, as well as from 2016 to 2019. From 2008 to 2019, there was no statistical change in the overall percent of respondents 18 to 65 years old who reported*

*a pap smear within the past three years while from 2016 to 2019, there was a statistical increase. From 2014 to 2019, there was no statistical change in the overall percent of respondents 18 to 65 years old who reported an HPV test within the past five years, as well as from 2016 to 2019.*

*From 2014 to 2019, there was no statistical change in the overall percent of respondents 18 to 65 years old who reported a cervical cancer screen within the recommended time frame, as well as from 2016 to 2019.*

### **Colorectal Cancer Screening**

In 2019, 10% of respondents 50 and older reported a blood stool test within the past year. Eight percent of respondents 50 and older reported a sigmoidoscopy within the past five years while 72% reported a colonoscopy within the past ten years. This results in 76% of respondents meeting the current colorectal cancer screening recommendations. *From 2011 to 2019, there was a statistical decrease in the overall percent of respondents who reported a blood stool test within the past year while from 2016 to 2019, there was no statistical change. From 2008 to 2019, there was no statistical change in the overall percent of respondents who reported a sigmoidoscopy within the past five years, as well as from 2016 to 2019. From 2008 to 2019, there was a statistical increase in the overall percent of respondents who reported a colonoscopy within the past ten years while from 2016 to 2019, there was no statistical change. From 2008 to 2019, there was a statistical increase in the overall percent of respondents who reported at least one of these tests in the recommended time frame while from 2016 to 2019, there was no statistical change.*

### **Alcohol Use**

In 2019, 40% of respondents were binge drinkers in the past month (females 4+ drinks and males 5+ drinks). Respondents 18 to 34 years old, with some post high school education or unmarried respondents were more likely to have binged at least once in the past month. Three percent of respondents reported they had been a driver or a passenger when the driver perhaps had too much to drink in the past month. *From 2008 to 2019, there was a statistical increase in the overall percent of respondents who reported binge drinking in the past month, as well as from 2016 to 2019. From 2008 to 2019, there was no statistical change in the overall percent of respondents who reported in the past month they were a driver or passenger in a vehicle when the driver perhaps had too much to drink, as well as from 2016 to 2019.*

### **Tobacco Use**

In 2019, 12% of respondents were current tobacco cigarette smokers; respondents with a high school education or less or unmarried respondents were more likely to be a smoker. Four percent of respondents used electronic cigarettes in the past month. Respondents 18 to 34 years old, with a high school education or less or unmarried respondents were more likely to use electronic cigarettes. Sixty percent of current smokers or vapers quit for one day or longer because they were trying to quit in the past year. Seventy-two percent of current smokers/vapers who saw a health professional in the past year reported the professional advised them to quit smoking or vaping. *From 2008 to 2019, there was a statistical decrease in the overall percent of respondents who were current tobacco cigarette smokers while from 2016 to 2019, there was no statistical change. From 2014 to 2019, there was a statistical decrease in the overall percent of respondents who reported electronic vapor product use in the past month while from 2016 to 2019, there was a statistical increase. From 2008 to 2019, there was no statistical change in the overall percent of current tobacco cigarette smokers or electronic vapor product users who quit smoking or vaping for at least one day because they were trying to quit in the past year, as well as from 2016 to 2019. From 2008 to 2019, there was no statistical change in the overall percent of current smokers or vapers who reported in the past year their health professional advised them to quit smoking or vaping, as well as from 2016 to 2019. Please note: in 2019, tobacco cessation and health professional advised quitting questions included current smokers and current vapers. In previous years, both questions were asked of current smokers only.*

In 2019, 88% of respondents reported smoking is not allowed anywhere inside the home. Respondents who were in the top 40 percent household income bracket, married, nonsmokers or in households with children were more likely to report smoking is not allowed anywhere inside the home. Seven percent of nonsmoking or nonvaping respondents reported they were exposed to second-hand smoke or vapor in the past seven days; respondents with some post high school education were more likely to report this. *From 2008 to 2019, there was a statistical increase in the overall percent of respondents who reported smoking is not allowed anywhere inside the home while from 2016 to 2019, there was no statistical change. From 2008 to 2019, there was a statistical decrease in the overall percent of nonsmoking or nonvaping respondents who*

*reported they were exposed to second- hand smoke or vapor in the past seven days while from 2016 to 2019, there was no statistical change. Please note: in 2019, the second-hand smoke exposure question included nonvapers while in previous years the question included nonsmokers only.*

In 2019, 7% of respondents each used smokeless tobacco or used cigars, cigarillos or little cigars in the past month. Respondents who were male, 18 to 34 years old or with some post high school education were more likely to report smokeless tobacco use. Respondents who were male, 18 to 34 years old, 55 to 64 years old, with some post high school education or unmarried respondents were more likely to report they used cigars, cigarillos or little cigars. *From 2014 to 2019, there was no statistical change in the overall percent of respondents who used smokeless tobacco or used cigars/cigarillos/little cigars in the past month, as well as from 2016 to 2019.*

### **Household Problems**

In 2019, 4% of respondents reported someone in their household experienced a problem, such as legal, social, personal, physical or medical in connection with drinking alcohol in the past year. Two percent of respondents reported someone in their household experienced some kind of problem with marijuana. Less than one percent of respondents each reported a household problem in connection with cocaine/meth/other street drugs or heroin/other opioids. *From 2008 to 2019, there was no statistical change in the overall percent of respondents who reported a household problem in connection with drinking alcohol in the past year, as well as from 2016 to 2019. From 2011 to 2019, there was no statistical change in the overall percent of respondents who reported a household problem with marijuana in the past year, as well as from 2016 to 2019.*

### **Personal Safety**

In 2019, 4% of respondents reported someone made them afraid for their personal safety in the past year. Three percent of respondents reported they had been pushed, kicked, slapped or hit in the past year. A total of 6% reported at least one of these two situations; respondents 35 to 44 years old or with a college education were more likely to report this. *From 2008 to 2019, there was no statistical change in the overall percent of respondents who reported they were afraid for their personal safety or they were pushed/kicked/slapped/hit in the past year, as well as from 2016 to 2019. From 2008 to 2019, there was no statistical change in the overall percent of respondents who reported at least one of the two personal safety issues in the past year, as well as from 2016 to 2019.*

### **Children in Household**

In 2019, the respondent was asked if they make health care decisions for children living in the household. If yes, they were asked a series of questions about the health and behavior of a randomly selected child. Ninety-three percent of respondents reported they have one or more persons they think of as their child's primary doctor or nurse, with 91% reporting their child visited their primary doctor or nurse for preventive care during the past year. Three percent of respondents reported in the past year their child did not receive the dental care needed while 0% each reported their child did not receive the medical care needed or their child did not visit a specialist they needed. Nine percent of respondents reported their child currently had asthma. Zero percent of respondents reported their child was seldom/never safe in their community. Seventy percent of respondents reported their 5 to 17 year old child ate at least two servings of fruit on an average day while 24% reported three or more servings of vegetables. Forty-two percent of respondents reported their child ate five or more servings of fruit/vegetables on an average day. Sixty-three percent of respondents reported their 5 to 17 year old child was physically active for 60 minutes five times a week. Six percent of respondents reported their 5 to 17 year old child always or nearly always felt unhappy, sad or depressed in the past six months. Twenty-eight percent reported their 5 to 17 year old child experienced some form of bullying in the past year; 25% reported verbal bullying, 4% cyber bullying and 2% reported physical bullying. *From 2011 to 2019, there was no statistical change in the overall percent of respondents who reported their child had a primary doctor or nurse, while from 2016 to 2019, there was a statistical decrease. From 2011 to 2019, there was no statistical change in the overall percent of respondents who reported their child visited their primary doctor/nurse in the past year for preventive care, as well as from 2016 to 2019. From 2011 to 2019, there was a statistical decrease in the overall percent of respondents who reported in the past year their child had an unmet medical care need, as well as from 2016 to 2019. From 2011 to 2019, there was no statistical change in the overall percent of respondents who reported in the past year their child had an unmet dental care need, as well as from 2016 to 2019. From 2011 to 2019, there was*

*no statistical change in the overall percent of respondents who reported in the past year their child was unable to see a specialist when needed while from 2016 to 2019, there was a statistical decrease. From 2011 to 2019, there was no statistical change in the overall percent of respondents who reported their child currently had asthma, as well as from 2016 to 2019. From 2011 to 2019, there was no statistical change in the overall percent of respondents who reported their child was seldom/never safe in their community, as well as from 2016 to 2019. From 2011 to 2019, there was no statistical change in the overall percent of respondents who reported their 5 to 17 year old child ate at least two servings of fruit, ate at least three servings of vegetables or met the recommendation of at least five servings of fruit/vegetables on an average day, as well as from 2016 to 2019. From 2011 to 2019, there was no statistical change in the overall percent of respondents who reported their 5 to 17 year old child was physically active for at least 60 minutes five times a week, as well as from 2016 to 2019. From 2011 to 2019, there was no statistical change in the overall percent of respondents who reported their 5 to 17 year old child always or nearly always felt unhappy/sad/depressed in the past six months, as well as from 2016 to 2019. From 2011 to 2019, there was a statistical increase in the overall percent of respondents who reported in the past year their child was bullied overall, as well as from 2016 to 2019. From 2011 to 2019, there was a statistical increase in the overall percent of respondents who reported in the past year their child was verbally bullied while from 2016 to 2019, there was no statistical change. From 2011 to 2019, there was no statistical change in the overall percent of respondents who reported in the past year their child was cyber bullied or physically bullied, as well as from 2016 to 2019.*

### **Top County Health Issues**

In 2019, respondents were asked to list the top three health issues in the county. The most often cited were illegal drug use (40%), mental health/depression (20%) or alcohol use/abuse (19%). Respondents in the top 60 percent household income bracket were more likely to report illegal drug use as a top health issue. Respondents with a college education were more likely to report mental health/depression. Respondents in the top 40 percent household income bracket were more likely to report alcohol use or abuse. Eighteen percent of respondents reported chronic diseases as a top issue; respondents 35 to 44 years old or with some post high school education were more likely to report this. Fifteen percent of respondents reported prescription or over-the-counter drug abuse; respondents who were female, with a college education or in the top 40 percent household income bracket were more likely to report this. Fifteen percent of respondents reported overweight or obesity as a top issue. Fifteen percent of respondents were more likely to report access to health care; respondents 45 to 54 years old or with a college education were more likely to report this. Eleven percent reported tobacco use as a top issue. Seven percent of respondents reported cancer as a top issue; respondents 45 to 54 years old were more likely to report this. Seven percent of respondents reported access to affordable healthy food; respondents who were female, 18 to 44 years old or in the bottom 40 percent household income bracket were more likely to report this. Seven percent of respondents reported environmental issues; respondents in the bottom 40 percent household income bracket were more likely to report this. Six percent of respondents reported affordable health care; married respondents were more likely to report this. Four percent of respondents reported lack of physical activity as a top issue; respondents 18 to 34 years old or with a college education were more likely to report this. *From 2016 to 2019, there was no statistical change in the overall percent of respondents who reported illegal drug use, prescription/over-the-counter drug abuse, access to health care, environmental issues, affordable health care or lack of physical activity as one of the top health issues in the county. From 2016 to 2019, there was a statistical increase in the overall percent of respondents who reported mental health/depression, alcohol use/abuse, tobacco use or access to affordable healthy food as one of the top health issues in the county. From 2016 to 2019, there was a statistical decrease in the overall percent of respondents who reported chronic diseases, overweight/obesity or cancer as one of the top health issues in the county.*

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13111 N Port Washington Rd, Mequon, WI 53097