2022
Community Health Needs Assessment Report

Aurora Medical Center – Bay Area

3003 University Drive
Marinette, WI 54143

Aurora Health Care

December 2022

Thank you for taking the time to learn more about the Advocate Aurora Health Marinette and Menominee County Community Health Needs Assessment (CHNA). This CHNA provides a comprehensive picture of the health status of the communities served by Aurora Medical Center – Bay Area. Through understanding the health and social needs of our communities, our hospital can provide safe, high-quality care with compassion and dignity.

Collaboration and partnership are crucial components of a hospital's CHNA process. Beginning in 2022, Aurora Medical Center – Bay Area, the Marinette County Public Health Department, and Provident Health Foundation conducted the first collaborative Community Health Needs Assessment (CHNA) for Marinette County.

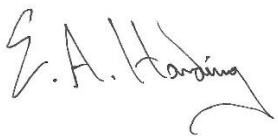
Based upon comprehensive community data and feedback, Aurora Medical Center – Bay Area selected 4 health priorities for the 2022 CHNA. The priorities selected include the following:

- Access to innovative care and services
- Behavioral Health: Mental health and substance use
- Living Well: Nutrition, physical activity and obesity
- Workforce development

At Advocate Aurora Health, we are committed to helping people live well by understanding the needs of the community and implementing culturally appropriate interventions that address the root causes. We also understand that creating and sustaining community partnerships to implement evidence-based programs is critical in addressing our communities' health needs.

We welcome and encourage community feedback regarding the health needs of our community and the CHNA process. A link at the end of the CHNA report will provide you with an opportunity to leave any feedback, comments or ideas. We also encourage you to review the report and provide recommendations regarding community programs or strategies that aim to address the identified priority health needs. Our Marinette County hospital has the honor of working with community partners and leaders to improve the health and wellness of diverse communities across our service area. With a comprehensive and thorough understanding of our communities' health needs, the hospital will be well positioned to help people live well and improve the quality of life among individuals, children, and families in the communities we serve.

Sincerely,



Edward A. Harding, FACHE
President

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I. Executive Summary

Beginning in 2022, Aurora Health Care, the Marinette County Public Health Department, and Provident Health Foundation conducted the first collaborative Community Health Needs Assessment (CHNA) for Marinette County. The CHNA serves as the foundation from which hospitals and the local health department develop their respective community health improvement strategies.

These findings are also intended to inform a broader audience — community health centers, government health agencies, public health departments, philanthropy, community-based organizations, and civic leaders — about the top health issues facing our community.

The Marinette County and Menominee County CHNA relies on three sources of information:

• Community Health Survey (primary data): online and phone surveys conducted April – July 2022, with nearly 900 (400 phone and 489 online) Marinette County and Menominee County residents completing questions related to the top health needs in the community, individuals' perception of their overall health, access to health services, and social drivers of health, including racism and health equity.

• Stakeholder Interviews (primary data): conducted by health system community benefit leaders with 35 individuals to identify the community's most pressing health issues and effective health improvement strategies.

• Metopio (secondary data): Advocate Aurora Health has a contract with Metopio to provide an internet-based data resource for their hospitals. This robust platform offers curated data from public and proprietary sources for information on health behaviors and health risks, health outcomes, health care utilization, demographic, and community-level drivers of health like economic, housing, employment, and environmental conditions. Data for each indicator is presented by race, ethnicity, and gender when the data is available (Metopio: https://public.metop.io).

The top five health issues identified in the Marinette Menominee Community Health Needs Assessment were:
• Substance Abuse
• Mental Health
• Obesity
• Housing
• Transportation

The top five health issues identified by the Marinette Menominee Community Health Needs Assessment were presented to community partners on September 13, 2022, and Aurora Medical Center – Bay Area leadership on October 20, 2022. Priority health issues were selected based on the following criteria:

- Size/Seriousness of the problem
- Effectiveness of available interventions
- Available resources to address the health issue
- Health care system adequately situated to address the health issue
- Meets a defined community need as identified through data

- Potential for issue to impact other health and social issues
- Ability to effectively address or impact health issue through collaboration

Using these criteria, Aurora Medical Center – Bay Area has prioritized the significant health needs to address in the 2023-2025 implementation strategy:

- Access to innovative care and services
- Behavioral Health: Mental health and substance use
- Living Well: Nutrition, physical activity and obesity
- Workforce development

II. Description of Advocate Aurora Health and Aurora Medical Center – Bay Area

A. Advocate Aurora Health

Advocate Aurora Health is one of the 12 largest not-for-profit, integrated health systems in the United States and a leading employer in the Midwest with more than 75,000 employees, including more than 22,000 nurses and the region's largest employed medical staff and home health organization. A national leader in clinical innovation, health outcomes, consumer experience and value-based care, the system serves nearly 3 million patients annually in Illinois and Wisconsin across more than 500 sites of care. Advocate Aurora is engaged in hundreds of clinical trials and research studies and is nationally recognized for its expertise in cardiology, neurosciences, oncology and pediatrics. The organization contributed over $2.5 billion in charitable care and services to its communities in 2020. To learn more about Advocate Aurora Health's contributions to the community and how we help people live well, visit Community Benefits | Aurora Health Care.

B. Aurora Medical Center – Bay Area

The new Aurora Medical Center – Bay Area opened its doors in August 2018. As a healing environment on 91 acres of wooded surroundings, this facility was designed with the help of staff, providers and the community with your health and the environment in mind. You'll find an extraordinary team of doctors, nurses and caregivers, along with exceptional amenities.

The floor plan of this facility, along with its modern and efficient design, allows for ease of navigation and privacy for patients and their families. You'll also find spacious, private rooms offering plenty of natural lighting to help make your recovery as comfortable as possible. Family lounges and pull-out couches in every room allow your personal support team to be near you and your medical caregivers.

For high-quality, cost-effective care in an environment that puts you and your family first, look no further than Aurora Medical Center – Bay Area.

III. 2022 Community Health Needs Assessment

A. Community Definition

For the purposes of this assessment, "community" is defined as Marinette County, Wisconsin and Menominee County, Michigan. Exhibit 1 shows a map of the defined community.

Exhibit 1: Aurora Medical Center – Bay Area Community

Source: Metopio, 2022

1. Population

The 2020 Marinette County population was 41,872. The 2020 Menominee County population was 23,502.

2. Social Drivers of Health

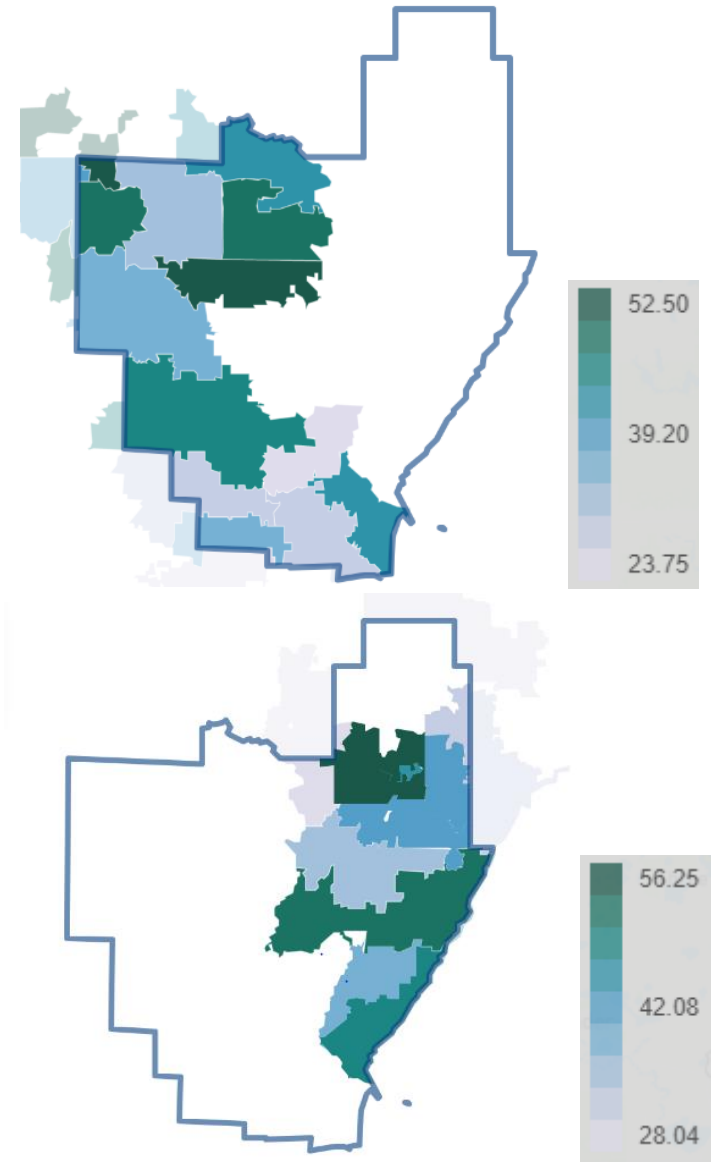
In 2018, Marinette County was in the 29.7 percentile for Social Vulnerability Index, and Menominee County was in the 27.6 percentile. The Social Vulnerability Index was created to help public health officials and emergency response planners identify and map the communities that will most likely need support before, during, and after a hazardous event, such as a natural disaster, disease outbreak, or chemical spill. SVI indicates relative vulnerability by ranking places on 15 social factors, including unemployment, minority status, and disability, and combining the rankings into a single scale from the 0th percentile (lowest vulnerability) to 100th percentile (highest vulnerability).

In 2015-2019, Marinette County had a Hardship Index of 49.0, higher than the Wisconsin average of 36.5. Menominee County had a Hardship Index of 47.5, higher than the Michigan average of 45.7. The Hardship Index is a composite score reflecting hardship in the community (higher values indicate greater hardship).

It incorporates unemployment, age dependency, education, per capita income, crowded housing, and poverty into a single score that allows comparison between geographies. It is highly correlated with other measures of economic hardship, such as labor force statistics, and with poor health outcomes.

The exhibit below shows a graph of the ALICE index in Marinette County (top) and Menominee County (bottom). ALICE stands for: Asset Limited, Income Constrained, Employed. ALICE represents households who may be above the poverty-line but are still unable to afford the basic necessities of housing, food, child-care, health care, and transportation due to the lack of jobs that can support basic necessities and increases in the basic cost of living.

Exhibit 2: Marinette County and Menominee County ALICE Map 2018 and 2019



Source: Metopio, United Way ALICE Data, 2022

Key findings: Community Definition

- The median age of Marinette County is 48.9 years old, higher than the Wisconsin average
- The median age of Menominee County is 49.2 years old, higher than the Michigan average
- The median household income of Marinette County is $55,209, lower than the Wisconsin average
- The median household income of Menominee County is $51,166, lower than the Michigan average

3. Demographics

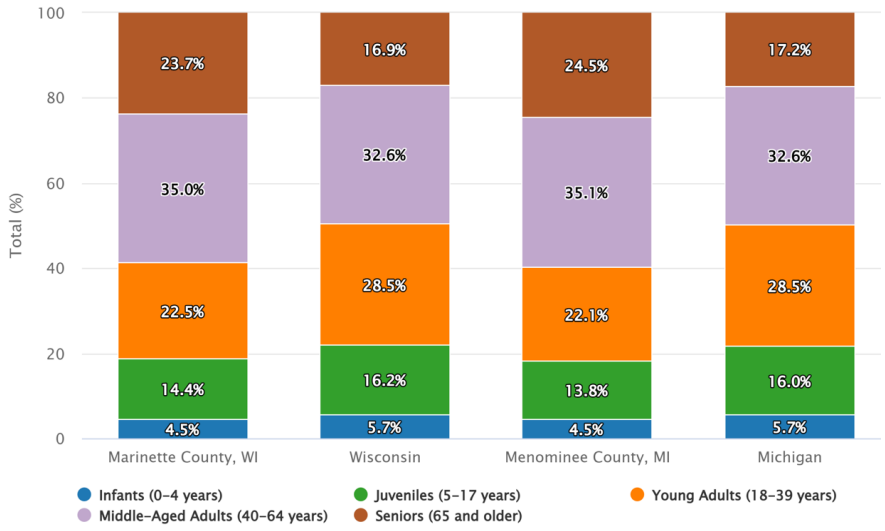
Age and Gender

In 2016-2020, the median age in Marinette County was 48.9 years old, and the median age in Menominee County was 49.2 years old, both higher than the Wisconsin median age of 39.6 and the Michigan median age of 39.8.

In 2016-2020, 49.7 percent of the Marinette County population was female, and 50.3 percent was male, compared to 50.2 percent female and 49.8 percent male in Wisconsin overall. In the same time period, 49.0 percent of the Menominee County population was female, and 51.0 percent was male, compared to 50.7 percent female and 49.3 percent male in Michigan overall.

Out of the total Marinette County population, 4.5 percent is under 5 years old, 14.4 percent of the population is between the ages of 5 and 17, and 22.5 percent of the population is between the ages of 18 and 39, 35.0 percent of the population is between the ages of 40 and 64 and 23.7 percent of the population is 65 years or older. The chart below shows the Marinette County and Menominee County population by age group, compared to Wisconsin and Michigan averages in Exhibit 3.

Exhibit 3: Marinette and Menominee County Population by Age 2016-2020



Source: Metopio, American Community Survey, 2022

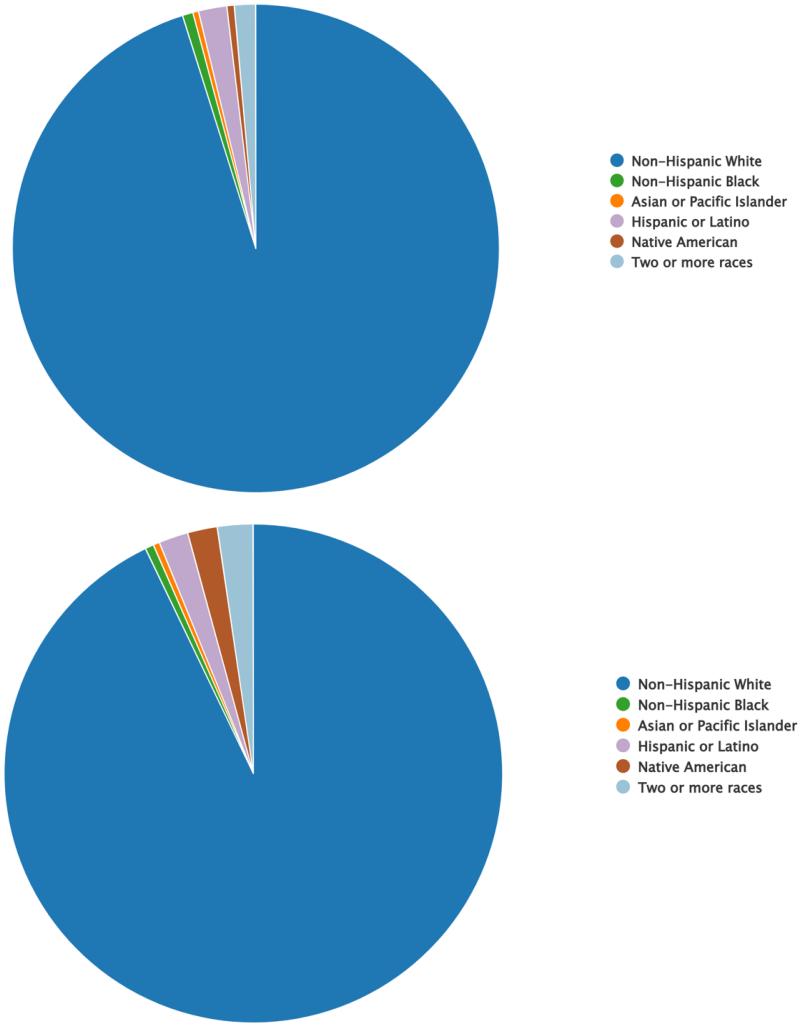
Race and Ethnicity

Demographic data shows that Marinette County is 95.1 percent non-Hispanic White, which is the largest racial group followed by Hispanic of Latino population at 1.9 percent, two or more races at 1.4 percent, non-Hispanic Black at 0.7 percent, Native American at 0.5 percent and Asian or Pacific Islander at 0.4 percent.

Menominee County is 92.9 percent non-Hispanic White, which is the largest racial group followed by two or more races at 2.3 percent, Hispanic or Latino and Native American, both at 1.9 percent, non-Hispanic Black at 0.6 percent and Asian or Pacific Islander at 0.4 percent.

Graphs showing the racial and ethnic composition of Marinette County (top) and Menominee County (bottom) are displayed in Exhibit 4.

Exhibit 4: Marinette and Menominee County Population by Race/Ethnicity 2016-2020



Source: Metopio, American Community Survey, 2022

In 2016-2020, 2.4 percent of Marinette County residents and 0.6 percent of Menominee County residents spoke Spanish as their primary language at home.

Household/Family

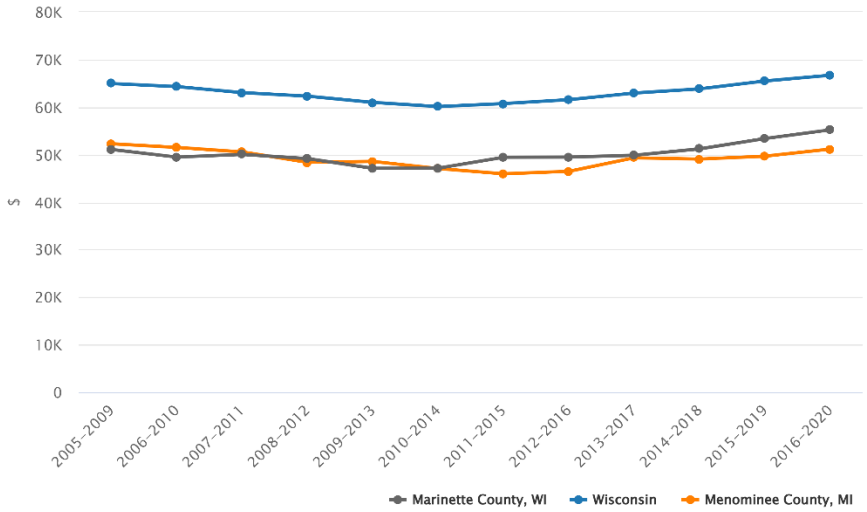
In 2016-2020, 4.4 percent of Marinette County households and 4.3 percent of Menominee County households were single parent households, meaning there are children present and are headed by a single parent (mother or father), with no partner present. Additionally, 30.8 percent of Marinette County seniors and 30.1 percent of Menominee seniors live alone (2016-2020).

4. Economics

Income

The median household income in Marinette County is $55,209, which is lower than the Wisconsin median household income of $66,706. The median household income in Menominee County is $51,166, which is lower than the Michigan median household income of $62,428. The graph below shows the change over time in the Marinette County and Menominee County median household income compared to Wisconsin in Exhibit 5.

Exhibit 5: Marinette and Menominee County Median Household Income 2005-2020



Source: Metopio, American Community Survey, 2022

Employment

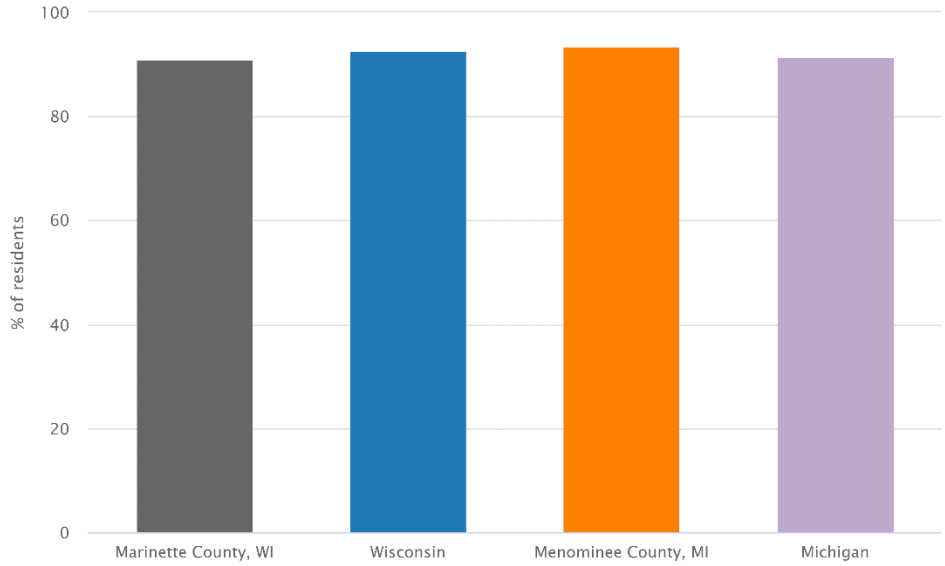
The unemployment rate among Marinette County residents that are 16 years of age and older is 4.4 percent, which is higher compared to the state of Wisconsin at 3.6 percent. The unemployment rate among Menominee County residents that are 16 years of age and older is 5.4 percent, which is lower compared to the state of Michigan at 6.0 percent.

5. Education

Educational Level

Marinette County and Menominee County educational attainment data was also reviewed and analyzed to gain an in-depth understanding of educational levels across the county. Educational attainment is one of the social drivers of health. Higher levels of education correlate with better health outcomes. The percent of individuals in Marinette County with a high school degree or higher is lower compared to the Wisconsin average, while the Menominee County rate is higher than the Michigan average. Exhibit 6 (next page) shows high school graduation rates among individuals aged 25 and older residing in Marinette County and Menominee County, compared to Wisconsin and Michigan averages.

Exhibit 6: Marinette County and Menominee County High School Graduation Rate 2016-2020



Source: Metopio, American Community Survey, 2022

6. Health Care Resources in the Defined Community

Available community resources and assets for each top community health issue were discussed by interviewed community members. The organizations listed as providing key stakeholders for interviews are resources for the community as well. Specific resources leveraged by the hospital are identified in the Implementation Strategy. To view the full Key Stakeholder Interview Report, go to Health Data | Community Benefits | Aurora Health Care.

B. How the CHNA was Conducted

1. Process and Partnership

Beginning in 2022, Aurora Health Care, the Marinette County Public Health Department, and Provident Health Foundation conducted the first collaborative Community Health Needs Assessment (CHNA) for Marinette County. The CHNA serves as the foundation from which hospitals and the local health department develop their respective community health improvement strategies.

These findings are also intended to inform a broader audience — community health centers, government health agencies, public health departments, philanthropy, community-based organizations, and civic leaders — about the top health issues facing our community.

2. Data Collection

The Marinette County and Menominee County CHNA relies on three sources of information:

• Community Health Survey (primary data): online and phone surveys conducted April – July 2022, with nearly 900 (400 phone and 489 online) Marinette County and Menominee County residents completing questions related to the top health needs in the community, individuals' perception of their overall health, access to health services, and social drivers of health, including racism and health equity.

• Stakeholder Interviews (primary data): conducted by health system community benefit leaders with 35 individuals to identify the community's most pressing health issues and effective health improvement strategies.

• Metopio (secondary data): Advocate Aurora Health has a contract with Metopio to provide an internet-based data resource for their hospitals. This robust platform offers curated data from public and proprietary sources for information on health behaviors and health risks, health outcomes, health care utilization, demographic, and community-level drivers of health like economic, housing, employment, and environmental conditions. Data for each indicator is presented by race, ethnicity, and gender when the data is available (Metopio: https://public.metop.io).

C. Summary of CHNA Findings

1. Overall Health Status

Life expectancy is a projection of expected years of life to be lived. Overall life expectancy is 78.8 years for the general population in Marinette County, lower than the Wisconsin average of 79.3. The average life expectancy is 82.3 years in Menominee County, higher than the Michigan average of 78.0 years.

According to 2022 County Health Rankings, 15 percent of Marinette County residents report being in poor or fair health. Marinette ranks 60 out of 72 counties in Wisconsin for health outcomes, and 50 out of 72 counties for health factors. Fourteen percent of Menominee County residents report being in poor or fair health. Menominee County ranks 18 out of 83 counties in Michigan for health outcomes, and 22 out of 83 counties for health factors.

The top five health issues identified in the Marinette Menominee Community Health Needs Assessment were:
• Substance Abuse
• Mental Health
• Obesity
• Housing
• Transportation

2. Access to Care and Health Care Coverage

Why is this important?

Sometimes people don't get recommended health care services, like cancer screenings, because they don't have a primary care provider. Other times, it's because they live too far from health care providers who offer them. Interventions to increase access to health care professionals and improve communication – in person or remotely – can help more people get the care they need. Adequate and affordable health insurance coverage is important for health care access and improving the health of individuals and our community.

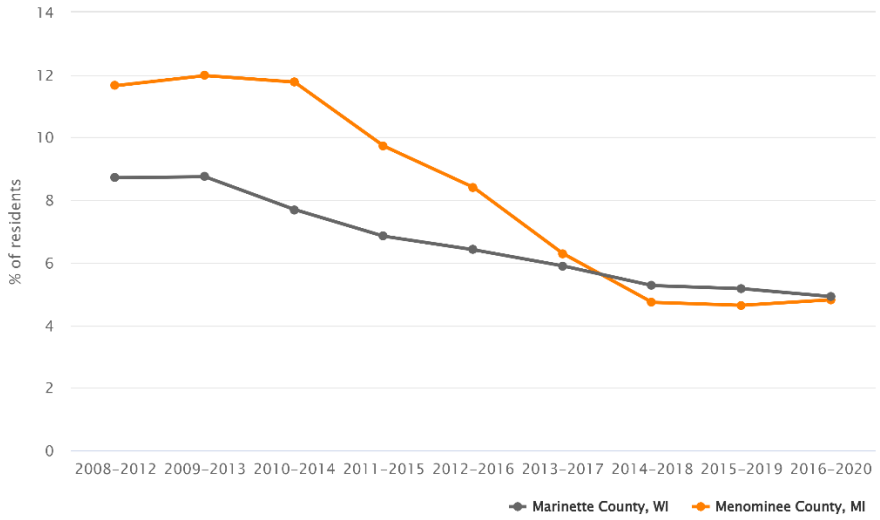
Key findings: Health Care Coverage and Access to Care

- The uninsured rate of Marinette County and Menominee County residents has decreased since 2008-2012
- One in ten Marinette Menominee phone survey respondents reported an unmet care need in the past year

Health Care Coverage

The exhibit below shows the overall rate of uninsured residents in Marinette County (4.9 percent) and Menominee County (4.8 percent), which have both decreased since the baseline of 2008-2012.

Exhibit 7: Marinette and Menominee County Health Uninsured Rate 2008-2020



Source: Metopio, American Community Survey, 2022

Unmet Care Needs

Ten percent of respondents of the 2022 Marinette Menominee County Phone Survey reported an unmet medical care need in the past year. Five percent of Marinette Menominee County Phone Survey respondents reported using an Emergency Department as their primary source of healthcare.

Exhibit 8: Marinette and Menominee County Access Table

Perceptions of community health care access	Yes	No	Not Sure
There are **quality** health care services	79%	11%	9%
There are **affordable** health care services	58%	20%	22%
Individuals in my community can access health care services regardless of race, gender, sexual orientation, immigration status, etc.	72%	2%	26%

Access to Care

The Primary Care Provider rate in Marinette County is 72.7 physicians per 100,000 residents, which is lower than the Wisconsin average of 89.7 physicians per 100,000 residents. The Primary Care Provider rate in Menominee County is 29.5 physicians per 100,000 residents, which is lower than the Michigan average of 94.2. The Mental Health Provider rate in Marinette County is 188.4 providers per 100,000 residents, which is lower than the Wisconsin average of 272.2 providers per 100,000 residents. The Mental Health Provider rate in Menominee County is 272.2 providers per 100,000 residents, which is lower than the Michigan average of 562.8 providers per 100,000 residents.

3. Health Risk Behaviors

Why is this important?

Many chronic diseases are caused by a short list of risk behaviors: tobacco use and exposure to secondhand smoke, poor nutrition, including diets low in fruits and vegetables and high in sodium and saturated fats, lack of physical activity, and excessive alcohol use.

Key findings: Health Risk Behaviors

- Twenty percent of Marinette and Menominee County phone survey respondents reported binge drinking in the past month
- In 2019, 36.6 percent of Marinette County and 37.5 percent Menominee County residents were obese

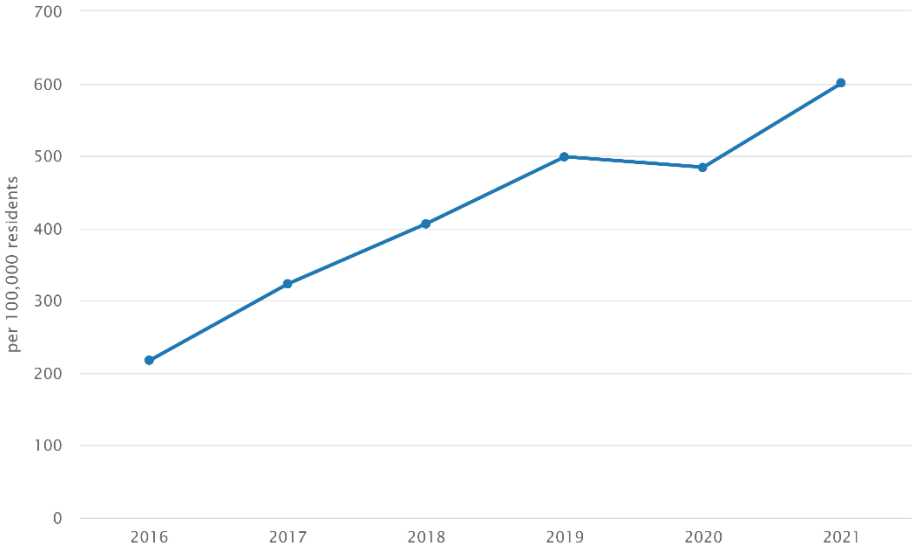
Substance use and abuse

In 2019, 20.4 percent of adults in Marinette County reported having smoked at least 100 cigarettes in their lifetime and currently smoke every day or most days, a decrease from the 1996 baseline of 26.3 percent. In 2019, 22.1 percent of adults in Menominee County reported having smoked at least 100 cigarettes in their lifetime and currently smoke every day or most days, a decrease from the 1996 baseline of 28.0 percent.

In 2022, seven percent of Marinette and Menominee County phone survey respondents reported heavy drinking, which is defined as 61 or more drinks per month for males and 31 or more drinks per month for females. Additionally, 20 percent of Marinette and Menominee County phone survey respondents reported binge drinking, higher than the United States average of 16 percent. Binge drinking reflects the percent of adults aged 18 and older who report having five or more drinks (men) or four or more drinks (women) on an occasion in the past 30 days. Alcohol use is likely seriously underreported, so these estimates are an extreme lower bound on actual binge drinking prevalence.

As shown in Exhibit 9 below, from 2016 through 2021, the Marinette County alcohol use emergency department visit rate increased from 217.1 visits per 100,000 residents to 600.8 visits per 100,000 residents.

Exhibit 9: Marinette County Alcohol Use Emergency Department Visit Rate 2016-2021



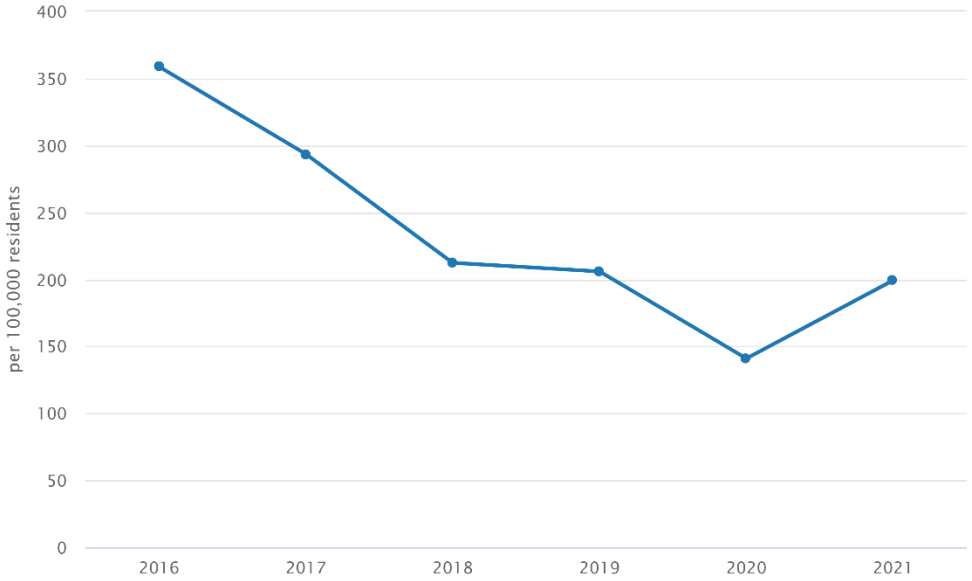
Source: Metopio, Wisconsin Health Association Information Center (WHAIC), 2022

The 2021 Marinette County alcohol use hospitalization rate was 181.2 admissions per 100,000 residents, lower than the Wisconsin average of 218.7 visits per 100,000 residents.

In Marinette County, the rate of drug overdose mortality was 18.7 per 100,000 population in 2016-2020, lower than Wisconsin rate of 21.7 per 100,000 population. In Menominee County, the rate of drug overdose mortality was 20.2 per 100,000 population in 2016-2020, lower than Michigan rate of 26.4 per 100,000 population (Source #2).

As shown in Exhibit 10 the Marinette County opioid-related emergency department visit rate decreased from 358.7 visits per 100,000 residents in 2016 to 199.3 visits per 100,000 residents in 2021.

Exhibit 10: Marinette County Opioid-Related Emergency Department Visit Rate 2016-2021



Source: Metopio, Wisconsin Health Association Information Center (WHAIC), 2022

In 2021, the Marinette County substance use hospitalization rate was 260.1 admissions per 100,000 residents, lower than the Wisconsin average of 308.0 visits per 100,000 residents.

Nutrition

Ten percent of Marinette County residents have limited access to healthy foods, higher than the Wisconsin average. Twelve percent of Menominee County residents have limited access to healthy foods, lower than the Michigan average of 14 percent.

Physical Activity and Inactivity

In 2019, 25.5 percent of adults in Marinette County reported no exercise in the past month, higher than the Wisconsin average (23.3 percent). Additionally, 27.3 percent of adults in Menominee County reported no exercise in the past month during the same year.

Weight Status

In 2019, 36.6 percent of adults in Marinette County were obese (have a body mass index (BMI) ≥30.0 kg/m² calculated from self-reported weight and height), higher than the Wisconsin and national averages of 34.6 percent and 32.3 percent, respectively. Additionally, 37.5 percent of adults in Menominee County were obese during the same year, higher than the Michigan average of 36.3 percent.

4. Disease and Chronic Conditions

Why is this important?

Six in ten Americans live with at least one chronic disease, like heart disease and stroke, cancer, or diabetes. These and other chronic diseases are the leading causes of death and disability in America, and they are also a leading driver of health care costs.

Cancer

Exhibit 11 below, shows the mortality, incidence, and screening rates for various types of cancer in Marinette County and Menominee County, compared to the United States average.

Exhibit 11: Marinette County and Menominee County Cancer Table

Topic	Marinette County, WI	Menominee County, MI	United States
Breast cancer mortality *deaths per 100,000, 2016-2020*	10.6	12.4	10.8
Non-invasive breast cancer diagnosis rate *per 100,000 female residents, 2014-2018*	22.6	20.5	29.4
Mammography use *Females % of adults, 2018*	68.0	71.0	77.8
Colorectal cancer mortality *deaths per 100,000, 2016-2020*	10.8	12.1	13.4
Colorectal cancer screening *% of adults, 2018*	66.9	67.7	65.0
Cervical cancer diagnosis rate *per 100,000 female residents, 2014-2018*	11.0	NA	7.7
Pap smear use *Females, Adults (18-64 years) % of adults, 2018*	83.8	85.2	84.6
Lung, trachea, and bronchus cancer mortality *deaths per 100,000, 2016-2020*	40.7	39.7	36.7
Lung cancer diagnosis rate *per 100,000 residents, 2014-2018*	71.6	60.6	57.3
Oral cancer diagnosis rate *per 100,000 residents, 2014-2018*	12.7	13.4	11.9
Prostate cancer diagnosis rate *per 100,000 male residents, 2014-2018*	115.0	114.6	106.2

Source: Metopio, 2022

Key findings: Disease and Chronic Conditions

- Thirty-seven percent of Marinette Menominee County phone survey respondents reported ever having been told by a doctor they have high blood pressure
- Key stakeholders and community members ranked mental health as a top community issue
- The Marinette County mental health Emergency Department visit rate is higher among the Hispanic and Latino population

Cardiovascular Disease

The 2021 heart failure hospitalization rate in Marinette County was 390.6 admissions per 100,000 residents, slightly lower than the Wisconsin average of 396.8 per 100,000. The 2021 heart failure emergency department visit rate was 256.3 visits per 100,000 residents, higher than the Wisconsin average of 206.2. The 2021 hypertension hospitalization rate in Marinette County was 52.0 admissions per 100,000 residents, higher than the Wisconsin average of 38.5. The 2021 hypertension emergency department visit rate was 322.9 visits per 100,000 residents, higher than the Wisconsin average of 299.5.

In 2022, 29.0 percent of Marinette and Menominee County phone survey respondents reported ever having been told by a doctor, nurse or other health professional they have high cholesterol. Additionally, 37.0 percent of phone survey respondents reported ever having been told by a doctor, nurse or other health professional they have high blood pressure.

Diabetes

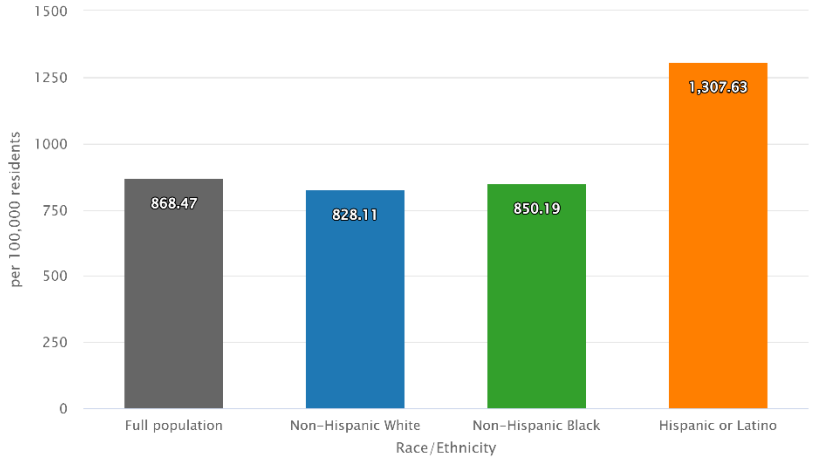
The 2021 uncontrolled diabetes hospitalization rate in Marinette County was 22.5 admissions per 100,000 residents, slightly lower than the Wisconsin average of 23.6 per 100,000. The 2021 uncontrolled diabetes emergency department visit rate was 216.6 visits per 100,000 residents, slightly higher than the Wisconsin average of 215.0.

Mental Health

Mental health was identified as a top health issue by community members and key stakeholders. Stakeholder reported needed strategies including more mental health providers, quicker access, crisis care, more affordable services, more education, less stigma, youth services, and collaboration across counties.

The 2021 mental health hospitalization rate in Marinette County was 694.4 admissions per 100,000 residents, higher than the Wisconsin average of 650.8 per 100,000. The 2021 mental health emergency department visit rate was 892.8 visits per 100,000 residents, lower than the Wisconsin average of 919.8. The 2017-2021 mental health Emergency Department visit rate for Hispanic residents was higher than the county average, shown in Exhibit 12 (next page).

Exhibit 12: Marinette County Mental Health Emergency Department Visit Rate by Race/Ethnicity 2017-2021



Source: Metopio, Wisconsin Health Association Information Center (WHAIC), 2022

The 2021 suicide and self-injury hospitalization rate in Marinette County was 99.9 admissions per 100,000 residents, higher than the Wisconsin average of 77.4 per 100,000. The 2021 suicide and self-injury emergency department visit rate was 157.2 visits per 100,000 residents, higher than the Wisconsin average of 132.7.

Respiratory Disease

The 2021 asthma hospitalization rate in Marinette County was 16.1 admissions per 100,000 residents, lower than the Wisconsin average of 18.4 per 100,000. The 2021 asthma emergency department visit rate was 204.1 visits per 100,000 residents, lower than the Wisconsin average of 218.0.

In 2022, 11.0 percent of Marinette County and Menominee County phone survey respondents reported having ever been told by a doctor, nurse or other health professional that they have asthma, and 77 percent of those respondents are currently seeing a doctor, nurse or other health professional for their condition.

Impact of COVID-19

The COVID-19 pandemic brought profound changes to the way people work, communicate, learn, play, eat, socialize and receive health care. COVID-19 raced across the American landscape bringing illness, suffering, economic struggle and death to people across all racial, ethnic and socioeconomic groups. COVID-19 shined an even brighter light on the health inequities experienced by low-income communities and communities of color. Notably, communities of color were disproportionately affected by the disease, its many difficult side effects and higher death rates. COVID-19 continues to be a priority and as a health care system, we are proactively working with public health professionals and clinical experts to educate and improve health outcomes in our communities.

- COVID-19 case rate (2020) in Marinette County, Wisconsin: 11,475.3 cumulative cases per 100,000 population
- COVID-19 case rate (2020) in Menominee County, Michigan: 9,044.2 cumulative cases per 100,000 population

Other Chronic Diseases or Conditions

The 2016-2020 Alzheimer's disease mortality in Marinette County was 32.8 deaths per 100,000, higher than the Wisconsin average of 31.3. The 2016-2020 Alzheimer's disease mortality in Menominee County was 31.4 deaths per 100,000, lower than the Michigan average of 34.6.

The 2016-2020 fall mortality in Marinette County was 18.7 deaths per 100,000, lower than the Wisconsin average of 22.1. The 2016-2020 fall mortality in Menominee County was 11.9 deaths per 100,000, higher than the Michigan average of 9.5.

The 2021 dental problem emergency department visit rate in Marinette County was 604.6 visits per 100,000 residents, higher than the Wisconsin average of 459.7 per 100,000.

5. Maternal, Child and Reproductive Health

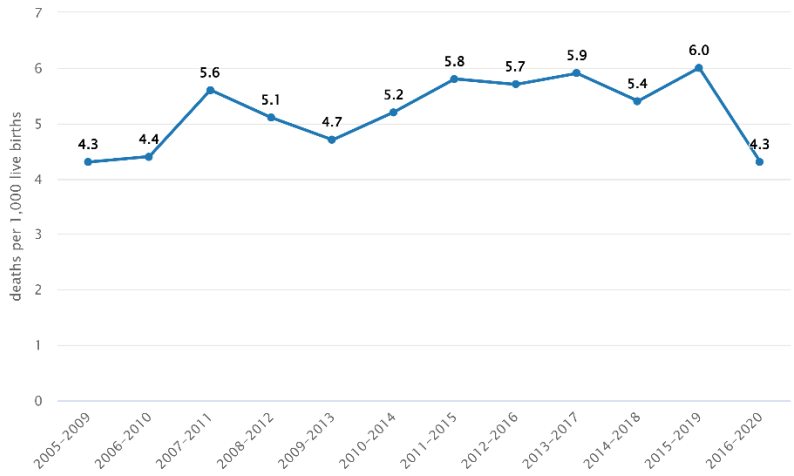
Birth Outcomes

The 2016-2020 infant mortality rate for Marinette County, shown in Exhibit 13, was 4.3 deaths per 1,000 live births, lower than the Wisconsin average of 6.0 deaths per 1,000 live births. The 2018 low birth weight rate in Marinette County was 7.5 percent of live births, similar to the Wisconsin average of 7.6 percent. The 2018 low birth weight rate in Menominee County was 5.8 percent, lower than the Michigan average of 8.7 percent.

Key findings: Maternal, Child and Reproductive Health

- The Marinette County infant mortality rate is lower than the Wisconsin average
- The Marinette County and Menominee County sexually transmitted infection rates are lower than their respective state averages

Exhibit 13: Marinette County Infant Mortality Rate by Race/Ethnicity 2016-2020



Source: Metopio, National Vital Statistics System-Natality, 2022

Sexually Transmitted Infections

The 2018 sexually transmitted infection rate in Marinette County was 344.8 new cases per 100,000 residents, lower than the Wisconsin average of 629.7. The 2018 sexually transmitted infection rate in Menominee County was 238.6, lower than the Michigan average of 695.9. This includes chlamydia, gonorrhea, syphilis, and HIV/AIDS.

6. Environment

Why is this important?

Many people face challenges and dangers they can't control – like unsafe neighborhoods, discrimination, or trouble affording the things they need. This can have a negative impact on health and safety throughout life.

Housing

From 2016-2020, 75.7 percent of Marinette County housing units were owner occupied, higher than the Wisconsin average of 67.1 percent. From 2016-2020, 78.4 percent of Menominee County housing units were owner occupied, higher than the Michigan average of 71.7 percent. Additionally, 20.8 percent of Marinette County and 15.0 percent of Menominee County renter occupied housing units are rent-burdened, meaning renters are spending more than 50 percent of their income on rent.

Transportation

From 2016-2020, 6.6 percent of Marinette County households had no vehicle available, similar to the Wisconsin average of 6.6 percent. During the same time period, 8.5 percent of Menominee County households had no vehicle available, higher than the Michigan average of 7.5 percent.

The mean travel time to work in Marinette County is 20.9 minutes, similar to the Wisconsin average of 22.2 minutes. The mean travel time to work in Menominee County is 21.7 minutes, lower than the Michigan average of 24.6 minutes.

Food security and access to healthy foods

In 2020, 10.7 percent of Marinette County residents experienced food insecurity, meaning the household has experienced limited or uncertain access to food, a decrease from 12.0 percent in 2019. The rate is higher for children, at 18.1 percent. In Menominee County, 12.1 percent of Menominee County residents experienced food insecurity, a decrease from 10.7 percent in 2019.

Key findings: Environment

- Almost 21 percent of Marinette County residents and 15 percent of Menominee County residents are rent-burdened
- Almost seven percent of Marinette County households and 8.5 percent of Menominee County households have no vehicle available

Social Environment and Community Safety

The 2016-2020 age-adjusted death rate due to motor vehicle collisions in Marinette County was 13.6 deaths per 100,000 population, higher than the Wisconsin average of 10.0 deaths per 100,000 population. The 2016-2020 age-adjusted death rate due to motor vehicle collisions in Menominee County was 13.1 deaths per 100,000 population, higher than the Michigan average of 9.9 deaths per 100,000 population.

IV. Prioritization of Health-Related Issues

A. Priority Setting Process

The top five health issues identified in the Marinette Menominee Community Health Needs Assessment were:
• Substance Abuse
• Mental Health
• Obesity
• Housing
• Transportation

The top five health issues identified by the Marinette Menominee Community Health Needs Assessment were presented to community partners on September 13, 2022, and Aurora Medical Center – Bay Area leadership on October 20, 2022. Priority health issues were selected based on the following criteria:

- Size/Seriousness of the problem
- Effectiveness of available interventions
- Available resources to address the health issue
- Health care system adequately situated to address the health issue
- Meets a defined community need as identified through data
- Potential for issue to impact other health and social issues
- Ability to effectively address or impact health issue through collaboration

Using these criteria, Aurora Medical Center – Bay Area has prioritized the significant health needs to address in the 2023-2025 implementation strategy:

- Access to innovative care and services
- Behavioral Health: Mental health and substance use
- Living Well: Nutrition, physical activity and obesity
- Workforce development

B. Health Need Selected

Access to Innovative Care and Services

The Primary Care Provider rate in Marinette County is 72.7 physicians per 100,000 residents, which is lower than the Wisconsin average of 89.7 physicians per 100,000 residents.

The Primary Care Provider rate in Menominee County is 29.5 physicians per 100,000 residents, which is lower than the Michigan average of 94.2.

Behavioral Health

The 2021 mental health hospitalization rate in Marinette County was 694.4 admissions per 100,000 residents, higher than the Wisconsin average of 650.8 per 100,000. The 2021 mental health emergency department visit rate was 892.8 visits per 100,000 residents, lower than the Wisconsin average of 919.8.

In 2022, seven percent of Marinette and Menominee County phone survey respondents reported heavy drinking, which is defined as 61 or more drinks in the past month for males and 31 or more drinks in the past month for females. Additionally, 20 percent of Marinette and Menominee County phone survey respondents reported binge drinking, higher than the United States average of 16 percent. Binge drinking reflects the percent of adults aged 18 and older who report having five or more drinks (men) or four or more drinks (women) on an occasion in the past 30 days. Alcohol use is likely seriously underreported, so these estimates are an extreme lower bound on actual binge drinking prevalence.

Living Well

Activities to promote living well can take many forms depending on the individual community's needs. Examples include promoting access to healthy foods and exercise and reducing obesity.

Ten percent of Marinette County residents have limited access to healthy foods, higher than the Wisconsin average. Twelve percent of Menominee County residents have limited access to healthy foods, lower than the Michigan average of 14 percent.

In 2019, 25.5 percent of adults in Marinette County reported no exercise in the past month, higher than the Wisconsin average (23.3 percent). Additionally, 27.3 percent of adults in Menominee County reported no exercise in the past month during the same year.

In 2019, 36.6 percent of adults in Marinette County were obese (have a body mass index (BMI) ≥30.0 kg/m^2 calculated from self-reported weight and height), higher than the Wisconsin and national averages of 34.6 percent and 32.3 percent, respectively. Additionally, 37.5 percent of adults in Menominee County were obese during the same year, higher than the Michigan average of 36.3 percent.

Workforce Development

The median household income in Marinette County is $55,209, which is lower than the Wisconsin median household income of $66,706. The median household income in Menominee County is $51,166, which is lower than the Michigan median household income of $62,428.

C. Health Need Not Selected

Housing

The implementation strategy does not include specific strategies and goals for housing, due to resource constraints. The Aurora Bay Area Community Benefit team will assess current activities in the community that address housing and support those initiatives when appropriate.

V. Approval of Community Health Needs Assessment

This Community Health Needs Assessment (CHNA) Report was adopted by the Aurora Health Care Community Board of the Advocate Aurora Health Board of Directors on December 12th, 2022.

VI. Vehicle for Community Feedback

Community Feedback

Advocate Aurora Health welcomes all feedback regarding the 2022 Community Health Needs Assessment. Any member of the community wishing to comment on this report, can click on the link below to complete a CHNA feedback form, or go to aurora.org/commbenefits and select "Contact Us." Questions will be addressed and will also be considered during the next CHNA cycle.

SCAN ME

Feedback Link: Advocate Aurora Health Community Health Needs Assessment: Feedback Form (office.com)

If you experience any issues with the link to our feedback form or have any other questions, please email WIAHC-WICommunityHealth@aah.org. This report can be viewed online at Aurora Health Care's Community Health Needs Assessment Report webpage via the following link: Community Benefits | Aurora Health Care. A paper copy of this report may also be requested by contacting the hospital's Community Health Department or going to aurora.org/commbenefits and selecting "Contact Us."

VII. Evaluation of Impact from Previous CHNA

To view the complete Community Benefit Progress reports for Aurora Health Care Hospitals, please go to Community Benefits | Aurora Health Care.

VIII. Appendices

Appendix 1: Community Health Phone Survey Summary

Marinette County, WI/Menominee County MI Community Health Survey Summary

This research provides valuable behavioral data, lifestyle habits, and the prevalence of risk factors and disease conditions of county residents. This summary was prepared by JKV Research for Aurora Health Care, Marinette County Public Health Department and Provident Health Foundation.

	Mar/Men	*MI*	*WI*	*US*
Overall Health	2022	*2020*	*2020*	*2020*
Excellent/Very Good	37%	*55%*	*57%*	*57%*
Good	32%	*30%*	*30%*	*30%*
Fair or Poor	31%	*16%*	*13%*	*13%*
Health Care Coverage	Mar/Men	*MI*	*WI*	*US*
Not Covered	2022	*2020*	*2020*	*2020*
Personally (Currently, 18 Years Old and Older)	3%	*7%*	*8%*	*11%*
Personally (Currently, 18 to 64 Years Old) [HP2030 Goal: 8%]	4%	*8%*	*9%*	*13%*
Household Member (Past Year)	5%	*NA*	*NA*	*NA*
Did Not Receive Care Needed in Past Year	Mar/Men	*MI*	*WI*	*US*
Unmet Need/Care in Household	2022	*2020*	*2020*	*2017*
Prescription Medication Not Taken Due to Cost [HP2030 Goal: 3%]	5%	*NA*	*NA*	*3%*
Medical Care [HP2030 Goal: 3%]	10%	*NA*	*NA*	*4%*
Dental Care [HP2030 Goal: 4%]	18%	*NA*	*NA*	*5%*
Mental Health Care Services or Alcohol/Substance Abuse Treatment	3%	*NA*	*NA*	*NA*
	Mar/Men	*MI*	*WI*	*US*
Economic Hardships	2022	*2020*	*2020*	*2020*
Household Went Hungry (Past Year)	<1%	*NA*	*NA*	*NA*
Household Able to Meet Needs with Money and Resources Strongly Disagree/Disagree (Past Month)	6%	*NA*	*NA*	*NA*
Issue with Current Housing Situation	3%	*NA*	*NA*	*NA*
Health Information	Mar/Men	*MI*	*WI*	*US*
Primary Source of Health Information	2022	*2020*	*2020*	*2020*
Doctor or Other Health Professional	68%	*NA*	*NA*	*NA*
Myself/Family Member in Health Care Field	11%	*NA*	*NA*	*NA*
Family/Friends	8%	*NA*	*NA*	*NA*
Internet	8%	*NA*	*NA*	*NA*
	Mar/Men	*MI*	*WI*	*US*
Health Services	2022	*2020*	*2020*	*2020*
Have a Primary Care Physician [HP2030 Goal: 84%]	85%	*86%*	*83%*	*77%*
Primary Health Services				
Doctor/Nurse Practitioner's Office	63%	*NA*	*NA*	*NA*
Urgent Care Center	19%	*NA*	*NA*	*NA*
Quickcare Clinic/Fastcare Clinic	2%	*NA*	*NA*	*NA*
Public Health Clinic/Community Health Center	<1%	*NA*	*NA*	*NA*
Hospital Emergency Room	5%	*NA*	*NA*	*NA*
Hospital Outpatient Department	<1%	*NA*	*NA*	*NA*
Worksite Clinic	2%	*NA*	*NA*	*NA*
Alternative Medicine Location	1%	*NA*	*NA*	*NA*
Virtual Health	1%	*NA*	*NA*	*NA*
No Usual Place	6%	*NA*	*NA*	*NA*

NA-MI, WI and/or US data not available.

	Mar/Men	*MI*	*WI*	*US*
Health Conditions in Past 3 Years	2022	*2020*	*2020*	*2020*
High Blood Pressure	37%	*NA*	*NA*	*NA*
High Blood Cholesterol	29%	*NA*	*NA*	*NA*
Heart Disease/Condition	15%	*NA*	*NA*	*NA*
Mental Health Condition	13%	*NA*	*NA*	*NA*
Diabetes	9%	*NA*	*NA*	*NA*
Asthma (Current)	11%	*11%*	*10%*	*10%*
	Mar/Men	*MI*	*WI*	*US*
Regularly Seeing Doctor/Nurse/Other Health Care Provider	2022	*2020*	*2020*	*2020*
High Blood Pressure	95%	*NA*	*NA*	*NA*
High Blood Cholesterol	89%	*NA*	*NA*	*NA*
Heart Disease/Condition	97%	*NA*	*NA*	*NA*
Mental Health Condition	85%	*NA*	*NA*	*NA*
Diabetes	97%	*NA*	*NA*	*NA*
Asthma (Current)	77%	*NA*	*NA*	*NA*
Body Weight	Mar/Men	*MI*	*WI*	*US*
Overweight Status	2022	*2020*	*2020*	*2020*
Overweight (BMI 25.0+)	77%	*70%*	*68%*	*67%*
Obese (BMI 30.0+) [HP2030 Goal: 36%]	42%	*35%*	*32%*	*32%*
	Mar/Men	*MI*	*WI*	*US*
Tobacco Product Use in Past Month	2022	*2020*	*2020*	*2020*
Current Cigarette Smokers [HP2030 Goal: 5%]	19%	*18%*	*16%*	*16%*
Current Vapers	7%	*5%*[1]	*4%*[1]	*4%*
Smokeless Tobacco Use	3%	*3%*	*4%*	*4%*
Cigars, Cigarillos or Little Cigars Use	3%	*NA*	*NA*	*NA*
Exposure to Smoke	Mar/Men	*MI*[2]	*WI*[2]	*US*
Smoking Policy at Home	2022	*14-15*	*14-15*	*14-15*
Not Allowed Anywhere [HP2030 Goal: 93%]	82%	*84%*	*84%*	*87%*
Allowed in Some Places/At Some Times	8%	*NA*	*NA*	*NA*
Allowed Anywhere	<1%	*NA*	*NA*	*NA*
No Rules Inside Home	10%	*NA*	*NA*	*NA*
	Mar/Men	*MI*	*WI*	*US*
Delta-8 (Marijuana-lite, Diet Weed, Dabs) Use in Past Month	2022	*2020*	*2020*	*2020*
Delta-8	1%	*NA*	*NA*	*NA*
	Mar/Men	*MI*	*WI*	*US*
Alcohol Use in Past Month	2022	*2020*	*2020*	*2020*
Heavy Drinker*	7%	*7%*	*10%*	*7%*
Binge Drinker** [HP2030 Goal 5+ Drinks: 25%]	20%	*17%*	*23%*	*16%*

NA-MI, WI and/or US data not available.
[1]Michigan and Wisconsin current vapers is 2017 data. [2]Midwest data.
*Heavy drinking is defined as 61 or more drinks for males and 31 or more drinks for females in the past month.
**Binge drinking is defined as "4 or more drinks on an occasion" for females and "5 or more drinks on an occasion" for males.

	Mar/Men	*MI*	*WI*	*US*
Mental Health Status	2022	*2020*	*2020*	*2020*
Felt Sad, Blue or Depressed Always/Nearly Always (Past Month)	5%	*NA*	*NA*	*NA*
Considered Suicide (Past Year)	4%	*NA*	*NA*	*NA*
Find Meaning & Purpose in Daily Life Seldom/Never	6%	*NA*	*NA*	*NA*
	Mar/Men	*MI*	*WI*	*US*
Children in Household	2022	*2020*	*2020*	*2020*
Personal Health Care Doctor/Nurse Who Knows Child Well and Familiar with History	84%	*NA*	*NA*	*NA*
Visited Personal Doctor/Nurse for Preventive Care (Past Year)	91%	*NA*	*NA*	*NA*
Mental Health Condition	5%	*NA*	*NA*	*NA*
Overweight or Obese	10%	*NA*	*NA*	*NA*
Current Asthma	<1%	*NA*	*NA*	*NA*
Diabetes	0%	*NA*	*NA*	*NA*
Safe in Community (Seldom/Never, Children 5 to 17 Years Old)	1%	*NA*	*NA*	*NA*
	Mar/Men	*MI*	*WI*	*US*
Top County Social or Economic Issues	2022	*2020*	*2020*	*2020*
Economic Stability and Employment	25%	*NA*	*NA*	*NA*
Accessible and Affordable Transportation	13%	*NA*	*NA*	*NA*
Environmental Health	12%	*NA*	*NA*	*NA*
Safe and Affordable Housing	10%	*NA*	*NA*	*NA*
Food Insecurity	10%	*NA*	*NA*	*NA*
Social Connectedness and Belonging	10%	*NA*	*NA*	*NA*
Accessible and Affordable Health Care	8%	*NA*	*NA*	*NA*
Education Access and Quality	5%	*NA*	*NA*	*NA*
Community Violence and Crime	4%	*NA*	*NA*	*NA*
	Mar/Men	*MI*	*WI*	*US*
Top County Health or Behavioral Issues	2022	*2020*	*2020*	*2020*
Alcohol and Substance Use	46%	*NA*	*NA*	*NA*
Mental Health, Mental Conditions and Suicide	18%	*NA*	*NA*	*NA*
Nutrition, Physical Activity and Obesity	10%	*NA*	*NA*	*NA*
Chronic Diseases	10%	*NA*	*NA*	*NA*
Communicable Diseases or COVID-19	8%	*NA*	*NA*	*NA*
Access to Affordable Health Care	4%	*NA*	*NA*	*NA*
Tobacco and Vaping Products	4%	*NA*	*NA*	*NA*
Maternal, Infant and Child Health	4%	*NA*	*NA*	*NA*

NA-MI, WI and/or US data not available.

General Health
In 2022, 37% of respondents reported their health as excellent or very good; 31% reported fair or poor. Respondents 35 to 44 years old, with a high school education or less, in the bottom 40 percent household income bracket, who were unmarried or smokers were more likely to report fair or poor health.

Health Care Coverage
In 2022, 3% of all respondents and 4% of respondents 18 to 64 years old reported they were not currently covered by health care insurance. Five percent of respondents reported someone in their household was not covered at least part of the time in the past year; unmarried respondents were more likely to report this.

In 2022, 5% of respondents reported that someone in their household had not taken their prescribed medication due to prescription costs in the past year. Ten percent of respondents reported in the past year someone in their household did not receive the medical care needed; respondents in households with children were more likely to report this. Eighteen percent of respondents reported in the past year someone in the household did not receive the dental care needed. Three percent of respondents reported in the past year they did not receive the mental health care services or alcohol/substance abuse treatment they needed or considered seeking.

Economic Hardships
In 2022, less than one percent of respondents reported their household went hungry because they didn't have enough food in the past year. Six percent of respondents disagreed or strongly disagreed "During the past month, my household has been able to meet its needs with the money and resources we have." Respondents who lived in Marinette County were more likely to disagree overall their household was able to meet its needs. Three percent of respondents reported they had an issue with their current housing situation.

Health Information
In 2022, 68% of respondents reported they trust a doctor or other health professional the most for health information while 11% reported they were/family member was in the health care field. Eight percent each reported family/friends or the Internet as the most trusted source for health information. Respondents who were female, 55 to 64 years old or with a high school education or less were more likely to report their doctor/other health professional. Respondents who were 35 to 44 years old, in the top 40 percent household income bracket or married were more likely to report themselves or a family member in the health care field as their most trusted source for health information. Respondents 45 to 54 years old or with some post high school education were more likely to report family/friends.

Health Services
In 2022, 85% of respondents reported they have a primary care physician they regularly see for check-ups and when they are sick; respondents 55 and older or in the bottom 40 percent household income bracket were more likely to report a primary care physician. Sixty-three 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 19% reported an urgent care center. Five percent reported a hospital emergency room. Respondents who were female, 65 and older, in the bottom 40 percent household income bracket, married or lived in Menominee County were more likely to report a doctor's or nurse practitioner's office as their primary health care when they are sick. Respondents 35 to 44 years old or with at least some post high school education were more likely to report an urgent care center as their primary health care. Respondents who were female, unmarried or lived in Marinette County were more likely to report a hospital emergency room as their primary health care.

Health Conditions
In 2022, out of six health conditions listed, the most often mentioned in the past three years was high blood pressure (37%), high blood cholesterol (29%) or heart disease/condition (15%). Respondents 65 and older, with a high school education or less, who were overweight, nonsmokers or lived in Menominee County were more likely to report high blood pressure. Respondents who were 65 and older, married or overweight were more likely to report high blood cholesterol. Respondents 65 and older were more likely to report they were treated for, or told they had heart disease/condition in the past three years. Thirteen percent of respondents reported a mental health condition; respondents who were female or in the bottom 40 percent household income bracket were more likely to report this. Nine percent of respondents reported diabetes; respondents who were 65 and older or overweight were more likely

to report this. Eleven percent reported current asthma; respondents who lived in Marinette County were more likely to report this. Of respondents who reported these health conditions, at least 75% reported they were regularly seeing a doctor, nurse or other health care provider for their health condition.

Physical Health
In 2022, 77% of respondents were classified as at least overweight while 42% were obese. Respondents who were 45 and older or lived in Marinette County were more likely to be at least overweight. Respondents who were 45 to 54 years old or lived in Marinette County were more likely to be obese.

Tobacco Use
In 2022, 19% of respondents were current cigarette smokers; respondents 35 to 44 years old or with a high school education or less were more likely to be a smoker. Seven percent of respondents used electronic vapor products in the past month; respondents 18 to 34 years old were more likely to report this. Three percent of respondents each used smokeless tobacco in the past month or used cigars, cigarillos or little cigars.

In 2022, 82% of respondents reported smoking is not allowed anywhere inside the home. Respondents with children in the household were more likely to report smoking is not allowed anywhere inside the home.

Delta-8 Use
In 2022, 1% of respondents used Delta-8, also known as marijuana-lite, diet weed or dabs, in the past month.

Alcohol Use
In 2022, 65% of respondents had an alcoholic drink in the past month. Seven percent of respondents were heavy drinkers in the past month (females 31+ drinks per month and males 61+ drinks) while 20% of respondents were binge drinkers (females 4+ drinks in a row and males 5+ drinks). Respondents who were 55 to 64 years old or unmarried were more likely to report heavy drinking. Respondents who were male, 18 to 34 years old or 55 to 64 years old were more likely to have binged in the past month.

Mental Health Status
In 2022, 5% of respondents reported they always or nearly always felt sad, blue or depressed in the past month. Four percent of respondents reported they considered suicide in the past year; respondents 18 to 34 years old, with a high school education or less, in the top 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 who were 35 to 44 years old, 65 and older, unmarried or lived in Menominee County were more likely to report this.

Children in Household
In 2022, 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. Eighty-four percent of respondents reported they have one or more persons they think of as the child's personal doctor or nurse, with 91% reporting the child visited their personal doctor or nurse for preventive care during the past year. Five percent of respondents reported the child had a diagnosed mental health condition. Ten percent of respondents reported the child is overweight or obese. Less than one percent of respondents reported the child currently had asthma. Zero percent of respondents reported the child had diabetes. One percent of respondents reported the child was seldom/never safe in their community.

Top County Social or Economic Issues
In 2022, respondents were asked to list the top two social or economic issues in the county. The most often cited were economic stability and employment (25%) or accessible and affordable transportation (13%). Respondents 35 to 54 years old, with a college education, in the middle 20 percent household income bracket or married respondents were more likely to report economic stability and employment as a top social or economic issue. Twelve percent of respondents reported environmental health as a top issue. Ten percent of respondents reported safe and affordable housing; respondents in the top 40 percent household income bracket were more likely to report this. Ten percent of respondents reported food insecurity as a top issue; respondents who were 45 to 54 years old or married were more likely to report this. Ten percent of respondents reported social connectedness and belonging. Eight percent of

respondents reported accessible and affordable health care; respondents who were female, 35 to 44 years old, with some post high school education or who lived in Marinette County were more likely to report this. Five percent of respondents reported education access and quality as a top issue. Four percent of respondents reported community violence and crime.

Top County Health Conditions or Behaviors

In 2022, respondents were asked to list the top two health or behavioral issues in the county that must be addressed in order to improve the health of county residents. The most often cited were alcohol and substance use (46%) or mental health, mental conditions and suicide (18%). Respondents 45 to 54 years old, with a college education, in the top 40 percent household income bracket, who were married or lived in Menominee County were more likely to report alcohol and substance use as a top health or behavioral issue. Respondents who were female, 35 to 44 years old, with at least some post high school education or married respondents were more likely to report mental health, mental conditions and suicide. Ten percent of respondents reported nutrition, physical activity and obesity; respondents with at least some post high school education, in the top 40 percent household income bracket or married respondents were more likely to report this. Ten percent of respondents reported chronic diseases. Eight percent of respondents reported communicable diseases or COVID-19 as a top issue; respondents who were 18 to 34 years old or unmarried were more likely to report this. Four percent of respondents reported access to affordable health care as a top issue; respondents 55 to 64 years old were more likely to report this. Four percent of respondents reported tobacco and vaping products; respondents 45 to 54 years old were more likely to report this. Four percent of respondents reported maternal, infant and child health as a top issue; female respondents were more likely to report this.

Appendix 2: Community Health Online Survey Frequencies

2022 Marinette County, WI/Menominee County, MI
Online Community Health Survey
Frequencies Report

Methodology
To supplement the Community Health Survey phone survey, an online survey was created by partners: Aurora Health Care, Marinette County Public Health Department and Provident Health Foundation.

An English and Spanish version were entered in to Survey Monkey with links and QR codes for easy access. Partners marketed the survey throughout the county. A total of 482 online surveys were completed between April 27 and July 15, 2022. Post-stratification was conducted at the age-group level by sex of the 2020 characteristics of the American Community Survey. The margin of error is ±4 percent. The margin of error for smaller subgroups will be larger than ±4 percent, since fewer respondents are in that category.

The survey was conducted by JKV Research, LLC. For technical information about survey methodology, contact Janet Kempf Vande Hey, M.S. at (920) 439-1399 or janet.vandehey@jkvresearch.com. For further information about the survey, contact the Marinette County Public Health Division at (715) 732-7670.

1. Do you live in Marinette/Menominee County?

Yes – Marinette County	63%
Yes – Menominee County	32
No	5

2. Do you work in Marinette/Menominee County?

Yes	77%	
No	23	→ AND Q1=No. "I'm sorry, you are not eligible for this survey. We are looking to collect data from those who live or work in Marinette/Menominee County. Thank you for your time."

3. Below are some statements about health care services and providers (doctors, nurse practitioners, physician assistants or primary care clinics) in Marinette/Menominee County. Select an option for your response in each row below. [Respondents who selected "not applicable" were excluded.]

		Yes	No	Not Sure
a.	I have a health care provider where I regularly go for check-ups and when I am sick	86%	13%	<1%
b.	I can get an appointment for my health needs quickly	75	17	8
c.	I can easily get to my health care provider or clinic	92	6	2
d.	I am heard, seen and listened to when receiving health care	87	6	7
e.	I am treated differently because of my race or ethnicity when receiving health care	2	94	4
f.	I am treated differently because of my gender when receiving health care	5	90	5
g.	I am treated differently because of my sexual orientation when receiving health care	2	94	4
h.	My family/support people are seen and listened to when I receive health care	79	9	12
i.	I am seen and listened to when my child/children are receiving health care	91	4	5

4. In the past year, did you seek community resource support from an organization in Marinette/Menominee County? Examples include food pantries, support groups, energy assistance, pregnancy resources or housing assistance.

Yes	5%	→ CONTINUE WITH Q5
No	95	→ GO TO Q8
Not sure	<1	→ GO TO Q8

5. What resource(s) did you seek? (open-ended) [24 Respondents: Multiple Responses Accepted]

Energy/Heat/Utility Assistance	71%
Food Assistance/Pantry/Salvation Army/St. Vincent DePaul	42
Health Care/Badger Care/Medicaid	29
Transportation	17
Mental Health or AODA Services	8
Human Services/WIC	8
Aging and Disability Resource Center	4
Other (2% or less)	13

6. How supported did you feel by [Resource] offered to you? Would you say… [24 Respondents Listing 70 Resources]

Not at all supported	<1%	→ CONTINUE WITH Q7
Slightly supported	6	→ CONTINUE WITH Q7
Somewhat supported	8	→ CONTINUE WITH Q7
Very supported	66	→GO TO Q8
Extremely supported	19	→GO TO Q8
Not sure	0	→GO TO Q8

7. What is the reason or reasons you answered the way you did? [10 Respondents Listing 11 Resources]

Finances	1 respondent
Stigma related to needing help/disapproval	1 respondent
Lack of knowledge of where to go	3 respondents
Inconvenient hours	7 respondents
Other, please specify	3 respondents

- Location, have to travel far

8. During the past year has anyone made you afraid for your personal safety?

Yes	8%	→CONTINUE WITH Q9
No	92	→GO TO Q10
Not sure	<1	→GO TO Q10

9. What relationship is this person or people to you? Please remember, all your responses are strictly confidential. [38 Respondents: Multiple Responses Accepted]

Stranger	47%
Acquaintance	8
Spouse	5
Separated spouse	5
Ex-spouse	3
Boyfriend or girlfriend	3
Coworker	3
Someone else	38
Not sure	0

211 connects you with thousands of nonprofit and government services in your area. If you want personal assistance, call the three-digit number 211 or 877-947-2211. **A friendly voice to talk with you 24/7/365.** You can also go to https://211wisconsin.communityos.org.

10. Below are some statements about Marinette/Menominee County. Select an option for your response in each row below. [Respondents who selected "not applicable" were excluded.]

		Yes	No	Not Sure
a.	There are quality health care services in my community	79%	11%	9%
b.	There are affordable health care services in my community	58	20	22
c.	Individuals in my community can access health care services regardless of race, gender, sexual orientation, immigration status, etc	72	2	26
d.	There are enough well-paying jobs available for those who are over 18 years old	65	21	14
e.	There are enough jobs available for those who are under 18 years old	66	7	27
f.	There are job trainings or employment resources for those who need them	60	5	35
g.	There are resources for individuals in my community to start a business (financing, training, real estate, etc.)	35	12	53
h.	Childcare (daycare/pre-school) resources are affordable and available for those who need them	13	37	49
i.	The K-12 schools in my community are well funded and provide good quality education	41	29	30
j.	Our local university/community college provides quality education at an affordable cost	68	4	28
k.	There are affordable places to live in my community	36	36	28
l.	Streets in my community are typically clean and buildings are well maintained	60	35	5
m.	Public transportation is easy to use if I need it	4	70	26

11. What are the **two** largest social or economic issues in our community that must be addressed in order to improve the quality of life of county residents? (Check up to two responses.)

Safe and affordable housing	30%
Accessible and affordable health care (medical, dental, mental health)	26
Affordable and accessible childcare	22
Accessible and affordable transportation	19
Economic stability and employment	18
Environmental health (clean air, safe water, etc.)	15
Community violence and crime	11
Education access and quality	6
Access to social services	6
Social connectedness and belonging	5
Quality of health care	4
Family support	4
Racism and discrimination	3
Food insecurity	3
Other, please specify	7
Not sure	6
Do not want to answer	2

12. What are the **two** largest health conditions or behaviors that must be addressed in order to improve the health of county residents? (Check up to two responses.)

Alcohol and substance use	83%
Mental health, mental conditions and suicide	65
Nutrition, physical activity and obesity	18
Tobacco and vaping products	7
Chronic diseases	4
Oral health	3
Communicable diseases or Covid-19	3
Intimate partner and domestic violence	3
Reproductive and sexual health	2
Maternal, infant, and child health	1
Unintentional injury, including falls and motor vehicle accidents	<1
Other, please specify	2
Not sure	2
Do not want to answer	1

Finally, a few questions about you to make sure we have a good representation of the people in Marinette/Menominee County.

13. In what zip code do you live? Please enter your five-digit zip code. [438 Respondents]

54143	36%
49858	25
54157	12
49893	4
54159	4
54114	3
54177	2
49887	2
Other (1% or less)	11

14. What is your age? [467 Respondents]

18-34	20%
35-44	13
45-54	16
55-64	22
65 and Older	30

15. What is your gender? Which gender identity do you most identify with? [463 Respondents]

Male	50%
Female	50
Transgender Male	<1
Transgender Female	0
Non-binary	0
Or, if you feel comfortable doing so, please list another gender identity you most identify with	0

16. Are you Hispanic or Latino? [465 Respondents]

Yes	<1%
No	99

17. What is your race? [461 Respondents]

White	98%
Black, African American	0
Asian	<1
Native Hawaiian or Other Pacific Islander	0
American Indian or Alaska Native	1
Another race (please specify)	0
Multiple races	<1

18. Which of the following best describes your highest level of education completed? [465 Respondents]

8th grade or less	0%
Some high school	2
High school graduate or GED	11
Some college	16
Technical school graduate	17
College graduate	37
Master's degree or higher	17

19. What is your annual household income before taxes? [456 Respondents]

Less than $10,000	1%
$10,000 to $20,000	3
$20,001 to $30,000	6
$30,001 to $40,000	7
$40,001 to $50,000	6
$50,001 to $60,000	8
$60,001 to $75,000	12
$75,001 to $90,000	9
$90,001 to $105,000	14
$105,001 to $120,000	6
$120,001 to $135,000	5
Over $135,000	19
Not sure	3

20. How many total adults, including yourself, live in your household? [464 Respondents]

One	19%
Two	66
Three	11
Four	2
Five	<1
Six	<1
Seven	0
Eight	0
Nine	0
Ten or more	0

21. Who currently lives in your household, besides yourself? [465 Respondents]

Spouse/Partner	72%
Parent(s)/In-law(s)	5
Grandparent(s)	<1
Child(ren) Under 18	23
Child(ren) 18 or Older	14
Friend/Roommate(s)	<1
Sibling(s)	1
Extended Family Member(s) Not Listed Above	2
Other (please specify)	<1

22. What is your living situation today? [462 Respondents]

I have a steady place to live	99%
I have a place to live today, but I am worried about losing it in the future	1
I do not have a steady place to live (I am temporarily staying with others, in a hotel, in a shelter, living outside on the street, on a beach, in a car, abandoned building, bus or train station, or in a park)	<1

23. Did someone help you complete this survey today? [463 Respondents]

Yes	<1%
No	100